GPN Number: 025-25			С	Pate of Notification:	10/29/2025
(Completed by Finance Departmen	rtment) 11 /1 2 / 2 0 2 5		(MM/DD/YYYY)		
Parent Committee Agenda Date	. 11/12/20	025			11/05/2025
(Completed by Finance Departmen		YY)			(MM/DD/YYYY)
Name of Grant:	Archival Projects				
Name of Grantor: Name of Grantor: National Historical Publications and Records Commission (NHPRC)			on (NHPRC)		
Originating Entity:	(Name the entity	from which the	funding originates	s, if Grantor is a pass-t	hru entity)
County Department:	DuPage County Recorder				
Department Contact:	Justin Hester, Financial Analyst II x5450 (Name, Title, and Extension)				
Parent Committee:			JPS		
Grant Amount Requested:			\$ 150,000.	00	
Type of Grant:	(Competitive, Cor	ntinuation. Form	Project	t Payment, Other – P	 lease Specify)
ls this a new non-recurring Grar		✓ Yes	☐ No	er ayment, ether	case specify
Source of Grant:		✓ Federal	State	Private	Corporate
If Federal, provide CFDA:8	9.003	If State, provid	de CSFA:		

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1.	Justify the department's need for this grant.		
	This grant would be applied toward a digitization project aimed at our grantor and grantee books.		
	These books hold handwritten records dating back to the founding of the county. This grant would relieve a good portion of the financial burden the project is forecasted to cost.		
2.	Based on the County's <u>Strategic Plan</u> , which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.		
	This funding correlates directly with the County's Community Well-Being and Fiscal Responsibility		
	initiatives. This project will further enhance the community's connection with the County and the		
	Recorder's historical records. It is also a reflection of our dedication to fiscal responsibility by looking		
	for additional funding opportunities from outside our county.		
2	What is the paried asserted by the great? 07/01/2026 to 07/01/2028		

3.	What is the period covered by the grant?	07/01/2020	to: 07/01/2020
	and grant person construction of the grants	(MM/DD/YYYY)	to: (MM/DD/YYYY)
	3.1. If period is unknown, estimate the year the project or project ph	nase will begin and ant	icipated duration:
	3.1.1 and (MM/YY) (Duration)		
4.	Will the County provide "seed" or startup funding to initiate grant pr	roject? (Yes or No)	Yes
	4.1. If yes, please identify the Company-Accounting Unit used for the	e funding	1100-4310
5.	If grant is awarded, how is funding received? (select one):		
	5.1. Prior to expenditure of costs (lump-sum reimbursement upfront	t) 🗸	
	5.2. After expenditure of costs (reimbursement-based)		

6.	Does the grant allow for Perso	nnel Costs? (Yes or No)		Ye	
	6.1. If yes, what are the total part the entire term of the gradule.		ge benefit costs of personnel charging ovided benefits at 40%.	time to the grant f	for
	6.1.1. Total salary	\$0.00	Percentage covered by grant	0	
	6.1.2. Total fringe benefits	\$0.00	Percentage covered by grant	0	
	6.1.3. Are any of the Coun	ty-provided fringe benefi	ts disallowed? (Yes or No):	No	
	6.1.3.1. If yes, whi	ch ones are disallowed?			
	_	ot does not cover 100% of eficit be paid?	f the personnel costs, from what Com	pany-Accounting L	Jnit
	6.2. Will receipt of this grant r	equire the hiring of addit	tional staff? (Yes or No):	No	
	6.2.1. If yes, how many ne	w positions will be create	ed?		
	6.2.1.1. Full-time	Part-time _	Temporary		
	6.2.1.2. Will the he	eadcount of the new pos	ition(s) be placed in the grant account	ing unit?(Yes o	r No)
	6.2.1.2.1. If	no, in what Company-Ac	counting Unit will the headcount(s) be	•	. 140)

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, plo	ease 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 allo	w for direct administrative costs? (Yes or No)		Yes
	7.1. If yes, please a	answer the following:	4	
	7.1.1. Total est	imated direct administrative costs for project	\$0.00	
	7.1.2. Percenta	ge of direct administrative costs covered by grant		0
	7.1.3. What pe	rcentage of the grant total is the portion covered by the grant		0
3.	What percentage of	of the grant funding is non-personnel cost / non-direct administr	ative cost?	100%
Э.	Are matching fund	s required? (Yes or No):		No
	9.1. If yes, please a	answer the following:		
	9.1.1. What pe	rcentage of match funding is required by granting entity?		
	9.1.2. What is t	the dollar amount of the County's match?		

9.1.3.	What Company-Accounting Unit(s) will provide the matching requirement?		
10. What amo	unt of funding is already allocated for the project?	\$347,82	22.00
10.1.	If allocated, in what Company-Accounting Unit are the funds located?	1100-4310	
10.2.	Will the project proceed if the funding opportunity is not awarded? (Yes or No):	: .	Yes
11. What is th	e total project cost (Grant Award + Match + Other Allocated Funding)?	\$347,82	22.00