ORDINANCE NO. 2782

AN ORDINANCE OF THE CITY OF SALISBURY TO ACCEPT ADDITIONAL SFY 2023 HOMELESSNESS SOLUTIONS PROGRAM FUNDING IN THE AMOUNT OF \$9,574 AND TO APPROVE A BUDGET AMENDMENT TO THE GRANT FUND TO APPROPRIATE THESE FUNDS FOR THE HOMELESS SERVICES CASE SPECIALIST POSITION.

WHEREAS, the Somerset County Health Department received funding from the Department of Housing and Community Development (DHCD) specific to the delivery of Homelessness Solutions Program (HSP) services; and

WHEREAS, the Somerset County Health Department has awarded the City of Salisbury Homelessness Solutions Program grant funding; and

WHEREAS, the purpose of the grant program is to support homeless services, including case management, in the City of Salisbury; and

WHEREAS, the Somerset County Health Department has awarded the City additional funds in the amount of \$9,574 exceeding the original amount approved by the Ordinance 2721 (FY23 Schedule C); and

WHEREAS, the additional funds in the amount of \$9,574 will be used to provide Street Outreach Services, HSP Case Management, and Rapid Rehousing Rental Assistance; and

WHEREAS, appropriations necessary to execute the purpose of this grant must be made upon the recommendation of the Mayor and the approval of four-fifths of the Council of the City of Salisbury.

NOW, THEREFORE, BE IT ENACTED AND ORDAINED BY THE CITY COUNCIL OF THE CITY OF SALISBURY, MARYLAND, as follows:

<u>Section 1</u>. Acting Mayor Jack R. Heath is hereby authorized to accept funding from the Somerset County Health Department for additional funds in the amount of \$9,574.

BE IT FURTHER ENACTED AND ORDAINED BY THE COUNCIL OF THE CITY OF SALISBURY, MARYLAND as follows:

Section 2. The City's Grant Fund Budget be and hereby is amended as follows:

Increase HSP Revenue account (10530-423603-xxxx) by \$9,574

Increase HSP Non-Clerical Salary Expense account (10530-501002-xxxx) by \$9,574

BE IT FURTHER ENACTED AND ORDAINED BY THE COUNCIL OF THE CITY OF SALISBURY, MARYLAND, as follows:

<u>Section 3</u>. It is the intention of the Mayor and Council of the City of Salisbury that each provision of this Ordinance shall be deemed independent of all other provisions herein.

<u>Section 4</u>. It is further the intention of the Mayor and Council of the City of Salisbury that if any section, paragraph, subsection, clause or provision of this Ordinance shall be adjudged invalid, unconstitutional or otherwise unenforceable under applicable Maryland or federal law, such adjudication shall apply only to the section, paragraph, subsection, clause or provision so adjudged and all other provisions of this Ordinance shall remain and shall be deemed valid and enforceable.

<u>Section 5</u>. The recitals set forth hereinabove are incorporated into this section of the Ordinance as if such recitals were specifically set forth at length in this Section 5.

Section 6. This Ordinance shall take effect from and after the date of its final passage.

THIS ORDINANCE was introduced and read at a Meeting of the Mayor and Council of the City of Salisbury held on the 27th day of February, 2023 and thereafter, a statement of the substance of the Ordinance having been published as required by law, in the meantime, was finally passed by the Council of the on the 13th day of March, 2023.

ATTEST:

Kimberly R. Nichols, City Clerk

Muir W. Boda, City Council President

Approved by me, this <u>14th</u> day of <u>March</u>, 2023.

John & Heatto John R. Heath, Acting Mayor

ORDINANCE NO. 2782

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ATTEST:

Kimberly R. Nichols, City Clerk

Muir W. Boda, City Council President

Approved by me, this ______day of _____, 2023.

John R. Heath, Acting Mayor



Somerset County Health Department

8928 Sign Post Road, Suite 2, Westover, Maryland 21871 443.523.1700 · Fax 410.651.5680 · TDD 1-800-735-2258

Health Officer: Danielle Weber, MS, RN

July 13, 2022

City of Salisbury Attention: Christine Chestnutt 125 North Division Street Salisbury, MD 21801

Dear Ms. Chestnutt,

We are happy to inform you that your State FY 22 and Federal FY 23 Homeless Solutions Program (HSP) application, submitted to the Homeless Alliance for the Lower Shore Continuum of Care (HALS CoC) has been approved by the Department of Housing and Community Development (DHCD). The City of Salisbury has been awarded \$54,574.00.

We are currently still waiting for the executed agreement from DHCD. Once the agreement is received you will receive the Memorandum of Understanding (MOU) between Somerset County Health Department and City of Salisbury, the breakdown of funding, and the monthly invoice templates.

Sincerely, Shannon Frey

Shannon Frey CoC Lead

EXHIBIT B

HOMELESSNESS SOLUTIONS PROGRAM SFY 2023 / FFY 2022 SUBRECIPIENT AGREEMENT

THIS AGREEMENT (the "Agreement") is made this day <u>1st of July, 2022</u> by and between <u>Somerset County Health Department</u>, a [corporate entity incorporated][limited liability company formed] under the laws of the State of Maryland (hereinafter referred to as "Subrecipient") and <u>City of Salisbury</u> a [body politic and corporate][corporate entity][limited liability company] of the State of Maryland (hereina

EXPLANATORY STATEMENT

WHEREAS, the Department of Housing and Community Development, a principal department of the State of Maryland ("DHCD"), receives funding for the Emergency Solutions Grants program, formerly known as the Emergency Shelter Grants program (the "Federal **Program**"), from the United States Department of Housing and Urban Development ("HUD"), pursuant to the authority of Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 1131 et seq.) (the "Federal Act"). The regulations for the Federal Act are set forth in 24 CFR Part 576, as amended from time to time (the "Federal Regulations").

WHEREAS, DHCD receives State of Maryland (the "State") funding pursuant to the Annotated Code of Maryland Housing and Community Development Article (the "State Act" and, together with the Federal Act, the "Act"). Specifically, DHCD receives funding pursuant to the Rental Assistance Programs and the Rental Allowance Program, established under §4-1401 et seq. of the State Act; the Crisis Shelter Home Program for the Homeless, established under §4-2201 et seq. of the State Act; the Housing Navigator and Aftercare Program, established under §4-2301 et seq. of the State Act; and other homelessness programs (including the Federal Program) authorized by the State Act. The homelessness programs set forth in the State Act are referred to herein as the "State Programs." The regulations for the State Programs are set forth in COMAR 05.21.01 et seq. (the "State Regulations," and, together with the Federal Regulations, the "Regulations"). The Federal Program and the State Programs are referred to herein collectively as the "Homelessness Solutions Program" or the "Program."

