

October 16, 2025

BCC Agenda Date/Item: \_\_\_\_\_

Board of County Commissioners  
Clackamas County

**Approval of a Grant Renewal Application to the U.S. Department of Housing and Urban Development for two Family Self-Sufficiency Program coordinator positions. Anticipated Grant Value is \$211,659.80 for 1 year. Funding is through the U.S. Department of Housing and Urban Development. No County General Funds are involved.**

<b>Previous Board Action/Review</b>	HACC Board approved the previous year's renewal application on 10/31/2024.		
<b>Performance Clackamas</b>	Vibrant Economy and Safe, Secure, and Livable Communities.		
<b>Counsel Review</b>	N/A	<b>Procurement Review</b>	No
<b>Contact Person</b>	Elizabeth Miller	<b>Contact Phone</b>	(971) 201-0467

**EXECUTIVE SUMMARY:** The Housing Authority of Clackamas County (HACC), a component unit within the Housing and Community Development Division of the Health, Housing, and Human Services Department, requests approval to apply for renewal funding for the Family Self-Sufficiency (FSS) Program from the U.S. Department of Housing and Urban Development (HUD). The FSS grant funds two full-time staff members and programming to assist Housing Authority participants in working towards their goals, increasing their economic independence.

HACC has been operating the FSS Program since 1999. The goal of the FSS program is to promote self-sufficiency strategies for low-income families and to encourage the growth of savings accounts and/or building credit for assisted households. This grant opportunity would renew funding for the current two full-time FSS Coordinators. The role of an FSS Coordinator is to ensure that FSS program participants are connected to the supportive services they need, to complete annual and interim reexaminations of rent assistance, and to assist participants in working toward graduating from assistance.

There are no matching funding requirements with this grant. Funds received would cover costs to staff the positions, who currently serve 120 participants. The notice of funding availability (NOFA) has not been released; however, it's a short turnaround once it is released. I'm requesting approval to apply in advance. Last year's award was \$192,418; we don't anticipate the award will exceed \$211,659.80. The grant award amount is determined by HUD, based on the number of FSS participants enrolled.

For Filing Use Only

**RECOMMENDATION:** Staff respectfully requests that the Housing Authority Board approve the request to apply for this grant and authorize Chair Roberts or his designee to sign on behalf of the Housing Authority.

Respectfully submitted,

*Mary Rumbaugh*

Mary Rumbaugh  
Director of Health, Housing & Human Services

## Financial Assistance Application Lifecycle Form

Use this form to track your potential award from conception to submission.

Sections of this form are designed to be completed in collaboration between department program and fiscal staff.

**If renewal or direct appropriation, complete sections I, II, IV & V only. Section III is not required.**

**If Disaster or Emergency Relief Funding, EOC will need to approve prior to being sent to the BCC**

**\*\*CONCEPTION\*\***

### Section I: Funding Opportunity Information - To Be Completed by Requester

Direct Appropriation (no application)

Award type:

Subrecipient Award

☒ Direct Award

Award Renewal?

☒ Yes

No

Lead Fund # and Department:	610 Housing Authority of Clackamas County (H3S)
Name of Funding Opportunity:	Family Self Sufficiency Grant 2026

Funding Source: ☒ Federal – Direct

Federal – Pass through

State

Local

Requestor Information: (Name of staff initiating form)	Elizabeth Miller
Requestor Contact Information:	emiller@clackamas.us
Department Fiscal Representative:	Darren Chilton
Program Name & Prior Project #: (please specify)	Family Self Sufficiency Grant 2025

Brief Description of Project:

Renewal application for continued Family Self-Sufficiency (FSS) Program funding for two FSS Coordinators for 2026. The Family Self Sufficiency staff assist Housing Authority participants connect with public and private resources that help them progress toward economic independence. Renewal or expanded funding will be determined by HUD, using a formula based on the number of participants in the FSS Program. Due to increases in FSS program participants, HUD may award additional funds for an additional staff member for 3 FTE instead of for 2 FTE from previous years. The application has not opened yet but is anticipated to have a very short window of opportunity for this renewal funding so staff is requesting board approval to apply ahead of application opening.

Name of Funding Agency: U.S. Department of Housing and Urban Development (HUD)

Notification of Funding Opportunity Web Address: TBD

OR

Application Packet Attached: Yes ☒ No

Completed By: Elizabeth Miller

Date: 9/10/2025

**\*\* NOW READY FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTATIVE \*\***

### Section II: Funding Opportunity Information - To Be Completed by Department Fiscal Rep

Competitive Application

☒ Non-Competing Application

Other

Assistance Listing Number (ALN), if applicable:		Funding Agency Award Notification Date:	TBD
Announcement Date:	TBD	Announcement/Opportunity #:	TBD
Grant Category/Title	Family Self Sufficiency 2026	Funding Amount Requested:	Estimated \$211,659.80 (last year was \$192,418)
Allows Indirect/Rate:	No	Match Requirement:	No
Application Deadline:	TBD	Total Project Cost:	grant covers total project cost for program FTE
Award Start Date:	1/1/2026	Other Deadlines and Description:	TBD
Award End Date	12/31/2026	Program Income Requirements:	50% AMI or less
Completed By:	Elizabeth Miller		
Pre-Application Meeting Schedule:	N/A		

Additional funding sources available to fund this program? Please describe:

None

How much General Fund will be used to cover costs in this program, including indirect expenses?

