Reference No:

AP/AL: Appropriation Project Type: Renovation and Remodeling Category: Health/Human Services Recipient: City of Nome Location: Nome Contact: Geri Henricksen House District: Bering Straits (HD 39) **Contact Phone:** (907)465-4814 Estimated Project Dates: 07/01/2003 - 06/30/2008

Brief Summary and Statement of Need:

Renovation of Funding:	swimming poo FY2004	bl. FY2005	FY2006	FY2007	FY2008	FY2009	Total	
Muni Match	\$87,054						\$87,054	
Total:	\$87,054	\$0	\$0	\$0	\$0	\$0	\$87,054	
□ State Match Required ✓ One-Time Project □ Phased - new □ 0% = Minimum State Match % Required □ Amendment □					Phased - underwaMental Health Bi		Going	
Operating & Maintenance Costs: Project Development:					Amount		Staff 0	
Ongoing Operating:				C		0		
One-Time Startup:				С				
				Totals:	C		0	

Additional Information / Prior Funding History: