Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Thomas Varnadoe Forensics Center for Research and Education

Senate Sponsor: Wilton Simpson
 Date of Submission: 12/13/2017

4. Project/Program Description:

This facility will be only the 7th forensic field in the United States and will be the first to include a lab component. At this location, in partnership with the University of South Florida, classes, research, and training will be conducted to provide the most up to date forensic training and research possible.

5. State Agency Contacted? Yes

- a. If yes, which state agency? Department of Law Enforcement
- 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:

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
	4,300,000	4,300,000

7. Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	600,000	12.2%
Other	0	0.0%
TOTAL	600,000	12.2 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 4,900,000

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? Yes
- e. Complete the following Worksheet.



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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:	Α	В	С
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:		4,300,000	4,300,000

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?

Building lab space to conduct further research and training.

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

Construction of lab and classroom space to enable enhanced training.

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
☐Executive Director/Project Head Salary and Benefits		
□Other Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
☐Consultants/Contracted Services/Study		
Operational Costs		
☐Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
□Consultants/Contracted Services/Study		



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Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Funding to build Forensics Center as described in attached documents	4,300,000
TOTAL		4,300,000

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

Forensics training for experts in the field to help solve crimes, cold cases, and bring closure to victims and their families.

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

<u>Victims of crime and their families across the state of Florida as well as law enforcement officers across the state and region who would benefit from enhanced forensic training.</u>

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

<u>Enhanced forensic training for law enforcement personnel.</u> This will be measured by class attendance and trainings conducted.

- 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?

 This funding request is for the construction of a building, if measures are not met the suggestion would be that no further funding be provided for this project.
- 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.

County Government are both the owners of the facility and the entity.

13. Requestor Contact Information:

a. Name: Chris Nocco

b. Organization: Pasco Sheriff's Office
c. Email: CNocco@pascosheriff.org
d. Phone Number: (727)844-7726

14. Recipient Contact Information:

a. Organization: Pasco Sheriff's Office

b. County: Pascoc. Organization Type:

O For Profit

O Non Profit 501(c) (3)



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O Non Profit 501(c) (4)

Local Entity

O University or College

O Other (Please specify)

d. Contact Name: Chase Daniels

e. E-mail Address: CDaniels@pascosheriff.org

f. Phone Number: (727)277-6226

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

a. Name: Chase Daniels

b. Firm: N/A

c. Email: CDaniels@pascosheriff.org d. Phone Number: (727)277-6226