

A. Executive Summary

Completed by ambee@empowherment.org on 2/10/2023 8:21 AM

Case Id: 25046

Name: EmpowHERment - 2022/23

Address: *No Address Assigned

A. Executive Summary

PLEASE READ: Before proceeding with the application, please [CLICK HERE](#) to review the Notice of Funding Availability and additional application information.

Once you have reviewed this document, please continue with the application below.

AGENCY INFORMATION

A.1 Agency Name

EmpowHERment Community Center

A.2 Type of Organization

501(c)3 Nonprofit Corporation

If Other:

A.3 Mailing Address

13555 automobile blvd suite 300 clearwater, FL 34683

A.4 Contact Person

Ambee Stephens

A.5 Title

CEO

A.6 Telephone

(727) 276-5687

Phone Ext.

A.7 Email

ambee@empowherment.org

A.8 Unique Entity ID

35677777

A.8. BILLING/INVOICE CONTACT

A.9. Name

Ambee Stephens

PROJECT INFORMATION

A.15. Project Title

EmpowHERment's key to support

A.16. City of Largo Funds Requested

\$10,000.00

A.17. Type of Project:

- Downpayment Program Administration
- HUD-Certified Housing Counseling/Education
- Homeless Shelter Services
- Legal Services
- Non-Homeless Special Needs Services
- Public Facility Capital Project-Improvements
- Public Facility Capital Project-Facility Expansion
- Public Facility Capital Project-Add New Facility
- Other

If Other

A.10. Email

ambee@empowherment.org

A.11. Phone

7272765687

A.12. DATA/REPORTING CONTACT

A.12. Name

ambee stephens

A.13. Email

ambee@empowherment.org

A.14. Phone

7272765687

B. Project Information

Completed by ambee@empowherment.org on 2/10/2023 1:37 PM

Case Id: 25046

Name: EmpowHERment - 2022/23

Address: *No Address Assigned

B. Project Information

Please provide the following information.

B.1 Project Purpose and Description- Describe the project and explain why the project is needed. This description should include the entire project, in addition to portions of the project not requested for funding from the City.

Provide data in support of the request. Examples: Energy improvements will reduce utility costs by X% annually, which allows an estimated \$_____ in operating funds for direct client services; or data shows a waiting list of # of people/deficiency in available space of # capacity to serve Largo residents

Empowherment Community Center has always been good at community outreach with a focus on engaging the residents of Largo and empowering them through giving back, support services, donations, and volunteer opportunities.

EmpowHERment Community Center has always been good at community outreach with a focus on engaging the residents of Largo and empowering them through giving back, support services, donations and volunteer opportunities.

Project Description: This project aims to expand and renovate the existing closet space at EmpowHerment Community Center to better serve the Hygiene Pantry Program and provide more storage space for donations. The renovation will include the extension of the closet area, installation of new light fixtures, painting, and new wood flooring. In addition, the space will be equipped with hooks, racks, storage containers, and pantry shelving to increase the efficiency and functionality of the space.

Need Statement: EmpowHerment Community Center provides essential hygiene products and support to women in need. The center is also a hub for donations, but the current lack of adequate storage space limits its ability to accept and properly store bulky donations. The renovation and expansion of the closet space will address this need by providing more space to store essential hygiene products and donations, allowing the center to better serve its mission of improving the lives of women in need by providing access to its many wrap-around services.

B.2. Describe the use that will be made of requested funds from the City of Largo. If the funding is being requested for specific staffing positions or specific components of a larger project, please provide these details and explain how this funding request ties in with the entire project.

The City of Largo's grant funds will be utilized for expanding the Hygiene Pantry operated by Empowerment Community Center (ECC). The bulk of the funds will be used to complete the necessary physical renovations which will result in a larger space for storing small household appliances and other bulky items such as blankets, paper towels, toilet paper, and toys, among others. This will help to accommodate the increased demand for these items and ensure that they are readily available to women in need. In addition to freeing up more space in the main meeting rooms, the expanded pantry will also provide a convenient location for storing equipment used by the center. Finally, if EmpowHERment receives the award, ECC has the potential to leverage this investment to secure additional grant

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funds from the Bank of America Foundation to cover the coming year's operating expenses.

B.3 Describe how the project meets one or more of the City of Largo's 2023-2024 priorities:

1) To provide housing, homeless, and special needs services

2) To add, expand or improve public facilities that will provide supportive services to low-and moderate households

This project meets several of the City of Largo's 2023-2024 priorities by addressing the physical, mental, and emotional needs of women who are from a diverse ethnic background and are classified as low-income, economically disadvantaged, and at-risk. The EmpowHERment Community Center provides a range of support services, including temporary financial assistance, legal aid, healthcare assistance, housing, food, transportation, employment counseling, and emotional support, which addresses multiple aspects of a women's well-being. Finally, this project, with its unique focus on women's hygiene, is not commonly found in nearby cities, which adds value to the City of Largo, again making it the city of choice in the Tampa Bay area.

B.4.

Provide information to substantiate the project as an "Eligible Activity" (described in the application instructions).

Describe how the project, or the portion of the project funded by CDBG and/or SHIP, principally benefits low- and moderate-income Largo residents or low- and moderate-income areas in Largo (For CDBG clients/households whose annual income is less than or equal to 80% of area median income and for SHIP clients/households whose annual income is less than or equal to 140% of area median income).

EmpowHERments hygiene pantry project is eligible for a Community Development Block Grant (CDBG) because of its status as a public service, much like a food pantry. It provides crucial support to both homeless and non-homeless women with special needs. It also addresses a vital gap in the community's provision of essential products and services.

Both food pantries and hygiene pantries aim to assist those in need, but serve different demographics and offer different types of products. The women that the hygiene pantry serves meet the economic criteria outlined in the CDBG national objectives, making it an ideal candidate for funding through this grant program. By utilizing CDBG funds, the hygiene pantry project can provide a new essential support to those who need it most. This in turn will help build a stronger, more resilient community

B.5. Describe the project area and client base that will benefit from this project (e.g. Citywide, countywide, Community Redevelopment District, homeless population, persons with HIV/AIDS, etc.)

EmpowHERment Community Center serves all women and families in the Tampa Bay area who are looking to refresh their lives. Our Largo center serves the cities of Largo, Clearwater, and Highpoint. The women who live in these areas will continue to enjoy the benefits from this project. We serve women who are homeless, leaving Domestic Violence situations, and those females just released from the jail that is just five minutes from the center.

B.6. Project Area/Clients Served

Submitted projects must provide services and/or benefit City of Largo residents

a) Provide data on the clients/households served by your agency for the same or similar service as the current project will provide.

| Clients/Households Served Prior Year | Number of Clients | % Low/Mod Clients |
|---|-------------------|-------------------|
| Total Clients Served with the same or similar service from October - September of the prior year: | 983 | 75.00 % |

| | | |
|---|-----|---------|
| Of the Total Clients Served - the number of clients that were from Largo: | 342 | 70.00 % |
|---|-----|---------|

b) Provide data on clients/households to be served by your agency for the proposed project.

| Planned Program Year (Oct 2020-Sept 2021) | Number of Clients | % Low/Mode Clients |
|---|-------------------|--------------------|
| Total Estimated Clients/Households to be Served: | 1,100 | 75.00 % |
| Of the Total Estimated Served - number of Clients/Households from Largo | 422 | 70.00 % |

B.7. Client Eligibility:

a) Does this project ONLY serve any of the following groups (check off which group it will serve):

- Abused Children
- Battered Spouses
- Elderly Persons (62+)
- Homeless Persons
- Illiterate Adults
- Persons Living with AIDS
- Migrant Farm Workers
- Severely Disabled Adults
- This project is not limited to any of these groups.

b) If the project is NOT limited to serving one of the above groups, describe your agency's method for collecting demographic and income data from the clients served by this project. For new projects, explain what process will be used to ensure at least 51% of the clients served are below 80% of area median income.

