



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 1188

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Florida consistently ranks as a top destination for human trafficking activity. With so much activity, according to a recent survey, there was a list of 152 victims waiting to enter into restorative transition programs. Working with community experts, NO MORE has developed a plan to add transition program capacity, so more victims are most effectively served. Our desire is for Tampa Bay to fall off the list as a top spot for trafficking and for victims to succeed.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	1,226,453
Fixed Capital Outlay	0
Total State Funds Requested	1,226,453

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,226,453	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 2024-2025	1,226,453	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	814,735		No

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

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

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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PPP loan for \$11,208 - loan has been forgiven

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

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?

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	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: Other		
Salary and Benefits	Time for CEO, Executive Director, Executive Administrator, Outreach Director, Anti-Human Trafficking Director, Anti-Trafficking Program Specialist, Program Coordinator and Creative Director. Includes percentage of salaries and benefits tied to project work needed.	255,928
Expense/Equipment/Travel/Supplies/Other	Direct services: includes rent & expenses for current homes in Tampa & St. Pete - \$282,931; new homes in Lutz & Polk County- \$320,000; Rent in new Tampa apartment - \$42,000; Rescue expenses - \$77,400; Record Expungement - \$80,000; Community training & awareness events - \$79,476; Expenses (supplies, travel, cell phone, equipment) - \$36,718.	918,525
Consultants/Contracted Services/Study	Accounting services=\$16,000; Community Partnership Recruitment & Project Quality Assurance \$36,000	52,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		1,226,453

14. Program Performance

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



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

We will offer training to churches, schools, businesses and law enforcement, educating them on what to look for and how traffickers operate. Working with local law enforcement and a security firm led by former FBI agents, we will identify and remove victims. Finally, collaborating with leading programs in the area, we will add capacity and staff to walk victims through recovery.

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

Working closely with Created, we will provide the following services: comprehensive, evidence-based, trauma-informed and recovery-oriented residential services for clients; ongoing communication with members of the collaborative and six educational human trafficking trainings for local partners.

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

The target population is victims of crimes, specifically human trafficking. We will serve 200-400 victims. In addition, we will offer training to the community, including schools, churches, businesses, healthcare, and law enforcement. Training will be completed for thousands of participants.

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

For survivors - Through transitional services, human trafficking survivors will see improved physical health, mental health, job training and support. Outcomes will be measured by the number of survivors served and Case Manager recorded observations.
 For the community - By removing human trafficking victims from the community, the opportunity for abuse will be reduced. Also training sessions will inform the public on the issue and increase awareness. Outcomes will be measured by the number of survivors served, Case Manager recorded observations, and number of attendees at training sessions.

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?

The organization would return the funds to the State if they failed to meet the criteria.

15. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

16. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

For Profit Entity

Non Profit 501(c)(3)



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- 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

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number