

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

LFIR # 1242

1. Project Title	Palm Beach County Rural Community Mobile Food Pantry						
2. Senate Sponsor	Lori Berman						
3. Date of Request	11/15/2023						
4. Project/Program De	escription						
Procure a refrigerat County. The truck ca the agricultural com	an take out food for	those individuals	Mobile Food Pantry for to and families that suffer r distribution.	he Glades Commu with food insecurity	nity in Palm Beach y as well as work with		
5. State Agency to red	ceive requested fu	ı nds Depar	tment of Agriculture and	Consumer Service	es		
State Agency conta	cted? Yes						
6. Amount of the Noni	recurring Request	for Fiscal Year	2024-2025				
Type of Funding			Amo	unt]		
Operations				250,000			
Fixed Capital Outlay	•			0			
Total State Funds I	Requested			250,000			
7. Total Project Cost f	or Fiscal Year 202	24-2025 (includir	ng matching funds ava	ilable for this proj	ect)		
Type of Funding			Amount	Percentage			
Total State Funds R	equested (from que	estion #6)	250,000	22%			
Matching Funds							
Federal			0	0%			
State (excluding the	State (excluding the amount of this request)			0%	†		
Local				0%	7		
Other			900,000	78%	_		
Total Project Costs	for Fiscal Year 20	024-2025	1,150,000	100%			
8. Has this project pro	eviously received	state funding?	No				
Fiscal Year	Amount		Specific	Vetoed			
(уууу-уу)	Recurring	Nonrecurring	Appropriation #				
					•		
9. Is future funding like	cely to be requeste	ed?	No		_		
a. If yes, indicate n	onrecurring amou	ınt per year.					
b. Describe the sou	irce of funding th	at can be used i	n lieu of state funding.				
			ir nou or otato rananigi		1		
10. Has the entity req	uesting this proje	ct received any	federal assistance rela	ted to the COVID-	19 pandemic?		
No		-					
If yes, indicate the	amount of funds	received and wh	nat the funds were use	d for.			



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. Status of Const a. What is the cu		he project?				
Planning	O Design	Construction	O N/A			
b. Is the project	"shovel ready" ((i.e permitted)?				
c. What is the es	stimated start da	te of construction?				
d. What is the e	stimated comple	tion date of constru	ction?			
List the owners	s of the facility to	o receive, directly or rs of the facility and	indirectl	ر, any fixed ca _l	oital outlay funding. Include tl	ne

13. 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	Purchase 53 foot Mobile Food Pantry truck for food distribution and food retrieval in the Glades and other rural communities.	250,000
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
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 (m	ust equal total from question #6)	250,000

14. Program Performance

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

Procure a refrigerated truck to provide a much needed Mobile Food Pantry for the Glades Community in Palm Beach County. The truck can take out food for those individuals and families that suffer with food insecurity as well as work with the agricultural community to pick up excess produce for distribution.

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

The Food Bank will partner with the Glades community to deliver and distribute non perishable and perishable food to individuals and families in need of food assistance.



d. First Name

Michael

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LFIR # 1242

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

Direct food distribution to those individuals and families in need of food assistance as well as work with the farming community to pick up additional donated produce.

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

Target populations include elderly persons, persons with poor mental health, persons with poor physical health, jobless persons, economically disadvantaged persons, at-risk youth, homeless, developmentally disabled, physically disabled, students K-12, university/college students, and currently or formerly incarcerated persons. The project is expected to reach over 800 individuals.

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

The benefits related to this project are improved physical and mental health, improved agricultue production production/promotion, improved quality of education, increased economic activity, and the enhancement of specific individual's economic self sufficiency. Improved health can be measured by the changes in physical health of children participating in the program and tracking mental health concerns with current services in Palm Beach County. Microsoft Dynamics NAV would track produce distribution and production. The school system actively tracks the students educational outcome taking into consideration the child economic hardships. The mobile food pantry will provide support to individuals that will allow them to work towards financial stability.

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?

Reimbursement and penalties as determined by contract with the Department. 15. Requester Contact Information Last Name | Kendall a. First Name **Jamie** Palm Beach County Food Bank b. Organization c. E-mail Address | jamie@pbcfoodbank.org **d. Phone Number** (561)670-2518 Ext. 16. Recipient Contact Information a. Organization Palm Beach County Food Bank b. Municipality and County | Palm Beach c. Organization Type □For Profit Entity ☑ Non Profit 501(c)(3) □Non Profit 501(c)(4) □Local Entity □University or College □Other (please specify)

Last Name Groover



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e. E-maii Address	micnaeig@pbctoodbank.org	
f. Phone Number	(561)670-2518	
17. Lobbyist Contact II	nformation	
a. Name	Robert E. Holroyd	
b. Firm Name	Tripp Scott PA	
c. E-mail Address	reh@trippscott.com	
d. Phone Number	(954)803-0231	