

LFIR # 1359

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1. Project Title	Place of Hope C	hild Welfare Se	rvices				
2. Senate Sponsor	Gayle Harrell						
3. Date of Request	11/29/2021						
4. Project/Program De	escription						
prevention services	and support, care in maternity care, hom	n child welfare the neless programs	hrough and h	n neighbor numan tra	rhood foste fficking pre	r care stability, su	providing child abuse pport and housing for at-risk youth
5. State Agency to red	ceive requested fu	nds Depa	artmen	t of Childr	en and Far	nilies	
State Agency conta		for Fiscal Year	r 2022	-2023			
Type of Funding					Amou	nt	
Operations					711104	750,000	
Fixed Capital Outlay	1					0	
Total State Funds F	Requested					750,000	
7. Total Project Cost f	or Fiscal Year 202	2-2023 (includi	ing ma	atching fu	unds availa	able for this proje	ect)
Type of Funding				Amoun	t	Percentage	
Total State Funds R	equested (from que	estion #6)			750,000	100%	
Matching Funds							
Federal					0	0%	
State (excluding the	amount of this requ	uest)			0	0%	
Local					0	0%	
Other					0	0%	
Total Project Costs	for Fiscal Year 20)22-2023			750,000	100%	I
8. Has this project pre	eviously received	state funding?	Y	'es			
Fiscal Year	Amo	ount		Spec		Vetoed	
(уууу-уу)	Recurring	Nonrecurrin	ıg '	Appropri	ation #		
2021-22	0	250,	,000		310A	No	
9. Is future funding lik	cely to be requeste	ed?	Y	es			
a. If yes, indicate nonrecurring amount per year. 750,000							
b. Describe the sou	urce of funding tha	at can be used	in lieu	of state	funding.		
No other funding is	available.						
10. Has the entity req	uesting this proied	ct received any	/ feder	al assist	ance relate	ed to the COVID-	19 pandemic?
Yes	2 · · · · · · · · · · · · · · · · · · ·						p
If yes, indicate the	amount of funds i	received and w	hat th	e funds v	were used	for.	



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PPP	- \$808	,900 for	salaries	(2020)).
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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	Administrative staff including HR, payroll, accounting, etc.	208,000		
Expense/Equipment/Travel/Supplies/Other		0		
Consultants/Contracted Services/Study		0		
Operational Costs: Other				
Salary and Benefits	To cover the cost of staff members responsible for operational functioning of child abuse prevention services and support, trafficking prevention, education and recovery, family-style neighborhood foster homes, maternity home and transitional and supportive housing settings, providing daily care for youth in programs.	542,000		
Expense/Equipment/Travel/Supplies/ Other		0		
Consultants/Contracted Services/Study		0		
Fixed Capital Construction/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering		0		
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?

Place of Hope, Inc. is requesting funding in the amount of \$750,000 to continue to meet the operational functioning of regional placement needs for Florida's abused and neglected children, victims of human trafficking and otherwise homeless young adults, and child abuse prevention services and support.

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

Specifically, the request includes funding for operational functioning expenses associated with our "seamless" provision of programming, housing and therapeutic support for abused and neglected children, sexually exploited adolescent youth and other victims of human trafficking throughout Florida. The funding request will also help to continue our highly sought Human Trafficking Prevention and Education for at-risk youth and community members. The funding request will also help us to support child abuse prevention services and support.

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

We provide child abuse prevention services and support, assessment center and emergency shelter, maternity care, neighborhood foster homes, Extended Foster Care (EFC) and post-emancipation transitional and supportive housing programs (multiple locations). Place of Hope also provides human trafficking prevention and education for at-risk youth (to recognize potential situations of human trafficking) as well as community members (to recognize the signs of human trafficking).

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

Abused and neglected children are provided necessities, care and love. Our Child Welfare, Foster Care and Human Trafficking Prevention and Education Support Services, child abuse prevention services and support initiative impacts victims of human trafficking, children in foster care, at-risk youth and the community at large. The program is expected to serve 800+ individuals.

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



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be measured?

Our community will have knowledge of how to prevent and rescue victims of human trafficking. The methodology will be tracking the number of individuals who watch or attend our prevention and education sessions. Place of Hope will also provide housing and services to victims of human trafficking which will be recorded by how many lives are saved. Place of Hope will be able to provide for abused and neglected children, homeless youth and victims of human trafficking. Place of Hope will provided needed services for child abuse prevention services and support to help the community at large by tracking the numbers served.

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?

Failure to meet deliverables without notification of good reason will result in financial penalties similar to the organization's current contract with the Department of Children and Families.

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.	
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14.	14. Requestor Contact Information								
	a. First Name	Charles		Last Name	Bender				
	b. Organization	Place of Hope, Inc.							
	c. E-mail Address	charlesb	charlesb@placeofhope.com						
	d. Phone Number	(561)775	-7195	Ext.					
15.	15. Recipient Contact Information								
	a. Organization	Place of I	Hope, Inc.						
	b. Municipality and County Palm Beach								
	c. Organization Type								
	□For Profit Entity	rofit Entity							
	☑Non Profit 501(c	ofit 501(c)(3)							
	□Non Profit 501(c	on Profit 501(c)(4)							
	□Local Entity								
	□University or College								
	□Other (please specify)								
	d. First Name	Charles		Last Name	Bender				
	e. E-mail Address	charlesb@placeofhope.com							
	f. Phone Number								
16.	16. Lobbyist Contact Information								
	a. Name	Thomas DeRita Jr.							
	b. Firm Name	Resource Group NA							
	c. E-mail Address	tomderitafl@gmail.com							
	d. Phone Number	(561)719-2877							