

The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

LFIR # 1090

1.	Project Title	Police Athletic Le	eague of Nort	h Miar	ni (PAL): Permanent	Home		
2.	Senate Sponsor	Shevrin Jones						
3.	Date of Request	11/13/2023						
4.	Project/Program De	scription						
	owned land, which was will be able to have redemographic — ages catalyst that changes	as recently leased to assure as 8-19, many of who the trajectory of the labuse. Its profes n predicated by Adrian as series.	for \$1 per yea and impleme om live 200% e most vulne sional team a verse Childho	ar to Pent pre below rable, are also ood Ex	AL for the next 23 year vention interventions or greater below the guiding them away fro the first responders periences (ACE) — p	ars. By securing a page for at-risk youth. So poverty line, these om gang affiliation, to helping mitigate poverty, family dyna	juvenile criminal activity and modify challenging	
5.	State Agency to rec	eive requested fui	nds De	partme	ent of Juvenile Justice	9		
;	State Agency contac	cted? Yes						
6. /	Amount of the Nonre	ecurring Request	for Fiscal Ye	ear 202	24-2025			
	Type of Funding				Amou	unt		
	Operations					0		
	Fixed Capital Outlay				330,000			
Į	Total State Funds R	equested			330,000			
7. ¯	Total Project Cost fo	or Fiscal Year 2024	4-2025 (inclu	ding r	natching funds avai	lable for this proj	ect)	
Г	Total Project Cost fo	or Fiscal Year 2024	4-2025 (inclu	ding r	natching funds avai	lable for this proje	ect)	
	•		•	ding r			ect)	
	Type of Funding		•	ding r	Amount	Percentage	ect)	
	Type of Funding Total State Funds Re		•	iding r	Amount	Percentage	ect)	
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	Type of Funding Total State Funds Re Matching Funds Federal	equested (from que	stion #6)	ding r	Amount 330,000 0 0 95,000	Percentage 50% 0% 0% 14%	ect)	
	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a	equested (from que	stion #6)	ding r	Amount 330,000 0	Percentage 50% 0% 0%	ect)	
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	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project pre	equested (from questamount of this requ	est) 24-2025 state funding		Amount 330,000 0 95,000 238,769 663,769 No Specific	Percentage 50% 0% 0% 14% 36%	ect)	
	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project pre	equested (from questamount of this requested for Fiscal Year 20 viously received s	est) 24-2025 state funding	1?	Amount 330,000 0 0 95,000 238,769 663,769	Percentage 50% 0% 0% 14% 36% 100%	ect)	
	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project pre	equested (from quested amount of this requested for Fiscal Year 20 viously received s	est) 24-2025 state funding	1?	Amount 330,000 0 95,000 238,769 663,769 No Specific	Percentage 50% 0% 0% 14% 36% 100%	ect)	
8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy)	equested (from questamount of this requested) for Fiscal Year 20 viously received s Amo Recurring	est) 24-2025 state funding ount Nonrecurr	1?	Amount 330,000 0 95,000 238,769 663,769 No Specific	Percentage 50% 0% 0% 14% 36% 100%	ect)	
8. [Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy)	equested (from questamount of this requested) for Fiscal Year 20 viously received s Amo Recurring	est) 24-2025 state funding ount Nonrecurr	1?	Amount 330,000 0 95,000 238,769 663,769 No Specific Appropriation #	Percentage 50% 0% 0% 14% 36% 100%	ect)	
8.	Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy)	for Fiscal Year 20 viously received s Amo Recurring ely to be requested amount	est) 24-2025 State funding Nonrecurr ed? nt per year.	j?	Amount 330,000 0 95,000 238,769 663,769 No Specific Appropriation #	Percentage 50% 0% 0% 14% 36% 100%	ect)	



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

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No						
If yes, indicate t	the amount of fu	ınds received and wh	nat the fu	nds were used fo	or.	
omplete que	estions 11 a	nd 12 for Fixed	d Capit	al Outlay Pr	ojects	
. Status of Const	truction					
a. What is the cu	urrent phase of t	he project?				
Planning	O Design	Construction	O N/A			
b. Is the project	"shovel ready"	(i.e permitted)?		Yes		
c. What is the es	stimated start da	ate of construction?		07/01/2024		

12. List 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 City of North Miami owns the land with a 23-year guarantee of the property to Police Athletic League of North Miami, a nonprofit 501c3 organization. The State Appropriation would directly benefit PAL for all fixed capital outlay costs.

