

Before Starting the Project Application

To ensure that the Project Application is completed accurately, ALL project applicants should review the following information BEFORE beginning the application.

Things to Remember:

- Additional training resources can be found on the HUD Exchange at <https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>.
- Program policy questions and problems related to completing the application in e-snaps may be directed to HUD the HUD Exchange Ask A Question.
- 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) in order to apply for funding under the Fiscal Year (FY) 2018 Continuum of Care (CoC) Program Competition. For more information see FY 2018 CoC Program Competition NOFA.
- To ensure that applications are considered for funding, applicants should read all sections of the FY 2018 CoC Program NOFA and the FY 2018 General Section NOFA.
- Detailed instructions can be found on the left menu within e-snaps. They contain more comprehensive instructions and so should be used in tandem with onscreen text and the hide/show instructions found on each individual screen.
- New projects may only be submitted as either Reallocated or Permanent Supportive Housing Bonus Projects. These funding methods are determined in collaboration with local CoC and it is critical that applicants indicate the correct funding method. Project applicants must communicate with their CoC to make sure that the CoC submissions reflect the same funding method.
- Before completing the project application, all project applicants must complete or update (as applicable) the Project Applicant Profile in e-snaps.
- HUD reserves the right to reduce or reject any new project that fails to adhere to (24 CFR part 578 and application requirements set forth in FY 2018 CoC Program Competition NOFA.

1A. SF-424 Application Type

1. Type of Submission:

2. Type of Application: New Project Application

If Revision, select appropriate letter(s):

If "Other", specify:

3. Date Received: 09/13/2018

4. Applicant Identifier:

5a. Federal Entity Identifier:

6. Date Received by State:

7. State Application Identifier:

1B. SF-424 Legal Applicant

8. Applicant

a. Legal Name: Action Ministries, Inc.

b. Employer/Taxpayer Identification Number (EIN/TIN): 58-2070427

	c. Organizational DUNS:	198895125	PLUS 4:	
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d. Address

Street 1: 1700 Century Circle NE

Street 2: Suite 200

City: Atlanta

County: DeKalb

State: Georgia

Country: United States

Zip / Postal Code: 30345

e. Organizational Unit (optional)

Department Name: Housing

Division Name: Housing

f. Name and contact information of person to be contacted on matters involving this application

Prefix: Mr.

First Name: Marvin

Middle Name:

Last Name: Nesbitt

Suffix: Jr.

Title: Senior Vice President

Organizational Affiliation: Action Ministries, Inc.

Telephone Number: (404) 881-1991

Applicant: Action Ministries, Inc.
Project: DeKalb Rapid Re-housing DV

198895125
168036

Extension:
Fax Number: (404) 881-1902
Email: mnesbitt@actionministries.net

1C. SF-424 Application Details

9. Type of Applicant: M. Nonprofit with 501C3 IRS Status

10. Name of Federal Agency: Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Title: CoC Program

CFDA Number: 14.267

12. Funding Opportunity Number: FR-6200-N-25

Title: Continuum of Care Homeless Assistance Competition

13. Competition Identification Number:

Title:

1D. SF-424 Congressional District(s)

14. Area(s) affected by the project (state(s) only): Georgia
(for multiple selections hold CTRL key)

15. Descriptive Title of Applicant's Project: DeKalb Rapid Re-housing DV

16. Congressional District(s):

a. Applicant: GA-007, GA-006, GA-009, GA-003, GA-005, GA-004, GA-010, GA-011, GA-012, GA-014

b. Project: GA-006, GA-005, GA-004
(for multiple selections hold CTRL key)

17. Proposed Project

a. Start Date: 10/01/2019

b. End Date: 09/30/2020

18. Estimated Funding (\$)

a. Federal:

b. Applicant:

c. State:

d. Local:

e. Other:

f. Program Income:

g. Total:

1E. SF-424 Compliance

19. Is the Application Subject to Review By State Executive Order 12372 Process? b. Program is subject to E.O. 12372 but has not been selected by the State for review.

If "YES", enter the date this application was made available to the State for review:

20. Is the Applicant delinquent on any Federal debt? No

If "YES," provide an explanation:

1F. SF-424 Declaration

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. Code, Title 218, Section 1001)

I AGREE: ☒

21. Authorized Representative

Prefix: Mr.

First Name: Steven

Middle Name: Kelley

Last Name: Henderson

Suffix:

Title: CEO/President

Telephone Number: (404) 881-1991
(Format: 123-456-7890)

Fax Number: (404) 881-1902
(Format: 123-456-7890)

Email: khenderson@actionministries.net

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/13/2018

1G. HUD 2880

Applicant/Recipient Disclosure/Update Report - Form 2880
U.S. Department of Housing and Urban Development
OMB Approval No. 2510-0011 (exp.11/30/2018)

Applicant/Recipient Information

1. Applicant/Recipient Name, Address, and Phone

Agency Legal Name: Action Ministries, Inc.

Prefix: Mr.

First Name: Steven

Middle Name: Kelley

Last Name: Henderson

Suffix:

Title: CEO/President

Organizational Affiliation: Action Ministries, Inc.

Telephone Number: (404) 881-1991

Extension:

Email: khenderson@actionministries.net

City: Atlanta

County: DeKalb

State: Georgia

Country: United States

Zip/Postal Code: 30345

2. Employer ID Number (EIN): 58-2070427

3. HUD Program: Continuum of Care Program

4. Amount of HUD Assistance Requested/Received: \$230,000.00

(Requested amounts will be automatically entered within applications)

5. State the name and location (street address, City and State) of the project or activity.

Refer to project name, addresses and CoC Project Identifying Number (PIN) entered into the attached project application.

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? Yes
(For further information, see 24 CFR Sec. 4.3).

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9. Yes

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/Local Agency Name and Address	Type of Assistance	Amount Requested / Provided	Expected Uses of the Funds
Department of Veterans Affairs	Grant	\$1,030,200.00	RRH, Prevention, Services

Note: If additional sources of Government Assistance, please use the "Other Attachments" screen of the project applicant profile.

Part III Interested Parties

You must disclose:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation	Financial Interest in Project/Activity (\$)	Financial Interest in Project/Activity (%)
NA	NA	NA	\$0.00	0%

Note: If there are no other people included, write NA in the boxes.

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional nondisclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that this information is true and complete.

I AGREE: ☒

Name / Title of Authorized Official: Steven Henderson, CEO/President

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 08/09/2017

1H. HUD 50070

HUD 50070 Certification for a Drug Free Workplace

Applicant Name: Action Ministries, Inc.

Program/Activity Receiving Federal Grant Funding: CoC Program

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.	e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
b. Establishing an on-going drug-free awareness program to inform employees --- (1) The dangers of drug abuse in the workplace (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted --- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a. thru f.
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;	

2. Sites for Work Performance.

The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)
Workplaces, including addresses, entered in the attached project application.
Refer to addresses entered into the attached project application.

I hereby certify that all the information stated herein, as well as any information provided in

X

the accompaniment herewith, is true and accurate.



Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Authorized Representative

Prefix: Mr.

First Name: Steven

Middle Name Kelley

Last Name: Henderson

Suffix:

Title: CEO/President

Telephone Number: (404) 881-1991
(Format: 123-456-7890)

Fax Number: (404) 881-1902
(Format: 123-456-7890)

Email: khenderson@actionministries.net

Signature of Authorized Representative: Considered signed upon submission in e-snaps.

