

**CONTINUATION AND SECOND AMENDMENT TO GRANT AGREEMENT**

This CONTINUATION AND SECOND AMENDMENT TO GRANT AGREEMENT is entered into this 1st day of JULY, 2018 by the CITY OF SAN JOSE, a municipal corporation ("CITY") and THE COUNTY OF SAN BENITO, a political subdivision of the State of California, through its Department of Community Services and Workforce Development ("GRANTEE").

**SUMMARY PAGE**

Grant Type:	HOPWA	Contract No.:	HOP-15-002B
		Original Contract No.:	HOP-15-002

Agency:	DEPARTMENT OF COMMUNITY SERVICES AND WORKFORCE DEVELOPMENT OF THE COUNTY OF SAN BENITO
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Project:	Housing Opportunities for People with AIDS
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Description:	<p>Housing Opportunities for People with AIDS (HOPWA) funds will be used to provide direct participant services such as rental subsidies, utilities assistance, nutritional supplementation, and dental assistance. Other services may include advocacy, housing information and resource identification. Eligibility criteria consist of an HIV/AIDS positive status and an intake procedure along with a declared need for assistance.</p> <p>Continuation and SECOND Amendment to Agreement between CITY and GRANTEE. In July 2016, CITY approved funding of a HOPWA grant to GRANTEE for a two-year term retroactive from July 1, 2015. The parties extended the term of the Agreement for one additional fiscal year to June 30, 2018. The parties hereto desire to continue and extend the term of the Agreement for one additional fiscal year retroactive from July 1, 2018, increase funding by \$50,000, and amend the performance measures and budget schedule.</p>
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Funding Source:	HOPWA
Amended Amount for Fiscal Year 2018-2019	Not to Exceed \$50,000.00
Amended Amount for Fiscal Year 2017-2018	Not to Exceed \$50,000

Amended Amount for Fiscal Year 2016-2017:	Not to Exceed \$37,750.00
Amended Amount for Fiscal Year 2015-2016:	Not to Exceed \$10,000.00
Total Grant Award Not to Exceed:	Not to Exceed \$147,750.00

Payment Terms:	See <b>REVISED EXHIBIT D</b>		
Original Agreement Term:	Start Date: <u>07/01/2015</u>	End Date: <u>06/30/2017</u>	
1 <sup>st</sup> Amended Agreement Term:	Start Date: <u>07/01/2017</u>	End Date: <u>06/30/2018</u>	
2 <sup>nd</sup> Amended Agreement Term:	Start Date: <u>07/01/2018</u>	End Date: <u>06/30/2019</u>	

**PARTIES TO AGREEMENT:**

	<b>GRANTEE</b>	<b>CITY OF SAN JOSE</b>
Agency Name:	Department of Community Services and Workforce Development of the County of San Benito	Housing Department
Address for Legal Notice:	1111 San Felipe Road, Suite #108	200 E. Santa Clara St., 12 <sup>th</sup> Floor
City/State/Zip Code:	Hollister, CA 95023	San José, CA 95113-1907
Attention:	Enrique Arreola, Deputy Director	Jacky Morales-Ferrand, Director
Email Address:	<a href="mailto:earreola@cosb.us">earreola@cosb.us</a>	Jacky.Morales-Ferrand@sanjoseca.gov
Telephone No.:	831-637-9293	408-535-3855
Taxpayer ID	94-60000530	[REDACTED]
CITY Business License/Tax No.:		
Type of Entity:	County government	
State of Incorporation or Residency:	California	

**CONTACT INFORMATION**

GRANTEE Contact Person:	Enrique Arreola
Title:	Deputy Director
Telephone No:	831-637-9293
Email:	<a href="mailto:earreola@cosb.us">earreola@cosb.us</a>

CITY Contact Person:	Candy Alcosiba
Title:	Grants Analyst
Telephone No:	408-975-4419
Email:	<a href="mailto:Candy.Alcosiba@sanjoseca.gov">Candy.Alcosiba@sanjoseca.gov</a>

**REVISED EXHIBIT LIST:**

- | YES                                 | N/A                                 |   |
|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Revised Exhibit A: Scope of Service                   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Revised Exhibit B: Performance Measures/Numeric Goals |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Revised Exhibit C: Budget                             |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Revised Exhibit D: Schedule of Payments               |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Revised Exhibit E: General Grant Conditions           |

To the extent applicable, the following grant provisions are required for this AGREEMENT. (Check all provisions that apply.)

