



April 29, 2016

Adriana de Bruin
Business Manager, County Executive Office
105 E. Anapamu Street, Room 406
Santa Barbara, CA 93101

Dear Adriana de Bruin:

On behalf of Peoples' Self-Help Housing Board of Directors, staff, and nearly 5,000 low-income resident children and adults, we appreciate your consideration of funding our Housing and Preventing Homeless Program. The mission of Peoples' Self-Help Housing is "to provide affordable housing and programs leading to self-sufficiency for low-income families, seniors, and other special needs groups on California's Central Coast." Founded in 1970, Peoples' has developed and manages 46 affordable housing complexes from Paso Robles to Ventura. In addition, we have helped nearly 1,200 households realize the American dream of building and owning their first home built with 'sweat equity'. PSHH doesn't just 'build boxes'—we believe in building strong and healthy neighborhoods and communities.

To achieve our mission of providing programs leading to self-sufficiency for our residents, our Supportive Housing Program provides free and confidential clinical case management services. Our residents consist of farm workers, single mothers, frail elderly, veterans, disabled individuals, many with mental health issues, as well as several that have previously been homeless, and other low-income households. We have realized that the vulnerable populations that we house often have needs for support to maintain housing that require high quality and intensive case management services.

We hope that you will consider supporting our request to provide clinical case management services to house Santa Barbara County's homeless population and promote stability, as well as prevent homelessness of vulnerable households. With your assistance, we look forward to facilitating the very exciting transition of 10 homeless individuals into housing and providing homeless prevention services to 125 households, serving over 330 residents in the coming year.

Sincerely,

A handwritten signature in black ink that reads "Brittany Carraway".

Brittany Carraway, LCSW
Service Coordinator/Grant Writer
3533 Empleo Street
San Luis Obispo, CA 93401

3533 Empleo Street, San Luis Obispo, CA 93401
(805) 781-3088 phone • (805) 544-1901 fax
admin@pshhc.org • www.pshhc.org

The NeighborWorks logo features a stylized house icon above the text "NeighborWorks" and "CHARTERED MEMBER" below it.

NeighborWorks
CHARTERED MEMBER
Federal Tax ID #95-2750154

26 E. Victoria Street, Santa Barbara, CA 93101
(805) 961-5152 phone • (805) 962-8152 fax
admin@pshhc.org • www.pshhc.org



FY 2016-17 Outside Agency Funding Request Form

Deadline for Submission: Monday, May 2, 2016, 5:00 p.m.

The Board of Supervisors *may* consider funding requests from outside agencies during the **FY 2016-17** budget hearings in June 2016, if funding is available. An allocation of funding to outside agencies is not guaranteed.

Please submit the following by **5:00 p.m., Monday, May 2, 2016, NO EXCEPTIONS, via Email or Hardy Copy (postmarks will not be accepted)**:

1. Provide a cover letter explaining your request; and
2. Fill out this application (no more than 2 pages); and
3. Attach the Line Item Budget spreadsheet (no more than 2 pages) for the agency's program request

Hearings are scheduled for June 13, 15, and 17, with Outside Agency Requests considered on one of these days (yet to be determined). The **requesting agency must be represented and present**; please plan accordingly.

Total Request: \$ _____

Name of Organization: _____

Title of Program: _____ New or ongoing program? _____

Location(s) of services delivered: _____

Name of Agency Executive Director: _____

Phone #: _____ Email: _____ Website: _____

1. Briefly summarize the purpose of the program, why the funds are needed, and the benefit to the community:

2. Briefly summarize the service to be provided and how many people will be served:

3. Detail the timeline for providing the service:

4. Describe key outcomes to be achieved with the funding and how they will be measured:

5. Describe if this is a one-time or ongoing request, and if funded in prior years and amounts:

6. Describe the agency's expertise and capacity to deliver services including fiscal stability:

7. Agency staff responsible for application: _____

County Staff Comments Only:

Address submittals to:

Adriana de Bruin
Business Manager, County Executive Office
105 E. Anapamu Street, Room 406
Santa Barbara, CA 93101

Requests can be emailed to: outsideagency@countyofsb.org

Questions: Please contact Adriana de Bruin, Business Manager, County Executive Office, at 568-3400.

**FY 2016-17 Line Item Budget
For Program**

#24

Agency: Peoples' Self-Help Housing
Program Name: Supportive Housing Program - SB County
Amount Requested: \$25,000

Program Budget	FY 2016-17	
	Funding Sources/Revenues	Committed Uncommitted
County of Santa Barbara		25,000
NeighborWorks of America	66,200	
JPMorgan Chase Foundation		35,000
Gallagher Affordable Housing Program		10,000
Wells Fargo Foundation		40,000
Donations		5,700
Properties Contributions	89,710	
Total	155,910	115,700

Funding Uses/Expenses	Budget
Salaries & Benefits	250,505
Travel, Mileage, Training, Workshops	7,685
Computer & Office Supplies	4,455
Utilities	2,440
Telephone	2,550
Insurance	750
Depreciation	2,895
Miscel	330
Total	271,610