WHEREAS, DHCD has awarded Grantee a Program grant for the period July 1, 2022 through September 30, 2023. Grantee is authorized to use the Program funds for costs consistent with the terms and conditions of the source of the funds, which are primarily costs directly related to homeless prevention, rapid re-housing, street outreach, maintenance, staffing, administration, and operation of homeless shelters and post-shelter transitional units, including costs for case management and client services, and assistance to sheltered persons to facilitate their transition to permanent housing and independent living, and collect information on services provided to clients through a Homeless Management Information Systems ("HMIS") or comparable database.

WHEREAS, the provisions of the Act, the Regulations, and DHCD's Homelessness Solutions Program Policy Guide, as amended from time to time (the "Guide"), are hereby incorporated into this Agreement.

WHEREAS, Grantee has agreed to comply with the requirements of the Program as set forth in its Grant Agreement with DHCD (hereinafter the "Contract"), has designated Subrecipient to provide homeless services according to the application Grantee submitted to DHCD, and has allocated some or all of its award to Subrecipient for that purpose.

NOW, THEREFORE, in consideration of the mutual promises contained in this Agreement and intending to be legally bound, the parties agree as follows:

1. Subrecipient shall faithfully perform and certify the operation of the "Project" as outlined in the Contract.

2. The provisions of this Agreement, the Contract, the Act, the Guide, and the Regulations shall be binding on the Subrecipient.

3. Grantee, as recipient of grant funds, shall reimburse Subrecipient monthly in an amount equal to the actual expenses incurred for approved grant activities as certified to Grantee by Subrecipient in its request for disbursement. Receipt of the Grant funds from DHCD is a condition precedent to the Grantee's reimbursement obligation as set forth in this paragraph.

4. Subrecipient shall maintain accurate financial records and prepare and certify all reports required by the Contract. Reports will be provided to Grantee's Contact set forth in paragraph 7 of this Agreement for approval and forwarding to DHCD.

5. Subrecipient shall adhere to all HMIS reporting requirements for all activities assisted under the Grant, in accordance with HUD's standards on participation, data collection, and reporting under a local HMIS or a comparable database. The following HMIS Reporting requirements should be followed:

- A. Subrecipient shall collect client data from each direct service provider within its geographic area through its local Homeless Management Information System ("HMIS") in accordance with HUD's standards on participation, data collection, and reporting under a local HMIS.
- B. Subrecipient will submit its HMIS data to the Maryland Statewide Homeless Data Warehouse (the "MSHDW"), a de-identified, unduplicated database of homeless client service activity that allows authorized personnel at homeless and human service provider agencies throughout the State to aggregate service delivery activity information.
- C. Subrecipient will submit its HMIS data to the MSHDW on a quarterly basis

throughout the term of this Agreement, within 15 days of the conclusion of each quarter.

- D. Subrecipient shall bear primary responsibility for the accuracy of all data submitted to the MSHDW. If incorrect data is discovered post-submission, Subrecipient will notify the DHCD and resubmit corrected data in accordance with the time limits and requirements set forth in the Guide.
- E. If Subrecipient is a victim service provider or a legal services provider, it must use a comparable database that is separate from the HMIS system. This database must collect client-level data over time (i.e., longitudinal data) and generate unduplicated aggregate reports based on the data. The comparable database must be able to generate all reports and meet all technical specifications that are required by HUD or the Department. Information entered into a comparable database other than HMIS must not be entered directly into or provided to an HMIS. Subrecipient will submit the information entered into a comparable database to the MSHDW.
- F. The Subrecipient acknowledges that the Department has ownership of all information aggregated into the MSHDW.
- G. In the event that the MSHDW ceases to exist, the Subrecipient will be notified and provided reasonable time to access and save applicable statistical and frequency data. The aggregate data up to the point of termination may be either electronically or physically stored by the Department for future reference.
- H. In the event that DHCD or its obligation to administer the MSHDW ceases to exist, the custodianship of the data within the MSHDW will be transferred by DHCD to another department or organization for continuing administration and Subrecipient will be informed within 60 days of such transfer.
- I. Subrecipient is responsible for meeting any additional reporting requirements that HUD or DHCD determine is necessary.

6. If any portion of the award comes from the Federal Program, Subrecipient will comply with all of the requirements under 24 CFR 91 and 576, including but not limited to the following:

- A. 24 CFR 576.102 concerning building standards and the continued use of buildings for which emergency shelter grants are used for rehabilitation or conversion of buildings for use as emergency shelters for the homeless; or when funds are used solely for operating costs or essential services.
- B. 24 CFR 576.102(b) concerning involuntary family separation.
- C. 24 CFR 576.400(d) concerning centralized or coordinated assessment.
- D. 24 CFR 576.400(e)(1) and (e)(3) concerning the development of Emergency

Solutions Grant Written Standards (the "ESG Written Standards"). At a minimum, the ESG Written Standards must include:

- (i) Standard policies and procedures for evaluating individuals' and families' eligibility for assistance under the Federal Program;
- (ii) Standards for targeting and providing essential services related to street outreach;
- (iii)Policies and procedures for admission, diversion, referral, and discharge by emergency shelters assisted under the Federal Program, including standards regarding length of stay, if any, and safeguards to meet the safety and shelter needs of special populations, e.g., victims of domestic violence, dating violence, sexual assault, and stalking; and individuals and families who have the highest barriers to housing and are likely to be homeless the longest;
- (iv)Policies and procedures for assessing, prioritizing, and reassessing individuals' and families' needs for essential services related to emergency shelter;
- (v) Policies and procedures for coordination among emergency shelter providers, essential services providers, homelessness prevention, and rapid re-housing assistance providers; other homeless assistance providers; and mainstream service and housing providers (see 24 CFR §576.400(b) and (c) for a list of programs with which activities funded by the Federal Program must be coordinated and integrated to the maximum extent practicable);
- (vi)Policies and procedures for determining and prioritizing which eligible families and individuals will receive homelessness prevention assistance and which eligible families and individuals will receive rapid re-housing assistance (these policies must include the emergency transfer priority required under 24 CFR §576.409);
- (vii) Standards for determining what percentage or amount of rent and utilities costs each program participant must pay while receiving homelessness prevention or rapid re-housing assistance;
- (viii) Standards for determining how long a particular program participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time; and
- (ix)Standards for determining the type, amount, and duration of housing stabilization and/or relocation services to provide to a program participant, including the limits, if any, on the homelessness prevention or rapid

re-housing assistance that each program participant may receive, such as the maximum amount of assistance, maximum number of months the program participant receive assistance; or the maximum number of times the program participant may receive assistance.

