

**LFIR # 3048** 

•	ng likely to be requ onrecurring amoun		No		
). Is future-year fundi	ng likoly to be reco	uostad?	No		
(3,3,3,3,7)	Recurring	Nonrecurring	11 11 11 11 11 11		
Fiscal Year (yyyy-yy)	Amount Nonrecurring		Specific Appropriation #	Vetoed	
If yes, provide the I					ı
3. Has this project pre	-	_	No		
<b>Total Project Costs</b>	for Fiscal Year 202	25-2026	2,001,885	100%	I
Other			0	0%	
Local			600,000	30%	
State (excluding the	amount of this reque	est)	0	0%	
Federal			0	0%	
Matching Funds	squotta (nom quot		1, 101,000	. 370	
Total State Funds Requested (from question #6)			Amount 1,401,885	Percentage 70%	
Type of Funding	or Fiscal Year 2025	-2026 (including	-		ect)
<b>Total State Funds F</b>	Requested		1,401,885		
Fixed Capital Outlay	,		0		
Operating			7 4110	1,401,885	
Type of Funding			Amo	unt	
State Agency conta . Amount of the Nonr		or Fiscal Year 20	025-2026		
5. State Agency to red	ceive requested fun	ids Departm	ent of Financial Servi	ces	
technology for resolve provide accurate, time	ve. Conversion to a control of the c	government based ancial reports to D	and improve its financial financial software is the epartment of Financial	he outstanding cata I Services and stake	alyst for the City to
1. Project/Program De	•				., , .
3. Date of Request	3/3/2025				
2. Senate Sponsor	Shevrin Jones				



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Design	Construction	O N/A			
ovel ready" (i.e	permitted)?				
	•				
ited start date o	of construction?				
ated completion	date of construc	ction?			
am will be used	l for ongoing ope	rations ar	l maintenance	of the project?	
he facility to re en the owners o	ceive, directly or of the facility and	indirectly the entity	any fixed capit	tal outlay fundi	ng. Include the
a	ted completion am will be used	ted completion date of construction will be used for ongoing ope	ted completion date of construction?  am will be used for ongoing operations and	ted completion date of construction?  am will be used for ongoing operations and maintenance  the facility to receive, directly or indirectly, any fixed capit	ted completion date of construction?  am will be used for ongoing operations and maintenance of the project?  the facility to receive, directly or indirectly, any fixed capital outlay fundi

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		0	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study	ERP software and services to be provided by Tyler; conversion to a government based Finance software called Munis.	1,401,885	
Fixed Capital Construction/Majo	r Renovation:		
Construction/Renovation/Land/ Planning Engineering		0	
Total State Funds Requested (m	ust equal total from question #6)	1,401,885	

#### 13. Program Performance

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

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

The City will convert its financial software to a modern government based program which will allow inter-departmental communication and connectivity. Timely reporting, analysis of data and efficient processing of needs across functions such as Accounts Payable, Debt Service, Budget and Human Resources will be achieved.

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

Personnel in each department will be trained to utilize this software, as applicable. Real time communication across departments will be enabled and facilitate in the deliverance of reliable reports.

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



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This software will be utilized by personnel in departments of Finance, Human Resources, Information Technology, Building and License, Code Compliance, Capital Improvement Programs and others as needed. The City has over 115 FTE's and each will, at minumum, benefit from access to a cohesive payroll portal.

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

This software will be utilized by personnel in departments of Finance, Human Resources, Information Technology, Building and License, Code Compliance, Capital Improvement Programs and others as needed. The City has over 115 FTE's and each will, at minumum, benefit from access to a cohesive payroll portal.

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

Expected outcome is for the City to possess software that allows for proper reports such as Bank Reconciliations and the ability to seamlessly process bi-weekly activity such as Payroll. The methodology applied will be the timely delivery of reports and payroll. Realizing timely issued Financial Audit reports is one of the primary outcomes this project is based on.

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 City fails to meet deliverables, performance measures, and/or completion of the project without a good reasoning, a penalty requiring reimbursement of appropriated funds received should be imposed with a 60-day calendar notice.

14. Is	this project related to mitigation, response, or recovery from a natural disaster? No							
a. I	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 infastructu							
b. N	lame of the natural disaster (or Executive Order # for events not under a federal declaration):							
15. Ha	s the entity applied for or received federal assistance for this project?							
	Yes, Applied							
	Yes, Received							
	No							
	No, but intends to apply							
a. I	yes, provide the FEMA project worksheet ID#:							
b. F	Provide the total project cost listed on the FEMA project worksheet:							
16. Ha	s 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 t	o apply					
a. If yes, specify th	e program	n and state ager	ncy (ex. Loca	al Government Eme	ergency Bridge Loan, Department of	
Commerce):						
17. Requester Contact	t Informat	ion				
a. First Name	Sha'mecca		Last Name	Lawson		
b. Organization	City of O	pa-locka				
c. E-mail Address	slawson@	@opalockafl.gov				
d. Phone Number	(305)953	-2868	Ext.	1202		
18. Recipient Contact	Information	on				
a. Organization	City of O	pa-locka				
b. Municipality and	d County	Miami-Dade				
c. Organization Ty	ре					
□For Profit Entity						
□Non Profit 501(d	:)(3)					
□Non Profit 501(d	:)(4)					
☑Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
d. First Name	Niema		Last Name	Gantt		
e. E-mail Address		opalockafl.gov				
f. Phone Number	(305)953		Ext.			
19. Lobbyist Contact I	nformatio	n	,			
a. Name	Yolanda Cash Jackson					
b. Firm Name	Becker 8	k Poliakoff PA				
c. E-mail Address	yjackson@beckerlawyers.com					
d. Phone Number	(954)985-4132					



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