To ensure program compliance and verify residency, EmpowHERment collects demographic and income data through a detailed intake form that follows the information requested on the HUD self-certification form. Clients can also use the HUD Self-Verification Form to self-certify their residency in Largo, Florida. This involves signing a declaration that states their residency at a specific address and providing supporting documentation such as a utility bill, lease agreement, driver's license or ID card, bank statement, credit card bill, property tax bill, or pay stub. These documents must be recent, usually within the last three months, and clearly show the client's name and Largo address.

c) If the project is limited to serving one of the above groups, describe how the demographic data (race/ethnicity) is collected (also required for reporting for CDBG-funded projects).

N/A

B.8. Project/Program Outcomes

Describe the expected performance outcomes from the proposed project and any relevant performance measures or outcome data related to prior experience by the agency for the same or similar project/program (e.g. 50% of clients moved from shelter to permanent housing and it is anticipated that the proposed project will enable the agency to increase this outcome to 60% moved into permanent housing). For homeless programs, the City will also pull data from PHMIS to review past outcomes.

The expected performance outcomes and measures for the Hygiene Pantry project aim to demonstrate its effectiveness in serving women in need. This year, the project expects to serve close to 350 Largo women, providing essential hygiene products and support. The success of the project will be measured not only by the number of women served, but also by the impact it has on the lives of those it does serve.

EmpowHERment's members report a sense of belonging, connection, safety, and fun at the centers and they feel that the staff have high expectations for their futures. Surveys and observations show that the majority of women who utilize our services attend more than one event or participate in more than one ECC program, with 75% exhibiting a better understanding of money management and financial literacy. Additionally, 60% claim to have seen an improvement in their mental health after six months of involvement, and 85% report stronger, more positive interpersonal relationships after just two months of involvement.

These performance outcomes and measures highlight the impact that the Hygiene Pantry project can make on people and demonstrates the programs effectiveness by empowering and supporting all women of the Largo community.

B.9. Relocation

a) Will any residents be permanently displaced as part of this project?

No

If yes, explain

N/A

b) Residential Projects (*Applicants for residential projects only complete this section*)

i. Do/ will residents pay rent?

ii. If yes, how much and how are rents determined?

N/A

iii. Will residents receive rental subsidy/housing assistance?

iv. If residents will not pay rent, state the reason:

N/A

v. List the residential facilities and addresses of facilities presently operated by your agency

N/A

B.10. Specific Site Location

a) Has the project site(s) been selected

Yes

b) If yes, provide the address. For educational classes/seminars, please list the location(s) where the classes will be held:

| Facility Name | Street Address | City | State | Zip |
|---------------|---------------------------------|------------|-------|-------|
| EmpowHERment | 13555 Automobile blvd suite 300 | Clearwater | FL | 33762 |
| | | | | |

B.12. Project Administration

a) Project Manager Name

Ambee Stephens

Title

CEO

B.13. Project-Specific Sections: Please complete the sections below that are applicable to your project.

DOWNPAYMENT ASSISTANCE ADMINISTRATION PROJECTS ONLY:

a) Describe your agency's experience with administering a downpayment assistance program. Include information regarding the agency's experience with completing Residential Income Certifications and underwriting.

N/A

b) Is your agency a HUD-Certified Housing Counseling agency? *Please attach HUD-certification in the Documents section of the application.*

c) Is your agency able to offer bi-lingual services for processing downpayment assistance?

d) Does your agency also provide HUD-certified homebuyer education and counseling services?

e) Is your agency located in the City of Largo, within close proximity to Largo, or has the ability to meet clients at a local location for accessibility to services?

f) The City utilizes an online software for its housing programs:

Would your agency be willing to utilize the web-based housing software if provided access?

g) Does the agency have the capability to securely upload documents into the software (scanner, etc.)?

