

<b>STRONG INDIVIDUALS AND FAMILIES IMPACT COUNCIL REQUEST FOR PROPOSAL CHECKLIST FOR INDEPENDENT APPLICATIONS</b>	<b>This Checklist must accompany your submission via e-CImpact.</b>
Agency Name _____	Contact Person _____
Program Name _____	Title _____
Address _____	Contact Phone _____
Phone _____	Contact Email _____

<b>The following list represents all required elements of the RFP.</b>	<u>Completed and verified:</u> <u>Indicate completed with</u> <u>initial and date</u>
Please note United Way will not accept:	Initial                      Date
<ul style="list-style-type: none"> <li>• incomplete proposals</li> <li>• proposals submitted via mail/e-mail or delivered in person</li> <li>• proposals submitted after the deadline</li> </ul>	

<b>Application Form in e-CImpact</b>		
Organization Information Section		
Organization's Capacity Section		
Program Design Section (related Implementation Plan is a required document)		
Performance Measures and Evaluation Section (Narrative and Performance Measure form)		
Program Budget Section (Program Budget form and Budget Narrative)		
Sustainability Section		

<b>Required Documents (to be uploaded in e-CImpact)</b>		
Implementation Plan Template		
Copy of IRS 501(c)(3) Determination Letter		
Articles of Incorporation and/or Certificate of Incorporation and any Amendments		
By-Laws		
Documentation of D.B.A. (if applicable)		
Certificate of Non-discrimination		
Proof of Insurance		
Current list of Board of Directors		
Current Organizational Chart		
Most Recent Audited Financial Statements (Must include Statement of Financial Position, Statement of Revenues and Expenses, Statement of Cash Flows and Footnotes.) If the agency's annual operating budget is \$250,000 or less and the agency does not have an audit, it may submit financial statements that have been reviewed by an independent Certified Public Accountant (CPA). United Way		

expects the audit/review would be complete within four months of the agency's fiscal year end.		
Single Audit (if applicable)		
Most Recent IRS Form 990		
Letters of Support (if applicable – required document(s) if listing partners)		
Checklist		

I acknowledge I have reviewed this Request for Proposal in its entirety and approve of its submission to United Way of San Antonio and Bexar County.

\_\_\_\_\_

Board Chair Signature

\_\_\_\_\_

Date

\_\_\_\_\_

CEO Signature

\_\_\_\_\_

Date