



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 3671

1. Project Title
2. Senate Sponsor
3. Date of Request

4. Project/Program Description

The Treasure Island and Madeira Beach Chamber of Commerce is requesting \$20,000 from the State of Florida to match the contribution of the business community to fund the food supplies which will be used to provide lunch to the most vulnerable in Pinellas County. Volunteers are engaged and complete the work of preparing the lunch and distribute to several non-profit organizations including Day Star and Safe Harbor. Both organizations support the homeless community.

Last year we served 5,000 families through the community service of our members and philanthropic support of our members. We respectfully request the Florida Legislature match the contribution of the business community to allow us to serve more families in need.

5. State Agency to receive requested funds
- State Agency contacted? No

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

Type of Funding	Amount
Operations	20,000
Fixed Capital Outlay	0
Total State Funds Requested	20,000

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)	20,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	20,000	50%
Total Project Costs for Fiscal Year 2024-2025	40,000	100%

8. Has this project previously received state funding? No

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

9. Is future funding likely to be requested? No
- 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?



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

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)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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.

13. 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	Supplies for distribution	20,000
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		20,000

14. Program Performance

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

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



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30 volunteers from the Treasure Island Madeira Beach Business Community will prepare the boxed lunches and distribute them to the charity organizations who provide direct support services to the community.

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

We will be feeding the homeless and those looking for work.

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

10,000 homeless individuals in Pinellas County are the target population.

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

People will be fed and receive a resource card which shares help lines and connections to job opportunities.

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?

No penalties. This is 100% volunteer driven.

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
- University or College
- Other (please specify)

d. First Name **Last Name**

e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information



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a. Name

b. Firm Name

c. E-mail Address

d. Phone Number