

Exhibit A
STATEMENT OF WORK
City of Weslaco (Pct 1)

Section I In summary, describe the service(s) that the agency / organization provides to the community.

Weslaco CDBG funding will be used to provide meaningful retirement opportunities for six (6) low-income persons 62 years and older. Senior Companion Program will foster independence, supplement their fixed income and enrich their social contact and retirement years.

Section II State the CDBG grant amount awarded and state the name of awarding City / Precinct.
\$ 3,500.00 Awarded By: City of Weslaco (Pct 1)

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

Weslaco CDBG funds will be used to provide a small tax-free stipend of \$2.65 per/hour. Senior Companions will serve four hours a day for five days a week for 1,321 hours per year.

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

Senior Companions will be recruited, trained and placed in an in-home setting and will assist the frail individuals with daily tasks of living; to enable these such as light house keeping, meal preparation, light laundry, errands, personal care, and relief for caregivers.

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.)

Senior Companions will be offered to serve and assist homebound and frail adults living at home who need person-to-person support to continue living at home.

Section VI Describe the program beneficiaries (age/gender), estimated number to be serviced, economic background and area of residency.

WESLACO CDBG funds will benefit eighteen (18) frail and older individuals who are found to be at-risk of losing their independence or self care.

Section VII List the location(s) with a physical address where the service(s) will be provided.

Services will be coordinated through the Senior Community Outreach Services, Inc. office located at 840 W. Austin Avenue in Alamo, Texas 78516-2516. Services for beneficiaries will be provide at the respective individual's home.

Initials _____

Revised June 2009

Exhibit B-1
GRANT BUDGET
 City of Weslaco (Pet 1)

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed up to two (2) amendments to the budgeted amounts. Proposed changes to the budgeted amounts must be submitted in writing to UCP **prior to the preceding month of the change.**

TYPE OF EXPENDITURES	BUDGETED AMOUNT
Senior Companion Program @ \$2.65 per/hour	\$ 3,500.00
	\$
	\$
	\$
	\$
	\$
TOTAL GRANT BUDGET:	\$ 3,500.00

Initials _____

Revised June 2009

Exhibit B-2
PAYMENT SCHEDULE
City of Westlaco (Pet 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 preceding month of the change**. Subrecipient will be allowed up to two (2) amendments to the payment schedule.

2009 - 2010 For the Months of...	Estimated Amount Of Expenditures	Type of Budgeted Expenditures
July		
August		
September		
October		
November		
December		
January	.\$ 1,000.00	Stipend \$2.65 @ 377 hrs
February	.\$ 2,000.00	Stipend \$2.65 @ 755 hrs
March	.\$ 500.00	Stipend \$2.65 @ 189 hrs
April		
May		
TOTAL:	.\$ 3,500.00	Stipend \$2.65 @ 1,321 hrs

Note: Monthly expenditures are considered proposed. Amendments to the payment schedule must be requested when the *actual* monthly expenditure **exceeds** the estimated amount by 50%. If the *actual* monthly expenditure is **less** than 50% of the estimated amount, an amendment must be requested to the Urban County Program for review and approval.

Initials _____

Revised June 2009

Exhibit C
SCHEDULE OF ACTIVITY
City of Weslaco (Pet 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. The schedule should not exceed the agreement time frame of eleven months.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval **prior to the preceding month of the change.** The subrecipient will be allowed up to two (2) amendments for the term of the agreement.

2009 - 2010 For the months of....	Number of <u>Unduplicated</u> Beneficiaries to be Serviced	Services Provided
July		
August		
September		
October		
November		
December		
January	18	In-Home Care Service
February	18	In-Home Care Service
March	18	In-Home Care Service
April		
May		
Total for the Year:	18	Unduplicated

Note: The number of unduplicated (individual) beneficiaries to be served should be counted only **once** per year.

