



May 24, 2018

Fort Bend County
301 Jackson Street
Richmond, Texas 77469

**RE: EFSP Phase 35 Official Award Letter
Catalog of Federal Domestic Assistance (CFDA) No. 97.024**

To whom it may concern:

The Emergency Food and Shelter Program (EFSP) Phase 35 funding to jurisdictions has been awarded and our Local Board Plan for Local Board (LB) Number 782800 for Houston/Fort Bend and Harris Counties has been approved.

The Local EFSP Board, which consists of those agencies requiring participation per Federal Regulation, has submitted the recommendation for funding to Local Recipient Organizations (LROs) in our community. That recommendation was submitted in the Local Board Plan and as was previously stated, was approved at the national level. The Phase 35 EFSP program conducted in the Houston/Fort Bend and Harris Counties has been **contingently approved** for the following amount and in the following categories:

Category	Amount
Rent/Mortgage	\$107,125.00
Utility Assistance	\$89,250.00
Other Food	\$44,232.00
Total	\$240,607.00

The amounts listed above are restricted for use in the respective categories to which they have been awarded. Any reallocation of these funds among categories requires prior written approval. The Local Board has the authority to reallocate funds during the program year to meet the needs of the community. Requests for reallocations should be in writing and emailed to the Local Board Contact, Concetta Scerbo, at cscerbo@homelesshouston.org.

Reports regarding Phase 35 expenditures will be required from each LRO for monitoring purposes. The Local Board will monitor expenditures and program performances of each LRO during the Phase 35 Spend Period which is from February 1, 2018 through a date yet to be determined.

In order to coordinate services within our jurisdiction to ensure that member LROs within the expenditure categories of Mass Shelter, Rent/Mortgage Assistance or Utility Assistance will be the Homeless Management Information System (HMIS). The Coalition

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for the Homeless manages and coordinates the training and upkeep of this system. All local agencies receiving funds for:

- Mass Shelter
- Rent/Mortgage Assistance
- Utility Assistance

must abide by the business rules and requirements of having access to HMIS. Those agencies specifically identified as Domestic Violence Service Providers are exempt from the HMIS requirement, however, they will need to enter into a comparable database for the expenditure categories of Mass Shelter, Rent/Mortgage Assistance and Utility Assistance.

Consideration of continued EFSP funding will be based on funds available as well as satisfactory performance by Phase 35 LROs. Performance factors assessed by the Local Board will include but are not limited to:

- Expenditures of funds by program end date;
- Accurate and on-time submission of reports;
- Accurate submission of program audit materials;
- Adherence to audit timetable;
- Adherence to EFSP regulations;
- Correct data entry and upkeep in HMIS

Pending any outstanding issues with National, first payments to LROs for Phase 35 awards should be received in early summer. As stated, the Phase 35 Spend Period for our jurisdiction has yet to be determined but will be communicated upon full award. All LRO expenditures and payments must be within the communicated spend period. Our LB has the option to extend our Phase 35 spending period, and that will be determined at a later date.

Please sign and return a scanned copy of this letter to Concetta Scerbo at cscerbo@homelesshouston.org. If you have any questions, please contact her via phone or email as listed. Thank you for the service you provide to those in need in the community.

Sincerely,

Christy Lambright

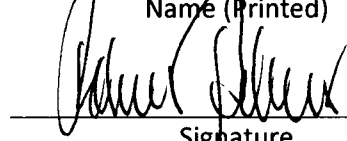
Christy Lambright
Chair, Local EFSP Board

CC: Concetta Scerbo, Local Board Contact

I certify that I am duly authorized to bind the listed agency to the terms of this agreement and do hereby agree to and accept the terms set forth above.

Robert E. Hebert

Name (Printed)



Signature

County Judge

Title (Printed)

6-5-2018

Date

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

The Coalition for the Homeless
Houston, TX United States

Certificate Number:
2018-360332

Date Filed:
05/29/2018

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend County Social Services Department

Date Acknowledged:
06/05/2018

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

G645-EFSP35
Emergency Food and Shelter Program 35

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.



6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)