

SERVICES AGREEMENT FOR THE PROVISION OF HOMELESS SERVICES

This AGREEMENT ("Agreement") is entered into by and between the **City of Gainesville, Florida, a municipal corporation ("City")**, and the **Alachua County Coalition for the Homeless and Hungry, Inc., a Florida not-for-profit corporation ("Provider")**. The City and the Provider may be collectively referred to herein as the "Parties" or individually referred to as a "Party."

W I T N E S S E T H:

WHEREAS, the issue of homelessness impacts all jurisdictions of Alachua County, Florida, and is a quality of life issue concerning Alachua County residents; and

WHEREAS, the complexity of homelessness and the need for comprehensive support systems within the community to meet the basic needs of homeless persons requires a collaborative effort; and

WHEREAS, the City and Alachua County ("County") desire to support homeless services to enhance the general health, safety, and welfare of the citizens of Alachua County; and

WHEREAS, the City and County have expressed the intent to budget local government funding as may be appropriated annually by the Gainesville City Commission and the Board of County Commissioners to provide support for the provision of services for homeless persons at the City's facility located at 3055 NE 28th Drive, Gainesville, Florida 32609 ("Facility"); and

WHEREAS, the City and County have entered into an Interlocal Agreement that provides for the shared funding of this Agreement; and

WHEREAS, the City has entered into a Service Agreement for the Provision of Homeless Services with the Provider for services at the Facility, with a term of January 1, 2019, through December 31, 2019 ("2019 Service Agreement"); and

WHEREAS, at the May 6, 2019, Joint City and County Commission Meeting to discuss Approaches to Reduce Homelessness, the Gainesville City Commission and Board of Alachua County Commissioners approved the Dignity Village Transition Plan and authorized staff to negotiate a 5-year extension of the 2019 Service Agreement with the Provider; and

WHEREAS, at the September 26, 2019, City Commission Meeting, the City Commission approved:

- 1) In FY20, the City would support GRACE at \$1,000,000 and the County would support GRACE at \$500,000, and each would contribute \$250,000 toward Dignity Village closure;
- 2) In FY21, the City would support GRACE at \$1,250,000 and the County would support GRACE at \$250,000; and
- 3) In FY22, the City would support GRACE at \$1,500,000; and

WHEREAS, the City and the Provider in conjunction with this Agreement will enter into a License Agreement whereby the City will grant to the Provider a license to use a certain portion of the Facility for the duration of the term of this Agreement, as described in **EXHIBIT 6 – License Agreement** attached hereto and incorporated herein by reference; and

WHEREAS, the Provider provides homeless services to persons in Gainesville and Alachua County and is willing and capable of providing such services at the Facility.

NOW, THEREFORE, City and Provider agree as follows:

1. TERM

This Agreement, which supersedes and extends the 2019 Service Agreement, is made effective October 1, 2019 (“Effective Date”) and will continue through September 30, 2024, unless sooner terminated or extended in accordance with this Agreement. At the end of the Agreement period, upon satisfactory performance and with City Commission approval, the City and ACCHH may negotiate and extend the Agreement for an additional five (5) year period.

2. SCOPE OF SERVICES

2.1 Services: The Provider shall fully perform the Scope of Services as described in **EXHIBIT 1A – Scope and Schedule of Services** attached hereto and incorporated herein by reference. The Scope and Schedule of Services describes the minimum level of services required to promote the following goals: preventing homelessness; diverting individuals from emergency shelter; rapidly moving households to permanent housing; reducing time spent homeless on streets and in shelters; stabilizing persons in housing with emphasis on permanent housing; and increasing self-sufficiency. The Provider shall provide services to homeless persons regardless of sexual orientation, race, color, gender, age, religion, national origin, marital status, disability, or gender identity.

2.2 Transitional Campground Operations Plan: The Provider shall fully perform the Scope of Services as described in **EXHIBIT 1B – Transitional Campground Operations Plan** attached hereto and incorporated herein by reference through September 30, 2021. With City Commission approval, the parties may extend the provision of such services beyond that date by mutual agreement. The Scope and Schedule of Services describes the minimum level of services required to find more appropriate housing options for individuals currently residing in Dignity Village.

Collectively, the obligations described in this Section 2 may be referred to as the “Project,” the “Services,” or the “Work.”

3. FUNDING

3.1 Total Funding Amount: During the Term of this Agreement, "Total Funding Amount" means the amount the City (with any contribution from the County) must commit to fund the services provided by the Provider pursuant to this Agreement in a given budget cycle to avoid interruption of services and termination of this Agreement. The Total Funding Amounts are outlined as follows:

Fiscal Year Contribution	ACCHH GRACE Services	ACCHH Transitional Campground Operations Startup Costs & Operations
FY 19-20	\$1,500,000	\$367,963**
FY 20-21	\$1,500,000	\$299,136
FY 21-22	\$1,500,000	
FY 22-23	\$1,500,000	
FY23-24	\$1,500,000	

Note:

**The FY 2019-2020 funding appropriated by the City and County Commissions is \$500,000 for the Transitional Campground Operations includes startup costs (\$118,484) plus 10 months of operations costs (\$249,479) for a total costs of \$367,963 to be paid to the ACCHH. Additional fencing and security costs for the closure of Dignity Village in the amount \$66,000 are not a part of this Agreement. These costs will be the responsibility of the City and County. The FY 2019-2020 operating and start-up costs are \$367,963 (ACCHH) and \$66,000 (City/County) for a total cost of \$433,963. See Exhibit 2B- Transitional Campground Operations Plan Budget.

The obligation of the City to contribute funding for this Agreement is contingent upon specific annual appropriations by the City Commission. The Parties acknowledge that partial funding in the amount of \$66,037 has already been appropriated for FY 2020-2021 Transitional Campground operations costs. The remaining \$66,037 in appropriated funds will be applied to FY 2020-2021 Transitional Campground Operations costs.

The Parties understand and agree that this Agreement is not a commitment of any future appropriations. Changes to the Total Funding Amounts provided here are permissible only by written amendment to this Agreement approved by the Gainesville City Commission.

3.2 Yearly Funding and Budgets:

3.2.1 FY 19-20 Funding and Budgets: The City shall pay the Provider for the services performed in FY 19-20 pursuant to this Agreement in an amount not to exceed the sum of One Million Eight Hundred Sixty-Seven Thousand Nine Hundred Sixty Three and No/100 Dollars (\$1,867,963.00). The payments will be made as outlined below:

Month	GRACE Services	Transitional Campground Operations	Total
October 2019	\$125,000.00	\$118,484.00 (Start Up Costs)	\$243,484.00
November 2019	\$125,000.00	-----	\$125,000.00
December 2019	\$125,000.00	\$24,947.00	\$149,947.00
January 2020	\$125,000.00	\$24,947.00	\$149,947.00
February 2020	\$125,000.00	\$24,947.00	\$149,947.00
March 2020	\$125,000.00	\$24,947.00	\$149,947.00
April 2020	\$125,000.00	\$24,947.00	\$149,947.00
May 2020	\$125,000.00	\$24,947.00	\$149,947.00
June 2020	\$125,000.00	\$24,947.00	\$149,947.00
July 2020	\$125,000.00	\$24,947.00	\$149,947.00
August 2020	\$125,000.00	\$24,947.00	\$149,947.00
September 2020	\$125,000.00	\$24,956.00	\$149,956.00
Total	\$1,500,000	\$367,963.00	\$1,867,963.00

3.2.2 FY 20-21 Funding and Budgets:

On or before May 1, 2020, Provider will submit to the City a Services Budget and a Transitional Campground Operations Budget for the ensuing fiscal year. The City shall pay the Provider for services performed in that ensuing fiscal year an amount not to exceed \$1,799,136. Unless otherwise agreed, the payments will be made in twelve equal monthly installments.

3.2.3 FY 21-22, FY 22-23, and FY 23-24 Funding and Budgets:

On or before January 31, 2021, January 31, 2022, and January 31, 2023, Provider will submit to the City a Services Budget and a Transitional Campground Operations Budget for the ensuing fiscal year. The Services Budget for each fiscal year shall not exceed \$1,500,000. Unless otherwise approved by the City Commission and agreed in writing, the City shall pay the Provider for services performed in that ensuing fiscal year an amount not to exceed \$1,500,000, plus the amount approved by the City Commission pursuant to Section 2.2 for Transitional Campground Operations. Unless otherwise agreed, the payments will be made in twelve equal monthly installments.

3.2.4 Maximum Funding Amount: The Provider understands and agrees that no additional funds will be provided by the City for GRACE Services during the term of this Agreement, and the Provider agrees to provide the Services described in Section 2.1 of this Agreement throughout the term of this Agreement, notwithstanding any costs incurred by the Provider that may exceed the maximum funding provided for in this paragraph.

The Provider must expend funds in FY 19-20 in substantial accordance with the Total Operational, Total Personnel, and Total Administrative line items of the budget detailed in **EXHIBIT 2A – Services Budget and EXHIBIT 2B – Transitional Campground Operations Plan Budget**. The Provider must expend funds in ensuing fiscal years in substantial accordance with the Total Operational, Total Personnel, and Total Administrative line items of the Services Budget and Transitional Campground Operations Plan Budget submitted pursuant to Section 3.2.2 or Section 3.2.3 for that fiscal year. The Provider may amend the individual line items within each of these categories of the Budget. The Provider also may amend the Total Operational, Total Personnel, and Total Administrative lines, provided: 1) such amendments do not exceed 10 percent of those lines; 2) there is no change in the total amount of compensation provided by the City to the Provider; and 3) the Provider gives the City written notice of such amendments. Any other amendments to the Budget shall be completed in accordance with Section 27 of this Agreement.

It is understood that the City and County funding is insufficient to manage and operate a robust homeless services center. Therefore, the Provider warrants and represents that, to reduce its reliance on funding from the City and the County, it will exert its best efforts to secure private, local, state, and federal funds and grants.

As part of the Budget Reports (described in Section 6 below), the Provider will report all additional (non-City and non-County) funding received in furtherance of the Project. In addition, the Provider will exert its best efforts to secure such volunteers and in-kind services as are necessary to provide the balance of support needed to adequately operate and maintain the homeless services center at the Facility.

3.3 Funding Reconciliation Report:

The Provider shall submit to the City a yearly reconciliation report on or before February 15th for each respective contract year during the term of this Agreement (as described in Section 1 of this Agreement), which must itemize the Provider's expenditures for services and any funds paid to the Provider by the City that were not expended for the respective contract year. Any unexpended funds remaining at the termination of this Agreement shall be reimbursed to the City.

4. INVOICES/PAYMENT

On or before the 10th of each month, the Provider shall submit to the City an Invoice as provided in **EXHIBIT 3 – Invoice and Financial Reports as provided in EXHIBIT 3A-GRACE Services and EXHIBIT 3B-Transitional Campground Operations Plan** together with the monthly Program Reports required by Section 5 of this Agreement.

The City will remit payment to the Provider by electronic funds transfer as soon as possible, and in any event no later than 30 calendar days after the date the City received from the Provider an Invoice and associated reports. Any payment due the Provider under the terms of this Agreement may be withheld by the City until all reports due from the Provider have been approved by the City.

The Provider shall submit the final reports no later than 30 calendar days after the termination of this Agreement.

5. PROGRAM REPORTS

5.1 Monthly: Each month together with the Invoice and Financial Reports required by Section 4 of this Agreement, the Provider shall submit the following Program Reports as provided in **EXHIBIT 4A – Program Reports** to the City and County: Client Service Report; ESG CAPER 2019 Report; Performance Measures Report; and **EXHIBIT 4B – Transitional Campground Operations Plan Report**.

By way of example, the Invoice for the month of June shall be submitted together with the Program Reports and Financial Reports describing services provided, and revenues and expenditures, for the month of April, and so on.

5.2 Quarterly: The Provider shall submit quarterly Program Reports (including fiscal year-to-date and prior fiscal year-to-date totals) to the City and County and shall make a presentation to the City and County Commissions describing the reports. The Provider shall submit the quarterly reports on or before February 1, May 1, August 1, and November 1 each year during the term of this Agreement (as described in Section 1 of this Agreement).

5.3 Annual: On or before December 31, 2020 and annually thereafter during the term of this Agreement (as described in Section 1 of this Agreement), the Provider shall submit annual Program Reports to the City and County. The annual Program Reports shall describe the Provider's activities in accordance with the Services required by Section 2 of this Agreement and shall indicate whether the Provider did not meet, met, or exceeded the target level of performance measures during the term of this Agreement.

6. BUDGET REPORTS/AUDITED FINANCIAL STATEMENTS

The Provider shall submit the following Budget Reports and Audited Financial Statements to the City and County. The Budget Reports shall be prepared in accordance with generally accepted accounting principles (GAAP) and shall include all sources of revenue and all expenditures for the Project, not just the revenues and expenditures associated with the City and County funding.

Budget Reports :

- On or before **February 1st** during the term of this Agreement (as described in Section 1 of this Agreement), a comparison of the estimated budget with the actual budget for the first quarter (October 1 – December 31).

- On or before **May 1st** during the term of this Agreement (as described in Section 1 of this Agreement), a comparison of the estimated budget with the actual budget for the second quarter (January 1 - March 31), including a mid-year true-up revenue and expense budget.
- On or before **August 1st** during the term of this Agreement (as described in Section 1 of this Agreement), a comparison of the estimated budget with the actual budget for the third quarter (April 1 – June 30).
- On or before **November 1st** during the term of this Agreement (as described in Section 1 of this Agreement), a comparison of the estimated budget with the actual budget for the final quarter (July 1 - September 30), including a true-up revenue and expense budget.

Audited Financial Statements

- On or before **December 31st** during the term of this Agreement (as described in Section 1 of this Agreement), the Provider's Annual Audited Financial Statements, including management letter, corrective response, and any other reports or correspondence relating to the audit findings or recommendations that are issued in connection with the audit, for fiscal year ending: June 30.

7. PERFORMANCE REVIEW/ADDITIONAL REPORTING

The City and County staff will review each Budget Report together with the corresponding quarterly and final Program Reports to evaluate the Provider's performance under this Agreement and the proper use of the City and County funding provided to date. The City and County staff shall provide its report and recommendations, if any, to the City Commission and Board of County Commissioners for such action as each Commission may deem advisable.

The Provider is encouraged to keep such data as will enable it to present an overall picture of its performance to the City Commission and the Board of County Commissioners.

7.1 In addition to the Program Reports and Budget Reports, the Provider agrees to make such other reports and presentations concerning the Services provided to the City Commission, the County Commission, and any advisory board or committee, as reasonably requested by the City or County. Provider will also provide information on unmet needs and forecast service demands, as observed or documented (such as through the Point-in-Time Survey) by the Provider.

7.2 The Provider shall report actions taken and data collected to ensure compliance with the applicable local, state, and federal non-discrimination and affirmative action regulations and shall submit such additional program and financial data, including beneficiary data, as requested by the City or County.

7.3 The Provider, and all subcontractors providing services at the Facility, shall enter data on all clients served and all services provided at the Facility into the local Continuum of Care Homeless Information Management System (HMIS) and/or other comparable databases.

7.4 The City reserves the right to reasonably revise the forms or formats of the Invoices, Program Reports, Budget Reports, or any other requested reports, upon which Provider shall use such new forms or formats as are provided by the City.

8. ALACHUA COUNTY MINIMUM WAGE

The Provider agrees to pay its employees no less than the minimum wage in effect per Alachua County Ordinance No. 16-05 (adopted on April 12, 2016), as may be amended from time to time by the Board of County Commissioners of Alachua County.

9. NOTIFICATION OF SIGNIFICANT CHANGES

The Provider shall if reasonably possible provide the City and County with at least 30 calendar days advance written notice prior to making any significant changes in services, hours of operation, or shelter admission criteria. The Provider agrees to meet with City and County staff to review the proposed significant changes, as needed.

10. DEFAULT AND TERMINATION

10.1 Failure to comply with any provision of this Agreement shall constitute default under this Agreement. If either Party is in default (the "Defaulting Party"), then the other Party (the "Non-Defaulting Party"), after giving the Defaulting Party at least 10 calendar days' written notice of the default and the Non-Defaulting Party's intent to terminate the Agreement if the default continues unremedied during the 10-day period (or such other period as the Parties may determine reasonable to cure the default), may terminate this Agreement without prejudice to any other rights or remedies the Non-Defaulting Party may have pursuant to law.

