



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2024-2025

LFIR # 3406

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

As the population ages, the needs of that population will change, placing a demand on local communities to meet those needs. To meet the demands of the newly aging population, Gadsden County Department of Elderly Affairs believes it is necessary to develop long-range plans that address the social and health needs of the newly aging population while continuing to creatively deal with gaps in of the current senior community.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2024-2025

Type of Funding	Amount
Operations	0
Fixed Capital Outlay	1,000,000
<b>Total State Funds Requested</b>	<b>1,000,000</b>

7. Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,000,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2024-2025</b>	<b>1,000,000</b>	<b>100%</b>

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future 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.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.



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\$7.9 million CARES Supported small businesses, citizens, broadband, Community Awareness Program  
 \$4.4 million American Rescue Plan small businesses, non profits, church, public health, citizens, public awareness.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. 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)?

Yes

c. What is the estimated start date of construction?

July 1, 2024

d. What is the estimated completion date of construction?

July 1, 2025

12. 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.

Gadsden County

### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Construct additional space to address social and health services for the aging populations while continuing to creatively deal with gaps in services of the current senior community.	1,000,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,000,000</b>

### 14. Program Performance

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

All seniors, 60 or older, who are enrolled at the Gadsden County Senior Center can participate in dynamic living services and experiences, and receive congregate meals, transportation, and utility assistance. Congregate meals are available to participants four days a week. Transportation is also available to and from the congregate sites as well as shopping assistance for any senior who needs it.



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

As the population ages, the needs of that population will change, placing a demand on local communities to meet those needs. To meet the demands of the newly aging population, Gadsden County Department of Elderly Affairs believes it is necessary to develop long-range plans that address the social and health needs of the newly aging population while continuing to creatively deal with gaps in of the current senior community.

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

All seniors, 60 or older, who are enrolled at the Gadsden County Senior Center can participate in dynamic living services and experiences, and receive congregate meals, transportation, and utility assistance. Congregate meals are available to participants four days a week. Transportation is also available to and from the congregate sites as well as shopping assistance for any senior who needs it.

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

60 years of age and older, living in communities throughout Gadsden County. Statistical data provided by the US Census Bureau previously predicted upward trending data that shows the rise in the population of Baby Boomers in the years to come.

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

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**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 the contract?**

Corrective action plan created, measured and implemented with a success timeline in order for the state to continue to fund the project.

**15. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**16. 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



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University or College

Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**

#### 17. Lobbyist Contact Information

**a. Name**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**