



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Liberty City Cultural Enrichment and Economic Development Program

2. **Senate Sponsor:** Daphne Campbell

3. **Date of Submission:** 01/17/2018

4. **Project/Program Description:**

The purpose of the Liberty City Cultural Enrichment and Economical Development Program (LCCEED) is to offer educational and economic resources to individuals residing in the immediate community of Liberty City. The goal for the program is to reduce emotional distress resulting from poverty through job training, links to employment, and leadership development. The LCCEED Program will facilitate six (6) beneficial program curricula to 300 people over the course of 1 year.

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 Education

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
1,759,840	3,300,000	5,059,840

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):** 5,059,840

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?



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

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?

Yes

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

\$1 - 3 Million per year

11. Program Performance:

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

The LCCEED Program will facilitate six (6) beneficial program curricula to over 300 people over the course of 1 year.

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

Trade and Vocational Training and Certifications Behavior Modification and Conflict De Escalation Life and Adaptability Skills Personal Development Workshops Basic business literacy Cultural Outreach Financial Literacy

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits	Executive Director: \$125,000 (w/ benefits); Site Directors: 3 FTE x \$70,000 = \$210,000 (w/benefits). \$335,000 Administrative Staff: 6 FTE x \$30,000 = \$180,000 (w/benefits) \$180,000 Space:	335,000



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

	(\$3,000 x 12 months x 6 = \$216,000); Executive Director: \$125,000 (w/benefits); Site Directors: 3 FTE x \$70,000=\$210,000 (w/benefits). \$335,000 Administrative Staff: 6 FTE x \$30,000 =\$180,000 (w/benefits) \$180,000 Space: (\$3,000 x 12 months x 6 = \$216,000);	
<input checked="" type="checkbox"/> Other Salary and Benefits	Administrative Staff: 6 FTE x \$30,000 = \$180,000 (w/benefits)	180,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Space: (\$3,000 x 12 months x 6 = \$216,000) Utilities: 1,000 x 12 x 6 = \$72,000)	318,000
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Legal/Accounting Services (\$5,000 x 4 quarters x 2 = \$40,000) External Audit (\$5,000)	45,000
Operational Costs		
<input checked="" type="checkbox"/> Salary and Benefits	Community Liaisons (2 FTE x \$40,000 = \$80,000; w/benefits); Case Managers (6 FTE x \$45,000 = \$270,000)	350,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Local Travel (\$10,000); Program Supplies/Uniforms (\$65,000); Communications (\$20,000); Computers/Laptops (\$24,000); Office Furniture (\$10,000); Staff Training (\$30,000); Insurance (\$10,000); Transportation Lease (\$12,000 x 4 = \$48,000); Gas: (\$80 x 52 x 4 = \$16,640); Insurance (\$1,100 x 12 = \$13,	246,840



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

	200)	
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Job Training and Career Exploration Providers (\$80,000); Expert Trainers and Consultants (\$40,000); Accountability Coaches (\$65,000); Vocational Certification Trainings (\$100,000)	285,000
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	Historic Carver Theater (\$1,300,000 purchase + \$400,000 renovations) Transitional Housing Facility (6020 NW 13th Ave) (\$1,350,000 purchase + \$250,000 renovations)	3,300,000
TOTAL		5,059,840

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

Trade and Vocational Training and Certifications Behavior Modification and Conflict De Escalation Life and Adaptability Skills Personal Development Workshops Basic business literacy Cultural Outreach Financial Literacy Subject matter workshops, Vocation Training Courses, Formal Visual and Performing Arts classes, Community outreach and involvement, Youth Behavioral Modification, Emotional Intelligence Workshops, Financial Literacy

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

Jobless persons Economically disadvantaged persons At-risk youth Preschool students Grade school students High school students University/college students Currently or formerly incarcerated persons Drug offenders (in criminal Justice) Victims of crime

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

Provide formal dance classes to Liberty City residents to increase social interaction, cultural enrichment, and build one's self esteem. Teach vocational skills to promote financial independence for greater senses of self worth. Integrate Liberty City history in workshops to correlate cultural experience and economic advancement within the community. Facilitate a Composting/Gardening workshop to promote healthy eating through agriculture. Facilitate classes on conflict resolution, anger management, self-defense and weapon safety.



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

Administer courses to teach Liberty City residents basics about economics, increase financial literacy, teach business start-up process. Invite international guests to perform and/or speak to inspire Liberty city residents and surrounding areas. Events will be held at Liberty City venues to increase tourism dollars. Free Security License certification, free OSHA Certification for Construction, free Customer Service Training for Hospitality, host job fair

- 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?**

Produce and perform a corrective plan of action that adheres to the Appropriations Project Request Application

- 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.**

Non Profit 501 (c) 3

- 13. Requestor Contact Information:**

- a. Name:** Latrice Hill
- b. Organization:** Inner City Dance Club of Miami Corporation
- c. Email:** latrice@innercitydanceclub.com
- d. Phone Number:** (305)726-5075

- 14. Recipient Contact Information:**

- a. Organization:** Inner City Dance Club of Miami Corporation
- b. County:** Miami-Dade
- 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:** Latrice Hill
- e. E-mail Address:** latrice@innercitydanceclub.com
- f. Phone Number:** (305)726-5075

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

- a. Name:** None
- b. Firm:** None
- c. Email:**
- d. Phone Number:**