#### I. Applicant

#### **Before Starting the Project Application**

Project applicants are required to have a Data Universal Numbering System (DUNS) number and an active registration in the Central Contractor Registration (CCR)/System for Award Management (SAM).

To ensure that applications are considered for funding, <u>applicants should read all sections of the HUD FY 2019 CoC Program NOFA and the local Continuum of Care 2019 –DV Bonus, CoC Bonus, and Reallocation Projects Request for Applications FY 2019 CoC.</u>

Applicant Inland Empire United Way
Proposed Project Pathways Home DV Expansion
Legal Name Inland Empire United Way
Employer/Taxpayer Identification Number (EIN/TIN) 330502676
Organizational DUNS 84-086-2945
Street 9644 Hermosa Avenue
City Rancho Cucamonga
County San Bernardino County
Name and contact information of person to be contacted on matters involving this
Applicant First Name Gary
Last Name_Madden
Title Director, 211
Organizational Affiliation Inland Empire United Way
Telephone Number 9099802857 x202
Email: gmadden@ieuw.org

	II.	Appli	cant Auth	orization							
	Instru	ctions:									
	The authorized person for the project applicant organization must agree to the declaration statement in order to proceed to the project application.										
	Authorized Representative: Enter the authorized representative's information. A copy of the governing body's authorization for this person to sign the project application as the official representative must be on file in the applicant's office.										
	By signing and submitting this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.										
	(U.S. 0	Code, T	itle 218, Se	ction 1001)			5	3			
	Signat	ure of	Authorized	Representativ	e						_
	Autho	orized R	Representa	tive							
	First N	lame S	Shirli								
		lame_									
	Title _	Inte	rim P	resident	CEO						
	Organ	nization	nal Affiliati	Inland Empir	e United W	/ay					
	Telepl	hone N	umber 9	0998028	57 x20	)4					
	Email	sdr	iz@ie	uw.org	8						
	Please	e select	t funding s	ource and prog	ram comp	one	nt from below	:			
<u>C</u>	OV Bon	<u>us</u>	<b>✓</b>	CoC <u>Bonus</u>		Re	eallocation [		CoC <u>Bonus and</u> <u>Reallocation</u>		
Je S	erm Ho Re-Hou oint TH	and PH	Rapid	Project Compo Perm. Housing Expansion Proje Proj. Only	– PSH	Pe Ex	oject Componer rm. Housing – P pansion Project- roj. Only	SH 🗌	Project Componer Perm. Housing – P Expansion Project Proj. Only	SH	

#### III. Applicant Experience:

1. Describe the experience of the applicant and potential subrecipients (if any), in effectively utilizing federal funds and performing the activities proposed in the application, given funding and time limitations.

Inland Empire United Way (IEUW), through its 211 program, participated in a Coordinated Entry System (CES) pilot, successfully applied to HUD to become the CoC's operator of the CES, and has been functioning in that role since August 1 of 2016. This functional component of the CoC has been a work in progress from the beginning because it completely changed the way housing providers work. This disruption in the previously disconnected and unaccountable process of addressing homelessness has completely rearranged the relationship between 211, the housing providers, the supportive service providers, and several County Departments, especially Housing and Community Development.

Rich data collected by CES Outreach Teams and partner outreach staff from the Sheriff's H.O.P.E. Team and Step Up, has provided an insight into who our homeless are, the makeup of households, the length of time in homelessness, their demographics, and much additional information which has all been shown to be far beyond the insight collected in the Point in Time Homeless Count.

CES has become the hub around which funding, communication, homeless processes and accountability revolve. Knowledge of homeless households and their circumstances is embedded and shared within the HMIS (Homeless Management Information System). It has been CES management staff who have helped the Office of Homeless Services shape the HMIS into the powerful information center-point it has become.

CES is also the hub of Case Conferencing, the highly collaborative and transparent process for determining who of the most vulnerable, hardest to serve households will be referred to the most appropriate agency and when.

Nearly 700 households have had their homelessness ended since the CES began, with a high stabilization success rate.

With regards to Domestic Violence (DV), 211 staff are trained to understand DV at a level to be able to provide an effective hand-off to a DV provider per a DV provider network protocol. This relationship between 211 and DV providers is now being formalized by MOU to clearly define organizational relationships, perform 2-way cross training, and to achieve optimum client-centered stabilization and ultimate success.

2. Describe the experience of the applicant and potential subrecipients (if any) in leveraging other Federal, State, local, and private sector funds.

IEUW has many years of experience leveraging other Federal, State, local, and private sector funds.

As the operator of San Bernardino County's homeless coordinated-entry system, we receive HUD funds for housing coordination and outreach to most effectively end homelessness for individuals and families. We supplement HUD funds with private sector funds (e.g., corporate/foundation contributions) as available through grants and fundraising. For example, a recent \$99,000 grant from Kaiser Permanente is being utilized to hire additional homeless outreach staff specifically with health/medical experience based on observed needs in the field.

211 has been receiving state funds for CalFresh outreach & education and enrollment for more than 6 years.

Our 211 Careers (workforce development) program has leveraged multiple funding sources to pilot, develop, and expand its programming—first with 3 private and corporate foundations, and recently through 2 awards from the State of California (\$150,000 from the Workforce Accelerator 7.0 program and a \$499,000 preliminary award from the Board of State & Community Corrections).

We leverage funds from San Bernardino County for a variety of contracted uses, including with Family & Preschool Services, and Reentry Services. We also hold contracts with other 211's across the state/country for fee-based funds to operate the 211 call center.

Other programs within IEUW leverage funds such as EFSP federal dollars, foundation grants, and private donations. IEUW has leveraged federal funds from the Corporation for National & Community Service (CNCS) for over 10 years combined for AmeriCorps VISTA and AmeriCorps State, previously administered a region of the Retired Senior & Volunteer Program (RSVP), and supplemented AmeriCorps funding with foundation grants such as from the Annenberg Foundation.

Overall, IEUW has a high capacity to leverage many different funding sources to maximize impact.

3. Describe the basic organization and management structure of the applicant and subrecipients (if any). Include evidence of internal and external coordination and an adequate financial accounting system.

IEUW's basic organization and management structure includes a Board of Directors, executive staff, managerial and administrative staff, and direct coordination and human services staff.

The 14-person Board of Directors includes Executive and Finance committees, meets on the 2nd Wednesday of the month in addition to an annual meeting, and is responsible for oversight of the organization, including setting rules and regulations, and overseeing finance, strategic plans, and hires of executive staff.

The executive staff runs the daily operations and includes the President & CEO who reports to the Board, and 3 senior level department directors who report to the CEO. Our organization includes a total of close to 60 dedicated staff members across our facilities in Rancho Cucamonga and Victorville.

Through a formal contract with the United Way of Inland Valleys (UWIV), IEUW's fundraising is overseen by executive staff within UWIV's ranks for shared campaigns, relationships, and messaging.

IEUW uses Generally Accepted Accounting Principles, receives a full audit annually, and has performed as fiscal agent for many groups such as the Alliance for Education, Funders Alliance, San Bernardino County Voluntary Agencies Active in Disaster (SBC VOAD), and Knit 4 Need.

