

### 3A. Project Detail

1. CoC Number and Name: WI-503 - Madison/Dane County CoC

2. CoC Collaborative Applicant Name: City of Madison

3. Project Name: Rapid Rehousing Program for Unsheltered Homelessness

4. Project Status: Standard

5. Is this project applying for the Unsheltered Homelessness Set Aside or Rural Set Aside? Unsheltered Homelessness Set Aside

6. Component Type: PH

6a. Select the type of PH project: RRH

7. Is your organization or expected subrecipient a victim service provider defined in 24 CFR 578.3 and uses a comparable HMIS database? No

8. Will funds requested in this new project application replace state or local government funds (24 CFR 578.87(a))? No

## 3B. Project Description

1. Provide a description that addresses the entire scope of the proposed project.

We currently run a city-sanctioned campground where we prioritize people who have been sleeping unsheltered or have a history of sleeping unsheltered. The campground was set up to address a park where 50 - 100 campers were camping on a regular basis. When the park was shut down some people went to hotels, some went to the campground other went to shelters, family and friends or other unsheltered locations.

Since then the hotel program has closed and we have prioritized people who were in the City hotel who have not found housing and returned to unsheltered homelessness.

In the future we will take people off the top of the Coordinated Entry priority lists who have been experiencing unsheltered homelessness or have a history of unsheltered homelessness. However, at this time we have several people who do not have housing subsidies or housing resources. These people are waiting on the waiting list with over 600 others, many of whom sleep in the shelter. This program, matched with 5 Housing Stability Vouchers will rapidly rehouse campground guests which will open up spots for people sleeping on the street, in their vehicles, in tents or other places not meant for human habitation.

Funding will be used to progressively engage with people to pay their rent and staffing for housing search and navigation, and case management for people up to 24 months after they move into housing. Because we serve many campers who have severe needs this will allow us to seamlessly keep working with the campers after they get into housing. We have found that some campers with higher needs desire more support during the transition from the campground to housing. We understand there may need to be changes to the written standards to accommodate serving unsheltered people over sheltered people in our RRH program. We also understand that other modifications may be needed to allow us to serve only the campers at Dairy Drive and that we may have to serve all unsheltered persons regardless of which outreach program they may be in.

Case management will be offered at least monthly and will be tailored to the needs of the person as well as focused on a successful housing plan after up to 24 months of housing rental assistance. We will fully embrace Housing First principles in our work, as well as trauma informed care and harm reduction. Our case management will be person-centered and participant choice is very important to our programming.

We will coordinate with several CoC and other community programs during this work as well as our medical teams street medicine and various clinics we run. Our staff nurse and medical volunteers will be able to serve clients in the RRH program as well as the street medicine. Our agency is very flexible and our medical volunteers move to meet unmet needs in our community, so we will continue to adjust our services as necessary to serve the RRH program.

CDA voucher discussions are ongoing. See two letters attached.

**1a. Describe how the proposed project is consistent with the plan described by the CoC in response to Section VII.B.4 of this NOFA?**

Our agency also runs outreach programs and the city sanctioned campground mentioned throughout the plan. Our Executive Director also volunteers as Board President of the 2 (and possibly 3) tiny house villages. These experiences and knowledge of unsheltered folks in the community helps us to provide seamless services to the people in our programs. It is likely that some of the people who obtain RRH or a section 8 voucher will be folks we worked with in other programs.

P-1c As a result of this grant, we will participate in all the landlord recruitment activities in the community. Our Executive Director has 27 years experience training landlords on tenant-landlord law and running housing navigation programs. She has many ideas for improvements to this process and has helped develop the precursor to The Road Home's tracking tool.

P-3c We will work with the CE, written standards and Board of Directors (Our ED is President of the Board of the CoC) to prioritize people experiencing unsheltered homelessness in the CE process. We will use the Participant Interest Form to help people determine what landlords to apply to. We will use all the culturally-appropriate client centered best practices that we have developed or follow in our community including harm reduction practices, motivational interviewing and trauma informed best practices. These RRH and section 8 vouchers will add more resources to those developed over the past three years.

P-4 Our ED sits on the data committee mentioned in the plan. Our agency helped start the H2 program, we have done two Community Health Needs Assessments in our community for people experiencing homelessness and have 85 medical professional volunteers that do street outreach with us.

P-5 Our agency is very active in the outreach community, we helped develop the by-location list used by the outreach committee that our staff helps facilitate. So we are on the forefront of helping to identify and connect people experiencing unsheltered homelessness to outreach workers, VISPDATs and the Coordinated Entry system which will be used to house people in the compground that may eventually benefit from the RRH and Section 8 vouchers. And again, we serve on the data, written standards and board of directors that will be looking at the policies to priorities people who have experienced unsheltered homelessness.

P-6 We will work with the Youth Action Board, Lived Experience Committee and our lived experience staff to develop this program. They participate in all the committees that we will be working with in P-5.

P-7 - The demographics of our program closely resemble the statistics listed in the plan with the exception that we are serving 7% LGBTQ+ as opposed to the 1.3-2.1 listed in the demographic statistics.

**2. For each primary project location, or structure, enter the number of days from the execution of the grant agreement that each of the following milestones will occur if this project is selected for conditional award.**

Project Milestones	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement	Days from Execution of Grant Agreement
	A	B	C	D
Begin hiring staff or expending funds	30			
Begin program participant enrollment	60			
Program participants occupy leased or rental assistance units or structure(s), or supportive services begin	120			
Leased or rental assistance units or structure, and supportive services near 100% capacity	365			
Closing on purchase of land, structure(s), or execution of structure lease				
Start rehabilitation				
Complete rehabilitation				
Start new construction				
Complete new construction				

**3. Check the appropriate box(s) if this project will have a specific subpopulation focus.**

**(Select ALL that apply)**

N/A - Project Serves All Subpopulations	<input checked="" type="checkbox"/>	Domestic Violence	<input type="checkbox"/>
Veterans	<input type="checkbox"/>	Substance Abuse	<input type="checkbox"/>
Youth (under 25)	<input type="checkbox"/>	Mental Illness	<input type="checkbox"/>
Families	<input type="checkbox"/>	HIV/AIDS	<input type="checkbox"/>
		Chronic Homeless	<input type="checkbox"/>
		Other (Click 'Save' to update)	<input type="checkbox"/>

**4. Will your project participate in the CoC's Coordinated Entry (CE) process or recipient organization is a victim service provider, as defined in 24 CFR 578.3 and uses an alternate CE process that meets HUD's minimum requirements?** Yes

**5. Housing First**

**5a. Will the project quickly move participants into permanent housing?** Yes

**5b. Will the project enroll program participants who have the following barriers?**  
Select all that apply.

Having too little or little income	<input checked="" type="checkbox"/>
Active or history of substance use	<input checked="" type="checkbox"/>
Having a criminal record with exceptions for state-mandated restrictions	<input checked="" type="checkbox"/>
History of victimization (e.g. domestic violence, sexual assault, childhood abuse)	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

**5c. Will the project prevent program participant termination from the project for the following reasons? Select all that apply.**

Failure to participate in supportive services	<input checked="" type="checkbox"/>
Failure to make progress on a service plan	<input checked="" type="checkbox"/>
Loss of income or failure to improve income	<input checked="" type="checkbox"/>
Any other activity not covered in a lease agreement typically found for unassisted persons in the project's geographic area	<input checked="" type="checkbox"/>
None of the above	<input type="checkbox"/>

**5d. Will the project follow a "Housing First" approach?** Yes  
(Click 'Save' to update)

**6. Will program participants be required to live in a specific structure, unit, or locality at any time while in the program?** No

**7. Will more than 16 persons live in a single structure?** No

## 4A. Supportive Services for Participants

### 1. Describe how program participants will be assisted to obtain and remain in permanent housing.

Our case managers will assist in housing search and placement for people at the campground who qualify for the RRH program or vouchers and choose to participate. Housing search will consist of assessing the amenities and location the participant desires, talking to them about being realistic about the expectations of finding housing, teaching the client various ways to search for housing they desire, assisting filling out applications, providing transportation and accompaniment to housing appointments, practicing interviews if needed, reviewing leases to set clear expectations for the tenant, informing tenants of their rights and fair housing laws as necessary.

For those with rental histories that landlords will have problems with, we will work on explaining how things are different now, work on payment plans with old landlords and help with appeals when needed.

Once in housing, we will provide case management for up to 24 months to assist the tenant in the transition to housing. We will work with progressive engagement and budgeting to ensure the tenant can afford their rent. We will work on obtaining mainstream resources and increasing income as well as other goals the tenant may have. Case management services will be offered more intensively in the beginning (daily or weekly) to ensure a smooth transition and then will taper as the client becomes more stable but will be offered at least monthly.

If troubles arise with the landlord we will serve as an intermediary to help problem solve to keep the tenant in good standing with the landlord. We can help provide referrals to mediation and legal assistance when needed. If an eviction hearing is scheduled we will help ensure that the tenant shows up to court and accompany them through the process, hopefully ending in a mediated agreement.

We will also work on skill building as needed for folks who are adjusting from living outside to living inside and having a stable, reliable place to sleep at night. We will also help connect clients to other services that will aid in their housing success as desired. Such services may include substance use counseling or programs, mental health programs, employment programs and other support as the client may desire.

**2. Describe the specific plan to coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible.**

Health - We run a Street Medicine program with over 85 medical volunteers who are primarily doctors, physicians assistants and nurses. We also run weekly clinics at the men's shelter & the day shelter and a monthly foot care clinic. Our volunteers will be available for clients who may not have or are not yet comfortable with their primary care provider. Our staff nurse and some volunteers are available to coordinate care, accompany people to appointments and do follow ups as necessary. Our staff nurse also helps manage medications and educate clients when needed.

We have long waiting lists for many mental health and substance use programs and some of our clients do not qualify for the programs. Our social workers and medical teams can work with people on various aspects of their recovery as needed. We also distribute harm reduction supplies, have good working relationships with the Crisis Line workers and CARES mobile mental health team, MAT centers (Monarch) and can problem solve with them even if our clients cannot access services. Our strong working relationship with Kabba Recovery Services and Access Health will also open doors for other medical services as needed. Access has behavioral health teams and dental services available on a sliding scale.

Social Services - If the client is interested, we will help them apply for Comprehensive Community Services or CCS which is a voluntary program paid for by the county that offers case management services. We will also help connect them to other social services that may be needed including anything from Project Respect (sex workers), Rape Crisis Center, Domestic Abuse Intervention Services to services that serve LGBTQ+ persons, disability and aging programs, veterans programs and more.

Employment - For employment services we will utilize the Dane County Job Center and various services available there as well as private market day labor and temp job programs. We will also assist with SSI/SSDI applications for those who may not be able to work.

**3. For all supportive services available to program participants, indicate who will provide them and how often they will be provided.**

Click 'Save' to update.

Supportive Services	Provider	Frequency
Assessment of Service Needs	Applicant	Monthly
Assistance with Moving Costs	Applicant	As needed
Case Management	Applicant	As needed
Child Care	Non-Partner	As needed
Education Services	Non-Partner	As needed
Employment Assistance and Job Training	Applicant	As needed



Food
Housing Search and Counseling Services
Legal Services
Life Skills Training
Mental Health Services
Outpatient Health Services
Outreach Services
Substance Abuse Treatment Services
Transportation
Utility Deposits

Non-Partner	As needed
Applicant	As needed
Non-Partner	As needed
Applicant	As needed
Non-Partner	As needed
Applicant	As needed
Applicant	Daily
Partner	As needed
Applicant	As needed
Non-Partner	As needed

**Identify whether the project will include the following activities:**

**4. Transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs?** Yes

**5. Annual follow-ups with program participants to ensure mainstream benefits are received and renewed?** Yes

**6. Will program participants have access to SSI/SSDI technical assistance provided by this project the applicant, a subrecipient, or partner agency?** Yes

**6a. Has the staff person providing the technical assistance completed SOAR training in the past 24 months?** Yes

## 4B. Housing Type and Location

The following list summarizes each housing site in the project. To add a housing site to the list, select the icon. To view or update a housing site already listed, select the icon.

