



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1276

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

4. **Project/Program Description**

In keeping with the nation's desire to enhance the quality of life for our senior residents, the Senior Program will support high quality, low-cost activities and nutrition for seniors. The program will provide weekly activities through shuttle bus transportation, credentialed and courteous staff services, social interaction, recreational outings, health fairs, exercise and nutrition. This program will minimize service gaps for our senior population who may suffer from depression, anxiety and loneliness.

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: 100%;" type="text" value="250,000"/>
Fixed Capital Outlay	<input style="width: 100%;" type="text" value="000"/>
Total State Funds Requested	250,000

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: 100%;" type="text" value="250000"/>	<input style="width: 100%;" type="text" value="100.0"/> %
Matching Funds		
Federal	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
State (excluding the amount of this request)	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
Local	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
Other	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="0"/> %
Total Project Costs for Fiscal Year 2020-2021	250,000	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: 100%;" type="text" value="2019-20"/>	<input style="width: 100%;" type="text" value="00"/>	<input style="width: 100%;" type="text" value="200,000"/>	<input style="width: 100%;" type="text" value="398"/>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	To enhance the quality of life for our senior residents, the Senior Program will support high quality, low-cost activities and nutrition for seniors. The program will provide weekly activities through shuttle bus transportation, credentialed and courteous staff services, social interaction, recreational outings, health fairs, exercise and nutrition. This program will minimize service gaps for our senior population who may suffer from depression, anxiety, loneliness.	250,000
Consultants/Contracted Services/Study		
Operational Costs: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	N/A	0
Total State Funds Requested (must equal total from question #6)		250,000



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11. Program Performance

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

The program will provide weekly activities through shuttle bus transportation, credentialed and courteous staff services, social interaction, recreational outings, health fairs, exercise and nutrition. This program will minimize service gaps for our senior population who may suffer from depression, anxiety, loneliness and other ailments that plague our elderly residents.

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

The program will provide weekly activities through shuttle bus transportation, credentialed and courteous staff services, social interaction, recreational outings, health fairs, exercise and nutrition. This program will minimize service gaps for our senior population who may suffer from depression, anxiety, loneliness and other ailments that plague our elderly residents.

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

The program will provide weekly activities through shuttle bus transportation, credentialed and courteous staff services, social interaction, recreational outings, health fairs, exercise and nutrition. This program will minimize service gaps for our senior population who may suffer from depression, anxiety, loneliness and other ailments that plague our elderly residents.

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

Seniors from not only the City of West Park, but surrounding Cities such as Miramar and Hollywood.

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

The program will provide weekly activities through shuttle bus transportation, credentialed and courteous staff services, social interaction, recreational outings, health fairs, exercise and nutrition. This program will minimize service gaps for our senior population who may suffer from depression, anxiety, loneliness and other ailments that plague our elderly residents.

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?

Once the City selects a vendor to preform the scope of services, a series of meetings will occur to establish time lines, objectives etc. If the selected vendor does not meet the given objectives, the City would then issue a warning. If the penalties continue, the City will then liquidate the damage and start the performance bond process.



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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 West Park

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.