



Coweta Community Foundation

Long Term Recovery Grant

REQUEST FOR PROPOSAL

JULY 8, 2021



Cover Letter



July 8, 2021

Salutations,

The Coweta Community Foundation, Inc. invites active nonprofit 501(c)(3) or government tax status agencies in the State of Georgia to submit a proposal for Long Term Recovery Grant.

The Coweta Community Foundation, Inc. (CCF), a 501(c)(3) organization, is dedicated to assisting with long term disaster recovery relief, while encouraging collaboration among community organizations and agencies. Our mission is to enhance our community's quality of life by encouraging philanthropic interaction in Coweta County.

CCF seeks to find an organizations to support Long Term Recovery efforts due to the impact of the March Tornado. More information about this can be found in the following pages, along with details regarding budget and selection criteria. We will review grant applications weekly beginning on July 17, 2021.

Please submit your completed proposal no later than August 30, 2021 12:00 midnight. Thank you for your co

Thank you for your consideration, and we look forward to reviewing your submission.

Sincerely,

Chairman of the Board

About The Coweta Community Foundation

Founded in 1997, The Coweta Community Foundation (CCF) was established to maintain the charitable intent of donors and to act as a catalyst to help focus local philanthropy on our community's changing needs. The Foundation manages funds that directly support a variety of community interests such as women's and children's issues, public safety, education, and the arts. The Foundation's mission is to enhance our community's quality of life by encouraging philanthropic interaction in Coweta County.

- The Foundation provides a catalyst to help focus local philanthropy on our community's changing needs.
- The Foundation manages individual gifts and bequests that enhance and support the quality of life in Coweta County.

Guided by its mission, the Foundation has the following goals:

- To be a catalyst for the establishment of endowments to benefit the community now and into the future
 - To serve the varied interests and needs of donors
 - To provide leadership and resources in identifying and meeting community needs
 - To serve as a steward of funds
 - To encourage collaboration among community organizations and agencies
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Project Summary

In order to better serve our stakeholders, we have elected to offer a grant opportunity for organizations to assist with the long-term recovery efforts from the March 2021 Tornado that hit Coweta County. This opportunity would provide a grant up to \$25,000 to assist with continued efforts through a reimbursement grant.

To be eligible for the full amount of the grant, the request cannot be more than 20% of annual agency budget and no more than \$25,000.

Sample Request for Proposal

Instructions

Review the sample request for proposal. Include additional information appropriate for your organization.

Date: _____

This proposal is for services to assist __ (name of organization) __ in providing rental lets find a different example assistance to individuals and families impacted by the March 2021 Tornado in Coweta County.

The mission of (name of organization) is...

Our programs and services include...

Founded in _____, our organization...

Description of Program Goals

Our program goals include...

Description of Program

We would like provide financial/in-kind _____ assistance to our clients to aid us in...

We expect that we will provide _____ (number and/or length) assistance to... (who is your demographic)

Will you have a cap on funds per household? What other assistance would you be providing to clients?

Description of Desired Outcomes

At the end of the process, we would like to see the following concrete outcomes (include outcomes specific to your organization's desires):

- How will you measure the success of the program and track your outcomes (results)?
- How will determine if the program is successful?

Timeline

- _____ Program will begin ____ (date).
- We will advertise for this program through..... and this will begin on ____ (date).
- Case management will be completed _____ (daily/weekly/monthly), we will use _____ (name the CRM or case management tool you will use for documentation). Our supervisor will review case files _____ (date or after X days/weeks).
- The program will end ____ (date).

Proposal Content

Interested parties should submit the following: Please use *the sample above as a guideline*.

- A proposal, not to exceed five pages and to include a proposed program plan.
 - Please explain how you obtain referrals and outline your guidelines.
 - Please explain how your program will support your organizations current mission
- A list of other organizations or agencies with which you will be collaborating with.
- A list of key staff members or volunteers who will be assisting with the program
- Attached budget, please include a column for Grant only items
- Contact Information

Applicants should have the following:

- Have an active nonprofit 501(c)3 or government tax status in the State of Georgia
- Hold a Charitable Organization License from the Secretary of State of Georgia
- A detailed report will be due within 90 days and 120 days of receiving the grant to help document and communicate these funds' local impact. If all grant expenditures have not been made within that 120-day period, the report shall specify how the remaining funds will be used and a deadline for a final report to the Coweta Community Foundation following the complete expenditure of funds from the grant.

Budget

Include an itemized budget with as many clear costs as possible. Please have a column for cost the grant will pay for if you are also contributing to the program.

Selection Criteria

During the review process, we will focus on the following areas, which are considered as pivotal to the success of the program + your organization's partnership with CCF.

