

## Notice of Request for Proposals (RFP)



### PIMA COUNTY

COMMUNITY DEVELOPMENT

Title	FEMA EFSP Phase CARES
RFP Number	CDNC-FEMA-EFSP-Phase CARES
Program Year	2020/2021
Issue Date	May 20, 2020
Review Meeting	May 29, 2020, 9am
Due Date	June 3, 2020 by 5:00 PM, MST

Submit proposals by email to:

[marcos.ysmael@pima.gov](mailto:marcos.ysmael@pima.gov)

Specify the RFP Number: "CDNC-FEMA-EFSP-Phase CARES"  
in the Subject line.

### LATE PROPOSALS WILL NOT BE ACCEPTED

Pima County is soliciting proposals from Respondents who are qualified, responsible and willing to provide services to the community in compliance with all solicitation specifications and requirements contained or referenced herein. Emergency Food and Shelter Program (EFSP) funds are Federal funds made available through the U.S. Department of Homeland Security's Federal Emergency Management Agency (FEMA).

Download a full copy of this solicitation at

<http://webcms.pima.gov/cms/one.aspx?portalId=169&pageId=24903> by selecting the title "**FEMA Phase CARES.**" Respondents are required to check this website for addenda and answers to questions posed prior to the due date to assure that the proposal incorporates all required information.

Proposals must be submitted as defined in this RFP. **Failure to do so may be cause for rejection as non-responsive.** Complete and return all required documents. Respondents are required to read the entire solicitation including all referenced documents; assure that they can and will comply with all requirements associated with this opportunity; and incorporate all costs in the proposals submitted.

Direct questions regarding this opportunity to:

Marcos Ysmael  
801 W. Congress  
Tucson, AZ 85701  
(520) 724-2460  
[marcos.ysmael@pima.gov](mailto:marcos.ysmael@pima.gov)

**Pre-submittal Review Meeting: May 29, 2020, 9am,** Pima County Housing Center, 801 W. Congress (space is limited), or Join Microsoft Teams Meeting, +1 213-279-1657, Conference ID: 710 127 282#

**Announcement Published:** *The Daily Territorial*, May 26, 27, 28 and 29, 2020

## Introduction

The purpose of the Coronavirus Aid, Relief, and Economic Security (CARES) Act funding for the Emergency Food and Shelter Program (EFSP) is to address the impacts of the economic consequences of the COVID-19 public health emergency, by providing food, shelter, and supportive service to those in need. The intent is that the EFSP's National Board will administer the funding as is done for the program's annually appropriated funds. This will be done through the National Board's delivery structure of allocating funds to counties and cities with highest needs throughout the country and for the jurisdictions' local boards to determine awards for local social service agencies providing the needed assistance. (Authorizing legislation is Pub. L. No. 116-136 and Pub. L. No. 100-77)

When a public health crisis or other disaster occurs, it is often those with economic vulnerabilities who suffer the most. The EFSP supports a population that would otherwise be more adversely impacted by a disaster situation and eases the potential burdens imposed on response and recovery efforts to assist those living on the streets or that otherwise have severe economic needs.

Pima County was selected as a qualifying jurisdiction to receive funding from the EFSP National Board, which is chaired by the Federal Emergency Management Agency (FEMA). The Emergency Food and Shelter Program (EFSP), created in 1983, supplements and expands the work of local social service agencies which help people with economic emergencies. The original authorizing legislation (Pub. L. 100-77) specifically calls for:

*Sensitivity to the transition from temporary shelter to permanent homes and attention to the specialized needs of homeless individuals with mental and physical disabilities and illness and to facilitate access for homeless individuals to other sources of services and benefits.*

Special emphasis shall be placed on the identification of and assistance to the elderly, families with children, Native Americans, veterans, and mentally and physically disabled persons. EFSP Phase CARES funds must be used only to supplement existing rent/mortgage, utility assistance and feeding and sheltering efforts to assist *those impacted by the COVID-19 public health emergency.*

The FEMA EFSP National Board has announced an allocation of \$675,453 for this jurisdiction under the Coronavirus Aid, Relief, and Economic Security (CARES) Act special appropriation, known as Phase CARES. Pima County's EFSP Local Board, administered by Pima County Community Development and Neighborhood Conservation Department (CDNC), has been charged with coordination of the process for distribution of funds to service providers in Pima County.