None

How much Fund Balance will be used to cover costs in this program, including indirect expenses?

None

In the next section, limit answers to space available.

**Section III: Funding Opportunity Information** - To Be Completed at Pre-Application Meeting by Dept Program and Fiscal Staff

**Fiscal**

1. Are there other revenue sources required, available, or will be used to fund the program? Have they already been secured? Please list all funding sources and amounts.

2. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, local grant, etc.)?

3. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are those sources?

4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?

**Organizational Capacity:**

1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?

2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?

3. If this is a pilot project, what is the plan for sun setting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?

4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

**Collaboration**

1. List County departments that will collaborate on this award, if any.

**Reporting Requirements**

1. What are the program reporting requirements for this grant/funding opportunity?

2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? If not, is it feasible to develop a data source within the grant timeframe?

3. What are the fiscal reporting requirements for this funding?

**Mission/Purpose:**

1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?

2. Who, if any, are the community partners who might be better suited to perform this work?

3. What are the objectives of this funding opportunity? How will we meet these objectives?

Other information necessary to understand this award, if any.

Program Approval:

Name (Typed/Printed)	Date	Signature
<b>** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIRECTOR **</b>		
<b>**ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN**</b>		

Section IV: Approvals

DIVISION DIRECTOR (or designee, if applicable)

Shannon Callahan

Sep 15, 2025

Shannon Callahan  
Shannon Callahan (Sep 15, 2025 12:49:10 PDT)

Name (Typed/Printed)

Date

Signature

DEPARTMENT DIRECTOR (or designee, if applicable)

Denise Swanson

Sep 16, 2025

Denise Swanson  
Denise Swanson (Sep 16, 2025 17:47:41 PDT)

Name (Typed/Printed)

Date

Signature

FINANCE ADMINISTRATION

Elizabeth Comfort

Sep 17, 2025

Elizabeth Comfort

Name (Typed/Printed)

Date

Signature

EOC COMMAND APPROVAL **(WHEN NEEDED FOR DISASTER OR EMERGENCY RELIEF APPLICATIONS ONLY)**

Name (Typed/Printed)

Date

Signature

Section V: Board of County Commissioners/County Administration

(Required for all grant applications. If your grant is awarded, all grant awards must be approved by the Board on their weekly consent agenda regardless of amount per local budget law 294.338.)

**For applications \$150,000 and below:**

COUNTY ADMINISTRATOR	Approved:	Denied:
Name (Typed/Printed)	Date	Signature

**For applications up to and including \$150,000 email form to BCC staff at [CA-Financialteam@clackamas.us](mailto:CA-Financialteam@clackamas.us) for Gary Schmidt's approval.**

**For applications \$150,000.01 and above, email form with Staff Report to the Clerk to the Board at [ClerktotheBoard@clackamas.us](mailto:ClerktotheBoard@clackamas.us) to be brought to the consent agenda.**

BCC Agenda Item #:

Date:

OR

Policy Session Date:

County Administration Attestation

County Administration: re-route to department at  
and  
Grants Manager at [financegrants@clackamas.us](mailto:financegrants@clackamas.us)  
when fully approved.

Department: keep original with your grant file.











# H3S-HACC\_Lifecycle\_Fund 610\_Family Self Sufficiency Grant\_03-2025

Final Audit Report

2025-09-17

Created:	2025-09-15
By:	Qudsia Sediq (QSediq@clackamas.us)
Status:	Signed
Transaction ID:	CBJCHBCAABAAcrMp7e0OfmtU-zBU0DhCv2JfSdJZIScQ

## "H3S-HACC\_Lifecycle\_Fund 610\_Family Self Sufficiency Grant\_03-2025" History

-  Document created by Qudsia Sediq (QSediq@clackamas.us)  
2025-09-15 - 7:05:23 PM GMT- IP address: 198.245.132.3
-  Document emailed to scallahan@clackamas.us for signature  
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-  Email viewed by scallahan@clackamas.us  
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-  Signer scallahan@clackamas.us entered name at signing as Shannon Callahan  
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-  Document e-signed by Shannon Callahan (scallahan@clackamas.us)  
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-  Email viewed by dswanson@clackamas.us  
2025-09-17 - 0:45:09 AM GMT- IP address: 52.44.135.122
-  Signer dswanson@clackamas.us entered name at signing as Denise Swanson  
2025-09-17 - 0:47:39 AM GMT- IP address: 198.245.132.3
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 Agreement completed.

2025-09-17 - 2:27:33 PM GMT