10.2 This Agreement may be terminated by the City, with or without cause, upon 30 calendar days' written notice to the Provider. In the event this Agreement is so terminated, the Provider shall be compensated for Services rendered through the effective date of the termination.

10.3 If the City or County funding becomes unavailable for any reason, the City may terminate this Agreement, with no less than 24 hours' notice, in writing, to the Provider. The City will be the final authority as to the availability of funds. The Provider shall be compensated for Services rendered through the effective date of the termination.

11. INDEPENDENT CONTRACTOR

Provider shall be considered an independent contractor and as such shall not be entitled to any right or benefit to which City employees are or may be entitled to because of employment. As an independent contractor, the Provider will not be acting as an agent, employee, partner, joint venturer, or associate of the City. Neither the Provider nor any of its employees, officers, agents, or any other individual directed to act on behalf of the Provider for any act related to this Agreement shall represent, act, or purport to act or be deemed the agent, representative, employee, or servant of the City.

Provider shall be solely responsible for the means, method, techniques, sequences, and procedures used by the Provider in the full performance of this Agreement.

Policies and decisions of the Provider, which are used in its performance of this Agreement, shall not be construed to be the policies or decisions of the City.

12. INDEMNIFICATION

The Provider shall indemnify and save harmless the City, its elected and appointed officials, officers, agents, and employees, from and against any and all liability, claims, demands, fines, fees, expenses, penalties, suits, proceedings, actions and costs of action, including attorney's fees for trial and on appeal, of any kind and nature arising or growing out of or in any way connected with the Provider's performance of this Agreement whether by act or omission or negligence of the Provider, its elected and appointed officers, agents, employees or others, or because of or due to the mere existence of this Agreement between the Parties. This section does not apply to the storage and disposition of personal belongings removed from City property, as described in **EXHIBIT 5 – Personal Belongings**.

13. SOVEREIGN IMMUNITY

Nothing in this Agreement shall be interpreted as a waiver of the City's sovereign immunity as granted under Section 768.28 Florida Statutes.

14. TIMELINESS/CARE

The City and Provider agree time is of the essence in performance of the Services and that the Services provided under this Agreement shall be performed with care reasonably expected for such Services.

In particular, the Provider shall manage the Facility and the services provided therein in and safe and secure manner, including without limitation, maintaining and following a security plan and imposing such rules and regulations as are necessary or advisable for safe and secure operations.

15. VALIDITY AND SEVERABILITY

If any provision of this Agreement is contrary to, prohibited by, or deemed invalid by applicable law, rules, or regulations of any jurisdiction in which it is sought to be enforced, then such provision shall be deemed inapplicable and omitted, and shall not invalidate the remaining provisions of this Agreement. If any provisions of this Agreement shall be declared illegal, void, or unenforceable, the other provisions shall not be affected but shall remain in full force and effect.

16. LAWS AND REGULATIONS

The Provider shall comply with all laws, ordinances, and regulations applicable to the Work required by this Agreement.

The Provider is presumed to be familiar with all state and local laws, ordinances, code rules, and regulations that may in any way affect the Work required by this Agreement.

If the Provider is not familiar with state and local laws, ordinances, code rules, and regulations, the Provider remains liable for any violation and all subsequent damages, fines, or other costs and expenses attributable to such violation.

17. NON-WAIVER

The failure of either Party to exercise any right shall not be considered a waiver of such right in the event of any further default or non-compliance.

18. INSURANCE

The Provider shall maintain insurance in the amounts stated below. The Provider shall furnish the City current certificates of insurance in a form acceptable to the City for the insurance required.

Such certificate or an endorsement provided by the Provider must state that the City will be given 30 days' advance written notice (except the City will accept 10 days' written notice for non-payment) prior to cancellation or material change in coverage.

- Worker's Compensation Insurance providing coverage in compliance with Chapter 440, Florida Statutes.
- Public Liability Insurance (other than automobile) consisting of broad form comprehensive general liability insurance including contractual coverage: \$1,000,000 per occurrence (combined single limit for bodily injury and property damage). The City shall be an additional insured on such Public Liability Insurance and the Provider shall provide copies of endorsements naming the City as additional insured.
- Automobile Liability Insurance (if the Provider owns or leases a vehicle that is used in the performance of this Agreement or the Work): Property Damage \$500,000 per occurrence (combined single limit for bodily injury and property damage).

19. GOVERNING LAW AND VENUE

The Agreement and the legal relations between the Parties hereto shall be governed and construed in accordance with the laws of the State of Florida. In the event of any legal proceedings arising from or related to this Agreement, venue for such proceedings shall be in Alachua County, Florida.

20. CONTACT PERSONS/NOTICE

The Parties designate the following persons as the primary contact point for purposes of the day-to-day management of this Agreement, including without limitation, the receipt of Invoices, scheduling of meetings, and questions regarding this Agreement. The Parties understand and acknowledge that the below persons may not be the persons authorized to bind the Party with respect to this Agreement. For any notice(s) required to be provided pursuant to this Agreement, the parties shall provide such notice to the persons listed below. Any notices required to be given pursuant to this Agreement shall be effective upon being sent by either facsimile, hand-delivery, by certified or registered mail (return receipt requested), or via overnight delivery service to the following addresses:

City

Fred Murry, Assistant City Manager
City Manager's Office, Mail Station 6
Post Office Box 490
Gainesville, Florida 32627-0490
Phone: (352) 393-5010

Provider

Jon DeCarmine, Executive Director
3055 NE 28th Drive
Gainesville, Florida 32609
Phone: (352) 792-0800

County

Claudia Tuck, Department Director, Community Support Services
218 SE 24th Street
Gainesville, Florida 32641
Phone: (352) 264-6704

21. PERMITS

The Provider shall obtain and pay for all necessary permits, licenses, or fees required for the performance of Services under this Agreement.

22. RIGHT TO AUDIT

The Provider shall keep accurate and complete records and accounts pertaining to the performance of services under this Agreement, including: 1) Financial records and reports relating to use of funding; 2) Books, records, documents, invoices, and other evidence and accounting procedures and practices such as will permit the Provider to sufficiently and properly reflect all direct costs of any nature associated with services provided; and 3) Records sufficient to document its performance and completion of the Work.

These records shall be subject at all reasonable times to review, inspection, copy, and audit by persons duly authorized by the City, including but not limited to employees of the City or employees of the County designated by the City. These records shall be kept for a minimum of five (5) years after termination of the Agreement.

Records that relate to any litigation, appeals, or settlements of claims arising from performance under this Agreement shall be made available until a final disposition has been made of such litigation, appeals, or claims. This right to audit/inspect includes a right to interview any employees and clients of the Provider to be assured of satisfactory performance of the terms and conditions of this Agreement.

23. PUBLIC RECORDS

Florida has a very broad public records law and certain records of the Provider may be subject to the Florida Public Records Act (Chapter 119, Florida Statutes). By entering into this Agreement with the City, the Provider acknowledges that it will comply with this section and that failure by Provider to comply with this section is a breach of this Agreement and the City may pursue all available remedies.

A request to inspect or copy any public records, as defined in Section 119.011(12), Florida Statutes, relating to this Agreement must be made directly to the City. If the City does not possess the requested public records, the City shall immediately notify the Provider of the request and the Provider shall, within a reasonable duration of time, either provide the records to the City or allow the records to be inspected or copied. In addition, the Provider shall:

- a) Keep and maintain all public records required by the City to perform the service;
- b) Upon request from the City's custodian of public records, provide the City with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided by law;
- c) Ensure that all public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of this Agreement and following termination of this Agreement if the Provider does not transfer the records to the City; and
- d) Upon termination of this Agreement, transfer to the City at no cost to the City all public records in possession of the Provider or keep and maintain the public records required by the City to perform the service. If the Provider transfers all public records to the City upon termination of this Agreement, the Provider shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the Provider keeps and maintains public records upon termination of this Agreement, the Provider shall meet all applicable requirements for retaining public records. All records stored electronically shall be provided to the City, upon request from the City's custodian of public records, in a format that is compatible with the information technology systems of the City.

IF THE PROVIDER HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE PROVIDER'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS AGREEMENT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT:

Fred Murry, Assistant City Manager
City Manager's Office, Mail Station 6
Post Office Box 490
Gainesville, Florida 32627-0490
Phone: (352) 393-5010
Email: murryfj@cityofgainesville.org

24. ASSIGNMENT OF INTEREST

Neither Party will assign or transfer any interest in this Agreement without prior written consent of the other Party. Any consent requested of the City may be granted or denied, in the sole discretion of the City.

25. SUCCESSOR AND ASSIGNS

The City and Provider each bind their respective successors and assigns in all respects to all of the terms, conditions, covenants, and provisions of this Agreement.

26. CAPTIONS AND SECTION HEADINGS

Captions and section headings used herein are for convenience only and shall not be used in construing this Agreement.

27. AMENDMENTS

This Agreement may be amended by mutual agreement of the Parties, and any amendment shall become effective only when reduced to writing and signed by the duly authorized representative of each Party. Amendments that increase the funding, reduce the services provided, or extend the term of this Agreement shall be decided upon by the City Commission; the City Manager is authorized to execute all other amendments to this Agreement, subject to approval by the City Attorney as to form and legality.

28. THIRD PARTY BENEFICIARIES

This Agreement does not create any relationship with, or any rights in favor of, any third party.

29. CONSTRUCTION

This Agreement shall not be construed more strictly against one party than against the other merely by virtue of the fact that it may have been prepared by one of the parties. It is recognized that both parties have substantially contributed to the preparation of this Agreement.

30. ACKNOWLEDGEMENT OF FINANCIAL SUPPORT

The Provider agrees to acknowledge the City of Gainesville and Alachua County financial support for the Work performed pursuant to this Agreement. The phrase "Supported in part by the City of Gainesville and Alachua County" is to be added to all published material, announcements, and websites related to this funding. Any use by the Provider of any City or County logo or identifying design must be approved in advance by the City and County Communications Offices respectively.

31. EXHIBITS

All exhibits to this Agreement are incorporated into and made part of this Agreement by reference.

32. ENTIRE AGREEMENT

This Agreement, together with any License Agreement executed by the Parties, constitutes the entire agreement between the City and Provider with respect to the provision of homeless services at the Facility. This Agreement and any License Agreement are made a part of and contingent upon the other. To that end, if a Party is in default under this Agreement, it is likewise in default under any License Agreement and if this Agreement is terminated, any License Agreement is also terminated, and vice versa.

IN WITNESS WHEREOF, the Parties hereto have executed this Agreement.

PROVIDER:



Michael Raburn, Board Chair

Nov 25, 2019
Date

WITNESS:



Signature

Emily Raburn
Printed Name

WITNESS:



Signature

Michele Oster
Printed Name

CITY:

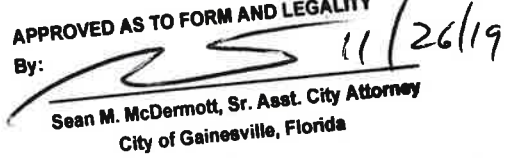


Lee Feldman, City Manager

11/26/2019
Date

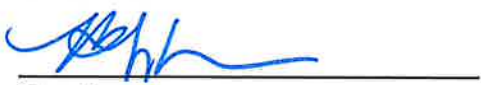
APPROVED AS TO FORM AND LEGALITY

By:

 11/26/19

Sean M. McDermott, Sr. Asst. City Attorney
City of Gainesville, Florida

WITNESS:



Signature

Zaneta Lynch
Printed Name

WITNESS:



Signature

Donna Kirchner
Printed Name

EXHIBIT 1A SCOPE AND SCHEDULE OF SERVICES

October 1, 2019 – September 30, 2024

The Provider shall provide services as outlined below:

A) Coordinated Entry System

Provider will participate in the local Continuum of Care (CoC) (North Central Florida Alliance for the Homeless and Hungry) Coordinated Entry (CE) system. A purpose of the CE system is to ensure that at risk and vulnerable populations experiencing homelessness can receive assistance to find stable housing by quickly identifying, assessing, connecting individuals to housing support services and housing resources. The CE is also intended to provide the way for more efficient homeless assistance systems by:

- Helping individuals move through the system faster (by reducing the amount of time spent moving from program to program before finding the right match);
- Reducing new entries into homelessness (by consistently offering prevention and diversion resources upfront, reducing the number of people entering the system unnecessarily); and
- Improving data collection and quality; and providing accurate information on the types of assistance individuals need.

The Provider must utilize the local CoC's standardized assessment and access for all individuals, as well as a coordinated referral and housing placement process, as part of the Provider's participation in the CE system. The goal of the CE system is to ensure that individuals experiencing homelessness receive appropriate assistance with both immediate and long-term housing and service needs. The CE is designed to connect individuals with the appropriate service(s) in a manner that is streamlined, effective and seamless from the individual's perspective, even if that service(s) is not offered by the Provider's organization. The overall goal of the CE is to have a standardized process from initial engagement to successful housing placement.

B) Homeless Information Management System (HMIS)

The Provider, and other agencies that utilize HMIS and provide services funded by this Agreement at the Facility, shall enter data on all clients served and all services provided at the Facility into the local Continuum of Care Homeless Information Management System (HMIS) to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. The Provider must utilize the HMIS software selected by the local CoC. The CoC Lead Agency is expected to ensure that the HMIS software complies with applicable HUD's data collection, management, and reporting standards.

C) Vulnerability Index -Service Prioritization Decision Assistance Tool (VI-SPDAT)

The Provider, and all subcontractors providing housing-related services at the Facility, shall utilize a VI-SPDAT system to pre-screen or triage individuals. The purpose of using the VI-SPDAT system is to quickly assess the health and social needs of homeless persons and match them with the most appropriate support and housing interventions that are available within the community.

The VI-SPDAT system is a brief survey designed to allow homeless service providers to quickly assess and prioritize individuals who are homeless in the community and identify whom to treat first based on the acuity of their needs. The VI-SPDAT system determines an acuity score for each homeless person who participates in the program. The scores can then be compared and used to identify and prioritize individuals for different housing interventions based upon their acuity. Using the VI-SPDAT will assist providers to move beyond only assisting those clients who request services at their particular agency and begin to work together to prioritize all homeless persons in the community, regardless of where they are assessed, in a consistent and transparent manner.

D) Performance Measures: Shelter Programs:

1) LBES 1: Shelter

Emergency shelter will be provided for up to 100 people every night in accordance with established CoC standards

Utilization: Provider will report each month: (1) total number of unduplicated persons provided shelter*, and (2) bed utilization rate*

Provider will report # of unduplicated people provided shelter monthly & fiscal year-to-date (YTD); total nights of shelter (# and average)

2) LBES 2: Shelter Residents Exiting to Permanent Housing Placement

Outcomes: Provider will report # of shelter residents who exit to a permanent housing placement as reported in HMIS (HMIS report: ESG CAPER (HDS V5)

Report # of successful housing placements*

Benchmark: 150 annually (reported by category)

3) LBES 3: Length of Stay

Provider will endeavor to reduce the length of time individuals remain in emergency shelter (HMIS report: ART 625 Tab L)

Benchmark: ≥ 50% of shelter residents exit from shelter within 30 days

Provider will report Length of Stay of shelter residents staying > 30 days

4) LBES 4: Recidivism

Provider will report % of individuals who exit successfully after October 1 who do not return to homelessness within 6 months within the Continuum of Care.

Benchmark: Provider will submit two reports annually (April 15 & October 15)

Benchmark: Housing Retention Rate ≥ 80%

5) LBES 5: Bed Use

Ensure that new admissions to shelter* are prioritized for available beds based on priorities established by the CoC.

TBD by the CoC

6) LBES 6: Residents Who Become Homeless in Alachua County

Residents who become homeless in Alachua County will receive priority placement for available shelter beds.

**Determination of residency: Alachua County identification or ties to community*

100% of County residents will be prioritized for available beds*

Provider will report residence prior to homelessness for new intakes based on HMIS data

7) LBES 7: Diversion from Homelessness

Percentage of cases requesting emergency shelter that were diverted.*

≥ 10%**

Housing Focused Case Management

Individuals remaining in emergency indoor shelter beyond 7 days will meet with the Case Manager to develop a written plan to obtain housing and exit shelter. A minimum of weekly meetings with those individuals who have a written housing plan. Individuals remaining in emergency outdoor shelter beyond 7 days will meet at least weekly with staff to develop and/or update a plan to obtain housing and exit shelter.

