

- 1. **Project Title** The Jewish Federation of Sarasota-Manatee Campus Security
- 2. Senate Sponsor Joe Gruters
- 3. Date of Request 11/04/2019

#### 4. **Project/Program Description**

The specific purpose for funding is to improve hardened security for existing and future buildings as well as enhance cyber security that would address the safety of 300 plus school children, ages ranging from 18 m/o to 14 yrs. Increased security will aid in protecting the general public by providing a secure site where local community members and tourists can enjoy indoor and outdoor activities, lectures, live theater, Jewish Film Festival, Sarasota Film Festival, and Holocaust Center.

5. State Agency to receive requested funds

Department of State

State Agency contacted? O Yes 

No

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

| Type of Funding             | Amount    |  |
|-----------------------------|-----------|--|
| Operations                  | 000       |  |
| Fixed Capital Outlay        | 1,500,000 |  |
| Total State Funds Requested | 1,500,000 |  |

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) | 1500000   | 100.0 %    |  |
| Matching Funds                                 |           |            |  |
| Federal  | 00        | 0 %        |  |
| State (excluding the amount of this request)   | 00        | 0 %        |  |
| Local  | 00        | 0 %        |  |
| Other  | 00        | 0 %        |  |
| Total Project Costs for Fiscal Year 2020-2021  | 1,500,000 | 100 %      |  |

### 8. Has this project previously received state funding? $\bigcirc$ Yes $\odot$ No

If yes, provide the most recent instance:

| Fiscal Year | Amount    |              | Specific        |        |
|-------------|-----------|--------------|-----------------|--------|
| (уууу-уу)   | Recurring | Nonrecurring | Appropriation # | Vetoed |
|             |           |              |                 |        |

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

If yes, indicate nonrecurring amount per year.

1,000,000



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

| Spending Category  | Description  | Amount    |
|--|--|-----------|
| Administrative Costs:                                    |  |           |
| Executive Director/Project<br>Head Salary and Benefits   |  | 0         |
| Other Salary and Benefits                                |  | 0         |
| Expense/Equipment/<br>Travel/Supplies/Other              |  | 0         |
| Consultants/Contracted<br>Services/Study                 |  | 0         |
| Operational Costs: Oth                                   | er   |           |
| Salary and Benefits                                      |  | 0         |
| Expense/Equipment/<br>Travel/Supplies/Other              |  | 0         |
| Consultants/Contracted<br>Services/Study                 |  | 0         |
| Fixed Capital Construc                                   | tion/Major Renovation:   |           |
| Construction/Renovation/<br>Land/Planning<br>Engineering | Install an integrated security platform that includes use of CCTV, access control, license plate readers, intrusion/detection alarms, and biometric controls (facial recognition or fingerprint scanning). Physical security upgrades including bollards, bullet and shatter resistant glass, mobile traffic control barriers, doors and door locks, gates, and fencing. | 1,500,000 |
| Total State Funds Re                                     | quested (must equal total from question #6)  | 1,500,000 |



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#### 11. Program Performance

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

The specific purpose for funding is to improve hardened security for existing and future buildings as well as enhance cyber security that would address the safety of 300 plus school children, ages ranging from 18 m/o to 14 yrs. Increased security will aid in protecting the general public by providing a secure site where local community members and tourists can enjoy indoor and outdoor activities, lectures, live theater, Jewish Film Festival, Sarasota Film Festival, and Holocaust Center.

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

Protecting children, families, staff, and citizens who visit the campus for school, cultural activities, sports, sustainable gardens, and community meetings is the priority of this funding.

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

The entire campus which will be hardened to protect citizens includes: performing arts center and flexible meeting space with seating for up to 1,000 for lectures, live theatre, Jewish Film Festival, Sarasota Film Festival, and more. This center will also include a Holocaust exhibit and education center, an Israel Center (a non-profit based in Israel serving low income children of all faiths to build community and uplift self-esteem), a school for 300 plus children, a sustainable garden, sports activities, and offices.

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

>800 individuals

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

Enrich cultural experience - annual volume report on attendees, shows, experiences, and programs. Improve agricultural production/promotion/education - annual economic impact report. Improve quality of education - school attendance report. Protect the general public from harm - there will be a daily security report on the effectiveness of the physical and cyber security deterrents set in place. Increase tourism - quarterly volume reports. Create specific immediate job opportunities - quarterly volume reports.

### 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?

None



# 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.

|     | The Jewish Federation of Sarasota-Manatee |                                  |   |  |  |  |
|-----|---|----------------------------------|---|--|--|--|
|     |   |                                  |   |  |  |  |
|     |   |                                  |   |  |  |  |
|     |   |                                  |   |  |  |  |
| 13. | Re  | questor Contact                  | t Information                             |  |  |  |
|     | a.  | First Name                       | Jessica Last Name Sheslow                 |  |  |  |
|     | b.  | Organization                     | The Jewish Federation of Sarasota-Manatee |  |  |  |
|     | c.  | E-mail Address                   | jsheslow@jfedsrq.org                      |  |  |  |
|     | d.  | Phone Number                     | (941)343-2109 Ext.                        |  |  |  |
| 14. | Re  | cipient Contact                  | Information                               |  |  |  |
|     |   | •<br>Organization                | The Jewish Federation of Sarasota-Manatee |  |  |  |
|     | b.  | Municipality and                 | County Sarasota                           |  |  |  |
|     | c. Organization Type                      |                                  |   |  |  |  |
|     |   | For-profit Ei                    |   |  |  |  |
|     |   | Non-Profit 5                     | -   |  |  |  |
|     |   | O Non-Profit 5                   | 501(c) (4)                                |  |  |  |
|     |   | <ul> <li>Local Entity</li> </ul> | y .                                       |  |  |  |
|     |   | O University o                   | or College                                |  |  |  |
|     |   | Other (please                    | ase specify)                              |  |  |  |
|     | d.  | First Name                       | Jessica Last Name Sheslow                 |  |  |  |
|     | e.  | E-mail Address j                 | jsheslow@jfedsrq.org                      |  |  |  |
|     | f.  | Phone Number                     | (941)3432109                              |  |  |  |
| 45  |   | hhuist Cantast I                 |   |  |  |  |
| 15. |   | bbyist Contact I                 |   |  |  |  |
|     |   | Name                             | Amy Maguire                               |  |  |  |
|     | b.  | Firm Name                        | Shumaker Advisors Florida                 |  |  |  |
|     | c.  | E-mail Address                   | amaguire@shumakeradvisors.com             |  |  |  |

Ext.

d. Phone Number (727)6568413