



DU PAGE COUNTY

421 N. COUNTY FARM ROAD
WHEATON, IL 60187
www.dupagecounty.gov

Human Services

Final Regular Meeting Agenda

Tuesday, August 20, 2024

9:30 AM

Room 3500A

1. **CALL TO ORDER**

2. **ROLL CALL**

3. **PUBLIC COMMENT**

4. **CHAIR REMARKS - CHAIR SCHWARZE**

5. **LENGTH OF SERVICE AWARD**

5.A. Length of Service Award - Regina Scarpace - 10 Years - Community Services

5.B. Length of Service Award - Gina Strafford-Ahmed - 30 Years - Community Services

6. **APPROVAL OF MINUTES**

6.A. [24-2259](#)

Human Services Committee - Regular Meeting - Tuesday, August 6, 2024

7. **COMMUNITY SERVICES - MARY KEATING**

7.A. [FI-R-0142-24](#)

Acceptance and appropriation of the HUD 2023 Continuum of Care Planning Grant PY25, Agreement No. IL1887L5T142300, Company 5000 - Accounting Unit 1510, in the amount of \$312,932. (Community Services)

7.B. [FI-R-0143-24](#)

Acceptance and appropriation of the HUD 2023 Continuum of Care Homeless Management Information System (HMIS) Coordinated Entity Grant PY25, Agreement No. IL1886L5T142300, Company 5000 - Accounting Unit 1480, in the amount of \$80,000. (Community Services)

7.C. [FI-R-0144-24](#)

Acceptance and appropriation of the HUD 2023 Continuum of Care Homeless Management Information System Grant PY25, Agreement No. IL0306L5T142316, Company 5000 - Accounting Unit 1480, in the amount of \$188,556. (Community Services)

7.D. [FI-R-0145-24](#)

Acceptance and appropriation of additional funding for the ILDCEO Community Services Block Grant PY24, Inter-governmental Agreement No. 24-231028, Company 5000 - Accounting Unit 1650, from \$1,196,614 to \$1,274,833, an increase of \$78,219. (Community Services)

8. DUPAGE CARE CENTER - JANELLE CHADWICK

8.A. [24-2260](#)

Recommendation for the approval of a contract purchase order issued to Direct Supply, Inc., for Joerns replacement bed parts, for the DuPage Care Center, for the period September 5, 2024 through September 4, 2025, for a total contract not to exceed \$15,000; under quote renewal #23-090-DCC, first of three one-year optional renewals.

9. TRAVEL

9.A. [24-2261](#)

Community Services Manager to attend the National Adult Protective Services Conference in Albuquerque, New Mexico from September 15, 2024 through September 19, 2024. Expenses to include registration, travel, lodging, and per diems for approximate total of \$2,540. Grant funded.

9.B. [24-2262](#)

Community Services Case Manager to attend the National Adult Protective Services Conference in Albuquerque, New Mexico from September 15, 2024 through September 19, 2024. Expenses to include registration, travel, lodging, and per diems, for approximate total of \$2,681. Grant funded.

10. RESIDENCY WAIVERS - JANELLE CHADWICK

11. COMMUNITY SERVICES UPDATE - MARY KEATING

12. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK

12.A. 2025 DuPage Care Center Budget Request

13. OLD BUSINESS

14. NEW BUSINESS

15. ADJOURNMENT



Minutes

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: 24-2259

Agenda Date: 8/20/2024

Agenda #: 6.A.



DU PAGE COUNTY

421 N. COUNTY FARM ROAD
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Human Services

Final Summary

Tuesday, August 6, 2024

9:30 AM

Room 3500A

1. CALL TO ORDER

9:30 AM meeting was called to order by Chair Greg Schwarze at 9:30 AM.

2. ROLL CALL

Chair Schwarze stated that under the authority of County Board Rules, he appointed Member Evans to serve as a temporary member of this committee to establish a quorum until the standing members of the committee get out of the Public Works Committee.

Other Board members present: Member Lucy Evans (until 10:00 AM) and Member Yeena Yoo.

Staff in attendance: Nick Kottmeyer (9:47) (Chief Administrative Office), Joan Olson (Chief Communications Officer), Renee Zerante (State's Attorney Office), Jeffrey Martynowicz (Chief Financial Officer), Valerie Calvente (Procurement Officer), Natasha Belli and Victoria Kappas (Community Services Administrators), Mary Keating (Director, Community Services), and Janelle Chadwick (DuPage Care Center Administrator, remote).

PRESENT	Childress, LaPlante, Schwarze, and Evans
ABSENT	Galassi
LATE	DeSart, and Garcia

3. PUBLIC COMMENT

No public comments were offered.

4. CHAIR REMARKS - CHAIR SCHWARZE

Chair Schwarze stated there will be an executive session after the regular meeting this morning.

Next Tuesday, August 13, the recipients of the round three immediate grants from the DuPage Community Transformational Grant, will be awarded their funding at the County Board meeting at 10:00 A.M. Refreshments will be served at 9:30 AM between the Finance and County Board meetings to meet and visit with the recipients of the grant.

5. APPROVAL OF MINUTES

5.A. [24-2080](#)

Human Services Committee - Regular Meeting - Tuesday, July 2, 2024

RESULT:	APPROVED
MOVER:	Lynn LaPlante
SECONDER:	Lucy Evans

6. COMMUNITY SERVICES - MARY KEATING

6.A. [FI-R-0124-24](#)

Acceptance and appropriation of the Illinois Department of Human Services Homeless Prevention Grant PY25 Inter-Governmental Agreement No. FCSDH00172, Company 5000 - Accounting Unit 1760, \$384,000. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Lynn LaPlante
SECONDER:	Lucy Evans

6.B. [FI-R-0126-24](#)

Acceptance and appropriation of the Illinois Department of Human Services Rapid Re-housing Program Grant PY25, Inter-governmental Agreement no. FCSDH07854, Company 5000 - Accounting Unit 1760, \$89,920. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Michael Childress
SECONDER:	Lucy Evans

7. DUPAGE CARE CENTER - JANELLE CHADWICK

7.A. [HS-R-0016-24](#)

Recommendation for the approval of an Agreement between the County of DuPage and the College of DuPage, for the Establishment of a Learning Site at the DuPage Care Center.

RESULT:	APPROVED AT COMMITTEE
MOVER:	Lucy Evans
SECONDER:	Lynn LaPlante

7.B. [HS-P-0028-24](#)

Recommendation for the approval of a contract purchase order issued to Cook's Direct, Inc., for replacement ice and water dispensers, for the DuPage Care Center, for the period August 14, 2024 through November 30, 2024, for a contract total not to exceed \$51,845.52, per Intergovernmental Cooperation Act Sourcewell Cooperative Contract #063022.

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Michael Childress
SECONDER:	Lucy Evans

7.C. [HS-P-0029-24](#)

Recommendation for the approval of a contract purchase order issued to Lakeshore Dairy, Inc., for fluid dairy, for the DuPage Care residents, cafeteria and cafes on County Campus, for the period September 1, 2024 through August 31, 2025, for a contract total amount not to exceed \$83,000; under bid renewal #22-062-DCC, second of three one-year optional renewals.

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Michael Childress
SECONDER:	Lynn LaPlante

7.D. [HS-P-0030-24](#)

Recommendation for the approval of a contract purchase order issued to Warehouse Direct, for hand soap and personal care items, for the DuPage Care Center, for the period of September 1, 2024 through August 31, 2026, for a contract total amount not to exceed \$61,420; per bid #24-061-DCC.

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Michael Childress
SECONDER:	Lynn LaPlante

8. BUDGET TRANSFERS

8.A. [24-2081](#)

Transfer of funds from account no. 1000-1750-53825 (Family Self-Sufficiency Program) to 1000-1750-54110 (equipment and machinery) to cover line item in P.O. 6593-0001 SERV for Lavi Industries, Inc., in the amount of \$524. (Community Services)

RESULT:	APPROVED
MOVER:	Lynn LaPlante
SECONDER:	Lucy Evans

9. INFORMATIONAL

9.A. [24-2082](#)

GPN 027-24 PY25 Homeless Prevention Program - Illinois Department of Human Services - \$384,000. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Lynn LaPlante
SECONDER:	Lucy Evans

9.B. [24-2083](#)

GPN 028-24 PY25 IDHS Rapid Rehousing Program - Illinois Department of Human Services - \$89,920. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Lynn LaPlante
SECONDER:	Lucy Evans

10. RESIDENCY WAIVERS - JANELLE CHADWICK

No residency waivers were offered.

11. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK

Janelle Chadwick, Administrator of the DuPage Care Center, stated the Care Center is in covid outbreak status. Eight residents and eleven staff have tested positive since early July. The staff are more symptomatic than the residents. All the cases are on one unit. The positivity rates tend to be due to people attending large gatherings.

The lobby and administration hallway are almost complete with renovations, and they are beautiful. Certain hallways are going through abatement which requires moving mass people and offices to the conference room temporarily. Ms. Chadwick invited all to come and see the lobby and offered to send pictures, the latter recommended by Chair Schwarze.

12. COMMUNITY SERVICES UPDATE - MARY KEATING

Mary Keating commented on the grant awards for next week, praising the DuPage Foundation volunteer grant management program and that she is impressed and pleased with the partnership with the agency.

Chair Schwarze added the DuPage Foundation put in a lot of work researching and evaluating the applications and agencies, with a clear focus on enhancing the opportunities for community. The committee consists of six to seven individuals in addition to Mary Keating, Vice Chair Garcia, and Greg Schwarze.

Mary Keating, Director of Community Services, referred to the 2024 budget highlight that provided a salary to attain a full-time security person at the Family Center. Ms. Keating thanked the County Board for their support and to Member Yoo for her initiative in making this happen. Victoria Kappas, Administrator of the Family Center, discussed the benefits of the security staffing, mentioning that the mediators have expressed increased comfort at work, as did the parents utilizing the daytime services.

