STABLE HOUSING ACCOUNTABILITY PROGRAM

Provide a complete 12 month budget below. The Budget should cover the period between January 1, 2025 thru December 31, 2025. List the amount of the matching funds and the source of the match. If needed, please see the budget guidance located within the Zengine application.

	Stable	Housing A	Accountability Prog	ram Budget W	orksheet	
╞	Applican	t Name:	I			<u> </u>
	Applicant					
	Services Costs		SHAP Amount Requested	Match Amount	Source of Match	In-Kind or Cash
1.	Case Management & Ongoing Assistance					
2.	Emergency Shelter					
3.	Long-Term Shelter & Residential Operations					
4.	Transportation					
5.	Nutrition					
6.	Child Care					
7.	Mental Health Services					
8.	Substance Abuse Treatment Services					
9.	Capital Rehabilitation Services					
	Operations Costs					
10	Maintenance					
11.	Rent					
12.	Security					
13.	Fuel					
14.	Equipment					
15.	Insurance					
16	Utilities					
17.	Furnishings					
18.	Supplies					
E						
	Total Cost			<u> </u>		
	Total Cost		\$0.00	\$0.00		

MATCH SOURCES

A 10% match is required. The matching requirement may be met by one or both of the following:

(1) Cash contributions

(2) Non-cash contributions. The value of any real property, equipment, goods, or services contributed to the applicant's SHAP project, provided that if the applicant had to pay for them with grant funds, the cost would have been allowable. Non-cash contributions may also include the purchase value of any donated building.

Calculating the amount of non-cash contributions

(1) To determine the value of any donated material or building, or of any lease, the applicant must use and document a method reasonably calculated to establish the fair market value.

(2) Services provided by individuals must be valued at rates consistent with those ordinarily paid for similar work in the applicant's organization. If the applicant does not have employees performing similar work, the rates must be consistent with those ordinarily paid by other employers for similar work in the same labor market.

(3) Some non-cash contributions are real property, equipment, goods, or services that, if the applicant had to pay for them with grant funds, the payments would have been indirect costs. Matching credit for these contributions must be given only if the applicant has established, along with it's regular indirect cost rate, a special rate for allocating to individual projects or projects the values of those contributions.

Instructions:

Please complete the Match Table below. The Total Amount of Match should be equal to or greater than the SHAP amount requested. The SHAP budget and match should be for a 12 month projection. DCA will verify these amounts for compliance! Be realistic and be prepared to provide verification if funds are awarded!

SOURCE	A)Name of Program or Donor	B) Pledged Cash Amount	C) Pledged-Non-Cash Amount	Total (b+c)
HUD COC Funding				
Local Government (City)				
GA Dept. of Human Services				
GA Dept. Behavioral Health and Developmental Disabilities				
United Way				
Other State Agency				
Faith Based Organizations				
Foundations				
Fundraising Events				
In-Kind Professional Services				
Miscellaneous Cash Donations				
Volunteers @7.25 per hour				
Other				
Other				
Total		0	0	0