MISCELLANEOUS APPROPRIATIONS AGREEMENT BETWEEN THE CITY OF POMPANO BEACH AND

First Call for Help of Broward, Inc.

THIS AGREEMENT made and entered into on this	day of	, 2017 by and
between the CITY OF POMPANO BEACH, a mun	icipal corporation	of the State of Florida,
hereinafter the CITY.		

First Call for Help of Broward, Inc. a Florida Not For Profit Corporation authorized to do business in the State of Florida, whose principal office is located at 250 NE 33rd Street, Oakland Park, FL 33334 hereinafter referred to as RECIPIENT.

WITNESSETH:

WHEREAS, the City of Pompano Beach has appropriated for its current Fiscal Year 2017-18 (October 1st through September 30th), the sum of \$2,500 to RECIPIENT, to conduct a program entitled or activity as described in *Addendum "I"* which is attached hereto and incorporated herein by reference, for the period beginning October 1, 2017 and ending September 30, 2018; and

WHEREAS, it is in the best interest of the City of Pompano Beach to enter into a contract with the RECIPIENT for the conduct of said program or activity in accordance with the terms and conditions set forth herein; and

WHEREAS, I/We, the undersigned representative(s) of the RECIPIENT, am/are authorized to sign this Agreement binding said RECIPIENT.

NOW, THEREFORE, in CONSIDERATION of the mutual promises herein, the parties do hereby agree as follows:

- 1) RECIPIENT agrees to do as follows:
 - a) To accept the funds as appropriated in accordance with the terms of this Agreement;
 - b) If RECIPIENT intends on obtaining matching funds from another source at the time of the application for the CITY grant, to submit a matching fund commitment agreement which is attached hereto as *Exhibit "A"* and incorporated herein by reference in its entirety to the CITY; and
 - c) Prior to the award of any City funds, RECIPIENT shall provide documentation substantiating that RECIPIENT's corporation/organization falls within Section 501(c)(3) and Section 501(A) of the Internal Revenue Code; and
 - d) To abide by Chapter 119, Florida Statutes, as from time to time amended, and to comply with all applicable federal, state, county and municipal laws, ordinances, codes and regulations. Any difference between the above federal, state, county or municipal guidelines or regulations and this Agreement shall be resolved in favor of

the more restrictive guidelines; and

- e) Not to utilize allotted funds under this Agreement for any purpose other than the purpose set forth in this Agreement; and
- f) To return to the CITY within fifteen (15) days of demand all City funds paid to said RECIPIENT under the terms of this Agreement upon the finding that the terms of any agreement executed by the RECIPIENT of the provisions or any applicable ordinance or law have been violated by the RECIPIENT; and
- g) To return to the CITY all funds expended for disallowed expenditures as determined by the City of Pompano Beach; and
- h) To maintain books, records and documents in accordance with generally accepted accounting procedures and practices to maintain adequate internal controls which, relating to the project(s), sufficiently and properly reflect all expenditures of funds provided by the City of Pompano Beach under this Agreement; and
- i) To consent to:
 - 1) Such audits of the financial affairs of the RECIPIENT by the City of Pompano Beach Internal Auditor as the CITY may require; and
 - 2) Producing all documents required by the Internal Auditor; and
 - In the case of the RECIPIENT receiving Fifty Thousand Dollars (\$50,000) or more from the City of Pompano Beach, furnish the City of Pompano Beach a copy of a grant auditing report conducted in accordance with generally accepted auditing standards, Government Auditing Standards, issued by the Comptroller General of the United States and the provisions of Office of Management and Budget Circular A-133. All grant funds shall be shown via explicit disclosure in the annual financial statements and/or the accompanying notes to the financial statement. This report shall be due within 120 days of the close of the CITY'S fiscal year; and
 - 4) For grants less than \$50,000, the annual report of receipts and expenditures to be submitted shall use a budget to actual comparative basis which shows the approved budget updated for any budget changes (paragraph 5) and a compilation of quarterly progress reports (paragraph 6). The annual report of revenues and expenditures shall include a statement of expenditures made in each budget category and line item identified in the budget as well as annualized statistical information relative to the program or activity which was previously submitted in quarterly progress reports. Outstanding encumbrances should be indicated in quarterly progress reports of expenditures. Timely liquidation of encumbrances in the fourth quarter of grant activity to expedite the timely submission of the fourth quarterly report is required as there will be no carryover of residual funds remaining unspent or unencumbered by the recipient. This report shall be on a fiscal year of October 1st through September 30th, and shall be due on November 16th of

