COMMUNITY PARTNERSHIP GRANT AGREEMENT

Fiscal Year 2017-2020

THIS AGREEMENT (hereinafter the "Agreement") is entered into this 1st day of October 2017, between the City of Hallandale Beach, a municipal corporation of the State of Florida (hereinafter referred to as the "CITY/GRANTOR") and First Call for Help of Broward, Inc., dba 2-1-1 Broward, a Florida not for profit corporation (hereinafter referred to as the "GRANTEE").

WHEREAS, The City of Hallandale Beach (City/Grantor) through the 2017-2018 Fiscal Year Budget has grant funds to support Community Partnership programs and services that will benefit the residents of Hallandale Beach; and

WHEREAS, the intent of this funding is to allocate resources to qualified non-profit organizations and publicly funded entities that provide community service programs, training opportunities and core educational services.

NOW, THEREFORE, in consideration of the mutual covenants and obligations herein set forth, the parties understand and agree as follows:

1. Terms of Agreement

The term of this agreement shall be for the period of October 1, 2017, through September 30, 2018 ("Initial Term"). The Agreement may be renewed for additional periods comprising the Renewal Option Periods from October 1, 2018, through September 30, 2019; and October 1, 2019, through September 30, 2020, at the end of the term at the sole option of the CITY. The Initial Term and Renewal Option Periods shall collectively be referred to as the "Agreement Term."

- 1.1 GRANTEE understands and acknowledges that the funding will only be for the Agreement Term stated herein. This Agreement is renewable at the sole discretion of the CITY, contingent upon but not limited to the following:
- A. Continued demonstrated and documented need for the services or priority area of funding;
- B. Satisfactory program performance by GRANTEE; and
- C. The availability of funds from the CITY. The CITY may, during the contract period, terminate or discontinue the services covered in this proposal at the end of CITY'S then current fiscal year upon forty-five (45) days prior written notice to the successful proposer. Such prior written notice will state that the lack of appropriated funds is the reason for termination.

This written notification will thereafter release the CITY of all further obligations in any way related to the services covered herein. This Agreement may be terminated with cause or without cause in accordance with the provisions contained in Section 10 of this Agreement.

2. Program Description/Deliverables and Project Execution

The CITY hereby grants to GRANTEE a Community Partnership Grant in an amount not to exceed \$10,960 in consideration of and on condition that the sum be expended in carrying out the purpose as set forth in the funding request and under the terms and conditions set forth in this Agreement. GRANTEE agrees to assume any obligation to furnish any additional funds that may be necessary to complete the project. Grantee agrees to assume any obligation to furnish any additional funds that may be necessary to complete the project. Funding shall be used to benefit the residents of the City of Hallandale Beach.

2.1. GRANTEE shall use funding for services as detailed in Exhibit A "Scope of Work/Work Plan", and Exhibit B "Budget". GRANTEE agrees to submit in writing, any deviation from the program as described in the exhibits attached to this Agreement for approval by the City prior to the implementation of changes.

3. Payment Request and Reporting Schedule

GRANTEE ensures that the Agreement requirements are met through completion of a Payment Request (Exhibit C) Monthly Report (Exhibit D), and a Final Report (Exhibit E) adhering to the following schedule:

Report Number	<u>Month</u>	Date Due to City
1	October Advance Request*	October 10
2	November Advance Request*	October 10
3	October Reports	November 10
4	November Reports	December 10
5	December Reports	January 10
6	January Reports	February 10
7	February Reports	March 10
8	March Reports	April 10
9	April Reports	May 10
10	May Reports	June 10
11	June Reports	July 10
12	July Reports	August 10
13	August Reports	September 10
14	September (Final Report)	October 10

- 3.1. If the Grantee's project is completed prior to the full fiscal year and all grant funds have been disbursed, a Final Report is due by the 10th of the next month after completion of the project. The CITY reserves the right to require reports more frequently than stated if necessary, but no more than once a month.
- 3.2. Reports are due on the 10th of each month. Reports not received by the 10th of the month will be paid the next month. Failure to submit a report when due will result in nonpayment for the month in which the report was due, payment will be paid the following month.