- | YES                                 | N/A                                 | <b><u>REQUIRED LANGUAGE ATTACHMENT</u></b> |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | City of San José Funding                   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Federal                                    |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | State                                      |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | County                                     |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Other Public Agency                        |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Private Funding Agency                     |

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Revised Exhibit F: Employee/Volunteer Clearance Verification and Compliance with the Child Abuse and Neglect Reporting Act |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Revised Exhibit G: Insurance   |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Exhibit H: Guidelines for Minority-Owned and Women-Owned Business Enterprises (MBE/WBE)                                    |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Exhibit I: Retroactive Services  |

**I certify that I have read and hereby consent to all the terms and provisions contained in the attached SECOND AMENDMENT, including without limitation, all exhibits. Said SECOND AMENDMENT is hereby incorporated.**

WITNESS THE EXECUTION HEREOF the day and year SECOND hereinabove written.

THE COUNTY OF SAN BENITO, a political subdivision of the State of California

GRANTEE Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title: Chair, Board of Supervisors

CITY OF SAN JOSE, a California municipal corporation

\_\_\_\_\_  
Date: \_\_\_\_\_  
JACKY MORALES-FERRAND,  
Director of Housing  
Housing Department

Approved as to form:  
HANA HARDY  
Deputy City Attorney

\_\_\_\_\_  
Date: \_\_\_\_\_



APPROVED AS TO LEGAL FORM  
SAN BENITO COUNTY COUNSEL  
[Signature] 12-4-2018  
DEPUTY COUNTY COUNSEL DATE

**CONTINUATION AND SECOND AMENDMENT TO CITY OF SAN JOSE**  
**HOUSING DEPART-MENT GRANT AGREEMENT**  
**(San Benito County HOPWA)**

This SECOND AMENDMENT TO HOPWA GRANT AGREEMENT FOR SAN BENITO COUNTY HOPWA SERVICES (“SECOND AMENDMENT”) is entered into this 1st day of JULY, 2018 by the **CITY OF SAN JOSE**, a municipal corporation of the State of California (“CITY”), and **COUNTY OF SAN BENITO**, a political subdivision of the State of California, through its Department of Community Services and Workforce Development (“GRANTEE”). All capitalized terms used but not defined herein shall have the meaning provided in the AGREEMENT. For the purposes of this SECOND AMENDMENT, CITY and GRANTEE are sometimes collectively referred to as “Parties.”

**RECITALS**

WHEREAS, on July 1, 2015, CITY and GRANTEE entered into that certain agreement titled City of San José Housing Department Grant Agreement for a grant of \$47,750 in Housing Opportunities for People with AIDS (HOPWA) funds to support GRANTEE’s San Benito County HOPWA program retroactive from July 1, 2015 through June 30, 2017 (“Agreement”); and

WHEREAS, on March 16, 2018, pursuant to Section 14 of the AGREEMENT, CITY, and GRANTEE extended the term for one additional fiscal year to June 30, 2018, retroactive from July 1, 2017, amended the scope of services, amended the performance measures, revised the budget schedule, increased funding in the amount of Fifty thousand dollars (\$50,000) for a total funding amount not to exceed One hundred thousand dollars (\$100,000), and

WHEREAS, pursuant to Section 14, CITY and GRANTEE desire to further amend the Agreement to retroactively extend the term of the Agreement from July 1, 2018 through June 30, 2019, modify the scope of services, amend the performance measures, revise the budget schedule, increase the grant award by \$50,000 for a total funding amount not to exceed \$147,750;