Date Signed: 09/13/2018

CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file

the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate:

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Applicant's Organization: Action Ministries, Inc.

Name / Title of Authorized Official: Steven Henderson, CEO/President

Signature of Authorized Official: Considered signed upon submission in e-snaps.

Date Signed: 09/13/2018

1J. SF-LLL

DISCLOSURE OF LOBBYING ACTIVITIES
Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.
Approved by OMB0348-0046

HUD requires a new SF-LLL submitted with each annual CoC competition and completing this screen fulfills this requirement.

Answer "Yes" if your organization is engaged in lobbying associated with the CoC Program and answer the questions as they appear next on this screen. The requirement related to lobbying as explained in the SF-LLL instructions states: "The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action."

Answer "No" if your organization is NOT engaged in lobbying.

Does the recipient or subrecipient of this CoC grant participate in federal lobbying activities (lobbying a federal administration or congress) in connection with the CoC Program? No

Legal Name: Action Ministries, Inc.

Street 1: 1700 Century Circle NE

Street 2: Suite 200

City: Atlanta

County: DeKalb

State: Georgia

Country: United States

Zip / Postal Code: 30345

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I certify that this information is true and complete.

X

Authorized Representative

Prefix: Mr.
First Name: Steven
Middle Name: Kelley
Last Name: Henderson
Suffix:
Title: CEO/President
Telephone Number: (404) 881-1991
(Format: 123-456-7890)
Fax Number: (404) 881-1902
(Format: 123-456-7890)
Email: khenderson@actionministries.net
Signature of Authorized Representative: Considered signed upon submission in e-snaps.
Date Signed: 09/13/2018

2A. Project Subrecipients

This form lists the subrecipient organization(s) for the project. To add a subrecipient, select the  icon. To view or update subrecipient information already listed, select the view  option.

Total Expected Sub-Awards: \$31,519

Organization	Type	Sub-Award Amount
Women's Resource Center to End Domestic Violence	M. Nonprofit with 501C3 IRS Status	\$31,519

2A. Project Subrecipients Detail

a. Organization Name: Women's Resource Center to End Domestic Violence

b. Organization Type: M. Nonprofit with 501C3 IRS Status
If "Other" specify:

c. Employer or Tax Identification Number: 58-1698233

	* d. Organizational DUNS:	785629429	PLUS 4:	
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e. Physical Address

Street 1: 115 E Maple St.

Street 2:

City: Decatur

State: Georgia

Zip Code: 30030

f. Congressional District(s): GA-005
(for multiple selections hold CTRL key)

g. Is the subrecipient a Faith-Based Organization? No

h. Has the subrecipient ever received a federal grant, either directly from a federal agency or through a State/local agency? Yes

i. Expected Sub-Award Amount: \$31,519

j. Contact Person

Prefix: Ms.

First Name: Jean

Middle Name:

Last Name: Douglas
Suffix:
Title: Executive Director
E-mail Address: jean@wrcdv.org
Confirm E-mail Address: jean@wrcdv.org
Phone Number: 404-370-7670
Extension:
Fax Number:

2B. Experience of Applicant, Subrecipient(s), and Other Partners

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.

Through the provision of case management and homeless rapid rehousing services, this important project will be instrumental in ending homelessness for up to 24 women and their associated family members fleeing domestic violence while ensuring their safety and total family stability. Domestic violence has been an ugly issue in the State of Georgia for a number of years without sufficient resources to effectively address it. According to the Georgia Coalition Against Domestic Violence's 2017 Annual Report, over 700 Georgians were killed by a firearm in domestic violence incidents between 2010 and 2017. Additionally, Georgia ranked 14th in the nation for the rate at which women are killed by men. As women escape a domestic violence situation, homelessness often becomes a reality. Between 2010 and 2017, 2,372 victims and children did not receive shelter during their domestic violence episode due to lack of bed space. Action Ministries, Inc. has an extensive history of administering grants and providing housing services (including Transitional Housing, Permanent Supportive Housing, and Rapid Re-housing) to those experiencing homelessness including the hardest to serve populations requiring supportive housing. Since 1981, Action Ministries has been successfully providing housing services to the homeless population, beginning with emergency shelter combined with case management and supportive services, to adding HUD grant funded transitional housing in a number of counties throughout the State of Georgia in 1996.. Additionally, AMI has been effectively providing rapid re-housing services to homeless and potentially homeless individuals and families since September 2012 through grant programs such as the Department of Veterans Affairs' Supportive Services for Veteran Families (SSVF) program, as well as through the Georgia Department of Community Affairs (DCA) and the US Department of Housing and Urban Development's (HUD) Rapid Re-housing grant programs. Since beginning its Rapid Re-housing operations 6 years ago, AMI has successfully ended homelessness for over 3,000 individuals and families using its Facilitating Access to Intervention & Resource (FAIR) housing model. Clients served by AMI's Housing Department receive assistance with navigating complex systems and are connected to housing and other resources which facilitate opportunities for families to feel a sense of safety and security, make important family decisions leading to positive futures for each family member and establish new family traditions. Through incredible partnerships and effective relationships with key community service providers, AMI and its housing team are able to aid each of its program participants with realizing their human potential and eliminating barriers to their long-term success so they can reenter communities of their choice stronger than ever before.

Victims of domestic violence, both adults and children, are survivors of traumatic experiences. Being hurt by someone you love and is a part of your family can have serious consequences on how survivors of domestic violence think, act and feel. Research and experience have found that most or all adults

and children who experience domestic violence have a traumatic experience that impacts their thoughts, feelings or behaviors. For this reason, Action Ministries has partnered with the Women's Resource Center to End Domestic Violence (WRC) to aid those survivors who have found themselves homeless as a result of domestic violence. The WRC strives to meet the immediate and long-term needs of the diverse community of battered women and their children with programs that promote safety, compassion, connection, advocacy, and prevention.

Since 1985 the WRC has administered programs designed to ensure safety for victims of domestic violence as well as ensuring that they are placed on a track to recovery and long term success. Each year, WRC provides direct services to more than 6,000 women and children through its 24-hour domestic violence hotline, legal advocacy, community-based advocacy, financial education and assistance, basic needs assistance, support groups, and dating violence prevention and community education programs. The hotline advocates are available 24-hours each day to answer questions and provide peer-counseling support, safety planning, and referrals to victims of domestic violence. The WRC helps women reclaim their personal strengths, work toward their goals for the future and transition into a safe and stable living situation. To aid in bringing a quick resolution to the violence and bringing about stability, WRC legal advocates assist women in obtaining Temporary Protective Orders, criminal warrants, child support payments, and temporary custody of their children. Advocates help survivors explore legal options on a case-by-case basis. All of these services are provided and grounded in the WRC's Trauma Informed Case Management approach which goes beyond just addressing physical wounds that can result from domestic violence. Instead, it recognizes that when victims seek out the WRC, they have often been trapped for many years in a cycle of the traumatic experience and their coming to us offers us a critical moment to put them on a path to eliminating the domestic violence and associated trauma. WRC's Supervised Visitation Center and legal advocacy partnership with the DeKalb County Magistrate Court are considered national best practices by the US Office on Violence Against Women. In 2015, WRC was featured in a national documentary that aired on PBS. Created by Nicholas Kristof of The New York Times, A Path Appears featured organizations across the world that are using innovative approaches to create positive change in the lives of women and children.

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

Since 1996, when Action Ministries, Inc. (AMI) was a Super NOFA awardee for its Transitional Housing Program, AMI has administered federal grant funds from HUD. Since that time AMI's experience with managing federally funded grants has grown to include Emergency Solutions Grants (ESG), Community Development Block Grants (CDBG), and Housing Opportunities for Persons with AIDS (HOPWA) funding through the GA Department of Community Affairs as well as other local governments. Since 2012, AMI has been awarded and has successfully administered the Supportive Services for Veteran Families (SSVF) grant funded by the Department of Veterans Affairs (VA). AMI leverages these dollars with the support of over 700 congregations and individuals who provide over \$1,500,000 and foundations who back AMI's mission by awarding over \$500,000 of support.

The Women's Resource Center receives approximately 65% of its \$2 million operating budget from government grants and contracts, including national funds from the Office on Violence Against Women, state funds from the Criminal Justice Coordinating Council, and a local contract with DeKalb County. The WRCDV raises the remainder of its operating budget through an annual fundraising luncheon (15%), funds raised from individuals (10%), private and public foundations (9%) and earned income (1%). WRCDV has never undergone layoffs in our 32 year history nor have we terminated any programming for financial reasons.

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.

AMI is led by a CEO who reports to a volunteer Board of Directors, which has fiduciary responsibility for the agency as well as oversight of the CEO's performance. The CEO is supported by a Chief Programs Officer responsible for AMI's three program areas (Hunger Relief, Education & Housing). Each of the 3 divisions within AMI is led by either a Associate Vice President or a Director who has an experienced team of Program Managers (depending upon the level of responsibility) that manage the frontline staff for their respective areas. The financial management of AMI is directed by the VP of Administration in conjunction with the Director of Finance and Administration who is a CPA. All financial transactions are approved and recorded in AMI's Abila Accounting system using a system of checks and balances comprising of Accounts Payable, the Director of Finance and the CEO. Annually, AMI procures an independent accounting firm who conducts a financial audit which satisfies the requirements under OMB Circular A-133.

The Executive Director of the Women's Resource Center oversees the daily operations of the organization and manages an executive staff of six, who in turn manage the organization's other staff and major programs. These include a Safe House Director, Legal Services Director, Director of Children's Programming, Director of Outreach and Education, Director of Development, and Visitation Center Coordinator.

WRCDV maintains written accounting policies and procedures that include the following: All funds awarded under this program will be maintained in a manner that they will be accounted for separately and distinctly from other sources of revenue/funding. Our financial management system is able to track actual expenditures and outlays with budgeted amounts for each grant or subgrant. All grant assets are identified and tagged and a grant's uses are monitored by the Grant Compliance Officer or Grant Manager in the designated department. All grant files are kept for a minimum of seven years. WRCDV accounts are managed by professional accounting staff and WRCDV is audited annually.

4a. Are there any unresolved monitoring or audit findings for any HUD grants(including ESG) operated by the applicant or potential subrecipients (if any)? No

3A. Project Detail

1a. CoC Number and Name: GA-508 - DeKalb County CoC

1b. CoC Collaborative Applicant Name: DeKalb County, Georgia

2. Project Name: DeKalb Rapid Re-housing DV

3. Project Status: Standard

4. Component Type: PH

4a. Will the PH project provide PSH or RRH? RRH

5. Does this project use one or more properties that have been conveyed through the Title V process? No

6. Is this new project application requesting to transition from eligible renewal project(s) that were awarded to the same recipient and fully eliminated through reallocation in the FY 2018 CoC Program Competition? (Section II.B.2. and Section III.C.3.q. of the FY 2018 NOFA). No

3B. Project Description

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

AMI will serve as the primary applicant and administrator of the Rapid Rehousing services for the program participants. WRC will be the provider of direct case management services to participants before housing, during housing search, and after permanent housing is secured. As the AMI Rapid Rehousing team will be responsible for aiding survivors in identifying and securing safe permanent housing, WRC's case manager, through its Trauma Informed Case Management structure, will aid participants in securing temporary safe housing if necessary and connecting survivors to the services needed to ensure they are on track to end the traumatic domestic violence experience. WRC's trauma-informed services are client-centered and allow each individual to take the lead in building the life she and her family deserve. Case management services focus on understanding each individual and their life experience. Services are designed to accomplish the following: 1 Minimize possibilities of victimization and re-victimization, 2 Be hospitable and engaging to survivors, 3 Facilitate recovery, growth, resilience and healing, 4 Respect a woman's choices and control over her recovery, 5 Form a relationship based in partnership with the survivor, minimizing the power imbalance between advocate and survivor, 6 Emphasize women's strengths while focusing on trust and safety 7 Collaborate with expanded community supports like AMI and friends and families of survivors, etc. and 8 Provide culturally competent, sensitive services.

When clients make first contact with WRC, an initial trauma-sensitive screening and a trauma-sensitive intake are conducted. The intake process is informal, supportive, and client centered. Survivors are then aided with securing temporary safe housing that is secure and confidential. Next, survivors are referred to AMI for permanent housing through their Rapid Rehousing program. The AMI housing team, in collaboration with program participants, creates a plan to aid in the successful transition out of homelessness. Individuals and families are matched with competent Rapid Re-housing housing search staff who work with each and every member of the family unit to first identify safe housing options that meet industry standards for habitability and connect clients with the appropriate amount of rental assistance which fosters a sense of security for all household members. During this process, WRC case manager will work closely with AMI's Housing case manager to identify the best housing option for the survivor and establish rental assistance. The WRC case manager will continue to ensure that the survivor is connected to all services and resources necessary to ensure family safety and ongoing permanent housing.

2. 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 Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
New project staff hired, or other project expenses begin?	30			
Participant enrollment in project begins?	45			
Participants begin to occupy leased units or structure(s), and supportive services begin?	50			
Leased or rental assistance units or structure, and supportive services near 100% capacity?	90			
Closing on purchase of land, structure(s), or execution of structure lease?				
Rehabilitation started?				
Rehabilitation completed?				
New construction started?				
New construction completed?				

3. Will your project participate in a CoC Coordinated Entry Process? Yes

*** 4. Please identify the project's specific population focus.**

(Select ALL that apply)

Chronic Homeless	<input type="checkbox"/>	Domestic Violence	<input checked="" type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

5. Housing First

a. Will the project quickly move participants into permanent housing? Yes

b. Does the project ensure that participants are not screened out based on

the following items? Select all that apply.

Having too little or little income	<input checked="checked" type="checkbox"/>
Active or history of substance use	<input checked="checked" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="checked" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="checked" type="checkbox"/>
None of the above	<input type="checkbox"/>

c. Does the project ensure that participants are not terminated from the program for the following reasons? Select all that apply.

Failure to participate in supportive services	<input checked="checked" type="checkbox"/>
Failure to make progress on a service plan	<input checked="checked" type="checkbox"/>
Loss of income or failure to improve income	<input checked="checked" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="checked" type="checkbox"/>
None of the above	<input type="checkbox"/>

d. Will the project follow a "Housing First" approach? Yes
(Click 'Save' to update)

6. If applicable, describe the proposed development activities and the responsibilities that the applicant and potential subrecipients (if any) will have in developing, operating, and maintaining the property.

7. Will participants be required to live in a particular structure, unit, or locality, at some point during the period of participation? No

8. Will more than 16 persons live in one structure? No

3C. Project Expansion Information

1. Will the project use an existing homeless facility or incorporate activities provided by an existing project? No

4A. Supportive Services for Participants

1. 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.

