



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: November 16, 2021

** = Mandatory, information must be provided*

or Procurement Director Award ☐

***Contractor/Vendor Name/Grantor (DBA):**

Connie Hillman Family Foundation

***Project Title/Description:**

Workforce Development for Veterans

***Purpose:**

The purpose of the funds is to provide support services to veterans in order to secure gainful employment.

Indirect rate cost: does not apply.

Attachment: Award Letter

***Procurement Method:**

Not applicable to grant awards.

***Program Goals/Predicted Outcomes:**

The goal is to help unemployed veterans find employment.

***Public Benefit:**

This program supports Pima County's economic development by helping to develop a trained and productive labor force that meets employers' needs.

***Metrics Available to Measure Performance:**

Veterans receiving support services funds will obtain employment.

***Retroactive:**

Yes, due to receiving the Award Letter on September 20, 2021. If the funds are not approved, Pima County veterans would not receive support services for employment.

GMI Approved 11-10-21
Jorn

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____

Commencement Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____

☐ Expense Amount: \$ _____ ☐ Revenue Amount: \$ _____***Funding Source(s) required:**Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No**If Yes, is the Contract to a vendor or subrecipient?**Were insurance or indemnity clauses modified? ☐ Yes ☐ No*If Yes, attach Risk's approval.*Vendor is using a Social Security Number? ☐ Yes ☐ No*If Yes, attach the required form per Administrative Procedure 22-10.***Amendment / Revised Award Information**

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____

Amendment No.: _____ AMS Version No.: _____

Commencement Date: _____ New Termination Date: _____

Prior Contract No. (Synergen/CMS): _____

☐ Expense or ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ _____Is there revenue included? ☐ Yes ☐ No If Yes \$ _____***Funding Source(s) required:**Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____**Grant/Amendment Information** (for grants acceptance and awards)☒ Award ☐ AmendmentDocument Type: GTAW Department Code: CR Grant Number (i.e., 15-123): 22-53Commencement Date: 9/20/21 Termination Date: 9/19/31 Amendment Number: _____☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 10,000.00***All Funding Source(s) required:** Connie Hillman Family Foundation***Match funding from General Fund?** ☐ Yes ☒ No If Yes \$ _____ % _____***Match funding from other sources?** ☐ Yes ☒ No If Yes \$ _____ % _____***Funding Source:** _____***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?** _____Contact: Rise HartDepartment: Community & Workforce Development Telephone: 724-5723Department Director Signature/Date: [Signature] 11/9/2021Deputy County Administrator Signature/Date: [Signature] 11/9/2021County Administrator Signature/Date: [Signature] 11/9/2021*(Required for Board Agenda/Addendum Items)*

Larry R. Adamson
3430 E. Sunrise Drive, Suite 200
Tucson, AZ 85718
520/792-1181 (main)
520/202-2185 (direct)
ladamson@duffieldlaw.com

September 20, 2021

Arizona @ Work
Sean M. Lopez, Admin. Services Manager
Pima County Kino Veterans' Workforce Center
2801 E. Ajo Way
Tucson, AZ 85713

Dear Sean:

The tax law for 2020 and 2021 has permitted an Anonymous Donor to make larger annual grants over the last two years in recognition of and to honor the **Connie Hillman Family Foundation**.


We are pleased to send to you this 2021 *special one-time* grant of \$10,000.

Please send your gift acknowledgement of this grant, via email to ladamson@duffieldlaw.com or to:

Larry R. Adamson
c/o Connie Hillman Family Foundation
3430 E. Sunrise Dr., Suite 200
Tucson, AZ 85718

Include in your gift acknowledgment; (1) the amount, (2) the date the grant was received, and (3) that "no goods or services were received" in exchange for this grant by the Anonymous Donor or by Connie Hillman Family Foundation.

Yours very truly,


Larry R. Adamson
On behalf of Anonymous Donor

LRA/kg
Enclosure (check)

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

WILMINGTON TRUST

No: 229327195

Date 9/10/21

109819-100

PAY TEN THOUSAND AND NO/100

U.S. DOLLARS \$ 10,000.00

TWO SIGNATURES REQUIRED FOR AMOUNTS OF \$100 AND OVER

TO THE ORDER OF ARIZONA AT WORK C/O LARRY R ADAMSON, ESQ

[Signature]

[Signature]

AUTHORIZED SIGNATURES

MANUFACTURERS AND TRADERS TRUST COMPANY

Security Features

⑈ 229327195 ⑆ ⑆ 022000046 ⑆ ⑈ 7005087920086 ⑆ ⑆