Therefore, the Local Board is requesting proposals from eligible respondents. Following the due date for proposals, the Local Board will convene, review submitted proposals/applications, and determine how available funds will be distributed.

## Eligible Program Activities

The intent of this FEMA EFSP program is to address the impacts of the economic consequences of the COVID-19 public health emergency by providing food, shelter, and supportive service to those in need. The National Board has determined that the following eligible services that may be provide to clients using EFSP Phase CARES funds.

- Food, in the form of served meals or groceries
- Lodging in a mass shelter or hotel
- One month's rental or mortgage assistance to prevent evictions
- One month's utility payment to prevent service cut-offs
- Transportation costs associated with the provision of food or shelter
- Minimal repairs to mass feeding or sheltering facilities for building code violations or for handicapped accessibility
- Supplies and equipment necessary to feed or shelter people, up to a \$300 limit per item

Pima County Community Development and Neighborhood Conservation  
Request for Proposals: FEMA EFSP Phase CARES

FEMA EFSP funds are intended to be used to supplement or expand existing programs and services. Funds may not be used as a substitute for other program funds, nor to start a new program. Funds may not be used for emergency assistance for victims of natural disasters.

### Who Can Apply

The EFSP Phase CARES funding is open to any local organization that meets the following qualifiers.

- Is a nonprofit corporation or an agency of government
- Has a checking account (Cash payments are not allowed.)
- Has an accounting system or fiscal agent approved by the Local Board
- Is not debarred or suspended from receiving Federal funds
- Has a Federal Employer Identification Number (FEIN)
- Has a Data Universal Number System (DUNS) number
- Conducts an independent annual review if receiving \$50,000 to \$99,999 in funding; an independent audit if receiving \$100,000 or more in EFSP funds; and meets single audit requirements at 2 CFR 200 if receiving \$750,000 or more in Federal funding
- Has not received an adverse or no-opinion audit
- Provides services and uses other organization/agency resources in the area in which they are seeking funding
- Practices nondiscrimination
- Has a voluntary board if private not-for-profit
- Involves homeless individuals and families, through employment, volunteer programs, etc., in providing emergency food and shelter services

### Proposal Application

Submit a complete application for each program for which your organization seeks FEMA EFSP funding. Include the organization's name, address, and each program name for which funding is sought.

Phase CARES funding is limited to the categories provided above in **Eligible Program Activities**. A complete proposal will consist of the following items.

- Attachment A. Proposal Cover Sheet
- Attachment B. Proposal Application Form with Narrative and Budget
- Attachment C. Local Recipient Organization (LRO) Certification Form
- Additional documentation as required by application instructions

Each document should be saved as a PDF file, clearly named and attached to the submission email.

### Proposal Formatting

Type responses in 12-point font. Avoid expanding space sizes provided. If the proposal is written by hand, print legibly and use blue ink. Proposals must be signed and dated by the Respondent's authorized agent (the person who has the authority to bind the organization; for example, President, Chief Executive Officer).

**FAILURE TO COMPLY WITH SOLICITATION REQUIREMENTS MAY CAUSE A PROPOSAL TO BE REJECTED AS NON-RESPONSIVE.**

### Selection Process

Pima County Community Development and Neighborhood Conservation  
Request for Proposals: FEMA EFSP Phase CARES

CDNC will convene an EFSP Local Board as required by the National Board. The Local Board is to include members of the following groups: Catholic Charities, United Jewish Communities, National Council of the Churches of Christ, The Salvation Army, American Red Cross, and United Way.

The Local Board will convene after the due date for a review session which will be open to respondents and the public. The review session details (date/time/location) will be provided to all applicants via email and will also be posted on County websites and social media pages.

The Local Board will select organizations for funding that:

- Demonstrate the ability to provide food and/or shelter assistance
- Consider needs, resources and gaps in services
- Have the staff and capacity to take on responsibility of the program
- Include homeless individuals and families in providing services
- Have the capacity to maintain records and submit records by their due dates required by the National Board
- Have a financial system appropriate to carry out duties.

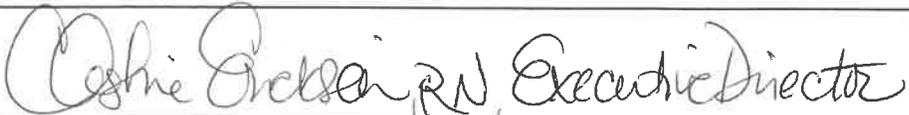
Local funding award decisions are expected to be announced within 20 business days of the award notification.

**Compliance**

Award notification will be announced to the grant recipients and placed on the website listed above. The Respondents agree to establish, monitor, and manage an effective grant award administration process that assures compliance with all requirements of the Emergency Food and Shelter Program National Board and Local Board.

**Proposal Application**

**Attachment A Cover Sheet**

<b>Legal name of the organization (or individual) submitting this application:</b> Green Valley Assistance Services, INC dba Valley Assistance Services	
<b>Legal Status of applicant (e.g., non-profit corporation, government entity):</b> 501 (c) (3) non-profit	
<b>Address of Organization:</b> 3950 S. Camino del Heroe Green Valley, AZ 85614	
<b>Name and Title of contact person for this application:</b> Christine Erickson, Executive Director	
<b>Telephone number:</b> 520-625-5966	<b>Fax number:</b> 520-625-1261
<b>E-mail address:</b> <a href="mailto:c.erickson@valleyassistanceservices.org">c.erickson@valleyassistanceservices.org</a>	
Indicate the amount of FEMA EFSP Phase CARES funds you are requesting for each service category. Phase CARES funding will be limited to the following categories. Total your requests at the bottom. ROUND REQUESTS TO THE NEAREST DOLLAR; REQUEST ONLY WHOLE DOLLAR AMOUNTS.	
Served Meals/Mass Feeding	\$
Other Food	\$
Mass Shelter	\$
Other Shelter	\$
Rent/Mortgage Assistance*	\$39600
Utility Assistance*	\$20400
<b>Total Requested</b>	<b>\$60,000.00</b>
* PLEASE NOTE: ALL LOCAL PROVIDERS FOR EMERGENCY RENT/MORTGAGE AND UTILITY ASSISTANCE MUST UTILIZE PIMA COUNTY'S EMERGENCY SERVICES NETWORK (ESN) TO ENSURE NO DUPLICATION OF ASSISTANCE OCCURS.	
To the best of my knowledge and belief, all of the information in this application is true and correct. The document has been authorized by the governing body of the applicant and the applicant will comply with the attached assurances if funding is awarded.	
<b>Typed name of Authorized Signature:</b> Christine Erickson, BA, RN	
<b>Authorized Signature:</b> 	<b>Date signed:</b> 06/05/2020

## Attachment B Application Form

### I. **Error! Bookmark not defined.**FEMA EFSP FUNDING HISTORY

<b>Phase CARES Request</b>	<b>\$ 60,000.00</b>
Phase 36 Received	\$ 11500
Phase 35 Received	\$ 6875

Note: FEMA funds are intended to be used to supplement or expand existing programs and services.

Describe how the organization intends to use these funds. Will the money requested in this proposal be used to support a service or program that was supported by FEMA funds in the past? If yes, describe below how services have been or will be expanded or supplemented.

These funds will be used to provide direct financial assistance to qualifying clients. Two-thirds of the funds will be used to provide direct assistance for rent and mortgage, and one-third for client utility expenses.

Map-a-Plan (MAP) is the only program in the rural area of Southern Pima County to provide homeless prevention & financial assistance to qualified recipients that apply within 3 weeks of being evicted from their housing, and has been providing assistance for over 25 years.

Yes, this program was supported by FEMA funds in the past in phases 35 and 36. The number of clients has grown more than 300% over previous years, up to March of 2020. Since the beginning of the COVID-19 Pandemic, the number of clients has increased over 1200%, compared to the previous year. We supplement FEMA funds with other funds from a local municipal grant, county funds, private foundation funds, and private donations.