- E. 24 CFR 576.405(c) concerning the involvement, to the maximum extent practicable, of homeless individuals and families in constructing, renovating, maintaining, and operating facilities assisted under the program, and in providing services for occupants of these facilities.
- F. 24 CFR 576.407, other appropriate provisions of 24 CFR Part 576, and other applicable Federal laws concerning nondiscrimination and equal opportunity, and requiring affirmative outreach.
- G. 24 CFR 576.407(d) concerning compliance with the provisions, regulations and procedures applicable with respect to the environmental review responsibilities under the National Environmental Policy Act of 1969 and related authorities as specified in 24 CFR Part 58.
- H. 24 CFR 576.408 concerning minimizing the displacement of persons as a result of a Project assisted with these funds, prohibiting temporary relocation, and relocation assistance for displaced persons.
- I. 24 CFR 576.500 requiring that grantees develop and implement written procedures to ensure the confidentiality of records pertaining to any individual provided family violence prevention or treatment services under any project assisted with funds and that the address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project will not be made public, except with written authorization of the person or persons responsible for the operation of such shelter.
- J.
- 7. Subrecipient will not carry out the following activities:
 - A. Funding of renovation, major rehabilitation, or conversion of any building listed on the National Register of Historic Places; located in an historic district; immediately adjacent to a property listed on the National Register, or deemed to be eligible for inclusion on the National Register by the State Historic Preservation Officer.
 - B. Funding of any renovation, major rehabilitation, or conversion of any building in a 100 year floodplain designated by map by the Federal Emergency Management Agency.
 - C. Funding of any renovation, major rehabilitation, or conversion of any building which will jeopardize the continued existence of an endangered or threatened species designated by the U.S. Department of the Interior's Fish and Wildlife Service or by the U.S. Department of Commerce's National Maritime Fisheries Services, or

affecting the critical habitat of such a species.

D. Any activity that is inconsistent with HUD's environmental standards at 24 CFR Part 51 or with the State's Coastal Zone Management Plan.

8. If receiving funds from the Federal Program, Subrecipient will make a certification prohibiting the use of federal funds for lobbying in the form attached as <u>Exhibit D</u> to the Contract.

9. Subrecipient agrees to hold Grantee harmless and to indemnify Grantee against all claims, suits and actions arising out of any of Subrecipient's duties and obligations under this Agreement. In addition, the parties agree that Subrecipient shall act as an independent contractor for the purposes of fulfilling its duties and obligations under this Agreement.

10. Subrecipient shall be subject to the same terms and conditions applicable to the Grantee as contained in the Contract between the Grantee and DHCD. Should a conflict arise during the performance of administration of the Project between this Agreement and the Contract the terms of the Contract shall prevail.

11. Subrecipient acknowledges that the Grantee has designated ______ whose title and address are ______ to administer the Contract. This designation may be revised from time to time by Grantee by written notice to Subrecipient.

12. Subrecipient shall arrange for and provide satisfactory evidence of all matching funds to the operating budget as may be required under the Contract.

13. Subrecipient shall permit authorized representatives of DHCD to inspect and audit all data and records of Subrecipient relating to its performance under this Agreement. Subrecipient shall maintain its financial and client records to the satisfaction of DHCD.

14. Subrecipient shall participate in all applicable required trainings offered by DHCD in relation to the Program.

15. In performance of its obligations under the Agreement, Subrecipient, its agents, employees and assigns, shall comply with all applicable State and federal laws and requirements.

16. The following provisions regarding equal employment opportunity shall apply:

A. Subrecipient shall comply with the requirements of Section 13-219 of the State Finance and Procurement Article of the Annotated Code of Maryland, and its amendments, and any executive order barring discrimination; further, in accordance with these requirements Subrecipient shall not discriminate in any manner against any employee or applicant for employment because of political or religious opinion or affiliation, race, creed, color, sex, sexual orientation and gender identity, or national origin. Subrecipient will take affirmative action to insure that applicants are employed and employees are treated fairly during employment without regard to their political or religious opinion or affiliation, race, creed, color, sex, sexual orientation and gender identity or national origin. Such action shall include, but not be limited to the following: employment, promotion, demotion, transfer, recruitment, or recruitment advertising, furloughs or terminations, rates of pay or other forms of compensation, and selection for training, including apprenticeships. Subrecipient shall post in a conspicuous place, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.

- B. Subrecipient shall, in all solicitations or advertisements for employees placed by or on behalf of Subrecipient, state that all qualified applicants will receive consideration for employment without regard to political or religious opinion or affiliation, race, creed, color, sex, sexual orientation and gender identity, or national origin.
- C. Subrecipient shall permit access to its books, records and accounts by Grantee for purposes of investigation to ascertain compliance with this Section.
- D. If Subrecipient fails to comply with the nondiscrimination clauses of this Agreement, this Agreement may be canceled in whole or in part by written notice from Grantee and Subrecipient may be declared ineligible for further agreements with Grantee. Subrecipient shall include the provisions of the foregoing paragraphs in every subcontract or purchase order so that such provision will be binding upon each subcontractor or vendor. Subrecipient shall take such action with respect to any subcontract or purchase order as Grantee may direct as means of enforcing such provisions including sanctions for noncompliance; provided, however, that if Subrecipient becomes involved in or is threatened with litigation with the subcontractor or vendor as a result of such direction by Grantee, Subrecipient may request that Grantee participate in the litigation to protect Grantee's interests.
- 17. Nondiscrimination, Fair Practices, and Drug And Alcohol Free Certifications:
 - A. Subrecipient certifies that it does not discriminate and prohibits discrimination in, and shall not exclude from the participation in, or deny the benefit of any program or activity funded in whole or in part with the Grant, on the basis of political or religious opinion or affiliation, marital status, race, color, creed, or national origin, or sex or age, except when age or sex constitutes a bona fide occupational qualification, sexual orientation, gender identity, or the physical or mental handicap of a qualified handicapped individual.
 - B. Subrecipient shall comply with the provisions of all federal, State and local laws prohibiting discrimination in housing on the grounds of race, color, religion, national origin, sex, marital status, physical or mental disability, sexual orientation, age, gender identity, genetic information, or an individual's refusal to submit to a genetic test or make available the results of a genetic test, including Title VI and VII of the Civil Rights Act of 1964, as amended (Public Law 88-352); and Title VIII of the Civil Rights Act of 1968, as amended (Public Law 90-284); the Fair Housing Act (42 U.S.C. §§3601-3620); the Americans with Disabilities Act of 1990, as amended; and Title 20 of the State Government Article of the Annotated Code of Maryland, as amended.

