The Florida Senate
Local Funding Initiative Request
Fiscal Year 2019-2020

1. **Title of Project:** First Coast Fresh Food Innovation Center
2. **Senate Sponsor:** Keith Perry
3. **Date of Submission:** 03/14/2019
4. **Project/Program Description:**
   This will enable businesses to enhance product development, enable farmers to utilize value added processing, create new markets and diversify agricultural crops in the rural communities.
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**

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations</td>
<td>637,570</td>
</tr>
<tr>
<td>Fixed Capital Outlay</td>
<td></td>
</tr>
</tbody>
</table>

   **Total State Funds Requested** 637,570

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

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total State Funds Requested (from question #6)</td>
<td>637,570</td>
<td>100.0%</td>
</tr>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Local</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

   **Total Project Costs for Fiscal Year 2019-2020** 637,570 100.0%

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

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

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

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Costs:</td>
<td>Administrative coordination and oversight of procurement and installation of</td>
<td>40,000</td>
</tr>
<tr>
<td>Executive Director/Project Head Salary and Benefits</td>
<td>processing/bottling line equipment</td>
<td></td>
</tr>
<tr>
<td>Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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LFIR#: 2461

11. Program Performance:

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

   Workforce Development Training on Advanced manufacturing equipment. This will serve as a pilot for the other under utilized Farmers markets

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

   Procuring the processing/bottling equipment will enable the ability to develop and innovate new products, thus providing for new business opportunities, such as processing and exporting in addition to utilizing damaged crops, therefore enabling the tri-county region to be resilient to Disaster in the future

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

   Workforce Development Training on Advanced manufacturing equipment.

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

   This will enable businesses to enhance product development, enable farmers to utilize value added processing, create new markets and diversify agricultural crops in the rural communities.

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

   Tracking of job placement and the number of training classes conducted.

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?

   Termination of funding

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.

None

13. Requestor Contact Information:
   a. Name: Richard Balduzzi
   c. E-mail Address: rbalduzzi@comcast.net
   d. Phone Number: (904)501-9900

14. Recipient Contact Information:
   b. County: Putnam
   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: Richard Balduzzi
   e. E-mail Address: rbalduzzi@comcast.net
   f. Phone Number: (904)501-9900

15. Lobbyist Contact Information
   a. Name: None
   b. Firm Name: None
   c. E-mail Address:
   d. Phone Number: