



Interoffice Memorandum

April 25, 2019

AGENDA ITEM

TO: Mayor Jerry L. Demings
-AND-
Board of County Commissioners

THRU: Lonnie C. Bell, Jr., Director
Community and Family Services Department

FROM: Lavon B. Williams, Esq., AICP, Manager
Community Action Division

Y Brown for Lonnie

**CONTACT: Atalie Ashley West, Family Services Administrator
Community Action Division
(407) 836-7489**

**SUBJECT: Consent Agenda Item – May 7, 2019
Grant Award Agreement – Florida Office of the Attorney General**

The Community and Family Services Department, through its Community Action Division, operates the Family Self Sufficiency Program that provides funds to assist low-income individuals with employment training, certification, and post-secondary education. The Florida Office of the Attorney General has reached a settlement agreement with Western Union Bank that requires the distribution of funds to Community Action Agencies to implement financial planning programs. The Community Action Division will be awarded \$44,541 which will be used to provide employment and financial literacy services directly to 24 families as part of the Getting Ahead/Staying Ahead program.

ACTION REQUESTED: Approval and execution of Grant Award Agreement between Office of the Attorney General and Orange County Board of County Commissioners in the amount of \$44,541. Matching funds are not required. (All Districts)

LBW/ydl:jam

Attachment

c: Randy Singh, Deputy County Administrator
Cristina Berrios, County Attorney's Office
Yolanda Brown, Fiscal Manager, Community and Family Services

BCC Mtg. Date: May 7, 2019

Grant Award Agreement

March 2019

Grantor: Office of the Attorney General

Grantee: Orange County Board of County Commissioners

Contact: Lavon Williams, Esq./Division Manager

Employer ID # 59-630773

Grant award amount: \$44,541.00

Area to be served by this grant award is described in Attachment A.

Details of services and activities to be provided by this grant award are described in Attachment A.

You acknowledge that a Grant of \$44,541.00 was approved for the purposes described in your grant proposal.

It is important to remember that the grant award cannot be used for any other purpose, including your office space purchases or rentals, your building renovations, your consultants, and your professional organization dues or severance payments. If, for any reason, you feel you will be unable to fulfill any part of your grant proposal or comply with this Grant Award Agreement, you must notify the Office of the Attorney General in writing.

Any grant award funds not used for the purposes of your grant proposal will be returned to Office of the Attorney General. The Office of the Attorney General may audit your records pertaining to the grant award. If the Office of the Attorney General determines you are not meeting the grant's goals, it may demand the return of some or all of the grant award.

If your organization changes its legal status while it is using the grant award, you will immediately submit written notification to the Office of the Attorney General.

It is understood that the grant award will be used within a 24-month period following the receipt of funds, unless a longer period of time is specified in this Agreement. You will also submit annual progress reports to the Office of the Attorney General one year from the date of receipt of funds (and annually thereafter if the grant award is for a period in excess of one year). For example: First Annual Report – January 1, 2019; Second Annual Report – January 1, 2020.

ACCEPTED AND AGREED:

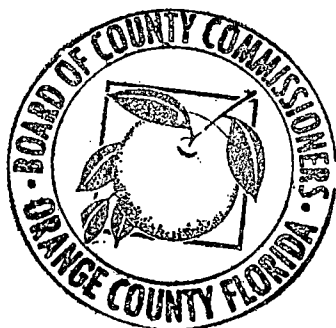
By: Byron W. Brooks

Print Name: Byron W. Brooks

Title: County Administrator

Date: 7 May 2019

Return to:
Tallahassee, FL 32399-1050
Laura K. Daugherty
Economist Supervisor
Office of the Attorney General
Antitrust Division
PL-01, The Capitol
Tallahassee, FL 32399-1050



AGENCY CONTACT INFORMATION

Name of Agency: Enter the name as it should appear on a contract.

Orange County Board of County Commissioners

Federal Employee Identification Number (FEIN): 59630773

Agency Director:

Prefix (Mr., Ms., Dr., etc.) Ms. Title: Division Manager

Name: Lavon Williams, Esq.

Telephone #: 407-836-5614

Fax #: 407-836-7690

Mailing Address: 2100 East Michigan Street
(Street, P.O. Box, etc.)

City: Orlando

State: FL

9-Digit Zip Code: 32806-4914

E-Mail Address: Lavon.Williams@ocfl.net

Performance Report Contact:

Prefix (Mr., Ms., Dr., etc.) Dr. Title: Family Services Administrator

Name: Atalie Ashley-West

Telephone #: 407-836-7489

Fax #: 407-836-7690

Mailing Address: 2100 East Michigan Street
(Street, P.O. Box, etc.)

City: Orlando

State: FL

9-Digit Zip Code: 32806-4914

E-Mail Address: Atalie.AshleyWest@ocfl.net

Financial Contact:

Prefix (Mr., Ms., Dr., etc.) Ms. Title: Project Coordinator

Name: Rachel McCoy

Telephone #: 407-836-9323

Fax #: 407-836-7455

Mailing Address: 2100 East Michigan Street
(Street, P.O. Box, etc.)

City: Orlando State: FL 9-Digit Zip Code: 32806-4914

E-Mail Address: Rachel.McCoy@ocfl.net

Signature of Agency Director: *Steven B Williams* Date: 3/14/19

Agency Name: Orange County Board of County Commissioners

PART 1: AGENCY INFORMATION

List counties to be served: (indicate each county served or STATEWIDE for service to all counties)

Orange

PART 2: PROJECT DESCRIPTION

The project description should clearly outline what will be done and by whom.

1. Describe the scope of work the activities and/or services will be provided. (Responses below are limited to 1000 characters)
Attach additional pages as needed.

Orange County Community Action Division (CAD) is a division of Orange County Government's Community and Family Services Department. CAD operates 7 community centers strategically located in financially disadvantaged areas of Orange County. The core direct service provided in CAD centers is the Family Self-Sufficiency Program (FSSP). The FSSP provides case management and support services including tuition, rent and mortgage assistance, utility payments, transportation, and child care for qualifying families. In addition to providing direct services, CAD partners with over 100 community and local government agencies who provide services aimed at reducing the causes and consequences of poverty including financial literacy and first time homebuyer counseling. In partnership with 3 existing agencies, this funding will be used to wrap 24 families with employment and financial literacy services.

2. Describe the deliverables for the project in quantifiable terms, including a minimum level of service. For example, indicate the total number of individuals that will be served and the total services provided, and detail monthly or quarterly expectations. Each deliverable must be related to the scope of work described in #1. (Responses below are limited to 1000 characters) Attach additional pages as needed.

Deliverables: (1) In partnership with Head Start, provide comprehensive employment training to 24 individuals for 3 hours per week for 14 weeks to assist them in obtaining and maintaining a job. Services will include individual mentoring, attire for interviews, classroom instruction, and financial literacy. (2) In partnership with Empower You, provide 2 hour courses of six weeks each on financial literacy to 24 individuals to include budgeting, household finances, consumer spending, saving, credit, and banking. (3) Provide clients with a mentor for 6 months, and, in partnership with CareerSource, provide internships to those who do not obtain a job within the first 6 months after the employment training ends. Deliverable #1 would be provided in the first quarter of the contract, #2 would be provided in quarter 2, and #3 in quarter 3. Measures of success for all three phases include: increase in credit score; reducing debt; and obtaining a job.

Agency Name: Orange County Board of County Commissioners

PART 3: PERSONNEL BUDGET

Complete the table below for each position to be funded from grant proceeds. In the explanation section indicate if the salary/benefit expenses listed include costs that are anticipated during the grant period. For example, raises and increases in benefit costs.

Position	Total Actual Cost

Subtotal	\$ -

Explanation (if applicable):

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Agency Name:

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PART 4: CONTRACTUAL BUDGET

For each contractual service listed, include a description of the service to be provided, the business name of the contractor, the cost per unit of service, and the estimated units of service to be used. Indicate in the narrative section how the number of services requested was determined. Also, give a description of a unit of service, e.g., a 60 minute unit of legal services, a 60 minute individual financial counseling session, a 90 minute training session. Attach additional page(s) if needed.

EXAMPLE - Budget Narrative:

Budgeting Inc., will provide budgeting classes to students enrolled in afterschool program. It is anticipated that this service will be used approximately 5 times during the year.

Contractual Services - Contracts for specialized services:				
Name of Business or Contractor		Cost Per Unit of Service	Estimated Units of Service	Total
1	CareerSource	\$1,965	12	\$ 23,580
2	EmpowerYou	\$ 600.00	24	\$ 14,400
3	Publix Supermarkets	\$ 192.00	20	\$ 3,840
4	Lynx Transportation	\$ 20.00	12	\$ 240
5	BP Oil and Gas	\$ 20.00	12	\$ 240
6	Indirect costs	\$ 2,241.00	1	\$ 2,241
Contractual Subtotal		\$ 44,541

Budget Narrative:

1. A unit of service constitutes one month of matched internship salary for clients who do not obtain employment. CareerSouce Central Florida may provide an Earn as you Learn Internship opportunity for up to half of our clients who do not obtain a job within 6 months after the financial literacy modules end. CareerSource is expected to match funds to either extend internships or offer additional benefits. Through an Infrastructure Funding Agreement, CareerSource is an existing CAD partner.
2. A unit of service is a \$100 per financial literacy class (6) per client (24). Empower You will distribute funds to clients in trust through a bank of the clients choice. Funds will only distributed as a match to clients who invest in themselves.
3. A unit of service is defined as a \$8 meal voucher per person (24), per class (20).
4. A unit of service is defined as a travel reimbursement voucher in the form of a bus pass or gas card for each client
5. Indirect cost to Orange County Comptroller to administer the grant at rate of 5.03%. This is listed as "other" in the budget summary
- 6.

Agency Name: _____ 0 _____

PART 5: EQUIPMENT BUDGET

Items included in this section must be furniture and/or equipment costing \$1,000 or more. If awarded funds in this category, prior approval is required before purchasing items. Provide a justification for the equipment purchase requests. Attach additional page(s) if needed.

EXAMPLE - Narrative Response:

The computer will increase the clients ability to acquire skills necessary to achieve financial literacy and independence. The cost listed above is for a complete computer package which includes the computer, monitor, software and printer.

ALL EQUIPMENT PURCHASES MUST BE PRE-APPROVED PRIOR TO THE ACTUAL PURCHASE

Equipment:			
Description	Number	Cost Per Item	Total
1			\$ -
2			\$ -
3			\$ -
4			\$ -
5			\$ -
6			\$ -
Equipment Subtotal	\$ -

Budget Narrative:

1.	
2.	
3.	
4.	
5.	
6.	

Agency Name: _____ 0 _____

PART 6: OTHER BUDGET ITEMS

Please include any budget items or anticipated expenditure of grant fund not included in previous schedules.

Other Items:				
Description		Number	Cost Per Item	Total
1			\$	-
2			\$	-
3			\$	-
4			\$	-
5			\$	-
6			\$	-
Other Items Subtotal		\$ -

Budget Narrative:

1.	
2.	

3.

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4.

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5.

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6.

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Agency Name: 0

PART 7: BUDGET SUMMARY

Budget Summary By Category - Provide the subtotal for each budget category. Amounts must be rounded to the nearest whole dollar.	TOTAL BUDGET
Personnel	
Contractual Services	\$ 42,300
Equipment	
Other	\$ 2,241
TOTAL	\$ 44,541

Agency

Name: 0

- 1 of directors, the agency's principal officers, the agency's employees, and any independent contractors? **YES/NO**

No

If yes, describe any and all family relationships that exist.

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- 2 Are you aware of any interests, direct or indirect, that exist with the current board of directors,

- (a) Sale, purchase, exchange, or leasing of property?
(b) Receiving or furnishing of goods, services, or facilities?
(c) Transfer or receipt of compensation, fringe benefits, or income or
(d) Maintenance of bank balances as compensating balances for the

YES/NO
No
No
No
No

If yes to any above, describe any and all interests that you are aware of at this time.

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- 3 Are any current board of directors, current agency's principal officers, current agency's employees, or any current independent contractors indebted to the agency? **YES/NO**

No

If yes, describe the nature of the debt.

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- 4 Have any current board of directors, current agency principal officers, current agency employees, or any current independent contractors misappropriated assets or committed other forms of fraud against the agency? **YES/NO**

No

If yes, describe the nature of the misappropriation.

By signing this form, I hereby certify that the information contained in this questionnaire is true

Laron B. Williams
Signature

3/14/19
Date

LARON B. WILLIAMS
Print Name

Division Manager
Title