Initials _____

Revised June 2009

Exhibit D
RECORDS & REPORTS
City of Weslaco (Pct 1)

REPORTS

A **Monthly Performance Report (Exhibit D - Activity Report)** must be submitted with each request for payment on or before the 15th of each month. Each activity report must include the following information:

- **Type of expenditures utilizing CDBG funds, type of service(s) provided and how the service met one of the HUD national objectives:**
 - Benefit to Low and Moderate Income Persons
 - Provides Decent Affordable Housing
 - Creates Economic Opportunities
- **Number of persons assisted with New Access to service**
- **Number of persons assisted with Improved Access to service**
- **Number of low-mod beneficiaries served**
- **Ethnic Data**
- **Number of persons served living with a disability**
- **Number of female head of households served**
- **Income levels of persons or households with the categories of extremely low, low to moderate and non-low income.**
- **Type of Outcome:**
 - **Availability/Accessibility.** Description of how services were made available or accessible to low and moderate income people, including persons with disabilities.
 - **Affordability.** How grant funds made the service affordable to low and moderate income people. It can include the creation or maintenance of affordable housing, basic infrastructure hook-ups, or services such as transportation or day care.
 - **Sustainability: Promoting Livable or Viable Communities.** This outcome applies to projects where the activity or activities are aimed at improving communities or neighborhoods, helping to make them livable or viable by providing benefit to persons of low and moderate income or by removing or eliminating slums or blighted areas, through multiple activities or services that sustain communities or neighborhoods.
- **Other significant information** (such as special events, fundraisers, award ceremonies, etc.)
 - Agency agrees to provide Entity with summaries of any events, fundraisers, and/or ceremonies held and provide photos of such events prior to the end date of the Agreement.

RECORDS

All records pertaining to each fiscal year of CDBG funds must be retained, from the date of submission of the COUNTY's Consolidated Annual Performance and Evaluation Report (CAPER) in which the specific activity is reported for the last time, unless there is litigation, claims, audit, negotiation, or other actions involving the records, which has started before expiration of the 4-year period. In such cases, the records must be retained until completion of the action and resolution of all issues which arise from it or the end of the regular 4-year period, whichever is longer, except as provided below:

- Written agreements must be retained for four (4) years after the agreement terminates.
- If any litigation, claim, negotiation, audit, monitoring, inspection or other action has been started before the expiration of the required record retention period records must be retained until completion of the action and resolution of all issues which arise from it, or until the end of the required period, whichever is later.
- In the event more than one exception applies to a particular record, the largest retention period shall apply to such record.

(a) Beneficiary Files

Subrecipient must maintain individual beneficiary files served utilizing CDBG funds. Such files must contain the following:

- Membership/registration Application
- Original Program Application (UCP self certification form)
- Physical address of residence

(b) Program Files

Subrecipient must maintain program files related to the Urban County Program CDBG award. Such files must contain the following:

- CDBG funding proposal letter to city and/or precinct
- Urban County Program Subrecipient Questionnaire, exhibits and supporting documentation
- Subrecipient Agreement
- Correspondence to and from Urban County
- Expenditure Reports
- Copies of reimbursement requests
- Monthly Performance Reports
- If applicable, fixed asset inventory list

(c) Financial Records

Subrecipient must maintain proper financial records.

(d) Program Income

Subrecipient must report program income earned, retained and expended to the Urban County Program that was generated by the use of the CDBG award.

Exhibit E
REQUEST FOR PAYMENTS
City of Weslaco (Pct 1)

1. Subrecipient must submit **monthly** reimbursement requests as approved on the Schedule of Payment hereto attached as Exhibit B-2 (the "Schedule of Payment") **due on or before the 15th of each month.**
2. Subrecipient must inform Urban County in writing if the reimbursement request and/or monthly performance report will not be submitted by the due date.
3. Request for reimbursements that are submitted after the last working day of the month will be returned unpaid if the subrecipient did not comply with Request for Payments (2) hereto attached as Exhibit E (the "Request for Payments").
4. Urban County Program will return incorrect and/or incomplete reimbursement requests to the subrecipient as soon as possible in order for corrections to be made.
5. Subrecipient must submit the corrections and/or pending documentation no later than 10 days from notification by UCP.
6. Subrecipient must submit May's reimbursement request and monthly performance report to the Urban County Program on or before June 15th.
7. May expenditures (equipment / supplies) must be invoiced and paid by May 31st to be eligible for reimbursement.
8. Subrecipient must submit all required documentation as stated on the UCP Reimbursement Checklist.
9. Should the Subrecipient fail to comply with timely submittals of monthly reimbursement requests and/or performance reports, the Urban County Program shall consider termination of the Subrecipient Agreement as per Section X "Suspension and Termination".
10. Subrecipient must submit a copy of the monthly reimbursement request and performance reports to the respective City and/or Precinct providing CDBG funds to the organization. Failure to submit copies may require pre-approval of the City and/or Precinct prior to Urban County processing the reimbursement request.
11. All reimbursement requests and reports submitted to Urban County must be originals signed with blue ink.
12. As per Section IV of this Agreement, the Urban County Program Monitoring Division will conduct on-site monitoring visits to ensure compliance with applicable Federal requirements and performance goals are being met.
13. Reimbursement requests are processed by Urban County on a first come first serve basis.
14. Payments to Subrecipients will only be mailed. Checks will not be allowed for pickup.
15. Checks are mailed eleven (11) days from the date the reimbursement request is submitted to the finance division, only after all documentation is reviewed, corrections are made, and all documentation is in order.