Please check the box that you acknowledge you will be required to meet the above requirements if you have any qualifying participants.

X

2. Describe how participants will be assisted to obtain and remain in permanent housing.

WRC will refer survivors to AMI for permanent housing. The immediate goal is to ensure that they are stably housed within thirty (30) days. This includes but not limited to utilizing AMI's Landlord liaison to identify an appropriate unit that meets HUD's FMR and the client's budget and secure housing options that ensure continued safety. Clients will receive rental assistance that may include security deposits, 1st month's rent, utility assistance and ongoing rental assistance. The Landlord Liaison uses Georgiahousingsearch.org, Open Doors Atlanta and connections through housing resource fairs to identify and maintain a bank of available units. Once housed, case managers will work with the client through a Trauma Informed Case Management approach, going beyond just addressing physical wounds, to develop goals and identify and engage with service providers to ensure the client's success in permanent housing.

3. Describe specifically how participants will be assisted both to increase their employment and/or income and to maximize their ability to live independently.

Survivors are more likely to meet the goal of sustainable placement into permanent housing when they are also able to increase their income. AMI's Employment Specialist and WRC's case manager will work in tandem to ensure that each client is working to secure or increase their income from employment when appropriate. The Employment Specialist will guide and support the survivor on her path toward obtaining employment and career advancement. Specific case management services will vary depending on individual needs and goals and on program requirements and resources. The first component of

the economic stability plan is the assessment, the team's systematic approach to gathering information about the client's strengths, assets, needs, challenges, interests and goals. This information, in turn, will guide the development of the client's stability plan and all other case management activities. The next step with the survivor is career planning, which includes analyzing the skills, interests, and other assessment results, examining current labor market information, and working with the client to develop an employment plan that includes immediate steps to obtain employment and long-term strategies to secure the right career opportunities. The Employment Specialist will work in close collaboration with the client to develop a comprehensive service strategy or action plan. The client will be informed of all the workforce programs available as well as the support services available from community partners and other agencies. If the assessment identifies that educational opportunities would increase prospects of securing livable wage employment, the client will be assisted with identifying and enrolling in appropriate educational opportunities. The client will also be linked with transportation assistance, child care assistance, the Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamps), financial counseling, and other supportive services that enable them to find or maintain employment. As part of the coaching role, the Employment Specialist will provide career planning, resume review, interview skills, and/or provide links to related services. Regardless of any formal post-program requirements, the Employment Specialist will maintain frequent contact with the survivor after placement and at program exit to ensure that clients are receiving any needed job retention assistance or services. Follow-up will also expose or re-introduce clients to new workforce programs and services from which they could benefit.

**4. For all supportive services available to participants, indicate who will provide them and how often they will be provided.
Click 'Save' to update.**

Supportive Services		Provider	Frequency
Assessment of Service Needs		Applicant	Weekly
Assistance with Moving Costs		Non-Partner	As needed
Case Management		Applicant	Weekly
Child Care		Applicant	As needed
Education Services		Subrecipient	As needed
Employment Assistance and Job Training		Non-Partner	As needed
Food		Applicant	As needed
Housing Search and Counseling Services		Applicant	As needed
Legal Services		Partner	As needed
Life Skills Training		Applicant	Weekly
Mental Health Services		Non-Partner	As needed
Outpatient Health Services		Non-Partner	As needed
Outreach Services		Applicant	As needed
Substance Abuse Treatment Services		Non-Partner	As needed
Transportation		Applicant	As needed
Utility Deposits		Applicant	As needed

5. Please identify whether the project will include the following activities:



5a. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs? Yes

5b. Regular follow-ups with participants to ensure mainstream benefits are received and renewed? Yes

6. Will project participants have access to SSI/SSDI technical assistance provided by the applicant, a subrecipient, or partner agency? Yes

6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months. Yes

4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the  icon. To view or update a housing site already listed, select the  icon.

Total Units: 11

Total Beds: 24

Housing Type	Housing Type (JOINT)	Units	Beds
Scattered-site apartments (...)	---	11	24

4B. Housing Type and Location Detail

1. Housing Type: Scattered-site apartments (including efficiencies)

2. Indicate the maximum number of units and beds available for project participants at the selected housing site.

a. Units: 11

b. Beds: 24

3. Address

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, or if the address for scattered-site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

Street 1: 1700 Century Circle NE

Street 2: Ste. 200

City: Atlanta

State: Georgia

ZIP Code: 30345

***4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.
(for multiple selections hold CTRL key)**

139089 De Kalb County

5A. Project Participants - Households

Households Table

	Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
Number of Households	8	3	0	11
Characteristics	Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
Adults over age 24	8	2		10
Adults ages 18-24	0	1		1
Accompanied Children under age 18	13		0	13
Unaccompanied Children under age 18			0	0
Total Persons	21	3	0	24

Click Save to automatically calculate totals

5B. Project Participants - Subpopulations

Persons in Households with at Least One Adult and One Child

Characteristics	Chronicall y Homeless Non- Veterans	Chronicall y Homeless Veterans	Non- Chronicall y Homeless Veterans	Chronic Substanc e Abuse	Persons with HIV/AIDS	Severely Mentally III	Victims of Domestic Violence	Physical Disability	Developm ental Disability	Persons not represent ed by listed subpopul ations
Adults over age 24							8			
Adults ages 18-24							0			
Children under age 18							13			
Total Persons	0	0	0	0	0	0	21	0	0	0

Click Save to automatically calculate totals

Persons in Households without Children

Characteristics	Chronicall y Homeless Non- Veterans	Chronicall y Homeless Veterans	Non- Chronicall y Homeless Veterans	Chronic Substanc e Abuse	Persons with HIV/AIDS	Severely Mentally III	Victims of Domestic Violence	Physical Disability	Developm ental Disability	Persons not represent ed by listed subpopul ations
Adults over age 24							2			
Adults ages 18-24							1			
Total Persons	0	0	0	0	0	0	3	0	0	0

Click Save to automatically calculate totals

Persons in Households with Only Children

Characteristics	Chronicall y Homeless Non- Veterans	Chronicall y Homeless Veterans	Non- Chronicall y Homeless Veterans	Chronic Substanc e Abuse	Persons with HIV/AIDS	Severely Mentally III	Victims of Domestic Violence	Physical Disability	Developm ental Disability	Persons not represent ed by listed subpopul ations
Accompanied Children under age 18										
Unaccompanied Children under age 18										
Total Persons	0				0	0	0	0	0	0

5C. Outreach for Participants

1. Enter the percentage of project participants that will be coming from each of the following locations.

	Directly from the street or other locations not meant for human habitation.
	Directly from emergency shelters.
	Directly from safe havens.
100%	Persons fleeing domestic violence.
	Directly from transitional housing eliminated in a previous CoC Program Competition.
	Directly from the TH Portion of a Joint TH and PH-RRH Component project.
	Persons receiving services through a Department of Veterans Affairs(VA)-funded homeless assistance program (Eligible for JOINT projects if from TH or Emergency Shelters).
100%	Total of above percentages

2. Describe the outreach plan to bring these homeless participants into the project.

Outreach will be the primary responsibility of the WRCDV. Victims of domestic violence and dating violence who live in the service area will be aware of WRCDV's toll free Domestic Violence Hotline and the services offered via the Action Ministries and Women's Resource Center partnership and will be able to access those services as needed. The WRC will engage with other agencies and service providers in the service area and offer to participate in knowledge share with their teams and clients about domestic violence. These discussions build networks between WRCDV, Action Ministries and women, helping to break the silence surrounding domestic violence. Additionally, WRC and the AMI team will work to publicize services at CoC meetings, community events and venues that serve potential program participants. The team will also facilitate outreach to those households affected by domestic violence through ensuring that local school officials and other service agencies are aware of the project and understand how to refer potential victims for services. Outreach brochures and posters will also be distributed at local churches, grocery stores, local shelters, DFCAS Offices and APS (Adult Protective Services). Both AMI and WRC will collaborate with Coordinated Entry to ensure that all referrals receive the services.