each fiscal year; and

- Preserve and make available all financial records, supporting documents, statistical records and any other documents pertaining to this agreement for a period of three (3) years after termination of this Agreement; or, if an audit has been initiated and audit findings have not been resolved at the end of these three (3) years, the records shall be retained until resolution of the audit.
- j) To operate the program or activity generally described herein and more particularly described in *Addendum "1"* to this Agreement. The RECIPIENT may not enter into subcontracts or sub-grants under the provisions of this Agreement without the City of Pompano Beach's written approval. The RECIPIENT must furnish the City of Pompano Beach a copy of all subcontracts or sub-grants prior to receiving written approval.
- 2) This Agreement shall become effective on the 1st day of October 2017, and shall terminate on the 30th day of September 2018, unless cancelled sooner with or without cause by either party by giving thirty (30) days prior written notice of such cancellation to the other party.
- The City of Pompano Beach agrees to pay the RECIPIENT the sum of \$2,500 for the program or activity. City of Pompano Beach funds will be provided upon a quarterly reimbursement basis for all awards above \$15,000 based upon documented invoices. Reimbursable amounts for all awards above \$15,000 will be limited to 1/4 of the total award amount per quarter. For those awards equal to or less than \$15,000, reimbursements will be based upon documented invoices for any given quarter up to the entire amount of the award. In the event that RECIPIENT does not receive matching funds described in Exhibit "A" or said funds are revoked during the term of the Agreement, CITY funding may be revoked and RECIPIENT shall comply with (1) (f) of this Agreement for returning all or part of awarded CITY funds.
- 4) RECIPIENT agrees to provide the City of Pompano Beach City Manager's Office with a quarterly narrative progress report on the program or activity described in *Addendum "1"*. Such reports shall include basic statistical information relative to the program or activity and a statement of expenditures made in each budget category and line item identified in the budget which is included in *Addendum "1"*. Distribution of each reimbursement payment to the RECIPIENT shall be contingent upon prior receipt of the required progress report which is due during the preceding quarter. Quarterly reports shall be due no later than the following dates:

1st Quarterly Report (October/November/December) - February 1st 2nd Quarterly Report (January/February/March) - May 1st 3rd Quarterly Report (April/May/June) - August 1st 4th Quarterly Report (July/August/September) - November 15th

However, if any of the above dates fall on a weekend, then the due date will be extended to the next business day, thereafter.

- The approved budget for the RECIPIENT, included in *Addendum "1"* and any changes in the budget which would affect expenditure of funds provided under the terms of this contract, must be approved in writing by the City Manager or his/her designee prior to the expenditure of such funds; provided, that nothing herein shall authorize or allow any expenditure or obligation of funds in excess of the total sum aforesaid.
- RECIPIENT agrees that any funds provided by the City of Pompano Beach for the operation of the program or activity during the period of October 1, 2017 through September 30, 2018 which are residual funds remaining unspent or unencumbered by any existing (not contingent) legal obligation shall be retained by the City of Pompano Beach.
- 7) THIS AGREEMENT shall apply to all funds appropriated during the fiscal year ending September 30, 2018, provided that the City of Pompano Beach's rights and the RECIPIENT'S duties hereunder shall continue after said date as provided herein;
 - a) In the event that the City of Pompano Beach fails for any reason to appropriate funds for this agreement, this AGREEMENT shall be deemed terminated and CITY shall provide RECIPIENT with thirty (30) days written notice. Upon receipt of said notice, RECIPIENT shall be responsible for any and all expenses and/or legal obligations made after receipt of written notice from the CITY.
- Nothing in this AGREEMENT shall be deemed to constitute or create a joint venture, partnership, pooling arrangement or other form of business entity between the RECIPIENT and the City of Pompano Beach. RECIPIENT agrees to indemnity and hold harmless the City of Pompano Beach from an against all claims, suits, damages, costs, losses and expenses in any manner arising out of or connected with the RECIPIENT's expenditure of allotted funds under this AGREEMENT and the RECIPIENT's program or activity generally described herein and more particularly described in *Addendum "1"* to this Agreement.