WHEREAS, it is understood and agreed that GRANTEE has commenced work and incurred costs prior to execution of this SECOND AMENDMENT in anticipation of its execution; and

WHEREAS, CITY agrees to reimburse GRANTEE for those costs in accordance with the terms of this continued AGREEMENT. [However, in no event shall GRANTEE be reimbursed for costs incurred prior to July 1, 2018;]

NOW, THEREFORE, the Parties agree to amend the Agreement as follows:

1. Extension of Term. The term of the AGREEMENT under Section 3 is hereby continued and extended retroactive from July 1, 2018 through June 30, 2019.
2. Increase Funding. The grant award is hereby increased by the amount of **Fifty-Thousand Dollars** (\$50,000) of HOPWA funds, for a total grant award not to exceed \$147,750.
3. Scope of Services. **EXHIBIT A** to the AGREEMENT is hereby replaced in its entirety with the **REVISED EXHIBIT A** attached hereto.
4. Performance Measures. **EXHIBIT B** to the AGREEMENT is hereby replaced in its entirety with the **REVISED EXHIBIT B**.
5. Budget Summary. **EXHIBIT C** to the AGREEMENT is hereby replaced in its entirety with the **REVISED EXHIBIT C** attached hereto.
7. MBE/WBE Guidelines. **EXHIBIT H** titled “Guidelines for Minority-Owned and Women-Owned Business Enterprises (MBE/WBE)” is hereby appended to the AGREEMENT.
8. Retroactive Services. **EXHIBIT I** titled “Retroactive Services” is hereby appended to the AGREEMENT.
9. No Other Amendments. CITY and GRANTEE acknowledge and agree that the AGREEMENT, as amended by this SECOND AMENDMENT, constitutes the entire agreement by and between CITY and GRANTEE relating to the grant of CITY HOPWA funds, and supersedes any and all other agreements written or oral between the Parties.
10. Exhibits. All exhibits attached hereto are incorporated herein by reference.
11. Reaffirmation. In the event of an inconsistency between this SECOND AMENDMENT and the AGREEMENT, the terms and conditions of this SECOND AMENDMENT shall govern and control the rights and obligations of the Parties. All other terms and conditions of the AGREEMENT not changed, amended, or modified by this SECOND AMENDMENT shall remain in full force and effect.
12. Counterparts. This SECOND AMENDMENT may be executed in counterparts, each of which shall be deemed to be an original and all of which together shall be deemed one and the same instrument.
13. Governing Law. This SECOND AMENDMENT shall be governed by and construed in accordance with the laws of the State of California.

14. Title. The title of the AGREEMENT is hereby amended to read “City of San José Housing Department HOPWA Grant Agreement For San Benito County HOPWA Services”.

**REVISED EXHIBIT A**  
**SCOPE OF SERVICES 2018-2019**

1.01 Description of Project. GRANTEE shall implement the federal Housing Opportunity for Persons with AIDS (“HOPWA”) program authorized by the AIDS Housing Opportunity Act (“AOHA”) and amended by the Housing and Community Development Act of 1992 (Pub. L. 102-550, approved October 28, 1992) in accordance with the provisions of the grant agreement by and between the CITY and the United States Department of Housing and Urban Development (“HUD”) and all rules and regulations pertaining now and hereinafter adopted with respect to the HOPWA Program (hereinafter the “Program”). The primary purpose of the Program is to provide permanent supportive housing to participants and their families who are affected by human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS). The Program provides resources and incentives to devise long-term comprehensive strategies for meeting the needs of the Program participants and their families. Program activities include rent subsidies and case management supportive services to help participants secure and maintain housing. Supportive services include assistance with housing search, advocacy, housing placement, developing activities of daily living, unit maintenance, resources, referrals, transportation and medical case management and nurse case management.

The CITY administers the HOPWA funds; GRANTEE is a county government located in the City of Hollister in the County of San Benito, California; GRANTEE has qualified as a recipient of HOPWA funds for the purpose of the Program.

