



PINAL COUNTY
WIDE OPEN OPPORTUNITY

Partner/External Agency Funding Application
Fiscal Year 2020-2021

Agency Name: _____

Agency Address: _____

Contact Person: _____

Telephone: _____

Email: _____

Amount of County Funding Appropriated FY 2018-2019: _____

Amount of County Funding Appropriated FY 2019-2020: _____

Amount of County Funding Requested FY 2020-2021: _____

If Pinal County has previously funded your agency, please indicate the percent of your total annual budget represented by Pinal County funding:

FY 2018-2019 ____% FY 2019-2020 ____%

What percentage of your proposed 2020-2021 budget would the Pinal County requested funds represent?
____%

Does your agency have a detailed budget which will control and guide the use of funds through the funding period?

yes no

Does a CPA perform an annual audit for all funds handled by your agency?

yes no

Please attach the following items to this application:

A) Summary of Proposal (no more than 3 pages):

1. Describe the service(s) your agency is proposing and detail your organization's plan to provide the services(s)
2. Based on the proposed services above, provide a list of quarterly and annual goals that you will use to measure the success of your proposal
3. Describe the expected outcomes and benefits to the community and/or to Pinal County and indicate whether you are willing to provide a written report at least annually to the Board of Supervisors

B) Agency Information

1. List of Officers and Directors
2. List of current and proposed staff, including job title

C) Financial Data

1. A copy of the most recent financial audit
 - i. If your agency does not have an annual financial audit, please enclose the most recent year-end unaudited financial statements
2. A copy of your current annual budget
 - i. Revenue – include the County's contribution and alternate funding sources
 - ii. Expenses – highlight specifically where the County's contribution has been expended
3. A copy of your proposed annual budget
 - i. Revenue – expected revenues that include the County's contribution and expected alternate funding sources
 - ii. Expenses – highlight specifically where the County's contribution will be spent in the upcoming year
4. A statement of the type and amount of insurance your organization carries

D) FY 2019-2020 Performance Report (no more than 3 pages)

1. Provide a report detailing how your agency met the expectations of the FY 2019-2020 funding allocation (if applicable)

Please return completed applications with attachments to:

Pinal County Manager's Office
P.O. Box 827
Florence, AZ 85132

Or via email to:

Jeanne.Curry@pinal.gov

***Please note: Incomplete application packages will be returned to applicant