VA's Supportive Services for Veteran Families Program
Application Exhibit IX, Tab 1 - Applicant Budget - Monthly SSVF Grant Funds Budget
Note: Grantee to attach the budget they submitted with their grant application.

Name of Applicant:	INSERT APPLICANT NAME
SSVF Grant Amount:	
Application Fiscal Year:	FY 2011

ogram Expenses		% of Total SSVF Grant	SSVF Grant Funds Total Annual	SSVF Grant Funds Month 1	SSVF Grant Funds Month 2	SSVF Grant Funds Month 3	SSVF Grant Funds Month 4	SSVF Grant Funds Month 5	SSVF Grant Funds Month 6	SSVF Grant Funds Month 7	SSVF Grant Funds Month 8	SSVF Grant Funds Month 9	SSVF Grant Funds Month 10	SSVF Grant Funds Month 11	SSVF Grant Fund Month 12
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VA's Supportive Services for Veteran Families Program
Attachment 1, Tab 3: Grantee Quarterly Financial Report - Quarterly Spending by Subcontractor

Name of Grantee: SSVF Program Number SSVF Grant Amount: Grant Fiscal Year:

	INSERT APPLICANT NAME	
	0	
	\$0.00	
Y 2011		

			PROGRAM EXPENSES PAID TO DATE TO:							
Program Expenses						INSERT SUB- CONTRACTOR NAME & ADDRESS				
Description of Activities Performed	% of Total SSVF Grant	SPENT SSVF Grant Funds Total Annual to Date	GRANTEE							
I. Provision and Coordination of Supportive Services (Minimum of 90% of To	otal SSVF Gra	ant Amount)								
1. Personnel/Labor		<u> </u>								
Subtotal Personnel	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
2. Temporary Financial Assistance	#DIV/0!	<b>\$</b> -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
3. Other Non-Personnel Provision and Coordination of Supportive Services Expe	enses									
Subtotal Other Program Expenses	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
# of Vehicles	1									
4. Lease & Maintenance of Vehicle(s)	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	T									
Subtotal Provision and Coordination of Supportive Services	#DIV/0!	-	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
II. Administrative Expenses (Maximum of 10% of Total SSVF Grant Amount)										
Subtotal Administrative Expenses	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Grand Total	#DIV/0!	<b>c</b> -	\$ -	<b>s</b> -	\$ -	\$ -	\$ -	\$ -		
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## VA's Supportive Services for Veteran Families Program Attachment 1, Tab 4: Grantee Quarterly Financial Report - Quarterly Draw Downs

Name of Grantee: INSERT APPLICANT NAME

SSVF Program Number: 0

SSVF Grant Amount: \$0.00

Grant Fiscal Year: FY 2011

	% of Total SSVF Grant		1st QTR	2nd QTR	3rd QTR	4th QTR
Grantee SSVF Draw Downs	#DIV/0!	\$ -	\$ -	-	\$ -	\$ -
Grantee Spending to Date	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -
% Variance		#DIV/0!	0%	0%	0%	0%

Explain any variances:

## VA's Supportive Services for Veteran Families Program Attachment 1, Tab 5: Grantee Quarterly Financial Report - Number of Participants Served

Name of Grantee:	INSERT APPLICANT NAME					
SSVF Program Number:	0					
SSVF Grant Amount:	\$0.00					
Grant Fiscal Year:	FY 2011					

Current Caseload*	End of 1st Quarter	End of 2nd Quarter	End of 3rd Quarter	End of 4th Quarter
Number of Participant Households Currently Receiving Assistance	0	0	0	0
# of Single Participant Households Currently Receiving Assistance				
# of Participant Households w/ Dependents Currently Receiving Assistance				

<sup>\*</sup>Note: Include only those households who received case management, assistance in obtaining VA benefits, assistance in obtaining and coordinating other public benefits, and/or other services (see Final Rule Sections 62.31-62.34). Exclude those households receiving only outreach services.

New Participants Served*	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Number of New Unique Participant Households Who Received Assistance	0	0	0	0	0
# of New Unique Single Participant Households Who Received Assistance	0				
# of New Unique Participant Households w/ Dependents Who Received Assistance	0				

<sup>\*</sup>Note: Include only those households who received case management, assistance in obtaining VA benefits, assistance in obtaining and coordinating other public benefits, and/or other services (see Final Rule Sections 62.31-62.34). Exclude those households receiving only outreach services.

New Participants Served Category of Occupying Permanent Housing*	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Number of New Unique Participant Households Who Received Assistance	0	0	0	0	0
i) are residing in permanent housing	0				
ii) are very low-income Veteran families who are homeless and scheduled to become residents of permanent housing	0				
iii) have exited permanent housing within the previous 90 days to seek other housing that is responsive to their needs and preferences are rapidly transitioned to stable housing	0				

<sup>\*</sup>Note: Include only those households who received case management, assistance in obtaining VA benefits, assistance in obtaining and coordinating other public benefits, and/or other services (see Final Rule Sections 62.31-62.34). Exclude those households receiving only outreach services.

New Participants Served Target Populations*	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Veteran families earning less than 30 percent of area median income as published annually					
by HUD (http://www.huduser.org)	0				
Chronically homeless Veteran families	0				
Formerly chronically homeless Veteran families	0				
Households with one or more female Veterans	0				
Returning Veterans from Afghanistan and/or Iraq	0				
Participants Receiving VA Health Care and/or Other VA Benefits	0				

<sup>\*</sup>Note: Include only those households who received case management, assistance in obtaining VA benefits, assistance in obtaining and coordinating other public benefits, and/or other services (see Final Rule Sections 62.31-62.34). Exclude those households receiving only outreach services.

By submitting this report, we are certifying that our program's data for 100% of participants has been exported from HMIS and uploaded to the SSVF Data Repository not less than on a monthly basis. If this is not the case, we have described why in the attached Quarterly Performance Report.

VA's Supportive Services for Veteran Families Program
Attachment 1, Tab 6: Grantee Quarterly Financial Report - Non-VA Funding Sources

Name of Grantee: INSERT APPLICANT NAME

SSVF Program Number 0

SSVF Grant Amount: \$0.00

Grant Fiscal Year: FY 2011

	-		PROGRAM EXPENSES PAID TO DATE TO:							
Program Expenses	% of Total SSVF Grant	SPENT SSVF Grant Funds Total Annual to Date	GRANTEE	Non-VA Funding Source #1: INSERT NAME	Non-VA Funding Source #2: INSERT NAME	Non-VA Funding Source #3: INSERT NAME	Non-VA Funding Source #4: INSERT NAME	Non-VA Funding Source #5: INSERT NAME		
I. Provision and Coordination of Supportive Services (Minimum of 90% of T	otal SSVF Gra	ant Amount)								
1. Personnel/Labor										
<u>Subtotal Personnel</u>	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
2. Temporary Financial Assistance	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
3. Other Non-Personnel Provision and Coordination of Supportive Services Exp	enses									
Subtotal Other Program Expenses	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
4. Lease & Maintenance of Vehicle(s)	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Subtotal Provision and Coordination of Supportive Services	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
II. Administrative Expenses (Maximum of 10% of Total SSVF Grant Amount)										
Subtotal Administrative Expenses	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Grand Total	#DIV/0!	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
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