Exhibit A
STATEMENT OF WORK – PCT.1

Section I In summary, describe the services that the agency / organization provide to the community.

The mission of Women Together/Mujeres Unidas is to provide shelter and crisis intervention services for victims of family violence and sexual assault .

Section II State the CDBG grant amount awarded and state the name of awarding City / Pct.

$ 10,000 Awarded By: Pct.1

Section III List the proposed type of expenditure(s) utilizing CDBG funds.

Funding awarded to Women Together/Mujeres Unidas from Pct. 1 will be utilized to pay a portion of the wages for a part-time intake clerk/receptionist in the Weslaco office.

Section IV List the services that will be provided and how they will be performed as a result of CDBG funds.

The intake receptionist will be responsible for answering the hotline and conducting the intial intake and screening of victims coming in for services. The intake receptionist will maintain all client files in a secure locked cabinet.

Section V As a result of the CDBG award; describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Victims of family violence and/or sexual assault will have accessible crisis intervention and shelter services. Many victims are low income and live in colonias and rural areas and lack the knowledge about services or transportation to receive services in McAllen.

Section VI Describe the program beneficiaries, estimated number to be serviced, economic background and area of residency.

Last year we served 243 walk-in clients and answered 165 hot-line calls from the Weslaco Satellite Center, In addition, staff conducted 40 presentations in schools and community organization in the Mid-Valley. We anticipate this number will increase as people become aware that we have an office in Weslaco.

Section VII List all of the locations with physical address where the service(s) will be provided.

Services will be provided from the Mujeres Unidas Weslaco Satellite Office located at 111 E. 5th. St., Weslaco, TX.

Initials _____

Exhibit B-1
GRANT BUDGET
PCT - 1

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed two amendments to the grant budget for the term of the agreement.

TYPE OF EXPENDITURES	**BUDGETED AMOUNT**
One (1) part-time intake receptionist to conduct initial contact and intake process for victims of family violence and sexual violence. 24 hrs per week x $7.50	$9,360
FICA for part-time intake receptionist ($9,360 x 7.65%)	$640
	$
	$
	$
	$
	$
	$
TOTAL GRANT BUDGET: *$76.04 will be paid from other source*	**$ 10,000**

Initials _____

Exhibit B-2
PAYMENT SCHEDULE
PCT. 1

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

2008 - 2009 For the Months of...	Estimated Amount Of Expenditures	Type of Budgeted Expenditures
July 2008	833.33	Part-time intake clerk/receptionist
August 2008	833.33	Part-time intake clerk/receptionist
September 2008	833.33	Part-time intake clerk/receptionist
October 2008	833.33	Part-time intake clerk/receptionist
November 2008	833.33	Part-time intake clerk/receptionist
December 2008	833.33	Part-time intake clerk/receptionist
January 2009	833.33	Part-time intake clerk/receptionist
February 2009	833.33	Part-time intake clerk/receptionist
March 2009	833.33	Part-time intake clerk/receptionist
April 2009	833.33	Part-time intake clerk/receptionist
May 2009	833.33	Part-time intake clerk/receptionist
June 2009	833.37	Part-time intake clerk/receptionist
TOTALS:	$10,000	

Initials _____

Exhibit C
SCHEDULE OF ACTIVITY
PCT. 1

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. Schedule should not exceed Subrecipient contract time frame of eleven months from effective contract date.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

2008 - 2009_ For the months of....	Number of Unduplicated Beneficiaries to be Serviced	Services Provided
July 2008	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
August 2008	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
September 2008	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
October 2008	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
November 2008	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
December 2008	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
January 2009	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
February 2009	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
March 2009	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
April 2009	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
May 2009	42	Crisis intervention, Emergency Shelter, Advocacy, Outreach and Community Education
Total:	504	

Initials _____

Exhibit A
STATEMENT OF WORK

Section I In summary, describe the services that the agency / organization provide to the community.

Women Together/Mujeres Unidas, a non-profit agency has been in operation for 30 years. Our mission is to provide shelter and crisis intervention services for victims of family violence and sexual assault.

Section II State the CDBG grant amount awarded and state the name of awarding City / Pct.
$ 13.500 Awarded By: PCT. 2

Section III List the proposed type of expenditure(s) utilizing CDBG funds.
Funds will be used to pay a portion of wages and fringes for a part-time shelter advocate and a portion of the wages for the Community Education/Professional trainer.

Section IV List the services that will be provided and how they will be performed as a result of CDBG funds.
Advocate will assist families residing in the emergency shelter facility with crisis intervention, counseling, emergency transportation and referrals to medical and social services in the community. The Community Education/Professional Trainer will provide community education and crisis counseling at the Family Justice Center.

Section V As a result of the CDBG award; describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)
As a result of the award, victims will be able to have accessible services in emergency situations. The community will become more knowledgeable about issues related to family violence and/or sexual assault and the services available to them.

Section VI Describe the program beneficiaries, estimated number to be serviced, economic background and area of residency.
616 Low-income residents of Pct. 2, will receive emergency shelter and crisis intervention services. Residents will also be provided with presentations and training on family violence and sexual assault issues and will become knowledgeable about the services available through the agency.