Total Units: 10

Total Beds: 10

Housing Type	Housing Type (JOINT)	Units	Beds	Dedicated CH Beds
Scattered-site apartments (...)	---	10	10	0

## 4B. Housing Type and Location Detail

**1. Housing Type:** Scattered-site apartments (including efficiencies)

**2. Indicate the maximum number of units and beds available for program participants at the selected housing site.**

**2a. Units:** 10

**2b. Beds:** 10

### 3. Address

Project applicants must enter an address for all proposed and existing properties. If the location is not yet known, enter the expected location of the housing units. For Scattered-site and Single-family home housing, or for projects that have units at multiple locations, project applicants should enter the address where the majority of beds will be located or where the majority of beds are located as of the application submission. Where the project uses tenant-based rental assistance in the RRH portion, or if the address for scattered-site or single-family homes housing cannot be identified at the time of application, enter the address for the project's administration office. Projects serving victims of domestic violence, including human trafficking, must use a PO Box or other anonymous address to ensure the safety of participants.

**Street 1:** To be determined

**Street 2:**

**City:** Madison

**State:** Wisconsin

**ZIP Code:** 53703

**\*4. Select the geographic area(s) associated with the address. For new projects, select the area(s) expected to be covered.  
(for multiple selections hold CTRL key)**

559025 Dane County

## 5A. Program Participants - Households

**Households Table**

Number of Households
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Households with at Least One Adult and One Child	Adult Households without Children	Households with Only Children	Total
0	10	0	10

Characteristics
Persons over age 24
Persons ages 18-24
Accompanied Children under age 18
Unaccompanied Children under age 18
Total Persons

Persons in Households with at Least One Adult and One Child	Adult Persons in Households without Children	Persons in Households with Only Children	Total
0	9		9
0	1		1
0		0	0
		0	0
0	10	0	10

**Click Save to automatically calculate totals**

## 5B. Project Participants - Subpopulations

### Persons in Households with at Least One Adult and One Child

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24										
Persons ages 18-24										
Children under age 18										
<b>Total Persons</b>	0	0	0	0	0	0	0	0	0	0

### Persons in Households without Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans- (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Persons over age 24	8	1	0	4	0	4	1	1	1	
Persons ages 18-24	1	0	0	1	0		0	0	0	
<b>Total Persons</b>	9	1	0	5	0	4	1	1	1	0

Click Save to automatically calculate totals

### Persons in Households with Only Children

Characteristics	CH (Not Veterans)	CH Veterans	Veterans (Not CH)	Chronic Substance Abuse	HIV/AIDS	Severely Mentally Ill	DV	Physical Disability	Developmental Disability	Persons Not Represented by a Listed Subpopulation
Accompanied Children under age 18										
Unaccompanied Children under age 18										
<b>Total Persons</b>	0				0	0	0	0	0	0

## 6A. Funding Request

1. Will it be feasible for the project to be under grant agreement by September 15, 2024? Yes

2. What type of funding is this project applying for in this Special Unsheltered and Rural Homelessness CoC Program Competition? Unsheltered

3. Does this project propose to allocate funds according to an indirect cost rate? No

4. Select a grant term: 3 Years

\* 5. Select the costs for which funding is requested:

Rental Assistance	<input checked="" type="checkbox"/>
Supportive Services	<input checked="" type="checkbox"/>
HMIS	<input checked="" type="checkbox"/>

## 6E. Rental Assistance Budget

The following list summarizes the rental assistance funding request for the total term of the project. To add information to the list, select the icon. To view or update information already listed, select the icon.

Total Request for Grant Term:			\$193,680
Total Units:			5
Type of Rental Assistance	FMR Area	Total Units Requested	Total Request
TRA	WI - Madison, WI HUD Metro FMR Area (...)	5	\$193,680

## Rental Assistance Budget Detail

**Instructions:**

**Type of Rental Assistance:** Select the applicable type of rental assistance from the dropdown menu. Options include tenant-based (TRA), sponsor-based (SRA), and project-based assistance (PRA). Each type has unique requirements and applicants should refer to the 24 CFR 578.51 before making a selection.

**Metropolitan or non-metropolitan fair market rent area:** This is a required field. Select the FY 2016 FMR area in which the project is located. The list is sorted by state abbreviation. The selected FMR area will be used to populate the rents in the chart below.

**Size of Units:** These options are system generated. Unit size is defined by the number of distinct bedrooms and not by the number of distinct beds.

**# of units:** This is a required field. For each unit size, enter the number of units for which funding is being requested.

**FMR:** These fields are populated with the FY 2016 FMR amounts based on the FMR area selected by the applicant. The FMRs are available online at <http://www.huduser.org/portal/datasets/fmr.html>.

**12 Months:** These fields are populated with the value 12 to calculate the annual rent request.

**Total Request:** This column populates with the total calculated amount from each row based on the number of units multiplied by the corresponding FMR and by 12 months.

**Total Units and Annual Assistance Requested:** The fields in this row are automatically calculated based on the total number of units and the sum of the total requests per unit size per year.

**Grant Term:** This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

**Total Request for Grant Term:** This field is automatically calculated based on the total annual assistance requested multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.

Additional Resources can be found at the HUD Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

**Type of Rental Assistance:** TRA

**Metropolitan or non-metropolitan fair market rent area:** WI - Madison, WI HUD Metro FMR Area (5502599999)

Size of Units	# of Units (Applicant)		FMR Area (Applicant)		12 Months		Total Request (Applicant)
SRO		x	\$697	x	12	=	\$0



0 Bedroom		x	\$929	x	12	=	\$0
1 Bedroom	5	x	\$1,076	x	12	=	\$64,560
2 Bedrooms		x	\$1,254	x	12	=	\$0
3 Bedrooms		x	\$1,676	x	12	=	\$0
4 Bedrooms		x	\$1,948	x	12	=	\$0
5 Bedrooms		x	\$2,240	x	12	=	\$0
6 Bedrooms		x	\$2,532	x	12	=	\$0
7 Bedrooms		x	\$2,825	x	12	=	\$0
8 Bedrooms		x	\$3,117	x	12	=	\$0
9 Bedrooms		x	\$3,409	x	12	=	\$0
<b>Total Units and Annual Assistance Requested</b>	5						\$64,560
<b>Grant Term</b>							3 Years
<b>Total Request for Grant Term</b>							\$193,680

Click the 'Save' button to automatically calculate totals.

## 6F. Supportive Services Budget

**A quantity AND description must be entered for each requested cost.**

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
1. Assessment of Service Needs		
2. Assistance with Moving Costs		
3. Case Management	24 months of case management for 10 people after finding housing	\$84,500
4. Child Care		
5. Education Services		
6. Employment Assistance		
7. Food		
8. Housing/Counseling Services	Housing Navigation for 10 people looking for housing	\$42,250
9. Legal Services		
10. Life Skills		
11. Mental Health Services		
12. Outpatient Health Services		
13. Outreach Services		
14. Substance Abuse Treatment Services		
15. Transportation	cabs and bus fares for up to 24 months after get into housing	\$2,000
16. Utility Deposits		
17. Operating Costs		
18. (Rural Set Aside ONLY) Section 491 Eligible Activities		
<b>Total Annual Assistance Requested</b>		<b>\$128,750</b>
<b>Grant Term</b>		<b>3 Years</b>
<b>Total Request for Grant Term</b>		<b>\$386,250</b>

**Click the 'Save' button to automatically calculate totals.**

## 6H. HMIS Budget

**Instructions:**

Enter the quantity and total budget request for each HMIS cost. The request entered should be equivalent to the cost of one year of the relevant HMIS activity. The system populates a list of eligible costs associated with the implementation of an HMIS and for which CoC funds can be requested.

**Quantity Detail:** This is a required field. A quantity AND description must be entered for each requested cost. Enter the quantity in detail (eg. .75 FTE hours and benefits for staff, utility types, monthly allowance for food and supplies) for each HMIS cost for which funding is being requested. Please note that simply stating "1FTE" is NOT providing "Quantity AND Detail" and restricts understanding of what is being requested. Failure to enter adequate "Quantity AND Detail" may result in conditions being placed on the award and a delay of grant funding.

