



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 2449

1. **Title of Project:** Operation Hope Community Food Bank

2. **Senate Sponsor:** Debbie Mayfield

3. **Date of Submission:** 03/11/2019

4. **Project/Program Description:**

Operation Hope of Greater Florida Inc. is a Public Charity helping children and families in abusive poverty. We give food away at a twice monthly distribution. Toys, school supplies, and Thanksgiving turkeys are distributed once a year.

5. **State Agency to receive requested funds :** Department of Agriculture and Consumer Services

State Agency Contacted? No

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

Type of Funding	Amount
Operations	69,500
Fixed Capital Outlay	135,000
Total State Funds Requested	204,500

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)	204,500	96.24%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	8,000	3.76%
Total Project Costs for Fiscal Year 2019-2020	212,500	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. TBD on need.

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	Full time assistant to Director, Part time secretary Salary	41,500
Expense/Equipment/Travel/Supplies/Other	Office supplies, computer, postage, cell phones, utilities, travel.	28,000
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering	Install air conditioning, purchase box truck, paving drive & entrance.	135,000
Total State Funds Requested (must equal total from question #6)		204,500

11. Program Performance:

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

Continue to provide a community based food distribution center that responds to individuals & families in crisis and ongoing poverty affect poverty.

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

Continue to provide twice monthly food distribution and a food bank for emergency food support. Once a year Back-to-school event to distribute school supplies. Thanksgiving event to distribute turkeys, and Christmas event to give toys to children.

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

Food - comprised community requires ongoing support for basic food supplies.

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

Community poor of all ages and backgrounds. 10,000-15,000 people receive benefits. Approx. 40,000 meals are provided for free of charge each year.

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

Food deprivation decreases as a result of free-to-face [intervals?]

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?

Prohibited from relevant funds for next 3 years.

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.

Owners care for artifacts within the museum and if funded will operate and run the logistics of the VSO.



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13. Requestor Contact Information:

- a. **Name:** Jesse Zermeno
- b. **Organization:** Operation Hope of Greater Florida Inc.
- c. **E-mail Address:** jessez@juno.com
- d. **Phone Number:** (321)403-2604

14. Recipient Contact Information:

- a. **Organization:** Operation Hope of Greater Florida Inc.
- b. **County:** Indian River
- 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:** Jesse Zermeno
- e. **E-mail Address:** hopeo@bellsouth.net
- f. **Phone Number:** (321)403-2604

15. Lobbyist Contact Information

- a. **Name:** None
- b. **Firm Name:** None
- c. **E-mail Address:**
- d. **Phone Number:**