HOUSING COUNSELING/EDUCATION SERVICES ONLY:

a) Is your agency a HUD-Certified Housing Counseling Agency? *Upload a copy of the HUD certification in the Documents section of the application*

b) Are the staff that will be providing the housing counseling and/or education HUD-certified? *Upload a copy of the HUD Certification in the Documents section of the application.*

c) Select which types of classes/counseling services for which your agency is requesting funding (select all that apply):

- Financial Fitness/Budgeting *(required for the City's downpayment programs)*
- Homebuyer Education Class *(required for the City's downpayment programs)*
- Homebuyer Housing Counseling (one-on-one) *(required for the City's downpayment programs)*
- Rental Counseling: Provide housing counseling for delinquent renters and/or tenants facing eviction.
- Foreclosure Prevention Counseling

d) Does your agency have all HUD requirements for the provision of homeownership counseling incorporated into its homebuyer education/housing counseling curriculum? (Deadline for compliance was January 14, 2017)

e) Describe the key components, format, and client follow-up used by your agency for the homebuyer education and/or housing counseling services requested in this application (describe each service separately if applying for more than one service):

N/A

HOMELESS SHELTER SERVICES ONLY

All homeless services applications should be focused on rapidly moving people into permanent housing (Housing First) and then wrapping supportive services around clients to help them successfully remain in permanent housing. Applications should also demonstrate how your agency has reduced barriers to access its services/programs.

a) Complete the Pinellas Homeless Leadership Board's [Housing First Survey](#) and upload it to the **F. Required Documents** section of this application.

b) Does your agency currently participate in the countywide Coordinated Entry System and enter client data into Pinellas Homeless Management Information System (PHMIS)?

c) Describe what steps, programs and/or methods will be used to prevent homelessness from recurring.

N/A

d) Using program data from PHMIS, provide data below on your agency's outcomes from the past PHMIS reporting year for the following:

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- Total number of unduplicated clients served and time period of data
- Average VI-SPDAT score of clients served
- % of clients that exited to permanent housing/supportive housing
- % of clients housed that returned to homelessness in 6 months (recidivism rate)
- Average length in program
- % of clients who gained income (earned or unearned) during the time they were enrolled in this program

N/A

e) How will the funding requested to Largo be used to support maintaining/improving these outcomes?

This request is not a homeless shelter project, so not applicable is our reponse. FILLING THE REMAINING 5,000 WITH XX SO I CAN COMPLETE GRANT.

XX

XX

XX

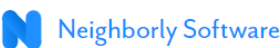
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f) Do your agency have priorities established to serve Pinellas County homeless residents or limitations on serving newer arrivals from outside the County?

N/A

CAPITAL IMPROVEMENTS PROJECTS ONLY

a) Provide a summary of the services provided/to be provided at this facility. Explain if the proposed improvements are limited to a certain service or all services provided at the facility.

The EmpowHERment Community Center offers a wide range of programs to empower women and promote positive change in their lives. The following are the major programs and their stated benefits:

- Financial Wellness:
- Weekly classes on financial literacy to help women achieve self-sufficiency and avoid economic blunders.
- Art & Healing:
- Monthly art healing workshops to provide an outlet for women to express their emotions and turn pain into beauty.
- Boutique & Hygiene Pantry:
- A public pantry stocked with women's hygiene products, interview and professional clothing, blankets, dry foods, and children's toys.
- Empowerment Through Movement:
- Monthly physical activities to promote better health outcomes and build bonds between women.
- Support Services:

- Assistance with physical and emotional needs, including financial assistance, legal aid, healthcare, housing, food, transportation, employment, and emotional support.
- Legal Advocacy:
 - Onsite advocates to connect clients with the appropriate legal services, such as divorce, domestic violence, or sexual abuse.
- Computer Literacy for HER:
 - Two basic courses on computer and technology literacy, primarily for employment purposes, for women, young adults and seniors.
- EntreprenuHER Academy:
 - An 8-week course for women who want to start their own business, with a \$500 stipend at the end of the course to cover business expenses.
- Use Our Space:
 - A co-working space for women entrepreneurs without their own office, designed for quiet and private meetings, training events, and workshops.
- Support Services:
 - Connections with community partners and one-on-one support to address individual needs for financial assistance, career counseling, transportation, health and wellness, counseling, and real-life change.