HOPWA funds will be used to provide direct participant services such as rental subsidies, utilities assistance, nutritional supplementation, and dental assistance. Other services may include advocacy, housing information and resource identification. Eligibility criteria consist of an HIV/AIDS positive status and an intake procedure along with a declared need for assistance. CITY desires to grant HOPWA funds to the GRANTEE to defray the cost of providing the above described services.

1.02 Project Area. The Project Area for the purpose of this Program is the County of Santa Clara.

1.03 Location of Project. Unless otherwise indicated, the Grant Services specified below will be offered at the following locations:

<b>Site Name</b>	<b>Site Address</b>
Community Services and Workforce Development	1111 San Felipe Road, Suite #108, Hollister, CA 95023

1.04 Eligibility. “Eligible person” means a person with human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS) who is a low-income individual and the person’s family. A person with HIV or AIDS or a family member



regardless of income is eligible to receive housing information services, as described in §574.300(b)(1) of the HOPWA Regulations. Any person living in proximity to a community residence is eligible to participate in that residence's community outreach and educational activities regarding AIDS or related diseases, as provided in §574.300(b)(9) of the HOPWA Regulations.

Lower income is defined as household income at or below 80% of the median income for the project area as defined by the Secretary of HUD. This includes very low-income which is defined as household income that exceeds 30% but does not exceed 50% of the HUD median income for the Project Area and extremely low-income which is defined as household income that is 30% or lower of the HUD median income for the project area. GRANTEE shall document each UNDULICATED PARTICIPANT's (as defined in Section 1.01 of Revised Exhibit B titled "Performance Measures/Numeric Goals for 2017-2018") eligibility on intake sheets, which shall include information about residency, client's family size, total household income, and gender of head of household, race and ethnic data, medical documentation of HIV status, and client signature and certification that the intake information is accurate.

The wait list for the Project will be administered with preferences for those who are determined as vulnerable in the Housing 1000 Project registry, homeless, and/or those with a disability.

#### 1.05 Description of Services.

##### *Activity #1 Rental Assistance*

Project shall provide rental assistance to low-income individuals that are medically diagnosed with HIV/AIDS and their families on a monthly basis. GRANTEE will use the HUD-approved HOPWA Income Eligibility Worksheet and Tenant Income and Rent Calculation Worksheet to determine eligibility and subsidy amounts. GRANTEE will provide HOPWA subsidies directly to landlords/property managers. GRANTEE will recertify participant income and eligibility annually.

##### *Activity #2 Food Vouchers*

Project shall provide food vouchers to eight (8) low income individuals with HIV/AIDS and their families on a monthly basis. GRANTEE will use the HUD-approved HOPWA Income Eligibility Worksheet to verify eligibility. GRANTEE will re-certify participant income and eligibility annually. Each voucher will be \$100 per participant x eight (8) participants x 12 months.

##### *Activity #3 Dental Assistance*

General dental assistance shall be provided to Project participants. GRANTEE shall provide payments directly to dentists on behalf of participants. If dental assistance includes the cost of dentures, CITY shall consider said costs on a case-by case basis. Considerations shall include:

- Cost reasonableness,

- Whether or not the dentures are a medical necessity,
- The amount of HOPWA grant funds available for other Project costs,
- Demonstrating that reasonable efforts have been made to qualify participants for available types of dental care support,
- Demonstrating that payment of dental services for dentures cannot be made from another public or private source,
- The total cost of the dentures and the dollar amount of the denture cost that this HOPWA grant would cover.

1.06 Staff. Hiring Requirements. GRANTEE agrees to adhere to the requirements of Section 3 of the HUD Act of 1969 (12U.S.C. §1701u) as set forth in Section 2 of **EXHIBIT E** in the hiring of any Staff member whose position receives 50% or more of its funding from a HOPWA Grant.

1.07 Reporting Requirements.

Quarterly Reports. At the end of each quarter, GRANTEE shall report to the CITY's Housing Department Grants Administration the number of UNDUPLICATED PARTICIPANTS, results of productivity measures, the number of new Project participants, and the number of new Project participants who are homeless and obtain permanent stable housing after entering the Project.

