

CHAMPAIGN COUNTY BOARD COMMITTEE OF THE WHOLE

Finance/Policy, Personnel, & Appointments/Justice & Social Services Agenda County of Champaign, Urbana, Illinois Tuesday, August 13, 2013 – 6:00 p.m.

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

[.	<u>Call '</u>	To Order	
II.	Roll (<u>Call</u>	
III.		oval of Minutes ommittee of the Whole Minutes – June 11, 2013	1-12
IV.	Appr	oval of Agenda/Addenda	
V.	<u>Publi</u>	c Participation	
VI.	Comi	<u>nunications</u>	
VII.	1 2 3 4 5	nnual Fees Review: Law Library Fee Courts Automation Fee (to be distributed)	13-18 19-25
		Champaign County Municipal Aggregation Program Approval of Supplier Contract for Champaign County Electricity Aggregation Program	26-29
		<u>Monthly Reports</u> – June & July 2013 - Reports are available on the Treasurer's webpage at http://www.co.champaign.il.us/TREAS/reports.htm	
	2.	Resolution Authorizing the Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel Number 23-19-13-202-009	30
	3.	Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #46-21-07-326-007	31
	4.	Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #46-21-07-183-009	32
	5.	Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #06-10-21-400-004	33

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	6. Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #02-01-36-429-020	34
	7. Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #42-20-12-183-005	35
	8. Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #29-26-26-489-002	36
	9. Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #26-30-09-178-005	37
	10. Resolution Authorizing the Execution of a Deed of Conveyance of County's Interest Or Cancellation of the Appropriate Certificate of Purchase on Real Estate, Permanent Parcel #20-09-02-177-012	38
	11. Resolution Authorizing the County Board Chair to Assign a Mobile Home Tax Sale Certificate of Purchase, Permanent Parcel #30-061-0020	39
	12. Resolution Authorizing the County Board Chair to Assign a Mobile Home Tax Sale Certificate of Purchase, Permanent Parcel #30-059-0005	40
D.	 <u>Auditor</u> 1. <u>Monthly Reports</u> – June & July 2013 Reports are available on the Auditor's webpage at http://www.co.champaign.il.us/auditor/monthlyreports.htm 	ge
	2. Request for Creation of a Full-time Accountant Position	41
	3. Budget Amendment #13-00041 Fund/Dept: 080 General Corporate-020 Auditor Increased Appropriations: \$4,475 Increased Revenue: None: from Fund Balance Reason: Additional Funds Needed for Staffing Change from Part-time Accountant to Full-time Position	42
E.	. Monthly Nursing Home Report	43-67
F.	 Budget Amendments/Transfers Budget Amendment #13-00040 Fund/Dept: 090 Mental Health-053 Mental Health Board Increased Appropriations: \$61,523 Increased Revenue: None: from Fund Balance Reason: Funds Allocated to Address Identified Community Needs Including Expansion 	68

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of Programs & Services for People with Mental Illness & Substance Abuse Disorders Who are Also Involved with the Criminal Justice System. Funds are Being Transferred from the Community Mental Health Fund Balance

2. Budget Amendment #13-00042

Fund/Dept: 303 Court Complex Construction Fund-010 County Board

69

Increased Appropriations: \$179,000

Increased Revenue: None: from Fund Balance

Reason: To Appropriate Expenditure for the Courthouse Masonry Repair Project as Documented by County Board Resolution 8499: Funds are Appropriated from the

Available Fund Balance in the Courts Construction Fund

G. Children's Advocacy Center

1. Request Approval of Application & If Awarded, Acceptance of Continued Grant Funding from the Illinois Criminal Justice Information Authority-#212216

70-123

H. County Administrator

- 1. General Corporate Fund FY2013 Budget Report (to be distributed)
- 2. General Corporate Fund FY2013 Budget Change Report (to be distributed)
- 3. Schedule for Legislative Budget Hearings: August 26-28, 2013

124

I. <u>Inter-Committee Memo from County Facilities Committee Regarding Funding of Capital Improvement Plan</u>

125-131

- J. Other Business
- K. Chair's Report
- L. Designation of Items to be Placed on the Consent Agenda

VIII. Justice & Social Services:

- A. <u>Monthly Reports</u> All reports are available on each department's webpage through the department reports page at: http://www.co.champaign.il.us/COUNTYBD/deptrpts.htm
 - 1. Animal Control May & June 2013
 - 2. Emergency Management Agency June & July 2013
 - 3. Head Start June 2013
 - 4. Probation & Court Services May and June 2013 reports; 2nd Quarter Statistical Report
 - 5. Public Defender June 2013
 - 6. Veterans' Assistance Commission June & July 2013
- B. Other Business
- C. Chair's Report

IX. Policy, Personnel, & Appointments:

A. Appointments/Reappointments –(Italics indicate incumbent)

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<u>Drainage Districts – 1 Vacancy Each-Term 9/1/2013-8/31/2016</u> 1. Beaver Lake – <i>Joseph Irle</i>	132
2. Blackford Slough – <i>Valerie Rogers</i>	133
3. Conrad & Fisher – <i>Richard Rayburn</i>	134
4. Kankakee – <i>James Boland</i>	135
5. Kerr & Compromise – <i>Carl Park</i>	133
6. Lower Big Slough- <i>Frank Ehler</i>	137
7. South Fork – <i>Ken Decker</i>	138
8. #10 Town of Ogden – <i>Leon Bluhm</i>	139
9. Okaw – Steven Stierwalt	140
10. Owl Creek – John Nelson	141
11. Pesotum Slough – Dennis Butler	142
12. Prairie Creek – <i>Arlen Buhr</i>	143
13. Raup – Kenneth T. Schmidt	144
14. Salt Fork – <i>James Kirk</i>	145
15. Sangamon & Drummer- William Siegfried	146
16. Silver Creek – <i>Steve Moser</i>	147
17. St. Joseph #3 – Michael Hastings	148
18. St. Joseph #6 – Gary Gannon	149
19. Two Mile Slough – Jerry Heinz	150
20. Union DD of Stanton & Ogden Townships – Ray Aden	151
21. St. Joseph #4 – Francis Osterbur	152
22. Triple Fork – <i>Cody Cundiff</i>	153
23. Union #1 Philo & Crittenden – Jerry Thinnes	154
24. Union #2 St. Joseph & Ogden – William Wilson	155

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	25. Upper Embarras River Basin – Dudley Carroll	156
	26. Union DD #1 of Philo & Urbana – Donald Rice	157
	27. Willow Branch – Mrs. Marion Wagner	158
	28. Wrisk – Dennis Riggs	159
	29. Longbranch Mutual – Dave Mennenga	160
	30. #3 DD South Homer & Sidney – Kevin Wienke	161
	 31. Nelson Moore Fairfield- 2 Terms a) <i>John Heiser</i> – Term 9/1/2013-8/31/2014 b) <i>David Bright</i> – Term 9/1/2013-8/31/2016 	162-165
	32. Fountain Head – 1 Vacancy-Term 9/1/2013-8/31/2016 Applicants: • Marc Shaw John Huston	166-169
	 33. Appointment of County Board Alternate to Labor/Management Health Insurance Committee Astrid Berkson 	170
	B. County Clerk 1. June & July 2013 Reports	171-172
	 C. County Administrator Administrative Services June & July 2013 Reports Job Content Evaluation Committee Recommendation for: Auditor's Office Administrative Secretary Circuit Clerk Jury Coordinator IT Department Software/Reporting Analyst 	173-178 179-180 181-185 186-190
	D. Other Business	
	E. Chair's Report	
	F. <u>Designation of Items to be Placed on the County Board Consent Agenda</u>	
Х.	Finance A. County Administrator 1. Job Content Evaluation Committee Recommendation for:	

181-185 186-190

a) Circuit Clerk Jury Coordinator

b) IT Software /Reporting Analyst

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c) Financial Impact Report on Proposed Job Content Committee Recommendations

191-192

XI. Other Business

*Closed session pursuant to 5 ILCS 120/2 (c) 1 to consider the employment, compensation, discipline, performance, or dismissal of an employee.

XII. Adjournment

CHAMPAIGN COUNTY BOARD 1 COMMITTEE OF THE WHOLE MINUTES 2 3 4 5 Finance/ Justice & Social Services/Policy, Personnel, & Appointments 6 Tuesday, June 11, 2013 7 Lyle Shields Meeting Room 8 9 **MEMBERS PRESENT:** Christopher Alix, Astrid Berkson, Lloyd Carter, Lorraine 10 Cowart, Aaron Esry, Stan Harper, Josh Hartke, Stan James, John Jay, Jeff Kibler, Alan Kurtz, Ralph Langenheim, Jim McGuire, 11 Diane Michaels, Max Mitchell, Pattsi Petrie, James Quisenberry, 12 13 Michael Richards, Giraldo Rosales, Jon Schroeder, Rachel 14 Schwartz 15 16 **MEMBERS ABSENT:** Gary Maxwell 17 18 Tim Breen (Information Technology Manager), Deb Busey **OTHERS PRESENT:** 19 (County Administrator), John Farney (Auditor), Barb Frasca 20 (Recorder), Gordy Hulten (County Clerk), Andy Rhodes (Information Technology Director), Kay Rhodes (Administrative 21 22 Assistant), Dan Walsh (Sheriff), Dan Welch (Treasurer) 23 24 CALL TO ORDER 25 26 Kurtz called the meeting to order at 6:02 p.m. 27 28 **ROLL CALL** 29 30 Rhodes called the roll. Alix, Berkson, Carter, Cowart, Esry, Harper, Hartke, James, Jay, 31 Kibler, Langenheim, McGuire, Michaels, Mitchell, Petrie, Quisenberry, Richards, Rosales, Schroeder, Schwartz, and Kurtz were present at the time of roll call, establishing the presence 32 33 of a quorum. 34 35 **APPROVAL OF MINUTES** 36 37 **MOTION** by James to approve the May 14, 2013 Committee of the Whole minutes; 38 seconded by Rosales. Motion carried with unanimous support. 39 40 APPROVAL OF AGENDA/ADDENDA

removed VII-F-1 from the agenda. Motion carried with unanimous support.

MOTION by Rosales to approve the agenda/addenda; seconded by James. Kurtz

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PUBLIC PARTICIPATION

Sarah Livesay spoke regarding the Champaign County Forest Preserve District Board appointment. Amy Armstrong, Jennifer Knapp, Linda Tortorelli, Joyce Dill, Sheila Krein, and Pam Klassert spoke in favor of the expansion of the Developmental Disabilities Board. Sue Suter spoke regarding the appointment to the Developmental Disabilities Board.

COMMUNICATIONS

 Kurtz said Maxwell could not attend the meeting due to illness. He also pointed out a communication on board members desks from Mr. Phillip Krein regarding the DDB expansion. Hartke noted that he attended a recent press conference in Champaign regarding the gang violence in the Garden Hills area and said he reassured city council members that the County Board would look for opportunities to apply resources to ensure that our community is safe.

Petrie stated she had arranged to have a rainfall simulator available for demonstrations to County Board members and the public on June 25, 3:30 p.m. to 6:00 p.m., at the Brookens Administrative Center.

POLICY, PERSONNEL, & APPOINTMENTS

Appointments/Reappointments

Quisenberry noted the resignation of Steve O'Connor from the Community Action Board and the resignation of Lacy Taylor from the Broadlands-Longview Fire Protection District Board.

MOTION by Kurtz to recommend County Board approval of a resolution appointing James Jones to the Broadlands-Longview Fire Protection District for an unexpired term ending 4/30/2016; seconded by Alix.

Petrie pointed out that according to the statutes, it was possible to increase the size of the Fire Protection Districts and hoped the County Board would consider doing this sometime in the future. Berkson stated it was difficult to maintain three members on many boards and the possibility of appointing five members was unlikely. **Motion carried with unanimous support.**

MOTION by Kurtz to recommend County Board approval of a resolution appointing Sarah Livesay to the Champaign County Forest Preserve District Board for a term July 1, 2013-June 30, 2018; seconded by Schroeder. **Motion carried with unanimous support.**

OMNIBUS MOTION by Kurtz to recommend County Board approval of resolutions appointing David Thies and Betty Segal to the County Board of Health for terms July 1, 2013-June 30, 2016; seconded by Esry.

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Petrie was concerned that the Board of Health did not have the number of members called for and wondered if this affected the legality of any actions taken by the members. Kurtz did not see any issues as along as a quorum was established. Kurtz said they have full-filled the statute requirements of appointing certain professionals as members of the Board of Health and now were seeking interested members of the public, particularly those with experience in the mental health field. **Motion carried with unanimous support.**

MOTION by Kurtz to recommend County Board approval of a resolution appointing Sue Suter to the Developmental Disabilities Board, term July 1, 2013-June 30, 2016; seconded by Kibler. Kurtz noted that all the applicants were extremely qualified and would have liked to select all of them.

Richards asked how Ms. Suter was an improvement over the well-regarded incumbent Joyce Dill. Kurtz responded that he felt it was important to bring Ms. Suter's expertise onto the board. **Motion carried with unanimous support.**

MOTION by Kurtz to recommend County Board approval of a resolution appointing Andrew Quarnstrom to the Public Aid Appeals Committee for an unexpired term ending 11/30/2013; seconded by Esry. Kurtz explained that Quarnstrom was the newly elected Township Supervisor for the City of Champaign Township and township supervisors are chosen for service on this committee. Petrie stated there are supposed to be five members and only three were currently listed. She asked why no vacancies were listed on the website.

Kurtz explained that the statute requires that not more than three members may be of the same political party. Quarnstrom would be the third democrat. Ms. Mayol who is also a democrat would need to serve as an alternate. Kurtz said the committee currently only has one republican and they have not received any applications from a republican township supervisor.

Cowart asked if someone else would be appointed when this term ends on November 30, 2013. Busey explained that in order to be considered for this particular committee the applicant must be a Township Supervisor. Busey further explained that the only reason there were two vacancies was that the incumbents had not been re-elected thus they no longer qualified for the committee appointments. **Motion carried.**

MOTION by Kurtz to recommend County Board approval of a resolution appointing Michelle Mayol as an alternate on the Public Aid Appeals Committee for an unexpired term ending 11/30/2014; seconded by Esry. **Motion carried.**

OMNIBUS MOTION by Kurtz to recommend County Board approval of resolutions appointing Stacey Gross and Robin Hall to the Fine Arts Review Committee for the Parkland Community College Student Services Center Project; seconded by James. **Motion carried with unanimous support.**

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MOTION by Kurtz to recommend County Board Approval of a resolution appointing Robin Hall to the Fine Arts Review Committee for the Parkland Community College Applied Technology Center Project; seconded by James. **Motion carried with unanimous support.**

MOTION by Kurtz to recommend County Board approval of a resolution appointing Marlene Cherry to the Stearns Cemetery Board, term July 1, 2013-June 30, 2019; seconded by Kibler. **Motion carried with unanimous support.**

County Clerk

MOTION by Mitchell to receive the May 2013 and the Semi-Annual reports and place them on file; seconded by Jay. **Motion carried with unanimous support.**

Developmental Disabilities Board Expansion

MOTION by Alix to expand the number of Developmental Disabilities Board members from three (3) to five (5); seconded by Hartke.

Kibler asked if were possible to specify the qualifications required for the two (2) additional members to create peer diversity, for example age or type of disability the person is associated with, in order to be considered for appointment to the Developmental Disabilities Board. Quisenberry suggested communicating the County Board's intent on diversity and then voting on the appointments with this factor in mind. Kurtz supported the expansion of the DDB because it would allow for more diversity. James stated that any board is only as good as the members who serve on it.

Richards pointed out this issue had come before the County Board previously and it was voted down. He asked what new information had been presented to change the County Board's decision now. He explained that the increase in the number of members would then allow two (2) members to meet to discuss DDB business in private. He took issue with the idea that forty percent of the board would be allowed to conduct business this way because this board was in charge of a budget of \$3.2 million. Richards stated the DDB holds monthly meetings where business can be conducted in the public eye.

Alix said this was a unique circumstance in which more than five (5) qualified applicants were interested in serving on this board and this was somewhat of a rarity. He added that the DDB deals with a wide variety of disabilities and a larger more diverse board would be an asset. **Motion carried.**

County Administrator

MOTION by Mitchell to receive the Administrative Services May 2013 report and place it on file; seconded by Esry. **Motion carried with unanimous support.**

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OMNIBUS MOTION by Jay to recommend to the Finance Committee approval of classifications of the States Attorney Chief of Civil Division to Grade Range L; Senior Executive Secretary position to Grade Range I; and Office Manager position to Grade Range H; seconded by Berkson.

Petrie asked what the cost of benefits would be to the County and how the positions would be funded. Busey said although a position was added, the States Attorney also eliminated a position so the number of positions did not change and the personnel budget did not change, and there will be no impact on fringe benefit costs because IMRF and Social Security are calculated on total salary dollars; health and unemployment insurance are based on the number of employees. **Motion carried.**

MOTION by James to recommend to the Finance Committee approval of the classification of the Deputy County Administrator of Finance to Grade Range M; seconded by Berkson.

Petrie asked where the funding would come from for this position. Busey said the funding would come from the General Corporate Fund and this may mean limiting spending in other areas in order to ensure appropriate staffing for the operation and administration of county government. Hartke supported the creation of the position. James supported the position in order to have more than one person knowledgeable about the County's budget and operations, as well as bring some relief to the County Administrator. **Motion carried.**

Quisenberry explained that Busey requested that two (2) County Board members assist in the search for the Deputy County Administrator of Finance. Quisenberry nominated Alix, Chair of Finance and Kibler, Vice-Chair of Policy, Personnel, and Appointments to participate on the Deputy County Administrator of Finance Search Committee.

Other Business

There was no other business.

Chair's Report

There was no Chair's report.

Designation of Items for the County Board Consent Agenda

Items A3-6, A9-11 were designated for the County Board Consent Agenda.

<u>Determination on Whether to Cancel the July 9, 2013 Policy, Personnel, and Appointments</u> Committee meeting

Hartke felt this ignored the public interest and sent a bad message. James did not have an issue canceling the meetings in July because this had been done for many years without

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incident. Langenheim said it was unreasonable to ask County Board members to attend three meetings a month without break for an entire year. Cowart and Carter supported the cancellation. Quisenberry suggested they wait to decide until they heard from the Finance and Justice Committees.

FINANCE

229 <u>Treasurer</u>

MOTION by James to receive the Treasurer's May 2013 report and place on file; seconded by Jay. **Motion carried with unanimous support.**

Auditor

MOTION by James to receive the Auditor's May 2013 report and place on file; seconded by McGuire. **Motion carried with unanimous support.**

Nursing Home Monthly Report

Hartke gave an update of recent initiatives taken by the Board of Directors. He explained the Board of Directors is looking at ways in which to measure nursing home performance in quality of care, resident satisfaction, and food quality. The Board of Directors would also begin having various units within the nursing home present reports at the meetings. He explained this would assist them with their own internal review in preparation for the Illinois Department of Public Health reviews.

MOTION by James to receive the Nursing Home monthly report and place on file; seconded by Langenheim. **Motion carried with unanimous support.**

Budget Amendments/Transfers

MOTION by McGuire to recommend County Board approval of **Budget Amendment** #13-00025 for Fund/Dept: 614 Recorders Automation Fund-023 Recorder with increased appropriations of \$11,983 and no increased revenue to hire a full-time employee to enable a training period before a long-time employee retires; seconded by Kurtz.

James felt 6-months training was a long time and a normal training period was 30-60 days. Frasca explained they have been under-staffed since 2004. She said the Sangamon County Recorder's office, which serves a slightly smaller county population, has eleven (11) employees and she employs four (4). Frasca stated the new hire would need to learn how to cull nearly three-hundred (300) different types of documents for the correct and pertinent information to be indexed. In addition to the use of the computer systems, this employee would need to learn how to search for records manually by utilizing the books stored in the vault.

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Discussion followed regarding the length of time requested and why a request for an additional position was not made instead. Frasca said she had come to the Board numerous times before to request additional positions and been turned down.

Busey explained that the Recorder's office is one of the best technologically developed Champaign County offices and this is probably one of the reasons why the office can function with a staff less than half the size of a similar sized county. Busey said the largest area of growth for the County is in real estate transactions, evidenced in the monthly budget projection reports, which means the Recorder's office is very busy. Busey explained the retiring employee has been with the County for over a decade and is extremely competent in her work. Busey said during the first year of employment a new employee will encounter different tasks every day that will need explanation, therefore an employee who receives six-months of training will be much more reliable than one who receives the standard 30-day training.

Richards stated that the funding for this position would come from the Recorder's Automation Fund and not from the General Corporate Fund, so the County Board should grant the request.

McGuire said that the position request was not only to allow for ample training, but also to assist with the work created from the returning real estate market and he supported it.

Schroeder hoped that the Board would not attempt to micro-manage an elected official's department and allow her to do the job she was elected to do.

Hartke stated that his main issue with the request was the amount of time. Schwartz pointed out the Board had approved the spending of larger amounts on other items and this funding was coming out of the department head's own fund and not General Corporate so they should not attempt to micro-manage her decisions. Schwartz would support the request.

Alix summarized the issue for the Board. He said an elected official, who has been in office since 1996, has come to the County Board with a request for a relatively small amount of money to run her office the way she chooses using her own funds. **Motion carried.**

OMNIBUS MOTION by McGuire to recommend County Board approval of **Budget Amendment** #13-00026 for Fund/Dept: 675 Victim Advocacy Grant-ICJIA-041 States Attorney with increased appropriations of \$7,917 and increased revenue of \$6,146 because additional revenue from States Attorney budget to meet Victim Advocacy Grant expenditures and increase in expenditure due to change in employee grant during grant period and recommend County Board approval of **Budget Transfer** #13-00004 for Fund/Dept: 080 General Corporate-041 States Attorney for a total amount of \$6,146 necessary for Victim Advocacy Program grant match; seconded by Mitchell. **Motion carried with unanimous support.**

MOTION by Kurtz to recommend County Board approval of **Budget Amendment** #13000027 for Fund/Dept: 085 County Motor Fuel Tax-060 Highway with increased

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appropriations of \$712,860 and no increased revenue, from fund balance to cover the final payment on the Windsor Road Project per January 18, 2008 Intergovernmental Agreement between the City of Urbana and Champaign County and amended by the June 18, 2009 amendment to the agreement; seconded by Jay. **Motion carried with unanimous support.**

OMNIBUS MOTION by Mitchell to recommend County Board of **Budget Amendment** #13-00028 for Fund/Dept: 075 Regional Planning Commission-737 CRIS rural Job Access with increased appropriations of \$60,000 and increased revenue of \$60,000 due to receipt of new federal and state grant funding, CRIS Rural Transit will establish a new JARC Shuttle Service between Rantoul and Champaign-Urbana and **Budget Amendment** #13000029 for Fund/Dept: 075 Regional Planning Commission-738 CRIS NFP Medical Access with increased appropriations of \$95,000 and increased revenue of \$95,000 to expand current transportation services by providing medical shuttle to rural areas in Champaign County; seconded by Cowart. **Motion carried with unanimous support.**

MOTION by Cowart to recommend County Board approval of **Budget Amendment** #13-00030 for Fund/Dept: 075 Regional Planning Commission-735 DOT-FTA-MYTRIP2 with increased appropriations of \$65,000 and increased revenue of \$65,000 to a establish a planning process to better utilize the transit toolkit and assist transit providers in a 12 county region with technical resources; seconded by James. **Motion carried with unanimous support.**

MOTION by Schroeder to recommend County Board approval of **Budget Amendment #13-00031** for Fund/Dept: 080 General Corporate-071 Public Properties with increased appropriations of \$9,110 and no increased revenue, from Fund Balance due to mandatory elevator upgrades per Public Act 096-0054; seconded by Mitchell. **Motion carried with unanimous support.**

MOTION by Quisenberry to recommend County Board approval of **Budget Amendment** #13-00032 for Fund/Dept: 080 General Corporate-028 Information Technology with increased appropriations of \$13,936 and no increased revenue, from Fund Balance to upgrade networking equipment in order to utilize faster internet bandwidth now available as a result of UC2B; seconded by Kibler.

Quisenberry asked if IT had a long-range plan for equipment replacement. Rhodes explained that they began putting funds away last year into the Capital Equipment Replacement Fund for the servers and network equipment but they are not fully funded yet. Rhodes added that almost the entire network was built through construction projects so none of the equipment was capitalized. Rhodes stated this equipment has been added to the Capital Replacement Fund list effective FY2013 but there is very little reserve at this time. Quisenberry asked what the oldest piece of equipment was that is still in service on the network. Rhodes responded that one piece of equipment had been in service since 1996.

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Quisenberry asked about the replacement cycle for equipment. Rhodes said they would not replace network equipment until it failed. Servers are replaced every 3-4 years and they are able to obtain three (3) year warranty on the servers.

Kibler pointed out building connection redundancies and asked if the fees would continue to be the same since none of this equipment would be replaced. Rhodes explained the fees should go down. The Illinois Century Network connection is an 8-megabit connection, the cost is \$807.00 per month, and the UC2B connection is 80-megabits and the cost is approximately \$180.00 per month. Rhodes explained they would keep the ICN connection because the County did not receive as many IP addresses as originally promised from UC2B. Rhodes anticipated the ICN cost to decrease to approximately \$500.00 per month for 50-megabits in July.

Kibler asked why this request should be processed now instead of incorporating it into the budget for next year. Rhodes explained there was an immediate need due to the Sheriff's recent issue of an RFP for inmate phone services and video visitation. **Motion carried with unanimous support.**

MOTION by Carter to recommend County Board approval of **Budget Amendment** #13-00033 for Fund/Dept: 080 General Corporate-028 Information Technology with increased appropriations of \$20,367 and no increased revenue, from Fund Balance to purchase two servers and reporting tools in order to upgrade the County's email system to Microsoft Exchange 2010; seconded by Mitchell. James preferred it be delayed for 6-months and did not feel the need was urgent.

Rhodes stated that his department, like many in county government, had very limited staff and if the upgrade to the email system is not done at this time it would require the full attention of one staff person simply to maintain the server. Rhodes explained this would have a detrimental effect on IT services. Kurtz and Hartke supported the upgrade and understood the importance of efficient email communications.

Quisenberry asked if the possibility of out-sourcing the email system had been considered. Rhodes explained they had not looked at this because there are a number of issues surrounding Cloud-based email systems such as Google mail when it comes to county government. Rhodes said one large issue is the Criminal Justice Information System (CJIS) compliance, which are guidelines for sharing criminal justice information. He said Cloud-based email systems are not considered compliant because there is no way for the provider to ensure that every person who may access the system has had a criminal background check. Therefore, if this system were in place the employees of the Sheriff's department and the State's Attorney could no longer utilize the email system to discuss any justice related information. He added that the judges did not want this kind of email system either because they would rather have county employees in charge of the email servers. Rhodes indicated they would revisit the issue in the future. Rhode also added that the justice group also used two software packages, JANO and New World that require a working word processor on the computer and are not compatible with Cloud-based systems.

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Kibler asked how long the servers would last assuming they do not go to a Cloud-based system. Rhodes stated that with an email retention policy in place, the servers should last 3-years and by that time, the funds should be available through the capitalization fund. **Motion carried with unanimous support.**

Animal Control

MOTION by Esry to recommend County Board approval of a resolution authorizing an Intergovernmental Agreement with the City of Champaign to provide animal control services; seconded by Hartke. Petrie stated that the Animal Control Director had indicated to her that this agreement would create a very tight budget because the City of Champaign would only agree to a 3% increase. Petrie said Ms. Joos indicated to her that she would be more comfortable with a 5% increase.

Busey said the contract did call for a 5% increase in the second year and 4% built upon that percentage for the third year. **Motion carried with unanimous support.**

Regional Planning Commission

OMNIBUS MOTION by Mitchell to recommend County Board approval of resolutions authorizing the application and if awarded, acceptance of Hazard Mitigation Plan Grant and statement of intent to participate in multi-jurisdiction all hazard mitigation planning; seconded by Cowart. **Motion carried with unanimous support.**

The Committee of the Whole took a short recess at 8:20 p.m. and resumed session at 8:25 p.m. County Board members Richards and Rosales did not return to the meeting.

County Administrator

MOTION by James to receive the General Corporate Fund FY2013 Budget Projection and Budget Change Reports and place on file; seconded by Mitchell. **Motion carried with unanimous support.**

MOTION by Kibler to recommend County Board approval of a resolution authorizing the creation of an additional attorney position in the States Attorney staffing budget, said position to be Chief of Civil Division assigned to Champaign County Salary Grade Range L; seconded by Esry. **Motion carried.**

MOTION by Langenheim to recommend County Board approval of a resolution authorizing the classification of the States Attorney Senior Executive Secretary position to Grade Range I; seconded by Jay. **Motion carried.**

MOTION by Schroeder to recommend County Board approval of a resolution authorizing the classification of the States Attorney Office Manager position to Grade Range H; seconded by Esry. **Motion carried.**

Finance; Justice & Social Services; Policy, Personnel, & Appointments Minutes
Tuesday, June 11, 2013
Page 11

MOTION by James to recommend County Board approval of a resolution authorizing the creation of an additional position in the Administrative Services Staffing Budget, said position to be Deputy County Administrator of Finance assigned to Champaign County Salary Grade Range M; seconded by Quisenberry. **Motion carried.**

MOTION by Berkson to recommend County Board approval of a resolution authorizing an amendment to the October 2012 agreement between the Institute for Law and Policy Planning and the County of Champaign; seconded by Kurtz. The motion was amended to have the ILPP report delivered in September instead of July. James did not support the increased time and cost of the additional work. Hartke agreed with James and felt the funds could be used elsewhere. Harper would not support the additional work either. Petrie supported the additional work and cost. Discussion followed.

Motion carried as amended with a roll call vote of 10 -9. Alix, Berkson, Carter, Cowart, Kurtz, Langenheim, McGuire, Petrie, Quisenberry, and Schwartz voted in favor of the motion. Esry, Harper, Hartke, James, Jay, Kibler, Michaels, Mitchell, and Schroeder voted against the motion.

A presentation was given by Bellwether Advantage, LLC regarding a preliminary fee review for the offices of the County Clerk, Recorder, and the Sheriff. Each office paid for the preliminary fee review at a cost of \$1,000 each.

 MOTION by Mitchell to recommend County Board approval of a resolution authorizing an agreement with Bellwether Advantage, LLC to conduct a comprehensive fee review for the offices of the County Clerk, Recorder, and the Sheriff; seconded by Hartke. **Motion carried.**

Other Business

 MOTION by to recommend County Board approval of a resolution authorizing an Intergovernmental Agreement between the Cities of Champaign and Urbana, the Village of Rantoul, and the County of Champaign for the JAG Program; seconded by **Motion carried with unanimous support.**

Chair's Report

There was no Chair's report.

<u>Designation of Items for the County Board Consent Agenda</u>

Items C2-10; D1; E1-2; and G2 were designated for the Consent Agenda.

Carter, Cowart, James, and Michaels exited the meeting at 9:40 p.m.

Finance; Justice & Social Services; Policy, Personnel, & Appointments Minutes Tuesday, June 11, 2013 Page 12

489	JUSTICE & SOCIAL SERVICES
490	Monthly Reports
491	
492	OMNIBUS MOTION by Schwartz to receive the monthly reports for Animal Control
493	April 2013; EMA: May 2013; Head Start: May 2013; Probation & Court Services: April 2013
494	Public Defender: April and May 2013 and Veterans' Assistance Commission: May 2013 and
495	place on file; seconded by Langenheim. Motion carried as amended with unanimous
496	support.
497	
498	Other Business
499	
500	There was no other business.
501	
502	Chair's Report
503	
504	There was no Chair's report.
505	
506	Determination on Whether to Cancel July Committee meetings of Finance; Policy, Personnel
507	& Appointments; and Justice & Social Services
508	
509	MOTION by Langenheim to cancel the July Committee meetings of Finance; Policy
510	Personnel, & Appointments; and Justice & Social Services; seconded by McGuire. Motion
511	carried.
512	
513	<u>Adjourn</u>
514	TT1 1 1 0 45
515	The meeting adjourned at 9:45 p.m.
516	D 46.11 1 14- 1
517	Respectfully submitted,
518	
519 520	Var. Dhadaa
520	Kay Rhodes Administrative Assistant
	Administrative Assistant
522 523	
523 524	
524 525	
525 526	Please note the minutes reflect the order of the agenda and may not necessarily reflect the order of business conducted at the meeting.

CHAMPAIGN COUNTY CIRCUIT COURT

ROGER W. HOLLAND

COURT ADMINISTRATOR

TO:

Christopher Alix, Deputy Chair of Finance

Champaign County Board

FROM:

Roger W. Holland, Court Administrator

DATE:

August 2, 2013

RE:

Law Library Fee

Due to a dramatic decrease in the Law Library Fund balance and an ongoing interest in supporting the Self-Representation Help Desk, the Circuit Court is requesting a \$7 increase in the Law Library fee.

Pursuant to the Illinois Counties Code, the County Board has the power to authorize a law library fee of up to \$21 to be collected by the Circuit Clerk on each filing in civil cases. The current Champaign County Law Library fee was set at \$10 in 2003. The history of the Champaign County Law Library fee is summarized in Attachment A.

Since the fee was last increased, the Law Library Fund has assisted General Corporate Fund departments with expenses related to legal research, including the Circuit Court (Westlaw subscriptions, print materials, salary), Public Defender (Westlaw subscriptions, print materials), and State's Attorney (print material offset). Additionally, financial support for the Self-Representation Help Desk has come from the Law Library Fund for three of the last five years and is proposed to resume in FY 2014. Due to these expenditures and a significant decrease in fee revenue from civil cases, the Law Library Fund balance has decreased dramatically over the last several years.

The imminent adoption of the Access to Justice Act will amend the Counties Code by changing the Law Library's enacting legislation to include the provision that law library facilities "may include self-help centers and other legal assistance programs for the public as part of the services it provides on-site and online." Additionally, the bill allows that law library expenses that may be defrayed include "the expense of any attendant self-help centers and legal assistance programs." (House Bill 3111 was passed by both houses of the General Assembly and sent to the Governor on June 19, 2013).

Champaign County Circuit Court 101 East Main Street - Room 213 Urbana, Illinois 61801-2799



Telephone: (217) 239-5789 Facsimile: (217) 531-7476 Email: rholland@co.champaign.il.us

CHAMPAIGN COUNTY CIRCUIT COURT

ROGER W. HOLLAND

COURT ADMINISTRATOR

While informal conversations with Law Librarians from other Illinois counties indicate that fee increase requests are being considered across the State, concrete plans for those other counties' requests are not yet fully developed. The current law library fees charged by some other Illinois counties are listed in Attachment B.

The condition of the Law Library fund over time is illustrated in Attachment C. Please note the substantial decline over the last few years. Attachment D includes information concerning the collection of Law Library fees over the years. Due to a significant decrease in civil filings, the total amount in fees collected has decreased in recent years.

For the foregoing reasons, the Circuit Court respectfully requests that the County Board approve the increase of the Law Library fee from \$10 to \$17 per civil filing.

Champaign County Circuit Court 101 East Main Street – Room 213 Urbana, Illinois 61801-2799



Telephone: (217) 239-5789 Facsimile: (217) 531-7476 Email: rholland@co.champaign.il.us

ATTACHMENT A

Champaign County Law Library Fee History

October 17, 1978	Ordinance 82	\$2.00
November 30, 1982	amended	\$3.00
October 20, 1987	amended	\$5.00
September 2001	amended	\$9.00
October 23, 2003	Ordinance 702	\$10.00 effective 12/1/2003 current

ATTACHMENT B

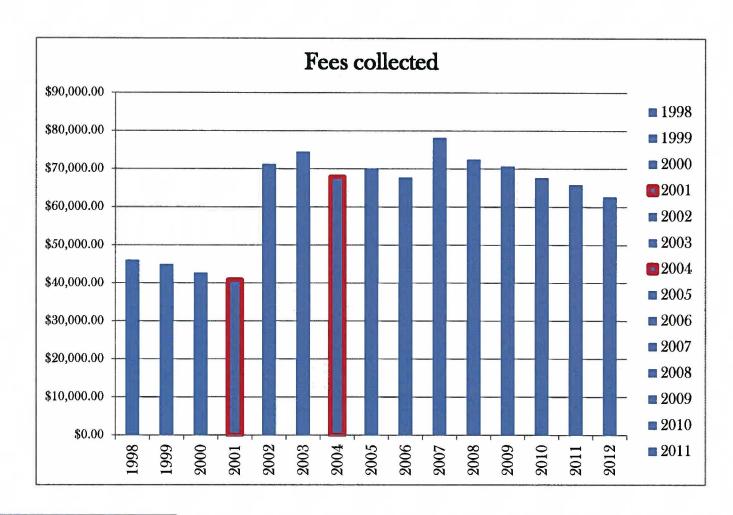
County	Fee	Population
Champaign	\$ 10	201,081
La Salle	\$ 13	113,924
McLean	\$ 10	170,556
Peoria	\$ 17	186,494
Rock Island	\$ 13	147,556
Vermilion	\$ 11	81,625

8

ATTACHMENT D

Revenue From Law Library Fees 1998 - 2012

Year	Fees collected
1998	\$46,092.00
1999	\$44,948.00
2000	\$42,700.00
2001	\$40,841.00
2002	\$71,291.00
2003	\$74,528.00
2004	<i>\$67,855.00</i>
2005	\$70,151.00
2006	\$67,740.00
2007	\$78,204.00
2008	\$72,485.00
2009	\$70,747.00
2010	\$67,635.00
2011	\$65,849.00
2012	\$62,695.00



September 2001: fee increased from \$5 to \$9 December 2003 (FY 04): increase to \$10

Katie M. Blakeman Clerk of the Circuit Court



Champaign County Courthouse

101 East Main Street Urbana, Illinois 61801 Phone (217) 384-3725 Fax (217) 384-3879

CHAMPAIGN COUNTY OFFICE OF THE CIRCUIT CLERK

TO:

Christopher Alix, Deputy Chair - Finance & MEMBERS OF THE

CHAMPAIGN COUNTY BOARD COMMITTEE of the WHOLE

FROM:

Katie M. Blakeman, Circuit Clerk

DATE:

August 7, 2013

RE:

Request for Review of Court Document Storage Fee

A. Introduction and History

The Circuit Clerk Document Storage Fund, established by 705 ILCS 105 et seq., contains revenue derived from a \$5.00 fee assessed on virtually all court cases. This fee was established at \$5.00 by County Board Resolution #3477 on August 16, 1994. It has never been increased or altered from the initial established level. The purpose of this fund is to defray the County's cost of establishing and maintaining a document storage system, including the cost of converting to electronic or micrographic storage. The statutory maximum for this fee is \$15.00. Revenue from this fee for Fiscal Year 2012 was \$126,274 while expenditures from the Fund were \$169,935.

B. Report

Expenditures from the Fund include: (1) microfilming files as required by statute (approximately \$50,000 annually); the maintenance of the PASS public access system (\$12,000 annually); replacement of large equipment such as scanners (\$20,000 every five years); replacement of microfilm machine required by statute (\$20,000 every 10-15 years); the purchase of will cabinets (\$5,000 every 3 years or as needed). The fund also covers \$112,461 in personnel costs. All of these expenses are deemed essential to the operation of the Office of the Circuit Clerk, and would otherwise pose a burden on the General Corporate Fund.

The expenses required to store, preserve, and provide public access to court documents have remained fairly constant throughout the last several years. However, revenue has steadily declined. Our largest expense each year is in sending files to be microfilmed, as we are required to do by Illinois statute. Without microfilming, we would be required to keep paper files indefinitely. As it stands, we do not have the physical space in order to house these documents in archival condition. The Champaign County Historical Archives (located in the Urbana Free Library) has housed,

Katie M. Blakeman Clerk of the Circuit Court



Champaign County Courthouse 101 East Main Street Urbana, Illinois 61801

Phone (217) 384-3725 Fax (217) 384-3879

CHAMPAIGN COUNTY OFFICE OF THE CIRCUIT CLERK

indexed, and made publically available over 77,000 Champaign County court case files. However, though Champaign County court records comprise more than a third of the collection maintained from Champaign County, the Circuit Clerk has never compensated the Archives for this service. It is my hope that the Document Storage Fund could begin assist the General Corporate Fund in providing funding to the Archives. Additionally, many other Illinois Counties are using their Document Storage Funds for the purchase of e-filing systems or upgrades to case management systems. Without an increase in revenue to the Document Storage Fund, these initiatives will not be possible.

C. Recommended Action

Based on our review of the declining fund balance and the projections for increased expenditures, it is our recommendation that the County Board increase the Document Storage fee to \$15.00, effective October 1st, 2013. However, we ask that fee be increased to a lower amount for traffic offenses that do not require a court appearance, as well as Small Claims civil cases. For those two case types, we recommend that the fee be increased only to \$10.00.

Attached to this document are two spreadsheets, and two graphs.

Attachment A depicts the Fund balance based on current expenditures and anticipated future expenses using our current costs while keeping the fee unchanged. Without an increase in the fee in FY2013, the replacement of the AS-400 (the Court's mainframe computer platform) will not achievable in FY2016, and the projected fund deficit beginning FY2014 grows each year thereafter.

Attachment B depicts the Fund balance with the same expenditures and anticipated future expenses with an increase of the fee to \$15.00 effective October 1, 2013. This funding level provides adequate reserves to cover anticipated expenses through FY2016, and should be able to recover following large capital expenditures.

D. Comparison

A comprehensive survey of other jurisdictions has provided valuable comparisons for both proximity counties and counties of comparable size. It is clear from the comparisons that Champaign County's Document Storage Fee is lower than those of both surrounding counties and of those of comparable population. It should also be noted that in the 2013

Katie M. Blakeman Clerk of the Circuit Court



Champaign County Courthouse

101 East Main Street Urbana, Illinois 61801 Phone (217) 384-3725 Fax (217) 384-3879

CHAMPAIGN COUNTY OFFICE OF THE CIRCUIT CLERK

spring legislative session, a bill was introduced that would increase the statutory maximum of the Court Automation and Document Storage Fees to \$25. Though the bill was not called for a vote this session, it was supported by the Illinois Association of Court Clerks, and is expected to pass in 2014.

