

# women working with women, Inc. Proposal

*Pricing is sealed*

## CONTACT INFORMATION

Company

women working with women, Inc.

Email

4wsbms@gmail.com

Contact

Belinda Smith

Address

530 W University-The Blount Center

STE 113G

Gainesville, FL 32601

Phone

N/A

Website

WOMENWORKINGWIHITHWOMEN.ORG

Submission Date

Jun 21, 2023 3:18 PM

## ADDENDA CONFIRMATION

✔ Addendum #1

*Confirmed Jun 21, 2023 3:14 PM by Belinda Smith*

✔ Addendum #2

*Confirmed Jun 21, 2023 3:16 PM by Belinda Smith*

✔ Addendum #3

*Confirmed Jun 21, 2023 3:16 PM by Belinda Smith*

## QUESTIONNAIRE

**1. Provide your Employer Identification Number (EIN)\***

☒ Pass ☐ Fail

Do not include dashes

*Maximum response length: 9 characters*

454758789

***Please Note:*** Responses to this question may be publicly displayed after the due date has passed.

## 2. Provide physical address in Alachua County\*

☒ Pass ☐ Fail

530 W. University Ave - (Blount Center)

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

## 3. Provide a mailing address\*

☒ Pass ☐ Fail

Maximum response length: 200 characters

530 W. University Ave STE113 G

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

## 4. Does your agency have a 501(c)(3) status?\*

☒ Pass ☐ Fail

If yes, provide your certification in the question below, Failure to provide required documentation may deem your proposal non-responsive.

Yes

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

## 5. Upload your agency's IRS 501(c)(3) designation\*

☒ Pass ☐ Fail

 [IRS\\_LTR-EXEMPT\\_\(1\).pdf](#)

## 6. Responsible Agent Designation\*

☒ Pass ☐ Fail

The Consultant shall designate a responsible agent and alternate as necessary, for all dealings, communications, or notices or contracts between the County and the Consultant by completing and returning this Responsible Agent Form. Any notice or communication to or from the responsible agent shall be deemed to be a communication to the Consultant.

RESPONSIBLE AGENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ALTERNATE RESPONSIBLE AGENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

RESPONSIBLE AGENT - BELINDA SMITH , PRESIDENT AND CEO

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

## 7. Project Name:\*

☒ Pass ☐ Fail

TRANSPORTATION IN ORDER TO SERVE THE COMMUNITY

## 8. Amount of funds being requested\*

☒ Pass ☐ Fail

Maximum of \$50,000

Maximum response length: 7 characters

50,000.

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

9. Does your proposed project benefit residents of Alachua County living at or below 150% Federal Poverty Level?\*

Yes

☒ Pass ☐ Fail

Please Note: Responses to this question may be publicly displayed after the due date has passed.

10. Does you proposed project fit into one of the BoCC’s approved funding category?\*

Reliable Transportation

☒ Pass ☐ Fail

Please Note: Responses to this question may be publicly displayed after the due date has passed.

11. Has your agency been operational, providing proposed program service(s) in the funding category at least one full year prior to the date of application?\*

Yes

☒ Pass ☐ Fail

Please Note: Responses to this question may be publicly displayed after the due date has passed.

12. Please describe the proposed project, and quantify the anticipated benefits to residents of Alachua County living at or below 150% Federal Poverty Level:\*

Maximum response length: 2500 characters

☒ Pass ☐ Fail

We provide educational life skills in our Alachua County Jail. We provide quarterly county food distribution, Parenting workshops , abuse workshops for free. In order to enhance the enhance quality of women's lives, they must have the required tools needed to improve their personal and professional situations. Our services comprised of professional speakers, interactive specialty workshops, certification classes, computer training, children and teen social development classes, family counseling, women’s transitioning back  
  
Our mission is to recover our communities through educating, enhancing, empowering, strengthening, and improving women and families personally, professionally, socially. We are passionate about helping women recognize their need and potential to be restored as successes in society through thoughtful study, educational workshops, seminars, and conference

Please Note: Responses to this question may be publicly displayed after the due date has passed.

13. Please describe how your project will enhance effectiveness and/or efficiency of your agency’s service delivery:\*

Maximum response length: 2500 characters

☒ Pass ☐ Fail

It will enhance it for those seniors who live alone or a parent who could not get food during distribution. It would allow us to deliver more items on a closed in truck or van then a car. The effectiveness is being able to deliver to more families in need, for clothes that are donated

Please Note: Responses to this question may be publicly displayed after the due date has passed.

14. List all the budget items for which grant funds will be used and the dollar amount anticipated for each:\*

☒ Pass ☐ Fail

If your budget has more than five line items, you have the option to download and fill the SPACE Budget Template provided, and upload in the next question.

Maximum response length: 2500 characters

1 Purchase a van or truck - \$40.000.00

2. logo place on for van or truck - \$2500.00

3. Insurance - 3000.00

4. repair and maintenance + 3000

total - 48.500

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

### 15. Upload SPACE Budget Template

No response submitted

### 16. Describe the timeline and anticipated milestone dates for the project:\*

☒ Pass ☐ Fail

Maximum response length: 2500 characters

TIMELINE - AUGUST 1, 2023

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

### 17. Describe measurable outcomes for the project:\*

☒ Pass ☐ Fail

Maximum response length: 2500 characters

TRANSPORTING FOOD, PEOPLE , TOYS FOR CHILDREN , CLOTHES,FURNITURE AS NEEDED


**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

### 18. Upload any supplemental documentation that is relevant to your project.

☒ Pass ☐ Fail

 [WWWPPPT.pptx](#)

 [FOOD\\_Giveaway\\_07.22.jpg](#)

 [IMG\\_2593.jpg](#)

 [2021\\_4W\\_Newsletter\\_\(1\).pdf](#)

### 19. Acknowledge that you have reviewed all Addendum(s) issued with this solicitation.\*

☒ Pass ☐ Fail

☒ Confirmed

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

### 20. Conflict of Interest\*

☒ Pass ☐ Fail

The bidder certifies that to the best of his knowledge or belief, no elected/appointed official or employee of the County is financially interested, directly or indirectly, in the purchase of the goods or services specified on this order. ( Select yes, if there is no conflict of interest)

☒ Confirmed

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

### 21. Drug Free Workplace\*

☒ Pass ☐ Fail

In accordance with §287.087, Florida Statute

Do you certify that you meet the following:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).

4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 1893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.

5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.

6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

Yes

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

## 22. Corporate Resolution Granting Signature\*

☒ Pass ☐ Fail

The response must be submitted by an officer of the business who is legally authorized to enter into a contractual relationship in the name of the bidder. An authorized representative who is not an officer may sign the proposal, but must attach or upon request provide a corporate resolution granting authorization to the representative to execute on behalf of the business. Are you authorized to submit this RFA?

☒ Confirmed

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.

23. By submitting this application, we acknowledge that we are aware that the information contained in this funding application is public record. We further certify that this Request for Funding is consistent with our organization's mission, Articles of Incorporation and Bylaws, and that this application for funding was authorized by the agency's Board of Directors.\*

☒ Confirmed

☒ Pass ☐ Fail

**Please Note:** Responses to this question may be publicly displayed after the due date has passed.