



July 10, 2023

Mr. Gale Nelson President & CEO Big Brothers Big Sisters of Miami, Inc. 550 NW 42nd Avenue Miami, Florida 33126

SUBJECT: Letter of Intent

Dear Mr. Gale Nelson:

This Letter of Intent is to notify you that the South Florida Workforce Investment Board (SFWIB) approved Big Brothers Big Sisters of Miami, Inc for the Take Stock in Children Scholarship Program Administration. Your agency was awarded a total of Temporary Assistance to Needy Families (TANF) funding up to \$300,000.00 to serve as the Administrative entity and fiscal agent for the Miami Dade Take Stock in Children Program. The effective period for the funding allocation is beginning July 1, 2023 through June 30, 2024 pursuant to the terms contained herein.

The Contractor agrees to render services in a manner deemed satisfactory to the SFWIB, in its sole discretion, and in accordance with the Statement of Work, attached hereto and incorporated herein, as Exhibit A.

Modifications to Exhibit A, Statement of Work, shall not be effective until approved, in writing, by the SFWIB.

The Contractor agrees to accept the funding identified herein, pursuant to the terms and conditions included in Exhibit A, Statement of Work.

The Contractor and the SFWIB agree this Letter of Intent will be replaced by a duly executed contract within 90 calendar days from the date of transmittal. Failure to submit documents identified below within the specified timeframe may result in a disallowance of the expenditure made and/or cost incurred by the Contractor, which shall be determined by the SFWIB in its sole discretion.

Signed contract, annual certificate and organizational responsibilities forms, budgets, and indirect cost rate proposal within 90 calendar days.

info@careersourcesfl.com

7300 Corporate Center Drive, Sulte 500 Miami, Florida 33126

p: 305-594-7615 | f: 305-470-5629





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Please submit the following to Fernando Odio, Contracts Officer, within ten (10) days from the date of transmittal:

• E-mail budget for the amount awarded (In no event shall the budget(s) for administrative costs exceed ten percent (10%) or the Indirect Cost Rate, whichever is less).

The Contract for Big Brothers Big Sisters of Miami, Inc. is forthcoming for your signature. Once executed, we will return one (1) scanned original to you. Should you have any questions or concerns, please contact the SFWIB Contracts Officer identified above.

Congratulations, on your selection to receive the funding award and we look forward to working with you to accomplish the important mission of CareerSource South Florida. Please acknowledge your acceptance of this award by signing below and returning a copy of this letter, with your signature to the Executive Office c/o Rick Beasley, Executive Director, 7300 Corporate Center Drive, Suite 500, Miami, FL 33126.

Held.

Rick Beasley Executive Director

South Florida Workforce Investment Board

d/b/a CareerSource South Florida

CONTRACTOR'S RESPRESENTATIVE

Signature:

PRINTED NAME: Gale Nelson

TITLE: President & CEO

DATE:

Attachments

Pc: Robert Smith, Special Projects Administrator II, SFWIB/CSSF

Renee Bennett, Assistant Director, SFWIB Finance

Central File, SFWIB/CSSF

ANNUAL CERTIFICATION

Coale Nelson, on behalf of	BBBS of Miani,
certifies and assures that all certifications and assurance	
certification is incorporated and made a part of the Agr	eement Index Code #
Ву:	/ 7- <i>11-202</i> 3
Signature of Affiant	Date
Printed Name of Affiant and Title BBBS Manu	dent
Printed Name	of Firm
Address of Fir	
SUBSCRIBED AND SWORN TO (or affirmed) before	re me this \7th day of JULU .2023
He/She is personally known to me or has presented F	CALLED A COLUMN TO COLUMN
Sheltian M. What Signature of Notary	HH 392199 Serial Number
Shellion N Wheeler Print or Stamp Name of Notary	4 27 2027 Expiration Date
Notary Public – State of Florido	Notary Public State of Florida Shellian N Wheeler My Commission HH 392199 Expires 4/27/2027

AGENCY: Big Brother Big Take 5+ 0 Skgani	Sisters Miami Children Mian ZATIONAL RESPONSI	DATE:_	7/17/23
Provide the names(s) and telephone numl the following areas:			e responsibility within
POSITION	IAME	TELEPHONE	NUMBER & E-MAIL
Chairman of the Board Allon Prince	de	305-258-	2 powerfl.ore
Chief Executive*	le Nelion	(305)644	-7072 gnelsek
Project Director Vancssa Lonce	t	Vlopezen	dacobbs minions
Affirmative Action Officer		7864386313	
1	lick	Emallick	9-7053 ebbbsmienics
Fiscal Management Officer Richard	2 0	mores Ol	bbsmigni or
 Person Authorized to Sign Contract(s) according to Corporate/ Board Resolution Persons Authorized to Sign Invoicing Packages and Procurement Requests (Finance Manager or above) 	Name Gale Med Richard Peren	lon Je	rez@bhhsmian
Persons Authorized to Pick Up Emergency Payments/Checks	Vanessa Lopez	vloprz	ebbsmini.og
 Person(s) Authorized to Sign and/or Pick Up Other Relevant Documents 	Vanesso Lopez		20 bbbsmicnic
*Specify Title: President, CEO, Mayor, City Mai • FASCIMILE SIGNATURES REQUIRE		pplicable	*1

FORM F-3- OPERATIONAL DOCUMENTS ORGANIZATIONAL RESPONSIBILITIES

Rev.02.18.20