

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

LFIR # 1894

Project Title	Cold Case Reso	urces				
Senate Sponsor	Clay Yarborough	i				
3. Date of Request 10/27/2023						
Project/Program De	escription					
There are an estima We host a database provide consulting w	ated 20,000 unsolve of cases (already s vith experienced col	started), provide	training for	we provide a establishing	dvocacy for the fam cold case units whe	nilies of those vict re they don't exis
State Agency to red	ceive requested fu	nds Depai	rtment of L	aw Enforceme	ent	
State Agency conta	acted? Yes					
Amount of the Noni	recurring Request	for Fiscal Year	2024-202	5		
Type of Funding				Amo	unt	
Operations					250,000	
Fixed Capital Outlay					0	
Total State Funds I	Requested				250,000	
Type of Funding			Am	ount	Percentage	
Total State Funds R	equested (from que	stion #6)		250,000	53%	
Matching Funds				0	00/	
Federal	and a superior of the land of			140,000	0%	
State (excluding the Local	amount of this requ	iest)		140,000	30% 0%	
Other				80,000	17%	
Total Project Costs	s for Fiscal Year 20	024-2025		470,000	100%	
Has this project pre			Yes]		
Fiscal Year	Amo	ount	9	pecific	Vetoed	1
(уууу-уу)	Recurring	Nonrecurring	A	opriation #		
2022-23	0	150,0	000		No	
Is future funding lik	koly to be request	- d2	No]		
J	•		INO			1
a. If yes, indicate n	onrecurring amou	nt per year.				
b. Describe the sou	urce of funding tha	at can be used i	in lieu of s	tate funding.		
). Has the entity req	uesting this projec	et received any	federal as	sistance rela	ted to the COVID-	19 pandemic?
No						
If yes, indicate the	amount of funds	received and w	hat the fu	nds were use	d for.	
, 55,	vi iuiius i	- Juliu W		430	- · · · ·	



The Florida Senate **Local Funding Initiative Request**

Fiscal Year 2024-2025

LFIR # 1894	ı	FI	R	#	1	8	g	4
-------------	---	----	---	---	---	---	---	---

Complete que	estions 11 a	nd 12 for Fixed	l Capital Oi	utlay Projects	i
11. Status of Const	ruction				
a. What is the cu	urrent phase of t	he project?			
Planning	O Design	Construction	N/A		

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

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.

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

Spending Category	Amount	
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	75% of the Executive Director's salary will be included in this funding to cover costs associated with administrative duties and non-direct services to victims families.	56,250
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study	Accountant	13,750
Operational Costs: Other		
Salary and Benefits	Communications director to handle all community and law enforcement outreach along with social media management. Intake coordinator to handle all new families in identifying needs.	100,000
Expense/Equipment/Travel/Supplies/ Other	Traveling to law enforcement agencies and conferences for training. Updates computers, office supplies and training materials.	20,000
Consultants/Contracted Services/Study	Mental heath counseling services for staff self-care, facilitated support meeting and events. Awareness video production.	60,000
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?

A safer Florida by helping solve cold cases. Fewer survivors requiring state funding assistance due to counseling and resolution in their cases. Added jobs for a better economy. An effort by all to assure public safety but getting criminal off the streets.

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



Repayment of funds.

15

16

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

LFIR # 1894

We will hold trainings, speak at conferences and assist in reviewing cold cases for any and all law enforcement agency in the state. We will provide contracted mental health professionals to help families affected by the loss of a loved one to an unsolved homicide.

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

Raised awareness for their loved ones cases. Fresh eyes on the cases. Individual and group facilitated counseling.

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

Victims of crime - specifically families of unsolved homicide victims. With 20,000 unsolved murders in Florida, and each victim averaging 2-4 survivors we have the potential to assist 40-80 thousand survivors. However, realistically we won't have the staff for all of them and will likely serve well over 1,000.

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

Safer communities, better mental health for victims' family members. Added jobs. We continue services to these survivors and track employment and mental health progress.

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?

Requester Contact Information					
a. First Name	Ryan		Last Name	Backmann	
b. Organization	Project C	old Case, Inc.			
c. E-mail Address	ryanb@p	rojectcoldcase.o	rg		
d. Phone Number	(904)514	-9847	Ext.		
Recipient Contact Information					
a. Organization	Project C	old Case, Inc.			
b. Municipality and County Statewide					
c. Organization Ty	ре				
□For Profit Entity					
☑Non Profit 501(c)(3)					
□Non Profit 501(c)(4)					
□Local Entity					
□University or College					
□Other (please specify)					
d. First Name	Ryan		Last Name	Backmann	
e. E-mail Address	ryanb@p	rojectcoldcase.o	rg		
f. Phone Number	(904)514	-9847			



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

LFIR # 1894

17. Lobbyist Contact Informati	io	n
--------------------------------	----	---

a. Name	None
b. Firm Name	
c. E-mail Address	
d. Phone Number	