

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

LFIR # 1406

1. Project Title	Regional/National Adaptive Sports Training Center

2. Senate Sponsor Jay Collins

3. Date of Request 11/21/2023

4. Project/Program Description

The International Institute for Orthotics and Prosthetics is seeking a state appropriation of \$5,000,000 for a Regional / National Adaptive Sports Training Center. This project will provide wounded veterans wrap-around rehabilitation services in a healthcare setting designed to speed recovery and encourage reintegration.

5. State Agency to receive requested funds

Department of Veterans' Affairs

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	5,000,000
Total State Funds Requested	5,000,000

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	5,000,000	77%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	1,500,000	23%
Total Project Costs for Fiscal Year 2024-2025	6,500,000	100%

8. Has this project previously received state funding? Yes

Fiscal Year	Amo	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2023-24	0	2,000,000	595A	No	

9. Is future funding likely to be requested?

1,500,000

Yes

a. If yes, indicate nonrecurring amount per year.

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

Potential additional private dollars.

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

No

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



Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

📀 Planning	🔘 Design	Construction	🔘 N/A

b. Is the project "shovel ready" (i.e permitted)?	b.	ls t	he	project	"shovel	ready"	(i.e	permitted)?	
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c. What is the estimated start date of construction?

d	What is	the estimated	completion	date of	construction?
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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.

No

2025

Fall 2024

Veteran's Stride Foundation

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		0	
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/Major	r Renovation:		
Construction/Renovation/Land/ Planning Engineering	Construction of on-site sports facilities that will help veterans and amputees.	5,000,000	
Total State Funds Requested (must equal total from question #6) 5,000,000			

14. Program Performance

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

To develop and establish regional/national adaptive sports training center that will provide wounded veterans wraparound rehabilitation services in a healthcare setting designed to speed recovery and encourage reintegration.

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

On-site adaptive sports facilities that will help amputees and veterans with a state-of-the-art diagnosis, evaluation, and treatment. .

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



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In addition to serving local veterans and amputees, the center could serve as a regional training center for disabled persons to train and participate in events to prepare for adaptive sports competitions including Paralympics, Warrior Games, and Invictus Games.

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

Elderly persons, veterans, persons with poor mental and physical health, economically disadvantaged persons, developmentally and physically disabled persons. We expect to serve 400-800 individuals.

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

Improvement of physical and mental health of veterans and amputees. At each appointment, the practitioner evaluates the patient.

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?

Repayment of funds.

15. Requester Contact Information

a. First Name	Arlene		Last Name	Gillis		
b. Organization	Veteran's Stride Foundation					
c. E-mail Address	arlene@ii	arlene@iiofoandp.org				
d. Phone Number	(813)517-	1741	Ext.			
16. Recipient Contact	6. Recipient Contact Information					
a. Organization	Veteran's	Stride Foundatio	on			
b. Municipality and	b. Municipality and County Hillsborough					
c. Organization Ty	c. Organization Type					
Ger Profit Entity	For Profit Entity					
☑Non Profit 501(c	(c)(3)					
□Non Profit 501(c	□Non Profit 501(c)(4)					
Local Entity	Local Entity					
□University or Co	□University or College					
□Other (please sp	□Other (please specify)					
d. First Name	First Name Arlene Last Name Gillis					
e. E-mail Address	arlene@iiofandp.org					
f. Phone Number	(813)517-1741					
17. Lobbyist Contact I	nformatio	n				
a. Name	Ronald Pierce					



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b. Firm Name	RSA Consulting Group LLC		
c. E-mail Address	ron@rsaconsultingllc.com		
d. Phone Number	(813)777-5578		