Proximity Counties *Indicates plans to increase fee

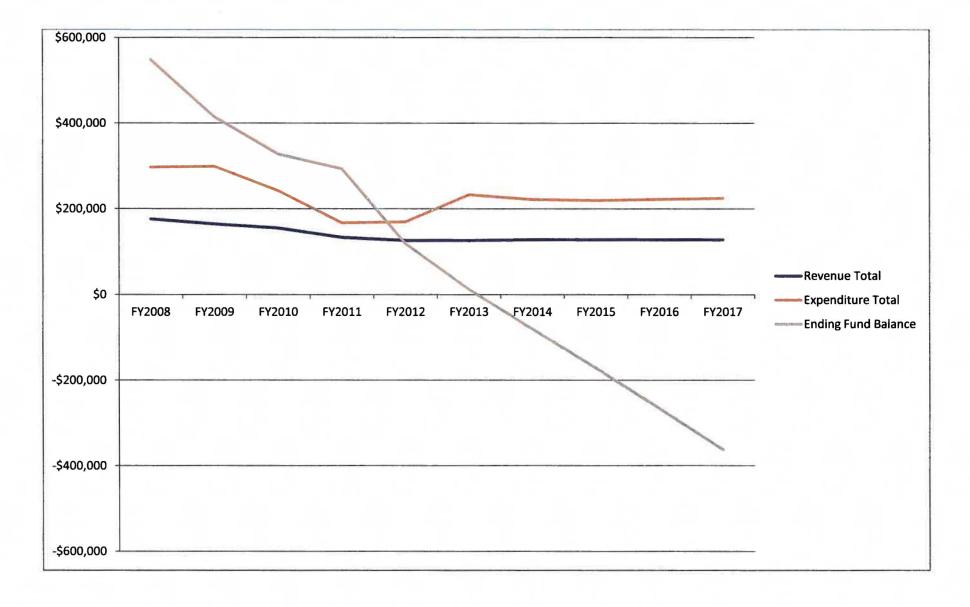
County	Population	Document Storage Fee
Champaign	201,081	\$5
Coles	53,873	\$8*
Dewitt	16,561	\$15
Douglas	19,980	\$15
Macon	110,768	\$15
Moultrie	14,846	\$15
Piatt	16,729	\$5
Vermillion	81,625	\$15

Comparable Counties

County	Population	Document Storage Fee
Kankakee	114,449	\$15
Kendall	114,736	\$15
LaSalle	113,924	\$15
McHenry	308,760	\$15
Peoria	186,494	\$15
Rock Island	147,546	\$15
Sangamon	197,465	\$15
St. Clair	270,056	\$15
Winnebago	295,266	\$15

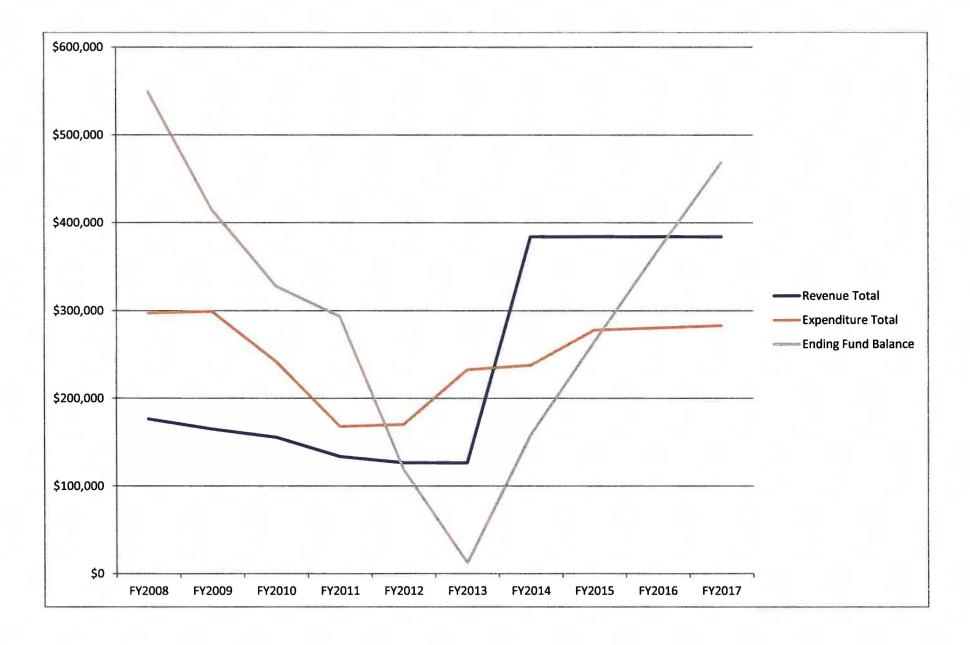
Appendix A - Document Storage - Current Revenue and Expenditures

	FY2008	FY2009	FY2010	FY2011	FY2012	FY2013	FY2014	FY2015	FY2016	FY2017
Beginning Fund Balance	\$670,399	\$549,203	\$414,763	\$327,808	\$162,438	\$118,777	\$12,352	-\$81,035	-\$172,279	-\$266,023
Court Fees	\$156,551	\$161,616	\$153,086	\$132,420	\$125,976	\$126,225	\$128,414	\$128,414	\$128,414	\$128,414
Miscellaneous	\$19,571	\$3,072	\$2,204	\$1,003	\$298	\$150	\$1	\$1	\$1	\$1
Revenue Total	\$176,122	\$164,688	\$155,290	\$133,423	\$126,274	\$126,375	\$128,415	\$128,415	\$128,415	\$128,415
Personnel	\$85,293	\$97,300	\$93,391	\$90,198	\$94,160	\$112,461	\$122,545	\$124,996	\$127,496	\$130,046
Commodities	\$2,354	\$935	\$440	\$2,992	\$996	\$2,500	\$3,050	\$3,050	\$3,050	\$3,050
Services	\$209,671	\$188,742	\$106,267	\$73,228	\$74,779	\$69,839	\$91,874	\$87,280	\$87,280	\$87,280
Capital	\$0	\$12,151	\$42,147	\$1,337	\$0	\$4,000	\$4,333	\$4,333	\$4,333	\$4,333
Miscellaneous						\$44,000				
Expenditure Total	\$297,318	\$299,128	\$242,245	\$167,755	\$169,935	\$232,800	\$221,802	\$219,659	\$222,159	\$224,709
Ending Fund Balance	\$549,203	\$414,763	\$327,808	\$293,476	\$118,777	\$12,352	-\$81,035	-\$172,279	-\$266,023	-\$362,317



Appendix B - Document Storage - Including \$5 Increase

	FY2008	FY2009	FY2010	FY2011	FY2012	FY2013	FY2014	FY2015	FY2016	FY2017
Beginning Fund Balance	\$670,399	\$549,203	\$414,763	\$327,808	\$162,438	\$118,777	\$12,352	\$158,477	\$264,432	\$367,887
Court Fees	\$156,551	\$161,616	\$153,086	\$132,420	\$125,976	\$126,225	\$256,000	\$384,000	\$384,000	\$384,000
Miscellaneous	\$19,571	\$3,072	\$2,204	\$1,003	\$298	\$150	\$1	\$1	\$1	\$1
Revenue Total	\$176,122	\$164,688	\$155,290	\$133,423	\$126,274	\$126,375	\$384,000	\$384,001	\$384,001	\$384,001
										-
Personnel	\$85,293	\$97,300	\$93,391	\$90,198	\$94,160	\$112,461	\$122,545	\$124,996	\$127,496	\$130,046
Commodities	\$2,354	\$935	\$440	\$2,992	\$996	\$2,500	\$3,050	\$3,050	\$3,050	\$3,050
Services	\$209,671	\$188,742	\$106,267	\$73,228	\$74,779	\$69,839	\$87,280	\$100,000	\$100,000	\$100,000
Capital	\$0	\$12,151	\$42,147	\$1,337	\$0	\$4,000	\$25,000	\$50,000	\$50,000	\$50,000
Miscellaneous						\$44,000				
Expenditure Total	\$297,318	\$299,128	\$242,245	\$167,755	\$169,935	\$232,800	\$237,875	\$278,046	\$280,546	\$283,096
Ending Fund Balance	\$549,203	\$414,763	\$327,808	\$293,476	\$118,777	\$12,352	\$158,477	\$264,432	\$367,887	\$468,792





PLANNING & COMMUNITY DEVELOPMENT

1776 East Washington Street Urbana, IL 61802

Phone 217.328.3313 Fax 217.328.2426

www.ccrpc.org

MEMORANDUM

To: Christopher Alix, Deputy Chair of Finance;

From: Andrew Levy, Planner / Sustainability Coordinator

Date: August 8, 2013

RE: Designation of County Administrator to Execute Power Supply Agreement for

Champaign County Aggregation Program

Introduction:

The Champaign County Aggregation Program was adopted November 2012 to provide lower electricity rates to residents of unincorporated Champaign County who have Ameren as their energy supplier. Conditions in the energy market, regulatory analysis, tariff rate forecasts and other industry factors have led the County's consultant, Good Energy, to believe that there is significant purchasing opportunity in September for energy prices beginning July 2014. In order to take advantage of this opportunity, and aggregate purchasing power with an estimated seventy-five (75) other communities in Illinois, the County Board must reauthorize the County Administrator to execute of a service agreement with the lowest responsible bidder for the supply of electricity during the month of August.

Background:

The Champaign County Board adopted the Plan of Operation and Governance for the Champaign County Aggregation program in November 2012 establishing practical guidelines for providing universal access and equitable treatment of customers, provide demand management and energy efficiency services to customers, and meet any other legal requirements. This Plan will continue to serve the Aggregation Program as updates are not needed at this time. The Champaign County Board also adopted a resolution authorizing the Champaign County Administrator to execute a single Power Supply Agreement for the 2012 electricity aggregation program. On December 11, 2012, the Champaign County Administrator executed said agreement with Homefield Energy (a retail electric supplier), to supply energy at a fixed cost until June 2014. Homefield Energy is currently supplying energy at a rate of \$0.03999 per kWh. This rate is 26.7% below the initial Ameren "Price to Compare" rate and 14.6% below the current rate. Additionally, this agreement is providing customers with 100% renewable energy through renewable energy credits (RECS). Homefield Energy reported 8,613 accounts are enrolled in the Champaign County Aggregation Program as of June 2013. Program participants have saved a total of \$267,722.61.

Recommendation:

It is recommended that the County Board designate and authorize the County Administrator to execute another Supplier Contract for the Champaign County Electricity Aggregation Program in September 2013 as recommended by the County's consultant, Good Energy. This is consistent with authority granted to the County Administrator for executing contacts for the purchase of electricity for the County's facilities through an aggregation program in which the County Board authorized participation. The result of this action will be the continuation of this program and the associated cost savings for residents of unincorporated Champaign County.

The County's consultant, Good Energy, will release the RFP for Alternative Electric Suppliers and notify the County regarding the due date of responses. On that day, Good Energy representatives and the County Administrator shall insure that the selected supplier has provided a response in compliance with the County Board's Plan of Operation and Governance for Champaign County Electricity Aggregation Program, and in compliance with the contractual requirements determine din advance and reviewed by the Champaign County State's Attorney. Upon confirmation by the Consultant and County Administrator that the selected Power Supply Agreement is in compliance with these terms and conditions, the County Administrator shall then execute the Agreement on behalf of the County Board.

Recommended Action:

The Finance Committee recommends to the Champaign County Board that the County Administrator be designated and authorized to execute the Power Supply Agreement for the Champaign County Electricity Aggregation Program for a term beginning in 2014.

Thank you for your consideration of this request.

RESOLUTION NO. ____

A RESOLUTION AUTHORIZING EXECUTION OF A SERVICE AGREEMENT WITH THE LOWEST RESPONSIBLE BIDDER FOR THE SUPPLY OF ELECTRICITY FOR RESIDENTIAL AND SMALL COMMERCIAL RETAIL CUSTOMERS WHO DO NOT OPT OUT OF SUCH A PROGRAM

WHEREAS, Section 1-92 of the Illinois Power Agency Act, 20 ILCS 3855/1-92, permits a municipality, if authorized by referendum, to adopt an ordinance by which it may operate a program to solicit bids and enter into service agreements for the sale and purchase of electricity and related services and equipment to residential and small commercial customers who do not opt-out of such a program; and

WHEREAS, the Champaign County Board, in a referendum held on November 6, 2012, submitted the public question of whether it should operate the program as an opt-out program; and

WHEREAS, the referendum passed by a majority vote of the qualified electors voting on the question; and

WHEREAS, the Champaign County Board finds that the best interests of the County are served by entering into an agreement with the lowest responsible bidder, pursuant to 20 ILCS 3855/1-92, to aggregate the residential and small commercial retail electric loads located within the unincorporated areas of Champaign County and to arrange for competitive electric supply to these retail electrical accounts; and

WHEREAS, because electricity is a commodity for which supply bids typically are made each morning and expire the same day at the close of business, the County must act promptly to accept any such desired bid in order to contractually guarantee a per kilowatt hour electric rate for its residential and small commercial customers; and

WHEREAS, the Champaign County Board approved Resolution No. 8348 A resolution authorizing execution of a service agreement with the lower responsible bidder for the supply of electricity for residential and small commercial retail customers who do not opt out of such a program on November 27th, 2012; and

NOW, THEREFORE, BE IT RESOLVED by the County Board of Champaign County, Illinois as follows:

<u>Section 1.</u> The County Administrator of Champaign County, Illinois, be and the same is hereby authorized to execute and deliver and the County Clerk of Champaign County, Illinois, be and the same is hereby authorized to attest to said execution of a service agreement with the lowest responsible bidder for the supply of electricity for residential and small commercial retail customers who do not opt out of such a program, said execution and attestation to take place within the applicable time constraints required by the bidder; provided, however, that the energy price to be paid per kilowatt hour pursuant to the agreement is less than the default rate currently in effect, resulting in savings for the County's residential and small commercial retail

customers.

<u>Section 2.</u> This Resolution shall be effective immediately and shall remain in effect until such time as the year 2013/2014 electricity aggregation program electric supplier selection process has been completed.

PRESENTED, PASSED, APPROVED and RECORDED this 22nd day of August A.D. 2013

Alan Kurtz, Chair Champaign County Board

ATTEST:

Gordy Hulten, Champaign County Clerk and Ex-Officio Clerk of the County Board



WHEREAS, The County of Champaign, as Trustee for the Taxing Districts, has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases in which the taxes on such real property have not been paid, pursuant to 35ILCS 200/21-90, and

WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

Lot 2

PERMANENT PARCEL NUMBER: 23-19-13-202-009

As described in certificate(s): 372 sold on October 29, 2010

Commonly known as: 553 1600N

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to accept full payment of the delinquent taxes, penalties, interest, and costs from the owner of an interest in said property.

WHEREAS, Robert L Frazier, has paid \$37,907.98 for the full amount of taxes involved and a request for surrender of the tax sale certificate has been presented to the Budget & Finance Committee and at the same time it having been determined that the County shall receive \$19,082.90 as a return for its Certificate(s) of Purchase. The County Clerk shall receive \$45.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account. The remainder is the amount due the agent for his services.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, authorizes the cancellation of the appropriate Certificate(s) of Purchase on the above described real estate for the sum of \$19,082.90 to be paid to the Treasurer of Champaign County, Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	,,,,,
ATTEST:	
CLERK	COUNTY BOARD CHAIRMAN

SURRENDER 08-13-011



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

CITY OF CHAMPAIGN 4 TOWNSHIP

PERMANENT PARCEL NUMBER: 46-21-07-326-007

As described in certificates(s): 871 sold October 2010

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, Latif Khan, has bid \$2,660.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$1,976.25 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$2,660.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$1,976.25 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	, day of,,
ATTEST:	
CLERK	COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER 08-13-007



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

CITY OF CHAMPAIGN 4 TOWNSHIP

PERMANENT PARCEL NUMBER: 46-21-07-183-009

As described in certificates(s): 860 sold October 2010

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, Latif Khan, has bid \$2,026.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$1,500.75 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$2,026.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$1,500.75 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	, day of,,
ATTEST:	
CLERK	COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

COMPROMISE TOWNSHIP

PERMANENT PARCEL NUMBER: 06-10-21-400-004

As described in certificates(s): 86 sold October 2010

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, Dale A. Miller, has bid \$806.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$431.00 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$806.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$431.00 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	,,,,
ATTEST:	
CLERK	COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER 08-13-002



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

BROWN TOWNSHIP

PERMANENT PARCEL NUMBER: 02-01-36-429-020

As described in certificates(s): 19 sold October 2010

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, Janson Investment Co, has bid \$750.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$375.00 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$750.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$375.00 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	, day of,,	
ATTEST:		
CLERK	COUNTY BOARD CHAIRMAN	

SALE TO NEW OWNER



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

CITY OF CHAMPAIGN TOWNSHIP

PERMANENT PARCEL NUMBER: 42-20-12-183-005

As described in certificates(s): 758 sold October 2009

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, Latif Khan, has bid \$1,356.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$981.00 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$1,356.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$981.00 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	, day of,,				
ATTEST:					
CLERK	COUNTY BOARD CHAIRMAN				

SALE TO NEW OWNER



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

TOLONO TOWNSHIP

PERMANENT PARCEL NUMBER: 29-26-26-489-002

As described in certificates(s): 546 sold October 2009

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, Larry Tschopp, has bid \$625.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$250.00 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$625.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$250.00 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	, day of,,				
ATTEST:					
CLERK	COUNTY BOARD CHAIRMAN				

SALE TO NEW OWNER



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

SOUTH HOMER TOWNSHIP

PERMANENT PARCEL NUMBER: 26-30-09-178-005

As described in certificates(s): 404 sold October 2010

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, Rodger Ocheltree, has bid \$10,326.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$7,725.75 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$10,326.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$7,725.75 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	, day of,,
ATTEST:	
CLERK	COUNTY BOARD CHAIRMAN

SALE TO NEW OWNER



WHEREAS, Pursuant to this program, the County of Champaign, as Trustee for the Taxing Districts, has acquired an interest in the following described real estate:

RANTOUL TOWNSHIP

PERMANENT PARCEL NUMBER: 20-09-02-177-012

As described in certificates(s): 294 sold October 2010

and it appearing to the Budget & Finance Committee that it would be to the best interest of the County to dispose of its interest in said property.

WHEREAS, A Precious Cargo Carrier, Inc., has bid \$5,850.00 for the County's interest, such bid having been presented to the Budget & Finance Committee at the same time it having been determined by the Budget & Finance Committee and the Agent for the County, Joseph E. Meyer, that the County shall receive from such bid \$4,368.75 as a return for its certificate(s) of purchase. The County Clerk shall receive \$0.00 for cancellation of Certificate(s) and to reimburse the revolving account the charges advanced from this account, the auctioneer shall receive \$0.00 for his services and the Recorder of Deeds shall receive \$25.00 for recording. The remainder is the amount due the Agent under his contract for services. The total paid by purchaser is \$5,850.00.

THEREFORE, your Budget & Finance Committee recommends the adoption of the following resolution:

BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the Chairman of the Board of Champaign County, Illinois, be authorized to execute a deed of conveyance of the County's interest or authorize the cancellation of the appropriate Certificate(s) of Purchase, as the case may be, on the above described real estate for the sum of \$4,368.75 to be paid to the Treasurer of Champaign County Illinois, to be disbursed according to law. This resolution to be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

ADOPTED by roll call vote this	day of,,				
ATTEST:					
CLERK	COUNTY BOARD CHAIRMAN				

SALE TO NEW OWNER

RESOLUTION



RESOLUTION AUTHORIZING THE COUNTY BOARD CHAIR TO ASSIGN MOBILE HOME TAX SALE CERTIFICATE OF PURCHASE

WHEREAS, pursuant to the authority of 35 ILCS 516/35 the County of Champaign, as Trustee for the Taxing Districts, has undertaken a program to collect delinquent mobile home taxes;

AND WHEREAS, pursuant to this program the County of Champaign, as Trustee for the Taxing Districts, has obtained a Tax Sale Certificate of Purchase as to the following described mobile home:

2608 BROWNFIELD #20

PERMANENT PARCEL NUMBER: 30-061-0020

As described in certificates(s): 142 sold October 2010

AND WHEREAS, pursuant to public auction sale, Donald E. Powell, Purchaser(s), has/have deposited the total sum of \$801.00 for the purchase of the said Certificate of Purchase and has/have requested that the County of Champaign assign to said Purchaser(s) the said Certificate of Purchase and all of the rights of Champaign County to obtain a Tax Certificate of Title as to the said mobile home and further, from said payment the County shall receive \$356.00 as a return for its certificates(s) of Purchase. The County Clerk shall receive \$0.00 for cancellation of certificate(s) and to reimburse for the charges advanced therefrom; the Auctioneer shall receive \$0.00 for services rendered; the Illinois Secretary of State shall receive the sum of \$95.00 for issuance of the Tax Certificate Title to said Purchaser(s); and the remainder shall be the sums due the Tax Agent for his services:

AND WHEREAS, it appears to the Budget & Finance Committee that Champaign County and its taxing districts will be best served by assigning its said Tax Sale Certificate of Purchase to said Purchaser(s) in exchange for the aforesaid payment;

NOW THEREFORE BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY, ILLINOIS, that the County Board Chair is authorized to assign the abovesaid Tax Sale Certificate of Purchase as to the above described mobile home in exchange for payment to the Treasurer of Champaign County, Illinois, of the sum of \$356.00, which shall be disbursed according to law. This resolution shall be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

PRESENTED,	ADOPTED,	APPROVED	and	RECORDED	this		day	of
ATTEST:								
CLERK				COUNTY BC	ARD C	CHAIRMAN		

SALE TO NEW OWNER

RESOLUTION

0713054A



RESOLUTION AUTHORIZING THE COUNTY BOARD CHAIR TO ASSIGN MOBILE HOME TAX SALE CERTIFICATE OF PURCHASE

WHEREAS, pursuant to the authority of 35 ILCS 516/35 the County of Champaign, as Trustee for the Taxing Districts, has undertaken a program to collect delinquent mobile home taxes;

AND WHEREAS, pursuant to this program the County of Champaign, as Trustee for the Taxing Districts, has obtained a Tax Sale Certificate of Purchase as to the following described mobile home:

5 FERN

PERMANENT PARCEL NUMBER: 30-059-0005

As described in certificates(s): 138 sold October 2010

AND WHEREAS, pursuant to public auction sale, Angel Cunningham, Purchaser(s), has/have deposited the total sum of \$700.00 for the purchase of the said Certificate of Purchase and has/have requested that the County of Champaign assign to said Purchaser(s) the said Certificate of Purchase and all of the rights of Champaign County to obtain a Tax Certificate of Title as to the said mobile home and further, from said payment the County shall receive \$255.00 as a return for its certificates(s) of Purchase. The County Clerk shall receive \$0.00 for cancellation of certificate(s) and to reimburse for the charges advanced therefrom; the Auctioneer shall receive \$0.00 for services rendered; the Illinois Secretary of State shall receive the sum of \$95.00 for issuance of the Tax Certificate Title to said Purchaser(s); and the remainder shall be the sums due the Tax Agent for his services:

AND WHEREAS, it appears to the Budget & Finance Committee that Champaign County and its taxing districts will be best served by assigning its said Tax Sale Certificate of Purchase to said Purchaser(s) in exchange for the aforesaid payment;

NOW THEREFORE BE IT RESOLVED BY THE COUNTY BOARD OF CHAMPAIGN COUNTY. ILLINOIS, that the County Board Chair is authorized to assign the abovesaid Tax Sale Certificate of Purchase as to the above described mobile home in exchange for payment to the Treasurer of Champaign County, Illinois, of the sum of \$255.00, which shall be disbursed according to law. This resolution shall be effective for sixty (60) days from this date and any transaction between the above parties not occurring within this period shall be null and void.

PRESENTED,	ADOPTED,	APPROVED	and	RECORDED	this		day	of
	······································							
ATTEST:								
CLERK				COUNTY BO	ARD (CHAIRMAN		

SALE TO NEW OWNER



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

OFFICE OF THE AUDITOR CHAMPAIGN COUNTY, ILLINOIS

To:

Christopher Alix, Deputy Chair, Finance Committee, and Members of the Champaign

County Board

From: John Farney, Champaign County Auditor

Date: July 19, 2013

Re:

Request for Change to Staffing Budget

I am writing to request that this committee authorize a change to the staffing budget of the Champaign County Auditor's Office, creating an additional full-time accountant position, while eliminating the position of part-time accountant. I'm asking that this change take place August 26, 2013.

Due to the increase in authorized work hours for this position, a budget amendment will be necessary. That amendment is included with this memo.

As always, if you have any questions, please feel free to contact myself or Barbara Ramsay, Chief Deputy Auditor at your convenience.

Sincerely

JOHN FARNE

COUNTY AUDITOR

FUND 080 GENERAL CORPORATE DEPARTMENT 020 AUDITOR

INCREASED APPROPRIATIONS:	BEGINNING	CURRENT		BUDGET IF	INCREASE
ACCT. NUMBER & TITLE	BUDGET AS OF 12/1	BUDGET		REQUEST IS APPROVED	(DECREASE) REQUESTED
ACCI. NUMBER & IIIDE	AD OF 12/1	1		AFFROVED	REQUESTED
080-020-511.03 REG. FULL-TIME EMPLOYEES	208,943	2	02,043	206,518	4,475
TOTALS					
TOTALS	208,943	2	02,043	206,518	4,475
INCREASED REVENUE BUDGET:					
	BEGINNING BUDGET	CURRENT		BUDGET IF	INCREASE
ACCT. NUMBER & TITLE	AS OF 12/1	BUDGET	<u> </u>	REQUEST IS APPROVED	(DECREASE) REQUESTED
None: from Fund Balance					
		<u> </u>			
TOTALS					
	0	<u> </u>	0	0	0
EXPLANATION: ADDITIONAL FUND	S NEEDED FOR	STAFFI	NG CH	ANGE FROM PI	ACCOUNTANT
TO FT ACCOUNTANT POSITION.					
	The state of the s	- aller			10
A STATE OF THE STA	20075-021-91			B)WYO.	
DATE SURMITTED:	AUTHORIZED SIGNA	TURE	** PLEAS	E SIGN IN BLUE INK	**
7/19/2013	golm 20	in			
APPROVED BY BUDGET & FINANCE	COMMITEE:	DATE:			
MIROVID DI BODOLI E IZILINE		21111			
		-			
			-		
	. ,				

To:

Board of Directors

Champaign County Nursing Home

From:

Scott Gima Manager

Date:

August 7, 2013

Re:

July 2013 Statistical and June 2013 Financial Management Report

The census fell slightly from 183.7 in June to 182.3 in July. But on a positive note, the Medicare census increased from 16.5 to 18.2 during the same period.

The net loss showed significant improvement in June. The net loss in May was -\$187k and it improved to -\$52k in June. On a cash basis, operations showed a loss of -\$126k in May and improved to a positive \$9,335 in June.

The improvement was due to an slight increase in Medicare census, the lack of periodic large expenses (Union attendance bonus and holiday pay in May) and a reduction in Medicaid conversion days in June (105 versus 339 in May).

Statistics

Overall census increased from 178.9 in May to 183.7 in June. Medicare grew from 14.5 to 16.5 during this period. The reduction in Medicaid conversion days in June led to a June Medicaid census of 96 compared to 108 in May. Private pay census was 71.2 in June compared to 56.4 in May.

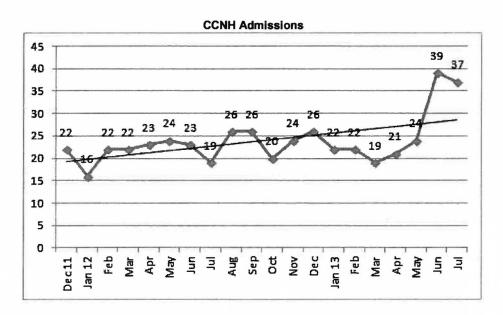
July's census was 182.3. Medicare averaged 18.2, up from 16.5 in June. There was only one Medicaid conversion day. Private pay census was 72.9 and Medicaid census was 91.2.

The table below summarizes admissions and discharges. Admissions in June and July are both all time highs. Discharges also are high in June and July, but admissions were higher, resulting in the slight uptrend in overall census in the past two months.

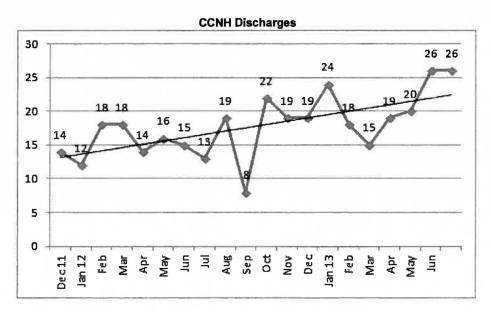
Admissions and Discharges December 2012 to July 2013

	Describer 2012 to daily 2010							
	Medicare Admits	Non-Medicare Admits	Total Admits	Discharges	Expirations	Total Discharges/Expirations		
Dec 12	23	3	26	19	15	34		
Jan	11	11	22	27	11	38		
Feb	15	7	22	18	13	31		
Mar	6	13	19	15	6	21		
Apr	14	7	21	21	8	29		
May	13	11	24	22	8	30		
June	23	16	39	27	7	34		
July	18	19	37	27	9	36		

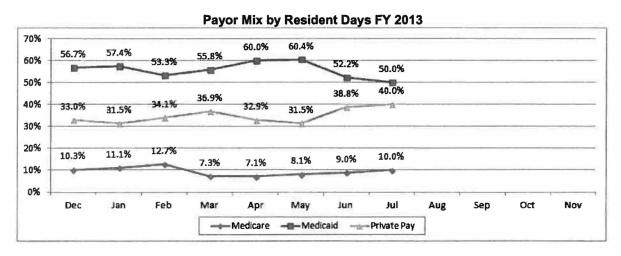
In FY2012, monthly admissions averaged 22.2 per month. Through May FY2013, the average is 26.2 per month. The chart below shows monthly admissions between December 2011 and May 2013. Over this time period, there is a slight positive trend in monthly admissions with the spike in June 2013.



Discharges, however, have been occurring at a high pace compared to FY2012. In FY2012, the average monthly discharges was 15.7, ranging between 8 and 22. The current monthly average is 20.9 through June with a range between 15 and 24. The majority of the discharges are to home.



There were 106 Medicaid conversion days in July. The payor mix shows a significant change since May. The Medicaid mix is 50 percent in July. The private pay mix is 40 percent. The Medicare mix is 10 percent.



The private pay mix has increased due to an increase in private pay admissions in recent months as shown in the table below. This along with the recent Medicare admission trends are very positive signs of CCNH's improving position in the Champaign County long term care market.

Dec 12	Jan 13	Feb 13	Mar 13	Apr 13	May 13	Jun 13	Jul 13
3	4	4	9	7	5	13	11

Net Income/(Loss)/Cash from Operations

June showed a net loss of \$52k. Adding back depreciation, the month showed positive operating cash figure totaling \$9k. On a year-to date basis, cash is down by \$8k after adjusting for the \$333k loan write-off in April.

Mays' financials were significantly impacted by timing of expected periodic expenses – a union attendance bonus payout, the Memorial Day holiday and a workers' compensation payroll expense from a prior period. There were no similar expenses incurred in June.

Revenues

- □ Revenues increased from \$1.058 million in May to \$1.086 million in June. Medicare was the primary driver increasing from \$200k to \$221k between these two months.
- ☐ There were 318 Medicaid days that were adjusted in May.

Expenses

☐ Expenses fell from \$1.333 million in May to \$1.225 million in June, a decrease of 108k.

	Wages fell by \$60,939, from \$586,990 in May to \$526,051 in June.
	Non-labor expenses decreased from \$526,759 in May to \$510,967 in June, a decrease of \$15,792. o Food costs totaled \$31,561, the lowest monthly total so far this year. o Agency costs hit another monthly low, totaling \$16,926.
Cash]	Position
decrea	onth ending cash balance dropped from \$1.033 million in May to \$0.632 million in June, a se of \$401k. Accounts receivable fell from \$3.364 million in May to \$3.115 million in Accounts payable dropped from \$1.529 million to \$1.385 million during the same period.

The major changes are summarized below.

ARD - Medicare A NH Pt_Care - Medicare Advantage/ Hmo ARD_Pt Care - Medicare Advantage/ HMO Total Medicare A Revenue Medicare B Revenue Medicare B Revenue Medicaid Revenue Medicaid Revenue Medicaid Title XIX (IDHFS) ARD - Medicaid Title XIX (IDHFS) Patient Care-Hospice ARD Patient Care - Hospice Total Medicaid Revenue YA-Veterans Nursing Home Care ARD - VA - Veterans Care Nursing Home Patient Care - Private Pay Nursing Home Patient Care - Private Pay Nursing Home Beauty Shop Revenue Patient Transportation Charges ARD Patient Care - Private Pay Nound Supplies Revenue ARD Patient Care - Private Pay Nursing Home Care ARD Patient Care - Private Pay Nursing Home Beauty Shop Revenue 4,126.84 Patient Transportation Charges ARD Patient Care - Private Pay Total Private Pay Revenue VA-Veterans Adult Daycare VA-Veterans Adult Daycare VA-Veterans Adult Daycare VA-Veterans Adult Daycare VA-Veterans Charges - Private Pay Total Adult Day Care Revenue Total Adult Day Care Revenue 18,696.46	•	ursing Home nt of Operatio	ns		
Miscellaneous Revenue Lunch Relimbursement 579.00 Late Charge, NSF Check Charge 3,201.21 Other Miscellaneous Revenue 110.00 Total Miscellaneous Revenue 3,880.21 Medicare A Revenue 3,880.21 Medicare A Revenue Medicare A 168,873.96 ARD - Medicare A 15,073.46 NH PL Care - Medicare Advantage/ Hmo 39,096.08 ARD Pt Care - Medicare Advantage/ HMO Total Medicare A Revenue 221,043.50 Medicare B Revenue 29,595.94 Medicare B Revenue 3,523.10 ARD Patient Care - Hospice 35,523.10 ARD Patient Care - Hospice 35,523.10 ARD Patient Care - Hospice 31,002.60 ARD Patient Care - Hospice 19,023.30 Total Medicare Revenue 411,245.88 Private Pay Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Revenue 1,086,468.07 1, Total Income 1,086,468.07 1,	Budget	Variance	YTD Actual	YTD Budget	Variance
Lunch Relimbursement 579.00 Late Charge, NSF Check Charge 3,201.21 Other Miscellaneous Revenue 110.00 Total Miscellaneous Revenue 3,890.21 Medicare A Revenue 168,873.96 Medicare A 168,873.96 ARD - Medicare A dovantage/ Hmo 39,096.08 NH Pt_Care - Medicare Advantage/ HmO 221,043.50 Total Medicare A Revenue 221,043.50 Medicare B Revenue 29,595.94 Medicare B Revenue 29,595.94 Medicaid Revenue 29,595.94 Medicaid Revenue 29,595.94 Medicaid Tite XIX (IDHFS) 254,594.99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care- Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue 411,245.88 Private Pay Revenue 411,245.88 Private Pay Revenue 3,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 6,126.84 Patient Tr					
Description					
Dither Miscellaneous Revenue 3,890.21	525.00	54.00	3,035.00	3,675.00	(640.00
Medicare A Revenue 3,890.21	1,334.00	1,867.21	15,556.52	9,338.00	6,218.52
Medicare A 188,873.96 ARD - Medicare A 15,073.46 NH PL Care - Medicare Advantage/ Hmo 39,096.08 ARD_Pt Care - Medicare Advantage/ HMO 221,043.50 Medicare B Revenue 221,043.50 Medicare B Revenue 29,595.94 Medicaid Revenue 29,595.94 Medicaid Tite XIX (IDHFS) 254,594.99 ARD - Medicaid Tite XIX (IDHFS) 102,104.49 Patient Care - Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue 411,245.88 Private Pay Revenue 3,002.60 ARD - Va - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357	717.00	(607.00)	798.62	5,019.00	(4,220.38
Medicare A 188,873.96 ARD - Medicare A 15,073.46 NH PL Care - Medicare Advantage/ Hmo 39,096.08 ARD_Pt Care - Medicare Advantage/ HMO 221,043.50 Medicare B Revenue 221,043.50 Medicare B Revenue 29,595.94 Medicaid Revenue 29,595.94 Medicaid Revenue 29,595.94 Medicaid Title XIX (IDHFS) 254,594.99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue 411,245.88 Private Pay Revenue 6,934.72 Nursing Home Deauty Shop Revenue 6,934.72 Nursing Home Beauty Shop Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 LDepartment Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00	2,576.00	1,314.21	19,390.14	18,032.00	1,358.14
ARD - Medicare A NH Pt_Care - Medicare Advantage/ Hmo ARD_Pt Care - Medicare Advantage/ HMO Total Medicare A Revenue 221,043.50 Medicare B Revenue Medicaid Revenue Medicaid Title XIX (IDHFS) ARD - Medicaid Title XIX (IDHFS) Patient Care - Hospice ARD Patient Care - Hospice Total Medicaid Revenue Private Pay Revenue VA-Veterans Nursing Home Care ARD - VA - Veterans Care Nursing Home Patient Care - Private Pay Nursing Home Beauty Shop Revenue Patient Transportation Charges ARD Patient Care - Private Pay Nursing Home Patient Care - Private Pay Nursing Home Beauty Shop Revenue 401,286.84 Patient Transportation Charges ARD Patient Care - Private Pay Total Private Pay Revenue VA-Veterans Adult Daycare IL Department Of Aging-Day Care Grant (Title XX) Adult Day Care Revenue VA-Veterans Adult Daycare IL Department Of Aging-Day Care Grant (Title XX) Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 1,323.68 Per Diem Overtime 34.09 TOPS - Balances TOPS - FICA 23.14					
NH Pt_Care - Medicare Advantage/ Hmo 39,096.08 ARD_Pt Care - Medicare Advantage/ HMO 221,043.50 Medicare B Revenue 29,595.94 Medicare B Revenue 29,595.94 Medicaid Revenue 29,595.94 Medicaid Title XIX (IDHFS) 254,594.99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue 412,245.88 Private Pay Revenue 3,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 To	201,154.00	(34,280.04)	1,230,349.27	1,408,078.00	(177,728.73
ARD_Pt Care - Medicare Advantage/ HMO Total Medicare B Revenue 221,043.50 Medicare B Revenue 29,595.94 Total Medicare B Revenue 29,595.94 Medicald Revenue 29,595.94 Medicald Title XIX (IDHFS) 254,594.99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue 411,245.88 Private Pay Revenue 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Income 1,086,468.07 1, Operating Expenses <t< td=""><td>14,588.00</td><td>505.46</td><td>111,891.72</td><td>101,976.00</td><td>9,915.72</td></t<>	14,588.00	505.46	111,891.72	101,976.00	9,915.72
Medicare B Revenue 221,043.50	42,629.00	(3,532.92)	328,792.98	298,403.00	30,389.98
Medicare B 29,595.94 Total Medicare B Revenue 29,595.94 Medicaid Revenue 29,595.94 Medicaid Title XIX (IDHFS) 254,594.99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.68 Private Pay Revenue 412,456.8 VA-Veterans Nursing Home Care 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,896.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses <td>884.00</td> <td>(884.00)</td> <td>4,840.00</td> <td>6,168.00</td> <td>(1,348.00</td>	884.00	(884.00)	4,840.00	6,168.00	(1,348.00
Medicare B 29,595.94 Total Medicare B Revenue 29,595.94 Medicald Revenue 29,595.94 Medicald Title XIX (IDHFS) 254,594.99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.68 Private Pay Revenue 411,245.68 Private Pay Revenue 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Income 1,086,468.07 1, Operating Expenses Administration 1,323.88	259,235.00	(38,191.50)	1,675,873.97	1,814,645.00	(138,771.03
Medicaid Revenue 29,595,94 Medicaid Title XIX (IDHFS) 254,594,99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue 411,245.88 Private Pay Revenue 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 II. Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 1,086,468.07 1, Operating Expenses 24,551.05 1 Administration Reg. Full-Time Employees 24,551.05 1 Tomp. Salaries & Wages					
Medicaid Revenue Medicaid Title XIX (IDHFS) 254,594,99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue VA-Veterans Nursing Home Care 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue VA-Veterans Adult Daycare 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries	39,052.00	(9,456.06)	214,290.33	273,364.00	(59,073.67
Medicald Title XIX (IDHFS) 254,594.99 ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.68 Private Pay Revenue 411,245.68 VA-Veterans Nursing Home Care 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Agling-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 <td>39,052.00</td> <td>(9,456.06)</td> <td>214,290.33</td> <td>273,364.00</td> <td>(59,073.67</td>	39,052.00	(9,456.06)	214,290.33	273,364.00	(59,073.67
ARD - Medicaid Title XIX (IDHFS) 102,104.49 Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue VA-Veterans Nursing Home Care 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,896.08 Adult Day Care Revenue VA-Veterans Adult Daycare 4,148.55 IIL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14					
Patient Care-Hospice 35,523.10 ARD Patient Care - Hospice 19,023.30 Total Medicald Revenue 411,245.88 Private Pay Revenue 411,245.88 VA-Veterans Nursing Home Care 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA	341,342.00	(86,747.01)	2,047,787.76	2,389,394.00	(341,606.24
ARD Patient Care - Hospice 19,023.30 Total Medicaid Revenue 411,245.88 Private Pay Revenue VA-Veterans Nursing Home Care 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care - Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	155,113.00	(53,008.51)	824,212.29	1,085,791.00	(261,578.71
Total Medicald Revenue 411,245.88 Private Pay Revenue 13,002.60 VA-Veterans Nursing Home Care 6,934.72 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	8.071.00	27,452.10	230,970.46	56,497.00	174,473.46
Private Pay Revenue 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	5,842.00	13,181.30	153,990.66	40,894.00	113,096.88
VA-Veterans Nursing Home Care 13,002.60 ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	510,368.00	(99,122.12)	3,256,961.17	3,572,576.00	(315,614.83
ARD - VA - Veterans Care 6,934.72 Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration 24,551.05 1 Reg. Full-Time Employees 24,551.05 1 Temp. Salaries & Wages 1,323.88 1 Per Diem 168.90 0 Overtime 34.09 1 TOPS - Balances 302.56 1 TOPS - FICA 23.14 1					
Nursing Home Patient Care - Private Pay 271,390.20 Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration 24,551.05 1 Reg. Full-Time Employees 24,551.05 1 Temp. Salaries & Wages 1,323.88 1 Per Diem 168.90 0 Overtime 34.09 1 TOPS - Balances 302.56 1 TOPS - FICA 23.14	11,507.00	1,495.60	102,503.83	80,549.00	21,954.83
Nursing Home Beauty Shop Revenue 3,001.60 Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.68 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	2,923.00	4,011.72	9,968.88	20,461.00	(10,492.34
Medical Supplies Revenue 6,126.84 Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	273,516.00	(2,125.80)	1,773,673.49	1,914,612.00	(140,938.51
Patient Transportation Charges 800.12 ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration 24,551.05 1 Temp. Salaries & Wages 1,323.68 1,323.68 Per Diern 168.90 0 Overtime 34.09 1 TOPS - Balances 302.56 1 TOPS - FICA 23.14 1	3,731.00	(729.40)	23,019.40	26,117.00	(3,097.60
ARD Patient Care- Private Pay 100,740.00 Total Private Pay Revenue 401,996.08 Adult Day Care Revenue 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	5,594.00	532.84	39,728.32	39,158.00	570.32
Total Private Pay Revenue	1,626.00	(825.68)	11,195.57	11,382.00	(186.43
Adult Day Care Revenue 4,148.55 VA-Veterans Adult Daycare 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	84,475.00	16,265.00	617,178.20	591,325.00	25,853.20
VA-Veterans Adult Daycare 4,148.55 IL Department Of Aging-Day Care Grant (Title XX) 12,357.91 Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	383,372.00	18,624.08	2,577,267.47	2,683,604.00	(106,336.53
IL Department Of Aging-Day Care Grant (Title XX)					
Adult Day Care Charges-Private Pay 2,190.00 Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.68 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14	2,500.00	1,648.55	28,381.50	17,500.00	10,881.50
Total Adult Day Care Revenue 18,696.46 Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14	12,917.00	(559.09)	79,033.46	90,419.00	(11.385.54
Total Income 1,086,468.07 1, Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.68 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14	4,687.00	(2,477.00)	11,818.97	32,669.00	(20,850.03
Operating Expenses Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.68 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14	20,084.00	(1,387.54)	119,233.93	140,588.00	(21,354.07
Administration Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.88 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14	214,687.00	(128,218.93)	7,863,017.01	8,502,809.00	(639,791.99
Reg. Full-Time Employees 24,551.05 Temp. Salaries & Wages 1,323.68 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14					
Temp. Salarles & Wages 1,323.68 Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14					
Per Diem 168.90 Overtime 34.09 TOPS - Balances 302.56 TOPS - FICA 23.14	29,665.00	5,113.95	179,743.50	207,655.00	27,911.50
Overtime 34.09 TOPS - Balances 302.56 TOPS • FICA 23.14	903.00	(420.68)	11,033.55	6,321.00	(4,712.55
TOPS - Balances 302.56 TOPS • FICA 23.14	209.00	40.10	1,427.40	- 1,463.00	35.60
TOPS • FICA 23.14	103.00	68.91	1,460.27	721.00	(739.27
4 1000	1,185.00	882.44	1,594.77	8,295.00	6,700.23
Social Security - Employer 1,830.01	90.00	68.86	122.00	630.00	508.00
	2,210.00	379.99	13,668.60	15,470.00	1,801.40
IMRF - Employer Cost 2.312.45	2,866.00	553.55	17,123.09	20,062.00	2,938.91
Workers' Compensation Insurance 1,546.80	1,707.00	160.20	11,449.68	11,949.00	499.14
Unemployment Insurance 459.88	500.00	40.34	6,168.76	3,500.00	(2,688.76
Wednesday, August 07, 2013					7:45 AN

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Champaign County Nursing Home
Actual vs Budget Statement of Operations

Description	Actual	Budget	Variance	YTD Actual	YTD Budget	Variance
Employee Health/Life Insurance	4,429.80	4,840.00	410.20	29,494.13	33,880.00	4,385.87
IMRF - Early Retirement Obligation	3,465.44	3,510.00	44.56	24,258.08	24,570.00	311.92
Employee Development/Recognition	90.98	154.00	63.02	250.83	1,078.00	827.17
Employee Physicals/Lab	2,548.00	1,922.00	(626.00)	14,923.20	13,454.00	(1,469.20)
Stationary & Printing		322.00	322.00	498.95	2,254.00	1,755.05
Books, Periodicals & Manuals		11.00	11.00	262.90	77.00	(185.90)
Copier Supplies	731.04	749.00	17.96	4,791.37	5,243.00	451.63
Postage, UPS, Federal Express	474.95	619.00	144.05	3,791.38	4,333.00	541.62
Operational Supplies	177.03	2,133.00	1,955.97	5,613.92	14,931.00	9,317.08
Audit & Accounting Fees	4,993.50	3,661.00	(1,332.50)	46,344.50	25,627.00	(20,717.50)
Attorney Fees	68.50	7,249.00	7,160.50	10,020.87	50,743.00	40,722.13
Engineering Fees				4,836.10		(4,836.10)
Professional Services	35,712.62	50,250.00	14,537.38	252,611.79	351,750.00	99,138.21
Job Required Travel Expense	192.76	165.00	(27.76)	1,848.13	1,155.00	(693.13)
Insurance	23,588.67	20,620.00	(2,946.67)	160,525.06	144,340.00	(16,185.06)
Property Loss & Liability Claims	20,00010	481.00	481.00	100,020.00	3,367.00	3,367.00
Computer Services	5,955.42	4,203.00	(1,752.42)	31,950.23	29,421.00	(2,529.23)
Telephone Services	1,417.68	1,475.00	57.34	10,234.29	10,325.00	90.71
*****	1,417.00			10,234.29		
Automobile Maintenance	4004.00	48.00	48.00	04 007 47	336.00	336.00
Legal Notices, Advertising	4,681.80	3,924.00	(957.80)	21,827.47	27,468.00	5,640.53
Photocopy Services	749.88	870.00	120.32	7,347.48	6,090.00	(1,257.48)
Public Relations	151.56	3.00	(148.56)	575.52	21.00	(554.52)
Dues & Licenses	1,625.08	1,115.00	(510.08)	12,033.63	7,805.00	(4,228.63)
Conferences & Training	(8.82)	389.00	397.82	8,247.49	2,723.00	(5,524.49)
Finance Charges, Bank Fees		218.00	218.00	8,380.70	1,526.00	(6,854.70)
Cable/Satellite TV Expense	2,533.73	2,465.00	(68.73)	16,350.07	17,255.00	904.93
IPA Licensing Fee	41,716.00	53,444.00	11,728.00	298,416.00	374,108.00	75,692.00
Fines & Penalties		1,225.00	1,225.00		8,575.00	8,575.00
Depreciation Expense	61,096.60	61,763.00	866.40	427,506.56	432,341.00	4,834.44
Interest-Tax Anticipation Notes Payable	1,947.36	583.00	(1,364.36)	3,575.42	4,081.00	505.58
Interest- Bonds Payable	10,640.83	11,133.00	292.17	75,885.81	77,931.00	2,045.19
Total Administration	241,930.73	278,982.00	37,051.27	1,726,213.68	1,952,874.00	226,660.32
Environmental Services						
Reg. Full-Time Employees	27,085.92	30,627.00	3,541.08	206,793.28	214,389.00	7,595.72
Overtime	3.60	751.00	747.40	6,623.45	5,257.00	(1,366.45)
TOPS - Balances	(2,367.73)	1,274.00	3,641.73	(6,740.70)	8,918.00	15,658.70
TOPS- FICA	(181.13)	97.00	278.13	1,835.44	679.00	(1,156.44)
Social Security - Employer	2,038.48	2,328.00	289.52	16,087.60	16,296.00	208.40
IMRF - Employer Cost	2,747.64	3,138.00	390.36	21,585.25	21,966.00	380.75
Workers' Compensation Insurance	1,623.96	1,735.00	111.04	12,356.59	12,145.00	(211.59)
Unemployment Insurance	1,368.73	833.00	(535.73)	9,618.68	5,831.00	(3,787.68)
24 04-97 62-94 (1972-91) 219	6,256.49	7,236.00	979.51		50,652.00	(2)
Employee Health/Life Insurance	0,230.48	7,230.00	878.51	45,556.02	50,052.00	5,095.98
Books, Periodicais & Manuals	4 204 20	4 744 00	050.04	98.45	20 200 00	(98.45)
Operational Supplies	4,391.39	4,744.00	352.61	37,142.90	33,208.00	(3,934.90)
Gas Service	11,999.17	12,106.00	106.83	75,955.23	84,742.00	8,786.77
Electric Service	25,402.83	21,891.00	(3,511.83)	141,393.79	153,237.00	11,843.21
Water Service	2,602.18	2,307.00	(295.18)	18,055.49	16,149.00	(1,906.49)
Pest Control Service	482.00	554.00	72.00	3,374.00	3,878.00	504.00
Waste Disposal & Recycling	2,744.21	4,125.00	1,380.79	19,650.15	28,875.00	9,224.85
Equipment Rentals	258.00	260.00	2.00	1,806.00	1,820.00	14.00
Sewer Service & Tax	1,400.00	1,634.00	234.00	9,446.42	11,438.00	1,991.58
Total Environmental Services	87,855.74	95,640.00	7,784.26	620,638.24	669,480.00	48,841.76
Laundry						

06/30/13	Actual vs Buc	gn County Nu Iget Stateme		ons		3
Description	Actual	Budget	Variance	YTD Actual	YTD Budget	Variance
Overtime	3.87	229.00	225,13	1,570.14	1,603.00	32.86
TOPS Balances	(792.82)	507.00	1,299.62	1,972.32	3,549.00	1,576.68
TOPS - FICA	(60.65)	38.00	98.65	150.89	266.00	115.11
Social Security - Employer	708.27	688.00	(20.27)	4,781.28	4,816.00	34.72
IMRF - Employer Cost	955.46	928.00	(27.46)	6,414.89	6,496.00	81.11
Workers' Compensation Insurance	569.99	515.00	(54.99)	3,717.33	3,605.00	(112,33
Unemployment Insurance	428.47	233.00	(195.47)	2,932.75	1,631.00	(1,301.75
Employee Health/Life Insurance	1,690.00	1,782.00	92.00	12,134.47	12,474.00	339.53
Laundry Supplies	1,000.00	1,601.00	1,601.00	9,227.23	11,207.00	1,979,77
Linen & Bedding	2,927.16	1,374.00	(1,553.16)	9,980.68	9,618.00	(362.68
Total Laundry	15,911.03	16,978.00	1,066.97	115,117.48	118,848.00	3,728.52
Maintenance						
Reg. Full-Time Employees	5,281.07	4,105.00	(1,176.07)	29,510.23	28,735.00	(775.23)
Overtime	-,	26.00	26.00	120.25	182.00	61.75
TOPS - Balances	(1,148.97)	223.00	1,371.97	(335.01)	1,561.00	1,896.01
TOPS - FICA	(87.89)	17.00	104.89	(25.63)	119.00	144.63
Social Security - Employer	402.87	312.00	(90.87)	2,258.34	2,184.00	(74.34)
IMRF - Employer Cost	543.23	421.00	(122.23)	3,030.28	2,947.00	(83.28)
Workers' Compensation Insurance	317.97	228.00	(89.97)	1,764.03	1,596.00	(168.03)
Unemployment Insurance	298.63	145.00	(153.83)	1,441.18	1,015.00	(426.18)
Employee Health/Life Insurance	573.20	4.00	(569.20)	4,108.39	28.00	(4,080.39)
Gasoline & Oil	0,0.20	12.00	12.00	2,614.34	64.00	(2,530.34)
Ground Supplies		23.00	23.00	2,014.04	161.00	161.00
Maintenance Supplies	1,096.27	4,682.00	3,585.73	21,024.79	32,774.00	11,749.21
Professional Services	589.00	20.00	(569.00)	589.00	140.00	(449.00)
Automobile Maintenance	1,246.32	573.00	(673.32)	2,984.74	4,011.00	1,026.26
Equipment Maintenance	1,706.15	1,758.00	51.85	19,620.12	12,306.00	(7,314.12)
Equipment Rentals	4.40	1,100.00	(4.40)	612.80	12,000.00	(612.80)
Nursing Home Building Repair/Maintenance	7,607.80	7.500.00	(107.80)	52,985.52	52,500.00	(485.52)
Conferences & Training	7,007.00	243.00	243.00	02,000.02	1,701.00	1,701.00
Landscaping Services		4.00	4.00		28.00	28.00
Parking Lot/Sidewalk Maintenance		961.00	961.00	8,108.00	6,727.00	(1,381.00)
Nursing Home Building Construction/Improvements		778.00	778.00	0,100.00	5,446.00	5,446.00
Total Maintenance	18,430.25	22,035.00	3,604.75	150,411.37	154,245.00	3,833.63
Nursing Services						
Reg. Full-Time Employees	134,473.55	111,176.00	(23,297.55)	896,848.18	778,232.00	(118,616.18)
Reg. Part-Time Employees	, , , , , ,	2,911.00	2,911.00	555,51515	20,377.00	20,377.00
Temp. Salaries & Wages	17,602.34	27,780.00	9,977.66	85,818.90	194,480.00	108,641.10
Overtime	30,189.02	40,254.00	10,064.98	250,801.39	281,778.00	30,976.61
TOPS - Balances	1,239.31	3,706.00	2,466.69	11,815.56	25,942.00	14,126.44
No Benefit Full-Time Employees	90,759.99	68,145.00	(4,614.99)	605,208.13	603,015.00	(2,193.13)
No Benefit Part-Time Employees	35,471.21	30,710.00	(4,761.21)	253,225.57	214,970.00	(38,255.57)
TOPS - FICA	94.80	283.00	168.20	903.89	1,981.00	1,077.11
Social Security - Employer	23,131.32	22,525.00	(606.32)	156,920.82	157,675.00	754.18
IMRF - Employer Cost	29,005.24	27,043.00	(1,962.24)	200,506.48	189,301.00	(11,205.48)
Workers' Compensation Insurance	16,569.49	16,533.00	(36.49)	109,910.98	115,731.00	5,820.02
Unemployment Insurance	6,076.24	5,833.00	(243.24)	73,402.12	40,831.00	(32,571.12)
Employee Health/Life Insurance	19,935.70	17,316.00	(2,619.70)	139,039.39	121,212.00	(17,827.39)
Books, Periodicals & Manuals	75.00	64.00	(11.00)	576.19	448.00	(128.19)
Stocked Drugs	1,317.67	3,333.00	2,015.33	12,162.16	23,331.00	11,168.84
Pharmacy Charges-Public Aid	1,015.52	992.00	(23.52)	7,474.64	6,944.00	(530.64)
Oxygen	3,137.36	3,333.00	195.64	21,036.50	23,331.00	2,294.50
~~,	0,107.00	0,000.00	100.07	_ 1,000.00	20,001.00	-,207.00

Pharmacy Charges - Insurance

Incontinence Supplies

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63,000.00

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6,832.24

1,454.71

06/30/13	Champai Actual vs Bud	gn County Nu Iget Stateme	_	ns		4
Description	Actual	Budget	Variance	YTD Actual	YTD Budget	Variance
Equipment < \$2,500	902.06		(902.06)	10,724.34		(10,724.34)
Operational Supplies	10,747.73	15,240.00	4,492.27	109,829.64	106,680.00	(3,149.64
Pharmacy Charges-Medicare	13,875.12	13,449.00	(426.12)	108,956.08	94,143.00	(14,813.08
Medical/Dental/Mental Health	3,400.00	1,616.00	(1,784.00)	23,800.00	11,312.00	(12,488.00
Professional Services	38,521.29	5,000.00	(33,521.29)	248,502.94	35,000.00	(211,502.94)
Job Require Travel	00,027120	81.00	81.00	181.44	587.00	385.56
Laboratory Fees	13.152.49	2.013.00	(11,139.49)	27,103.46	14,091.00	(13,012.46)
Equipment Rentals	2,941.09	4,084.00	1,142,91	36,356.06	28,588.00	(7,788.06)
Dues & Licenses	2,011.00	45.00	45.00	00,000.00	315.00	315.00
Conferences & Training	3,180.00	526.00	(2,654.00)	3,180.00	3,882.00	502.00
Contract Nursing Services	12,995,35	50,000.00	37,004.65	207,645.61	350,000.00	142,354.39
Medicare Medical Services	2,135.46	6,250.00	4,114.54	25,013.96	43,750.00	18,736.04
Medical/ Health Equipment	2,130.40	449.00	449.00	20,010.00	3,143.00	3,143.00
Total Nursing Services	520,431.30	514,356.00	(6,075.30)	3,702,612.19	3,600,492.00	(102,120.19)
•			(-,,			(,,
Activities Reg. Full-Time Employees	13,369.87	16,866.00	3,296,13	94,711.73	116,662.00	21,950.27
Overtime	302.70	38.00	(264.70)	804.02	266.00	(538.02)
TOPS - Balances	(1,474.82)	250.00	1,724.82	(1,527.14)	1,750.00	3,277.14
TOPS - FICA	(112.83)	19.00	131.83	(116.83)	133.00	249.83
Social Security - Employer	988.55	1,245.00	256.45	6,917.79	8,715.00	1,797.21
IMRF - Employer Cost	1,331.57	1,677.00	345.43	9,281.53	11,739.00	2,457.47
Workers' Compensation Insurance	802.73	923.00	120.27	5,659.61	6,461.00	801.39
Unemployment Insurance	448.51	308.00		4,188.62	2,156.00	
	3,374.80	3,012.00	(140.51)			(2,012.62)
Employee Health/Life Insurance	0000 0000 10000000	3,012.00	(362.80)	17,743.65	21,084.00	3,340.35
Books, Periodicals & Manuals	(143.40)	045.00	143.40	2 270 20	4.745.00	(4.004.00)
Operational Supplies	347.55	245.00	(102.55)	3,079.39	1,715.00	(1,364.39)
Professional Services	249.40	125.00	(124.40)	1,110.90	875.00	(235.90)
Conferences & Training Total Activities	19,484.63	81.00 24,589.00	81.00 5,104.37	141,833.27	567.00 172,123.00	567.00 30,289.73
			.,			
Social Services	w has be select to come		A SE INN DAYS		SUSSIE KINGSWERKER	
Reg. Full-Time Employees	10,145.08	11,489.00	1,343.92	65,374.06	80,423.00	15,048.94
Temp. Salaries & Wages		601.00	601.00		4,207.00	4,207.00
Overtime		387.00	387.00	485.98	2,709.00	2,223.02
TOPS - Balances	369.78	533.00	163.22	1,585.54	3,731.00	2,165.46
TOPS - FICA	28.29	40.00	11.71	119.76	280.00	160.24
Social Security - Employer	760.88	918.00	157.12	4,593.41	6,426.00	1,832.59
IMRF - Employer Cost	1,024.50	1,176.00	151.50	6,158.38	8,232.00	2,073.62
Workers' Compensation Insurance	607.72	690.00	82.28	3,901.32	4,830.00	928.68
Unemployment Insurance	254.69	275,00	20.31	2,605.00	1,925.00	(680.00)
Employee Health/Life Insurance	2,238.40	2,076.00	(162.40)	12,695.17	14,532.00	1,836.83
Books, Periodicals & Manuals		58.00	58.00		406.00	406.00
Operational Supplies				53.68		(53.86)
Professional Services	487.40	235.00	(252.40)	44,407.78	1,645.00	(42,762.78)
Conferences & Training		121.00	121.00		847.00	847.00
Total Social Services	15.916.74	18,599.00	2.682.26	142,160.26	130,193.00	(11,967.26)
Physical Therapy						
Reg. Full-Time Employees	3,960.74	4,377.00	416.26	30,380.90	30,639.00	258.10
Overtime		3.00	3.00	145.56	21.00	(124.58)
TOPS - Balances	(444.38)	324.00	788.38	250.97	2,268.00	2,017.03
TOPS - FICA	(33.99)	24.00	57.99	19.20	188.00	148.80
Social Security - Employer	293.44	339.00	45.56	2,633.48	2,373.00	(260.48)
IMRF - Employer Cost	396.44	431.00	34.56	3,540.20	3,017.00	(523.20)
Workers' Compensation Ins.	239.94	242.00	2.06	1,817.12	1.694.00	(123.12)

	Champai	ign County No	ursing Home			
06/30/13	Actual vs Bud	dget Stateme	nt of Operation	ons)
Description	Actual	Budget	Variance	YTD Actual	YTD Budget	Variance
Unemployment Insurance	170.84	91.00	(79.84)	1,359.12	637.00	(722.12
Employee Health/Life Insurance	1,141.20	1,204.00	62.80	8,180.38	8,428.00	247.62
Professional Services	25,674.72	34,383.00	8,708.28	204,984.93	240,681.00	35,696.07
Total Physical Therapy	31,398.95	41,418.00	10,019.05	253,311.86	289,926.00	36,614.14
Occupational Therapy						
Reg. Full-Time Employees	1,968.00	2,102.00	134.00	15,111.63	14,714.00	(397.63
Overtime				136.29		(136.29
TOPS - Balances	30.13	36.00	5.87	101.72	252.00	150.2
TOPS - FICA	2.30	2.00	(0.30)	7.78	14.00	6.2
Social Security - Employer	149.43	149.00	(0.43)	1,158.83	1,043.00	(115.8
IMRF - Employer Cost	201.99	217.00	15.01	1,554.76	1,519.00	(35.70
Workers' Compensation Ins.	119.47	116.00	(3.47)	903.58	812.00	(91.5
Unemployment Insurance	102.74	46.00	(56.74)	705.85	322.00	(383.89
Employee Health/Life Insurance	570.60	602.00	31.40	4,090.19	4,214.00	123.8
Professional Services	27,954.63	40,231.00	12,276.37	204,148.29	281,617.00	77,488.7
Total Occupational Therapy	31,099.29	43,501.00	12,401.71	227,918.92	304,507.00	76,588.0
Speech Therapy						
Professional Services	9,343.40	13,724.00	4,380.60	88,096.66	96,066.00	27,971.3
Total Speech Therapy	9,343.40	13,724,00	4,380.60	88,096.66	96,068.00	27,971.3
Total Opcount Missapy	3,0,0	10,12 1100	1,000.00	,	00,000.00	
Respiratory Therapy						
Professional Services	8,745.00	10,400.00	1,655.00	42,130.00	62,400.00	20,270.00
Total Respiratory Therapy	8,745.00	10,400.00	1,655.00	42,130.00	62,400.00	20,270.00
Total This Department	18,088.40	24,124.00	6,035.60	110,226.66	158,468.00	48,241.34
Food Services						
Reg. Full-Time Employees	34,083.07	39,617.00	5,533.93	258,626.62	277,319.00	18,692.3
Reg. Part-Time Employees	3,907.71	2,422.00	(1,485.71)	19,632.87	16,954.00	(2,678.8
Overtime	374.09	1,471.00	1,096.91	13,347.78	10,297.00	(3,050.7
TOPS - Balances	1,077.42	498.00	(579.42)	(3,501.47)	3,488.00	6.987.4
TOPS - FICA	82.42	38.00	(44.42)	(267.68)	266.00	533.8
Social Security - Employer	2,917.16	3,222.00	304.84	22,082.88	22,554.00	471.1
IMRF - Employer Cost	3,924.74	4,344.00	419.26	29,619.02	30,408.00	768.9
Workers' Compensation Insurance	2,263.79	2,406.00	142.21	16,619.70	16,842.00	222.30
Unemployment Insurance	1.971.31	1,083.00	(888.31)	13,890.32	7,581.00	(6,309.3
Employee Health/Life Insurance	4,572.60	7,803.00	3,230.40	42,921.33	54,621.00	11,699.6
Food	31,561.17	36,083.00	4,521.83	269,823.68	252,581.00	(17,242.8
Nutritional Supplements	4,065.18	2,500.00	(1,565.18)	24,726.85	17,500.00	(7,226.8
Equipment < \$2,500				33.64		(33.6
Operational Supplies	3,653.89	3,756.00	102.11	31,588.14	26,292.00	(5,274.1
Professional Services	13,787.96	2,616.00	(11,171.96)	48,933.68	18,312.00	(30,621.8
Equipment Rentals	404.95	394.00	(10.95)	2,834.65	2,758.00	(76.65
Dues & Licenses		13.00	13.00	80.00	91.00	11.00
Conferences & Training		83.00	83.00		581.00	581.00
Total Food Services	108,647.46	108,349.00	(298.46)	790,969.99	758,443.00	(32,526,99
Barber & Beauty						
Reg. Full-Time Employees	3,972.81	4,446.00	473.19	30,498.02	31,122.00	625.98
Overtime Cripicyces	0,012.01	4.00	4.00	(14.09)	28.00	42.0
	117.52		37,48			
TOPS - Balances		155.00		(318.52)	1,085.00	1,403.5
TOPS - FICA	8.99	11.00	2.01	(24.36)	77.00	101.3
Social Security - Employer	267.06	242.00	(25.06)	2,060.16	1,694.00	(366.10
IMRF - Employer Cost	360.70	336.00	(24.70)	2,763.96	2,352.00	(411.9
Workers' Compensation Insurance	240.25	246.00	5.75	1,823.68	1,722.00	(101.8

06/30/13		ign County Nu dget Stateme		ons		(
Description	Actual	Budget	Variance	YTD Actual	YTD Budget	Variance
Unemployment Insurance	210.32	188.00	(44.32)	1,402.99	1,162.00	(240.99
Employee Health/Life Insurance	1,141.20	1,204.00	62.80	8,180.38	8,428.00	247.62
Operational Supplies		118.00	118.00	446.21	826.00	377.79
Conferences & Training				180.00		(160.00
Total Barber & Beauty	6,318.85	6,928.00	609.15	48,978.43	48,496.00	1,517.57
Adult Day Care						
Reg. Full-Time Employees	11,551.32	12,908.00	1,356.88	70,659.41	90,356.00	19,696.59
Temp. Salaries & Wages		32.00	32.00		224.00	224.00
Overtime	85.55	50.00	(35.55)	187.03	350.00	162.97
TOPS - Balances	127.19	340.00	212.81	3,629.01	2,380.00	(1,249.01
TOPS - FICA	9.73	26.00	16.27	277.62	182.00	(95.62
Social Security - Employer	884.64	958.00	73.36	5,320.26	6,706.00	1,385.74
IMRF - Employer Cost	1,191.45	1,288.00	96.55	7,136.40	9,016.00	1,879.60
Workers' Compensation Insurance	699.67	718.00	18.33	4,228.13	5,026.00	797.87
Unemployment Insurance	362.41	250.00	(112.41)	2,990.01	1,750.00	(1,240.01
Employee Health/Life Insurance	2,282.40	2,598.00	315.60	16,360.77	18,186.00	1,825.23
Books, Periodicals & Manuals		30.00	30.00		210.00	210.00
Gasoline & Oil	1,223.03	1,319.00	95.97	8,211.15	9,233.00	1,021.85
Equipment < \$2,500				119.00		(119.00
Operational Supplies	165.80	35.00	(130.80)	314.23	245.00	(69.23
Field Trips/Activities				71.21		(71.21
Conferences & Training		25.00	25.00		175.00	175.00
Alzhelmers and Related Disord	10 742 70	00 422 00	5 740 00	455 500 10	457.024.00	4 450 00
Reg. Full-Time Employees	16,713.78	22,433.00	5,719.22	155,580.10	157,031.00	1,450.90
Overtime	3,299.41	11,837.00	8,537.59	54,633.69	82,859.00	28,225.31
TOPS - Balances	1,368.47	389.00	(979.47)	(7,080.65)	2,723.00	9,803.65
No Benefit Full-Time Employees	29,126.65 16,560.84	21,746.00	(7,380.65)	169,798.01 135,437.25	152,222.00	(17,576.01
No Benefit Part-Time Employees	104.69	12,785.00	(3,775.84)		89,495.00	(45,942.25
TOPS - FICA		29.00	(75.69)	(541.67) 39.042.90	203.00	744.67
Social Security - Employer	4.978.50	5,145.00	188.50	- 1800s.avv	36,015.00	(3.027.90
IMRF - Employer Cost	6,701.37	6,942.00	240.63	52,366.81	48,594.00	(3,772.81
Workers' Compensation Insurance	3,717.68	1,895.00	(1,822.68)	27,524.20	13,265.00	(14,259.20
Unemployment Insurance	2,813.08	1,500.00	(1,313.08)	22,838.57	10,500.00	(12,338.57
Employee Health/Life Insurance	3,955.20	3,783.00	(172.20)	30,070.44	26,481.00	(3,589.44
Operational Supplies		77.00	77.00	4.48	539.00	534.52
Conferences & Training	2 020 74	238.00	238.00	56.89	1,666.00 40.831.00	1,609.11
ARD - Contract Nursing Total Alzheimers and Related Disorders	3,930.74 93,270.39	5,833.00	1,902.26	81,133.10 760,864.12	124 (STATESTER STATESTER S	(40,302:10
7-2	1,227,366.95	94,632.00	1,361.61	8,908,760.70	9,164,556.00	(98,440.12 255,795.30
Total Expenses Net Operating Income	(140,898.88)	(96,021.00)	83,341.05 (44,877.68)	(1,045,743.69)	(881,747.00)	(383,996.69
NonOperating Income	,		,		, , , ,	,,
Local Taxes						
Current-Nursing Home Operating	68,530.67	86,531.00	(0.33)	605,714.69	605,717.00	(2.31
Payment In Lieu of Taxes				276.39		276.39
Total Local Taxes	68,530.67	88,531.00	(0.33)	605,991.08	605,717.00	274.08
Miscellaneous NI Revenue			1///			
Investment Interest	35.68	84.00	(48.14)	408.38	588.00	(179.62
Restricted Donations	463.38	417.00	48.38	1,531.76	2,919.00	(1,387.24
Interfund Transfer-From General Corporate Fund		T.		333,141.98		333,141.98
Total Miscellaneous NI Revenue	499.24	501.00	(1.76)	335,082.12	3,507.00	331,575.12

	Champaig	gn County Nu	rsing Home			
06/30/13	Actual vs Bud	get Statemer	nt of Operation	ns		7
Description	Actual	Budget	Variance	YTD Actual	YTD Budget	Variance
Total NonOperating Income	87,029.91	87,032.00	(2.09)	941,073.20	609,224.00	331,849.20
Net Income (Loss)	(53.868.97)	(8.989.00)	(44 879 97)	(104 670 49)	(52.523.00)	(52 147 49)

06/30/13					paign Cou ical Statem								
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	То
Operating income													
Miscellaneous Revenue													
Lunch Reimbursement						540	363	445	300	619	189	579	3,03
Late Charge, NSF Check Charge						1,896	1,489	2,798	3,783	1,485	925	3,201	15,55
Other Miscellaneous Revenue						20	88	185	301	58	39	110	79
Total Miscellaneous Revenue						2,456	1,918	3,428	4,383	2,183	1,153	3,890	19,39
Medicare A Revenue							N#76						
Medicare A						231,465	236,703	186,112	142,592	122,972	141,611	188,874	1,230,34
ARD - Medicare A						16,789	8,559	20,014	20,716	20,000	10,741	15,073	111,89
NH Pt_Care - Medicare Advantage/ H						52,974	48,675	71,095	25,014	49,188	42,752	39,096	328,79
ARD_Pt Care - Medicare Advantage/				Accessed to							4,840		4,84
Total Medicare A Revenue				WT.	-	301,248	295,937	277,220	188,321	192,180	199,944	221,044	1,675,87
Medicare B Revenue													
Medicare B						18,755	28,429	30,091	37,847	36,973	30,598	29,596	214,29
Total Medicare B Revenue						18,755	28,429	30,091	37,847	36,973	30,598	29,596	214,29
Medicald Revenue													
Medicald Title XIX (IDHFS)						335,488	329,806	248,269	297,643	304,079	277,908	254,595	2,047,78
ARD - Medicald Title XIX (IDHFS)						123,845	118,928	107,281	117,893	109,481	144,880	102,104	824,21
Patient Care-Hospice						40,248	30,754	27,927	25,358	33,394	37,767	35,523	230,97
ARD Patient Care - Hospice						37,800	22,284	14,992	15,646	24,588	19,657	19,023	153,99
Total Medicald Revenue						537,381	501,772	398,489	456,539	471,542	480,012	411,248	3,256,96
Private Pay Revenue													
VA-Veterans Nursing Home Care						20,154	15,820	12,138	13,436	13,003	14,953	13,003	102,50
ARD - VA - Veterans Care											3,034	6,935	9,96
Nursing Home Patient Care - Private						274,061	247,268	216,613	288,007	219,126	257,207	271,390	1,773,67
Nursing Home Beauty Shop Revenue						3,372	3,580	3,244	3,161	3,491	3,170	3,002	23,01
Medical Supplies Revenue						5,409	6,091	4,480	5,903	7,518	4,200	6,127	39,72
Patient Transportation Charges						1,087	1,702	2,363	1,199	1,425	2,599	800	11,19
ARD Patient Care- Private Pay						87,102	90,376	89,693	103,398	103,025	42,845	100,740	617,17
Total Private Pay Revenue						391,185	384,838	328,549	415,104	347,588	328,008	401,996	2,577,26
Adult Day Care Revenue													
VA-Veterans Adult Daycare						3,343	4,241	3,793	3,473	4,889	4,494	4,149	28,36
IL Department Of Aging-Day Care Gra						9,968	10,128	9,991	11,557	12,508	12,523	12,358	79,03
Adult Day Care Charges-Private Pay						361	694	1,897	2,187	2,266	2,224	2,190	11,81
Wednesday, August 07, 2013													7:57

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06/30/13						ment of Or	perations						
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	Tot
Total Adult Day Care Revenue						13,672	15,063	15,880	17,217	19,663	19,241	18,696	119,234
Total income						1,264,698	1,207,956	1,053,437	1,119,412	1,072,089	1,058,957	1,088,468	7,883,017
Operating Expenses													
Administration													
Reg. Full-Time Employees						23,217	26,711	24,019	25,679	26,880	28,686	24,551	179,744
Temp. Salaries & Wages						1,639	1,992	1,522	1,624	1,342	1,592	1,324	11,034
Per Diem							232	239	310	239	239	169	1,427
Overtime						265	129	88	744	85	135	34	1,480
TOPS - Balances						(1,320)	482	1,684	1,282	171	(987)	303	1,595
TOPS - FICA						(101)	37	127	98	13	(75)	23	122
Social Security - Employer						1,754	2,040	1,814	1,996	2,001	2,234	1,830	13,889
IMRF - Employer Cost						2,171	2,509	2,265	2,521	2,531	. 2,814	2,312	17,123
Workers' Compensation Insurance						1,923	1,696	1,526	514	1,887	2,558	1,547	11,450
Unemployment Insurance						78	1,782	1,265	1,143	744	697	480	6,189
Employee Health/Life Insurance						3,859	3,859	3,859	3,991	5,066	4,430	4,430	29,494
IMRF - Early Retirement Obligation						3,465	3,465	3,465	3,465	3,465	3,465	3,465	24,258
Employee Development/Recognition						34	29	21	26	29	21	91	251
Employee Physicals/Lab						1,500	1,493	3,034	3,650	2,698	21	2,548	14,923
Stationary & Printing						1,000	499	0,004	0,000	2,000		2,040	499
Books, Periodicals & Manuals						69	97				97		263
Copier Supplies						771	731	183	731	731	914	731	4,791
Postage, UPS, Federal Express						330	360	415	1,019	829	363	475	3,791
Operational Supplies						1,307	1,587	387	1,072	475	629	177	5,614
Audit & Accounting Fees						4,024	4,024	4,024	4,024	9,484	15,774	4,994	48,345
Attorney Fees						4,024	2,503	2,719	3,491	1,935	(715)	89	10,021
Engineering Fees							2,000	99	1,554	3,183	(713)	09	4,836
Professional Services						28,733	41,881	37,298	37,644	36,544	34,799	35,713	252,612
Job Required Travel Expense						69	151	472	515	343	106	193	1,646
Insurance						22,442	22,508	22,508	23,167	23,167	23,167	23,587	180,525
Computer Services						8,482	3,373	3,316	4,284	3,309	3,251	5,955	31,950
Telephone Services						1,511	1,633	1,361	1,368	1,473	1,451	1,418	10,234
Legal Notices, Advertising						218	4,047	2,489	5,368	1,476	3,327	4,882	21,827
Photocopy Services						1,100	800	800	800	2,348	3,327 750	4,002 750	7,347
Public Relations						292	14	800	78	2,346	16	152	7,347 576
Dues & Licenses						1,625	1,833	1,725	1,625	1,975	1,625	1,625	12,034
Conferances & Training						1,020	42	462	1,575	9	3,532		8,247
Finance Charges, Bank Fees						1,284	1,616	1,290	195	2,845	1,509	(9)	8,247 8,361
Cable/Satellite TV Expense						2,474	909	2,504	1,547 2,643	1,135 2,643	2,643	2,534	16,350
IPA Licensing Fee						48,512	44,163	38,395	2,643 42,949	2,643 41,959	2,643 42,724	2,534 41,716	298,416
Fines & Penalties						40,012	44 ,103	30,383	42,849	41,959	42,124	41,710	280,410

06/30/13						enty Nursin ment of Op							;
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	Tota
Fumlshings, Office Equipment	-												
Depreciation Expense						60,511	61,305	61,304	61,097	61,097	61,097	61,097	427,507
Transfers to General Corporate Fund													
Interest-Tax Anticipation Notes Payabl											1,628	1,947	3,575
Interest- Bonds Payable						10,841	10,841	10,841	10,841	10,841	10,841	10,841	75,888
Total Administration						231,058	251,349	237,521	254,453	254,568	255,334	241,931	1,726,214
Environmental Services													
Reg. Full-Time Employees						25,732	26,386	27,581	30,691	31,132	38,205	27,086	206,793
Overtime						2,406	2,190	27	884	23	1,091	4	6,623
TOPS - Balances						(1,866)	1,670	1,217	1,295	(455)	(6,233)	(2,368)	(6,741
TOPS- FICA						2,208	128	93	99	(35)	(477)	(181)	1,835
Social Security - Employer						2,121	2,148	2,077	2,378	2,345	2,980	2,038	16,088
IMRF - Employer Cost						2,792	2,866	2,792	3,225	3,149	3,993	2,748	21,585
Workers' Compensation Insurance						1,963	1,558	1,835	658	1,816	3,105	1,624	12,357
Unemployment insurance						188	1,889	1,435	1,678	1,584	1,497	1,369	9,619
Employee Health/Life Insurance						6,283	6,283	6,283	6,485	7,158	6,826	6,256	45,558
Books, Periodicals & Manuals						0,265	98	0,203	6,465	7,136	0,820	0,256	45,556
Operational Supplies						5,178	7,324	4,531	5,525	5,368	4.825	4,391	37,143
Professional Services						3,176	1,554	4,001	75.7	5,306	4,023	4,381	37,143
Gas Service						12,000	13,429	13,086	(1,554)	4,287	9,662	44 000	75.055
Electric Service						19,054	18,895		11,493			11,999	75,955
Water Service								17,679	18,020	21,017	21,326	25,403	141,394
Pest Control Service						2,588	2,832	2,523	2,385	2,579	2,547	2,602	18,055
Waste Disposal & Recycling						482	482	482	482	482	482	482	3,374
Equipment Rentals						4,745	2,441	2,512	2,809	2,087	2,312	2,744	19,650
Sewer Service & Tax						258	258	258	258	258	258	258	1,806
Total Environmental Services						1,500 87,632	1,365 93,798	1,300 85,490	1,192 87,980	1,346 84,140	1,343 93,743	1,400 87.856	9,446
						0.,002	00,100	00,100	07,000	04,140	00,110	07,000	020,000
Laundry Reg. Full-Time Employees						7 745	7.000	7044	0.707	0.500	44 454	0.404	00.000
Overtime						7,745	7,909	7,344	8,707	9,598	11,451	9,481	62,236
TOPS Balances						418	500		255	(000)	393	4	1,570
s and as proportional						216	704	399	1,336	(266)	375	(793)	1,972
TOPS - FICA						17	54	31	102	(20)	29	(61)	151
Social Security - Employer						612	630	550	673	714	893	708	4,781
IMRF - Employer Cost						806	847	740	911	959	1,196	955	6,415
Workers' Compensation Insurance						587	468	438	203	519	933	570	3,717
Unemployment Insurance							581	362	537	493	531	428	2,933
Employee Health/Life Insurance						2,258	2,258	554	1,756	1,928	1,690	1,690	12,134
Laundry Supplies						755	2,343	1,955	398	2,900	878	- 100 Maria	9,227
Linen & Bedding						1,559	1,558	1,137	648	1,084	1,066	2,927	9,981

06/30/13						inty Nursin nent of Op-							
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	Tot
Maintenance													
Reg. Full-Time Employees						3,251	3,887	3,189	4,028	4,823	5,271	5,281	29,510
Overtime							S 1000		120			389 - 99	120
TOPS - Balances						(125)	(20)	172	293	301	193	(1,149)	(335
TOPS - FICA						(10)	(2)	13	22	23	15	(88)	(26
Social Security - Employer						248	279	243	316	368	402	403	2,258
IMRF - Employer Cost						326	375	327	427	494	539	543	3,030
Workers' Compensation Insurance						243	217	190	77	281	438	318	1,784
Unemployment Insurance							239	167	230	248	257	299	1,441
Employee Health/Life Insurance						573	573	573	590	653	573	573	4,108
Gasoline & Oil						2,614					0.0	-	2,614
Maintenance Supplies						2,701	3,251	3,139	3,422	2,368	5,047	1,096	21,025
Professional Services						_,	0,20.	0,100	0,	_,000	0,0 17	589	589
Automobile Maintenance						377	340	294	128	215	385	1,248	2,985
Equipment Maintenance						2,171	2,541	2,472	3,137	2,858	4,735	1,706	19,620
Equipment Rentals						276	18	276	13	13	13	4	613
Nursing Home Building Repair/Mainte						5,296	8,706	12,663	9,736	5.782	2,994	7,608	52,986
Parking Lot/Sidewalk Maintenance						325	4,583	800	2,400	3.762	2,004	7,000	8,108
Total Maintenance	**				_	18,267	24,788	24,718	24,941	18,426	20,881	18,430	150,411
,						10,207	24,700	24,710	24,041	10,420	20,001	10,400	130,411
Nursing Services						a sen trosas							
Reg. Full-Time Employees						110,538	123,306	114,314	132,963	137,290	143,964	134,474	896,848
Temp. Salaries & Wages						15,620	13,565	9,681	6,021	10,719	12,412	17,602	85,819
Overtime						60,651	51,047	18,417	27,655	24,419	38,424	30,189	250,801
TOPS - Balances						2,368	3,204	1,284	4,643	(1,885)	962	1,239	11,816
No Benefit Full-Time Employees						76,201	85,292	79,515	87,232	88,790	97,418	90,760	805,208
No Benefit Part-Time Employees						41,074	34,926	30,776	36,349	38,743	37,888	35,471	253,226
TOPS - FICA						181	245	98	355	(144)	74	95	904
Social Security - Employer						22,889	23,075	18,837	21,673	22,360	24,955	23,131	158,921
IMRF - Employer Cost						28,319	29,481	24,357	28,636	28,776	31,950	29,005	200,506
Workers' Compensation Insurance						18,316	15,173	13,988	5,267	15,765	24,852	16,569	109,911
Unemployment insurance						3,338	19,704	13,306	13,324	9,549	8,105	6,078	73,402
Employee Health/Life Insurance						18,813	18,813	19,377	19,927	22,803	19,371	19,936	139,039
Books, Periodicals & Manuals						140				361		75	576
Stocked Drugs						1,853	1,581	2,240	1,868	1,779	1,524	1,318	12,162
Pharmacy Charges-Public Aid						2,039	1,039	757	1,009	807	809	1,016	7,475
Oxygen						61	5,104		4,581	3,468	4,885	3,137	21,037
Incontinence Supplies						10,024	11,212	8,189	6,366	6,084	8,217	6,832	58,903
Pharmacy Charges - Insurance						4,232	1,771	7,222	(551)	2,300	4,336	1,455	20,765
Equipment < \$2,500						5,247	2,540	318		1,233	485	902	10,724
Operational Supplies						22,162	23,181	13,841	11,481	13,353	15,284	10,748	109,830

06/30/13					paign Courical Staten								5
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	Tota
Pharmacy Charges Medicare			7			14,670	16,519	11,920	20,051	19,583	12,337	13,875	108,956
Medical/Dental/Mental Health						3,400	3,400	3,400	3,400	3,400	3,400	3,400	23,800
Professional Services						25,881	37,256	35,604	33,622	34,854	40,765	38,521	248,503
Job Require Travel										181			181
Laboratory Fees						2,895			5,811	2,727	2,519	13,152	27,103
Equipment Rentals						7,433	5,397	4,380	3,347	9,690	3,188	2,941	36,356
Conferences & Training												3,180	3,180
Contract Nursing Services						53,531	51,579	32,489	24,826	20,944	11,302	12,995	207,648
Medicare Medical Services						133	602	2,384	4,184	11,165	4,231	2,135	25,014
Total Nursing Services						552,005	579,190	466,414	504,022	527,094	553,455	520,431	3,702,612
Activities													
Reg. Full-Time Employees						12,269	14,254	10,866	12,707	15,053	16,394	13,370	94,712
Overtime						120	114	(97)	340	200400 • Olivertoury	25	303	804
TOPS - Balances						7	(1,873)	1,356	(78)	713	(178)	(1,475)	(1,527)
TOPS - FICA						1	(143)	104	(6)	55	(14)	(113)	(117)
Social Security - Employer						905	1,023	761	937	1,089	1,215	989	6,918
IMRF - Employer Cost						1,192	1,375	1,022	1,271	1,462	1,630	1,332	9,282
Workers' Compensation Insurance						931	845	534	239	816	1,392	803	5,660
Unemployment Insurance						230	816	547	703	754	670	449	4,169
Employee Health/Life Insurance						2,801	2,230	2,231	2,325	2,549	2,234	3,375	17,744
Books, Periodicals & Manuals											143	(143)	
Equipment < \$2,500												(****)	
Operational Supplies						326	664	440	419	418	465	348	3,079
Professional Services								249	125	363	125	249	1,111
Total Activities						18,781	19,303	17,914	18,980	23,271	24,100	19,485	141,833
Social Services													
Reg. Full-Time Employees						6,835	7,373	8,037	10,240	10,774	11,971	10,145	65,374
Overtime						66	29	143	197	28	23		486
TOPS - Balances						(191)	525	453	(225)	419	214	370	1,566
TOPS - FICA						(15)	40	35	(17)	32	16	28	120
Social Security - Employer						520	554	607	798	806	537	761	4,593
IMRF - Employer Cost						885	757	814	577	1,083	1,219	1,025	6,158
Workers' Compensation Insurance						512	436	473	251	624	998	608	3,901
Unemployment Insurance							465	419	575	551	521	255	2,805
Employee Health/Life Insurance						1,695	1,695	1,695	1,744	1,933	1,695	2,238	12,695
Operational Supplies									35	19			54
Professional Services						7,635	11,832	11,535	11,951	725	244	487	44,408
Total Social Services	*					17,742	23,734	24,210	26,125	16,994	17,438	15,917	142,180