Note: LBES1 – LBES 7

*** Does not include VA-funded beds**

**** Will review six (6) months into contract**

8) DAY SVCS 1: Day Services (One Stop Services)

Increase access to services by at risk and vulnerable populations:

A variety of support services will be provided to at-risk and vulnerable populations including meals, mail, laundry, and showers.

Provider will report total # of meals provided, and total # of services provided (including meals), monthly & fiscal YTD**

**** Will review six (6) months into contract**

Provider will report total # of unsheltered, unduplicated people provided day services (calculated as total # unduplicated people served - total # of unduplicated people provided shelter), monthly & contract YTD

General Case Management

“Case Management” means a collaborative process that assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet the client’s human service’s needs.

Collaboration with other Agencies

Provider will request from each agency providing services at the one stop center a monthly report specifying the number of people served and the type of service provided, and will summarize the information provided in a monthly report to the City and County.

E) Inclement Weather Shelter

On nights of inclement weather (e.g., severe thunderstorms, temperature of 45 degrees or lower), as declared by the City in a notice to the Provider or by the County Emergency Management System, the Welcome Center or other suitable building will be opened to allow those in Outdoor Shelter to be sheltered indoors during the inclement weather. Provide nightly temporary shelter, as notified by the City.

F) Emergency Plan

Provider must have an annual Emergency Activation Plan submitted to the Alachua County Emergency Management Department.

EXHIBIT 1B

TRANSITIONAL CAMPGROUND OPERATIONS PLAN

SCOPE AND SCHEDULE OF SERVICES

October 1, 2019– September 30, 2021
(Start Up Costs and Year 1 Costs and Year 2 Costs)

The Provider shall provide services as outlined below:

As a collaborative effort to find more appropriate housing options for individuals currently residing in Dignity Village, each partner will perform the following tasks or activities:

ACCHH

- Develop and implement a managed campground on the GRACE campus
- Provide outreach and housing engagement services to individuals on the final Dignity Village roster, including those individuals who choose not to move onto the GRACE campus, beginning October 1, 2019.
- Provide ongoing communication and information on pending transition to Dignity Village residents, effective June 1, 2019.
- Determine appropriate fence boundaries and coordinate with City to install fencing around the existing 10-acre parcel
- Establish appeals process for individuals who were not placed on the final roster
- Provide follow-up tracking (3 month, 6 month, 12 month) for all housing placements of Dignity Village residents.

City of Gainesville

- Provide an accurate roster of individuals living in Dignity Village, by section, on a biweekly basis, beginning June 1, 2019.
- Notify ACCHH staff of all new campers on Dignity Village property on a weekly basis, beginning June 1, 2019.
- Hand off registration process and roster responsibilities for Dignity Village to ACCHH on October 1, 2019.
- Hire & supervise personnel to enforce the no new entry policy effective October 1, 2019.
- Maintain responsibility for management and safety/security of Dignity Village residents through February 1, 2020 or the date Dignity Village is closed, whichever is later.
- Coordinate cleanup and enforcement on the 10-acre Dignity Village parcel beginning February 1, 2020 or the date Dignity Village is closed, whichever is later.
- Work with ACCHH to identify individuals living in the parking lot and on the boundaries of the 10-acre parcel for inclusion on the final roster.

Alachua County

- As Chair of the Coordinated Entry Committee of the North Central Florida Alliance for the Homeless & Hungry, County staff will work with ACCHH to establish and implement Continuum-wide dynamic guidelines to prioritize individuals on the final roster for permanent housing placement.

Project Component: Roster Finalization

Performance Objective	Responsibility	Target Date
City provide preliminary roster identifying residents by section in Dignity Village	City	7/15/19
City provide accurate revised roster identifying residents by section and tent location in Dignity Village.	City	8/1/19
City provide staff coverage with posted, consistent hours (minimum 6 hours a day/5 days a week) to process camper registration and permitted tent siting	City	8/1/19-9/30/19
Post “No New Entry” signs	City	10/1/19
ACCHH shift two advocates to DV to begin Roster Finalization work Update photographs, HMIS profile for entry control as roster is finalized	ACCHH	8/1/19-9/30/19
Establish census schedule for full-campground coverage	ACCHH	8/1/19
Establish Building 1 as DV Outreach office	ACCHH	9/1/19
Post notice on unregistered tents giving occupants 30 days to get on roster	City/ ACCHH	9/1/19
Develop final roster	ACCHH	9/15/19
Develop and implement appeals process for non-registered campers	ACCHH	9/15/19-9/30/19
Conclude appeals process and finalize roster	ACCHH	10/1/19
Begin campground pre-registration Process	ACCHH	11/15/19

Project Component: DV Entry Control Plan

Performance Objective	Responsibility	Target Date
Check/repair streetlights - all lights in place	City	9/1/19
ACCHH determine appropriate fence boundaries	ACCHH	8/2/19
ACCHH notice residents of meeting to determine visitor policies	ACCHH	8/2/19
Finalize visitor procedures/entry control policies with resident input	ACCHH	9/1/19
City check/repair campus and perimeter lighting (streetlights)	City	9/1/19

Provide \$118,484 startup funding to ACCHH	City	10/1/19
Install security camera facing gate/parking lot	ACCHH	12/1/19
install fencing around the existing 10-acre parcel	City	10/10/19
Confirm final roster October 1, 2019	ACCHH	10/1/19
Hire & supervise personnel to enforce the no new entry policy	City	10/1/19

Project Component: Trespass Enforcement Plan

Performance Objective	Responsibility	Target Date
Develop operating procedures in partnership with City and CoC partners on how to handle individuals remaining on or in the vicinity of Dignity Village property after January 1, 2020	ACCHH/City	11/15/19
Present operationalized procedures to City Commission for approval	ACCHH/City	December 2019
Maintains responsibility for cleanup of existing campground	City	Starting 1/1/2020
Maintain responsibility for trespass enforcement as defined by guidelines presented to City Commission	City	Starting 1/1/2020

Project Component: Campground Setup

Performance Objective	Responsibility	Target Date
Develop site plan for on-campus campground	ACCHH	7/31/2019
Contract with vendors to provide pest control, security, waste management, and restrooms	ACCHH	December 2019
Provide additional training to security personnel prior to posting	ACCHH	December 2019
Identify prospective donations of tents and other items	ACCHH	10/1/19
Maintain pre-registration roster	ACCHH	11/15/19
Implement site plan, including construction of up to 150 platforms and tents	ACCHH	December 2019

Project Component: DV Outreach Plan

Performance Objective	Responsibility	Target Date
Verify recent VI-SPDAT score via HMIS or administer updated VI-SPDAT to all individuals on roster	ACCHH and CoC	1/1/20
Update communication information and photograph for all individuals on roster	ACCHH	10/1/19
Providing ongoing communication and information on pending transition to Dignity Village residents	ACCHH	8/1/19 - 12/31/19
Triage individuals on final roster into categories (a) moving on to campus, (b) bus ticket program, or (c) unsure/moving elsewhere	ACCHH	Beginning 10/1/19
Provide long-term storage option for individuals moving onto campus	City	12/1/19
Begin registration process for on-campus sites	ACCHH	11/15/19
Facilitate moving of belongings to campus	ACCHH	Beginning December 2019
Provide follow-up tracking (3 month, 6 month, 12 month) for all bus ticket recipients via follow-up phone calls	ACCHH	Beginning 1/1/2020
Provide follow-up tracking (3 month, 6 month, 12 month) for all recipients via HMIS to measure whether they returned to homelessness in the CoC	ACCHH	Beginning 1/1/2020
Use motivational interviewing and other best practices to consistently encourage individual to move onto GRACE campus	ACCHH	Beginning 10/1/19
Determine planned location of campsite to facilitate future outreach contacts. Confirm communication info includes location of preferred services.	ACCHH	Beginning 10/1/19
Make regular outreach contacts to provide appropriate coordination with the CoC Coordinated Entry system	ACCHH and CoC	Beginning 10/1/19
Establish and implement Continuum-wide dynamic guidelines to prioritize individuals on the final roster for permanent housing placement.	CoC	10/1/19

Project Component: Campground Operations

Performance Objective	Responsibility	Target Date
Develop tent attrition protocols, to include expectations for attendance and subsequent re-entry into GRACE shelter	ACCHH	12/1/19
Finalize campground expectations	ACCHH	12/1/19
Create new HMIS project to include on-campus tents	ACCHH	12/1/19
Housing Specialists will meet at minimum weekly with all campers to develop and implement housing plan	ACCHH	Beginning 1/1/20
Housing Specialists make regular outreach contacts with non-campus residents on final roster to provide appropriate coordination with the CoC Coordinated Entry system	ACCHH and CoC	Beginning 1/1/20
Provide overnight security, pest control, waste management for campground	ACCHH	Beginning December 2019
Provide follow-up tracking (3 month, 6 month, 12 month) for all positive exits via HMIS to measure whether they returned to homelessness in the CoC	ACCHH	

EXHIBIT 2A SERVICES BUDGET

Alachua County Coalition for the Homeless and Hungry, Inc.
Contract Period:
October 1, 2019 through September 30, 2020

GRACE Services Budget FY 2019-2020

		CITY FUNDING			
			MATCH ALLOCATION	IN-KIND AND VOLUNTEER	TOTAL BUDGET
<u>BUDGET</u>					
<u>OPERATIONS</u>					
Utilities	\$ 123,888	\$ 39,114	\$ -	\$ -	\$ 163,002
Food	\$ 56,667	\$ 13,333	\$ 270,000	\$ -	\$ 340,000
Kitchen Cleaning/Paper	\$ 22,500	\$ -	\$ -	\$ -	\$ 22,500
Phones/Internet	\$ 15,750	\$ -	\$ -	\$ -	\$ 15,750
Resident & Client Supplies	\$ 21,000	\$ -	\$ 67,500	\$ -	\$ 88,500
Maintenance	\$ 45,407	\$ -	\$ 3,600	\$ -	\$ 49,007
Laundry Leasing	\$ 5,250	\$ -	\$ -	\$ -	\$ 5,250
Waste disposal	\$ 11,000	\$ -	\$ -	\$ -	\$ 11,000
Pest control	\$ 2,400	\$ -	\$ -	\$ -	\$ 2,400
Liability Insurance	\$ 17,000	\$ -	\$ -	\$ -	\$ 17,000
Van expenses	\$ 3,000	\$ -	\$ -	\$ -	\$ 3,000
Culinary job training	\$ -	\$ 20,000	\$ -	\$ -	\$ 20,000
Total Operational	\$ 323,862	\$ 72,447	\$ 341,100	\$ -	\$ 737,409
<u>PERSONNEL</u>					
	FTE				
GRACE Director	1	\$ 70,000	\$ 5,000	\$ -	\$ 75,000
Director of Shelter Services	1	\$ 50,000	\$ -	\$ -	\$ 50,000
Advocate Team Leads	4	\$ 193,120	\$ -	\$ -	\$ 193,120
Advocates	8.4	\$ 175,872	\$ 60,000	\$ -	\$ 235,872
Overnight Attendant	4.2	\$ 87,936	\$ 30,000	\$ -	\$ 117,936
Kitchen Manager	1	\$ 25,381	\$ 10,619	\$ -	\$ 36,000
Evening Chef	1	\$ 16,886	\$ 13,274	\$ -	\$ 30,160
Weekend Chef	0.6	\$ 18,096	\$ -	\$ -	\$ 18,096
Facilities Maintenance	1	\$ 30,160	\$ -	\$ -	\$ 30,160
Janitor	1	\$ 28,080	\$ -	\$ -	\$ 28,080
Office Manager	1	\$ 36,504	\$ 10,696	\$ -	\$ 47,200
Receptionists	0	\$ -	\$ -	\$ 50,000	\$ 50,000
Director of Housing Services	1	\$ 22,500	\$ 22,500	\$ -	\$ 45,000
Case Managers	1	\$ 17,680	\$ 16,640	\$ -	\$ 34,320
Housing Specialists	2.5	\$ 72,340	\$ 7,220	\$ -	\$ 79,560
Intake Specialist	1	\$ 20,384	\$ 8,736	\$ -	\$ 29,120
Dir of Community Engagement	1	\$ 34,320	\$ -	\$ -	\$ 34,320
Volunteers		\$ -	\$ -	\$ 494,000	\$ 494,000
Partner Agency Case Mgmt		\$ -	\$ -	\$ 113,000	\$ 113,000
Total Salaries	30.7	\$ 839,258	\$ 184,686	\$ -	\$ 1,023,944
FICA/WC/Ins		\$ 109,104	\$ 24,009	\$ -	\$ 133,113
Health ins./fringe		\$ 134,749	\$ -	\$ -	\$ 134,749
Total Personnel		\$ 1,083,111	\$ 208,695	\$ 607,000	\$ 1,948,806
<u>ADMINISTRATIVE</u>					
Office Supplies	\$ 5,867	\$ 533	\$ 1,000	\$ -	\$ 7,400
Printing and copying	\$ 8,300	\$ 800	\$ -	\$ -	\$ 9,100
Postage	\$ 2,000	\$ -	\$ -	\$ -	\$ 2,000
Employee Supplies	\$ 2,300	\$ -	\$ -	\$ -	\$ 2,300
Uniforms	\$ 2,428	\$ -	\$ -	\$ -	\$ 2,428
Non Capital equipment	\$ 6,400	\$ -	\$ -	\$ -	\$ 6,400
Travel	\$ 3,000	\$ -	\$ -	\$ -	\$ 3,000
Staff Development	\$ 14,000	\$ -	\$ 5,000	\$ -	\$ 19,000
Volunteer Recruitment	\$ 1,000	\$ -	\$ -	\$ -	\$ 1,000
Audit	\$ 6,000	\$ 3,000	\$ -	\$ -	\$ 9,000
Professional Services	\$ 33,333	\$ -	\$ 50,000	\$ -	\$ 83,333
Software	\$ 6,200	\$ -	\$ 6,000	\$ -	\$ 12,200
Certification and inspections	\$ 200	\$ -	\$ -	\$ -	\$ 200
Memberships and dues	\$ 2,000	\$ -	\$ -	\$ -	\$ 2,000
Total Administrative	\$ 93,028	\$ 4,333	\$ 62,000	\$ -	\$ 159,361
TOTAL:		\$ 1,500,000	\$ 285,475	\$ 1,060,100	\$ 2,845,576

EXHIBIT 2B

TRANSITIONAL CAMPGROUND OPERATIONS PLAN

BUDGET

Alachua County Coalition for the Homeless and Hungry, Inc.
Contract Period: October 1, 2019 through September 30, 2020

Start Up Costs

Campground Implementation Costs:

Dignity Village Outreach	(4 FTE@\$15/hr/incl. burden)	\$41,184
Bunk Bed & Accessories for Shelter	(30@\$1,000)	\$30,000
Standard Tents	(150@\$100)	\$15,000
Tent Platforms (8x8)	(150@\$100)	\$15,000
Shade Protection (120'x180')		\$10,000
Computers	(2 @\$500.00)	\$1,000
Campground Setup Costs		\$3,000
Campground Setup Labor		\$3,000
Informational Meeting Labor		\$300
Subtotal (Paid to ACCHH)		\$118,484
Fencing Costs (as provided by City/County)		\$23,000
Security Costs (as provided by City/County)		\$43,000
Subtotal (as provided by City)		\$66,000

Total Start Up Costs: \$184,484

Year 1 Operation Costs

Personnel:

Housing Specialist	(4 FTE@\$15/hr/incl. burden)	\$137,390
Security Personnel	(1.4 FTE @\$39/hr)	\$95,076
Subtotal		\$232,466

Operations:

Portable Toilets	\$15,012
Pest Control	\$2,001
Subtotal	\$17,013

Total Year 1 Operation Costs: \$249,479

Total Start Up and Year 1 Costs (ACCHH): \$367,963

Total Start Up Costs (as provided by the City/County): \$ 66,000
\$433,963

**EXHIBIT 3
INVOICE**

(Print Invoice on Agency Letterhead)

PROVIDER: Alachua County Coalition for the Homeless and Hungry, Inc.
Contract Period: October 1, Insert Year through September 30, Insert Year

Invoice No: _____

Payment Request for the Month of: _____
Reporting Period for the Month of: _____

GRACE Funds Requested: \$ _____

Transitional Campground Funds Requested: \$ _____

Total Funds Requested: \$ _____

I certify that the attached: 1) GRACE Marketplace Financial Report (Exhibit 3A), Client Service Report, ESG CAPER (2019) Report, and Performance Measures Report; and 2) Transitional Campground Operations Plan Financial Report (Exhibit 3B) and Transitional Campground Operations Plan Update Report for the monthly period _____ submitted with this Invoice is based on actual data collected by ACCHH staff.

