



Police Department
Jeff Devlin, Chief of Police



tel: 954.967.4300

LAW ENFORCEMENT TRUST FUND (LETF) REQUEST FOR FUNDING

The Hollywood Police Department has a long-standing commitment to the reduction of crime and the implementation of crime and drug prevention initiatives throughout the City of Hollywood. Use of LETF Funds requires approval from the City Commission, in accordance with F.S. 932.7055, upon request by the Chief of Police. The Statute requires a portion of the revenues be donated or expended for the support or operation of the following:

- Drug treatment
- Crime prevention
- Drug abuse education
- Safe neighborhood
- Drug prevention
- School resource officer program

Applications with all attachments must be received by Wednesday, May 15, 2025. Send via email to mdellolio@hollywoodfl.org. For questions, please contact Madonna Dell'Olio at mdellolio@hollywoodfl.org or 954-967-4375.

Applicant Agency Information

Applicant Agency Legal Name: HEROES Foundation, Inc	
Main Administrative Address: 3250 Hollywood Blvd	
City & State: Hollywood, Florida	Zip Code: 33021
Telephone Number: (954) 347-0121	E-mail Address: hollywoodfop24@gmail.com
Website: www.hollywoodfop.org	
CEO/Executive Director: Andrew Laframboise	

PROGRAM INFORMATION

Program Title:	Helping Hand Program		
Name/ Title of Program Contact:	Andrew Laframboise		
Address:	3250 Hollywood Blvd	Phone:	(561) 246-8707
City • Zip Code:	Hollywood, 33021	E-mail:	hollywoodfop24@gmail.com
Total Program Budget:	\$10,000.00		
Amount Requested:	\$10,000.00		

3250 Hollywood Boulevard
P.O. Box 229045
Hollywood, Florida
33021-6967
hollywoodfl.org

Organization's Background: Please provide a concise description of the Applicant Agency, including its history, years of operation, general mission statement, and primary services provided.

The HEROES Foundation, Inc. is a shining example of the collaborative spirit and dedication of the Fraternal Order of Police Lodge 24. Founded in 2024, our foundation was born from a deep commitment to strengthening the bonds between law enforcement and the communities we serve. The launch of the HEROES Foundation—standing for Helping Others through Resources, Outreach, Education & Support. From its inception, the HEROES Foundation has been devoted to building supportive and harmonious relationships between community members and law enforcement officers.

LETF CATEGORY (Place an "X" to the left of one program area for which you intend to Apply):

<input type="checkbox"/>	1. Crime Prevention
<input type="checkbox"/>	2. Drug Treatment or Abuse Prevention/Education
<input checked="" type="checkbox"/>	3. Safe Neighborhood

HOLLYWOOD POLICE'S PRIORITY AREA (Place an "X" to the left of one program area for which you intend to Apply):

<input type="checkbox"/>	1. Diverting Youth from Criminal Justice System
<input type="checkbox"/>	2. Reducing Gun Violence/Violent Crime
<input checked="" type="checkbox"/>	3. Programs which assist the Homeless/Mentally Ill

PROGRAM INFORMATION

1. How does your proposed project address the LETF Category (see above) as well as the Hollywood Police Department's Priority Area?

The HEROES Foundation is proud to partner with your department to provide critical support to families experiencing homelessness or financial hardship. When you encounter families facing such challenges, City of Hollywood members have a direct link to resources that can make a real difference. Our foundation is ready to assist by offering temporary lodging and meals, ensuring that these families receive the immediate help they need.

2. Why is this funding needed (What community problem does it address)? What data suggests this program should be implemented with this population or in this geographical location?

Homelessness is a growing concern in Hollywood, affecting not only individuals but entire families who find themselves in desperate circumstances. The need for immediate intervention and support has never been more critical. At the heart of this crisis is the lack of access to basic necessities such as shelter and food for families who are homeless or experiencing severe financial hardship. When members of the Hollywood Police Department encounter such families, they reach out to The HEROES Foundation to provide vital assistance.

The data underscores the urgency of this program. Recent studies show that Hollywood has experienced a significant increase in homelessness, with families being one of the fastest-growing segments. The National Alliance to End Homelessness reports that children experiencing homelessness are at a higher risk of physical and mental health issues, as well as educational setbacks, which can have long-lasting effects on their futures.

3. Program Summary (3-5 sentences): Provide an overview of program services.

When officers from the Hollywood Police Department come across a family unexpectedly without shelter, they reach out to us at The HEROES Foundation for swift and compassionate support. The officer first identifies a secure hotel within the City of Hollywood to provide the family with a safe temporary refuge. Then, a member of our Foundation promptly steps in to cover the hotel expenses and supply essential groceries, granting the family a much-needed moment of relief and renewed hope.

4. Describe the program in detail and how it will be implemented: (Describe Who, What, Where, and When)

Please make sure your response includes program successes or challenges if previously funded, Why the agency needs the funding and its impact on the community. All programs must address a specific population and the narrative should indicate the number of clients served, services provided etc.

Program Overview:

The Helping Hand Program is designed to provide immediate, temporary refuge by securing accommodations in local hotels. This not only offers a safe haven but also grants these families a crucial moment of respite and the opportunity to regroup.

Implementation Details:

- **Who:** Families in Hollywood identified by local law enforcement as being in urgent need of shelter.
- **What:** Provision of temporary hotel accommodations and essential groceries.
- **Where:** Within the City of Hollywood, utilizing nearby hotels to ensure accessibility and security.
- **When:** As soon as a family is identified, ensuring immediate support without delay.

Program Impact and Successes:

Since its inception, the Helping Hand Program has provided critical support for several families, offering them stability and hope during their most vulnerable times. While our program has been successful in delivering immediate aid, challenges such as limited funding have occasionally restricted our ability to serve every family in need. With your support, we aim to overcome these hurdles and expand our reach.

5. Describe the Applicant Agency's experience in serving the target population and the capacity of the Applicant Agency to undertake the proposed program.

The HEROES Foundation was established with a profound understanding of the challenges faced by families in crisis. Road patrol officers, are often the first to encounter families in dire situations, providing us with unique insights into their immediate needs. It is this firsthand experience that inspired us to offer essential support, including lodging and groceries, to those who require urgent assistance.

Over the past year, our program has made a significant difference in the lives of many families by addressing their immediate needs and providing them with stability during challenging times. Our comprehensive approach ensures that families receive not only immediate relief but also the dignity and respect they deserve.

6. Has your agency received funding from LETF? (If yes, identify the source, the \$ amount and provide performance data regarding your contracted outcomes for the various fiscal years your agency was funded).

No

Total Program Line Item Budget

LETF Line Item Budget	Calculation	Total Amount
Program Expenses		
Personnel Costs/Salaries	\$	
Fringe Benefits		
Consultants and Professional Fees	\$	
Equipment	\$	
Supplies	\$ Groceries for at-risk families	\$3,000.00
Other (specify)	Lodging for at-risk families	\$7,000.00
Total Program Expenses:	\$	
	LETF Request	\$10,000.00
		\$
	Total :	\$ 10,000.00

BUDGET NARRATIVE (Required for ALL applications)(Provide an explanation of what the budget will include)

The Helping Hand program, orchestrated by the HEROES Foundation, stands as a testament to the organization's commitment to alleviating homelessness and fostering community welfare. The Helping Hand Program operates in partnership with Hollywood Police Officers, who serve as the first point of contact in identifying families at risk of homelessness. Through strategic financial assistance, the HEROES Foundation provides immediate relief to these families, thus preventing the spiral into chronic homelessness.

Program Overview

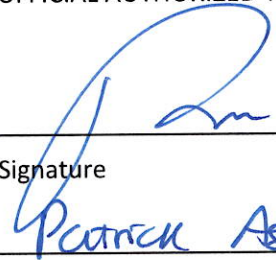
The Helping Hand program is designed to provide temporary relief to families identified as being at imminent risk of homelessness. Hollywood Police Officers play a pivotal role in this initiative by identifying families in distress and communicating their needs to the HEROES Foundation. The Foundation, in collaboration with the officers, arranges for temporary lodging and sustenance, thereby addressing the immediate needs of these families.

Key Components of the Budget

Lodging Arrangements:

1. Temporary Housing: A significant portion of the budget will be dedicated to securing temporary lodging for families in distress. The program intends to collaborate with local hotels, ensuring that families have a safe and comfortable place to stay.
2. Groceries and Basic Needs: The budget will cover the procurement of groceries from Publix to ensure that families have access to nutritious meals during their temporary stay.

OFFICIAL AUTHORIZED TO SIGN AND BIND APPLICANT AGENCY TO THE APPLICATION:

 #3361

Signature

Patrick Agencio

Name (Print or Type)

Treasurer

Title (Print or Type)

5/6/2025

Date

STATE OF

COUNTY OF

The foregoing instrument was acknowledged before me this 6th day of May, 2025, by

Patrick Agencio

(name of individual signing)

as Treasurer
(title)

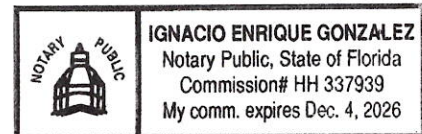
of Heroes Foundation INC
(name of Applicant Agency/entity)

known to me to be the person described herein, or who produced as identification, and who did/did not take an oath.

Ignacio Enrique Gonzalez

NOTARY PUBLIC

My commission expires: 12.04.2026



Attachments

Attachment A	Certificate of Incorporation www.Sunbiz.org
Attachment B	IRS Form 501(c)(3)
Attachment C	IRS Form W-9

ATTACHMENT

A

State of Florida

Department of State

I certify from the records of this office that H.E.R.O.E.S FOUNDATION INC. is a corporation organized under the laws of the State of Florida, filed on April 14, 2023.

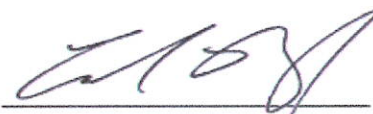
The document number of this corporation is N23000004500.

I further certify that said corporation has paid all fees due this office through December 31, 2025, that its most recent annual report/uniform business report was filed on February 12, 2025, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capital, this
the Fifth day of May, 2025*




Secretary of State

Tracking Number: 3129164667CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

ATTACHMENT

B



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

HEROES FOUNDATION INC
3250 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021

Date:
02/05/2024
Employer ID number:
92-3737038
Person to contact:
Name: Andrew Niemeyer
ID number: 29312
Telephone: 877-829-5500
Accounting period ending:
December 31
Public charity status:
509(a)(2)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
April 14, 2023
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053642003733

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements

ATTACHMENT

C

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type.
See Specific Instructions on page 3.

1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) HEROES Foundation, Inc	
2 Business name/disregarded entity name, if different from above.	
3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input checked="" type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) Non-Profit Organization	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
5 Address (number, street, and apt. or suite no.). See instructions. 3250 Hollywood Blvd	Requester's name and address (optional)
6 City, state, and ZIP code Hollywood, FL 33021	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	
9	2
3	7
3	7
0	3
8	

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person *Patricia Aguen*

Date 1/1/2025

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they