



**City of St. Louis – Homeless Services Division  
2020 ESG REQUEST FOR PROPOSALS (RFP)  
Proposal Cover Sheet  
Page 1 of 2**

<b>Organization Name:</b>			
<b>Project Name:</b>			
<b>Project Address:</b>			
<b>Executive Director Name:</b>			
<b>Executive Director Email:</b>			
<b>Executive Director Telephone #</b>			
<b>Organization Address</b>			
<b>Organization Telephone #</b>			
<b>Organization Fax #</b>			
<b>Organization Website</b>			
<b>Organization DUNS #</b>		<b>Tax ID or EIN:</b>	
<b>Contact Person &amp; Title</b>			
<b>Contact's Email</b>			
<b>Contact's Telephone #</b>			

**Category: Emergency Shelter Activities**

**Type of Proposal**

- Single Agency Proposal  
 Collaborative Proposal

List Collaborative Partners: \_\_\_\_\_  
 \_\_\_\_\_

- Collaborative Lead Proposal

List Collaborative Partners: \_\_\_\_\_  
 \_\_\_\_\_

**Housing: Barracks**

**Target Population:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Single Men               | <input type="checkbox"/> Veterans          | <input type="checkbox"/> Developmentally Disabled |
| <input type="checkbox"/> Battered Spouse          | <input type="checkbox"/> Elderly           | <input type="checkbox"/> Persons with HIV/AIDS    |
| <input type="checkbox"/> Families                 | <input type="checkbox"/> Alcohol Dependent | <input type="checkbox"/> Physically Disabled      |
| <input type="checkbox"/> Chronically Mentally Ill | <input type="checkbox"/> Drug Dependent    | <input type="checkbox"/> Other                    |