It's important to note that all the programs at the EmpowHERment Community Center are interconnected. An expanded hygiene pantry will attract more women to the center, providing them with access to a wider range of support services which they may have been previously unaware of.

b) Explain how the facility and programs based at the facility are geographically accessible to Largo residents. Include any accommodations made to improve accessibility, such as virtual options or in-home services as well.

c) Describe how the project meets the City's CDBG Goal: SUPPORTIVE SERVICES – Capital Improvements: Add, expand or improve public facilities that (will) provide supportive services predominantly to low- and moderate-income clientele/households/areas that will help Largo residents physically, mentally and economically thrive in Largo. Projects that improve energy efficiency to enable service providers to more effectively use their operating funds toward client services, and/or projects that harden such facilities to improve disaster resiliency would also be supported.

Not to be redundant but the answer to this question is the same justification that was written in Paragraph B3 above.

It says: This project meets several of the City of Largo's 2023-2024 priorities by addressing the physical, mental, and emotional needs of women who are from a diverse ethnic background and are classified as low-income, economically disadvantaged, and at-risk. The EmpowHERment Community Center provides a range of support services, including temporary financial assistance, legal aid, healthcare assistance, housing, food, transportation, employment counseling, and emotional support, which addresses multiple aspects of a women's well-being. Finally, this project, with its unique focus on women's hygiene, is not commonly found in nearby cities, which adds value to the City of Largo, again making it the city of choice in the Tampa Bay area.

d) Disaster Hardening/Energy Efficiency

Does the project include any disaster hardening components or energy efficiency improvements? Please click all that apply below and explain.

Disaster Hardening

Energy Efficiency Improvements

N/A- No Hardening or Energy Components Included in Project Scope

e) Is the facility to be improved, expanded, or added located in Largo City Limits? Check the Property Appraiser website for the Tax Code. Tax Code is "LA" for Largo).

Yes the Property is in City Limits (Tax code "LA")

Please Explain

Yes, based on communication with the City of Largo, I can confirm that we are within the City Limits.

f) Capital projects located in a Special Flood Hazard Area will not be funded under this funding cycle. Is the property located in a Special Flood Hazard Area? (Without Base Flood Elevation: Flood Zone A, V or A99; with Base Flood Elevation: Zone AE, AO, AH, VE, AR or in a Regulatory Floodway)?

No, the project is not located in a Coast Flood Hazard Area

g) Are there any known environmental hazards on the project area (ex. located in a Brownfield, located near to a landfill)?

No Known Environmental Hazards on Project Site

h) The agency must confirm with the jurisdiction that the property is located in that the proposed facility use is allowable. Written confirmation (email or letter/zoning letter) must be uploaded in the Required Document section of the application.

C. Timeline

Case Id: 25046

Name: EmpowHERment - 2022/23

Address: *No Address Assigned

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C. Timeline

Please provide the following information.

C.1 Project Timeline

Provide an implementation schedule. Include all project phases. (In order to ensure that project costs are reimbursable, or are eligible for direct payment, no costs that the agency plans to bill to Largo CDBG should be incurred until the formal agreement has been made based on the City's grant award).

Please review the Application Instructions regarding timeline for more guidance.

| Phase | Beginning Date | Ending Date |
|-----------------------------|----------------|-------------|
| Program/Services | M/d/yyyy | M/d/yyyy |
| Obtain Full Project Funding | M/d/yyyy | M/d/yyyy |
| Design/Scope of Work | M/d/yyyy | M/d/yyyy |
| Project Bid | M/d/yyyy | M/d/yyyy |
| Permitting | M/d/yyyy | M/d/yyyy |
| Construction | 09/15/2023 | 10/07/2023 |

D. Budget & Funding

Case Id: 25046

Name: EmpowHERment - 2022/23

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Address: *No Address Assigned

D. Budget & Funding

Please provide the following information.

