		WHAT	COM COUNTY			Whatcom C	ounty Contract Number	
	CC	NTRACT I	INFORMATION SHE	EET			02206019 – 4	
Originating Department:	85 Health and	85 Health and Community Services						
Division/Program: (i.e. Dept. Di		8550 Human Services / 855040 Housing Program						
Contract or Grant Administrato	Barbara Johns	son-Vinna						
Contractor's / Agency Name:			Opportunity C	ouncil				
Is this a New Contract?	If not, is this an Amendr	nent or Rer	newal to an Existing	Contract?		Υ	′es ⊠ No □	
Yes □ No ⊠	If Amendment or Rene	ewal, (per V	NCC 3.08.100 (a))	Original Co	ontract #:	2	02206019	
Does contract require Counci		⊠ No	☐ If No, include	WCC:				
Already approved? Council A	Approved Date:		(Exclusions see:	Whatcom Cou	inty Codes 3.06.0	10, 3.08.090	and 3.08.100)	
Is this a grant agreement?								
Yes □ No ⊠	If yes, grantor age	ncy contrac	ct number(s):		CFD	A#:		
Is this contract grant funded?								٦
Yes ⊠ No □	If yes, Whatcom C	ounty grant	t contract number(s)		In process			
Is this contract the result of a	RFP or Bid process?				Contract Cos	t		$\Box$
Yes □ No ⊠ If	yes, RFP and Bid number	er(s):	Sole Source		Center:	12260	00	
Is this agreement excluded from	om E-Verify? No	∑ Yes	s 🗌					
If YES, indicate exclusion(s) be	elow:							
☐ Professional services ag	greement for certified/lic	ensed prof	essional.	ods and se	rvices provided	d due to an	emergency.	
☐ Contract work is for less t	han \$100,000.		☐ Contract f	or Commer	cial off the shel	If items (Co	OTS).	
☐ Contract work is for less t	han 120 days.		☐ Work relate	ed subcontr	act less than \$	25,000.		
☐ Interlocal Agreement (bet	lween Governments).		☐ Public Wo	rks - Local	Agency/Federa	ally Funded	d FHWA.	
Contract Amount:(sum of origin	nal contract amount and		approval required for; a					
any prior amendments):			essional service contra				reater than \$10,000	or
\$ 2,811,264			ontract amount, which				. the end we still	
This Amendment Amount:			rcising an option conta ntract is for design, con					ete
\$ 5,106,192			roved by council in a c				i, or other capital cos	)(3
Total Amended Amount:			or award is for supplies		. орр. орт.а.а.т.			
\$ 7,917,456 4. Equipment is included in Exhibit "B" of the Budget								
5. Contract is for manufacturer's technical support and hardware maintenance of electronic systems and/or technical support and software maintenance from the developer of							ic	
		,	tems and/or technical s orietary software currer				ne developer of	
Summary of Scope: This contr	ract funds programmatic :						sing and Essential	
Needs (HEN) Program and the								1
amendment extends the contra								נ
requirements and flexible fundi		, ,	J		•	,		•
Term of Contract:	2 Years		Expiration Date	<b>)</b> :	06/30/202	25		
	repared by:	JT	•			Date:	03/13/2023	
Contract Routing: 2. He	ealth Budget Approval	JS				Date:	07/18/2023	
3. Att	torney signoff:	RB				Date:	07/17/2023	
4. AS	S Finance reviewed:	A Martin				Date:	7/28/2023	
5. Co	ontractor signed:					Date:		
6. Su	ubmitted to Exec.:					Date:		
7. Co	ouncil approved (if necessar	y): AB	2023-512			Date:		
	kecutive signed:	,, <sub> </sub> , , ,				Date:		
	riginal to Council:					Date:		

202206019 - 4

#### WHATCOM COUNTY CONTRACT AMENDMENT

PARTIES:

Whatcom County
Whatcom County Health and Community Services
509 Girard Street
Bellingham, WA 98225
AND CONTRACTOR:
Opportunity Council
1111 Cornwall Avenue
Bellingham, WA 98225

**CONTRACT PERIODS:** 

Original: 07/01/2023 - 06/30/2023 Amendment #3: 03/01/2023 - 06/30/2023 Amendment #1: 11/23/2022 - 06/30/2023 Amendment #4: 07/01/2023 - 06/30/2025

Amendment #2: 03/01/2023 - 06/30/2023

THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY AMENDED AS SET FORTH IN THE DESCRIPTION OF THE AMENDMENT BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO

#### **DESCRIPTION OF AMENDMENT:**

- 1. Extend the duration and other terms of this contract for two years, as per the original contract "General Terms, Section 10.2, Extension".
- 2. Amend Exhibit A Scope of Work, to make minor language revisions, revise flexible funding language to align with the County's flex fund guidelines, define HEN Homelessness Prevention, and update reporting requirements.
- 3. Amend Exhibit B Compensation, to reflect a two-year contract period in order to align with the Washington State Department of Commerce Consolidated Homeless Grant funding period and revise flexible funding language. This amendment also allocates 7% for administrative costs based on the total funding from the County's Consolidated Homeless Grant from the Washington State Department of Commerce.
- 4. Add Exhibit E Whatcom County Flex Fund Guidelines.
- 5. Funding for this contract period (07/01/2023 6/30/2025) is not to exceed \$5,106,192
- 6. Funding for the total contract period (07/01/2022 6/30/2025) is not to exceed \$7,917,456.
- 7. All other terms and conditions remain unchanged.
- 8. The effective start date of the amendment is 07/01/2023.

ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND ANY PREVIOUS AMENDMENTS THERETO REMAIN IN FULL FORCE AND EFFECT. ALL PARTIES IDENTIFIED AS AFFECTED BY THIS AMENDMENT HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS AMENDMENT. Each signatory below to this Contract warrants that he/she is the authorized agent of the respective party; and that he/she has the authority to enter into the contract and bind the party thereto.

ADDDOVAL AS TO DDOODAM		
APPROVAL AS TO PROGRAM: Ann Beck, C	Date	
DEPARTMENT HEAD APPROVAL:		
Erika Lau	tenbach, Health and Community Services Director	Date
APPROVAL AS TO FORM:		
Royce Buckingha	am, Senior Civil Deputy Prosecutor	Date
FOR THE CONTRACTOR:		
	Greg Winter, Executive Director	I
Contractor Signature	Printed Name and Title	Date
FOR WHATCOM COUNTY:		
Satpal Singh Sidhu, County Executive	Date	

# **CONTRACTOR INFORMATION:**

Opportunity Council
1111 Cornwall Avenue
Bellingham, WA 98225
Greq Winter@oppco.org

#### EXHIBIT "A" - Amendment #4

(SCOPE OF WORK)

# I. Background

The Housing and Essential Needs (HEN) is one of three programs created by Engrossed Senate House Bill 2082 which terminated the Disability Lifeline (DL) Program. HEN funds are part of Washington State Department of Commerce (Commerce) Consolidated Homeless Grant (CHG) and are intended to provide rental assistance, case management, utility assistance and essential needs for Medical Care Services recipients whose eligibility is determined by the Department of Social and Health Services (DSHS). The Opportunity Council's Whatcom Homeless Service Center (WHSC) operates the coordinated entry system for Whatcom County residents experiencing homelessness. The Community Services Division of the Opportunity Council oversees and administers housing case management and related programs. Community Services administers HEN rental and utility assistance, case management services for the HEN Program, and the purchasing and distribution of Essential Needs products for HEN-eligible clients. Opportunity Council manages the Homeless Management Information Services (HMIS) for the County and is responsible for the HMIS requirements of the HEN Program. People eligible to receive HEN rental and utility assistance, including HEN Foundational Community Support (FCS) and Essential Needs items, will be served as long as funding is available and within the designated program requirements.

## II. <u>Project Description and Design</u>

Housing and Essential Needs (HEN) funds are limited to providing rental and utility assistance, case management and essential needs items for Washington Apple Health (Medicaid) recipients who are experiencing homelessness, or at substantial risk of becoming homeless, and whose eligibility is determined by DSHS. The HEN Program is not intended to provide long term support for households, nor will it be able to address all the financial and supportive service needs of households that affect housing stability, nor will it be able to serve all those who are eligible. Opportunity Council's Community Services Division serves as the administrative entity for HEN rental and utility assistance, case management services, and the purchasing and distribution of essential needs products and transportation assistance for eligible individuals. Community Services will staff the HEN program with operations and case management staff that are funded by the Contract, and responsible for program implementation. Community Services will receive HEN referrals from the WHSC for homeless households. HEN referrals for households at-risk of homelessness will be referred by DSHS directly to the Opportunity Council's Community Resource Center, and subsequently to the Community Services HEN Program.

The HEN Foundational Community Supports (FCS) Bridge funding supports enrollees of FCS, prioritizing those who no longer have a HEN referral from DSHS due to increased income or other eligibility changes. FCS funding creates a bridge period of rent assistance for these households enrolled in FCS and in Supportive Employment. Allowable expenses include administrative costs, rental assistance, including arrears, up to a maximum of nine months in total, and operational costs.

Per State law, HEN eligibility now includes Aged, Blind, or Disabled (ABD) recipients, and those who DSHS has determined to be incapacitated due to substance use. HEN providers are expected to prioritize those who are HEN-eligible when providing HEN Homelessness Prevention and HEN Rapid Re Housing. Additional guidance on prioritization is available in the Washington State Coordinated Entry Guidelines and the Consolidated Homeless Grant guidelines at: <a href="https://deptofcommerce.app.box.com/s/4d1ilui45uqljmhlseufez4flxqv1q6b">https://deptofcommerce.app.box.com/s/4d1ilui45uqljmhlseufez4flxqv1q6b</a>.

#### III. Statement of Work

#### A. HEN Rental & Utility Assistance, Case Management and Foundational Community Support (FCS) Services

The Contractor will be responsible for programmatic and administrative services associated with the operation of the HEN Program. Programmatic and administrative services include all activities necessary to operate Community Services in accordance with the requirements set forth in the Administrative Requirements and Guidelines for the CHG as more fully described in Section IV: Special Conditions, below.

The Contractor will:

1. Commit to efforts to reducing and ending homelessness in Whatcom County by:

- a. Providing assistance to homeless households referred through Coordinated Entry and/or currently fleeing domestic violence (as per CHG Guidelines).
- b. Providing homelessness prevention assistance for HEN households experiencing housing instability and at risk for becoming homeless as per CHG Guidelines.
- c. Assessing each household's housing needs and facilitating housing stability with the goal of obtaining or maintaining permanent and sustainable housing (as per CHG Guidelines).
- d. Employing a progressive engagement service model.
- 2. Provide direct services to individuals as follows:
  - a. For non-FCS clients, eligibility is noted in the DSHS Benefits Verification System (BVS).
  - b. For FCS clients, eligible households include HEN households who no longer have a HEN Referral from DSHS. This includes:
    - i. Households who are currently receiving HEN rent assistance;
    - ii. Homeless and at risk of homelessness households who:
      - Received a HEN Referral within the last six months, but were not able to identify permanent housing; OR
      - Received rent assistance in the past, but exited the program within the last six months;
         AND
    - Households enrolled in FCS. FCS households enrolled in the Supportive Employment should be prioritized.
    - iv. Household income is at or below 80% Area Median Income.
- 3. Document client eligibility in client files.
- 4. Authorize and issue rental and utility assistance subsidies in a timely manner.
- 5. Track and report rental and utility assistance subsidies.
- 6. Support households in obtaining or maintaining permanent housing. This may include payment of eviction, attorney, or collections fees for previous rental damages, or move in kits. Funding for these expenses must be paid directly to a third party on behalf of the household and noted in a household's housing stability plan. For FCS eligible clients, the Contractor must work with households on a housing stability plan to secure affordable permanent housing.
- 7. Coordinate with existing housing providers and landlords to identify and secure permanent housing placements for clients.
- 8. Cultivate and maintain relationships with local landlords who agree to participate in the program.
- 9. Make client referrals for Essential Needs Services, housing and other community resources.
- 10. Coordinate with the Community Service Office of DSHS regarding client service delivery.
- 11. Comply with HMIS requirements including data entry and reporting responsibilities.
- 12. Commit to reporting complete quality data that is timely, truthful and accurate (as per CHG/HEN Guidelines, HEN FCS Guidelines and HMIS User Agreement).
- 13. Ensure compliance with State and Federal confidentiality laws and regulations.
- 14. Complete all other activities identified by Whatcom County and Commerce as necessary to implement and manage the rental and utility assistance portion of the HEN Program and the HEN FCS Program.
- 15. Have written and available Applicant Denial and Grievance and Termination and Grievance policies and/or procedures for the HEN FCS Program.

#### B. Essential Needs and Move-in Supplies Assistance

The Opportunity Council, will be responsible for administration and distribution of essential needs products, to include personal health and hygiene items, cleaning supplies, move-in household supplies, and/or bus passes, and will accordingly:

- 1. Purchase and distribute essential needs products and move-in supplies to clients eligible for the Housing and Essential Needs (HEN) program.
- 2. Document client eligibility using DSHS Benefits Verification system.
- 3. Have written and available Applicant Denial and Grievance and Termination and Grievance policies and/or procedures.
- 4. Maintain an inventory tracking and tracking of client usage system.
- 5. Submit an annual HEN Essential Needs Report at the end of each state fiscal year to Whatcom County for submission to Commerce.

#### C. Flexible Funding

Flexible funding must follow the guidelines established by the County and be reported on the spreadsheet provided by the County (Exhibit E) and signed by an authorized signatory. In addition, all flex fund reported expenditures must be verifiable by receipts that are available for monitoring purposes. Guidelines are subject to change by written notice from county staff and/or change to policy of the Washington State Department of Commerce.

#### IV. Special Conditions

The Contractor will comply with program requirements, policies and procedures contained in the "Department of Commerce Guidelines for the Consolidated Homeless Grant" hereafter referred to as CHG Guidelines located at: <a href="https://deptofcommerce.app.box.com/s/4d1ilui45uqljmhlseufez4flxqv1q6b">https://deptofcommerce.app.box.com/s/4d1ilui45uqljmhlseufez4flxqv1q6b</a>. Changes to the CHG Guidelines may be made and incorporated into this agreement without contract amendment. The CHG Guidelines will be updated periodically in compliance with changing State requirements. Whenever a revised edition of the CHG Guidelines is available, the County will provide an email notification. The Contractor must inform the County if grant funds are spent on ineligible households or expenses.

#### V. Program Outcomes

During this contract period, the Contractor is expected to meet the following outcomes:

- A. The Contractor will provide assistance to all HEN eligible households that seek assistance during the contract term, provided that HEN rent and utility assistance funds are available. Based on the previous 12-month period, the program is expected to serve at least 175 households annually.
- B. The Contractor will provide assistance to at least 350 HEN-eligible households through the purchase and distribution of essential needs items and cleaning and move-in supplies, as the budget for this purpose so allows, for the period of 7/1/23 6/30/25.
- C. The Contractor will provide assistance for at least 14 households eligible for the HEN Foundational Community Support program with rent assistance and case management between 7/1/23 and6/30/25.
- D. Out of a total of at least 14 households served with HEN FCS funding, at least 11 households will attain housing stability annually.

#### VI. Reporting Requirements

The Contractor will submit the following reports on a quarterly basis to the County:

- A. Number of HEN eligible households experiencing homelessness assisted with case management and rental assistance during the current quarter, and how many have been assisted year to date.
- B. Number of HEN eligible households with high risk of homelessness assisted with case management and Homelessness Prevention assistance during the current quarter, and how many have been assisted year to date.

- C. Average amount of subsidy per HEN households served with HEN Rapid Re Housing rental assistance during the current guarter and year to date.
- D. Quarterly and yearly average amount of subsidy per household who was served with HEN Homelessness Prevention and has since exited the program. Do not include households with ongoing services in this calculated average.
- E. Number of HEN FCS eligible households assisted with case management and rental assistance during the current quarter, and how many have been assisted year to date with HEN FCS Prevention and HEN FCS Rapid Rehousing.
- F. Number of HEN FCS eligible households who maintained or achieved housing stability (exited program while residing in permanent housing) annually by 6/30/24 and 6/30/25.

Reporting for purchase and distribution of essential needs requires:

A. The Contractor will submit an Essential Needs Report to the County, at which time it is due as required by Consolidated Homeless Grant guidelines, that identifies the number of unique households that received Essential Needs products and services each month, and any additional information required by the Department of Commerce.

Whatcom County Health and Community Services may update reporting templates or formats during the contract period, and will provide advance notice of new reporting requirements prior to the start of the reporting guarter.

# EXHIBIT "B" – Amendment #4 (COMPENSATION)

# I. Budget and Funding

The source of funding for this contract period (07/01/2023 – 06/30/2025), in an amount not to exceed \$5,106,192 (or \$2,553,096 annually), is from the Washington State Department of Commerce, Consolidated Homeless Grant. Commerce and the State of Washington are not liable for claims or damages arising from Subcontractor's performance of the contract. Funding is nontransferable between state fiscal years. The budget for this contract is as follows:

# HEN PROGRAM BUDGET

HEN Operations	Budget	Budget	
Cost Description*	Documents Required with Each Invoice***	07/01/2023 - 06/30/2024	07/01/2024 - 06/30/2025
Personnel (HMIS, Case Managers, Coordinated Entry, Support)	Expanded General Ledger (GL) report for the period billed	\$425,323	\$425,323
50% Fringe Benefit Rate	Expanded GL report based on federally approved fringe rate	\$212,662	\$212,662
Direct Program Supplies	Expanded GL report for the period billed & receipts	\$12,400	\$12,400
Communication	Expanded GL report for the period billed	\$6,000	\$6,000
Copy/print, Postage	Expanded GL report for the period billed. Receipts required for printing services acquired from outside vendor	\$2,000	\$2,000
Mileage	Mileage log to include: name of staff member, date of travel, starting point and destination of travel, number of miles traveled. Mileage will be reimbursed at the GSA rate (per <a href="www.gsa.gov">www.gsa.gov</a> ).	\$7,688	\$7,688
Travel/Training	Include name of traveler, date, start & end point, and purpose. Receipts required for transportation costs, registration fees, etc. Lodging and meal costs follow federal guidelines ( <a href="www.gsa.gov">www.gsa.gov</a> ). Receipts for meals are not required.	\$7,119	\$7,119
Essential Needs Support (Hygiene Product, Cleaning and Move-in Supplies, and Transportation Assistance)	GL Detail and Receipts	\$71,000	\$71,000
PER	SONNEL AND DIRECT COSTS SUBTOTAL	\$744,192	\$744,192
<b>HEN Rent Payments and Other Allowable Expenses (HEN</b>	Rent/Fac Support)		
Rent Payments – Includes:  Monthly rent and any combination of first and last month's rent and security deposits;  Utilities, Arrears and Late Fees;  Pro-rated Rent; Hotel/Motel expenses; Lot Rent for RV's & Manufactured Homes for HEN enrolled; Rental Arrears; Late Fees Prior to HEN Enrollment; Permanent Housing Support Expenses (must be paid directly to a third party) for eviction costs/damages to previous units, all in accordance with CHG Guidelines Section 6.1.	Expanded GL with Client ID, payee, amount	\$1,350,000	\$1,350,000

TOTAL HEN PROGRAM BUDGET			\$2,408,743
Administrative Costs – (7.5% indirect**)			\$168,051
Program Cost Subtotal			\$2,240,692
RENT PAYME	ENTS AND OTHER EXPENSES SUBTOTAL	\$1,496,500	\$1,496,500
items covered under the essential needs assistance budget.			
household's housing stability plan. Excludes essential needs			
needs. Must be paid directly to a 3 <sup>rd</sup> party and noted in the	·		
maintain permanent housing or meet essential household	receipts	\$15,000	\$15,000
categories, which directly help a household to obtain or	Flex fund spreadsheet plus copies of	<b>#45.000</b>	<b>045.000</b>
expenses not included in other allowable expense			
Funds as stated in Exhibit E. Includes goods or payments of			
Flexible Funds in accordance with Whatcom County Flex			
accordance with CHG Guidelines Section 6.1.2.			
members if necessary/required for rental housing – in		ψυσ,συυ	ψ03,300
cable), and costs of urinalysis for drug testing of household	Expanded GL report for the period billed	\$69,500	\$69,500
Utility Payments, Arrears (not included with rent), application fees, background/credit check fees, utility deposits (excluding	Expanded CL report for the period billed		
Deposits and Landlord Admin. Required Fees			
Landlord Incentives (excludes volunteer incentives), Security		\$62,000	\$62,000

FOUNDATIONAL COMMUNITY SUPPORT(FCS) BUDG	Budget	Budget	
Cost Description	Documents Required Each Invoice	07/01/2023	07/01/2024
Personnel	Expanded GL report for the period billed	<b>06/30/2024</b> \$20,168	<b>06/30/2025</b> \$20,168
Rent Payments: Includes Monthly rent and any combination of first and last month's rent and security deposits; Utilities, Arrears and Late Fees; Pro-rated Rent; Hotel/Motel expenses; Lot Rent for RV's & Manufactured Homes for HEN enrolled; Rental Arrears; Late Fees Prior to HEN Enrollment; Permanent Housing Support Expenses (must be paid directly to a third party) for eviction costs/damages to previous units, eviction prevention – all in accordance with CHG Guidelines Section 6.1.	Expanded GL report for the period billed  Expanded GL with Client ID, payee, amount	\$114,606	\$114,606
	FCS SUBTOTAL	\$134,774	\$134,774
Administrative- Indirect (7.1% of direct costs**)	\$9,579	\$9,579	
	\$144,353	\$144,353	
	TOTAL CONTRACT AMOUNT	\$2,553,096	\$2,553,096

<sup>\*</sup> The Contractor may transfer funds among budget line items in an amount up to 10% of the total budget with pre-approval in writing from the County's Contract Administrator. Changes to a line item budget that exceed 10% must be approved in writing by the County.

<sup>\*\*</sup> The proportion of administrative costs will not exceed 7% of the overall budget. In no instance shall the administrative indirect rate exceed the percent indicated in Exhibit B or will fringe benefit rate exceed the current federally approved rate. All allocated direct costs must be based on approved cost allocation plan. Whatcom's annual HEN contract totals are as follows:

Housing & Essential Needs	\$2,540,694
Foundational Community Support	\$144,353

\*\*\* Receipt or GL Detail will include detail identifying the source and description of purchase.

#### II. Invoicing

- 1. The Contractor shall submit itemized invoices up to two times per month in a format approved by the County. Invoices should be received no later than the 15<sup>th</sup> of each month for the previous month expenditures. Invoices submitted for payment must include the documentation specified in the tables above.
- 2. Invoices and all invoice-related communication should be sent to HL-BusinessOffice@co.whatcom.wa.us.
- 3. End of year rent and utility assistance payments will be invoiced and reimbursed based on the date of the rent or utility assistance check issuance.
- 4. Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from the Contractor. The County may withhold payment of an invoice if the Contractor submits it more than 30 days after the expiration of this Contract.
- 5. Invoices must include the following statement, with an authorized signature and date: I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.
- 6. <u>Duplication of Billed Costs or Payments for Services</u>: The Contractor shall not bill the County for services performed or provided under this contract, and the County shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.

# "Exhibit E" WHATCOM COUNTY FLEX FUNDS GUIDELINES

"Flex funds" are funds that may be used at the discretion of the Contractor, following the policies described below, to purchase goods or services directly related to the service needs of the Contractor's clients, when no other funding source is available. Such goods or services must be reasonable and necessary to meet a client's emergent service needs or contribute to the stabilization or self-sufficiency of the client.

**Allowable Costs:** Allowable uses of client-specific expenditures of flex funds include the following:

- Clothing
- Food
- Housing/rental assistance
- Bus passes or taxi fare
- Car repairs
- Driver's license or ID card fees
- Educational or training program registration fees
- Household supplies, including furniture
- Medications
- Health care
- Other, as approved by Whatcom County

**Limitations:** Flex fund expenditures must be within the allowable criteria established by the County, as identified above, must be based upon the service needs as documented in the client's individual service plan, and must have no other funding available from any other source.

Flex funds distributed to any one client cannot exceed \$500 per year, except with written authorization from the County. No flex fund disbursements are to be made directly to the client but rather will be made on behalf of a client. Flex funds may not be used to purchase retailer or merchant gift cards, vouchers, or certificates that can be exchanged for cash or that allow the recipient to purchase alcohol, tobacco, or cannabis products.

**Documentation:** Requests for reimbursement of flex funds must include the attached form including the following:

- A. The person or organization funds were paid to.
- B. Date of transaction.
- C. A list of the goods and/or services purchased.
- D. The cost of the goods and/or services purchased.
- E. The initials of the client and/or unique identifying number of the client for whom the goods and/or services were purchased.
- F. The total amount of flex funds distributed to the client during the year.
- G. The service need addressed by the expenditure.
- H. Accompanying invoices and/or receipts.
- I. Evidence of administrative review of expenditures

#### See Attached Form

Contractor:		Contract:			Period:	Period:		
		Whato	com County Health & Com	munity Servic	es Flex Fund D	ocumentation		
Paid To *	Date	Cost	Goods/Services Purchased	Client ID	Total \$ To Client this Year	Service Need	No Other Funding Available	Administrative Review
* ATTACH RECEIPTS FOR	EACH PURCH	IASE						