

# FollowUp Form

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## *Website*

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Has this report been posted on the PCF website?

## *Pinellas CARES Nonprofit Partnership Fund*

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### **Project Name\***

Bay Area Legal Services - Eviction Mitigation for Low-Income residents of Pinellas County

### **Priority Funding Areas**

Eviction Mitigation through Legal Aid

### **Unit of Service**

This will only be visible to Administrators and will enable question branching in the case that an organization has specified a unit-of-service cost.

### **Amount Awarded for Future Programming**

This is the amount your organization was awarded for spending during the grant period.

\$13,829.28

### **Amount Spent - September 13 to 19, 2020\***

How much grant funding was spent during the period of this report? **(September 13 to 19, 2020)**

\$0.00

### **Amount Spent - through September 19, 2020\***

How much of the awarded funding has been spent from the time of grant award through **September 19, 2020?**

\$0.00

### **Brief Spending Narrative\***

Please briefly explain the spending activities from September 13 to 19, 2020. If you have not expended any funds, please explain why.

**Example:** ABC Charity has only expended \$1,000 this week on program personnel while our food pantry was open. ABC Charity buys its food in bulk on the 15th of every month, and therefore there will be an uptick in expenditure that week.

Bay Area Legal Services- Eviction Mitigation for Low-Income residents of Pinellas County : We are holding off on spending and/or serving individuals this week while our contract is being amended.

## *Eviction Mitigation through Legal Aid*

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### **September 13 to 19, 2020 - Individuals Served - Eviction Mitigation\***

Please specify the number of individuals that were given legal aid services for eviction mitigation between September 13 and 19, 2020 through this grant funding.

0

### **September 13 to 19, 2020 - ZIP Codes of Individuals Served - Eviction Mitigation\***

Please SUCCINCTLY describe the ZIP codes of program services and program recipients (if recipient data is available). **These numbers should add up to the number of total individuals served specified above.**

**FOLLOW THE EXAMPLE FORMAT EXACTLY.**

**ZIP CODE: Number served**

**Example**

Legal Clinic (Program Service ZIP Code)  
33705: 15

Zoom Meditation Session w/Client (Participant ZIP Codes)

33782: 5

33764: 3

33760: 8

N/A