

**CHAMPAIGN COUNTY BOARD
COMMITTEE OF THE WHOLE – Finance/Policy/Justice Addendum**
County of Champaign, Urbana, Illinois
Tuesday, August 10, 2010 – 6:00 p.m.

*Lyle Shields Meeting Room, Brookens Administrative Center
1776 East Washington Street, Urbana, Illinois*

Page Number

VIII. Finance:

A. Budget Amendments & Transfers

9. Budget Amendment #10-00073

*1-3

Fund/Dept: 104 Early Childhood Fund – 610 Early Head Start Expansion
-ARRA-Odd

Increased Appropriations: \$140,500

Increased Revenue: \$179,000

Reason: Receipt of American Recovery & Reinvestment Act Funds to continue expanded Early Head Start services to 56 infants, toddlers, and pregnant women. This action is for prorated continuation of operations.

10. Budget Amendment #10-00074

*4-6

Fund/Dept: 104 Early Childhood Fund – 610 Early Head Start Expansion
-ARRA-Odd

Increased Appropriations: \$38,365

Increased Revenue: \$0

Reason: Additional appropriations for Dept. 610.

IX. Policy, Personnel, & Appointments:

D. Other Business

3. Auditor's Request for Exception to the Travel Policy

*7-10

4. Mental Health Board Executive Director's Request to Submit New Position to Job Content Evaluation Committee for Review & Recommendation of Classification, Description, & Salary Range Assignment

*11

FUND 104 EARLY CHILDHOOD FUND

DEPARTMENT 610 EARLY HDST EXPSN-ARRA-ODD

INCREASED APPROPRIATIONS:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
See attached				
TOTALS	0	0	140,500	140,500

INCREASED REVENUE BUDGET:

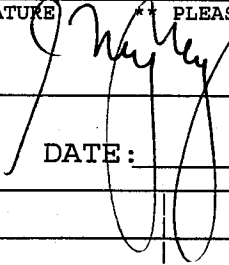
ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
See attached				
TOTALS	0	0	179,000	179,000

EXPLANATION: RECEIPT OF AMERICAN RECOVERY & REINVESTMENT ACT FUNDS TO CONTINUE EXPANDED EARLY HEAD START SERVICES TO 56 INFANTS, TODDLERS, AND PREGNANT WOMEN. THIS ACTION IS FOR PRORATED CONTINUATION OF OPERATIONS.

DATE SUBMITTED:

8/5/10

AUTHORIZED SIGNATURE



** PLEASE SIGN IN BLUE INK **

APPROVED BY BUDGET & FINANCE COMMITTEE:

DATE:

INCREASED APPROPRIATIONS:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
104-610-522.44 EQUIPMENT LESS THAN \$1000	0	0	500	500
104-610-522.91 LINEN & BEDDING	0	0	100	100
104-610-522.93 OPERATIONAL SUPPLIES	0	0	450	450
104-610-522.96 SCHOOL SUPPLIES	0	0	1,500	1,500
104-610-533.01 AUDIT & ACCOUNTING FEES	0	0	1,100	1,100
104-610-533.02 ARCHITECT FEES	0	0	50	50
104-610-533.06 MEDICAL/DENTAL/MENTL HLTH	0	0	100	100
104-610-533.07 PROFESSIONAL SERVICES	0	0	25	25
104-610-533.12 JOB-REQUIRED TRAVEL EXP	0	0	500	500
104-610-533.17 FIELD TRIPS / ACTIVITIES	0	0	15	15
104-610-533.20 INSURANCE	0	0	10	10
104-610-533.29 COMPUTER SERVICES	0	0	450	450
104-610-533.30 GAS SERVICE	0	0	3,000	3,000
104-610-533.31 ELECTRIC SERVICE	0	0	2,750	2,750
104-610-533.32 WATER SERVICE	0	0	150	150
104-610-533.33 TELEPHONE SERVICE	0	0	3,000	3,000
104-610-533.34 PEST CONTROL SERVICE	0	0	50	50
104-610-533.36 WASTE DISPOSAL & RECYCLNG	0	0	400	400
TOTALS	0	0	14,150	14,150

INCREASED REVENUE BUDGET:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
TOTALS	0	0	0	0

FUND 104 EARLY CHILDHOOD FUND

DEPARTMENT 610 EARLY HDST EXPSN-ARRA-ODD

INCREASED APPROPRIATIONS:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
See attached				
TOTALS	0	0	38,365	38,365

INCREASED REVENUE BUDGET:

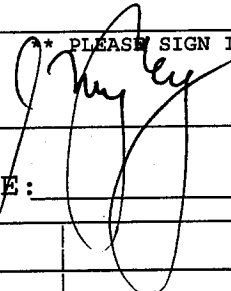
ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
None: from Fund Balance				
TOTALS	0	0	0	0

EXPLANATION: ADDITIONAL APPROPRIATIONS FOR DEPT. 610

DATE SUBMITTED:

8/5/10

AUTHORIZED SIGNATURE



** PLEASE SIGN IN BLUE INK **

APPROVED BY BUDGET & FINANCE COMMITTEE:

DATE:

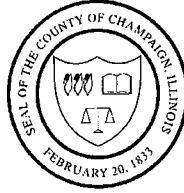
INCREASED APPROPRIATIONS:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
104-610-533.40 AUTOMOBILE MAINTENANCE	0	0	25	25
104-610-533.42 EQUIPMENT MAINTENANCE	0	0	25	25
104-610-533.45 NON-CNTY BLDG REPAIR-MNT	0	0	300	300
104-610-533.50 FACILITY/OFFICE RENTALS	0	0	10,000	10,000
104-610-533.51 EQUIPMENT RENTALS	0	0	175	175
104-610-533.52 OTHER SERVICE BY CONTRACT	0	0	150	150
104-610-533.70 LEGAL NOTICES, ADVERTISING	0	0	100	100
104-610-533.84 BUSINESS MEALS/EXPENSES	0	0	15	15
104-610-533.85 PHOTOCOPY SERVICES	0	0	500	500
104-610-533.87 INDIRECT COSTS / OVERHEAD	0	0	1,300	1,300
104-610-533.91 LAUNDRY & CLEANING	0	0	100	100
104-610-533.92 CONTRIBUTIONS & GRANTS	0	0	50	50
104-610-533.93 DUES AND LICENSES	0	0	50	50
104-610-533.95 CONFERENCES & TRAINING	0	0	7,000	7,000
104-610-534.11 FOOD SERVICE	0	0	50	50
104-610-534.46 SEWER SERVICE & TAX	0	0	100	100
104-610-534.58 LANDSCAPING SERVICE/MAINT	0	0	25	25
104-610-534.59 JANITORIAL SERVICES	0	0	8,000	8,000
TOTALS	0	0	27,965	27,965

INCREASED REVENUE BUDGET:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
TOTALS	0	0	0	0

TONY FABRI
COUNTY AUDITOR



1776 EAST WASHINGTON
URBANA, ILLINOIS 61802
TELEPHONE (217) 384-3763
FAX (217) 384-1285

OFFICE OF THE AUDITOR
CHAMPAIGN COUNTY, ILLINOIS

TO: Committee of the Whole/Policy Committee members
FROM: Tony Fabri
DATE: August 5, 2010
RE: Requested Exception to Travel Policy; Payment Voucher #104-01898

MEMORANDUM

The County's Travel Policy does not allow meal reimbursements for employees attending conferences, where meal costs are included within the conference dues. I am writing to request an exception to that policy, on behalf of a HeadStart employee who recently attended a conference, but due to health restrictions, had to provide her own meals.

Before leaving for the conference, the employee contacted conference organizers, asking if they could accommodate her requirement for special meals. Organizers responded that they could not, and recommended she bring her own food. (They did not offer to refund the portion of her dues covering meals.)

The employee had to purchase food to meet her dietary restrictions while attending the conference, and has requested reimbursement for those meal expenses.

While the Travel Policy does not allow reimbursement when meal costs are included in conference dues, this employee had legitimate health reasons that required her to purchase food beyond what was offered at the conference. Approval of the Policy Committee is required for any exception to the Travel Policy, which is what I am asking for in this case:

Approval of an exception to the Champaign County Travel Policy to allow payment of meal reimbursements, in accordance with voucher #104-01898.

No. 104-01898

FY: 2009/2010

Date 07/28/2010

Department EARLY CHILDHOOD FUND

{ County Auditor Use Only }

Appropriation Acct. No. 104-609-533.95

{ Vendor No. 604535 }

Payment Due Date _____ Advance Check Needed _____

Terms & Conditions _____

Quantity	Full Description of Required Purchase/Or Service Rendered	Unit Price	Total
	CONFERENCE AND TRAINING EXPENSES FOR THE PERIOD OF 06/20/10-06/27/10 FOR EDWINA CALDWELL FOR THE PITC TRAINING IN BERKELY, CA FOR THE EARLY HEAD START EXPANSION ARRA PROGRAM.		334.00
		Total:	334.00

V { CALDWELL, EDWINA
 E {
 N { RPC/HEAD START
 D {
 O { 1776 E WASHINGTON
 R { URBANA, IL 61802-0000

The items listed above are a proper charge against the appropriation shown hereon and the service or materials are to be used exclusively for the purpose against which items are charged.

**** PLEASE SIGN IN BLUE INK ****


Department Authorized Signature

Date Goods/Services Received _____

Attn: _____

County Auditor Use Only

Funds Approved _____ Auditor _____ A/P Check Date _____

RECEIVED

JUL 29 2010

CHAMPAIGN COUNTY
AUDITORS OFFICE

10

10

COUNTY
OFFICE

CHAMPAIGN COUNTY REGIONAL PLANNING COMMISSION

Closure

TRAVEL VOUCHER

Period Beginning 06/20/10 Period Ending 06/27/10 Employee Name Edwina Caldwell

ITINERARY				ROOM	MEALS			OTHER EXPENSES					
Date	From	to	Return	Dept. #	Miles	Amount	Amount	Morning	Noon	Evening	Itemize	Amount	Reason
06/20/10	Rantoul	to	Berkeley California	608 609	609				18.00	31.00	x B-L-D Diabetic		Meals in California (training)
06/21/10	Berkeley California			608 609				12.00	18.00	31.00	x B-L-D Diabetic		Meals in California (training)
06/22/10	Berkeley California			608 609				12.00	18.00	31.00	x B-L-D Diabetic		Meals in California (training)
06/23/10	Berkeley California			608 609				12.00	18.00	31.00	x B-L-D Diabetic		Meals in California (training)
06/24/10	Berkeley California			608 609				12.00	18.00	31.00	x B-L-D Diabetic		Meals in California (training)
06/25/10	Berkeley California			608 609				12.00	18.00	31.00	x B-L-D Diabetic		Meals in California (training)
06/26/10	Berkeley California			608 609				12.00	18.00	31.00	x B-L-D Diabetic		Meals in California (training)
06/27/10	Berkeley California	to	Rantoul	608 609			TRAVEL	12.00	18.00	31.00	x B-L-D Diabetic		Meals in California (training)
												26.00	Baggage Fee
												25.00	Baggage Fee
													Meals not an advance
								84.00	126.00	124.00			
									18.00	31.00		50.00	
TOTALS BY COLUMN					0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	

Total Claims 334.00 \$0.00- 609 - 533.95 - 334.00

Employee Edwina Caldwell Date: 7/19/10 Supervisor Kelly Russell Date: 7/26/10 Director MJ Roden Date: 7-28-10

I HEREBY CERTIFY WITH MY SIGNATURE TO THE FULL EXPENDITURES INCURRED WHILE TRAVELING AND REPRESENTED HEREIN. *Please hold for staff pick up

Linda Dyer

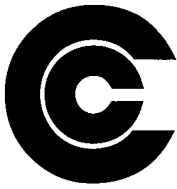
From: Edwina Caldwell
Sent: Friday, June 18, 2010 9:06 AM
To: Linda Dyer
Subject: FW: Special Meal Requests
Follow Up Flag: Follow up
Flag Status: Red

From: Karla Nygaard [mailto:knygaard@wested.org]
Sent: Thursday, June 17, 2010 5:07 PM
To: Edwina Caldwell
Subject: Special Meal Requests



Due to the size of the group, the hotel can only accommodate limited special meal requests, therefore we recommend you bring food from home to supplement your meals and snacks.

Karla Nygaard
Conference Coordinator
WestED
180 Harbor Drive, Ste. 112
Sausalito, CA 94965
415-289-2311
knygaard@wested.org



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

CHAMPAIGN COUNTY BOARD FOR CARE AND TREATMENT OF PERSONS WITH A DEVELOPMENTAL DISABILITY

DATE: August 6, 2010
TO: Deb Busey, Champaign County Administrator
FROM: Peter Tracy, Executive Director *PWT/llc*
SUBJECT: Creation of a new Position: **Developmental Disabilities Contract Coordinator**

The purpose of this memorandum is to seek a formal review by the Job Content Evaluation Committee of a proposed new position with the Champaign County Mental Health Board (CCMHB). I am recommending the creation of a new position to be titled as "Developmental Disabilities Contract Coordinator."

Rationale and Justification:

The need for the Developmental Disabilities Contract Coordinator is a reflection of our emphasis and focus on Developmental Disabilities programs and services funded by the Developmental Disabilities Board and the Mental Health Board. Since the passage of the 2004 referendum which created the Champaign County Developmental Disabilities Board (CCDDB), we have seen a dramatic shift in the level of total funding from both boards that is dedicated to developmental disabilities. Following the referendum, we reorganized the office to include the Associate Director for Developmental Disabilities, but we did not add any new positions (i.e., headcount). It has now become abundantly clear that we need an additional position to fully meet our statutory and administrative responsibilities. Upon approval, this new position will work in conjunction with and under the supervision of the Associate Director for Developmental Disabilities.

Summary of Action Requested:

Send Proposed New Position to Job Content Evaluation Committee for review and recommendation of classification, description, and salary range assignment.

As executive director of the CCMHB and the CCDDB, it is my judgment that this proposed position will meet the needs of my office. I look forward to the opportunity to meet with the Job Content Evaluation Committee to review this recommendation as soon as possible. Thank you in advance for your consideration.