		
Witnesses:	CITY OF POMPANO BEACH	
	Ву:	LAMAR FISHER, MAYOR
	Ву:	GREG HARRISON, CITY MANAGER
Attest:		
ASCELETA HAMMOND, CITY CLERK		(SEAL)
Approved As To Form:		
MARK E. BERMAN, CITY ATTORNEY		
STATE OF FLORIDA COUNTY OF BROWARD		
by LAMAR FISHER as Mayor, GREG HARF	RISON	fore me this day of, 201° as City Manager and ASCELETA HAMMOND a corporation, on behalf of the municipal corporation
NOTARY'S SEAL:	NO	OTARY PUBLIC, STATE OF FLORIDA
	(N	ame of Acknowledger Typed, Printed or Stamped)
	Co	mmission Number

"RECIPIENT":

Witnesses:	FIRST CALL FOR HELP OF BROWARD, INC., a Florida Not For Profit Corporation
	By: Sheit Shot
Jr.	Sheila J. Smith Typed or Printed Name
	Title: President /CEO
STATE OF FLORIDA COUNTY OF BROWARD	
	d before me this day of houst, 2017 as President 60 of of of rida Not For Profit Corporation. He/she is personally known to (type of identification) as identification.
NOTARY'S SEAL:	NOTARY PUBLIC, STATE OF FLORIDA
Notary Public State of Florida	(Name of Acknowledger typed, Printed or Stamped)
Tammy K Brandi My Commission GG 018453 Expires 08/04/2020	CGC18453 Commission Number

CITY OF POMPANO BEACH FISCAL YEAR 2018

FUNDING FOR NON-FOR-PROFIT ORGANIZATIONS

1.	Legal Name of Organization: First Call for Help of Broward, Inc., dba 2-1-1 Broward
2.	Mailing Address: 250 NE 33 rd Street Oakland Park, FL 33334
3.	Date of Incorporation: June 6, 1995
	3a. Does your corporation/organization fall within Section 501(c)(3) and Section 501(a) of the Internal Revenue Code? Yes X No (Please attach proof of tax exempt status)
4.	Chief Executive Officer: Sheila J. Smith
	Official Title: President/CEO Telephone #: (954) 390-0493 ext 8011
5.	Contact Person (if different from above): <u>Louisa Morris</u> Telephone #: (954) 390- 0493 ext 8014
6.	Provide a brief description of the organizations goals and objectives:
resider need to them. preven Counse being. utility a employ disabili- with go	Broward is a 24-hour, multilingual health, human service, and crisis helpline serving hts of Broward County. 2-1-1 is the gateway for individuals and families who are in a connect with any of the 4,000 programs that are available in Broward County to help Degreed, professional Counselors answer calls and offer crisis intervention, suicide tion, supportive listening, information, referrals, advocacy, and follow-up services. elors also make daily calls to seniors who are live alone to ensure their safety and well-Typical issues faced by callers include basic needs (food, housing, rent/foreclosure/assistance), anxiety/depression/mental health concerns, health conditions, loss of yment, lack of health insurance, homelessness, substance abuse, physical/developmental ities, youth/teen relationship and bullying issues, and questions about how to connect overnment services. 2-1-1 collects call, service, need and unmet need data and generates at to document the needs and issues facing residents in each municipality.
7.	Amount of funding requested: \$2,500.00

ADDENDUM "1"

8. Provide a brief description of how City funds would be spent and identifying the community need(s) to be addressed. This should include what exactly will be provided and to how many people (City residents).

Funding will be used for Counselor salaries. Counselors will answer calls from and provide direct assistance to Pompano Beach residents.

It is anticipated that 2-1-1 Broward will serve a minimum of 6,000 Pompano Beach residents. That number fluctuates each year depending on the number of people who call. Services are based on the unique needs of each caller and may include information & referral, advocacy, emotional support, follow ups, crisis intervention, suicide prevention, and calls out to seniors. In the coming year, 2-1-1 Broward will launch text, live chat, and email services in order to expand the ways in which residents can connect with and receive help from 2-1-1.

The demographics of Pompano Beach callers are expected to be similar to last year when a record breaking 13,054 Pompano Beach residents called 2-1-1 for help. 36 of those calls were suicide related, and 5 were suicides in progress (meaning steps had already been taken by the caller to complete a suicide). Those lives were saved. The top five needs of Pompano Beach residents last year were Basic Needs (food, shelter, rent/utility assistance), Family Issues, Government Services, Health, and Mental Health.

