



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 2127

1. **Project Title** Apiculture Diagnostics Pilot Program2. **Senate Sponsor** Bill Montford3. **Date of Request** 01/07/20204. **Project/Program Description**

The project is to establish a diagnostic service at the UF Honey Bee Research and Extension Lab in support of Florida's apiary industry. The apiary diagnostic service would provide a quick turnaround on submitted samples, enabling beekeepers to make timely science based management decisions for colony health. The data obtained will contribute to building a centralized database, enabling researchers to identify pathological patterns around the state that impact the industry.

5. **State Agency to receive requested funds** Department of Agriculture and Consumer ServicesState Agency contacted? ☐ Yes ☒ No6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	280,000
Fixed Capital Outlay	000
Total State Funds Requested	280,000

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	280000	100.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	00	0 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	280,000	100 %

8. **Has this project previously received state funding?** ☐ Yes ☒ No

If yes, provide the most recent instance:

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

9. **Is future-year funding likely to be requested?** ☒ Yes ☐ No

If yes, indicate nonrecurring amount per year. 250,000



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10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		<input style="width: 90%;" type="text"/>
Other Salary and Benefits		<input style="width: 90%;" type="text"/>
Expense/Equipment/Travel/Supplies/Other		<input style="width: 90%;" type="text"/>
Consultants/Contracted Services/Study		<input style="width: 90%;" type="text"/>
Operational Costs: Other		
Salary and Benefits	Diagnostic Specialist \$75,000 Salary + \$36,450 Benefits = \$111,450 Lab Assistant Position \$35,000 Salary + \$17,010 Benefits = \$52,010	163,460
Expense/Equipment/Travel/Supplies/Other	Dedicated diagnostic equipment Lab Supplies Consumables Computers /Technology Indirect cost (to UF) @ 12% of total appropriation	116,540
Consultants/Contracted Services/Study		<input style="width: 90%;" type="text"/>
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		<input style="width: 90%;" type="text"/>
Total State Funds Requested (must equal total from question #6)		280,000



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11. Program Performance

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

Laboratory diagnostic services to the apiary industry

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

Beekeepers will be able to submit bee samples for pathogen and health testing at levels not normally possible in the field. Based on diagnostic data, beekeepers will be enabled to make science based decisions for managing apiary health

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

Florida beekeepers will be able to utilize data provided to make science based management decisions regarding honey bee health.

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

The agriculture sector is the primary target population served. Specifically the 5000+ registered Florida beekeepers. Agricultural producers who rely on honey bees as pollinators will benefit from improved pollinator health. Consumers stand to benefit from increases in agricultural productivity.

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

The outcome will be measured over time through decreased colony losses and improved colony health.

- 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?

Failing to meet performance measures should result in the discontinuance of the program.



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12. **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.**

No fixed capital outlay funding requested

13. **Requestor Contact Information**

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

14. **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

15. **Lobbyist Contact Information**

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