C. Subrecipient shall comply with the provisions of the Governor's Executive Order 01.01.1989.18 regarding a drug- and alcohol-free workplace and any regulations promulgated thereunder.

18. The following provision regarding religious organizations operating the Program shall apply: No portion of the grant proceeds may be used for the furtherance of sectarian religious instruction or in connection with the design, construction, or acquisition of any building used or to be used as a place of sectarian religious worship or instruction, or in connection with any program or department of divinity for any religious denomination.

19. If Subrecipient is, or may be deemed to be, a religious or denominational institution or organization or an organization operated for religious purposes which is supervised or controlled by or in connection with a religious or denominational institution or organization; and provides essential services and operational costs to individuals and families who are in an emergency shelter, then Subrecipient agrees to the following in connection with such essential services and operational costs.

- A. It will not discriminate against any employee or applicant for employment on the basis of religion and will not limit employment or give preference in employment to persons on the basis of religion;
- B. It will not discriminate against any person seeking emergency shelter and related services on the basis of religion and will not limit such services or give preference to persons on the basis of religion;
- C. It will provide no religious instruction or counseling, conduct no religious workshop or services, engage in no religious proselytizing, and exert no other religious influence in the provision of services or the use of facilities or furnishings assisted in any way under this agreement.

20. No officer, member or employee of the Subrecipient, or other local public agencies which exercise any functions or responsibilities in review or approval of the undertaking or carrying out of this Agreement, shall have any personal interest, direct or indirect, apart from his or her official duties, in this Agreement or its proceeds.

21. A default under this Agreement shall occur if there is a breach of any covenant, agreement, provision, representation, warranty or certification of Subrecipient which was made in this Agreement.

22. This Agreement shall not be construed to imply that Grantee will pay for any expenses incurred by Subrecipient beyond the period ending **September 30, 2023**.

WITNESS the hands and seals of the parties hereto, with the specific intention of creating a document under seal.

Grantee:

Somerset County Health Department (Name of Entity)

ATTEST:

(Signature)

(Title)

By: N.Wel {SEAL}

(Signature)

Health Officer (Title)

Subrecipient:

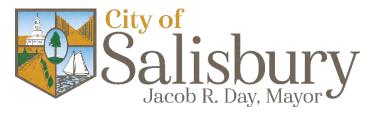
City of Salisbury

WITNESS:

(Signature) Ex. Hice Manager

(Name of Entity) By: {SEAL} (Signature) Director or Designee

(Title)



MEMORANDUM

То:	Julia Glanz, City Administrator
From:	Ronald L. Strickler, Jr, Director of Housing and Community Development
Date:	January 31, 2023
Re:	Ordinance - Budget Amendment - Acceptance/Appropriation of additional SFY 2023 HSP (Homelessness Solutions Program) Funding

The Director of Housing and Community Development requests the opportunity to introduce an Ordinance for consideration by Mayor and City Council to accept a budget amendment to appropriate an additional \$9,574 in SFY 2023 HSP funds that have been awarded to the City of Salisbury. The City of Salisbury has received an award of SFY 2023 HSP(Homelessness Solutions Program) funding from the Maryland Department of Housing & Community Development (DHCD), passed through the Somerset County Health Department exceeding the budgeted amount of the Schedule C (Grant Account) by \$9,574. These funds will be utilized to cover salary and fringe benefits for the grant funded Homeless Case Coordinator position. Please forward this information to the City Council for review and discussion on the February 21, 2023 work session agenda. Thank you for your assistance and consideration of the proposed ordinance.

Rombel 2 Strinklur A

Ronald Strickler, Jr Director, Housing and Community Development

Grantee/ Continuum of Care:								
HSP Report Type:		Invoice - ST	ATE					
~	City of Salisbury	City of Salisbury						
Email:								
Address:								
Telephone:								
Report Month:	huhu (1, 0000) - Com	to make an 20	000					
HSP Budget Category	July 1, 2022 - Sep Approved	Previous	Report Month	Costs To	Available			
Outreach	Approved	Flevious	Report Month		Available			
a) Services	\$32,400	\$0.00		\$0.00	\$32,400.00			
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00			
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00			
Emergency Shelter								
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00			
PSH Case Management								
a) PSH - Case Management	\$9,674	\$0.00		\$0.00	\$9,674.00			
Rapid Rehousing								
a) RRH - Rental Assistance	\$12,500	\$0.00		\$0.00	\$12,500.00			
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00			
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00			
Homelessness Prevention								
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00			
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00			
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00			
HMIS								
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00			
Admin								
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00			
b) Training and TA	\$0.00	\$0.00		\$0.00	\$0.00			
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00			
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00			

I certify:

1. That this request for disbursement is for eligible project/activity costs authorized under the Homelessness Solutions Program (HSP) Grant; and

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact		
Amount of Payment		Print Name and Title		
Requested:	\$0.00	Date		

EXHIBIT B

HOMELESSNESS SOLUTIONS PROGRAM SFY 2023 / FFY 2022 SUBRECIPIENT AGREEMENT

THIS AGREEMENT (the "Agreement") is made this day <u>1st of July, 2022</u> by and between <u>Somerset County Health Department</u>, a [corporate entity incorporated][limited liability company formed] under the laws of the State of Maryland (hereinafter referred to as "Subrecipient") and <u>City of Salisbury</u> a [body politic and corporate][corporate entity][limited liability company] of the State of Maryland (hereina

EXPLANATORY STATEMENT

WHEREAS, the Department of Housing and Community Development, a principal department of the State of Maryland ("DHCD"), receives funding for the Emergency Solutions Grants program, formerly known as the Emergency Shelter Grants program (the "Federal **Program**"), from the United States Department of Housing and Urban Development ("HUD"), pursuant to the authority of Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 1131 et seq.) (the "Federal Act"). The regulations for the Federal Act are set forth in 24 CFR Part 576, as amended from time to time (the "Federal Regulations").

