



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1060

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

4. **Project/Program Description**

Funding is requested to: 1) extend our M-F home delivered nutritionally-hot meal program for frail homebound elderly clients with breakfast deliveries, 2) provide physical and mental health support activities (adult fitness classes including chair exercise, yoga, aerobics, dance and Tai Chi for arthritis, and 3) provide acts-based recreational activities that promote socialization and target the isolation and depression prevalent in a senior population.

5. **State Agency to receive requested funds**
- State Agency contacted? Yes No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	<input style="width: 80%;" type="text" value="185,944"/>
Fixed Capital Outlay	<input style="width: 80%;" type="text" value="000"/>
Total State Funds Requested	185,944

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input style="width: 80%;" type="text" value="185944"/>	<input style="width: 80%;" type="text" value="90.0"/> %
Matching Funds		
Federal	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
State (excluding the amount of this request)	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
Local	<input style="width: 80%;" type="text" value="20,000"/>	<input style="width: 80%;" type="text" value="10"/> %
Other	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
Total Project Costs for Fiscal Year 2020-2021	205,944	100 %

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

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
<input style="width: 80%;" type="text" value="2018-19"/>	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="165,944"/>	<input style="width: 80%;" type="text" value="397"/>	<input type="text" value="No"/>

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

If yes, indicate nonrecurring amount per year.



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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		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study	Contracted services will include program wide catering service, nutritionist and instructional staffing for educational / enrichment programs.	185,944
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		185,944



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11. Program Performance

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

Funding is requested to: 1) extend our M-F home delivered nutritionally-hot meal program for frail homebound elderly clients with breakfast deliveries, 2) provide physical and mental health support activities (adult fitness classes including chair exercise, yoga, aerobics, dance and Tai Chi for arthritis, and 3) provide acts-based recreational activities that promote socialization and target the isolation and depression prevalent in a senior population.

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

Funds will enable the City of Miami Springs to expand health support programs such as daily activities that include a variety of exercise, enrichment classes and social activities/outings/ as well as enabling the City to continue providing vital nutritional services to frail and vulnerable homebound residents of Miami Springs and the neighboring City of Virginia Gardens.

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

Approximately 20,100 home-delivered meals; 610 physical and mental health support classes; and 100 2-hour recreation activities classes (dancing, art, drama, drumming.)

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

Elderly Population and most needy.

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

Improved physical health; improved mental health; enriched cultural experiences; improved quality of education.

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?

The contracting agency may consider a reduction in allocation if data collected reflects a smaller population served or if assessments do not adequately meet expectations.



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12. **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.**

Local government - City of Miami Springs

13. **Requestor Contact Information**

- a. First Name Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- c. Organization Type
- 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

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number Ext.