

Emergency Food & Shelter Program (EFSP)
Milwaukee County Phase 39 Funds Application - Food Pantries and Meal Sites

1. Emergency Food Organization (EFO):
2. Address
3. DUNS Number:
4. Contact's name, telephone number and
Email address:
5. Amount of EFSP funds requested:
6. Most recent total organizational budget amount:
7. Fiscal Year End Date (xx/xx):
8. Total dollar amount of **eligible** expenditures for
November 1, 2021 to March 31, 2022:

Refer to Instruction page for list of eligible expenses. Include a copy of the expense general ledger to support amount.

Checklist of **required documents to accompany application:**

- ☐ Most recent organizational audit or review
(If you do not have an audit nor review, provide a balance sheet and income statement for most recently completed fiscal year)
- ☐ Most recent Form 990
- ☐ Copy of IRS Nonprofit Determination Letter
- ☐ Current Board of Directors Roster and contact information (Name, phone number and email address)
- ☐ Non-discrimination statement
- ☐ Copy of expense general ledger supporting amount of eligible expenses written on line 8; additional documentation may be requested after the application has been reviewed
- ☐ Individuals Served Form(s), one for each month being submitted; **must include January 2022**
- ☐ Records of individuals served monthly to support the amount of funds requested (reimbursement rate increased from \$2.00 per person to \$3.00 per person, e.g., a \$5,000.00 request supported by service statistics totaling 1,667); **service statistics provided must include January 2022**

Completed applications may be submitted by US Mail to Hunger Task Force EFSP, 5000 W. Electric Ave, West Milwaukee, WI 53219 or emailed to efsp@hungertaskforce.org. **The deadline to submit the completed application is 4:00 p.m. on Friday, April 15, 2022.**

Organizations that distribute from multiple food service sites must provide a separate application for each eligible site.

Once applications have been reviewed, eligible applicants will receive an email from Docusign to complete and electronically sign the Fiscal Agent Form.

By signing below, I certify: It is the responsibility of the applicants to exercise due diligence to ensure correct, complete and valid documentation at time of application submission. All attachments must be included by the deadline for the application to be considered complete. Applications will not be reviewed by Hunger Task Force staff for accuracy or completeness at time of submission.

Applications found to be incomplete will not be considered. Applications that are not submitted by the deadline will not be considered. Applicant will be notified in writing of incomplete status and ineligibility for funding.

Agency Representative

Title

Date:

Executive Director/Chief Officer/Board Chairperson

Title

Date: