



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1815

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The expansion of the current after school childcare programs that are provided by over forty churches throughout the district. This childcare program will help create communities in which the youth is kept in a safe environment where parents are able to complete their workdays without worry for the welfare/safety of their children.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

Type of Funding	Amount
Operating	350,000
Fixed Capital Outlay	0
Total State Funds Requested	350,000

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	350,000	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	350,000	100%

8. Has this project previously received state funding?

If yes, provide the most recent instance:

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

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

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

The funds that are currently raised by the association of churches to help with these needs is not enough for the massive needs of the community.

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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10. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. List 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.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	Increase in employees that will be working in the after-school program. This will all be done through our CDC and partnership with local churches and their members.	141,600
Expense/Equipment/Travel/Supplies/Other	Tutoring, activities, supplies, travel, events, prizes, and programming needed for the after-school childcare programs.	208,400
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		350,000

13. Program Performance

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

Increased access to after-school childcare within their community. The expansion of the current after-school childcare program. This childcare program will help create communities in which the youth is kept in a safe environment where parents are able to complete their workdays without worry for the welfare/safety of their children.

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

There will be an increase in childcare programs, helping create communities in which the youth is kept in a safe environment where parents are able to complete their workdays without worry for the welfare/safety of their children.



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

Increased access to after-school childcare within their community.

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

The target population served by this project includes children and their parents who will be able to work worry-free knowing their children will be in childcare. The program expects to serve approximately 200-400 people in Miami-Dade County.

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

It would increase economic activity between the churches and vendors providing products needed to expand the services. This would be possible if the funding request is approved. The project would also create job opportunities within the community and churches due to the increased need for employees in the after-school childcare program. Parents would be able to work worry-free. The methodology for measuring the outcome will be comparing the number of individuals the program currently serves to the number it would be able to serve with the requested appropriation.

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?

The penalties can be the return of the funds if deliverables are not met.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

- Yes, Applied



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- Yes, Received
- No
- No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. 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 **Ext.**

19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number



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The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.