Physical Therapy

06/30/13						enty Nursing ment of Ope					5-2000-000		
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	Т
Reg. Full-Time Employees						4,153	4,548	3,955	4,084	4,351	5,348	3,961	30,38
Overtime						8			137				14
TOPS - Balances						(192)	(342)	477	258	(96)	591	(444)	2
TOPS - FICA						(15)	(26)	38	20	(7)	45	(34)	
Social Security - Employer						308	335	291	310	321	774	293	2,6
IMRF - Employer Cost						408	450	392	927	431	537	396	3,5
Workers' Compensation Ins.						310	269	236	79	253	431	240	1,8
Unemployment Insurance							291	204	228	219	248	171	1,3
Employee Health/Life Insurance						1,141	1,141	1,141	1,174	1,300	1,141	1,141	8,1
Professional Services						29,066	33,362	28,881	32,745	27,292	27,943	25,675	204,9
Total Physical Therapy						35,207	40,049	35,595	39,943	34,063	37,057	31,399	253,3
Occupational Therapy											0		
Reg. Full-Time Employees						2,066	2,263	1,968	1,968	2,165	2,713	1,968	15,1
Overtime						(11)	2,200	1,000	148	2,100	2,710	1,000	10,
TOPS - Balances						(131)	129	18	30	30	(4)	30	•
TOPS - FICA						(10)	10	10	2	2	(4)	2	
Social Security - Employer						157	172	149	161	184	207	149	1,1
IMRF - Employer Cost						207	231	201	218	221	207 276	202	(5)
Workers' Compensation Ins.						154	134						1,8
Unemployment Insurance						154		117	39	122	217	119	
Employee Health/Life Insurance						571	148 571	103	117	111	125	103	7
Professional Services						28,506		571	587	650	571	571	4,0
Total Occupational Therapy		-				31,508	31,093 34,749	27,968 31,096	29,092 32,362	29,737 33,202	29,798 33,902	27,955 31,099	204,
Speech Therapy													
Professional Services						0.005	0.400	0.400	40.000	40.004			
Total Speech Therapy						9,885 9,885	9,168 9,168	9,122 9,122	10,260	10,034	10,505 10,505	9,343 9,343	88,0 88,0
						4,555	5,1.55	5,122	10,200	10,007	10,000	0,040	00,0
Respiratory Therapy											L.		
Professional Services													
Professional Services		of 1967 1964	00004				3,658	7,468	2,640	9,543	10,079	8,745	42,1
Total Respiratory Therapy							3,658	7,468	2,840	9,543	10,079	8,745	42,1
Total This Department						9,885	12,825	16,588	12,900	19,576	20,584	18,086	110,2
ood Services													
Reg. Full-Time Employees						37,426	40,318	33,425	40,866	33,628	38,859	34,083	258,6
Reg. Part-Time Employees						1,814	1,968	1,771	2,628	4,102	3,442	3,908	19,6
Overtime						4,831	3,678	392	1,561	812	1,700	374	13,3
TOPS - Balances						(733)	(2,473)	(2,352)	(703)	1,030	652	1,077	(3,5
TOPS - FICA						(56)	(189)	(180)	(54)	79	50	82	(2
Social Security - Employer						3,322	3,462	2,683	3,406	2,940	3,354	2,917	22,0
Vednesday, August 07, 2013													7:57

06/30/13						inty Nursin nent of Op							
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	Tot
IMRF - Employer Cost						4,372	4,652	3,614	4,611	3,948	4,496	3,925	29,619
Workers' Compensation Insurance						2,921	2,500	2,102	1,121	2,102	3,609	2,264	16,620
Unemployment Insurance						752	2,818	2,138	2,063	2,015	2,133	1,971	13,890
Employee Health/Life Insurance						7,389	7,372	6,801	6,455	5,209	5,143	4,573	42,921
Food						41,233	38,436	34,287	39,087	42,025	43,194	31,561	269,824
Nutritional Supplements						3,388	2,845	3,452	2,475	2,350	6,155	4,065	24,727
Equipment < \$2,500											34		34
Operational Supplies						4,805	5,967	4,753	5,248	2,765	4,377	3,654	31,586
Professional Services						2,601	4,402	3,079	11,640	9,716	3,708	13,788	48,934
Equipment Rentals						405	405	405	12 JON - 120 CONT.	405	810	405	2,835
Dues & Licenses									80				80
Total Food Services						114,446	116,161	96,372	120,503	113,126	121,715	108,847	790,970
Barber & Beauty	0												
Reg. Full-Time Employees						4,171	4,569	3,973	4,171	4,370	5,269	3,973	30,496
Overtime						(19)	5	0,070	7,171	4,570	0,200	5,875	(14)
TOPS - Balances						(212)	241	120	(320)	108	(374)	118	(319)
TOPS - FICA						(16)	18	9		8	(29)	9	(24)
Social Security - Employer						281	305	265	(24) 278	291	375	267	2,060
IMRF - Employer Cost													
Workers' Compensation Insurance						369	409	356 237	377	391	502	361	2,784
Unemployment insurance						310	270		79	259	427	240	1,824
							294	206	228	220	245	210	1,403
Employee Health/Life Insurance						1,141	1,141	1,141	1,174	1,300	1,141	1,141	8,180
Operational Supplies							162		153		133		448
Conferences & Training									160				160
Total Barber & Beauty						6,026	7,414	6,307	6,276	6,948	7,689	6,319	48,978
Adult Day Care													
Reg. Full-Time Employees						9,284	10,150	8,839	9,273	9,713	11,646	11,551	70,659
Overtime						28		31	20	21	1	86	187
TOPS - Balances						(537)	1,090	896	437	597	1,019	127	3,629
TOPS - FICA						(41)	83	69	33	48	78	10	278
Social Security - Employer						697	758	883	694	728	896	885	5,320
IMRF - Employer Cost						918	1,018	892	943	977	1,198	1,191	7,136
Workers' Compensation Insurance						691	600	528	176	576	957	700	4,228
Unemployment Insurance							654	459	508	491	515	362	2,990
Employee Health/Life Insurance						2,282	2,282	2,282	2,348	2,600	2,282	2,282	16,361
Gasoline & Oil						1,069		2,312	992	1,415	1,200	1,223	8,211
Equipment < \$2,500										119			119
Operational Supplies						37	22	49	5		35	188	314
Field Trips/Activities										66	5		71
Total Adult Day Care						14,430	16,659	17,019	15,430	17,350	20,034	18,583	119,504

06/30/13					paign Cou ical Stater								
Description	07/12	08/12	09/12	10/12	11/12	12/12	01/13	02/13	03/13	04/13	05/13	06/13	Tot
Alzheimers and Related Disord													
Reg. Full-Time Employees						23,994	25,449	23,639	32,316	15,937	17,532	16,714	155,580
Overtime						13,468	9,951	5,488	9,328	5,051	8,028	3,299	54,634
TOPS - Balances						148	326	(5,545)	(6,050)	(92)	2,764	1,368	(7,081
No Benefit Full-Time Employees						21,713	23,823	19,402	22,023	27,361	26,328	29,127	169,798
No Benefit Part-Time Employees						14,250	20,076	19,826	23,108	21,275	20,342	16,581	135,437
TOPS - FICA						11	25	(424)	(483)	(7)	211	105	(542
Social Security - Employer						5,546	5,981	5,173	6,574	5,296	5,495	4,979	39,043
IMRF - Employer Cost						7,300	8,032	6,965	8,901	7,106	7,361	6,701	52,367
Workers' Compensation Insurance						4,580	4,086	3,747	1,907	3,891	5,596	3,718	27,524
Unemployment Insurance						1,512	4,786	3,845	3,951	3,117	2,814	2,813	22,839
Employee Health/Life Insurance						4,522	4,522	4,522	4,084	4,509	3,955	3,955	30,070
Operational Supplies								4					4
Conferences & Training								57					57
ARD - Contract Nursing						23,073	16,958	8,224	10,557	11,085	7,306	3,931	81,133
Total Aizheimers and Related Disorde						120,139	124,016	94,922	116,236	104,549	107,732	93,270	760,884
Total Expenses						1,271,877	1,361,847	1,167,695	1,275,676	1,271,218	1,333,080	1,227,387	8,908,761
Net Operating Income						(7,180)	(153,891)	(114,258)	(158,264)	(199,129)	(274,123)	(140,899)	(1,045,744)
NonOperating Income								,,					
Local Taxes													
Current-Nursing Home Operating						86,531	88,531	86,531	86,522	88,540	88,531	86,531	605,715
Payment in Lieu of Taxes						20,00	276	20,00	00,0==	00,010	33,001	55,55	276
Total Local Taxes						86,531	86,807	86,531	86,522	86,540	86,531	86,531	605,991
Miscelianeous Ni Revenue													
Investment Interest							134	67	50	58	63	36	408
Restricted Donations						424	104	10	70	126	438	463	1,532
Interfund Transfer-From General Corp						767		10	,,	333,142	700	700	333,142
Total Miscellaneous NI Revenue						424	134	77	120	333,326	501	499	335,062
Total NonOperating Income		3.10				88,955	88,941	86,608	86,642	419,886	87,032	87,030	941,073
Net Income (Loss)						79,775	(68,949)	(27,650)	(69,623)	220,737	(187,091)	(53,889)	(104,670)

Wednesday, August 07, 2013 7:57 AM

Champaign	County	Nursing	Home
Ba	alance S	Sheet	

06/30/13

1

ASSETS

Current Assets

Cash	
Cash	\$631,279.39
Petty Cash	\$300.00
Total Cash	\$631,579.39
Rec., Net of Uncollectible Amounts	
Accts Rec-Nursing Home Private Pay	\$790,197.69
Accts Rec-Nursing Home Med Adv/ HMO/ Ins	\$757,001.39
Total Rec., Net of Uncollectible Amounts	\$1,547,199.08
Rec., Net of Uncollectible Amounts	
Accts Rec-Nursing Home Hospice	\$135,821.54
Allowance for Uncollectible Accts-Private Pay	(\$42,520.00)
Allowance for Uncollectible Accts-Patient Care P	(\$5,093.00)
Allowance for Uncollectible Accts-Patient Care H	(\$3,258.00)
Total Rec., Net of Uncollectible Amounts	\$84,950.54
Accrued Interest	
Property Tax Revenue Receivable	\$56,612.55
Total Accrued Interest	\$56,612.55
Intergyt. Rec., Net of Uncollectibl	
Due from Collector Funds	\$0.00
Due From Other Funds	\$0.00
Due from Other Governmental Units	\$260,390.54
Due from IL Public Ald	\$663,230.00
Due from IL Department of Aging-Title XX	\$60,371.98
Due from US Treasury-Medicare	\$463,628.27
Due From VA-Adult Daycare	\$12,495.41
Due From VA-Nursing Home Care	\$59,274.28
Allowance for Uncollectible Accts-IPA	(\$63,244.00)
Allow For Uncollectible Accts-IL Dept Of Aging	(\$1,630.00)
Allowance for Uncollectible Accts-Medicare	(\$26,119.00)
Allowance For Uncollectible Accts-VA Adult Day C	(\$362.00)
Allowance for Uncollectible Accts-VA Veterans Nu	(\$1,734.00)
Total Intergyt. Rec., Net of Uncollectibl	\$1,426,301.48
Prepaid Expenses	
Prepaid Expenses	\$71,914.40
Stores Inventory	\$11,276.20
Total Prepaid Expenses	\$83,190.60
	,
Long-Term Investments	
Patient Trust Cash, Invested	\$9,333.26
Total Long-Term Investments	\$9,333.26

Champaign County Nursing Home	
Balance Sheet	

06/30/13

2

Fixed Assets

Nursing Home Buildings	\$23.254.596.10
Improvements not Buildings	\$469.743.52
Equipment, Furniture & Autos	\$1,334,423.99
Construction in Progress	\$13.160.68
Accumulated Deprecreciation-Land Improvements	(\$237.060.81)
Accumulated Depreciation-Equipment, Furniture, &	(\$834.244.65)
Accumulated Depreciation-Buildings	(\$3.717.572.14)
Total Fixed Assets	\$20,283,046.69
Total ASSETS	\$24.122.213.59

Champaign County Nursing	Home
D 1 01 1	

06/30/13

Balance Sheet

3

LIABILITIES & EQUITY

Current Liabilities

A/R Refunds	\$0.00
Accounts Payable	\$1.385.245.39
Salaries & Wages Payable	\$139.225.11
Interest Payable - Bonds	\$10.840.80
Due to General Corporate Fund	\$0.00
Due to Others (Non-Government)	\$0.00
Tax Anticipation Notes Payable	\$367.780.03
Total Current Liabilities	\$1.903.091.33
Non-Current Liabilities	
Nursing Home Patient Trust Fund	\$9.333.26
Danda Barrakla	20 000 000 00

Nursing Home Patient Trust Fund	\$9.333.26
Bonds Payable	\$3.065.000.00
Accrued Compensated Absences	\$343.622.16
Total Non-Current Liabilities	\$3.417.955.42
Total Current Liabilities	\$5.321.046.75

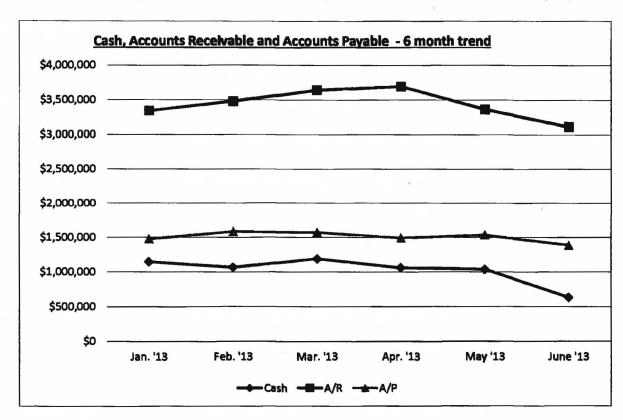
Equity

\$0.00
\$18.905.837.33
\$0.00
\$0.00
(\$104.670.49)
\$18.801.166.84
\$24.122,213.59

Champaign County Nursing Home January 31, 2012 through June 30, 2013

Key Balance Sheet Items Charted Below:

	<u>Jan. '13</u>	Feb. '13	Mar. '13	Apr. '13	May '13	<u>June '13</u>
Cash	1,141,050	1,060,010	1,185,128	1,056,751	1,032,983	631,579
A/R	3,340,470	3,478,707	3,640,945	3,690,012	3,363,897	3,115,064
A/P	1,472,311	1,579,466	1,568,212	1,487,024	1,529,034	1,385,245



Champaign County Nursing Home Statement of Cash Flows (Indirect Method) 7 Months November 30, 2012 through June 30, 2013

CASH FLOW FROM OPERATING ACTIVITIES:

Net Income (Loss) - YTD	\$ (104,670)
Depreciation Expense	427,507
(Incr.)/Decr. in Accounts Receivable	(15,538)
(Incr.)/Decr. in Prepaid Expenses	(63,320)
(Incr.)/Decr. in Inventory	347
(Incr.)/Decr. in Patient Trust	(1,529)
Incr./(Decr.) in Accounts Payable	(633,235)
Incr./(Decr.) in Salaries and Wages Payable	(6,787)
Incr./(Decr.) in Interest Payable	10,841
Incr./(Decr.) in Accrued Com. Absences	4,113
Incr./(Decr.) in Other Liabilities	1,997
Net Cash Provided by Operating Activities	(380,274)
CASH FLOW FROM INVESTING ACTIVITIES:	
Purchase of Equipment	(21,232)
Improvements / (CIP)	(44,127)
Net Cash Provided by Investing Activities	 (65,359)
CASH FLOW FROM FINANCING ACTIVITIES:	
Increase in Tax Anticipation Note	367,780
(Decrease) Due to General Corp. Fund	(333,141)
(Decrease) in Bonds Payable	
Increase in Equity Adjustment	 243,824
Net Cash Provided by Financing Activities	278,463
Total Cash Flow	(167,170)
Begining Cash Flow - 11/30/2012	 798,749
ENDING CASH - 6/30/2013	\$ 631,579

Champaign County Nursing Home Monthly Statements of Cash Flow (Indirect Method) January 31, 2012 through June 30, 2013

CASH FLOW FROM OPERATING ACTIVITIES:		<u>Jan. '13</u>	Feb. '13		<u>Mar. '13</u>	<u>Apr. '13</u>	<u>Mav '13</u>		<u>June '13</u>
Net Income (Loss) - Monthly	s	(66,949) \$	(27,650)	\$	(69,623)	\$ 220,737	\$ (187,091)	\$	(53,869)
Depreciation Expense		61,305	61,304		61,097	61,097	61,097		61,097
(Incr.)/Decr. in Accounts Receivable		(136,520)	(138,238)		(162,236)	(49,068)	326,114		248,832
(Incr.)/Decr. in Prepaid Expenses		48,836	(57,863)		1,242	(4,059)	1,241		1,152
(Incr.)/Decr. in Inventory		8,850	-		•	347	-		-
(Incr.)/Decr. in Patient Trust		521	(1,411)		25	716	(99)	-	(1,225)
Incr./(Decr.) in Accounts Payable		(410,621)	107,155		(11,254)	(81,188)	42,010		(143,789)
Incr./(Decr.) in Salaries and Wages Payable		275,749	(11,761)		68,431	31,760	(152,075)		(6,541)
Incr./(Decr.) in Interest Payable		24,184	10,841		(1)	21,682	10,841		(54,204)
Incr./(Decr.) in Accrued Com. Absences		3,943	171		2,368	845	(1,082))	(1,719)
Incr./(Decr.) in Other Liabilities		(3,652)	1,410		(24)	2,559	99		1,225
Net Cash Provided (Used) by Operating Activities	-	(194,354)	(56,042)		(109,975)	205,428	101,055		50,959
CASH FLOW FROM INVESTING ACTIVITIES: Purchase of Equipment Improvements / (CIP)			(14,298) (10,700)		(6,934) (2,461)	-	:		- (30,966)
Net Cash Provided (Used) by Investing Activities			(24,998)		(9,395)	-	•		(30,966)
CASH FLOW FROM FINANCING ACTIVITIES:									
Incr./(Decr.) in Tax Anticipation Note		-	-		•	-	(124,823))	(421,397)
Incr./(Decr.) in Due to General Corp. Fund		-	-		•	(333,141)	-		•
Incr./(Decr.) in Bonds Payable		-	-		-	-	-		•
Incr./(Decr.) in Equity Adjustment		(26,220)			244,488	(664)			
Net Cash Provided (Used) by Financing Activities		(26,220)	-		244,488	(333,805)	(124,823))	(421,397)
Total Cash Flow		(220,574)	(81,040)		125,118	(128,377)	(23,768))	(401,404)
Beginning Cash Balance (Prior Month's)		1,361,624	1,141,050	1	1,060,010	1,185,128	1,056,751		1,032,983
MONTH ENDING CASH BALANCE		1,141,050	1,060,010	\$ 1	1,185,128	\$ 1,056,751	\$ 1,032,983	S	631,579

FUND 090 MENTAL HEALTH

DEPARTMENT 053 MENTAL HEALTH BOARD

INCREASED APPROPRIATIONS:				
ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
090-053-533.92 CONTRIBUTIONS & GRANTS	3,359,094	3,359,094	3,420,617	
TOTALS	3,359,094	3,359,094	3,420,617	61,523
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				I I I I I I I I I I I I I I I I I I I
				<u> </u>
TOTALS	0	0	0	0
EXPLANATION: FUNDS ALLOCATED	TO ADDRESS	IDENTIFIED C	OMMUNITY NEE	DS INCLUDIN
EXPANSION OF PROGRAMS & SE				
ABUSE DISORDERS WHO ARE AL				
FUNDS ARE BEING TRANSFERRE	D FROM THE C	OMMUNITY MEN	TAL HEALTH F	UND BALANCE
DATE SUBMITTED:	AUTHORIZED SIGNA	ATURE ** PLEAS	E SIGN IN BLUE INK	
7//6//3	AUTHORIZED SIGNA	n h	E SIGN IN BLUE INK	
APPROVED BY BUDGET & FINANCE	COMMITEE:	DATE:		

FUND 303 COURT COMPLEX CONSTR FUND DEPARTMENT 010 COUNTY BOARD

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
ACCI. NORDER & IIIE	AD OF 12/1	T		REQUESTED
303-010-544.33 FURNISHINGS, OFFICE EQUIP	125,000	109,185	288,185	179,000
	I	1		<u> </u>
TOTALS		i	<u> </u>	1
	125,000	109,185	288,185	179,000
INCREASED REVENUE BUDGET:				
INCREASED REVENUE BODGET.	BEGINNING	CURRENT	BUDGET IF	INCREASE
ACCT. NUMBER & TITLE	BUDGET AS OF 12/1	BUDGET	REQUEST IS APPROVED	(DECREASE) REQUESTED
None: from Fund Balance				
		1		
TOTALS	0	0		0
HADI STISMICON - MO ADDDODDIAME				
EXPLANATION: TO APPROPRIATE				
PROJECT AS DOCUMENTED BY CO				······
APPROPRIATED FROM THE AVAIL	ABLE FUND BA	LANCE IN THE	COURTS CONS	TRUCTION
FUND.				
	34.4			
DATE SUBMITTED:	AUTHORIZED SIGNA	ATURE ** PLEAS	SE SIGN IN BLUE INK	**
8-7-13	1 Julna	L. Burn		
		0		
APPROVED BY BUDGET & FINANCE	COMMITEE:	DATE:		
			,	
		. <u>İ </u>		

CHAMPAIGN COUNTY APPLICATION FORM FOR GRANT CONSIDERATION, ACCEPTANCE, RENEWAL/EXTENSION

Department: Children's Advocacy Center
Grant Funding Agency: Illinois Criminal Justice Information Authority
Amount of Grant: \$50.338
Begin/End Dates for Grant Period: July 1, 2013 through June 30. 2014
Additional Staffing to be Provided by Grant: None: is continuation of current.
Application Deadline: April 2013
Parent Committee Approval of Application: Unclear if the CAC Governing Board ever officially approved it this spring.
Is this a new grant, or renewal or extension of an existing grant? Renewal.
If renewal of existing grant, date grant was first obtained: Unclear. We have had the grant for several years.
Will the implementation of this grant have an effect of increased work loads for other departments? (i.e. increased caseloads, filings, etc.) Yes No
If yes, please summarize the anticipated impact:
Does the implementation of this grant require additional office space for your department that is not provided by the grant? Yes No If yes, please summarize the anticipated space need:
Please check the following condition which applies to this grant application:
The activity or service provided can be terminated in the event the grant revenues are discontinued.
The activity should, or could be, assumed by County (or specific fund) general and recurring operating funds.
Departments are encouraged to seek additional sources or revenue to support the services prior to expiration of grant funding.
This Grant Application Form must be accompanied by a Financial Impact Statement. (See back of form)
All staff positions supported by these grant funds will exist only for the term award of grant, unless specific action is taken by the County Board to extend the position.
DATE: 8/6//3 SIGNED: Addaide Och Department Head
* * * * * * * * * * * * * * * * * * * *
Application for & Acceptance of Grant Approval:
Approved by Finance Committee:
Approved by County Board:
Approved by Grant Executive Committee:

COUNTY OF CHAMPAIGN

FINANCIAL IMPACT STATEMENT

(To accompany Grant Applications or Appropriate Resolutions/Ordinances)

Current Year Annua	al Expenditure Estimate:	
Number of Positions	0.45 FTE	Personnel \$ \$8.000
Commodities:	\$ <u></u>	
Contractual:	\$	
Capital:	\$ <u></u>	
Long Term Expendi We hope that this grant		ely the same amounts in future years.
	al Revenue Estimate: ed by the grant—we only spend w	vhat we are paid:
Long Term Revenue	Estimate:	
	t will be renewed for approximat enter is totally grant-funded so w	ely the same amounts in future years. The ve only spend what we bring in.
Approved by Financ	ce Committee:	Date:
Approved by County	y Board:	Date:

COVER PAGE

PROGRAM TITLE:	Child Advocacy Center Services
AGREEMENT NUMBER:	212216
PREVIOUS AGREEMENT NUMBER(S):	202216, 204216, 205216, 207216, 208216, 209216, 210216, 211216
ESTIMATED START DATE:	July 1, 2013
SOURCES OF PROGRAM FUNDING:	
FUND VOCA FFY 12 Federal Funds:	\$ 50,338
Matching Funds:	\$ 12,585
Over-Matching Funds:	\$0
Total:	\$ 62,923
IMPLEMENTING AGENCY'S NAME:	Champaign County on behalf of the Champaign County Children's Advocacy Center
ADDRESS (This address must be the physical address that is registered with CCR and include nine digit zip code):	1776 E. Washington Street OFC Urbana, IL 61802-4578
IMPLEMENTING AGENCY'S AUTHORIZED OFFICIAL:	Alan Kurtz
TITLE:	County Board Chairman
FEDERAL EMPLOYER IDENTIFICATION	
NUMBER:	37-6006910
IMPLEMENTING AGENCY'S DUNS NUMBER:	097322861
IMPLEMENTING AGENCY'S CCR REGISTRATION EXPIRATION DATE:	05/03/2014
IMPLEMENTING AGENCY'S CAGE CODE:	4VB73
IMPLEMENTING AGENCY'S FINANCIAL OFFICER:	Daniel J. Welch
TITLE:	County Treasurer
TELEPHONE:	(217) 384-3743
PROGRAM AGENCY'S NAME:	Champaign County Children's Advocacy Center
PROGRAM AGENCY'S ADDRESS (This address must be the physical address that is registered with CCR and include the nine digit zip code):	201 W. Kenyon Road, Suite 1 Champaign, IL 61820-7807
PROGRAM AGENCY'S MAILING ADDRESS (If the same as above mark "N/A"):	N/A
PROGRAM AGENCY'S AUTHORIZED OFFICIAL:	Michael B. Williams
TITLE:	Executive Director
PROGRAM AGENCY'S DUNS:	828835137
PROGRAM AGENCY'S CCR EXPIRATION	10/16/2013

DATE:	
PROGRAM AGENCY'S CAGE CODE:	5EVU0
FISCAL CONTACT PERSON:	Michael B. Williams
AGENCY:	Champaign County Children's
	Advocacy Center
TITLE:	Executive Director
TELEPHONE:	(217) 384-1266
FAX:	(217) 344-1214
E-MAIL:	mwilliams@co.champaign.il.us
PROGRAM CONTACT PERSON:	Michael B. Williams
TITLE:	Executive Director
TELEPHONE:	(217) 384-1266
FAX:	(217) 344-1214
E-MAIL:	mwilliams@co.champaign.il.us
PROGRAM AGENCY'S CONGRESSIONAL	13 th
DISTRICT (This must be based on the nine digit zip	
code registered with CCR. The district can be	
located by using this link	
http://www.elections.il.gov/DistrictLocator/District	
OfficialSearchByZip.aspx.):	
PRIMARY AREA OF PERFORMANCE (This	N/A
should be completed if grant activities are taking	
place in a location other than the Program Agency's	
office registered with CCR. A street address does	
not need to be provided, but please list city, state	
and nine digit zip code. If locations are the same	
please mark "N/A"):	
PRIMARY AREA OF PERFORMANCE'S	N/A
CONGRESSIONAL DISTRICT (This must be	
based on the nine digit zip code listed above. The	
district can be located by using this link	
http://www.elections.il.gov/DistrictLocator/District	
OfficialSearchByZip.aspx. If the place of	
performance is the same as the Program Agency's	
address listed in CCR please mark "N/A"):	
Question 1) Are more than 80% of the Program	No
Agency's revenue from the federal government?:	
Question 2) Are the Program Agency's federal	No
revenue more than \$25,000,000?:	
Question 3) Are the Program Agency's top five	No
compensated officers' compensation not available	
through the Securities and Exchange Commission	
or the Internal Revenue Service?:	
If the answer to all of the three above questions is	
yes, then please list the five highest compensated	
officers and their compensation.	
NAME	COMPENSATION

INTERAGENCY AGREEMENT

Victims of Crime Act Victim Assistance Grant Program

This interagency agreement is entered into by the Illinois Criminal Justice Information Authority, with its offices at 300 W. Adams, Chicago, Illinois 60606, hereinafter referred to as the "Authority", and, "Champaign County on behalf of the Champaign County Children's Advocacy Center", hereinafter referred to as the "Implementing Agency," with its principal offices at 1776 E. Washington Street, Urbana, IL 61802-4578 for implementation of the Child Advocacy Center Services program.

WHEREAS, Section 7(k) of the Illinois Criminal Justice Information Act (20 ILCS 3930/7(k)) establishes the Authority as the agency "to apply for, receive, establish priorities for, allocate, disburse and spend grants of funds that are made available...from the United States pursuant to the federal Crime Control Act of 1973, as amended, and similar federal legislation, and to enter into agreements with the United States government to further the purposes of this Act, or as may be required as a condition of obtaining federal funds;" and

WHEREAS, pursuant to the Authority's rules entitled "Operating Procedures for the Administration of Federal Funds," (20 Illinois Administrative Code 1520 et seq.) the Authority awards federal funds received by the State of Illinois pursuant to the Victims of Crime Act and enters into interagency agreements with state agencies, units of local government, and not-for-profit organizations for the use of these federal funds; and

WHEREAS, pursuant to the Victims of Crime Act, the Authority has been designated as the State agency responsible for administering this program; and

WHEREAS, the Authority designated the Implementing Agency to receive funds for the purpose of implementing a program to address one of the named areas.

NOW, THEREFORE, BE IT AGREED by and between the Illinois Criminal Justice Information Authority and the Implementing Agency as follows:

SECTION 1. DEFINITIONS

"Program":

means a planned, integrated approach to an identified problem which is characterized by clear goals, measurable objectives, the implementation of strategies to achieve those objectives and a mechanism for assessing the effectiveness of those strategies.

SECTION 2. PERIOD OF PERFORMANCE AND COSTS INCURRED

The period of performance of this agreement shall be from July 1, 2013 through June 30, 2014.

Costs incurred before the execution date of this agreement may be charged to this agreement if included in Exhibit B, incurred during the period of performance, and the Implementing Agency performed in accordance with the terms and conditions of this agreement.

The Authority shall not be responsible for costs incurred before or after the period of performance of this agreement.

SECTION 3. COMMENCEMENT OF PERFORMANCE

If performance has not commenced within 60 days of the original starting date of this agreement, the Implementing Agency agrees to report by letter to the Authority the steps taken to initiate the program, the reasons for the delay, and

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the expected starting date.

If the program is not operational within 90 days of the starting date of this agreement, the Implementing Agency agrees to submit a second letter to the Authority explaining the implementation delay. The Authority may at its discretion either cancel this agreement or extend the implementation date of the program past the 90-day period.

If the program is interrupted for more than 30 days after commencement, due to loss of staff or any other reason, the Implementing Agency agrees to notify the Authority in writing explaining the reasons for the interruption and the steps being taken to resume operation of the program. The Authority may, at its discretion, reduce the amount of federal funds awarded and/or terminate this agreement if the program is interrupted for more than 90 days.

If this agreement is terminated due to this section, the Authority will only pay for those services rendered as of the date service delivery ceased. Any funds advanced to the Implementing Agency and not expended as of that date shall be repaid to the Authority upon notification by the Authority.

SECTION 4. PAYMENT

The maximum amount of federal funds under this agreement is \$50,338 and is dependent on the expenditure of matching funds as described in this agreement and Exhibit B, and the performance of the Implementing Agency in accordance with the terms and conditions of this agreement.

The Authority agrees to make payment to the Implementing Agency for the administration and implementation of the program described in Exhibit A. Upon receipt of the fiscal and progress reports described in this agreement, quarterly payments will be made to the Implementing Agency. No payment will be made until all outstanding reports are received by the Authority, including outstanding reports from previously funded Authority programs. In addition, due to the unique requirements of the program being funded, the Implementing Agency may request that an advance payment be made during any quarter and must include supporting documentation with the request. Requests for advance payment are subject to review and approval. No payment will be made to an Implementing Agency unless and until the Implementing Agency is in full compliance with applicable state and federal laws and the terms and conditions of this agreement.

The Implementing Agency must provide for the deposit of program funds, including federal and matching funds, into a bank account in the name of the Implementing Agency, either depositing such funds into an account separate from any of its other bank accounts or treating such funds as a separate line item per its budget and audited financial statements. Federal funds shall be immediately deposited into such bank account.

SECTION 5. MATCH

The Implementing Agency certifies that it (a) meets the requirements of this agreement and (b) has at least 20 percent of its support (including in-kind contributions) from sources other than federal funds for the program described in Exhibit A. Therefore one dollar in cash or in-kind match is required for each four dollars of federal funding received.

Failure of the Implementing Agency to apply non-federal financial support to the program described in Exhibit A in the amount of at least 20 percent of such program's costs, shall result in a proportionate reduction in the amount of federal funds awarded under this agreement and may result in the return of funds already awarded. To meet this matching funds requirement, the Implementing Agency shall apply non-federal financial support to the program, as described in Exhibit B.

SECTION 6. NON-SUPPLANTATION

The Implementing Agency certifies that VOCA funds will not be used to supplant (replace) State or local funds. VOCA funds must increase the amount that would otherwise be available to the Implementing Agency for the types

of activities eligible for funding under the Victims of Crime Act.

SECTION 7. FUNDING ELIGIBILITY REQUIREMENTS

Implementing Agency certifies that it, and its subcontractors, shall use VOCA and match funds for only allowable services, activities and costs, as described in the Victims of Crime Act Crime Victims Assistance Program Guidelines; Section E. Services, Activities, and Costs at the Subrecipient Level.

The Implementing Agency certifies that only those costs related to the delivery of direct services to victims of crime shall be paid pursuant to this agreement, in accordance with Exhibit B.

In administering the program described in Exhibit A the Implementing Agency agrees that it:

- (a) Is a nonprofit organization or public agency that provides services to victims of crime;
- (b) Has a record of providing effective service to victims of crime and at least 20 percent of its financial support (including in-kind contributions) is from non-federal sources; or, if it has not yet demonstrated a record of providing services, it can demonstrate that 25-50 percent of its financial support comes from non-federal sources;
- (c) Utilizes volunteers;
- (d) Promotes coordinated public and private efforts within the community served to aid crime victims;
- (e) Assists victims in seeking available crime victim compensation benefits;
- (f) Maintains statutorily required civil rights statistics on victims served by , national origin, sex, age, and disability, where such statistics are voluntarily provided by those receiving assistance, and permits reasonable access to its books, documents, papers, and records to determine whether the Implementing Agency is complying with applicable civil rights laws; this requirement is waived when the Implementing Agency is providing a service, such as telephone counseling, where soliciting the information may be inappropriate or offensive to the crime victim;
- (g) Provides services to victims of federal crimes on the same basis as victims of State and local crimes;
- (h) Provides services to crime victims, at no charge, through the program described in Exhibit A; and
- (i) Maintains confidentiality of client-counselor information, as required by State and federal law.

Implementing Agency certifies that it, and its subcontractors, shall not use VOCA or match funds to pay for presentations given by VOCA or match funded personnel, unless the following conditions are adhered to. These presentations should serve as a means of reaching the project's target population either through outreach to individual crime victims or through agencies that typically have contact with the target population.

- VOCA or match funded staff time, not to exceed an average of 4 hours per month, may be used to provide
 public presentations to community groups and schools provided the primary purpose of the presentation is
 to inform people about the VOCA funded project and available services.
- VOCA or match funded staff time, not to exceed an average of 10 hours per month, may be used to provide
 public presentations to criminal justice personnel and medical service providers provided the primary
 purpose of the presentation is to inform people about the VOCA funded project and available services.

The Implementing Agency certifies that it, and its subcontractors, shall comply with sections 1404(a)(2) and 1404(b(1-2) of the Victims of Crime Act of 1984, 42 U.S.C. §10603(a)(2) and 42 U.S.C. § 10603(b)(1-2).

SECTION 8. PROGRAM DESCRIPTION, BUDGET, EXHIBITS AND AMENDMENTS

The Implementing Agency agrees to undertake and perform in a satisfactory manner in accordance with the terms and conditions of this agreement, the program described in the Program Description attached and incorporated as Exhibit A and the Budget attached and incorporated as Exhibit B.

The documents appended are made a part of this agreement, as exhibits and amendments as the case may be. Any amendment to this agreement must be signed by the parties to be effective. The Implementing Agency shall perform the services subject to this agreement in accordance with all terms, conditions, and provisions set forth in such exhibits and amendments.

SECTION 9. OBLIGATIONAL LIMITATION

Payment under this agreement is subject to passage of a suitable and sufficient appropriation by the Illinois General Assembly. Obligations of the State of Illinois will cease immediately without penalty of further payment being required in any fiscal year should the actions of the General Assembly or any applicable funding source result in the failure to appropriate or otherwise make available sufficient funds for this agreement.

SECTION 10. FINANCIAL CAPABILITY

The Authority may, in its discretion, require the Implementing Agency to provide documentation on its financial capability. This may include, but is not limited to, copies of the Implementing Agency's annual report, credit reports, delinquency status of Federal debt, and assurances on the adequacy of the Implementing Agency's accounting system and operations. The Implementing Agency must comply with federal and state financial management standards.

SECTION 11. REPORTING AND EVALUATION REQUIREMENTS

Unless another reporting schedule has been required or approved by the Authority, the Implementing Agency agrees to submit the following minimum data to the Authority on a quarterly basis, with quarters beginning at the start of the calendar year, within 15 days following the quarter covered by the report:

- Victim Statistics: Total number of victims and significant others served by program, type of crime, type of services provided, race, sex, age, national origin and disability, where such information is voluntarily furnished by those receiving services; and
- b) Staff Information: Number of hours and types of service contributed during the reporting period by paid and volunteer staff.

The Implementing Agency agrees to submit the following information as required by the Authority:

- a) Changes that have been made in the program since receiving the federal funds that will benefit victims of crime;
- b) A short description of how the program has coordinated its activities with other service providers in the community;
- c) A short description of how the program has assisted crime victims in seeking available crime victim compensation benefits;

- d) Victim statistics, including the total number of victims served by criminal justice status (i.e. reporting/non-reporting, prosecution/non-prosecution);
- e) Staff information, including the number of hours of training received by volunteers and paid staff;
- f) Program information and activities, including the number of hours of training presented, number of hours of public information and education programs presented; and
- g) Number of referrals to/from other agencies.

Unless another reporting schedule has been required or approved by the Authority, the Implementing Agency is also required to submit quarterly fiscal reports and to file year-end program financial status reports. The Executive Director of the Authority will determine the content and form of these reports. The Implementing Agency agrees to report any additional information required by the Executive Director of the Authority.

SECTION 12. MAINTENANCE OF RECORDS

The Implementing Agency agrees to maintain records which document activity reported to the Authority pursuant to this agreement. Such records shall be accessible to the Authority for monitoring purposes no more than 10 days following a request that such records be produced by the Implementing Agency. Inability of the Implementing Agency to produce such records or failure to produce such records shall be cause for suspension or termination of this agreement.

The Implementing Agency agrees to retain financial and program records for a minimum of 3 years after the expiration date of this agreement, or 3 years after closure of Implementing Agency's most recent audit report, whichever is later. The Implementing Agency shall maintain, for this 3-year period, adequate books, records, and supporting documents to verify the amounts, recipients, and uses of all disbursements of funds passing in conjunction with this agreement; the agreement and all books, records, and supporting documents related to the agreement shall be available for review and audit by the Auditor General, federal awarding agency personnel or its representatives, the Office of Chief Financial Officer or its representatives, the Authority, or any person duly authorized by the Auditor General, the federal awarding agency, the Authority or any person duly authorized by the Authority, and to provide full access to all relevant materials. Failure to maintain the books, records, and supporting documents required by this Section shall establish a presumption in favor of the State for the recovery of any funds paid by the State under the agreement for which adequate books, records, and supporting documentation are not available to support their purported disbursement.

If any litigation, claim, negotiation, audit, review or other action involving the records has been started before the expiration of the 3-year period, the records must be retained until the completion of the action and resolution of all issues that arise from it or until the end of the regular 3-year period, whichever is later.

SECTION 13. CLOSEOUT REQUIREMENTS

Within 30 days of the expiration date of this agreement or any approved extension thereof the following documents must be submitted by the Implementing Agency to the Authority: (a) final financial status report; (b) final progress reports; (c) property inventory report; (d) any refund of unexpended funds and (e) other documents required by the Authority.

SECTION 14. INSPECTION AND AUDIT

If required by revised Office of Management and Budget Circular A-133 "Audits of States, Local Governments, and Non-Profit Organizations," the Implementing Agency agrees to provide for an independent audit of its activities.

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Audits shall be made annually, unless A-133 allows the Implementing Agency to undergo biennial audits. Audits shall be made in accordance with the Generally Accepted Government Auditing Standards (GAGAS), General Accounting Standards for Audit of Governmental Organizations, Programs, Activities and Functions, the Guidelines for Financial and Compliance Audits of Federally Assisted Programs, any compliance supplements approved by the Office of Management and Budget, and generally accepted auditing standards established by the American Institute of Certified Public Accountants. Copies of all audits must be submitted to the Authority no later than 9 months after the close of the Implementing Agency's audit period. Further, Implementing Agency understands and agrees that funds may be withheld, or other related requirements may be imposed, if outstanding audit issues (if any) from OMB Circular A-133 audits (and any other audits of Office of Justice Programs (OJP) grant funds) are not satisfactorily and promptly addressed, as further described in the current edition of the OJP Financial Guide, Chapter 19.

Known or suspected violations of any law encountered during audits, including fraud, theft, embezzlement, forgery, or other serious irregularities, must be immediately communicated to the Authority and appropriate federal, State, and local law enforcement officials.

The Implementing Agency agrees to develop and maintain a record-keeping system to document all agreement related activities and expenditures. These records will act as the original source material for compilation of the data required in this agreement and all other program activity.

The Authority, Illinois Auditor General and the Illinois Attorney General shall have access for purposes of monitoring, audit and examination to all relevant books, documents, papers, and records of the Implementing Agency, and to relevant books, documents, papers and records of subcontractors. In addition, the Office of Victim of Crime and the Office of the Chief Financial Officer or their representatives shall have access to and right to all relevant books, documents, papers, and records of the Implementing Agency, and to relevant books, documents, papers and records of subcontractors.

SECTION 15. PROCUREMENT REQUIREMENTS, REQUESTS FOR PROPOSALS

All procurement transactions shall be conducted by the Implementing Agency in a manner to provide, to the maximum extent practical, open and free competition. The Implementing Agency must use procurement procedures that minimally adhere to all applicable laws, executive orders and federal guidelines. The Implementing Agency shall also adhere, and assure that its contractors and subcontractors adhere, to all applicable certification and disclosure requirements of the Illinois Procurement Code.

The Implementing Agency shall follow its established procurement process if it minimally adheres to applicable federal guidelines, and the following requirements. If the Implementing Agency's established procurement process is less competitive than the following requirements, the following more competitive requirements must be adhered to in lieu of the Implementing Agency's procurement process.

