

**MARION COUNTY
STANDARD PROFESSIONAL SERVICES AGREEMENT
CHALLENGE GRANT**

THIS MARION COUNTY STANDARD PROFESSIONAL SERVICES AGREEMENT (this "Agreement"), is made and entered into by and between **MARION COUNTY**, a political subdivision of the State of Florida, 601 SE 25th Ave., Ocala, FL 34471, ("COUNTY"), and **The Salvation Army, 2901 NE 14th Street, Ocala FL 34470**, FEIN 58-0660607, ("SUBRECIPIENT") (singularly "Party," collectively "Parties").

WHEREAS, on or about June 5, 2020, the Parties entered into a MARION COUNTY STANDARD PROFESSIONAL SERVICES AGREEMENT (the "Agreement") whereby COUNTY provides Grant funds as a passthrough from the Florida Department of Children and Families (DCF) to SUBRECIPIENT for a scope of work to be carried out to provide housing services and program needs to women with children experiencing homelessness; and

WHEREAS, the parties seek to enter into this Agreement to reflect the FY 2024-2025 funding to SUBRECIPIENT for use of the Challenge Grant funds to cover all associated costs to serve homeless individuals of Marion County, to assist in shelter support operations. This support may take the form of construction, improvement, supply costs, operating costs, staff costs, or other costs as approved.

NOW THEREFORE, in consideration of the mutual covenants and conditions contained herein, the Parties agree as follows:

1. **RECITALS.** The Parties confirm and agree that the above Recitals are true and correct, and incorporate their terms and provisions herein for all purposes.
2. **FUNDING.** The Parties mutually agree to abide by the Funding and Scope of Work attached hereto as **EXHIBIT'S A**, and **EXHIBIT B**. This Agreement reflects the funding and scope of work of the Agreement to allow for reimbursement to SUBRECIPIENT of allowable costs of up to **One-Hundred Ninety-Two Thousand Five Hundred Seventeen Dollars and Sixty Cents (\$192,517.60)**. Any funds remaining at the termination or expiration of this Agreement will revert to COUNTY. This agreement also expands the requirements from the SUBRECIPIENT as stated in Exhibit A, paragraph J.
3. **TERM.** The period for the expenditure of Challenge Grant Funds allocated under the Agreement shall be expended by June 30, 2025. There shall be no extension for the expenditure of Challenge Grant Funds.
4. **INFORMATION REQUIRED BY 24 C.F.R. § 200.332 & SUB-GRANT INFORMATION.**
 - A. The SUBRECIPIENT's name: **THE SALVATION ARMY**
 - B. The SUBRECIPIENT'S Unique Entity Identifier (UEI): **WU9YJKF69VF9**
 - C. State Award Identification Number: **PPZ61 AMEND: #0010**
 - D. State Award Date of the award to the COUNTY: **JUNE 21, 2022**
 - E. Subaward Period of Performance Start and End Date: The Subaward period of performance shall begin on **July 1, 2024**, and shall end on **June 30, 2025**, unless terminated earlier in accordance with the provisions of this Agreement.
 - F. Subaward Budget Period Start and End Date: The Subaward budget period shall begin on **July 1, 2024**, and shall end on **June 30, 2025**.

- G. Amount of State Funds Obligated by this Agreement by the COUNTY to the SUBRECIPIENT: **One-Hundred Ninety-Two Thousand Five-Hundred Seventeen Dollars and Sixty Cents (\$192,517.60).**
- H. Total Amount of State Funds Obligated by the COUNTY to the SUBRECIPIENT, including the amounts in this Agreement: **One-Hundred Ninety-Two Thousand Five Hundred Seventeen Dollars and Sixty Cents (\$192,517.60).**

Title	Year	Amount	Project
Challenge Grant	2024	\$192,517.60	The Salvation Army
TOTAL		\$192,517.60	

- I. Total Amount of the State Award committed to the SUBRECIPIENT by the COUNTY: **One-Hundred Ninety-Two Thousand Five Hundred Seventeen Dollars and Sixty Cents (\$192,517.60).**
- J. State award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act ("FFATA"): Subrecipient will use these funds to support shelter operations, staff costs, and administrative costs
- K. Contact information:
 - Name of State Awarding Agency and Contact Information: Florida Department of Children and Families, 2415 N Monroe Street, Suite 400, Tallahassee, Florida 32303
 - Contact Information for the COUNTY: Charles Rich, Community Development Administrator, Marion County Community Services, 2710 E. Silver Springs Blvd., Ocala, Florida 34471
 - Contact Information for the SUBRECIPIENT:
- L. Assistance Listing Number and Title:

ALN #:	Title	Year	Amount
14.704	Challenge	2024	\$192,517.60
TOTAL			\$192,517.60

- M. The amount made available under the award and the Assistance Listings Number at the time of disbursement is **One-Hundred Ninety-Two Thousand Five-Hundred Seventeen Dollars and Sixty Cents (\$192,517.60).**
 - N. This sub-award is a program grant and not for Research and Development.
5. **AMENDMENTS.** Amendments to this Agreement shall be in the form of writing signed by both parties. COUNTY authorizes its Director of Community Services to execute any amendment so long as there is no increase in the total amount of funding.
6. **MISCELLANEOUS.**
- A. All provisions of the Agreement not specifically amended herein shall remain in full force and effect. All other terms and conditions not otherwise changed are ratified and affirmed.
 - B. The following attachments are hereby incorporated into this Agreement as part hereof as though fully set forth herein.

EXHIBIT A - Funding and Scope of Work
EXHIBIT B - DCF Unified Contract PPZ61

IN WITNESS WHEREOF, the Parties have entered into this Agreement by their duly authorized officers on the date of the last signature below.

WITNESS:

Valencia Howard 2/18/25
Witness Signature Date
Valencia Howard
Print Name
1424 Northeast Expy, NE, Brookhaven, GA
Witness Address 30329

Anthony Grant 2/18/25
Witness Signature Date
Anthony Grant
Print Name
1424 Northeast Expy, NE, Brookhaven, GA
Witness Address 30329

THE SALVATION ARMY:

By: [Signature]
Print Name: W. Lee Auvenshine
Title: Secretary
Date: FEB 18 2025

ATTEST:

Gregory C. Harrell, Clerk of Court
Date: _____

MARION COUNTY, a political subdivision
of the State of Florida

By: _____
Chairman Bryant
Date: _____

For Use and Reliance of Marion COUNTY
Only, Approved As To Form and Legal
Sufficiency

[Signature]
Matthew G. Minter, COUNTY Attorney

FUNDING AND SCOPE OF WORK

- A. **PURPOSE OF CHALLENGE GRANT.** Provide housing services, and program needs, included in the CoC Plan.
- B. **OBJECTIVE OF THE CHALLENGE GRANT PROGRAM.** The objective of the CHALLENGE GRANT is to provide Homeless Prevention Services. The program is open to Emergency and Transitional Shelters, providing services to homeless individuals and families in Marion County Florida. These services include, but are not limited to, Shelter renovations and improvements, Shelter operation costs including staffing, supplies, and all eligible property maintenance.
- C. **CATCHMENT AREA.** For purposes of this Agreement, services shall occur within Marion COUNTY. Therefore, all eligible citizens living within Marion County shall be assisted.
- D. **HOURS AND LOCATION.** The location and service times of SUBRECIPIENT are:

**THE SALVATION ARMY
2901 NE 14TH STREET
OCALA FL 34470**

Hours of Operation: 8:00 am to 4:30 pm

Any change in location and/or service time shall require a written request to COUNTY and approval prior to the time change.

- E. **CLIENTS TO BE SERVED.** Applicable definitions for individuals who are eligible for services under Challenge Grants are found in 24 CFR Part 576.2, and defined as "homeless" or "at risk of homelessness".
- F. SUBRECIPIENT agrees to utilize funds available under this Agreement to supplement rather than supplant funds otherwise available.
- G. Funding shall not continue beyond the end date of the grant which occurs on **June 30, 2025**, even if the Project Participant continues to have need of the assistance. SUBRECIPIENT shall submit any claims for eligible expenses within thirty (30) days after the calendar month in which the expenses are incurred or paid by SUBRECIPIENT or COUNTY may deny payment.
- H. SUBRECIPIENT shall submit Reimbursement/Payment requests to COUNTY for actual costs invoiced to SUBRECIPIENT in carrying out the Project as described in Sections I and J.
- I. SUBRECIPIENT shall submit supporting documentation with each request for reimbursement/payment to SUBRECIPIENT in carrying out the Project as described in Section J below. COUNTY shall render approval or disapproval of services within a maximum of five (5) working days of receipt of the request for reimbursement/payment unless otherwise stated in the Agreement. A "Request for Reimbursement/Payment" form shall be provided to SUBRECIPIENT by COUNTY.
- J. **REIMBURSEMENT REQUEST FORM;**
 - a. Supporting documentation for all expenses for which reimbursement is requested, in

EXHIBIT A

- accordance with the Rollup Packet and Backup Documentation
 - b. Client Tracking software with HMIS number
 - c. HMIS Caper Report
 - d. Invoice & Match Report
- K. Should SUBRECIPIENT fail to submit adequate supporting documentation with each request for reimbursement/payment as required by COUNTY in a timely manner, COUNTY may disapprove the request.
- L. Within thirty (30) days after completion of all services to be performed by it, SUBRECIPIENT shall render a final and complete statement to COUNTY of all costs and charges for services not previously invoiced. COUNTY shall not be responsible for payments of any charges, claims, or demands of SUBRECIPIENT not received within said thirty (30) day period; however, such time may be extended in COUNTY's discretion not to exceed a period of ninety (90) days, provided the delay in its submission is not occasioned by any fault or negligence of SUBRECIPIENT.
- M. SERVICE TASKS. The tasks to be performed under this Agreement must comply with the written standards and all applicable rules, regulations, and policies related to the Challenge Grant program. The following are allowable activities under this Agreement, as defined in 24 CFR Part 576, Subpart B.
- N. Performance Measures. Should SUBRCIPIENT be unable to meet the required deliverables as outlined by DCF, any penalty assessed to COUNTY for failure to meet deliverables will be passed through to the SUBRECIPIENT. As referenced in Exhibit E Original Contract. This does include all Terms and Conditions Governing Performance outlined within the first 17 pages of the DCF Unified Contract.
- O. HOUSING RELOCATION AND STABILIZATION SERVICES. See (24 CFR Part 576.105) Funds may be used to provide financial assistance costs, rental application fees, security deposits, last month's rent, utility deposits, utility payments, moving costs, services costs, housing search and placement, housing stability case management, maximum amounts and periods of assistance, Use with other subsidies, Housing counseling.