



DU PAGE COUNTY

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

Human Services

Final Summary

Tuesday, May 5, 2026

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. A physical quorum was physically present, and Chair Schwarze entertained a motion for those members not physically present due to illness, disability, employment purposes or for the business of the Board or family or other emergency or unexpected childcare obligations to participate via video or teleconference. Member Garcia so moved, Member Galassi seconded, motion carried, all ayes.

PRESENT	DeSart, Galassi, Garcia, LaPlante, and Schwarze
REMOTE	Cronin Cahill

2. ROLL CALL

Staff in Attendance: Nick Kottmeyer (Chief Administrative Officer); Renee Zerante (State's Attorney's Office); Gina Strafford-Ahmed (Community Services); Natasha Belli (Community Services); Keith Jorstad (Finance); Sara Rogers (Finance).

PRESENT	DeSart, Galassi, Garcia, LaPlante, and Schwarze
REMOTE	Cronin Cahill

3. PUBLIC COMMENT

No public comments were offered.

4. CHAIR REMARKS - CHAIR SCHWARZE

Chair Schwarze thanked the Members who attended the Food Summit in April, hosted by the Northern Illinois Food Bank. He noted that he, Member Garcia and Community Services Director Mary Keating are meeting with potential food bank donors at the DuPage Foundation in early June with the intention of discussing how the DuPage County Transformation Challenge Grant may potentially assist collaboration with food bank partners. Member Galassi asked if the information presented at the summit might be made available to County Board members to share with the pantries in their districts. Chair Schwarze replied that a summary of the presentation is forthcoming from the Northern Illinois Food Bank and will be shared with the Board. Member Garcia noted that there were two major topics of discussion among most of the attendees - the possibility of opening a second hub to facilitate food transport in other areas of the County, and software improvements to allow a better flow of information among the food pantries. Member DeSart mentioned the upcoming groundbreaking for Loaves and Fishes' new Hub 2.0 expansion in Aurora.

5. APPROVAL OF MINUTES

5.A. [26-1386](#)

Human Services Committee - Regular Meeting - Tuesday, April 21, 2026

RESULT:	APPROVED
MOVER:	Paula Garcia
SECONDER:	Kari Galassi

6. COMMUNITY SERVICES - MARY KEATING

6.A. [26-1387](#)

HS-P-0035A-25 - Amendment to County Contract 7852-0001 SERV issued to Nortek Environmental, Inc., for the Low Income Home Energy Assistance Program (LIHEAP), to increase the contract in the amount of \$75,000, for a new contract amount not to exceed \$164,999. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Dawn DeSart
SECONDER:	Kari Galassi

7. BUDGET TRANSFERS

7.A. [26-1388](#)

Transfer of funds from account no. 5000-1440-50040 (part-time help) to account no. 5000-1440 50010 (overtime), in the amount of \$2,921, to cover unexpected expenses in the overtime personnel expense account for the Community Development Block Grant (CDBG), which was not included in the original budget. (Community Services)

RESULT:	APPROVED
MOVER:	Paula Garcia
SECONDER:	Kari Galassi

7.B. [26-1389](#)

Transfer of funds from account no. 1200-2025-54110 (equipment and machinery) to account no. 1200-2025-52000 (furniture/machinery/equipment small value) in the amount of \$9,500 for small value supplies for dining services. (DuPage Care Center)

RESULT:	APPROVED
MOVER:	Paula Garcia
SECONDER:	Kari Galassi

8. INFORMATIONAL

8.A. [26-1390](#)

GPN 012-26 Weatherization DOE Grant PY27 Illinois Department of Commerce and Economic Opportunity, U.S. Department of Energy, in the amount of \$673,394. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Paula Garcia
SECONDER:	Kari Galassi

8.B. [26-1391](#)

GPN 013-26 Weatherization HHS Grant PY27 Illinois Department of Commerce and Economic Opportunity, U.S. Department of Health and Human Services, in the amount of \$974,465. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Paula Garcia
SECONDER:	Dawn DeSart

8.C. [26-1392](#)

GPN 014-26 Weatherization State Grant PY27 Illinois Department of Commerce and Economic Opportunity, in the amount of \$609,599. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Paula Garcia
SECONDER:	Kari Galassi

8.D. [26-1393](#)

GPN 015-26 LIHEAP HHS Grant PY27 Illinois Department of Commerce and Economic Opportunity, U.S. Department of Health and Human Services, in the amount of \$3,657,594. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Paula Garcia
SECONDER:	Kari Galassi

8.E. [26-1394](#)

GPN 016-26 LIHEAP State Supplemental Grant PY27 Illinois Department of Commerce and Economic Opportunity, in the amount of \$4,699,341. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Dawn DeSart
SECONDER:	Kari Galassi

9. RESIDENCY WAIVERS - JANELLE CHADWICK

One out-of-county residency waiver request was presented to the committee for approval. Janelle Chadwick stated that the Care Center currently has twelve male beds and sixteen female beds available. Six beds have been offered to DuPage County residents, so no DuPage County residents will be displaced with the acceptance of this candidate.

RESULT:	APPROVED
MOVER:	Dawn DeSart
SECONDER:	Kari Galassi

10. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK

Janelle Chadwick stated that there are currently no cases or units at the Care Center in isolation and no masking. Construction logistics are a challenge right now, with only one center elevator to access the rehab, recreation and dining areas, but construction is progressing well. This week the Care Center is celebrating Nursing Week, and Ms. Chadwick noted that last quarter the Care Center hired eight nurses. Ms. Chadwick also mentioned the annual Care Center Golf Outing and Dinner, coming up on Friday, June 26.

11. COMMUNITY SERVICES UPDATE - MARY KEATING

No remarks were offered.

12. OLD BUSINESS

Member LaPlante noted that since the DuPage County Small Non-profit Grant Program is now closed, she asked where constituents that are small organizations can find resources. Nick Kottmeyer suggested that they start by going to the County Board office and seeking direction in obtaining referrals to resources that could help them. Likewise, if a Board member has an individual constituent with a need for immediate assistance for such things as rent, car repair, utility shut-off, etc., besides referring the constituent to the 211 helpline, he recommended that Board members reach out directly to Mary Keating in Community Services, with the objective of getting the appropriate referrals in Community Services to the constituent as quickly as possible.

13. NEW BUSINESS

No new business was discussed.

14. ADJOURNMENT

With no further business, the meeting was adjourned.



Minutes

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

File #: 26-1386

Agenda Date: 5/5/2026

Agenda #: 5.A.



DU PAGE COUNTY

Human Services

Final Summary

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

Tuesday, April 21, 2026

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

Staff in attendance: Nick Kottmeyer (Chief Administrative Officer), Joan Olson (Chief Communications Officer), Renee Zerante (State's Attorneys Office), Mary Catherine Wells and Keith Jorstad (Finance), Henry Kocker (Procurement), Mary Keating, Gina Strafford-Ahmed, and Julie Hamlin (Community Services), and Anita Rajagopal (DuPage Care Center).

PRESENT	DeSart, Galassi, Garcia, and Schwarze
ABSENT	Cronin Cahill, and LaPlante

3. PUBLIC COMMENT

No public comments were offered.

4. CHAIR REMARKS - CHAIR SCHWARZE

Chair Schwarze reminded the committee members that on Thursday, April 23, at 1:30 p.m., he and staff will be participating in the Northern Illinois Food Bank (NIFB) Food Summit. If you have not already rsvp'd, please let Chair Schwarze know. He expects worthy conversations at the summit.

5. APPROVAL OF MINUTES

5.A. [26-1257](#)

Human Services Committee - Regular Meeting - Tuesday, April 7, 2026

RESULT:	APPROVED
MOVER:	Dawn DeSart
SECONDER:	Paula Garcia

6. LENGTH OF SERVICE AWARDS - DUPAGE CARE CENTER

6.A. Mylynda Nicoloff - 15 Years - Lead Pharmacy Tech

6.B. Christine Jorns - 20 Years - Clinical Case Manager

6.C. Cher Williams - 20 Years Clinical Case Manager

7. COMMUNITY SERVICES - MARY KEATING

7.A. [FI-R-0072-26](#)

Acceptance and appropriation of the 211 Illinois Program Grant PY26, Company 5000 - Accounting Unit 1765, in the amount of \$33,500. (Community Services)

Gina Strafford-Ahmed commented that the 211 grant is funding from the State.

RESULT: APPROVED AND SENT TO FINANCE
MOVER: Paula Garcia
SECONDER: Kari Galassi

7.B. [26-1258](#)

HS-P-0030A-25 - Amendment to County Contract 7791-0001 SERV, issued to Healthy Air Heating & Air, Inc., for the Weatherization Program, to increase the contract by \$627,473, resulting in a contract total not to exceed \$807,473. (Community Services)

Ms. Strafford-Ahmed commented on items 7.A. through 7.C. explaining the Weatherization unit currently has a multifamily project underway. They have excess money from the project so the money has to be reallocated to single family homes. All three contractors were approached and asked how many additional homes they think they can complete by the end of June 30, 2026. The funds were distributed based on the vendors' abilities to complete projects within the time frame.

RESULT: APPROVED AND SENT TO FINANCE
MOVER: Paula Garcia
SECONDER: Kari Galassi

7.C. [26-1259](#)

HS-P-0031A-25 - Amendment to County Contract 7792-0001 SERV, issued to My Green House HVAC, LLC, for the Weatherization Program, to increase the contract by \$101,206, resulting in amended contract not to exceed \$416,206. (Community Services)

RESULT: APPROVED AND SENT TO FINANCE
MOVER: Dawn DeSart
SECONDER: Paula Garcia

7.D. [26-1260](#)

HS-P-0628A-25 - Amendment to County Contract 7790-0001 SERV, issued to Arcos Environmental Services, for the Weatherization Program, to increase the contract by \$101,206 resulting in an amended contract not to exceed \$236,206. (Community Services)

RESULT:	APPROVED AND SENT TO FINANCE
MOVER:	Paula Garcia
SECONDER:	Kari Galassi

8. **COMMUNITY DEVELOPMENT COMMISSION - MARY KEATING**

8.A. [HS-R-0013-26](#)

Recommendation for approval of a 1st Modification to a Community Development Block Grant-CARES Act (CDBG-CV) Program Agreement with the Hanover Park District, Project Number CDCV21-04, incorporating newly effective requirements under the Illinois Prevailing Wage Act.

RESULT:	APPROVED AT COMMITTEE
MOVER:	Dawn DeSart
SECONDER:	Kari Galassi

9. **DUPAGE CARE CENTER - JANELLE CHADWICK**

9.A. [26-1261](#)

Recommendation for the approval of a purchase order issued to Redsail Technologies, LLC, for software and software maintenance for the data system in the Pharmacy Department, for the Care Center, for the period of May 1, 2026 through April 30, 2027, for a total contract amount not to exceed \$20,000. Per 55 ILCS 5/5-1022(d) exempt from bidding - IT/Telecom purchases which do not exceed \$35,000. (DuPage Care Center)

RESULT:	APPROVED
MOVER:	Paula Garcia
SECONDER:	Kari Galassi
AYES:	DeSart, Galassi, Garcia, and Schwarze
ABSENT:	Cronin Cahill, and LaPlante

9.B. [26-1262](#)

Recommendation for the approval of a purchase order issued to Seqirus USA, Inc., for flu vaccines for the DuPage Care Center Residents, for the period of April 22, 2026 through November 30, 2026, for a total Contract amount not to exceed \$18,491.05, per MMCAP. (DuPage Care Center)

RESULT:	APPROVED
MOVER:	Paula Garcia
SECONDER:	Kari Galassi
AYES:	DeSart, Galassi, Garcia, and Schwarze
ABSENT:	Cronin Cahill, and LaPlante

9.C. [26-1263](#)

Amendment to Contract 8275-0001 SERV, issued to EZ Way, Inc., for repair and maintenance of the EZ Way patient lifters, for the period June 1, 2026 through May 31, 2027, to increase encumbrance in the amount of \$8,000, to include harnesses with leg straps, resulting in a new amended contract total of \$22,998. (DuPage Care Center)

RESULT:	APPROVED
MOVER:	Dawn DeSart
SECONDER:	Kari Galassi
AYES:	DeSart, Galassi, Garcia, and Schwarze
ABSENT:	Cronin Cahill, and LaPlante

10. RESIDENCY WAIVERS - JANELLE CHADWICK

No residency waivers were offered.

11. DUPAGE CARE CENTER UPDATE - JANELLE CHADWICK

Anita Rajagopal, Assistant Administrator of the DuPage Care Center, stated that the residents were being vaccinated for covid today. Covid vaccines are not mandatory but a lot of education is given regarding covid and the vaccines and over 75% of the residents participate. Staff have the ability to receive vaccinations also.

Construction is still on schedule for the resident dining in the 1 South wing. The Care Center expects to begin the next phase in mid-May.

The Care Center was selected again to be part of Northwestern Medicine’s Preferred Provider. The Care Center had to apply to be a preferred provider and then complete a presentation before the selection was made. They are in the process of working on the contract.

12. COMMUNITY SERVICES UPDATE - MARY KEATING

Mary Keating, Director of Community Services, stated the Community Services Block Grant (CSBG) Advisory Committee meeting is today at 11:30. The committee members are all members of the advisory committee. Ms. Keating would appreciate their attendance.

There will be a presentation by Home DuPage which conducts the home buyers and credit repair programs. The meeting will be held at Jubilee Furniture on North Avenue east of Schmale Avenue in Carol Stream.

Ms. Keating reminded all that Early Giving is up and running online for Giving DuPage Days. Member Galassi asked about a social graphic and a link to send out to constituents regarding Giving DuPage Days. Ms. Keating will have the information sent to all the county board members.

Member DeSart asked where the Giving DuPage donations would go if donated to Community Services. Ms. Keating replied there are about 45 agencies that participate and donors can choose their agency to donate to. Giving Dupage days is a platform for organizations to use as a collective community-wide funding event. Ms. Keating explained Dupage Social Service Association (DSSA), 501c-3 organization attached to Community Services, provides small amounts of financial assistance for residents that may not be eligible for other programs.

13. OLD BUSINESS

No old business was discussed.

14. NEW BUSINESS

No new business was discussed.

15. ADJOURNMENT

With no further business, the meeting was adjourned at 9:53 AM.



Change Order

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

File #: 26-1387

Agenda Date: 5/5/2026

Agenda #: 6.A.

HS-P-0035A-25
AMENDMENT TO COUNTY CONTRACT 7852-0001 SERV
ISSUED TO NORTEK ENVIRONMENTAL INC.
FOR THE LIHEAP FURNACE PROGRAM
(INCREASE CONTRACT \$75,000)

WHEREAS, County Contract 7852-0001 SERV was approved by the DuPage County Board on August 12, 2025; and

WHEREAS, the Human Services Committee recommends changes as stated in the Change Order Notice to County Contract 7852-0001 SERV, issued to Nortek Environmental, Inc., for the LIHEAP Furnace Program (Community Services), due to a change in funding allocation within the Program issued by the ILDCEO, and increase the contract by \$75,000 resulting in an amended contract total of \$164,999.

NOW, THEREFORE BE IT RESOLVED, that the County Board adopt the Change Order Notice to County Contract 7852-0001 SERV, issued to Nortek Environmental, Inc., for the LIHEAP Program (Community Services), due to a change in funding allocation within the Program issued by the ILDCEO, and increase the contract by \$75,000 resulting in an amended contract total of \$164,999

Enacted and approved this 12th day of May, 2026 at Wheaton, Illinois.

DEBORAH A. CONROY, CHAIR
DU PAGE COUNTY BOARD

Attest: _____

JEAN KACZMAREK, COUNTY CLERK

HS 5/5
FI + CB 5/12

REQUEST FOR CHANGE ORDER FORM

Procurement Services Division

Revised 10-01-2025

Date: Apr 23, 2026

File ID #: _____

Purchase Order #: 7852	Original Purchase Order Date: Oct 1, 2025	Change Order #: 7	Department: Community Services
Vendor Name: Nortek Environmental, Inc.		Vendor #: 12750	Dept. Contact: David Stuckey
Action Requested and Reason for Change Order Request: To increase total amount of PO LIHEAP Furnace to fund payment of additional clients. Increase Line 3: Description 1 LIHEAP FURNACE VOUCHER PROGRAM Program Description 2 LIHEAP PROG PY26 Company: 5000, AU: 1420, Account Code: 53090, Activity Code: 26-224028 Increase by \$75,000			

IN ACCORDANCE WITH 720 ILCS 5/33E-9

- (A) Were not reasonably foreseeable at the time the contract was signed.
- (B) The change is germane to the original contract as signed.
- (C) Is in the best interest for the County of DuPage and authorized by law.

INCREASE/DECREASE		
A	Starting Contract Value	\$80,000.00
B	Net \$ Change for Previous Change Order	\$9,999.00
C	Current Contract Amount (A + B)	\$89,999.00
D	Amount of this Change Order <input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$75,000.00
E	New Contract Amount (C + D)	\$164,999.00
F	Cumulative Change Order Amount (B + D)	\$84,999.00
G	Cumulative Percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	106.25%

DECISION MEMO NOT REQUIRED - Check Applicable Box(es)

- Cancel Entire Order
- Close Contract
- Contract Extension (≤59 Days)
- Update Budget Code
- Change Budget Code From: _____ to: _____
- Increase/Decrease Quantity From: _____ to: _____
- Price Shows: _____ should be: _____
- Move Funds Between Lines
- Decrease Remaining Encumbrance and Close Contract
- Increase Encumbrance and Close Contract
- Decrease Encumbrance
- Increase Encumbrance

DECISION MEMO REQUIRED - Check Applicable Box(es) and Fill In All Answers Below

- Contract Extension Greater Than 59 Days From _____ to: _____
- Cancel Contract
- Cumulative Increase Greater Than \$10,000 (Row 'F' Above)
- Other - Explain In Summary Explanation Box Below

Summary Explanation - Provide a summary of the action. Explain why it is necessary and what is to be accomplished.
The contractor has received more work than originally anticipated, need to increase the PO to accommodate the additional work.

Original Source Selection/Vetting Information - Describe method used to select source; for instance, bid, RFP, sole source, etc.
This contractor was selected by RFP.

Recommendations/Alternatives - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.


1. Approve the increase to be able to pay Nortek for the emergency furnace program so our low income residents have heat.
2. Deny this request and risk compliance issues with our LIHEAP grant and put low income clients at risk of having no heat.
3. Do nothing and violate the prompt payment act.

Fiscal Impact/Cost Summary - Include projected cost for each fiscal year, approved budget amount and account number

Increase by \$75,000

LIHEAP Furnace Voucher Program PY26 CO: 5000 AU: 1420 AC: 53090 Act. Code: 26-224028

APPROVALS - Initials Only

HS	6147	Apr 23, 2026	GSA	6444	Apr 23, 2026
Prepared By	Phone Ext.	Date	Recommended for Approval	Phone Ext.	Date
		4/27/2026			
Reviewed by Procurement Officer	Date		Completed by Buyer	Date	



REQUIRED VENDOR ETHICS DISCLOSURE STATEMENT

Section I: Contact Information

Please complete the contact information below.

BID NUMBER:	
COMPANY NAME:	Nortek Environmental, Inc.
CONTACT PERSON:	Justin Adkins
CONTACT EMAIL:	justin@nortekenvironmental.com

Section II: Procurement Ordinance Requirements

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 the Procurement Division a written disclosure of all political campaign contributions made by such contractor, union, or vendor to any incumbent County Board member, County Board chairman, or Countywide elected official whose office the contract to be awarded will benefit within the current and previous calendar year. 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.

Has the Bidder made contributions as described above?

- Yes
- No

If "Yes", complete the required information in the table below.

RECIPIENT	DONOR	DESCRIPTION (e.g., cash, type of item, in-kind services, etc.)	AMOUNT/VALUE	DATE MADE

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.

Has the Bidder had or will the Bidder have contact with lobbyists, agents, representatives or individuals who are or will be having contact with county officers or employees as described above.

- Yes
- No

If "Yes", list the name, phone number, and email of lobbyists, agents, representatives, and all individuals who are or will be having contact with county officers or employees in the table below.

NAME	PHONE	EMAIL

Section III: Violations

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 and supplemental disclosure is required. The Bidder agrees 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 of the County's Ethics Ordinance is available at:

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

The full text of the County's Procurement Ordinance is available at:

https://www.dupagecounty.gov/government/departments/finance/procurement/procurement_ordinance_and_guiding_principles.php

Section IV: Certification

By signing below, the Bidder hereby acknowledges that it has received, read, and understands these requirements, and certifies that the information submitted on this form is true and correct to the best of its knowledge.

Signature on File

Printed Name: Justin Adkins

Signature: 

Title: Vice President

Date: 3/20/2026



Budget Transfer

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

File #: 26-1388

Agenda Date: 5/5/2026

Agenda #: 7.A.

DuPage County, Illinois
 BUDGET ADJUSTMENT
 Effective April 1, 2025

From: 5000
 Company #

COMMUNITY DEV BLOCK GRANTS
 From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
1440	50040		PART TIME HELP	\$ 2,921.00	20,921.00	18,000.00	4/23/26
Total				\$ 2,921.00			

To: 5000
 Company #

COMMUNITY DEV BLOCK GRANTS
 To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
1440	50010		OVERTIME	\$ 2,921.00	(40.65)	2880.35	4/23/26
Total				\$ 2,921.00			

Reason for Request:

A budget transfer is required to cover unexpected expense in overtime personnell expense account which was not included in the original budget.

Signature on File

Department Head

Signature on File

Chief Financial Officer

4/23/26

Date

4/27/26

Date

Activity

(optional)

****Please sign in blue ink on the original form****

Finance Department Use Only

Fiscal Year 26 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

HS - 5/5/26
 FIN/LB - 5/12/26



Budget Transfer

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

File #: 26-1389

Agenda Date: 5/5/2026

Agenda #: 7.B.

DuPage County, Illinois
 BUDGET ADJUSTMENT
 Effective January 22, 2024

From: 1200
 Company #

DINING SERVICES
 From: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
2025	54110		EQUIPMENT AND MACHINERY	\$ 9,500.00	133,600.00	123,500.00	4/28/26
Total				\$ 9,500.00			

To: 1200
 Company #

DINING SERVICES
 To: Company/Accounting Unit Name

Accounting Unit	Account	Sub-Account	Title	Amount	Finance Dept Use Only Available Balance		Date of Balance
					Prior to Transfer	After Transfer	
2025	52000		FURN/MACH/EQUIP SMALL VALUE	\$ 9,500.00	6,349.16	15,849.16	4/28/26
Total				\$ 9,500.00			

Reason for Request:

Transfer monies for small value supplies for the Care Center.

Signature on File

Department Head _____
 Si Signature on File
 Chief Financial Officer _____

04/28/26
 Date
 4/29/26
 Date

Activity _____
 (optional)

****Please sign in blue ink on the original form****

Finance Department Use Only

Fiscal Year 26 Budget Journal # _____ Acctg Period _____

Entered By/Date _____ Released & Posted By/Date _____

HS - 5/5/26

FIN/CB - 5/12/26



Grant Proposal Notifications

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

File #: 26-1390

Agenda Date: 5/5/2026

Agenda #: 8.A.



Grant Proposal Notification

GPN Number: 012-26
(Completed by Finance Department)

Date of Notification: 04/08/2026
(MM/DD/YYYY)

Parent Committee Agenda Date: 05/05/2026
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 04/10/2026
(MM/DD/YYYY)

Name of Grant: Weatherization DOE Grant PY27

Name of Grantor: IL Dept. of Commerce and Economic Opportunity

Originating Entity: U.S. Dept. of Energy
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Community Services

Department Contact: Gina Strafford-Ahmed, Intake Administrator x6444
(Name, Title, and Extension)

Parent Committee: Human Services

Grant Amount Requested: \$ 673,394.00

Type of Grant: Formula
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: Yes No

Source of Grant: Federal State Private Corporate

If Federal, provide CFDA: 81.042

If State, provide CSFA: 420-70-0087



Grant Proposal Notification

1. Justify the department’s need for this grant.

The Weatherization DoE Grant is funded through the U.S. Department of Energy and passed through the IL Department of Commerce and Economic Opportunity to DuPage County Community Services. The Weatherization Department utilizes 62% of this grant to provide client services by our contractors to low income households to install energy conservation measures to permanently reduce their energy bills. Conservation measures include, but are not limited to, air – sealing, insulation of attics and walls, caulking and weather-stripping, installation of high efficiency furnaces, and baseload measures such as Energy Star Refrigerators and LED light bulbs. In addition, the grant funding addresses Health& Safety concerns by providing smoke detectors, carbon monoxide detectors and proper ventilation to improve indoor air quality. Under the guidance of the Illinois Home Weatherization Assistance Program (IHWAP), these improvements are provided at no cost to income eligible households that would not otherwise be able to afford them.

The remainder of the funding from this grant covers the cost of administering the Weatherization Program, including but not limited to staff salary and benefits, office and operating supplies, mileage and travel expense and training expense.

2. Based on the County’s [Strategic Plan](#), which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Community Well-being for low income residents of DuPage County is significantly improved by reducing excessive energy burdens to those that struggle to cover their monthly utility bills. Health & Safety improvements create a safer and healthier home. Research has shown that the payback from these improvements are many- fold. Households that receive LIHEAP assistance are also weatherized which creates a synergistic effect and leverages funding.

Thriving Economy is stimulated in DuPage County by bringing in state and federal funding to be spent at the local level for the cost of labor and material to install these measures by our Weatherization contractors. In addition, several of the Weatherization staff are residents of DuPage County and spend their earnings locally.

3. What is the period covered by the grant?

07/01/2026 to: 06/30/2027
 (MM/DD/YYYY) (MM/DD/YYYY)

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
 (MM/YY) (Duration)

4. Will the County provide “seed” or startup funding to initiate grant project? (Yes or No)

No

4.1. If yes, please identify the Company-Accounting Unit used for the funding

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)

Grant Proposal Notification

6. Does the grant allow for Personnel Costs? (Yes or No) Yes

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$1,190,569.00 Percentage covered by grant 15.7%

6.1.2. Total fringe benefits \$349,364.00 Percentage covered by grant 15.5%

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): No

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

5000-1555; 5000-1440

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): No

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time _____ Part-time _____ Temporary _____

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit?
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

Grant Proposal Notification

- 9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? _____
10. What amount of funding is already allocated for the project? \$0.00
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? _____
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): No
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$673,394.00



Grant Proposal Notifications

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

File #: 26-1391

Agenda Date: 5/5/2026

Agenda #: 8.B.



Grant Proposal Notification

GPN Number: 013-26
(Completed by Finance Department)

Date of Notification: 04/08/2026
(MM/DD/YYYY)

Parent Committee Agenda Date: 05/05/2026
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 04/10/2026
(MM/DD/YYYY)

Name of Grant: Weatherization HHS Grant PY27

Name of Grantor: IL Dept. of Commerce and Economic Opportunity

Originating Entity: U.S. Dept. of Health and Human Services
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Community Services

Department Contact: Gina Strafford-Ahmed, Intake Administrator x6444
(Name, Title, and Extension)

Parent Committee: Human Services

Grant Amount Requested: \$ 974,465.00

Type of Grant: Formula
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: Yes No

Source of Grant: Federal State Private Corporate

If Federal, provide CFDA: 93.568

If State, provide CSFA: 420-70-0087



Grant Proposal Notification

1. Justify the department’s need for this grant.

The Weatherization HHS Grant is funded through the U.S. Department of Health and Human Services passed through the IL Department of Commerce and Economic Opportunity to DuPage County Community Services. The Weatherization Department utilizes 67% of this grant to provide client services by our contractors to low income households to install energy conservation measures to permanently reduce their energy bills. Conservation measures include, but are not limited to, air – sealing, insulation of attics and walls, caulking and weather-stripping, installation of high efficiency furnaces, and baseload measures such as Energy Star Refrigerators and LED light bulbs. In addition, the grant funding addresses Health& Safety concerns by providing smoke detectors, carbon monoxide detectors and proper ventilation to improve indoor air quality. Under the guidance of the Illinois Home Weatherization Assistance Program (IHWAP), these improvements are provided at no cost to income eligible households that would not otherwise be able to afford them.

The remainder of the funding from this grant covers the cost of administering the Weatherization Program, including but not limited to staff salary and benefits, office and operating supplies, mileage and travel expense and training expense.

2. Based on the County’s [Strategic Plan](#), which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Community Well-Being for low income residents of DuPage County is significantly improved by reducing excessive energy burdens to those that struggle to cover their monthly utility bills. Health & Safety improvements create a safer and healthier home. Research has shown that the payback from these improvements are many- fold. Households that receive LIHEAP assistance are also weatherized which creates a synergistic effect and leverages funding.

Thriving Economy is stimulated in DuPage County by bringing in state and federal funding to be spent at the local level for the cost of labor and material to install these measures by our Weatherization contractors. In addition, several of the Weatherization staff are residents of DuPage County and spend their earnings locally.

3. What is the period covered by the grant?

06/01/2026 to: 09/30/2027
 (MM/DD/YYYY) (MM/DD/YYYY)

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
 (MM/YY) (Duration)

4. Will the County provide “seed” or startup funding to initiate grant project? (Yes or No)

No

4.1. If yes, please identify the Company-Accounting Unit used for the funding

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)

Grant Proposal Notification

6. Does the grant allow for Personnel Costs? (Yes or No) Yes

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$1,190,569.00 Percentage covered by grant 20.5%

6.1.2. Total fringe benefits \$349,364.00 Percentage covered by grant 20.1%

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): No

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

5000-1555; 5000-1440

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): 1

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time 1 Part-time _____ Temporary _____

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit? Yes
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

Grant Proposal Notification

- 9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? _____
10. What amount of funding is already allocated for the project? \$0.00
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? _____
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): No
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$974,465.00



Grant Proposal Notifications

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

File #: 26-1392

Agenda Date: 5/5/2026

Agenda #: 8.C.



Grant Proposal Notification

GPN Number: 014-26
(Completed by Finance Department)

Date of Notification: 04/08/2026
(MM/DD/YYYY)

Parent Committee Agenda Date: 05/05/2026
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 04/10/2026
(MM/DD/YYYY)

Name of Grant: Weatherization State Grant PY27

Name of Grantor: IL Dept. of Commerce and Economic Opportunity

Originating Entity: _____
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Community Services

Department Contact: Gina Strafford-Ahmed, Intake Administrator x6444
(Name, Title, and Extension)

Parent Committee: Human Services

Grant Amount Requested: \$ 609,599.00

Type of Grant: Formula
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: Yes No

Source of Grant: Federal State Private Corporate

If Federal, provide CFDA: _____ If State, provide CSFA: 420-70-0087



Grant Proposal Notification

1. Justify the department’s need for this grant.

The Weatherization State Grant is funded through the IL Department of Commerce and Economic Opportunity to DuPage County Community Services. The Weatherization Department utilizes 68% of this grant to provide client services by our contractors to low income households to install energy conservation measures to permanently reduce their energy bills. Conservation measures include, but are not limited to, air – sealing, insulation of attics and walls, caulking and weather-stripping, installation of high efficiency furnaces, and baseload measures such as Energy Star Refrigerators and LED light bulbs. In addition, the grant funding addresses Health& Safety concerns by providing smoke detectors, carbon monoxide detectors and proper ventilation to improve indoor air quality. Under the guidance of the Illinois Home Weatherization Assistance Program (IHWAP), these improvements are provided at no cost to income eligible households that would not otherwise be able to afford them. The remainder of the funding from this grant covers the cost of administering the Weatherization Program, including but not limited to staff salary and benefits, office and operating supplies, mileage and travel expense and training expense.

2. Based on the County’s [Strategic Plan](#), which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Community Well-Being for low income residents of DuPage County is significantly improved by reducing excessive energy burdens to those that struggle to cover their monthly utility bills. Health & Safety improvements create a safer and healthier home. Research has shown that the payback from these improvements are many- fold. Households that receive LIHEAP assistance are also weatherized which creates a synergistic effect and leverages funding.

Thriving Economy is stimulated in DuPage County by bringing in state funding to be spent at the local level for the cost of labor and material to install these measures by our Weatherization contractors. In addition, several of the Weatherization staff are residents of DuPage County and spend their earnings locally.

3. What is the period covered by the grant?

06/01/2026 to: 09/30/2027
(MM/DD/YYYY) (MM/DD/YYYY)

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
(MM/YY) (Duration)

4. Will the County provide “seed” or startup funding to initiate grant project? (Yes or No)

No

4.1. If yes, please identify the Company-Accounting Unit used for the funding _____

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)



Grant Proposal Notification

6. Does the grant allow for Personnel Costs? (Yes or No) Yes

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$1,190,569.00 Percentage covered by grant 12.5%

6.1.2. Total fringe benefits \$349,364.00 Percentage covered by grant 12.4%

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No):

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

5000-1555; 5000-1440

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): No

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time Part-time Temporary

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit?
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

Grant Proposal Notification

- 9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? _____
10. What amount of funding is already allocated for the project? \$0.00
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? _____
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): No
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$609,599.00



Grant Proposal Notifications

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

File #: 26-1393

Agenda Date: 5/5/2026

Agenda #: 8.D.



Grant Proposal Notification

GPN Number: 015-26
(Completed by Finance Department)

Date of Notification: 04/08/2026
(MM/DD/YYYY)

Parent Committee Agenda Date: 04/21/2026
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 04/10/2026
(MM/DD/YYYY)

Name of Grant: LIHEAP HHS Grant PY27

Name of Grantor: IL Dept. of Commerce and Economic Opportunity

Originating Entity: U.S. Dept. of Health and Human Services
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Community Services

Department Contact: Gina Strafford-Ahmed, Administrator x6444
(Name, Title, and Extension)

Parent Committee: Human Services

Grant Amount Requested: \$ 3,657,594.00

Type of Grant: Formula
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: Yes No

Source of Grant: Federal State Private Corporate

If Federal, provide CFDA: 93.568

If State, provide CSFA: 420-70-0090



Grant Proposal Notification

1. Justify the department’s need for this grant.

The Low Income Home Energy Assistance (LIHEAP) Program, funded through U.S. Department of Health and Human Services and the Supplemental Low Income Energy Assistance Fund (SLIHEAP) allows DuPage County to provide services to eligible low income households in DuPage County. The client assistance funds available through this grant program assist eligible households with the costs of home energy by incorporating fuel assistance, home weatherization, and other related measures in accordance with the current LIHEAP regulations and requirements.

2. Based on the County’s [Strategic Plan](#), which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Community Well-Being:

Collaborate with non-profits and use federal and state funds to help residents lead healthier, more independent lives.

3. What is the period covered by the grant?

10/01/2026 to: 08/31/2028
(MM/DD/YYYY) (MM/DD/YYYY)

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
(MM/YY) (Duration)

4. Will the County provide “seed” or startup funding to initiate grant project? (Yes or No)

No

4.1. If yes, please identify the Company-Accounting Unit used for the funding _____

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)



Grant Proposal Notification

6. Does the grant allow for Personnel Costs? (Yes or No) Yes

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$1,179,050.00 Percentage covered by grant 29%

6.1.2. Total fringe benefits \$423,871.00 Percentage covered by grant 31%

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): No

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

Liheap: 5000-1495 State

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): No

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time _____ Part-time _____ Temporary _____

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit? _____
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

Grant Proposal Notification

6.3. Does the grant award require the positions to be retained beyond the grant term? (Yes or No) No.

6.3.1. If yes, please answer the following:

6.3.1.1. How many years beyond the grant term? _____

6.3.1.2. What Company-Accounting Unit(s) will be used? _____

6.3.1.3. Total annual salary _____

6.3.1.4. Total annual fringe benefits _____

7. Does the grant allow for direct administrative costs? (Yes or No) Yes

7.1. If yes, please answer the following:

7.1.1. Total estimated direct administrative costs for project \$219,456.00

7.1.2. Percentage of direct administrative costs covered by grant 100%

7.1.3. What percentage of the grant total is the portion covered by the grant 6%

8. What percentage of the grant funding is non-personnel cost / non-direct administrative cost? 87%

9. Are matching funds required? (Yes or No): No

9.1. If yes, please answer the following:

9.1.1. What percentage of match funding is required by granting entity? _____

9.1.2. What is the dollar amount of the County's match? _____

Grant Proposal Notification

- 9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? _____
10. What amount of funding is already allocated for the project? _____
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? _____
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): _____
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$3,657,594.00



Grant Proposal Notifications

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

File #: 26-1394

Agenda Date: 5/5/2026

Agenda #: 8.E.



Grant Proposal Notification

GPN Number: 016-26
(Completed by Finance Department)

Date of Notification: 04/08/2026
(MM/DD/YYYY)

Parent Committee Agenda Date: 04/21/2026
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 04/10/2026
(MM/DD/YYYY)

Name of Grant: LIHEAP State Supplemental Grant PY27

Name of Grantor: IL Dept. of Commerce and Economic Opportunity

Originating Entity: _____
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Community Services

Department Contact: Gina Strafford-Ahmed, Administrator x6444
(Name, Title, and Extension)

Parent Committee: Human Services

Grant Amount Requested: \$ 4,699,341.00

Type of Grant: Formula
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: Yes No

Source of Grant: Federal State Private Corporate

If Federal, provide CFDA: _____ If State, provide CSFA: 420-70-0090



Grant Proposal Notification

1. Justify the department’s need for this grant.

The Low Income Home Energy Assistance (LIHEAP) Program, funded through U.S. Department of Health and Human Services and the Supplemental Low Income Energy Assistance Fund (SLIHEAP) allows DuPage County to provide services to eligible low income households in DuPage County. The client assistance funds available through this grant program assist eligible households with the costs of home energy by incorporating fuel assistance, home weatherization, and other related measures in accordance with the current LIHEAP regulations and requirements.

2. Based on the County’s [Strategic Plan](#), which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Community Well-Being:

Collaborate with non-profits and use federal and state funds to help residents lead healthier, more independent lives.

3. What is the period covered by the grant?

06/01/2026 to: 08/31/2027
(MM/DD/YYYY) (MM/DD/YYYY)

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
(MM/YY) (Duration)

4. Will the County provide “seed” or startup funding to initiate grant project? (Yes or No)

No

4.1. If yes, please identify the Company-Accounting Unit used for the funding _____

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)

Grant Proposal Notification

6. Does the grant allow for Personnel Costs? (Yes or No) _____

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$1,179,050.00 Percentage covered by grant 43%

6.1.2. Total fringe benefits \$423,871.00 Percentage covered by grant 45%

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): No

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

5000-1420 HHS

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): No

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time _____ Part-time _____ Temporary _____

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit? _____
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

Grant Proposal Notification

- 9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? _____
10. What amount of funding is already allocated for the project? _____
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? _____
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): _____
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$4,699,341.00