



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2011

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

**4. Project/Program Description**

Task Force Dagger Special Operations Foundation (TFDSOF) seeks funding to expand our Rehabilitative Adaptive Events (RAE) program, which provides wounded, ill, and injured Special Operations Forces (SOF) veterans and their families with transformative recovery experiences. This funding will increase veteran participation, enhance event programming, and strengthen long-term recovery support during our Florida-based adaptive events, including our flagship Dagger Dive. Our primary objective is to offer holistic healing opportunities that address both visible and invisible wounds of war. Recognizing that service-related injuries impact not just the individual but the entire family, RAE promotes healing through shared experiences, adaptive activities, and community support. Expanding these programs will ensure continuous access to resources, treatments, and peer support, empowering SOF veterans and their loved ones to navigate life beyond service.

5. **State Agency to receive requested funds**

**State Agency contacted?**  Yes

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

Type of Funding	Amount
Operating	471,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>471,000</b>

**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)	471,000	50%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	475,000	50%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>946,000</b>	<b>100%</b>

8. **Has this project previously received state funding?**  Yes

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2024-25	0	125,000		No

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

a. **If yes, indicate nonrecurring amount per year.**

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



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Program is currently funded by a combination of state appropriations and individual private donations. Additional state funding provides an expansion in number of events and population served, increasing impact to the veteran community, as well as local Florida businesses in the area of execution.

## Complete questions 10 and 11 for Fixed Capital Outlay Projects

### 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
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits	This cost estimate covers a portion (1,250 hours) of the Project Head's annual salary to plan and execute multiple Task Force Dagger Florida-based Rehabilitative Adaptive Events during the performance period.	50,000
Other Salary and Benefits	This cost estimate covers 5 hours a week for each of the three other Foundation employees' time spent planning and shaping the Florida-based Rehabilitative Adaptive Events.	25,000
Expense/Equipment/Travel/Supplies/Other	This covers Foundation employees' travel for pre-site surveys to secure lodging, diving equipment, and other participant support for each of the adaptive veteran events.	10,000
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits	This covers full-time hours for each of the required Foundation employees throughout the weeks of set-up and execution for each of the events - 12 work days for Dagger Dive, 9 work days for FPAN Underwater Archaeology Training, 2 work days for Memorial Dive Event, and 5 work days for TFD Marriage & Dive Workshop.	36,000



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Expense/Equipment/Travel/Supplies/Other	This covers travel, lodging, food, and equipment for participants, volunteers, and staff for multiple Florida-based veteran Rehabilitative Adaptive Events, including Dagger Dive in Key West, FL, Memorial Dive in Clearwater, FL, FPAN Archaeology Training in Ft. Lauderdale, FL and Marriage Retreat, Looie Key, FL. These events are estimated to serve 100 participants and 120 volunteers/staff.	350,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>471,000</b>

### 13. Program Performance

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

The requested funds will expand Task Force Dagger Special Operations Foundation's Rehabilitative Adaptive Events (RAE) program, increasing veteran participation, enhancing event programming, and strengthening long-term recovery support for wounded, ill, and injured SOF veterans and their families. This expansion will allow for greater access to therapeutic activities, adaptive recovery programs, and continuous resources, ensuring SOF veterans receive the comprehensive care, peer support, and treatments necessary for long-term healing and reintegration.

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

Services include family bonding events, scuba diving instruction, marine education, underwater archaeology training, and adaptive diving experiences designed to promote physical and mental recovery. Additionally, family-centric outings, wellness sessions, and counseling will be integrated to strengthen relationships, enhance shared experiences, and promote overall family healing.

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

Services will include therapeutic diving sessions, adaptive scuba instruction, marine education, and wellness counseling to promote physical and mental recovery. Family members will participate in shared experiences, strengthening relationships and supporting holistic healing. Volunteers and community members will engage in event logistics, mentorship, and environmental conservation efforts, fostering a broader support network. These services aim to enhance rehabilitation, family unity, and community involvement.

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

The target population for this project includes wounded, ill, and injured SOF veterans, their families, and civilian volunteers who support their recovery. Impact estimates are based on past events and projected budgeting for the expansion project, with an expected reach of over 150 individuals.

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

This project will enhance physical and mental health while reducing substance abuse among SOF veterans and their families through therapeutic diving, adaptive activities, and wellness coaching. Diving improves cardiovascular health, muscle coordination, and mobility, while engaging as a family strengthens bonds and encourages continued healing. Mentally, water-based therapy and wellness coaching reduce stress, anxiety, and PTSD symptoms, creating emotional stability and self-confidence. Strengthened support systems help prevent reliance on substances as a coping mechanism. Additionally, participants will be integrated into TFDSOF's Health Initiatives program, ensuring continued care through case management, access to advanced treatments, wellness coaching, and resources for families and caregivers. Success will be measured through pre- and post-event surveys, participant feedback, and follow-up assessments, tracking improvements in physical/mental health, and substance use reduction.

**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?**



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TFDSOF proposes a structured resolution process, including timely reporting, performance review meetings, and an opportunity to implement corrective measures before penalties are enforced. This approach ensures transparency, accountability, and the successful achievement of program objectives while maintaining flexibility to address unforeseen circumstances.

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
- 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



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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

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