6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 30, 2020? Yes

2. What type of CoC funding is this project applying for in the 2018 CoC Competition? DV Bonus

Only RRH, SSO and JOINT component types can apply for this funding


3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 1 Year

*** 5. Select the costs for which funding is being requested:**

Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
HMIS	<input type="checkbox"/>

6E. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the  icon. To view or update information already listed, select the  icon.

Total Request for Grant Term:			\$142,344
Total Units:			11
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	GA - Atlanta-Sandy Springs-Roswell, G...	11	\$142,344

Rental Assistance Budget Detail

Instructions:

Type of Rental Assistance: Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (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.

Metropolitan or non-metropolitan fair market rent area: This is a required field. Select the FY 2016 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 rents in the chart below.

Size of Units: These options are system generated. 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 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <http://www.huduser.org/portal/datasets/fmr.html>.

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

Total Request: This column populates 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 are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

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

All total fields will be calculated 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>

Type of Rental Assistance: TRA

Metropolitan or non-metropolitan fair market rent area: GA - Atlanta-Sandy Springs-Roswell, GA HUD Metro FMR Area (1301399999)

Size of Units	# of Units (Applicant)		FMR Area (Applicant)		12 Months			Total Request (Applicant)
SRO		x	\$614	x	12		=	\$0
0 Bedroom		x	\$818	x	12		=	\$0
1 Bedroom	2	x	\$858	x	12		=	\$20,592

2 Bedrooms	5	x	\$990	x	12	=	\$59,400
3 Bedrooms	4	x	\$1,299	x	12	=	\$62,352
4 Bedrooms		x	\$1,599	x	12	=	\$0
5 Bedrooms		x	\$1,839	x	12	=	\$0
6 Bedrooms		x	\$2,079	x	12	=	\$0
7 Bedrooms		x	\$2,319	x	12	=	\$0
8 Bedrooms		x	\$2,558	x	12	=	\$0
9 Bedrooms		x	\$2,798	x	12	=	\$0
Total Units and Annual Assistance Requested	11						\$142,344
Grant Term							1 Year
Total Request for Grant Term							\$142,344

Click the 'Save' button to automatically calculate totals.

6F. Supportive Services Budget

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 service.

Eligible Costs: The system populates a list of eligible supportive services for which funds can be requested. The costs listed are the only 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 in 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" and limits HUD's understanding of what is being requested. Failure to enter adequate 'Quantity AND Detail' may result in conditions being placed on an award and a delay of grant funding.

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 is automatically calculated based on the sum of the annual assistance requests entered for each activity.

Grant Term: This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

Total Request for Grant Term: This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated 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>

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

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management	1.03 FTE Case Manager Salary & Benefits (.53 FTE AMI Case Manager @ \$41,509 & .50 FTE WRC Case Manager at \$52,000)	\$46,000
4. Child Care	\$546 in child-care services through licensed child-care providers for children in 11 households experiencing homelessness	\$6,000
5. Education Services	\$600 for CNA or similar training for 6 adults	\$3,600
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services		
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		

13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation	\$100 MARTA credit allocated for 11 households (\$1,100); 3-\$14 MARTA weekly cards for 10 households (\$420); and Case Manager mileage (943 miles per month for 12 months @ \$.545/mile for .53 AMI CM and .50 WRC CM = \$6,167)	\$7,687
16. Utility Deposits	\$400 estimated per household for 10 households, to include electric, gas, and water deposits	\$4,000
17. Operating Costs		
Total Annual Assistance Requested		\$67,287
Grant Term		1 Year
Total Request for Grant Term		\$67,287

Click the 'Save' button to automatically calculate totals.

6I. Sources of Match

The following list summarizes the funds that will be used as Match for the project. To add a Matching source to the list, select the icon. To view or update a Matching source already listed, select the icon.

Summary for Match

Total Value of Cash Commitments:	\$13,000
Total Value of In-Kind Commitments:	\$44,550
Total Value of All Commitments:	\$57,550

1. Will this project generate program income as described in 24 CFR 58.97 that will be used as Match for this grant? No

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Match	Type	Source	Contributor	Date of Commitment	Value of Commitments
Yes	In-Kind	Private	Atlanta Center fo...	08/07/2018	\$27,000
Yes	In-Kind	Private	Women's Resource ...	07/30/2018	\$300
Yes	In-Kind	Private	New Life Communit...	08/07/2018	\$5,250
Yes	In-Kind	Private	Open Doors	08/07/2018	\$12,000
Yes	Cash	Private	AMI Match Commitment	08/28/2018	\$13,000

Sources of Match Detail

1. Will this commitment be used towards match ? Yes
2. Type of commitment: In-Kind
3. Type of source: Private
4. Name the source of the commitment: Atlanta Center for Self-Sufficiency
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 08/07/2018
6. Value of Written Commitment: \$27,000

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Sources of Match Detail

1. Will this commitment be used towards match ? Yes
2. Type of commitment: In-Kind
3. Type of source: Private
4. Name the source of the commitment: Women's Resource Center
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 07/30/2018
6. Value of Written Commitment: \$300

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Sources of Match Detail

1. Will this commitment be used towards match ? Yes
2. Type of commitment: In-Kind
3. Type of source: Private
4. Name the source of the commitment: New Life Community Ministries
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 08/07/2018
6. Value of Written Commitment: \$5,250

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Sources of Match Detail

1. Will this commitment be used towards match ? Yes
2. Type of commitment: In-Kind
3. Type of source: Private
4. Name the source of the commitment: Open Doors
(Be as specific as possible and include the office or grant program as applicable)
5. Date of Written Commitment: 08/07/2018
6. Value of Written Commitment: \$12,000

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

Sources of Match Detail

-
- 1. Will this commitment be used towards match ?** Yes
- 2. Type of commitment:** Cash
- 3. Type of source:** Private
- 4. Name the source of the commitment:** AMI Match Commitment
(Be as specific as possible and include the office or grant program as applicable)
- 5. Date of Written Commitment:** 08/28/2018
- 6. Value of Written Commitment:** \$13,000

6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
1a. Acquisition			\$0
1b. Rehabilitation			\$0
1c. New Construction			\$0
2a. Leased Units	\$0	1 Year	\$0
2b. Leased Structures	\$0	1 Year	\$0
3. Rental Assistance	\$142,344	1 Year	\$142,344
4. Supportive Services	\$67,287	1 Year	\$67,287
5. Operating	\$0	1 Year	\$0
6. HMIS	\$0	1 Year	\$0
7. Sub-total Costs Requested			\$209,631
8. Admin (Up to 10%)			\$20,369
9. Total Assistance Plus Admin Requested			\$230,000
10. Cash Match			\$13,000
11. In-Kind Match			\$44,550
12. Total Match			\$57,550
13. Total Budget			\$287,550

Click the 'Save' button to automatically calculate totals.

