***INSERT AGENCY LETTERHEAD***

***INSERT DATE***

RE: VT0024L1T001709/VT State Housing Authority/Shelter+Care Statewide (VSHA S+C SW FY17) – Annual Performance Report

To Whom It May Concern,

Below is a list of aggregate values of expended actual services provided by our agency in the form of a match (or provided by another agency with a provided & signed MOU) to VSHA Shelter+Care Program participants during the grant term (6/1/18 – 5/31/19):

|  |  |  |  |
| --- | --- | --- | --- |
| |  | | --- | | **Eligible Services for Match** | | |  | | --- | | **Value ($)** | |
| |  | | --- | | Outreach | | |  | | --- | |  | |
| |  | | --- | | Case management | | |  | | --- | |  | |
| |  | | --- | | Life skills (outside of case management) | | |  | | --- | |  | |
| |  | | --- | | Alcohol and drug abuse services | | |  | | --- | |  | |
| |  | | --- | | Mental health services | | |  | | --- | |  | |
| |  | | --- | | AIDS-related services | | |  | | --- | |  | |
| |  | | --- | | Other health care services | | |  | | --- | |  | |
| |  | | --- | | Education | | |  | | --- | |  | |
| |  | | --- | | Housing placement | | |  | | --- | |  | |
| |  | | --- | | Employment assistance | | |  | | --- | |  | |
| |  | | --- | | Child care | | |  | | --- | |  | |
| |  | | --- | | Transportation | | |  | | --- | |  | |
| |  | | --- | | Legal | | |  | | --- | |  | |
| |  | | --- | | **TOTAL (actual services provided)** | | |  | | --- | |  | |

Sources of Funds for Services:

* ***INSERT Type of Source & Amount***
* ***INSERT Type of Source & Amount***

Sincerely,

***TITLE (Financial Director, Executive Director, Other Authorized Signer)***