Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Liberty City Cultural Enrichment and Economic Development Program

2. Date of Submission: 11/10/2017

3. House Member Sponsor: Roy Hardemon

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

a. Has funding been provided in a previous state budget for this activity? No If answer to 4a is ?No? skip 4b and 4c and proceed to 4d, Col. E

- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed?
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)		
Column:	Α	В	С	D E F		
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)
Input Amounts:					5,059,840	5,059,840

- 5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2018-19? No
 - 5a. If yes, which state agency?
 - 5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Economic Opportunity
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? $\underline{\text{No}}$
 - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Produce and perform a Corrective Plan of Action that adheres to the Appropriations Project Request application.

6. Requester: a. Name: Latrice Hill b. Organization: Inner City Dance Club of Miami c. Email: Latrice@innercitydanceclub.com d. Phone #: (305)726-5075
 7. Contact for questions about specific technical or financial details about the project: a. Name: <u>Latrice Hill</u> b. Organization: <u>Inner City Dance Club of Miami</u> c. Email: <u>Latrice@innercitydanceclub.com</u> d. Phone #: (305)726-5075
 8. Is there a registered lobbyist working to secure funding for this project? a. Name: None b. Firm: None c. Email: d. Phone #:
 9. Organization or Name of entity receiving funds: a. Name: <u>Inner City Dance Club of Miami Corporation</u> b. County (County where funds are to be expended): <u>Miami-Dade</u> c. Service Area (Counties being served by the service(s) provided with funding): <u>Miami-Dade</u>
 10. What type of organization is the entity that will receive the funds? (Select one) ○ For Profit ○ Non Profit 501(c) (3) ○ Non Profit 501(c) (4) ○ Local Government ○ University or College ○ Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

The purpose of the Liberty City Cultural Enrichment and Economical Development Program (LCCEED) is to offer educational and economic resources to individuals

residing in the immediate community of Liberty City. The goal for the program is to reduce emotional distress resulting from poverty through job training, links to

employment, and leadership development. The LCCEED Program will facilitate six (6) beneficial program curricula to 300 people over the course of 1 year.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring
Spending Category	Description	(Should equal 4d, Col. E) Enter ?0? if request is zero for the category
Administrative Costs:		
☑a. Executive Director/Project Head Salary and Benefits	Executive Director: \$125,000 (w/	335,000
	benefits); Site Directors: 3 FTE x	
	\$70,000=\$210,000 (w/benefits).	
☑b. Other Salary and Benefits	Administrative Staff: 6 FTE x \$30,000	180,000
	=\$180,000 (w/benefits)	
☑c. Expense/Equipment/Travel/Supplies/Other	Space: (\$3,000 x 12 months x 6 =	318,000
	\$216,000); Utilities: 1,000 x 12 x 6 =	
	\$72,000) Equipment: (\$20,000) Office	
	Supplies: (\$10,000)	
☑d. Consultants/Contracted Services/Study	Legal/Accounting Services (\$5,000 x	45,000
·	4 quarters x 2 = \$40,000) External	·
	Audit (\$5,000)	
Operational Costs:		
☑e. Salaries and Benefits	Community Liasons (2 FTE x	350,000
	\$40,000 = \$80,000; w/benefits); Case	
	Managers (6 FTE x \$45,000 =	

	\$270,000)	
☑f. Expenses/Equipment/Travel/Supplies/Other	Local Travel (\$10,000); Program Supplies/Uniforms (\$65,000); Communications (\$20,000); Computers/Labtops (\$24,000); Office Furniture (\$10,000); Staff Training (\$30,000); Insurance (\$10,000); Transportation Lease (\$12,000 x 4 = \$48,000); Gas: (\$80 x 52 x 4 = \$16,640); Insurance (\$1,100 x 12 = \$13,200)	246,840
☑g. Consultants/Contracted Services/Study	Job Training and Career Exploration Providers (\$80,000); Expert Trainers and Consultants (\$40,000); Accountability Coaches (\$65,000); Vocational Certification Trainings (\$100,000)	285,000
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	Historic Carver Theatre (\$1,300,000 purchase + \$400,000 renovations) Transitional Housing Facility (6020 NW 13th Ave) (\$1,350,000 purchase + \$250,000 renovations)	3,300,000
TOTAL		5,059,840

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

OFor Profit

⊙Non Profit 501(c) (3)

ONon Profit 501(c) (4)

OLocal Government (e.g., police, fire or local government buildings, local roads, etc.)

OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation systems.)
OOther (Please describe)
14. Is the project request an information technology project? No
15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support? Yes
15a. Please Describe: This project has received the support and backing of the local community, surrounding task force and elected officials.
16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? Yes
16a. Please Describe: FIU Metropolitan Center conducted an economic analysis and opportunity report requested by Miami Dade County Public Housing and Community Development which states that Liberty City residents need to be better prepared to take job oppotunities and also create ar assign an agency to lead economic development in Liberty City.
17. Will the requested funds be used directly for services to citizens? Yes
17a. What are the activities and services that will be provided to meet the purpose of the funds? Cultural Enrichment; Business Plan and Development
17b. Describe the direct services to be provided to the citizens by the funding requested. Subject matter workshops, Vocation Training Courses, Formal Visual and Performing Arts classes, Community outreach and involvment Youth Behavioral Modification, Emotional Inteligence Workshops, Financial Literacy
17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups."). Select all that apply to the target population: □Elderly persons
□Persons with poor mental health
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□Persons with poor physical health
☑Jobless persons
☑Economically disadvantaged persons
☑At-risk youth
□Homeless
□Developmentally disabled
□Physically disabled
□Drug users (in health services)
✓ Preschool students
☑Grade school students
☑High school students
☑University/college students
☑Currently or formerly incarcerated persons
☑Drug offenders (in criminal Justice)
☑Victims of crime
☐General (The majority of the funds will benefit no specific group)
□Other (Please describe)
17d. How many in the target population are expected to be served?
O< 25
O25-50
O51-100
O101-200
O201-400
O401-800
© >800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
☑Improve physical health	Provide formal dance classes to Liberty City residents to increase physical activity and fitness.	Registration documents Pre and Post Survey Assessment

☑Improve mental health	Provide formal dance classes to Liberty City residents to increase social interaction, cultural enrichment, and build one's self esteem. Teach vocational skills to promote financial independence for greater senses of self worth.	Pre and Post Survey Assessment
☑Enrich cultural experience	Intergrate Liberty City history in workshops to correlate cultural experience and economic advancement within the community.	Registration documents Pre and Post Survey Assessment
☑Improve agricultural production/promotion/education	Facilitate a Composting/Gardening workshop to promote healthy eating through agriculture.	Registration documents Pre and Post Survey Assessment
□Improve quality of education		
□Enhance/preserve/improve environmental or fish and wildlife quality		
☑Protect the general public from harm (environmental, criminal, etc.)	Facilitate classes on conflict resolution, anger management, self-defense and weapon safety.	Registration documents Pre and Post Survey Assessment
□Improve transportation conditions		
☑Increase or improve economic activity	Administer courses to teach Liberty City residents basics about economics, increase financial literacy, teach business start-up process.	Registration documents Pre and Post Survey Assessment
☑Increase tourism	Invite international guests to perform and/or speak to inspire Liberty city residents and surrounding areas.	Registration documents Ticket sales

	Events will be held at Liberty City	
	venues to increase tourism dollars.	
☑Create specific immediate job opportunities	Free Security Licence certification Free OSHA Certification for Construction Free Customer Service Training for Hospitality Host Liberty City Job Fairs	Registration documents Pre and Post Survey Assessment Job search analysis
☑Enhance specific individual?s economic self sufficiency	Teach Liberty City residents how to maintain a basic budget, the importance of saving, and establishing multiple streams of income to create generational wealth.	Pre and Post Survey Assessment
☑Reduce recidivism	Job skills training Financial literacy Entrepreneurship classes Record seal/expungement services Re-entry job opportunities	Registration documents Pre and Post Survey Assessment
☑Reduce substance abuse	Facilitate health awareness cworkshops to educate on the harmful side effects of substance abuse. Increase physical activity through formal dance, promoting healthy living and self-esteem.	Pre and Post Survey Assessment
☑Divert from Criminal/Juvenile justice system	Financial literacy workshops Cultural enrichment activity Social accountability education Conflict resolution workshops Law Enforcement/Civilian events administered	Pre and Post Survey Assessment Public Records
□Improve wastewater management		

□Improve stormwater management	
□Improve groundwater quality	
□Improve drinking water quality	
□Improve surface water quality	
□Other (Please describe):	

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
Amount Requested from the State in this Appropriations Project Request:	5,059,840	100.0%	N/A
2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	5,059,840	100%	

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

20a. How much state funding would be requested after 2018-19 over the next 5 years?

O<1M

O1-3M

⊙>3-10M

O>10M

20b. How many additional years of state support do you expect to need for this project?
O1 year
O2 years
O3 years
O4 years
●>= 5 years
20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?. Ongoing activity? no total cost O<1M O>3-10M O>10M