

**INTERNAL USE ONLY**

Approved by: Erica A. Ortega

Date Approved: 10/16/2020

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**BUDGET AND FISCAL POLICY DEPARTMENT  
GRANTS ADMINISTRATION DIVISION****GRANT APPLICATION SUBMISSION APPROVAL FORM**

**IMPORTANT:** The requesting department/division shall complete this form and email to [GrantsAdmin@epcounty.com](mailto:GrantsAdmin@epcounty.com) along with the grant funding announcement, blank application, and all other forms to be completed or signed as part of the package.

<b>DEPARTMENT INFORMATION</b>			
<b>Date:</b>	10/15/20		
<b>Requesting Department/Division:</b>	Community Services/Nutrition		
<b>Department/Division Contact (including name, title, phone, and email):</b>	Irene Valenzuela, Executive Director / Rosalva Hernandez, Program Manager		
<b>Commissioners Court Meeting Approval Date (prior or anticipated):</b>	10/26/20	<b>Who from your department/division spoke or will speak at the Commissioners Court meeting to present and discuss this funding opportunity?</b>	Name: Irene Valenzuela Title: Executive Director Phone: (915) 775-2708 Email: <a href="mailto:igvalenzuela@epcounty.com">igvalenzuela@epcounty.com</a>
<b>Are there additional documents that must be signed by the County Judge to include in this application? If so, please list the documents requiring signature(s).</b>	GTBD-201 (Signature/Notarized); Resolution Grant Program YR 2021; Attachment A-Meal Number Documentation Worksheet		
<b>GRANT OPPORTUNITY INFORMATION</b>			
<b>Grant Opportunity Title (as provided by Grantor organization):</b>	Texans Feeding Texans: Home-Delivered Meal Grant Program		
<b>Grantor Agency:</b>	Texas Department of Agriculture		
<b>Is this a renewal grant? If so, please provide the CobbleStone grant number for the most recent grant and indicate how many years it has been awarded in the past.</b>	2019-0774; has been awarded for 26 years since 1994		
<b>Grant Announcement Date:</b>	September 1, 2020		
<b>Grant Due Date:</b>	November 2, 2020		



<b>Grant Period:</b>	02-01-21 to 01-31-22				
<b>Grant Proposal Summary (one paragraph or less):</b>	The proposed use of these funds are for direct purchase of meals for the Home Delivered meal program.				
<b>GRANT FINANCES</b>					
<b>A. Grant Funding to be Requested:</b>	\$103,000.00 for Home Delivered Meals				
<b>B. Required Match Contribution:</b>	\$0.00	<b>Cash Match:</b>	\$0.00	<b>In-Kind Match:</b>	\$27,071.25
<b>1. Match Source(s) Description:</b>	The in-kind match comes from the Home Delivered Meal Program Salaries & Fringe; Operating Expenses. (see attached supporting documentation)				
<b>C. Anticipated Program Income (if applicable):</b>	N/A				
<b>D. Total Project Amount (A + B + C):</b>	\$130,071.25				
<b>FINANCIAL ASSESSMENT</b>					
<b>1) What are the staffing requirements or needs for this grant? Please include salary and benefit amounts and anticipated salary and benefit increases for multi-year grants.</b>					
RESPONSE: We will use existing staff; no additional fiscal impact to the County with the renewal of this grant.					
<b>2) What are the operational needs for this grant (i.e. supplies, equipment, office space, travel, etc.)?</b>					
RESPONSE: Operational needs for this grant will not change either. Current office space, supplies and equipment are out of the Family Youth Services Center at 6314 Delta Dr. 79905; there will be no additional fiscal impact to the County for operational needs.					
<b>3) Has this grant has been awarded in the past? If so, please provide the financial results of the most recently completed grant award cycle to include the award amount and the balance at the closing of the grant.</b>					
RESPONSE: Yes, this grant has been awarded since 1994; this grant ends Jan. 31, 2021 and to date, we are on target to spend the amount awarded, \$102,497.77, and successfully close-out by end date, leaving no balance at the closing of the grant.					
<b>4) What is the sustainability plan for this grant and the services being provided if this funding is significantly reduced or is not awarded in future?</b>					
RESPONSE: If this funding should significantly be reduced or not be awarded in the future, the County will need to sustain the program by incurring the cost of all the meals served.					
<b>PROGRAMMATIC ASSESSMENT</b>					
<b>1) Is this grant and its purpose(s) aligned with the County strategic plan? How will this grant benefit your department/division and communities in El Paso County?</b>					
RESPONSE: Yes, this grant and its purpose is aligned with the County strategic plan through the County's on-going efforts to advance community support services. This grant will supplement and extend the current home delivered meal program to seniors (60 yrs. and older) and/or persons with disabilities.					
<b>2) How will this grant allow you to expand or improve department/division services?</b>					
RESPONSE: This grant has always allowed the Nutrition Division to expand beyond what the other 5 program funders can fund. However, it is limited to registering participants for the program based on the grant award for the entire year and when a program participant is no longer eligible to participate in the program, a vacancy is created and the nutrition division will fill all vacancies with new participants interested in signing up for the home delivered meal service. The program staff conducts outreach in an effort to inform the community and other local agencies working with the eligible population as a means to fill program vacancies throughout the year.					
<b>3) Please explain the capacity of your department/division to administer this grant.</b>					



<p>RESPONSE: The Nutrition Division is capable of administering this grant, as it has for the past 26 years. The division has knowledgeable staff to ensure the goals and expectations of this grant are met each year.</p>
<p><b>4) Will this grant require the use of contractual services?</b></p>
<p>RESPONSE: Yes, the County contracts a meal provider to prepare, package and deliver all the meals to every home delivered meal participant. The meal provider is currently under a 3 year contract with two-2 year extensions.</p>
<p><b>5) If this grant has been awarded in the past, what are some significant accomplishments or program highlights? You may use data to support your response.</b></p>
<p>RESPONSE: This grant has been awarded during the past 26 years. Many accomplishments have taken place throughout the years. Many senior adults have avoided nursing homes because of the meal service; many have avoided isolation &amp; malnutrition. The senior nutrition home delivered meal program is food security to many of our community frail seniors that if it wasn't for this meal service some could not remain living in their own home. This meal service that is provided with the grant funds has enhanced the lives of many and is by far one of many programs that the County of El Paso can be proud of.</p>





COMMISSIONER SID MILLER

# Texas Department of Agriculture

## Texans Feeding Texans:

### Home-Delivered Meal Grant Program

[FOR TDA USE ONLY]

File No. \_\_\_\_\_

Ref. File No: \_\_\_\_\_

Postmark/Received: \_\_\_\_\_

**GTBD-201**

#### Section A. Organization Information

Full Legal Business Name: El Paso County

DBA 'Doing Business As' Name: El Paso County Nutrition Program  
(if applicable)

Mailing Address: 500 E. San Antonio, Suite 301 El Paso  
Street Address Texas County  
El Paso TX 79901  
City State Zip Code

Physical Address: 6314 Delta Dr. El Paso  
Street Address Texas County  
El Paso TX 79905  
City State Zip Code

Federal Identification Number: 7 4 6 0 0 0 7 6 2  
(must be nine (9) digits)

In order to receive this grant, the organization must be a private nonprofit with a volunteer board of directors, exempt from taxation under §501(a) of the Internal Revenue Code of 1986 as described by §501 (c) (3) of that code, or a governmental agency.

Please indicate which of the following apply: ☐ Private nonprofit organization ☒ Governmental agency

#### Section B. Contact Personnel

**(1) Name of Primary Program Contact** (This person can answer day-to-day questions about the organization.)

Title: ☒ Executive Director ☐ Program Administrator ☐ Chief Executive Officer  
(Check one) ☐ President ☐ Other: \_\_\_\_\_

Full Name: Irene G. Valenzuela ☐ Mr. ☐ Dr.  
First Last ☐ Ms. ☐ Other \_\_\_\_\_

Email Address: igvalenzuela@epcounty.com

Phone: ( 915 ) 755 - 2708 Ext. \_\_\_\_\_ Alt Phone: ( 915 ) 875 - 8575



(2) **Name of Authorized Official** (This person is authorized to enter into legal agreements on behalf of the organization. This person's name will appear on the grant agreement for signature.)

Same As Above ☐

Title: ☐ Executive Director ☐ Chief Financial Officer ☐ Chief Executive Officer  
(Check one) ☒ County Judge ☐ Other: \_\_\_\_\_

Full Name: Ricardo A. Samaniego ☐ Mr. ☐ Dr.  
First Last ☐ Ms. ☐ Other Hon.

Email Address: countyjudge@epcounty.com

Phone: ( 915 ) 546 - 2098 Ext. \_\_\_\_\_ Alt Phone: ( 915 ) 543 - 3888

### Section C. Service Information

**An organization must submit one application per county.** If the applicant delivers meals in multiple counties, a separate application is required to document the meals in each county for which a grant is sought. Only meals delivered in the applying county are considered eligible. **Attachment A-Meal Number Documentation Worksheet** must be completed to include all home-delivered meals to homebound elderly, homebound disabled and homebound disabled elderly, regardless of funding source.

1. The **County** in which home-delivered meals were delivered:

El Paso

1.A. **County Grant:** Indicate the amount of the County Grant stated on the signed resolution from the county.

\$ 27,071.25

*Each organization will be required to document proof of receipt of County Grant has been received from the county and used with in the term stated in the county resolution.*

*Must equal amount documented on county resolution*

2. **Total number of HOME-DELIVERED meals delivered** to homebound persons 60 years or older and/or disabled in the county stated in Question #1 between September 1, 2019 and August 31, 2020 (regardless of funding source).

436453

*Must match attachment A*

**NOTE: If this number is miscalculated, includes congregate meals, includes meals from another county served, or other errors, the applicant will be required to repay TDA for all or part of the FY 2021 grant.**

3. Does the applicant organization serve congregate meals in the county stated in Question #1?

*\*Congregate meals are not considered eligible meals under the HDM program calculation and must be documented separately.*

☒ Yes ☐ No

If you answered 'YES' to question #3, the signature in Section D is confirmation that congregate meals were not calculated in the total number of home-delivered meals reported in Question #2.

4. Does the applicant organization serve home-delivered meals in multiple Texas Counties?

☐ Yes ☒ No

If you answered 'YES' to Question #4, the signature in Section D is confirmation that only home-delivered meals delivered in the county stated in Question #1 were calculated in the total number of home-delivered meals reported in Question #2.

5. If you answered 'Yes' to Question #4, please list all of the Texas counties in which the organization serves home-delivered meals, including those for which you do not intend to apply for TDA grant funds.

☒ N/A  
☐ -or-  
☐ Multiple Counties - list counties

6. Total number of HOME-DELIVERED clients on your roster between: September 1, 2019 and 193  
August 31, 2020.



## Section D. Certifications

### By signing below, Applicant:

- (1) Certifies all information provided in connection with this application is true and correct to the best of Applicant's knowledge;
- (2) Acknowledges any misrepresentation or false statement made by Applicant, or an authorized agent of Applicant, in connection with this application, whether intentional or not, will constitute grounds for denial of this application;
- (3) Acknowledges acceptance of funds in connection with this application acts as an acceptance of the authority of TDA and the State Auditor's Office (SAO) or any successor agency to conduct an investigation in connection with those funds, and Applicant further agrees to cooperate fully with TDA and/or SAO or its successor in the conduct of the audit or investigation, including allowing TDA and/or SAO to inspect Applicant's premises and providing all records requested;
- (4) Acknowledges this application and any payments owed to Applicant in connection with this application may be reduced or denied because of Applicant's owing any debt to the State of Texas, and
- (5) By submission of this application, Applicant acknowledges as a condition of receipt of grant funds under this program the Applicant will be required to execute a grant agreement with the Texas Department of Agriculture, and further acknowledges that failure to timely execute the grant agreement will result in withdrawal of any grant funds awarded, and those funds will be redistributed to other qualified applicants in accordance with state law and TDA rules.

