

LFIR # 1094

1. Project Title	Fatherhood Initi	ative - WeFam L	Jnite	d. Inc		
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2. Senate Sponsor	Jason Brodeur					
3. Date of Request	02/03/2023					
4. Project/Program De	escription					
them towards health	y relationships with such as legal supp	n their kids, famil	lies, a	and communities. M	ore specifically, fath	ch father and encourage ers will receive support (spiritual counseling
5. State Agency to red	ceive requested fu	unds Depa	ırtme	ent of Children and Fa	amilies	
State Agency conta	cted? Yes					
6. Amount of the Noni	ecurring Request	t for Fiscal Year	r <b>202</b>	3-2024		
Type of Funding				Amo	unt	
Operations					200,000	
Fixed Capital Outlay					0	
Total State Funds I	Requested				200,000	
7. Total Project Cost f	or Fiscal Year 202	23-2024 (includi	ng n	natching funds ava	lable for this proje	ect)
Type of Funding				Amount	Percentage	
Total State Funds R	equested (from que	estion #6)		200,000	74%	
Matching Funds						
Federal				0	0%	
State (excluding the	amount of this req	uest)		0	0%	
Local				70,000	26%	
Other				0	0%	
<b>Total Project Costs</b>	for Fiscal Year 2	023-2024		270,000	100%	
8. Has this project pre	eviously received	state funding?		No		
Fiscal Year (yyyy-yy)	Am Recurring	ount Nonrecurrin	a	Specific Appropriation #	Vetoed	
	rtodaring	- Noniocarrin	9			
9. Is future funding lik	cely to be request	ed?		No		
a. If yes, indicate n	•		[			
•	•					
b. Describe the sou	rce of funding th	at can be used	in lie	eu of state funding.		
10. Has the entity req	uestina this proje	ct received any	, fed	eral assistance rela	ted to the COVID-1	I9 nandemic?
	acoming time proje	or received arry	icut	J. a. 45515141166 1614		o panaomio:
No						
If yes, indicate the	amount of funds	received and w	hat t	the funds were use	d for.	



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Complete qu	uestions 11	and 12 for Fixed Cap	ital Outlay	Projects		
11. Status of Con	struction					
a. What is the	current phase of	of the project?				
OPlanning	ODesign	Construction				
b. Is the projec	ct "shovel read	y" (i.e permitted)?				
c. What is the	estimated start	date of construction?				
d. What is the	estimated com	pletion date of construction?				
		y to receive, directly or indirec		capital outlay fu	unding. Include the	<b>)</b>

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

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits	1 Full-time Program Coordinator	30,000			
Other Salary and Benefits	1 Part-time Administrative Assistant	20,000			
Expense/Equipment/Travel/Supplies/Other	Client Transportation Expenses	1,000			
Consultants/Contracted Services/Study	Outside consultant to perform work as a non-salaried entity	30,000			
Operational Costs: Other					
Salary and Benefits		0			
Expense/Equipment/Travel/Supplies/ Other	Building Lease, Utilities, Client Transportation Expenses, Computers, Program Supplies, Office Expenses, Food	105,000			
Consultants/Contracted Services/Study	Outside consultant or contractor to perform marketing and technical support services (i.e; website, social media, data acquisition and tracking), purchase of a General Liability Insurance Policy and occupational licenses	14,000			
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/Land/ Planning Engineering		0			
Total State Funds Requested (must equal total from question #6)					

### 14. Program Performance

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

The specific goals that will be achieved by the funds requested for the program is to remove barriers for each father and encourage them towards healthy relationships with their kids, families, and communities. More specifically, fathers will receive support in removing barriers such as legal support, health surrogates, living wills, job placement, counseling (spiritual counseling included), and much more.

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



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The activities and services that will be provided to meet the purpose of the funds are group talks (in person/zoom), legal support of various types, dad to dad mentoring, job placement, youth interaction days, and father outings (with children as well).

- c. What direct services will be provided to citizens by the appropriation project?
- 1. Weekly Calls to every father
- 2. Administrative Support on any resources needed to remove a barrier
- 3. Access to therapist, counselors (spiritual as well), lawyers, and all forms resources needed to help remove their barriers.
- d. Who is the target population served by this project? How many individuals are expected to be served?

At-risk youth, grade school students, and high school students. Approximately up to 200 more families are expected to served by this program with the state funding.

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

The following outcomes are expected from this project:

- 1. Improve mental health
- 2. Improve quality of education

The methodology used to evaluate these benefits will include scoring using a pre-test/ post-test, as well as weekly progress reports conducted by staff.

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 to the state on a pro-rata basis.

15. I	Requester Contact	t Informati	ion					
á	a. First Name	Jemile		Last Name	Weeks			
ı	b. Organization	WeFam l	Jnited, Inc					
(	c. E-mail Address	wefamun	wefamunited@gmail.com					
(	d. Phone Number	(407)757	-4987	Ext.				
16. I	16. Recipient Contact Information							
í	a. Organization WeFam United, Inc							
ı	b. Municipality and County Orange							
c. Organization Type								
	□For Profit Entity							
	☑Non Profit 501(c)(3)							
	□Non Profit 501(c)(4)							
	□Local Entity							
	□University or College							
	□Other (please specify)							



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d. First Name	Jemile	Last Name	Weeks			
e. E-mail Address	fidcares@gmail.com					
f. Phone Number	(407)757-4987					
17. Lobbyist Contact Information						
a. Name	Daniel Sohn					
b. Firm Name	Floridian Group, LLC.					
c. E-mail Address	daniel@flagroupllc.com					
d. Phone Number	(954)243-4705					