Outcome Measure Reports. At the end of the second and fourth quarters, GRANTEE shall submit to the CITY's Housing Department Grants Administration a narrative report detailing results of the outcome measures. The report at a minimum shall include:

- (a) a description of how the activities being provided under this grant contribute to meeting performance measures stated in the contract;
- (b) a detailed description of how the measurement methodology was implemented and how information was collected;
- (c) a detailed description of the methodology for selecting the sample size and the population to measure including the size of the sample.

Reporting Methodology. All reports shall include a description of when and how information was collected, the total population being studied, the sample size used for the study, the method used to determine the sample size, and the method for selecting the sample.

Reporting Schedule. All required reports shall be submitted to the CITY's Housing Department Grants Administration no later than fifteen (15) working days after the end of the SECOND, second, and third quarters and no later than fifteen (15) working days after the end of the fourth quarter.

1.08 Cost Reimbursement. Project will be reimbursed on a monthly basis, for approved invoices submitted pursuant to this Agreement. Requests for reimbursement will be

made in a manner prescribed by the CITY under provisions as set forth in **EXHIBIT D**, titled "SCHEDULE OF PAYMENTS".

1.09 Additional Provisions.

N/A

**SCOPE OF SERVICES 2017-2018**

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Reporting Schedule. All required reports shall be submitted to the CITY's Housing Department Grants Administration no later than fifteen (15) working days after the end of the SECOND, second, and third quarters and no later than fifteen (15) working days after the end of the fourth quarter.

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made in a manner prescribed by the CITY under provisions as set forth in **EXHIBIT D**, titled "SCHEDULE OF PAYMENTS".

1.09 Additional Provisions.

N/A

**REVISED EXHIBIT B**

**PERFORMANCE MEASURES/NUMERIC GOALS FOR 2018-2019**

1.01 Unduplicated Participants.

**Proposed total number of unduplicated participants to be served by this Project only.** For purposes of this Agreement, UNDUPLICATED PARTICIPANTS shall be defined as participants who receive services at least once a year but whom may not be counted more than once in that year. GRANTEE shall retain records documenting eligibility. Such records shall include family size, total household income, gender head of household, race, ethnic and disability data.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	6	1	0	1	8
Total Project	6	7	7	8	8

1.02 Services.

Throughout the term of this Agreement, GRANTEE shall provide the following services to participants during the regular office hours 8:00 am to 5 pm, Monday through Friday.

**Activity 1:** Rental Assistance – Number of checks

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	9	9	9	9	36
Total Project	9	18	27	36	36

**Activity 2:** Food Vouchers – Number of Vouchers

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	18	21	21	24	84
Total Project	18	39	60	84	84

**Activity 3:** Dental Assistance – Number of Visits

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	3	2	2	0	8
Total Project	3	5	8	8	8

1.03 Outcome Measure Statement and Measurement Methodology.

Measurement Methodology:

Participants' charts contain staff assessments on an ongoing basis, and reporting tools are completed on a quarterly basis for these outcomes. Internal database tracks individual payments and participant data.



Outcome Measure #1	80% of participants enrolled HOPWA participant's will have maintained or established housing as stated in the participant satisfaction survey. .			
Measurement Methodology	Participant interviews and participant satisfaction surveys.			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Outcome Goal	n/a	80%	n/a	80%

1.04 GRANTEE must describe outreach efforts employed, and to be employed, to reach out to all persons including persons of the following protected categories: race, sex, color, age, religion, actual or perceived gender identity, sexual orientation, disability, ethnic or national origin, or familial status. Documentation of these efforts must be submitted along with the second and fourth quarterly performance reports.

## EXHIBIT B

### PERFORMANCE MEASURES/NUMERIC GOALS FOR 2017-2018

#### 1.04 Unduplicated Participants.

**Proposed total number of unduplicated participants to be served by this Project only.** For purposes of this Agreement, UNDUPLICATED PARTICIPANTS shall be defined as participants who receive services at least once a year but whom may not be counted more than once in that year. GRANTEE shall retain records documenting eligibility. Such records shall include family size, total household income, gender head of household, race, ethnic and disability data.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	6	1	0	1	8
Total Project	6	7	7	8	8

#### 1.05 Services.

Throughout the term of this Agreement, GRANTEE shall provide the following services to participants during the regular office hours 8:00 am to 5 pm, Monday through Friday.

