**FY2025 RFP REPORT CHECKLIST**

**Adherence to this section of the RFP is worth up to 10 points.**

The following forms are required for the submission of your FY2025 grant application and can be downloaded at [www.futurebridge.net/ehe](http://www.futurebridge.net/ehe). All documents requiring a signature must have a Corporate Seal or be notarized; as indicated

**Please place all documents in the order specified on the FY2025 RFP Checklist.**

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| **REQUIRED FORMS CHECKLIST****(\*Excel Workbook provided)** | **SUB RECIPIENT / VENDOR** | **REVIEWER USE** | **REQUIRED BY** |
| Application Face Sheet  | [ ]  |  [ ]  | Service Providers and Vendors |
| RFP Checklist | [ ]  | [ ]  | Service Providers and Vendors |
| Service Request Summary | [ ]  | [ ]  | Service Providers  |
| \*Organizational Chart/Contract Information Sheet | [ ]  | [ ]  | Service Providers  |
| **SERVICE AND BUDGET DOCUMENTS**  |
| \*Scope of Services  | [ ]  | [ ]  | Service Providers and Vendors |
| \*Budget Narrative Justification / Line Item Budget | [ ]  | [ ]  | Service Providers and Vendors |
| \*Fringe Benefit Worksheet  | [ ]  | [ ]  | Service Providers and Vendors |
| \* Allocation Table  | [ ]  | [ ]  | Service Providers  |
| \* Unit Cost Budget | [ ]  | [ ]  | Service Providers  |
| Attachment #1 -Rapid Anti-Retro Viral Therapy Protocols  | [ ]  | [ ]  | Service Providers |
| Attachment #2 – 4 - Memoranda of Agreement(s) (three)  | [ ]  | [ ]  | Service Providers |
| Attachment #5 - Status Neutral Service Delivery Model  | [ ]  | [ ]  | Service Providers |
| Attachment #6 - Logic Model Table  | [ ]  | [ ]  | Service Providers  |
| Attachment #7 - Medicaid Denial (If Applicable)  | [ ]  | [ ]  | Service Providers |
| Attachment #8 - Coordination & Funding Streams Table  | [ ]  | [ ]  | Service Providers |
| Attachment #9 - Schedule of charges/sliding fee scale | [ ]  | [ ]  | Service Providers |
| **LEGAL DOCUMENTS**  |
| Articles of Incorporation/ Certificate of Formation | [ ]  | [ ]  | Service Providers and Vendors |
| Proof of Non-Profit Status  | [ ]  | [ ]  | Service Providers  |
| NJ Business Registration Certificate | [ ]  | [ ]  | Vendors |
| Certificate of Insurance & Additional Broad Endorsement  | [ ]  | [ ]  | Service Providers and Vendors |
| Letter Regarding Insurance Renewal (If applicable) | [ ]  | [ ]  | Service Providers and Vendors |
| Hold Harmless Agreement | [ ]  | [ ]  | Service Providers and Vendors |
| Non-Profit or Stockholder Disclosure Statement | [ ]  | [ ]  | Service Providers and Vendors |
| Non-Collusion Affidavit | [ ]  | [ ]  | Service Providers and Vendors |
| Counterterrorism Compliance Form | [ ]  | [ ]  | Service Providers and Vendors |
| Certificate of Compliance w/ Charitable Registration | [ ]  | [ ]  | Service Providers |
| Certification of Compliance with Contractor Pay to Play Reform | [ ]  | [ ]  | Vendors |
| Certification of Compliance with Executive Order on Pay to Play Reform | [ ]  | [ ]  | Vendors |
| Certificate regarding Tobacco Smoke | [ ]  | [ ]  | Service Providers |
| Political Contribution Disclosure Form | [ ]  | [ ]  | Vendors |
| Disclosure of Investment Activities in Iran  | [ ]  | [ ]  | Service Providers and Vendors |
| Americans with Disabilities Act of 1996 | [ ]  | [ ]  | Service Providers and Vendors |
| Republic of Sudan | [ ]  | [ ]  | Service Providers and Vendors |
| Prohibited Russia-Belarus Activities & Iran Investment Activities | [ ]  | [ ]  | Service Providers and Vendors |
| Attachment A/ Minority Status | [ ]  | [ ]  | Service Providers and Vendors |
| Affirmative Action Certificate or form AA-302 with proof of payment | [ ]  | [ ]  | Service Providers and Vendors |
| Summary of other Funding Sources | [ ]  | [ ]  | Service Providers and Vendors |
| 2023 Audit Report (or IRS Form 990) | [ ]  | [ ]  | Service Providers and Vendors |

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| Sub Recipient / Vendor: |  |