



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Univesity of Florida - Zika Research Infrastructure

2. **Senate Sponsor:** Debbie Mayfield

3. **Date of Submission:** 11/16/2017

4. **Project/Program Description:**

UF is home to top scientists working with Zika and similar viruses, which can cause birth defects, trigger other infections and even cause death. External research funds UF has received cannot be used for facilities. Funding on this request will provide upgrades/renovations/equipment to UF laboratories at the Emerging Pathogens Institute (EPI) in Gainesville and the Florida Medical Entomology Laboratory (FMEL) in Vero Beach.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Board of Governors

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	2,500,000	2,500,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	0	0.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 2,500,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? Yes

b. In the previous 5 fiscal years, how many years was funding provided? (Optional) 1

c. What is the most recent fiscal year the project was funded? 2017-18

d. Were the funds provided in the most recent fiscal year subsequently vetoed? No

e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:		1,500,000	1,500,000

10. Is future-year funding likely to be requested?

No

11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?

Increase our pool of trained scientists working on Zika and its vector; Enhance the ability of EPI and other UF investigators to conduct state-of-the-art molecular genetic studies of mosquitos and the viruses that they carry which are capable of infecting humans; Expand the capacity of EPI to deal not only with Zika, but also other mosquito-transmitted viruses

b. What are the activities and services that will be provided to meet the intended purpose of these funds?

Infrastructure investment will enhance study of Zika Virus transmission & co-infections with other viruses; minimize negative impact on tourists.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		



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<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Purchase of HiSeq Sequencer, nitrogen generator, and genome sequencer to enable whole-genome, transcriptome and targeted resequencing as well as metabolomics and proteomics analyses	500,000
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Lab expansion will include increased work space for scientists, required biosafety cabinets, pass through autoclave, walk-in cooler, HVAC and exhaust systems that meet requirements for a pathogen containment facility, required back-up generator power; construct an insectary with secure containment facilities for working with mosquitos that may be disease vectors or nuisance; renovation upgrades will bring Biosafety Levels 2 & 3 facilities that do not meet current standards into compliance.	2,000,000
TOTAL		2,500,000

d. What are the direct services to be provided to citizens by the appropriations project?

Infrastructure investment will enhance study of Zika Virus transmission & co-infections with other viruses; minimize negative impact on tourists.

e. Who is the target population served by this project? How many individuals are expected to be served?

All state citizens, with special concern for pregnant women, at risk of contact with disease-carrying mosquitoes. More than 1,000 individuals are expected to benefit from funding this request.



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f. **What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

Reduce mosquito-borne illness - Monthly illness surveillance conducted by FDOH; Enhance research at UF - Scientific publications/extramural funds; Enhanced environment for teaching undergraduate and graduate students - Number of graduating students and job secured; Prevent disease/reduce spraying - Assessment of spraying frequency data conducted by mosquito control districts and FDACS

g. **What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?**
unknown

12. **The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.**

Equipment will go to Gainesville BSL3 Lab and Vero Beach BSL2/BSL3 Lab, which are owned and operated by the University of Florida.

13. **Requestor Contact Information:**

- a. **Name:** Kent Fuchs , Pres
- b. **Organization:** University of Florida
- c. **Email:** kent.fuchs@ufl.edu
- d. **Phone Number:** (352)392-1311

14. **Recipient Contact Information:**

- a. **Organization:** University of Florida
- b. **County:** Alachua, Indian River
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify)
- d. **Contact Name:** Kent Fuchs , Pres
- e. **E-mail Address:** kent.fuchs@ufl.edu
- f. **Phone Number:** (352)392-1311

15. **If there is a registered lobbyist, fill out the lobbyist information below.**

- a. **Name:** Marion Hoffman
- b. **Firm:** University of Florida
- c. **Email:** marionh@ufl.edu
- d. **Phone Number:** (850)270-4040