



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1748

1. Title of Project: Child Learning Center - Little Havana Activities and Nutrition Center

2. Senate Sponsor: Anitere Flores

3. Date of Submission: 02/11/2019

4. Project/Program Description:

Approximately 70 families will receive a \$40 a week subsidy for the period of 1 year. Outcome: Access to affordable quality child care services. Methodology: Proof of family income not exceeding 200% of the federal poverty level; at least 1 household member who is employed; or at least 1 educational class; or 1 household member actively seeking employment.

5. State Agency to receive requested funds : Office of Early Learning

State Agency Contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020

Type of Funding	Amount
Operations	200,000
Fixed Capital Outlay	
Total State Funds Requested	200,000

7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	200,000	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	200,000	100.0%

8. Has this project previously received state funding? Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		
2018-19		100,000		No

9. Is future-year funding likely to be requested? Yes

a. If yes, indicate non-recurring amount per year. 200,000

10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
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Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Salaries and benefits for the program administrator that oversees the program.	14,000
Other Salary and Benefits	Salaries and benefits for the accounting staff assigned to the program.	6,000
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits	Salaries and benefits of child day care teachers.	34,400
Expense/Equipment/Travel/Supplies/Other	Funds requested will be used to provide a subsidy for children who receive child day care services. Subsidy will be \$40 for 70 children for 52 weeks.	145,600
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		200,000

11. Program Performance:

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

Approximately 70 families will receive a \$40 a week subsidy for the period of 1 year. Outcome: Access to affordable quality child care services. Methodology: Proof of family income not exceeding 200% of the federal poverty level; at least 1 household member who is employed; or at least 1 educational class; or 1 household member actively seeking employment.

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

Child Care Services

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

Funds requested will be used to provide a subsidy for children who receive child day care services. Subsidy will be \$40 for 70 children for 52 weeks.

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

Pre-school aged children and their families

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

Outcome: Access to affordable quality child care services. Methodology: Proof of family income not exceeding 200% of the federal poverty level; at least 1 household member who is employed; or at least 1 educational class; or 1 household member actively seeking employment.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard



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penalties for failing to meet deliverables or performance measures provided for in the contract?

Not funding the request a subsequent year.

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.

N/A

13. Requestor Contact Information:

- a. **Name:** Rafael Iglesias
- b. **Organization:** Little Havana Activities & Nutrition Centers of Dade County, Inc.
- c. **E-mail Address:** RIglesias@LHANC.org
- d. **Phone Number:** (305)858-0887 Ext. 1274

14. Recipient Contact Information:

- a. **Organization:** Little Havana Activities & Nutrition Centers of Dade County, Inc.
- b. **County:** Miami-Dade
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify)
- d. **Contact Name:** Betty Ruano
- e. **E-mail Address:** BRuano@Lhanc.org
- f. **Phone Number:** (786)234-6524

15. Lobbyist Contact Information

- a. **Name:** Andreina D. Figueroa
- b. **Firm Name:** ADF Consulting
- c. **E-mail Address:** ADF@ADFConsulting.com
- d. **Phone Number:** (786)586-7001