\*\* As for question #4 below, there were two findings from a 2018 HUD Audit. The first was regarding an inadequate subrecipient agreement with Inland Housing Solutions for their Housing Search & Placement work. That subrecipient agreement has been corrected and submitted to HUD for review. The second finding was a lack of Annual Performance Report (APR). When we've attempted to run the APR report for CES within the HMIS system there is no data and the report does not print. We have been working with the Office of Homeless Services and ClientTrack, the HMIS vendor, to fix this problem, which is inherent in the software due to the newness of the HUD CES requirements. So this finding is beyond our control to correct, but is being worked on. \*\*

- 4. Are there any unresolved monitoring or audit findings for any HUD grants (including ESG) operated by the applicant or potential subrecipients (if any)? \*\*Yes\*\*
- 5. Does this project use one or more properties that have been conveyed through the Title V process?\_\_\_\_

N/A

#### IV. Project Description

Provide a description that addresses the entire scope of the proposed project.

IEUW's 211 program proposes to add 3 Peer or highly trained DV Outreach staff to CES in order to address the unique needs of homeless individuals who are also survivors of domestic violence. Similar to CoC housing providers, the six existing DV providers that serve San Bernardino County have very different processes and capacity. This leads to variations is how DV survivors are provided for. CES requires dedicated DV staff to fully interface effectively with DV providers. This grant will improve the quality of San Bernardino County's Continuum of Care in the following ways:

- 1. The 3 DV Outreach staff will be fully trained in using the 211 resource database, an invaluable asset for assisting with finding and referring to needed supportive services which will promote better quality of life for clients. Cross training will also occur with DV providers.
- 2. Currently, when a DV survivor is timing out of a DV shelter without having secured housing, there is no formal connection between the DV providers and CES, leaving the client in danger of falling into homelessness. The DV Bonus grant will bridge the gap, providing trained DV staff within CES to work directly with the DV provider BEFORE the exit date of a person who is timing out. The same staff will also be able to work with DV provider staff on housing solutions when there are barriers beyond the capacity of the DV agency to solve, which will improve the stability of DV clients to help avoid future homelessness.
- 3. The effects of domestic violence abuse can be far reaching, often causing self destructive behavior, paranoia and other extreme issues. More than 25% of homeless individuals in San Bernardino County are unaccompanied women, the vast majority of them are victims of domestic violence and other abuse. When encountering a DV survivor during outreach, whether in immediate need of DV sheltering or not, CES will now be able to service the needs of the survivor in the most appropriate and supportive way, breaking
  - For each primary project location or structure in the project, enter the number of days from the execution of the grant agreement that each of the following milestones will occur as related to CoC Program funds requested in this project application. If a milestone is not applicable, leave the associated fields blank. If the project has only one location or structure, or no structures, complete only column A. If multiple structures, complete one column for each structure.

Note: To expend funds within statutorily required deadlines, project applicants must be able to begin assistance within 12 months of conditional award. The one exception is for applicants who are conditionally awarded sponsor-based and project-based rental assistance. These conditional award recipients will have 24 months to execute a grant agreement; however, HUD encourages all recipients conditionally awarded funds to begin assistance within 12 months. The estimated schedule should reflect these statutorily required deadlines

Project Milestones	Days from Execu tion of Grant Agreement	Days from Execu tion of Grant Agreement	Days from Execu tion of Grant Agreement	Days from Execu tion of Grant Agreement
	А	В	С	D
New project staff hired, or other project expenses begin?	45			
Participant enrollment in project begins?	75 (in CES)			
Participants begin to occupy leased units or structure(s), and supportive services begin?	N/A-Occupy 75 for SSO			

Leased or rental assistance units or structure, and supportive services near 100% capacity?	N/A		
Closing on purchase of land, structure(s), or execution of structure lease?	N/A		
Rehabilitation started?	N/A		
Rehabilitation completed?	N/A		
New construction started?	N/A		
New construction completed?	N/A		

You must enter a value greater than zero for at least one project milestone.

3.	Will your	project participate in a CoC Coordinated Entry Process? (DV Projects -
	N/A)	Yes

4. Please identify the specific population focus. (Check ALL that apply)

Chronic Homeless	Domestic Violence	X
Veterans	Substance Abuse	
Youth (under 25)	Mental Illness	
Families	HIV/AIDS	
	Other	

#### 5. Housing First

- a. Will the project quickly move participants into permanent housing? \_
- b. Will the project ensure that <u>participants are not screened out</u> based on the following items? Check all that apply.

Having too little or little income	Yes
Active or history of substance abuse	Yes
Having a criminal record with exceptions for state-mandated restrictions	Yes
History of domestic violence (e.g. lack of a protective order, period of separation from abuser, or law enforcement involvement)	Yes
None of the above	

	c.	Does the project ensure that program for the following re-	participants are not terminated from the asons? Check all that apply.
Failur	e to part	cipate in supportive services	Yes
Failur	e to mak	e progress on a service plan	Yes
Loss o	f income	or failure to improve income	Yes
_		of domestic violence	Yes
Any o agree geogr	ther acti ment typ aphic are	vity not covered in a lease ically found in the project's ea.	Yes
None	of the ab	oove	
6.	respo	Will participants be requi structure, unit, or locality, at of participation? №	□ No evelopment activities and the potential subrecipients (if g, and maintaining the
	b) N/A	response is 'Yes' please expla	live in one structure? If your ain the local market conditions, this size and describe how the the neighborhood.

### Project Expansion Information-PROJECT EXPANSION APPLICANTS ONLY

1. Is this New project application requesting a "Project Expansion" of an eligible renewal project of the same component type?

Yes - Supportive Services Only - Coordinated Entry System - Expansion into Domestic Violence response

Enter the PIN number (first 6 numbers of the grant number) and Project Name for the renewal project application applying for renewal in this year's CoC Program Competition.

- 1a. Eligible Renewal Grant PIN Number: CA1452
- 1b. Eligible Renewal Grant Project Name: Pathways Home Coordinated Entry System 2018
- 2. Will this expansion project Increase the number of homeless persons served?

Yes, the capacity of CES will be increased, allowing for approximately 40% more CES street outreach, especially in the less centralized areas and specifically in the High Desert, by pairing DV Outreach Specialists with core CES outreach staff.

3. Will this Expansion Project bring additional supportive services to homeless persons?

Yes, by increasing outreach activities, more referrals to supportive services will be offered, more transportation options solved, faster document readiness.

4. Will this expansion project bring existing facilities up to government health and safety standards?

N/A

#### V. Supportive Services for Participants

Applicants requesting funds to provide housing or services to children and youth, with or without families, must establish policies and practices that are consistent with and do not restrict the exercise of rights provided by subtitle B of title VII of the McKinney-Vento Act (42 U.S.C. 11431, et seq.), and other laws (e.g. Head Start, part C of the Individuals with Disabilities Education Act) relating to the provision of educational and related services to individuals and families experiencing homelessness. Projects serving households with children or youth must have a staff person that is designated to ensure children or youth are enrolled in school and connected to the appropriate services within the community. Reminder: failure to comply with federal education assurances may result in Federal sanctions and significantly reduce the likelihood of receiving funding through the CoC Program Competition.

- 1. Please check the box that you acknowledge you will be required to meet the above requirements if you have any qualifying participants.
- 2. Describe how participants will be assisted to obtain and remain in permanent housing.