**Annual Assistance Requested:** This is a required field. For each grant year, enter the amount funds requested for each activity.

**Total Annual Assistance Requested:** This field is automatically calculated based on the sum of the annual assistance requests entered for each activity.

**Grant term:** This field is populated based on the grant term selected on Screen "6A. Funding Request" and will be read only.

**Total Request for Grant Term:** This field is automatically calculated based on the total amount requested for each eligible cost multiplied by the grant term.

All total fields will be calculated once the required field has been completed and saved.



Additional Resources can be found at the HUD Exchange:  
<https://www.hudexchange.info/e-snaps/guides/coc-program-competition-resources>

**A quantity AND description must be entered for each requested cost.**

Eligible Costs	Quantity AND Description (max 400 characters)	Annual Assistance Requested
<b>1. Equipment</b>		
<b>2. Software</b>	looker fee (\$120), 2 users (67.50 each)	\$255
<b>3. Services</b>		
<b>4. Personnel</b>	2% for ICA funding to HMIS lead agency to provide training & technical support for projects focused on unsheltered homelessness, monitor and review data quality, complete data analysis.	\$6,448
<b>5. Space &amp; Operations</b>		
<b>Total Annual Assistance Requested:</b>		\$6,703
<b>Grant Term:</b>		3 Years
<b>Total Request for Grant Term:</b>		\$20,109

**Click the 'Save' button to automatically calculate totals.**

## 6I. Sources of Match

The following list summarizes the funds that will be used as Match for this project. To add a Match source to the list, select the  icon. To view or update a Match source already listed, select the  icon.

### Summary for Match

Total Amount of Cash Commitments:	\$153,739
Total Amount of In-Kind Commitments:	\$12,000
Total Amount of All Commitments:	\$165,739

1. Will this project generate program income described in 24 CFR 578.97 to use as Match for this project? No

**Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.**

Type	Source	Name of Source	Amount of Commitments
Cash	Private	Fundraising	\$40,000
In-Kind	Private	Madison Street Me...	\$12,000
Cash	Government	City of Madison	\$113,739

## Sources of Match Detail

1. Type of Match commitment: Cash

2. Source: Private

3. Name of Source: Fundraising

(Be as specific as possible and include the office  
or grant program as applicable)

4. Amount of Written Commitment: \$40,000

## Sources of Match Detail

1. Type of Match commitment: In-Kind

2. Source: Private

3. Name of Source: Madison Street Medicine volunteers

(Be as specific as possible and include the office  
or grant program as applicable)

4. Amount of Written Commitment: \$12,000

Before grant execution, services to be provided by a third party must be documented by a memorandum of understanding (MOU) between the recipient or subrecipient and the third party that will provide the services.

## Sources of Match Detail

1. Type of Match commitment: Cash

2. Source: Government

3. Name of Source: City of Madison

(Be as specific as possible and include the office  
or grant program as applicable)

4. Amount of Written Commitment: \$113,739

## 6J. Summary Budget

The following information summarizes the funding request for the total term of the project. However, administrative costs can be entered in 8. Admin field below.

Eligible Costs	Annual Assistance Requested (Applicant)	Grant Term (Applicant)	Total Assistance Requested for Grant Term (Applicant)
2a. Leased Units	\$0	3 Years	\$0
2b. Leased Structures	\$0	3 Years	\$0
3. Rental Assistance	\$64,560	3 Years	\$193,680
4. Supportive Services	\$128,750	3 Years	\$386,250
5. Operating	\$0	3 Years	\$0
6. HMIS	\$6,703	3 Years	\$20,109
7. Sub-total Costs Requested			\$600,039
8. Admin (Up to 10%)			\$60,004
9. Total Assistance Plus Admin Requested			\$660,043
10. Cash Match			\$153,739
11. In-Kind Match			\$12,000
12. Total Match			\$165,739
13. Total Budget			\$825,782

Click the 'Save' button to automatically calculate totals.