

LFIR # 1818

1.	Project Title	Financial Transp	arency and Dash	nboard System Pilot Pro	gram	
2.	Senate Sponsor	Ana Maria Rodrig	guez			
3.	Date of Request	12/4/2025				
4.	Project/Program De	escription				
	utilizing software from	m an approved vend access how and wh	dor on the MyFlo here tax dollars a	creasing collaboration b rida Marketplace. It also are being spent. Addition s.	o will provide a user	friendly way for
5.	State Agency to rec	ceive requested fu	nds Depar	tment of Financial Servi	ces	
	State Agency conta	acted? No				
	•					
6.	Amount of the Nonr	recurring Request	for Fiscal Year	2026-2027		1
	Type of Funding			Amo	unt	
	Operating				1,000,000	
	Fixed Capital Outlay				0	
	Total State Funds F	Requested			1,000,000	
7.	Total Project Cost fo	or Fiscal Year 2020	6-2027 (includin	ng matching funds ava	ilable for this proj	ect)
						1
	Type of Funding			Amount	Percentage	
	Total State Funds Ro	equested (from que	stion #6)	Amount 1,000,000	Percentage 100%	
	Total State Funds Romatching Funds	equested (from que	stion #6)	1,000,000	100%	
	Total State Funds Romatching Funds Federal			1,000,000	100%	
	Total State Funds Romatching Funds Federal State (excluding the			1,000,000	100% 0% 0%	
	Total State Funds Romatching Funds Federal State (excluding the Local			1,000,000 0 0	100% 0% 0% 0%	
	Total State Funds Romatching Funds Federal State (excluding the			1,000,000	100% 0% 0%	
	Total State Funds Romatching Funds Federal State (excluding the Local	amount of this requ	lest)	1,000,000 0 0	100% 0% 0% 0%	
8.	Total State Funds Romatching Funds Federal State (excluding the Local Other	amount of this requestions for Fiscal Year 20 eviously received s	nest) 26-2027 state funding?	0 0 0 0	100% 0% 0% 0% 0%	
8.	Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs Has this project profit yes, provide the research of the resea	amount of this requestions for Fiscal Year 20 eviously received s	nest) 26-2027 State funding? nce:	1,000,000 0 0 0 1,000,000 No Specific	100% 0% 0% 0% 0%	
8.	Total State Funds Remarks Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project press If yes, provide the remarks	amount of this request for Fiscal Year 20 eviously received smost recent instan	nest) 26-2027 State funding? nce:	1,000,000 0 0 0 1,000,000 No Specific	100% 0% 0% 0% 0% 100%	
8.	Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs Has this project profit yes, provide the research of the resea	amount of this request for Fiscal Year 20 eviously received smost recent instan	nest) 226-2027 state funding? nce:	1,000,000 0 0 0 1,000,000 No Specific	100% 0% 0% 0% 0% 100%	
	Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs Has this project profit yes, provide the research of the resea	amount of this request for Fiscal Year 20 eviously received smost recent instan	nest) 226-2027 state funding? nce: bunt Nonrecurring	1,000,000 0 0 0 1,000,000 No Specific	100% 0% 0% 0% 0% 100%	
	Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs Has this project profif yes, provide the romatching for the romatchin	amount of this request for Fiscal Year 20 eviously received smost recent instan Amo Recurring	nest) 226-2027 State funding? nce: Nonrecurring uested?	1,000,000 0 0 0 1,000,000 No Specific Appropriation #	100% 0% 0% 0% 0% 100%	
	Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project present of the remark of	amount of this requires for Fiscal Year 20 eviously received smost recent instan Amore Recurring	nest) 26-2027 State funding? nce: Nonrecurring uested? nt per year.	1,000,000 0 0 0 1,000,000 No Specific Appropriation #	100% 0% 0% 0% 0% 100%	
	Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project present of the remark of	amount of this requires for Fiscal Year 20 eviously received smost recent instan Amore Recurring	nest) 26-2027 State funding? nce: Nonrecurring uested? nt per year.	1,000,000 0 0 0 1,000,000 No Specific Appropriation #	100% 0% 0% 0% 0% 100%	



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the project?	
the project?	
○ Construction ○ N/A	
' (i.e permitted)?	
late of construction?	
letion date of construction?	
used for ongoing operations and maintenance of the project	et?
ers of the facility and the entity.	ding. Include the
Description	Amount
	C
	0
Yes - Software subscription annual fee + implementation fee	1,000,000
	0
	C
ns/	0
	0
ajor Renovation:	
	0
(must equal total from question #6)	1,000,000
	late of construction? letion date of construction? used for ongoing operations and maintenance of the project to receive, directly or indirectly, any fixed capital outlay funers of the facility and the entity. state funds will be expended Description S/ Yes - Software subscription annual fee + implementation fee

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



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A transportant way for siting to an easy with the dealth and an accept, an adding	
A transparent way for citizens to engage with the dashboard on county spending. d. Who is the target population served by this project? How many individuals are expected to be	e served?
	e serveu :
All the constituents of a county with a population of more than 2.5 million residents. e. What is the expected benefit or outcome of this project? What is the methodology by which the second of the constituents of a county with a population of more than 2.5 million residents.	his outcome will
be measured?	ins outcome win
-More transparency on how tax dollars are being spentThe dashboard and the traffic/interaction it receives from residents will measure the outcome.	
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 in the contract?	
Termination of contract	
14. Is this project related to mitigation, response, or recovery from a natural disaster? No	
a. If Yes, what phase best describes the project?	
☐ Mitigation (reducing or eliminating potential loss of life or property)	
□ Response (addressing the immediate and short-term effects of a natural disaster)	
□ Recovery (assisting communities return to normal operations, including rebuilding damaged infast	ructure)
b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):	
15. Has the entity applied for or received federal assistance for this project?	
☐ Yes, Applied	
☐ Yes, Received	
□ No	
☐ No, but intends to apply	
a. If yes, provide the FEMA project worksheet ID#:	
b. Provide the total project cost listed on the FEMA project worksheet:	
16. Has the entity applied for or received state assistance for this project (other than this request)?	
☐ Yes, Applied	
☐ Yes, Received	
□ No	
□ No, but intends to apply	



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Commerce):	c program	and state age	nicy (cx. Loca	ii Governiii	Emergenc		
Requester Contact	Informat	ion	7				
a. First Name	Patrick		Last Name	Vargos			
b. Organization	Anaplan	Inc.					
c. E-mail Address	patrick.va	argos@anaplan.	om				
d. Phone Number	(708)990-6435		Ext.				
Recipient Contact	Informatio	on					
a. Organization	Anaplan	Inc.					
b. Municipality and	d County	Statewide					
c. Organization Ty	ре						
☑For Profit Entity							
□Non Profit 501(d	:)(3)						
□Non Profit 501(d	:)(4)						
□Local Entity							
□University or Co	llege						
□Other (please sp	pecify)						
d. First Name	Patrick		Last Name	Vargos			
e. E-mail Address	patrick.va	argos@anaplan.	com				
f. Phone Number	(708)990	-6435	Ext.				
Lobbyist Contact I	nformatio	n					
a. Name	Amy C. E	Bisceglia					
b. Firm Name	Shumake	er Advisors Flori	da, LLC				
c. E-mail Address	amybisceglia@icloud.com						
d Phone Number	(813)361-4805						

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.