## **Budget Detail Request - Fiscal Year 2016-17**

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

- 1. Title of Project: Louise Graham Regeneration Center, Inc. Document Shredding Expansion, Employment Expansion
- 2. Date of Submission: 01/19/2016
- 3. House Member Sponsor(s): Darryl Rouson

## 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes

  If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d
- b. What is the most recent fiscal year the project was funded? 2014-15
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

| FY:                   | Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.) |                                     |  | Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.) |   |   |  |
|-----------------------|---|-------------------------------------|--|---|---|---|--|
| Column:               | Α   | В                                   | С  | D   | E   | F   | G  |
| Funds<br>Description: | Prior Year<br>Recurring<br>Funds  | Prior Year<br>Nonrecurring<br>Funds | Total Funds Appropriated  (Recurring plus Nonrecurring: Column A + Column B) | Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)                                       | INCREASED or<br>NEW<br>Recurring<br>Requested | TOTAL Nonrecurring Requested (Nonrecurring is one time funding & must be re-requested every year) | Total Funds Requested Over Base Funding (Recurring plus Nonrecurring: Column E + Column F) |
| Input<br>Amounts:     |   |                                     |  |   | 0   | 279,233   | 279,233  |

| e. | e. New Nonrecurring Funding Requested for FY 16-17 will be used for: |                              |                       |  |  |  |  |  |
|----|--|------------------------------|-----------------------|--|--|--|--|--|
|    | □Operating Expenses  | ☑ Fixed Capital Construction | ☐Other one-time costs |  |  |  |  |  |
|    |  |                              |                       |  |  |  |  |  |
| f. | New Recurring Funding Requested for FY 16-17 will be used for:       |                              |                       |  |  |  |  |  |
|    | □Operating Expenses  | ☐Fixed Capital Construction  | □Other one-time costs |  |  |  |  |  |
|    |  |                              |                       |  |  |  |  |  |

## 5. Requester:

a. Name: Arthur O'Hara

b. Organization: Louise Graham Regeneration Center, Inc.

c. Email: aohara@louisegraham.org

d. Phone #: <u>(727)578-5437</u>

- 6. Organization or Name of Entity Receiving Funds:
  - a. Name: <u>Louise Graham Regeneration Center, Inc.</u>
  - b. County (County where funds are to be expended) <u>Pinellas</u>
  - c. Service Area (Counties being served by the service(s) provided with funding) Pinellas
- 7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project?s intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

The Louise Graham Center provides high quality adult daily living skills training and pre-vocational training for low income adults with developmental disabilities to help them more fully integrate into the community and become more self-sufficient. Additionally, it helps them build their confidence and peer relations. Personal care and good hygiene, safety skills, telling time, the value of money and even more advanced skills like using phones and computers are taught by certified educators in our south St. Petersburg location in Midtown, the South St. Petersburg CRA. Secure Shred is the secure confidential document destruction social enterprise owned and operated by the Louise Graham Center. Our developmentally disabled clients learn life and job skills in a paid work experience opportunity with hands-on employability training including forklift certification, sorting for shredding, baling, and shipping. They also work in assembly projects for pay packaging gifts for Nielsen?s survey respondents, assembling more than 55,000 battery packages for Ark Royal Insurance policy holders and preparing them for mailing annually, assembling, packaging and shipping desk blotter calendars. The request is for the cost of new shredding and baling equipment and system expansion and installation to cover increased volume and to increase the number of employees with developmental disabilities.

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

Federal: 0

State: 321,700 (Excluding the requested Total Amount in #4d, Column G)

Local: <u>93,900</u> Other: <u>315,900</u>

9. Is this a multi-year project requiring funding from the state for more than one year?