## ATTACHMENT 3

**Submittal Checklist**

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| --- | --- | --- | --- |
| **Proposer’s Initials** |  |  | **REENTRY STAFF****USE ONLY**(Staff Initials) |
|  | 1 | Attended ***Mandatory*** Pre-Proposal Meeting on January 22, 2025 at 2:00 p.m. local time.  |  |
|  | 2 | Prepared one (1) single electronic PDF format file, verified to include all attachments, emailed to CONTACT. The file shall be named as follows: *ADULT PRERELEASE REENTRY SERVICES FY26 to FY27, Proposer’s Agency Name* |  |
|  | 3 | Provided completed Cover Sheet (**Attachment 2**)* All information provided
* Signed
 |  |
|  | 4 | Provided completed Proposal Guidelines (**Section III**) |  |
|  | 5 | Provided completed Program Budget Template (**Attachment 4**) |  |
|  | 6 | Provided completed Program Staff Template (**Attachment 5**) |  |
|  | 7 | Provided completed Logic Model Template (**Attachment 6**) |  |
|  | 8 | Provided IRS Form 990, if a 501(c)(3) corporation (**Attachment 7**) or Comprehensive Annual Financial Report (CAFR) for public entities |  |
|  | 9 | Provided most recent completed Independent Audit Report and Management Letter, preferably the last fiscal or calendar year, and not older than two (2) years |  |
|  | 10 | Provided most recent completed Year-End Financial Statements |  |
|  | 11 | Provided completed Submittal Checklist (**Attachment 3**) |  |
|  | 12 | Reviewed Sample Standard Contract (**Attachment 9**)* For reference only, do NOT sign or include in Proposal
 |  |

**Note:** Submittal Checklist should be initialed on each line to verify all components are submitted by Proposer.