Section VII List all of the locations with physical address where the service(s) will be provided.
511 N. Cynthia, Mcallen, TX or 420 N. 21st St., McAllen, TX - Shelter location is confidential.

Exhibit B-1
GRANT BUDGET
PCT. 2

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed two amendments to the grant budget for the term of the agreement.

TYPE OF EXPENDITURES	**BUDGETED AMOUNT**
Salary for part-time Shelter Advocate wages @$6,264; FICA @$486 - $6750	$6,750
Salary for Community Education/Professional Trainer for precinct area: Wages @$6,264; FICA @$486 - $6750	$ 6,750
	$
	$
	$
	$
	$
	$
TOTAL GRANT BUDGET:	**$13,500**

Initials _____

Exhibit B-2
PAYMENT SCHEDULE
PCT. 2

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

2008 - 2009 For the Months of...	Estimated Amount Of Expenditures	Type of Budgeted Expenditures
July 2008	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
August 2008	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
September 2008	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
October 2008	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
November 2008	**$1227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
December 2008	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
January 2009	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
February 2009	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
March 2009	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
April 2009	**$1,227**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
May 2009	**$1,230**	Shelter advocate + fringes: Community Educator + Fringes & Health Insurance
TOTALS:	**$13,500**	

Initials _____

Exhibit C
SCHEDULE OF ACTIVITY
PCT. 2

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. Schedule should not exceed Subrecipient contract time frame of eleven months from effective contract date.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

2008__ - 2009__ For the months of....	Number of Unduplicated Beneficiaries to be Serviced	Services Provided
July 2008	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
August 2008	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
September 2008	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
October 2008	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
November 2008	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
December 2008	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
January 2009	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
February 2009	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
March 2009	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
April 2009	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
May 2009	56	Emergency Shelter, Crisis Intervention, Advocacy, Outreach, Community Education and Transitional Housing
Total:	616	

Exhibit A
STATEMENT OF WORK

Section I In summary, describe the services that the agency / organization provide to the community.

Women Together/Mujeres Unidas, a non-profit agency has been in operation for 30 years. Our mission is to provide shelter and crisis intervention services for victims of family violence or sexual assault.

Section II State the CDBG grant amount awarded and state the name of awarding City / Pct.

$ 10,000 Awarded By: PCT. 3

Section III List the proposed type of expenditure(s) utilizing CDBG funds.

Funding will be used to pay a portion of wages and fringes for one part-time shelter advocate, a portion of will be used for the wages and fringes for the Community Education/Professional trainer.

Section IV List the services that will be provided and how they will be performed as a result of CDBG funds.

Advocate will assist families residing at the shelter with crisis intervention, counseling, emergency transportation and referrals to medical and social services in the community. The Community Education/Professional Trainer will provide community education and crisis intervention at the Family Justice Center.

Section V As a result of the CDBG award; describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

As a result of the award, victims will be able to have accessible services in emergency situations. The community will become more knowledgeable about issues related to family violence and/or sexual assault and the services available to them.

Section VI Describe the program beneficiaries, estimated number to be serviced, economic background and area of residency.

520 Low-income residents of Pct. 3, will receive emergency shelter and crisis intervention services. Residents will also be provided with presentations and training on family violence and sexual assault issues and will become knowledgeable about the services available through the agency.

Section VII List all of the locations with physical address where the service(s) will be provided.

511 N. Cynthia, McAllen, TX or 420 N. 21st St., McAllen, TX . Shelter location is confidential.

Initials _____

Exhibit B-1
GRANT BUDGET
PCT. 3

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed two amendments to the grant budget for the term of the agreement.

TYPE OF EXPENDITURES	**BUDGETED AMOUNT**
Salary for part-time Shelter Advocate No Health Ins. Is available for part time employees	$ 5,000
Salary for Community Education/Professional Trainer for precinct area; to include Health Insurance	$5,000
	$
	$
	$
	$
	$
TOTAL GRANT BUDGET:	**$10,000**

Exhibit B-2
PAYMENT SCHEDULE
PCT. 3

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

2008- 2009 For the Months of...	Estimated Amount Of Expenditures	Type of Budgeted Expenditures
July 2008	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
August 2008	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
September 2008	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
October 2008	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance;
November 2008	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
December 2008	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
January 2009	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
February 2009	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
March 2009	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
April 2009	$909.09	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
May 2009	$909.10	Shelter + Fringe Benefits; Community Education +Fringe Benefits and Health Insurance
TOTALS:	$10,000	

Initials _____

Exhibit C
SCHEDULE OF ACTIVITY
PCT. 3

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. Schedule should not exceed Subrecipient contract time frame of eleven months from effective contract date.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

2008 - 2009 For the months of....	Number of Unduplicated Beneficiaries to be Serviced	Services Provided
July 2008	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
August 2008	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
September 2008	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
October 2008	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
November 2008	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
December 2008	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
January 2009	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
February 2009	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
March 2009	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
April 2009	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
May 2009	47	Emergency Shelter, Crisis Intervention, Advocacy, Community Education, and Transitional Housing.
Total:	517	

Initials _____