



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 2987

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The funding request is aimed at supporting various initiatives and programs under the Hillsborough County Black Chamber of Commerce (HCBCC). These programs include business development workshops, mentorship programs, networking events, and community engagement activities. The goal is to empower black entrepreneurs and businesses within Hillsborough County, fostering economic growth and community development.

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	250,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>250,000</b>

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)	250,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>250,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

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.

Potential sources of funding that can be used in lieu of state funding include grants, corporate sponsorships, and local fundraising efforts.

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



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

## 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
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	Managing Director	40,000
Other Salary and Benefits	includes program manager, secretary, administrative assistant, stipends, and salary benefits	73,800
Expense/Equipment/Travel/Supplies/Other	includes office rent, utilities, website maintenance, staff training, marketing, travel, professional services, and contingency fund	6,200
Consultants/Contracted Services/Study	Advocacy and economic educational programs	10,000
<b>Operational Costs: Other</b>		
Salary and Benefits	entrepreneurship development and professional development programs	100,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	entrepreneurship development and advocacy programs	20,000
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>250,000</b>

### 14. Program Performance

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

The funds requested will enable HCBCB to provide essential support and resources to black entrepreneurs, fostering economic growth and community development within Hillsborough County.

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



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These funds will support business development workshops, mentorship programs, networking events, and community engagement activities.

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

Mentoring, coaching, strategic analysis, ribbon cutting ceremonies, negotiations and technical support to Hillsborough County entrepreneurs, small business owners, and general community members seeking Chamber services.

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

Approximately 500-800 individuals annually

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

The project aims to create sustainable, successful businesses, leading to job creation, economic empowerment, and a stronger community. The outcome will be measured by tracking business growth, job opportunities created, and community engagement metrics. Outcome measurement will involve tracking business success, job opportunities, community participation, and satisfaction surveys from program participants.

**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?**

Penalties for failing to meet deliverables or performance measures may include reduced funding allocation for subsequent years, program modifications, or reevaluation of program leadership.

**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)

Non Profit 501(c)(4)

Local Entity

University or College

Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**



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f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number