4. Funding and Disbursement Requirements

The amount of compensation payable by the CITY to the GRANTEE shall be based on the Units of Services rate (if applicable), Payment Schedule and conditions hereto incorporated into the Agreement.

4.1. The GRANTEE will provide units of deliverables, including various client services, and in some cases may include reports, findings and drafts as specified in this Agreement, which the CITY must receive and accept in writing prior to payment.

5. Records, Documentation and Recordkeeping

The GRANTEE shall establish and maintain sufficient records to enable the CITY to determine whether the GRANTEE has met the requirements of the Community Partnership Grant Agreement.

5.1. GRANTEE shall maintain all records related to performance of this Agreement and agrees to maintain satisfactory financial accounts, client demographic records, description of activities or services (including location, date and time/s), other related documents and records for the Project. Such records shall be available for a period of three years from the date of receipt of final payment under the Agreement, for inspection and audit by representatives of the CITY, at any reasonable time and place. If audit findings have not been resolved, the records must be retained beyond the three-year period as long as required for the resolution of the issue raised by the audit.

6. Financial Accountability, Consequences and Recapture of Funds

The CITY reserves the right to audit the records of the GRANTEE at any time during the performance of this Agreement and for a period of three years after its expiration/termination.

- 6.1. The CITY reserves the right to apply financial consequences or recapture funds in the event that the GRANTEE shall fail: (1) meet the minimum level of service or performance identified in the Agreement, (2) to comply with the terms of this Agreement, or (3) to accept conditions imposed by the CITY.
- 6.2. Financial consequences may include but are not limited to contract suspension, withholding payments until deficiency is cured, tendering only partial payment, refusing payment and/or cancellation of the Agreement.

7. Dispute Resolution

Any dispute concerning performance of the Agreement will be decided by the Community Partnership Grants Committee, who will reduce the decision to writing and serve a copy to the GRANTEE.

8. Project Withdrawal

If GRANTEE wishes to withdraw a Project, GRANTEE shall notify the CITY of this right pursuant to the Notices provision below.

8.1. In the event an approval project is not completed and payment have been disbursed or advance, said funds plus accrued interest must be returned/ refunded to the City.

9. Promotion of Program Services

GRANTEE agrees to promote the CITY when marketing, website, media opportunities, etc. The GRANTEE further agrees to assist the CITY in making a strong case for Community Partnerships by providing timely, accurate data and reporting as requested regarding social service needs of the CITY.

10. Termination

This Agreement shall be terminated upon the occurrence of:

- (1) Breach of this Agreement by the GRANTEE.
- (2) GRANTEE'S failure to maintain 501(c) (3) status.
- (3) GRANTEE'S failure to abide by local, state and federal laws.
- (4) Written notice from the CITY to the GRANTEE to terminate the services under the Agreement; termination by the CITY may be for convenience.
- (5) Written notice by the GRANTEE to the CITY of GRANTEE'S intent to terminate the Agreement.
- 10.1. Notice of termination shall be provided in accordance with the "NOTICES" section of this Agreement except that notice of termination by the City Manager, which the City Manager deems necessary to protect the public, health, safety, or welfare may be verbal notice that shall be promptly confirmed in writing in accordance with the "NOTICES" section of this Agreement.

11. Assignment

Neither this Agreement nor any right or obligation provided for by this Agreement shall be assigned to a Sub recipient by the GRANTEE without the consent of the CITY.

12. Charitable Purpose

Activities under this Agreement will not be used for the purpose of profit.

13. Obligations of GRANTEE

The Grantee shall carry out the services and activities described in the Scope of Work/Work Plan, which is attached as Exhibit A. The Grant Application, Work Plan, Grant Guidelines and any subsequent change or addition approved in writing by the CITY is hereby incorporated in this Agreement as though set forth in full in this Agreement. This Agreement may only be amended upon the written agreement of both the CITY and the GRANTEE.

GRANTEE acknowledges to have read and understands the contents of the Grant Guidelines and will act in accordance with these guidelines and procedures as a condition of acceptance of the funding.