### II. ORGANIZATION ELIGIBILITY CRITERIA

#### 1. Identify the status of the agency. (Select one)

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/>            | Government Agency (public entity)   |
| <input checked="" type="checkbox"/> | Private Nonprofit (501(c)(3) or 501(c)(4)) <ul style="list-style-type: none"> <li>• If your agency has not previously received FEMA funds, <b>attach</b> the Federal tax exempt letter to your submission.</li> </ul> |

#### 2. Is the agency considered in good standing by the Arizona Corporation Commission?

Y	N
x	

#### 3. A. Accounting System: Describe the accounting system used by the organization to track grant-funded expenditures and revenues.

acrural

#### B. Audit: Does the organization conduct an independent annual audit? (Check one)

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | Yes. Indicate below the CPA firm that conducted the organization's most recent financial audit and the time period covered by the audit. <ul style="list-style-type: none"> <li>• If the agency has not received FEMA funding in the last 5 years, <b>attach</b> a copy of the organization's most recent audit to your submission.</li> </ul> |
|--------------------------|--|

**No.** The organization does not conduct an independent annual audit.  
• Please attach FY2019-20 internal agency budget and year-to-date financial statements to your submission.

**4. Federal Employer Identification Number (FEIN)**

94-2783969
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**5. How does your facility assure accessibility for people with physical disabilities?**

Our building is ADA compliant
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**III. ORGANIZATION TARGET POPULATION**

Please indicate the three primary target client populations served by your agency in the list below. Type "1," "2," and "3" to identify the top three client populations. If your agency targets no specific population, please select the "NT" code.

	People with substance use disorder		Native Americans		Unaccompanied minors
	Domestic violence victims		People with AIDS/HIV		Veterans
3	Elderly	2	Racial/Ethnic Minorities		NT (no target population)
	Families with children		Single men	1	Other targeted populations (specify below):
	Mentally disabled		Single women		Single women with children

**IV. NARRATIVE**

Please answer the following questions. Limit answers to the space provided.

1. Give a brief explanation of your organization's ability to coordinate service delivery with other human service providers. Specifically identify the networks, coalitions and collaborative arrangements that your agency maintains.

Valley Assistance and our MAP team continue to maintain strong relationships and collaborations with 14 local non-profits, 11 churches, 8 local government agencies, 4 state government agencies, 2 educational institutions, 3 financial institutions, 4 health service institutions, 3 state associations and community stakeholders. We are particularly proud of the close connections to two Veterans service organizations, the Vietnam Veterans of America and the Military Order of the Purple Heart. Our intake application asks if anyone in the household has served so that we can contact the veteran's group for a quicker turn-around to offer monetary assistance.

We collaborate with the local food banks of Green Valley, Amado, and Sahuarita; St. Vincent DePaul, United Community Health; and the local Salvation Army. The food banks offer referrals for rental/mortgage assistance to the MAP Program.

We participate in monthly meetings of a coalition made up of social service agencies, local businesses, schools, and private foundations, called "Better Together".

Our local salvation army provides assistance for household utilities. We often work together with them to provide wrap-around services for client families.

2. Describe any changes in the magnitude of the current need and/or service demand experienced since January 27, 2020 as a result of the COVID-19 pandemic and subsequent closures, (for example, number of requests or types of clients).

The MAP program has experienced a 300% increase in clients over the previous year before the COVID-19 Pandemic.

During the COVID-19 Pandemic, the number of clients in the MAP-a-Plan Program has risen by more than 1224% percent from pre-pandemic levels. We expect this number to grow in the coming weeks as people continue to be layed off and furloughed. During the initial weeks of the pandemic, many clients received CARE'S Act Stimulus checks, income tax returns, and lived off savings. Now, going into the third month affected by this situation, and with the federal moratorium on rent and mortgages ending, the number of clients seeking financial assistance will be greatly affected. Because of the uncertainty caused by the COVID-19 Pandemic, we cannot predict the level of community need, but based on the census in our program, we predict a substantial rise.

**3. Give a brief explanation of how your service(s) will be addressing a gap in existing services available to community members impacted by the pandemic.**

MAP-a-Plan is the only homeless-prevention program in rural-southern Pima County, serving the communities of Sahuarita, Green Valley, Arivaca, Amado, and unincorporated areas of Sahuarita, and the rural areas surrounding these communities. Additionally, as part of the the program, VAS offers financial education courses (required for every client in the program), and workforce training (job search assistance, resume/cover letter coaching, etc), and wrap-around resource management, a holistic approach which is unique in our service area. The last year, the MAP Team has seen an over 90% success rate for unemployed clients finding jobs.

**4. Explain any anticipated funding cuts. Identify the funding source anticipated to be reduced and describe any alternative funding sources sought by the organization to make up for these cutbacks.**

Potential Cuts due to COVID-19 Pandemic:

1. Local Benevolent Organization (Country Fair White Elephant), unable to fund because their retail store has been closed. Amount of previous year's award: \$45,000.00.
2. Local Churches: Potential annual loss of \$11,700.00 due to church closure.
3. Limits/Cancellations of fundraising events

Alternative Funding Sources:

1. Extensive grant writing to COVID-19 funds
2. Direct appeals to private foundations/donors
3. New Partnerships/grants with United Way of Tucson and Southern Arizona and Greater Green Valley Community Foundation.

**5. Define the geographical area to be served with requested FEMA EFSP CARES funds.**

Southern-rural portion of Pima County (south of Pima Mine Road to the southern county line, including the town of Sahuarita, unincorporated areas of Sahuarita, Green Valley, Amado, and Arivaca.

**6. Briefly describe the target population for each service for which you are requesting FEMA EFSP CARES funds.**

For rent/mortgage assistance, the number one target population is single women with children, followed by minority families with children. Many of these families have been broken through divorce, one parent leaving, domestic violence, job cuts, health issues, and being caught in a rut in the cycle of poverty. The third largest target population is the elderly. Green Valley is a retirement community, We are seeing more and more single elderly women, who have lost their spouse and the corresponding retirement/social security income. Additionally, people are living longer than their retirement savings.

For utility assistance, the largest groups are female head-of-households, followed married couples. It is now common to see late bills in excess of \$700-900.

**7. Please discuss how your program collaborates with other local pandemic response efforts.**

We collaborate with all of the HMIS participating agencies and network with them via meetings, workshops, teleconferences, and HMIS meetings. We refer clients to those agencies based on the needs of the client at the time of their homeless situation. We also provide the client with a copy of the "need help" guide to services in Tucson and Pima County and other resources obtained from Arizona Self-Help Website.

V. BUDGET AND FINANCIAL/SERVICE INFORMATION

**Unit of Service/Request**

Complete the appropriate table for each category in which funding is requested.

Error! Bookmark not defined.Shelter Category					
	Column A	Column B	Column C	Column D	Column E
Shelter Category	FEMA Funds Requested	Per Diem	FEMA-Funded Total Nights	FEMA-Funded Number of Rural Clients	FEMA-Funded Number of Clients Served
Mass Shelter - Direct Cost	\$	Not applicable			
Mass Shelter - Per Diem	\$	\$12.50			
Other Shelter	\$	Not applicable			

**GUIDANCE: Shelter Category**

- Column A State the amount of FEMA funds you are requesting.
- Column B In past years the local board has selected a \$12.50/night per diem rate. ***This amount may change when the award is finalized.***
- Column C Indicate the total number of nights for mass shelter (Columns A +B = C).
- Column D State the number of rural clients to be served with FEMA EFSP request.
- Column E Indicate the total number of clients to be served (include rural clients reported in Column D) with FEMA request.

Food (Served Meals/Mass Feeding) Category					
	A	B	C	D	E
Food Category	FEMA Funds Requested	Meal Per Diem	FEMA-Funded Total Meals	FEMA-Funded Number of Rural Clients	FEMA-Funded Number of Clients Served
Served Meals - Direct Cost	\$				
Served Meals - Per Diem	\$	\$2.00 per meal			

**GUIDANCE: Food Category**

- Column A: Indicate the amount of FEMA funds you are requesting.
- Column B In past years the local board has selected a \$2.00/meal per diem rate. ***This amount may change when the award is finalized***
- Column C State the total number of meals served with FEMA funds (Columns A ÷ B = C).
- Column D Indicate the number of rural clients to be served with FEMA request.
- Column E State the total number of clients to be served (include rural clients reported in Column D) with FEMA request.

<b>Other Food Category</b>	
FEMA funds requested:	\$
Indicate the number of rural clients to be served with FEMA request.	
Please use the space below to document how your request will be used. Give specifics (e.g., FEMA funds will buy approximately "X" number of food boxes to help "X" number of clients at "X" approximate cost per box).	