- For procurements of \$100,000 or less, the Implementing Agency must solicit quotes or bids from at least three sources.
- For procurements over \$100,000, the Implementing Agency must formally advertise the proposed procurement through an Invitation for Bids (IFB), or a Request for Proposals (RFP) process.

All procurements over \$100,000, that involve the use of federal or matching funds, must be submitted by the Implementing Agency to the Authority for review and written approval prior to their issuance. In addition, the Authority reserves the right to request that any RFP or IFB, regardless of its dollar amount, be submitted to the Authority for review and approval prior to its issuance. In addition, the Implementing Agency shall notify and submit for approval to the Authority any other relevant procurement documents including but not limited to Request For Information (RFI).

As required by the Authority, the Implementing Agency shall submit documentation regarding its procurement procedures and grant-funded purchases for Authority review and approval, to assure adherence to applicable federal guidelines.

SECTION 16. SUBCONTRACTING

The use of subcontractors for any work or professional services that involves the use of federal or matching funds is subject to Authority approval. Any work or professional services subcontracted for shall be specified by written contract and subject to all terms and conditions contained in this agreement. If the use of subcontractors is approved by the Authority, the terms and conditions of this agreement shall apply to and bind the party or parties to whom such work is subcontracted as fully and completely as the Implementing Agency is bound and obligated. The Implementing Agency shall make reasonable efforts to assure that all subcontractors adhere to the terms and conditions of this agreement. The Authority shall not be responsible for the performance, acts or omissions of any subcontractor.

Subcontracts over \$100,000 that are funded with federal or matching funds must be submitted by the Implementing Agency for Authority review and approval prior to their effective dates and execution by the Implementing Agency. In addition, the Authority reserves the right to require that any subcontract funded with federal or matching funds, regardless of its dollar amount, be submitted to the Authority for review and approval prior to its effective date and execution by the Implementing Agency.

As required by the Authority, the Implementing Agency shall submit documentation regarding contracts to be funded with federal or matching funds for Authority review and approval, to assure adherence to applicable federal guidelines.

Approval of the use of subcontractors by the Authority does not relieve the Implementing Agency of its obligation to assure performance under this agreement.

SECTION 17. ASSIGNMENT

The Implementing Agency shall make no assignment or transfer of this agreement, any subcontracts under this agreement or of any of the monies due hereunder without prior written approval of the Authority. In the event that the Authority approves such an assignment or transfer, the terms and conditions of this agreement shall apply to and bind the party or parties to whom such work is assigned or transferred as fully and completely as the Implementing Agency is bound and obligated.

SECTION 18. INDEPENDENT CONTRACTOR

The Implementing Agency, in the performance of this agreement, shall act as an independent contractor and not as an agent or employee of the Authority. The Authority shall not be responsible for the performance, acts or omissions of the Implementing Agency. The Implementing Agency shall be liable, and agrees to be liable for, and shall indemnify, defend and hold the Authority harmless for all claims, suits, judgments and damages arising from the performance of this agreement, to the extent permitted by law.

SECTION 19. MANAGEMENT AND DISPOSITION OF EQUIPMENT AND COMMODITIES

Equipment and commodities acquired by the Implementing Agency with agreement funds shall be used for purposes of the program described in Exhibit A only. The Implementing Agency shall retain the equipment and commodities acquired with agreement funds as long as they serve to accomplish program purposes, whether or not the program continues to be supported by federal funds. If the equipment or commodities originally purchased for the program are no longer capable of fulfilling the needs of the program and must be traded in or replaced or there is no longer a need for the equipment or commodities, the Implementing Agency shall request instructions from the Authority.

The Authority may deny equipment and commodities costs or require that the Implementing Agency relinquish already purchased equipment and commodities to the Authority, if the Implementing Agency fails to employ an adequate property management system, governing the use, protection and management of such property. The Implementing Agency is responsible for replacing or repairing equipment and commodities that are willfully or negligently lost, stolen, damaged or destroyed. The Implementing Agency shall provide equivalent insurance coverage for equipment and commodities acquired with agreement funds as provided for other equipment and commodities owned by the recipient. Any loss, damage or theft of equipment and commodities shall be investigated and fully documented, and immediately reported to the Authority.

If, for an item of equipment described in Exhibit B to be funded with either federal or matching funds, the Implementing Agency does not have a purchase order dated within 90 days after the start date of the agreement, the Implementing Agency shall submit a letter to the Authority explaining the delay in the purchase of equipment. The Authority may, in its discretion:

- A. Reduce the amount of federal funding;
- B. Cancel this agreement;
- C. Allow the Implementing Agency to reallocate the federal or matching funds that were allocated for such equipment to other allowable, Authority approved costs; or
- D. Extend the period to purchase this equipment past the 90-day period.

Equipment purchased using federal or matching funds shall be year 2000 compliant and shall be able to process all time/date data after December 31, 1999.

SECTION 20. CONFLICTS OF INTEREST

The Implementing Agency agrees to comply with applicable provisions of the Illinois Procurement Code (30 ILCS 500) prohibiting conflicts of interest, and all applicable terms, conditions and provisions of the code are made a part of this agreement the same as though they were incorporated and included herein.

No employee, officer or agent of the Implementing Agency shall participate in the selection, or in the award or administration of a contract supported by federal funds if a conflict of interest, real or apparent, would be involved. The Implementing Agency shall establish safeguards to prohibit employees from using their positions for a purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others.

SECTION 21. IMPLEMENTING AGENCY COMPLIANCE

The Implementing Agency agrees to comply with all applicable laws, regulations, and guidelines of the State of Illinois, the Federal Government and the Authority in the performance of this agreement, including but not limited to:

- The Victims of Crime Act; Office of Justice Programs, Office for Victims of Crime, Victims of Crime Act Victim Assistance Grant Final Program Guidelines (62 FR 19607, April 22, 1997); and the Office of Justice Programs' Financial Guide (current edition).
- Office of Management and Budget Circulars A-21, A-87, A-102, A-110, A-122, and A-133, Executive Order 12372; Illinois Grant Funds Recovery Act (30 ILCS 705); Illinois Procurement Code (30 ILCS 500); State Comptroller Act (15 ILCS 405); Authority Federal Grant Financial Guidelines; and the rules of the Authority (20 Ill. Adm. Code 1520 et seq.).

- Provisions of 28 CFR applicable to grants and cooperative agreements including Part 18, Administrative Review Procedures; Part 20, Criminal Justice Information Systems; Part 22, Confidentiality of Identifiable Research and Statistical Information; Part 23, Criminal Intelligence Systems Operating Policies; Part 30, Intergovernmental Review of Department of Justice Programs and Activities; Part 38, Equal Treatment for Faith-Based Organizations; Part 42, Non-Discrimination/Equal Employment Opportunity Policies and Procedures; Part 46, Protection of Human Subjects; Part 61, Procedures for Implementing the National Environmental Policy Act; Part 63, Floodplain Management and Wetland Protection Procedures; Part 66, Uniform administrative requirements for grants and cooperative agreements to State and local governments; Part 67, Governmentwide Debarment and Suspension (Nonprocurement); and Part 69, New Restrictions on Lobbying; Part 70, Uniform administrative requirements for grants and agreements (including subawards) with institutions of higher education, hospitals and other non-profit organizations; Part 83, Government-wide requirements for drug-free workplace (Grants).
- Section 8136 of the Department of Defense Appropriations Act of 1988 (P.L. 100-463, effective October 1, 1988).
- National Environmental Policy Act of 1969, 42 U.S.C. pars. 4321 et seq.
- National Historic Preservation Act of 1966, 16 U.S.C. pars. 470 et seq.
- Flood Disaster Protection Act of 1973, 42 U.S.C. pars 4001 et seq.
- Clean Air Act of 1970, 42 U.S.C. pars. 7401 et seq.
- Clean Water Act, 33 U.S.C. pars. 1368 et seq.; Executive Order 11738; and EPA regulations (40 CFR Part 15).
- Federal Water Pollution Control Act of 1948, as amended, 33 U.S.C. pars. 1251 et seq.
- Safe Drinking Water Act of 1974, 42 U.S.C. pars. 300f et seq.
- Endangered Species Act of 1973, 16 U.S.C. pars. 1531 et seq.
- Wild and Scenic Rivers Act of 1968, as amended, 16 U.S.C. pars. 1271 et seq.
- Historical and Archeological Data Preservation Act of 1960, as amended, 16 U.S.C. pars. 469 et seq.
- Coastal Zone Management Act of 1972, 16 U.S.C. pars. 1451 et seq.
- Coastal Barrier Resources of 1982, 16 U.S.C. pars. 3501 et seq.
- Indian Self Determination Act, 25 U.S.C. par. 450f.
- Intergovernmental Cooperation Act of 1968, 42 U.S.C. 4201 et seq.
- Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, 42 U.S.C. pars. 4601 et seq.
- Hatch Political Activity Act of 1940, as amended, 5 U.S.C. pars. 1501 et seq.
- Animal Welfare Act of 1970, 7 U.S.C. pars. 2131 et seq.

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- Demonstration Cities and Metropolitan Development Act of 1966, 42 U.S.C. pars. 3301 et seq.
- Federal Fair Labor Standards Act of 1938, as amended, 29 U.S.C. pars. 201 et seq.

SECTION 22. NATIONAL ENVIRONMENTAL POLICY ACT AND RELATED LEGISLATION

If the Implementing Agency undertakes new activities related to the use of federal grant or matching funds in connection with the program that include one or more of the activities listed below, the Implementing Agency shall assist the Authority and the U.S. Department of Justice, Office for Victims of Crime (OVC), in complying with the National Environmental Policy Act (NEPA) and other related federal environmental impact analyses requirements, including but not limited to those listed in this agreement.

The Implementing Agency acknowledges that this section applies to new activities whether or not they are being specifically funded with federal grant or matching funds, in connection with the program. As long as the new activity is being conducted by the Implementing Agency, or any subgrantee, subcontractor, or any third party, and the new activity needs to be undertaken in order to use the federal grant or matching funds in connection with the program, the terms of this section must be met.

Prior to obligating federal grant or matching funds in connection with the program, the Implementing Agency must determine if any of the following activities will be related to the use of such federal grant or matching funds. The Implementing Agency must notify the Authority in writing if it will be conducting any of the following activities, when the activity is undertaken in order to use, or is funded with, federal grant or matching funds in connection with the program:

- New construction.
- Minor renovation or remodeling of a property either (a) listed or eligible for listing on the National Register of Historic Places or (b) located within a 100-year flood plain.
- A renovation, lease, or any other proposed use of a building or facility that will either (a) result in a change in its basic prior use or (b) significantly change its size.
- Implementation of a new program involving the use of chemicals other than chemicals that are (a) purchased as an incidental component of a funded activity and (b) traditionally used, for example, in office, household, recreational, or educational environments.

For existing and continuing programs or activities that will be funded with federal grant or matching funds through the Authority, upon request by the Authority as directed by OVC, the Implementing Agency shall cooperate with OVC in any preparation by OVC of a national or program environmental assessment of that funded program or activity.

SECTION 23. NATIONAL HISTORIC PRESERVATION ACT COMPLIANCE CERTIFICATION

If the Implementing Agency is considering renovation work that would alter or otherwise improve the exterior or interior of a structure that will be used to accommodate the grant program, the Implementing Agency certifies it shall assist the Authority and the Office of Victims of Crime (OVC) in complying with the National Historic Preservation Act (NHPA).

The Implementing Agency must establish and maintain records to determine if the structure is 50 years or older. If any portion of the structure is 50 years or older, the Implementing Agency shall contact the Authority. The Implementing Agency shall provide the Authority with any information needed to comply with NHPA. This may include assisting the Authority and OVC in consulting with the State Historic Preservation Office and amending the proposed renovation to avoid any potential adverse impact to an historic structure. The Implementing Agency cannot begin the proposed renovation of a structure 50 years or older until the Implementing Agency receives written

approval from the Authority.

The Implementing Agency acknowledges that this section applies to proposed renovation work whether or not it is being specifically funded with federal grant or matching funds. As long as the proposed renovation is being conducted by the Implementing Agency or any third party to accommodate the use of the federal grant or matching funds, the Implementing Agency must assist the Authority and OVC in complying with the NHPA.

If the records established and maintained by the Implementing Agency clearly document that the structure is less than 50 years old, the Implementing Agency must submit these documents to the Authority to receive approval for the proposed renovation being exempt from the NHPA.

SECTION 24. EQUAL EMPLOYMENT OPPORTUNITY PROGRAM

Pursuant to 28 CFR Part 42 (Nondiscrimination; Equal Employment Opportunity; Policies and Procedures), except those recipients specifically exempted by 28 CFR Part 42.302(c), if the Implementing Agency has 50 or more employees, is receiving more than \$25,000 or more under the Omnibus Crime Control and Safe Streets Act, and has a service population with a minority representation of 3 percent or more, the Implementing Agency shall formulate, implement and maintain an equal employment opportunity plan that is approved by the Office for Civil Rights relating to employment practices affecting minority persons and women. The plan shall be approved by the Office for Civil Rights.

The Implementing Agency shall complete and submit an EEO Plan Certification to the Authority. This Certification shall indicate if the Implementing Agency is required to have an EEO Plan or if the Implementing Agency is exempt from this requirement. If required by this section, the Implementing Agency certifies that an equal employment opportunity program will be in effect during the period of performance of this agreement. In addition, an Implementing Agency receiving \$500,000 shall submit a copy of its equal employment opportunity plan to the Authority.

The Implementing Agency acknowledges that failure to submit an acceptable EEO Plan, if required by this section, is a violation of this agreement and may result in suspension or termination of funding, until such time the Implementing Agency is in compliance.

SECTION 25. NONDISCRIMINATION

The Implementing Agency certifies that no person shall be excluded from participation in, denied the benefits of, subjected to discrimination under, or denied employment in connection with any activity funded under this agreement on the basis of race, color, age, religion, national origin, disability, or sex. The Implementing Agency agrees to have written sexual harassment policies which satisfy the requirements set forth in the Illinois Human Rights Act. (775 ILCS 5).

National origin discrimination includes discrimination on the basis of limited English proficiency (LEP). To ensure compliance with Title VI and the Safe Streets Act, recipients are required to take reasonable steps to ensure that LEP persons have meaningful access to programs. Meaningful access may entail providing language assistance services, including oral and written translation when necessary.

Faith-Based and Community Organizations that statutorily qualify as eligible applicants under OJP programs are invited and encouraged to apply for assistance awards and will be considered for awards on the same basis as any other eligible applicants and, if they receive assistance awards, will be treated on an equal basis with all other grantees in the administration of such awards. No eligible applicant will be discriminated against on the basis of its religious character or affiliation, religious name, or the religious composition of its board of directors or persons working in the organization.

The Implementing Agency assures compliance with the following laws, and all associated rules and regulations:

- Non-Discrimination requirements of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, 42 U.S.C. 3789d(c);
- Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d;
- Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons (Federal Register, June 18, 2002, Volume 67, Number 117, Page 41455-41472); and Executive Order 13166 Limited English Proficiency Resource Document: Tips and Tools from the Field;
- Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794;
- The Americans with Disabilities Act, 42 U.S.C. 12132 et seq.;
- Title IX of the Education Amendments of 1972, 20 U.S.C. 1681;
- The Age Discrimination Act of 1975, 42 U.S.C. 6102;
- The Department of Justice Non-Discrimination Regulations, 28 CFR Part 42, subparts C, D, E, G; and I
- The Department of Justice regulations on disability discrimination, 28 CFR Part 35;
- The Department of Justice regulations on sex discrimination in education programs, 28 C.F.R. 54;
- The Illinois Human Rights Act, 775 ILCS 5;
- The Public Works Employment Discrimination Act, 775 ILCS 10;
- The Illinois Environmental Barriers Act, 410 ILCS 25.
- The Equal Treatment for Faith-Based Organizations, 28 C.F.R. Part 38.

All applicable provisions, rules and regulations of these Acts are made a part of this agreement by reference as though set forth fully herein.

In the event that a Federal or State court or administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, age, religion, national origin, disability, or sex against the Implementing Agency, or any subgrantee or contractor of the Implementing Agency, the Implementing Agency will forward a copy of the finding to the Authority. The Authority will forward a copy of the finding to the Office for Civil Rights, Office of Justice Programs.

SECTION 26. CONFIDENTIALITY OF INFORMATION

The Implementing Agency agrees not to use or reveal any research or statistical information furnished under this program by any person and identifiable to any specific private person for any purpose other than the purpose for which such information was obtained in accordance with this program and all applicable federal guidelines and legislation. Such information shall be immune from legal process and shall not, without the consent of the person furnishing the information, be admitted as evidence or used for any purpose in any action, suit or other judicial,

legislative or administrative proceeding.

SECTION 27. DEBARMENT AND A DRUG-FREE WORKPLACE CERTIFICATION

As required by the Authority, the Implementing Agency shall complete and submit the Certification Regarding A Drug-Free Workplace and shall certify that neither it nor its principals are presently debarred, suspended, propos for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

The Implementing Agency certifies that it has not been barred from contracting with any unit of State or local government as a result of a violation of Section 33E-3 or 33E-4 of the Criminal Code of 1961, as amended.

SECTION 28. LOBBYING CERTIFICATION

Federal funds are prohibited from being used for influencing or attempting to influence persons in connection with covered federal transactions, which include the awarding, making, entering into, extension, continuation, renewal, amendment, or modification, of federal grants or contracts. No funds under this grant may be used, either directly or indirectly, to support the enactment, repeal, modification, or adoption of any law, regulation, or policy, at any level of government.

If receiving more than \$100,000 pursuant to this agreement, Implementing Agency agrees to provide a Certification Regarding Lobbying to the Authority and, if applicable, a Disclosure of Lobbying Activities form. If a subcontractor will receive more than \$100,000 in federal funds pursuant to this agreement, Implementing Agency will provide to the Authority a Certification Regarding Lobbying and, if applicable, a Disclosure of Lobbying Activities form signed by the subcontractor. The Implementing Agency must provide these certifications and disclosures as required by the Authority.

SECTION 29. INTERNATIONAL ANTI-BOYCOTT CERTIFICATION

The Implementing Agency certifies that neither it nor any substantially-owned affiliated company is participating or shall participate in an international boycott in violation of the provisions of the U.S. Export Administration Act of 1979; or the regulations of the U.S. Department of Commerce promulgated under that Act.

SECTION 30. DRUG FREE WORKPLACE CERTIFICATION

If the Implementing Agency has 25 or more employees and is receiving \$5,000 or more under this agreement, the Implementing Agency certifies that it provides, and will continue to provide, a drug free workplace in accordance with the Drug Free Workplace Act (30 ILCS 580).

The Act requires that no grantee or contractor shall receive a grant or be considered for the purposes of being awarded a contract for the procurement of any property or services from the State unless that grantee or contractor has certified to the State that the grantee or contractor will provide a drug free workplace. False certification or violation of the certification may result in sanctions including, but not limited to, suspension of contract or grant payments, termination of the contract or grant and debarment of contracting or grant opportunities with the State for at least one (1) year but not more than five (5) years.

For the purpose of this certification, "grantee" or "contractor" means a corporation, partnership, or other entity with twenty-five (25) or more employees at the time of issuing the grant, or a department, division, or other unit thereof, directly responsible for the specific performance under a contract or grant of \$5,000 or more from the State.

The contractor/grantee certifies and agrees that it will provide a drug free workplace by:

- (a) Publishing a statement:
 - (1) Notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance, including cannabis, is prohibited in the grantee's or contractor's workplace.
 - (2) Specifying the actions that will be taken against employees for violations of such prohibition.
 - (3) Notifying the employee that, as a condition of employment on such contract or grant, the employee will:
 - (A) abide by the terms of the statement; and
 - (B) notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction.
- (b) Establishing a drug free awareness program to inform employees about:
 - (1) the dangers of drug abuse in the workplace;
 - (2) the grantee's or contractor's policy of maintaining a drug free workplace;
 - (3) any available drug counseling, rehabilitation, and employee assistance program; and
 - (4) the penalties that may be imposed upon an employee for drug violations.
- (c) Providing a copy of the statement required by subparagraph (a) to each employee engaged in the performance of the contract or grant and to post the statement in a prominent place in the workplace.
- (d) Notifying the contracting or granting agency within ten (10) days after receiving notice under part (B) of paragraph (3) of subsection (a) above from an employee or otherwise receiving actual notice of such conviction.
- (e) Imposing a sanction on, or requiring the satisfactory participation in a drug abuse assistance or rehabilitation program by, any employee who is so convicted, as required by section 580/5 of the Drug Free Workplace Act.
- (f) Assisting employees in selecting a course of action in the event drug counseling, treatment, and rehabilitation is required and indicating that a trained referral team is in place.
- (g) Making a good faith effort to continue to maintain a drug free workplace through implementation of the Drug Free Workplace Act.

SECTION 31. DISCLOSURE OF SOLICITATION FOR EMPLOYMENT

The Implementing Agency shall notify the Authority's Ethics Officer if the Implementing Agency solicits or intends to solicit for employment any of the Authority's employees during any part of the award funding process or during the term of any interagency agreement awarded.

SECTION 32. ELIGIBILITY FOR EMPLOYMENT IN THE UNITED STATES

The Implementing Agency shall complete and keep on file, as appropriate, the Immigration and Naturalization Service Employment Eligibility Form (I-9). This form shall be used by the Implementing Agency to verify that

persons employed by the Implementing Agency are eligible to work in the United States.

SECTION 33. DISPOSITION REPORTING CERTIFICATION

The Implementing Agency certifies that it is in compliance with the reporting provisions of the Criminal Identification Act (20 ILCS 2630), when applicable, and agrees to cooperate with the Authority and other parties in the implementation of the State's Criminal Records Improvement Plan, developed by the Authority pursuant to federal law.

SECTION 34. CRIMINAL INTELLIGENCE SYSTEM OPERATING POLICIES CERTIFICATION

If the program described in Exhibit A is subject to requirements of the Criminal Intelligence System Operating Policies, 28 CFR Part 23, the Implementing Agency certifies to the Authority that the program shall conform with the operating policies set forth in 28 CFR Part 23.20 and meets funding criteria set forth in 28 CFR Part 23.30. If the program is subject to these requirements, the Implementing Agency shall cooperate with specialized monitoring and auditing of the program as may be required by 28 CFR Part 23.40(a), and shall comply with operating policies required by 28 CFR Part 23.40(b).

SECTION 35. COPYRIGHTS, PATENTS

If this agreement results in a copyright, the Authority and the Office for Victims of Crime reserve a royalty-free, nonexclusive and irrevocable license to reproduce, publish or otherwise use, and to authorize others to use, for government purposes, the work or the copyright to any work developed under this agreement and any rights of copyright to which a grantee, subgrantee or a contractor purchases ownership with grant support.

If this agreement results in the production of patentable items, patent rights, processes, or inventions, the Implementing Agency shall immediately notify the Authority. The Authority will provide the Implementing Agency with further instruction on whether protection on the item will be sought and how the rights in the item will be allocated and administered in order to protect the public interest, in accordance with federal guidelines.

SECTION 36. STATEMENTS, PRESS RELEASES, ETC.

When issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs funded in whole or in part with federal money, the Implementing Agency shall clearly state (1) the percentage of the total cost of the program or project which will be financed with federal money, and (2) the dollar amount of federal funds for the project or program.

SECTION 37. PUBLICATIONS

The Implementing Agency shall submit to the Authority for review, a draft of any publication that will be issued by the Implementing Agency describing or resulting from programs or projects funded in whole or in part with federal or matching funds, no later than 60 days prior to its printing.

For publications over 20 pages, the Authority will submit comments to the Implementing Agency no later than 30 days after receipt of the draft. If more than one such publication is submitted, the Authority reserves the right to extend the 30-day review period.

For publications of 20 pages or less, the Authority will submit comments to the Implementing Agency no later than 10 working days after receipt of the draft. If more than one such publication is submitted, the Authority reserves the right to extend the 10-day review period.

The Authority reserves the right to require the resubmission of any publication for additional review and comment, prior to its printing.

The Implementing Agency shall submit to the Authority, copies, the number of which will be specified by the Authority, of the final publication no later than 20 days prior to release of the final publication.

Exceptions to the above publication requirements may be granted upon prior Authority approval.

Any such publication shall contain the following statement:

"This project was supported by Grant #2012-VA-GX-0002, awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice, through the Illinois Criminal Justice Information Authority. Points of view or opinions contained within this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice, or the Illinois Criminal Justice Information Authority."

Publications subject to these requirements include any planned, written, visual or sound materials, including but not limited to, brochures, booklets, videos, posters, radio and television announcements, training fliers, interim or final reports, and conference and presentation materials, that are substantively based on the project and prepared by the Implementing Agency. These requirements are inapplicable to press releases, newsletters and issue analyses.

SECTION 38. FEDERAL TAXPAYER IDENTIFICATION NUMBER

Under penalties of perjury, the Implementing Agency certifies that the name, correct taxpayer identification number, and listed below are correct:

Name: Champaign County

Taxpayer Identification Number:

Social Security Number

Employer Identification Number: 37-6006910

(If you are an individual, enter your name and SSN as it appears on your Social Security Card. If completing this certification for a sole proprietorship, enter the owner's name followed by the name of the business and the owner's SSN or EIN. For all other entities, enter the name of the entity as used to apply for the entity's EIN and the EIN.)

Legal Status (che	ck one): Individual	 Nonresident Alien
-	Sole Proprietorship	 Tax Exempt
	Partnership/Legal Corporation	 Pharmacy/Funeral Home/Cemetery (Corp.)
	Corporation providing or billing medical and/or healthcare services	 Corporation NOT providing or billing medical and or healthcare services
_X	Government	 Pharmacy (non-corporate)
	Estate or Trust	 Non-profit Corporation/ Tax Exempt
	Non-profit Corporation/ Non-Tax Exempt	 Other (Specify)

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(Implementing Agency marking non-profit corporation/ tax exempt shall supply the Authority with a copy of their affirmation letter showing their 501(c)(3) status.)

SECTION 39. FEDERAL GRANT INFORMATION

By signing this agreement, the Implementing Agency acknowledges that it has been informed of the following information regarding the federal funds received under this agreement:

- Federal Awarding Agency: Office of Justice Programs, Office for Victims of Crime
- Catalog of Federal Domestic Assistance (CFDA) Number and Title: 16.575 Crime Victims Assistance
- Grant Award Name and Number: Crime Victim Assistance Grant Program (2012-VA-GX-0002)
- Grant Award Year: Federal Fiscal Year 2012

SECTION 40. TRANSPARENCY ACT COMPLIANCE

The Implementing Agency and Program Agency agree to comply with any and all requirements of 2 C.F.R. §33.200 that are imposed on recipients of federal funds by the Federal Funding Accountability and Transparency Act of 2006. The Implementing Agency and Program Agency agree to comply with the following:

a) To acquire and use a DUNS (Data Universal Numbering System) number. The DUNS number shall be procured from Dun and Bradstreet, Inc online at www.dunandbradstreet.com or by calling 1-866-705-5711.
Implementing Agency's DUNS Number: 097322861
b) To maintain a current registration in the System for Award Management (SAM) database. The Implementing Agency must update or renew their SAM registration at least once per year to maintain an active status. Information about registration procedures can be accessed at www.sam.gov .
The Implementing Agency's SAM registration is valid until: 5/3/2014
c) Shall provide the Authority with their Commercial And Government Entity (CAGE) Code. The CAGE Code request process is incorporated into the CCR registration.
Implementing Agency's CAGE Code: 4VB73
d) The Implementing Agency and Program Agency further agree that all agreements entered into with subgrantees or contractors, shall require compliance by the subgrantee or contractor with the Federal Funding Accountability and Transparency Act of 2006 and all requirements of 2 C.F.R. §33.200 including obtaining a DUNS number and

- Transparency Act of 2006 and all requirements of 2 C.F.R. §33.200 including obtaining a DUNS number and maintaining registration with the CCR. The acquisition of a DUNS number and registration with the CCR database is not required of subgrantees and contractors who are individuals.
- e) The Implementing Agency shall provide the Authority with completed "Addendums to Agreements" for all subgrantees and subcontractors. Copies of blank Addendums to the Agreement are available from your grant monitor.

SECTION 41. RENEGOTIATION, MODIFICATION, OR AMENDMENT OF THE INTERAGENCY AGREEMENT

No alteration, variation, modification, termination, addition to or waiver of any provisions of this agreement shall be valid or binding unless in writing, and signed by the parties. For purposes of modification of this agreement which do

not involve increases or decreases in funding, the signature of one representative of the Implementing Agency is sufficient. The parties agree to renegotiate, modify, or amend this agreement to ensure continued consistency with federal and State laws, and regulations.

SECTION 42. INTEGRATION

This document and the exhibits, amendments, and items incorporated by reference constitute the entire agreement between the parties pertaining to the subject matter of this agreement and supersede all prior and contemporaneous agreements and understandings of the parties, oral or written, which are not fully expressed herein. No alleged covenant, representation, or condition not expressed in this agreement shall affect or be effective to interpret, change or restrict the express provisions of this agreement.

SECTION 43. SEVERABILITY

If any term or provision of this agreement is held invalid, unenforceable, voidable or void, that term or provision shall not affect the other terms or provisions of this agreement which can be given effect without the invalid term or provision.

SECTION 44. TERMINATION OR SUSPENSION OF THE INTERAGENCY AGREEMENT

The Executive Director of the Authority may suspend or terminate performance of this agreement, in whole or in part, when an Implementing Agency fails to comply with any State or federal law or regulation or with the terms or conditions of this agreement. The Authority may take one or more of the following actions:

- Temporarily withhold cash payments pending correction of the deficiency by the Implementing Agency
- Disallow all or part of the cost of the activity or action not in compliance
- Wholly or partly suspend or terminate the current agreement
- Withhold further awards to the Implementing Agency
- Pursue other legal remedies, as applicable.

If the Authority terminates an agreement, the Authority will notify the Implementing Agency in writing of its decision, specify the reason, afford the Implementing Agency a reasonable time to terminate project operations, and request the Implementing Agency seek support from other sources. An agreement that is terminated pursuant to this section will be subject to the same requirements regarding audit, recordkeeping, and submission of reports as an agreement that runs for the duration of the period of performance. Any appeals will be conducted in accordance with the Authority's Operating Procedures for the Administration of Federal Funds (20 II. Adm. Code 1520.60).

SECTION 45. FAILURE TO FILE IN A TIMELY FASHION.

In order to preclude the possibility of lapsing of funding, the Authority is requiring the timely filing of all required reports. Reports shall include but are not limited to, quarterly fiscal reports, quarterly progress reports and all reports included in the closeout materials. The quarterly fiscal and progress reports are due not more than 15 days after the end of the quarter unless another reporting schedule has been required or approved by the Authority. The final date for submission for all of the closeout material reports is 30 days after the end of the grant period.

Failure to meet the reporting dates established for the particular reports shall result in the "freezing" of all funds. The frozen funds shall not be limited to a particular grant that is delinquent, but all grant funds that the Implementing Agency has with the Authority shall be frozen. Funds will be released following the completion of all the reporting requirements.

SECTION 46. COURT APPOINTED SPECIAL ADVOCATES

The Implementing Agency shall, on agreements that fund Court Appointed Special Advocates (CASA), ensure and provide documentation (i.e. time and attendance records) that any and all funds are utilized "solely" to benefit

victims of crime. Therefore, VOCA funds shall be used to pay for only, that portion of the coordinator's time, which is devoted to supervision, training, etc. of those volunteers who provide direct services to child victims of physical and sexual abuse, criminal neglect and or abandonment.

SECTION 47. REPORTING GRANT IRREGULARITIES

The Implementing Agency shall promptly notify the Authority through their Grant Monitor when an allegation is made, or the Implementing Agency otherwise receives information, reasonably tending to show the possible existence of any irregularities or illegal acts in the administration of grant funds. The Authority, per its agency policy, shall determine the reasonableness of the allegation of the irregularities or illegal action and determine the appropriate course of action. Possible actions would include conducting an internal audit or other investigation or contacting the proper authorities. Illegal acts and irregularities shall include but are not limited to such matters as conflicts of interest, falsification of records or reports both data, fiscal and programmatic, and the misappropriation of funds or other assets.

The Implementing Agency shall inform any sub-recipient of the Authority's grant funds that the sub-recipient is similarly obligated to report irregularities and the Implementing Agency shall provide a copy of the Authority's policy to any sub-recipient. A copy of the Authority's policy is available on the web at http://www.icjia.state.il.us/public/.

Failure to report known irregularities can result in suspension of the Interagency Agreement or other remedial action. In addition, if the implementing agency's auditor or other staff becomes aware of any possible illegal acts or other irregularities prompt notice shall be given to the Implementing Agency's director. The Implementing Agency, in turn, shall promptly notify the Authority as described above of the possible illegal acts or irregularities. If the possible misconduct involves the Implementing Agency's director, the Implementing Agency staff member shall provide prompt notice directly to the Authority.

In addition, the Authority, if in its judgment there is a reasonable allegation of irregularity or illegal act, shall inform the Office of Justice Program's Office of the Comptroller, the Department of Justice's Office of Professional Responsibility and the Office of Inspector General, and state and local law enforcement agencies or prosecuting authorities, as appropriate, of any known violations of the law within their respective area of jurisdiction.

The reporting of any irregularities, illegal acts and the proposed or actual corrective action shall be reported to the Authority at:

Illinois Criminal Justice Information Authority Attn: Grant Monitor 300 W. Adams Suite 200 Chicago, IL 60606

Phone: 312-793-8550

SECTION 48. REPORTING POTENTIAL FRAUD, WASTE OR SIMILAR MISCONDUCT.

The Implementing Agency shall promptly refer to the Authority, via their assigned Grant Monitor, and the Department of Justice Office of Inspector General (OIG) any credible evidence that a principal, employee, agent, contractor, subcontractor, or subgrantee has either submitted a false claim for grant funds in violation of the False Claims Act or committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity or similar misconduct involving grant funds.

Potential fraud, waste, abuse or misconduct shall be reported to the Authority by mail at:

Illinois Criminal Justice Information Authority Attn: Grant Monitor 300 W. Adams Suite 200 Chicago, IL 60606

Phone: 312-793-8550

Potential fraud, waste, abuse or misconduct shall be reported to OIG by mail or e-mail at:

Office of the Inspector General U.S. Department of Justice Investigation Division 950 Pennsylvania Ave, N.W. Room 4706 Washington. D.C. 20530

E-mail: oig.hotline@usdoj.gov Phone: 1-800-869-4499 Fax: (202) 616-9881

More information is available from the DOJ OIG website at www.usdoj.gov/oig.

SECTION 49. USE OF FUNDS

Implementing Agency certifies that it, and its subcontractors, shall use federal and match, if applicable, funds for only allowable services, activities and costs, as described in Exhibit A.

The Implementing Agency certifies that only those costs listed in Exhibit B shall be paid pursuant to this agreement.

Implementing Agency understands the payment of funds shall be withheld until such certifications are received by the Authority.

SECTION 50. PROHIBITED CONTRACTOR

The Implementing Agency understands and agrees that no funds will be contracted or subawarded to the Association of Community Organization of Reform Now (ACORN) or its subsidiaries without prior approval of the Authority.

SECTION 51. TEXT-MESSAGING WHILE DRIVING

The Authority encourages the Implementing Agency to adopt and enforce policies banning employees of the Implementing Agency or Program Agency and contractors or subcontractors from text messaging while driving any vehicle during the course of performing work funded by this agreement, and to establish safety policies and conduct education, awareness, and other outreach to decrease crashes caused by distracted drivers.

SECTION 52. VICTIM COMPENSATION AWARENESS

The Implementing Agency shall certify that victims are notified of the VOCA Victims Compensation program administered through the Office of the Illinois Attorney General. Notification is defined as simply advertising the Victim Compensation program through posters or brochures publicly displayed in the agency's office or by verbally making the victim aware of the program. This notification requirement does not apply to crisis services.

The Implementing Agency shall detail their method of notification in the Program Narrative/ Exhibit A.

SECTION 53. DUPLICATION OF FUNDING

The Implementing Agency agrees that if it currently has an open award of federal funds or if it receives an award of federal funds other than this VOCA award, and those award funds have been, are being, or are to be used, in whole or in part, for one or more of the identical cost items for which funds are being provided under this VOCA award, the Implementing Agency will promptly notify, in writing, the Authority.

SECTION 53.5 SPECIAL CONDITIONS - MULTIDISCPLINARY TEAM

Implementing Agency certifies that it shall not use VOCA or match funds to pay for multidisciplinary team (MDT) coordination services, described in Exhibit A, unless the following conditions are adhered to:

- A) Coordination services must be with respect to specific individual cases, and include monitoring of the direct service plan and keeping parents/guardians apprised of criminal justice activities.
- B) Coordination of the MDT must be necessary and essential to the provision of direct services, as well as a way to serve victims more effectively.

SECTION 53.6 SPECIAL CONDITIONS - CONTRACTED COUNSELOR TO CHILDREN VICTIMS OF SEXUAL ABUSE

- A. Unless otherwise approved by the Authority, the following minimum qualifications are required of any VOCA or match supported staff person hired to provide counseling services to children and non-offending parents:
 - MSW or related degree, or BSW or related degree and 3 years experience counseling with sexually abused children.
 - 60 hours specialized training in child sexual abuse and related issues completed within 3 months of the start of the contract.
 - Ability to communicate orally and in writing.

VOCA or match supported personnel hired to provide such counseling must agree to a check of previous employment, personal and professional references; and, if required by law, a criminal background check, in accordance with applicable laws and regulations. The Implementing Agency must perform these checks as a condition of this interagency agreement.

B. No funds may be used to cover contractual counseling costs described in Exhibits A and B until the Implementing Agency complies with the following:

If the contractor payment rate exceeds \$450 for an 8 hour day (exceeds \$56.25 per hour), the Implementing Agency must submit written justification for that payment rate for PRIOR Authority review and approval.

If the contractor payment rate is \$450 for an 8 hour day or less, the written justification must be maintained onsite by the Implementing Agency and made available for review and approval by the Authority during scheduled site visit(s). If a site visit is not scheduled during the period of performance of the grant program, the Implementing Agency may be required to submit this justification for Authority review and approval as directed by the Authority.

The written justification for these contractor payments must follow the Authority's required format, which the Authority will provide to the Implementing Agency.

SECTION 54. ACCEPTANCE & CERTIFICATION

Jack Cutrone	Date
Executive Director	a
Illinois Criminal Justice Information Authority	
Alan Kurtz, Board Chairman under oath, do hereby certify and acknowledge that: (1) all of the formation in the grant agreement 212216 is true and correct to best of my owledge, formation and belief, (2) the grant funds shall be used only for the purposes described in the grant greement 212216, and (3) the awarding of grant funds is conditioned upon the Authority's receipt of this certification.	
Alan Kurtz Board Chairman Champaign County	Date
Daniel J. Welch, Treasurer, under oath, do hereby certify and acknowledge that: (1) all of the formation in the grant agreement 212216 is true and correct to best of my knowledge, formation and belief, (2) the grant funds shall be used only for the purposes described in the grant reement 212216 and (3) the awarding of grant funds is conditioned upon the Authority's receipt	
this certification.	
	Date
this certification. Daniel J. Welch Treasurer	Date

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY
Updated August 10, 2011
Federal and State Grants Unit

VICTIMS OF CRIME ACT EXHIBIT A:

PROGRAM NARRATIVE

Standard Non-InfoNet Reporting

Description of organization Champaign County Children's Advocacy Center 1. Program Agency Name: Mailing Address: 201 W. Kenyon Road, Suite 1, Champaign, IL 61820 Telephone number: (217) 384-1266 2. Please provide the following information for your VOCA program service area (attachments are acceptable). A. List the county(ies) or municipality(ies) served by your VOCA program. Champaign B. Federal Congressional District number(s) 13th and 15th C. State Senatorial District number(s) 51st and 52nd D. State Representative District number(s) 103rd and 104th These districts can be found by visiting the <u>Illinois State Board of Elections</u> website. Type of program agency (Check one) A. Criminal justice government* Law Enforcement Court Prosecution Corrections Probation Other (specify) B. Non-criminal justice government Social Services Hospital Mental Health Public Housing Other (specify) Children's Advocacy Center C. Private: Non-profit Hospital Shelter Mental Health Rape Crisis Religious Organization Other (specify): D. Other: Describe *If your agency is a governmental unit, such as law enforcement or prosecution, please provide a short description of how the activities described within this application have been coordinated with the victim service providers in the community served. Include letters of support from all agencies listed as part of the application. Victim advocacy services are provided to child victims and their non-offending family members by the Case Manager, the Crisis Intervention Counselors, and other area advocacy programs. Those services include assistance with obtaining protective orders, legal advocacy, housing, public assistance, domestic violence intervention, and transportation. Community-based programs providing advocacy services include, but are not limited to: A Woman's Place/Center for Women in Transition, Rape Advocacy, Counseling and Education Services (R.A.C.E.S.), and the Victim Advocacy Program of the Champaign County State's Attorney's Office. The CAC Case Manager and the Crisis Intervention Counselors maintain information on community-based advocacy services and make that information available to clients receiving services from the Children's Advocacy Center.

All cases resulting in criminal prosecution receive services through the Victim Advocacy Program of the Champaign County State's Attorney's Office. Advocates schedule meetings to familiarize the victim with the criminal court process in order to make court proceedings more understandable and less frightening to children and their families. These meetings can be held at the CAC and may also include tours of the courthouse facilities, including the courtroom where the child may be called upon to testify. Through these meetings, Advocates attempt to assess the child victim's ability to function within the court proceedings. Advocates also accompany children and their families to hearings, providing support and advocacy throughout all consequent legal proceedings.
The State's Attorney's Victim Advocacy Program initiates and maintains written, telephone, and/or personal contact with victims of criminal cases filed by the State's Attorney's Office and Advocates provide guidance and support to victims throughout their involvement with the criminal justice system, which may include accompanying crime victims to court. The Victim Advocacy Program also identifies and refers victims to appropriate community-based services and develops and distributes informational brochures for use by crime victims. If your agency is not able to coordinate these activities with a victim service agency please explain why.
3. Purpose of VOCA funds: (select one) ☐ Start a new victim services project ☐ Expand or Enhance an existing project not funded by VOCA in a previous year. ☐ Technology
4. Crime Victim Assistance Funds Awarded: \$50,338 Project Begin Date: July 1, 2013 Grant Number: 212216 Project End Date: June 30, 2014
5. These VOCA funds will primarily be used to: (check one) ☐ Expand services into a new geographic area ☐ Offer new types of services ☐ Serve additional victim populations ☐ Other (specify) ☐ Other (specify)
6. For this victims' services program indicate the number of VOCA funded paid staff, full-time equivalent** (FTE) .76 ** FTE is the program full time equivalent total listed in Question 3a in the Summary of Program Section.
 7. Volunteers used in <u>any</u> capacity throughout your agency should be counted and reported. Does your organization use volunteers? Yes – complete part A & B No – complete the volunteer waiver certification included in the continuation packet. A. How many Full-time Equivalent (FTE) volunteer staff are used by your agency as a whole, not

just the VOCA funded program? .10

B. What activities do they perform?

Volunteers coordinate the child victim support group program and provide assistance to the Children's Advocacy Center's Case Manager. The Children's Advocacy Center did not offer a child victim support group in 2012. In addition, all members of the Governing Board of the Children's Advocacy Center serve without compensation.

