



**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 **CaringWorks, 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:** Homelessness

**CSP Funding Priority(ies):**

**Children and Youth:** Not Applicable

**Disabilities:** Not Applicable

**Economic Stability:** Not Applicable

**Health and Wellness:** Not Applicable

**Homelessness:** 4. Permanent supportive housing options for individuals households who are chronically homeless...,5. Transitional housing bridge housing options for homeless population affected by mental health...

**Senior Services:** Not Applicable

**CaringWorks, Inc, CaringWorks Supportive Housing 2025** 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>
Hope House Residential Treatment Center	275 Washington St.	Atlanta	Georgia	30303	4	4,5,6
Quest Enclave	630 Cameron Alexander Blvd.	Atlanta	Georgia	30314	6	4,5,6
West Lake Courts	1691 West Lake Court	Atlanta	Georgia	30314	6	4,5,6
Park Vista Apartments	1940 Fisher Road	Atlanta	Georgia	30315	4	4,5,6
Shamrock Gardens	1988 Plaza Lane	Atlanta	Georgia	30311	6	4,5,6
Park at Gallaway	4031 7 Oaks Lane SW	East Point	Georgia	30344	5	4,5,6

<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>
Embarcadero Club	2210 Sullivan Rd	College Park	Georgia	30337	5	4,5,6
Nirvana Cranbrook	2200 Godby Rd.	Atlanta	Georgia	30349	5	4,5,6

### **Approach and Design:**

**CaringWorks, Inc,** CaringWorks Supportive Housing 2025 will provide services to **35** clients that reside in Fulton County, with CSP funding.

**CaringWorks, Inc,** CaringWorks Supportive Housing 2025 **will provide the following activities and services in Fulton County with CSP funding:**

12.1 Activities and Services to support CSP funding priorities:

CSP Priority #3: Homeless Prevention and awareness strategies/programs including those related to mental health/substance use and CSP Priority #5: Provide transitional housing options for homeless population affected by mental health...

In 2005, large congregations of homeless individuals, primarily men, were encamped in downtown parking lots. The City of Atlanta and CaringWorks partnered to respond to the need to serve this population, many of whom suffered both substance use and mental health disorders. The City of Atlanta donated the site and partnered with CaringWorks to build the 70-bed Hope House Residential Treatment Center for homeless men seeking addiction recovery. Hope House provides stable housing for up to 2 years, 3 meals a day, addiction recovery services, and intensive supportive services including access to mental health treatment, employment assistance, medication monitoring, and much more. CaringWorks became licensed to provide ASAM Addiction Recovery services (2005) and later (2015) became licensed to provide mental health treatment. Since 2005, CaringWorks has helped more than 3,000 formerly homeless men to begin and sustain their path to sobriety. In 2024, 90% of 167 men enrolled into the program did not relapse and completed their program.

CSP Priority #4: Permanent supportive housing options for individual households who are chronically homeless.

CaringWorks has been providing permanent supportive housing (PSH) throughout metropolitan Atlanta since 2002. The organization now leases and/or manages over 275 apartments in scattered sites in Fulton, DeKalb, and Clayton counties. Of those, there are one bedroom and studio apartments for single adults, and two-, three-, and four-bedroom apartments for families with children. Clients seeking permanent supportive housing are referred to CaringWorks through the Fulton County Continuum of Care's (CoC) Coordinated Entry system where they have been verified as chronically homeless. In 2024, CaringWorks provided

PSH housing, intensive care coordination, employment and benefits advocacy, and connections to other services that promote housing and health stability and a reliable income.

12.2 Identifies how the activities and services will be accomplished. (3 points)

CaringWorks provides a high level of services through the following approaches to service delivery;

1) Collaborate with the local (Fulton) CoC and partner to enroll eligible referred clients into an appropriate program in the shortest possible time. 2) Employ Housing First to remove barriers to program entry and provide all clients with immediate permanent supportive and transitional supportive housing that is appropriate to their needs and desires. 3) Use evidence-based and trauma-informed best practices to provide intensive care coordination and to motivate the client to plan for change. 4) Connect the client to an array of support services based on their needs and desires that help them to implement their strategies and accomplish their goals.