From the very beginning or engagement, CES outreach staff are focused on assisting the client to achieve permanent housing. They meet the client where they are', recognizing that it may take as many of dozens of engagements for some clients to agree to next steps toward housing, especially if they have been homeless for an extended period of time and if their socialization has been compromised by abuse. CES staff engage, provide for immediate needs, build rapport, perform an assessment using the VI-SPDAT embedded in the HMIS, provide bus passes if needed, and provide connection to other needed services. As managers of the comprehensive resource database, 211 CES staff have the widest knowledge of services available to residents in the county. CES outreach staff continue to work with clients until an appropriate housing provider is able to take the client into their appropriate program. CES staff then formally refer the client to the proper housing provider within the HMIS and notify the provider that the client has been referred. At that point the housing provider has to formally enroll the client in HMIS, and assume responsibility for the client from then on.

3. What specific plan does this project have to specifically coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible?

211 has been connecting people to mainstream health, social services, and employment programs based on client eligibility for 10 years prior to the advent of the CES. The 211 database lists detailed information on than 990 agencies and the nearly 3,000 programs the agencies provide. Additionally, the 211 database lists another 400+ state and federal resources from a statewide shared database. CES outreach staff can enroll clients into CalFresh, even in the field if internet access is available. Referrals are provided and available transportation options offered if needed. CES staff focus on a path to permanent housing, removing of barriers to that housing, harm reduction, and immediate needs fulfillment.

- 4. For all supportive services available to participants, indicate who will provide them and how often they will be provided.
  - a. For all supportive services available to participants, indicate who will provide them (applicant or other agency), how they will be accessed, and how often they will be provided (daily, weekly, monthly, as needed, or other).

Supportive Services	Provider	Frequency
Assessment of Service Needs	CES & CES DV Outreach	Weekly
Assistance with Moving Costs	N/A	
Case Management	N/A	
Child Care	N/A	
Education Services	N/A	
Employment Assistance and Job	211 Careers & partners	Whenever appropriate
Food	CES staff & partners	As needed
Housing Search and Counseling	Subrecipeint (Inland Housing S)	When appropriate
Legal Services	Inland Counties Legal Services	When appropriate
Life Skills Training	N/A	
Mental Health Services	N/A	
Outpatient Health Services	Local Clinics	When appropriate
Outreach Services	CES	Weekly
Substance Abuse Treatment Services	N/A	
Transportation	CES (bus passes)	As needed
Utility Deposits	N/A	

Please enter all values for at least one line item.

5.	Please	identify whether t	he project will	include	the follow	ing activitie	s: ·	
	5a.	Transportation as	ssistance to cli	ents to	attend mai	nstream be	nefit appointr	nents,
		employment trai	ning, or jobs?	Yes	7	No		
	5b.	Regular follow-u renewed? Yes	ps with partic	pants t No	o ensure m	ainstream b	enefits are re	ceived and
6.	-	oject participants hav ipient, or partner age		/SSDI ted	chnical assist No	ance provide	d by the applic	ant, a

#### VI. Housing Type and Location

<u>PH-PSH Only</u> - The following list summarizes each housing site in the project. For <u>Housing Type</u> enter if the housing will be scattered-site apartments, shared housing, single family homes/townhomes or other. <u>Units-Please enter the number of units the project will provide.</u> <u>Beds-The number of beds associated with project.</u> <u>Dedicated Chronically Homeless (CH) beds.</u>

Site Location	Housing Type	Units	Beds	Dedicated CH Beds
				- Lamenta
	_1			

<u>PH-RRH Only</u> – The following list summarizes each housing site in the project. **Units**-Please enter the number of units the project will provide. **Beds**-The number of beds associated with project.

Site L	Location	Total Units	Total Beds
	15000		

Joint TH & PH RRH Only - List all CoC-funded and Non CoC-funded units and beds for this project.

Site Location		Transitional Housing	Rapid Re-Housing	Total
	Total Units			
	Total Beds			

Site Location		Transitional Housing	Rapid Re-Housing	Total
	Total Units			
	Total Beds			

Site Location		Transitional Housing	Rapid Re-Housing	Total
	Total Units			
	Total Beds			

Site Location		Transitional Housing	Rapid Re-Housing	Total
	Total Units			
	Total Beds			

Site Location		Transitional Housing	Rapid Re-Housing	Total
T	otal Units		 	
Ī	otal Beds			

#### VII. Project Participants - Households

#### Instructions:

PH-PSH, PH-RRH, and Joint TH & PH-RRH are required to complete Section VII. In each non-shaded field list the number of households or persons served at maximum program capacity. The numbers here are intended to reflect a single point in time at maximum occupancy and not the number served over the course of a year or grant term.

Households: Enter the number of households under at least one of the categories: Households with at least One Adult and One Child, Adult Households without Children, or Households with Only Children.

Households with at least One Adult and One Child: Enter the total number of households with at least one adult and one child. To fall under this column and household type, there must be at least one person at or above the age of 18, and at least one person under the age of 18.

Adult Households without Children: Enter the total number of adult households without children. To fall under this column and household type, there must be at least one person at or above the age of 18, and no persons under the age of 18.

Households with Only Children: Enter the total number of households with only children. To fall under this column and household type, there may not be any persons at or above the age of 18, and only persons under the age of 18.

Characteristics: Enter the total number of homeless that fall under one of the characteristics listed.

Persons in Households with at least One Adult and One Child: Enter the number of persons in households with at least one adult and one child for each demographic row. To fall under this column and household type, there must be at least one person at or above the age of 18, and at least one person under the age of 18.

Adult Persons in Households without Children: Enter the number of persons in households without children for each demographic row. To fall under this column and household type, there must be at least one person at or above the age of 18, and no persons under the age of 18.

Persons in Households with Only Children: Enter the number of persons in households with only children for each demographic row. To fall under this column and household type, there may not be any persons at or above the age of 18, and only persons under the age of 18.

Totals: Enter the "Total Number..." and "Total Persons".

a. Project Participant Household Table

Households	Households with at Least One Adult and One Child	Households without Children	Househol ds with Only Children	Total
Total Number of Households				
Characteristics				
Adults age over 24				
Adults ages 18-24				
Accompanied Children under age 18				
Unaccompanied Children under age 18				
Total Persons				

#### VIII. Project Participants - Subpopulations

Instructions:

PH-PSH, PH-RRH, and Joint TH & PH-RRH are required to complete Section VIII. Enter the number of persons served at maximum program capacity according to their age group, disability status, and the extent in which persons served fit into one or more of the subpopulation categories. The numbers here are intended to reflect a single point in time at maximum capacity and not the number served over the course of a year or grant term

Complete each of the three charts on the following pages according to household types.

Persons in Households with at least one Adult and One Child chart: Enter only persons in households with at least one adult and one child. To be listed on this chart, a person must be part of a household with at least one person at or above the age of 18, and at least one person under the age of 18.

Persons in Households without Children chart: Enter only persons in adult households without children. To be listed on this chart, a person must be part of a household with at least one person at or above the age of 18, and no persons under the age of 18.

Persons in Households with Only Children chart: Enter only persons in households with only children. To be listed on this chart, a person must be part of a household with no persons at or above the age of 18, and only persons under the age of 18.

Describe the unlisted subpopulations referred to above, if applicable. Enter text that describes the person(s) identified in this column and explains how they do not fall under the other categories in columns 1 through 9.