Ms. Kappas explained they are now able to maintain neutrality at the Family Center. Ms. Kappas presented a handout that charted the increases in daytime services now offered due to having security in the building. Mediation has always been done in the daytime, but the numbers have increased. The in-house exchange does not have supervision, but they stay on site, noting a 16% increase. The Neutral Exchange (NEST) showed a 6% increase with a lot of activity nights and weekends, and the Supervised Parenting Time Program (SPT) had a 4% increase, amounting to a total 6% increase in all daytime services. A lot of the increases have been since June, due to the lag time in getting the word out.

The handout is attached hereto and made part of the minutes packet.

[24-2161](#)

Handout - Family Center 2024 Service Overlook

12.A. 2025 Community Services Budget Request

Mary Keating presented the Community Services budget requests for FY2025. Ms. Keating discussed the three budgets she oversees in Community Services, two general fund budgets and one special revenue fund. Ms. Keating explained there are also 15 grants that support the department. Just over \$1.5M is covered by the general fund. 85% of the Community Services' programs and salaries are covered by grants and are brought forward by the acceptance and appropriation process. Her presentation included her considerations for 2026 and 2027.

13. OLD BUSINESS

No old business was discussed.

14. NEW BUSINESS

No new business was discussed.

MOTION TO ENTER INTO EXECUTIVE SESSION

RESULT:	APPROVED
MOVER:	Dawn DeSart
SECONDER:	Michael Childress
AYES:	Childress, DeSart, Garcia, LaPlante, and Schwarze
EXCUSED:	Evans
ABSENT:	Galassi

15. EXECUTIVE SESSION

15.A. Pursuant to Open Meetings Act 5 ILCS 120/2 (c)(1) - the compensation of specific employees

ROLL CALL FOR ENTRY BACK INTO REGULAR SESSION

Role Calls were taken to enter back into regular session and to establish quorum. Present: Chair Schwarze, Vice Chair Garcia, Members Childress, DeSart, LaPlante. Absent: Member Galassi

16. ADJOURNMENT

With no further business, the meeting was adjourned at 10:04 AM.

RESULT:	APPROVED
MOVER:	Lynn LaPlante
SECONDER:	Dawn DeSart
AYES:	Childress, DeSart, Garcia, LaPlante, and Schwarze
EXCUSED:	Evans
ABSENT:	Galassi



Finance Resolution

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: FI-R-0142-24

Agenda Date: 8/20/2024

Agenda #: 7.A.

ACCEPTANCE AND APPROPRIATION OF THE
HUD 2023 CONTINUUM OF CARE PLANNING GRANT PY25
AGREEMENT NO. IL1887L5T142300
COMPANY 5000 - ACCOUNTING UNIT 1510
\$312,932

(Under the administrative direction of the Community Services Department)

WHEREAS, the County of DuPage has been notified by the U.S. Department of Housing and Urban Development that grant funds in the amount of \$312,932 (THREE HUNDRED TWELVE THOUSAND, NINE HUNDRED THIRTY-TWO AND NO/DOLLARS) are available to be used to fund costs associated with assisting the Continuum of Care with planning activities; and

WHEREAS, to receive said grant funds, the County of DuPage must enter into Agreement No IL1887L5T142300 with the U.S. Department of Housing and Urban Development, a copy of which is attached to and incorporated as part of this resolution by reference (ATTACHMENT II); and

WHEREAS, no additional County funds are required to receive this funding; and

WHEREAS, acceptance of this grant does not add any additional subsidy from the County; and

WHEREAS, the County of DuPage finds that the need to appropriate said additional funds creates an emergency within the meaning of the Counties Act, Budget Division (55 ILCS 5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that Agreement No IL1887L5T142300 (ATTACHMENT II) between DuPage County and the U.S. Department of Housing and Urban Development is hereby accepted; and

BE IT FURTHER RESOLVED by the DuPage County Board that the additional appropriation on the attached sheet (ATTACHMENT I) in the amount of \$312,932 (THREE HUNDRED TWELVE THOUSAND, NINE HUNDRED THIRTY-TWO AND NO/DOLLARS) be made to establish the HUD 2023 Continuum of Care Planning Grant PY25, Company 5000 - Accounting Unit 1510, for the period October 1, 2024 through September 30, 2025; and

BE IT FURTHER RESOLVED by the DuPage County Board that the personnel headcount for the Continuum of Care Planning grants be revised to reflect the addition of:

Part-Time

50040 (1) 1944 Grade 110 Project Coordinator \$25.00 per hour, 30 hours per week

BE IT FURTHER RESOLVED by the DuPage County Board that the Director of Community Services is approved as the County's Authorized Representative; and

BE IT FURTHER RESOLVED that should state and/or federal funding cease for this grant, the Human Services Committee shall review the need for continuing the specified program and related head count; and

BE IT FURTHER RESOLVED that should the Human Services Committee determine the need for other funding is appropriate, it may recommend action to the County Board by resolution.

Enacted and approved this 27th day of August, 2024 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR
DU PAGE COUNTY BOARD

Attest: _____

JEAN KACZMAREK, COUNTY CLERK

ATTACHMENT I

ACCEPTANCE AND APPROPRIATION OF THE
HUD 2023 CONTINUUM OF CARE PLANNING GRANT PY25
AGREEMENT NO. IL1887L5T142300
COMPANY 5000 – ACCOUNTING UNIT 1510
\$312,932

REVENUE

41000-0001 - Federal Operating Grant - HUD \$ 312,932

TOTAL ANTICIPATED REVENUE \$ 312,932

EXPENDITURES

PERSONNEL

50000-0000 - Regular Salaries \$ 98,180
50040-0000 - Part Time Help 19,986
51010-0000 - Employer Share I.M.R.F. 9,713
51030-0000 - Employer Share Social Security 9,040
51040-0000 - Employee Med & Hosp Insurance 23,866

TOTAL PERSONNEL \$ 160,785

CONTRACTUAL

53090-0000 - Other Professional Services \$ 125,168
53500-0000 - Mileage Expense 500
53510-0000 - Travel Expense 7,400
53610-0000 - Instruction & Schooling 4,079
53806-0000 - Software Licenses 10,000
53820-0000 - Grant Services 5,000

TOTAL CONTRACTUAL \$ 152,147

TOTAL ADDITIONAL APPROPRIATION \$ 312,932

ATTACHMENT II



U.S. Department of Housing and Urban Development
Office of Community Planning and Development
77 W. Jackson Blvd.
Chicago, IL 60604

Grant Number: IL1887L5T142300
Recipient's Name: DuPage County Community Services
Tax ID Number: 36-6006551
Unique Entity Identifier [SAM]: W7KRN7E54898
Federal Award Date: 8/2/2024

CONTINUUM OF CARE PROGRAM (CDFA# 14.267)
GRANT AGREEMENT

This Grant Agreement (“this Agreement”) is made by and between the United States Department of Housing and Urban Development (“HUD”) and DuPage County Community Services (the “Recipient”).

This Agreement, the Recipient’s use of funds provided under this Agreement (the “Grant” or “Grant Funds”), and the Recipient’s operation of projects assisted with Grant Funds are governed by

1. The Consolidated Appropriations Act, 2023 (Pub. L. 117-328, approved December 29, 2022)
2. title IV of the McKinney-Vento Homeless Assistance Act 42 U.S.C. 11301 et seq. (the “Act”);
3. the Continuum of Care Program rule at 24 CFR part 578 (the “Rule”), as amended from time to time;
4. and the Notice of Funding Opportunity for the fiscal year in which the funds were awarded; and
5. the Recipient’s application submissions on the basis of which these Grant Funds were approved by HUD, including the certifications, assurances, technical submission documents, and any information or documentation required to meet any grant award condition (collectively, the “Application”).

The Application is incorporated herein as part of this Agreement, except that only the project (those projects) listed below are funded by this Agreement. In the event of any conflict between any application provision and any provision contained in this Agreement, this Agreement shall control. Capitalized terms that are not defined in this agreement shall have the meanings given in the Rule.

HUD’s total funding obligation authorized by this grant agreement is \$312,932, allocated between the project(s) listed below (each identified by a separate grant number) and, within those projects, between budget line items, as shown below. The Grant Funds an individual project will receive are as shown in the Application on the final HUD-approved Summary Budget for the project. Recipient shall use the Grant Funds provided for the projects listed below, during the budget period(s) period stated below.

Grant No.	Grant Term	Performance Period	Total Amount
IL1887L5T142300		_____ - _____	\$312,932
a. Continuum of Care planning activities			\$312,932
b. Acquisition			\$0
c. Rehabilitation			\$0
d. New construction			\$0
e. Leasing			\$0
f. Rental assistance			\$0
g. Supportive services			\$0
h. Operating costs			\$0
i. Homeless Management Information System			\$0
j. VAWA			\$0
k. Rural			\$0
l. Admin Costs			\$0
m. Relocation Costs			\$0
n. HPC homelessness prevention activities:			
Housing relocation and stabilization services			\$0
Short-term and medium-term rental assistance			\$0

Pre-award Costs for Continuum of Care Planning

The Recipient may, at its own risk, incur pre-award costs for continuum of care planning awards, after the date of the HUD selection notice and prior to the effective date of this Agreement, if such costs: a) are consistent with 2 CFR 200.458; and b) would be allowable as a post-award cost; and c) do not exceed 10 percent of the total funds obligated to this award. The incurrence of pre-award costs in anticipation of an award imposes no obligation on HUD either to make the award, or to increase the amount of the approved budget, if the award is made for less than the amount anticipated and is inadequate to cover the pre-award costs incurred.

These provisions apply to all Recipients:

If any new projects funded under this Agreement are for project-based rental assistance for a term of fifteen (15) years, the funding provided under this Agreement is for the performance period stated herein only. Additional funding is subject to the availability of annual appropriations.

