



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 2448

1. **Title of Project:** Food Desert Support

2. **Senate Sponsor:** Jeff Brandes

3. **Date of Submission:** 03/17/2019

4. **Project/Program Description:**

A pilot program to provide subsidized rides to people living in a food desert to select grocery stores. Food deserts are defined as parts of the country void of fresh fruit, vegetables, and other healthful whole foods, usually found in impoverished areas. This is largely due to a lack of grocery stores, farmers markets, and healthy food providers.

5. **State Agency to receive requested funds :** Department of Economic Opportunity

State Agency Contacted? No

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

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

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)	100,000	100.00%
Federal		0.00%
State (excluding the amount of this request)		0.00%
Local		0.00%
Other		0.00%
Total Project Costs for Fiscal Year 2019-2020	100,000	100.0%

8. **Has this project previously received state funding?** No

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

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

a. If yes, indicate non-recurring amount per year. \$100,000

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

Spending Category	Description	Amount
Administrative Costs:		



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Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other	All dollars go towards covering the cost of the subsidized ride.	100,000
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		100,000

11. Program Performance:

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

Providing a low cost transportation option to residents located in a specific "food desert" in order to provide better access to the foods necessary for a healthy and balanced diet in hopes that it will lead to better health outcomes.

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

Access to transportation via a Transportation Network Company (TNC) at a subsidized flat rate for residents in a specified area to and from grocery stores.

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

Low cost reliable transportation to and from grocery stores.

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

Residents located in a specified food desert. Approximately 1,000 individuals are expected to be served.

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

Greater access to healthy foods. Can be measured through usage of the program and feedback from the users.

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 in the contract?

Standard contract penalties.

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



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13. Requestor Contact Information:

- a. **Name:** Megan Sirjane-Samples
- b. **Organization:** Lyft
- c. **E-mail Address:** meganss@lyft.com
- d. **Phone Number:** (561)352-3388

14. Recipient Contact Information:

- a. **Organization:** Lyft
- b. **County:** Hillsborough, Miami-Dade, Pinellas
- 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:** Megan Sirjane-Samples
- e. **E-mail Address:** meganss@lyft.com
- f. **Phone Number:** (561)352-3388

15. Lobbyist Contact Information

- a. **Name:** Megan Sirjane-Samples
- b. **Firm Name:** Lyft
- c. **E-mail Address:** meganss@lyft.com
- d. **Phone Number:** (561)352-3388