### Applicant further certifies that:

- (1) Applicant is a qualifying governmental agency or nonprofit private organization that is exempt from taxation under §501(a), Internal Revenue Code of 1986, as an organization described by §501(c)(3) of that code, which is a direct provider of home-delivered meals to homebound elderly persons or persons with disabilities in Texas.
  - (2) Applicant enforces nondiscrimination practices.
  - (3) Applicant has an accounting system or fiscal agent approved by the county where it provides meals and has a system to prevent the duplication of services to clients.
  - (4) Applicant has received a grant from the county in which the organization is delivering meals, in accordance with Title 4, Part 1, Subchapter O, Section 1.953 of the Texas Administrative Code.
  - (5) Applicant agrees to use funds received through the home-delivered meal grant program only to supplement or extend existing home-delivered meal services.
  - (6) Applicant authorizes TDA to review, verify and authenticate all information provided in this application.
  - (7) Applicant understands TDA may request further documentation supporting this application, including contacting other agencies, organizations, facilities or third parties to verify data provided by an Applicant from the records of such agencies, organizations, facilities or third parties.
  - (8) **Applicant acknowledges, affirms, consents to, and understands that Applicant is solely responsible for calculating and verifying the information contained in Section C of the application, along with the information provided in Attachment A. Applicant acknowledges, affirms, consents to, and understands that if any inaccurate, incorrect, false, or misleading information is supplied in the application, including, without limitation, the information provided in Section C and Attachment A, Applicant may be required to refund or pay back a portion or all of the funds awarded pursuant to this Grant.**
- Notice of Penalties:** The penalty for knowingly making false statements or false entries, or attempts to secure money through fraudulent means, may include fines and/or incarceration and/or forfeiture of funds under applicable state law.

### Authorized Official: (Person listed in section B.2 of contact information)

Ricardo A. Samaniego

X

/ /

Printed name from Section B(2)

Signature

Date

State of Texas

County of \_\_\_\_\_

SWORN TO AND SUBSCRIBED before me on  
the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

X

Notary Public, State of Texas

Notary's printed name: \_\_\_\_\_

Notary's commission expires: \_\_\_\_\_

Affix notary seal here

**\*Secondary Official: (for nonprofits only) \*\*NOTE\*\* A non-profit must have two individuals sign their application. The Authorized Official cannot sign in both places. If the Authorized Official is the Chair of the Board, the Vice-Chair should sign as the secondary.**

X

/ /

Printed name and title

Signature

Date

State of Texas

County of \_\_\_\_\_

SWORN TO AND SUBSCRIBED before me on  
the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

X

Notary Public, State of Texas

Notary's printed name: \_\_\_\_\_

Notary's commission expires: \_\_\_\_\_

Affix notary seal here





**TEXAS DEPARTMENT OF AGRICULTURE  
TEXANS FEEDING TEXANS: HOME-DELIVERED MEALS  
GRANT PROGRAM**

**RESOLUTION AUTHORIZING COUNTY GRANT  
PROGRAM YEAR 2021**

A resolution of the County of El Paso (County), Texas, certifying that the county has made a grant to El Paso County Nutrition Program (Organization), an organization that provides home-delivered meals to homebound persons in the county who are elderly and/or have a disability, and certifying that the county has approved the organization's accounting system or fiscal agent.

*WHEREAS*, the Organization desires to apply for grant funds from the Texas Department of Agriculture to supplement and extend existing services for homebound persons in the County who are elderly and/or have a disability, pursuant to the Home-Delivered Meals Grant Program (Program); and

*WHEREAS*, the Program rules require the County in which an Organization is providing home-delivered meal services to make a grant to the Organization, in order for the Organization to be eligible to receive Program grant funds; and

*WHEREAS*, the Program rules require the County to approve the Organization's accounting system or fiscal agent, in order for the Organization to be eligible to receive Program grant funds; and

*WHEREAS*, the County recognizes Honorable County Judge, Ricardo A. Samaniego (Authorized Official) as an official of the Organization applying for a Home-Delivered Meal Grant from the Texas Department of Agriculture.

