



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 2533

1. Title of Project: Hurricane Michael - Liberty County - FEMA Contractor Fees

2. Senate Sponsor: Bill Montford

3. Date of Submission: 03/06/2019

4. Project/Program Description:

This is an request for advanced funds to pay for Liberty County's FEMA contractors that are assisting with the management of FEMA reimbursement for Hurricane Michael's increased operational costs, contracts, services, etc.. It is estimated that the cost for Liberty County's FEMA contractors will be \$1,000,000.

5. State Agency to receive requested funds : Executive Office of the Governor

State Agency Contacted? No

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

Type of Funding	Amount
Operations	1,000,000
Fixed Capital Outlay	
Total State Funds Requested	1,000,000

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)	1,000,000	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		100.0%

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? No

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		



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Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study	This is an request for advanced funds to pay for Liberty County's FEMA contractors that are assisting with the management of FEMA reimbursement for Hurricane Michael's increased operational costs, contracts, services, etc.. It is estimated that the cost to Liberty County's FEMA contractors will be \$1,000,000.	1,000,000
Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		1,000,000

11. Program Performance:

- a. **What is the specific purpose or goal that will be achieved by the funds requested?**
Reimbursement for eligible expenditures under FEMA guidelines.
- b. **What are the activities and services that will be provided to meet the intended purpose of these funds?**
Submitting paperwork to FEMA showing all of the forced account labor, expenditures, etc., that can be reimbursed by FEMA.
- c. **What are the direct services to be provided to citizens by the appropriations project?**
Proper reimbursement from FEMA creating a better financial position for the county to provide all governmental county services.
- d. **Who is the target population served by this project? How many individuals are expected to be served?**
The entire population of Liberty County citizens, approximately 8,250 individuals.
- e. **What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**
Reimbursement for eligible expenditures under FEMA guidelines.
- 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 are sufficient.

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:** Kathy Brown
- b. **Organization:** Clerk of Court
- c. **E-mail Address:** kbrown@libertyclerk.com
- d. **Phone Number:** (850)643-2215

14. Recipient Contact Information:

- a. **Organization:** Liberty County Board of County Commissioners
- b. **County:** Liberty
- 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:** Kathy Brown
- e. **E-mail Address:** kbrown@libertyclerk.com
- f. **Phone Number:** (850)643-2215

15. Lobbyist Contact Information

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