I further certify that all Services have been performed in accordance with the Agreement.

Authorized Signature: _____ **Date:** _____

Print Name: _____

Title: _____

EXHIBIT 3A

GRACE Services Financial Report

ALACHUA COUNTY COALITION FOR THE HOMELESS AND HUNGRY, INC. (ACCHH) SERVICE AGREEMENT FOR THE PROVISION OF HOMELESS SERVICES FINANCIAL REPORT				
A. Program:	GRACE Marketplace			
B. Reporting Period:				
C. Program Revenues:	Approved Budget	Current Period	Cumulative to Date	Available Balance
1. <i>City of Gainesville/General Funds</i>	\$ -	\$ -	\$ -	\$ -
2. <i>ACCHH Match Allocation</i>	\$ -	\$ -	\$ -	\$ -
3. <i>In-Kind and Volunteer</i>	\$ -	\$ -	\$ -	\$ -
Total Revenues	\$ -	\$ -	\$ -	\$ -
D. Program Expenditures:	Approved Budget	Current Period	Cumulative To Date	Available Balance
1. <i>Operations</i>	\$ -	\$ -	\$ -	\$ -
2. <i>Personnel</i>	\$ -	\$ -	\$ -	\$ -
3. <i>Administrative</i>	\$ -	\$ -	\$ -	\$ -
4. <i>Other (Please Specify):</i>				
_____	\$ -	\$ -	\$ -	\$ -
_____	\$ -	\$ -	\$ -	\$ -
Total Expenditures	\$ -	\$ -	\$ -	\$ -
E. Funds Requested	\$ -			
I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE DATA REPORTED HEREIN IS CORRECT.				
Authorized signature: _____				
Title: _____		Date: _____		

EXHIBIT 3B

Transitional Campground Operations Plan Financial Report

ALACHUA COUNTY COALITION FOR THE HOMELESS AND HUNGRY, INC. (ACCHH)				
SERVICE AGREEMENT FOR THE PROVISION OF				
TRANSITIONAL CAMPGROUND OPERATIONS				
FINANCIAL REPORT				
A. Program:	GRACE Marketplace			
B. Reporting Period:				
C. Program Revenues:	Approved Budget	Current Period	Cumulative to Date	Available Balance
1. City of Gainesville/General Funds	\$ -	\$ -	\$ -	\$ -
2. ACCHH Match Allocation	\$ -	\$ -	\$ -	\$ -
3. In-Kind and Volunteer	\$ -	\$ -	\$ -	\$ -
Total Revenues	\$ -	\$ -	\$ -	\$ -
D. Program Expenditures:	Approved Budget	Current Period	Cumulative To Date	Available Balance
1. Operations	\$ -	\$ -	\$ -	\$ -
2. Personnel	\$ -	\$ -	\$ -	\$ -
3. Administrative	\$ -	\$ -	\$ -	\$ -
4. Other (Please Specify):				
_____	\$ -	\$ -	\$ -	\$ -
_____	\$ -	\$ -	\$ -	\$ -
Total Expenditures	\$ -	\$ -	\$ -	\$ -
E. Funds Requested	\$ -			
I CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE DATA REPORTED HEREIN IS CORRECT.				
Authorized signature: _____				
Title: _____		Date: _____		

**EXHIBIT 4A
PROGRAM REPORTS**

**CLIENT SERVICE REPORTS
FOR THE MONTH OF _____**

Client Served Report

Reporting Group:
Provider: Alachua County Coalition for the Homeless and Hungry-Grace (53)

☐ This provider AND its subordinates

☒ This provider ONLY

Services: Services Provided (other than shelter or referred services)

Grouping: ☒ Clients Receiving Services as a Family

☐ Clients in a Household

Service Code:
Served Date Range: 10/1/2017 - 2/28/2018

Served Before Date Range (Old client count):
Treat Open-Ended Services/Referrals as 1-day Services: ☒ Yes ☐ No

Legal Adult Age: 18

Report Details

CLIENTS SERVED		Old	New	Total
A. Adults		0	2808	2808
Never Specified		0	841	841
Male		0	1272	1272
Female		0	685	685
Transgender		0	0	0
Unknown		0	9	9
B. Children		0	198	198
Never Specified		0	0	0
Male		0	106	106
Female		0	92	92
Transgender		0	0	0
Unknown		0	0	0
C. Total (A+B)		0	3006	3006
FAMILY MEMBERS SERVED		Old	New	Total
A. Adults		0	3	3
Never Specified		0	3	3
Male		0	0	0
Female		0	0	0
Transgender		0	0	0

	Unknown	0	0	0							
B. Children		0	0	0							
	Never Specified	0	0	0							
	Male	0	0	0							
	Female	0	0	0							
	Transgender	0	0	0							
	Unknown	0	0	0							
C. Total (A+B)		0	3	3							
D. Total Households Served		0	1	1							
E. Average Household Members Served		0	3.00	3.00							
SINGLES SERVED		Old	New	Total							
A. Adults		0	2805	2805							
	Never Specified	0	838	838							
	Male	0	1272	1272							
	Female	0	685	685							
	Transgender	0	0	0							
	Unknown	0	9	9							
B. Children		0	198	198							
	Never Specified	0	0	0							
	Male	0	106	106							
	Female	0	92	92							
	Transgender	0	0	0							
	Unknown	0	0	0							
C. Total (A+B)		0	3003	3003							
FAMILY MEMBERS											
	Never Specified	0	0	0	0	0	0	0	0	3	3
	Male	0	0	0	0	0	0	0	0	0	0
	Female	0	0	0	0	0	0	0	0	0	0
	Transgender	0	0	0	0	0	0	0	0	0	0
	Unknown	0	0	0	0	0	0	0	0	0	0
Total		0	0	0	0	0	0	0	0	3	3

SINGLES	0-5	6-12	13-17	18-30	31-50	51-61	62+	No DOB	Total
Never Specified	0	0	0	3	7	4	7	817	838
Male	36	42	28	195	490	389	166	32	1378
Female	33	39	20	170	268	152	69	26	777
Transgender	0	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	2	1	6	9
Total	69	81	48	368	765	547	243	882	3003
CLIENTS SERVED BY RACE							Secondary Total	Total	
American Indian or Alaska Native (HUD)								18	
Black or African American (HUD)							1		
Client doesn't know (HUD)							1		
Native Hawaiian or Other Pacific Islander (HUD)							1		
Not Given							11		
White (HUD)							4		
Asian (HUD)								10	
Black or African American (HUD)							1		
Not Given							8		
White (HUD)							1		
Black or African American (HUD)								908	
American Indian or Alaska Native (HUD)							8		
Client doesn't know (HUD)							5		
Client refused (HUD)							5		
Data not collected (HUD)							6		
Native Hawaiian or Other Pacific Islander (HUD)							3		
Not Given							866		
White (HUD)							15		
Client doesn't know (HUD)								3	
American Indian or Alaska Native (HUD)							1		
Not Given							2		
Client refused (HUD)								31	
Black or African American (HUD)							1		
Not Given							30		
Data not collected (HUD)								4	

Not Given	4				
Native Hawaiian or Other Pacific Islander (HUD)		9			
Not Given	9				
Other		3			
Not Given	3				
Other Multi-Racial		1			
Not Given	1				
White (HUD)		1185			
American Indian or Alaska Native (HUD)	18				
Asian (HUD)	2				
Black or African American (HUD)	5				
Client doesn't know (HUD)	2				
Client refused (HUD)	5				
Data not collected (HUD)	13				
Native Hawaiian or Other Pacific Islander (HUD)	3				
Not Given	1136				
Other	1				
Not Given		834			
Total		3006			
CLIENTS SERVED BY ETHNICITY		Total			
Client doesn't know (HUD)		1			
Client refused (HUD)		31			
Data not collected (HUD)		7			
Hispanic/Latino (HUD)		111			
Non-Hispanic/Non-Latino (HUD)		1965			
Not Given		891			
Total		3006			
SERVICE COUNT					
Service Type	Funding Source	Total Referral	Total Provided	Total Cost	Avg Cost
Basic Needs (B)	N/A	0	2471	\$0.00	\$0.00
Bathing Facilities (BM-6500.6500-150)	N/A	0	1091	\$0.00	\$0.00
Bedding/Linen (BM-3000.1000)	N/A	0	1	\$0.00	\$0.00

Benefits Screening (PH-0700)	N/A	0	496	\$0.00	\$0.00
Bicycle Donation Programs (TI-1800.9000-080)	N/A	0	1	\$0.00	\$0.00
Breakfast Cafés (PL-1800.1250)	N/A	0	19989	\$0.00	\$0.00
Case/Care Management (PH-1000)	N/A	0	13	\$0.00	\$0.00
Clothing (BM-6500.1500)	N/A	0	2006	\$0.00	\$0.00
Dinner Theater (TA-8500.1600)	N/A	0	22245	\$0.00	\$0.00
Emergency Shelter (BH-1800)	N/A	0	20	\$0.00	\$0.00
Extreme Cold Weather Shelters (BH-1800.8500-185)	N/A	0	2681	\$0.00	\$0.00
Food (BD)	ESG	0	1	\$1.00	\$1.00
Full Fare Transit Passes (BT-8500.1000-220)	N/A	0	1219	\$0.00	\$0.00
Household Goods (BM-3000)	N/A	0	2	\$0.00	\$0.00
Information Services (TJ)	N/A	0	503	\$0.00	\$0.00
Laundry Facilities (BM-6500.6500-450)	N/A	0	2137	\$0.00	\$0.00
Laundry Products (BM-6500.6500-455)	N/A	0	61	\$0.00	\$0.00
Markets/Restaurants Accepting EBT Cards (BD-2400.4900)	N/A	0	16	\$0.00	\$0.00
Mobile Food Service Vendors (PL-2000.5000)	N/A	0	12610	\$0.00	\$0.00
Private Mail Services (TB-1100.6500)	N/A	0	162	\$0.00	\$0.00
Shoes (BM-6500.1500-830)	N/A	0	7	\$0.00	\$0.00
Total (Service Types: 21, Funding Sources: 1)		0	67732	\$1.00	\$0.00

ESG CAPER (2019) REPORT
FOR THE MONTH OF _____

Report Options	
Provider Type	☒ Provider ☐ Reporting Group
Provider *	Graceland Dorm-Alachua County Coalition for the Homeless and Hungry (119) ☐ This provider AND its subordinates ☐ This provider ONLY
Program Date Range *	10/01/2017 to 02/28/2018
Entry/Exit Types *	☐ Basic ☐ Basic Center Program ☒ Entry/Exit ☐ HUD ☐ PATH ☐ Quick Call ☐ RHY ☐ Standard ☐ Transitional Living Program Entry/Exit ☐ VA ☐ HPRP (Retired)

ESG Report Results				
4a - Project Identifiers in HMIS				
Organization Name	Graceland Dorm-Alachua County Coalition for the Homeless and Hungry			
Organization ID	119			
Project Name	Graceland Dorm-Alachua County Coalition for the Homeless and Hungry			
Project ID	119			
HMIS Project Type	Emergency Shelter (HUD)			
Method of Tracking ES	Entry/Exit Data			
If HMIS Project ID = 6 (S Only)				
Is the Services Only (HMIS Project Type 6) affiliated with a residential project?				
If 2.4, Dependent A = 1				
Identify the Project ID's of the housing projects this project is affiliated with				
5a - Report Validation Table				
Report Validation Table				
1. Total Number of Persons Served	188			
2. Number of Adults (age 18 or over)	187			
3. Number of Children (under age 18)	0			
4. Number of Persons with Unknown Age	1			
5. Number of Leavers	147			
6. Number of Adult Leavers	147			
7. Number of Adult and Head of Household Leavers	147			
8. Number of Stayers	41			
9. Number of Adult Stayers	40			
10. Number of Veterans	11			
11. Number of Chronically Homeless Persons	36			
12. Number of Youth Under Age 25	17			
13. Number of Parenting Youth Under Age 25 with Children	0			
14. Number of Adult Heads of Household	185			
15. Number of Child And Unknown-Age Heads of Household	0			
16. Heads of Households and Adult Stayers In the Project 365 Days or More	0			
5a - Data Quality: Personally Identifiable Information				
Data Element	Client Doesn't Know/Client Refused	Information Missing	Data Issues	% of Error Rate
Name (3.1)	0	0	0	0%

Report Options	
Provider Type	☒ Provider ☐ Reporting Group
Provider *	Graceland Dorm-Alachua County Coalition for the Homeless and Hungry (119) ☐ This provider AND its subordinates ☐ This provider ONLY
Program Date Range *	10/01/2017 to 02/28/2018
Entry/Exit Types *	☐ Basic ☐ Basic Center Program ☒ HUD ☐ PATH ☐ Quick Call ☐ RHY ☐ Standard ☐ Transitional Living Program Entry/Exit ☐ VA ☐ HPRP (Retired)

ESG Report Results				
4a - Project Identifiers in HMIS				
Organization Name	Graceland Dorm-Alachua County Coalition for the Homeless and Hungry			
Organization ID	119			
Project Name	Graceland Dorm-Alachua County Coalition for the Homeless and Hungry			
Project ID	119			
HMIS Project Type	Emergency Shelter (HUD)			
Method of Tracking ES	Entry/Exit Date			
If HMIS Project ID = 6 (S Only)				
Is the Services Only (HMIS Project Type 6) affiliated with the residential project?				
If 2.4, Dependent A = 1				
Identify the Project ID's of the housing projects this project is affiliated with				
5a - Report Validation Table				
Report Validation Table				
1. Total Number of Persons Served	188			
2. Number of Adults (age 18 or over)	187			
3. Number of Children (under age 18)	0			
4. Number of Persons with Unknown Age	1			
5. Number of Leavers	147			
6. Number of Adult Leavers	147			
7. Number of Adult and Head of Household Leavers	147			
8. Number of Stayers	41			
9. Number of Adult Stayers	40			
10. Number of Veterans	11			
11. Number of Chronically Homeless Persons	36			
12. Number of Youth Under Age 25	17			
13. Number of Parenting Youth Under Age 25 with Children	0			
14. Number of Adult Heads of Household	185			
15. Number of Child And Unknown-Age Heads of Household	0			
16. Heads of Households and Adult Stayers In the Project 365 Days or More	0			
6a - Data Quality: Personally Identifiable Information				
Data Element	Client Doesn't Know/Client Refused	Information Missing	Date Issues	% of Error Rate
Name (3.1)	0	0	0	0%

Total Households	185	185	0	0	0
8b - Point-in-Time Count of Households on the Last Wednesday					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
January	44	44	0	0	0
April	0	0	0	0	0
July	0	0	0	0	0
October	46	46	0	0	0
9a - Number of Persons Contacted					
	All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine	
Once	0	0	0	0	
2-5 Times	0	0	0	0	
6-9 Times	0	0	0	0	
10+ Times	0	0	0	0	
Total Persons Contacted	0	0	0	0	
9b - Number of Persons Engaged					
	All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine	
Once	0	0	0	0	
2-5 Times	0	0	0	0	
6-9 Times	0	0	0	0	
10+ Times	0	0	0	0	
Total Persons Engaged	0	0	0	0	
Rate of Engagement	0.00		0.00	0.00	
10a - Gender of Adults					
	Total	Without Children	With Children and Adults	Unknown Household Type	
Male	141	141	0	0	
Female	46	46	0	0	
Trans Female (MTF or Male to Female)	0	0	0	0	
Trans Male (FTM or Female to Male)	0	0	0	0	
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	
Data not collected	0	0	0	0	
Subtotal	187	187	0	0	
10b - Gender of Children					
	Total	With Children and Adults	With Only Children	Unknown Household Type	
Male	0	0	0	0	
Female	0	0	0	0	
Trans Female (MTF or Male to Female)	0	0	0	0	
Trans Male (FTM or Female to Male)	0	0	0	0	
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	
Client Doesn't Know/Client Refused	0	0	0	0	
Data not collected	0	0	0	0	
Subtotal	0	0	0	0	
10c - Gender of Persons Missing Age Information					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Male	1	0	0	0	1
Female	0	0	0	0	0