#### a. Persons in Households with at Least One Adult and One Child

	Chronically Homeless Non- Veterans	Chronically Homeless Veterans	Non- Chronically Homeless Veterans	Substanc	with	У	Victims of Domesti c Violenc e	Disabilit	Persons not represented by listed subpopulation s
Adults over age 24									
Adults ages 18-24									
Children under age 18									
Total Persons									

In the space below, describe the unlisted subpopulations referred to above, if applicable. Enter text that describes the person(s) identified in this column and explains how they do not fall under the other categories in columns 1 through 9.

#### b. Persons in Households without Children

Characteristics	Chronicall y Homeless Non- Veterans	Non- Chroni cally Homeless Veterans	Chronic Substanc e Abusers	Persons with HIV/AID S	Severel y Mentall y III	Victims of Domesti c Violenc e	Physical Disability	Develop mental Disabilit Y	Persons not represented by listed subpopulation s
Adults over age 24									
Adults ages 18-24									
Children under age 18									
Total Persons									

In the space below, describe the unlisted subpopulations referred to above, if applicable. Enter text that describes the person(s) identified in this column and explains how they do not fall under the other categories in columns 1 through 9.

#### c. Persons in Households with only Children

Characteristics	Homeless	Chronically Homeles Veteran	Chronica	Substance Abusers	Persons with HIV/AID S	Mentally	Disability	L	Persons not represented by listed subpopulations
Adults over age 24									
Adults ages 18-24									
Children under age 18								***************************************	
Total Persons									

In the space below, describe the unlisted subpopulations referred to above, if applicable. Enter text that describes the person(s) identified in this column and explains how they do not fall under the other categories in columns 1 through 9.

#### IX. Funding Request Instructions:

- 1. Will it be feasible for the project to be under grant agreement by September 30, 2021?  $_{\rm Yes}$
- 2. What type of CoC funding is this project applying for in the 2019 CoC Competition (DV Bonus, CoC Bonus, or Reallocation Funds)?

DV Bonus

- 3. Does this project propose to allocate funds according to an indirect cost rate?
  Yes, the allowable 10%
- 5. Select the costs for which funding is being requested:

Leased Units	
Leased Structures	
Rental Assistance	
Supportive Services	Х
Operating	
HMIS	

At least one box must be checked.

#### X. Leased Units Budget - Only complete if requesting funds for Leased Units

#### Instructions:

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2019 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rent for each unit in the FMR Area column in the chart below. The FMRs are available online at

https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2019\_code/2019summary.odn

Size of Units: Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.

# of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2019 FMRs based on the FMR area selected by the applicant. They serve as a reference and upper limit for the amounts entered in the HUD Paid Rents column.

HUD Paid Rents: This is a required field. For each unit size, enter the rent to be paid by the CoC program grant. This rent can be equal to or below the FMR amount in the previous column. Once funds are awarded recipients must document compliance with the rent reasonable requirement in 24 CFR 578.49.

12 Months: These fields are populated with the value 12 to calculate the annual rent request

Total Request: Enter the total calculated amount from each row.

Total Units and Annual Assistance Requested: Enter the total number of units and the sum of the total requests per unit size per year.

Grant Term: The Grant Term is 1 year.

Total Request for Grant Term: This field is calculated based on the total annual assistance requested multiplied by the grant term.

Please calculate once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange: https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources

In the chart below, enter the appropriate values in the "Number of units" and "HUD Paid Rent" fields.

Size of Units	# of Units	*FMR	HUD Paid Rent	12 Months	Total request
0 Bedroom		\$826		12	
1 Bedroom		\$986		12	
2 Bedroom		\$1,232		12	
3 Bedroom		\$1,717		12	
4 Bedroom		\$2,132		12	
5 Bedroom					
6 Bedroom					
7 Bedroom					
8 Bedroom					
9 Bedroom					
Total Units and Annual					
Assistance Requested					
Grant Term					1
Total Request for Grant Term					

<sup>\*</sup> Final FY 2019 Fair Market Rent by Unit Bedrooms-San Bernardino Countyhttps://www.huduser.gov/portal/datasets/fmr/fmrs/FY2019\_code/2019summary.odn

### XI. Leased Structures Budget - Only complete if requesting funds for Leased Structures

#### Instructions:

Leased Structures Budget Detail

The leased structures budget detail requires a structure name and address and the monthly HUD paid rent (Actuals). This rent must be manually multiplied by 12 months and then by the grant term. Enter the Total Request for Grant Term.

·	
* Structure Name:	
* Street Address 1:	
Street Address 2:	
* City:	
* State:	
* Zip Code:	
*	
HUD Paid Rent (per Month):	
12 Months:	12
Total Annual Assistance Requested:	
Grant Term:	1.Year
Total Request for Grant Term:	

### XII. Operating Budget Leased - Only complete if requesting funds for Operating Costs

#### Instructions:

Eligible Costs: The system populates a list of eligible operating costs for which funds can be requested. The costs listed are the only costs allowed under 24 CFR 578.55.

Quantity AND Detail: This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (e.g. .75 FTE hours and benefits for staff, utility types, monthly allowance for supplies) for each operating cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

Annual Assistance Requested: The amount entered must only be the amount that is DIRECTLY related to operating the housing or supportive services facility.

Total Annual Assistance Requested: Enter the amount based on the sum of the annual assistance requests entered for each activity.

Eligible Costs	Quantity AND D (max 400 characters)	escription	Annual Assistance Requested
1. Maintenance/Repair			-
2. Property Taxes and Insurance			
3. Replacement Reserve			
4. Building Security			
5. Electricity, Gas, and Water	er melle minde mente i 170 (170 (170 (170 (170 (170 (170 (170		
6. Furniture	NEXT DESCRIPTION OF A REAL PROPERTY OF THE PRO	on the second se	
7. Equipment (lease, buy)			
Total Annual Assistance Requested			
Grant Term			1 Year

#### XIII. Rental Assistance Budget - Only complete if requesting funds for Rental Assistance

#### Instructions:

Type of Rental Assistance: Enter the applicable type of rental assistance. Options include tenant-based assistance (TRA), sponsor-based assistance (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection. Please note – RRH projects Rental Assistance: Rental assistance is limited to TRA for RRH projects.

Metropolitan or non-metropolitan fair market rent area: Prepopulated.

Size of Units: These options are prepopulated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.

# of units: This is a required field. For each unit size, enter the number of units for which funding is being requested.

FMR: These fields are populated with the FY 2019 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2019\_code/2019summary.odn

12 Months: These fields are populated with the value 12 to calculate the annual rent request.

Total Request: This column must be populated with the total calculated amount from each row based on the number of units multiplied by the corresponding FMR and by 12 months.

Total Units and Annual Assistance Requested: The fields in this row must be calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: The Grant Term is 1 year.

