1. **Title of Project:** The Commons at Speer Village
2. **Senate Sponsor:** Wilton Simpson
3. **Date of Submission:** 12/13/2017
4. **Project/Program Description:**
   The Commons at Speer Village Phase 1 will be a six (6) unit, eight (8) person affordable housing development project for persons with developmental and intellectual disabilities.
5. **State Agency Contacted?** No
   a. If yes, which state agency?
   b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Agency for Persons with Disabilities
6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

<table>
<thead>
<tr>
<th>Amount Requested for Operations</th>
<th>Amount Requested for Fixed Capital Outlay</th>
<th>Total Amount of Requested State Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>306,594</td>
<td></td>
<td>306,594</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>412,000</td>
<td>27.1%</td>
</tr>
<tr>
<td>Local</td>
<td>575,000</td>
<td>37.9%</td>
</tr>
<tr>
<td>Other</td>
<td>225,000</td>
<td>14.8%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1,212,000</td>
<td>79.8%</td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 1,518,594

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?  Yes
   e. Complete the following Worksheet.
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?
      Low income Persons with Disabilities will be provided affordable supportive housing and support services that
      will improve their skills and result in greater independence.
   b. What are the activities and services that will be provided to meet the intended purpose of these funds?
      A Supportive Living Coach will provide case management to residents that will include but not be limited to
      service linkages such as medical, social, economic, life skills and advocacy.
   c. How will the funds be expended?

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐Executive Director/Project Head Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑Consultants/Contracted Services/Study</td>
<td>Architect Fees, Legal, Impact Fees, Developer Fees</td>
<td>264,594</td>
</tr>
<tr>
<td>Operational Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐Salary and Benefits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The Florida Senate
Local Funding Initiative Request - Fiscal Year 2018-2019

<table>
<thead>
<tr>
<th>Expense/Equipment/Travel/Supplies/Other</th>
<th>Furniture and Supplies for 6 units @ $7,000 per unit</th>
<th>42,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fixed Capital Construction/Major Renovation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Construction/Renovation/Land/Planning Engineering</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>306,594</td>
</tr>
</tbody>
</table>

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

People in supportive housing use costly systems like emergency health services less frequently and are less likely to be incarcerated. Supportive housing can aid people with disabilities in getting better health care which results in better health outcomes.

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

Eight (8) Individuals with developmental and/or intellectual disabilities who have incomes below 60 percent of the areas AMI will be served.

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

Supportive, affordable housing will greatly improve housing stability for the developmentally disabled as well as health outcomes. This outcome will be measured through periodic assessments that evaluate residents housing stability and overall health and wellness.

**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?**

Contracted agency could consider giving agency a small financial penalty for failure to meet a performance improvement plan related to deliverables or performance measures.

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.

The relationship is the same.

13. Requestor Contact Information:
   a. Name: Mark Wickham
   b. Organization: Youth and Family Alternatives, Inc.
   c. Email: mwickham@yfainc.org
   d. Phone Number: (585)314-5830

14. Recipient Contact Information:
a. Organization: Youth and Family Alternatives, Inc.
b. County: Pasco
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: Mark Wickham
e. E-mail Address: mwickham@yfainc.org
f. Phone Number: (585)314-5830

15. If there is a registered lobbyist, fill out the lobbyist information below.
a. Name: Ron Pierce
b. Firm: RSA Consulting Group, LLC
c. Email: ron@rsaconsulting.com
d. Phone Number: (813)777-5578