Trans Female (MTF or Male to Female)	0	0	0	0	0
Trans Male (FTM or Female to Male)	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	0	0	0	0	0
Subtotal	1	0	0	0	1

10d - Gender by Age Ranges							
	Total	Under Age 18	Age 18-24	Age 25-61	Age 62 and over	Client Doesn't Know/Client Refused	Data not collected
Male	142	0	12	111	18	0	1
Female	46	0	5	35	6	0	0
Trans Female (MTF or Male to Female)	0	0	0	0	0	0	0
Trans Male (FTM or Female to Male)	0	0	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0	0
Data not collected	0	0	0	0	0	0	0
Subtotal	188	0	17	146	24	0	1

11 - Age					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Under 5	0		0	0	0
5 - 12	0		0	0	0
13 - 17	0		0	0	0
18 - 24	17	17	0		0
25 - 34	31	31	0		0
35 - 44		32			0
45 - 54	56	56	0		0
55 - 61		27			0
62 +	24	24	0		0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	1	0	0	0	1
Total	188	187	0	0	1

12a - Race					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
White	107	107	0	0	0
Black or African American	75	74	0	0	1
Asian	0	0	0	0	0
American Indian or Alaska Native	1	1	0	0	0
Native Hawaiian or Other Pacific Islander	0	0	0	0	0
Multiple races	5	5	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	188	187	0	0	1

12b - Ethnicity					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Non-Hispanic/Non-Latino	178	177	0	0	1
Hispanic/Latino	10	10	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	188	187	0	0	1

13a - Physical and Mental Health Conditions at Start					
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	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	27	27	0	0	0
Alcohol Abuse	2	2	0	0	0
Drug Abuse	1	1	0	0	0
Both Alcohol and Drug Abuse	6	6	0	0	0
Chronic Health Condition	20	20	0	0	0
HIV/AIDS	0	0	0	0	0
Development Disability	6	6	0	0	0
Physical Disability	24	24	0	0	0
13b1 - Physical and Mental Health Conditions of Leavers					
	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	23	23	0	0	0
Alcohol Abuse	1	1	0	0	0
Drug Abuse	1	1	0	0	0
Both Alcohol and Drug Abuse	5	5	0	0	0
Chronic Health Condition	18	18	0	0	0
HIV/AIDS	0	0	0	0	0
Development Disability	5	5	0	0	0
Physical Disability	19	19	0	0	0
13b1 - Physical and Mental Health Conditions of Stayers					
	Total Persons	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	4	4	0	0	0
Alcohol Abuse	1	1	0	0	0
Drug Abuse	0	0	0	0	0
Both Alcohol and Drug Abuse	1	1	0	0	0
Chronic Health Condition	2	2	0	0	0
HIV/AIDS	0	0	0	0	0
Development Disability	1	1	0	0	0
Physical Disability	5	5	0	0	0
14a - Domestic Violence History					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Yes	28	28	0	0	0
No	155	155	0	0	0
Client Doesn't Know/Client Refused	1	1	0	0	0
Data not collected	3	3	0	0	0
Total	187	187	0	0	0
14b - Persons Fleeing Domestic Violence					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Yes	4	4	0	0	0
No	13	13	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	11	11	0	0	0
Total	28	28	0	0	0
15 - Living Situation					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	13	13	0	0	0
Transitional housing for homeless persons (including homeless youth)	2	2	0	0	0

Place not meant for habitation	42	42	0	0	0
Safe Haven	1	1	0	0	0
Interim Housing	0	0	0	0	0
Subtotal	58	58	0	0	0
Institutional Settings					
Psychiatric hospital or other psychiatric facility	7	7	0	0	0
Substance abuse treatment facility or detox center	1	1	0	0	0
Hospital or other residential non-psychiatric medical facility	6	6	0	0	0
Jail, prison, or juvenile detention facility	30	30	0	0	0
Foster care home or foster care group home	2	2	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Residential project or halfway house with no homeless criteria	1	1	0	0	0
Subtotal	47	47	0	0	0
Other Locations					
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Owned by client, no ongoing housing subsidy	4	4	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, no ongoing housing subsidy	19	19	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	3	3	0	0	0
Hotel or motel paid for without emergency shelter voucher	4	4	0	0	0
Staying or living in a friend's room, apartment or house	29	29	0	0	0
Staying or living in a family member's room, apartment or house	20	20	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	1	1	0	0	0
Subtotal	80	80	0	0	0
Total	187	187	0	0	0

20a - Type of Non-Cash Benefit Source			
	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers
Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	60	0	48
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	0	0	0
TANF Child Care Services	0	0	0
TANF Transportation Services	1	0	1
Other TANF-Funded Services	0	0	0
Other Source	1	0	1

21 - Health Insurance			
	At Start	At Annual Assessment for Stayers	At Exit for Leavers
MEDICAID	42	0	33
MEDICARE	16	0	14
State Children's Health Insurance Program	1	0	1
Veteran's Administration (VA) Medical Services	3	0	3
Employer-Provided Health Insurance	1	0	1
Health Insurance obtained through COBRA	1	0	1
Private Pay Health Insurance	2	0	2
State Health Insurance for Adults	1	0	1
Indian Health Services Program	1	0	1
Other	1	0	1
No Health Insurance	138	0	110
Client doesn't know/Client refused	0	0	0
Data not collected	3	0	1

Number of stayers not yet required to have an annual assessment			41		
1 Source of Health Insurance	35	0	24		
More than 1 Source of Health Insurance	13	0	13		
22a2 - Length of Participation - ESG Projects					
	Total	Leavers	Stayers		
0-7 days	43	35	8		
8 to 14 days	18	13	5		
15 to 21 days	18	11	7		
22 to 30 days	18	14	4		
31 to 60 days	47	39	8		
61 to 90 days	29	20	9		
91 to 180 days	15	15	0		
181 to 365 days	0	0	0		
366 to 730 Days (1-2 Yrs)	0	0	0		
731 to 1,095 Days (2-3 Yrs)	0	0	0		
1,096 to 1,460 Days (3-4 Yrs)	0	0	0		
1,461 to 1,825 Days (4-5 Yrs)	0	0	0		
More than 1,825 Days (>5 Yrs)	0	0	0		
Data not collected	0	0	0		
Total	188	147	41		
22c - RRH Length of Time between Project Start Date and Housing Move-In Date					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	0	0	0	0	0
22d - Length of Participation by Household Type					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	43	43	0	0	0
8 to 14 days	18	18	0	0	0
15 to 21 days	18	17	0	0	1
22 to 30 days	18	18	0	0	0
31 to 60 days	47	47	0	0	0
61 to 90 days	29	29	0	0	0
91 to 180 days	15	15	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
731 to 1,095 Days (2-3 Yrs)	0	0	0	0	0
1,096 to 1,460 Days (3-4 Yrs)	0	0	0	0	0
1,461 to 1,825 Days (4-5 Yrs)	0	0	0	0	0
More than 1,825 Days (>5 Yrs)	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	188	187	0	0	1
23a - Exit Description - More than 90 days					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type

SAMPLE

Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing subsidy	0	0	0	0	0
Owned by client, with ongoing subsidy	0	0	0	0	0
Rental by client, no ongoing subsidy	0	0	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, other ongoing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0
Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	0	0	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Subtotal	0	0	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	0	0	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%
23b - Exit Destination - 90 Days or Less					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing subsidy	0	0	0	0	0
Owned by client, with ongoing subsidy	0	0	0	0	0
Rental by client, no ongoing subsidy	0	0	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, other ongoing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	0	0	0	0	0

Staying or living with family, permanent tenure	0	0	0	0	0
Staying or living with friends, permanent tenure	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Subtotal	0	0	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	0	0	0	0	0
Safe Haven	0	0	0	0	0
Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Subtotal	0	0	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	0	0	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%
23c - Exit Destination - All persons					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing subsidy	2	2	0	0	0
Owned by client, with ongoing subsidy	0	0	0	0	0
Rental by client, no ongoing subsidy	16	16	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, other ongoing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	3	3	0	0	0
Staying or living with family, permanent tenure	7	7	0	0	0
Staying or living with friends, permanent tenure	4	4	0	0	0
Rental by client, with RRH or equivalent subsidy	2	2	0	0	0
Subtotal	34	34	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	3	3	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	0	0	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	1	1	0	0	0

Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	97	97	0	0	0
Safe Haven	1	1	0	0	0
Hotel or motel paid for without emergency shelter voucher	1	1	0	0	0
Subtotal	103	103	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	1	1	0	0	0
Jail, prison, or juvenile detention facility	6	6	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	7	7	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	3	3	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	3	3	0	0	0
Total	147	147	0	0	0
Total persons exiting to positive housing destinations	34	34	0	0	0
Total persons whose destinations excluded them from the calculation	1	1	0	0	0
Percentage	23%	23%	0%	0%	0%

24 - Homeless Prevention Housing Assessment at Exit

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Able to maintain the housing they had at project start--Without a subsidy	0	0	0	0	0
Able to maintain the housing they had at project start--With the subsidy they had at project entry	0	0	0	0	0
Able to maintain the housing they had at project start--With an on-going subsidy acquired since project entry	0	0	0	0	0
Able to maintain the housing they had at project start--Only with financial assistance other than a subsidy	0	0	0	0	0
Moved to new housing unit--With on-going subsidy	0	0	0	0	0
Moved to new housing unit--Without an on-going subsidy	0	0	0	0	0
Moved in with family/friends on a temporary basis	0	0	0	0	0
Moved in with family/friends on a permanent basis	0	0	0	0	0
Moved to a transitional or temporary housing facility or program	0	0	0	0	0
Client became homeless - moving to a shelter or other place unfit for human habitation	0	0	0	0	0
Client went to jail/prison	0	0	0	0	0
Client died	0	0	0	0	0
Client doesn't know/Client refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Total	0	0	0	0	0

25a - Number of Veterans

	Total	Without Children	With Children and Adults	Unknown Household Type
Chronically Homeless Veteran	1	1	0	0
Non-Chronically Homeless Veteran	10	10	0	0
Not a veteran	176	176	0	0
Client doesn't know/Client refused	0	0	0	0
Data not collected	0	0	0	0
Total	187	187	0	0

26b - Number of Chronically Homeless Persons by Household

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	36	36	0	0	0
Not Chronically Homeless	99	99	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	53	52	0	0	1
Total	188	187	0	0	1

SAMPLE

PERFORMANCE MEASURES REPORT FOR THE MONTH OF _____

	Performance Measure	Benchmark
LBES 1	Shelter: Emergency shelter will be provided for up to 100 people every night in accordance with established CoC standards Utilization: Provider will report each month: (1) total number of unduplicated persons provided shelter*, and (2) bed utilization rate*	Provider will report # of unduplicated people provided shelter monthly & fiscal year-to-date (YTD); total nights of shelter (# and average)
LBES 2	Outcomes: Provider will report # of shelter residents who exit to a permanent housing placement as reported in HMIS (HMIS report: ESG CAPER 2019)	Report # of positive shelter exits Benchmark: 150 annually (reported by category)
LBES 3	Length of stay: Provider will endeavor to reduce the length of time individuals remain in emergency shelter (HMIS report: ART 625 Tab L)	Benchmark: ≥ 50% of shelter residents exit from shelter within 30 days Provider will report Length of Stay of shelter residents staying > 30 days
LBES 4	Recidivism: Provider will report % of individuals who exit successfully after October 1 who do not return to homelessness within 6 months within the Continuum of Care.	Benchmark: Provider will submit two reports (April 15 & October 15) Benchmark: Housing Retention Rate ≥ 80%
LBES 5	<i>Bed Use:</i> Ensure that new admissions to shelter* are prioritized for available beds based on priorities established by the CoC.	TBD by the CoC
LBES 6	Residents who become homeless in Alachua County will receive priority placement for available shelter beds.* <i>Determination of residency: Alachua County identification or ties to community</i>	100% of County residents will be prioritized for available beds* Provider will report residence prior to homelessness for new intakes based on HMIS data
LBES 7	<i>Diversion from Homelessness:</i> Percentage of cases requesting emergency shelter that were diverted.*	≥ 10%**
DAY SVCS 1	<i>Day Services (Increase access to services by at risk and vulnerable populations):</i> A variety of support services will be provided to at-risk and vulnerable populations including meals, mail, laundry, and showers.	Provider will report total # of meals provided, and total # of services provided (including meals), monthly & fiscal YTD** Provider will report total # of unsheltered, unduplicated people provided day services (calculated as total # unduplicated people served - total # of unduplicated people provided shelter (City/County) - total # of unduplicated people provided shelter (VA)), monthly & fiscal YTD

* Does not include VA-funded beds

** Will review six (6) months into contract

**EXHIBIT 4B
PROGRAM REPORTS
TRANSITIONAL CAMPGROUND OPERATIONS PLAN UPDATE**

Report Options

Provider Type ☒ Provider ☐ Reporting Group
 Provider * Dignity Village (135)
☐ This provider AND its subordinates ☐ This provider ONLY
 Program Date Range * 10/01/2019 to 10/31/2019
 Entry/Exit Types * ☐ Basic ☐ Basic Center ☒ Program Entry/Exit ☐ HUD ☐ PATH ☐ Quick Call ☐ RHY ☐ Standard ☐ Transitional Living ☐ Program Entry/Exit ☐ VA ☐ HPRP (Retired)

ESG Report Results

4a - Project Identifiers in HMIS

#	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	All
Organization Name				Org. ID	Project Name			Project ID	HMIS Project Type		Method for Tracking ES		Affiliated with a residential project? (SSO)		Project IDs of Affiliation		CoC Codes		Geocodes		Victim Service Provider						
Dignity Village				135	Dignity Village			135	Other (HUD)								FL-508		121038		False						

Showing 1-1 of 1

5a - Report Validation Table

Report Validation Table	
1. Total Number of Persons Served	222
2. Number of Adults (age 18 or over)	222
3. Number of Children (under age 18)	0
4. Number of Persons with Unknown Age	0
5. Number of Leavers	28
6. Number of Adult Leavers	28
7. Number of Adult and Head of Household Leavers	28
8. Number of Stayers	194
9. Number of Adult Stayers	194
10. Number of Veterans	17
11. Number of Chronically Homeless Persons	29
12. Number of Youth Under Age 25	11
13. Number of Parenting Youth Under Age 25 with Children	0
14. Number of Adult Heads of Household	208
15. Number of Child And Unknown-Age Heads of Household	0
16. Heads of Households and Adult Stayers in the Project 365 Days or More	0

6a - Data Quality: Personally Identifiable Information

Data Element	Client Doesn't Know /Client Refused	Information Missing	Data Issues	Total	% of Error Rate
Name (3.1)	0	1	0	1	0%
SSN (3.2)	0	5	1	6	3%
Date of Birth (3.3)	0	1	0	1	0%
Race (3.4)	0	0		0	0%
Ethnicity (3.5)	1	2		3	1%
Gender (3.6)	0	0		0	0%
Overall Score				11	5%

6b - Data Quality: Universal Data Elements

Data Element	Error Count	% of Error Rate
Veteran Status (3.7)	2	1%
Project Start Date (3.10)	0	0%
Relationship to Head of Household (3.15)	14	6%
Client Location (3.16)	3	1%
Disabling Condition (3.8)	18	8%

6c - Data Quality: Income and Housing Data Quality

Data Element	Error Count	% of Error Rate
--------------	-------------	-----------------

