



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 2975

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

**4. Project/Program Description**

The expansion of the current after school childcare program & the meals for elders that are provided by over forty Churches that are part of the West Perrine Christian Association. This childcare program will help create communities in which the youth is kept in a safe environment where parents are able to complete their workdays without worry for the welfare/safety of their children. The meals for elders portion of the program will increase our ability to feed our most vulnerable elders.

5. **State Agency to receive requested funds**
- State Agency contacted?**

**6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024**

Type of Funding	Amount
Operations	350,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>350,000</b>

**7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	350,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>350,000</b>	<b>100%</b>

8. **Has this project previously received state funding?**

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

9. **Is future funding likely to be requested?**
- a. **If yes, indicate nonrecurring amount per year.**

**b. Describe the source of funding that can be used in lieu of state funding.**

The funds that are currently raised by the association of churches to help with these needs is not enough for the massive needs of the community.

10. **Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**



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If yes, indicate the amount of funds received and what the funds were used for.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

- Planning   
  Design   
  Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	This is the amount that will be used to pay for increase in employees that will be working in both programs, the after school childcare and the meals for vulnerable seniors This will all be done through all our association member churches.	150,000
Expense/Equipment/Travel/Supplies/Other	This is the amount that will be using for food/meals items that will be delivering to our vulnerable seniors. A portion of this will also go towards the supplies and programming that will be needed and used for our after school childcare programs.	200,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>350,000</b>

### 14. Program Performance

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



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Increased access to after school childcare within their community and increased access to food security for vulnerable seniors through the increased delivery of meals to more of those seniors who are in need in our community.

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

There will be increase childcare program will help create communities in which the youth is kept in a safe environment where parents are able to complete their workdays without worry for the welfare/safety of their children. The meals for elders portion of the program will increase our ability to feed our most vulnerable elders.

**c. What direct services will be provided to citizens by the appropriation project?**

Increased access to after school childcare within their community and increased access to food security for vulnerable seniors through the increased delivery of meals to more of those seniors who are in need in our community.

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

The target population to be served by this is children and elders in the community as well as the parents and children of these elders who will be able to work worry free knowing their children will be in childcare and that their elder parents will have food security form a trusted local source. The program expects to serve approximately 200-400 people in Miami-Dade County.

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

It would increase economic activity between the churches and vendors and products needed to increase the services. This would be possible with the requests being approved. It would create job opportunities within our community and churches for increase of employees needed to help with the after school childcare program and for the delivering/organizing of the meal deliveries to vulnerable children. It would help both the parents and the elders. The parents would be able to work and the elders would be able to know that they have food security and that they would not have to chose between paying rent or utilities and being able to afford food. The method will be the amount of persons the program serves now versus the amount we would be able to serve with this requested appropriation.

**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 the contract?**

The penalties can be the return of the funds if the deliverables are not met.

**15. Requester Contact Information**

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

**16. Recipient Contact Information**

a. Organization

b. Municipality and County

c. Organization Type



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- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**

#### 17. Lobbyist Contact Information

**a. Name**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**