



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1830

1. **Title of Project:** Florida Holocaust Museum Security Request

2. **Senate Sponsor:** Jeff Brandes

3. **Date of Submission:** 02/18/2019

4. **Project/Program Description:**

The threat level to institutions perceived as Jewish has been rising for several years and the recent shooting at the Pittsburgh synagogue has increased security concerns. Law enforcement consultants including local, Homeland Security, and independent agencies concur that a redesign of The Florida Holocaust Museum's entrance is needed in order to better protect the lives of students and teachers who come to the museum for mandated Holocaust education (s. 1003.42(g), F.S.) as well as Holocaust survivors, liberators, law enforcement personnel, and the general public. As an example, the museum has often been the site of protests against Israel which crowd the front sidewalk and make it difficult for school children and visitors to enter safely. Plans for the new entrance have been assessed and approved by law enforcement personnel. This investment will secure the state's continued investment in the museum as the deliverer of statewide Holocaust education.

5. **State Agency to receive requested funds :** Department of State

State Agency Contacted? No

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

Type of Funding	Amount
Operations	
Fixed Capital Outlay	853,804
<b>Total State Funds Requested</b>	<b>853,804</b>

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)	853,804	100.00%
Federal		0.00%
State (excluding the amount of this request)		0.00%
Local		0.00%
Other		0.00%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>853,804</b>	<b>100.0%</b>

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



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#### 10. 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		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construction and renovation of building for security entrance	853,804
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>853,804</b>

#### 11. Program Performance:

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

Protection of the lives of children and teachers as well as Holocaust survivors and liberators, law enforcement personnel, and the general public. Security assessments from 2011-2018 concur that the museum's biggest vulnerability is the current entrance and lobby layout. Plans for the new entrance have been assessed and approved by law enforcement.

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

Protection of the lives of children and teachers as well as Holocaust survivors and liberators, law enforcement personnel, and the general public. Redesigned entrance will create a security vestibule prior to entering the actual facility. This new entrance will address multiple concerns including the elimination of hiding places at the front entrance, including a physical barrier at entryway to museum exhibition area, and the addition of a handicap ramp so that all visitors will enter the museum after proper screening.

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

Protection of the lives of children and teachers as well as Holocaust Survivors and Liberators, law enforcement personnel, and the general public. The State has a vested interest in protecting their investment in The Florida Holocaust Museum as a statewide Holocaust educational institution.

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

Children and teachers as well as Holocaust survivors and liberators, law enforcement personnel, families, and general public including international visitors.

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



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Protection of the lives of children and teachers as well as Holocaust survivors and liberators, law enforcement personnel, and general public. Plans for the new entrance have been assessed and approved by law enforcement. Law enforcement reports can be provided on request.

- 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?**

Standard contract penalties.

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.**

The Florida Holocaust Museum

13. **Requestor Contact Information:**

- a. **Name:** Elizabeth Gelman
- b. **Organization:** Florida Holocaust Museum
- c. **E-mail Address:** egelman@thefhm.org
- d. **Phone Number:** (727)820-0100 Ext. 221

14. **Recipient Contact Information:**

- a. **Organization:** Florida Holocaust Museum
- b. **County:** Pinellas
- 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:** Elizabeth Gelman
- e. **E-mail Address:** egelman@thefhm.org
- f. **Phone Number:** (727)820-0100 Ext. 221

15. **Lobbyist Contact Information**

- a. **Name:** Mark Anderson
- b. **Firm Name:** Anderson Consulting
- c. **E-mail Address:** mark@consultanderson.com
- d. **Phone Number:** (813)205-0658