



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Florida Agriculture & Nourishment Collaborative

2. **Senate Sponsor:** Debbie Mayfield

3. **Date of Submission:** 01/09/2018

4. **Project/Program Description:**

Treasure Coast Food Bank will purchase and process millions of pounds of locally-grown produce that currently has no market, creating new revenue for local farmers and job training and placement opportunities to people in our community. We will then provide this healthy food through our programs to more than 100,000 people who experience food insecurity along the Treasure Coast as well as throughout the State of Florida. The requested appropriation will be used for equipment at our produce processing facility and capital improvements and repairs to our current distribution facility.

5. **State Agency Contacted?** Yes

a. If yes, which state agency? Department of Agriculture and Consumer Services

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
450,000	2,000,000	2,450,000

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

Type	Amount	Percent
Federal	100,000	2.3%
State (excluding the amount of this request)	0	0.0%
Local	1,000,000	23.4%
Other	728,300	17.0%
TOTAL	1,828,300	42.7 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 4,278,300

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

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

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



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- d. Were the funds provided in the most recent fiscal year subsequently vetoed?
e. Complete the following Worksheet.

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:			

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?

Treasure Coast Food Bank will purchase and process millions of pounds of locally-grown produce that currently has no market, creating new revenue for local farmers and job training and placement opportunities to people in our community. We will then provide this healthy food through our programs to more than 100,000 people who experience food insecurity along the Treasure Coast as well as throughout the State of Florida. The requested appropriation will be used for equipment at our produce processing facility and capital improvements and repairs to our current distribution facility.

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

As the state's only processing facility, we can process 25 million pounds of food for Florida's agriculture industry and assist them in receiving successful bids for lucrative food contracts unavailable to them due to exorbitant costs associated with processing their products out of state, creating a new form of revenue for Florida farmers.

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		



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<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Cost of three (3) refrigerated trucks to be utilized for fresh produce pickup and delivery	450,000
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Equipment for our produce processing facility, including 100 and 200 gallon titling steam kettles, tumble chill lines, produce wash systems, culinary test kitchen, freezers, coolers, rolling tables, racks, washers, and all necessary commercial production kitchen items. Also includes repairs to the roof, upgrading our current septic system, renovations to expand, enclose, and cool our volunteer sorting area, and a cool air dispersion system to improve temperature control throughout our whole ware	2,000,000
TOTAL		2,450,000

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

Job Training & Employment: We will have the ability to train and employ people for food processing and culinary arts jobs through this facility. Participants in the Culinary Training Kitchen can find future work at area restaurants, resorts, and hotels or become small business entrepreneurs. Meals: We have access to millions of pounds of fresh fruits and vegetables in the state of Florida, but the shelf life of this perishable product is limited. We can process, prepare, cyrovac, and flash-freeze this produce to provide more meals to people in



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need in our community. We can also provide food preparation for the state's Farm to School Program, Summer Food Service Program, Meal on Wheels, and other congregate meal sites at a significantly reduced cost. Disaster Relief: This project will allow us to create a more efficient operational flow at our facilities, which is key to our ability to effectively respond to local disasters as well as participate in statewide disaster response.

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

Florida farmers, residents struggling to find employment, and people in need who receive food assistance throughout the State of Florida will benefit from the use of State funds for this project.

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

This project will have the following benefits and results: 1) Increased revenue for local farmers 2) Creating employment opportunities and 3) Improving food security. We will accomplish this by purchasing Florida produce, hiring and training at least 15 new employees in the 1st year of full operation, and preparing and distributing meals through a variety of programs throughout the State of Florida. We will measure the total number of pounds purchased of produce from Florida farms, total amount of funds used to purchase produce from Florida farms, number of employees hired during the 1st year of plant operation, and total number of meals prepared and distributed through this project.

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?

Our organization would be required to return the money appropriated to us if we did not meet the deliverables provided by the agency administering funds.

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.

Treasure Coast Food Bank, Inc. is the owner of the facilities to receive fixed capital outlay funding from this proposal.

13. Requestor Contact Information:

- a. **Name:** Judith Cruz
- b. **Organization:** Treasure Coast Food Bank
- c. **Email:** jcruz@tcfoodbank.org
- d. **Phone Number:** (772)446-1755

14. Recipient Contact Information:

- a. **Organization:** Treasure Coast Food Bank
- b. **County:** Saint Lucie
- c. **Organization Type:**
 - ☐ For Profit
 - ☒ Non Profit 501(c) (3)
 - ☐ Non Profit 501(c) (4)
 - ☐ Local Entity



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☐ University or College

☐ Other (Please specify)

d. Contact Name: Judith Cruz

e. E-mail Address: jcruz@tcfoodbank.org

f. Phone Number: (772)446-1755

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

a. Name: None

b. Firm: None

c. Email:

d. Phone Number: