** **

**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= |