7A. Attachment(s)

Document Type	Required?	Document Description	Date Attached
1) Subrecipient Nonprofit Documentation	No	501c3 Women's Res...	09/13/2018
3) Other Attachment(s)	No	AMI-WRC MOU	08/28/2018
2) Other Attachment(s)	No	AMI Match Commitment	08/28/2018

Attachment Details

Document Description: 501c3 Women's Resource Center

Attachment Details

Document Description: AMI-WRC MOU

Attachment Details

Document Description: AMI Match Commitment

7A. In-Kind MOU Attachment

Document Type	Required?	Document Description	Date Attached
In-Kind Match MOU	No	Dekalb DV In-Kind...	08/13/2018

Attachment Details

Document Description: Dekalb DV In-Kind Match

7D. Certification

A. For all projects:

Fair Housing and Equal Opportunity

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000(d)) and regulations pursuant thereto (Title 24 CFR part I), which state that no person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant receives Federal financial assistance, and will immediately take any measures necessary to effectuate this agreement. With reference to the real property and structure(s) thereon which are provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer, transferee, for the period during which the real property and structure(s) are used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

It will comply with the Fair Housing Act (42 U.S.C. 3601-19), as amended, and with implementing regulations at 24 CFR part 100, which prohibit discrimination in housing on the basis of race, color, religion, sex, disability, familial status or national origin.

It will comply with Executive Order 11063 on Equal Opportunity in Housing and with implementing regulations at 24 CFR Part 107 which prohibit discrimination because of race, color, creed, sex or national origin in housing and related facilities provided with Federal financial assistance.

It will comply with Executive Order 11246 and all regulations pursuant thereto (41 CFR Chapter 60-1), which state that no person shall be discriminated against on the basis of race, color, religion, sex or national origin in all phases of employment during the performance of Federal contracts and shall take affirmative action to ensure equal employment opportunity. The applicant will incorporate, or cause to be incorporated, into any contract for construction work as defined in Section 130.5 of HUD regulations the equal opportunity clause required by Section 130.15(b) of the HUD regulations.

It will comply with Section 3 of the Housing and Urban Development Act of 1968, as amended (12 U.S.C. 1701(u)), and regulations pursuant thereto (24 CFR Part 135), which require that to the greatest extent feasible opportunities for training and employment be given to lower-income residents of the project and contracts for work in connection with the project be awarded in substantial part to persons residing in the area of the project.

It will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), as amended, and with implementing regulations at 24 CFR Part 8, which prohibit discrimination based on disability in Federally-assisted and conducted programs and activities.

It will comply with the Age Discrimination Act of 1975 (42 U.S.C. 6101-07), as amended, and implementing regulations at 24 CFR Part 146, which prohibit discrimination because of age in projects and activities receiving Federal financial assistance.

It will comply with Executive Orders 11625, 12432, and 12138, which state that program participants shall take affirmative action to encourage participation by businesses owned and operated by members of minority groups and women.

If persons of any particular race, color, religion, sex, age, national origin, familial status, or disability who may qualify for assistance are unlikely to be reached, it will establish additional procedures to ensure that interested persons can obtain information concerning the assistance.

It will comply with the reasonable modification and accommodation requirements and, as appropriate, the accessibility requirements of the Fair Housing Act and section 504 of the Rehabilitation Act of 1973, as amended.

Additional for Rental Assistance Projects:

If applicant has established a preference for targeted populations of disabled persons pursuant to 24 CFR part 578 or 24 CFR 582.330(a), it will comply with this section's nondiscrimination requirements within the designated population.

B. For non-Rental Assistance Projects Only.

15-Year Operation Rule.

Applicants receiving assistance for acquisition, rehabilitation or new construction: The project will be operated for no less than 15 years from the date of initial occupancy or the date of initial service provision for the purpose specified in the application.

1-Year Operation Rule.

Applicants receiving assistance for supportive services, leasing, or operating costs but not receiving assistance for acquisition, rehabilitation, or new construction: The project will be operated for the purpose specified in the application for any year for which such assistance is provide

Where the applicant is unable to certify to any of the statements in this certification, such applicant shall provide an explanation.

Name of Authorized Certifying Official: Steven Henderson

Date: 09/13/2018

Title: CEO/President

Applicant Organization: Action Ministries, Inc.

PHA Number (For PHA Applicants Only):

I certify that I have been duly authorized by the applicant to submit this Applicant Certification and to ensure compliance. I am aware that any false, fictitious, or fraudulent

X

**statements or claims may subject me to
criminal, civil, or administrative penalties .
(U.S. Code, Title 218, Section 1001).**

☐

8B. Submission Summary

Applicant must click the submit button once all forms have a status of Complete.

Applicant must click the submit button once all forms have a status of Complete.

Page	Last Updated
1A. SF-424 Application Type	No Input Required
1B. SF-424 Legal Applicant	No Input Required
1C. SF-424 Application Details	No Input Required
1D. SF-424 Congressional District(s)	08/13/2018
1E. SF-424 Compliance	08/10/2018
1F. SF-424 Declaration	08/10/2018
1G. HUD 2880	08/10/2018
1H. HUD 50070	08/10/2018
1I. Cert. Lobbying	08/10/2018
1J. SF-LLL	08/10/2018
2A. Subrecipients	08/28/2018
2B. Experience	09/13/2018
3A. Project Detail	08/10/2018
3B. Description	09/13/2018
3C. Expansion	08/13/2018
4A. Services	09/13/2018
4B. Housing Type	08/28/2018
5A. Households	09/13/2018
5B. Subpopulations	No Input Required
5C. Outreach	09/13/2018
6A. Funding Request	08/13/2018
6E. Rental Assistance	08/28/2018
6F. Supp Srvcs Budget	09/13/2018
6I. Match	08/28/2018
6J. Summary Budget	No Input Required
7A. Attachment(s)	09/13/2018
7A. In-Kind MOU Attachment	08/13/2018
7D. Certification	08/13/2018

Applicant: Action Ministries, Inc.
Project: DeKalb Rapid Re-housing DV

198895125
168036

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IRS Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248358237
June 21, 2012 LTR 4168C E0
58-1698233 00000 00

00030209
BODC: TE

WOMEN MOVING ON INC
PO BOX 171
DECATUR GA 30031-0171



003415

Employer Identification Number: 58-1698233
Person to Contact: Mr. Kammerer
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your June 12, 2012, 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 March 1987.

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/efo 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.



MEMORANDUM OF UNDERSTANDING
between
Women's Resource Center to End Domestic Violence
and
Action Ministries, Inc.

This Memorandum of Understanding (hereinafter referred to as "MOU") is entered into by and between Action Ministries and the Women's Resource Center to End Domestic Violence (hereinafter referred to as "WRCDV") on August 28, 2018 and will cover the period of 1 October 2018 through 30 September 2019.

The purpose of this MOU is to establish a working relationship between WRCDV and Action Ministries, Inc., which are two entities that provide needed and necessary services to DeKalb County, Georgia. The purpose of Action Ministries Rapid Re-housing Program for clients served via the DeKalb Continuum of Care (CoC) is to assist clients with securing affordable stable housing and connections to quality support services and resources including employment, financial support, rental subsidy and other relevant services. The purpose of WRCDV is to help survivors of domestic violence in DeKalb County, Georgia to improve their safety by finding a safe place to stay, exercising their legal rights, exploring options and creating accountability for batterers..