14. Governing Laws and Compliance

The GRANTEE shall comply with all applicable federal, state, and local laws, codes, ordinances, rules, and regulations in performing its duties, responsibilities, and obligations pursuant to this Agreement.

1. Federal Law

The GRANTEE agrees to comply with all federal laws, including but not limited to:

- 14.1. Executive Order 11246, Equal Employment Opportunity, as amended by Executive Order 11375 and others, and as supplemented in the Department of Labor regulations.
- 14.2. The GRANTEE will not employ an unauthorized Alien. Such violation will be cause for termination of the Agreement.
- 14.3. The GRANTEE is a non-profit provider and is subject to the Internal Revenue Services (IRS) tax exempt organization reporting requirements (filing of a 990 or Form 990-N).

2. State Law

This Agreement shall be governed by the laws of State of Florida and of Broward County, Florida. Any action for breach, enforcement, interpretation, or arising out this Agreement shall be brought only in the Circuit Court of the Seventeenth Judicial Circuit in and for Broward County, and the parties agree to submit to the jurisdiction of that Court. The parties waive trial by jury.

14.4. If any provision of the Agreement is held unenforceable, then such provision will be modified to reflect the parties' intention. All remaining provisions of this Agreement shall remain in full force and effect.

15. Insurance

At all times during the term hereof, the GRANTEE shall maintain General Liability insurance acceptable to the CITY. Prior to commencing any activity under this Agreement, the GRANTEE shall furnish to the CITY an original Certificate of Insurance indicating that the GRANTEE is in compliance with the provisions of this Agreement.

15.1. The GRANTEE shall also provide Worker's Compensation Insurance as required by the laws of the State of Florida if employing an individual.

15.2. Indemnification

Each party assumes responsibility for the negligence of its own respective employees, appointees, or agents; and, in the event of any claims for damages or lawsuits for any remedy, each party will defend its own respective employees, appointees, or agents.

15.3. To the fullest extent permitted by law, the GRANTEE agrees to indemnify and hold-harmless the CITY, its officers and employees from any claims, liabilities, damages, losses, and costs, including, but not limited to, reasonable attorney fees to the extent caused, in whole or in part, of the GRANTEE or persons employed or utilized by the GRANTEE in performance of the Agreement.

16. Notices

All notices provided for or required under this Agreement shall be made by certified mail, return receipt requested to the addresses set forth below:

City of Hallandale Beach:

Roger M. Carlton, City Manager 400 S. Federal Highway Hallandale Beach, FL 33009

With Copy to:

Attn: Community Partnership Grants Program 1000 NW 8th Avenue Hallandale Beach, FL 33009

GRANTEE:

Sheila J. Smith First Call for Help of Broward, Inc., dba 2-1-1 Broward 250 N.E. 33rd Street Oakland Park, FL 33334

17. Contingencies

Both CITY and the GRANTEE recognize that there exists the possibility of contingent events which may adversely impact the GRANTEE'S ability to provide services as provided for under this and other agreements with other GRANTEE'S, including without limitation, the failure of contributors to remit funds pledged. In the event that any such contingencies should develop or occur, the CITY shall have the right to reduce the amount of funds, suspend the services until conditions change or terminate this agreement and be relieved of its obligation to deliver according to this agreement.

18. Representation of Authority

Each individual executing this Agreement on behalf of a party hereto hereby represents and warrants that he or she is, on the date he or she signs this Agreement, duly authorized by all necessary and appropriate action to execute this Agreement on behalf of such party and does so with full legal authority.

19. Multiple Originals

Multiple copies of this Agreement may be executed by all parties, each of which, bearing original signatures, shall have the force and effect of an original document.

[Execution on Next Page]

IN WITNESS WHEREOF, the parties hereto have made and executed this Agreement on the respective dates under each signature: CITY OF HALLANDALE BEACH through its authorization to execute same by City Commission action on the 20th, day of September 2017, and First Call for Help of Broward, Inc., dba 2-1-1 Broward signing by and through its President/CEO duly authorized to execute same.

