

## The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 2960

I. Project Title	Arcadia Speer C	Center Renovation			
2. Senate Sponsor	Ben Albritton				
B. Date of Request	03/08/2023				
. Project/Program D	escription				
Renovation of histo Center for the YMC	oric building in Arcad A of Southwest Flor are, summer camp, v	ida. The YMCA will youth sports, and v	e Speer Center to be i I provide various youth arious other youth and	ı programming inclu	udina childcare servic
5. State Agency to re	ceive requested fu	inds Departm	ent of Education		
State Agency conta	acted? No				
. Amount of the Non	recurring Request	for Fiscal Year 20	023-2024		
Type of Funding			Amo	unt	
Operations				0	
Fixed Capital Outlay				500,000	
Total State Funds Requested				500,000	
•	for Fiscal Year 202	3-2024 (including	matching funds avai		ect)
Type of Funding			Amount	Percentage	
Total State Funds R	Requested (from que	estion #6)	500,000	34%	
Matching Funds				00/	
Federal  State (avaluating the amount of this request)			0	0% 0%	
State (excluding the amount of this request)			500,000	33%	
Local Other			500,000	33%	
Total Project Costs for Fiscal Year 2023-2024			1,500,000	100%	
Total Project Costs	S IUI FISCAI TEAI Z	023-2024	1,300,000	100 /6	ı
3. Has this project pr	eviously received	state funding?	No		
Fiscal Year		punt	Specific "	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
). Is future funding li	kely to be requeste	ed?	No		
a. If yes, indicate n	nonrecurring amou	ınt per year.			
b. Describe the so	urce of funding the	at can be used in I	lieu of state funding.		
					]
0. Has the entity req	uesting this proje	ct received any fe	deral assistance rela	ted to the COVID-	19 pandemic?
Yes					

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



11. Status of Construction

Planning

a. What is the current phase of the project?

Design

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The YMCA of Southwest Florida (formerly known as The SKY Family YMCA, Inc.) received Covid Relief federal funding in the form of Payroll Protection Program (PPP) loans through the Small Business Administration. We received two loans, one for \$2.2 million and one for \$2 million. Both loans were fully forgiven after providing qualifying expenses as justification for the forgiveness.

#### Complete questions 11 and 12 for Fixed Capital Outlay Projects

Construction

b. Is the project "shovel ready" (i.e permitted)?	No
c. What is the estimated start date of construction?	July 1, 2023
d. What is the estimated completion date of construction?	March 31, 2024
List the owners of the facility to receive directly or indirec	ly any fixed canital outlay funding. Include the
2. List the owners of the facility to receive, directly or indirect relationship between the owners of the facility and the ent	

#### 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		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Renovations to Speer Center	500,000
Total State Funds Requested (must equal total from question #6) 500,000		

#### 14. Program Performance

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

Provide funding for the renovation of an old and vacant former Nation Guard Armory building into usable program space.

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



15.

16.

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Allow a vacant building to be used to serve the Arcadia and DeSoto County community. Programs will include childcare,

after school care, or living, and social re	camps, youth sports, and o	ther adult and	d family program	nming focus	ed on youth de	velopment, healthy
c. What direct ser	vices will be provided to	citizens by t	he appropriation	on project?	•	
Childcare, After so	chool care, Camp, Sports,	Adult and Far	mily programs			
d. Who is the targ	et population served by	this project?	How many ind	lividuals ar	e expected to	be served?
Youth, families, ar	nd seniors of the greater A	rcadia commi	unity, anticipate	serving 100	)+ program par	icipants daily
e. What is the exp be measured?	ected benefit or outcome	∍ of this proj	ect? What is th	e methodo	logy by which	this outcome will
Strengthen familie	es, provide affordable high	quality childc	are and youth pr	rograms		
for failing to meet	ggested penalties that th deliverables or performa					s standard penaltie
Revoke childcare	license for that site.					
Requester Contact	Information					
a. First Name	Gene	Last Name	Jones			
b. Organization	YMCA of Southwest Florida, Inc.					
c. E-mail Address	gjones@ymcaswfl.org					
d. Phone Number	(941)375-9101	Ext.				
Recipient Contact	Information					
a. Organization	YMCA of Southwest Flori	da, Inc.				
b. Municipality and	d County DeSoto					
c. Organization Ty	ре					
□For Profit Entity						
☑Non Profit 501(d	c)(3)					
□Non Profit 501(d	c)(4)					
□Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
d. First Name	John	Last Name	Campbell			
e. E-mail Address	jcampbell@ymcaswfl.org					
f. Phone Number	(941)375-9103					

17. Lobbyist Contact Information



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