



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2335

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The expansion of Miami Diaper Bank's efficient and scalable multi-channel diaper distribution model will connect free diapers to more children and families with diaper need in South Florida. By distributing diapers to community-based partners, we fill a gap in services for agencies who cannot provide a regular supply of diapers for their clients. Through our innovative pop-up and mobile direct distribution models, we meet families with diaper need where they are: at local community hubs and in their own neighborhoods. Direct services promote equitable access to diapers for participants who lack awareness about services, cannot access services because of transportation and other challenges, who do not meet the guidelines for local direct service agencies, and/or who have recently and urgently fallen into need.

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	250,000
Fixed Capital Outlay	0
Total State Funds Requested	250,000

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)	250,000	21%
Matching Funds		
Federal	610,177	52%
State (excluding the amount of this request)	0	0%
Local	24,999	2%
Other	300,609	25%
Total Project Costs for Fiscal Year 2025-2026	1,185,785	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		
2024-25	0	50,000	1675	No

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.

Miami Diaper Bank will work to fundraise this amount through private foundations, private donors and other federal and state grant programs.



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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
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	A portion of the funds will be allocated to salary and benefits for the Executive Director for project oversight; the Program Director for managing day-to-day operations; and the Program Coordinator to support project logistics. A portion of the funds will be allocated to salary and benefits for the Mobile Pantry Program Coordinator to support mobile program operations.	74,854
Expense/Equipment/Travel/Supplies/Other	A portion of the funds will be allocated to the purchase of wholesale diapers and diapering supplies (at exclusive pricing otherwise unavailable to the public). A portion of the funds will be allocated to outreach: marketing and advertising to families to raise awareness about our services and promote equitable access to diapers.	175,146
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)		250,000

13. Program Performance

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



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Miami Diaper Bank will scale direct diaper distribution services to fill gaps in services and support equitable access to a regular supply of diapers for diverse families with low incomes in South Florida over the next two years. Funding will help us double our distribution in Miami-Dade in year 1 and increase our distribution in Broward County an additional 25% in year 2 to support the health and well-being of 38,000 vulnerable children and families on a monthly basis.

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

The majority of funds will be allocated to program supplies and equipment including diapers, diapering supplies, diaper bags, and warehouse equipment and supplies to support the distribution of free diapers to South Florida families. A portion of funds will help pay staff salaries for project oversight, program operations, and direct services including Pop-up Diaper Distribution services and the Mobile Diaper Pantry program.

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

- 1 - Free diapers and diapering supplies will be distributed to participants,
- 2 - Links to other accessible local services will be provided to participants,
- 3 - Wraparound support services will be provided to participants by our partners, and
- 4 - Local volunteers will be engaged in warehouse operations in Miami-Dade and the delivery of services in Miami-Dade and Broward Counties.

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

This project will serve 1,200 at-risk infants and young children ages 0-5 and their families/caregivers. This includes adult participants that are economically disadvantaged and/or jobless, and families that are homeless. This includes 56% of participants who receive Medicaid/Medicare and 21% who receive W.I.C. Also, 83% of participants who make less than \$30,000 annually before taxes and 33% of participants who missed an average of 5 days of work due to not having diapers for their child to attend daycare.

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

Expected outcomes include improved infant/child physical health, improved parent/caregiver mental health, increased participation in daycare and early childhood education programs for infants and children, and enhanced economic self sufficiency for participants. Outcomes will be measured using intake questionnaires and follow-up surveys required for participation.

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 contracting agency may consider financial penalties for failing to meet deliverables or performance measures.

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



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- 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

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)



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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.