CaringWorks has two decades of experience providing housing and services to homeless individuals and families in metropolitan Atlanta. Since the organization was founded in 2002, it has developed programs providing intensive services that meet the specific needs of reentering citizens, single custodial parents and their children, homeless individuals seeking addiction recovery who are Deaf or Hard of Hearing (DHH), Veterans, people suffering from mental illness, and individuals with HIV/AIDS. The organization currently employs 71 well-qualified professionals, including mental health professionals, who operate out of 21 community sites.

Upon referral from the Fulton Coc (for permanent supportive housing) or the Fulton CoC, the VA, or the Fulton County Public Defender's Office (Hope House Residential Treatment transitional housing) clients are assisted to become housed according to their needs and desires. Each client is then assigned a "Care Coordinator" who works with them to define their unique goals and strategies for achieving them. Their Personal Care Plan (PCP) includes a timeline for actions. The PCP becomes the guide used by the Care Coordinator to connect clients to in-house and other community resources that support their goals. The Care Coordinator maintains a low caseload to allow time to provide intensive support. CaringWorks uses the evidence-based practice of Critical Time Intervention (CTI) to allow the coordinator to increase or decrease client contact based on the client's needs and desires. Clients are offered support and resources to access mainstream benefits, employment assistance, food, clothing, medical assessments, life-skills support, mental healthcare, substance abuse treatment, and linkages to essential community resources (documentation obtainment, legal services, credit repair, healthcare, and more). CaringWorks is a CORE Medicaid Provider of Behavioral Health service since 2015. CaringWorks Behavioral Health Services includes individual and group therapy, psychiatric services, residential and outpatient addiction treatment, relapse prevention programs, psychosocial rehabilitation, and peer support. To support healthcare access for residents without health insurance, CaringWorks actively seeks public and private funding to support those who are uninsured.

Community meetings are held regularly and clients who are not working are encouraged to get involved in community events and volunteering. CaringWorks Recovery@Work employment program and collaborations with First Step Staffing and other employment partners assist clients who can work with job preparation, training, job search and placement. For those who are unable to work due to severe disabilities, CaringWorks collaborates with First Step Staffing to provide SOAR Benefits Counselors to represent and advocate for our clients as they navigate the arduous process of applying for Social Security disability benefits, Veterans benefits, and other mainstream entitlements. CaringWorks Recovery@Work Employment Program is based at Hope House and assists clients to train and search for employment.

Upon becoming employed Hope House residents may be assisted to transition to permanent market housing through CaringWorks "Level Up program." Transitioning from Hope House to independent living can be a difficult transition for individuals working to

maintain sobriety. CaringWorks began “Level Up” to support program graduates through this transition. For one year following graduation, CaringWorks is a co-signer on the client’s lease. Additionally, the program extends behavioral health support for six months.

### 12.3 Health and Human Services Key Performance Indicators

CaringWorks Supportive Housing Program addresses three of the four Health and Human Services Indicators:

Strategic Objective: Prevent illness by engaging in healthier behavior

Key Performance Indicator: Percentage of residents engaged in substance abuse treatment – opioid, drinking, vaping

Strategic Objective: Prevent health disparities by educating residents and connecting them to available resources

Key Performance Indicator: Number of people who receive behavioral health services

Strategic Objective: Support the vulnerable residents in our social services

Key Performance Indicator: Percentage change in the homeless population year to year

### 12.4 CaringWorks Supportive Housing program addresses three of the CSP funding priorities:

1. CaringWorks will provide permanent supportive housing options for 20 individuals/households who are chronically homeless as defined by HUD. Program participants are encouraged to work toward self-sufficiency. However, they may remain in supportive housing for as long as they need. Year after year, over 90% remain permanently housed, either with CaringWorks or in unsubsidized housing. Permanent supportive housing is available to individuals or families as long as the adult has a diagnosed disability. The agency’s specialty is working with individuals with a behavioral health diagnosis.
2. CaringWorks will provide transitional and bridge housing options for 15 homeless men who are affected by mental health and/or substance use disorders. Hope House provides housing for up to 2 years, Level III ASAM Addiction Recovery Services, daily meals, and comprehensive wrap around support.
3. CaringWorks will provide homeless prevention and awareness strategies including those related to mental health and/or substance use disorders for 35 homeless individuals/households. CaringWorks provides services, and connections to resources that are designed to stabilize and strengthen client resiliency. CaringWorks supports clients to gain a reliable income – through work for those who are able, or through Social Security Disability if they are unable to work.