Total Request for Grant Term: This field must be calculated based on the total annual assistance requested multiplied by the grant term

1.	Type of Rental Assistance	

2. Metropolitan or non-metropolitan fair market rent area: Riverside-San Bernardino-Ontario, CA

#### 3. Rental Assistance Budget Table

Size of Units	# of Units	*FMR Area	12 Months	Total Request
0 Bedroom		\$826	X 12	
1 Bedroom		\$986	X 12	
2 Bedroom		\$1,232	X 12	
3 Bedroom		\$1,717	X 12	
4 Bedroom		\$2,132	X 12	
5 Bedroom			X 12	
6 Bedroom			X 12	
7 Bedroom			X 12	
8 Bedroom			X 12	
9 Bedroom			X 12	
Total Units and Annual Assistance Requested				
Grant Term	1 Year			
Total Request for Grant Term				

<sup>\*</sup> Final FY 2019 Fair Market Rent by Unit Bedrooms-San Bernardino Countyhttps://www.huduser.gov/portal/datasets/fmr/fmrs/FY2019\_code/2019summary.odn

#### XIV. Supportive Services Budget - Only complete if requesting funds for Supportive Services

#### Instructions:

Enter the quantity and total budget request for each supportive services cost. The request entered should be equivalent to the cost of one year of the relevant supportive services.

Eligible Costs: A list of eligible supportive services for which funds can be requested is displayed. The costs listed are the <u>only</u> costs allowed under 24 CFR 578.53.

Quantity AND Description: This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity and detail (e.g. 1 FTE Case Manager Salary + benefits, or child care for 15 children) for each supportive service activity for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail".

Annual Assistance Requested: This is a required field. For each grant year, enter the amount of funds requested for each activity. The amount entered must only be the amount that is DIRECTLY related to providing supportive services to homeless participants.

Total Annual Assistance Requested: This field must be calculated based on the sum of the annual assistance requests entered for each activity.

Grant Term: The Grant Term is 1 year.

Total Request for Grant Term: Calculate this field based on the total amount requested for each eligible cost multiplied by the grant term.

Eligible Costs	Quantity and Description	Annual Assistance
Assessment of Service Needs		
Assistance with Moving Costs		
Case Management		
Child Care		
Education Services		
Employment Assistance		
Food	\$50/week Emerg. food & pet food, various types	\$3,600
Housing/Counseling Services		
Legal Services		
Life Skills		
Mental Health Services		
Outpatient Health Services		
Outreach Services	3 DV Outreach Staff	\$138,965
Substance Abuse Treatment		
Transportation	200 Day Bus Passes - 400 Bus Passes	\$1,700
Utility Deposits		
Operating Costs	10% Operating + 10% Admin	\$28,853
Total Annual Assistance Requested		\$173,118
Grant Term		1 Year
Total Request for Grant Term		\$173,118

#### XV. HMIS Budget- Only complete if requesting funds for HMIS

#### Instructions:

Enter the quantity and total budget request for each HMIS cost. The request entered should be equivalent to the cost of one year of the relevant HMIS activity. The system populates a list of eligible costs associated with the implementation of an HMIS and for which CoC funds can be requested.

Quantity Detail: This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (eg. .75 FTE hours and benefits for staff, utility types, monthly allowance for food and supplies) for each HMIS cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

Annual Assistance Requested: This is a required field. For each grant year, enter the amount funds requested for each activity.

Total Annual Assistance Requested: This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

Grant Term: The Grant Term is 1 year.

Total Request for Grant Term: Calculate this field based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields must be calculated once the required field has been completed and saved.

\* A quantity AND description must be entered for each requested cost.

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Equipment		
2. Software		
3. Services	The state of the s	
4. Personnel		
5. Space & Operations		
Total Annual Assistance Requested:		
Grant Term:		1 Year
Total Request for Grant Term:		

#### XVI. Match

Match (cash or in-kind) must be used for eligible program costs only and must be equal to or greater than 25% of the total grant request for all eligible costs under the CoC Program interim rule with the exception of leasing costs.

Type of Commitment: Enter Cash (\$) or In-kind (non-cash) to denote the type of contribution that describes this match or leveraging commitment.

Type of Source: Enter Private or Government to denote the source of the contribution. The Neighborhood Stabilization Program (NSP) and HUD-VASH (VA Supportive Housing program) funds may be considered Government sources. Project applicants are encouraged to include funds from these sources, whenever possible.

Name the Source of the Commitment: Be as specific as possible (e.g. HHS PATH Grant, Community Service Block Grant, Hilton Foundation Grant to End Chronic Homelessness) and include the office or grant program as applicable. Enter the name of the entity providing the contribution. It is important to provide as much detail as possible so that the local HUD office can quickly identify and approve of the commitment source.

Date of Written Commitment: Enter the date of the written contribution.

Value of Written Commitment: Enter the total dollar value of the contribution.

Type of Commitment	Type of Source	Name the Source of the Commitment	Date of Written Commitment	Value of Written Commitment
Cash	Private	Inland Empire United Way	8/15/20	\$43,280
	· · · · · · · · · · · · · · · · · · ·			
		- MANAGE		
			Louis Million	

XVII. Summary	
Budget Instructions:	
The following information summarizes the	funding request for the total term of the project.
	and in-kind match and administrative costs must be
entered in the available fields below.	
Eligible Costs	Total Assistance Requested for 1 year Grant Term
Leased Units	
Leased Structures	
Rental Assistance	
Supportive Services	\$159,691.50
Operating	
HMIS	
Sub-total Costs Requested	\$158,691.50
Admin.	\$14,426.50
Total Assistance plus Admin Requested	\$173,118
Cash Match	\$43,280
In-Kind Match	
Total Match	\$43,280
Total Budget	\$216,397.50
Will the project generate program income this grant?  Yes □ No ✓	e as described in 24 CFR 578.97 that will be used as Match for
If Yes, describe the source of the programused as Match for this project.	n funds and estimate the amount of program income that will be

Please provide reasonable cost to the community for the number of households served and the type of housing and services being provided.

#### **Cost Efficiency Table**

A.	In the column to the right, please enter the Projected Number of Units	N/A
В.	In the column to the right, please enter the Annual Project Cost (All HUD and Cash Match)	
C.	In the column to the right, please enter the Annual Cost per Unit (divide B by A)	

#### Appendix I

#### A. Definitions

- Centralized or coordinated assessment system means a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.
- Chronically homeless. (1) An individual who: (i) Is homeless and lives in a place not 2. meant for human habitation, a safe haven, or in an emergency shelter; and (ii) Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years; and (iii) Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability; (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.
- 3. CoC Bonus Project. A CoC is eligible to apply for up to 5 percent of its Final Pro Rata Need (FPRN), or 25 percent of the CoC's Preliminary Pro Rata Need (PPRN) minus its ARD, whichever is greater. New projects created through the CoC Bonus must meet the project eligibility and quality threshold requirements established by HUD in Sections V.C.3.b and V.C.3.c of this NOFA. To be eligible to receive a bonus project, a CoC must demonstrate that it ranks projects based on how they improve system performance as outlined in Section VII.B.1.a of the FY CoC NOFA.