<u>CITY</u>	
ATTEST:	CITY OF HALLANDALE BEACH
By_ Mario Bataille	Roger M. Carlton
City Clerk	City Manager
Approved as to legal sufficiency and form by CITY ATTORNEY	
Jennifer Merino City Attorney	

[EXECUTION CONTINUED ON NEXT PAGE]

GRANTEE

ATTEST:			_
	(Name of Corporate	tion)	
	Rv		
(Secretary)	By (Signature and Title)		
(Corporate Seal)			
(Print Name and Title Signed	d Above)		
Day of, 20	÷		
Provide notary attestation	for Grantee's signature below:		
STATE OF FLORIDA)			
COUNTY OF BROWARD)			
The foregoing Agreement w		day of	
The foregoing Agreement w	as		
The foregoing Agreement w by (Name of Signator	as	(Title)	
The foregoing Agreement w by (Name of Signator	as	(Title)	
The foregoing Agreement w by (Name of Signator on behalf of	(Name of Entity) OR Produced Identification_	(Title)	
The foregoing Agreement w by (Name of Signator on behalf of Personally known	(Name of Entity) OR Produced Identification_	(Title)	

(Name of Notary Typed, Printed, or Stamped)



EXHIBIT A WORK PLAN/SCOPE OF WORK

Agency Name: First Call for Help Broward - 211 Broward

Program Name: 211 Helpline and Touchline Services

I. Program Intent

First Call For Help, 2-1-1 Helpline Referral Services offers a safety net for individuals, children and families who reside in Hallandale Beach and serves as a gateway for residents who need help ot connect with health and human service programs. Helpline counselors speak to residents anonymously and confidentially who will listen, de-escalate crisis situations, identify caller/family needs, help callers develop an action plan, link callers with appropriate services/supports, and walk them through the process of identifying what to do next. Bilingual staff and telephone interpreter services ensure that callers can communicate in the language with which they are most comfortable.

Helpline Counselors are extensively trained in crisis intervention techniques, lethality (suicide) assessment, active and supportive listening, problem solving, local service systems, needs of special populations and cultural competency.

First Call for Help services address the priority area "Health and Wellness" by offering residents assessment, support, and connections to services that will improve their physical and emotional health and well-being. Counselors assess each family's comprehensive needs and offer the support needed to put them on the path to resolution and stability. Counselors make referrals for emergency food, financial assistance, housing, utility assistance, health care, and loss of income. Teenspace offers health-related information for youth about issues such as STD's, emotional health, relationships and substance abuse.

Counselors assist with prevention of crisis situations (such as loss of income) from escalating into something even more critical like homelessness. In life threatening or crisis situations, outside interventions like 911 or the mobile crisis team are engaged. To reach more residents and expand the ways in which residents can connect with and receive help from 2-11, live chat and email services will be launched.

First Call for Help makes daily calls to frail seniors who live alone to check on their safety and well-being. If they don't answer, in-person wellness checks are conducted by non-emergency police offers. There is no fee for service and there are no eligibility requirements. First Call for Help partners with more than 1,000 agencies.

A. **Target populations**: are Hallandale Beach residents from all walks of life: low income, non-English speakers, disabled, mentally ill, homeless, elderly, victims of domestic violence, teens, veterans and people seeking information, guidance or someone to listen.



B. Method of Service Delivery (Mandatory Components)

	# to be served
Service Name and Description	
Service Calls – Respond to inbound calls providing advocacy/intervention and follow-up. All participants will be assessed at intake to determine their individual strengths, barriers and abilities. Respond to calls, texts, live chats, emails; make calls to seniors, electronically record demographic, need, referral and other call data.	1,300
Community Outreach Activities - Distribution of 2-1-1 Information in Hallandale Beach	3 per month

C. Service Locations:

The GRANTEE shall provide program services at the following location(s):

Site	Street Address	City	Zip Code
2-1-1 Call Center – Serves			
are telephone Based	250 NE 33 rd Street	Oakland Park	33334

D. Dates/Days/Hours of Operation: The GRANTEE shall operate the program from October 1, 2017 through September 30, 2018. Daily hours of operation shall be as follows:

Dates	Time Start	Time End
7 Days/week, 365 days/year	24 hours/day	24 hours/day

Additionally, special program activities and events may take place on evenings and Saturdays as needed. The GRANTEE agrees to notify the City within three (3) days in the event of changes to service locations and/or hours of operation.