12.5 Community Collaboration - CaringWorks works closely with our service partners to provide resources that build skills and resiliency among our clients. Collaboration provides a broad spectrum of support to assist clients to achieve the personal goals they have identified in their Personal Care Plans. CaringWorks’ collaborative partners and their roles/responsibilities are as follows:

1. Mercy Care – Medical care, behavioral health treatment, vision, and dental services
2. First Step – Job placement and representation for Social Security disability benefits
3. Atlanta Center for Self-Sufficiency – Job readiness and training



4. Atlanta Legal Aid – Legal advice and representation
5. Imagine Hope – HIV/AIDS testing supplies and technical assistance
6. Grady Health System – Opioid treatment, medical management, behavioral health
7. Hope Atlanta – Outreach services and referral
8. PADV – Domestic violence services
9. Office of the Public Defender, Atlanta Judicial Circuit – Direct referral of homeless participants in the Fulton County Reentry Program
10. Fulton County Continuum of Care – Convenes non-profit, government and business leaders to solve the problem of homelessness in Fulton County. Administers the coordinated entry system, ensuring the most vulnerable Fulton County residents are prioritized for housing and services.
11. United Way of Greater Atlanta – Provides linkage to other system partners, direct funding, and educational opportunities for CaringWorks staff.

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

Based on the awarded amount of **\$35,000.00**, 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.)	\$1,750.00
<b>Operational</b> (25% Operational max of total funds awarded.)	\$3,850.00
<b>Direct Services</b>	\$29,400.00
<i>Total</i>	\$35,000.00

### **Explanation of Funding Details:**

Admin – CEO’s Salary: .010% of the CEO’s salary plus payroll taxes = \$1,750.

Operational: South Fulton Office Rent - CaringWorks’ CSP program budget provides approximately 88% of the rental cost for the South Fulton office for May 2025. The monthly rental rate is \$4,376.89 each month = \$3,850.

Direct Services - Program Manager: CaringWorks’ CSP program budget provides 46% (\$29,400) of the annual salary of the Program Manager for the project. The program manager is responsible for ensuring that each client has the resources they need to achieve their goals. The Program Manager’s compensation is \$64,500/year plus benefits (payroll taxes and healthcare).

Total CaringWorks Supportive Housing program budget = \$35,000

### Estimated Time Schedule for Expenditures

The program will begin on January 1, 2025 and end on December 31, 2025. The expenses will be expended across the contract period as follows:

January 2025: Program Manager - \$2,450; CEO - \$145.83;

February 2025: Program Manager - \$2,450; CEO - \$145.83;

March 2025: Program Manager - \$2,450; CEO - \$145.83;

April 2025: Program Manager - \$2,450; CEO - \$145.83;

May 2025: Program Manager - \$2,450; CEO - \$145.83; S. Fulton office rental - \$4,376.89

June 2025: Program Manager - \$2,450; CEO - \$145.83

July 2025: Program Manager - \$2,450; CEO - \$145.83

August 2025: Program Manager - \$2,450; CEO - \$145.83

September 2025: Program Manager - \$2,450; CEO - \$145.83

October 2025: Program Manager - \$2,450; CEO - \$145.83;

November 2025: Program Manager - \$2,450; CEO - \$145.83;

December 2025: Program Manager - \$2,450; CEO - \$145.83;

**Program Performance Measures:**

**CaringWorks, 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:** Not Applicable

**Health and Wellness:** Not Applicable

**Homelessness:** 3. Number of individuals placed in Transitional Housing, 4. Number of individuals placed in Permanent Supportive Housing, 5. Number of individuals whose barriers to self-sufficiency are eliminated/ reduced; paths to self-sufficiency created...

**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:**

Key Performance Indicators:

1. From 1/1/2025-12/31/2025, CaringWorks will provide permanent supportive housing options for 20 individuals/households

who are chronically homeless as defined by HUD. Program participants are encouraged to work toward self-sufficiency. However, they may remain in supportive housing for as long as they need. Year after year, over 90% remain permanently housed, either with CaringWorks or in unsubsidized housing. Permanent supportive housing is available to individuals or families as long as the adult has a diagnosed disability. The agency's specialty is working with individuals with a behavioral health diagnosis.