- Understanding of program goals as demonstrated in the proposal
- Experience with the program
- Budget
- Collaboration with other organizations or agencies
- This is a reimbursement grant, only funds that will be approved must follow our guidelines and cannot include items paid for prior to approval of your grant
- Grants will be scored on with a matrix, scoring below an 85% you will have **one** opportunity to re-do to be considered.
- To be eligible for the full amount of the grant, the request cannot be more than 20% of annual agency budget and no more than \$25,000.

Proposal Requirements

A completed proposal should be included in the following documentation. Only complete proposals will be considered.

- Cover letter
- Detailed proposal
- Budget
- Proposed timeline
- Other documentation

Completed proposals should be submitted online [grant@cowetafoundation.org]. All attachments must be in .pdf file format. Grants will be scored on with a matrix, scoring below an 85% you will have one opportunity to re-do to be considered.

OR

Completed proposal should be submitted by mail + address as follows:

Coweta Community Foundation
c/o Grant
PO Box 236
Newnan, GA 30264

Proposed Timeline

Timeline for proposal process:

- Final submission deadline: August 30, 2021
- Submission review: Grants received before 4pm on Thursday, will be reviewed the following Monday
- Applicants notified: Applicants will be notified of our decision by Tuesday following the Grant Meeting

Requirements - Important Info

- This is a reimbursement Grant. Under the Cost Reimbursement method of payment, the grantee is required to finance its operations with its own working capital. The CCF will release payments to reimburse the grantee for actual cash disbursements supported by adequate documentation. Costs are only reimbursed when required costs have also been incurred and paid.
- Attached demographics sheet must be completed for each report. If you do not ask particular demographic questions you may leave those blank, but age, gender, marital status, and housing are required.
- At this time, this grant opportunity is limited to one per organization and will not offer a renewal option (this may change based on funding availability).

- Grantee may request full amount for capacity building
- Grantee is requested to share material that can be published on our social media outlets and website, monthly. This will be due the 1st of each month (items will include, current demographics, photos, brief updates about the program) and Grantee must include the CCF in all Press Releases about the program.
- Grant Programs must impact at least 25 individuals directly effected by the March Tornado. If Grantee is applying for a capacity only grant, the Grantee must be able to demonstrate how this will impact a minimum of 25 individuals (i.e. hiring a case manager, the case manager will work directly with 25 individuals)
- Grantees must show in proposal how grant will impact the organization/ agency's mission

Documentation Requirements for Grantees on Cost Reimbursement Method of Payment

GENERAL GUIDANCE

Under the Cost Reimbursement method of payment, the grantee is required to finance its operations with its own working capital. The CCF will release payments to reimburse the grantee for actual cash disbursements supported by adequate documentation. Costs are only reimbursed when required matching costs have also been incurred and paid.

The following instructions have been assembled by the Grants Committee & The Coweta Community Foundation to assist grantees in requesting reimbursement of allowable costs incurred and paid under a grant. These instructions should be followed for every Payment Request form submitted to the CCF while the grantee is on this method of payment. If the grantee does not follow these requirements, we will be unable to review and process the submitted reimbursement request, and the entire request will be returned.

SPECIFIC GUIDELINES

For the CCF to efficiently process the grantee's Payment Request for reimbursement, it is essential that you follow the specific guidelines provided below:

A. Submitting the Payment Request for Reimbursement (Payment Request)

All grantees are required to use the CCF Payment Request form. While on the Cost Reimbursement payment method, please check "reimbursement" on the form and not "advance." Requests must be cumulative and reflect any CCF funds previously drawn down for the award.

B. Allowable Costs

Payment Requests must reflect only allowable project costs that were incurred and paid within the period of performance for the award. If you are unsure whether a particular expenditure is allowable, consult your approved project budget (included in your award notice or as amended).

C. Appropriate Forms of Transaction Documentation

To be reimbursed for allowable expenses, the grantee must provide evidence that costs were both incurred and paid. Generally, this transaction documentation will take the form of:

- A copy of a cancelled check/electronic copy or other document supporting that the transaction was executed; e.g., bank statement, electronic reference, etc.
- All copies of cancelled checks submitted should include both the front and back of the check. If the back side is not available, a copy of the respective bank statement or online statements can be substituted.
- Reimbursement of wages, must be based on records that accurately reflect the work performed (see Personnel Expenses - see part F below.)
 - Submission of a credit card statement is not sufficient documentation of an incurred and paid cost unless supporting documentation such as a contract, purchase receipt or invoice is provided and a subsequent statement verifying the account balance was paid in full no later than 90 days after the period of performance end date.

If the credit card account carries a balance, only the pro-rated portion of the expenditure in relation to the outstanding balance will be allowed.

For example: A performance fee of \$2,000 was charged to a credit card. The next statement shows a payment in the amount of \$5,000 on an outstanding balance of \$20,000. Therefore, only \$500 can be submitted for reimbursement.

$$\begin{aligned} \$5,000 \div \$20,000 &= .25 \\ .25 \times \$2,000 &= \$500 \end{aligned}$$

D. Summary Cover Sheet and Supporting Documentation

You must include a Summary Cover Sheet with each request, which has a list of all expenditures for which you are requesting reimbursement and any required match.

