

# Appropriations Project Request - Fiscal Year 2020-21

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Challenge Enterprises of North Florida, Inc. - Club Challenge
2. Date of Submission: 11/14/2019
3. House Member Sponsor: Bobby Payne  
Members Copied:

### 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, Col. E***
- b. What is the most recent fiscal year the project was funded? 2019-20
- 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:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget  <i>(Will equal non-vetoed amounts provided in Column A)</i>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring plus Recurring Base Funds</b>  <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:		295,143	295,143		303,998	303,998

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? 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? Agency for Persons with Disabilities
  - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes
  - 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.  
Failure to provide services for a minimum of 10 members monthly shall reduce the payment invoice by one quarter of one percent.

6. Requester:

- a. Name: Nancy Keating
- b. Organization: Challenge Enterprises of North Florida, Inc.
- c. Email: nancyk@challengeenterprises.org
- d. Phone #: (904)284-9589

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Katie Vineyard
- b. Organization: Challenge Enterprises of North Florida, Inc.
- c. Email: katiev@challengeenterprises.org
- d. Phone #: (904)284-9859

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: Challenge Enterprises of North Florida, Inc.
- b. County (County where funds are to be expended): Clay, Duval
- c. Service Area (Counties being served by the service(s) provided with funding): Bradford, Clay, Duval, Putnam, St. Johns

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 Club Challenge is to provide training, volunteer services opportunities, create a thriving social life with peers (Socialization) and introduction to paid employment opportunities in the Northeast Florida area for adults with intellectual and developmental disabilities that are currently; on the APD waiting list, unfunded adults with different abilities, senior adults, and those that have a part-time job or have retired from the workforce.

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter "0" if request is zero for the category
Administrative Costs:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	A portion of the Executive Staff and 100% of the Project Manager for Club Challenge including benefits required by law and eligible benefits under Challenge Enterprises policies.	69,023
<input checked="" type="checkbox"/> b. Other Salary and Benefits	A portion of the financial and clerical personnel that attend to accounts payable, receivable, and payroll. The clerical that directly supports the project, membership.	8,090
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Expenses will include a portion of the insurance, technology, utilities, travel, supplies and communication costs.	1,815
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	The direct services staff wages and benefits which are screened through the Clearinghouse and have completed APD training will be	166,392

	assigned activities with small member groups and individuals to guide and coach the members to achieve their personal goals.	
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Expenses will include utilities for the Club, improve and maintain computer stations for the members with touch screen and software for visually impaired, technology, gasoline and maintenance for Challenge Enterprises vehicles used for scheduled outings, expendable supplies needed for scheduled trainings and activities.	58,678
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
<b>TOTAL</b>		<b>303,998</b>

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)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (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:

Letters of Support from families and individuals attending Club Challenge.

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:

Challenge Enterprises viewed a study from the US Census Bureau documenting that adults with intellectual and developmental disabilities are the highest unemployed population. In Northeast Florida Counts 17% of persons with disabilities live in poverty. APD reports that there are currently 22,661 people with developmental disabilities on the APD FL Waiting List.

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?

Formal and informal sessions on job training, volunteering at local nonprofits and local profits to learn new skills, advocacy training and group sessions, healthy living sessions, art and culture programs, and socializing with peers and in integrated settings.

17b. Describe the direct services to be provided to the citizens by the funding requested.

Trained staff will work directly with adults on activities that the member has chosen to engage in with peers or individually, coordinate with member special session on healthy living, finances, advocacy, transportation, promote and escort members to area nonprofits to volunteer.

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
- 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?

- < 25
- 25-50
- 51-100
- 101-200
- 201-400
- 401-800
- >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
<input checked="" type="checkbox"/> Improve physical health	Improve the physical stamina of the members with a physical health goal by engaging in 4 physical activities during the month	85% of the members with a physical health goal will participate in a minimum of one physical activity per month to improve their physical stamina.
<input type="checkbox"/> Improve mental health		
<input checked="" type="checkbox"/> Enrich cultural experience	Improve Multicultural awareness by	85% of the members with a Social

	conducting a minimum of one (1) Cultural training or activity per month.	Engagement goal will participate in a minimum of one Cultural training or activity per month.
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Club Challenge offers individuals opportunities to increase their knowledge of their Community, Self Advocacy, Job/ Employment training, and Social Skills.	Club Challenge will serve a minimum target population of 25 members a month.
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input checked="" type="checkbox"/> Improve transportation conditions	Club Challenge will facilitate 3 Advocacy group meetings and invite area transit companies to present information regarding their systems to increase members of choice of systems for those who have a transportation advocacy goal. Transportation Advocacy will promote ridership on new local transit lines.	75% of members with a transportation goal will attend a minimum of one advocacy meeting to increase their awareness of local transportation services by the end of each reporting quarter
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Club Challenge will facilitate a monthly employment training or an event to promote self-sufficiency through employment for members	85% of members with an employment goal will participate in a minimum of one monthly employment or training event to include mock interviews

	with an employment goal.	once a month.
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input checked="" type="checkbox"/> Other (Please describe): Improve Financial Literacy	Club Challenge will facilitate a minimum of one training or outing per month to increase member's knowledge and Financial Literacy.	75% of members with a goal in financial awareness will participate in a minimum of one financial literacy training session or monthly outing.

19. Provide the total cost of the project for FY 2020-21 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?
1. Amount Requested from the State in this Appropriations Project Request:	303,998	100.0%	N/A
2. Federal:	0	0.0%	No
3. 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	303,998	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 2020-21 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

20b. How many additional years of state support do you expect to need for this project?

- 1 year
- 2 years
- 3 years
- 4 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
- <1M
- 1-3M
- >3-10M
- >10M