2. From 1/1/2025-12/31/2025, CaringWorks will provide transitional and bridge housing options for 15 homeless men who are affected by mental health and/or substance use disorders. Hope House provides housing for up to 2 years, Level III ASAM Addiction Recovery Services, daily meals, and comprehensive wrap around support.

3. From 1/1/2025-12/31/2025, CaringWorks will provide homeless prevention and awareness strategies including those related to mental health and/or substance use disorders for 35 homeless individuals/households. CaringWorks provides services and connections to resources that are designed to stabilize and strengthen client resiliency. CaringWorks supports clients to gain a reliable income – through work for those who are able, or through Social Security Disability if they are unable to work.

## Agency Defined Performance Measure(s):

CaringWorks also defines measures by which we monitor the effectiveness of our program. The agency- defined measures are:

1. From 1/1/25 – 12/31/25, 80% of clients will exit to or retain permanent housing or a better living situation.
2. From 1/1/25 – 12/31/25, 50% of clients will either maintain or increase their income and/or mainstream benefits.
3. From 1/1/25 – 12/31/25, 80% of clients will have a Person-Centered Plan (PCP) outlining individual steps to work toward self-sufficiency.

### **13.1 Steps and Strategies to Achieve County Defined Measures Activities to accomplish the County defined performance measures:**

CaringWorks provides a high level of services through the following activities and approaches to service delivery;

- 1) **Collaborate with the local (Fulton) CoC** and partner to enroll eligible referred clients into an appropriate program in the shortest possible time.
- 2) Employ **Housing First** to remove barriers to program entry and provide all clients with immediate permanent supportive and transitional supportive housing that is appropriate to their needs and desires.
- 3) Use **evidence-based and trauma-informed best practices** to provide **intensive care coordination** and to motivate the client to plan for change.
- 4) **Connect the client to an array of support services** based on their needs and desires that help them to implement their strategies and accomplish their goals.

### **13.2 Milestones and Schedule**

The major milestones and schedule are as follows:

- Brief staff on specific grant objectives: March 2025

- Select and enroll Fulton County program participants: March 2025
- Develop Person-Centered Plans within 1 week of intake: Jan. – Dec. 2025 Monthly performance data input by Care Coordinators: Jan. – Dec. 2024 Quarterly staff training: Jan. 2025 April 2025, July 2025, Oct. 2025
- Quarterly quality assurance review: April 2025, July 2025, Oct. 2025, Jan. 2026
- Performance Improvement Committee (PIC) reviews key performance indicators: April 2025, July 2025, Oct. 2025, Jan. 2026
- Prepare Fulton County performance report: July 2025 Prepare Fulton County final report: Jan. 2026

### 13.3 Data Collection Tools and Sources

CaringWorks' case managers have primary responsibility for entering program data. They meet with clients initially to enroll them in the program and then meet regularly to gather follow up information. Initially, information such as client demographics, former housing status, and specific challenges (i.e. type of disability, veteran status, criminal

information related to progress toward goals. That enables them to provide linkage to needed resources and to ensure clients are progressing toward self- sufficiency. Case information is maintained in paper files securely located at service sites. In addition, key performance data is input by the care coordinators into ClientTrack, the primary HMIS system of homeless providers in Georgia.

ClientTrack will be the tool used to report on the proposed county-defined and agency-defined Fulton CSP performance indicators. Data is reviewed monthly by CaringWorks' program managers. In addition, the data is reviewed by the Residential Services Director. Key measures are put into our corporate dashboard. CaringWorks Performance Improvement Committee (PIC) meets quarterly to review feedback, incidents, and results. We also randomly audit case files to ensure compliance with CaringWorks' procedures. Finally, we engage an independent evaluator to conduct a customer satisfaction survey, enabling clients to provide additional qualitative feedback. As you can see, we are serious about monitoring data at CaringWorks. We thrive on continuing to improve the ability to positively impact the health, well-being, and self-sufficiency of our clients.

