



AGENDA

St. Clair County Board of Commissioners Human Services Committee

**Board of Commissioners' Room
County Administrative Office Building, 2nd Floor
200 Grand River Avenue
Port Huron, MI 48060**

October 6, 2022 at 6:00 PM

-
- 1. Roll Call/Opening/Pledge of Allegiance**
 - 2. Additions/Deletions/Changes to the Agenda**
 - 3. Citizens to be Heard**
 - 4. Updates**
 - 5. Conceptual Initiatives**
 - 6. Old Business**
 - 7. New Business**
 - A. 2023 County Veteran Service Fund (CVSF) Grant Agreement Approval
 - B. Department of Human Services Board - Reappointment
 - 8. Other Human Services Matters**
 - 9. Information Only**
 - A. Health Department September Points of Interest
 - 10. Receive and File Packets**
 - 11. Adjournment**

Committee Chair: Lisa Beedon

Note: The County complies with the "Americans with Disabilities Act" and if auxiliary aids or services are required at the meeting for individuals with disabilities, please contact Administrator/Controller's Office, Suite

203, 200 Grand River Avenue, Port Huron, MI 48060, (810) 989-6900 three days prior to said meeting.

2023 County Veteran Service Fund (CVSF) Grant Agreement Approval

Summary:

ATTACHMENTS:

	Description	Upload Date	Type
📎	2023 County Veteran Service Fund (CVSF) Grant Agreement	9/22/2022	Cover Memo
📎	St. Clair FY23 CVSF Award Packet	9/22/2022	Cover Memo



COUNTY OF ST. CLAIR



OFFICE OF THE ADMINISTRATOR/CONTROLLER

KARRY HEPTING
Administrator/Controller

MEMO

To: Board of Commissioners

From: Marsha M. Adamkiewicz, Staff Accountant and Chris Smith, Veterans Director

Date: September 21, 2022

Re: 2023 County Veteran Service Fund (CVSF) Grant Agreement

We have received notification that St. Clair County has been awarded the FY 2023 County Veteran Service Fund (CVSF) Grant. St. Clair County Veterans Affairs Office applied for this grant in May 2022.

The purpose of this grant program is to assist counties in establishing a County Department of Veterans Affairs, support new initiatives that connect veterans to federal benefits, and/or enhance or expand existing veteran service operations to connect veterans to their benefits.

St. Clair County is being awarded \$93,831 in State funds with no local match. The Veterans Affairs Office plans to use these funds to in the following areas: veterans service emergency relief, outreach events and gas card incentives.

We recommend approval of the FY 2023 County Veteran Service Fund (CVSF) Grant agreement at the October 20, 2022 Board of Commissioners Regular meeting.



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
MICHIGAN VETERANS AFFAIRS AGENCY
LANSING

ZANETA ADAMS
DIRECTOR

September 20, 2022

Karry Hepting
200 Grand River Ave.
Suite 203
Port Huron, MI 48060

Dear Ms. Hepting:

The Michigan Veterans Affairs Agency (MVAA) has accepted St. Clair county's application for the 2023 County Veteran Service Fund (CVSF) Grant. Your grant will be assigned a grant number on October 1, 2022.

The grant award will be funded for up to \$93,831 of approved costs during the grant period of October 1, 2022, to September 30, 2023, once the Grant Agreement is signed by both the county and the State of Michigan.

The county will receive a direct payment of up to \$50,000.00, and any remainder will be paid on a reimbursement basis. The grant award will be carried out under the direction of Elizabeth Sawielski as stated in the grant application.

All grant activities will be supervised by MVAA. For all communications related to the grant, please e-mail mvaagrants@michigan.gov and include your county name and "CVSF" in the subject line.

As a Grantee, you must be registered to do business with the State of Michigan. Registration is available at the following website: www.michigan.gov/SIGMAVSS. Failure to register will delay payment.

To accept the grant award, please review and sign the Grant Agreement and return in its entirety to mvaagrants@michigan.gov no later than 60 days from the date of this letter. Failure to return the signed Grant Agreement may delay payment.

Sincerely,

Kate Preston

Grants Specialist, Michigan Veterans Affairs Agency
Department of Military and Veterans Affairs
PrestonK2@michigan.gov
517-230-8535

Cc: Elizabeth Sawielski
Dena Alderdyce

GRANT AGREEMENT
BETWEEN THE
MICHIGAN DEPARTMENT OF MILITARY AND VETERANS AFFAIRS,
MICHIGAN VETERANS AFFAIRS AGENCY
and ST. CLAIR COUNTY

This Grant Agreement ("Agreement") is made between the Michigan Department of Military and Veterans Affairs, (DMVA) **Michigan Veterans Affairs Agency** ("MVAA"), and **St. Clair County** ("Grantee"). The parties in this agreement will be referred to as Grantor (DMVA or MVAA) and Grantee (County Recipient).

The purpose of this Agreement is to provide funding in exchange for work to be performed for the project named below. The State is authorized to provide grant assistance pursuant to Public Act 192 of 1953 MCL 35.623a. This Agreement is subject to the terms and conditions specified herein.

Project Name: St. Clair County FY23 CVSF Grant

Grant #: TBD

Amount of Grant: \$93,831

Start Date (date executed by DMVA): 10-1-2022
[unless alternate date specified]

End Date: 09/30/2023

GRANTEE CONTACT:

Kerry Hepting

Name/Title

St. Clair County

Organization

200 Grand River Ave. Suite 203

Address

Port Huron, MI 48060

Address

810-989-6900

Telephone number

Fax number

kahepting@stclaircounty.org

E-mail address

Federal ID number – (Required for Federal Funding)

Grantee DUNS number - (Required for Federal Funding)

STATE'S CONTACT:

Kate Preston, Grants Specialist

Name/Title

MVAA

Division/Bureau/Office

3423 N. Martin Luther King Jr. Blvd. (Bldg. 32)

Address

Lansing, MI 48906

Address

517-230-8535

Telephone number

Fax number

PrestonK2@michigan.gov

E-mail address

[Program will add a Remittance address if different than the above.]

The undersigned certify that they are duly elected and authorized officers of the Grantee and that, as such, are authorized to accept this grant on behalf of the Grantee, to obligate the Grantee to observe all the terms and conditions placed on this grant, and in connection with this grant to make, execute and deliver on behalf of the Grantee all grant agreements, representations, receipts, reports, and other instruments of every kind.

FOR THE GRANTEE:

Signature/Title

Date

FOR THE GRANTOR:

Signature/Project Manager

Date

Signature/Christine F. Apostol, Chief Financial Officer

Date

I. PROJECT SCOPE

This Agreement and its appendices constitute the entire Agreement between the Grantor and the Grantee and may be modified only by written agreement between the Grantor and the Grantee.

- (A) The scope of this project is to create a county department of veterans' affairs in certain counties, and to prescribe its powers and duties; and to transfer the powers and duties of the soldier's relief commission in such counties (MCL 35.621 to 35.624).
- (B) Grants are provided to counties for county veteran service operations. "Veteran service operations" means assistance and programming of any kind to meet the needs of the veterans in this state. Veteran service operations include, but are not limited to, providing assistance, programming, and services for the purpose of assisting veterans in this state and providing advice, advocacy, and assistance to veterans, servicemembers, dependents, or survivors by an accredited veteran service officer to obtain United States Department of Veterans Affairs health, financial, or memorial benefits for which they are eligible.
- (C) The scope of this project is limited to the activities specified in Appendix A and such activities as are authorized by the State under this Agreement. Any change in project scope requires prior written approval in accordance with Section III, Changes, in this Agreement. Failure to obtain written prior approval from the State may result in expenses not being approved or reimbursed.
- (D) By acceptance of this Agreement, the Grantee commits to complete the project identified in Appendix A within the time period allowed for in this Agreement and in accordance with the terms and conditions of this Agreement.