The budget period and performance period of renewal projects funded by this Agreement will begin immediately at the end of the budget period and performance period of the grant being renewed. Eligible costs incurred between the end of Recipient's budget period and performance period under the grant being renewed and the date this Agreement is executed by both parties may be reimbursed with Grants Funds from this Agreement. No Grant Funds for renewal projects may be drawn down by Recipient before the end date of the project's budget period and performance period under the grant that has been renewed.

For any transition project funded under this Agreement the budget period and performance period of the transition project(s) will begin immediately at the end of the Recipient's final operating year under the grant being transitioned. Eligible costs, as defined by the Act and the Rule incurred between the end of Recipient's final operating year under the grant being transitioned and the execution of this Agreement may be paid with funds from the first operating year of this Agreement.

HUD designations of Continuums of Care as High-performing Communities (HPCS) are published on HUD.gov in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for the grant was designated an HPC for the applicable fiscal year.

The Recipient must complete the attached "Indirect Cost Rate Schedule" and return it to HUD with this Agreement. The Recipient must provide HUD with a revised schedule when any change is made to the rate(s) included in the schedule. The schedule and any revisions HUD receives from the Recipient will be incorporated into and made part of this Agreement, provided that each rate included satisfies the applicable requirements under 2 CFR part 200 (including appendices).

This Agreement shall remain in effect until the earlier of 1) written agreement by the parties; 2) by HUD alone, acting under the authority of 24 CFR 578.107; 3) upon expiration of the budget period and performance period for all projects funded under this Agreement; or 4) upon the expiration of the period of availability of Grant Funds for all projects funded under this Agreement.

HUD notifications to the Recipient shall be to the address of the Recipient as stated in the Recipient's applicant profile in e-snaps. Recipient notifications to HUD shall be to the HUD Field Office executing the Agreement. No right, benefit, or advantage of the Recipient hereunder may be assigned without prior written approval of HUD.

Build America, Buy America Act. The Grantee must comply with the requirements of the Build America, Buy America (BABA) Act, 41 USC 8301 note, and all applicable rules and notices, as may be amended, if applicable to the Grantee's infrastructure project. Pursuant to HUD's Notice, "Public Interest Phased Implementation Waiver for FY 2022 and 2023 of Build America, Buy America Provisions as Applied to Recipients of HUD Federal Financial Assistance" (88 FR 17001), any funds obligated by HUD on or after the applicable listed effective dates, are subject to BABA requirements, unless excepted by a waiver.

The Agreement constitutes the entire agreement between the parties and may be amended only in writing executed by HUD and the Recipient.

By signing below, Recipients that are states and units of local government certify that they are following a current HUD approved CHAS (Consolidated Plan).

This agreement is hereby executed on behalf of the parties as follows:

UNITED STATES OF AMERICA,
Secretary of Housing and Urban Development

By:

Signature on File

(Signature) _____

Donald Kathan, Director

(Typed Name and Title)

August 2, 2024

(Date)

RECIPIENT

DuPage, County Of

(Name of Organization)

By:

Signature on File

(Signature of Authorized Official) _____

Mary Keating, Director of Community Services

(Typed Name and Title of Authorized Official)

8/5/24

(Date)

Indirect Cost Schedule

Agency/Dept./Major Function	Indirect Cost Rate	Direct Cost Base
N/A	N/A	N/A

This schedule must include each indirect cost rate that will be used to calculate the Recipient’s indirect costs under the grant. The schedule must also specify the type of direct cost base to which each included rate applies (for example, Modified Total Direct Costs (MTDC)). Do not include indirect cost rate information for subrecipients.

For government entities, enter each agency or department that will carry out activities under the grant, the indirect cost rate applicable to each department/agency (including if the de minimis rate is used per 2 CFR §200.414), and the type of direct cost base to which the rate will be applied.

For nonprofit organizations that use the Simplified Allocation Method for indirect costs or elects to use the de minimis rate of 10% of Modified Total Direct Costs in accordance with 2 CFR §200.414, enter the applicable indirect cost rate and type of direct cost base in the first row of the table.

For nonprofit organizations that use the Multiple Base Allocation Method, enter each major function of the organization for which a rate was developed and will be used under the grant, the indirect cost rate applicable to that major function, and the type of direct cost base to which the rate will be applied.

To learn more about the indirect cost requirements, see 24 CFR 578.63; 2 CFR part 200, subpart E; Appendix IV to Part 200 (for nonprofit organizations); and Appendix VII to Part 200 (for state and local governments).



Finance Resolution

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: FI-R-0143-24

Agenda Date: 8/20/2024

Agenda #: 7.B.

ACCEPTANCE AND APPROPRIATION OF THE
HUD 2023 CONTINUUM OF CARE
HOMELESS MANAGEMENT INFORMATION SYSTEM
COORDINATED ENTITY GRANT PY25
AGREEMENT NO. IL1886L5T142300
COMPANY 5000 ACCOUNTING UNIT 1480
\$80,000

(Under the administrative direction of the Community Services Department)

WHEREAS, the County of DuPage has been notified by the U.S. Department of Housing and Urban Development that grant funds in the amount of \$80,000 (EIGHTY THOUSAND AND NO/100 DOLLARS) are available to be used to fund costs associated with maintaining the "C.R.I.S" program for the Homeless Management Information System; and

WHEREAS, to receive said grant funds, the County of DuPage must enter into Agreement No. IL1886L5T142300 with the U.S. Department of Housing and Urban Development, a copy of which is attached to and incorporated as part of this resolution by reference (ATTACHMENT II); and

WHEREAS, no additional County funds are required to receive this funding; and

WHEREAS, acceptance of this grant does not add any additional subsidy from the County; and

WHEREAS, the County of DuPage finds that the need to appropriate said additional funds creates an emergency within the meaning of the Counties Act, Budget Division (55 ILCS 5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that Agreement No. IL1886L5T142300 (ATTACHMENT II) between DuPage County and the U.S. Department of Housing and Urban Development is hereby accepted; and

BE IT FURTHER RESOLVED by the DuPage County Board that the additional appropriation on the attached sheet (ATTACHMENT I) in the amount of \$80,000 (EIGHTY THOUSAND AND NO/100 DOLLARS) be made to establish the HUD Homeless Management Information System Coordinated Entity Grant PY25, Company 5000 - Accounting Unit 1480, for period September 1, 2024 through August 31, 2025; and

BE IT FURTHER RESOLVED by the DuPage County Board that the Director of Community Services is approved as the County's Authorized Representative; and

BE IT FURTHER RESOLVED that should state and/or federal funding cease for this grant, the Human Services Committee shall review the need for continuing the specified program and related head count; and

BE IT FURTHER RESOLVED that should the Human Services Committee determine the need for other funding is appropriate, it may recommend action to the County Board by resolution.

Enacted and approved this 27th day of August, 2024 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR
DU PAGE COUNTY BOARD

Attest: _____

JEAN KACZMAREK, COUNTY CLERK

ATTACHMENT II



U.S. Department of Housing and Urban Development
Office of Community Planning and Development
77 W. Jackson Blvd.
Chicago, IL 60604

Grant Number: IL1886L5T142300
Recipient's Name: DuPage County Community Services
Tax ID Number: 36-6006551
Unique Entity Identifier [SAM]: W7KRN7E54898
Federal Award Date: 8/1/2024

CONTINUUM OF CARE PROGRAM (CDFA# 14.267) GRANT AGREEMENT

This Grant Agreement (“this Agreement”) is made by and between the United States Department of Housing and Urban Development (“HUD”) and DuPage County Community Services (the “Recipient”).

This Agreement, the Recipient’s use of funds provided under this Agreement (the “Grant” or “Grant Funds”), and the Recipient’s operation of projects assisted with Grant Funds are governed by

1. The Consolidated Appropriations Act, 2023 (Pub. L. 117-328, approved December 29, 2022)
2. title IV of the McKinney-Vento Homeless Assistance Act 42 U.S.C. 11301 et seq. (the “Act”);
3. the Continuum of Care Program rule at 24 CFR part 578 (the “Rule”), as amended from time to time;
4. and the Notice of Funding Opportunity for the fiscal year in which the funds were awarded; and
5. the Recipient’s application submissions on the basis of which these Grant Funds were approved by HUD, including the certifications, assurances, technical submission documents, and any information or documentation required to meet any grant award condition (collectively, the “Application”).

The Application is incorporated herein as part of this Agreement, except that only the project (those projects) listed below are funded by this Agreement. In the event of any conflict between any application provision and any provision contained in this Agreement, this Agreement shall control. Capitalized terms that are not defined in this agreement shall have the meanings given in the Rule.

HUD’s total funding obligation authorized by this grant agreement is \$80,000, allocated between the project(s) listed below (each identified by a separate grant number) and, within those projects, between budget line items, as shown below. The Grant Funds an individual project will receive are as shown in the Application on the final HUD-approved Summary Budget for the project. Recipient shall use the Grant Funds provided for the projects listed below, during the budget period(s) period stated below.

Grant No.	Grant Term	Performance Period	Total Amount
IL1886L5T142300		_____ - _____	\$80,000
a. Continuum of Care planning activities			\$0
b. Acquisition			\$0
c. Rehabilitation			\$0
d. New construction			\$0
e. Leasing			\$0
f. Rental assistance			\$0
g. Supportive services			\$80,000
h. Operating costs			\$0
i. Homeless Management Information System			\$0
j. VAWA			\$0
k. Rural			\$0
l. Admin Costs			\$0
m. Relocation Costs			\$0
n. HPC homelessness prevention activities:			
Housing relocation and stabilization services			\$0
Short-term and medium-term rental assistance			\$0

Pre-award Costs for Continuum of Care Planning

The Recipient may, at its own risk, incur pre-award costs for continuum of care planning awards, after the date of the HUD selection notice and prior to the effective date of this Agreement, if such costs: a) are consistent with 2 CFR 200.458; and b) would be allowable as a post-award cost; and c) do not exceed 10 percent of the total funds obligated to this award. The incurrence of pre-award costs in anticipation of an award imposes no obligation on HUD either to make the award, or to increase the amount of the approved budget, if the award is made for less than the amount anticipated and is inadequate to cover the pre-award costs incurred.

