



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 2796

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

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	0
Fixed Capital Outlay	700,000
Total State Funds Requested	700,000

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)	700,000	22%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	900,000	28%
Local	0	0%
Other	1,600,000	50%
Total Project Costs for Fiscal Year 2024-2025	3,200,000	100%

8. **Has this project previously received state funding?**

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	450,000	474B	No

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.**

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.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 2796

The YMCA of Florida's First Coast received \$2.5M in support of financial recovery efforts from the negative operational effects of a mandatory closure during the pandemic.

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)?

No

c. What is the estimated start date of construction?

Q1 2025

d. What is the estimated completion date of construction?

Q3 2026

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.

Not for Profit 501c3 organization

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/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Planning, construction of new ADA compliant facilities, accessible program elements, construction of new and remodel of existing infrastructure to facilitate participants of all physical ability.	700,000
Total State Funds Requested (must equal total from question #6)		700,000

14. Program Performance

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

Requested funds will build upon prior funding to adapt Immokalee an ADA compliant facility, allowing service to all physical abilities including but not limited to veterans and the Keystone Heights community at large. Our goal is to make Immokalee an environment for physical and mental wellness, no matter ones physical ability.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 2796

Physical and mental wellness programs for all veteran groups, military family support programs, senior health and wellness, youth health and wellness

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

Provide food and meal distribution, emergency supplies and shelter for the community and surrounding service areas. Serve as a location for community health screenings, vaccination education and distribution in partnership with health partners. Provide space for expanded programming to support children, veterans, active duty service members and members of the community with unique abilities.

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

Elderly persons, persons with poor mental and/or physical health, economically disadvantaged persons, at-risk youth, developmentally and/or physically disabled persons, grade and high school students, college students, and active military and veterans.

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

Outdoor activity helps reduce stress and provides relief for anxiety and depression. PTSD is a condition that plagues our veteran community and outdoor activity helps to heal the invisible wound of combat.

More specialized staff will be hired to accommodate the increase in participants and to provide the programs and support for communities currently not served.

There will be at least 25 new positions created as a result of this new project.

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?

Penalty- Money per day due to not meeting the minimum requirements as provided.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 2796

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

d. Phone Number