1. Title of Project: Coalition for Medical Cannabis Research and Education

2. Senate Sponsor: Bill Galvano

3. Date of Submission: 01/16/2018

4. Project/Program Description:
   Supplemental funding for the Coalition for the Medical Cannabis Research and Education within the H. Lee Moffitt Cancer Center and Research Institute, Inc. Funding to support the Medical Cannabis Research and Education Board to continue its statutory responsibilities and operations provided under F.S. 381.986 and 1004.4351 for fiscal year 2018-19.

5. State Agency Contacted? Yes
   a. If yes, which state agency? Department of Health
   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:

<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>1,749,973</td>
<td></td>
<td>1,749,973</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>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 1,749,973

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.
The Florida Senate
Local Funding Initiative Request - Fiscal Year 2018-2019

<table>
<thead>
<tr>
<th>FY:</th>
<th>Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Column: A</td>
</tr>
<tr>
<td>Funds Description:</td>
<td>Prior Year Recurring Funds *</td>
</tr>
<tr>
<td>Input Amounts:</td>
<td></td>
</tr>
</tbody>
</table>

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?
      
      Carrying out statutory requirements of F.S. 381.986 and 1004.5341
   
   b. What are the activities and services that will be provided to meet the intended purpose of these funds?
      
      The purpose of the coalition is to conduct rigorous scientific research, provide education, disseminate research, and guide policy for the adoption of a statewide policy on ordering and dosing practices for the medical use of marijuana.
   
   c. How will the funds be expended?
      
      | Spending Category | Description | Amount |
      |-------------------|-------------|--------|
      | Administrative Costs | | |
      | ☑Executive Director/Project Head Salary and Benefits | Personnel year 1 - Ex. Dir 50%; Administrator 100%; Steering Comm 5%, 10%, 5%, 5%, 10%; Management asst 50%; | 377,016 |
      | ☐Other Salary and Benefits | | |
      | ☑Expense/Equipment/Travel/Supplies/Other | Facilities and administrative costs @ 15% | 228,257 |
      | ☐Consultants/Contracted Services/Study | | |
      | Operational Costs | | |
d. **What are the direct services to be provided to citizens by the appropriations project?**

   To continue to conduct rigorous scientific research, provide education, disseminate research, and guide policy for the adoption of a statewide policy on ordering and dosing practices for the medical use of marijuana.

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

   The citizens of Florida.

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

   An effective medical marijuana research and education program would mobilize the scientific, educational, and medical resources that presently exist in this state to determine the appropriate and best use of marijuana to treat illness.

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?**

   None.

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.

   N/A

13. **Requestor Contact Information:**

   a. **Name:** Nagi Kumar
   
   b. **Organization:** Moffitt Cancer Center Coalition for Medical Cannabis Research and Education
   
   c. **Email:** nagi.kumar@moffitt.org
   
   d. **Phone Number:** (813)745-6885
14. **Recipient Contact Information:**
   a. **Organization:** Moffitt Cancer Center Coalition for Medical Cannabis Research and Education
   b. **County:** Statewide
   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:** Nagi Kumar
   e. **E-mail Address:** nagi.kumar@moffitt.org
   f. **Phone Number:** (813)745-6885

15. **If there is a registered lobbyist, fill out the lobbyist information below.**
   a. **Name:** Thomas Joos
   b. **Firm:** N/A
   c. **Email:** thomas.joos@moffitt.org
   d. **Phone Number:** (321)439-0766