The terms of this MOU are as follows:

- **Entire Understanding**

This Memorandum of Agreement sets forth the entire arrangement between the parties and supersedes all prior oral and written understandings, representation and discussion between the parties respecting the subject matter of this letter. No rights, obligations, or terms other than those expressly contained in this document are to be implied from this Letter of Agreement.

- **WRCDV Responsibility**

WRCDV's will serve as a referral source for Action Ministries to refer 22 households who are domestic violence survivors to AMI for housing placement services. Also, WRCDV will provide a case manager who through its Trauma Informed Case Management structure, will be aiding survivors in securing temporary safe housing through its safe house program, connecting survivors to the services necessary to ensure they are on the track to ending the traumatic domestic violence experience. Once intake has been completed by WRCDV staff,



survivors will be referred to Action Ministries for immediate permanent rehousing through their Rapid Rehousing program. During this process, WRCDV's case manager will work closely with AMI's Housing case manager to identify the best housing option for the survivor and establish rental assistance. The WRCDV case manager will also continue efforts to ensure that the survivor is connected to all services and resources necessary to ensure family safety and ongoing permanent housing. Survivors are assisted in obtaining Temporary Protective Orders, criminal warrants, child support payments, and temporary custody of their children. Advocates help survivors explore legal options on a case-by-case basis.

- **AMI Responsibility**

Action Ministries through its Rapid Re-housing services, its housing team will aid victims of domestic violence and their families who have been referred by the WRC in their efforts to successfully transition out of their domestic violence and homelessness situation and regain their ability to take control of their lives. Once an individual or family has been deemed eligible for AMI's Rapid Rehousing services, the immediate goal is to ensure that they are stably housed within the first thirty (30) days of their eligibility. This includes but not limited to identifying housing options that are located in neighborhoods that foster opportunities for continued safety, and positive growth and development. Additionally, survivors will be assisted with the following;

- Connecting participants to the medium-term rental assistance they need in order to secure stable housing,
- Security deposits
- 1st month's rent
- Utility assistance
- Ongoing rental assistance

This MOU is entered into with the understanding that each entity has the right to request an evaluation of the terms of this MOU at least quarterly, with the right to terminate the MOU with 30 days prior written notice.

- **Compensation for Services**

No compensation will be paid by either party to one another as it relates to services under this Agreement. However, as a sub grantee, WRCDV will be able to submit to AMI staff



approved monthly reports and other related documents which identify eligible expenses incurred as a result of service provision. These approved reports and other related documents will be used to ensure that the WRCDV is reimbursed monthly by the US Housing and Urban Development (HUD) who is the grant funding agency, for eligible expenses incurred as a result of service provision.

- **Governing Law**

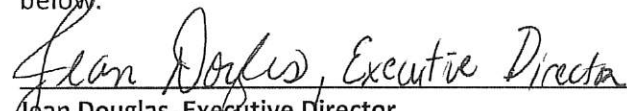
This Letter of Agreement shall be governed by and subject to the laws of the State of Georgia.

- **Unenforceability**

In the event any provision of this Letter of Agreement is held to be unenforceable, the unenforceability thereof shall not affect the remainder of this Letter of Agreement, which shall remain in full force and effect in accordance with its terms.

Each party shall perform its responsibilities and activities described herein as an independent entity with their own officer, agent, employee, or volunteer. Each party shall be solely responsible for the acts and omissions of its officers, agents, and employees. Nothing herein shall be considered as creating a partnership or joint venture between the parties.

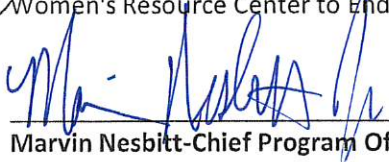
IN WITNESS WHEREOF, the parties have executed this agreement on the day and year written below.



Jean Douglas, Executive Director
Women's Resource Center to End Domestic Violence

8/28/2018

Date



Marvin Nesbitt-Chief Program Officer
Action Ministries, Inc.

8/28/18

Date



Breaking the Cycle of Homelessness
460 Edgewood Ave SE • Atlanta, GA 30312
phone: 404.879.8001 • fax: 404.873.3489
Atlantacss.org

August 7, 2018

Kelley Henderson
President & CEO
Action Ministries, Inc. (AMI)
1700 Century Circle NE, Suite 200
Atlanta, GA 30345

Subj: Commitment to the AMI's DeKalb County Domestic Violence Rapid Re-housing Program

Dear Mr. Henderson:

Atlanta Center for Self Sufficiency (ACSS) established in 2010 is the largest and most successful provider of Workforce Development resources to homeless men and women in Atlanta. We are extremely happy to provide this letter in support of AMI's DeKalb County Domestic Violence Rapid Re-housing program in partnership with the DeKalb County Continuum of Care (CoC). If funded, AMI will provide rapid re-housing services to approximately 20 households experiencing domestic violence and homelessness in DeKalb County.

As an industry leader in the Metro Atlanta area, ACSS has been improving the lives of residents in Metro Atlanta by providing workforce development, veteran services, housing assistance and social enterprise services. As a committed community partners, ACSS is committing to partner with AMI to provide CareerWorks workforce development services to include but are not limited to:

- Employment readiness training
- Personalized case management
- Job search assistance
- Professional clothing
- Transportation assistance
- Housing placement assistance

In support of AMI and the 15 individuals that are projected to be referred, ACSS commits to providing these services in-kind valued at \$27,000 per year.

Again, ACSS as a leader with a proven track record of high quality service delivery in workforce development is happy to partner with AMI in helping the DeKalb County CoC to meet its goal of reducing bringing stability to the lives of victims of domestic violence in DeKalb County.

Sincerely,

Dana Inman, President and CEO
Atlanta Center for Self Sufficiency



July 30, 2018

Marvin Nesbitt Jr., MSW
Senior Vice President
Chief Program Officer
Action Ministries, Inc.
1700 Century Circle NE
Suite 200
Atlanta, GA 30345

To Whom It May Concern:

It is my pleasure to write this letter supporting the important work of Action Ministries, Inc. (AMI) and their U.S. Department of Housing and Urban Development (HUD) Rapid Rehousing grant. I am excited about your pursuit of this opportunity because it aligns with our goal of connecting survivors to meaningful resources that help them rebuild safe and stable lives. Your intent to provide housing for survivors of domestic violence in DeKalb County is a critical piece of this complex puzzle.


Our mission at the Women's Resource Center to End Domestic Violence (WRC) is to create a society in which domestic violence no longer exists. We strive to meet the immediate and long-term needs of the diverse community of battered women and their children with programs that promote safety, compassion, connection, advocacy, and prevention. Each day we help survivors of domestic violence to improve their safety by finding a safe place to stay, exercising their legal rights, exploring options and creating accountability for batterers. Collaboration with community partners such as AMI supports our mission.

The Rapid Rehousing placement services being proposed by AMI would benefit survivors a great deal. While WRC provides temporary shelter for women and children, permanent housing is the end goal. Families managing the crisis of domestic violence face several challenges on the road to stability. Rapid rehousing support can smooth this often bumpy road, creating real opportunities for stability. For this reason, WRC is happy to collaborate with AMI and support their Rapid Rehousing grant application. As a collaborative partner and supporter, we commit to the following:

- Serve as a primary referral source for AMI
 - WRC will refer families to AMI for permanent housing placement. Our team will work closely with the AMI team to ensure successful permanent housing placements for each client with services including, but not limited to, joint case management, housing goal development, case conferencing, and resource connection.
- Conduct annual trainings on Identifying Victims of Domestic Violence and Working with Victims of Domestic Violence with an in-kind value of \$300.00.