- 9. How will the recommended funding compliment the array of City services currently being provided to City residents?
- 2-1-1 Broward supports the existing network of government and human services. Callers are screened to identify all the needs they and their family members might have and are then connected to the programs and services that are appropriate and for which they are eligible. 2-1-1 manages an extensive database of resource information and offers referrals to callers. In instances where resources are not available for a particular need or there are waiting lists to receive a service, 2-1-1 works with the caller to explore possible other resources or nontraditional ways of solving problems. 2-1-1 is available around the clock, every day of the year, which offers residents the ability to reach out for help when they most need it and to talk with someone immediately or when it is most convenient.
- 11. Does your organization receive support from the County or other cities? Yes X No

ADDENDUM "1"

11a. If yes, please list the amount(s) and source(s).

Broward County – 179,838

Fort Lauderdale – 20,000

Hollywood – 11,000

Oakland Park – 12,000

Hallandale Beach – 10,100

Davie – 1,000

Plantation – 15,000

Lauderhill – 8,000

Lauderdale-by-the-Sea – 5,000

Coconut Creek – 8,300

Dania Beach – 2,000

Coral Springs Community Chest – 2,000

North Lauderdale – 5,000

12. What percentage of your organization's budget is direct delivery of service as opposed to "overhead"? 88% Direct Services; 12% Overhead

13. PERFORMANCE MEASURES

Please list below the various levels of service [performance measures] that your organization will be providing to residents of the City of Pompano Beach.

	Most Recently Completed Year 2016	Current Year Estimated 2017	Next Year Proposed 2018
Total Persons Served	128,039	100,000	100,000
Number of Pompano Beach residents served	13,054	10,000	6,000*

*NOTE: A number of major changes make it difficult to project service numbers for 2018. 2016 was an unusual record breaking year for the number of Pompano residents served, double that of prior years. On 12/1/16, the Homeless Shelter Hotline was transferred to Broward County's 311 call center. In the coming year, 2-1-1 will begin offering services via text, live chat and email. The projected number of 6,000 Pompano Beach residents served in 2018 is a very conservative estimate, and the total number will likely be higher.

ADDENDUM "1"

14. Agency Budget Information: Please note that Total Resources Available and Total Resources Allocated should be EQUAL for each fiscal year.

	Last Year Adopted 2017	Current Year Proposed 2018
Resource Available:		
City of Pompano Beach	2,500	2,500
Federal Funding	700,560	774,716
State Funding	461,910	349,952
Other Local Government Funding	1,043,392	930,626
Foundation Grants	283,140	282,496
User Fees	0	0
Other Revenue Sources	1,271,974	1,582,524
Total Resources Available	3,763,476	3,922,814
Resource Allocated:		

Resource Allocated:		
Salaries	2,027,832	2,126,600
Benefits	463,718	463,471
Supplies	38,600	21,000
Contractual Services	221,233	223,456
Capital Outlay [Equipment]	0	0
Other	1,012,093	1,088,287
Total Resources Allocated	3,763,476	3,922,814

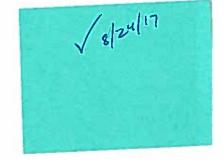
[•] Please provide line item detail for expenses over \$10,000



In reply refer to: 0248222025 Dec. 29, 2011 LTR 4168C E0 65-0589294 000000 00

> 00025034 BODC: TE

FIRST CALL FOR HELP OF BROWARD INC 250 NE 33RD ST OAKLAND PARK FL 33334-1144



155.25

012247

Employer Identification Number: 65-0589294
Person to Contact: R CLEMONS
Toll Free Telephone Number: 1-877-829-5500

Dear TAXPAYER:

This is in response to your Dec. 19, 2011, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in AUGUST 1995.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248222025 Dec. 29, 2011 LTR 4168C E0 65-0589294 000000 00

00025035

FIRST CALL FOR HELP OF BROWARD INC 250 NE 33RD ST OAKLAND PARK FL 33334-1144

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

S. A. Martin, Operations Manager Accounts Management Operations

- Domprtin

State of Florida Department of State

I certify from the records of this office that FIRST CALL FOR HELP OF BROWARD, INC. is a corporation organized under the laws of the State of Florida, filed on June 6, 1995.

The document number of this corporation is N95000002739.

I further certify that said corporation has paid all fees due this office through December 31, 2017, that its most recent annual report/uniform business report was filed on January 9, 2017, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Ninth day of January, 2017



Secretary of State

Tracking Number: CC4668508597

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

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