II. AGREEMENT PERIOD

Upon signature by the Grantor, the Agreement shall be effective from the Start Date until the End Date on Page 1. The Grantor shall have no responsibility to provide funding to the Grantee for project work performed except between the Start Date and the End Date specified on Page 1. Expenditures made by the Grantee prior to the Start Date or after the End Date of this Agreement are not eligible for payment under this Agreement.

III. CHANGES

Adjustments of budget categories and use of funds may not be made until the MVAA has approved the requested budget modifications. Grantee may adjust the budget categories up to 10 percent of the total approved budget, provided that the total budget amount is not increased. Budget category adjustments exceeding 10 percent of the approved budget must be approved in writing by MVAA and DMVA. The Grantee agrees changes will not be executed until approved and the modification is executed. The Grantee must submit change requests in advance using the form provided by the Grantor. The Grantor reserves the right to deny requests for changes to the Agreement or to the appendices. No changes can be implemented without written approval by the Grantor. All change requests must be received by the Grantor no later than June 30, 2023.

IV. GRANTEE DELIVERABLES AND REPORTING REQUIREMENTS

The Grantee shall submit deliverables and follow reporting requirements specified in Appendix A of this Agreement.

- (A) The Grantee must complete and submit quarterly financial and progress reports according to a form and format prescribed by the Grantor and must include supporting documentation of eligible project expenses. These reports shall be due according to the following schedule:

Reporting Period	Due Date
October 1 – December 31	January 10, 2023
January 1 – March 31	April 10, 2023
April 1 – June 30	July 10, 2023
July 1 – September 30	October 5, 2023

Late report submissions may result in delayed payments and termination of the Agreement.

The forms provided by the Grantor shall be submitted to mvaagrants@michigan.gov. Required documentation (for example one or more of the following: invoice, proof of payment, cancelled checks, credit card receipt or general ledger, refer to Appendix A for further clarification) for expenses must be included with the report.

- (B) If requested, the Grantee shall provide a final project report in a format prescribed by the Grantor. The Grantee shall submit the final status report, including expenditure documentation, along with the final project report and any other outstanding requests for information.
- (C) The Grantee must provide copies of all documents in accordance with Appendix A.
- (D) Marketing/advertising products shall acknowledge “paid for in part or in whole by the Michigan Veterans Affairs Agency” if space allows.

V. GRANTEE RESPONSIBILITIES

- (A) The Grantee agrees to abide by all applicable local, state, and federal laws, rules, ordinances, and regulations in the performance of this Agreement.
- (B) The Grantee, by signature of this Agreement, attests that all persons served under this Agreement are veterans, spouses, or eligible dependents of veterans with separation status in accordance with county policy for eligibility. Documentation of veteran eligibility must be kept on file and available to MVAA upon request.
- (C) All local, state, and federal permits, if required, are the responsibility of the Grantee. Award of this grant is not a guarantee of permit approval by the State.
- (D) The Grantee shall be solely responsible to pay all applicable taxes and fees, if any, that arise from the Grantee’s receipt or execution of this Agreement.
- (E) The Grantee agrees to have internal controls in place to provide reasonable assurance that administrative objectives will be met. In the incidents of emergency assistance, it is expected that grant funds will be funds of last resort. Grantees are also expected to maintain separate accounts and records for each source of funds (e.g., Federal, State, other) used to support the project, and to maintain separate records for matching funds and program income funds if applicable.

- (F) The Grantee agrees to fulfill all matters within the grant guidance as requested and enforced. This may include, but is not limited to, mandatory training(s) for Project Directors and Financial Officers or designees, to learn correct reporting format.
- (G) The Grantee acknowledges that it is a crime to knowingly and willingly file false information with the State for the purpose of obtaining this Agreement or any payment under the Agreement, and that any such filing may subject the Grantee, its agents, and/or employees to criminal and civil prosecution and/or termination of the Agreement.
- (H) Supplanting is not allowed.
- (I) The Grantee will complete training as provided by the MVAA. Travel/training costs may be reimbursed by the grant as budgeted. The areas of training will be relative to processing applications for benefits payable to veterans due to military sexual trauma, post-traumatic stress disorder, depression, anxiety, substance abuse, or other mental health issues. The training is required and will be coordinated with all Grantees providing Veteran Service Officer services to Michigan citizens.

VI. USE OF MATERIAL

Unless otherwise specified in this Agreement, the Grantee may release information or material developed under this Agreement, provided it is acknowledged that the State funded all or a portion of its development.

The State, and federal awarding agency, if applicable, retains a royalty-free, nonexclusive and irrevocable right to reproduce, publish, and use in whole or in part, and authorize others to do so, any copyrightable material or research data submitted under this Agreement whether or not the material is copyrighted by the Grantee or another person. The Grantee will only submit materials that the State can use in accordance with this paragraph.

VII. ASSIGNABILITY

The Grantee shall not assign this Agreement or assign or delegate any of its duties or obligations under this Agreement to any other party without the prior written consent of the Grantor. The Grantor does not assume responsibility regarding the contractual relationships between the Grantee and any subcontractor.

VIII. SUBCONTRACTS

The Grantor reserves the right to deny the use of any consultant, contractor, associate, or other personnel to perform any portion of the project. The Grantee is solely responsible for all contractual activities performed under this Agreement. Further, the Grantor will consider the Grantee to be the sole point of contact regarding contractual matters, including payment of any and all charges resulting from the anticipated Agreement. Verification of any documentation is the responsibility of the grantee; Grantor can request detail at any time if necessary. All subcontractors used by the Grantee in performing the project shall be subject to the provisions of this Agreement and shall be qualified to perform the duties required. Subcontractors shall report activities and services to the Grantee in a form and manner prescribed by the Grantee. The Grantee shall provide signed copies of all subcontracts to the Grantor within 14 days of execution. The Grantee is subject to local procurement policy.

IX. NON-DISCRIMINATION

Under the Elliott-Larsen Civil Rights Act, 1976 PA 453, MCL 37.2101, *et seq.*, the Persons with Disabilities Civil Rights Act, 1976 PA 220, MCL 37.1101, *et seq.*, and [Executive Directive 2019-09](#). Contractor and its subcontractors agree not to discriminate against an employee or applicant for employment with respect to hire, tenure, terms, conditions, or privileges of employment, or a matter directly or indirectly related to employment, because of race, color, religion, national origin, age, sex (as defined in Executive Directive 2019-09), height, weight, marital status, partisan considerations, any mental or physical disability, or genetic information that is unrelated to the person's ability to perform the duties of a particular job or position. Breach of this covenant is a material breach of this Agreement.

X. UNFAIR LABOR PRACTICES

The Grantee shall comply with the Employers Engaging in Unfair Labor Practices Act, 1980 PA 278, as amended, MCL 423.321 *et seq.*

XI. LIABILITY

- (A) The Grantee, not the Grantor, is responsible for all liabilities as a result of claims, judgments, or costs arising out of activities to be carried out by the Grantee under this Agreement, if the liability is caused by the Grantee, or any employee or agent of the Grantee acting within the scope of their employment or agency.
- (B) Nothing in this Agreement should be construed as a waiver of any governmental immunity by the Grantee, the Grantor, its agencies, or their employees as provided by statute or court decisions.

XII. CONFLICT OF INTEREST

No government employee, or member of the legislative, judicial, or executive branches, or member of the Grantee's Board of Directors, its employees, partner agencies, or their families shall benefit financially from any part of this Agreement.

XIII. ANTI-LOBBYING

If all or a portion of this Agreement is funded with federal funds, then in accordance with OMB Circular A-21, A-87, or A-122, as appropriate, the Grantee shall comply with the Anti-Lobbying Act, which prohibits the use of all project funds regardless of source, to engage in lobbying the state or federal government or in litigation against the Grantor. Further, the Grantee shall require that the language of this assurance be included in the award documents of all subawards at all tiers.

