



**FULTON  
COUNTY**

**CONTRACT DOCUMENTS**

**FOR**

**REQUEST FOR PROPOSAL 25RFP020325C-MH**

**2025 COMMUNITY SERVICES PROGRAM**

**FOR**

**DEPARTMENT OF COMMUNITY DEVELOPMENT**

**OF**

**FULTON COUNTY, GEORGIA**

## CONTRACT AGREEMENT

THIS AGREEMENT (“Agreement”), entered into this **1st day of January 2025**, by and between **FULTON COUNTY**, Georgia (hereinafter referred to as “Fulton County” or “County”), a political subdivision of the State of Georgia, acting by and through its Community Development Department’s Youth and Community Services Division (“YCS”), and **Making A Way Housing, Inc** (hereinafter referred to as “Contractor”), a corporation organized as a nonprofit, tax exempt 501(c) (3) agency, authorized to conduct business within the state of Georgia (hereinafter collectively referred to as the “Parties”).

### WITNESSETH

WHEREAS, as part of its official functions, Fulton County is authorized to exercise the power of taxation pursuant to Art. IX, Section IV., Par. I of the Constitution of the State of Georgia of 1983, and to expend such funds raised by the exercise of said powers for public purposes as declared in Art. IX, Section IV., Par. II of the Constitution; and

WHEREAS, Contractor has in its employ personnel, and under its supervision, facilities and resources by which it can render to Fulton County and the citizens thereof certain services authorized by the aforementioned Constitutional provision; and

WHEREAS, Contractor has agreed to render services to the citizens of Fulton County, and the County has appropriated funds for those services; and

WHEREAS, the parties desire to execute a formal agreement for the services to be rendered by Contractor, and said services shall be defined, and consideration to be paid for such services by Fulton County for the successful performance of the services, and shall be enumerated.

The Agreement was approved by the Fulton County Board of Commissioners on **May 21, 2025, BOC#25-0398**.

NOW, THEREFORE, in consideration of the premises, payment of the sum hereinafter set forth and the performance of the services described herein, it is mutually agreed as follows:

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## **ARTICLE I - PARTIES AND TERM:**

(a) Fulton County, through its YCS, retains Contractor, and Contractor accepts retention by Fulton County to render the services as hereinafter defined and required; to perform such services in a manner and to the extent required by the parties herein; and as may be hereafter amended or extended in writing by mutual agreement of the parties.

(b) The Chairperson of the Board of Directors for the Contractor or authorized representative (hereinafter "Board Chair") represents that she/he is authorized to bind and enter into contracts on behalf of Contractor, including this Agreement.

(c) Nothing contained in this Agreement shall be constructed to be a waiver of Fulton County's sovereign immunity or any individual's official or qualified good faith immunity.

(d) This Agreement will remain in effect from **01/01/2025**, until midnight **12/31/2025**.

(e) Fulton County shall have the right to suspend immediately Contractor's performance hereunder on an emergency basis under this Agreement whenever necessary, in the sole opinion of Fulton County, to avert a life threatening situation or other sufficiently serious deficiency.

## **ARTICLE II - SCOPE OF CONTRACTOR'S DUTIES:**

Upon execution of this Agreement, the Contractor will provide the following services for Fulton County:

### **SCOPE OF WORK:**

#### **Community Services Program (CSP)**

**CSP Service Category:** Economic Stability/Poverty

**CSP Funding Priority(ies):**

**Children and Youth:** Not Applicable

**Disabilities:** Not Applicable

**Economic Stability:** 2. Training Job Development Employment which leads to self sufficiency Ex offender support services...,4. Access to digital literacy training for middle skill jobs-earn & learn models allowing job seekers to meet basic needs...,5. Improved access to economic opportunities programs/resources focused on foundational education...

**Health and Wellness:** Not Applicable

**Homelessness:** Not Applicable

**Senior Services:** Not Applicable

**Making A Way Housing, Inc, Favored To Win! Employment Services Program (F2W!-ESP)** will provide services at the following locations at specified times during the contract period of **01/01/2025** through **12/31/2025**:

**Start and end date of programming for which CSP funds will be used:**

**Start date:** 01/01/2025

**End date:** 12/31/2025

**Service Delivery Site(s):**

<b>Name of Program Site</b>	<b>Program Location (complete physical address)</b>	<b>Program City</b>	<b>Program State</b>	<b>Program Zip code</b>	<b>Fulton County District of the program (Facility) location</b>	<b>District(s) of Fulton County Residents Served by the program (facility) location</b>
Making A Way Housing Inc.	377 Westchester Blvd	Atlanta	GA	30314	4	4

**Approach and Design:**

**Making A Way Housing, Inc, Favored To Win! Employment Services Program (F2W!-ESP)** will provide services to **15** clients that reside in Fulton County, with CSP funding.

**Making A Way Housing, Inc, Favored To Win! Employment Services Program (F2W!-ESP)** will provide the following activities and services in Fulton County with CSP funding:

1. Identifies specific activities and services that will be provided to support one or more CSP funding

priorities.

The activities and services provided through F2W!-ESP support CCSP's Economic Stability/Poverty funding priority. The Favored To Win! Employment Services Program (F2W!-ESP) is a job readiness assessment and training program designed to assist the most disadvantaged individuals from underserved homeless populations by tailoring employment services to address their barriers, needs, and strengths. F2W!-ESP combines case management, vocational assessments, skill-building sessions, and a 4-week job readiness training program to help homeless individuals gain the knowledge and skills needed to become employable and self-sufficient.

Although the organization's initial focus was to provide decent, affordable supportive housing, a more inclusive continuum of care program model was adopted to address the multi-faceted nature of problems homeless and chronically homeless individuals face. Today, MAWH offers support services and resident access to a wealth of community resources, including case management, comprehensive referral services, transportation, and onsite support groups and life-skills training. The dedicated program staff assists formerly homeless and chronically homeless individuals with obtaining gainful employment, learning to cope with and manage mental illness, achieving long-lasting substance abuse recovery, and reintegrating back into the community as productive, independent citizens.

## 2. Identifies how the activities and services will be accomplished.

Making A Way Housing (MAWH) operates a gated housing community situated on 4- acres of land, located in southwest Atlanta's Grove Park neighborhood, which operates 24/7 year-round. MAWH provides emergency shelter, supportive transitional and permanent housing, and a pre-recovery program for single adults facing complex challenges related to chronic homelessness, substance addiction, mental illness, and HIV/AIDS. The facility consists of 66-two bedroom, one-bath apartment units and a 25- bed emergency shelter. Community spaces and supplemental services include a conference room, recreation room, fitness facility, laundry room, a clothes closet, and food pantry. Free meals are served daily, and the facility is conveniently located along a MARTA public transportation route. Participants accepted into MAWH's emergency and transitional housing program participate in monthly workshops and groups designed to address various issues that lead to housing instability. The participants begin to attend seminars within 7 days of their program acceptance. They must attend all MAWH mandatory meetings and at least 2 optional workshops/groups per month until completion of the program. Participants may attend more than the required number of workshops/groups during the month. The available workshop options include:- Weekly MAWH Community Meeting (mandatory for ALL MAWH residents): Weekly informal resident assemblies to discuss certain residential happenings, issues, problems, and to vote on decisions that affect the entire MAWH community.

- Disease Concepts Group: designed to educate residents on the disease of addiction.
- Healthy Love/ HIV 101: offering an in-depth overview of HIV, its impact on the body, how medication works, and the importance of adherence to medical care.
- Financial Literacy: addressing budgeting, financial planning, and credit.
- Life Skills: that teach the necessary skills every adult needs to manage their life.
- Population-Specific Peer-Support Groups: covering population-specific (heterosexual women, heterosexual men, MSM, and LGBTQI) topics in behavioral health and coping.
- Employment Training & Leadership Skills: Designed to assist individuals with acquiring and improving skills to enhance one's ability to obtain and or maintain employment.

All participants accepted into MAWH Programs must commit to abide by the MAWH's program policies and procedures with a primary emphasis on compliance with the zero tolerance, drug-free approach. Participants are also responsible for submitting documentation of group/meeting attendance. A record of all workshops attended by participants will be maintained in the participant's file and the Case Manager must document the client's monthly progress on their ISP and log notes into the Pathways tracking system.

The initial intake process into the MAWH's program generally occurs through the Damascus Inn Shelter Program. Through case management, clients gain access to health care, life skills training, literacy classes, workforce development training, a computer lab for resumes and job searches, and a food pantry for the individuals waiting for food stamp allocation or meals on wheels, and transportation to medical appointments. After leaving the MAWH Compound, the staff remains in contact with participants for up to 6 months to provide guidance and continued support and collect follow-up data.

Case Managers conduct an intake to MAWH residential programs and facilitate essential linkages for homeless and chronically homeless individuals to health and social services, including primary medical care and mental health counseling. Professional Case Workers are assigned to each client to assist in developing individualized care plans that identify relevant services needed to support the achievement of care plan goals. If a desire to work or receive training is identified, the client is referred to an Employment Specialist for an in-depth vocational assessment and to create an individual vocational career plan.

F2W!-ESP provides clients with a Job Readiness and Retention Training Program, a 4-week course that meets every Wednesday of the month from 9:00am to 12:30pm. The program includes sessions on: Orientation and Goal Setting; Communication Skills; Workplace Expectations; Interview Techniques; Effective Resume; Dress for Success; Employment Applications; and Job Searching.

The program works to increase financial literacy, budgeting skills, and access to gainful employment of the clients increases their potential for economic stability. The program also creates individualized service plans for each resident that identify and address personal and developmental barriers, including literacy, comprehension, and continuing education. Lastly, the program strives to alleviate hunger amongst our residents by providing nutritional meals, emergency food boxes and/or carry-over groceries for all clients, and three meals a day for our emergency shelter residents.

### 3. Fulton County "Health and Human Services" Key Performance Indicator(s)

Favored To Win! Employment Services Program (F2W!-ESP) addresses all four Fulton County "Health and Human Services" Key Performance Indicators.

1. Prevent illness by engaging in healthier behaviors.
  - a. Individualized case management combined with disease concepts/addiction groups will determine the percentage of FC residents engaged in substance abuse treatment and counseling.
2. Prevent health disparities by educating residents and connecting them to available resources.
  - a. 15 out of 15 program participants (100%) will be connected to available resources, reducing the number of FC residents who experience food insecurity.
3. Help residents realize their educational potential through community services.
  - a. The percentage of students over achieving each year is determined by evaluating participant achievements in life skills training, literacy classes, and workforce development trainings.
4. Support the vulnerable residents in our social services.
  - a. 15 out of 15 program participants (100%) will receive permanent supportive housing and support services.
  - b. To determine the percentage change in the homeless population year to year Case Managers/ Intake staff will collect baseline data at intake, and follow-up at 6 month and 12-month intervals to document program's contribution to reducing homeless population.

### 4. CCSP funding priorities as identified by the primary service category selected

F2W!-ESP is a job readiness assessment and training program that combines case management, supportive services, retention assistance, vocational assessments, skill-building sessions, and a 4-week



job readiness training program that was designed to help low-income disadvantaged jobseekers from underserved housing-challenged populations gain the knowledge and skills needed to become employable and self-sufficient. Therefore, the program's design and activities address 3 of the 5 of CCSP funding priorities under Economic Stability/Poverty.

1. Training/Job Development/Employment which leads to self-sufficiency. Ex-offender support services (employment, housing options and transitional skills training).

~ Improved access to economic opportunities, programs and resources and provide job-readiness skills for employment

2. Access to digital literacy / training for middle skill jobs including "earn and learn" models which allow job seekers to meet basic needs while training to enter living wage jobs.

3. Improved access to economic opportunities, programs and resources focused on foundational education, career exploration; coaching and provide job-readiness skills for employment. Wraparound Support to address basic needs during training (transportation, childcare).

## 5. Community collaborative relationships

In addition to working with traditional community-based organizations, MAWH leverages its resources and capacity to serve clients through formal and informal partnerships, work-release programs, social organizations, churches, businesses, and individuals interested in healthy, vibrant communities. MAWH's partners provide clients with affordable access to primary care services, medications, nutrition education, mental health counseling, substance abuse treatment, and employment services. The partnerships also reduce MAWH's operating costs by reducing the need for in-house program staff, thereby increasing our capacity to focus more on health education, testing, affordable housing, supportive services, and case management. These partnerships include: Atlanta Community Food Bank assists MAWH with alleviating hunger by providing affordable bulk food items; Dr. Patricia Benton provides MAWH residents with primary medical care services; HOPE Atlanta Programs of Travelers Aid provides MAWH with federally subsidized tenant-based rental assistance for no income clients needing emergency housing; Project Open Hand delivers meals to MAWH program for persons living with HIV/AIDS; Positive Impact provides free mental health and substance abuse counseling and psychological evaluations to MAWH residents; Salvation Army provides supportive emergency housing, refers homeless persons to MAWH program and provides 3rd party verification of homelessness; Walter Young General Dentistry offers oral healthcare services on a sliding scale basis to eligible MAWH program clients; WestCare Georgia offers wrap-around services to MAWH clients with mental health, chemical dependency, and HIV/AIDS-related problems.

### **Designation of CSP Funds:**

Based on the awarded amount of **\$30,000.00**, the CSP funds are designated according to the following cost categories: Administrative, Operational, and Direct Services.

***Administrative Expenditures*** CSP funds that are spent on indirect personnel expenses such as salaries, salary fringe, and benefits for executive / management, accountant, administrative support, etc. Includes direct and indirect charges for administration of the grant (**Note: Not more than 5% of total grant award can be used for administrative costs.**)

***Operational Expenditures***- CSP funds used to conduct agency/ organizational functions that are secondary to program service delivery such as: auditor, grant writer, consultants, insurance office/ warehouse lease or mortgage expenses, office supplies (pens, toner, paper, etc.), agency's utility expenses, staff transportation expenses, marketing/catalogs, etc. Not to include indirect or direct personnel expenses. (**Note: Not more than 25% of total grant award can be used for operational expenditures.**)

***Direct Service Expenditures***- CSP funds utilized to provide services directly to agency/program participants such as payments made on behalf of participants for rent, utilities, food, shelter, transportation (rentals, gas, and parking, bus drivers, participant's public transportation costs, etc.), scholarships and day care vouchers, salaries and fringe benefits for direct service personnel (Case Managers, Educators, Subcontractors, etc.), program supplies (educational/instructional materials, paper, pencils, markers, etc.) directly consumed by participants. Program materials that may be pertinent to the scope of services of a funded program and that aid in contractor meeting contracted program outcomes are included in this definition (i.e. children's story books, educational games, puzzles, and flash cards).

Throughout the contract period, program expenditures will be monitored (via performance reports) to ensure that funding is utilized as contracted.

<b>Cost Category</b>	<b>Designation of CSP Funding Award</b>
<b>Administrative</b> (5% Admin max of total funds awarded.)	\$1,500.00
<b>Operational</b> (25% Operational max of total funds awarded.)	\$1,000.00
<b>Direct Services</b>	\$27,500.00
<i>Total</i>	\$30,000.00

## **Explanation of Funding Details:**

### **1. Explanation of Funding Details**

**Administrative Expenses: \$1,500.00** Overall administration of grant activities. Administrative support to prepare and maintain records of agency database and prepare financial reports that track all grant activities. ( $\$30,000 \times 5\%$  awarded max cap = \$1,500.00)

#### **Operational Expenses: \$1,000.00**

1. Grant Writer- **\$1,000.00** For required grants management and filing grant reports, sourcing program resources and leverage supports to ensure program sustainability. ( $\$22,500 \times 4.5\% = \$1,000.00$ )

#### **Direct Services Expenses: \$27,500.00**

1. Program Director - Case Manager - \$14,000 (25% FTE @\$55,000)
2. Fringe Benefits for Program Staff-Case Manager - \$2,100 (15% of \$14,000)
3. WD Employment Specialist-Trainer - \$8,200.00 To supplement the decrease in funding, this is now a contract position to conduct monthly prevocational skills classes on workforce reentry, continuing education, job fairs, resume writing, interview skills, basic budgeting, financial literacy, and basic computer skills. (1 consultant x 5.5 hours per month @\$125 per hr x 12 mths.)
4. Food and Beverage - \$3,200 (Food, prepared meals, and snacks for program participants during job training sessions and workshops to eliminate daily needs barriers and improve participant focus.

### **2. MAWH F2W!-ESP Proposed Budget Timeline:**

For the CCSP grant contract period of January 1 to June 30, 2025, Making A Way Housing proposes to expend 50% of the funds awarded. For the CCSP grant contract period of July 1 to December 31, 2025, Making A Way Housing proposes to expend 50% of the funds awarded. 100% of funds awarded will be expended by December 31, 2024.

### **3. How CSP funding amount support the proposed need**

Over the past 6 years, MAWH has consistently served double the number of FC clients contracted and exceeded our program deliverables, with a significant waiting list after each funding cycle. The number

of FC residents signed up on our waiting list seeking support services, job training, employment, and continuing education services is a testament to the need for the services Favored To Win! provides.

MAWH's 2025 funding award from Fulton County CCSP is \$30,000.

This request includes \$1,500 in Administrative costs, which is 5% of the awarded amount of \$30,000.

This request includes \$27,500 designated to Direct Services Expenses, including program staff salaries, fringe benefits, client training meals, and program snacks, as well as our Workforce Development Trainer/Consultant.

This request also includes \$1,000 designated for Operational Expenses including program oversight expenses of grants management and filing grant reports.

### **Program Performance Measures:**

**Making A Way Housing, Inc agrees to track and report program performance to the Fulton County Department of Community Development.**

#### **County Defined Performance Measure(s):**

**Children and Youth:** Not Applicable

**Disabilities:** Not Applicable

**Economic Stability:** 2. Number of referrals to WorkSource Fulton / WorkSource Atlanta,3. Number of individuals placed in Living Wage Employment; receiving training/job development/employment support...,4. Number of individuals receiving access/support for educational resources...,6. Number of individuals with improved access to economic opportunities, programs/resources focused on education...

**Health and Wellness:** Not Applicable

**Homelessness:** Not Applicable

**Senior Services:** Not Applicable

**The following program measures/ Key Performance Indicators ("KPI's") will be utilized to track and report program outcomes for the Fulton County residents supported with CSP funding, during the funding period 01/01/2025 through 12/31/2025:**

## **2025 CSP County Defined Performance Measures- Economic Stability/Poverty**

During the FC-CCSP funding period of January 1, 2025- December 31, 2025, MAWH proposes to report on the following Indicators, Goals, and Outcomes:

FC INDICATOR 1: The number of participants referred to WorkSource Fulton/WorkSource Atlanta.

GOAL 1: To provide 15 Fulton County residents with referrals to WorkSource Fulton/WorkSource Atlanta as needed.

Outcome 1: From January 1, 2025- December 31, 2025, A minimum of 65% (or 10) unduplicated Fulton County residents served will be referred to WorkSource Fulton and/or WorkSource Atlanta.

FC INDICATOR 2: The number of individuals placed in Living Wage Employment; receiving training/job development/employment support services which leads to self-sufficiency.

GOAL 2: To provide 15 Fulton County residents with job training and employment readiness and supportive services. MAWH Intake staff and Case Managers will collect baseline data at intake, and follow-up at 6 month and 12-month intervals to determine the number of program participants placed in Living Wage Employment.

OUTCOME 2: From January 1, 2025- December 31, 2025, A minimum of 55% (or 9) unduplicated Fulton County residents served will earn a living wage.

FC INDICATOR 3: The number of individuals receiving access to and support for educational resources.

GOAL 3: To provide 15 Fulton County residents with individualized assessments to identify relevant services needed to support educational and/or employment goals.

OUTCOME 3: From January 1, 2025- December 31, 2025, A minimum of 65% (or 10) unduplicated Fulton County residents served will complete a comprehensive individualized care assessment and commit to an Individual Vocational Career Plan.

### **County defined performance measures**

During the contract period MAWH F2W!-ESP will report on the following county defined performance measures:

1. 65% (or 10) of participating individuals will be referred to WorkSource Fulton and/or WorkSource Atlanta
2. 55% (or 9) of participating individuals will earn a living wage.
3. 65% (or 10) of participating individuals will complete a comprehensive individualized care assessment and commit to an individual Vocational Career Plan.

### **Data Collection**

MAWH collects baseline data and benchmarked successes to evaluate the successful outcomes of its program efforts. The organization also utilizes the federally mandated Homeless Management Information Systems (HMIS), known locally as the PATHWAYS Compass, to capture client demographic details, income, program progress, and services

provided. The staff and administrators attend annual training to maintain familiarity with the database. Participant data is collected during intake and throughout participation in the program. This information is documented in the Pathways HMIS database and is also kept in a file maintained at the MAWH administrative office. The file contains intake documents, copies of identification and income verification, waivers, individual service plans, case notes, and referral forms. Electronic files are stored and backed-up on an off-site server system.

Participants are expected to attend regularly scheduled meetings with Case Managers, who use the meeting to gather information regarding individual service plan progress and document updates in both the Pathways system and participants' files. These interactions can take place daily or weekly, depending on the specific needs of each participant. The data is evaluated weekly by the case management team, which is overseen by the Program Director.

After participants leave the program, MAWH staff remains in contact with them for 3, 6 and 12-month intervals to provide guidance and continued support while collecting follow-up data. During intake, all participating individuals are required to sign a release form that gives MAWH permission to contact their landlord and treatment provider to collect data about their progress. The information collected and reported is independently verified, audited, and managed by Pathways, Housing Opportunities for Persons with AIDS (HOPWA), the Community Development Block Grant (CDBG), and an external CPA. Clients and staff use anonymous evaluation tools to determine program quality, effectiveness, staff work ethic, and program efficacy.

### **Agency Defined Performance Measure(s):**

Additionally, during the FC-CCSP funding period of January 1, 2025- December 31, 2025, MAWH proposes to report on the following agency Indicators, Goals, and Outcomes.

MAWH INDICATOR 1: The number of persons who receive case management, vocational assessments, skills-building sessions, and a 4-week job readiness training program that increases their employability.

GOAL 1: To utilize a variety of resources and methods that connect 15 Fulton County residents to employment services.

OUTCOME 1: From January 1, 2025- December 31, 2025, A minimum of 65% (or 10) of program participants will enter employment and/or receive education/training.

MAWH INDICATOR 2: The number of individuals with improved access to economic opportunities, programs and resources focused on foundational education and provide job-readiness skills for employment.

GOAL 2: To provide 15 Fulton County residents access to stable supportive housing, case management and job readiness training.

OUTCOME 2: January 1, 2025- December 31, 2025, 100% (or 15) unduplicated Fulton County residents will receive permanent supportive housing and support services.

MAWH INDICATOR 3: To improve access to community resources that reduce economic burdens on job-seekers.

GOAL 3: To provide 15 Fulton County residents access to MAWH's food pantry and essential resources to reduce food insecurity and improve living conditions.

OUTCOME 3: January 1, 2025- December 31, 2025, 100% (or 15) unduplicated Fulton County residents will receive auxiliary supportive services of healthy food options, groceries, and/or clothing.

Agency Defined Performance Measures:

During the contract period MAWH F2W!-ESP will report on the following agency defined performance measures:

1. 65% (or 10) of participating individuals will enter employment and/or receive education/training.
2. 100% (or 15) of participating individuals will receive permanent supportive housing and support services.
3. 100% (or 15) of participating individuals will receive auxiliary supportive services of healthy food options, groceries, and/or clothing.

### **ADDITIONAL REQUIREMENTS**

***Failure to adhere to the terms of this Agreement, in addition to the requirements listed below, may result in one or all of the following; delayed disbursement or total loss of awarded funds, and / or ineligibility to receive an RFP award during the next funding cycle.***

1. Contractor agrees to develop, in conjunction with Fulton County, a process of accepting and serving Fulton County residents referred by the Youth and Community Services Division of Fulton County Government.
2. As consideration for the County providing funding and the non-profit entity accepting same, the non-profit entity shall, upon the County's request, participate in County-sponsored events and activities on County property, when feasible. The non-profit agency shall use its best efforts to comply with the County's request provided that it is given at least one week's notice to do so. Failure to participate will be taken into consideration for future funding requested by the non-profit entity.
3. Contractor agrees to allow staff from the Fulton County Department of Community Development to conduct contract compliance site visits as necessary (announced or unannounced).
4. During the site visit, Contractor will be required to allow staff to monitor programming, as well as review client rosters / sign-in sheets and/ or Registration information that should include complete addresses of Fulton County residents served by this funding.

5. Contractor agrees to comply with the Operational Specifications outlined in **2025 Community Services Program 25RFP020325C-MH**.

6. Contractor agrees that advertising, promotions and other publicity in connection with the supported program(s) shall include the following acknowledgment: **“Funding provided in part by the Fulton County Board of Commissioners under the guidance of the Department of Community Development.”**

*Note: If your agency uses logos versus text, you may substitute the language above with the Fulton County Logo.*

### **Reporting**

***It is the Contractor’s responsibility to ensure accurate reporting of all information contained in the performance reports. Reports and supportive documentation that consistently include erroneous/ inaccurate data may result in a required reimbursement of funding and/or may negatively impact future funding.***

7. Contractor will be required to submit completed performance reports (with deadlines of **(July 18, 2025, and January 16, 2026)**) to adhere to the requirements outlined in the Performance Report Instructions, as well as the format provided by the Fulton County Department of Community Development. Future funding will be affected if performance reports are not submitted by stipulated due dates.

8. Contractor will be required to provide demographic information concerning the Fulton County residents served, including, but not limited to age, race/ethnicity and gender.

9. Contractor will be required to report the number of UNDUPLICATED/NEW participants directly served through the Community Services Program funding. **Please note:** Failure to serve the total number of participants contracted to be served with CSP funding may result in reimbursement of CSP funding to Fulton County. Failure to reimburse the funding requested will result in the ineligibility to receive future funding.

10. Contractor will be required to submit unduplicated client rosters in a spreadsheet format that includes the complete residential addresses of the Fulton County residents served with CSP funding, and LEDGERS demonstrating how Community Services Program funds were expended for the specified reporting period.

### **Expenditure of Funds**

11. Contractor is prohibited from utilizing CSP funds for capital expenditures. (A “capital expenditure” is defined as: any resource not completely consumed during the contract year, i.e. computers, printers, construction, vehicles, cell phones, etc.) Program materials that may be pertinent to the scope of services



of a funded program and that aid in contractor meeting contracted program outcomes are excluded from the definition of “capital expenditure” (e.g., children's story books, educational materials, games, puzzles, and flash cards).

12. Community Services Program funds must be expended by December 31<sup>st</sup> of the contract year. All funds that are not spent by this date must be reimbursed to Fulton County Government within 30 days of written request. A Contractor’s failure to adhere to this requirement will result in one or more of the following: inability to receive future funding from Fulton County, and/or legal action against the agency to recoup funding that are not reimbursed by the deadline.

### **ARTICLE III - COMPENSATION FOR SERVICES**

(a) Fulton County agrees to pay Contractor a maximum sum of **\$30,000.00**.

(b) Upon receipt and approval of Contractor’s invoice delineating projected expenditures for the first six months of the contracting period. Upon receipt and approval of said invoice, County shall pay Contractor the first six months of compensation provided for by this Agreement. The Contractor shall provide Fulton County with a second invoice delineating projected expenditures for the remaining six months of the Agreement Term. Upon receipt and approval of said invoice, Fulton County shall pay Contractor the second six months of compensation provided by this Agreement. **A failure by Contractor to submit the invoice for the first and/ or second six months of the contracting period will constitute a breach of this Agreement.**

(c) If through any cause, Contractor shall fail to fulfill its obligation under this Agreement in a timely and proper fashion or in the event that any of the provision or stipulations of this Agreement are violated by Contractor, Fulton County shall thereupon have the right to immediately suspend or terminate this Agreement by serving written notice as defined herein upon Contractor of Fulton County’s intent to suspend or terminate this Agreement. If the Agreement is terminated pursuant to this paragraph, Contractor shall be exclusively limited to receiving only the compensation for work performed in a manner satisfactory to Fulton County up to and including the date of the written termination notice.

(d) The Contractor agrees and understands that all expenditures must be consistent with the scope and purpose of this Agreement, and expenditures must be consistent with the guidelines and definitions established in **2025 Community Services Program 25RFP020325C-MH**, which is hereby incorporated by reference herein and made a part of this agreement. The County reserves the right to approve and reject payment for expenditures which are not consistent with the scope and purpose of this Agreement, and which the County determines are not consistent with the guidelines and definitions established in the Community Services Program RFP.

(e) The Contractor agrees and understands that Fulton County has the right to recover funds from Contractor for compensation received, pursuant to subsection (b) above if Contractor fails to perform the services outlined in Article II or does not perform such services to the satisfaction of Fulton County.

#### **ARTICLE IV - RECORD KEEPING**

(a) Contractor shall maintain accurate records of the expenditure and disposition of funds, and such records must be in accordance with good accounting practices, and made available for inspection and audit by Fulton County at a time mutually agreeable to parties and upon thirty (30) days' notice to contractor.

(b) All reports and communications, with supportive documentation consistent with contract provisions outlined in Article II, must be provided to Fulton County, in accordance with Article IV.

(c) A performance report, with supportive documentation consistent with provisions of the Agreement outlined in Article II, must be provided to Fulton County no later than **July 18, 2025 for the period January 1, 2025-June 30, 2025; and January 16, 2026 for the period July 1, 2025-December 31, 2025.**

(d) Contractor shall be responsible for sending staff representation to mandatory meetings that will be sponsored by the Fulton County Department of Community Development. Contractor will be notified in advance of said meetings.

(e) All notices, program reports and other communications required to be given under this Contract shall be sufficient if in writing and either delivered via e-mail, personally or sent by postage, prepaid, certified or registered United States mail, return receipt requested, or e-mail addressed as follows:

To Fulton County:

**Department of Community Development**  
**c/o: Youth and Community Services Division**  
**[hsd.grants@fultoncountyga.gov](mailto:hsd.grants@fultoncountyga.gov)**  
**137 Peachtree Street, SW**  
**Atlanta, Georgia 30303**

To Contractor:

**Making A Way Housing, Inc**  
**377 Westchester Blvd**  
**Atlanta, Georgia 30314**

The Parties may only modify or update the above-referenced addresses during the term of this Agreement by providing formal notice to the other party of such a change pursuant to the terms of this provision.

(f) Contractor understands and agrees that, upon Fulton County's determination that Contractor is not or has not been in substantial compliance with any term of this Agreement with respect to the performance and provision of services at any single delivery site, Fulton County shall thereupon have the right to immediately suspend or terminate this Agreement upon written notice to Contractor. Contractor further understands and agrees that if Fulton County determines that Contractor is not or has not been in substantial compliance with any term of this Agreement with respect to the performance and provision of services at any single delivery site, Fulton County may request, and the Contractor shall provide, any and all additional reports, records or documentation Fulton County deems necessary to evaluate, assess and/or measure Contractor's overall level of performance under this Agreement, including Contractor's performance at other delivery sites.

#### **ARTICLE V - INDEMNIFICATION**

Contractor hereby covenants and agrees to indemnify and hold harmless Fulton County, its Commissioners, officers, and employees from all claims, losses, liabilities, damages, deficiencies, demands, judgments, or costs (including without limitation reasonable attorney's fees and legal expenses) suffered or occurred by such party, whether arising in tort, contract, strict liability or otherwise, including without limitation, personal injury, wrongful death or property damage arising in any way from the actions or omissions of Contractor, its directors, officers, employees, agents, successors and assigns in connection with its acceptance, or the performance, or nonperformance of its obligations under this Agreement; provided, however, that nothing herein shall be construed to preclude the Contractor from bringing suit against the County for breach of the terms of this Agreement.

#### **ARTICLE VI – TERMINATION OF AGREEMENT FOR COUNTY'S CONVENIENCE AND FOR CAUSE**

(a) This Agreement is effective on **01/01/2025**, and shall terminate on **12/31/2025**, unless earlier terminated in accordance with the provisions of this Agreement. Notwithstanding termination of the Agreement, Contractor is obligated to fulfill all of its obligations, including its reporting requirements.

(b) Notwithstanding the above provisions, Fulton County may terminate this Agreement for convenience, or Fulton County or the Contractor may terminate this Agreement at any time for any reason by giving written notice of the intent to terminate the Agreement thirty (30) days in advance, by

certified mail, return receipt requested, with proper postage prepaid, or by hand delivery, to the other party at the physical address provided herein for notice. The termination shall become effective on the thirtieth (30th) day after the date of such written notice unless the parties otherwise agree in writing. If this Agreement is terminated pursuant to this paragraph, Contractor shall be exclusively limited to receiving compensation for the work satisfactorily performed up to and including the effective date of termination.

(c) Fulton County shall have the right to suspend immediately Contractor's performance hereunder on an emergency basis whenever necessary, in the opinion of Fulton County, to avert a life threatening situation or other sufficiently serious risk.

(d) In the event that this agreement is terminated by Fulton County or Contractor, following the Fulton County's determination that Contractor is not or has not been in substantial compliance with any provision of this agreement, Contractor agrees that Fulton County shall have the right to request repayment in full of all compensation paid to Contractor pursuant to Article III of this agreement. If Fulton County exercises its right under this subsection, Contractor agrees to and shall repay Fulton County all compensation paid to Contractor pursuant to Article III of this Agreement.

(e) In the event that this agreement is terminated by Fulton County or Contractor, following the Fulton County's determination that Contractor is not or has not been in substantial compliance with any provision of this agreement, Contractor agrees that Fulton County shall have the right to terminate this Agreement between Fulton County and Contractor without penalty. Contractor acknowledges and agrees that Fulton County's right to terminate includes, but is not limited to, the right to withhold any and all future compensation due to Contractor pursuant to the terms of any and all other agreements between Fulton County and Contractor.

(f) In the event that this Agreement is terminated by Fulton County or Contractor, following Fulton County's determination that Contractor is not or has not been in substantial compliance with any provision of this Agreement, Contractor agrees that it shall not be eligible to either enter or to apply to enter into future contracts with Fulton County until it has addressed any and all areas of deficiency or non-compliance to Fulton County's satisfaction.

## **ARTICLE VII - INDEPENDENT CONTRACTOR STATUS**

(a) Nothing contained herein shall be deemed to create any relationship other than that of an independent contractor between Fulton County and Contractor. Under no circumstances shall Contractor, its directors, officers, employees, agents, successors or assigns be deemed employees, agents, partners, successors, assigns or legal representatives of Fulton County.

Contractor acknowledges that **Making A Way Housing, Inc.**, its directors, officers, employees, agents and assigns shall have no right of redress pursuant to the Personnel Rules and Regulations of Fulton County.

(b) The Contractor shall pay all sales, retail, occupational, service, excise, old age benefit and unemployment compensation taxes, consumer, use and other similar taxes, as well as any other taxes or duties on the materials, equipment, and labor for the work provided by the Contractor which are legally enacted by any municipal, county, state or federal authority, department or agency at the time bids are received, whether or not yet effective. The Contractor shall maintain records pertaining to such taxes as well as payment thereof and shall make the same available to Fulton County at all reasonable times for inspection and copying. The Contractor shall apply for any and all tax exemptions which may be applicable and shall timely request from Fulton County such documents and information as may be necessary to obtain such tax exemptions. Fulton County shall have no liability to the Contractor for payment of any tax from which it is exempt.

#### **ARTICLE VIII - INSURANCE**

Contractor agrees to obtain, maintain and furnish to Fulton County, a Certificate of Insurance (COI) showing the required coverage during the entire term of this Agreement. All insurance limits are listed in the "Insurance and Risk Management Provisions" document, Attachment "A", with Fulton County, Georgia added as an "Additional Insured". The cancelation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

#### **ARTICLE IX – AMENDMENTS AND MODIFICATIONS TO CONTRACT**

(a) This Agreement constitutes the entire agreement between Fulton County and Contractor, and there are no further written or oral agreements with respect thereto, no variations, amendments or modifications of this Agreement, and no waiver of its provisions, shall be valid unless in writing and signed by Fulton County's and Contractor's duly authorized representatives.

(b) Modifications or amendments which require a change in compensation level must be approved by the Fulton County Board of Commissioners and Contractor; other modifications, amendments or variations may be agreed to in writing, between the Contractor and the Contract Administrator when the amount of this Agreement and its Term remain unchanged.

## **ARTICLE X - SUBCONTRACTING**

Contractor shall not subcontract any part of the work covered by this Agreement or permit subcontracted work to be further subcontracted without prior written approval of Fulton County.

## **ARTICLE XI - ASSIGNABILITY**

Contractor shall not assign or subcontract this Agreement or any portion thereof without the prior expressed written consent of Fulton County. Any attempted assignment or subcontracting by Contractor without the prior expressed written consent of Fulton County shall at the County's sole option terminate this Agreement without any notice to Contractor of such termination. Contractor binds itself, its successors, assigns, and legal representatives of such other party in respect to all covenants, agreements and obligations contained herein.

## **ARTICLE XII - SEVERABILITY OF TERMS**

If any part or provision of this Agreement is held invalid the remainder of this Agreement shall not be affected thereby and shall continue in full and effect.

## **ARTICLE XIII – PRECEDENCE OF AGREEMENT**

In the event that any language in the Department of Community Development's Community Services Program RFP is in conflict with the language in this Agreement, this Agreement shall take precedence.

## **ARTICLE XIV - EQUAL EMPLOYMENT OPPORTUNITY**

In accordance with Fulton County Code Sections 102-391 (Equal Opportunity Clause) and 154-3 (Policy of Equal Opportunity): (a): During the performance of this Agreement, the Contractor agrees as follows:

(1) The Contractor shall not discriminate against any employee or applicant for employment because of race, religion, color, sex, sexual orientation, national origin, or disability. As used herein, the words "shall not discriminate" shall mean and include without limitations the following:

Recruited, whether by advertising or other means; compensated, whether in the form of rates of pay, or other forms of compensation; selected for training, including apprenticeship; promoted; upgraded; demoted, downgraded; transferred; laid off; and terminated.

The Contractor agrees to and shall post in conspicuous places, available to employees and

applicants for employment, notices to be provided by the contracting officer setting forth the provisions of the nondiscrimination clause.

(2) The Contractor shall in solicitation or advertisement for employees, placed by or on behalf of the Contractor; state that all qualified applicants will receive consideration for employment without regard to race, religion, color, sex, sexual orientation, national origin, or disability.

(3) The Contractor shall send to each labor union or representative of workers with which the Contractor has a collective bargaining agreement or other contract or understanding, a notice advising the labor union or workers' representative of the Contractor's commitments under the Equal Opportunity Program of Fulton County and under this Article, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

(4) The Contractor and its subcontractors, if any, shall file Compliance Reports at reasonable times and intervals with Fulton County in the form and to the extent prescribed by the director. Compliance Reports filed at such times as directed shall contain information as to the employment practices, policies, programs and statistics of the Contractor and its subcontractors.

(5) The Contractor shall include the provisions of paragraphs (1) through of this equal employment opportunity clause and every subcontractor purchase order so that such provision shall be binding upon each subcontractor.

#### **ARTICLE XV - CAPTIONS**

The captions are inserted herein only as a matter of convenience and for reference and in no way define, limit, or describe the scope of this Agreement or the intent of the provisions thereof.

#### **ARTICLE XVI - GOVERNING LAW**

This Agreement shall be governed in all respects, as to validity, construction, capacity, and performance or otherwise, by the laws of the State of Georgia.

#### **ARTICLE XVII - JURISDICTION**

This Agreement will be executed and implemented in Fulton County. Further, this Agreement shall be administered and interpreted under the laws of the State of Georgia. Jurisdiction of litigation arising from this Agreement shall be in the Fulton County Superior Courts. If any part of this Agreement is found to be in conflict with applicable laws, such part shall be inoperative, null and void insofar as it is in conflict

with said laws, but the remainder of this Agreement shall be in full force and effect.

Whenever reference is made in the Agreement to standards or codes in accordance with which work is to be performed, the edition or revision of the standards or codes current on the effective date of this Agreement shall apply, unless otherwise expressly stated.





**F. GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT AFFIDAVIT**

Contractor's Name:	MakingAWayHousingInc
Project No. and Project Title:	Favored to Win

**CONTRACTOR AFFIDAVIT**

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 91, stating affirmatively that the individual, entity or corporation which is engaged in the performance of services on behalf of Fulton County Government has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established by O.C.G.A. § 13-10-91.

Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

**93249**

Federal Work Authorization User Identification Number (EEV/E-Verify Company Identification Number)

**01/22/2008**

Date of Authorization

**Elizabeth Thompson**

Authorized Officer or Agent  
(Name of Contractor)

**I hereby declare under penalty of perjury that the foregoing is true and correct**

**Elizabeth Thompson**

Printed Name (of Authorized Officer or Agent of Contractor)

*Elizabeth Thompson*

Signature (of Authorized Officer or Agent)

**Executive Director**

Title (of Authorized Officer or Agent of Contractor)

**2/21/2025**

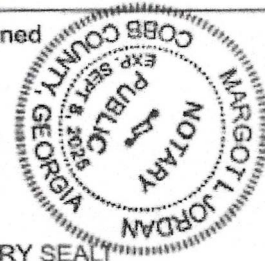
Date Signed

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

**23<sup>rd</sup>** DAY OF **January**, 20**25**

*Margot L. Jordan*

Notary Public



[NOTARY SEAL]



**GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT AFFIDAVIT**

Contractor's Name:	Making A Way Housing Inc
Project No. and Project Title:	Favored to Win

**FORM G: SUBCONTRACTOR AFFIDAVIT**

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. 13-10 stating affirmatively that the individual, firm or corporation which is engaged in the physical performance of services under a contract with (name of contractor) on behalf of (name of public employer) registered with and is participating in a federal work authorization program\* [any of the election verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions deadlines established in O.C.G.A. 13-10-91.

**93249**

Federal Work Authorization User Identification Number (EEV/E-Verify Company Identification Number)

**N/A**

**01/22/2008**

Date of Authorization

Authorized Officer of Agent  
(Name of Subcontractor)

I hereby declare under penalty of perjury that the foregoing is true and correct

**Elizabeth Thompson**

Printed Name (of Authorized Officer or Agent of Contractor)

*Elizabeth Thompson*  
Signature (of Authorized Officer or Agent)

**Executive Director**

Title (of Authorized Officer or Agent of Contractor)

**2/21/2025**

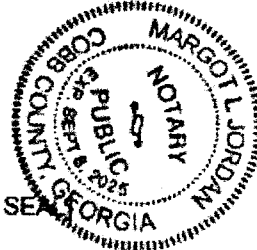
Date Signed

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

**23<sup>rd</sup>** DAY OF **February**, 20**25**

*Margot L. Jordan*  
Notary Public

My Commission Expires: **9/8/25**



[NOTARY SEAL]



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/23/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Timothy Clayton Smith Inc., Jefferson Office 5122 Heartland Trail Hoschton, GA 30548	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>CONTACT NAME:</b> Tim Smith</td> </tr> <tr> <td><b>PHONE (A/C, No, Ext):</b> (678) 227-2404</td> <td><b>FAX (A/C, No):</b> (706) 778-3322</td> </tr> <tr> <td colspan="2"><b>E-MAIL ADDRESS:</b></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td><b>INSURER A:</b> Haulers Insurance Company, Inc.</td> <td></td> </tr> <tr> <td><b>INSURER B:</b> Philadelphia Indemnity Insurance</td> <td>18058</td> </tr> <tr> <td><b>INSURER C:</b> AmTrust NA, Inc.</td> <td></td> </tr> <tr> <td><b>INSURER D:</b> Scottsdale Insurance Co.</td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table>	<b>CONTACT NAME:</b> Tim Smith		<b>PHONE (A/C, No, Ext):</b> (678) 227-2404	<b>FAX (A/C, No):</b> (706) 778-3322	<b>E-MAIL ADDRESS:</b>		INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> Haulers Insurance Company, Inc.		<b>INSURER B:</b> Philadelphia Indemnity Insurance	18058	<b>INSURER C:</b> AmTrust NA, Inc.		<b>INSURER D:</b> Scottsdale Insurance Co.		<b>INSURER E:</b>		<b>INSURER F:</b>	
<b>CONTACT NAME:</b> Tim Smith																					
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<b>INSURER E:</b>																					
<b>INSURER F:</b>																					
<b>INSURED</b> Making A Way Housing, Inc. 377 Westchester Blvd., NW 1905 Joseph E. Boone Blvd., NW Atlanta, GA 30314																					

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>			PHPK917975	10/01/2024	10/01/2025	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	OTHER:							\$
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b>			BA2012GA0658	08/09/2024	08/09/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b>			PHPK917975	10/01/2024	10/01/2025	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> <b>EXCESS LIAB</b>						AGGREGATE	\$ 1,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 10,000							\$
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			GWVO23568452	02/14/2025	02/14/2026	PER STATUTE	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y / N <input type="checkbox"/>	N / A <input checked="" type="checkbox"/>				E.L. EACH ACCIDENT	\$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$ 500,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000
B	Professional Liability			PHPK917975	10/01/2024	10/01/2025	Occurance	1,000,000
	Employee Dishonesty						Aggregate	2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The Fulton County Government is included as a joint loss payee with respects to General Liability, Auto Liability, Crime coverage and Umbrella Liability policies.

**CERTIFICATE HOLDER****CANCELLATION**

Fulton County Government  
 141 Pryor Street, SW  
 Atlanta, GA 30303-3408

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Tim Smith*

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POLICY NUMBER: PHPK917975

COMMERCIAL GENERAL LIABILITY  
CG 20 05 04 13

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED – CONTROLLING INTEREST**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

<p><b>Name Of Person(s) Or Organization(s):</b></p> <p><b>Fulton County Government</b> 141 Pryor Street, SW Atlanta, GA 30303-3408</p>
<p>Information required to complete this Schedule, if not shown above, will be shown in the Declarations.</p>

**A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to their liability arising out of:

1. Their financial control of you; or
2. Premises they own, maintain or control while you lease or occupy these premises.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B.** This insurance does not apply to structural alterations, new construction and demolition operations performed by or for that person or organization.

**C.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
  2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

POLICY NUMBER: PHPK917975

COMMERCIAL CRIME  
CR 20 14 03 00**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****LOSS PAYABLE**

This endorsement modifies insurance provided under the following:

COMMERCIAL CRIME COVERAGE FORM  
COMMERCIAL CRIME POLICY  
EMPLOYEE THEFT AND FORGERY POLICY  
GOVERNMENT CRIME COVERAGE FORM  
GOVERNMENT CRIME POLICY**A. Schedule\***

Name And Address Of Loss Payee
Fulton County Government
141 Pryor Street, SW
Atlanta, GA 30303-3408

\* Information required to complete this Schedule, if not shown on this endorsement, will be shown in the Declarations.

**B. Provisions**

1. You agree that any loss payable under this insurance shall be paid to the Loss Payee shown in the Schedule as its interests may appear and any such payment shall constitute payment to you. We agree that we will make all such payments to the Loss Payee, and we will not make any payment solely to you unless we receive a request in writing from the Loss Payee to make such payment to you.

2. This insurance is for your benefit only. It provides no rights or benefits to any other person or organization including the Loss Payee, other than payment of loss as set forth in this endorsement.

Any claim for loss that is covered under this insurance must be presented by you.

3. Our liability under this insurance as extended by this endorsement shall not be cumulative.

## Philadelphia Indemnity Insurance Company

### Additional Insured Schedule

**Policy Number:** PHPK917975

#### Additional Insured

Fulton County Government  
141 Pryor Street, SW  
Atlanta, GA 30303-3408

CG 20 05 - Additional Insured – Controlling Interest

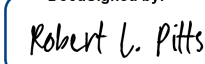
IN WITNESS THEREOF, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and, as applicable, their corporate seals to be hereunto affixed as of the day and year date first above written.

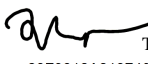
OWNER:

CONTRACTOR:

FULTON COUNTY, GEORGIA

VENDOR NAME **Making A Way Housing, Inc.**

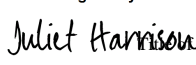
DocuSigned by:  
  
BA715B1A26544E7  
Robert L. Pitts, Chairman  
Fulton County Board of Commissioners

Signed by: Name of Signatory: Elizabeth Thompson  
  
Title of Signatory: Executive Director  
28F9812A2137403...  
Authorized Signature

ATTEST:

ATTEST:

Signed by:  
  
EEC476C4837648D...  
Tonya R. Grier  
Clerk to the Commission

DocuSigned by Name of 2nd Signatory: **Juliet Harrison**  
  
2nd Signatory: **Volunteer**  
F22BDD101FE6447...  
Second Authorized Signature

(Affix County Seal)

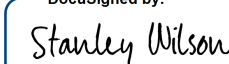


(Affix Corporate Seal, if applicable)

APPROVED AS TO FORM:

Signed by:  
  
0EC92EDADEFB4B8...  
Office of the County Attorney

APPROVED AS TO CONTENT:

DocuSigned by:  
  
5E4D76DFB4A0450...  
Stanley Wilson, Director  
Fulton County Department of  
Community Development

Please select RM or 2ND RM from the checkbox

RM

X 2ND RM

ITEM#: _____ RM: _____	ITEM#: 25-0398 2ND RM: 05/21/2025
REGULAR MEETING	SECOND REGULAR MEETING

## Certificate Of Completion

Envelope Id: D50DD7B5-A325-4888-8B46-7FA5974220C0

Status: Completed

Subject: Please DocuSign: 2025 CSP Contract-Making A Way Housing, Inc.-BOC Agenda#25-0398

Parcel ID:

Employee Name:

Source Envelope:

Document Pages: 31

Signatures: 6

Envelope Originator:

Certificate Pages: 7

Initials: 0

Cherie Williams

AutoNav: Enabled

Stamps: 1

141 Pryor Street

Envelopeld Stamping: Enabled

Purchasing & Contract Compliance, Suite 1168

Time Zone: (UTC-05:00) Eastern Time (US &

Atlanta, GA 30303

Canada)

Cherie.Williams@fultoncountyga.gov

IP Address: 166.137.175.9

## Record Tracking

Status: Original

Holder: Cherie Williams

Location: DocuSign

6/18/2025 10:39:49 PM

Cherie.Williams@fultoncountyga.gov

Security Appliance Status: Connected

Pool: StateLocal

Storage Appliance Status: Connected

Pool: Fulton County Government

Location: Docusign

## Signer Events

### Signature

### Timestamp

Elizabeth Thompson

info@makingawayhousing.org

Security Level: Email, Account Authentication  
(None)

Signed by:

28F9812A2137403...

Sent: 6/18/2025 10:45:56 PM

Viewed: 6/19/2025 12:15:12 AM

Signed: 6/19/2025 8:56:59 AM

Signature Adoption: Drawn on Device

Using IP Address:

2600:1005:b25d:cbac:2dcb:b78a:3c17:3b2a

Signed using mobile

### Electronic Record and Signature Disclosure:

Accepted: 6/19/2025 12:15:12 AM

ID: aff70e92-6406-4766-beb3-8a5a2aa7acf7

Juliet Harrison

juliet.harrison@att.net

Making A Way Housing

Security Level: Email, Account Authentication  
(None)

DocuSigned by:

F22BDD101FE6447...

Sent: 6/19/2025 8:57:01 AM

Resent: 6/23/2025 9:02:39 AM

Viewed: 6/23/2025 10:47:19 AM

Signed: 6/23/2025 10:49:55 AM

Signature Adoption: Pre-selected Style

Using IP Address:

2601:c4:4500:e790:2ca4:38eb:5bc4:b76e

### Electronic Record and Signature Disclosure:

Accepted: 4/30/2022 10:41:21 AM

ID: 30d12731-a975-431b-81a7-ef00d7ea68f0

Mark Hawks2

mark.hawks@fultoncountyga.gov

Chief Assistant Purchasing Agent

Purchasing and Contract Compliance

Security Level: Email, Account Authentication  
(None)

**Completed**

Using IP Address: 74.174.59.4

Sent: 6/23/2025 10:49:58 AM

Viewed: 6/23/2025 11:44:05 AM

Signed: 6/23/2025 11:44:39 AM

### Electronic Record and Signature Disclosure:

Not Offered via Docusign



Signer Events	Signature	Timestamp
Stanley Wilson Stanley.Wilson@fultoncountyga.gov Director Stanley Wilson Security Level: Email, Account Authentication (None)	DocuSigned by:  5E4D76DFB4A0450...  Signature Adoption: Pre-selected Style Using IP Address: 75.43.132.102	Sent: 6/23/2025 11:44:41 AM Resent: 6/24/2025 9:43:55 AM Viewed: 6/24/2025 12:50:03 PM Signed: 6/24/2025 12:50:14 PM
<b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign		
Lauren Hansford lauren.hansford@fultoncountyga.gov Security Level: Email, Account Authentication (None)	<b>Completed</b>  Using IP Address: 74.174.59.4	Sent: 6/24/2025 12:50:16 PM Viewed: 6/25/2025 4:02:28 PM Signed: 6/25/2025 4:04:05 PM
<b>Electronic Record and Signature Disclosure:</b> Accepted: 6/25/2025 4:02:28 PM ID: dc6992ec-3cf3-4546-9c50-75f34e044597		
David Lowman David.Lowman@fultoncountyga.gov Security Level: Email, Account Authentication (None)	Signed by:  0EC92EDADEFB4B8...  Signature Adoption: Pre-selected Style Using IP Address: 74.174.59.4	Sent: 6/25/2025 4:04:08 PM Viewed: 6/25/2025 4:04:59 PM Signed: 6/25/2025 4:05:59 PM
<b>Electronic Record and Signature Disclosure:</b> Accepted: 6/25/2025 4:04:59 PM ID: ca904c0b-4d29-440c-8099-fb8f74e2d28d		
Nikki Peterson nikki.peterson@fultoncountyga.gov Chief Deputy Clerk to the Board of Commissioners Fulton County Government Security Level: Email, Account Authentication (None)	<b>Completed</b>  Using IP Address: 66.56.23.82	Sent: 6/25/2025 4:06:01 PM Viewed: 6/27/2025 2:05:53 PM Signed: 6/27/2025 2:06:13 PM
<b>Electronic Record and Signature Disclosure:</b> Accepted: 11/27/2017 1:39:37 PM ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8		
Robert L. Pitts michael.oconnor@fultoncountyga.gov Fulton County Security Level: Email, Account Authentication (None)	DocuSigned by:  BA715B1A26544E7...  Signature Adoption: Pre-selected Style Using IP Address: 68.208.197.4	Sent: 6/27/2025 2:06:16 PM Resent: 6/30/2025 11:50:34 AM Viewed: 6/30/2025 11:52:30 AM Signed: 6/30/2025 11:52:37 AM
<b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign		
Tonya Grier tonya.grier@fultoncountyga.gov Clerk to the Commission Fulton County Security Level: Email, Account Authentication (None)	Signed by:  EEC476C4837648D...    Signature Adoption: Uploaded Signature Image Using IP Address: 99.96.24.191	Sent: 6/30/2025 11:52:40 AM Viewed: 7/1/2025 12:49:10 PM Signed: 7/1/2025 12:49:21 PM
<b>Electronic Record and Signature Disclosure:</b>		

Signer Events	Signature	Timestamp
Accepted: 3/16/2018 10:54:59 AM ID: f3f241e8-3027-4447-9476-6cf20ae25dd4  Mark Hawks3 mark.hawks@fultoncountyga.gov Chief Assistant Purchasing Agent Purchasing and Contract Compliance Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign	<b>Completed</b>  Using IP Address: 45.20.200.178	Sent: 7/1/2025 12:49:25 PM Resent: 7/3/2025 10:47:05 AM Viewed: 7/9/2025 9:28:51 AM Signed: 7/9/2025 9:29:14 AM
In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Atif Henderson Atif.Henderson@fultoncountyga.gov Fulton County Government Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign	<b>COPIED</b>	Sent: 6/18/2025 10:45:55 PM Viewed: 7/9/2025 9:34:00 AM
Cherie Williams cherie.williams@fultoncountyga.gov Fulton County Government Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign	<b>COPIED</b>	Sent: 6/18/2025 10:45:55 PM Resent: 7/9/2025 9:29:22 AM
Carlos Thomas carlos.thomas@fultoncountyga.gov Division Manager Fulton County Government Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign	<b>COPIED</b>	Sent: 6/18/2025 10:45:55 PM Viewed: 7/9/2025 9:34:26 AM
Dian DeV Vaughn dian.devaughn@fultoncountyga.gov Security Level: Email, Account Authentication (None) <b>Electronic Record and Signature Disclosure:</b> Not Offered via DocuSign	<b>COPIED</b>	Sent: 7/9/2025 9:29:18 AM Viewed: 7/9/2025 9:34:34 AM
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	6/18/2025 10:45:55 PM
Certified Delivered	Security Checked	7/9/2025 9:28:51 AM
Signing Complete	Security Checked	7/9/2025 9:29:14 AM
Completed	Security Checked	7/9/2025 9:29:18 AM
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

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Browsers:	Final release versions of Internet Explorer® 6.0 or above (Windows only); Mozilla Firefox 2.0 or above (Windows and Mac); Safari™ 3.0 or above (Mac only)
PDF Reader:	Acrobat® or similar software may be required to view and print PDF files
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies

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