

FollowUp Form

Website

Has this report been posted on the PCF website?

Yes

Pinellas CARES Nonprofit Partnership Fund

Please do not submit your final December report until all supporting fiscal documentation has been collected and can be compiled for submission.

Project Name

Eviction Mitigation CARES Project

Priority Funding Areas

Eviction Mitigation through Legal Aid

Award Type

Installment

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

\$351,789.65

Amount Spent - December 27 to 30, 2020*

How much grant funding was spent between **December 27 and 30, 2020**?

\$15,894.34

Amount Spent - December 2020*

How much grant funding was spent during the **entire month of December 2020**?

\$58,396.38

Amount Spent as of December 30, 2020*

How much of the awarded funding was spent from project inception to December 30, 2020?

\$71,812.09

Brief Spending Narrative*

Please briefly explain the spending activities from **December 27 to December 30, 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.

payroll expenses 12/19/2020-12/30/2020, mileage December, staff cell phone charge through 12/30/2020, client deposits and rent

Client Story*

Please give the true story of a client served this month by your programming. You may change identifying details. This allows us to connect to your programming on an emotional level.

“Lucy” was sent to HLA as an emergency referral. The Sheriff had just placed a 24-hour eviction notice on their front door. The family was comprised of Lucy, her three minor children, and Lucy’s elderly mother. Lucy had lost her job due to COVID-19, and the only household income was Lucy’s mother’s retirement. HLA’s Diversion Specialist contacted the family immediately to help find them an alternative living situation so they would not have to go to a shelter or be on the streets. A local Uncle agreed to allow the family to move in with him temporarily. HLA’s Housing Navigator began the family’s housing search. Although the family had multiple barriers, a suitable unit was able to be located quickly. Because of the assistance of the CARES Act funding, HLA was able to pay move-in fees as well as a utility deposit. Due HLA’s team effort, the family of five moved into the unit just over two weeks after being referred to HLA. They were happily in their new home just in time for Christmas!

Eviction Mitigation through Legal Aid

December 27 to 30, 2020 - Individuals Served - Eviction Mitigation*

Please specify the number of individuals that were given legal aid services for eviction mitigation between **December 27 and 30, 2020** through your programming.

3

December Projections - Eviction Mitigation

This was the number of individuals your organization projected it would serve in **December 2020** through this grant funding.

0

December - Percentage of Eviction Actions Resolved

This was the percentage of evictions actions your organization projected it would resolve to allow residents to remain in their homes in **December 2020**.

0

December 2020 - Actual Total # Served - Eviction Mitigation*

Please specify how many individuals were given legal aid services for eviction mitigation through this funding in **December 2020**.

11

December 2020 - Actual % Eviction Actions Resolved*

Please specify the percentage of eviction actions that **were resolved** to allow residents to remain in their homes in **December 2020 through** this grant funding.

25

December 27 to 30, 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 for the week of December 27 to 30, 2020.**

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

33708:1

33713:1

33705:1

Advanced Funds - Justification of Expenditures

Monthly Expense Reporting*

Please complete the Pinellas CARES Advanced Funds Monthly Expense Reporting worksheet, attach appropriate backup documentation, and **upload as a PDF here**.

If you have a regular reporting/invoicing process, you may use your own similar worksheet, however, for your convenience, we have provided a template you can **DOWNLOAD HERE**.

If you have any notes on this, please put them in the field below.

12-20 Eviction Diversion financial report.pdf

Does the above documentation contain live signatures?*

The accounting documentation above requires live signatures on the template in the "Prepared by" and "Reviewed by" lines. Please check that signatures are present, and affirm this by checking the box below.

Yes, there are live signatures in the documentation attached above.

Final Survey

We would like your feedback on the CARES experience. Please complete the following anonymous survey:

<https://www.surveymonkey.com/r/DCFW7RN>

*

I have completed this survey