D.1. Project Budget

a) Include costs associated with this project (City Funds and Other Funding Sources)

| Project Budget Line Item | Largo CDBG Funding | Other Funding Sources | Total Budget |
|--------------------------|--------------------|-----------------------|--------------|
| City of Largo | \$10,000.00 | \$0.00 | \$0.00 |
| Bank of America | \$0.00 | \$0.00 | \$0.00 |
| Grand Total | \$10,000.00 | \$0.00 | \$0.00 |

b) Will this project generate program income?

No

c) Select what basis for payment is being requested:

Direct Costs (reimbursement)

Please List Each Activity and Associated Fee for Service (or hourly fee per client)

| Fee-for-Service | Service Name |
|-----------------|--------------|
|-----------------|--------------|

D.2. Funding Sources

a) List all funding sources to be used for the project. If other grant funds have/will be applied for, but the final allocation has not been determined, put these amounts in the "Funds Requested" column.

| Funding Source(s) | Funds Requested | Funds Allocated |
|-------------------|-----------------|-----------------|
| City of Largo | \$10,000.00 | \$0.00 |
| | \$0.00 | \$0.00 |
| | \$10,000.00 | \$0.00 |

b) If the grant request is not fully funded, will the project still be viable, even if on a smaller scale? (Please explain)

No

Explain:

ECC cannot afford the \$10,000 to cover the construction costs from our annual operating budget. However, on February 17th ECC will be applying to the Bank of America Foundation for a grant to specifically cover the next year's operating costs of the Hygiene pantry whether it expands or not.

c) Project costs are reimbursed by the City on a monthly/quarterly basis. For public services, project costs are reimbursed by the City on a monthly or quarterly basis. For public facilities projects, project costs are typically reimbursed at the end of the project or up to 3 reimbursements for larger projects. Does the agency have the financial capacity to pay for the portion of the cost funded by City grant during the project and be reimbursed on a monthly/quarterly basis for public services?

No

d) Please indicate the frequency your agency will be remitting invoices. If awarded funding, public services reporting will be set up on the same schedule (e.g. monthly invoices will have monthly reporting). Reporting for public facilities will be quarterly.

Public Services-Monthly Invoicing

D.3. Audit Requirements

a) Does your agency's current year budget, or next year's anticipated budget, include \$750,000 or more in federal funding revenue? *If yes, a single or program-specific audit must be conducted at the end of your agency's fiscal year.*

No

b) Does your agency's current year budget, or next year's anticipated budget, include \$500,000 or more in state funding revenue? *If your agency is awarded SHIP funding and the answer to this question is "Yes", a single or program-specific audit must be conducted at the end of your agency's fiscal year.*

E. Agency Information

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Case Id: 25046

Name: EmpowHERment - 2022/23

Address: *No Address Assigned

E. Agency Information

Please provide a brief summary (no more than 1-2 paragraphs on each of the following topics regarding the agency).

E.1. Background/Program Experience (1-2 paragraphs only)

Include the length of time the agency has been in operation, the date of incorporation, the purpose of the agency, and the type of corporation. Describe the type of services provided, the agency's capabilities, the number of clients served, and license to operate (if appropriate).

EmpowHERment was founded by Ambreetta Stephens in 2018 after she lost her father to suicide. Feeling alone and grieving, she realized that access to important resources such as mental health support could have a life-saving impact. To heal and connect with women in similar circumstances, Ambee started EmpowHERment as a Facebook group. In just a year and a half, she grew the group from zero to 700 women in the Tampa Bay community, creating a reliable space where they could meet monthly to discuss goals, self-care, healthy relationships, and provide and receive support. In recognition of its success, EmpowHERment became a legal 501(c)(3) non-profit in April, 2020 to offer even more services and programs, including advocacy support, career guidance, temporary financial assistance, education, hygiene essentials, meal services, empowerment workshops, and opportunities for connection and support.

Reflecting on their achievements, the organization is proud of its financial stability, having generated a surplus since its inception despite being only three years old. The financial success reached its peak in FY 2022 with a successful "Gala" event. EmpowHERment is also proud of the demand for its mission, which led to the opening of a second Community Center in Clearwater, Florida.

