



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1377

1. **Title of Project:** BRIDGING THE HUNGER GAP

2. **Senate Sponsor:** Ben Albritton

3. **Date of Submission:** 02/07/2019

4. **Project/Program Description:**

Bridge the Hunger Gap Project - to enable us to expand and enhance the amount foods that we are able to acquire, transport, organize, store, sustain, and distribute to food insecure families and to thereby giving them a better quality of life.

5. **State Agency to receive requested funds :** Department of Agriculture and Consumer Services

State Agency Contacted? Yes

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

Type of Funding	Amount
Operations	98,795
Fixed Capital Outlay	
Total State Funds Requested	98,795

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	98,795	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	98,795	100.0%

8. **Has this project previously received state funding?** No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

9. **Is future-year funding likely to be requested?** No

10. **Details on how the requested state funds will be expended**

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		



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Expense/Equipment/Travel/Supplies/Other	Office supplies - paper, ink and postage	500
Consultants/Contracted Services/Study	Bookkeeping services \$300 a month for 12 months	3,600
Operational Costs:		
Salary and Benefits	PT Warehouseman/Driver 35 hr wk @ \$15 an hr \$26250; PT Driver @ 25 hr a mo @ \$12 an hr. Payroll Taxes \$2283 and W/C ins \$2562	34,695
Expense/Equipment/Travel/Supplies/Other	Truck Extension Lift Axel \$7,500; Refrigeration Unit for Insulated Storage \$9,000; 2 Computers & software \$3,000; Fuel for transport \$4,500, Other Food Purchases \$10,800	34,800
Consultants/Contracted Services/Study	Semi food truck purchases @ \$2,100 x 12 mo	25,200
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		98,795

11. Program Performance:

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

The specific goal is for our Bridge the Hunger Gap Project to to expand and enhance the amount of foods that we are able to acquire, transport, organize, store, sustain, and distribute to food insecure families and to give them a better quality of life.

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

To be able to purchase necessary equipment that will enable us to acquire, transport and sustain in refrigerated storage more fresh food products to give to more families

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

To improve the amount of nutritional food choices for greater health benefits of all ages and people groups who come to our facility

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

All ages and people groups within Hardee and Highlands Counties and their surrounding areas

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

The expected outcome of this project is to assist food insecure families in attaining a better quality of life and improved health. A client tracking system is used to measure both number of clients and amount of food products given

f. 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?

Non payment of invoices

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the



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relationship between the owner(s) of the facility and the entity.

n/a

13. Requestor Contact Information:

- a. **Name:** Wendell G Smith
- b. **Organization:** Cutting Edge Ministries, Inc
- c. **E-mail Address:** cedgemin@gmail.com
- d. **Phone Number:** (863)773-2484

14. Recipient Contact Information:

- a. **Organization:** Cutting Edge Ministries, Inc
- b. **County:** Hardee
- 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:** Wendell Smith
- e. **E-mail Address:** cedgemin@gmail.com
- f. **Phone Number:** (863)773-2484

15. Lobbyist Contact Information

- a. **Name:** None
- b. **Firm Name:** None
- c. **E-mail Address:**
- d. **Phone Number:**