<b>Financial Assistance Category</b>				
*Note: All local providers for emergency rent/mortgage and utility assistance must utilize Pima County's Emergency Services Network (ESN) to ensure no duplication of assistance occurs.				
	A	B	C	D
Financial Assistance Category	FEMA Funds Requested	Number of Households Served	Average Bill	Number of Rural Households Served
Rent/Mortgage	\$39600	38	\$1050/month	38
Utility	\$20400	29	\$700/month	29

- GUIDANCE: Financial Assistance Category**
- Column A: Indicate the amount of FEMA funds you are requesting.
  - Column B: Indicate how many households (including rural households) are projected to be served with FEMA EFSP funds.
  - Column C: State the amount of the average bill expected to be paid (Columns A ÷ B = C).
  - Column D: Indicate how many rural households are projected to be served with this FEMA request.

**Program/Service Revenue & Expenditures**

Complete tables A and B for each category in which FEMA EFSP funds are requested. Please reproduce this page if you are requesting funding in more than one service category.

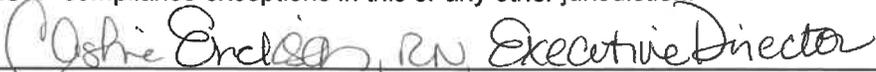
<b>A. Program/Service Revenue</b>	
Provide budgeted revenues for this program year for each service for which FEMA EFSP Phase CARES funds are requested. At the bottom of the table, indicate the percent of the total program revenues that will be met with FEMA assistance.	
<b>Service Category: Financial Assistance/COVID-19 Related</b>	
Funding Sources	Amount
Federal Funds	\$
State Funds	\$
City of Tucson Funds	\$
Pima County Funds	\$
Arizona Health Care Cost Containment System	\$
Pima Council on Aging	\$
Title XX	\$
United Way	\$30000
Program Revenues/Client Fees	\$
Foundation Grants	\$42200
Fundraising/Donations	\$10000
Other/In-Kind	\$
FEMA EFSP Request	\$60000
<b>Total Service Funding</b>	<b>\$142200</b>
What percentage of your Program budget is the FEMA funding request?  <i>Example: Motel Voucher Program:</i> \$8,000 FEMA FUNDING REQUEST <u>\$2,000 PRIVATE FUNDS</u> \$10,000 = 80% of Program Budget	<b>42.2</b> %
What percentage of your overall Agency Budget is the FEMA funding request?  <i>Example:</i> \$250,000 AGENCY BUDGET <u>\$8,000 FEMA FUNDING REQUEST</u> = 3% of Overall Agency Budget	<b>9.3</b> %

## Attachment C LRO Certification

### Local Recipient Organization (LRO) Certification Form

As a recipient of Emergency Food and Shelter National Board Program funds made available for FEMA EFSP Phase CARES and as the duly authorized representative of Green Valley Assistance Services, Inc , I certify that my organization

1. Is not debarred or suspended from receiving Federal funds,
2. Will not and will ensure employees, volunteers and other individuals associated with the program will not engage in any trafficking of persons during the period this award is in effect,
3. Will not and will ensure employees, volunteers and other individuals associated with the program will not use EFSP funds to support access to classified national security information,
4. Has the capability to provide emergency food and/or shelter services
5. Will use funds to supplement/extend existing resources and not to substitute or reimburse ongoing programs and services,
6. Is a nonprofit corporation or an agency of government,
7. Will not use EFSP funds as a cost-match for other Federal funds or programs,
8. Has an accounting system, and will pay all vendors by an approved method of payment,
9. Conducts an independent annual review if receiving \$25,000-\$49,999; an independent annual audit if receiving \$50,000 or more in EFSP funds; and an OMB Circular A-133 if receiving \$500,000 or more in Federal funding,
10. Has not received an adverse or no opinion audit,
11. Understands that cash payments (including petty cash) are not eligible under EFSP,
12. Has provided a Federal Employer Identification Number (FEIN) to EFSP,
13. Has provided a Data Universal Number System (DUNS) number issued by Dun & Bradstreet (D&B) and required associated information to EFSP,
14. Practices nondiscrimination, and will not refuse service to an applicant based on race, color, national origin, religion, sex, age, or disability,
15. Will not engage in religious proselytizing or religious counseling in any program receiving Federal funds,
16. Will not charge a fee to clients for EFSP funded services,
17. Will comply with the FEMA Phase CARES Responsibilities & Requirements Manual, particularly the Eligible and Ineligible Costs section, and will inform appropriate staff or volunteers of EFSP requirements,
18. Will provide all required reports to the Local Board in a timely manner; (i.e., Second Payment/Interim Request and Final Reports),
19. Will expend monies only on eligible costs and keep complete documentation (copies of canceled LRO checks -- front and back, invoices, receipts, etc.) on all expenditures for a minimum of three years after end-of-program date, and for compliance issues until resolved.
20. Will spend all funds, close-out the program by my jurisdiction's selected end-of-program date, and return any unused funds to the National Board (\$5.00 or more; checks made payable to United Way Worldwide/Emergency Food and Shelter National Board Program, 701 North Fairfax Street, Suite 310, Alexandria, VA 22314),
21. Will provide complete, accurate documentation of expenses to the Local Board, if requested, following my jurisdiction's selected end-of-program date,
22. Will comply with the Office of Management and Budget Circular A-133 if expending \$500,000 or more in Federal funds,
23. Will comply with lobbying prohibition certification and disclosure of lobbying activities if receiving \$100,000 or more in EFSP funds, as applicable, and
24. Has no known ESEF compliance exceptions in this or any other jurisdiction.