WHEREAS, DHCD receives State of Maryland (the "State") funding pursuant to the Annotated Code of Maryland Housing and Community Development Article (the "State Act" and, together with the Federal Act, the "Act"). Specifically, DHCD receives funding pursuant to the Rental Assistance Programs and the Rental Allowance Program, established under §4-1401 et seq. of the State Act; the Crisis Shelter Home Program for the Homeless, established under §4-2201 et seq. of the State Act; the Housing Navigator and Aftercare Program, established under §4-2301 et seq. of the State Act; and other homelessness programs (including the Federal Program) authorized by the State Act. The homelessness programs set forth in the State Act are referred to herein as the "State Programs." The regulations for the State Programs are set forth in COMAR 05.21.01 et seq. (the "State Regulations," and, together with the Federal Regulations, the "Regulations"). The Federal Program and the State Programs are referred to herein collectively as the "Homelessness Solutions Program" or the "Program."

WHEREAS, DHCD has awarded Grantee a Program grant for the period July 1, 2022 through September 30, 2023. Grantee is authorized to use the Program funds for costs consistent with the terms and conditions of the source of the funds, which are primarily costs directly related to homeless prevention, rapid re-housing, street outreach, maintenance, staffing, administration, and operation of homeless shelters and post-shelter transitional units, including costs for case management and client services, and assistance to sheltered persons to facilitate their transition to permanent housing and independent living, and collect information on services provided to clients through a Homeless Management Information Systems ("HMIS") or comparable database.

WHEREAS, the provisions of the Act, the Regulations, and DHCD's Homelessness Solutions Program Policy Guide, as amended from time to time (the "Guide"), are hereby incorporated into this Agreement.

WHEREAS, Grantee has agreed to comply with the requirements of the Program as set forth in its Grant Agreement with DHCD (hereinafter the "Contract"), has designated Subrecipient to provide homeless services according to the application Grantee submitted to DHCD, and has allocated some or all of its award to Subrecipient for that purpose.

NOW, THEREFORE, in consideration of the mutual promises contained in this Agreement and intending to be legally bound, the parties agree as follows:

1. Subrecipient shall faithfully perform and certify the operation of the "Project" as outlined in the Contract.

2. The provisions of this Agreement, the Contract, the Act, the Guide, and the Regulations shall be binding on the Subrecipient.

3. Grantee, as recipient of grant funds, shall reimburse Subrecipient monthly in an amount equal to the actual expenses incurred for approved grant activities as certified to Grantee by Subrecipient in its request for disbursement. Receipt of the Grant funds from DHCD is a condition precedent to the Grantee's reimbursement obligation as set forth in this paragraph.

4. Subrecipient shall maintain accurate financial records and prepare and certify all reports required by the Contract. Reports will be provided to Grantee's Contact set forth in paragraph 7 of this Agreement for approval and forwarding to DHCD.

5. Subrecipient shall adhere to all HMIS reporting requirements for all activities assisted under the Grant, in accordance with HUD's standards on participation, data collection, and reporting under a local HMIS or a comparable database. The following HMIS Reporting requirements should be followed:

- A. Subrecipient shall collect client data from each direct service provider within its geographic area through its local Homeless Management Information System ("HMIS") in accordance with HUD's standards on participation, data collection, and reporting under a local HMIS.
- B. Subrecipient will submit its HMIS data to the Maryland Statewide Homeless Data Warehouse (the "MSHDW"), a de-identified, unduplicated database of homeless client service activity that allows authorized personnel at homeless and human service provider agencies throughout the State to aggregate service delivery activity information.
- C. Subrecipient will submit its HMIS data to the MSHDW on a quarterly basis

throughout the term of this Agreement, within 15 days of the conclusion of each quarter.

- D. Subrecipient shall bear primary responsibility for the accuracy of all data submitted to the MSHDW. If incorrect data is discovered post-submission, Subrecipient will notify the DHCD and resubmit corrected data in accordance with the time limits and requirements set forth in the Guide.
- E. If Subrecipient is a victim service provider or a legal services provider, it must use a comparable database that is separate from the HMIS system. This database must collect client-level data over time (i.e., longitudinal data) and generate unduplicated aggregate reports based on the data. The comparable database must be able to generate all reports and meet all technical specifications that are required by HUD or the Department. Information entered into a comparable database other than HMIS must not be entered directly into or provided to an HMIS. Subrecipient will submit the information entered into a comparable database to the MSHDW.
- F. The Subrecipient acknowledges that the Department has ownership of all information aggregated into the MSHDW.
- G. In the event that the MSHDW ceases to exist, the Subrecipient will be notified and provided reasonable time to access and save applicable statistical and frequency data. The aggregate data up to the point of termination may be either electronically or physically stored by the Department for future reference.
- H. In the event that DHCD or its obligation to administer the MSHDW ceases to exist, the custodianship of the data within the MSHDW will be transferred by DHCD to another department or organization for continuing administration and Subrecipient will be informed within 60 days of such transfer.
- I. Subrecipient is responsible for meeting any additional reporting requirements that HUD or DHCD determine is necessary.

6. If any portion of the award comes from the Federal Program, Subrecipient will comply with all of the requirements under 24 CFR 91 and 576, including but not limited to the following:

- A. 24 CFR 576.102 concerning building standards and the continued use of buildings for which emergency shelter grants are used for rehabilitation or conversion of buildings for use as emergency shelters for the homeless; or when funds are used solely for operating costs or essential services.
- B. 24 CFR 576.102(b) concerning involuntary family separation.
- C. 24 CFR 576.400(d) concerning centralized or coordinated assessment.
- D. 24 CFR 576.400(e)(1) and (e)(3) concerning the development of Emergency

Solutions Grant Written Standards (the "ESG Written Standards"). At a minimum, the ESG Written Standards must include:

- (i) Standard policies and procedures for evaluating individuals' and families' eligibility for assistance under the Federal Program;
- (ii) Standards for targeting and providing essential services related to street outreach;
- (iii)Policies and procedures for admission, diversion, referral, and discharge by emergency shelters assisted under the Federal Program, including standards regarding length of stay, if any, and safeguards to meet the safety and shelter needs of special populations, e.g., victims of domestic violence, dating violence, sexual assault, and stalking; and individuals and families who have the highest barriers to housing and are likely to be homeless the longest;
- (iv)Policies and procedures for assessing, prioritizing, and reassessing individuals' and families' needs for essential services related to emergency shelter;
- (v) Policies and procedures for coordination among emergency shelter providers, essential services providers, homelessness prevention, and rapid re-housing assistance providers; other homeless assistance providers; and mainstream service and housing providers (see 24 CFR §576.400(b) and (c) for a list of programs with which activities funded by the Federal Program must be coordinated and integrated to the maximum extent practicable);
- (vi)Policies and procedures for determining and prioritizing which eligible families and individuals will receive homelessness prevention assistance and which eligible families and individuals will receive rapid re-housing assistance (these policies must include the emergency transfer priority required under 24 CFR §576.409);
- (vii) Standards for determining what percentage or amount of rent and utilities costs each program participant must pay while receiving homelessness prevention or rapid re-housing assistance;
- (viii) Standards for determining how long a particular program participant will be provided with rental assistance and whether and how the amount of that assistance will be adjusted over time; and
- (ix)Standards for determining the type, amount, and duration of housing stabilization and/or relocation services to provide to a program participant, including the limits, if any, on the homelessness prevention or rapid

re-housing assistance that each program participant may receive, such as the maximum amount of assistance, maximum number of months the program participant receive assistance; or the maximum number of times the program participant may receive assistance.

- E. 24 CFR 576.405(c) concerning the involvement, to the maximum extent practicable, of homeless individuals and families in constructing, renovating, maintaining, and operating facilities assisted under the program, and in providing services for occupants of these facilities.
- F. 24 CFR 576.407, other appropriate provisions of 24 CFR Part 576, and other applicable Federal laws concerning nondiscrimination and equal opportunity, and requiring affirmative outreach.
- G. 24 CFR 576.407(d) concerning compliance with the provisions, regulations and procedures applicable with respect to the environmental review responsibilities under the National Environmental Policy Act of 1969 and related authorities as specified in 24 CFR Part 58.
- H. 24 CFR 576.408 concerning minimizing the displacement of persons as a result of a Project assisted with these funds, prohibiting temporary relocation, and relocation assistance for displaced persons.
- I. 24 CFR 576.500 requiring that grantees develop and implement written procedures to ensure the confidentiality of records pertaining to any individual provided family violence prevention or treatment services under any project assisted with funds and that the address or location of any domestic violence, dating violence, sexual assault, or stalking shelter project will not be made public, except with written authorization of the person or persons responsible for the operation of such shelter.
- J.
- 7. Subrecipient will not carry out the following activities:
 - A. Funding of renovation, major rehabilitation, or conversion of any building listed on the National Register of Historic Places; located in an historic district; immediately adjacent to a property listed on the National Register, or deemed to be eligible for inclusion on the National Register by the State Historic Preservation Officer.
 - B. Funding of any renovation, major rehabilitation, or conversion of any building in a 100 year floodplain designated by map by the Federal Emergency Management Agency.
 - C. Funding of any renovation, major rehabilitation, or conversion of any building which will jeopardize the continued existence of an endangered or threatened species designated by the U.S. Department of the Interior's Fish and Wildlife Service or by the U.S. Department of Commerce's National Maritime Fisheries Services, or

affecting the critical habitat of such a species.

D. Any activity that is inconsistent with HUD's environmental standards at 24 CFR Part 51 or with the State's Coastal Zone Management Plan.

8. If receiving funds from the Federal Program, Subrecipient will make a certification prohibiting the use of federal funds for lobbying in the form attached as <u>Exhibit D</u> to the Contract.

9. Subrecipient agrees to hold Grantee harmless and to indemnify Grantee against all claims, suits and actions arising out of any of Subrecipient's duties and obligations under this Agreement. In addition, the parties agree that Subrecipient shall act as an independent contractor for the purposes of fulfilling its duties and obligations under this Agreement.

10. Subrecipient shall be subject to the same terms and conditions applicable to the Grantee as contained in the Contract between the Grantee and DHCD. Should a conflict arise during the performance of administration of the Project between this Agreement and the Contract the terms of the Contract shall prevail.

11. Subrecipient acknowledges that the Grantee has designated ______ whose title and address are ______ to administer the Contract. This designation may be revised from time to time by Grantee by written notice to Subrecipient.

12. Subrecipient shall arrange for and provide satisfactory evidence of all matching funds to the operating budget as may be required under the Contract.

13. Subrecipient shall permit authorized representatives of DHCD to inspect and audit all data and records of Subrecipient relating to its performance under this Agreement. Subrecipient shall maintain its financial and client records to the satisfaction of DHCD.

14. Subrecipient shall participate in all applicable required trainings offered by DHCD in relation to the Program.

15. In performance of its obligations under the Agreement, Subrecipient, its agents, employees and assigns, shall comply with all applicable State and federal laws and requirements.

16. The following provisions regarding equal employment opportunity shall apply:

A. Subrecipient shall comply with the requirements of Section 13-219 of the State Finance and Procurement Article of the Annotated Code of Maryland, and its amendments, and any executive order barring discrimination; further, in accordance with these requirements Subrecipient shall not discriminate in any manner against any employee or applicant for employment because of political or religious opinion or affiliation, race, creed, color, sex, sexual orientation and gender identity, or national origin. Subrecipient will take affirmative action to insure that applicants are employed and employees are treated fairly during employment without regard to their political or religious opinion or affiliation, race, creed, color, sex, sexual orientation and gender identity or national origin. Such action shall include, but not be limited to the following: employment, promotion, demotion, transfer, recruitment, or recruitment advertising, furloughs or terminations, rates of pay or other forms of compensation, and selection for training, including apprenticeships. Subrecipient shall post in a conspicuous place, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.