Destination (3.12)		0	0%				
Income and Sources (4.2) at Start		42	19%				
Income and Sources (4.2) at Annual Assessment		0	0%				
Income and Sources (4.2) at Exit		8	29%				
6d - Data Quality: Chronic Homelessness							
Entering into project type	Count of total records	Missing time in institution (3.917.2)	Missing time in housing (3.917.2)	Approximate Date started (3.917.3) DK/R/missing	Number of times (3.917.4) DK/R/missing	Number of months (3.917.5) DK/R/missing	% of records unable to calculate
ES, SH, Street Outreach	0			0	0	0	0%
TH	0	0	0	0	0	0	0%
PH (all)	0	0	0	0	0	0	0%
Total	0						0%
6e - Data Quality: Timeliness							
Time For Record Entry						Number of Project Start Records	Number of Project Exit Records
0 days						0	17
1 - 3 days						0	4
4 - 6 days						0	0
7 - 10 days						0	1
11+ days						222	6
6f - Data Quality: Inactive Records: Street Outreach and Emergency Shelter							
				# of Records	# of Inactive Records	% of Inactive Records	
Contact (Adults and Heads of Household in Street Outreach or ES - NBN)				0	0	0%	
Bed Night (All clients in ES - NBN)				0	0	0%	
7a - Number of Persons Served							
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type		
Adults	222	222	0		0		
Children	0		0	0	0		
Client Doesn't Know/Client Refused	0	0	0	0	0		
Data not collected	0	0	0	0	0		
Total	222	222	0	0	0		
For PSH and RRH - the total persons served who moved into housing		0	0	0	0	0	
8a - Number of Households Served							
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type		
Total Households	208	208	0	0	0		
For PSH and RRH - the total persons served who moved into housing		0	0	0	0	0	
8b - Point-in-Time Count of Households on the Last Wednesday							
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type		
January	0	0	0	0	0		
April	0	0	0	0	0		
July	0	0	0	0	0		
October	182	182	0	0	0		
9a - Number of Persons Contacted							
	All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine			
Once	0	0	0	0			
2-5 Times	0	0	0	0			
6-9 Times	0	0	0	0			
10+ Times	0	0	0	0			
Total Persons Contacted		0	0	0	0		
9b - Number of Persons Engaged							
	All Persons Contacted	First Contact - NOT staying on the Streets, ES, or SH	First contact - WAS staying on Streets, ES, or SH	First contact - Worker unable to determine			

Once	0	0	0	0			
2-5 Times	0	0	0	0			
6-9 Times	0	0	0	0			
10+ Times	0	0	0	0			
Total Persons Engaged	0	0	0	0			
Rate of Engagement	0.00	0.00	0.00	0.00			
10a - Gender of Adults							
	Total	Without Children	With Children and Adults	Unknown Household Type			
Male	156	156	0	0			
Female	65	65	0	0			
Trans Female (MTF or Male to Female)	1	1	0	0			
Trans Male (FTM or Female to Male)	0	0	0	0			
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0			
Client Doesn't Know/Client Refused	0	0	0	0			
Data not collected	0	0	0	0			
Subtotal	222	222	0	0			
10b - Gender of Children							
	Total	With Children and Adults	With Only Children	Unknown Household Type			
Male	0	0	0	0			
Female	0	0	0	0			
Trans Female (MTF or Male to Female)	0	0	0	0			
Trans Male (FTM or Female to Male)	0	0	0	0			
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0			
Client Doesn't Know/Client Refused	0	0	0	0			
Data not collected	0	0	0	0			
Subtotal	0	0	0	0			
10c - Gender of Persons Missing Age Information							
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type		
Male	0	0	0	0	0		
Female	0	0	0	0	0		
Trans Female (MTF or Male to Female)	0	0	0	0	0		
Trans Male (FTM or Female to Male)	0	0	0	0	0		
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0		
Client Doesn't Know/Client Refused	0	0	0	0	0		
Data not collected	0	0	0	0	0		
Subtotal	0	0	0	0	0		
10d - Gender by Age Ranges							
	Total	Under Age 18	Age 18-24	Age 25-61	Age 62 and over	Client Doesn't Know/Client Refused	Data not collected
Male	156	0	6	130	20	0	0
Female	65	0	5	55	5	0	0
Trans Female (MTF or Male to Female)	1	0	0	1	0	0	0
Trans Male (FTM or Female to Male)	0	0	0	0	0	0	0
Gender Non-Conforming (i.e. not exclusively male or female)	0	0	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0	0	0
Data not collected	0	0	0	0	0	0	0
Subtotal	222	0	11	186	25	0	0
11 - Age							
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type		
Under 5	0		0	0			
5 - 12	0		0	0			
13 - 17	0		0	0			
18 - 24	11	11	0				
25 - 34	41	41	0				
35 - 44	44	44	0				

45 - 54	58	58	0		0
55 - 61	43	43	0		0
62 +	25	25	0		0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	222	222	0	0	0

12a - Race

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
White	136	136	0	0	0
Black or African American	65	65	0	0	0
Asian	1	1	0	0	0
American Indian or Alaska Native	0	0	0	0	0
Native Hawaiian or Other Pacific Islander	1	1	0	0	0
Multiple races	11	11	0	0	0
Client Doesn't Know/Client Refused	8	8	0	0	0
Data not collected	0	0	0	0	0
Total	222	222	0	0	0

12b - Ethnicity

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Non-Hispanic/Non-Latino	213	213	0	0	0
Hispanic/Latino	6	6	0	0	0
Client Doesn't Know/Client Refused	1	1	0	0	0
Data not collected	2	2	0	0	0
Total	222	222	0	0	0

13a1 - Physical and Mental Health Conditions at Start

	Total Persons	Without Children	Adults in HH with Children and Adults	Children in HH with Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	22	22	0	0	0	0
Alcohol Abuse	0	0	0	0	0	0
Drug Abuse	1	1	0	0	0	0
Both Alcohol and Drug Abuse	2	2	0	0	0	0
Chronic Health Condition	8	8	0	0	0	0
HIV/AIDS	1	1	0	0	0	0
Development Disability	0	0	0	0	0	0
Physical Disability	18	18	0	0	0	0

13b1 - Physical and Mental Health Conditions of Leavers

	Total Persons	Without Children	Adults in HH with Children and Adults	Children in HH with Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	4	4	0	0	0	0
Alcohol Abuse	0	0	0	0	0	0
Drug Abuse	0	0	0	0	0	0
Both Alcohol and Drug Abuse	0	0	0	0	0	0
Chronic Health Condition	1	1	0	0	0	0
HIV/AIDS	0	0	0	0	0	0
Development Disability	0	0	0	0	0	0
Physical Disability	2	2	0	0	0	0

13c1 - Physical and Mental Health Conditions of Stayers

	Total Persons	Without Children	Adults in HH with Children and Adults	Children in HH with Children and Adults	With Only Children	Unknown Household Type
Mental Health Problem	18	18	0	0	0	0
Alcohol Abuse	0	0	0	0	0	0
Drug Abuse	1	1	0	0	0	0
Both Alcohol and Drug Abuse	2	2	0	0	0	0
Chronic Health Condition	7	7	0	0	0	0
HIV/AIDS	1	1	0	0	0	0
Development Disability	0	0	0	0	0	0
Physical Disability	16	16	0	0	0	0

14a - Domestic Violence History

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Yes	30	30	0	0	0
No	178	178	0	0	0
Client Doesn't Know/Client Refused	4	4	0	0	0
Data not collected	10	10	0	0	0
Total	222	222	0	0	0
14b - Persons Facing Domestic Violence					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Yes	4	4	0	0	0
No	12	12	0	0	0
Client Doesn't Know/Client Refused	1	1	0	0	0
Data not collected	13	13	0	0	0
Total	30	30	0	0	0
15 - Living Situation					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Homeless Situations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	9	9	0	0	0
Transitional housing for homeless persons (including homeless youth)	1	1	0	0	0
Place not meant for habitation	65	65	0	0	0
Safe Haven	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	75	75	0	0	0
Institutional Settings					
Psychiatric hospital or other psychiatric facility	5	5	0	0	0
Substance abuse treatment facility or detox center	4	4	0	0	0
Hospital or other residential non-psychiatric medical facility	5	5	0	0	0
Jail, prison, or juvenile detention facility	29	29	0	0	0
Foster care home or foster care group home	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Residential project or halfway house with no homeless criteria	1	1	0	0	0
Subtotal	44	44	0	0	0
Other Locations					
Permanent Housing (other than RRH) for formerly homeless persons	2	2	0	0	0
Owned by client, no ongoing housing subsidy	3	3	0	0	0
Owned by client, with ongoing housing subsidy	0	0	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Rental by client, no ongoing housing subsidy	9	9	0	0	0
Rental by client, with VASH housing subsidy	0	0	0	0	0
Rental by client, with GPD TIP housing subsidy	0	0	0	0	0
Rental by client, with other housing subsidy (including RRH)	1	1	0	0	0
Hotel or motel paid for without emergency shelter voucher	3	3	0	0	0
Staying or living in a friend's room, apartment or house	32	32	0	0	0
Staying or living in a family member's room, apartment or house	33	33	0	0	0
Client Doesn't Know/Client Refused	3	3	0	0	0
Data not collected	17	17	0	0	0
Subtotal	103	103	0	0	0
Total	222	222	0	0	0
16 - Cash Income - Ranges					
	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers		
No Income	116	0	12		
\$1 - 150	0	0	0		
\$151 - \$250	3	0	0		
\$251 - \$500	6	0	1		
\$501 - \$1000	32	0	4		

\$1001 - \$1500	21	0	2
\$1501 - \$2000	9	0	3
\$2001 +	1	0	0
Client Doesn't Know/Client Refused	1	0	0
Data not collected	33	0	6
Number of adult stayers not yet required to have an annual assessment		194	
Number of adult stayers without required annual assessment		0	
Total Adults	222	194	28

17 - Cash Income - Sources

	Income at Start	Income at Latest Annual Assessment for Stayers	Income at Exit for Leavers
Earned Income	34	0	4
Unemployment Insurance	1	0	0
Supplemental Security Income (SSI)	21	0	4
Social Security Disability Insurance (SSDI)	15	0	2
VA Service - Connected Disability Compensation	0	0	0
VA Non-Service Connected Disability Pension	1	0	0
Private Disability Insurance	0	0	0
Worker's Compensation	0	0	0
Temporary Assistance for Needy Families (TANF)	0	0	0
General Assistance (GA)	2	0	0
Retirement Income from Social Security	4	0	1
Pension or retirement income from a former job	1	0	0
Child Support	0	0	0
Alimony and other spousal support	0	0	0
Other Source	2	0	0
Adults with Income Information at Start and Annual Assessment/Exit		0	0

19b - Disabling Conditions and Income for Adults at Exit

	AO: Adult with Disabling Condition	AO: Adult without Disabling Condition	AO: Total Adults	AO: percent with Disabling Condition by Source	AC: Adult with Disabling Condition	AC: Adult without Disabling Condition	AC: Total Adults	AC: percent with Disabling Condition by Source	UK: Adult with Disabling Condition	UK: Adult without Disabling Condition	UK: Total Adults	UK: percent with Disabling Condition by Source
Earned Income	2	2	4	50%	0	0	0	0%	0	0	0	0%
Supplemental Security Income (SSI)	2	1	3	67%	0	0	0	0%	0	0	0	0%
Social Security Disability Insurance (SSDI)	2	0	2	100%	0	0	0	0%	0	0	0	0%
VA Service - Connected Disability Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%
Private Disability Insurance	0	0	0	0%	0	0	0	0%	0	0	0	0%
Worker's Compensation	0	0	0	0%	0	0	0	0%	0	0	0	0%
Temporary Assistance for Needy Families (TANF)	0	0	0	0%	0	0	0	0%	0	0	0	0%
Retirement Income from Social Security	0	1	1	0%	0	0	0	0%	0	0	0	0%
Pension or retirement income from a former job	0	0	0	0%	0	0	0	0%	0	0	0	0%
Child Support	0	0	0	0%	0	0	0	0%	0	0	0	0%
Other Source	0	0	0	0%	0	0	0	0%	0	0	0	0%
No Sources	1	8	9	11%	0	0	0	0%	0	0	0	0%
Unduplicated Total Adults	6	12	18		0	0	0		0	0	0	

20a - Type of Non-Cash Benefit Source					
	Benefit at Start	Benefit at Latest Annual Assessment for Stayers	Benefit at Exit for Leavers		
Supplemental Nutrition Assistance Program (SNAP) (Previously known as Food Stamps)	58	0	10		
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	3	0	2		
TANF Child Care Services	3	0	2		
TANF Transportation Services	3	0	2		
Other TANF-Funded Services	2	0	2		
Other Source	3	0	2		
21 - Health Insurance					
	At Start	At Annual Assessment for Stayers	At Exit for Leavers		
MEDICAID	32	0	4		
MEDICARE	15	0	3		
State Children's Health Insurance Program	1	0	0		
Veteran's Administration (VA) Medical Services	7	0	1		
Employer-Provided Health Insurance	1	0	0		
Health Insurance obtained through COBRA	1	0	0		
Private Pay Health Insurance	2	0	0		
State Health Insurance for Adults	2	0	0		
Indian Health Services Program	2	0	0		
Other	4	0	1		
No Health Insurance	169	0	21		
Client doesn't know/Client refused	3	0	0		
Data not collected	10	0	0		
Number of stayers not yet required to have an annual assessment		194			
1 Source of Health Insurance	33	0	5		
More than 1 Source of Health Insurance	13	0	2		
22a2 - Length of Participation - ESG Projects					
	Total	Leavers	Stayers		
0-7 days	0	0	0		
8 to 14 days	5	5	0		
15 to 21 days	11	11	0		
22 to 30 days	206	12	194		
31 to 60 days	0	0	0		
61 to 90 days	0	0	0		
91 to 180 days	0	0	0		
181 to 365 days	0	0	0		
366 to 730 Days (1-2 Yrs)	0	0	0		
731 to 1,095 Days (2-3 Yrs)	0	0	0		
1,096 to 1,460 Days (3-4 Yrs)	0	0	0		
1,461 to 1,825 Days (4-5 Yrs)	0	0	0		
More than 1,825 Days (> 5 Yrs)	0	0	0		
Data not collected	0	0	0		
Total	222	28	194		
22c - Length of Time between Project Start Date and Housing Move-In Date					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
Total (persons moved into housing)	0	0	0	0	0
Average length of time to housing	0	0	0	0	0
Persons who were exited without move-in	0	0	0	0	0
Total	0	0	0	0	0

22d - Length of Participation by Household Type

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	5	5	0	0	0
15 to 21 days	11	11	0	0	0
22 to 30 days	206	206	0	0	0
31 to 60 days	0	0	0	0	0
61 to 90 days	0	0	0	0	0
91 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
731 to 1,095 Days (2-3 Yrs)	0	0	0	0	0
1,096 to 1,460 Days (3-4 Yrs)	0	0	0	0	0
1,461 to 1,825 Days (4-5 Yrs)	0	0	0	0	0
More than 1,825 Days (> 5 Yrs)	0	0	0	0	0
Data not collected	0	0	0	0	0
Total	222	222	0	0	0

22e - Length of Time Prior to Housing - based on 3,917 Date Homelessness Started

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
7 days or less	0	0	0	0	0
8 to 14 days	0	0	0	0	0
15 to 21 days	0	0	0	0	0
22 to 30 days	0	0	0	0	0
31 to 60 days	0	0	0	0	0
61 to 180 days	0	0	0	0	0
181 to 365 days	0	0	0	0	0
366 to 730 Days (1-2 Yrs)	0	0	0	0	0
731 days or more	0	0	0	0	0
Total (persons moved into housing)	0	0	0	0	0
Not yet moved into housing	0	0	0	0	0
Data not collected	0	0	0	0	0
Total Persons	0	0	0	0	0

23c - Exit Destination - All persons

	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Permanent Destinations					
Moved from one HOPWA funded project to HOPWA PH	0	0	0	0	0
Owned by client, no ongoing subsidy	1	1	0	0	0
Owned by client, with ongoing subsidy	0	0	0	0	0
Rental by client, no ongoing subsidy	18	18	0	0	0
Rental by client, with VASH subsidy	0	0	0	0	0
Rental by client with GPD TIP subsidy	0	0	0	0	0
Rental by client, other ongoing subsidy	0	0	0	0	0
Permanent Housing (other than RRH) for formerly homeless persons	1	1	0	0	0
Staying or living with family, permanent tenure	3	3	0	0	0
Staying or living with friends, permanent tenure	1	1	0	0	0
Rental by client, with RRH or equivalent subsidy	0	0	0	0	0
Rental by client, with HCV voucher (tenant or project based)	0	0	0	0	0
Rental by client in a public housing unit	0	0	0	0	0
Subtotal	24	24	0	0	0
Temporary Destinations					
Emergency shelter, including hotel or motel paid for with emergency shelter voucher	0	0	0	0	0
Moved from one HOPWA funded project to HOPWA TH	0	0	0	0	0
Transitional housing for homeless persons (including homeless youth)	1	1	0	0	0
Staying or living with family, temporary tenure (e.g., room, apartment or house)	0	0	0	0	0
Staying or living with friends, temporary tenure (e.g., room apartment or house)	0	0	0	0	0
Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside)	3	3	0	0	0
Safe Haven	0	0	0	0	0

