



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** National Cancer Institute Experimental Therapeutics (NExT) Program

2. **Senate Sponsor:** Debbie Mayfield

3. **Date of Submission:** 11/16/2017

4. **Project/Program Description:**

Since funding is, and has been for several years, provided for Florida’s NIH-designated Centers for AIDS Research, it is requested that the Legislature consider similar funding for Florida’s NIH-designated Centers for Cancer Research. From the Florida Department of Health, “Cancer represents the most common cause of death in Florida.” Support is requested from the State of Florida to support research organizations within Florida that are specifically designated by the National Cancer Institute. Ultimately, this effort is to address the burden of cancer on Florida’s population. Funds are requested to support Florida headquartered academic and research institutions designated as centers within the Chemical Biology Consortium in the NCI Experimental Therapeutics (NExT) Program by the National Institutes of Health to address unmet needs in therapeutic oncology conducted in response to the health needs of Florida’s citizens.

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?
Department of Health

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
1,000,000		1,000,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	1,000,000	50.0%
State (excluding the amount of this request)	0	0.0%
Local	0	0.0%
Other	0	0.0%
TOTAL	1,000,000	50.0 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 2,000,000



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

9. Previous Year Funding Details:

- Has funding been provided in a previous state budget for this activity? Yes
- In the previous 5 fiscal years, how many years was funding provided? (Optional) 1
- What is the most recent fiscal year the project was funded? 2017-18
- Were the funds provided in the most recent fiscal year subsequently vetoed? Yes
- Complete the following Worksheet.

FY:	Input Prior FY Appropriation for this project for FY 2017-18		
	(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	A	B	C
Funds Description:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)
Input Amounts:		100,000	100,000

10. Is future-year funding likely to be requested?

Yes

- If yes, indicate non-recurring amount per year.

1,000,000

11. Program Performance:

- What is the specific purpose or goal that will be achieved by the funds requested?

The goal is to support FL academic and research institutions designated by the National Institutes of Health as Specialized Centers within the NExT Program to enhance high quality cancer research projects conducted in response to the health needs of FL citizens. From the National Cancer Institute's web page: "The mission of the NExT Program is to advance clinical practice and bring improved therapies to patients with cancer by supporting the most promising new drug discovery and development."

- What are the activities and services that will be provided to meet the intended purpose of these funds?

Support for the NCI program to meet the needs of Florida's citizens to address the growing concerns of cancer and its effects on the population.

- How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input checked="" type="checkbox"/> Salary and Benefits	Cancer research to support NCI designation	500,000
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	Supplies and travel to support cancer research	400,000
<input checked="" type="checkbox"/> Consultants/Contracted Services/Study	Florida partner fees to advance cancer research	100,000
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		1,000,000

d. What are the direct services to be provided to citizens by the appropriations project?

The importance of cancer research cannot be underestimated. The direct services to Florida's citizens are to support the National Cancer Institute's mission by supporting Florida research institutes selected to participate in the program.

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

Today and tomorrow's cancer patients are expected to benefit from the ongoing research within the National Cancer Institute's Experimental Therapeutics Program.

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

The criteria for support rely upon selection by the National Institutes of Health, specifically the National Cancer Institute (NCI) for participation in this national program.

g. 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 Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

Funds should only be provided to those Florida-headquartered institutes that have been honored to be selected to participate in the national program.

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

None

13. Requestor Contact Information:

- a. **Name:** Gred Welmaker, PhD Pres
- b. **Organization:** Torrey Pines Institute for Molecular Studies
- c. **Email:** gwelmaker@tpims.org
- d. **Phone Number:** (772)345-4582

14. Recipient Contact Information:

- a. **Organization:** Torrey Pines Institute for Molecular Studies
- b. **County:** Martin
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify)
- d. **Contact Name:** Gred Welmaker, PhD Pres
- e. **E-mail Address:** gwelmaker@tpims.org
- f. **Phone Number:** (772)345-4582

15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. **Name:** Jordan Connors
- b. **Firm:** Jordan Connors Group, Inc
- c. **Email:** jordan@jordanconnors.com
- d. **Phone Number:** (904)206-1604