

Operations

Fixed Capital Outlay

Total State Funds Requested

The Florida Senate Local Funding Initiative Request Fiscal Year 2021-2022

LFIR # 1501

200,000

200,000

1. Project Title	Clara White Mission Daily F Income	eeding Program for the Homeless a	nd Low
2. Senate Sponsor	Audrey Gibson		
3. Date of Request	01/14/2021		
4. Project/Program De	escription		
low-income persons insecurity. In additio meal program is to i would be in a centra	in the Jacksonville area. For 1 n, the program has been addrest the contract where there is limited I location for weekly distribution to the set homeless depends on the set.	essing hunger relief during COVID-1 or lack of access to cooked and not n.	as addressed food access and food 9. The primary goal of the food and
5. State Agency to red State Agency conta		epartment of Children and Families	
	ecurring Request for Fiscal	Year 2021-2022	
Type of Funding		Amount	

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	200,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	51,324	13%
Other	150,000	37%
Total Project Costs for Fiscal Year 2021-2022	401,324	100%

8. Has this project previously received state funding?

Fiscal Year	ar Amount		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2020-21	0	100,000	354	Yes	

2020-21	0	100,000	354	Yes	
9. Is future funding likely to be re	equested?	No			
a. If yes, indicate nonrecurring	g amount per yea	ır.			
b. Describe the source of fund	ding that can be ι	used in lieu of s	tate funding.		
N/A					

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

Yes



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No	
If yes, indic	cate the amount of funds received and what the funds were used for.
N/A	

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

Spending Category	Description	Amount				
Administrative Costs:	Administrative Costs:					
Executive Director/Project Head Salary and Benefits		0				
Other Salary and Benefits		0				
Expense/Equipment/Travel/Supplies/ Other		0				
Consultants/Contracted Services/Study		0				
Operational Costs: Other	Operational Costs: Other					
Salary and Benefits		0				
Expense/Equipment/Travel/Supplies/ Other	Food \$162,500; Food Supplies/deliveries \$37,500.	200,000				
Consultants/Contracted Services/Study		0				
Fixed Capital Construction/Major Renovation:						
Construction/Renovation/Land/ Planning Engineering		0				
Total State Funds Requested (must equal total from question #6) 200,000						

12. Program Performance

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

Provide 130,000 nutritional hot cooked meals/packaged food to the homeless and low income persons annually. For 117 years, Clara White Mission has addressed food access and food insecurity. In addition, to addressing hunger relief during COVID-19. The primary goal of the food and meal program is to intervene in the limited or lack of access to cooked and non-perishable food in a central location for distribution weekly. Low income and street homeless individuals depend on this safety-net for food availability, which could also relieve mental and emotional stress.

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

Provides daily hot meals-to-go and packaged food for homeless and/or low income persons. The assurance of meals free of charge allows individuals to direct a greater portion of their resources and energies toward activities that support their stabilization and self-sufficiency.

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

130,000 meals will be served annually in Jacksonville. The feeding program functions as a connection to additional services that may be available, including housing, job training, employment assistance and a drop-in center services to assist homeless individuals with existing needs for long-term sustainability. Appropriation will be a game changer.

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

The target population includes: elderly, mental and physical disabled, unemployed, economically disadvantaged, at-risk youth, homeless and ex-offenders. The program is estimated to serve over 30,000 unduplicated homeless and low-income individuals annually with 130,000 hot meals and packaged foods.

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



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Alleviate food insecurity thereby reducing potential choices between medicine or shelter, food, and potential criminal behavior (theft, assault, etc) driven by desperation of food, which is a daily necessity. 1) Increase physical health by 80% through on-site educational activities and nutritional food information to improve and encourage exercise. 2) Increase mental well-being by preparing hot cooked meals to stimulate and improve mental capacity. Outcomes will be measured based on a questionnaire engagement.

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 the contract?

Suggested penalty for inability to meet performance measures is the discontinuation of funding.

13.	The owners of the facili	ty to receive, dire	ectly or indirectly	any fixed capita	al outlay funding.	Include the
	relationship between th	e owners of the f	facility and the en	titv.	_	

N/Δ	



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14.	. Requestor Contact	t Informati	ion				
	a. First Name	Ju'Coby		Last Name	Pittman		
	b. Organization	Clara Wh	Clara White Mission, Inc.				
	c. E-mail Address	jpittman@	pittman@clarawhitemission.org				
	d. Phone Number	(904)612	-8758	Ext.			
15.	15. Recipient Contact Information						
	a. Organization	Clara Wh	ite Mission, Inc.				
	b. Municipality and	d County	Duval				
	c. Organization Ty	ре					
	□For Profit Entity	Profit Entity					
	☑Non Profit 501(c	t 501(c)(3)					
	□Non Profit 501(c	□Non Profit 501(c)(4)					
	□Local Entity						
	□University or College						
	□Other (please sp	pecify)					
	d. First Name	Veronica		Last Name	Chamber		
	e. E-mail Address	vchambe	r@clarawhitemis	sion.org			
	f. Phone Number	(904)354-4162					
16.	16. Lobbyist Contact Information						
	a. Name	None					
	b. Firm Name	None					
	c. E-mail Address						
	d. Phone Number						