### **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 **\$35,000.00**.

(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:

**CaringWorks, Inc**

**2785 Lawrenceville Highway Suite 205**

**Decatur, Georgia 30033**

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 **CaringWorks, 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

<b>Contractor's Name:</b>	CaringWorks, Inc.
<b>Project No. and Project Title:</b>	30085 CaringWorks Supportive Housing 2025

## CONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, entity or corporation which is engaged in the physical 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 in 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 physical 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:

**393088**

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

3/3/2025  
Date of Authorization

Caring Works, Inc.

Authorized Officer or Agent  
(Name of Contractor)

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

Carol S Collard

Printed Name (of Authorized Officer or Agent of Contractor)

CEO

Title (of Authorized Officer or Agent of Contractor)

Carol S Collard

Signature (of Authorized Officer or Agent)

March 3, 2025

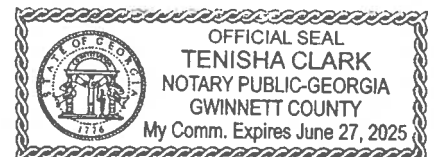
Date Signed

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

3 DAY OF March, 2025

Tenisha Clark  
Notary Public

[NOTARY SEAL]



My Commission Expires: June 27, 2025

\* As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).



# GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT AFFIDAVIT

Contractor's Name:	CaringWorks, Inc.
Project No. and Project Title:	30085 CaringWorks Supportive Housing 2025

## FORM G: SUBCONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned subcontractor verifies its compliance with O.C.G.A. 13-10-91, 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) has registered with and is participating in a federal work authorization program\* [any of the electronic 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 and deadlines established in O.C.G.A. 13-10-91.

393088

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

3/3/2025  
Date of Authorization

N/A CaringWorks  
Authorized Officer of Agent  
(Name of Subcontractor)

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

Carol S. Collard  
Printed Name (of Authorized Officer or Agent of Contractor)

Carol S. Collard  
Signature (of Authorized Officer or Agent)

CEO  
Title (of Authorized Officer or Agent of Contractor)

3/3/2025  
Date Signed

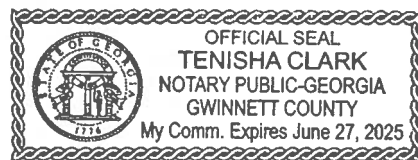
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

3 DAY OF March, 2025

Tenisha Clark  
Notary Public

My Commission Expires: June 27, 2025

[NOTARY SEAL]



\* As of the effective date of O.C.G.A. 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/09/2025

**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 have ADDITIONAL INSURED provisions or 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> Fallaize Insurance Agency, Inc. P. O. Box 920128  Norcross GA 30010-0128	<b>CONTACT NAME:</b> Kendal Jones <b>PHONE (A/C, No, Ext):</b> (770) 242-8842 <b>FAX (A/C, No):</b> (770) 242-3564 <b>E-MAIL ADDRESS:</b> kendal@fallaize.com  <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> Ultra Risk Advisors</td> <td></td> </tr> <tr> <td><b>INSURER B:</b> Berkshire Hathaway Homestate Companies</td> <td></td> </tr> <tr> <td><b>INSURER C:</b> Technology Insurance Company</td> <td>42376</td> </tr> <tr> <td><b>INSURER D:</b></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>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> Ultra Risk Advisors		<b>INSURER B:</b> Berkshire Hathaway Homestate Companies		<b>INSURER C:</b> Technology Insurance Company	42376	<b>INSURER D:</b>		<b>INSURER E:</b>		<b>INSURER F:</b>	
INSURER(S) AFFORDING COVERAGE	NAIC #														
<b>INSURER A:</b> Ultra Risk Advisors															
<b>INSURER B:</b> Berkshire Hathaway Homestate Companies															
<b>INSURER C:</b> Technology Insurance Company	42376														
<b>INSURER D:</b>															
<b>INSURER E:</b>															
<b>INSURER F:</b>															
<b>INSURED</b>  CaringWorks, Inc. 2785 Lawrenceville Hwy Ste 205/205A Decatur GA 30033															