The organization takes pride in its selfless employees and volunteers, as well as the women they serve, who come from diverse backgrounds as dreamers, doers, mothers, entrepreneurs, students, and partners. Regardless of their individual circumstances, all of these women have been positively impacted by EmpowHERment and its work. What makes this organization truly remarkable is its ability to bring all these women together under one roof, both literally and figuratively, to support and empower each other.

E.2. Personnel/Staff Capacity(1-2 paragraphs only)

a) Briefly describe the agency's existing staff positions and qualifications, its capacity to carry out this project.

EmpowHERment is thankful to have incredible staff members and positions. Our CEO, holds both undergrad and graduate level education, has extensive experience in the Nonprofit Sector and spends lots of time in the charitable relm. Our C-Suite level staff members all have master level education and 4+ years in the sector as well as in the low income areas serving that population.

b) Does the agency have a personal policy manual?

Yes

c) Does the agency have an Affirmative Action Plan?

Yes

d) Does the agency have a Grievance procedure?

Yes

E.3. Financial Capacity (1-2 paragraphs only)

Attach a copy of the agency's current operating budget, including revenues and expenditures. Identify commitments for ongoing funding. Describe the agency's fiscal management, including financial reporting, record keeping, accounting systems, payment procedures and audit requirements.

A budget with full disclosure of revenues and expenses has been attached in the required documents section.

E.4. Monitoring (1-2 paragraphs only)

Briefly describe how you will monitor progress in implementing the program. Describe how funding and related project costs will be tracked separately in the agency and how the agency will ensure that expenses are not paid from duplicate sources. Describe who will be responsible for monitoring progress.

The project will have a relatively short duration of about 2 to 3 weeks after award is made. We would consider these funds to be restricted and would be subject to our fund accounting process. All invoices will have to be approved by the CEO, Ambee Stevens.

E.5. Insurance/Bonding/Worker's Compensation (1-2 paragraphs only)

State whether or not the agency has liability insurance coverage, in what amount, and with what insuring agency. State whether the agency pays all payroll taxes and worker's compensation as required by Federal and state laws. State whether or not the agency has fidelity bond coverage for principle staff who handle the agency's accounts, in what amount and with what insuring agency.

We can provide a certificate of insurance about request naming the City of Largo as an additional insured. Yes to Liability Coverage, Amount is \$1,000,000.

F. Required Documents

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F. Required Documents

Please provide the following information.

Documentation



Organizational Chart *Required

ORGANIZATION CHART -ECC.pdf



Board Resolution Authorizing Submittal of Funding Request *Required

LETTER OF AUTHORIZATION -LARGO.pdf



Current Year Operating Budget *Required

2023 BUDGET -ECC.pdf



Most Recent Annual Independent Auditor's Report *Required

2021 -990 EZ RETURN -ECC.pdf

2022 FINANCIALS -ECC(1).pdf



List of Board of Directors *Required

BOARD OF DIRECTORS LIST -ECC.pdf



HUD Certificate - HUD-Approved Housing Counselors (if applicable)

***No files uploaded*



Housing First Checklist (if applicable)

***No files uploaded*

HUD Certificate - HUD-Approved Housing Counseling Agency (if applicable),

***No files uploaded*

Informational pamphlets about the agency (Optional)

2022 ANNUAL REPORT.pdf

501(c)3 Letter/Non-Profit Letter (if applicable)

08- 501(3) (C) DETERMINATION LETTER -ECC.pdf

Other Documents

ADDITIONAL INFO -LARGO.pdf

Submit

Completed by ambee@empowerment.org on 2/10/2023 2:09 PM

Case Id: 25046

Name: EmpowHERment - 2022/23

Address: *No Address Assigned

Submit

I certify that I have been authorized by the applicant's governing body to submit this application and that the information contained herein is true and correct to the best of my knowledge.

Authorized Name and Title

Ambee Stephens

Telephone

(727) 276-5687

Authorized Signature

Ambee Stephens

Electronically signed by ambee@empowerment.org on 2/10/2023 1:41 PM