



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1933

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Bridge (transitional) housing for LGBTQ+ youth ages 18 to 24 who are identified as homeless. Zebra Coalition currently provides housing for 11 youth at scattered sites. The goal of the project is to build or lease a standalone building that will provide housing for approximately 30 youth in one location.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	750,000
Total State Funds Requested	750,000

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)	750,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2021-2022	750,000	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

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

If yes, indicate the amount of funds received and what the funds were used for.



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\$77,500 from the Cares Act Paycheck Protection Program was used for payroll costs.

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

Spending Category	Description	Amount
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		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Consultant to oversee project planning	50,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Build (or lease) a standalone building that will provide housing for approximately 30 youth.	700,000
Total State Funds Requested (must equal total from question #6)		750,000

12. Program Performance

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

The purpose of these funds will be to renovate a building to provide housing for up to 30 youth who are identified as homeless.

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

Provides temporary transitional housing for youth ages 18-24 that are experiencing homelessness.

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

Provides temporary bridge housing to youth ages 18-24 that are experiencing homelessness.

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

Youth ages 18 to 24. Will serve approximately 30 youth.

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

Outcomes measured through case management and counseling services.

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?

Return of funds to the state if unable to meet deliverables.

13. 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.

Zebra Coalition is a 501c3 organization in Central Florida, operating housing for youth since 2010.



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14. Requestor Contact Information

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

15. 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

16. Lobbyist Contact Information

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