** TCP Deliverable Submission/ Payment Clearance Receipt Form**

**DHS Contracts**

**Overview:** The Community Partnership for the Prevention of Homelessness (TCP) requires all contractors to submit deliverables to support their contract. All contract deliverables are required for submission within **7 business days** of the date of contract execution via the Content Snare platform. TCP has sent this document to your agency’s executive leadership as a receipt of deliverable submission and clearance for contract payment. Please retain this document for your records. For more information on the required deliverables, please review your contract or visit our website: [Contract Deliverables - The Community Partnership (community-partnership.org)](https://community-partnership.org/contract-deliverables/)

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| **Contract Information** |
| Point of Contact Name: |  | Contract Number: |  |
| Point of Contact Title: |  | Contract Period: |  |
| Point of Contact Email: |  | Provider Name: |  |
| Date of Deliverable Submission |  | Program Name:  |  |

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| **Deliverable Review** |

If it is noted below that deliverables for any of the deliverable categories were not accepted by TCP, one or more of your contract deliverables require correction/resubmission. The deliverables that require correction/resubmission are noted in the below chart. Please review the comments left on your contract’s Content Snare profile for further instruction to resolve any issues with submitted or missing deliverables.

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| --- | --- | --- |
| Deliverable Category | Deliverables Accepted?Y/N | If not accepted, please indicate which deliverables require correction/resubmission. |
| Finance Deliverables |  |  |
| Master Deliverables |  |  |
| Tier One Deliverables |  |  |

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| **Employee Background Clearances Review** |

Please utilize the following chart as receipt of accepted employee background clearance(s). All employees listed on the Staffing List (TCP 905 Form) **must** have their background clearances submitted to the [TCP Employee Background Clearance Submission Form](https://app.smartsheet.com/b/form/fdbae729a9d74eb69be9e4b9e8f48e31).

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| Staff Member Name(As listed on the submitted 905 Form) | Background Clearances Accepted? Y/N | If not accepted, please indicate corrections/resubmissions needed. |
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| **TCP Approval**  |

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| Resubmission Needed | ☐ Yes | ☐ No | Resubmission Deadline: |  |
| Eligible for Payment | ☐ Yes | ☐ No | Date of TCP Review: |  |

 TCP Reviewer Signature