

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

LFIR # 1954

1. Project Title	Five Star Veterar	ns Center Home	eless Hou	sing and Re-int	egration Project	
2. Senate Sponsor	Clay Yarborough					
3. Date of Request	12/13/2023					
4. Project/Program D	escription					
other behavioral hea	alth issues. The goal red job skills through	l is to achieve g	reater se	f-determination	, independent living	t Traumatic Stress or , increased financial nievement plan to help
5. State Agency to re	ceive requested fu	n ds Depa	rtment of	Veterans' Affair	rs	
State Agency conta	acted? No					
6. Amount of the Non	recurring Request	for Fiscal Year	· 2024-20	25		
	. couring requoet		202 - 20		m4	
Type of Funding				Amo		
Operations					374,000	
Fixed Capital Outlay					074.000	
Total State Funds	Requested				374,000	ı
7. Total Project Cost	for Fiscal Year 2024	4-2025 (includi	ng match	ning funds ava	ilable for this proje	ect)
Type of Funding			A	mount	Percentage	
Total State Funds R	Total State Funds Requested (from question #6)			374,000	57%	
Matching Funds						
Federal				55,000	8%	
State (excluding the	State (excluding the amount of this request)			0	0%	
Local				60,000	9%	
Other				175,000	26%	
Total Project Costs	s for Fiscal Year 20	24-2025		664,000	100%	
8. Has this project pr	eviously received s	state funding?	Yes			
Fiscal Year	Amount			Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurrin	g App	propriation #		
2023-24	0	374,	000	593A	No	
9. Is future funding li	kelv to he requeste	d?	Yes			
•	nonrecurring amou		374,	000		
• •	urce of funding tha					
					'	
	g efforts with Local a					I
10. Has the entity req	uesting this projec	t received any	federal a	assistance rela	ated to the COVID-	19 pandemic?
Yes						
If ves indicate the	amount of funds r	eceived and w	hat the f	ınds were iise	d for	



11. Status of Construction

a. What is the current phase of the project?

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100,000

224,000

374,000

0

\$262,500, Which was put towards programmatic expenses such as food and housing for veterans, in addition to covering salaries of center employees as required per CARES Funding.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

Planning	O Design	Construction	N/A			
b. Is the project	'shovel ready"	(i.e permitted)?				
c. What is the es	timated start da	ate of construction?				
d. What is the es	timated comple	etion date of constru	iction?			
		o receive, directly o ers of the facility and		xed capital outlay	y funding. Inc	lude the
3. Details on how t	he requested s	tate funds will be ex	pended			
	•	tate funds will be ex	pended Descripti	on		Amount
3. Details on how to Spending Categor Administrative C	ory	tate funds will be ex	•	on		Amount
Spending Categor	osts:	tate funds will be ex	•	on		Amount
Spending Catego Administrative C Executive Director/F	osts: Project Head	tate funds will be ex	•	on		Amount
Spending Catego Administrative C Executive Director/F Salary and Benefits	osts: Project Head	Equipment and Programmer projections and principles.	Descripti gram materials sup	plies to support th		Amount (

Funding to support one (1) mental health counselor, who leads the centers efforts and guides the staff to meet the homeless veterans needs. One (1) FTE Residential Case Manager performing the duties

Program Residential Living Expenses (40) residents - Includes the

cost of three meals per day, housing, and program activities. Behavioral Health Assessment Instruments to capture veterans baseline symptoms and monitor progress in addressing the

14. Program Performance

Planning Engineering

Consultants/Contracted

Construction/Renovation/Land/

Services/Study

Operational Costs: Other

Expense/Equipment/Travel/Supplies/

Fixed Capital Construction/Major Renovation:

Salary and Benefits

Other

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

Total State Funds Requested (must equal total from question #6)

symptoms.

as outlined in the approved job description.



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The Five STAR Veterans Center helps homeless or displaced veterans who are suffering with Post Traumatic Stress or other behavioral health issues. The goal is to achieve greater self-determination, independent living, increased financial stability, and improved job skills through an individual Passport to Independence long-term goal achievement plan to help with re-integration to civilian life.

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

Five Star Veteran Center is Northeast Florida's only veteran housing community for homeless or displaced veterans, and the first facility in Florida that focuses solely on these men and women.

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

Provide evidence-based treatment methods focused on helping to develop solid strategies to promote healthy decision-making and to heal emotional/psychological distress of participants. Administer random urine drug and alcohol screens to residents.

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

Persons with poor mental and/or physical health, jobless and economically disadvantaged persons, homeless, drug users and/or offenders, currently or formerly incarcerated persons, and veterans.

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

Improve physical and mental health, enhance economic self-sufficiency, reduce recidivism and substance abuse, and divert from the criminal and juvenile justice system.

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?

Penalty- Money per day due to not meeting the minimum requirements as provided.

15. Re	quester Contact	Informati	on				
a. l	First Name	Francis		Last Name	Loving		
b.	Organization	Five Star	Veterans Center	•			
c.	E-mail Address	floving@f	svc.org				
d.	Phone Number	(904)723	-5950	Ext.			
16. Re	16. Recipient Contact Information						
a. (Organization	Five Star	Veterans Center	•			
b.	Municipality and	I County	Duval				
с. (Organization Typ	ре					
	For Profit Entity						
V	☑Non Profit 501(c)(3)						
	⊇Non Profit 501(c	:)(4)					
	Local Entity						
	University or Co	llege					



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□Other (please specify)

c. E-mail Address davis@thefiorentinogroup.com

d. Phone Number (904)358-2757

d. First Name	Suzie	Last Name	Loving			
e. E-mail Address	sloving@fsvc.org					
f. Phone Number	(904)723-5950					
17. Lobbyist Contact Information						
a. Name	Davis Bean					
b. Firm Name	The Fiorentino Group					