



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 2477

**1. Title of Project:** Anti-Communist Guerilla Fighters

**2. Senate Sponsor:** Manny Diaz

**3. Date of Submission:** 03/14/2019

**4. Project/Program Description:**

The construction of this monument will symbolize the sacrifices made by the Cuban people in Cuba and the exile community residing throughout the United States.

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

State Agency Contacted? No

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

Type of Funding	Amount
Operations	
Fixed Capital Outlay	80,000
<b>Total State Funds Requested</b>	<b>80,000</b>

**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)	80,000	94.12%
Federal		0.00%
State (excluding the amount of this request)		0.00%
Local	5,000	5.88%
Other		0.00%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>85,000</b>	<b>100.0%</b>

**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?** No

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

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		



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Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning	All funding will be used for the construction of the monument.	80,000
Engineering		
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>80,000</b>

**11. Program Performance:**

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

To honor the men and women who fought for democracy and to educate current and future generations of the sacrifices made in pursuit of freedom.

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

The funding will be used to pay for materials and labor needed to construct the monument.

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

Tours, political rallies, and educating the community and visitors about the oppression faced by the citizens of Cuba under a totalitarian regime.

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

Students, tourists, and the south Florida community.

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

A monument which honors the lives of everyone who has fought for civil rights,

**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.**

City of Miami's

**13. Requestor Contact Information:**

**a. Name:** Luis Gonzalez-Infante

**b. Organization:** Presidio Politico Historico Cubano, Inc.

**c. E-mail Address:** ppchistorico@gmail.com

**d. Phone Number:** (305)643-1726



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#### 14. Recipient Contact Information:

- a. **Organization:** Presidio Politico Historico Cubano, 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:** Luis Gonzalez-Infante
- e. **E-mail Address:** ppchistorico@gmail.com
- f. **Phone Number:** (305)643-1726

#### 15. Lobbyist Contact Information

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