



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 3325

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

The Holocaust Museum & Education is a highly visible institution that sees approximately 10,000 visitors (adults and students) at it Naples facility. Often its WWII-era Boxcar is on display in the parking lot, attracting additional attention to the site. Since October 2023, have hired a contracted armed security guard due to concerns among our visitors, volunteers, and broader community. A recent threat assessment conducted by the Secure Community Network included recommendations including updating our security equipment, security guard hours, and training for staff and volunteers.

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	100,000
Fixed Capital Outlay	0
Total State Funds Requested	100,000

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)	100,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	100,000	50%
Other	0	0%
Total Project Costs for Fiscal Year 2025-2026	200,000	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.

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 3325

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		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Armed Security Guard	100,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		100,000

13. Program Performance

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

The primary risk identified by the team from the Secure Community Network in November 2024 is a terrorist or extremist trying to enter the building. Their assessment states that the best way to overcome our vulnerability is to increase the armed security personnel, maintain and update the security camera equipment, and to provide regular training of staff and volunteers on safety and security protocols.

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

The security personnel will leverage all the security measures already in place, including our investments in updated CCTV equipment and the free training provided by the Secure Community Network.



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Fiscal Year 2025-2026

LFIR # 3325

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

The Museum welcomes approximately 10,000 visitors each year, including students on field trips, visitors touring the exhibits, and guests attending lectures and programs. This project will provide added safety and security for these visitors, volunteers, and staff.

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

The target population is local students and teachers from grades 5 through 11, local residents, snowbirds, tourists, and our volunteers and staff. In all, approximately 10,000 people will be served.

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

As a result of this investment, visitors, volunteers and staff will feel safe at the facility and the Museum will be able to fulfill its mission to teach the lessons of the Holocaust to inspire action against hatred and to promote mutual respect.

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?

Standard contract penalties.

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



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Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 3325

- 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.