

FollowUp Form

Pinellas CARES Nonprofit Partnership Fund

Project Name*

GLS Eviction Mitigation Project 2020

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.

\$45,212.00

Amount Spent - October 11 to 17, 2020*

How much grant funding was spent during the period of this report? (**October 11 to 17, 2020**)

\$316.77

Amount Spent - through October 17, 2020*

How much of the awarded funding has been spent from the time of grant award through **October 17, 2020**?

\$408.29

Brief Spending Narrative*

Please briefly explain the spending activities from October 11 to 17, 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.

This week we got our first client for the project, which is what the direct service portion of the funds were spent on. In addition to that, the volunteer manager worked with some pro bono attorneys to see if they could

provide assistance on cases, the finance manager worked on budget and reporting issues, and the grants manager began working with outside vendors to complete the public awareness portion of the campaign.

Eviction Mitigation through Legal Aid

October 11 to 17, 2020 - Individuals Served - Eviction Mitigation*

Please specify the number of individuals that were given legal aid services for eviction mitigation between October 11 and 17, 2020 through this grant funding.

1

October 11 to 17, 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

Initial Intake with Client

34683: 1