

The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

LFIR # 2225

1. Project Title	Florida Women's Business Center Network
1. Project little	FIORIDA WOMEN'S BUSINESS CENTER NETWORK

2. Senate Sponsor Tom Wright

3. Date of Request 3/4/2025

4. Project/Program Description

The five Florida women's business centers serve residents in 19 Florida Counties, Hope2Women.org at AWBC, helps ensure entrepreneurs throughout the state have access to the coaching and mentorship they need to be successful. Florida women have been starting new businesses at an unprecedented rate, especially in critical industries like healthcare and logistics. Each WBC would receive \$150,000 to provide services, with \$50,000 used to reach underserved and rural areas.

5. State Agency to receive requested funds
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Department of Commerce

State Agency contacted? No

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

Type of Funding	Amount
Operating	800,000
Fixed Capital Outlay	0
Total State Funds Requested	800,000

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)	800,000	52%
Matching Funds		
Federal	750,000	48%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	1,550,000	100%

8. Has this project previously received state funding? If yes, provide the most recent instance:

Fiscal Year	Amo	punt	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
	•	•	•	

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.

Complete questions 10 and 11 for Fixed Capital Outlay Projects

No

No

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10. Status of Const a. What is the cu	ruction Irrent phase of th	ne project?				
🔘 Planning	🔘 Design	Construction	🔘 N/A			
c. What is the es d. What is the es	stimated complet	i.e permitted)? te of construction? tion date of construct sed for ongoing ope		nd 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	Sub grants to the 5 SBA-funded women's business centers in Florida: Florida WBC serves all of Palm Beach and Broward Counties. Jax WBC serves Baker, Clay, Duval, Flagler, Nassau, Putnam and St. Johns. Tampa WBC serves Hillsborough, Polk, Pinellas, Pasco, Manatee and Hernando. weVentture serves Brevard, Indian River, St. Lucie and Martin Counties. The newest WBC in Miami serves south Florida.	750,000
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	Florida-based and DC-based staff that will administer the funding and reporting as well as serving clients in rural areas not reached by the WBCs.	50,000
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	800,000

13. Program Performance

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



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

WBCs help with local economic development by providing FREE business coaching, low and no-cost business education and training to help entrepreneurs to launch, operate, and successfully grow their businesses. WBCs offer programing to support every phase of the business lifecycle - from start-up support to scale, business planning to succession planning. WBCs also provide critical mentoring.

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

The AWBC is requesting \$800,000 to support the work of the five WBCs in the State of Florida. Each WBC receives \$150,000 to provide their critical services throughout the state. The AWBC would receive \$50,000 to help expand the Hope to Women virtual WBC outreach to rural counties in Florida, provide training and support to the

Florida WBC staff, administer the state funding and do state reporting.

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

All individuals seeking to start or grow their small business are welcome. We seek to serve more than 800 clients.

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

be measured?

WBCs will measure and report the number of unique clients serves, clients counseled, trained and the dollar value of the capital infused into the business. Additionally, WBCs will track the number of jobs and supported in the businesses served. These are metrics currently being measured by all federally funded women's business centers and reported to the SBA quarterly.

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?

If the award is made as an advance, prior to the expenditure of funds, then state funding could be recouped for failing to meet deliverables. If awards are paid as reimbursable expenses, funding levels could be reduced proportionately to the failure to meet the deliverables.

14. Is this project related to mitigation, response, or recovery from a natural disaster? No

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 infastructure)

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



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	No,	but	intends	to	apply
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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	Corinne	Last Name	Goble
b. Organization	Association of Women's E	Business Cen	ters
c. E-mail Address	corinne@awbc.org		
d. Phone Number	(334)734-0241	Ext.	

18. Recipient Contact Information

a. Organization	Associati	on of women's b	usiness cente	ers	
b. Municipality and County Statewide					
c. Organization Ty	ре				
□For Profit Entity					
⊠Non Profit 501(o	c)(3)				
□Non Profit 501(d	c)(4)				
□Local Entity					
□University or Co	ollege				
□Other (please s	pecify)				
d. First Name	Corinne		Last Name	Goble	

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e. E-mail Address	corinne@awbc.org			
f. Phone Number	(321)674-7007	Ext.		
19. Lobbyist Contact I	nformation			
a. Name	None			
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.