Hotel or motel paid for without emergency shelter voucher	0	0	0	0	0
Host Home (non-crisis)	0	0	0	0	0
Subtotal	4	4	0	0	0
Institutional Settings					
Foster care home or foster care group home	0	0	0	0	0
Psychiatric hospital or other psychiatric facility	0	0	0	0	0
Substance abuse treatment facility or detox center	0	0	0	0	0
Hospital or other residential non-psychiatric medical facility	0	0	0	0	0
Jail, prison, or juvenile detention facility	0	0	0	0	0
Long-term care facility or nursing home	0	0	0	0	0
Subtotal	0	0	0	0	0
Other Destinations					
Residential project or halfway house with no homeless criteria	0	0	0	0	0
Deceased	0	0	0	0	0
Other	0	0	0	0	0
Client Doesn't Know/Client Refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Subtotal	0	0	0	0	0
Total	28	28	0	0	0
Total persons exiting to positive housing destinations	0	0	0	0	0
Total persons whose destinations excluded them from the calculation	0	0	0	0	0
Percentage	0%	0%	0%	0%	0%
24 - Homeless Prevention Housing Assessment at Exit					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Able to maintain the housing they had at project start--Without a subsidy	0	0	0	0	0
Able to maintain the housing they had at project start--With the subsidy they had at project entry	0	0	0	0	0
Able to maintain the housing they had at project start--With an on-going subsidy acquired since project entry	0	0	0	0	0
Able to maintain the housing they had at project start--Only with financial assistance other than a subsidy	0	0	0	0	0
Moved to new housing unit--With on-going subsidy	0	0	0	0	0
Moved to new housing unit--Without an on-going subsidy	0	0	0	0	0
Moved in with family/friends on a temporary basis	0	0	0	0	0
Moved in with family/friends on a permanent basis	0	0	0	0	0
Moved to a transitional or temporary housing facility or program	0	0	0	0	0
Client became homeless - moving to a shelter or other place unfit for human habitation	0	0	0	0	0
Client went to jail/prison	0	0	0	0	0
Client died	0	0	0	0	0
Client doesn't know/Client refused	0	0	0	0	0
Data Not Collected (no exit interview completed)	0	0	0	0	0
Total	0	0	0	0	0
25a - Number of Veterans					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless Veteran	5	5	0	0	0
Non-Chronically Homeless Veteran	12	12	0	0	0
Not a veteran	203	203	0	0	0
Client doesn't know/Client refused	1	1	0	0	0
Data not collected	1	1	0	0	0
Total	222	222	0	0	0
26b - Number of Chronically Homeless Persons by Household					
	Total	Without Children	With Children and Adults	With Only Children	Unknown Household Type
Chronically Homeless	29	29	0	0	0
Not Chronically Homeless	190	190	0	0	0
Client Doesn't Know/Client Refused	3	3	0	0	0
Data not collected	0	0	0	0	0
Total	222	222	0	0	0

**EXHIBIT 4B
PROGRAM REPORTS
TRANSITIONAL CAMPGROUND OPERATIONS STATUS REPORT**

EXHIBIT 4B: Transitional Campground Status Report _____ 2019
Exits to rental housing, no subsidy
Exits to rental housing, RRH
Exits to rental housing, PSH or equivalent
Moved in with friends/family
TOTAL POSITIVE (HOUSING) EXITS
Total # of individuals remaining on roster
Total # of individuals remaining in campground

EXHIBIT 5

PERSONAL BELONGINGS

STORAGE/DISPOSITION OF PERSONAL BELONGINGS REMOVED FROM CITY PROPERTY

Pursuant to its written Guidelines, the City Parks Department removes unattended personal belongings from certain City properties, inventories the belongings, places an identification number on the belongings, and will transport the belongings to the Facility and turn over custody of the belongings, along with the written inventory, to the Provider. The City will transport and set up storage bins at the Facility for use by the Provider. The Provider shall then be responsible for the following:

- The belongings shall be stored in the storage bins or other secure location for 90 days from the date delivered to the Provider.
- The belongings will be released to the rightful owner upon request and establishment of ownership rights. The owner may establish his/her ownership rights by describing the belongings he/she seeks to recover with particularity, as well the location from which it was removed, or by providing any other proof of ownership. For items that are identified on the inventory as being in the custody of the Gainesville Police Department (GPD), ACCHH staff shall provide the contact information for the custodian at GPD.
- After the 90 day period has expired, ACCHH staff may dispose of the belongings by one of the following methods: 1) retain the property for use at the Facility, 2) donate the property to a charitable organization, 3) sell the property and use the sale proceeds for providing services at the Facility, or 4) throw away the property if it cannot be put to beneficial re-use.
- ACCHH staff will record the method and date of the final disposition of the item on the inventory record, including name of the staff member who released the item to the owner or disposed of the item, the date the item was released or disposed of, the recipient's name and contact information if applicable.

Except for matters arising from the Provider's failure to follow the above requirements, the City shall indemnify and save harmless the Provider, its officers, employees, and volunteers from and against any and all liability, claims, demands, fines, fees, expenses, penalties, suits, proceedings, actions and costs of action, including attorney's fees for trial and on appeal, of any kind and nature arising from the City's collection, inventory and transporting of the personal belongings or from the Provider's storage and disposition of the personal belongings.

EXHIBIT 6

LICENSE AGREEMENT

THIS LICENSE AGREEMENT ("Agreement" or "License") is made by and between the **City of Gainesville**, a municipal corporation of the State of Florida ("City"), and the **Alachua County Coalition for the Homeless and Hungry, Inc., a Florida not-for-profit corporation** ("Licensee").

WITNESSETH:

WHEREAS, the City on December 21, 2017, issued an Invitation to Negotiate (ITN #CMGR 180047GD) to provide services at the City's facility and on February 15, 2018, the City Commission authorized City staff to negotiate a contract with the Provider, and thereby the City and the Provider entered into a services agreement for the term from April 1, 2018, through December 31, 2018. The City Commission on August 2, 2018, approved the extension of the Services Agreement for a term from January 1, 2019, through December 31, 2019. The City Commission on May 6, 2019, approved the extension of the Services Agreement for a term from October 1, 2019 through September 30, 2024; and

WHEREAS, the City and the Licensee, in conjunction with the Services Agreement, hereby enter into this Agreement where the City grants to the Licensee a license to use a certain portion of the Facility for the duration of the term of the Services Agreement; and

WHEREAS, the City finds that the benefits and obligations expressed in the Services Agreement and the use of a portion of the Facility as described in this Agreement will provide a substantial benefit to the public and serve a public purpose; and

WHEREAS, the City is willing and able to make a portion of the Facility available as described in this Agreement and the Licensee is willing to accept use of the property described herein, subject to the terms and conditions of this Agreement.

NOW, THEREFORE, in consideration of the foregoing recitals which comprise a material part of this Agreement, and the mutual covenants, promises, conditions, and representations set forth herein, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows:

1. **Term; Entire Agreement.** This Agreement will become effective on October 1, 2019 (the "Effective Date"), and will expire on September 30, 2024, unless sooner terminated or extended. Upon request of the Licensee, the City may in its sole discretion extend this Agreement. Notwithstanding the foregoing, this Agreement may be terminated by the City at any time, with cause, upon Notice to the Licensee. The City may terminate the Agreement, without cause, upon 30 calendar days prior notice to the Licensee. This Agreement, together with the Services Agreement executed by the Parties, constitutes the entire agreement between the City and Licensee with respect to the use of the Premises. This Agreement and the Services Agreement are made a part of and contingent upon the other.

To that end, if a Party is in default under this Agreement, it is likewise in default under the Services Agreement and if this Agreement is terminated, the Services Agreement is also terminated, and vice versa.

This Agreement shall be recorded in the Public Records of Alachua County, Florida by the Licensee, at its sole expense, within 10 calendar days of execution of same.

2. **Grant of License and Sole Use.** The City hereby grants to the Licensee and the Licensee hereby accepts from the City a license to use the certain portion of the Facility as identified on **Attachment A** ("Premises") for the sole purpose of providing homeless services as identified in the Services Agreement between the Parties (the "Uses"). In addition, the Licensee and its employees, patrons, and invitees may park in the improved parking spaces and may use the sidewalks located in the Facility to access the Premises. The City retains the right, at any time, upon Notice to the Licensee, to assign or otherwise restrict the parking available for use by the Licensee, its employees, patrons, and invitees.
3. **Condition of Premises; Maintenance and Repair of the Premises.** This License is being granted AS-IS, meaning the Licensee accepts the Premises in its current condition and fully understands that the City is making no obligation to maintain or improve the Premises, beyond that specified in this Agreement, and nothing herein should be deemed or interpreted as such an obligation.
 - A. **Licensee Responsibilities for Maintenance and Repair of the Premises.** Licensee shall be responsible for maintaining the heating, ventilating, and air conditioning unit, windows, interior walls, mechanical, electrical, plumbing, fixtures, light fixtures, floor, and floor coverings in the condition as existed on the Effective Date, excepting normal wear and tear. Licensee shall not be responsible for replacement of the heating, ventilating, and air-conditioning unit, unless caused by Licensee's failure to maintain. Licensee shall also be responsible for all repairs, replacement, and maintenance in connection with damage or loss to the Premises, fixtures, and improvements resulting from acts, omissions, or negligence of the Licensee, or the Licensee's employees, agents, licensees, patrons, guests, or invitees. In addition, Licensee shall repair all damage caused by the installation or removal of furniture, fixtures, or property permitted under this License to be installed or removed from the Premises by Licensee. All such repairs shall be made in a good, workmanlike manner. Licensee shall maintain the Premises in a clean, sanitary, and safe condition by providing routine janitorial, pest prevention, and trash removal services. The Licensee shall at all times keep the Premises in a safe, clean, orderly, and presentable condition. Licensee agrees, if notified by the City that any part of the Premises has been altered or is being maintained in an unsatisfactory condition, to remedy the condition at once at the Licensee's expense. Licensee shall promptly report to the City any damage, necessary repairs, or maintenance that are the responsibility of the City as set forth below.
 - B. **City Responsibilities for Maintenance and Repair of the Premises.** City shall be responsible for the maintenance and repair of the roof, exterior surfaces of the Premises, structural portions of the Premises, and the replacement, should it become necessary, of the heating, ventilating, and air conditioning unit.

All repairs not addressed in this Agreement and not caused by the acts, omissions, or negligence of the Licensee or its employees, agents, licensees, patrons, guests, or invitees, shall be the responsibility of City.

4. **Common Areas.** All areas outside of the exterior of buildings on the Facility and all areas used by Licensee in common with other users of in the Facility (collectively the "Common Areas") shall be maintained by the City. So long as the on-site Campground is operational, the City will coordinate with ACCHH with regard to the timing and provision of maintenance of the areas encompassed by the on-site Campground.

Common Areas include, but are not limited to, all parking areas, walkways, surrounding undeveloped or landscaped land, storm water drainage systems, access ways, and any commonly used amenities. Licensee shall pay to City a common area maintenance charge (the "CAM Charge") for the maintenance performed by the City as follows:

- A. Within 30 calendar days after the Effective Date and thereafter prior to October 1 of each year during the term of this Agreement, City shall prepare a budget for CAM Charges for the Facility. CAM charges shall include all of City's costs and expenses of operating and maintaining the Common Areas which shall be deemed to include, without limitation, landscaping and grounds maintenance, fencing repair, backflow preventer maintenance, back-up generator maintenance, resurfacing, painting, repairs (excluding structural repairs to the Premises), outdoor lighting and City's costs for administering the same.
 - B. Each month the City shall invoice the Licensee for its proportional share of CAM Charges to City based upon the budget, which shall be due and payable by the Licensee within 30 calendar days of receipt of the invoice. Licensee's proportional share shall be determined by multiplying the total of such costs by a fraction, the numerator of which shall be the gross square footage of the Premises and the denominator of which shall be the gross square footage of the Facility, as more fully described in the attached **Attachment B**.
 - C. On or before December 31 of each year during the term of this Agreement, the City shall furnish to Licensee a statement showing in reasonable detail the total amount of actual CAM costs for the preceding year and reconciling such actual costs with the Licensee's monthly payments for the year. If the costs are higher than the monthly payments already made, Licensee shall reimburse City such additional costs in a lump sum with the next regular monthly CAM payment. If the costs are lower than the monthly payments already made, Licensee shall be entitled to a setoff of such costs against the next regular monthly CAM payment (or as many payments as are necessary to absorb the setoff to which Licensee is entitled).
 - D. In the event the Licensee does not pay the CAM Charge when due, the Licensee shall be in default under this Agreement.
5. **Improvements by Licensee.** Except as otherwise agreed in writing, Licensee shall install, at its sole expense, all improvements (that are authorized by the City) necessary and required to conduct the Uses on the Premises, including without limitation any Americans with Disabilities Act or state law accessibility requirements or other federal, state, or local requirements. The Licensee shall not make any improvements to the Premises that are not authorized in writing by the City, as the owner of the Premises. Regulatory approvals granted by the City shall not constitute approval by the City as owner of the Premises.

The Licensee shall, at its sole expense, obtain all permits and approvals required by the City, and any other applicable regulatory agency, to locate and operate the Uses on the Premises.

6. **Construction Liens Prohibited.** Licensee shall promptly pay for all labor and materials used in constructing any improvements, alterations, or fixtures on the Premises and shall do all things necessary to prevent the filing of any mechanics, materialman, or other type of lien or claim against the City or the Premises by, against, through, or under Licensee or its contractors or subcontractors. Licensee shall notify its contractors that the Licensee's and City's interest shall not be subject to any liens or claims for alterations, improvements or fixtures to the Premises by Licensee. The City's interest shall not be subject to any liens or claims for alterations, improvements or fixtures to the Premises by Licensee. If any such lien or claim is filed, Licensee shall cause the same to be released within 90 calendar days of the filing of the lien. Nothing in this Section is intended to preclude or prevent the Licensee from applying for and receiving funding for the Uses it is providing on the Premises; however, prior approval of the City (which may be granted or denied in the sole discretion of the City) is required for any funding that requires a restriction or lien on the Premises or Facility as a condition of application or acceptance of the funding.
7. **No Contractual Zoning; No Contracting of Police Powers.** The parties recognize that the City is entering this Agreement in its proprietary capacity, as owner of the Premises, and not in its regulatory capacity, as the governmental entity that is vested with the authority to grant or deny permits and development approvals. The parties agree that nothing contained in this Agreement shall be interpreted or construed as an approval, waiver, or contract to approve or waive any development plan, development permit, rezoning, comprehensive plan amendment, or any other governmental requirement that the City may have jurisdiction over in its regulatory capacity. Nothing contained in this Agreement shall be interpreted or construed as contracting away the exercise of the regulatory or police powers of the City.
8. **Utilities.** The parties acknowledge that sub-meters have been installed to measure electricity provided to individual buildings within the Facility. Licensee shall pay in addition to and together with its CAM charges: 1) 100% of the electric utilities paid by the City for the buildings that comprise the Premises; and 2) the proportion of the water, wastewater, and gas utilities paid by the City for the Facility as allocated in accordance with Section 4.B. of this Agreement. All other services to the Premises, such as cable or internet, shall be arranged for and paid by the Licensee.
9. **Rules and Regulations.** Any rules and regulations included within or appended to this Agreement at a later date by the City are hereby made a part of this Agreement, and Licensee agrees to comply with and observe the same. Licensee's failure to keep and observe said rules and regulations shall constitute a breach of the terms of this Agreement in the manner as if the same were contained herein as covenants.
10. **Vacating Premises.** Upon vacating the Premises, Licensee must remove its furniture, movable equipment, and other personal property not attached to the Premises. Anything not removed on or before the date the Licensee vacates the Premises will become the property of the City. Upon vacating the Premises, Licensee agrees to deliver to City all keys to the Premises and to surrender the Premises immediately and in good order and condition, excepting reasonable wear and tear.

11. **Compliance with Laws and Indemnity.** Licensee agrees to use the Premises and any portion thereof in compliance with all federal, state, and municipal laws, ordinances, rules or regulations, now in effect or hereafter enacted or adopted (the "Laws") and the Licensee agrees not to use, nor suffer or permit any person to use in any manner whatsoever, the Premises or any part thereof for any illegal purpose, or for any purpose in violation of any Laws. Licensee will protect, indemnify and forever save and keep harmless the City, its employees, officers, and agents, from and against any damage, penalty, fine, judgment, expense or charge suffered, imposed, assessed or incurred for any violation or breach of law, ordinance, rule or regulation occasioned by any act, neglect or omission of the Licensee, or any employee or agent of Licensee.

