



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1239

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This program would fund the distribution of 25,000 healthy after-school snack packs for disadvantaged children in Palm Beach County.

5. State Agency to receive requested funds

State Agency contacted?  Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	350,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>350,000</b>

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	350,000	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 2023-2024</b>	<b>350,000</b>	<b>100%</b>

8. Has this project previously received state funding?  No

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

9. Is future funding likely to be requested?  No

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?

No

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



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## 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

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	1 Project Manager	25,900
Other Salary and Benefits	2 Delivery Drivers	12,000
Expense/Equipment/Travel/Supplies/Other	Gas Reimbursement for delivery of the snack packs to the children and pick up of the groceries	700
Consultants/Contracted Services/Study	Hiring of an outside consulting firm - as a non-entity employee - to provide compliance and technical assistance	35,000
<b>Operational Costs: Other</b>		
Salary and Benefits	1 Program Coordinator	9,100
Expense/Equipment/Travel/Supplies/Other	Purchase of 25,000 bags, labels, and fresh fruit and snacks to fill snack packs; storage containers; activity books; office storage; and an aluminum walk ramp for loading of the delivery vehicles	265,600
Consultants/Contracted Services/Study	Purchase of a General Liability Insurance Policy	1,700
<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>350,000</b>

### 14. Program Performance

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

This program would fund the distribution of 25,000 healthy after-school snack packs for disadvantaged children in Palm Beach County.

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

Delivery of healthy snack packs to 25,000 disadvantaged children in Palm Beach County

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

Delivery of healthy snack packs to 25,000 disadvantaged children in Palm Beach County



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

Economically-Disadvantaged Persons, Homeless, At-risk Youth, and Grade School Students . The program will serve approximately 25,000 children in Palm Beach County.

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

Overall improvement of physical health by reducing food insecurity in Palm Beach County. This outcome will be measured using standard socio-economic data sets provided by industry-recognized professionals.

**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?**

Repayment of funds to the state on a pro-rated basis

**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**

**f. Phone Number**

**17. Lobbyist Contact Information**

**a. Name**

**b. Firm Name**

**c. E-mail Address**



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d. Phone Number