- 4. Continuum of Care and Continuum means the group organized to carry out the responsibilities required under this part and that is composed of representatives of organizations, including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate.
- 5. DedicatedPLUS project. A permanent supportive housing project where 100 percent of the beds are dedicated to serve individuals with disabilities and families in which one adult or child has a

disability, including unaccompanied homeless youth, that at intake are:

- (1) experiencing chronic homelessness as defined in 24 CFR 578.3;
- (2) residing in a transitional housing project that will be eliminated and meets the definition of chronically homeless in effect at the time in which the individual or family entered the transitional housing project;
- (3) residing in a place not meant for human habitation, emergency shelter, or safe haven; but the individuals or families experiencing chronic homelessness as defined at 24 CFR 578.3 had been admitted and enrolled in a permanent housing project within the last year and were unable to maintain a housing placement;
- (4) residing in transitional housing funded by a Joint TH and PH-RRH component project and who were experiencing chronic homelessness as defined at 24 CFR 578.3 prior to entering the project;
- (5) residing and has resided in a place not meant for human habitation, a safe haven, or emergency shelter for at least 12 months in the last three years, but has not done so on four separate occasions; or
- (6) receiving assistance through a Department of Veterans Affairs (VA)-funded homeless assistance program and met one of the above criteria at initial intake to the VA's homeless assistance system.
- 6. Developmental disability means, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002):

(1) A severe, chronic disability of an individual that—

(i) Is attributable to a mental or physical impairment or combination of mental and physical

impairments;

- (ii) Is manifested before the individual attains age 22;
- (iii) Is likely to continue indefinitely;
- (iv) Results in substantial functional limitations in three or more of the following areas of major life activity:
  - (A) Self-care;
  - (B) Receptive and expressive language;
  - (C) Learning;
  - (D) Mobility;
  - (E) Self-direction;
  - (F) Capacity for independent living;
  - (G) Economic self-sufficiency.
- (v) Reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.
- (2) An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting three or more of the criteria described in paragraphs (1)(i) through (v) of the definition of "developmental disability" in this section if the individual, without services and supports, has a high probability of meeting these criteria later in life.
- Domestic Violence (DV) Bonus. In the FY 2019 CoC Program Competition, CoCs will be able 7. to apply for a DV Bonus for Permanent Housing-Rapid Rehousing (PH-RRH) projects, Joint TH and PH-RRH component projects, and SSO projects for coordinated entry (SSO-CE). Except as provided in Section II.B.1.a of this NOFA, a CoC may apply for up to 10 percent of its Preliminary Pro Rata Need (PPRN), or a minimum of \$50,000, whichever is greater, or a maximum of \$5 million, whichever is less, to create DV Bonus projects. A CoC may apply for the following types of projects: a. Rapid Re-housing (PH-RRH) projects that demonstrate trauma-informed, victimcentered approaches. b. Joint TH and PH-RRH component projects as defined in Section III.C.2.n of this NOFA that demonstrate traumainformed, victim-centered approaches. c. SSO Projects for Coordinated Entry (SSO-CE) to implement policies, procedures, and practices that equip the CoC's coordinated entry to better meet the needs of people experience homelessness who are survivors of domestic violence, dating violence, or stalking (e.g., to implement policies and procedures that are trauma-informed, clientcentered or to better coordinate referrals between the CoC's coordinated entry and the victim service providers coordinated entry system where they are different).

- 8. Expansion. The process by which a renewal project applicant submits a new project application to expand its current operations by adding units, beds, persons served, services provided to existing program participants, or in the case of HMIS, increase the current HMIS activities within the CoC's geographic area. For the new expansion project to be selected for conditional award the renewal project application must also be selected for conditional award. DV Bonus funds can only be used to expand an existing renewal project if the expansion project is dedicated to survivors of domestic violence, dating violence, or stalking who qualify under paragraph (4) of the definition of homeless at 24 CFR 578.3. For projects that are expanding their current CoC Program-funded project, project applicants will be required to submit three project applications: (1) the renewal project application that will be expanded; and (2) a new project application with just the expansion information; and (3) a renewal project application that incorporates the renewal and new expansion activities and the combined budget line items for the renewal and the new expansion.
- 9. A Homeless Management Information System (HMIS) is a local information technology system used 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. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards.
- 10. Homelessness (Paragraph 4) Any individual or family who: (i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life- threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; (ii) Has no other residence; and (iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.
- Joint TH and PH-RRH Component Project. Joint TH and PH-RRH Component Project. The Joint TH and PH-RRH component project combines two existing program components—transitional housing and permanent housing-rapid rehousing—in a single project to serve individuals and families experiencing homelessness. Recipients should prioritize those with the highest needs using an evidence-based approach designed to provide stable housing and services that, to the greatest extent possible, move the participant towards self-sufficiency and independence. Program participants may only receive up to 24-months of total assistance. For more information about Joint TH and PH-RRH component projects, see Section V.C.3 of the FY 2019 CoC NOFA.

If funded, HUD will limit eligible costs as follows, in addition to other limitations found in 24 CFR part 578: (1) leasing of a structure or units, and operating costs to provide transitional housing; (2) short- or medium-term tenant-based rental assistance on behalf of program participants to pay for the rapid rehousing portion of the project; (3) supportive services; (4) HMIS; and (5) project administrative costs. When a program participant is enrolled in a Joint TH and PH-RRH component project, the recipient or subrecipient must be able to provide both components, including the units supported by the transitional housing component and the tenant-based rental assistance and services provided through the PH-RRH component, to all participants. A program participant may choose to receive only the transitional housing unit, or the assistance provided through the PH-RRH component, but the recipient or subrecipient must make both types of assistance available. Additionally, if CoC Program funds are not being requested for both TH and PH-RRH units, the project application must still describe the number of TH and PH-RRH units that will be utilized by the project, if selected for conditional award, and provide details in the project description of how TH and PH-RRH assistance will be provided.

- 12. Permanent Supportive Housing. Permanent supportive housing means permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently.
- 13. Physical Disability. A physical disability means a physical impairment which is (a) expected to be of long, continued and indefinite duration, (b) substantially impedes an individual's ability to live independently, and (c) of such a nature that such ability could be improved by more suitable housing conditions. See-https://www.onecpd.info/resources/documents/FinalHMISDataStandards\_March2010.p df.
- 14. Rapid Re-Housing. Rapid Re-Housing places a priority on moving a family or individual experiencing homelessness into permanent housing as quickly as possible, ideally within 30 days of a client becoming homeless and entering a program.

7150037



#### 6006490700238111093





all owned by law. This date would be shown on the front of the card. If no date la shown, then the card will not expire, nor will it contain maintenance teas for non-use. This card is issued and administered by SVM, LP. Cards sold for promotional purposes may contain an expiration of

be replaced on a lost, stoken or damaged card only if the account number and remaining yetue on the cald can be verified. Canda with low balances fust or not function due to restrictions at certain pumps with be refunded. To inquire about a refund, report at lost, stoken, damaged or non-working card, call 1-817-706-2047. Use of this cert constitutes acceptance of the Pollowing terms: The 768 CBI Card is redeemable for subhorked products and services only at 768, Phillips 668 and Concoos stores. This card is not redeemable for each or credit, except where required by law. This gift card is not a credit card, debit card, essel account or deposit account. Remaining well-e may

• Giff Card Balance: Check your receipt or visit www.76giffcard.com Inside Payment:
 Gift Cord Bolons:

Present card to cashler inside the store Insert card and follow instructions at the pump

ලාගන 🛍 🎉

7600217

IWAS

GH Cstd Balance: Check your receipt or visit www.76gificard.com Insert card and follow instructions at the pump Present card to cashler inside the store

