



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1858

1. Project Title Taylor County Schools Hurricane Recovery

2. Senate Sponsor Corey Simon

3. Date of Request 12/3/2025

4. Project/Program Description

Taylor county is seeking hurricane recovery funds for their schools due to the declining enrollment due to closures and the operational costs associated with emergency hurricane shelters. Three hurricanes, two of which were major hurricanes, have made landfall in Taylor County since August 2023, Idalia, Debby, and Helene.

5. State Agency to receive requested funds Department of Education

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	3,000,000
Fixed Capital Outlay	0
Total State Funds Requested	3,000,000

7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	3,000,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2026-2027	3,000,000	100%

8. Has this project previously received state funding? Yes

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2025-26	0	3,000,000	111	No

9. Is future-year funding likely to be requested? Yes

a. If yes, indicate nonrecurring amount per year. 3,000,000

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

N/A

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction



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a. What is the current phase of the project?

☐ Planning ☐ 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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

12. 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		
Salary and Benefits	Due to the fact that the district incurred a total FTE loss of 217, resulting in a decrease in revenue of approximately \$1,736,000 this will help supplement salaries and benefits. experienced a reduction of \$1,374,000 in capital outlay funds due to decreased property tax revenue.	1,700,000
Expense/Equipment/Travel/Supplies/Other	The District experienced a reduction of \$1,374,000 in capital outlay funds due to decreased property tax revenue. This will go towards maintenance and security needs that the district can't cover.	1,300,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		3,000,000

13. Program Performance

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

The district will be able to keep from going into a deficit due to lack of funds. The district has emergency loans that must be paid back as well as ongoing repairs that are still being paid for.

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

The district will be able to serve the students and maintain a safe learning environment.



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

The district will still be able to provide all services to students and the citizens will still have an emergency shelter.

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

The students and citizens of Taylor County. More than 18,0000 people will benefit.

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

The district will be able to stay functioning as normal.

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?

The district will return the money if it is not used.

14. Is this project related to mitigation, response, or recovery from a natural disaster? Yes

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 infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

Hurricanes, Idalia, Debby and Helene

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#:

N/A

b. Provide the total project cost listed on the FEMA project worksheet:

0

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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a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

Funds from the legislature distributed by DOE

17. Requester Contact Information

a. First Name Last Name
b. Organization
c. E-mail Address
d. Phone Number Ext.

18. Recipient Contact Information

a. Organization
b. Municipality and County

c. Organization Type

- ☐ For Profit Entity
☐ Non Profit 501(c)(3)
☐ Non Profit 501(c)(4)
☒ Local Entity
☐ University or College
☐ Other (please specify)

d. First Name Last Name
e. E-mail Address
f. Phone Number Ext.

19. Lobbyist Contact Information

a. Name
b. Firm Name
c. E-mail Address
d. Phone Number

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