

Exhibit D - Capacity

Offeror: _____

Please provide the following information regarding key staff positions that relate to this program for your organization:

Title	Staff Member	Years at Organization	Years in Current Position
Executive Director			
Accountant or Fiscal Officer			
Program Manager			
Housing Stability Case Manager			

For each position listed above, write a brief description of their experience as it relates to housing, homelessness and/or administering federal assistance grants.

Executive Director: _____

Accountant/Fiscal Officer: _____

Program Manager: _____

Case Manager: _____