**BE IT RESOLVED BY THE COUNTY:**

SECTION 1: The County hereby certifies that it has made a grant to the Organization in the amount of \$27,071.25 to be used between the:

1 of October 2020 and the 30 of September 2021

Day      Month      Year      Day      Month      Year

SECTION 2: The County hereby certifies that the Organization provides home-delivered meals to homebound persons in the County who are elderly and/or have a disability.

SECTION 3: The County hereby certifies that it has approved the Organization's accounting system or fiscal agent which meets financial management system requirements as set forth in the Uniform Grant Management Standards promulgated by the Texas Comptroller of Public Accounts.

Introduced, read, and passed by the affirmative vote of the County on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

*Signature*

*Signature of Authorized Official of the County*

Ricardo A. Samaniego, County Judge

*Typed Name and Title*

**NOTE:** All information shown in this resolution must be included in the resolution passed by the County.

Updated May 2020





COMMISSIONER SID MILLER

## Texans Feeding Texans: Home-Delivered Meal Grant Program

### Attachment A – Meal Number Documentation Worksheet

**Applicant Organization:** El Paso County

**Numbers provided below represent meals delivered in the County of:** El Paso

Please indicate the number of home-delivered meals the organization delivered\* during State FY 2020, September 1, 2019 – August 31, 2020, to eligible clients\*\* in the County. The purpose of this page is to assist the organization in determining the total number of meals delivered by the organization. Your organization may update categories as needed.

The organization must maintain sufficient documentation to confirm the meal numbers provided below. This may include, but is not limited to: daily logs, tally sheets, spreadsheets, or any software tracking system. Clients' intake files must also be maintained by the organization. You may be asked to provide backup documentation during the application process or during future monitoring visits.

A	B	C	D	E	F	G	H	I	J
Month	Title III C-2 Meals (AAA)	Program Income Meals (AAA)	COVID - CAREs ACT	Title XX Meals (DADS)	Evercare/ StarPlus Meals	Locally Funded Meals***	Other Meals****	TOTAL Home- Delivered Meals	Congregate Meals (regardless of sources) ●
Sep-19	1570			24086	1555		2439	29650	19324
Oct-19	1700			27180	1676		1963	32519	21321
Nov-19	1540			26216	1530		2378	31664	17029
Dec-19	1672			26779	1523		2210	32184	17320
Jan-20	1774			28941	1642		1929	34286	19714
Feb-20	1599			27641	1437		1636	32313	17635
Mar-20	1887			29665	1478		1806	34836	16073
Apr-20	2318			32973	1470		1835	38596	24531
May-20	3874			32865	1302		2224	40265	24003
Jun-20	6723			31440	1303		3166	42632	24096
Jul-20	8766			31134	1336		3954	45190	23616
Aug-20	8460			29266	1158		3434	42318	20814
<b>TOTAL</b>	<b>41883</b>	<b>0</b>	<b>0</b>	<b>348186</b>	<b>17410</b>	<b>0</b>	<b>28974</b>	<b>436453</b>	<b>245476</b>

\*Delivered - See TDA's Texans Feeding Texans: Home-Delivered Meals website for a full definition.

\*\*Eligible Clients – Homebound persons 60 years of age or older and/or disabled.

\*\*\*Locally Funded Meals may include meals paid for by fundraising and other private sources, such as United Way.

\*\*\*\* List Other Meal sources on a separate page, if needed. Include meals funded with Texans Feeding Texans: Home-Delivered Meals funds

● Congregate meals are not eligible for consideration and should not be included in the total Home-Delivered Meals number. Applicants must separate home-delivered meals from congregate meals in order to avoid errors in grant calculations.

X

Signature of Organization Representative

Ricardo A. Samaniego, County Judge

Printed Name and Title

Date