- B. Subrecipient shall, in all solicitations or advertisements for employees placed by or on behalf of Subrecipient, state that all qualified applicants will receive consideration for employment without regard to political or religious opinion or affiliation, race, creed, color, sex, sexual orientation and gender identity, or national origin.
- C. Subrecipient shall permit access to its books, records and accounts by Grantee for purposes of investigation to ascertain compliance with this Section.
- D. If Subrecipient fails to comply with the nondiscrimination clauses of this Agreement, this Agreement may be canceled in whole or in part by written notice from Grantee and Subrecipient may be declared ineligible for further agreements with Grantee. Subrecipient shall include the provisions of the foregoing paragraphs in every subcontract or purchase order so that such provision will be binding upon each subcontractor or vendor. Subrecipient shall take such action with respect to any subcontract or purchase order as Grantee may direct as means of enforcing such provisions including sanctions for noncompliance; provided, however, that if Subrecipient becomes involved in or is threatened with litigation with the subcontractor or vendor as a result of such direction by Grantee, Subrecipient may request that Grantee participate in the litigation to protect Grantee's interests.
- 17. Nondiscrimination, Fair Practices, and Drug And Alcohol Free Certifications:
 - A. Subrecipient certifies that it does not discriminate and prohibits discrimination in, and shall not exclude from the participation in, or deny the benefit of any program or activity funded in whole or in part with the Grant, on the basis of political or religious opinion or affiliation, marital status, race, color, creed, or national origin, or sex or age, except when age or sex constitutes a bona fide occupational qualification, sexual orientation, gender identity, or the physical or mental handicap of a qualified handicapped individual.
 - B. Subrecipient shall comply with the provisions of all federal, State and local laws prohibiting discrimination in housing on the grounds of race, color, religion, national origin, sex, marital status, physical or mental disability, sexual orientation, age, gender identity, genetic information, or an individual's refusal to submit to a genetic test or make available the results of a genetic test, including Title VI and VII of the Civil Rights Act of 1964, as amended (Public Law 88-352); and Title VIII of the Civil Rights Act of 1968, as amended (Public Law 90-284); the Fair Housing Act (42 U.S.C. §§3601-3620); the Americans with Disabilities Act of 1990, as amended; and Title 20 of the State Government Article of the Annotated Code of Maryland, as amended.

C. Subrecipient shall comply with the provisions of the Governor's Executive Order 01.01.1989.18 regarding a drug- and alcohol-free workplace and any regulations promulgated thereunder.

18. The following provision regarding religious organizations operating the Program shall apply: No portion of the grant proceeds may be used for the furtherance of sectarian religious instruction or in connection with the design, construction, or acquisition of any building used or to be used as a place of sectarian religious worship or instruction, or in connection with any program or department of divinity for any religious denomination.

19. If Subrecipient is, or may be deemed to be, a religious or denominational institution or organization or an organization operated for religious purposes which is supervised or controlled by or in connection with a religious or denominational institution or organization; and provides essential services and operational costs to individuals and families who are in an emergency shelter, then Subrecipient agrees to the following in connection with such essential services and operational costs.

- A. It will not discriminate against any employee or applicant for employment on the basis of religion and will not limit employment or give preference in employment to persons on the basis of religion;
- B. It will not discriminate against any person seeking emergency shelter and related services on the basis of religion and will not limit such services or give preference to persons on the basis of religion;
- C. It will provide no religious instruction or counseling, conduct no religious workshop or services, engage in no religious proselytizing, and exert no other religious influence in the provision of services or the use of facilities or furnishings assisted in any way under this agreement.

20. No officer, member or employee of the Subrecipient, or other local public agencies which exercise any functions or responsibilities in review or approval of the undertaking or carrying out of this Agreement, shall have any personal interest, direct or indirect, apart from his or her official duties, in this Agreement or its proceeds.

21. A default under this Agreement shall occur if there is a breach of any covenant, agreement, provision, representation, warranty or certification of Subrecipient which was made in this Agreement.

22. This Agreement shall not be construed to imply that Grantee will pay for any expenses incurred by Subrecipient beyond the period ending **September 30, 2023**.

WITNESS the hands and seals of the parties hereto, with the specific intention of creating a document under seal.

Grantee:

Somerset County Health Department (Name of Entity)

ATTEST:

(Signature)

(Title)

By: N.Wel {SEAL}

(Signature)

Health Officer (Title)

Subrecipient:

City of Salisbury

WITNESS:

(Signature) Ex. Hice Manager

(Name of Entity) By: {SEAL} (Signature) Director or Designee

(Title)

Grantee/ Continuum of Care:								
HSP Report Type:		Invoice - ST	ATE					
~	City of Salisbury	City of Salisbury						
Email:								
Address:								
Telephone:								
Report Month:	huby 1, 2022 . Car	to make an 20	000					
HSP Budget Category	July 1, 2022 - Sep Approved	Previous	Report Month	Costs To	Available			
Outreach	Approved	Flevious	Report Month		Available			
a) Services	\$32,400	\$0.00		\$0.00	\$32,400.00			
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00			
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00			
Emergency Shelter								
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00			
PSH Case Management								
a) PSH - Case Management	\$9,674	\$0.00		\$0.00	\$9,674.00			
Rapid Rehousing								
a) RRH - Rental Assistance	\$12,500	\$0.00		\$0.00	\$12,500.00			
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00			
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00			
Homelessness Prevention								
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00			
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00			
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00			
HMIS								
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00			
Admin								
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00			
b) Training and TA	\$0.00	\$0.00		\$0.00	\$0.00			
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00			
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00			

I certify:

1. That this request for disbursement is for eligible project/activity costs authorized under the Homelessness Solutions Program (HSP) Grant; and

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact		
Amount of Payment		Print Name and Title		
Requested:	\$0.00	Date		

Lower Shore							
HSP Subgrantee Invoice - STATE							
	to make an 20. O	000					
			Costs To	Available			
Approved	Frevious	Report Month		Available			
\$32,400.00	\$0.00		\$0.00	\$32,400.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$9,674.00	\$0.00		\$0.00	\$9,674.00			
\$12,500.00	\$0.00		\$0.00	\$12,500.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
\$0.00	\$0.00		\$0.00	\$0.00			
				\$0.00			
\$0.00 \$54,574.00	\$0.00 \$0.00	\$0.00	\$0.00 \$0.00	\$0.00 \$54,574.00			
	HSP Subgrantee City of Salisbury July 1, 2022 - Sep Approved \$32,400.00 \$0.00 \$0.00 \$0.00 \$0.00 \$9,674.00 \$9,674.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	HSP Subgrantee Invoice - ST City of Salisbury July 1, 2022 - September 30, 2 Approved Previous 32,400.00 \$0.00 \$0.00 \$0.00	HSP Subgrantee Invoice - STATECity of SalisburySalisburyJuly 1, 2022 - Setember 30, 223ApprovedPreviousReport Month\$32,400.00\$0.00\$32,400.00\$0.00	HSP Subgrantee Invoice - STATE City of Salisbury July 1, 2022 - September 30, 2023 Approved Previous Report Month Costs To \$32,400.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$12,500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			

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ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

Amount of Payment		Signature of Designated HSP Contact	
		Print Name and Title	
Requested:	\$0.00	Date	

