



**City of Gastonia
Community Services Department
NON-PROFIT REIMBURSEMENT PROGRAM**

The Non-profit Reimbursement Program is designed to assist Continuum of Care service providers serving in the City of Gastonia low and moderate income limited clientele with supplies and equipment expenses needed for operation up to a maximum of \$500.00 per program year. ***Please note attachment for Notice of Uniform Guidance Requirements.***

PROGRAM YEAR 2020-2021

- *RFP issuance date:* *Friday, January 21, 2022*
- *Posting RFP notice:* *Friday, January 21, 2022*
- ***RFP Submission deadline:* *Friday, February 18, 2022***
- *Final application review and approval:* *Friday, March 4, 2022*
- *Award notification:* *Monday, March 21, 2022*
- *Disbursement of funding:* *Friday, April 8, 2022*

Questions regarding this proposal may be submitted at any time until the February 18, 2022, deadline.

Questions may be submitted in writing via letter or e-mail to:

*City of Gastonia
Nancy Welch
Case Mgt. Specialist
PO Box 1748
150 S. York Street
Gastonia, NC 28053-1748
(704) 866-6753 or
(704) 866-6753
nancyw@cityofgastonia.com*

SUBMISSION DEADLINE: Friday, February 18, 2022

City of Gastonia
Community Services Department
PO Box 1748 Gastonia, NC 28053-1748
(704) 866-6753 or (704) 866-6752



**City of Gastonia
Housing and Neighborhoods Division
NON-PROFIT REIMBURSEMENT PROGRAM 2021-22**

AGENCY/APPLICANT (REVISED 1/18/2022)			
NAME OF AGENCY/APPLICANT COMPANY			
MAILING ADDRESS OF AGENCY/PROVIDER COMPANY	CITY	STATE	ZIP
STREET ADDRESS OF AGENCY/PROVIDER COMPANY	CITY	STATE	ZIP
NAME OF CONTACT PERSON	TITLE	TELEPHONE NUMBER	
E-MAIL ADDRESS			
SIGNATURE _____		DATE _____	
MAXIMUM PROGRAM ASSISTANCE IS \$500.00		AMOUNT REQUESTED: \$	
PRINCIPAL PRODUCT/SERVICE (S) APPLICANT/AGENCY PROVIDES			
REQUIREMENTS			
<p>To apply for this program, a nonprofit agency must submit the following documentation for review:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Articles of incorporation and by-laws of the nonprofit agency <u>or</u> An IRS "Letter of Determination" of Section 501 (c)(3) status <input type="checkbox"/> Type of service provided and number of clients served <input type="checkbox"/> Proof of purchase and documentation of payment <input type="checkbox"/> A list of all board members, including names and titles, length of term on board, and each member's term expiration <input type="checkbox"/> A list of all principal staff to include the job title and a brief job description <i>(if possible, limit to one page)</i> <input type="checkbox"/> Evidence of membership of the Continuum of Care – Care Connection <i>(can be verified by meeting minutes or attendance roster)</i> 			
OTHER TERMS			
<ul style="list-style-type: none"> <input type="checkbox"/> Local non-profits, operational for at least one year, may submit current (up to one month) supply and equipment receipts to the City of Gastonia Housing and Neighborhoods Division for reimbursement. <input type="checkbox"/> Service provider cannot mandate church attendance or Bible Study to clients, must allow inspection of facility by the Community Development Division and must provide an annual report of beneficiaries served. <input type="checkbox"/> Receipts must be for supplies such as office material, toiletries, bedding, etc., and must be for the current program year. <input type="checkbox"/> Maximum program assistance is \$500.00. <input type="checkbox"/> Funding approval is based upon a completed application with all required documentation and is reviewed on a first-come first-serve basis until all available program funding is expended. <input type="checkbox"/> All applications that are incomplete at the time of the deadline <u>cannot</u> be considered for eligibility. 			

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