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**Appendix J**

**Invitation to Negotiate # 015**

**Mobile Response Team**

**for**

**Miami-Dade County**

**Assessment of Financial Stability**

**For Thriving Mind Use Only**

Applicant Organization Name:

Thriving Mind Reviewer Name and Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

Determination of Financial Stability – Thriving Mind staff will review the applicant’s information and determine the information below based on the information and the financial documents submitted by the applicant.

|  |  |
| --- | --- |
| Audit report Date as of |  |
|  |  |
| Current Assets |  |
| Cash on hand |  |
| Other Assets |  |
|  |  |
| Non-current assets |  |
|  |  |
| Total Assets |  |
|  |  |
| Current Liabilities |  |
|  |  |
| Long Term Liabilities |  |
|  |  |
| Net Assets |  |
|  |  |
| Total Liabilities & Net Assets |  |
|  |  |
|  |  |
| Total Annual Expenses |  |
|  |  |
| Change in Net Assets |  |
|  |  |
|  |  |
| Current Ratio:(Current Assets/Current Liabilities) >1.5 is good |  |
| Days cash on hand:>60 days ideal, > 30 days is good |  |
| Working Capital: (Positive is good) |  |
| Cash Ratio (cash/current liabilities) >1 is good |  |
| Net Assets as a Percentage of Expenses > 10% is good |  |
| Loss In term of Net assets |  |
|  |  |
| Type of opinion |  |
|  |  |
| Any instances of material weakness |  |
| In financial reporting? |  |
|  |  |
| Any instances of fraud? |  |
|  |  |
| Any instances of significant deficiency in financial reporting? |  |
|  |  |
|  |  |
| Any instance of non-compliance or other matters as required by GAS? |  |
|  |  |
|  |  |
| Note: | Overall standing= |