Signature: 

Name: Christine Erickson, BA, RN

Title: Executive Director

Date: 06/05/2020

LRO ID Number: 027200-046

FEIN:94-2783969

DUNS Number: 149087710

Address: 3950 S Camino del Heroe

City, State, Zip Code: Green Valley, AZ 85614

Phone Number: 520-625-5966

Fax Number: 520-625-1261

Email Address: c.erickson@valleyassistanceservices.org

<b>B. Program/Service Expenditures</b>	
Indicate budgeted expenditures for this program year for each service for which FEMA EFSP Phase CARES funds are requested. TOTAL AGENCY BUDGETS ARE NOT ACCEPTABLE.	
<b>Service Category: Financial Assistance/COVID-19 Related</b>	
Line Item Budget Categories	Total Service Budget
Personnel/Employee Related Expenses	\$25000
Professional/Outside Services	\$4000
Facilities/Occupancy	\$8500
Travel	\$1000
Other (Specify):Funds Provided For Clients	\$102200
Other (Specify):Supplies	\$1500
Other (Specify):	\$
<b>Total Service Expenditures</b>	<b>\$142200</b>





**Green Valley Assistance Services, Inc.**  
**Profit & Loss Budget Performance**  
 January through May 2020

	<u>Jan - May 20</u>	<u>YTD Budget</u>	<u>Annual Budget</u>
<b>Ordinary Income/Expense</b>			
<b>Income</b>			
Donations	62,231	54,491	168,879
Fee for Svcs Income	813	379	1,847
Fundraising Events	17,912	18,013	27,792
Grants and Contracts	77,813	67,996	275,010
Other Income	2,620	2,545	4,199
Wills, Bequests & Endowments	28,645	23,000	27,933
Income Allocation	0	0	0
<b>Total Income</b>	<u>190,034</u>	<u>166,424</u>	<u>505,660</u>
<b>Expense</b>			
Personnel/Employee Benefits	119,561	92,444	236,962
Funds Provided for Clients	77,070	31,379	139,472
Other Program Svcs for Clients	3,733	3,212	6,617
Occupancy	11,179	7,997	17,576
Operating Costs	19,041	23,092	78,588
Program Costs	52	268	401
<b>Total Expense</b>	<u>230,637</u>	<u>158,392</u>	<u>479,616</u>
<b>Net Ordinary Income</b>	<u>(40,603)</u>	<u>8,032</u>	<u>26,044</u>
<b>Other Income/Expense</b>			
<b>Other Expense</b>			
Depreciation Expense	0	0	26,044
<b>Total Other Expense</b>	<u>0</u>	<u>0</u>	<u>26,044</u>
<b>Net Other Income</b>	<u>0</u>	<u>0</u>	<u>(26,044)</u>
<b>Net Income</b>	<u><u>(40,603)</u></u>	<u><u>8,032</u></u>	<u><u>0</u></u>

**Note: GVAS fiscal year is 1/1 to 12/31**

Budget was approved January 2020 before the State/National shutdown

GVAS now providing EFSP payments for those affected by the shutdown.

GVAS uses retained earnings to provided client payments until grant funds are received

The 12/31/19 Independent review report will not be available until fall.