12. **Insurance.** Licensee shall, during the term of this License, maintain comprehensive public liability insurance, including personal injury and property damage, issued by a reputable insurance company licensed to do business in the State of Florida with limits of not less than \$1,000,000 combined single limit protecting City and Licensee against liability for any accident, injury, or damage on the Premises. Should City determine that Licensee's operations present a risk of loss greater or of a different type than anticipated, Licensee may be required to maintain greater insurance coverage different in scope of loss covered and/or amount of coverage. Prior to the Effective Date of this Agreement, Licensee shall furnish to City appropriate certificates of said insurance, and each insurance policy shall contain an agreement that the policy shall not be canceled or materially changed except after 60 calendar days prior written notice of such cancellation or material change to the City. All required insurance products will name the City as an additional insured. Notices of Accidents (occurrences) and Notices of Claims associated with this Agreement shall be provided to the City's Risk Manager as soon as practicable after notice to the insured.

All personal property of any kind or description whatsoever in or on the Premises, whether owned by Licensee or others, shall be at the Licensee's sole risk and City shall not be liable for any damage done to or loss of such personal property, unless said damage or loss is caused by the City's intentional acts or omissions. Licensee shall secure such insurance as it deems necessary or desirable to cover loss or damage to Licensee's property.

13. **Release of City.** City is hereby released from any damage or injury to person or property caused by or resulting from acts of god or force majeure, including but not limited to, steam, electricity, gas, water, rain, wind, ice, snow, or any leak or flow from or into any part of the Premises. In addition, City shall not be liable for any damage, compensation or claim by reason of inconvenience or annoyance arising from the necessity of repairing any portion of the Premises, the interruption of the use of the Premises, or the termination of this License by reason of any damage or destruction of the Premises.

14. **Right to Terminate.** In the event the Premises cannot be accessed or occupied due to destruction or damage caused by casualty and the destruction or damage cannot be remedied by the Licensee within a reasonable length of time, as City and Licensee shall mutually determine, either party shall have the right to terminate this License.

15. **Taxes.** The Licensee agrees to pay any and all taxes, including without limitation ad valorem property taxes and personal property taxes, assessed by virtue of the use and improvements on the Premises.

As to taxes that are assessed during the term of the License, but are due and payable after its expiration or termination, this provision shall survive such termination or expiration.

16. **Public Liability and Indemnification.** The Licensee assumes all risks in the uses and improvements on the Premises, pursuant to this Agreement, and shall be solely responsible and answerable in damages for all accidents or injuries to person or property occurring on the Premises and hereby covenants and agrees to indemnify and hold harmless the City and its officers and employees from any and all liability, claims, suits, losses, demands, fines, fees, penalties, proceedings, actions and causes of action, including reasonable attorney's fees for trial and on appeal, of any kind and nature arising out of or any way connected with damage or injury to person or property of whatsoever kind and nature, whether direct or indirect. This indemnification shall not be limited to the insurance coverage herein provided. This indemnification shall survive the expiration or termination of this Agreement.
17. **Assignment.** The Licensee is not permitted to assign, transfer, convey or otherwise dispose of this license to any other person, legal entity or corporation without the previous written consent of the City, which may be withheld in the sole discretion of the City. If the Licensee shall, without the previous written consent specified in this section, assign, transfer, convey or otherwise attempt to dispose of same, the City reserves the right to declare this Agreement terminated without previous notice to the Licensee or its attempted assignee.
18. **Hazardous Materials and Indemnification.** Without limiting Licensee's obligations under any other provision of this License, Licensee and its successors and assigns shall hereby indemnify, defend, protect, and hold City, its officers, employees, elected officials, agents, lenders, consultants, independent contractors, and any successors to City's interest ("Indemnified Parties") harmless from and against, and shall reimburse the Indemnified Parties for any and all losses, claims, liabilities, damages, costs, expenses, causes of action, judgments, damages, enforcement actions, taxes, remedial actions, the diminution in the value of the Premises, or any portion thereof, and injuries to persons, property or natural resources, arising out of Licensee's breach of any provision (or representation, warranty, or covenant) contained in this Section arising from, out of, in connection with, or as a consequence, directly or indirectly, of the Release or presence of any Hazardous Substances on, in, or beneath the Premises or that may have migrated from the Premises to any adjacent lands, air or water, which first occurs during the Term of this License, as the same may be extended by law or agreement of the parties, whether foreseeable or unforeseeable, and whether or not known to Licensee, it being understood and agreed that the foregoing indemnity includes, but is not limited to, all costs of removal, remediation of any kind, detoxification, clean up and disposal of such Hazardous Substances and the preparation of any closure or other required plans, all costs of determining whether the Premises is in compliance and causing the Premises to be in compliance with all applicable Environmental Laws, all costs and fees associated with claims for damages to persons, property, or natural resources, and City's reasonable attorney's fees and consultant's fees and court costs in respect thereto, whether or not litigation or administrative proceedings shall occur, including all costs and expenses incurred or suffered by City by reason of any violation of any applicable Environmental Law which first occurs, or has first occurred, upon the Premises during the Term of this License, as the same may be extended by law or agreement of the parties, or by reason of the imposition of fines or penalties, or any governmental lien for the recovery of environmental clean-up costs,

expended by reason of such violation, it being expressly understood and agreed that to the extent the Indemnified Parties or any of them are strictly liable under any Environmental Laws, this indemnity shall apply without regard to the strict liability with respect to the violation of law which results in such liability. Licensee shall comply with all Environmental Laws throughout the Term of this License, as the same may be extended by law or agreement of the parties. Licensee hereby covenants and agrees that all obligations of Licensee under this Section shall survive any termination of the License, it being further understood and agreed that the rights of City under this Section shall be in addition to any other rights and remedies under this License, or otherwise available to City at law or in equity.

Definitions. The term "Environmental Laws" shall mean and include any and all federal, state or local laws (whether under common law, statute, rule, regulation, ordinance or otherwise), requirements under permits or other authorizations issued with respect thereto, and other orders, decrees, judgments, directives or other requirements of any governmental authority relating to or imposing liability or standards of conduct (including disclosure or notification) concerning the protection of human health or the environment, Hazardous Substances or any activity involving Hazardous Substances, including without limitation: the Comprehensive Environmental Response, Compensation and Liability Act of 1980, 42 U.S.C. Sections 9601 et seq. ("CERCLA"), as amended; the Resource Conservation and Recovery Act of 1976, 42 U.S.C. Sections 6921 et seq.; the Occupational Safety and Health Act of 1970, 29 U.S.C. Sections 651 et seq. ("OSHA"); the Toxic Substances Control Act, 15 U.S.C. Sections 2601 et seq.; the Federal Insecticide, Fungicide and Rodenticide Act, 7 U.S.C. Section 136; the Federal Water Pollution Control Act, 33 U.S.C. Sections 1251 et seq.; the Hazardous Materials Transportation Act, 49 U.S.C. Sections 1801 et seq.; the Federal Solid Waste Disposal Act, 42 U.S.C. Sections 6901 et seq.; the Clean Air Act, 42 U.S.C. Sections 7401 et seq.; the Emergency Planning and Community Right-to-Know Act, 42 U.S.C. Sections 11001 et seq.; Chapters 376 and 403, Florida Statutes; Chapter 62, Florida Administrative Code; and any regulation implementing the above.

The term "Hazardous Substances" shall have the meaning ascribed to it in CERCLA; provided, however, that the definition of the term "Hazardous Substances" shall also include (if not included within the definition contained in CERCLA) any hazardous or toxic chemical, waste, byproduct, pollutant, contaminant, compound, product or substance, including without limitation, asbestos, polychlorinated biphenyls, petroleum (including crude oil or any fraction or byproduct thereof), hydrocarbons, radon, urea, urea formaldehyde, and any material the exposure to, or manufacture, possession, presence, use, generation, storage, transportation, treatment, release, disposal, abatement, cleanup, removal, remediation or handling of which is prohibited, controlled, limited or regulated in any manner under any Environmental Laws.

The term "Release" shall have the meaning ascribed to it in CERCLA and shall also include (if not included within the definition contained in CERCLA) any spill, leak, emission, discharge or disposal of Hazardous Substances into the environment.

The term "Notice" shall mean any summons, citation, directive, order, claim, litigation, investigation, proceeding, judgment, letter or other communication, written or oral, actual or threatened, from the Florida Department of Environmental Protection ("FDEP"), the United States Environmental Protection Agency ("USEPA"), the United States Occupational Safety and Health Administration ("OSHA") or other federal, state or local agency or

authority, or any other entity or any individual, concerning any act or omission resulting or which may result in the Release of Hazardous Substances into the waters or onto the lands of the State of Florida, or into waters outside the jurisdiction of the State of Florida, or into the environment.

19. **Sovereign Immunity.** The Licensee and the City agree that nothing in this Agreement is intended to be or shall be interpreted as a waiver of the City's sovereign immunity under Section 768.28, Florida Statutes.
20. **Default.** Failure to perform under this Agreement shall place the non-performing party in default. Upon written notice by the non-defaulting party, the party in default shall have 10 calendar days (or such other timeframe as the parties then agree) to correct the default. If the default is not timely corrected, this Agreement may be terminated at the option of the non-defaulting party.
21. **Applicable Law and Venue.** This Agreement shall be governed by and construed in accordance with the laws of the State of Florida. Any action, in equity or law, with respect to this Agreement must be brought and heard in Alachua County, Florida.
22. **Amendment.** This Agreement may not be amended, unless evidenced in writing executed by all parties.
23. **Notice.** Any notice required under the terms of this Agreement must be in writing and must be sent by certified mail to the address of the party to whom the notice is to be given ("Notice"). Addresses of the parties are as follows:

As to the City:

Fred Murry, Assistant City Manager
City of Gainesville
Post Office Box 490, Mail Station 6
Gainesville, Florida 32627-0490
Phone: (352) 334-5010

As to the Licensee:

Jon DeCarmine, Executive Director
ACCHH
3055 NE 28th Drive
Gainesville, Florida 32609
Phone: (352) 792-0800

IN WITNESS WHEREOF, the parties hereto have executed this Agreement:

WITNESS:

[Signature]

CITY

[Signature]

Lee Feldman, City Manager

Print Name: Zanorfa Lynch

WITNESS:

[Signature]

APPROVED AS TO FORM AND LEGALITY

By:

[Signature] 11/26/19

Sean M. McDermott, Sr. Asst. City Attorney
City of Gainesville, Florida

Print Name: Dona Kurzman

STATE OF FLORIDA/COUNTY OF ALACHUA

The foregoing instrument was acknowledged before me this 26 day of November, 2019, by Lee Feldman, as the City Manager of the City of Gainesville, a municipal corporation, and who has acknowledged that he has executed the same on behalf of the City, and that he was authorized to do so. He is personally known to me or has produced _____ as identification.

[Signature]
Notary Public, State of Florida



WITNESS:

[Signature]

LICENSEE:

[Signature] 11/25/19

Jon DeCarmine, Director

Print Name: Terrian Florence

WITNESS:

[Signature]

Print Name: Jeff Grover

STATE OF FLORIDA/COUNTY OF ALACHUA

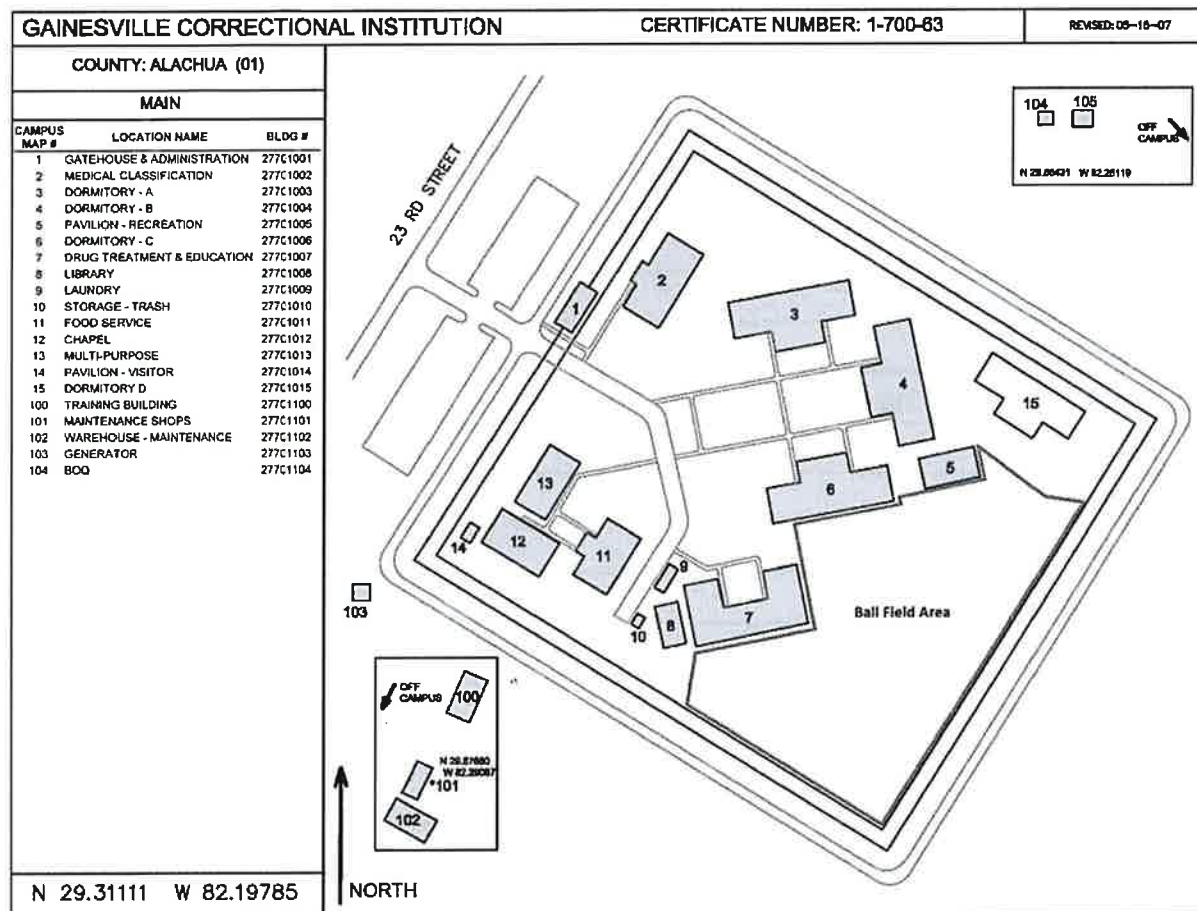
The foregoing instrument was acknowledged before me this 25 day of November, 2019, by Jon DeCarmine, as the Executive Director of the Alachua County Coalition for the Homeless and Hungry, Inc., and who has acknowledged that he has executed the same on behalf of the ACCHH, and that he was authorized to do so. He is personally known to me or has produced _____ as identification.

[Signature]
Notary Public, State of Florida



MICHELE GUTIERREZ
Commission # GG 245783
Expires August 6, 2022
Bonded Thru Budget Notary Services

ATTACHMENT A



The Premises

The "Premises" for purposes of this License Agreement includes the following buildings (as identified in the sketch above):

- Building 1: Gatehouse & Administration
- Building 5: Pavilion and the baseball diamond area.
- Building 6: Dormitory C
- Building 7: Drug Treatment & Education
- Building 8: Library
- Building 9: Laundry
- Building 10: Storage & Trash
- Building 11: Food Service
- Building 12: Chapel
- Building 13: Visitor/Multipurpose Center
- Building 15: Dormitory D

ATTACHMENT B

Building	Square Feet	% of Total Area
Gatehouse and Administration	2485	3%
Medical Classification	5600	7%
Dormitory - A	9618	12%
Dormitory - B	9618	12%
Pavilion - Recreation	3040	4%
Dormitory - C	9618	12%
Drug Treatment and Education	10050	12%
Library	1605	2%
Laundry	780	1%
Storage - Trash	360	0%
Food Service	6961	9%
Chapel	3987	5%
Multi-Purpose	3750	5%
Pavilion - Visitor	3200	4%
Dormitory - D	9743	12%
Total Square Footage	80415	100%