



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Crime Prevention Neighborhood Watch/Youth Crime Watch

2. **Senate Sponsor:** Rene Garcia

3. **Date of Submission:** 01/22/2018

4. **Project/Program Description:**

Crime Prevention in Neighborhoods & Schools

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

Department of Law Enforcement

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
100,000		100,000

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	100,000	16.7%
Local	326,050	54.6%
Other	71,500	12.0%
TOTAL	497,550	83.3 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 597,550

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?

d. Were the funds provided in the most recent fiscal year subsequently vetoed?

e. Complete the following Worksheet.



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<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b> (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</b>			

### 10. Is future-year funding likely to be requested?

No

### 11. Program Performance:

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

Expanding Neighborhood Watch & Crime Prevention program throughout Miami-Dade County and its municipality as well as expanding various school programs such as bullying, drugs and gun violence prevention and more in Miami-Dade County Schools.

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

Neighborhood Watch meetings, School Programs, Safety Events, educating multicultural communities with educational materials.

#### c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	For publications, printing & promotional supplies.	100,000
<input type="checkbox"/> Consultants/Contracted Services/Study		
Operational Costs		
<input type="checkbox"/> Salary and Benefits		



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<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input type="checkbox"/> Construction/Renovation/Land/Planning Engineering		
TOTAL		100,000

**d. What are the direct services to be provided to citizens by the appropriations project?**

Educating citizens in the prevention of crime and educate ours students in crime prevention through topics such as Bullying, Drugs, violence, gun violence, stranger danger, reporting crime and much more.

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

Target Seniors, multicultural residents and Youth. Our target is to reach about 30,000 to 40,000 individuals.

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

Reduction of crime in neighborhoods, awareness of scams to seniors and help the school create a safe environment for the students. To measure the outcome we could use crime statistics from local police as well as surveys from our residents.

**g. 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?**

To terminate contract and refund the funds that were issued.

**12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.**

None

**13. Requestor Contact Information:**

- a. **Name:** Carmen Caldwell
- b. **Organization:** Citizens' Crime Watch of Miami-Dade
- c. **Email:** Carmen@citizenscrimewatch.org
- d. **Phone Number:** (305)298-6632

**14. Recipient Contact Information:**

- a. **Organization:** Citizens' Crime Watch of Miami-Dade
- b. **County:** Miami-Dade
- c. **Organization Type:**
  - ☐ For Profit



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## *Local Funding Initiative Request - Fiscal Year 2018-2019*

- ☒ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☐ Local Entity
- ☐ University or College
- ☐ Other (Please specify)

**d. Contact Name:** Carmen Caldwell

**e. E-mail Address:** Carmen@citizenscrimewatch.org

**f. Phone Number:** (305)298-6632

**15. If there is a registered lobbyist, fill out the lobbyist information below.**

**a. Name:** None

**b. Firm:** None

**c. Email:**

**d. Phone Number:**