These provisions apply to all Recipients:

If any new projects funded under this Agreement are for project-based rental assistance for a term of fifteen (15) years, the funding provided under this Agreement is for the performance period stated herein only. Additional funding is subject to the availability of annual appropriations.

The budget period and performance period of renewal projects funded by this Agreement will begin immediately at the end of the budget period and performance period of the grant being renewed. Eligible costs incurred between the end of Recipient's budget period and performance period under the grant being renewed and the date this Agreement is executed by both parties may be reimbursed with Grants Funds from this Agreement. No Grant Funds for renewal projects may be drawn down by Recipient before the end date of the project's budget period and performance period under the grant that has been renewed.

For any transition project funded under this Agreement the budget period and performance period of the transition project(s) will begin immediately at the end of the Recipient's final operating year under the grant being transitioned. Eligible costs, as defined by the Act and the Rule incurred between the end of Recipient's final operating year under the grant being transitioned and the execution of this Agreement may be paid with funds from the first operating year of this Agreement.

HUD designations of Continuums of Care as High-performing Communities (HPCS) are published on HUD.gov in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for the grant was designated an HPC for the applicable fiscal year.

The Recipient must complete the attached "Indirect Cost Rate Schedule" and return it to HUD with this Agreement. The Recipient must provide HUD with a revised schedule when any change is made to the rate(s) included in the schedule. The schedule and any revisions HUD receives from the Recipient will be incorporated into and made part of this Agreement, provided that each rate included satisfies the applicable requirements under 2 CFR part 200 (including appendices).

This Agreement shall remain in effect until the earlier of 1) written agreement by the parties; 2) by HUD alone, acting under the authority of 24 CFR 578.107; 3) upon expiration of the budget period and performance period for all projects funded under this Agreement; or 4) upon the expiration of the period of availability of Grant Funds for all projects funded under this Agreement.

HUD notifications to the Recipient shall be to the address of the Recipient as stated in the Recipient's applicant profile in e-snaps. Recipient notifications to HUD shall be to the HUD Field Office executing the Agreement. No right, benefit, or advantage of the Recipient hereunder may be assigned without prior written approval of HUD.

Build America, Buy America Act. The Grantee must comply with the requirements of the Build America, Buy America (BABA) Act, 41 USC 8301 note, and all applicable rules and notices, as may be amended, if applicable to the Grantee's infrastructure project. Pursuant to HUD's Notice, "Public Interest Phased Implementation Waiver for FY 2022 and 2023 of Build America, Buy America Provisions as Applied to Recipients of HUD Federal Financial Assistance" (88 FR 17001), any funds obligated by HUD on or after the applicable listed effective dates, are subject to BABA requirements, unless excepted by a waiver.

The Agreement constitutes the entire agreement between the parties and may be amended only in writing executed by HUD and the Recipient.

By signing below, Recipients that are states and units of local government certify that they are following a current HUD approved CHAS (Consolidated Plan).

This agreement is hereby executed on behalf of the parties as follows:

UNITED STATES OF AMERICA,
Secretary of Housing and Urban Development

By:
Signature on File

(Signature)

Donald Kathan, Director

(Typed Name and Title)

August 1, 2024

(Date)

RECIPIENT

DuPage, County Of

(Name of Organization)

By:
Signature on File

(Signature of Authorized Official)

MARY A. KEATING, DIRECTOR OF COMMUNITY SERVICES

(Typed Name and Title of Authorized Official)

8/1/24

(Date)

Indirect Cost Schedule

Agency/Dept./Major Function	Indirect Cost Rate	Direct Cost Base
<i>N/A</i>		

This schedule must include each indirect cost rate that will be used to calculate the Recipient's indirect costs under the grant. The schedule must also specify the type of direct cost base to which each included rate applies (for example, Modified Total Direct Costs (MTDC)). Do not include indirect cost rate information for subrecipients.

For government entities, enter each agency or department that will carry out activities under the grant, the indirect cost rate applicable to each department/agency (including if the de minimis rate is used per 2 CFR §200.414), and the type of direct cost base to which the rate will be applied.

For nonprofit organizations that use the Simplified Allocation Method for indirect costs or elects to use the de minimis rate of 10% of Modified Total Direct Costs in accordance with 2 CFR §200.414, enter the applicable indirect cost rate and type of direct cost base in the first row of the table.

For nonprofit organizations that use the Multiple Base Allocation Method, enter each major function of the organization for which a rate was developed and will be used under the grant, the indirect cost rate applicable to that major function, and the type of direct cost base to which the rate will be applied.

To learn more about the indirect cost requirements, see 24 CFR 578.63; 2 CFR part 200, subpart E; Appendix IV to Part 200 (for nonprofit organizations); and Appendix VII to Part 200 (for state and local governments).

ATTACHMENT I

ACCEPTANCE AND APPROPRIATION OF THE
HUD 2023 CONTINUUM OF CARE
HOMELESS MANAGEMENT INFORMATION SYSTEM
COORDINATED ENTITY GRANT PY25
AGREEMENT NO. IL1886L5T142300
COMPANY 5000 – ACCOUNTING UNIT 1480
\$80,000

REVENUE

41000-0001 - Federal Operating Grant - HUD \$ 80,000

TOTAL ANTICIPATED REVENUE \$ 80,000

EXPENDITURES

PERSONNEL

50000-0000 - Regular Salaries \$ 56,565
51010-0000 - Employer Share I.M.R.F. 4,650
51030-0000 - Employer Share Social Security 4,327
51040-0000 - Employee Med & Hosp Insurance 14,458

TOTAL PERSONNEL \$ 80,000

TOTAL ADDITIONAL APPROPRIATION \$ 80,000



Finance Resolution

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: FI-R-0144-24

Agenda Date: 8/20/2024

Agenda #: 7.C.

ACCEPTANCE AND APPROPRIATION OF THE
HUD 2023 CONTINUUM OF CARE
HOMELESS MANAGEMENT INFORMATION SYSTEM GRANT PY25
AGREEMENT NO. IL0306L5T142316
COMPANY 5000 - ACCOUNTING UNIT 1480
\$188,556

(Under the administrative direction of the Community Services Department)

WHEREAS, the County of DuPage has been notified by the U.S. Department of Housing and Urban Development that grant funds in the amount of \$188,556 (ONE HUNDRED EIGHTY-EIGHT THOUSAND, FIVE HUNDRED FIFTY-SIX AND NO/100 DOLLARS) are available to be used to fund costs associated with maintaining the "C.R.I.S" program for the Homeless Management Information System; and

WHEREAS, to receive said grant funds, the County of DuPage must enter into Agreement No. IL0306L5T142316 with the U.S. Department of Housing and Urban Development, a copy of which is attached to and incorporated as part of this resolution by reference (ATTACHMENT II); and

WHEREAS, no additional County funds are required to receive this funding; and

WHEREAS, acceptance of this grant does not add any additional subsidy from the County; and

WHEREAS, the County of DuPage finds that the need to appropriate said additional funds creates an emergency within the meaning of the Counties Act, Budget Division (55 ILCS 5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that Agreement No. IL0306L5T142316 (ATTACHMENT II) between DuPage County and the U.S. Department of Housing and Urban Development is hereby accepted; and

BE IT FURTHER RESOLVED by the DuPage County Board that the additional appropriation on the attached sheet (ATTACHMENT I) in the amount of \$188,556 (ONE HUNDRED EIGHTY-EIGHT THOUSAND, FIVE HUNDRED FIFTY-SIX AND NO/100 DOLLARS) be made to establish the HUD Homeless Management Information System Grant, Company 5000 - Accounting Unit 1480, for period September 1, 2024 through August 31, 2025; and

BE IT FURTHER RESOLVED by the DuPage County Board that the Director of Community Services is approved as the County's Authorized Representative; and

BE IT FURTHER RESOLVED that should state and/or federal funding cease for this grant, the Human Services Committee shall review the need for continuing the specified program and related head count; and

BE IT FURTHER RESOLVED that should the Human Services Committee determine the need for other funding is appropriate, it may recommend action to the County Board by resolution.

Enacted and approved this 27th day of August, 2024 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR
DU PAGE COUNTY BOARD

Attest: _____

JEAN KACZMAREK, COUNTY CLERK

ATTACHMENT I

ACCEPTANCE AND APPROPRIATION OF THE
 HUD 2023 CONTINUUM OF CARE
 HOMELESS MANAGEMENT INFORMATION SYSTEM GRANT
 AGREEMENT NO. IL0306L5T142316
 COMPANY 5000 – ACCOUNTING UNIT 1480
 \$188,556

REVENUE

41000-0001 - Federal Operating Grant - HUD \$ 188,556

TOTAL ANTICIPATED REVENUE \$ 188,556

EXPENDITURES

PERSONNEL

50000-0000 - Regular Salaries \$ 101,964
 51010-0000 - Employer Share I.M.R.F. 9,085
 51030-0000 - Employer Share Social Security 7,800
 51040-0000 - Employee Med & Hosp Insurance 19,785

TOTAL PERSONNEL \$ 138,634

COMMODITIES

52100-0000 - I.T. Equipment-Small Value \$ 2,672
 52200-0000 - Operating Supplies & Materials 50

TOTAL COMMODITIES \$ 2,722

CONTRACTUAL

53090-0000 - Other Professional Services \$ 17,750
 53260-0000 - Wireless Communication Svc 1,800
 53500-0000 - Mileage Expense 150
 53510-0000 - Travel Expense 1,700
 53610-0000 - Instruction & Schooling 800
 53806-0000 - Software Licenses 25,000

TOTAL CONTRACTUAL \$ 47,200

TOTAL ADDITIONAL APPROPRIATION \$ 188,556



U.S. Department of Housing and Urban Development
Office of Community Planning and Development
77 W. Jackson Blvd.
Chicago, IL 60604

Grant Number: IL0306L5T142316
Recipient's Name: DuPage County Community Services
Tax ID Number: 36-6006551
Unique Entity Identifier [SAM]: W7KRN7E54898
Federal Award Date: 7/30/2024

**CONTINUUM OF CARE PROGRAM (CDFA# 14.267)
GRANT AGREEMENT**

This Grant Agreement (“this Agreement”) is made by and between the United States Department of Housing and Urban Development (“HUD”) and DuPage County Community Services (the “Recipient”).

This Agreement, the Recipient’s use of funds provided under this Agreement (the “Grant” or “Grant Funds”), and the Recipient’s operation of projects assisted with Grant Funds are governed by

1. The Consolidated Appropriations Act, 2023 (Pub. L. 117-328, approved December 29, 2022)
2. title IV of the McKinney-Vento Homeless Assistance Act 42 U.S.C. 11301 et seq. (the “Act”);
3. the Continuum of Care Program rule at 24 CFR part 578 (the “Rule”), as amended from time to time;
4. and the Notice of Funding Opportunity for the fiscal year in which the funds were awarded; and
5. the Recipient’s application submissions on the basis of which these Grant Funds were approved by HUD, including the certifications, assurances, technical submission documents, and any information or documentation required to meet any grant award condition (collectively, the “Application”).

The Application is incorporated herein as part of this Agreement, except that only the project (those projects) listed below are funded by this Agreement. In the event of any conflict between any application provision and any provision contained in this Agreement, this Agreement shall control. Capitalized terms that are not defined in this agreement shall have the meanings given in the Rule.

HUD’s total funding obligation authorized by this grant agreement is \$188,556, allocated between the project(s) listed below (each identified by a separate grant number) and, within those projects, between budget line items, as shown below. The Grant Funds an individual project will receive are as shown in the Application on the final HUD-approved Summary Budget for the project. Recipient shall use the Grant Funds provided for the projects listed below, during the budget period(s) period stated below.

Grant No.	Grant Term	Performance Period	Total Amount
IL0306L5T142316	12 months	09-01-2024 - 08-31-2025	\$188,556
a. Continuum of Care planning activities			\$0
b. Acquisition			\$0
c. Rehabilitation			\$0
d. New construction			\$0
e. Leasing			\$0
f. Rental assistance			\$0
g. Supportive services			\$0
h. Operating costs			\$0
i. Homeless Management Information System			\$175,392
j. VAWA			\$0
k. Rural			\$0
l. Admin Costs			\$13,164
m. Relocation Costs			\$0
n. HPC homelessness prevention activities:			
Housing relocation and stabilization services			\$0
Short-term and medium-term rental assistance			\$0

Pre-award Costs for Continuum of Care Planning

The Recipient may, at its own risk, incur pre-award costs for continuum of care planning awards, after the date of the HUD selection notice and prior to the effective date of this Agreement, if such costs: a) are consistent with 2 CFR 200.458; and b) would be allowable as a post-award cost; and c) do not exceed 10 percent of the total funds obligated to this award. The incurrence of pre-award costs in anticipation of an award imposes no obligation on HUD either to make the award, or to increase the amount of the approved budget, if the award is made for less than the amount anticipated and is inadequate to cover the pre-award costs incurred.

These provisions apply to all Recipients:

If any new projects funded under this Agreement are for project-based rental assistance for a term of fifteen (15) years, the funding provided under this Agreement is for the performance period stated herein only. Additional funding is subject to the availability of annual appropriations.

The budget period and performance period of renewal projects funded by this Agreement will begin immediately at the end of the budget period and performance period of the grant being renewed. Eligible costs incurred between the end of Recipient's budget period and performance period under the grant being renewed and the date this Agreement is executed by both parties may be reimbursed with Grants Funds from this Agreement. No Grant Funds for renewal projects may be drawn down by Recipient before the end date of the project's budget period and performance period under the grant that has been renewed.

For any transition project funded under this Agreement the budget period and performance period of the transition project(s) will begin immediately at the end of the Recipient's final operating year under the grant being transitioned. Eligible costs, as defined by the Act and the Rule incurred between the end of Recipient's final operating year under the grant being transitioned and the execution of this Agreement may be paid with funds from the first operating year of this Agreement.

HUD designations of Continuums of Care as High-performing Communities (HPCS) are published on HUD.gov in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for the grant was designated an HPC for the applicable fiscal year.

The Recipient must complete the attached "Indirect Cost Rate Schedule" and return it to HUD with this Agreement. The Recipient must provide HUD with a revised schedule when any change is made to the rate(s) included in the schedule. The schedule and any revisions HUD receives from the Recipient will be incorporated into and made part of this Agreement, provided that each rate included satisfies the applicable requirements under 2 CFR part 200 (including appendices).

This Agreement shall remain in effect until the earlier of 1) written agreement by the parties; 2) by HUD alone, acting under the authority of 24 CFR 578.107; 3) upon expiration of the budget period and performance period for all projects funded under this Agreement; or 4) upon the expiration of the period of availability of Grant Funds for all projects funded under this Agreement.

HUD notifications to the Recipient shall be to the address of the Recipient as stated in the Recipient's applicant profile in e-snaps. Recipient notifications to HUD shall be to the HUD Field Office executing the Agreement. No right, benefit, or advantage of the Recipient hereunder may be assigned without prior written approval of HUD.

Build America, Buy America Act. The Grantee must comply with the requirements of the Build America, Buy America (BABA) Act, 41 USC 8301 note, and all applicable rules and notices, as may be amended, if applicable to the Grantee's infrastructure project. Pursuant to HUD's Notice, "Public Interest Phased Implementation Waiver for FY 2022 and 2023 of Build America, Buy America Provisions as Applied to Recipients of HUD Federal Financial Assistance" (88 FR 17001), any funds obligated by HUD on or after the applicable listed effective dates, are subject to BABA requirements, unless excepted by a waiver.

The Agreement constitutes the entire agreement between the parties and may be amended only in writing executed by HUD and the Recipient.

By signing below, Recipients that are states and units of local government certify that they are following a current HUD approved CHAS (Consolidated Plan).

This agreement is hereby executed on behalf of the parties as follows:

**UNITED STATES OF AMERICA,
Secretary of Housing and Urban Development**

By:
Signature on File

(Signature)

Donald Kathan, Director

(Typed Name and Title)

July 30, 2024

(Date)

RECIPIENT

DuPage, County Of

(Name of Organization)

By:

Signature on File

(Signature of Authorized Official)

MARY A. KEATING, DIRECTOR OF COMMUNITY SERVICES

(Typed Name and Title of Authorized Official)

7/31/24

(Date)

Indirect Cost Schedule

Agency/Dept./Major Function	Indirect Cost Rate	Direct Cost Base
NA		

This schedule must include each indirect cost rate that will be used to calculate the Recipient’s indirect costs under the grant. The schedule must also specify the type of direct cost base to which each included rate applies (for example, Modified Total Direct Costs (MTDC)). Do not include indirect cost rate information for subrecipients.

For government entities, enter each agency or department that will carry out activities under the grant, the indirect cost rate applicable to each department/agency (including if the de minimis rate is used per 2 CFR §200.414), and the type of direct cost base to which the rate will be applied.

For nonprofit organizations that use the Simplified Allocation Method for indirect costs or elects to use the de minimis rate of 10% of Modified Total Direct Costs in accordance with 2 CFR §200.414, enter the applicable indirect cost rate and type of direct cost base in the first row of the table.

For nonprofit organizations that use the Multiple Base Allocation Method, enter each major function of the organization for which a rate was developed and will be used under the grant, the indirect cost rate applicable to that major function, and the type of direct cost base to which the rate will be applied.

To learn more about the indirect cost requirements, see 24 CFR 578.63; 2 CFR part 200, subpart E; Appendix IV to Part 200 (for nonprofit organizations); and Appendix VII to Part 200 (for state and local governments).



Finance Resolution

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: FI-R-0145-24

Agenda Date: 8/20/2024

Agenda #: 7.D.

ACCEPTANCE AND APPROPRIATION OF ADDITIONAL FUNDING
FOR THE ILDCEO COMMUNITY SERVICES BLOCK GRANT PY24
INTER-GOVERNMENTAL AGREEMENT NO. 24-231028
COMPANY 5000 - ACCOUNTING UNIT 1650
FROM \$1,196,614 to \$1,274,833
(AN INCREASE OF \$78,219)

(Under the administrative direction of the Community Services Department)

WHEREAS, the County of DuPage, through the DuPage County Department of Community Services, heretofore accepted and appropriated the ILDCEO Community Services Block Grant PY24, Inter-governmental Agreement No. 24-231028, Company 5000- Accounting Unit 1650, pursuant to Resolution FI-R-0169-23 for the period January 1, 2024 through December 31, 2024; and

WHEREAS, the County of DuPage has been notified by the Illinois Department of Commerce and Economic Opportunity, through the attached letter (ATTACHMENT II) that additional grant funds in the amount of \$78,219 (SEVENTY-EIGHT THOUSAND, TWO HUNDRED NINETEEN AND NO/100 DOLLARS) are available to increase assistance to low-income individuals and families become self-sufficient; and

WHEREAS, no additional County funds are required to receive this additional funding; and

WHEREAS, acceptance of this additional funding does not add any additional subsidy from the County; and

WHEREAS, the County of DuPage finds that the need to appropriate said additional funds creates an emergency within the meaning of the Counties Act, Budget Division, (55 ILCS 5/6-1003).

NOW, THEREFORE, BE IT RESOLVED by the DuPage County Board that the amended grant No. 24-231028, via the attached letter (ATTACHMENT II) between the DuPage County and the Illinois Department of Commerce and Economic Opportunity is hereby accepted; and

BE IT FURTHER RESOLVED that the additional appropriation on the attached sheet (ATTACHMENT I) in the amount of \$78,219 (SEVENTY-EIGHT THOUSAND, TWO HUNDRED NINETEEN AND NO/100 DOLLARS) be made and added to the ILDCEO Community Services Block Grant PY24, Inter-governmental Agreement No. 24-231028, Company 5000 - Accounting Unit 1650, and that the program continues as originally approved in all other respects; and

BE IT FURTHER RESOLVED by the DuPage County Board that the Director of Community Services is approved as the County's Authorized Representative; and

BE IT FURTHER RESOLVED that should state and/or federal funding cease for this grant, the Human Services Committee shall review the need for continuing the specified program and related head count; and

BE IT FURTHER RESOLVED that should the Human Services Committee determine the need for other funding is appropriate, it may recommend action to the County Board by Resolution.

Enacted and approved this 27th day of August, 2024 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR
DU PAGE COUNTY BOARD

Attest: _____

JEAN KACZMAREK, COUNTY CLERK

ATTACHMENT I

APPROPRIATION OF ADDITIONAL FUNDING
FOR THE ILDCEO COMMUNITY SERVICES BLOCK GRANT PY24
INTER-GOVERNMENTAL AGREEMENT NO. 24-231028
COMPANY 5000 – ACCOUNTING UNIT 1650
\$78,219

REVENUE

41000-0002 - Federal Operating Grant - HHS	\$	78,219
TOTAL ANTICIPATED REVENUE	\$	78,219

EXPENDITURES

PERSONNEL

50000-0000 - Regular Salaries	\$	6,707
51010-0000 - Employer Share I.M.R.F.		551
51030-0000 - Employer Share Social Security		513
51040-0000 - Employee Med & Hosp Insurance		23,743
TOTAL PERSONNEL	\$	31,514

COMMODITIES

52000-0000 - Furn/Mach/Equip Small Value	\$	200
52100-0000 - I.T. Equipment-Small Value		176
52200-0000 - Operating Supplies & Materials		400
	\$	776

CONTRACTUAL

53260-0000 - Wireless Communication Svc	\$	(3,571)
53500-0000 - Mileage Expense		(1,500)
53807-0000 - Software Maint Agreements		1,607
53815-0006 - Csbg Disaster Assistance		20,000
53820-0000 - Grant Services		14,393
53830-0000 - Other Contractual Expenses		15,000

TOTAL CONTRACTUAL	\$	45,929
TOTAL ADDITIONAL APPROPRIATION	\$	78,219



Illinois
Department of Commerce
& Economic Opportunity

OFFICE OF COMMUNITY ASSISTANCE
JB Pritzker, Governor

Gina Strafford-Ahmed
Administrator Intake & Referral
DuPage County
421 North County Farm Road 3rd Floor Wheaton, IL 60187-3978

July 30, 2024

Dear Ms. Strafford-Ahmed:

The requested modification to the Community Services Block Grant (CSBG) #24-231028 with DuPage County resulting in a final budget of \$1,274,833 has been approved by the DCEO Office of Community Assistance. The executed modification documents will be e-mailed to your attention once they have been uploaded to our department's e-Grants system.

Sincerely,
Signature on File

Ben Moore
Manager, Fiscal Operations
Office of Community Assistance
Illinois Department of Commerce and Economic Opportunity



Care Center Requisition Under \$30,000

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: 24-2260

Agenda Date: 8/20/2024

Agenda #: 8.A.



Procurement Review Comprehensive Checklist
 Procurement Services Division
 This form must accompany all Purchase Order Requisitions

SECTION 1: DESCRIPTION

<i>General Tracking</i>		<i>Contract Terms</i>	
FILE ID#: 24-2170	RFP, BID, QUOTE OR RENEWAL #: 23-090-DCC	INITIAL TERM WITH RENEWALS: 1 YR + 3 X 1 YR TERM PERIODS	INITIAL TERM TOTAL COST: \$28,800.00
COMMITTEE: HUMAN SERVICES	TARGET COMMITTEE DATE: 08/20/2024	PROMPT FOR RENEWAL: 3 MONTHS	CONTRACT TOTAL COST WITH ALL RENEWALS: \$73,800.00
	CURRENT TERM TOTAL COST: \$15,000.00	MAX LENGTH WITH ALL RENEWALS: FOUR YEARS	CURRENT TERM PERIOD: FIRST RENEWAL
<i>Vendor Information</i>		<i>Department Information</i>	
VENDOR: Direct Supply, Inc.	VENDOR #: 10586	DEPT: DuPage Care Center	DEPT CONTACT NAME: Annabel Leonida
VENDOR CONTACT: Andy Bach	VENDOR CONTACT PHONE: 886-810-0265	DEPT CONTACT PHONE #: 630-784-	DEPT CONTACT EMAIL: Annabel.Leonida@dupagecounty.gov
VENDOR CONTACT EMAIL: abach@directsupply.com	VENDOR WEBSITE:	DEPT REQ #: 7466	
<i>Overview</i>			
DESCRIPTION Identify scope of work, item(s) being purchased, total cost and type of procurement (i.e., lowest bid, RFP, renewal, sole source, etc.). Joerns replacement bed parts for the DuPage Care Center, for the period September 5, 2024 through September 4, 2025, for a total contract amount not to exceed \$15,000.00, under quote renewal #23-090-DCC, first of three one-year optional renewals.			
JUSTIFICATION Summarize why this procurement is necessary and what objectives will be accomplished Replacement bed parts to maintain and repair the beds in the DuPage Care Center.			

SECTION 2: DECISION MEMO REQUIREMENTS

DECISION MEMO NOT REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is not required.
RENEWAL	
DECISION MEMO REQUIRED	Select an item from the following dropdown menu to identify why a Decision Memo (Section 3) is required.

SECTION 3: DECISION MEMO

SOURCE SELECTION	Describe method used to select source.
RECOMMENDATION AND TWO ALTERNATIVES	Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request, including status quo, (i.e., take no action).

SECTION 4: SOLE SOURCE MEMO/JUSTIFICATION

JUSTIFICATION	Select an item from the following dropdown menu to justify why this is a sole source procurement.
NECESSITY AND UNIQUE FEATURES	Describe the product or services that are not available from other vendors. Explain necessary and unique features or services. Attach letters from manufacturer, letters from distributor, warranties, licenses, or patents as needed. Be specific.
MARKET TESTING	List and describe the last time the market has been tested on the applicability of the sole source. If it has not been tested over the last 12 months, explain why not.
AVAILABILITY	Describe steps taken to verify that these features are not available elsewhere. Included a detailed list of all products or services by brand/manufacturer examined and include names, phone numbers, and emails of people contacted.

SECTION 5: Purchase Requisition Information

<i>Send Purchase Order To:</i>		<i>Send Invoices To:</i>	
Vendor: Direct Supply, Inc.	Vendor#: 10586	Dept: DuPage Care Center	Division: Nursing
Attn: Andy Bach	Email: abach@directsupply.com	Attn: Annabel Leonida	Email: Annabel.Leonida dupagecounty.gov
Address: 7301 W. Champions Way	City: Milwaukee	Address: 400 N. County Farm Road	City: Wheaton
State: WI	Zip: 53223	State: IL	Zip: 60187
Phone: 866-810-0265	Fax:	Phone: 630-784-4250	Fax:
<i>Send Payments To:</i>		<i>Ship to:</i>	
Vendor: Direct Supply, Inc.	Vendor#: 10586	Dept: DuPage Care Center	Division:
Attn:	Email:	Attn:	Email: dupagecounty.gov
Address: PO Vox 88201	City: Milwaukee	Address: 400 N. County Farm Road	City: Wheaton
State: WI	Zip: 53288-0201	State: IL	Zip: 60187
Phone: 866-810-0265	Fax:	Phone: 630-784-4250	Fax:
Shipping		Contract Dates	
Payment Terms: PER 50 ILCS 505/1	FOB: Destination	Contract Start Date (PO25): September 5, 2024	Contract End Date (PO25): September 4, 2025

Purchase Requisition Line Details

LN	Qty	UOM	Item Detail (Product #)	Description	FY	Company	AU	Acct Code	Sub-Accts/Activity Code	Unit Price	Extension
1	1	EA		replacement bed parts	FY24	1200	2050	52250		5,000.00	5,000.00
2	1	EA		replacement bed parts	FY25	1200	2050	52250		10,000.00	10,000.00
<i>FY is required, ensure the correct FY is selected.</i>										Requisition Total	\$ 15,000.00

<i>Comments</i>	
HEADER COMMENTS	Provide comments for P020 and P025. Joerns replacement bed parts for the DuPage Care Center, for the period September 5, 2024 through September 4, 2025, for a total contract amount not to exceed \$15,000.00, under quote renewal #23-090-DCC, first of three one-year optional renewals.
SPECIAL INSTRUCTIONS	Provide comments for Buyer or Approver (not for P020 and P025). Comments will not appear on PO. HS Committee August 20, 2024
INTERNAL NOTES	Provide comments for department internal use (not for P020 and P025). Comments will not appear on PO.
APPROVALS	Department Head signature approval for procurements under \$15,000. Procurement Officer Approval for ETSB.



AMENDMENT FOR CONTRACT RENEWAL

This contract, made and entered into by The County of DuPage, 421 North County Farm Road, Wheaton, Illinois, 60187, hereinafter called the "COUNTY" and Direct Supply Inc. located at 6767 North Industrial Road, Milwaukee, Wisconsin 53223, hereinafter called the "CONTRACTOR", witnesseth;

The COUNTY and the CONTRACTOR have previously entered into a Contract, pursuant to Bid #23-090-DCC which became effective on 9/5/2023 and which will expire 9/4/2024. The contract is subject to a first of three options to renew for a twelve (12) month period.

The contract renewal shall be effective on the date of last signature and shall terminate on 9/4/2025.

The parties now agree to renew said agreement, upon the same terms as previously agreed to, as specified in the original contract.

CONTRACTOR

THE COUNTY OF DUPAGE

Signature on File

SIGNATURE

SIGNATURE

Andrew Bach

Henry Kocker

PRINTED NAME

PRINTED NAME

Executive Account Manager

Buyer I

PRINTED TITLE

PRINTED TITLE

7/15/24

DATE

DATE



THE COUNTY OF DUPAGE
 FINANCE - PROCUREMENT
 JOERNS BED REPLACEMENT PARTS
 23-090-DCC
 QUOTE TABULATION

NO.	ITEM	JOERNS REPLACEMENT PART NO.	UOM	QTY	DIRECT SUPPLY, INC		ALCO SALES & SERVICE CO.	
					PRICE	EXTENDED PRICE	PRICE	EXTENDED PRICE
1	Bumper, Wire Foam 80"	11012608AL	EA	24	\$ 39.00	\$ 936.00	\$ 36.14	\$ 915.36
2	Kit, Bushing Rivet Replacement	39000052	EA	4	\$ 19.99	\$ 79.96	\$ 17.09	\$ 68.36
3	Kit, Control Box	39000967	EA	4	\$ 265.00	\$ 1,060.00	\$ 297.96	\$ 1,191.84
4	Kit, Cover, Staff Control	39001115	EA	6	\$ 24.00	\$ 144.00	\$ 23.81	\$ 142.86
5	Kit, Hand Pendant Holder	N717	EA	36	\$ 34.00	\$ 1,224.00	\$ 36.05	\$ 1,297.80
6	UCTX Food Board w/o Staff Control	SVC PANEL	EA	8	\$ 85.00	\$ 680.00	\$ 68.21	\$ 545.68
7	Kit, Staff Control, Advanced	39001113	EA	6	\$ 253.00	\$ 1,518.00	\$ 286.44	\$ 1,718.64
8	Main Control Box	39000804	EA	3	\$ 337.00	\$ 1,011.00	\$ 347.47	\$ 1,042.41
9	Class II Power Cord	11012943	EA	12	\$ 52.00	\$ 624.00	\$ 43.88	\$ 526.56
10	PC Board, Basic Staff Control	11011775	EA	6	\$ 193.00	\$ 1,158.00	\$ 223.85	\$ 1,343.10
11	Pendant (U770 bed), Phone Connector	11011474	EA	12	\$ 107.00	\$ 1,284.00	\$ 128.67	\$ 1,544.04
12	Pendant (UCTX bed), advanced	11012840	EA	24	\$ 122.00	\$ 2,928.00	\$ 150.94	\$ 3,622.56
13	Mattress Stop	N517	EA	12	\$ 38.00	\$ 456.00	\$ 38.00	\$ 456.00
14	Pad, Stop, Knee, Leg	11011331	EA	48	\$ 9.50	\$ 456.00	\$ 9.33	\$ 447.84
15	Weldment, Knee Section	24006325A1	EA	2	\$ 275.00	\$ 550.00		
16	Weldment, Foot Section	2400616A1	EA	2	\$ 275.00	\$ 550.00		
16a	Weldment, Foot and Knee Section Kit	39001872	EA	2			\$ 298.41	\$ 596.82
17	Weldment, Back Section	24006114AL	EA	2	\$ 195.00	\$ 390.00	\$ 215.78	\$ 431.56
18	Roller and Hub Kit	39000792	EA	6	\$ 33.00	\$ 198.00	\$ 31.20	\$ 187.20
19	Slide Rail Holders	39001040	EA	12	\$ 9.99	\$ 119.88	\$ 9.55	\$ 114.60
20	Kit, Mattress Deck Bearing	39000802	EA	8	\$ 46.00	\$ 368.00	\$ 43.23	\$ 345.84
770 Parts								
21	Staff Controller	11010490	EA	12	\$ 220.00	\$ 2,640.00	\$ 243.12	\$ 2,917.44
22	PC Board, Basic Staff Control	11011775	EA	6	\$ 193.00	\$ 1,158.00	\$ 223.85	\$ 1,343.10
23	770 Footboard w/o Staff Control	SVC PANEL	EA	6	\$ 85.00	\$ 510.00	\$ 68.21	\$ 409.26
					GRAND TOTAL	\$ 20,042.84		\$ 21,208.87

NOTES

Quote Opening 08/02/23 @ 2:30 PM	DW, MP
Invitations Sent	22
Total Vendors Requesting Documents	0
Total Quote Responses	2

PRICE

Any quantities shown are estimated only for bid canvassing purposes. Freight charges shall be included in all pricing.

NO.	ITEM	JOERNS REPLACEMENT PART NO.	UOM	QTY	PRICE	EXTENDED PRICE
UCTX Parts						
1	Bumper, Wire Foam 80"	11012608AL	EA	24	\$ 39.00	\$ 936.00
2	Kit, Bushing Rivet Replacement	39000052	EA	4	\$ 19.99	\$ 79.96
3	Kit, Control Box	39000967	EA	4	\$ 265.00	\$ 1060.00
4	Kit, Cover, Staff Control	39001115	EA	6	\$ 24.00	\$ 144.00
5	Kit, Hand Pendant Holder	N717	EA	36	\$ 34.00	\$ 1,224.00
6	UCTX Food Board w/o Staff Control	SVC PANEL	EA	8	\$ 85.00	\$ 680.00
7	Kit, Staff Control, Advanced	39001113	EA	6	\$ 253.00	\$ 1,518.00
8	Main Control Box	39000804	EA	3	\$ 337.00	\$ 1,011.00
9	Class II Power Cord	11012943	EA	12	\$ 52.00	\$ 624.00
10	PC Board, Basic Staff Control	11011775	EA	6	\$ 193.00	\$ 1,158.00
11	Pendant (U770 bed), Phone Connector	11011474	EA	12	\$ 107.00	\$ 1,284.00
12	Pendant (UCTX bed), advanced	11012840	EA	24	\$ 122.00	\$ 2,928.00
13	Mattress Stop	N517	EA	12	\$ 38.00	\$ 456.00
14	Pad, Stop, Knee, Leg	11011331	EA	48	\$ 9.50	\$ 456.00
15	Weldment, Knee Section	24006325AI	EA	2	\$ 275.00	\$ 550.00
16	Weldment, Foot Section	24006116AI	EA	2	\$ 275.00	\$ 550.00
17	Weldment, Back Section	24006114AL	EA	2	\$ 195.00	\$ 390.00
18	Roller and Hub Kit	39000792	EA	6	\$ 33.00	\$ 198.00
19	Side Rail Holders	39001040	EA	12	\$ 9.99	\$ 119.88
20	Kit, Mattress Deck Bearing	39000802	EA	8	\$ 46.00	\$ 368.00
770 Parts						
21	Staff Controller	11010490	EA	12	\$ 220.00	\$ 2,640.00
22	PC Board, Basic Staff Control	11011775	EA	6	\$ 193.00	\$ 1,158.00
23	770 Footboard w/o Staff Control	SVC PANEL	EA	6	\$ 85.00	\$ 510.00
GRAND TOTAL						\$20,042.84

PRICE

Any quantities shown are estimated only for bid canvassing purposes. Freight charges shall be included in all pricing.

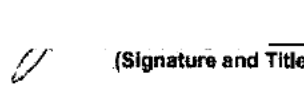
NO.	ITEM	JOERNS REPLACEMENT PART NO.	UOM	QTY	PRICE	EXTENDED PRICE
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770 Parts						
21	Staff Controller	11010490	EA	12	\$ 220.00	\$ 2,640.00
22	PC Board, Basic Staff Control	11011775	EA	6	\$ 193.00	\$ 1,158.00
23	770 Footboard w/o Staff Control	SVC PANEL	EA	6	\$ 85.00	\$ 510.00
GRAND TOTAL						\$20,042.84

QUOTE SIGNATURE PAGE

JOERNS BED REPLACEMENT PARTS 23-090-DCC

Signature on File

X



 (Signature and Title) Executive Account Manager

8/3/23

 (Date)

QUOTATION MUST BE SIGNED FOR CONSIDERATION

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

Full Business Name of Bidder	Direct Supply Inc
Main Business Address	7301 W Champions Way
City, State, Zip Code	Milwaukee, WI 53223
Telephone Number	866-810-0265
Email Address	abach@directsupply.com
Bid Contact Person	Andrew Bach



Required Vendor Ethics Disclosure Statement

Failure to complete and return this form may result in delay or cancellation of the County's Contractual Obligation.

Date: 07/11/2024

Bid/Contract/PO #: _____

Company Name: <u>Direct Supply, Inc.</u>	Company Contact: <u>Christine Roberts</u>
Contact Phone: <u>(414) 760-5719</u>	Contact Email: <u>Christine.Roberts@directsupply.com</u>

The DuPage County Procurement Ordinance requires the following written disclosures prior to award:

1. Every contractor, union, or vendor that is seeking or has previously obtained a contract, change orders to one (1) or more contracts, or two (2) or more individual contracts with the county, shall provide to Procurement Services Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor within the current and previous calendar year to any incumbent county board member, county board chairman, or countywide elected official whose office the contract to be awarded will benefit. The contractor, union or vendor shall update such disclosure annually during the term of a multi-year contract and prior to any change order or renewal requiring approval by the county board. For purposes of this disclosure requirement, "contractor or vendor" includes owners, officers, managers, lobbyists, agents, consultants, bond counsel and underwriters counsel, subcontractors and corporate entities under the control of the contracting person, and political action committees to which the contracting person has made contributions.

NONE (check here) - If no contributions have been made

Recipient	Donor	Description (e.g. cash, type of item, in-kind services, etc.)	Amount/Value	Date Made

2. All contractors and vendors who have obtained or are seeking contracts with the county shall disclose the names and contact information of their lobbyists, agents and representatives and all individuals who are or will be having contact with county officers or employees in relation to the contractor bid and shall update such disclosure with any changes that may occur.

NONE (check here) - If no contacts have been made

Lobbyists, Agents and Representatives and all individuals who are or will be having contact with county officers or employees in relation to the contract or bid	Telephone	Email

A contractor or vendor that knowingly violates these disclosure requirements is subject to penalties which may include, but are not limited to, the immediate cancellation of the contract and possible disbarment from future county contracts.

Continuing disclosure is required, and I agree to update this disclosure form as follows:

- If information changes, within five (5) days of change, or prior to county action, whichever is sooner
- 30 days prior to the optional renewal of any contract
- Annual disclosure for multi-year contracts on the anniversary of said contract
- With any request for change order except those issued by the county for administrative adjustments

The full text for the county's ethics and procurement policies and ordinances are available at:

http://www.dupagecounty.gov/government/county_board/ethics_at_the_county/

I hereby acknowledge that I have received, have read, and understand these requirements.

Signature on File

Authorized Signature _____

Printed Name Christine Roberts

Title Director, Political Programs

Date July 11, 2024

Attach additional sheets if necessary. Sign each sheet and number each page. Page _____ of _____ (total number of pages)



Authorization to Travel

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: 24-2261

Agenda Date: 8/20/2024

Agenda #: 9.A.



DuPage County Employee Overnight Business Travel Expense Reimbursement Request

This expense form is used to request advance approval for County reimbursement of **overnight travel expenses**. Advance approval is required for County reimbursement for all overnight travel whether in-state or out-of-state. After travel is completed, a separate [Overnight Business Travel Report Form](#) must be completed and submitted to receive reimbursement for travel expenses.

Elected Officials subject to 50 ILCS 150/15 should not use this Overnight Business Travel Request Form. [Applicable form for Elected Officials subject to 50 ILCS 150/15.](#)

Do not use this form for travel that does not include an overnight stay. Advance approval is not required for travel that does not include an overnight stay.

Written documentation is not required for approval prior to travel. However, complete itemized documentation is required for reimbursement after travel.

Please review the [County's Business Travel Expense Policy](#) before completing this form.

The County's Business Travel Expense Policy : ["Yes"]

Employee Name: :

Employee Email Address: dupagecounty.gov

Department: Community Services Department

Supervisor Email: natasha.belli@dupagecounty.gov

Description of the Requested Business Travel

Description of conference, training or other out of town event: To attend the National Adult Protective Services Conference in Albuquerque, New Mexico to learn about the most current trends in Adult Protective Services. Grant funded.

Start date of conference, training or other out of town event: 09-16-2024

End date of conference, training or other out of town event: 09-18-2024

Departure travel date: 09-15-2024

Return travel date: 09-19-2024

If travel dates extend before or after the dates related to the purpose of travel, explain why the additional travel days are necessary: Traveling on Sunday, 9/15/2024 for the NAPSA Conference since it starts on Monday morning and requesting to stay through the 19th since it is not clear when the conference ends other than it starts the closing session starts at 2:45p. I am expecting it to end around 4:00p since all the sessions tend to run 1.25

Estimate of costs for the requested business travel

Budget Account Code: 5000-1660 and 5000-1720

Registration fees for conference, training or event: \$700

Form of Payment: Invoiced to county

Estimated transportation cost to and from location: \$900

Describe methods of transportation to and from location: Flying on Southwest-not sure of cost yet about quote was around \$700 (+\$ travel agent fees \$50 approx.) Parking at Midway (\$75) + mileage costs will be approx. \$25 + airport transportation to and from the hotel (\$50 RT)

Rental Vehicle request:

Provide estimated rental car cost: \$

Describe reason(s) for vehicle rental:

Business Travel Expense Policy - Supplemental Insurance:

Total Estimated Lodging Costs: \$690

Description of lodging needs, including number of nights and cost per night: 4 nights \$149 per night + \$93.12 (taxes)=\$689.12

Meal Per Diem Policy

See Business Travel Expense Policy Section 6.0 regarding meal per diems. Individual meals, including room service, are not reimbursable and meal receipts are not required or accepted. Tips are included in the per diem and are not reimbursable. Per diems are paid at 100% of applicable GSA CONUS rates for non-travel days and at 75% of applicable GSA CONUS rates for the travel day at the beginning of the trip and the travel day for returning from the trip.

See the per diem rates at <https://www.gsa.gov/travel/plan-book/per-diem-rates>.

Estimate Total Per Diem expenses: \$250

Estimate such additional expenses: \$0

Describe expected additional expenses:

Estimated total cost of the requested Overnight Business Travel: \$2540

Confirmation and Submission

By typing my name below, the employee submitting this request certifies that the information provided herein accurately describes the proposed business travel and the requested travel expenses are my best estimate of the costs and expenses related to that travel. I understand that this request requires advance approval by my Department Head and the Parent Committee Chair (if the total is not more than \$2,500) or the Parent Committee (if the total is more than \$2,500).

Employee Name:

Instructions for Immediate Supervisor other than Department Head

Please review this Overnight Business Travel Request Form. If you approve the requested travel, please forward the form by email to the Department Head and indicate your approval.



Authorization to Travel

421 N. COUNTY FARM
ROAD
WHEATON, IL 60187
www.dupagecounty.gov

File #: 24-2262

Agenda Date: 8/20/2024

Agenda #: 9.B.



DuPage County Employee Overnight Business Travel Expense Reimbursement Request

This expense form is used to request advance approval for County reimbursement of **overnight travel expenses**. Advance approval is required for County reimbursement for all overnight travel whether in-state or out-of-state. After travel is completed, a separate [Overnight Business Travel Report Form](#) must be completed and submitted to receive reimbursement for travel expenses.

Elected Officials subject to 50 ILCS 150/15 should not use this Overnight Business Travel Request Form. [Applicable form for Elected Officials subject to 50 ILCS 150/15.](#)

Do not use this form for travel that does not include an overnight stay. Advance approval is not required for travel that does not include an overnight stay.

Written documentation is not required for approval prior to travel. However, complete itemized documentation is required for reimbursement after travel.

Please review the [County's Business Travel Expense Policy](#) before completing this form.

The County's Business Travel Expense Policy : ["Yes"]

Employee Name: I

Employee Email Address: @dupagecounty.gov

Department: Community Services Department

Supervisor Email: shatonya.herring@dupagecounty.gov

Description of the Requested Business Travel

Description of conference, training or other out of town event: To attend the National Adult Protective Services Conference to Albuquerque, New Mexico to learn about the most current trends in Adult Protective Services. Grant funded.

Start date of conference, training or other out of town event: 09-16-2024

End date of conference, training or other out of town event: 09-18-2024

Departure travel date: 09-15-2024

Return travel date: 09-19-2024

If travel dates extend before or after the dates related to the purpose of travel, explain why the additional travel days are necessary: Traveling on Sunday, September 15th for the NAPSA Conference since it starts on Monday morning on September 16th. Also, requesting to stay through September 19th since the conference ends approximately around 4:00p on that day. The ending time is not very clear on the agenda.

Estimate of costs for the requested business travel

Budget Account Code: 5000-1660 and 5000-1720

Registration fees for conference, training or event: \$825

Form of Payment: Invoiced to county

Estimated transportation cost to and from location: \$870

Describe methods of transportation to and from location: Flying on Southwest with the approximate cost being around \$700 (not including any travel agent fees \$50 approx). Also, mileage to and from the airport (\$50) + \$20 tolls approx. + airport transportation round trip (\$50)

Rental Vehicle request:

Provide estimated rental car cost: \$

Describe reason(s) for vehicle rental:

Business Travel Expense Policy - Supplemental Insurance:

Total Estimated Lodging Costs: \$736

Description of lodging needs, including number of nights and cost per night: \$159 per night for 4 nights + \$99.38 taxes=\$735.38

Meal Per Diem Policy

See Business Travel Expense Policy Section 6.0 regarding meal per diems. Individual meals, including room service, are not reimbursable and meal receipts are not required or accepted. Tips are included in the per diem and are not reimbursable. Per diems are paid at 100% of applicable GSA CONUS rates for non-travel days and at 75% of applicable GSA CONUS rates for the travel day at the beginning of the trip and the travel day for returning from the trip.

See the per diem rates at <https://www.gsa.gov/travel/plan-book/per-diem-rates>.

Estimate Total Per Diem expenses: \$250

Estimate such additional expenses: \$0

Describe expected additional expenses:

Estimated total cost of the requested Overnight Business Travel: \$2681

Confirmation and Submission

By typing my name below, the employee submitting this request certifies that the information provided herein accurately describes the proposed business travel and the requested travel expenses are my best estimate of the costs and expenses related to that travel. I understand that this request requires advance approval by my Department Head and the Parent Committee Chair (if the total is not more than \$2,500) or the Parent Committee (if the total is more than \$2,500).

Employee Name: N

Instructions for Immediate Supervisor other than Department Head

Please review this Overnight Business Travel Request Form. If you approve the requested travel, please forward the form by email to the Department Head and indicate your approval.

Instructions for Department Head

Please review this Overnight Business Travel Request Form. If you approve the requested travel, please print this form, sign below, scan and email to the Chair of the relevant Parent Committee.

Instructions for Parent Committee Chair

Please review this Overnight Business Travel Request Form. If \$2,500 or less, and you approve the requested travel, please print this form, sign below, scan, and return via email to the Department Head. If more than \$2,500, place this item on the agenda of the relevant Parent Committee. After approval by the Parent Committee, please print this form, sign below, scan, and return via email to the Department Head.

REVIEWED BY AND DATE APPROVED:

Signature on File

Department Head: _____

Date: 8/8/24

Committee Chair: _____

Date: _____

If the request is over \$2,500 the Committee Chair certifies that the travel was approved by a majority vote at a scheduled meeting of the Parent Committee

Committee Name: _____

Meeting Date: _____