2801118220070948008

this card is lessued and administered by SVAI. LP. Carda sold for promotional purposes may confain an acptailon And year when the card would be shown on the front of the card. If no date is shown, then the card will not oxpine, nor

and tervices only at 76%, Phillips 66% and Conoco® sloves. This eard is not redeemable for cash or credit, axoopt where required by the "This first of ten for and a credit send, cabit and, seest account of deposit account Remarkly selves on the card can be replaced on a lost, solver or temperated on the processor in the send can be replaced on a lost, solver or temperate or the card can be replaced on the send on the send of the send

Use of this cord constitutes acceptance of the following lerms; The 768 Gift Card is redeemable for authorized products



Pay at the Pump:



For remaining card value, please visit www.76giftcard.com

7650037

Pay at the Pump:



#### 2201118220020679009



This cord is Issued and administered by SVAA, LP, Cards sold for promotional purposes may contain an expiration date, it allowed by law. This date would be shown on the front of the card. If no dete is shown, then the card will not expire, not

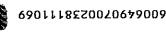
about a refund, report a lost, stolen, demaged or non-worlding card, call 1-877-706-2047. required by law. This gift card is not a credit card, debit card, asset account or deposit account. Remaining value may be replaced on a lost, stolen or damaged card only if the account mumber and remaining value on the card can be verified. Cards with low balances hast do not tunction due to restrictions at cardin pumps will be refunded. To inquire rAjoss puly at 169. Phillips 669 and Conoco@ stores. This card is not recentable for cash or credit, except where Use of this card constitutes acceptance of the following terms: The 76% Gift Card is redeemable for authorized products

 Inside Payment:
 Giff Card Balance: Pay at the Pump:

Insert card and follow instructions at the pump Present card to cashler inside the store Check your receipt or visit www.Vegificard.com



1120091 MVZ





This card is issued and administered by SWA, LP. Caids abid for promotoral purposes may contain an expiration date, nor all allowed by law. This date would be shown on the find to the card, if allowed by law, if its date would be shown on the find to the card, if one is shown, than the card Will not expire, nor

For remaining card value, please visit www.76giftcard.com

Use of this cert constitutes acceptance of the following terms: The Y&& Card is redeemable for authorised brudest and services only at Y&& Phillipse and services only at Y&& Phillipse & Phillipse &

Check your receipt or visit www.Y6giffcard.com Giff Card Balance: Present card and follow instructions at the pump ារព១របស្តទដ្ឋ ទវ · Pay at the Pump:



For remaining card value, please visit www.76giftcard.com

For remaining card value, please visit www.76giftcard.com



1201118220070648008

will it contain maintenance tees for non-use. This card is issued and administered by SVM, LP. Cards sold for promotional purposes may contain an explication to dete, nor allowed by Isw. This dete would be shown on the front of the card. If no date is shown, then the card will not expire, nor the card. If no date is shown, then the card will not expire, nor

about a refund, report a lost, stolen, damaged or non-working card, celt 1-877-706-2047. and services only at 760, Phillipp 660 and Concoob stones. This seal is not determible for cash or recedit, soxogi where required V law in 159 and soxod to 160 and 16 Use of Inis card constitutes acceptance of the following terms: The TGO Gifl Card is redeemable for authorized products

ecili Card Balanca:

Pay of the Pump:

Ditections;

- Insert card and follow instructions at the pump Present card to cashler inside the atore Check your receipt or visit www.Vegificard.com



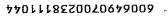
1170091

Ley at the Pump: Directions:

7 F S D O 9 Y

MAS

· Pay at the Pump:





law. This date would be shown on the front of the card. If no date is shown, then the card will not expire, not This card is issued and administered by SVM, LP, Cards sold for promotional purposes may contain an expiration date, about a tefund, report a lost, sloten, damaged or non-working card, call 1-677-706-2047.

Use of this card constitutes acceptance of the following lemms: The 780 GM Card is redsemable for authorized products and services only at 780 GM Card is redsemable for authorized products and services only at 780s. Philips 560 and Conocco Satives. A his sent is not determable for exsort recent Kernaining value may be teplaced on the 1954, solven or demaged card only if the account number and remaining value may be teplaced on a lost, solven or demaged card only if the account number and remaining value on the card can be be teplaced on a lost, solven or demaged card only if the account number and remaining value may be to the card on the card only if the account number and remaining value may be teplaced on the card can be replaced to the card of the

Insert card and follow instructions at the pump Present card to cashler haide the store Check your receipt or visit www.76gilfcard.com



For remaining card value, please visit www.76giftcard.com



### 9501118520070649009



ed by iaw, This date would be shown on the front of the cerd, if no date is shown, then the card will not expire, nor ontain maintenance tees for non-use. This card is issued and administered by SVM, LP, Cards sold for promotional purposes may contain an expiration date, about a refund, report a lost, stolen, damaged or non-working card, call 1-877-706-2047.

be replaced on a fost, stoken or demaged card only if the account number and remaining value on the card can be verified. Cards with low balances to tearlan purpor will be refunded. To inquire equired by law. This gift card is not a credit card, debit card, asset account or deposit account. Remaining value may Use of this card constitutes acceptance of the following torms: The 768 GHt Card is redeemable for authorized products and services only at 768, Phillips 698 and Conocc® stores. This card is not redeemable for cash or credit, except where

Insert card and follow instructions at the primp Present card to cashler Inside the store Check your receipt or visit www.Yegilfread.com Inside Payment;
 Gift Card Balance; Pay at the Pump:

if allowed by faw. This date would be shown on the front of the card, if no date is shown, than the card will not expire, not This card is issued and administered by SVM, LP, Cards sold for promotional purposes may contain an expiration date,

For remaining card value, please visit www.76giffcard.com

8201118220070649008

be replaced on a lost, stoken or damaged card only if the account number and remaining value on the card can be yeafled, Carda with lost-balances that do not function due to restrictions at certain pumps will be refunded. To inquive about a refund, report a lost, stoken, damaged or non-working card, call 1-817-706-2047. equired by law. This gift card is not a credit card, debit card, asset account or deposit account. Remaining value may Use of this card consiliutus acceptance of the following terms: The 760 Gift Card is redeemable for subjorized products and services only at 760, Phillips 660 and Conoco@stores. This card is not redeemable for cash or credit, except where

Check your receipt or visit www.76giffcard.com

Insert card and follow instructions at the pump Present card to cashler inside the store



For remaining card value, please visit www.76giffcard.com

For remaining card value, please visit www.76giffcard.com

1170007

### WAS

### 8711118250070049009



71500217

WAS

Directions:

1600217

WAS

"GSS-LEGU LOS SERS GOURDALLISEUS UNE INC. DOM-P.25"

This card is issued and administered by SVM, LP, Cards sold for promotional purposes may contain an expire front of the card. If no date is shown, then the card will not expire, nor if allowed by law, This date would be shown on the front of the card. If no date is shown, then the card will not expire, nor

Use of this card couplings acceptance of the blooking lorms: The 156 did End is redeemable for early originate of the blooking berns: The 156 did End is tedeemable for each or certification of the card compared to the second or determine the second or despois account. Remaining value on the card is not a credit card, seet account or despois account. Remaining value on the card can be been constructed to the card or or the card can be the card or the card can be account tumber and remaining value on the card can be occurred tumber and remaining value on the card can be seen account or the card can be card or the card can be account tumber with the second can be card to the card can be account to the card can be accounted to the card can be card to the card can be accounted to the card can be card to the card to the card card to the card to the card to the card to the card card to the card t

