

May 2, 2016

Adriana de Bruin
Business Manager, County Executive Office
105 E. Anapamu Street, Room 406
Santa Barbara, CA 93010

Transmitted via e-mail to: outsideagency@countyofsb.org

Dear Ms de Bruin:

Attached you will find a FY 2016-17 Outside Agency Funding Request Form and Excel spreadsheet budget submitted by Santa Ynez Valley People Helping. The request is made specifically to fund homelessness preventions services, including rental assistance and case management services, for very low and low income seniors not served by the current Emergency Solutions Grant (ESG) services funded by the County.

We believe that our application fully explains the purpose and uses of the requested funds as well as outcomes expected. That said, we would like to provide a brief explanation of the submitted budget.

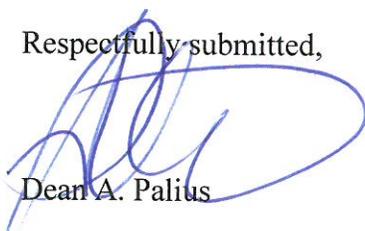
The budget presented includes revenue and expenses for all senior emergency solutions services including homelessness prevention services for extremely low income seniors funded by ESG. In addition it includes revenue and costs related to other basic needs and support services, including case management, required to stabilize seniors in jeopardy of homelessness.

The \$25,000 requested in this application and included in the budget submitted will be used as follows:

- \$20,000 for rental assistance and other direct expenses such as utility and other deposits, and moving expenses, and
- \$5,000 for case management staff salaries, taxes, and benefits.

We appreciate the opportunity of submitting this application and look forward to its review.

Respectfully submitted,


Dean A. Palius



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**

#44

Agency: Santa Ynez Valley People Helping People
 Program Name: *Senior Services- Emergency Solutions*
 Amount \$\$ Requested: \$25,000

| Program Budget Funding Sources/Revenues | FY 2016-17 | |
|--|-------------------|--------------------|
| | Committed | Uncommitted |
| County of Santa Barbara | | \$ 25,000 |
| <i>SY Band of Chumash Indians Foundation</i> | \$ 10,000 | |
| <i>Emergency Solutions Grant</i> | \$ 4,000 | |
| <i>Human Services Commission</i> | \$ 4,500 | |
| <i>Valley Foundation</i> | \$ 1,800 | \$ 1,800 |
| <i>S.B. Foundation</i> | | \$ 1,200 |
| <i>Jackson Family Foundation</i> | \$ 1,500 | \$ 1,500 |
| <i>City of Solvang</i> | | \$ 2,500 |
| <i>City of Buellton</i> | \$ 1,650 | |
| <i>S.B.C. CDBG</i> | \$ 1,200 | |
| <i>S.Y.V. Women's Giving Society</i> | \$ 4,000 | |
| <i>Donated Medical, Dental, & Food</i> | \$ 13,500 | |
| Total | \$ 42,150 | \$ 32,000 |
| | | \$ 74,150 |

| Funding Uses/Expenses | Budget |
|--|------------------|
| <i>Personnel Salaries, Taxes, and Benefits</i> | \$ 20,500 |
| <i>Food Purchases</i> | \$ 2,500 |
| <i>Rental & Other Direct Assistance</i> | \$ 29,000 |
| <i>Copies</i> | \$ 150 |
| <i>Accounting & Audit</i> | \$ 200 |
| <i>Office Supplies and Expense</i> | \$ 200 |
| <i>Propery, Liability, and D & O Insurance</i> | \$ 220 |
| <i>Occupancy Expense</i> | \$ 375 |
| <i>Mileage reimbursement</i> | \$ 500 |
| <i>Telephone</i> | \$ 215 |
| <i>Advertising & Promotion</i> | \$ 125 |
| <i>Medical, Dental, and Food Assistance</i> | \$ 13,500 |
| Sub Total | \$ 67,485 |
| <i>Overhead @ 10%</i> | \$ 6,749 |
| Total: | \$ 74,234 |