**COVERAGES****CERTIFICATE NUMBER:** CL2542412413**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
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>			RN-7-0510291	03/27/2025	03/27/2026	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PERSONAL & ADV INJURY \$ 1,000,000
	OTHER:						GENERAL AGGREGATE \$ 3,000,000
							PRODUCTS - COMP/OP AGG \$ 3,000,000
							GA EMPLOYEE THEFT \$ 269,095
B	<b>AUTOMOBILE LIABILITY</b>			02APM057826-01	04/24/2025	04/24/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
							Medical payments \$ 5,000
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE \$
	<b>EXCESS LIAB</b>						AGGREGATE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE						\$
	DED <input type="checkbox"/> RETENTION \$						
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			TES4561178	02/27/2025	02/27/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y / N					E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	<input checked="" type="checkbox"/> N	N / A				E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Professional Liability			RN-7-0510291	03/27/2025	03/27/2026	Each Occurrence 1,000,000 Aggregate 3,000,000

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

Sexual Abuse & Molestation is included on the above captioned General Liability policy with the following limits:  
 \$250,000 Per Claim  
 \$500,000 Aggregate

**CERTIFICATE HOLDER****CANCELLATION**

Fulton County Government 141 Pryor St SW  Atlanta GA 30303-3408	<p><b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b></p> <p><b>AUTHORIZED REPRESENTATIVE</b></p>
--	--

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## Certificate of Insurance Waiver Request Form

### Instructions:

Please complete each field of the COI waiver request form for the insurance coverage for which a waiver is being requested. If there are multiple waiver requests, a new form must be used for each request. All completed waiver request forms should be emailed to your assigned District Administrator. An approved waiver form must be included as part of the COI document and uploaded to WebGrants under "Other Supporting Documents."

**Please Do Not Lock this Document.**

Date: June 18, 2025

Requesting Agency/Company: CaringWorks, Inc.

Contact Name: Carol Collard

Phone Number: 404-276-2339

Email Address: carolcollard@caringworksinc.org

Reason for Requesting Waiver (Please provide a detailed explanation. View attached COI Tip sheet for information on the types of waivers):

Our current insurance meets the threshold coverage levels  
to effectively serve our clients and protect our funders

We seek a waiver as the costs of the umbrella policy exceeds our funding capacity

### Acknowledgment and Signature

By signing below, I acknowledge that our agency is requesting a waiver of the Certificate of Insurance requirement. I understand that this request must be reviewed and approved by management, and that a waiver may not be granted in all cases.

Signature: Carol Collard

Title: President & CEO

Date: June 18, 2025

For Internal Use Only

Waiver Approved: <sup>CW</sup>  
☐ Yes ☐ No

Reviewed By: Cherie Williams

Date: \_\_\_\_\_

Comments (if waiver is rejected or additional action is required): This approval is based on the General Liability coverage exceeding the minimum requirements for Fulton County Risk Management Provision

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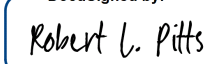
IN WITNESS THEREOF, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and, as applicable, their corporate seals to be hereunto affixed as of the day and year date first above written.

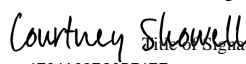
OWNER:

CONTRACTOR:

FULTON COUNTY, GEORGIA

VENDOR NAME      **CaringWorks, Inc.**


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

Signed by:      Name of Signatory: Courtney Showell  
  
4E34A82FC3B74EE...      Title of Signatory: Board Chair  
Authorized Signature

ATTEST:

ATTEST:

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

DocuSigned by:      Name of 2nd Signatory: **Carol S Collard**  
  
8D41ABD7E5BF413...      Title of 2nd Signatory: **President & CEO**  
Second Authorized Signature

(Affix County Seal)

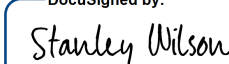


(Affix Corporate Seal, if applicable)

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

☒ 2ND RM

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

## Certificate Of Completion

Envelope Id: 70FC4F52-04C6-44BA-BCA3-CA103ED503E8

Status: Completed

Subject: Please DocuSign: 2025 CSP Contract-CaringWorks, Inc.-BOC Agenda#25-0398

Parcel ID:

Employee Name:

Source Envelope:

Document Pages: 28

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: 166.137.175.12

## Record Tracking

Status: Original

Holder: Cherie Williams

Location: DocuSign

6/24/2025 10:16:48 AM

Cherie.Williams@fultoncountyga.gov

Security Appliance Status: Connected

Pool: StateLocal

Storage Appliance Status: Connected

Pool: Fulton County Government

Location: Docusign

## Signer Events

### Signature

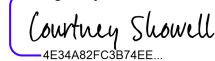
### Timestamp

Courtney Showell

courtney.showell@us.pwc.com

Security Level: Email, Account Authentication  
(None)

Signed by:

  
4E34A82FC3B74EE...

Sent: 6/24/2025 10:25:17 AM

Viewed: 6/24/2025 10:47:06 AM

Signed: 6/24/2025 10:48:24 AM

Signature Adoption: Pre-selected Style

Using IP Address: 155.201.150.22

## Electronic Record and Signature Disclosure:

Accepted: 6/24/2025 10:47:06 AM

ID: 25623b07-3b64-4528-8cae-b5df6cd8c327

Carol Collard

carolcollard@caringworksinc.org

CEO

Security Level: Email, Account Authentication  
(None)

DocuSigned by:

  
8D41ABD7F5BF413...

Sent: 6/24/2025 10:48:27 AM

Viewed: 6/24/2025 10:51:14 AM

Signed: 6/24/2025 10:52:04 AM

Signature Adoption: Pre-selected Style

Using IP Address:

2601:c6:4380:2ab0:f428:ba11:267c:8bde

## Electronic Record and Signature Disclosure:

Accepted: 6/24/2025 10:51:14 AM

ID: 19eb8ece-40e3-44dd-a2b3-37c2859b8e45

Mark Hawks2

mark.hawks@fultoncountyga.gov

Chief Assistant Purchasing Agent

Purchasing and Contract Compliance

Security Level: Email, Account Authentication  
(None)

**Completed**

Using IP Address: 45.20.200.178

Sent: 6/24/2025 10:52:06 AM

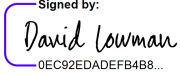
Resent: 6/25/2025 1:06:03 PM

Viewed: 6/25/2025 1:12:21 PM

Signed: 6/25/2025 1:12:34 PM

## 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: 6/25/2025 1:12:36 PM Viewed: 6/25/2025 5:09:27 PM Signed: 6/25/2025 5:09:35 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: 2601:cd:cc80:7e10:695e:8e57:23b0:d186	Sent: 6/25/2025 5:09:38 PM Viewed: 6/27/2025 8:01:41 AM Signed: 6/27/2025 8:03:57 AM
<b>Electronic Record and Signature Disclosure:</b> Accepted: 6/27/2025 8:01:41 AM ID: 23706d8f-d888-41d8-b8d4-298cbf67e7f6		
David Lowman David.Lowman@fultoncountyga.gov Security Level: Email, Account Authentication (None)	Signed by:  0EC92EDADEFB4B8...  Signature Adoption: Pre-selected Style Using IP Address: 47.44.55.90	Sent: 6/27/2025 8:04:00 AM Viewed: 6/27/2025 8:36:59 AM Signed: 6/27/2025 8:38:06 AM
<b>Electronic Record and Signature Disclosure:</b> Accepted: 6/27/2025 8:36:59 AM ID: 8a894f39-3492-4f2c-819e-673f0d607171		
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: 6/27/2025 8:38:08 AM Viewed: 6/27/2025 1:25:01 PM Signed: 6/27/2025 1:25:42 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 1:25:45 PM Viewed: 6/27/2025 2:41:24 PM Signed: 6/27/2025 2:41:30 PM
<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: 6/27/2025 2:41:34 PM Resent: 6/30/2025 11:53:07 AM Viewed: 7/1/2025 12:38:56 PM Signed: 7/1/2025 12:39:14 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 12:39:18 PM Resent: 7/3/2025 10:46:16 AM Viewed: 7/3/2025 2:07:48 PM Signed: 7/3/2025 2:07:53 PM
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: 6/24/2025 10:25:16 AM Viewed: 7/3/2025 2:14:04 PM
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: 6/24/2025 10:25:16 AM Resent: 7/3/2025 2:08:00 PM
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: 6/24/2025 10:25:17 AM Viewed: 7/3/2025 2:13:23 PM
Dian DeVaughn 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: 7/3/2025 2:07:57 PM Viewed: 7/3/2025 2:13:30 PM
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	6/24/2025 10:25:16 AM
Certified Delivered	Security Checked	7/3/2025 2:07:48 PM
Signing Complete	Security Checked	7/3/2025 2:07:53 PM
Completed	Security Checked	7/3/2025 2:07:57 PM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure



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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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