



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 3658

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Legal Foundation will provide free consultation, guidance and representation to low income and underserved individuals and their families, providing them the same legal recourse and accessibility to our justice system as any other Floridian.

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	300,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>300,000</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)	300,000	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>300,000</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.

Local match dollars and contribution from other charitable organizations.

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

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   
  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	Executive Director	60,000
Other Salary and Benefits	Office Manager	45,000
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Full-time attorneys, paralegals, and one receptionist.	120,000
Expense/Equipment/Travel/Supplies/Other	Court costs, litigation costs and fees. Insurance, office equipment, rent and payroll services.	30,000
Consultants/Contracted Services/Study	Court costs, litigation costs and fees. Insurance, office equipment, rent and payroll services.	45,000
<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>300,000</b>

### 14. Program Performance

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

Legal Foundation will provide free consultation, guidance and representation to low income and underserved individuals and their families, providing them the same legal recourse and accessibility to our justice system as any other Floridian.

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



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

Legal services and representation.

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

Low income and underserved individuals and their families. At least 200 individuals and families.

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

Ensuring that members of our community that would not otherwise be able to afford to have legal representation and protection will improve their mental and physical health and overall well being. The outcome will be measured by the number of clients we serve, which will be documented by intake forms, logs, files and case management software.

**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?**

If deliverables and performance measures are not met, funds will be deducted from the amount provided to the Legal Foundation.

**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



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#### 17. Lobbyist Contact Information

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