# FollowUp Form

## Website

Has this report been posted on the PCF website? Yes

# Pinellas CARES Nonprofit Partnership Fund

Project Name\* RCS Food Bank

### **Priority Funding Areas**

Food

Award Type Reimbursement for Future Programming

#### **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**

\$97,667.04

### Amount Spent - October 25 to 31, 2020\*

How much grant funding was spent between **October 25 and 31, 2020**?

## \$40,000.00

#### Amount Spent - October 2020\*

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

\$43,545.00

#### Amount Spent as of October 31, 2020\*

How much of the awarded funding was spent from project inception to October 31, 2020?

\$43,545.00

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

Please briefly explain the spending activities from **October 25 to October 31, 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.

We revised our budget during this week (tweaking the number of items purchased, but keeping the same amounts roughly), and it was approved. We purchased most of the food ancillary supplies and equipment. Some invoices will be logged in the following month.

#### **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.

Mike is 67 years old and is retired and disabled. Because he is on a fixed income, he is not always sure if he is going to have enough funds for food each month. Recently, he discovered RCS Pinellas (now Hope Villages of America). He was very appreciative of the food; especially the meat, juice, and produce. McKinley stated that 'working with Hope Villages takes the worry of of me when it comes to where my next meal will come from. I know I am able to come [here] to supplement my food shortage.'

## Food Metrics

#### October 25 to 31, 2020 - Individuals Served - Food\*

Please specify the number of individuals that were served food between October 25 and 31, 2020 through this grant funding.

696

#### **October 2020 Projections - Food**

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

4114

#### October 2020 - Actual Total # Served - Food\*

Please specify how many individuals were served food in **October 2020** through this grant funding.

4044

### October 25 to 31 - ZIP Codes of Individuals Served - Food\*

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 October 25 to 31, 2020.

#### FOLLOW THE EXAMPLE FORMAT EXACTLY.

ZIP CODE: Number served

#### <u>Example</u>

Food Distribution Site at Tropicana Field (Program Service ZIP Code) 33705: 700

Home-Delivered Meals at Recipients' Homes (Participant ZIP Codes) 33782: 5 33764: 3 33760: 8 Food Distribution Site at RCS Food Bank (33756) 33711: 22 33755: 131 33756: 178 33759: 14

33760:45 33761:13 33762:5 33763:8 33764: 33 33765:21 33767:1 33770:63 33771:65 33773:25 33774:15 33778:26 33785:1 34660:13 34677:3 34695:4 34698:10

# Cost Reimbursement Basis - Justification of Expenditures

#### Monthly Reimbursement Request\*

Please complete the Pinellas CARES Reimbursement Request 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 document, please put them in the field below.

CARES Oct 2020 Invoice.pdf

Our first CARES monthly invoice for the month of October 2020 includes:

-reimbursement cover page and expense & personnel cost breakdown pages

-overview of our payroll process signed by authorized personnel

-Payroll backup: full backup for month of October including payroll summary and statistical reports, individual payroll registers for each staff per payroll, job descriptions, and either signed offer letter or Personnel Action Form, timesheets designating hours worked for each October payroll dates (10/1, 10/15 & 10/29 pay dates). ADP processing fees also included.

-Benefits backup- supporting payroll documentation for the staff's benefits proof of enrollment and company payment of the benefits

-Expense backup- includes copies of invoices with proof of payment via check, credit card, and online payments depending on the expense. Included are also copies of any checks that were cleared.

-Regions October 2020 bank statement redacted to show relevant payroll and proof of payments