E. Staffing Chart

Staff positions and duties shall be as follows:

Position	Primary Duties
President/CEO	Overall agency responsibility
Chief Operating Officer	Overall project responsibility
Director, Helpline Services	Day-to-day oversight of helpline
Director, Quality Assurance/Reporting	QA, QI, Reports



Position	Primary Duties
Director, Training & Staff Development	Train direct service staff
Helpline Counselor	Answer calls, assist callers
Resource Specialist	Add/update programs in database

F. Partnership Recognition

The GRANTEE shall make a concerted effort to promote the CITY and the GRANTEE as partners for these program services. Program staff shall be fully aware of the partnership and able to articulate that their program is supported and funded by the CITY.

G. <u>File Management</u>

<u>Documentation:</u> The GRANTEE will maintain all appropriate supporting documentation to demonstrate they satisfied the requirements for delivering services as it is defined and paid for during the contract period.

<u>Statistical Demographic Report</u>: The GRANTEE agrees to maintain complete and accurate data and support data quality assurance mechanisms. Failure to implement these measures may impact future funding.

H. Method of Payment

- 1. CITY agrees to pay GRANTEE the total amount of <u>10,960.00</u> for work actually performed and completed pursuant to this Agreement, which amount shall be accepted by GRANTEE as full compensation for all such work. It is acknowledged and agreed by GRANTEE that this amount is the maximum payable and constitutes a limitation upon the CITY's obligation to compensate GRANTEE for its services related to this Agreement. This maximum amount, however, does not constitute a limitation, of any sort, upon the GRANTEE's obligation to perform all items of work required by or which can be reasonably inferred from the Scope of Services.
- 2. Payment shall be due within thirty (30) days of date stipulated on the invoice, provided invoice is accepted for payment. Payment shall be made only for approved invoices. The CITY retains the right to delay or withhold payment for services which have not been accepted by the CITY.
- 3. Notwithstanding any provision of this Agreement to the contrary, CITY may withhold, in whole or in part, payment to the extent necessary to protect itself from loss on account of inadequate work which has not been remedied or resolved in a manner satisfactory to the City's Contract Administrator or failure to comply with this Agreement. The amount withheld shall not be subject to payment of interest by CITY.



I. Work Plan

Work Task	Start-Up Date	Completion Date
Analyze call volume, schedule staff hours	10/1/17	Ongoing/monthly
Identify and establish methods to track, measure,	10/1/17	10/31/017
evaluate & report outcomes		
Analyze impact of outreach in prior year; develop	9/1/17, 9/1/18, 9/1/19	9/30/17, 9/30/18,
outreach plan for Hallandale Beach for upcoming		9/30/19
Develop outreach plan to identify & enroll Hallandale	10/1/17	11/30/17
Beach seniors in Touchline		
Soft Launch – text, live chat, email services	1/1/18	3/1/18
Develop staff training schedule	10/1/17	Ongoing/monthly
Prepare and submit performance/fiscal reports to	According to	Ongoing
City of Hallandale Beach	schedule	
Identify and participate in community groups/task	10/1/17	11/30/17/ongoing
forces to coordinate efforts		thereafter
Sustainability activities: grant submissions, corporate	No City of Hallanda	le Beach funds will be
partnerships, events, earned revenue, etc. activities	used	for these



J. Performance Measures

The GRANTEE shall report individual outcome measurement results. Upon CITY request, GRANTEE shall also report in narrative form, the reasons for dropping-out and failures to achieve the outcomes, as well as, describing any factors that effected outcome achievement or measurement. The GRANTEE shall be responsible for purchasing and including in program budgets outcome tools applicable to their programs.

How Much Did We Do?					
Performance Measure	Goal per Contract	Evaluation Tool	Administration Schedule		
# of Hallandale Beach Residents Served	1,300	Client Data Tracking Sheet	Analyzed on a Monthly Schedule		
# of Outreach Activities Conducted	36	Data Collected on Spreadsheet	Analyzed on a Monthly Schedule		
	How Well Did We	Do It?			
% of funded allocation utilized	100%	Electronic Call Data Financial Reports	Analyzed on a Quarterly Schedule		
Program Services Site Visit Observations and Programmatic Monitoring	On Track/Meets Expectations	Site Visit and Monitoring Report	Analyzed on a Quarterly Schedule		
Is Anyone Better Off?					
% of callers reporting positive response from their call to 211 Helpline.	95%	Survey	Analyzed on a Monthly Schedule		



EXHIBIT B BUDGET

Expense Item	Amount	Other/In-	Justification
	Requested	Kind	
		Funding	
Personnel	\$10,960	\$2,579,110	29% of Helpline Counselor
			@\$37,500 (salary, taxes, benefits)
Consultants		\$499,325	
Supplies		\$21,000	
Other/Specify		\$812,419	
TOTAL Requests			
	040.000	fo 044 054	TOTAL DUDGET #0.000.044
	\$10,960	\$3,911,854	TOTAL BUDGET: \$3,922,814

ADMINISTRATIVE COST

The intent of funding is to provide direct services to residents; therefore, Administrative cost should be kept to a minimum. Please provide the amount or percentage of Administrative cost for this budget: \$_0.0%_____



EXHIBIT C FY 2017-2018 MONTHLY PROGRESS REPORT

A.	Project Informat	tion:				
	Agency Name					
	Person Preparin	g the Report				
	Job Title					
	Signature			4		
	Project Name					
	Project Start- Up	o Date				
	Project Complet	Project Completion Date				
	Amended Comp (if applicable)	letion Date			<i>*</i>	
B1.	. Project Cost					
			Funds Expended	to Date	Percentage	
Total F	Project	\$	\$		\$	
City Fu	unding	\$	\$		\$	
Other	Funding	\$	\$		\$	
2 DIa	ase list other Fund	ding Sources	and Amount.			



EXHIBIT C **FY 2017-2018**

MONTHLY PROGRESS REPORT (Continued)

B4. Anticipated Changes in Sta					
1. Office Hours:					
2. Resignations:					
3. Part-time or Full time I	-mployee(s):				
C1. Brief Project Summary (Ger	neral scope of work pe	rformed during the month. Include			
		date and type of service(s) as a separate			
Attachment)	, ,				
C2. Describe specific work tasks	& status completed th	nis month:			
Work Tasks		Status (i.e. underway, completed)			
C3. Describe success or probler	ns encountered with Pi	roject:			
C4. Identify technical assistance	needed.				



EXHIBIT D **FY 2017-2018**

REQUEST FOR PAYMENT (Contract Period: October 1, 2017 to September 30, 2018)

MEQUESTIC		vi (Contract	i eriou. Oc	1000 1, 2011		oepiellibel 30, 2	010)	
2. O r	Organization: First Call for Help Broward - 211 Broward							
3. P u	Purchase Order Number:							
4. Bi	. Billing Month Covered:**							
5. %	. % of Total Grant, Expended thru this Billing:							
6. Co	ost Catego	ories	Total Expenditures Up to Last Billing		Expenditures This Billing		Total Expenditures To Date	
A. Pr	oject Cos	ts						
		Personnel						
		nge Benefits						
		Contractors						
Eq	uipment (C	Over \$5,000)			$\overline{}$			
	Matari	Travel als/Supplies				``		
	Materi	Misc/Other						
	Indirect/Ac	dministration						
	ant Amou							
Funds Received to Date								
Available (Grant Amo	unt						
Remaining Balance								
7. Ac	tivity	Units of Service s (per year)	Rate Per Unit of Service* (per year)	Frequency Services (per year)		Not to Exceed Amount	#s Served	Monthly Payment Request
Inbound C	alls	Per Call	\$ 6.95	Per Call (11	8	\$9,875.80		
				projected Monthly)				
Advocacy/ on	Interventi	Per call	\$ 6.95	Per Call (5 projected Monthly)	i	\$417.00		
Follow-Up		Per call	\$ 6.95	Per Call (5 projected Monthly)		\$417.00		
Outreach		Per Event	\$.6.95	3 projected per mo	nth	\$250.20		
				Total request**		\$10,960.00		

^{**}All payments requests, with corresponding monthly report, shall be submitted to the City within 60 days of delivery of service. Above units of services is per grant year.



