

**Webb County
Emergency Food & Shelter Program**

**Phase 37
Applicant Information**

Name of Agency: Webb County Community Action Agency

Address: 520 Reynolds Street

City: Laredo State: Texas Zip Code: 78040 County: Webb

Telephone Number: (956) 523-4182 Fax: (956) 717-2257 E-Mail: mgsilva@webbcountytx.gov

Agency Classification: Non-profit Unit of Government

Contact Person: Maria Silva - CSS Program Manager

Alternate Contact Person: James Flores - Director

Is agency currently providing emergency food and/or shelter assistance? Yes

If so, in what manner?

WCCAA offers emergency food bags to clients in need. Under the Meals-on-Wheels Program the agency is able to provide cooked home delivered meals to the eligible population. Due to COVID-19, the agency is also assisting eligible clients with meal packages.

What are your funding sources?

WCCAA has two funding sources for emergency food services. The Emergency Food and Shelter Program and the Community Service Block Grant.

Does agency practice non-discrimination? Yes

Does agency have an accounting system in place and conduct annual audit of program? Yes

Date of last audit: 09/30/2019 (Attach most current Audit)

Copy of your current program budget. (Revenues & Expenditures)

Does agency have a volunteer board of directors or advisory board? Yes
(Attach Board Roster)

**Total allocation for Webb County Phase 37 is \$93,077 (less \$1,862 for administration).
The total amount available for each category is \$23,019 (food, shelter, rent or utilities).**

Funds Requested Per Category

✓ \$ 5,000 Food \$ _____ Shelter \$ _____ Utilities
\$ _____ Rent \$ _____ Other

Total amount of grant request for your agency: \$ _____

Provide an approximate breakdown as to the number of meals, nights of shelter, or days of energy you will provide with the grant amount requested for Phase 37. If you received Phase 36 funding, provide the client statistical information for the area of funding. (Food: number of meals served; shelter: number of clients assisted; utilities: total number of clients helped and dollar amount for water, gas, electricity; rent/mortgage: total number of clients helped in each category and dollar amount).

Program/Services: Provide a description of agency's target population, program services, and eligibility criteria. (Attach copy of agency's client application and eligibility guidelines.)

Goals and Objectives: For each category of funding, list the goals and objectives that your agency plans to achieve through this funding source.

Maria Silva

Type Name of Authorized Representative

CSS Program Manager

Title

Maria Silva

Digitally signed by Maria Silva
Date: 2020.05.27 20:51:21 -05'00'

Signature of Authorized Representative

05/27/20

Date

Every agency must submit:

original application

one set of required attachments

- 1. Most Recent Audited Statements**
- 2. Program Budget**
- 3. Board /Advisory Board Roster**

Application Deadline: May 28 at 12:00 Noon

United Way of Laredo, Inc.

1815 E. Hillside Road

uwlaredo@unitedwaylaredo.org