



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1381

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. **Project/Program Description**

United Foundation of Central Florida is a non-profit Organization formed 5 years ago to bridge the gaps in our family, educational, and mentoring needs in our community using a holistic approach. In working tirelessly in the Pine Hills Community for over 4 years we are well on our way. However, as our most successful After School Enrichment Program Future Leaders United at Evans High School grows and expands to the elementary and middle schools it is proven daily interacting with the students and their parents that for a better community, it is imperative that we continue to stay focused on prevention (early childhood), (intervention and sustainability). This takes funding and focus on Communities. Teach a man to fish and he can feed himself for a lifetime.

5. **State Agency to receive requested funds**
- State Agency contacted? Yes No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	<input style="width: 80px;" type="text" value="456,000"/>
Fixed Capital Outlay	<input style="width: 80px;" type="text" value="000"/>
Total State Funds Requested	456,000

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input style="width: 80px;" type="text" value="456000"/>	<input style="width: 60px;" type="text" value="100.0"/> %
Matching Funds		
Federal	<input style="width: 60px;" type="text" value="00"/>	<input style="width: 60px;" type="text" value="0"/> %
State (excluding the amount of this request)	<input style="width: 60px;" type="text" value="00"/>	<input style="width: 60px;" type="text" value="0"/> %
Local	<input style="width: 60px;" type="text" value="00"/>	<input style="width: 60px;" type="text" value="0"/> %
Other	<input style="width: 60px;" type="text" value="00"/>	<input style="width: 60px;" type="text" value="0"/> %
Total Project Costs for Fiscal Year 2020-2021	456,000	100 %

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

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 60px;" type="text"/>	No

9. **Is future-year funding likely to be requested?** Yes No

If yes, indicate nonrecurring amount per year.



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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	As the Executive Director of United Founder of Central Florida, Inc. I have utilized my 30 years of experience helping to positively empower and educate communities. For the past 5 years I have devoted over 100 hours weekly to help feed over 8,000 last year, send 50 students to College, mentor over 250, counsel over 20 parents, just to name a few. (Payment for health coverage is included)	100,000
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs: Other		
Salary and Benefits	We have grown and will hire 3 part timers to help facilitate executing our programs.	40,000
Expense/Equipment/Travel/Supplies/Other	The cost to facilitate 10 programs, plus Administrative costs, and to purchase 2 (15) passenger vans.	300,000
Consultants/Contracted Services/Study	Will hire mental health counselors to do one on one counseling	16,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		456,000



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11. Program Performance

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

The specific purpose will be to increase the graduation rate in our schools from elementary to high school. Increase our skill sets, so that we will have more people employed, as well as decrease crime. Programs will be evaluated every three months to monitor program progress and outcomes.

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

We are the host for a "Taste of Pine Hills," "Community Family Appreciation Day," "Lots of collaboration, wrap around services, Workshops, just to name a few. We are organized in stages, each with its own series of "benchmarks" and "milestones" to help guide and monitor implementation. progress.

- c. What direct services will be provided to citizens by the appropriation project?

We will have one on one counseling.
Group counseling
Youth and Adult Workshops
Focus Groups
Listening sessions

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

Pine Hills has a population of approximately 72,000 residents and we intend to reach approximately 20% with funding of \$364,800.00 representing 80% of the total budget of \$456,000.00. We will raise \$91,200.00 through Fundraising efforts.

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

The benefit to the community will result in the increase in the graduation rate in our schools from elementary to high school. Increase our skill sets, so that we will have more people employed, as well as decrease crime. Programs will be evaluated every three months to monitor program progress and outcomes. We will have benchmarks, Surveys, Testimonials, etc.

- 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?

We would opt to send back the unused portion (if any is remaining).



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12. **The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.**

not applicable

13. **Requestor Contact Information**

- a. First Name Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number Ext.

14. **Recipient Contact Information**

- a. Organization
- b. Municipality and County
- c. Organization Type
- For-profit Entity
 - Non-Profit 501(c) (3)
 - Non-Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (please specify)
- d. First Name Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number Ext.