##### **Activity 1:** Rental Assistance – Number of checks

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	9	9	9	9	36
Total Project	9	18	27	36	36

##### **Activity 2:** Food Vouchers – Number of Vouchers

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	18	21	21	24	84
Total Project	18	39	60	84	84

##### **Activity 3:** Dental Assistance – Number of Visits

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
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Total Project	3	5	8	8	8

#### 1.06 Outcome Measure Statement and Measurement Methodology.

Measurement Methodology:

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Outcome Measure #1	80% of participants enrolled HOPWA participant's will have maintained or established housing as stated in the participant satisfaction survey. .			
Measurement Methodology	Participant interviews and participant satisfaction surveys.			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Outcome Goal	n/a	80%	n/a	80%

1.04 GRANTEE must describe outreach efforts employed, and to be employed, to reach out to all persons including persons of the following protected categories: race, sex, color, age, religion, actual or perceived gender identity, sexual orientation, disability, ethnic or national origin, or familial status. Documentation of these efforts must be submitted along with the second and fourth quarterly performance reports.

**PERFORMANCE MEASURES/NUMERIC GOALS FOR 2016-2017**

1.01 Unduplicated Participants.

**Proposed total number of unduplicated participants to be served by this Project only.** For purposes of this Agreement, UNDUPLICATED PARTICIPANTS shall be defined as participants who receive services at least once a year but whom may not be counted more than once in that year. GRANTEE shall retain records documenting eligibility. Such records shall include family size, total household income, gender of head of household, race, ethnic and disability data.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	4	2	1	0	7
Total Project	4	2	1	0	7

1.02 Services.

Throughout the term of this Agreement, GRANTEE shall provide the following services to participants during the regular office hours 8:00 am to 5 pm, Monday through Friday

**Activity 1:** Rental Assistance – Number of checks

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	10	16	20	20	66
Total Project	10	16	20	20	66

**Activity 2:** Food Vouchers – Number of vouchers

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	10	16	20	20	66
Total Project	10	16	20	20	66

**Activity 3:** Dental Assistance of visits

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	1	1	1	1	4
Total Project	1	1	1	1	4

1.03 Outcome Measure Statement and Measurement Methodology.

Measurement Methodology:

Participants' charts contain staff assessments on an ongoing basis, and reporting tools are completed on a quarterly basis for these outcomes. Internal database tracks individual payments and participant data.

Outcome Measure #1	80% of enrolled HOPWA participant's will have maintained or established housing as stated in the participant satisfaction survey.
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Measurement Methodology	Participant interviews and participant satisfaction surveys.			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Outcome Goal	n/a	80%	n/a	80%

1.04 GRANTEE must describe outreach efforts employed, and to be employed, to reach out to all persons including persons of the following protected categories: race, sex, color, age, religion, actual or perceived gender identity, sexual orientation, disability, ethnic or national origin, or familial status. Documentation of these efforts must be submitted along with the second and fourth quarterly performance reports.

**PERFORMANCE MEASURES/NUMERIC GOALS FOR 2015-2016**

1.01 Unduplicated Participants.

**Proposed total number of unduplicated participants to be served by this Project only.** For purposes of this Agreement, UNDUPLICATED PARTICIPANTS shall be defined as participants who receive services at least once a year but whom may not be counted more than once in that year. GRANTEE shall retain records documenting eligibility. Such records shall include family size, total household income, gender of head of household, race, ethnic and disability data.