Exhibit A
STATEMENT OF WORK
City of Donna (Pct 1)

Section I In summary, describe the service(s) that the agency / organization provides to the community.

Donna CDBG funding will be used to provide meaningful retirement opportunities for six (6) low-income persons 62 years and older. Senior Companion Program will foster independence, supplement their fixed income and enrich their social contact and retirement years.

Section II State the CDBG grant amount awarded and state the name of awarding City / Precinct.
\$ 7,500.00 Awarded By: City of Donna (Pct 1)

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

Donna CDBG funds will be used to provide a small tax-free stipend of \$2.65 per/hour. Senior Companions will serve four hours a day for five days a week for 2,831 hours per year.

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

Senior Companions will be recruited, trained and placed in an in-home setting and will assist the frail individuals with daily tasks of living; to enable these such as light house keeping, meal preparation, light laundry, errands, personal care, and relief for caregivers.

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.)

Senior Companions will be offered to serve and assist homebound and frail adults living at home who need person-to-person support to continue living at home.

Section VI Describe the program beneficiaries (age/gender), estimated number to be serviced, economic background and area of residency.

Donna CDBG funds will benefit eighteen (18) frail and older individuals who are found to be at-risk of losing their independence or self care.

Section VII List the location(s) with a physical address where the service(s) will be provided.

Services will be coordinated through the Senior Community Outreach Services, Inc. office located at 840 W. Austin Avenue in Alamo, Texas 78516-2516. Services for beneficiaries will be provide at the respective individual's home.

**Exhibit B-1
GRANT BUDGET
City of Donna (Pct 1)**

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed up to two (2) amendments to the budgeted amounts. Proposed changes to the budgeted amounts must be submitted in writing to UCP **prior to the preceding month of the change.**

TYPE OF EXPENDITURES	BUDGETED AMOUNT
Senior Companion Program @ \$2.65 per/hour	\$ 7,500.00
	\$
	\$
	\$
	\$
	\$
TOTAL GRANT BUDGET:	\$ 7,500.00

Exhibit B-2
PAYMENT SCHEDULE
 City of Donna (Pet 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 preceding month of the change.** Subrecipient will be allowed up to two (2) amendments to the payment schedule.

2009 - 2010 For the Months of...	<u>Estimated Amount Of Expenditures</u>	Type of Budgeted Expenditures
July		
August		
September		
October		
November		
December		
January	.\$ 1,500.00	Stipend \$2.65 @ 566 hrs
February	.\$ 1,500.00	Stipend \$2.65 @ 566 hrs
March	.\$ 1,500.00	Stipend \$2.65 @ 566 hrs
April	.\$ 1,500.00	Stipend \$2.65 @ 566 hrs
May	.\$ 1,500.00	Stipend \$2.65 @ 566 hrs
TOTAL:	\$7,500.00	

Note: Monthly expenditures are considered proposed. Amendments to the payment schedule must be requested when the *actual* monthly expenditure **exceeds** the estimated amount by 50%. If the *actual* monthly expenditure is **less** than 50% of the estimated amount, an amendment must be requested to the Urban County Program for review and approval.

Initials _____

Exhibit C
SCHEDULE OF ACTIVITY
 City of Donna (Pet 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. The schedule should not exceed the agreement time frame of eleven months.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval **prior to the preceding month of the change**. The subrecipient will be allowed up to two (2) amendments for the term of the agreement.

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January	18	In-Home Care Service
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April	18	In-Home Care Service
May	18	In-Home Care Service
Total for the Year:	18	Unduplicated

Note: The number of unduplicated (individual) beneficiaries to be served should be counted only **once** per year.

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City of Donna (Pet 1)

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City of Donna (Pct 1)

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