



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 2560

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

4. **Project/Program Description**

Performs statewide research for the Council On The Social Status of Black Men and Boys. The Coordinator and Consultant will work and collaborate with Historical Black Colleges and Universities (HBCU), government agencies to include the Department of Education, Department of Correction, Department of Juvenile Justice, Surgeon General's Office, Department of Children and Families, and other Stakeholders to collect, analyze, and process data that will be used to address and answer questions raised by the Council.

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 type="text" value="150,000"/>
Fixed Capital Outlay	<input type="text" value="000"/>
Total State Funds Requested	150,000

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 type="text" value="150000"/>	<input type="text" value="100.0"/> %
Matching Funds		
Federal	<input type="text" value="00"/>	<input type="text" value="0"/> %
State (excluding the amount of this request)	<input type="text" value="00"/>	<input type="text" value="0"/> %
Local	<input type="text" value="00"/>	<input type="text" value="0"/> %
Other	<input type="text" value="00"/>	<input type="text" value="0"/> %
Total Project Costs for Fiscal Year 2020-2021	150,000	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 type="text" value="2019-20"/>	<input type="text" value="78,419"/>	<input type="text" value="00"/>	<input type="text" value="1346"/>	<input type="text" value="No"/>

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

If yes, indicate nonrecurring amount per year.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 2560

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		<input style="width: 100%;" type="text"/>
Other Salary and Benefits		<input style="width: 100%;" type="text"/>
Expense/Equipment/Travel/Supplies/Other		<input style="width: 100%;" type="text"/>
Consultants/Contracted Services/Study		<input style="width: 100%;" type="text"/>
Operational Costs: Other		
Salary and Benefits	Reach Coordinator, \$50,000 plus 30% for benefits.	50,000
Expense/Equipment/Travel/Supplies/Other	Travel expenses, equipment, supplies, etc.	10,000
Consultants/Contracted Services/Study	Research Consultant will be responsible for overseeing the research of assigned subjects pertaining to programs or operations related to the Council areas of focus. Performs statistical analyses and technical analyses in assigned subject areas. Prepare ad hoc reports, surveys, research and briefs to be submitted to the Council. Works closely with Council and provides research and statewide comparison of information as it pertains to homicidal rates, arrest and incarceration rates, poverty, viol	90,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		<input style="width: 100%;" type="text"/>
Total State Funds Requested (must equal total from question #6)		150,000



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 2560

11. Program Performance

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

Research and analyze statistical methods to solve specific problems and address concerns pertaining to the educational, health, and nutritional impact of African American men and boys throughout the state of Florida. This information will be shared with Historical Black Colleges and Universities (HBCU), government agencies to include the Department of Education, Department of Correction, Department of Juvenile Justice, Surgeon General's Office, Department of Children and Families, and other Stakeholders.

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

Conducts detailed research of assigned subjects pertaining to programs or operations related to the Council areas of focus. Performs statistical analyses and technical analyses in assigned subject areas. Prepare ad hoc reports, surveys, research and briefs to be submitted to the Council.

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

Produce research data to assist with the Council with the following: community day of dialogue, teen workshops, public forums throughout the state of Florida, and the annual report statutorily mandated to be published each year.

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

African American men and boys throughout the state of Florida.

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

Benefit is to provide the Council the necessary research data to assist with finding gaps in services and developing measures that will alleviate and correct the following underline conditions: homicidal rates, arrest and incarceration rates, poverty, violence, drug abuse, death rates, disparate annual income levels, school performance, and health issues.

- 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?

Funding to be withheld from if specific benchmarks are not achieved.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 2560

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.

None

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.