Resolution	#	4	

WHEREAS, County policies and procedures require both the assigned oversight committee and the Finance Committee to approve all requests to apply for grants from Federal and State agencies, as well as grants from all other entities; and,

WHEREAS, County policies and procedures require that the acceptance of grants of \$30,000 or more must be approved by the full County Board;

WHEREAS, the Department of Public Health	wishes to apply
for and accept an a grant from Illinois Department of P	ublic Health
for the Local Health Protection Grant - Sangamon	program in the amount of
approximately \$367,922.00; and	
WHEREAS, this grant will allow Public Health	to provide
basic protection service for infectious disease, food product	ion, potable water and private sewage disposal; and
WHEREAS, as documented by the approval of this	resolution, Public Health
•	Committee have approved the
Public Health	Department's request to apply for the
Local Health Protection Grant - Sangamon g	grant and the committees recommend that the
County Board approve the acceptance	of this grant, if awarded by
Illinois Department of Public Health	•
NOW, THEREFORE, BE IT RESOLVED that to the state of the s	he Sangamon County Board, in session this approves the acceptance of the grant, which is detailed above, if the grant is
awarded to the County by Illinois Department of Pu The County Administrator is authorized to sign agreement for this grant.	
ATTEST:	
County Clerk	Chairman, Sangamon County Board
Approved by the Public Health	Committee $5/23$, 2022
Approved by the Finance Committee 5/34	, 2022
MAY 1 8 2022	, Chairman
Andy Goleman SANGAMON COUNTY AUDITOR MAY 2 5 2022 Don May	

SANGAMON COUNTY - GRANT APPROVAL FORM

11-2

Number of Employees Personnel Costs (in dollars) Fringe Benefit Cost Other Costs (Equipment, etc)	Current FY	Current FY + 1	Current FY + 2 Date: 05/17/2022					
Number of Employees	Current FY	Current FY + 1	Current FY + 2					
Number of Employees Personnel Costs (in dollars) Fringe Benefit Cost	Current FY	Current FY + 1	Current FY + 2					
Number of Employees Personnel Costs (in dollars)	Current FY	Current FY + 1	Current FY + 2					
Number of Employees Personnel Costs (in dollars)	Current FY	Current FY + 1	Current FY + 2					
	Current FY	Current FY + 1	Current FY + 2					
	Current FY	Current FY + 1	Current FY + 2					
of picase provide details. Incit								
If Yes, please provide details Incl	ude attachment if needed:							
Are there any indirect costs or legal requirements to continue specific pr		grant (i.e., increased workload c	on existing staff,					
If Yes, please indicate the number	and cost of personnel:							
f this grant is approved, will any new	•	⋉ No						
f yes, please state the amount and	lanemal invented							
Anticipated Grant Revenue Amount: Are matching funds required?	:: \$367,922.00 Yes 🖟 No							
A	£267.022.00							
23.73manos ana 35ma (\$20,010								
production, safety of potable wat includes monies for lead poisoning	ter, and private sewage disposal ing ng prevention, (\$65,240.00); pre-e 5.00) for a total award of \$367,922	n the amount of \$249,809.00 exposure prophylaxis (\$27,05). This grant also					
This grant supports local health d	departments to insure basic levels	of protection are provided for	or infectious disease, food					
	-	unty:						
	im and its benefits to Sangamon Cou		This request is for: a new grant renewal or extension of an existing grant					
Grantor: Illinois Department of Pu	ublic Health	iting grant						
Grantor: Illinois Department of Pu	renewal or extension of an exisublic Health	ting grant						