EXHIBIT E FY 2017-2018

FINAL REPORT

The Final Report is an opportunity for you to inform the City about the important work you do, and it is a valuable tool for the City to use in assessing the success of the project and future funding considerations for your organization. Please complete the report and submit to the City within thirty days of completion of your project.

Org	ganization:			
Dat	e Final Report Submitted:	 		
1. C	Complete the chart below:			
ļ	A. Project Information:			
	Project Name:			
	Person Preparing the Report/ Job Title		Phone #	
	Project Start-Up Date			
	Number of participants served			
	during this period	Hallandale Beach Residents	Non- Hallandale Beach Residents	
	Participant Status to Date	Active:	Terminations: Successful:	
	Completion Date:		Total Number Served	
	Amended Completion Date (if applicable)			
В.	Project Cost:			
	Total Project Cost	Funds Expend to Date	ed Percentage	
	City Funding	\$ \$	%	
	Other Funding	\$ \$	%	
	(specify source)			



FINAL REPORT (Continued)

- 2. Please provide the information requested below on Agency letterhead. All information must be submitted typed using an 11pt font.
- i. The actual number of individuals served by the City grant award. (Provide back-up to support number of individuals served; i.e. copies of sign-in sheets, call logs, etc.)
- ii. List the specific activities used to accomplish the project goals and objectives. In the case of classes, workshops, performances, and the like, indicate the number, frequency, duration, and number of participants. Example: A total of six workshops took place on a monthly basis with each workshop lasting two hours. Ten individuals attended each workshop. (Provide copies of participant attendance logs.)
- iii. List the evaluation methods used to determine the extent to which objectives and goals were met. Provide copies of evaluation tools, such as surveys or tests, when possible. If no evaluation tool is used, please indicate such.
- iv. Indicate how you publicly recognized The City of Hallandale Beach. For example, brochures, program booklet, in annual report, press release, web site. Provide copies of all collateral materials and copies of any media coverage the project has received.
- v. Describe unexpected challenges or opportunities you encountered, if any. You may want to explain why you were unsuccessful at some levels of services. You are also encouraged to share your success stories.
- vi. Please also submit the following financial information:
 - a. Accounting of actual expenses using the Final Expenditure Report Form provided.
 - b. Copies of all expenditures to include receipts, payroll, etc.
- vii. Submit an overall Project Summary.
- viii. The Final Report must be signed by the Authorized Representative.



FINAL REPORT (Continued) FINAL EXPENDITURE REPORT FORM

Program Name:		Orga	anization:			
	(A)	(B)	(C)	(D)	(E)	(F)
	Budget Allocation	Other Program Funds	Other Grant Funds	In-Kind Funding	Total Program Budget	Budget Computation and Justification
PERSONNEL						/
CONSULTANTS/ CONTRACTORS						
EQUIPMENT (OVER \$5,000)						
MATERIALS/ SUPPLIES						
MISC/OTHER						
INDIRECT/ ADMINISTRATION						
Total	\$ 0.00	<u>\$ 0.00</u>	<u>\$ 0.00</u>	\$ 0.00	\$ 0.00	<u>\$ 0.00</u>

REMEMBER TO ATTACH ALL EXPENDITURE RECEIPTS RELATED TO GRANT FUNDS PROVIDED BY THE CITY OF HALLANDALE BEACH.

I certify that the information contained in this and correct to the best of my knowledge.	Final Report, including Budget and Attachments are true
Signature of Authorized Representative	Date
Thank you in advance for your Final Report.	Submit the Final Report to:

Community Partnership Grants 1000 NW 8th Avenue Hallandale Beach, FL 33009