Pay at the Pump:

- Pay at the Pump:
Insend card end follow instructions at the pump
Pessant card to cashler inside the store
Pessant card to cashler inside the store
Citil Card Balance:
Citil Card Balance:



Use of first card constitutes acceptance of the following terms: The 765 GH Clard is redeemable for eath or earlier exceptance of the following terms: The rad is not redesmable for each or creatly, except where and services only at 765, Philips 650 and Conncoop school savet area for some or the card can be be replaced on a lost; solden or damaged card only if the account number and remaining value may wentied. Cated with low balences that do not function due to restrictions at ordering turning and the returned of the card on the card can be solded. Cated with low balences that do not function due to restrictions at ordering value and soldering value may have a for the card on the card on the card of the restriction at the restriction of the res Check your receipt or visit www.78giftcard.com Pay at the Pump:
 Inside Payment;
 Giff Card Balance; teacht ceto to ceaulet lucide are 2006 gmuq arti se anottountani wolfot bne breo heari

8011118220070946006

The sard is issued and andministered by SWAI, LP. Ceate sold for promotional purposes may contain an explasion delic K albowed by lew. This date would be shown on the front of the card. If no date is shown, then the cent will not expire, not the best of the confinement of the second of the card. If no date is shown, then the card will not expired not



For remaining card value, please visit www.76giffcard.com

7150057



#### 0211118220070646006





il allowed by iaw. This dele would be shown on the front of the card. If no date is shown, then the card will not expire, not Tals card is issued and adminisfered by SVM, 1.P. Cards sold for promotional purposes may contain an expination date,

required by New. This gill can'd is not a creatif eard, thebit cearl, asset account in or aboosit account. Remaining value may be explaced on a lost, stoken or demanaged card only if the account account in ording yealise on the card can be wellfield. Cearls with low behandes that for not hundlon due to transferious at certain pumps will be refunded. To inquire about a relating typing will be refunded. To inquire about a relating typing register, so the contractions are cardior provided a relating typing will be relating to the contraction of the contraction Use of this card constitutes acceptance of the following terms: The 768 Gift Card is redeemable for suitorized products and services only all 768, Phillips 55% and Conoco® stores. This card is not redeemable for each or credit, except where

- Giff Card Balance: Check your receipt or visit www.Yegifficand.com

lusert cerd and follow instructions at the pump



6006490700238111143



will it contain maintenance fees for non-use. This card is issued and administered by SVM, LP. Cands sold for promotional purposes may contain an expiration dete, if no dete is shown, then the card will not expire, nor mail it amounts major the card will not be shown.

For remaining card value, please visit www.Y6giffcard.com

Use of this card constitutes acceptions of the oldbowing terms: The 180 Gift Card is redeemable for each or arother some seasons of the oldbowing terms: This card is card cardial to the card of the oldbowing terms of the oldbowing terms of the card of the oldbowing terms of the card of the card of the card of the card of the oldbowing terms of the card of the card

For remaining card value, please visit www.76giffcard.com

This card is lacued and administered by SVM, LP. Cerds sold for promotional purposes may contain an expiration dete, incr if allowed by law. This date would be shown on the front of the card. If no date is shown, then the card will not expire, nor

For remaining card value, please visit www.Y6giffcard.com

· Gift Card Balance: Directions; • Pay at the Pump;

Check your receipt or visit www.76giffcard.com Insert card and follow instructions at the pump Present card to cashier inside the store

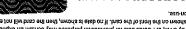


For remaining card value, please visit www.Y6giffcard.com

2120092



6006490700238111135



This cent ls issued and administered by SVM, LP. Cards cold for promotional purposes may contain an expiration affect, and is a sidewale is shown, then the card will not expire, not a sidowed by text. This date would be shown on the front of the card. If no date is shown, then the card will not expire, not about a refund, report a lost, stolen, damaged or non-working card, calt 1-877-705-2047.

L Cards with tow batances that do not function due to restrictions at certain pumps will be refunded. To Inquire Use of this cand constitutes acceptants of the lollowing termer; The 76® GRI Card is tedentable for subinorized products and services ently at 760 GRI Card is tedentable for subinorized branching services and the control of the con

Inside Payment Sey at the Pump;

Directions:

Insert card and follow instructions at the pump Present card to cashler inside the atore Check your receipt or visit www.76gificard.com

(താഗരാ) (22) 🙀

and services only at 76%, Philips 56% and Conoco% stores. This sacid is not redesmable for cash or credit, except where required to be replaced on a fost, acide not demanged cant only if the account instruction of esposit account. Nature on the card can be replaced on a fost, acide not demanged cant any if the account number and remaining value may be replaced can be replaced on a fost, acide not demanged cant any if the account number and remaining value may to require the replaced on a fost, acide or demanded of the result of Use of this card constitutes acceptance of the following terms: The 760 Giff Card is redeemable for sufficied products :eoueiea ozen ala Pay at the Pump:

7150097

WAS

7150037

WAS

will it contain maintenance fees for non-use.

Check your receipt or visit www.76giffcard.com Insert card and follow inside the store
Present card to cashier inside the store

7211118220070949009

about a refund, report a lost, stolen, demaged or non-working card, call 1-877-706-2047.

(030V03) (M)

For remaining card value, please visit www.76giftcard.com

7120097



#### 6111118220020679009

will it contain maintenance fees for non-use. This card is issued and administered by SVM, LP. Cards sold for promotional purposes may contain an explastion that is allower, then the card will not be shown, then the card will not be shown. The card will not be shown on the form of the best of the card will not be shown.

Use of this cord consitutes exceptance of this following larms: The 76@ Cift Card Is redeemable for surjointed products and services only at 76%. Phillips 66@ and Conocoo stores. This card is not redeemable for certain certain card in the card is not surjoint and considerable for the card is not a changed card only if the secound number and remaining value on the card cas he is explicated on as lost, solen or demanded card only it has excount number and remaining value on the card can be set registed to a lost, solen or demanded. To inquire very many that is lost, solen or demanded and the cardior of the cardior o

Check your receipt or visit www.76gificard.com · Giff Cerd Balance: Bay at the Pump:

Insert card and follow instructions at the pump Present card to cashler inside the store



This cetal is issued and administered by SVM, LP. Ceta's sold for promoloons purposes may contain an expiration date, if they law, This date would be shown on the front of the cetal. If no date is shown, then the card will not appire, nor will is contain maintenance least two manners. will it contain maintenance tees for non-use.

6006490700238111101

Varies of this cent constitutes acceptance of the following terms: special services that constitutes acceptance of the following terms: 198 580 581 tall a service that the constitutes acceptance of the following terms: 198 580 581 tall and the constitutes are serviced to the constitute of begal serviced. The special constitution of the special county the account terms of the service of this cent of any if the account number and termsinds while the statement of the service of this cent of any of the service of t

insert card and follow instructions at the pump Present card to cashter inside the slore Check your receipt or visit www.76giftcard.com · Giff Card Balance: Pay at the Pump: Inside Payment:

சைவ 💯 🔌

For remaining oard value, please visit www.Y6gliftcard.com

For remaining card value, please visit www.76giftcard.com