8. Identify the amount of the VOCA-Funds allocated to serve victims accordingly.

ALL GENERAL CRIME	\$
OR	
Child Abuse (includes child sex abuse)	\$ 50,338
Domestic violence	\$
Sexual assault	\$
Underserved	
DUI/DWI crashes	\$
Survivors of homicide victims	\$
Assault and/or Battery	\$
Adults molested as children	\$
Elder abuse	\$
Robbery	\$
Other violent crime (specify)	\$
TOTAL (should match question #4.)	\$ 50,338

9. Sub-grant Match (financial support from other sources for this program):		
Value of In Kind Match	\$ 0	
Cash Match	\$ 12,585	
Total	\$ 12,585	
10. Please provide the total amounts of funding allocated to All Victim Services based on your agency's		
current fiscal year budget:		
Other Federal funds (excluding t	these VOCA funds) \$ 10,000	
VOCA funds (award amount)	\$ 50,338	
State	\$ 82,275	
Local	\$ 37,080	
Other	\$ 12,010	
This agency certifies that it receives over \$500,000 in federal funds agency wide and it is required to		
have an A-133 Audit.		
11. Identify the victims to be served through this		
activities) by checking the type of crime(s) At least one must be selected.		
Child Physical Abuse	Adults molested as children	
☐ Child Fifysical Abuse ☐ Child Sexual Abuse	Survivors of homicide victims	
DUI/DWI Crashes	Robbery	
Domestic Violence	Assault	
Adult Sexual Assault	Other Violent Crimes (specify)	
☐ Elder Abuse	Other (Specify)	
12. Check the services to be provided by this VOCA – funded project. Check all that apply		
☐ Crisis Counseling	☐ Criminal Justice Support/Advocacy	
	☐ Emergency Financial Assistance	
☐ Therapy	☐ Emergency Legal Advocacy	
Group Treatment	X Assistance in Filling Compensation Claims*	
Crisis Hotline Counseling	Personal Advocacy	
Shelter/Safe House	☐ Telephone Contacts (Information and Referral)	
☐ Information and Referral (In person)	Other (Specify)	
*Assistance in filling compensation claims is MANDATORY		

II. Summary of organization

In this section, we are trying to gain a general sense of your organization's activities, NOT solely the program for which you are seeking VOCA funds.

1. Please provide a *brief* description of your entire organization, including details of different units and staffing.

The Champaign County Children's Advocacy Center (the "Center" or "CAC") coordinates a timely, comprehensive and multidisciplinary response to allegations of sexual assault and serious physical abuse of minors under age 18 who live in, have lived in, or who are currently located in Champaign County, in a safe, agency-neutral, child-focused setting. The CAC faciliates forensic interviews of children who may be victims of sexual assault or serious physical abuse, offers medical, treatment and support services referrals to children and their families, and assists with any consequent legal proceedings in order to protect and support victimized children and their families.

2. Besides the services funded through this VOCA grant, what (if any) other victim services does your agency provide? Include examples of how these services are coordinated with the **VOCA** funded activities.

From its facilities at 201 W. Kenyon Road in Champaign, the Champaign County Children's Advocacy Center provides a safe, agency-netural space with assigned personnel designated for the investigation and coordination of services for victims of child sexual assault and serious physical abuse. These services are designed to faciliate joint investigations, reduce the trauma of repeated victim interviews, and initiate victim and family healing. While referrals to the CAC can come from any number of sources, investigations can only be initiated by law enforcement agencies and/or the Illinois Department of Children and Family Services. The Children's Advocacy Center is available 24 hours per day, 7 days per week in order to facilitate investigations and to initiate the service provision process. Center staff can be reached by pager after normal business hours.

In addition to providing comprehensive case management and crisis intervention counseling services, the Children's Advocacy Center assists in scheduling specialized medical evaluations: offers child victim support groups; maintains a comprehensive tracking system to receive and coordinate information concerning child sexual assault and serious physical abuse; coordinates monthly Multidisciplinary Team case review meetings and conducts other periodic reviews of open cases to ensure that victims and their families are receiving adequate support and appropriate community services; coordinates and facilitates local and regional peer review for investigators who conduct child forensic interviews; participates in and coordinates community education and prevention services; and facilitates and funds, whenever possible, specialized training for personnel from local law enforcement departments, child welfare agencies, and social service providers.

The victim services offered by the Children's Advocacy Center are coordinated by the Case Manager and Crisis Intervention Counselors, all of whom engage in VOCA-funded activities. Whenever possible, one of our Crisis Intervention Counselors is present at the Children's Advocacy Center while the child is being interviewed. The Case Manager and the Crisis Intervention Counselor collaborate in the information gathering (social history) process with parents/caregivers of children being interviewed. In this way, we hope to establish an immediate

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connection between the family and the assigned Crisis Intervention Counselor, which we hope will encourage a greater level of engagement with ongoing services.

3. Please indicate the total number of staff dedicated to all victim services at your organization, not just this VOCA funded program.

Type of staff	Number of staff
Number of staff providing direct service. (Do not include managerial and support staff in this count).	1
Number of managerial staff	1
Number of administrative support staff	0

4. Does this program make a special effort to target Yes – check all un-served/underserved No – skip to Section III	
American Indian Asian Black or African American Elderly Hispanic or Latino Homeless or living in poverty Immigrants, refugees, or asylum seekers	☐ Lesbian, gay, bisexual, transgender ☐ People with disabilities ☐ Limited English proficiency ☐ Mental health issues ☐ Substance abuse issues ☐ Rural areas ☐ Children
Other (specify):	

III. Summary of Program

This section will help us understand the program for which you are seeking VOCA funds. This must include all direct services to be provided to crime victims with VOCA and match funds. **Do** not include a description of activities that will not be funded with VOCA or match funds.

1. Description of program: Please provide a description of your VOCA funded program. Include information on any efforts to target underserved victim populations listed above that are served by this program, such as minority, elderly or disabled populations.

Crisis Intervention Counseling: This program provides child victims and their non-offending family members with immediate, short-term crisis intervention counseling and support to reduce the severity of the crisis following a report of child sexual assault or serious physical abuse. VOCA-funded services are not provided to offenders. The Children's Advocacy Center currently contracts with three licensed therapists, one of whom is Spanish-speaking, to provide crisis intervention counseling services to our clients.

Crisis intervention counseling provides victims with a sense of safety and security, allows them the chance for ventilation and validation, and gives them accurate information, prediction and preparation for the future. Crisis intervention services include: crisis intervention assessments for child victims and their non-offending family members; crisis counseling and emotional support in the short-term; education, information and referral; and linkage to long-term treatment, when appropriate. The Crisis Intervention Counselors also participate in pre- and post-interview debriefings and Multidisciplinary Team case review meetings. In most cases, crisis intervention counseling services are provided for a period of 6-8 weeks following the forensic interview, or until the client has been linked with long-term mental health services, if deemed appropriate.

Case Management Services: The Case Manager provides comprehensive case management services which include: establishing social histories with victims and families, identifying areas of concern and areas of need for making referrals, identifying community resources for assisting victims and families, making appropriate referrals for needed services, providing ongoing support and information, assessing progress in securing appropriate services and meeting recovery-related goals, assisting with consequent legal proceedings, facilitating follow-up interviews, and participating in pre-and post-interview case debriefings and Multidisciplinary Team case review meetings.

2. Who oversees this program? Please include position titles and duties. (Do not include personal information.)

The Executive Director oversees the daily operations of the Children's Advocacy Center and directs the administrative functions of the agency to ensure the provision of a coordinated, timely, comprehensive and multidisciplinary response to allegations of child sexual assault and serious physical abuse in a safe, agency-neutral, child-focused setting.

3. Staff

a. Report staff by title. Include employees who are part-time and/or only partially funded with this grant as well as program funded consultants/contractors. Include employees who are funded with any required grant match. Report all FTEs in decimals, not percentages and report in terms of total time at the agency and time spent on the

program.

Title of Staff Person	Agency Full Time Equivalent*	% time on VOCA funded program	Program Full Time Equivalent**
Example: Advocate	.50	100	.5
Example: Counselor	.75	50	.375
Case Manager	1.0	57	.57
Crisis Intervention Counselor (Contractual)	.07	100	.07
Crisis Intervention Counselor (Contractual)	.07	100	.07
Crisis Intervention Counselor (Contractual)	.05	100	.05
TOTAL(should equal #6 in Section I Description of Organization)	1.19	N/A	.76

^{*}Agency FTE is calculated by the number of total hours worked in a week divided by the average work week for your organization.

b. What are the primary qualifications (e.g. education, language skills etc.) of program funded staff?

Crisis Intervention Counselors: Qualifications include a minimum of a Master's of Social Work or related degree from an accredited college or university, or a Bachelor's of Social Work or related degree and three years' experience counseling with sexually abused children. Although not required, a Master's Degree is preferred. In addition, licensure as a Licensed Clinical Social Worker or Licensed Clinical Professional Counselor is recommended. Additional qualifications include:

- The ability to communicate orally and in writing;
- Experience working with children and families in crisis, preferably those who have been impacted by sexual or serious physical abuse;
- 40 hours of specialized, trauma-focused mental health training, clinical consultation, clinical supervision, peer supervision, and/or mentoring within the first six (6) months of association with the Children's Advocacy Center (or demonstration of relevant experience prior to association);
- A minimum of eight (8) hours of training in Trauma-Focused Cognitive-Behavioral Therapy within the first six (6) months of association with the Children's Advocacy Center (or demonstration of relevant experience prior to association);
- Ongoing education in the field of child abuse consisting of a minimum of eight (8) contact hours per year;
- Experience collaborating with local service providers; and
- Any relevant licensure.

Case Manager: Qualifications include a Bachelor's degree from a four-year college or university and a major in social work or a related field. Previous experience in criminal justice, human services and professional training in child abuse is recommended.

^{**} Program FTE is calculated by Agency FTE times the time on the program.

c. Please attach an updated job description for each position including duties and qualifications. If this position is not 100% VOCA-funded, asterisk the duties that apply to this program on the job description.

Victims Compensation Program

As a condition of receiving VOCA funds the Office on Victims of Crime (OVC) mandates that programs receiving VOCA funds must notify* all victims of the VOCA Victims Compensation program administered through the Office of the Illinois Attorney General.

4. Please explain how your agency informs victims of the VOCA Victims' Compensation program.

The Champaign County Children's Advocacy Center has posted on the wall of the conference room a poster from the Illinois Attorney General's Office explaining financial assistance for victims of violent crime available under the provisions of the Illinois Crime Victims Compensation Act. The poster is visible to all families visiting the Children's Advocacy Center and includes a toll free telephone number for the Crime Victims Services Division of the Illinois Attorney General's Office. As part of our intake process, the Case Manager also provides parents with Fact Sheets about Crime Victims Compensation, including answers to frequently asked questions by sexual assault victims.

Finally, the Case Manager provides families with applications for financial assistance available through the Crime Victims Compensation Fund and assists families with completing and filing those applications.

*Notification is defined as simply advertising the Victims' Compensation program through posters or brochures publicly visible in the agency's office. Other options include: providing information and referrals concerning the program and assistance with the application.

IV. Statement of Problem

This section will help us understand why your program is important to crime victims that come into contact with your agency as well as the community you serve. This section should document the problem(s) the organization continues to face and justify a need for continued funding.

1. Use the table below to identify the crime(s) this program will target and provide three years of county level data for your service area. If your program does not target a specific type of crime please include the three highest crime rates for the jurisdiction your program serves. Data for Index offenses are available on the Illinois Criminal Justice Information Authority's website or the publication, Crime in Illinois, produced by the Illinois State Police (ISP).

Type of c	rime: xual Abuse	Э	Type of c Child (Ph Abuse/N	nysical)		Type of c	rime:	7.00
2007	2008	2009	2007	2008	2009	2007	2008	2009
150	132	125	1,820	1,784	1,930			

^{*} If multiple counties are served by your VOCA funded program please list the counties served here, and accumulate the crime numbers above. NOTE: The source for the crime numbers above is the Illinois Department of Children and Family Services (DCFS) Child Abuse and Neglect Annual Statistical Reports for FY 2007-2009. In their numbers for Child Abuse/Neglect, DCFS does not distinguish reports of serious physical abuse from those of a less serious nature. The number of unique children reported as sexually abused in 2010 and 2011 was 106 and 142, respectively. The number of unique children who were the subject of Abuse and Neglect Reports was 1,883 and 1,879, respectively.

2. What is the problem(s) your VOCA funded program has identified through its contact with the victim population served that this program addresses? (What do crime victims need that they would not get if not for the services provided through this program?)

Crisis Intervention Counseling: The problem identified through contact with the victim population served by the Children's Advocacy Center is the lack of immediate, low- or no-cost short-term counseling services designed to address the needs of child victims and their nonoffending family members in the immediate aftermath following a report of child sexual or serious physical abuse. This problem was acutely evident while the CAC was restructuring the crisis intervention services program (October 2009-March 2010). During that time, the CAC Case Manager attempted to link clients with existing community-based mental health services. Unfortunately, we found that those services are limited, especially for those clients who rely on Medicaid for payment, and oftentimes involved waiting lists.

The crisis intervention counseling services program allows us to eliminate this gap in services by providing a qualified, trained specialist who offers direct crisis intervention counseling services to victims and their families during the interval between assessment and linkage with long-term mental health services, if appropriate. The period following the report of child sexual abuse and the onset of services is often fraught with anxiety for victims and their families and they are often without adequate resources, financial or emotional, to cope with the attendant stresses following the disclosure of abuse. Even for those clients who possess adequate financial resources to pay for counseling services, those services are not always immediately available.

Making direct crisis intervention services available immediately and at no cost to clients is critical to meeting our goal of initiating victim and family healing as soon as possible. Without the crisis intervention services program, many of our clients would not have received services or would have experienced a lengthy delay before the onset of services.

Case Management Services: The CAC Case Manager is a dedicated advocate for child victims and their non-offending family members and helps them wade through the often overwhelming and complicated legal and social service systems. The fact that users of the Center can count on the almost immediate availability of CAC staff to facilitate interviews at the Center and the assurance that clients will receive appropriate follow-up services is crucial to the continued support of the CAC by its partners on the Multidisciplinary Team and in the community.

Anecdotal information gathered through periodic surveys of CAC clients and Team members indicates a continuing high level of satisfaction with the services provided by the CAC and its staff.

3. Use the space below to provide any anecdotal information based on the experiences of agency staff or other sources within your jurisdiction that may highlight the crime(s) and victims served through this program. Please do not use names or any other information that would identify a specific victim.

Below are anecdotes provided by the CAC's Crisis Intervention Counselors which illustrate the services being provided to victims of child sexual abuse through the VOCA-funded program:

1. "This child is a 6-year-old African-American male who was referred to the CAC due to a report of being sexually abused by his 11-year-old male cousin. The child's mother walked in on the cousin in the act of molesting her son in a room in her own home. She reacted appropriately and took all the necessary steps in reporting the abuse. The child stated that this was the first time his cousin had done anything sexual to him.

"The child lives with his biological mother and father. His father's two children from a previous relationship visit every other weekend and his mother's daughter from a previous relationship visits every weekend.

"I met with the child's mother alone and she provided me with a lot of background on the situation. She came to the United States from Africa as a teenager. She was brought over by a local businessman, who she then married, and they had a daughter together. In Africa, she lived in poverty in a war-torn environment. Her mother died of AIDS before she left Africa. She stated she was sexually abused by her step-father and basically took care of her siblings. She has not been back to Africa or seen her siblings for many years. She also described her current situation as not very stable. Her fiance, the child victim's father, is an alcoholic and is irresponsible. He has not been faithful to her and does not contribute to the running of the household except for working sporadically. However, the child loves his father and his mother does not have any alternatives for supporting herself and her son. I gave her referrals for shelters and other resources, but she has remained in the current situation. She seems discouraged about her own life, but is very devoted to her son and appropriately prioritizes him. After my session with the child, he did not want to return for any further counseling. It was difficult to get in touch with the child's mother because her fiance always answers the phone. She missed several follow-up sessions with me.

"However, the mother's daughter from a previous relationship has decided to come to counseling to talk about the impact of her brother's abuse on her and the family. Hopefully, in the future, the mother will return to counseling and if the child indicates that he does want to talk about the abuse, she will bring him back."

2. "I am providing individual counseling services to a 13-year-old Hispanic girl and to her mother. The girl was sexually abused by her father over a 5-year period. In addition to the sexual abuse, this case brings family and cultural issues with it also.

"The girl has been reluctant to address the abuse or the vulnerabilities she carries which may challenge future relationships. Although I have honored her boundaries and focused more on

her struggles with friendships, I have continued to 'plant seeds' regarding safety and empowerment.

"The mother was quick to believe her daughter's allegations and responded appropriately and she expressed her desire to confront her husband regarding the abuse; she also stated that her first priority is to protect her daughter so she will not have contact with him. Sessions have worked on helping her accept these facts. The mother expressed concern about her daughter's decision-making skills and how much she should trust her to make good choices (not just due to the abuse but also related to online relationships she had developed and Skype pictures found on her phone. Overall family communication and parenting practices were also addressed. Her need for some social support was emphasized. It should be noted that individual sessions with the mother have included an interpreter as she is not fluent in English and I speak no Spanish."

3. "I am providing individual counseling services to a 4-year-old boy. The allegation involved inappropriate touching by his father; no disclosure was made during the CAC interview. His mother has shared a lot of information (including a DVD) about her son's inappropriate sexual behaviors and disrespect for sexual boundaries.

"The sessions with the boy have primarily consisted of non-directional play therapy, a modality that allows the child to choose with which toys he wants to play and the manner in which he wants to play with those toys. Themes in his play are observed and interpreted. At least though today's date, his play has been age-appropriate, relationship building and included themes of nurturance and family. There has not been any sexualized play or inappropriate crossing of boundaries.

"The mother's schedule has not allowed her to attend individual sessions so several telephone conversations have occurred with her. These conversations have emphasized the importance of her establishing and maintaining appropriate boundaries with her son, including those involving her son being naked and touching adult family members inappropriately. Overall parenting issues and her own self-care have also received attention."

The CAC surveys parents/caregivers of children referrred to the Children's Advocacy Center on a quarterly basis. The results are an important vehicle for assessing the level of consumer satisfaction with the services being provided by the CAC and for ensuring that we are responding to the needs of the children and families. The overwhelming number of responses reflected a high level of satisfaction by consumers. Many of the respondents highlight the caring, compassionate services provided by the Crisis Intervention Counselors and the Case Manager.

V. Goals and Objectives

This section provides an overview of your program's accomplishments during the current performance period, and also helps us learn about what helped or hindered your program during this time. (This section should provide guidance as to whether objectives or program strategies should be modified for the upcoming year.)

A universal goal was developed for your current grant program. Please indicate the goal that was chosen for your current performance period.

Goal: To provide direct services to (check one) for the p	surpose of alleviating trauma and suffering incurred from victimization.
All crime victims	Child Victims of Sexual Assault and Serious Physical Abuse and their Non-Offending
Family Members or Significant Others	
	(Sub-population of crime victims. This should match the crime(s) indicated in Section: IV)

If completing this section prior to the end of the program performance period please estimate.

(Objective) Service Provided	Number identified from prior performance period.	Number of clients that actually received this service.*	Objective met?* Yes or No	Number for upcoming performance period.
a. Crisis Counseling	180	190 (ets)	Yes	160
b. Follow Up Contact	500	750 (est.)	Yes	550
c. Therapy	0	0	0	0
d. Group Treatment	0	0	0	0
e. Crisis Hotline Counseling	0	0	0	0
f. Shelter/Safe House	0	0	0	0
g. Information and Referral (In person)	90	250 (est.)	Yes	130
h. Criminal Justice Support / Advocacy	0	0	0	0
i. Emergency Financial Assistance	0	0	0	0
j. Emergency Legal Advocacy	0	0	0	0
k. Personal Advocacy	275	350 (est.)	Yes	275
1. Telephone Contacts (Information and Referral)	125	250 (est.)	Yes	150
m. Other (specify):				
n. Other (specify):				

^{*}If you did not meet the objective(s) listed above, please detail each objective not met.

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In the Program Narrative for Agreement #211216, we identified service objectives for Case Management and for Information and Referral (Written). In accordance with the instructions of our former Grant Monitor, Case Management was reported as Personal Advocacy and Written Information and Referral was combined with Information and Referral (In Person) beginning with the reporting period ended June 30, 2012. We would also note that the Performance Period for Agreement #211216 was recently extended to June 30, 2013. The estimates of clients that actually received particular services above is based on a 16-month performance period (March 2012 - June 2013).

With the exception of Crisis Counseling, it appears we will meet or exceed the objectives outlined in the Program Narrative. Through December 31, 2012, a total of 226 new clients received VOCA-funded services (114 new child victims and 112 of their significant others). This compares to a total of 245 clients who received those services in the same 10-month period in the previous grant year. This decrease in the overall number of clients receiving services could at least partially account for the reduction in clients receiving Crisis Counseling during the first 10 months of the current grant period.

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1. What were the successes of your program during the current performance period? Include any anecdotal information that may highlight the crime(s) and victims served through this program. Do not use names or other information that would identify a specific victim.

The success of this program is evidenced by the number of individuals who received services. From March 1, 2012 through December 31, 2012, 114 new child victims and 112 of their significant others received VOCA-funded services. In addition, an average of 24 ongoing children and 108 ongoing significant others received services each quarter. Please see the preceding section for breakdowns of the specific services provided. The CAC Case Manager and the Crisis Intervention Counselors are integral and respected members of the Multidisciplinary Team and the crisis intervention services program allows the CAC to provide services to a number of individuals far beyond that which we could accommodate given our current staffing level.

As previously noted, the CAC surveys its clients on a quarterly basis. The survey is not funded by VOCA. As part of that survey, the CAC asks clients to assess the services provided to them by the CAC, including those provided by the Crisis Intervention Counselors. Respondents are asked whether they "feel that the Crisis Intervention Counselor was helpful." Of the 18 responses received during 2012, nine respondents answered that question "Yes, all of the time," two answered "A little," and seven did not answer. One parent also remarked that the Crisis Intervention Counselor assigned to his daughter's case "is a great therapist."

When asked whether they "feel that the CAC Case Manager was helpful," 13 respondents answered that question "Yes, all of the time," two answered "Yes, most of the time," and three did not answer. When asked for additional comments, one parent remarked: "I was very impressed with all staff at the center. Everyone we met was very helpful and kind. I felt everyone genuinely was very concerned and was there to help. We appreciate all you have done!"

We also believe that the crisis intervention services program assists us in making better decisions with respect to which children and families are in need of and receptive to long-term mental health services and we are doing a better job linking families with those services. Prior to the advent of the crisis intervention services program in 2002, almost every child interviewed at the CAC was referred to the Mental Health Center for an assessment. In many cases, weeks passed before the assessment could be completed. Children and their families then waited several more weeks until services could be initiated. This gap in services was acutely evident during the four-month period (November 2009-February 2010) when direct crisis intervention counseling services were not available through the Children's Advocacy Center. During that time, the CAC was restructuring the program and we ultimately moved from contracting for services with an agency (the Mental Health Center) to contracting with individual therapists.

The crisis intervention services program has allowed us to divert from an already overburdened system those children and families for whom long-term mental health services are not appropriate or necessary. With many families who have participated in this program, such linkage has not been necessary due to the stabilizing influence of timely crisis intervention services. With other families, however, timely linkage with long-term services has proven to be a significant factor in the families' ability to overcome the crisis related to the abuse of a child.

Revised 4/12 15₁₁₀

2. What barriers did you experience in implementing your program during the current performance period? How did you respond to them? Include any anecdotal information that may highlight the crime(s) and victims served through this program. Please do not use names or other information that would identify a specific victim or a particular person.

The single most significant barrier to the provision of crisis intervention counseling services continues to be the lack of engagement in those services on the part of some families. Whenever possible, the crisis intervention assessment is initiated at the Children's Advocacy Center in conjunction with the forensic interview by the investigative team and the information gathering (social history) process conducted by the CAC Case Manager. In this way, we hope to establish an immediate connection between the family and the assigned Crisis Intervention Counselor which we hope will lead to a greater level of engagement with ongoing services. The Crisis Intervention Counselors also utilize multiple written and telephone contacts in an attempt to increase client participation in services. In addition, our Crisis Intervention Counselors maintain non-traditional office hours in order to accommodate those clients whose schedules do not permit them to access services during normal working hours. We are hoping that the recent addition of a bilingual Therapist to our team of Crisis Intervention Counselors will increase the engagement of Spanish-speaking families in services.

After moving to a more office-based service provision model in 2010, we have been sensitive to transportation and other access barriers. Although clients are assigned to Crisis Intervention Counselors on a rotating basis, those clients who have indicated that they have transportation difficulties are referred to the Counselor closest to their home. Clients are also provided with information on the availability of public transportation and the CAC is able to provide bus tokens for any client lacking the financial resources for public transportation.

The CAC Case Manager and Crisis Intervention Counselors will continue to be alert to access barriers and will seek innovative solutions for helping families overcome those difficulties so that they and their children can fully engage in crisis counseling services.

3. Is there anything else you would like us to know based on your experiences with the current performance period? If so, please describe here.

No.

VI. Program Implementation

The problem statement describes the issue(s) to be addressed in the following year. This section will tell us how these ends are going to be accomplished by describing how the **VOCA grant as well as match funded activities** will be implemented in clear, logical detail and should explain how your program will achieve its goals and objectives and work to resolve the issues addressed.

1. Please describe the specific activities each staff member (federal and match funded) under this program will provide to crime victims and explain how those activities benefit your target population.

Crisis Intervention Counseling: Counselors assigned to this project will ensure that child victims referred to the Children's Advocacy Center and their non-offending family members or significant others receive immediate, short-term services and support to reduce the severity of the crisis. The Crisis Intervention Counselors will provide the victims and their families with identification of, referrals to, and linkage with all necessary and appropriate mental health services; short-term crisis intervention counseling designed to address the immediate effects of the crisis and to reduce the severity of the crisis both for the victims and their families; emotional support in the short-term as the victims and their families attempt to cope with the aftereffects of sexual or serious physical abuse; information about behaviors exhibited by victimized children and strategies for appropriate parental intervention and support; and support for parents and other family members in addressing their own needs in the aftermath of child abuse. In most cases, crisis intervention counseling services will be provided for a period of 6-8 weeks following the forensic interview, or until the client is linked with long-term mental health services, if deemed appropriate.

Crisis intervention counseling services benefit the target population by ensuring that children and their families can begin the healing and recovery process with minimal, if any, delay and without the need to endure a waiting list before the onset of services. Whenever possible, the crisis intervention assessment is initiated at the Children's Advocacy Center in conjunction with the forensic interview by the investigative team and the information gathering (social history) process conducted by the CAC Case Manager. In this way, we hope to establish an immediate connection between the family and the assigned Crisis Intervention Counselor which we hope will lead to a greater level of engagement with ongoing services.

Case Management Services: The CAC Case Manager will provide comprehensive case management services which include establishing social histories with victims and families; identifying areas of concern and areas of need for making referrals; making appropriate referrals for needed services; identifying community resources for victims and families; providing ongoing support; assessing progress in securing appropriate services and meeting recovery-related goals; assisting with consequent legal proceedings; facilitating follow up-interviews; and participating in pre- and post-interview case debriefings and Multidisciplinary Team Case Review meetings.

By working through and with local agency and service providers to facilitate investigations, making medical, treatment and other support services referrals, and assisting with consequent legal proceedings, the CAC Case Manager helps to support child victims of sexual and serious physical abuse and their families. The CAC Case Manager serves as a single point of contact for clients as they attempt to navigate the oftentimes confusing and complicated legal and social

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service systems and ensures that children and families receive the critical help they need as soon as possible.

2. Explain how the issues or barriers to the implementation of the program that you listed above in Section V, question 2, will be addressed during the new program period?

We will continue to be aware of and sensitive to transportation issues and other access barriers and will seek innovative and cost-effective solutions for helping families overcome those difficulties so that they and their children can fully engage in services. We are also hoping that the recent addition of a bilingual Therapist to our team of Crisis Intervention Counselors will increase the engagement of Spanish-speaking families in services.

3. What training needs have you identified for the staff funded under this program?

It is imperative that Crisis Intervention Counselors and the Children's Advocacy Center's Case Manager maintain an awareness and understanding of current and emerging local, State and national issues and resources related to child sexual and serious physical abuse, as well as victims' rights and services. Crisis intervention services provided by the Children's Advocacy Center must also meet the National Children's Alliance's accreditation standards for specialized trauma-focused mental health services, which include a requirement that individuals providing those services complete ongoing education in the field of child abuse consisting of a minimum of 8 contact hours per year.

4. How will you address those training needs? If unable to address those needs, please explain why.

Limited funding severely hinders our ability to address training needs. Nevertheless, the Children's Advocacy Center will continue to search for local, low-cost training opportunities to ensure that the Crisis Intervention Counselors and Case Manager receive training designed to enhance their ability to work with abused children and their non-offending family members. In order to maximize available resources, the Children's Advocacy Center partners with other agencies whenever possible to reduce training costs. One such avenue is free streaming education calls made available through the National Children's Alliance. Another no-cost training opportunity is the quarterly Victim Advocate Journal Club Call sponsored by the Midwest Regional Children's Advocacy Center. The Children's Advocacy Center also has access to low-cost training offered through the Children's Advocacy Centers of Illinois.

5. If VOCA funds were not available, has your organization developed a plan for the continuation of this program? Please explain.

The Children's Advocacy Center has no other funding available for these services and would likely discontinue the crisis intervention counseling program if VOCA funding were not available. In that event, child victims and their non-offending family members would no longer have access to immediate, no-cost crisis intervention counseling services and would, most likely, be placed on a waiting list for services at Community Elements (formerly the Mental Health Center) or referred for counseling services at our local rape crisis services center.

In addition, without VOCA funding, the CAC would face a deficit in available funding for the Case Manager's salary and we would have to consider reducing the Case Manager's hours by approximately 20%. The use of VOCA funds allows us to maintain services at the current level.

VII. Implementation Schedule

The implementation schedule should be used as a planning tool for the program and should reflect a realistic projection of how the program will proceed. The Implementation Schedule should indicate: the VOCA funded activities and services that will be provided; the month the activity/service begins; the month the activity/service is completed; the personnel responsible for each activity/service; and the frequency with which the activity/service will be provided. Please use the following implementation schedule form using examples as a guide.

Activity	Month Begun	Month Completed	Personnel Responsible	Frequency	
Example: Distribute Brochures	Month 1	Ongoing	Volunteers	As needed	
Example: Hire Medical Advocate	Month 1	Month 2	Coordinator	N/A	
Example: Provide Support Groups	Month 2	Month 12	Advocate	Weekly	
Provide Crisis Counseling Services	Month 1	Ongoing	Crisis Intervention Counselors	As Needed	
Provide Follow-Up Contact	Month 1	Ongoing	CAC Case Manager	As Needed	
Provide Information and Referral (In Person)	Month 1	Ongoing	CAC Case Manager	As Needed	
Provide Personal Advocacy	Month 1	Ongoing	CAC Case Manager	As Needed	
Provide Telephone Information and Referral Services	Month 1	Ongoing	CAC Case Manager	As Needed	
				<u> </u>	

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EXHIBIT B: BUDGET IDENTIFICATION OF SOURCES OF FUNDING

Implementing Agency: Champaign County on behalf of the Champaign County CAC
Agreement #: 212216

	SOURCE		<u>AMOUNT</u>
Federal Amount:	Grant Fund: Victim of Crime Act Funds FFY:	12	\$50,338
		Subtotal:	\$50,338
Match:	Champaign County on behalf of the Champaign	n County CAC	\$12,585
		Subtotal:	\$12,585
Over Match:			\$0
		Subtotal:	\$0
	GRAND TOTAL		\$62,923

Budget & Budget Narrative	Champaign Cou	ınty	on behalf of	the Champaign (County CAC	Agre	eement#	212216									
PERSONNEL SERVICES Job Title		Annual Salary		# Months On Program	% Time On Program		Federal Amount	<u>C</u>	Match Contribution								Total Cost
CAC Case Manager		\$	36,202.00	<u>12</u>	57%	\$	8,000.00	\$	12,585.00	\$	20,585.00						
		\$	-			\$	-	\$	1	\$	-						
		\$	-			\$	4	\$	=	\$	-						
		\$	-			\$	-	\$	•	\$	-						
		\$	-			\$	-	\$	_	\$							
9		\$	=			\$	_	\$	_	\$							
		\$	_			\$	<u>-</u>	\$	_	\$	_						
	Total FTE for use on Fringe Benefit Worksheet					\$	_	\$	-	\$	_						
Total S						\$	8,000.00	\$	12,585.00	\$	20,585.00						
	Fringe Benefits (Use figure from Fringe Benefit Worksheet)						-	\$	-	\$	<u>-</u>						
				TOTAL PERSON	NNEL SERVICES	\$	8,000.00	\$	12,585.00	\$	20,585.00						

Budget Narrative for Personnel. Please give a brief description for each line of the Personnel Services Budget.

(See Attached Budget Instructions)

NOTE: The dollar amounts above have been rounded to the nearest whole dollar. In addition, the actual % of Time On Program is 56.86%. The underlying formula in the budget document rounded that percentage to 57%.

The CAC Case Manager's salary for the period July 1, 2013 to June 30, 2014 is calculated as follows:

110 days (July 1, 2013-November 30, 2013) X 7.5 hours/day = 825.00 X \$18.28/hour = \$15,081.00

151 days (December 1, 2013-June 30, 2014) X 7.5 hours/day = 1,132.50 hours X \$18.65/hour (2.0% increase) = \$21,121.13

Total salary = \$36,202.13 (rounded to nearest whole dollar above).

The portion of the CAC Case Manager's salary to be contributed as Match is from sources other than federal funding (i.e., the Illinois Attorney General and the Illinois Department of Children & Family Services). We are expecting a decrease of \$1,000.00 in our federal grant from the National Children's Alliance in Year 2013. Because that grant is used to pay a portion of the Case Manager's salary, we are requesting an increase in VOCA-funding from \$7,000.00 to \$8,000.00.

The CAC Case Manager provides comprehensive case management services to children referred to the Center and their non-offending family members, including making referrals for needed services, providing ongoing support and information, and assessing progress in securing appropriate services and meeting recovery-related goals.

Budget & Budget Narrative	Champaign Cou	ınty on l	behalf of	the Champaign	County CAC	Agre	ement#	212216			
EQUIPMENT		Cost	er Unit	# of Units	Pro-rated Share		Federal	Contri	<u>tch</u> bution	Tot	al Cost
<u>Item</u>		Cost	er Ont	# OI CILLS	Silate		Amount	Conu	<u>oudon</u>	100	ai Cost
Not Applicable		\$				\$	-	\$	-	\$	-
		\$	-			\$	-	\$	-	\$	-
	. 4	\$	-			\$	-	\$	-	\$	_
	·	\$. (-,			\$		\$	-	\$	-
		\$	-			\$		\$	-	\$	-
		\$	•			\$	-	\$	-	\$	-
		\$	-			\$	-	\$	-	\$	-
		\$.				\$	-	\$	-	\$	-
* For Equipment Budgets over \$5000	, the Authority must be n	otified p	rior to the	e disposal of any	y equipment.						
				TOTAL EC	DUIPMENT COST	\$		s	_	\$	_

Budget Narrative for Equipment. Please give a brief description for each line of the Equipment Budget.

(See Attached Budget Instructions)

N/A 11 8

Budget & Budget Narrative	Champaign County on behalf o	Champaign County on behalf of the Champaign County CAC				ment#	212216			
COMMODITIES				7	F	ederal	M	atch		
<u>Item</u>	· ·	Cost / M	<u>fonth</u>	# of Months	<u>A</u>	mount	Contr	ibution	<u>Tot</u>	al Cost
Not Applicable		\$	-		\$		\$	-	\$	_
		\$	-		\$	-	\$	_	\$	
		\$	-		\$	-	\$		\$	_
		\$	-		\$	-	\$	-	\$	-
		\$	-		\$	-	\$	-	\$	-
		\$	_		\$	-	\$	-	\$	-
		\$	**		\$	_	\$	-	\$	_
		TOTAL	L COM	MODITIES COST	\$	-	\$	-	\$	-

Budget Narrative for Commodities. Please give a brief description for each line of the Commodities Budget.

(See Attached Budget Instructions)

N/A

Budget & Budget Narrative	Champaign County on behalf of	f the Champaign	County CAC	Agreement#	Agreement# 212216			
TRAVEL Not Applicable	<u>Cost/Mile</u>	# of Miles/mo	# of Months	Federal <u>Amount</u>	Match Contribution	Total Cost		
Program Staff Mileage*	\$ -			\$ -	\$ -	\$ -		
	\$ -			\$ -	\$ -	\$ -		
	\$ -			\$ -	\$ -	\$ -		
Conference Travel**	Cost/ person	# of people	# of days	\$ -	\$ -	\$ -		
Airfare	\$ -		140	\$ -	\$ -	\$ -		
PerDiem	\$ -			\$ -	\$ -	\$ -		
Lodging	\$ -			\$ -	\$ -	\$ -		
Other (Specify)	\$ -			\$ -	\$ -	\$ -		
* State rate is calculated at \$.55.5/mile. If agency	rate is lower use that lower rate.	, , , , , , , , , , , , , , , , , , , 						
** Out of State Travel requires prior Authority a	г \$ -	s -	\$ -					

Budget Narrative for Travel. Please give a brief description for each line of the Travel Budget.

(See Attached Budget Instructions)

N/A 120

Budget & Budget Narrative	Champaign Cou	inty on behalf of	the Champaign	County CAC	Agre	ement#	212216			
CONTRACTUAL	Cost/month	Dollar/hour	# of hours per month	Pro-rated Share		Federal Amount		Match ntribution	1	Total Cost
Cell Service	\$ -				\$		\$	-	\$	-
Telephone Service	\$ -				\$	_	\$	-	\$	_
	\$ -				\$	_	\$	-	\$	-
Conference Registration Fees	\$ -				\$	-	\$	-	\$	-
Other: (Specify)	\$ -				\$	-	\$		\$	-
Other (Specify)	\$ -				\$	v _	\$	-	\$	-
Use Boxes Below for Contractual Personnel					\$	ı ı -	\$	_	\$	-
Crisis Intervention Counselors (Direct Services)		\$ 119.88	<u>27.015</u>		\$	38,863.00	\$	_	\$	38,863.00
Crisis Intervention Counselors (Attendance at Multidisciplinary Team Case Review Meetings and Other Staffings)		\$ 77.24	<u>3.75</u>		\$	3,475.00	\$	_	\$	3,475.00
		\$ -			\$	_	\$		\$	
			TOTAL CONT	RACTUAL COST	\$	42,338.00	\$	-	\$	42,338.00

Budget Narrative for Contractual. Please give a brief description for each line of the Contractual Budget.

(See Attached Budget Instructions)

NOTE: The dollar amounts above have been rounded to whole dollars and are in accordance with billing rates and designated funding.

The Champaign County Children's Advocacy Center (CAC) will contract with three licensed therapists to provide crisis intervention counseling services to children referred to the CAC and their non-offending family members or significant others. These services will be made available pursuant to a Contract with each therapist and will be billed at the following rates:

Direct Services will be billed at the rate of \$119.88 per hour.

Attendance at Multidisciplinary Team Case Review Meetings and Other Staffings will be billed at the rate of \$77.24 per hour.

The above rates were determined using rates for similar services published in the State of Illinois Community Mental Health Services Service Definition and Reimbursement Guide, dated 07/01/2011.

We estimate that the Crisis Intervention Counselors will spend a combined 324.18 hours annually providing direct crisis intervention counseling services and 45 hours annually attending Multidisciplinary Team Case Review Meetings and Other Staffings.

The Crisis Intervention Counselors provide immediate, short-term crisis intervention counseling and support to child victims and their non-offending family members and significant others in order to reduce the severity of the crisis following a report of child sexual assault or serious physical abuse.

Agreement#

All procurements must be competitive

FRINGE BENEFIT WORKSHEET: Agreement

212216

Use this sheet to calculate the fringe benefits to be paid for project personnel. For each element of the benefit package, indicate the rate as a percentage of salary or the dollar amount of the flat rate paid per employee. Use the TOTAL FRINGE BENEFITS amount from this worksheet as the fringe benefit dollar amount on the BUDGET under DEBSONNEL SERVICES (2012 C. 12 and 112)

RATED FRINGE BENEFITS	Rate as % of Salary
FICA	7.650%
UNEMPLOYMENT	
RETIREMENT/PENSION	
WORKER'S COMP	
DENTAL/VISION	
HOSPITALIZATION	
Other (Specify)	
Total % Fringe Rate	7.650%
Total Salary Paid By Grant (Federal and Match - Please use figure from cell I-12 in the Budget Detail)	
TOTAL RATED FRINGE BENEFITS	\$0
FLAT RATE FRINGE BENEFITS	\$ per FTE
HEALTH/MEDICAL INSURANCE	
OTHER (SPECIFY)	
Total Flat Rate Fringe	\$0.00
Number of grant-funded FTE (full-time equivelent) positions receiving Flat Rate Fringe Benefets. (Please use figure from cell F-11 of Budget Detail)*	
FLAT RATE FRINGE BENEFITS	\$0
TOTAL FRINGE BENEFITS: (Total rated + Total flat rate benefits)	\$0

^{*}PLEASE REFER TO YOUR RESPONSE IN EXHIBIT A, SECTION II, QUESTION #1.

FY2014 COUNTY BOARD LEGISLATIVE BUDGET HEARING SCHEDULE

Monday, August 26, 2013

BOARD/COMMISSION and COUNTY BOARD SPECIAL REVENUE FUNDS

Begin at 6:00pm (All	times listed are approximate)
6:00pm	County Board of Health
6:15pm	RPC, Head Start, WIA & USDA Loan Funds
6:45pm	Mental Health Board & DD Funds & ACCESS Initiative
7:15pm	Children's Advocacy Center
7:30pm	GIS Consortium
7:45pm	Animal Control Fund
8:15pm	Highway Funds

Tuesday, August 27, 2013

GENERAL CORPORATE & RELATED DEPARTMENT FUNDS

Begin at 6:00pm	Department	# of Budgets to Present
	Auditor	1
	Board of Review	I
	County Clerk	4
	Recorder	2
	Supervisor of Assessments	1
	Treasurer	4
	Planning & Zoning	1
	VAC	1
Begin at 7:00pm	Circuit Clerk	7
	Circuit Court	3
	Public Defender	1
	Sheriff	7
	State's Attorney	4
	Probation/Court Services	4
	Coroner	1
	EMA	1
	IT	1
	Physical Plant	1
, , , , , , , , , , , , , , , , , , ,	Administrative Services	5

Wednesday, August 28, 2013

COUNTY BOARD SPECIAL REVENUE & PROPRIETARY FUNDS

Begin at 6:00pm:

Nursing Home Fund

Public Safety Sales Tax Fund

GIS Fund

Capital Asset Replacement Fund

Debt Management & Capital Projects Funds

IMRF & Social Security Funds

Health Insurance, Tort Immunity & Self Funded Insurance Funds

CHAMPAIGN COUNTY PHYSICAL PLANT

1776 EAST WASHINGTON STREET, URBANA, ILLINOIS 61802-4581

FACILITIES & GROUNDS MANAGEMENT SERVICES

Alan Reinhart, Facilities Director



MEMORANDUM

DATE:

August 7, 2013

TO:

Christopher Alix, Chair - and Members of the County Finance

Committee

FROM:

Stan James, Chair – and Members of the County Facilities Committee

RE:

Funding of a Capital Improvement Plan for the Replacement of Primary

Building Equipment

In initiating a Capital Improvement Plan to replace primary equipment systems in County buildings, the Facilities Committee unanimously requested the following action at their meeting on August 6, 2013:

The County Facilities Committee recommends to the Finance Committee that direction be given in the preparation of the FY2014 budget, that \$436,200 be budgeted in the General Corporate Funds as a transfer to the Capital Asset Replacement Fund Facilities Budget to provide funding for a County Capital Improvement Plan, specifically for the replacement of primary equipment at the Juvenile Detention Center and Brookens Administrative Center in FY2014.



CHAMPAIGN COUNTY ADMINISTRATIVE SERVICES

1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Deb Busey, County Administrator

MEMORANDUM

TO:

Stan James, Chair - and Members of the County Facilities Committee

FROM:

Deb Busey, County Administrator

DATE:

August 1, 2013

RE:

Funding for County Facilities Primary Building Equipment

ISSUE:

Champaign County does not have a formal Capital Improvement Plan. The County Facilities Committee is initiating the development of such a plan, and has received from the Facilities Director planning documentation for the timely replacement of primary equipment systems for county facilities, with the exception of the Nursing Home. This Memorandum is to provide the County Facilities Committee with an overview of the budgetary impact of development of a plan to fund these facility primary building equipment systems.

ANALYSIS:

Attached to this Memorandum is the Capital Improvement Projects - Primary Building Systems listing as identified by the Facilities Director, with additional analysis for funding. The projects identified in the attached plan currently have two potential funding sources:

- There is a balance of approximately \$517,000 in the Courts Construction Fund, available for capital projects related to the Courthouse. The allocation of reserve for capital improvement projects for the Courthouse could be appropriated from this remaining balance until it is exhausted. Currently, the identified need for roof replacements for the Courthouse requires an annual reserve of \$54,723. The annual reserve required for primary building systems for the Courthouse is \$49,404. The combined total annual reserve of \$104,127 for the Courthouse roofs and primary building systems can be funded by the Courts Construction Fund through FY2018 (if those funds are not used for any other projects), at which time the General Corporate Fund would then be required to assume that additional annual funding.
- All remaining primary building systems documented in the attached plan are funded by the General Corporate Fund.

From a budgeting perspective for these systems, please be advised as follows:

1. If annual reserve funding were appropriated each year for these primary building equipment items, based on current cost estimates and life cycle of the equipment, the annual reserve requirement would be \$318,185. (Blue column on Attachment A)

(217) 384-3776

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(217) 384-3896 FAX

- 2. Because we have never appropriated reserve funds for these items, to initiate an annual reserve fund to provide timely replacement of all items on the schedule would require funding of \$2,265,791 in FY2014. (Green column on Attachment A)
- 3. If we fund only those items that are overdue for replacement, or scheduled to be replaced in FY2014 with no additional annual reserve for any items to be replaced in FY2015 and beyond the required funding is \$1,590,300 for FY2014. (Yellow column on Attachment A)
 - a. If all items as identified in #3 were funded and replaced in FY2014, the annual reserve requirement to get the rest of the items on an annual reserve funding schedule would be \$959,484 in FY2015. This would decrease incrementally each year, until we get down to the point where we are amortizing and reserving funding based on the life expectancy of each piece of equipment documented. (Purple column on Attachment A)

SUMMARY:

As documented here, delayed action in funding the capital needs of the County has resulted in a substantial budgeting liability. The difference between the annual cost of amortization when appropriately budgeted and reserved, and the County's current liability is significant:

Fully Amortized Plan based on Current Equipment -	\$ 318,185/year
Catch up to fully amortize Plan beginning in FY2014 -	\$2,265,791
Fund only Items scheduled to be replaced no later than FY2014 -	\$1,590,300
Continuing Annual Reserve in FY2015 if items up to FY2014 are	
Replaced in FY2014	\$ 959,484

RECOMMENDATION:

At the earlier request of the County Facilities Committee, the Finance Committee has directed the inclusion of an additional \$313,908 in the FY2014 budget to initiate and implement appropriate funding for roof replacements of the County's facilities.

At this point in the FY2014 budget preparation process, I do not believe it is realistic to assume that the General Corporate Fund could appropriate the additional \$2.3 million in funds required to bring the capital amortization schedule for primary building equipment up to date, or the \$1.6 million required to appropriate only for those items which should have been replaced by FY2014. The equipment replacements considered highest priority for FY2014 and considered to be at critical risk of failure if not addressed in the next year are the following:

TOTAL	\$436,200
#5 – Juvenile Detention Center Water Heater #1	\$ 46,700
]#4 – Juvenile Detention Center Building Automation System	\$ 15,300
#3 – Satellite Jail Water Heater	\$ 56,000
#2 – Brookens Pod 200 Chiller	\$159,100
#1 – Brookens Pod 300 Chiller	\$159,100

I recommend the appropriation of \$436,200 from the General Corporate Fund to the Capital Asset Replacement Facilities Fund in FY2014 to cover the replacement of these at-risk pieces of equipment.

When added to the appropriation for roof replacements already designated by the County Facilities Committee for FY2014, this will create new expenditure for capital infrastructure needs in the General Corporate Fund FY2014 Budget in the amount of \$750,108. As demonstrated with the information presented here regarding the primary building equipment, and the information previously presented regarding the replacement of roofs on county facilities, this appropriation provides a starting point upon which additional funding will need to be added in future fiscal years - until the County has adopted a comprehensive and fully funded Capital Improvement Plan for its facilities.

REQUESTED ACTION:

The County Facilities Committee recommends to the Finance Committee that direction be given in the preparation of the FY2014 budget, that \$436,200 be budgeted in the General Corporate Fund as a Transfer to the Capital Asset Replacement Fund Facilities Budget to provide funding for a County Capital Improvement Plan, specifically for the replacement of primary equipment at the Juvenile Detention Center and Brookens Administrative Center in FY2014.

Attachment

Capital Improvement Projects - Primary Building Equipment Funding Overview

Buidling	Description	Life Expectancy	Estimated Replacement Year	Estimated Replacement Value	Required Annual Reserve for Timely Amortization Schedule	FY2014 Annual Reserve to Replace	FY2014 Reserve for Current Only	FY2015 Annual Reserve to Replace
Courthouse			Note that					
101 E. Main	L3S-125/125G Boilers 1	35	2037	\$126,600	\$3,617	\$5,275		\$5,504
TOTE. Main	L3S-125/125G Boilers 1	35	2037	\$126,600				\$5,504 \$5,504
	RTAC-200 Chiller 1	25	2027	\$314,000				\$24,154
	RTAC-200 Chiller 1	25	2027	\$314,000				\$24,154 \$24,154
		15	2027					
	BTR 400 - 100 Gal. Water Heater			\$56,000				\$18,667
	Building Automation System (U)	10	2019	\$72,500				\$14,500
	DGFB-4958262 Emerg. Generator	30	2032	\$182,000	\$6,067	\$9,579		\$10,111
Sheriff's Office								
204 E. Main	Pnuewmatic HVAC control (D)	25	2005	164,450.00	\$6,578	164,450.00	164,450.00	\$6,578
	CB 200-60 (#1) - Boiler	35	2015	\$126,600	\$3,617	\$63,300		\$126,600
	CB 200-60 (#2)-Boiler	35	2015	\$126,600	\$3,617	\$63,300		\$126,600
	Cooling Tower	30	2010	\$0	\$0		\$0	
	HWDC-75 water cooled chiller	25	2009	\$188,500	\$7,540	\$188,500	\$188,500	\$7,540
	Vanaxial Return Fans	25	2005	\$50,250	\$2,010	\$50,250	\$50,250	\$2,010
	Rotary Chiller & Condenser	25	2035	\$314,000				\$16,526
377	750DYC 75 KW Emerg. Generator	30	2010	\$121,000	\$4,033	\$121,000	\$121,000	\$4,033
	Detention Door Control System	20	2020	\$267,300	\$13,365	\$38,186		\$44,550
E.O.C.								
1905 E. Main	CHN0401 Boiler - Water Heater	20	2022	\$45,000	\$2,250	\$5,000		\$5,625
1905 L. Wall	CHN0501 Boiler - Water Heater	20	2022	\$45,000				\$5,625
	VH114A Environmental Heat & A/C	20	2022	\$45,000				\$5,625
	A/C Condensor	20	2022	\$32,500				\$4,063
	MM*60E Enviromental Heat & A/C	20	2022	\$45,000				\$5,625
	AKS016-5 Condensor (Lower Level)	20	2025	\$28,800				\$2,618
	D200P4 Emerg. Generator	30	2032	\$291,200	The second secon			\$16,178
	Pneumatic HVAC Climate Control	25	1990	\$110,900	\$4,436		\$110,900	\$4,436
	Building Automation Control System (U)	10	2012	\$9,600			\$9,600	\$960
W	D200P4 200 KW Emerg. Generator	30	2032	\$203,800			\$3,000	\$11,322
	D2001 4 200 KW Linery. Generator	30	2032	Ψ203,000	\$0,730	\$10,720		\$11,022
J.D.C.								
400 S. Art Bartell D	Drive RTU#1 RK-04-2-322	20	2019	\$45,000				\$9,000
	RTU#2 RK-25-2-EO-337	20	2019	\$45,000	\$2,250			\$9,000
	RTU#3 RK-15-2-EO-327	20	2019	\$45,000	\$2,250	\$7,500		\$9,000
	RTU#4 RK-16-2-FO-337	20	2019	\$45,000				\$9,000
	RTU#5 RK-16-2-FO-337	20	2019	\$45,000	\$2,250	\$7,500		\$9,000

Capital Improvement Projects - Primary Building Equipment Funding Overview

Buidling	Description	Life Expectancy	Estimated Replacement Year	Estimated Replacement Value	Required Annual Reserve for Timely Amortization Schedule	FY2014 Annual Reserve to Replace	FY2014 Reserve for Current Only	FY2015 Annual Reserve to Replace
	RTU#6 RK-96-2-RO-332	20	2019	\$45,000	\$2,250	\$7,500		\$9,000
	RTU#7 RK-10-2-EO-222	20	2019	\$45,000		\$7,500		\$9,000
	Building Automation System (U)	10	2009	\$15,300	\$1,530	\$2,550	\$15,300	\$3,060
	Powervent Water Heater #1	15	2014	\$46,700	\$3,113		\$46,700	\$3,113
	Powervent Water Heater #2	15	2014	\$46,700	\$3,113		\$46,700	\$3,113
	SR4B 250 KW Emerg. Generator	30	2029	\$291,200		\$18,200		\$19,413
Adult Dent. Facility		-						
502 Lierman Av.	Pnuewmatic HVAC control	25	2021	\$136,000	\$5,440	\$17,000		\$19,429
	Series 4F Firebox Boiler (N)	35	2031	\$126,600		\$7,033		\$7,447
W	Series 4F Firebox Boiler (S)	35	2031	\$126,600		\$7,033		\$7,447
·	M# 38AH-074-6 ACCU-1	25	2021	\$177,900			-	\$25,414
	M# 38AH-074-6 ACCU-2	25	2021	\$177,900				\$25,414
	M# 38AH-074-6 ACCU-3	25	2021	\$177,900				\$25,414
	M# 38AH-064 6 ACCU-4	25	2021	\$177,900				\$25,414
A = 2	M#30000P600A-TP Water Heater (S)	15	2011	\$56,000	\$3,733	\$56,000	\$56,000	\$3,733
	M# GW 1300-400 Water Heater (N)	15	2022	\$38,900	\$2,593			\$4,863
	M# GW 1300-400 Water Heater (N)	15	2022	\$38,900	\$2,593	\$4,322		\$4,863
	Detention Door Control System	20	2016	\$124,600		\$41,533		\$62,300
	Onana - 350 KW Emerg. Generator	30	2026	\$327,600	\$10,920	\$25,200		\$27,300
Brookens Admin.								
1776 E. Washington	Pnuewmatic HVAC control	25	2012	\$125,600	\$5,024	\$125,600	\$125,600	\$5,024
	Hot Water Heater/Boiler	20	2023	\$65,000	\$3,250			\$7,222
Pod 100				\$0				
Pod 200	M# 30GB090-Chiller	25	2012	\$159,100	\$6,364	\$159,100	\$159,100	\$6,364
	BG-588-WF-PF-LO-IRI Boiler	35	2022	\$101,300	\$2,894	\$11,256		\$12,663
	Roof Top AHU	20	2007	\$54,100	\$2,705	\$54,100	\$54,100	\$2,705
111000	Roof Top AHU	20	2007	\$54,100	\$2,705	\$54,100	\$54,100	\$2,705
Pod 300	M# 30GB100-Chiller	25	2012	\$159,100	\$6,364	\$159,100	\$159,100	\$6,364
	BG-588-WF-PF-LO-IRI Boiler	35	2022	\$101,300		\$11,256		\$12,663
Y-	Air Handling Unit	20	1990	\$43,300	\$2,165	\$43,300	\$43,300	\$2,165
	Air Handling Unit	20	1990	\$43,300	\$2,165		\$43,300	\$2,165
Pod 400	Roof Top AHU Heater/AC (N)	20	2022	\$63,200				\$7,900
	Roof Top AHU Heater/AC (N)	20	2022	\$63,200	\$3,160	\$7,022		\$7,900
ILEAS								TIES L. G
1701 E. Main	BG-1488-SF-PF-MO-CSD1-UL Boiler	35	2043	\$50,600				\$1,745
	CFC-750 Condensing Boiler-1	20	2028	\$81,200	\$4,060	\$5,413		\$5,800

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Description	Life Expectancy	Estimated Replacement Year	Replacement Value	Timely Amortization Schedule	FY2014 Annual Reserve to Replace	FY2014 Reserve for Current Only	FY2015 Annual Reserve to Replace
CFC-750 Condensing Boiler-2	20	2028	\$81,200	\$4,060	\$5,413	III E	\$5,800
CFC-750 Condensing Boiler-3	20	2028	\$81,200	\$4,060	\$5,413		\$5,800
FC-750 Condensing Boiler-4	20	2028	\$81,200	\$4,060	\$5,413		\$5,800
CAV0227PA46VAC - Chiller	25	2033	\$260,675	\$10,427	\$13,034		\$13,720
Pneumatic HVAC Climate Control	25	1996	\$142,300	\$5,692	\$142,300	\$142,300	\$5,692
175 DGFB Emerg. Generator	30	2029	\$182,000	\$6,067	\$11,375		\$12,133
8TC*D RTU-1	20	2030	\$32,500	\$1,625	\$1,912		\$2,031
8TC*D RTU-1	20	2030	\$32,500				\$2,031
RM-008 RTU Energy Recovery Heater	20	2025	\$23,400	\$1,170	\$1,950		\$2,127
RT20C1B RTU	20	2025	\$23,400	\$1,170	\$1,950		\$2,127
			\$7,660,475	\$318,185	\$2,265,791	\$1,590,300	\$959,484
1818	FC-750 Condensing Boiler-3 FC-750 Condensing Boiler-4 CAV0227PA46VAC - Chiller neumatic HVAC Climate Control 75 DGFB Emerg. Generator BTC*D RTU-1 BTC*D RTU-1 M-008 RTU Energy Recovery Heater	### FC-750 Condensing Boiler-3 ### FC-750 Condensing Boiler-4 ### CAV0227PA46VAC - Chiller ### CAV0227P	### FC-750 Condensing Boiler-3 ### FC-750 Condensing Boiler-4 ### 20 ###	FC-750 Condensing Boiler-3 FC-750 Condensing Boiler-4 20 2028 \$81,200 CAV0227PA46VAC - Chiller 25 2033 \$260,675 neumatic HVAC Climate Control 25 1996 \$142,300 75 DGFB Emerg. Generator 30 2029 \$182,000 8TC*D RTU-1 20 2030 \$32,500 8TC*D RTU-1 20 2030 \$32,500 M-008 RTU Energy Recovery Heater 20 2025 \$23,400 T20C1B RTU 20 2025 \$23,400	FC-750 Condensing Boiler-3 20 2028 \$81,200 \$4,060 FC-750 Condensing Boiler-4 20 2028 \$81,200 \$4,060 CAV0227PA46VAC - Chiller 25 2033 \$260,675 \$10,427 neumatic HVAC Climate Control 25 1996 \$142,300 \$5,692 75 DGFB Emerg. Generator 30 2029 \$182,000 \$6,067 8TC*D RTU-1 20 2030 \$32,500 \$1,625 8TC*D RTU-1 20 2030 \$32,500 \$1,625 M-008 RTU Energy Recovery Heater 20 2025 \$23,400 \$1,170 T20C1B RTU 20 2025 \$23,400 \$1,170	FC-750 Condensing Boiler-3 20 2028 \$81,200 \$4,060 \$5,413 FC-750 Condensing Boiler-4 20 2028 \$81,200 \$4,060 \$5,413 CAV0227PA46VAC - Chiller 25 2033 \$260,675 \$10,427 \$13,034 neumatic HVAC Climate Control 25 1996 \$142,300 \$5,692 \$142,300 75 DGFB Emerg. Generator 30 2029 \$182,000 \$6,067 \$11,375 37C*D RTU-1 20 2030 \$32,500 \$1,625 \$1,912 37C*D RTU-1 20 2030 \$32,500 \$1,625 \$1,912 M-008 RTU Energy Recovery Heater 20 2025 \$23,400 \$1,170 \$1,950 T20C1B RTU 20 2025 \$23,400 \$1,170 \$1,950	FC-750 Condensing Boiler-3 20 2028 \$81,200 \$4,060 \$5,413 FC-750 Condensing Boiler-4 20 2028 \$81,200 \$4,060 \$5,413 CAV0227PA46VAC - Chiller 25 2033 \$260,675 \$10,427 \$13,034 neumatic HVAC Climate Control 25 1996 \$142,300 \$5,692 \$142,300 \$142,300 \$75 DGFB Emerg. Generator 30 2029 \$182,000 \$6,067 \$11,375 8TC*D RTU-1 20 2030 \$32,500 \$1,625 \$1,912 8TC*D RTU-1 20 2030 \$32,500 \$1,625 \$1,912 M-008 RTU Energy Recovery Heater 20 2025 \$23,400 \$1,170 \$1,950 T20C1B RTU 20 2025 \$23,400 \$1,170 \$1,950

NAME:	pe ine					- A Company of the Co
ADDRESS:	1373 CR 2500 N		Thom	asboro	IL	61878
110001	Sireet	The second state of the se	City		State	Zip Code
EMAIL: _	-		_ PHONE:	217-643-7904		
L=	Check Box to Have Emai	il Address Redacted or	n Public Document			
NAME OF A	APPOINTMENT BOD	Y OR BOARD:	Beaver Lake	Drainage Distri	ct	
BEGINNING	G DATE OF TERM:	9-1-2013	EN	NDING DATE:		016
background a following qu	and philosophies will	assist the County legibly printing	Board in esta	blishing your qu se. IN ORDEI	alification R TO H	ear understanding of you ons. Please complete the BE CONSIDERED FOR HIS APPLICATION.
-	rience and background or erving as commissione	•		-	is appoin	tment?
			44,000			Manager of the Control of the Contro
2. What is you	ur knowledge of the app	ointed body's ope	rations, propert	y holdings, staff,	taxes, ar	nd fees?
A A STATE OF THE S						
to serve on th	ink of any relationship on appointed body for ovide information.)	or other reason that which you are appropriety Yes No	olying? (This	question is not n	aflict of ineant to	interest if you are selected disqualify you; it is only
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			Signature	Ju Tal		
			Signature 6-26-13			
			Date			

NAME: Valerie Rogers			
ADDRESS: 1216 CR 3300N	Rantoul	<u>IL</u>	Ciscle Zip Code
EMAIL: Check Box to Have Email Address Redacted of	PHONE:(2)	7) 897-634	•
NAME OF APPOINTMENT BODY OR BOARD: BEGINNING DATE OF TERM: $9-1-13$	Blackford S	lough Draina Date: 8.	/1
The Champaign County Board appreciates your integrated and philosophies will assist the County following questions by typing or legibly printing APPOINTMENT, OR REAPPOINTMENT, CANDID	erest in serving your or Board in establishing your response.	community. A cle g your qualificatio N ORDER TO E	ear understanding of your ns. Please complete the BE CONSIDERED FOR
I. What experience and background do you have which I have served as a commission	_		
Six years			
2. What is your knowledge of the appointed body's ope			
I farm alongside this drained importance of proper draining	e. I have, a	s a commis	ssioner, levied
taxes on the district.			
3. Can you think of any relationship or other reason the to serve on the appointed body for which you are appointed to provide information.) Yes No		on is not meant to	
	Yalerie & Signature	logus)	
	Signature 6-14-13	<u> </u>	
	Date		

NAME: Librid C- Raybony
ADDRESS: 2451 County Rost 700 E Dewey +1 618 Street Street
EMAIL: PHONE: 2/7-536-4598 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: (6016) Fisher Dist
BEGINNING DATE OF TERM: Sept 1, 2013 ENDING DATE: Atu 31, 2016
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
- Francisco With installations, owner, operitus & Proplemse Ususly incountered in District
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
Hove been Commissioner for 40 years
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No X If yes, please explain:
Signature 21, 2013
Date

PLEASE TYPE OR PRINT IN BLACK INK

NAME:	***************************************	1A1	MES T	· B	OLIAN	1 <u>0</u>							
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EMAIL :	:	Street	Box to Hav	e Email A	Address R	edacted o		City HONE: Document		564	State - 🚜	Zip Co	de
NAME (OF AI	- PPOIN	TMENT	BODY	OR BC	ARD:		ANKA	LEE_	DRAINI	165	1)15	TRICT
BEGIN	NING	DATI	E OF TER	RM: _	9-1	- ঐ	1.3	EN	DING DA	ATE: _	33	1- RE	216
backgrou following	ınd ar g que	nd phil estions	osophies by typir	will ass ig or l	sist the egibly	County printing	y Board g your	l in estal respons	olishing ye.	our quali ORDER	fication TO B	is. Ple E CON	rstanding of you case complete the NSIDERED FO PLICATION.
1. What	experi	ence ai	nd backgro	ound do	you hav	ve whic	h you b	elieve qu	alifies you	ı for this a	ppoint	ment?	
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to serve	on the	appoi		for wh	nich you	are ar	plying'	? (This					f you are selecte fy you; it is onl
							Signa	La ature	muz -	T. B	slas	nl	

Date

NAME: _	CARL	PARK	5-5			
ADDRESS	: 3/04 60 Street	AD 360	00 6 Ci	PENETEL Y	D J	6 1865 p Ćode
EMAIL: _			_ PHONE	: 2/7-3	69-54	142
	Check Box to Have I	Email Address Redacted or	Public Docum	ents		
NAME OF	APPOINTMENT B	ODY OR BOARD:	Lox	r + Com	promis	e OD
BEGINNIN	IG DATE OF TERM	ODY OR BOARD: 1: $\frac{9}{1}$	013	ENDING DATE	E: <u>8/3</u>	31/2016
The Champ background following of	aign County Board and philosophies w questions by typing	appreciates your interial ill assist the County	rest in servi Board in es your respo	ng your commun stablishing your onse. IN ORI	nity. A clear qualifications. DER TO BE	understanding of your Please complete the CONSIDERED FOR
1. What exp	erience and backgrou	nd do you have which	you believe	qualifies you for	this appointme	ent?
BEF)	V on the b	oud fast	+ Carry	the of y	MAN	ent? · Farm sp
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2. What is yo	our knowledge of the	appointed body's ope	rations, prop	erty holdings, sta	aff, taxes, and fe	ees?
to serve on			olying? (Th	is question is no		rest if you are selected qualify you; it is only
			Signature 7	Tan/ 1 17- 20	2/2 1/3	7
			Date 1			

	FRAN					
ADDRESS:	28/3 CR Street	bODE.	F15he	eR	/LC, State Zip	6)843 Code
EMAIL: _	Check Box to Have Fr	mail Address Redacted o	PHONE:	217-	897-1-	to 2
NAME OF A	APPOINTMENT BO	DDY OR BOARD:	Le	ower it	1951006	ih PP
BEGINNIN	APPOINTMENT BO	: <u>9/1/20</u>	>13 R EN	DING DATE:	8-31-	2016.
The Champa background following qu	ign County Board a and philosophies wil lestions by typing ENT, OR REAPPOIN	ppreciates your inte I assist the County or legibly printing	erest in serving Board in estab g your respons	your communit dishing your qu e. IN ORDE	y. A clear ur 1alifications. R TO BE C	iderstanding of your Please complete the ONSIDERED FOR
1. What expe	rience and backgroun	d do you have which	h you believe qu	alifies you for th	nis appointmen	1?
Biect	T BRIDGES	OVER SUC	L STROK	NS 05	This for	e over
40 11	T BRIDGES	res land	ON ST	REAM.		
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2. What is yo	ur knowledge of the a	appointed body's ope	erations, propert	y holdings, staff	taxes, and fee	s?
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to serve on ti	ink of any relationshing the appointed body for covide information.)	or which you are ap		question is not		
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. The	
			Signature ') Ara	- 15	
			Date	B-d4'	. \ 2	

NAME:	Ken Decker			
ADDRES	S: 608 E Roosevelt	Philo	IL	61864
	Street	City	State	Zip Code
EMAIL:	kdecker9@aol.com	PHONE: 217 684	2168	
	Check Box to Have Email Add	dress Redacted on Public Documents		
NAME O	F APPOINTMENT BODY O	R BOARD: , South Fork Drainage D	istrict Truste	e
BEGINNI	NG DATE OF TERM:	$\frac{9/1/13}{13}$ ending da	TE:	8/31/2016
background following	d and philosophies will assis questions by typing or leg	ntes your interest in serving your comment the County Board in establishing your response. IN ONT, CANDIDATE MUST COMPLETE.	ur qualificati RDER TO	ons. Please complete the BE CONSIDERED FOR
1. What ex	perience and background do y	ou have which you believe qualifies you	for this appoi	ntment?
l In st all d	Irainage tile as a side job an	d farm in this area.		
	• • • • • • • • • • • • • • • • • • • •	ed body's operations, property holdings, y operations of this district for several		nd fees?
to serve or	the appointed body for which	ther reason that might possibly constitute the you are applying? (This question is Yes No I If yes, please explain:		
		My N		
		Signature 7/16/13		
		Date		
		Daic		

NAME:	Leo	n B	Luhm					
ADDRESS:	1991 Street	1 C.1	P. 2500	E.	らか。 City	Joseph	エム, State	61873 Zip Code
	Check Box	to Have Emai	il Address Redacted	on Public D	ocuments			
NAME OF A	APPOINTM	IENT BOD	Y OR BOARD	: <u>Drai</u>	nage	Dist. #	10 To	an of Ogden
BEGINNIN	G DATE O	F TERM:	9.1	10	END	ING DATE:	0	.01.16
background following qu	and philoso uestions by	phies will a typing or	assist the Countered legibly printing	ty Board	in establi response.	ishing your q IN ORDE	ualification ER TO BI	r understanding of your s. Please complete the E CONSIDERED FOR IS APPLICATION.
1. What expe	erience and b	ackground o	do you have whi	ch you be	lieve qual	ifies you for t	his appointi	ment?
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-	_		oointed body's o			_		fees? know the
	he appointed	d body for		pplying?	(This qu	estion is not		terest if you are selected isqualify you; it is only
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					Leon	- Bluh 4/13		
				Signat	ure	/		
					6/2	4/13		
				Date				



PLEASE TYPE OR PRINT IN BLACK INK

NAME: Steve Stierwalt
ADDRESS: 323 Co Rd 700N Sadorus II 61872 Street City State Zip Code EMAIL: Stwalt@prairieinet.net.net.net.net.net.net.net.net.net.
Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: OKaw Drainage Dist,
BEGINNING DATE OF TERM: Sept 1 2013 ENDING DATE: Aug 3 2016
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment? I Serve as Chairman of the Champaign Co. Soil
I Serve as chairman of the Champaign Co. Soil and Water Conservation District. I have expirence with drainage tile.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees? I have Served as a Commissioner for many year
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No X If yes, please explain:
Signature 7-9-13

Date

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM

Fire, Drainage, Cemetery, Water, & Farmland Assessment

NAME:	John S. Nelson		The property and the state and beautiful to the state of	
ADDRES	S: 2977 County Road 400E	Fisher	ILL	61843
	Street	City	State	Zip Code
EMAIL:	nelsonsa1945@gmail.com	PHONE: 217-897-	1250	
	Check Box to Have Email Address Redacte			
NAME O	F APPOINTMENT BODY OR BOAR	D: Owl Creek Drainage Di	strict	
BEGINNI	NG DATE OF TERM: August 31,21	213 9/1/13 ENDING DA	TE: August	t 31, 2016
backgroun following	apaign County Board appreciates your in dand philosophies will assist the Councilous by typing or legibly print MENT, OR REAPPOINTMENT, CANE	nty Board in establishing yo ting your response. IN O	ur qualification RDER TO I	ons. Please complete the BE CONSIDERED FOR
	perience and background do you have when on the Owl Creek Drainage Distric	• • •	• •	
ditch and	have several acres that drain into the	e district tile. I also rent land	that drains in	nto the district. I have
taken ar	active roll in participating in obtaining	g dredging contractors, tiles	repairs, was	sh out repairs, and
brush ren	noval.			
	your knowledge of the appointed body's aware of the districts operations. I kn			
We have	no staff other than three comissioners	s and an attorney. I see a p	orint out of the	e taxes received every
year.				
to serve or	think of any relationship or other reason the appointed body for which you are provide information.) Yes \(\sumsymbol{\substack}\) No			
		Signature (Jelson 13	
		V 6-15.	-/3	
		Date	•	

NAME: _	Denni	s M. Bu	Her			
ADDRESS:	481	CR - 10	OO E	City	IL	61880
EMAIL: _	Check Box to H	D United prail Iave Email Address Re	dacted on Public	HONE: 217 ·	841 53	
NAME OF	APPOINTMEN	T BODY OR BO	ARD: Per	ofum 5 (ough ENDING DATE	Special &	Irainage Dust
BEGINNIN	G DATE OF TI	ERM: 9-1	. 13	ENDING DATE	e: <u>8.3</u>	1.16
oackground ollowing q	and philosophie uestions by typ	s will assist the one of the one or legibly p	County Board printing your	serving your commund in establishing your response. IN ORI	qualifications. DER TO BE	Please complete the CONSIDERED FOR
. What expe	rience and back	ground do you have	e which you b	elieve qualifies you for	this appointme	ent?
curre	ntly ser	ve as trus	tce			
	1					

. What is yo	our knowledge of	the appointed bod	y's operation	s, property holdings, sta	aff, taxes, and f	ees?
				nt possibly constitute a		
	he appointed bo			? (This question is no es, please explain:	ot meant to dis	qualify you; it is onl
					6	
			Sign	2000 4 30 ature 6/23/2013	tly	
				6/23/2013		
			Date			

NAME: Arlen Buhr	
ADDRESS: 2342 Co. Rd 3300NG; Fford Th. 61847 Street State Zip Code	
EMAIL: PHONE: 2/7 202 8824	
	ر ' _د
NAME OF APPOINTMENT BODY OR BOARD: Pravie Creek District. Com missers BEGINNING DATE OF TERM: Sept / 2013 ENDING DATE: Aug 3/2016	310
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.	
1. What experience and background do you have which you believe qualifies you for this appointment?	
I have sorved at Least 4 terms as commissioner	
I farm I am knowledgeable about drainage	
and tile . I try to attend informative drainage	
meeting	
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?	
I ottend all annual Pravie Cheek meetings, where	
we go over past year expenses and Set tax Loux by distursing short term and Long term expenses before we set tax hery	5/
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Yes, please explain:	
AllenBuh	
Signature 7 (7)	
Date Date	

PLEASE TYPE OR PRINT IN BLACK INK

NAME: _	KENNETH T. S	CHMIDT		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ADDRESS:	1762 Co. Rd.	2500N	Thomsaboro	IL	61878
	Street		City 217 898	State 0789	Zip Code
EMAIL: _	XXXIneck Box to Have Email A		PHONE:		
NAME OF	l		P DRAINAGE DISTR	ICT CO	OMMISSIONER
BEGINNIN	G DATE OF TERM:	9-1-13	ENDING DATE:	0-31-	- 10
background following q	and philosophies will assuestions by typing or l	sist the County Boar egibly printing you	n serving your community rd in establishing your qu ur response. IN ORDEI MUST COMPLETE AND	alificatio R TO E	ns. Please complete the BE CONSIDERED FOR
1. What expe	erience and background do	you have which you	believe qualifies you for th	is appoin	tment?
	property owner	and have ser	rved on other	boards	5
	road commission	ner for Ranto	oul Township for	36 ує	ears
·	0 11		ns, property holdings, staff, gone over the b	•	nd fees?
to serve on			ght possibly constitute a cogg? (This question is not a yes, please explain:		
		· ·	Semulth J nature July 24, 2013	1. J.	Muridit

Date

NAME:	JAMES	KIRK						
ADDRE	SS: <u>340</u> Street	6 CR 17	006	<i>Ludlou</i> City	<i>Ù</i>	II State	60949 Zip Code	
EMAIL:	Big Sm Check	1211 @ 4 Box to Have Email	Address Redacted of	PHONE:	<u>217-390</u> ts	6-0261	5	
			Y OR BOARD:					
BEGINN	NING DATE	OF TERM:	SEPT 1,20	<u>13</u> E	NDING DATI	E: aug	145T 31,2	016
backgrou following	nd and philog questions	sophies will a by typing or	eciates your inte ssist the County legibly printing MENT, CANDID	Board in esta your respon	blishing your se. IN ORI	qualification	ons. Please co BE CONSIDE	omplete the RED FOR
1. What e	experience an	d background d	o you have which	n you believe q	ualifies you for	r this appoi	ntment?	
HAVE	SERVE	O ON Th	is board	OVER :	35 yrs			
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to serve o		ited body for w	r other reason tha hich you are ap Yes No 🔀	plying? (This	question is no			
				Signature 6/13/1	Kirk			
				6/13/j	3			4

PLEASE TYPE OR PRINT IN BLACK INK

NAME: WILLIAM N. SIEGFRIED
ADDRESS: 476 = 50 NORTH TED. G1350N (1-11, Th 6093 Street City State Zip Code
EMAIL: bill 88510/eapstseam.nt PHONE: 211)784-4269 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: SANGAMON + Drewing DRAI BEGINNING DATE OF TERM: 9/1/13 ENDING DATE: 8/31/16
The Champaign County Board appreciates your interest in serving your community. A clear understanding of you background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment? ———————————————————————————————————
15 YEARS I HAVE LIVERS AND FARMERS NEXT TO
DRUMMER (JEEK FOR 43 YEARS. I HAVE STUDIES CIVIL SURFACE DRAWAGE, AND AM CONSERCANT WI DRAWAGE LAW.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees? I was During: My Venus HS A Commissioners
ON THE BUTIES AND FUNCTIONS OF OUR DISTRICT
HUD ITS ADMINISTRATION
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selecte to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Yes, please explain:
Signature Signature
JULY 23, 2013 Date

146

PLEASE TYPE OR PRINT IN BLACK INK

NAME:
ADDRESS: 1860 C.R. 1960 C.R. 1960 City State Zip Code
EMAIL: PHONE:
Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: SILVEN CHECK DININGE DIS
NAME OF APPOINTMENT BODY OR BOARD: SILVEY CHECK DININGER DIS BEGINNING DATE OF TERM: Sept 1 1/3 ENDING DATE: 8/31/16
The Champaign County Board appreciates your interest in serving your community. A clear understanding of you background and philosophies will assist the County Board in establishing your qualifications. Please complete th following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
I have served on Silver Creek +
St. loe NO.3 Drainage Pistrict for 9 years
I own 205 Acres of land in Silver Kneck
and have farmed in the Dist Fer Boyears
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
I know the boundays of the
dist, and know the duties of a
_ comm. on the bound
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No X If yes, please explain:
Ature Moser Signature
6/16/13
Date / /

147

NAME:	M	1 C W	JEZ_	<u> </u>	MASTI	NCS					
ADDRESS:	Street	83	CR_	(3251	V ST	JOSEPH City	<u>\{</u>	L State	LIF Zip Code	13	
[Check B	ox to Hav	e Email A	ddress Redac	ted on Public D	ONE: 2					
NAME OF A	— APPOINT	MENT	BODY	OR BOAF	ud: _5-	TOSEPK	1 # 3	DRAIL	NAGE	CSW W	115520NE
BEGINNIN	G DATE (OF TEF	RM:	5'EPT	1,2013	ENDING	DATE: _	- 8 ₁	131/20	316	
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FINA	ANCIAL		1100	MELE	U PEWSES	, BAL	1 NCINO	s B	DGET	S	***************************************
3. Can you th	ink of any	relation	nship or y for wh	other reaso	n that might e applying?	possibly consti (This questions, please explain	itute a conf	lict of in	terest if y	ou are sel	ected
					Signat	Milal ure -20-13	I. do	itiz	<u> </u>		
					7	-20-13				******	·
					Doto						

NAME: Carry Cannon
ADDRESS: 405 Second Court ST Joseph II 61873 Street Street City State Zip Code
EMAIL: # 299enn@comcad. Net PHONE: 2/7 469 8017 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: COMMISSIONER STOSEPh DD.W
BEGINNING DATE OF TERM: 501/2 ENDING DATE: Aug 31, 2016
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
18 years as commissioner of DDG
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees? Thave Survivors Knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
Thave sufficient Knowledge of the districts operations & Assessments.
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Yes No Yes, please explain:
Saug Lannon Signature
7 - / / - / 3 Date

NAME: Jerry Heinz
ADDRESS: 471 Co Rd. 800 E To Lond IL 61880 Street City State Zip Code
EMAIL: Jer @ Pri Landscape. PHONE: 217 - 369 - 8181 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: Two Mile Slough Drainage Distri
BEGINNING DATE OF TERM: $9-1-13$ ENDING DATE: $8\cdot 31-16$
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
Life Long farmer + resident within The
Life Long farmer + resident within The district boundry.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
past experience as Drainage District
(ommissioner
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Yes If yes, please explain:
Jung Heining
Signature
Date

PLEASE TYPE OR PRINT IN BLACK INK
NAME: JAY R. HDEN
ADDRESS: 501 N. ELM St. St. JOSEPH IL. 61813 City State Zip Code
EMAIL: PHONE:
NAME OF APPOINTMENT BODY OR BOARD: UNION DRAFFAGE DISTRICT OF TOWNSA REGINNING DATE OF TERM: SEPT. 1. 2013 ENDING DATE: Acc. 31, 2016
BEGINNING DATE OF TERM: SEPT. 1, 2013 ENDING DATE: Aug. 31, 2016
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
I HAUE SERVED AS A DRAINAGE BOARD MEMBER FOR 20 PLUS
MEARS, I HAVE A CHEAR UNDERSTANDING AS A BOARD HEMERON OF
THE DRAINAGE DISTRICT OF AND IN HEIPING OF THE DRAINAGE
THE DRAINAGE DISTRICT OF AND IN HEIPING OF THE DRAINAGE NEEDS FOR THE FARMERS AND PROPERTY DOONERS OF THE DISTRICT.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
HAVING BEEN ON THE DRAWAGE BOARD FOLA NUMBER OF YEARS,
I know most of tHE properity owners AND THEIR DRAININGE NEEDS
IN OUR DISTAGET OF STANTON & OGDEN TOWNS Hip
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Yes No Yes, please explain:
·
Ray R. Allens Signature / 6-24-13
Signature /
6-27-15

NAME:	Francis Osterbur			
ADDRES	s: 412 Preston	Savoy	IL	61874
	Street	City	State	Zip Code
EMAIL:		PHONE: 217-359	9-6768	
	Check Box to Have Email Address Redacted	on Public Documents		
NAME O	F APPOINTMENT BODY OR BOARD:	St. Joesph #4 Drainag	ge District Boa	rd
BEGINNI	NG DATE OF TERM: Sept. 1, 2013	ENDING D.	ATE: Aug. 3	1, 2016
backgroun following	npaign County Board appreciates your integrated dand philosophies will assist the Count questions by typing or legibly printin MENT, OR REAPPOINTMENT, CANDII	y Board in establishing y g your response. IN	our qualification	ons. Please complete the BE CONSIDERED FOR
1. What ex	perience and background do you have which	ch you believe qualifies you	u for this appoin	tment?
I am pres	ently a commissioner for the St Joesph	District #4 and have be	en in the past.	

	your knowledge of the appointed body's or ently a commissioner for the St Joesph			nd fees?
to serve or	think of any relationship or other reason that the appointed body for which you are a provide information.) Yes No			
			· · · · · · · · · · · · · · · · · · ·	
		Francis Signature	(l) 4	
		Signature Signature	(A der	/ma/
		Signature	2012	
		152 \(\sigma \) Date		

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Cody P CUNDIFF
ADDRESS: 1471 CIR 2700 N THOMASBORO IL 61878 Street City State Zip Code
EMAIL: C46PC O HOL. COM PHONE: 2178930520 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: TRIPLE FORK DRAINAGE DISTRICE
BEGINNING DATE OF TERM: SEPT 1 2013 ENDING DATE:
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
I lived in the Triple Fork DD I have helped install field tile and helped repair
culverts that empty into the ditch Also helped clean out beaver dams
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees? the commissioners are responsible for seeing that the drainage ditch is working
properly
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Y If yes, please explain:
Signature 6-26-2013
6 06 0017

Date

NAME: Serre	1 /hinnes				-
ADDRESS: 608 E	. Marshall	Solono City	<u>Jl,</u> Sta	6 1880 te Zip Code	-
EMAIL:Check Box	to Have Email Address Reda	PHONE: 2	217 485 3	054	•
NAME OF APPOINTM		۸ ۸	Ainne Distric	rad Philor/	sitten.
BEGINNING DATE OF		· /3 ENI	· 1	. 7	•
The Champaign County background and philosop following questions by APPOINTMENT, OR RE	phies will assist the Co typing or legibly pri	ounty Board in establinting your response	ishing your qualification. IN ORDER TO	ntions. Please comp DBE CONSIDERE	olete the D FOR
1. What experience and ba	farm in b	his district	have Ino	. 1	A
the draining	e ditch &	I Am Co.	mmitted to	-the	
Mrcser VALION	or our f	(ST 8 (CE)			
2. What is your knowledge JAM 20	e of the appointed body	• • •	• • • •		,
3. Can you think of any re to serve on the appointed intended to provide inform	body for which you a		uestion is not meant		
			W Thinn	ź	
		Signature 7	-23-13		

NAME: WILLIAM WILSON
ADDRESS: 2467 CR. 1600N STESEPA // 6/873 Street Street State Zip Code
EMAIL: PHONE: 2/7 5822670
NAME OF APPOINTMENT BODY OR BOARD! NION DRAINAGE DIS #2 COMISSIONER
Check Box to Have Email Address Redacted on Public Documents NAME OF APPOINTMENT BODY OR BOARD: NON DRAINAGE DIS #2 COMMISSIONER BEGINNING DATE OF TERM: Aug 31/2010 The Champaign County Board appreciates your interest in serving your community. A clear understanding of your
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
HAVE SErved AS COUMISSIONER FOR A NUMBER OF YEARS
ANDOWN SEVERAL ACTES IN district WE HAVE MADE.
Several IMPROVEMENTS
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees? I HAVE BEEN SEE +TREASURER GURNING MY APPOINTED.
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No If yes, please explain:
<u> </u>
Signature
Date Signature

PLEASE TYPE OR PRINT IN BLACK INK

NAME:	Dud	ley I	Carr	oll		
ADDRESS:	$\frac{1172}{\text{Street}}$	Co Rd	1200 E	= Champa /Stat	Zip Code	6182
EMAIL: _			PHONE:	217-351	3140	<u>e</u>
NAME OF A	— APPOINTMENT	BODY OR BOAR	D: Upper Emb	arras River B	asin Draine	e Distri
BEGINNIN	G DATE OF TER	rм: <u>9-01-</u>	D: <u>Upper Emb</u> - 2013 ENI	DING DATE:	8.31.16	
background a following qu	and philosophies uestions by typir	will assist the Co	interest in serving y unty Board in establating your response DIDATE MUST COM	ishing your qualifica . IN ORDER TO	ntions. Please co BE CONSIDE	mplete the RED FOR
			which you believe qua			for
ma live	ny yea d'in th	rs (Drainage ollege rict for	gradua 38	te.,	Hove
I	have.	been or	s operations, property I The A aun The	Commisi	on +	
to serve on the		for which you ar	on that might possibly te applying? (This quantum of the control o	uestion is not meant		
			Signature	elijte	2012	

Date

NAME:			Do.	nald	H. H.	lice				_
ADDRESS:	509 .	S. Jac	kson St.	POB 7	'9	Philo City		<u>TL</u>	6/864 Zip Code	-
EMAIL: _				Redacted on		NE: 2/	17 68	34-2446	8	-
NAME OF	— APPOINT	MENT B	ODY OR I	BOARD:	Unio	n Otainag	e D1.	st #1	Philo	Jurpana
						_ ENDING D				_
background following qu	and philos uestions b	sophies wi	ll assist the	e County printing	Board in your re	establishing sponse. IN	your qu ORDE	ialification R TO BI	r understanding s. Please com E CONSIDERI IS APPLICATIO	plete the ED FOR
1. What expe	erience and	backgrou	nd do you l	nave which	you belie	eve qualifies yo	ou for th	nis appointr	ment?	
as	<u>a li</u>	fetime	former	e I h	ave v	beened an	d So	lved a	qualter	. Stainage
Problem	L from	the a	tainage	ditch	to	legning	and	instal	ling tile.	systems.
I re	cewed	Course	Work	in Soi	l Conse	rvation o	and i	waterwa	y and st	hutue-
design	while	tecen	my m	y B.S.	at to	he U.of I	-			Systems.
2. What is yo	ur knowle	dge of the	appointed l	oody's oper	rations, p	roperty holding	gs, staff.	, taxes, and	fees?	
	Full									
							· · · · · · · · · · · · · · · · · · ·			-
	he appoint	ed body f	or which y	ou are app	olying? (is not		terest if you are isqualify you; i	
	· · · · · · · · · · · · · · · · · · ·		****	-		<u> </u>	$\cap A$	D.		
					Signatu	Honold,	X+. [tre		
					215114141	Jonald re 7-5-1	2013			
					Date					

NAME: Marion Wagner
ADDRESS: 309 Kyle St Box 200 Ogden III 61859 Street State Zip Code
EMAIL: None PHONE: 217-592 26 47 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: Commissioner, Willow Byanch Drain and
BEGINNING DATE OF TERM: Sept 1, 2013 ENDING DATE: Aug. 31, 2016 Distor
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
I lived with drainage issues all my married life & my husband
was a commissioner. I listened to him, read articles on drainage
and have a book on drainage laws. I also like to attend the
IAPD yearly state meeting + listen to the experts.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
I have learned a lot in the years since I was first ap-
I have learned a lot in the years since I was first af- pointed. I know Willow Branch & just under 1000 Acres. I
have a list of owners + addresses of the farms that drain
into Willow Branch, & I have a plat of those acres, we have no staff
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No. If yes, please explain:
D just the 3 commissioners who meet with our lawyer in
Nov. to discuss the problems of there are any levy for the
coming year Is a landowner or tenant has a problem we try t
coming year. It a low downer or tenant has a problem, we try to solve it immediately, we are not paid. Maxime Warner
Signature Signature
Juse 19, 2013
Date // 158

NAME:		<u>Jennis</u>	Kigg	<u>5°</u>		
ADDRESS:	410	County	Road	2200E	Broadlandr IC State Zip Code	_6180
EMAIL:	Check Box to	Have Email Address I	P Redacted on Publi	HONE: 2/7-	688-3700	
NAME OF AP	POINTMEN	NT BODY OR BO	OARD: <u>1</u>	Wisk Drain	Gre District Braz	4
The Champaign background and following ques	n County Bo d philosophic stions by ty	pard appreciates y es will assist the ping or legibly	your interest in County Boar printing you	n serving your comr d in establishing yo r response. IN O	nunity. A clear understandi ur qualifications. Please co RDER TO BE CONSIDE AND SIGN THIS APPLICAT	mplete the RED FOR
•		-	_	<u>-</u>	for this appointment?	
2. What is your Has	knowledge o	f the appointed bo	ody's operation しゃらし	is, property holdings,	staff, taxes, and fees?	ricte
	appointed be	ody for which yo	u are applying		e a conflict of interest if you a not meant to disqualify you	
			Sign Date	Jours nature 6(13/12)		

NAME:	DAUSD	MEN	NENGA				
ADDRESS	S: <u>237</u> Street	0 Co.	RD. 18	<u>200 €</u> Cit	URRANA.	TC. State	6 180 Z Zip Code
EMAIL:		to Have Email Ad				# 6 S	13-6287
NAME OI	F APPOINTM	ENT BODY C	OR BOARD:	LONG BRAN	ICH MUTUAL	DRAINAG	E DISTRICT BOAR
BEGINNI	NG DATE OF	текм: <u>5</u> 2	=PT 1, 2	<u> 2013</u>	ENDING DATE	: <u>AUG-3</u>	1,2016
background following	d and philosop questions by	hies will assis typing or leg	st the County gibly printing	Board in est your respo	tablishing your on the second tables and tables are tables as a second table are table are tables as a second table are t	qualification ER TO Bl	r understanding of your s. Please complete the E CONSIDERED FOR IS APPLICATION.
1. What exp	perience and ba	ckground do y	ou have which	you believe	qualifies you for	this appoint	ment?
PR	EVZOUS	EXPER.	I ENCE	DU PO	SITTON		

ks.	_	eel,	tan E	AMICIA	erty holdings, star		
to serve on		body for which		olying? (Thi			terest if you are selected lisqualify you; it is only
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				Wavel Signature) 94/m	eng	
				Jane	15, 20	/ 3	
				Date 160			

NAME: Kevin Lee Wienke
ADDRESS: 926 County Rd. 2400 East Homer IL 61849 City State Zip Code
EMAIL: K Wienke Q gmail. Com Phone: (217) 621-7403 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: Drainage District # 3 of South Homer & 5 drey Board Wen
NAME OF APPOINTMENT BODY OR BOARD: <u>Drainage</u> District # 3 of South Homer & 5 doney Board Wend Beginning date of term: <u>9/1/13</u> Ending date: <u>8/31/16</u>
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
I have been a board member for about lyr. I have farmed this area over 26
years and I am familiar with the drainage district
J
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
I am still learning all the different rules with a drainage district
•
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes \(\sum \text{No } \overline{\mu}\) If yes, please explain:
Guin 2. Wanh
Signature
$\frac{7/22/13}{Date}$

TORUARY 20 .

CHAMPAIGN COUNTY ADMINISTRATIVE SERVICES

1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Memorandum

To: James Quisenberry, Deputy Chair Policy, Personnel, & Appointments

Committee, and Members of the Champaign County Board

cc: Deb Busey, County Administrator

From: Kay Rhodes, Administrative Assistant KR

Date: 8/5/2013

Re: Nelson-Moore-Fairfield Drainage District Appointment

I am writing to explain the term of appointment for John Heiser to the Nelson-Moore-Fairfield Drainage District. In November 2010, Mr. Heiser was appointed to fill an unexpired term, which should have ended August 31, 2011.

Instead, he was appointed to a term ending August 31, 2013. This caused the 3-year appointment cycle to be off placing two positions for drainage district commissioner on the same appointment cycle. The third commissioner appointment term is September 2012-August 2015. The incumbent for this position resigned February 2013.

In order to return to the correct appointment cycle we are requesting that the County Board appoint John Heiser to a term commencing September 1, 2013 and ending August 31, 2014.

The 3-year appointment cycle should be as follows:

1) John Heiser September 1, 2013-August 31, 2014

2) Unfilled Vacancy September 1, 2012-August 31, 2015 (incumbent resigned 2/2013)

3) David Bright September 1, 2013-August 31, 2016

Thank you for your consideration.

RESOLUTION NO. 7563

RESOLUTION APPOINTING JOHN HEISER TO THE NELSON-MOORE-FAIRFIELD DRAINAGE DISTRICT

WHEREAS, C. Pius Weibel has submitted to the County Board his appointment of John Heiser to the Nelson-Moore-Fairfield Drainage District; and

WHEREAS, Such appointment requires the advice and consent of the County Board under 35 ILCS 200/6-5;

NOW, THEREFORE, BE IT RESOLVED By the Champaign County Board that the County Board does hereby advise and consent to the appointment of John Heiser to the Nelson-Moore-Fairfield Drainage District for a term commencing November 19, 2010 and ending August 31, 2013; and

BE IT FURTHER RESOLVED That the County Clerk transmit a certified copy of this resolution to: John Heiser, 458 County Road 3100 N, Fisher IL 61843.

PRESENTED, ADOPTED, APPROVED, AND RECORDED this 21st day of October, A.D. 2010.

C. Pius Weibel, Chair Champaign County Board

ATTEST:

Mark Shelden, County Clerk and ex-officio Clerk of the Champaign County Board

NAME: John B. Heiser
ADDRESS: 458 GRA 3100 N. F. Sher III. 61843 EMAIL: The ser eithicom. PHONE: (217)897-1962
EMAIL: The set & illicom PHONE: (217)897-1962 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: Nolson - Moore Fair Giold Drain
BEGINNING DATE OF TERM: $9 \cdot 1 \cdot 13$ ENDING DATE: $8/31/14$
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
Bear a farmer for 3/2 yrs.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
1
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Yes, please explain:
1.0B. Moine
Signature College 1 2
Date ()

NAME: David Bright
ADDRESS: 230 Cry RQ 3400N FOOSland II. 61845 City State Zip Code
EMAIL: PHONE: 217-846-3263 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: Nelson, Moore, Fairfield Drainage
BEGINNING DATE OF TERM: $9-1-13$ ENDING DATE: $8-31-16$
The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
dave sat on this board for a number of
Yrs.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees? Don't really know what you are wanting to Know an this question. Here knowledge on all
of it.
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No Yes, please explain:
Signature Bright
7-17-13
Date

Law Offices of TEPPER, MANN & COTTRELL, P.C.

PNC Bank Building 507 South Broadway Avenue P.O. Box 548 Urbana, Illinois 61803 Telephone (217) 328-4300 Facsimile (217) 328-4310

ARTHUR L. MANN JAMES D. COTTRÈLL MICHAEL TEPPER (Deceased)

June 25, 2013

Kay Rhodes Administrative Assistant Brookens Administrative Center 1776 E. Washington St Urbana, IL 61802

Re: Fountain Head Drainage District

Dear Circuit Clerk:

Enclosed please find the Appointment Request Form for Marc Shaw of Fountain Head Drainage District. If you have any other questions, feel free to contact me. Thank you.

Sincerely,

James D. Cottrell

PLEASE TYPE OR PRINT IN BLACK INK

NAME: May C Shaw
ADDRESS: 1003 S. Barker Rd, Champaign IL 61822 Street State Zip Code
EMAIL: PHONE: 217-863-2344
Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: Fountain Head UI)
BEGINNING DATE OF TERM: 2013 ENDING DATE: 2016
The Champaign County Board appreciates your interest in serving your community. A clear understanding of you background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FO APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.
1. What experience and background do you have which you believe qualifies you for this appointment?
I have been a farm operator for many years within
the district boundary, and land owner as well. I am tamilia
with both form, and urban drainage, and the benevits
Of the same.
2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
I have been a commissioner for the clistrict for
mong year, and am familiar with all asperts ox
1748 operation
3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes Now If yes, please explain:
Mare Shaw
Signature ZO, ZO13 Date

167

Marc Shaw, Applicant Background for Fountain Head Drainage District

Number 1 Objectives are:

- Farm drainage must be maintained and protected as city expands
- Maintenance of main ditch (Kaskaskia)

Raised on family farm near Bondville

Retired from Bondville Volunteer Fire Department after 23 years-last 8 years as Fire Department Chief Active member of the Grain Elevator Board

Active member of the Prairie View Cemetery Board

Active member of the Bondville United Methodist Church

Fountain Head Drainage District Commissioner for 12 years

Fountain Head Drainage District Accomplishments/On-going Projects

- Bondville Sewer System Large Project
- Ran a large tile from Fountain Head Drainage District to Kaskaskia River
- Numerous tile repairs on-going in (near post office) and outside the city
- Tile repair near Anderson Grain Elevator
- Maintain Kaskaskia (main ditch) through dredging –very costly
- Parkland College Apartment construction-Worked to re-route field tiles so water could drain properly
- Actively work on sub-division plats due to construction on farm land
- Numerous utility projects, such as fiber optics crossing in and out of the city-work to prevent and repair damaged tiles
- Installation of Gabion Baskets in areas where wash-out has occurred to cut down on erosion
- On-going negotiations with the City on detachment of certain areas

It is important to maintain member continuity during the long-term negotiations with the City.

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM Fire, Drainage, Cemetery, Water, & Farmland Assessment PLEASE TYPE OR PRINT IN BLACK INK

	NAME:	John D. Hus	ton					
	A TUTUTE A	SS: 509 North	Draner Asa	enija	Champaign	II 6192	1	
	SATATA TATA	Street	Diapei Avi	Silue	Champaign	City	State	Zip Code
							2	2-1-004
	EMAIL:	jdhston@ao				IONE:_2	<u>17-352-218</u>	7
		□ Check Box to I	łave Email Add	ress Redacted on Pr	ablic Documents			
	NAME O	F APPOINTM	IENT BODY	OR BOARD:	Fountain Hea	d Drainas	ge District	
	BEGINN	ING DATE OI	f TERM: _	9/1/2013	END	ING DAT	TE <u>8/31</u>	/2016
ba fo	ackground an llowing ques	nd philosophies w stions by typing c	rill assist the C or legibly print	ur interest in serv ounty Board in es ing your response CANDIDATE MU	stablishing your of . IN ORDER TO	qualification DBE CONS	ns. Please co SIDERED FO	mplete the DR
1.	What exp	perience and bac	ekground do	you have which	you believe qu	alifies you	ı for this apı	pointment?
	business, a State Fire	and hold two In: Marshall Office	ternational C e. I am emple	ruction industry ode Council (IC oyed by Christie ts, architectural,	C) inspector ce Clinic (20 yea	rtificates a rs) as Con	and one from	n the Illinois
	District in FHDD (es current ma	n the city of Cha pecially as I res ake up of the bo	ampaign, I fe ide in sub-di ard is 100% i	spaying property el I can represen strict 7, the large rural, but 80% o of Champaign I	nt the interests of est overlap area of the total Main	of the urbate with the of District's	n homeown city of Chan property as	ers in the npaign). The
	was made- person und responsibil	· "how can an u lerstand urban o	rban person u Irainage issud ware of urba	oard (2011). Durinderstand rural es? I live two hour flooding issue	drainage issues	s?" My qu ain drain u	uestion is- hander FHDE	ow can a rural)
2.	What is y	our knowledge	of the appoin	ted body's oper	ations, property	y holdings	, staff, taxes	s, and fees?
	of Copper	•	ain ditch" for	and reports on escaping water				• •
3.	you are se to disqual	elected to serve ify you; it is on	on the appoint intended to	ther reason that nated body for who provide inform	nich you are ap			
	Yes	No X If ye	es, please exp	olain:				
					1 A	//		

TEBRUARY 20. 1855

CHAMPAIGN COUNTY ADMINISTRATIVE SERVICES

1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Debra Busey, County Administrator

August 6, 2013

Al Kurtz, Chair Champaign County Board 1776 E. Washington Urbana, IL 61802

RE: Labor Management Health Insurance Committee

Dear Chair Kurtz,

Pursuant to the Agreement establishing the Labor Management Health Insurance Committee, I am writing to request your appointment of an Alternate to serve on that Committee. You have already appointed Chris Alix and Stan Harper to serve, but the Agreement also calls for the appointment of an Alternate, which I am requesting you appoint to serve through the remainder of this County Board Term – to November 30, 2014.

Thank you for your consideration of this request. If you have questions, please feel free to contact me.

Sincerely,

Deb Busey

County Administrator



1776 East Washington Street Urbana, IL 61802

Email: mail@champaigncountyclerk.com Website: www.champaigncountyclerk.com Vital Records: Elections:

(217)384-3720 (217)384-3724 (217)384-1241

Fax: TTY:

(217)384-8601

COUNTY CLERK MONTHLY REPORT JUNE 2013

Liquor Licenses & Permi	ts	337.00
Civil Union Licenses		0.00
Marriage License		3,275.00
Interests		17.07
State Reimbursements		-
Vital Clerk Fees		14,012.00
Tax Clerk Fees		1,899.19
Refunds of Overpayment	S	_
	TOTAL	19,540.26
Additional Clerk Fees		1,976.00



1776 East Washington Street

Urbana, IL 61802

Email: mail@champaigncountyclerk.com Website: www.champaigncountyclerk.com Vital Records: Elections:

(217)384-3720 (217)384-3724

Fax: TTY: (217)384-1241 (217)384-8601

COUNTY CLERK MONTHLY REPORT JULY 2013

Liquor Licenses & Permits

20.00

Civil Union Licenses

100.00

Marriage License

2,525.00

Interests

12.84

State Reimbursements

13,176.50

Vital Clerk Fees

Tax Clerk Fees

1,942.22

Refunds of Overpayments

17,776.56

Additional Clerk Fees

1,878.00

TOTAL



CHAMPAIGN COUNTY ADMINISTRATIVE SERVICES

1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Deb Busey, County Administrator

ADMINISTRATIVE SERVICES – MONTHLY HR REPORT JUNE 2013

VACANT POSITIONS LISTING

FUND	DEPT	POSITION TITLE	HOURLY RATE	REG HRS	REG SAL		FY 2013 HRS	FY '13 SAL
TOND	DELI	FOSITION TITLE	NAIE	пко	NEG SAL		11110	I I IS OAL
						П		
80	30	PT LEGAL CLERK	\$11.74	1040	\$12,209.60		1040	\$12,209.60
80	40	CLERK	\$11.74	1950	\$22,893.00		1950	\$22,893.00
80	41	ASST STATE'S ATTY	\$23.97	1950	\$46,741.50	[]	1950	\$46,741.50
80	41	VICTIM ADV PROG DIR	\$18.02	1560	\$28,111.20		1560	\$28,111.20
80	43	DEPUTY EMA COORD	\$20.98	1950	\$40,911.00		1950	\$40,911.00
80	51	COURT SRVS OFCR	\$19.28	1950	\$37,596.00		1950	\$37,596.00
80	140	DEP SHRFCORR	\$18.66	2080	\$38,812.80		2080	\$38,812.80
80	140	DEP SHRFCORR	\$18.66	2080	\$38,812.80		2080	\$38,812.80
83	60	HWY MAINT WRKR	\$22.84	2080	\$47,507.20	1	2080	\$47,507.20
850	111	BUS SYS ANALYST	\$23.97	1950	\$46,741.50	. 11	1950	\$46,741.50
		TOTAL	\$189.86		\$360,336.60			\$360,336.60

UNEMPLOYMENT REPORT

Notice of Claims received – 34 total

6 – Nursing Home

1 – County Clerk

27 - Head Start

Benefit Determinations

1 – Nursing Home benefits allowed

1 – Nursing Home benefits denied

1 – Nursing Home remanded to referee

Notice of Pending Appeal

0 – Nursing Home

PAYROLL REPORT

JUNE PAYROLL INFORMATION

6/14/2013 EE's 6/28/2013 EE's

<u>EE'S</u>

Employer Protests Filed – 2 total

2 – Nursing Home

1 – Nursing Home

Notice of Telephone Hearing

Paid Total Payroll \$\$

Pay Group

Paid Total Payroll \$\$

(217) 384-3896 FAX

General Corp	503	\$905,510.02	508	\$881,782.64
Nursing Home	223	\$281,204.42	232	\$251,388.23
RPC/Head Start	205	\$260,266.00	195	\$238,612.26
Total	931	\$1,446,980.44	935	\$1,371,783.13

HEALTH INSURANCE/BENEFITS REPORT

June, 2013

Total Number of Employees Enrolled:

General County Union:

Single 223; EE+spouse 22.; EE+child(ren) 49.; Family 37 waived 57

Nursing Home Union:

Single 62; EE+ spouse 10; EE+child(ren) 4; Family 1; waived 14

Non-bargaining employees:

Single 130; EE+spouse 28; EE+child(ren) 21; Family 27; waived 43

Life Insurance Premium paid by County: \$1,781.00

Health Insurance Premium paid by County: \$323,599.70

Health Reimbursement Account contribution paid by County: \$17,901.00

TURNOVER REPORT

Turnover is the rate at which an employer gains and looses employees. To get the best picture for turnover the calculations are based on rolling year averages.

General County

June 2013 : 5.17%

June 2013 : 1 of 562 Employees left Champaign General County

WORKERS' COMPENSATION REPORT

Entire County Report	<u>June 2013</u>	<u>June 2012</u>		
New Claims $6/1 - 6/30$	1	3		
Closed Claims 6/1 - 6/30	5	10		
Open Claims	32	40		
(Ongoing # total number of open claims as of 6/20)				

(Ongoing #, total number of open claims as of 6/30)

Year to Date Total (Ongoing #, total number of open claims)

June 2012 40 June 2013 42

EEO REPORT

Information provided based on EEO Tracking forms submitted by Applicant. Figures are for General County only.

There were no postings that closed during June 2013 for the General County.

June EEO Report - General County Only	NONE	June - TOTALS
Total Applicants Applied	0	0
Male	0	0
Female	0	0 -
Undisclosed	0	0
Caucasian	0	0
African-American	0	0
Asian or Pacific Islander	0	0
Hispanic	0	0
Native American or Alaskan Native	0	0
Two of more races	0	0
Undisclosed	0	0
Veteran Status	0	0
Disability	0	0

ADMINISTRATIVE SUPPORT to COUNTY BOARD REPORT

Agendas Posted	9	Meetings Staffed	9	Minutes Posted	10
Appointments		Notification of	1		
Posted	7	Appointment	11	Contracts Posted	4
				Ordinances	
Calendars Posted	6	Resolutions Prepared	40	Prepared	2



1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Deb Busey, County Administrator

ADMINISTRATIVE SERVICES – MONTHLY HR REPORT JULY 2013

VACANT POSITIONS LISTING

							FY	
			HOURLY	REG			2013	
FUND	DEPT	POSITION TITLE	RATE	HRS	REG SAL		HRS	FY '13 SAL
						ll		
80	30	PT LEGAL CLERK	\$11.74	1040	\$12,209.60		1040	\$12,209.60
80	32	JURY CLERK	\$11.74	1040	\$12,209.60		1040	\$12,209.60
80	40	CLERK	\$11.74	1950	\$22,893.00		1950	\$22,893.00
80	40	DEP SHF - PATROL	\$21.34	2080	\$44,387.20		2080	\$44,387.20
80	51	CRT SRV OFCR	\$19.28	1950	\$37,596.00		1950	\$37,596.00
80	71	MAINT WRKR	\$13.82	2080	\$28,745.60		2080	\$28,745.60
80	140	DEP SHRFCORR	\$18.66	2080	\$38,812.80	П	2080	\$38,812.80
80	140	DEP SHRFCORR	\$18.66	2080	\$38,812.80		2080	\$38,812.80
80	140	DEP SHRFCORR	\$18.66	2080	\$38,812.80		2080	\$38,812.80
80	140	PT MASTER CONTROL	\$11.74	1040	\$12,209.60		1040	\$12,209.60
80	140	PT MASTER CONTROL	\$11.74	1040	\$12,209.60		1040	\$12,209.60
					· · · · · · · · · · · · · · · · · · ·			
		TOTAL	\$169.12		\$298,898.60			\$298,898.60

UNEMPLOYMENT REPORT

Notice of Claims received - 20 total

 $\overline{5 - \text{Nursing Home}}$

15 - Head Start

Benefit Determinations

1 – Nursing Home benefits allowed

5 – Nursing Home benefits denied

Notice of Pending Appeal

1 – Nursing Home

Employer Protests Filed – 2 total

2 – Nursing Home

Notice of Telephone Hearing

2 – Nursing Home

PAYROLL REPORT

JULY PAYROLL INFORMATION

	7/12/2013		7/26/2013
Pay Group	EE's Paid	Total Payroll \$\$	EE's Paid Total Payroll \$\$
General Corp	506	\$939,134.56	510 \$892,980.36
Nursing Home	221	\$255,031.49	223 \$246,992.05
RPC/Head Start	191	\$243,967.21	179 \$228,046.85
Total	918	\$1,438,133.26	912 \$1,368,019.26

HEALTH INSURANCE/BENEFITS REPORT

July, 2013

Total Number of Employees Enrolled: 720

General County Union:

Single 223; EE+spouse 24.; EE+child(ren) 48.; Family 34 waived 57

Nursing Home Union:

Single 62; EE+ spouse 10; EE+child(ren) 4; Family 1; waived 12

Non-bargaining employees:

Single 125; EE+spouse 27; EE+child(ren) 23; Family 27; waived 43

Life Insurance Premium paid by County: \$1,761.89

Health Insurance Premium paid by County: \$320,322.70

Health Reimbursement Account contribution paid by County: \$17,748.00

TURNOVER REPORT

Turnover is the rate at which an employer gains and loses employees. To get the best picture for turnover the calculations are based on rolling year averages.

General County

July 2013 : 5.33%

July 2013 : 4 of 568 Employees left Champaign County

WORKERS' COMPENSATION REPORT

Entire County Report	<u>July 2013</u>	July 2012
New Claims $7/1 - 7/31$	5	2
Closed Claims 7/1 – 7/31	7	6
Open Claims	29	14

(Ongoing #, total number of open claims as of 7/31)

Year to Date Total (Ongoing #, total number of open claims)

July 2012 14 July 2013 29

EEO REPORTInformation provided based on EEO Tracking forms submitted by Applicant. Figures are for General County only.

July EEO Report - General County Only	Court Services Officer (Probation/Court Services)	Legal Secretary (State's Attorney)	July - TOTALS
Total Applicants Applied	75	14	89
Male	25	1	26
Female	50	13	63
Undisclosed	0	0	0
Caucasian	45	9	54
African-American	25	2	27
Asian or Pacific Islander	1	0	1
Hispanic	4	3	7
Native American or Alaskan Native	0	0	0
Two of more races	0	0	0
Undisclosed	0	0	0
Veteran Status	8	1	9
Disability	0	0	0

ADMINISTRATIVE SUPPORT to COUNTY BOARD REPORT

Agendas Posted	5	Meetings Staffed	1	Minutes Posted	3
Appointments Posted	36	Notification of Appointment	8	Contracts Posted	6
Calendars Posted	5	Resolutions Prepared	22	Ordinances Prepared	0



1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Deb Busey, County Administrator

MEMORANDUM

TO: James Quisenberry, Deputy Chair of Policy, Personnel &

Appointments;

And MEMBERS of the CHAMPAIGN COUNTY BOARD

FROM: Deb Busey, County Administrator, and Job Content Evaluation

Committee

DATE: August 6, 2013

RE: REVIEW and RECOMMENDATION for ADMINISTRATIVE

SECRETARY – AUDITOR'S OFFICE

Pursuant to direction from the Policy, Personnel & Appointments Committee of the Whole on July 18, 2013, the Job Content Evaluation Committee has met to review the position of Administrative Secretary in the Auditor's Office.

REPORT:

The Job Content Evaluation Committee reviewed the submitted position analysis questionnaire and job description that had been completed and approved by County Auditor John Farney. Mr. Farney met with the Committee and explained the current duties assigned to the position. Based upon the information received, the Job Content Evaluation Committee has classified this position as an FLSA non-exempt position assigned to Champaign County Salary Grade D. This is no change from where the position had previously been evaluated. Pursuant to a contract negotiation of the AFSCME contract in 2009-2011, this position – among others within the General Unit – was upgraded to Grade Range E from Grade Range D without commensurate change in job points.

Based on the foregoing, no action is required with regard to the classification of the Administrative Secretary position in the Auditor's Office.

cc: John Farney, Auditor

attachments

CHAMPAIGN COUNTY SALARY ADMINISTRATION PROGRAM JOB CONTENT EVALUATION COMMITTEE REPORT

Date of Request: July 18, 2013

RE-EVALUATION OF POSITION

Department Requesting: Auditor

Position Title: Administrative Secretary

Current Job Points: 311

Current Classification Range: D - Upgraded to E pursuant to Contract Negotiation

FY2013 Current Range Minimum Salary: \$13.82 FY2013 Current Range - Incumbent Salary: \$22.30

Bargaining Unit: AFSCME - General Unit

FLSA Status: Non-Exempt

Job Evaluation Committee Recommendation: No Change

Recommended Title: Administrative Secretary

Re-Evaluated Job Points: 286

Recommended Classification Range: D - Pursuant to Contract Negotiation Required Upgrade to E

Recommended Range Minimum Salary: \$13.82
Contractual Salary for Incumbent: No change

Bargaining Unit: AFSCME - General Unit

FLSA Status: Non-Exempt

Date of Job Evaluation Committee Recommendation: August 6, 2013



1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Deb Busey, County Administrator

MEMORANDUM

TO:

James Quisenberry, Deputy Chair of Policy, Personnel &

Appointments;

Christopher Alix, Deputy Chair of Finance;

And MEMBERS of the CHAMPAIGN COUNTY BOARD

FROM:

Deb Busey, County Administrator, and Job Content Evaluation

Committee

DATE:

August 6, 2013

RE:

REVIEW and RECOMMENDATION for JURY COORDINATOR -

CIRCUIT CLERK'S OFFICE

Pursuant to direction from the Policy, Personnel & Appointments Committee of the Whole on July 18, 2013, the Job Content Evaluation Committee has met to review the proposed position of Jury Coordinator in the Circuit Clerk's Office.

REPORT:

The Job Content Evaluation Committee reviewed the submitted position analysis questionnaire and job description that had been completed and approved by Circuit Clerk Katie Blakeman. Ms. Blakeman met with the Committee and explained the proposed position in terms of responsibilities for oversight and coordination of communications with jurors, the assurance that appropriate numbers of jurors are available for each jury week in the Courts, and supervision of other staff working directly with jurors. Based upon the information received, the Job Content Evaluation Committee has classified this position as an FLSA non-exempt position assigned to Champaign County Salary Grade F. The Committee also recommends it be documented that this position is a 0.67 FTE (2/3 full-time equivalent), based upon the recommended job responsibilities. The salary range for Grade F is documented on the attached Job Evaluation Committee Report, and the full description of job responsibilities is documented on the attached job description.

REQUESTED ACTION for POLICY, PERSONNEL & APPOINTMENTS:

The Policy, Personnel & Appointments Committee recommends to the Finance Committee approval of classification of the Jury Coordinator position in the Circuit Clerk's Office as an FLSA non-exempt position assigned to Champaign County Salary Grade F.

(217) 384-3776

WWW.CO.CHAMPAIGN.IL.US

(217) 384-3896 FAX

REQUESTED ACTION for FINANCE:

The Finance Committee recommends to the County Board approval of the creation of a 0.67 FTE Jury Coordinator position in the Circuit Clerk's Office staffing, said position classified as an FLSA non-exempt position assigned to Champaign County Salary Grade F.

Thank you for your consideration of this recommendation

cc: Katie Blakeman, Circuit Clerk

attachments

CHAMPAIGN COUNTY SALARY ADMINISTRATION PROGRAM JOB EVALUATION COMMITTEE REPORT

Date of Request:

July 18, 2013

EVALUATION OF NEW POSITION

Department Requesting:

Recommended Position Title:

Job Points

FLSA Status:

Recommended Salary Range:

Bargaining Unit Status:

Circuit Clerk

Jury Coordinator

367

Non-Exempt

Grade Range F

Non-Bargaining

FY2013 Salary Range - Grade F

	<u>Hourly</u>	Annual at 0.67 FTE
Minimum	\$14.82	\$19,266.00
Mid-Point	\$18.52	\$24,076.00
Maximum	\$22.23	\$28,899.00

Date of Job Evaluation Committee Recommendation:

August 2, 2013

Champaign County Job Description

Job Title: Jury Coordinator

Department: Circuit Clerk

Reports To: Circuit Clerk

FLSA Status: Non-Exempt

Grade Range: F

Prepared Date: August, 2013

SUMMARY The Jury Coordinator manages and coordinates the jury system for Champaign County, while working as a liaison between the Office of the Circuit Clerk, The Circuit Court, the Judiciary, and potential jurors to provide complete, representative juries for jury trials.

ESSENTIAL DUTIES and RESPONSIBILITIES include the following. Other duties may be assigned.

Directs all communication with Petit Jurors and Grand Jurors. Instructs jurors as to their duties during their jury service. Works with jurors in arranging time off required during the jury term. Prioritizes excuses and sets jurors over to serve in another jury term if appropriate. Coordinates all correspondence with potential jurors.

Prepares and mails all juror questionnaires, maintaining an accurate database of all eligible jurors in Champaign County. Works with Executive Assistant to the Circuit Clerk to communicate number of jurors to be summoned each jury term.

Works closely with the Circuit Clerk to coordinate outreach efforts to the community, educating the general public about jury service, and encouraging a greater participation rate.

Prepares special and recurring departmental reports as to jury related issues by gathering data from various sources, compiling data and producing reports in appropriate format. May prepare reports requiring routine mathematical calculations such as percentages.

Maintains a variety of logs and files of departmental information regarding Petit Jurors and Grand Jurors.

Works with the Jury Commission, Clerk of the Circuit Court, and Administrative Services in processing jurors.

Works directly with the Judges and the court staff in arranging to have jurors present for trials when needed.

Prepares a computer listing for the Auditor to compensate jurors.

Answers questions from attorneys, other office staff and the general public regarding jury issues.

Other duties as assigned.

SUPERVISORY RESPONSIBILITIES May supervise up to two part-time jury clerks.

QUALIFICATIONS To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required.

EDUCATION and/or EXPERIENCE Knowledge, skill and mental development equivalent to completion of four years of high school including training in office equipment and computer software applications, and 1-3 years of responsible secretarial experience, or an acceptable equivalent combination of education and experience. Requires good knowledge of the operations of the criminal justice system.

LANGUAGE SKILLS Ability to read and interpret documents such as governmental regulations, legal documents, operating instructions and procedure manuals. Ability to write routine reports and correspondence, ability to speak effectively with the public and employees of the organization. Requires good knowledge of the English language and spelling.

MATHEMATICAL SKILLS Ability to add, subtract, multiply and divide in all units of measure, using whole numbers, common fractions and decimals.

REASONING ABILITY Ability to apply common sense understanding to carry out instructions furnished in written, oral or diagram form. Ability to deal with problems involving several concrete variables in standardized situations.

CERTIFICATES, LICENSES, REGISTRATIONS As required.

PHYSICAL DEMANDS The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. While performing the duties of this job, the employee is frequently required to sit; use hands to finger, handle, or feel; and talk; or hear. The employee is occasionally required to stand and walk. The employee must occasionally lift and/or move up to 25 pounds. Specific vision abilities required by this job include close vision and distance vision.

WORK ENVIRONMENT The work environment characteristics described here are representative of those an emloyee encounters while performing the essential functions of this job. Normal office conditions. The noise level in the work environment is usually quiet.



1776 East Washington Street, Urbana, Illinois 61802-4581

ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Deb Busey, County Administrator

MEMORANDUM

TO: James Quisenberry, Deputy Chair of Policy, Personnel &

Appointments;

Christopher Alix, Deputy Chair of Finance;

And MEMBERS of the CHAMPAIGN COUNTY BOARD

FROM: Deb Busey, County Administrator, and Job Content Evaluation

Committee

DATE: August 6, 2013

RE: REVIEW and RECOMMENDATION for

SOFTWARE/REPORTING ANALYST – IT DEPARTMENT

Pursuant to direction from the Policy, Personnel & Appointments Committee of the Whole on July 18, 2013, the Job Content Evaluation Committee has met to review the proposed position of Software/Reporting Analyst in the IT Department.

REPORT:

The Job Content Evaluation Committee reviewed the submitted position analysis questionnaire and job description that had been completed and approved by IT Director Andy Rhodes. Mr. Rhodes met with the Committee and explained the proposed position in terms of responsibilities for determining reporting needs of the various officials and offices throughout county government, and the development and design of reports from the county's IT databases to provide those reports to the users. The position is proposed to respond to a trend of increasing need for this type of reporting throughout the software systems owned by the County – Kronos, JANO and New World, and with the accounting and real estate tax cycle systems. Based upon the information received, the Job Content Evaluation Committee has classified this position as an FLSA exempt position assigned to Champaign County Salary Grade H. The salary range for Grade H is documented on the attached Job Evaluation Committee Report, and the full description of job responsibilities is documented on the attached job description.

REQUESTED ACTION for POLICY, PERSONNEL & APPOINTMENTS:

The Policy, Personnel & Appointments Committee recommends to the Finance Committee approval of classification of the Software/Reporting Analyst position in the

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IT Department as an FLSA exempt position assigned to Champaign County Salary Grade H.

REQUESTED ACTION for FINANCE:

The Finance Committee recommends to the County Board approval of the following:

- Addition of one Software/Reporting Analyst position in the IT Department, classified in Champaign County Salary Grade Range H, effective on August 26, 2013
- Deletion of one Desktop Support Technician position in the IT Department effective on August 26, 2013

Thank you for your consideration of this recommendation

cc: Andy Rhodes, IT Director

attachments

CHAMPAIGN COUNTY SALARY ADMINISTRATION PROGRAM JOB EVALUATION COMMITTEE REPORT

Date of Request: July 18, 2013

EVALUATION OF NEW POSITION

Department Requesting: IT

Recommended Position Title: Software/Reporting Analyst

Job Points 601 FLSA Status: Exempt

Recommended Salary Range: Grade Range H
Bargaining Unit Status: Non-Bargaining

FY2013 Salary Range - Grade H

	<u>Hourly</u>	<u>Annual</u>
Minimum	\$18.02	\$35,139.00
Mid-Point	\$22.52	\$43,914.00
Maximum	\$27.03	\$52,708.50

Date of Job Evaluation Committee Recommendation: August 2, 2013

Champaign County Job Description

Job Title:

Software/Reporting Analyst

Department:

Information Technology

Reports To:

IT Director

FLSA Status:

Exempt

Grade Range:

Η

Approved Date:

August, 2013

SUMMARY Evaluates systems and software and provides complex analysis, design and programming support to create useful reports from relational databases. Analyzes operating system and applications software to ensure compatibility with existing systems and procedures.

ESSENTIAL DUTIES AND RESPONSIBILITIES include the following. Other duties may be assigned.

Works with clients to determine reporting needs and designs reports and databases based upon specifications.

Provides report and database design support across mulitple projects and works with multiple teams.

Redesigns reports, as needed, according to change requests, or creates new reports.

Creates complex, optimized data queries; performs quality assurance data checks.

Collaborates with database team members to schedule, run and maintain reports, extract data and coordinate reports deployment and distribution.

Creates technical documentation for database systems.

Develops online and classroom training modules for various departments.

Provides operating system and software application support for various departments.

Reviews technology incidents to ensure optimized service level is achieved.

Researches new technologies for possible implementation and makes recommendations based on findings.

Recommends improvements to existing technologies and methods to improve the quality and timeliness of technical support.

Documents issues, status and resolutions using helpdesk application.

Keeps manager, project teams and department customers informed of activities and problems.

SUPERVISORY RESPONSIBILITIES This job has no direct supervisory responsibilities.

QUALIFICATIONS To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required.

EDUCATION AND/OR EXPERIENCE Associate's Degree or equivalent from a two-year college or technical school and 3-5 years of experience in government systems design and programming.

LANGUAGE SKILLS Ability to read, analyze and interpret general business periodicals, professional journals, technical procedures, or governmental regulations. Ability to write reports, business correspondence and procedure manuals. Ability to effectively present information and respond to questions from groups of managers, clients, customers, and the general public.

MATHEMATICAL SKILLS Ability to add, subtract, multiply, and divide in all units of measure, using whole numbers, common fractions, and decimals. Ability to compute rate, ratio, and percent and to draw and interpret bar graphs.

REASONING ABILITY Ability to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Ability to interpret a variety of instructions furnished in written, oral, diagram, or schedule form.

CERTIFICATES, LICENSES, REGISTRATIONS As required.

PHYSICAL DEMANDS The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. While performing the duties of this job, the employee is frequently required to walk; sit; use hands to finger, handle, or feel; and reach with hands and arms. The employee is occasionally required to stand; and talk; or hear. The employee must occasionally lift and/or move up to 50 pounds. Specific vision abilities required by this job include close vision, color vision, and ability to adjust focus.

WORK ENVIRONMENT The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Normal office conditions. The noise level in the work environment is moderate.



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ADMINISTRATIVE, BUDGETING, PURCHASING, & HUMAN RESOURCE MANAGEMENT SERVICES

Deb Busey, County Administrator

MEMORANDUM

TO:

Christopher Alix, Deputy Chair of Finance;

And MEMBERS of the CHAMPAIGN COUNTY BOARD

FROM:

Deb Busey, County Administrator

DATE:

August 6, 2013

RE:

FINANCIAL IMPACT REPORT on PROPOSED JOB CONTENT

EVALUATION COMMITTEE RECOMMENDATIONS

Pursuant to the Salary Administration Process defined in Chapter 9 of the Champaign County Personnel Policy, you have before you requests for the creation of two new, positions accompanied by the elimination of other positions, and as documented through the Job Content Evaluation Process. To assist you in your evaluation of these requests, I am including information regarding the financial impact of these changes for your information and review.

Jury Coordinator

Currently there are two part-time jury clerk positions. Ms. Blakeman has indicated the addition of the part-time Jury Coordinator position will result in the elimination of one part-time Jury Clerk position. The financial impact follows:

AFFECTED FUND	1100000	Jury Clerk	Jury Coordinator	Difference
	Hourly Rate	\$12.88	\$14.82	\$1.94
General Corporate - Circuit Clerk	Annual Salary	\$13,395.20	\$19,266.00	\$5,870.80
IMRF	IMRF Contribution	\$1,328.80	\$1,911.19	\$582.38
Social Security	Social Security	\$1,024.73	\$1,473.85	\$449.12
General Corporate	Health Insurance	N/A	N/A	\$0.00
Self-Funded Insurance	Unemployment	\$664.35	\$664.35	\$0.00
Self-Funded Insurance	Work Comp	\$73.67	\$105.96	\$32.29
	TOTAL	\$16,486.76	\$23,421.35	\$6,934.59

Ms. Blakeman has reported that she will not require any amendment to her FY2013 budget to accommodate the recommended change. I can also confirm that there will be

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no need to amend the IMRF, Social Security or Self-Funded Insurance Fund Budgets to accommodate this change in expenditure for FY2013.

Software/Reporting Analyst

Currently there are two Desktop Support Technician positions. Mr. Rhodes has requested the addition of one full-time Software/Reporting Analyst position and the elimination of one Desktop Support Technician position. The financial impact follows:

Affected Fund		Desktop Support Technician	Software Reporting Analyst	Difference
	Hourly Rate	\$16.82	\$18.50	\$1.68
General Corporate - IT	Annual Salary	\$32,799.00	\$36,075.00	\$3,276.00
IMRF	IMRF Contribution	\$3,253.66	\$3,578.64	\$324.98
Social Security	Social Security	\$2,509.12	\$2,759.74	\$250.61
General Corporate	Health Insurance	\$6,936.00	\$6,936.00	\$0.00
Self-Funded Insurance	Unemployment	\$664.35	\$664.35	\$0.00
Self-Funded Insurance	Work Comp	\$180.39	\$198.41	\$18.02
	TOTAL	\$46,342.53	\$50,212.14	\$3,869.61

Mr. Rhodes has reported that he will not require any amendment to his FY2013 budget to accommodate the recommended change. I can also confirm that there will be no need to amend the IMRF, Social Security or Self-Funded Insurance Fund Budgets to accommodate this change in expenditure for FY2013.