The Summary Cover Sheet must include the following information:

- date and type of transaction (e.g., check or charge, including check number or statement);
- payee;
- amount of expense;
- form of supporting documentation (e.g., invoice, receipt, contract, personnel activity report, etc.); and
- a brief explanation of the purpose of the expense (see suggested format in Attachment 1).

The Summary Cover Sheet must be accompanied by supporting documentation as described in Part C, which is arranged in the same order as the expenditures identified on the Summary Cover Sheet.

Documentation must be complete, accurate, well-organized, and legible. Pages should be numbered or grouped to facilitate cross-referencing of the Summary and supporting documentation.

Other tips:

(1) Date Check Written/Charge Incurred. Provide the date the check was written or the charge was incurred/made.

(2) Payee. Identify to whom the check was written or charge was made.

(3) Total Amount of Expense. Identify the total amount of the expense reflected in the corresponding transaction. If the total amount of the payment is different than the amount listed in the supporting documentation, you must provide an explanation by footnote. See Attachment 1.

(4) Forms of Documentation. Identify the type of supporting documentation (e.g., invoice, contract, receipt, payroll record, personnel activity reports, etc.).

(5) Explanation. Provide a brief explanation of the purposes for which the costs were incurred.

E. Matching Requirements.

Unless noted on the grant award letter, grants are a direct reimbursement for exact amounts submitted.

F. Personnel Expenses

CCF Standards for Documentation of Personnel Expenses requires salary expenses to be based on records that accurately reflect the work performed. The records must be supported by a system of internal controls which provide reasonable assurance that the charges are accurate, allowable, properly allocated and reflect the total activity for which the employee is compensated. Fringe benefits are not a cost reimbursement allowed by this grant.

The Summary Cover Sheet should indicate the total amount of wages, the net amount of the paycheck, and the amount of wages applicable to the grant. The amount (or percent) of time each individual devoted to the specific CCF project for which reimbursement is requested must be easily identifiable.

The CCF reserves the right to require Personnel Activity Reports or equivalent documentation to determine that salary charges are pro-rated to reflect only the allowable amount. (Note: A sample Personnel Activity Report template is below. You can create your own version, if the required information is captured.)

DIRECT COSTS are those that are identified specifically with the project during the period of performance, and are allowable.

● **SALARIES AND WAGES.**

List compensation for project personnel who are paid on a salary basis. Do not include fees for contractual personnel/consultants and compensation for personnel who are paid on a fee basis.

Indicate the title and/or type of personnel, the number of personnel, the annual or average salary range, and the percentage of time allocated to the long-term recovery project on an annual basis. Salaries/wages should be pro-rated to reflect only those costs incurred within the period of performance.

A. DIRECT COSTS

Example:

Title/Type of personnel	# of personnel	Annual salary/ range	% of time allocated	Amount
Case Manager	1	\$30,000 per yr.	40%	\$12,000
PT Volunteer Coordinator	1	\$18,000	60%	\$10,800

G. Use of In-kind Contributions

The use of in-kind contributions (e.g., services, goods or facilities that are donated to the grantee from a third-party, for which a fair market value can be established) cannot be used for matching purposes.

H. Use of Prepared Financial Reports

If the grantee uses an automated accounting system that separately tracks expenses associated with the project or activity supported by the CCF, a copy of such documentation may be submitted in with the Summary Cover Sheet with each Payment Request, however, all of the required information listed above must be reflected on the report.

I. Certification and Submission

The Summary Cover Sheet must be signed and dated by both the preparer and an authorizing official other than the preparer. Send it, along with the Payment Request form, to the grants@cowetafoundation.org. If submitting hard copies send to: Coweta Community Foundation, c/o Grants, PO Box 236, Newnan, GA 30264. (Note: USPS screening procedures can cause significant delays in delivery; we recommend using an overnight delivery service, NOT U.S. Mail.)

All Summary Cover Sheets turned by 4pm on Thursday will be processed for reimbursement with a timeline of checks ready for pickup no more than 10 businesses days from Thursday deadline, although we will strive for 6 days turn around.

Note: Protection of Personally Identifiable Information, you must safeguard protected personally identifiable information; therefore, we redact all Social Security Numbers and other sensitive information from your documentation.

ATTACHMENT

Review the attached Summary Cover Sheet example. It is included for your use. Remember that you must include a Summary Cover Sheet with each reimbursement request that is submitted to the CCF.

Review the attached Demographic Sheet. It is included for your use. Remember you will be required to turn this in with each report and monthly social media details.

Contact Information

Questions regarding this request for proposal and any information outlined herein should be directed to:

Kristin Webb
Executive Director, The Coweta Community Foundation
grant@cowetafoundation.org
770.253.1833