1. **Title of Project:** Midtown Miracles Culture Change Program

2. **Senate Sponsor:** Perry Thurston

3. **Date of Submission:** 12/12/2017

4. **Project/Program Description:**
   Non-profit organization

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?
   Department of Juvenile Justice

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>127,000</td>
<td></td>
<td>127,000</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>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Local</td>
<td>3,000</td>
<td>2.3%</td>
</tr>
<tr>
<td>Other</td>
<td>1,000</td>
<td>0.8%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>4,000</td>
<td><strong>3.1 %</strong></td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 131,000

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?
   d. Were the funds provided in the most recent fiscal year subsequently vetoed?
   e. Complete the following Worksheet.
10. Is future-year funding likely to be requested?

Yes

a. If yes, indicate non-recurring amount per year.

   2019 ~ $152,000 2020 ~ $170,000 2021 ~ $197,000 2022 ~ $230,000

11. Program Performance:

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

   Keep at-risk children mentally and physically healthy, enhance their academic school achievement, divert from
gang and juvenile crimes, enhance their self-confidence, expand their leadership abilities, imbue self-
responsibility, character development with respect of parents, teachers, law enforcement and others, strong
community participation and change agents for peers and culture in the predominantly black community.

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

   Martial Arts Training and good citizenship and personal responsibility for boys and girls ages 4-14.

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</td>
<td>Salary for Project Head, Salary and Benefits Primary Instructor and Tournament connections. Grandmaster in Martial Arts.</td>
<td>54,000</td>
</tr>
<tr>
<td>☑ Other Salary and Benefits</td>
<td>Assistant Director and administrator of all details, Secondary Instructor. 5th</td>
<td>50,000</td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td>Degree Black Belt plus 2. Co-Leader and Primary Instructor, Grandmaster in Martial Arts.</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Consultants/Contracted Services/Study</td>
<td>Equipment, Travel to Tournaments, Rent Van, Supplies for Children, Supplies for sponsoring tournament.</td>
<td></td>
</tr>
<tr>
<td>Operational Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Expense/Equipment/Travel/Supplies/Other</td>
<td>23,000</td>
<td></td>
</tr>
<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>127,000</td>
<td></td>
</tr>
</tbody>
</table>

d. What are the direct services to be provided to citizens by the appropriations project?
   Martial Arts training, personal development and leadership skills training.

e. Who is the target population served by this project? How many individuals are expected to be served?
   Persons with poor mental health, physical health, the economically disadvantaged, at-risk youth, preschool and grade school students and victims of crime. The target population would be from 51-100 children.

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
   Improvements of physical and mental health, enriched cultural experiences, improved quality of education and protection of the general public from harm.

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?
   Return of all state funds requested.

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.
   Jungle Terrace Civic Association, Inc.
13. Requestor Contact Information:
   a. Name: Ed Carlson
   b. Organization: Jungle Terrace Civic Association, Inc.
   c. Email: acegang1@aol.com
   d. Phone Number: (727)744-9433

14. Recipient Contact Information:
   a. Organization: Jungle Terrace Civic Association, Inc. 501 (c) 3 nonprofit
   b. County: Hillsborough
   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: Ed Carlson
   e. E-mail Address: acegang1@aol.com
   f. Phone Number: (727)744-9433

15. If there is a registered lobbyist, fill out the lobbyist information below.
   a. Name: None
   b. Firm: None
   c. Email:
   d. Phone Number: