RFP Instructions for Completing Senior Centers

Date: Enter Date of RFP being completed.

Organization Name: This is the name of the Organization requesting the Grant. This is what you are known as and should be your legal name that is tied to your Federal Tax ID number.

Corporate Office Location: Enter Location of Corporate office if you are part of a corporation. If not enter NA

Phone Number: Include Area code full 10 digit number. This is the number that if we have questions we can reach you at.

Address: Enter Address of Entity requesting the Grant Funds. This would be the address where information can be sent to you by the board and a physical address.

Organization Name: This is the name of the Organization requesting the Grant. This is what you are known as and should be your legal name that is tied to your Federal Tax ID number.

Organization Status: This is how you Federal Tax ID is listed as for PROFIT or Non-Profit

Specified Dollar Amount Requested: This is the amount of grant you are requesting for the entire Year.

Contact Person: This is the individual that we contact if we have questions not only on RFP but for general contact.

Title: This is the position the named Contact Person above holds.

Email: This is the email where we can communicate with you including Meeting notices and other documents to be emailed to.

Source of Funds

Camden County Senior Funds Requested: This is the Funds requested from Camden County for the New Contract year January 1 through Dec 31.

Central Mo Area Agency on Aging: This is the funds you will receive from Central Area on Agency for the same time frame as the Grant funding for Camden County.

Donations: This is a listing of donations you received during the current Grant Period.

Fundraisers: This is the amount of funding you received in Fundraisers for the current Grant Period.

Bank Interest: This is the amount of Interest from all accounts you received for the entire year.

Others: (specify): This is the funding you receive from other entities not listed. Please list name of source and amount expected for upcoming grant period.

Projected Meals and Individuals

List the titles only, of those personnel involved in the provision or the administration of the proposed services: List all individuals who are involved with the Entity requesting funds including but

not limited to: Director, Management Company, Secretary, Treasurer, President, CEO, Salaried staff, anyone you pay to assist in fulfilling your entities services to Camden Seniors 60 and over, Etc…)

Total Number of Employees: Enter the total number of employees your organization has.

Total Amount of Salaries: Enter the total for all salaries for your organization.

Total Number of Meals Projected: Enter the total number of meals you anticipate providing across all individuals both congregate and homebound.

Total Number of Individuals Projected: Enter the total number of _unduplicated_ individuals you anticipate serving.

% of Camden County Residents: This is the total number of meals you project to provide to Camden Seniors. Number of Camden county residents /Total Number of individuals served x 100 = % of Camden county residents.

Home Bound Meals

Total Number of Meals Projected: This is the total number of homebound meals you expect to serve by your organization all year to anyone.

Total Number of Individuals Projected: This is the total number of unduplicated persons you expect to accept home bound meals for the year.

%of Camden County Residents: This is the number of Camden County Residents who are projected to be provided home bound meals expressed as a percentage. # of Camden county residents taking home bound meal divided by the total number of home bound meals provided multiply by 100 to get the percent.

Expense Items

Personnel Salaries Camden Funds Expended: This is the funds from Camden County used to pay Personnel Salaries

Personnel Salaries Other Funds Expended This is the total for funds used from other sources to pay Personnel Salaries. The above two totals should equal the box asking Total amount of Salaries.

Travel (Staff & Volunteers) Camden Funds Expended: This is the amount of Camden County funds that are used for travel expenses. Gas/Mileage ect…

Travel (Staff & Volunteers) Other Funds Expended: This is the amount of Other revenue sourced funds that are used for travel expenses. Gas/Mileage ect…

Raw Food Camden Funds Expended: This is the Amount of Camden Funds that will be used to pay for the cost of Raw Food.

Raw Food Other Funds Expended This is the Amount of Other Sourced Funds that will be used to pay for the cost of Raw Food.

Indicate Contract Period: Our Grant funding is from January 1 to Dec 31 of each year. With disbursements made in February for Grants approved in January. Example of entry January 1 to Dec 31, 2022.

Remaining Funds from Previous Years Grant Enter the total remaining funds available at the time of the application for Grant from current Grant Funds.

Indicate the total number of Camden County seniors projected to be served by your agency in the coming year regardless of funding source. This is the total number of Camden County Seniors projected to be served by your agency regardless if grant money will be used to cover services for them.

Indicate the total number of Camden County seniors projected to be served by your agency in the coming year utilizing Camden Co. funding. This is the total number of Camden County Seniors projected to be served by your agency that will be using Grant funds to cover services for them.

CAMDEN CO. SENIOR CITIZENS' SERVICES FUND BOARD COMMENTS/SUGGESTION and/or SUMMARIZE SERVICES PROVIDED. In this box you will list the services you will provide, identify how the services impact seniors in our County. Why the funds are necessary for your Agency. Please identify the number of seniors that would be at risk if Grant funds were not received and what the impact on those seniors would be.