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	2	0	0	2	4
Total Project	2	0	0	2	4

1.02 Services.

Throughout the term of this Agreement, GRANTEE shall provide the following services to participants during the regular office hours 8:00 am to 5 pm, Monday through Friday

**Activity 1:** Rental Assistance – Number of checks

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	2	0	0	4	6
Total Project	2	0	0	4	6

**Activity 2:** Food Vouchers – Number of vouchers

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	2	0	0	4	6
Total Project	2	0	0	4	6

**Activity 3:** Dental Assistance – Number of Visits

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
HOPWA	0	0	0	2	2
Total Project	0	0	0	2	2

1.03 Outcome Measure Statement and Measurement Methodology.

Measurement Methodology:

Participants' charts contain staff assessments on an ongoing basis, and reporting tools are completed on a quarterly basis for these outcomes. Internal database tracks individual payments and participant data.

Outcome Measure #1	80% of enrolled HOPWA participant's will have maintained or established housing as stated in the participant satisfaction survey.
--------------------	---

Measurement Methodology	Participant interviews and participant satisfaction surveys.			
	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Outcome Goal	n/a	80%	n/a	80%

1.04 GRANTEE must describe outreach efforts employed, and to be employed, to reach out to all persons including persons of the following protected categories: race, sex, color, age, religion, actual or perceived gender identity, sexual orientation, disability, ethnic or national origin, or familial status. Documentation of these efforts must be submitted along with the second and fourth quarterly performance reports.

**REVISED EXHIBIT C**

**BUDGET for 2018-2019**

		HOPWA Fund
<b>Program Services Costs:</b>		
	Salaries.	\$8,570
	Benefits	\$3,430
		\$12,000
Housing Assistance		
	TBRA	\$13,400
	Support Services (food, dental)	\$17,600
Housing Placement		
	Placement costs	
<b>Admin. Costs:</b>		
	Office supplies	\$200
	Occupancy	\$600
	Mileage	\$100
	Postage	\$50
	Telephone	\$100
	Utilities	\$200
	Audit	\$750
	Indirect (10%)	\$5000
<b>Total</b>		<b>\$50,000</b>



EXHIBIT C

BUDGET for 2017-2018

		HOPWA Fund
<u>Program Services Costs:</u>		
	Salaries.	\$8,570
	Benefits	\$3,430
		\$12,000
Housing Assistance		
	TBRA	\$13,400
	Support Services (food, dental)	\$17,600
Housing Placement		
	Placement costs	
<u>Admin. Costs:</u>		
	Office supplies	\$200
	Occupancy	\$600
	Mileage	\$100
	Postage	\$50
	Telephone	\$100
	Utilities	\$200
	Audit	\$750
	Indirect (10%)	\$5000
<b>Total</b>		<b>\$50,000</b>

**BUDGET for 2016-2017**

		HOPWA Fund
<b>Program Services Costs:</b>	-	
	Salaries.	8,670
	Benefits	4,330
Housing Assistance		
	TBRA	20,000
	Support Services (food, dental)	3,050
Housing Placement		
	Placement costs	
<b>Admin. Costs:</b>		
	Office supplies	400
	Occupancy	500
	Mileage	300
	Postage	50
	Telephone	50
	Utilities	250
	Audit	150
<b>Total</b>		<b>37,750</b>

BUDGET for 2015-2016

		HOPWA Fund
<b>Program Services Costs:</b>		
	Salaries.	2,500
	Benefits	1,250
Housing Assistance		
	TBRA	4,100
	Support Services (food, dental)	1,500
Housing Placement		
	Placement costs	
<b>Admin. Costs:</b>		
	Office supplies	50
	Occupancy	250
	Mileage	100
	Postage	50
	Telephone	50
	Utilities	50
	Audit	100
<b>Total</b>		<b>10,000</b>

**EXHIBIT I**  
**RETROACTIVE SERVICES**

The term of this AGREEMENT shall be retroactive from July 1, 2018, and shall continue through June 30, 2019. It is understood and agreed that GRANTEE has commenced work and incurred costs prior to execution of this AGREEMENT in anticipation of its execution.

CITY agrees to reimburse GRANTEE for those costs in accordance with the terms of the AGREEMENT. However, in no event shall GRANTEE be reimbursed for costs incurred prior to July 1, 2018.