Action Ministries, Inc. has a long history and track record of providing quality housing placement services around the State of Georgia including in DeKalb County under the guidance of the DeKalb County Continuum of Care. They have been instrumental in ending homelessness for many and would be instrumental in doing the same for the women and their children served by Women's Resource Center. Therefore, again, it is our pleasure to collaborate with AMI. If you have any questions or require further information, please contact me at (404) 688-9436 or barbara@wrcdv.org.

Sincerely,



Barbara Gibson
Safe House Director



newlife
COMMUNITY MINISTRIES

NEW LIFE COMMUNITY MINISTRIES

A REFUGE OF HOPE AND POSSIBILITIES

August 7, 2018

Directors:

Pastor Marlin D. Harris
Chairman/CEO

Michael Bryant
Executive Director

J. Gabriel Banks
Fulton County DA Office
Attorney-at-Law

Derin Dickerson
Alston & Byrd
Attorney-at-Law

Robert Dow
Intercontinental Hotels
Group (IHG)

B. Donovan Golden
Golden Associates

Tara Hardy
YMCA, Inc.

Scott Hughes
DeKalb Hospital
Authority

James Hutchinson
Georgia Lottery

Gabrielle King
Marketing
Entrepreneur

Gregory B. Levett
B. Levett & Company

Gerald McDowell
Lilburn Community
Improvement District

Deborah Spooner
Solid Source Realty

Revi Williams
Williams & Williams
Attorney-at-Law

Kelley Henderson
President & CEO

Action Ministries, Inc. (AMI)
1700 Century Circle NE, Suite 200
Atlanta, GA 30345

Subj: Commitment to the AMI's DeKalb County Rapid Re-housing Program

Dear Mr. Henderson:

New Life Community Ministries is extremely happy to provide this letter in support of AMI's DeKalb County Rapid Re-housing program in partnership with the DeKalb County Continuum of Care (CoC). If funded, AMI will provide rapid re-housing services to approximately 20 households experiencing domestic violence and homelessness in DeKalb County.

As a leader community services in the DeKalb County area, we have been improving the lives of residents in DeKalb County by providing workforce development, reentry support, housing assistance and substance abuse services. As a committed community partners, New Life is committing to partner with AMI to provide workforce development services to include but are not limited to:

- Employment readiness training and Job search assistance
- Personalized case management
- Professional clothing

In support of AMI and the 35 individuals that are projected to be referred, New Life commits to providing these services in-kind valued at \$5,250 per year.

Again, New Life as a leader with a proven track record of high quality service delivery in workforce development is happy to partner with AMI in helping the DeKalb County CoC to meet its goal of reducing homelessness in DeKalb County.

Sincerely,

Michael Bryant, Executive Director
New Life Community Ministries

WWW.NLCC-ATL.ORG | WWW.NEWLIFE-ATL.ORG

(770) 322-6262 | Ofc.
(770) 322-0554 | Fax

INFO@NEWLIFE-ATL.ORG

3592 FLAT SHOALS RD
DECATUR, GA 30034



Executive Committee

Aaron Goldman, Chair
Perennial Properties

Sara Haas, Secretary
Enterprise Community Partners

Kelley Henderson, Treasurer
Action Ministries

Board of Directors

Richard Berman
University of South Florida

Shea Campbell
CBRE

Brett Finkelstein
CF Real Estate Services

Robert LaChapelle
CBRE Finance

Marc Lefar
RentPath

Dave Loeffel
Highlands Residential

Jake Maguire
Community Solutions

John Marti
Hammond Residential Group

Lee McComb
Marketing Strategist

Sonny Morris
Morris, Manning & Martin

Ed Powers
Hope Atlanta

Matt Shulman
The Ardent Companies

Paul Vetter
Berkadia

Executive Director
Matthew Hurd, LCSW

321 W. Hill Street, Ste 2E,
Decatur, GA 30030
E info@opendoorsatl.org
OpenDoorsATL.org

August 7, 2018

Kelley Henderson
President & CEO
Action Ministries, Inc. (AMI)
1700 Century Circle NE, Suite 200
Atlanta, GA 30345

Subj: Commitment to the AMI's DeKalb County Domestic Violence Rapid Re-Housing Program

Dear Mr. Henderson:

Open Doors Atlanta which was born out of Atlanta Real Estate Collaborative (AREC) works to bring together people who desperately need housing and property owners who need tenants and have a desire to help eradicate the issue of homelessness in the State of Georgia. In doing so, Open Doors Atlanta works to identify property owners and gain their commitment to make available to homeless individuals and families decent, safe and affordable units while administering an application/rental process that forgives past rental indiscretions. We are extremely happy to provide this letter in support of AMI's DeKalb County Rapid Re-housing program in partnership with the DeKalb County Continuum of Care (CoC). If funded, AMI will provide rapid re-housing services to approximately 20 households domestic violence victims experiencing homelessness in DeKalb County.

As an industry leader in the Metro Atlanta area, Open Doors Atlanta has been working to improve the lives of residents in Metro Atlanta by developing partnerships with property owners, educating them on the homeless issue in the State of Georgia and gaining their commitments to make available units for homeless individuals and families. Additionally, Open Doors Atlanta has developed a technology solution for its affiliate agencies that give them the ability to quickly identify available units around the state and guiding clients through the application process from their smartphones. This technology makes housing search easy for agency staff and clients and is designed to end the homeless episode as quickly as possible for the client.

Action Ministries is a registered affiliate of Open Doors Atlanta and a user of Open Doors Atlanta's services to include;

- Use of Open Doors Atlanta's online property database
- Access and use of the Open Doors Atlanta property locator app
- Technical assistance and training

In support of AMI and the 20 households that are projected to be assisted with quickly identifying and securing stable housing, Open Doors Atlanta commits to providing these services in-kind valued at \$12,000 per year.



Executive Committee

Aaron Goldman, Chair
Perennial Properties

Sara Haas, Secretary
Enterprise Community Partners

Kelley Henderson, Treasurer
Action Ministries

Board of Directors

Richard Berman
University of South Florida

Shea Campbell
CBRE

Brett Finkelstein
CF Real Estate Services

Robert LaChapelle
CBRE Finance

Marc Lefar
RentPath

Dave Loeffel
Highlands Residential

Jake Maguire
Community Solutions

John Marti
Hammond Residential Group

Lee McComb
Marketing Strategist

Sonny Morris
Morris, Manning & Martin

Ed Powers
Hope Atlanta

Matt Shulman
The Ardent Companies

Paul Vetter
Berkadia

Executive Director

Matthew Hurd, LCSW

321 W. Hill Street, Ste 2E;
Decatur, GA 30030

[E info@opendoorsatl.org](mailto:info@opendoorsatl.org)

OpenDoorsATL.org

Again, Open Doors Atlanta as a leader with a proven track record of aiding agencies in quickly ending homelessness for individuals and families, we are happy to partner with AMI in helping the DeKalb County CoC to meet its goal of quickly ending homelessness for domestic violence victims in DeKalb County.

Sincerely,

A handwritten signature in blue ink, appearing to read "MH", followed by a horizontal line.

Matthew Hurd, LCSW
Executive Director