12/01/2024

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

d. What is the estimated completion date of construction?

Spending Category	Amount	
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	N/A	0
Other Salary and Benefits	N/A	0
Expense/Equipment/Travel/Supplies/Other	N/A	0
Consultants/Contracted Services/Study	N/A	0
Operational Costs: Other		
Salary and Benefits	N/A	0
Expense/Equipment/Travel/Supplies/ Other	N/A	0
Consultants/Contracted Services/Study	N/A	0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Renovate 80-year-old, one story masonry structure: Abatement of asbestos, replace exterior roof, stucco, painted finishes, install impact door/windows, replace under-floor cast iron drainage, the under-floor/in-wall galvanized water supply systems, install HVAC system, plumbing, electrical, ADA compliant restrooms, repair parking lot, landscaping, irrigation, security fencing, install kitchen	330,000
Total State Funds Requested (m	ust equal total from question #6)	330,000

14. Program Performance



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

To repair, renovate 80-year-old building on city-owned land, which has been leased to PAL for \$1 per year for the next 23 years — providing a permanent home for the nonprofit 501c3 to assure programs to service marginalized, at-risk youth.

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

Abatement of asbestos, replace exterior roof, stucco, painted finishes, install impact door/windows, replace under-floor cast iron drainage, the under-floor/in-wall galvanized water supply systems, install HVAC system, plumbing, electrical, ADA compliant restrooms, repair parking lot, landscaping, irrigation, security fencing, install kitchen.

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

A permanent home for PAL will provide direct services to at-risk youth ages 8-18:

- 1. Access/provision of nutritional balance serving a near 100% impoverished market, our youth rely on school and outside organizations for food; Access/provision of activities that promote physical health, such as sports.
- 2. Stewarding a lasting impact on self-esteem, self-perception and self-reliance, which navigate the triggers of depression, anxiety and suicidal tendencies.
- 3. Access to cultural experiences: Field trips to museums, theater, dance, art exhibits
- 4. Identify at-risk youth, helping them make healthy choices and resist peer influence; to reduce alcohol, marijuana and cannabis product and e-cigarette use by addressing behaviors that may lead to the initiation of use.
- d. Who is the target population served by this project? How many individuals are expected to be served?

Between 100-200 marginalized youth ages 8-18 — many of whom are first American generation living 200% or greater below the poverty line. PAL staff are first responders to at-risk youth, trained in trauma-informed care — a measure to identify triggers affecting mental instability, which is impacted by Adverse Childhood Experiences that occurs 3.6 times more in racial and income disadvantaged groups.

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

Outcomes of providing a permanent home for PAL will provide security and longevity to services that are a safety-net for at-risk marginalized youth in an under-served community — with the direct outcome of being a catalyst to change the trajectory of their lives, which will domino down to fostering the next generation of empowered and resilient adults.

- 1. Improve physical health reduction in school absenteeism due to illness.
- 2. Improve mental health balance reduction in anxiety, depression, suicidal tendencies.
- 3. Improve academic success improved grade point average, test scores, graduation rates.
- 4. Anti-gang affiliation reduction in juvenile criminal activity.
- 5. Reduce substance/alcohol abuse reduction in youth addiction and number related to seeking medical intervention.
- 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?

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1. Loss of fun				
2. Repayment	of funds			

15. Requester Contact Information

3. Possible legal action

a. First Name	David	Last Name	Burney
b. Organization	Police Athletic League of	North Miami	
c. E-mail Address	Dave@npsbank.com		
d. Phone Number	(954)600-4645	Ext.	

16. Recipient Contact Information



17.

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a. Organization	Police Atl	hletic League of	North Miami					
b. Municipality and	d County	Miami-Dade						
c. Organization Ty	ре							
□For Profit Entity								
☑Non Profit 501(d	c)(3)							
□Non Profit 501(d	□Non Profit 501(c)(4)							
□Local Entity								
□University or Co	llege							
□Other (please sp	pecify)							
d. First Name	David		Last Name	Burney				
e. E-mail Address	Dave@N	PSbank.com						
f. Phone Number	(954)600	-4645						
Lobbyist Contact I	nformatio	n						
a. Name	None							
b. Firm Name								
c. E-mail Address								
d. Phone Number								