Grantee/ Continuum of Care:							
Granice, Continuant of Care.	Lower Shore						
HSP Report Type:	HSP Subgrantee Invoice - STATE						
Subgrantee:	City of Salisbury						
Email:							
Address:							
Telephone:							
Report Month:							
	July 1, 2022 - Sep			o (T			
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available		
Outreach	¢22,400,00	¢0.00		¢0.00			
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00		
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00		
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00		
Emergency Shelter							
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00		
PSH Case Management							
a) PSH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00		
Rapid Rehousing							
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00		
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00		
Homelessness Prevention							
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00		
HMIS							
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00		
Admin							
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00		
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00		
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00		

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore						
HSP Report Type:	HSP Subgrantee Invoice - STATE						
Subgrantee:	City of Salisbury						
Email:							
Address:							
Telephone:							
Report Month:							
	July 1, 2022 - Sep						
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available		
Outreach	* ***	* •••••		* ****	<u> </u>		
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00		
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00		
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00		
Emergency Shelter							
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00		
PSH Case Management							
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00		
Rapid Rehousing							
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00		
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00		
Homelessness Prevention							
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00		
HMIS							
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00		
Admin							
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00		
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00		
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00		
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00		

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore						
HSP Report Type:	HSP Subgrantee Invoice - STATE						
Subgrantee:	City of Salisbury						
Email:							
Address:							
Telephone:							
Report Month:							
	July 1, 2022 - Sep						
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available		
Outreach	* ***	* •••••		* ****	<u> </u>		
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00		
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00		
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Emergency Shelter							
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00		
PSH Case Management							
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00		
Rapid Rehousing							
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00		
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00		
Homelessness Prevention							
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00		
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00		
HMIS							
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00		
Admin							
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00		
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00		
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00		
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00		

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep				
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
Outreach	* ***	* •••••		* ****	<u> </u>
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin					
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (T	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
	¢22,400,00	¢0.00		¢0.00	¢20.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin		· -			· ·
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (T	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
	¢22,400,00	¢0.00		¢0.00	¢20.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin		· -			· -
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (T	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
	¢22,400,00	¢0.00		¢0.00	¢20.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin		· -			· -
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (T	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
	¢22,400,00	¢0.00		¢0.00	¢20.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin		· -			· ·
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (T	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
	¢22,400,00	¢0.00		¢0.00	¢20.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin		· -			· ·
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (-	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
	¢22,400,00	¢0.00		¢0.00	¢20.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin		· -			· -
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (-	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
	¢22,400,00	¢0.00		¢0.00	¢20.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin		· -			· -
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

		Signature of Designated HSP Contact
Amount of Payment Requested:	\$0.00	Print Name and Title
		Date

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (=	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
Outreach	¢22,400,00	¢0.00		¢0.00	¢22.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin					
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

Amount of Payment Requested:		Signature of Designated HSP Contact	
	\$0.00	Print Name and Title	
		Date	

Grantee/ Continuum of Care:	Lower Shore				
HSP Report Type:	HSP Subgrantee	Invoice - ST	ATE		
Subgrantee:	City of Salisbury				
Email:					
Address:					
Telephone:					
Report Month:					
	July 1, 2022 - Sep			o (=	
HSP Budget Category	Approved	Previous	Report Month	Costs To	Available
Outreach	¢22,400,00	¢0.00		¢0.00	¢22.400.00
a) Services	\$32,400.00	\$0.00		\$0.00	\$32,400.00
b) Homeless Resource Day	\$0.00	\$0.00		\$0.00	\$0.00
c) Point-in-Time	\$0.00	\$0.00		\$0.00	\$0.00
Emergency Shelter					
a) Services and Operations	\$0.00	\$0.00		\$0.00	\$0.00
PSH Case Management					
a) PSH - Case Management	\$9,674.00	\$0.00		\$0.00	\$9,674.00
Rapid Rehousing					
a) RRH - Rental Assistance	\$12,500.00	\$0.00		\$0.00	\$12,500.00
b) RRH - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) RRH - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
Homelessness Prevention					
a) HP - Rental Assistance	\$0.00	\$0.00		\$0.00	\$0.00
b) HP - Fin. Assistance	\$0.00	\$0.00		\$0.00	\$0.00
c) HP - Case Management	\$0.00	\$0.00		\$0.00	\$0.00
HMIS					
a) Data Collection	\$0.00	\$0.00		\$0.00	\$0.00
Admin					
a) Administrative Costs	\$0.00	\$0.00		\$0.00	\$0.00
b) Training Costs	\$0.00	\$0.00		\$0.00	\$0.00
c) Stipends	\$0.00	\$0.00		\$0.00	\$0.00
TOTAL	\$54,574.00	\$0.00	\$0.00	\$0.00	\$54,574.00

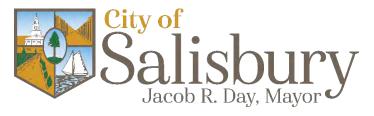
I certify:

2. That valid supporting documentation is attached to this request. Supporting Documentation should include:

i. An Accounting Transaction Report with a breakdown of transactions and expenses that aligns clearly with this invoice.

ii. Note: Detailed receipts and client-specific information need not be submitted to DHCD on a monthly basis, but should be maintained on site for inspection during Monitoring Visit(s).*

Amount of Payment Requested:		Signature of Designated HSP Contact	
	\$0.00	Print Name and Title	
		Date	



MEMORANDUM

То:	Julia Glanz, City Administrator
From:	Ronald L. Strickler, Jr, Director of Housing and Community Development
Date:	January 31, 2023
Re:	Ordinance - Budget Amendment - Acceptance/Appropriation of additional SFY 2023 HSP (Homelessness Solutions Program) Funding

The Director of Housing and Community Development requests the opportunity to introduce an Ordinance for consideration by Mayor and City Council to accept a budget amendment to appropriate an additional \$9,574 in SFY 2023 HSP funds that have been awarded to the City of Salisbury. The City of Salisbury has received an award of SFY 2023 HSP(Homelessness Solutions Program) funding from the Maryland Department of Housing & Community Development (DHCD), passed through the Somerset County Health Department exceeding the budgeted amount of the Schedule C (Grant Account) by \$9,574. These funds will be utilized to cover salary and fringe benefits for the grant funded Homeless Case Coordinator position. Please forward this information to the City Council for review and discussion on the February 21, 2023 work session agenda. Thank you for your assistance and consideration of the proposed ordinance.

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Ronald Strickler, Jr Director, Housing and Community Development