If all or a portion of this Agreement is funded with state funds, then the Grantee shall not use any of the grant funds awarded in this Agreement for the purpose of lobbying as defined in the State of Michigan's lobbying statute, MCL 4.415(2). "Lobbying" means communicating directly with an official of the executive branch of state government or an official in the legislative branch of state government for the purpose of influencing legislative or administrative action." The Grantee shall not use any of the grant funds awarded in this Agreement for the purpose of litigation against the Grantor. Further, the Grantee shall require that language of this assurance be included in the award documents of all subawards at all tiers.

XIV. DEBARMENT AND SUSPENSION

By signing this Agreement, the Grantee certifies that it has checked the federal debarment/suspension list at www.SAM.gov to verify that its agents, and its subcontractors:

- (1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or the state.
- (2) Have not within a three-year period preceding this Agreement been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction, as defined in 45 CFR 1185; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
- (3) Are not presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses enumerated in subsection (2).
- (4) Have not within a three-year period preceding this Agreement had one or more public transactions (federal, state, or local) terminated for cause or default.
- (5) Will comply with all applicable requirements of all other state or federal laws, executive orders, regulations, and policies governing this program.

XV. AUDIT AND ACCESS TO RECORDS

The Grantor reserves the right to conduct a programmatic and financial audit of the project, and the Grantor may withhold payment until the audit is satisfactorily completed. The Grantee will be required to maintain all pertinent records and evidence pertaining to this Agreement, including grant and any required matching funds, in accordance with generally accepted accounting principles and other procedures specified by the Grantor. The Grantor or any of its duly authorized representatives must have access, upon reasonable notice, to such books, records, documents, and other evidence for the purpose of inspection, audit, and copying. The Grantee will provide proper facilities for such access and inspection. All records must be maintained for a minimum of [five] years after the final payment has been issued to the Grantee by the Grantor.

All Grantees will be subject to grant monitoring of performance, including data collection according to a form and format prescribed by the Grantor. A Budget, Progress, and Activity Reports will be required quarterly. Grant and performance monitoring will be conducted by MVAA. Grant and performance monitoring will be conducted by MVAA. If the Grantor determines, by audit or otherwise, that a Grantee expended the grant funds received for purposes other than veteran service operations, the Grantor shall reduce the grant disbursement provided to the Grantee in the succeeding fiscal year by an amount equal to the total of all amounts improperly expended. The Grantor reserves the right to require payment of misspent funds if funds are not appropriated, or the Grantee does not apply for appropriated grant funding, in the subsequent year.

XVI. INSURANCE

- (A) The Grantee must maintain insurance or self-insurance that will protect it from claims that may arise from the Grantee's actions under this Agreement.
- (B) The Grantee must comply with applicable workers' compensation laws while engaging in activities authorized under this Agreement.

XVII. OTHER SOURCES OF FUNDING

The Grantee guarantees that any claims for reimbursement made to the Grantor under this Agreement must not be financed by any source other than the Grantor under the terms of this Agreement. If funding is received through any other source, the Grantee agrees to delete from Grantee's billings, or to refund to the Grantor, within 14 business days, the total amount representing such duplication of funding.

XVIII. COMPENSATION

- (A) A breakdown of costs allowed under this Agreement is identified in Appendix A. The Grantor will pay the Grantee a total amount not to exceed the amount on page 1 of this Agreement, in accordance with Appendix A, and only for expenses incurred and paid for within the Start and End Date of this Agreement. All other costs necessary to complete the project are the sole responsibility of the Grantee.
- (B) Expenses incurred by the Grantee prior to the Start Date or after the End Date of this Agreement are not allowed under the Agreement, unless otherwise specified in Appendix A.
- (C) The Grantor will approve reimbursement requests after approval of reports and related documentation as required under this Agreement.
- (D) The Grantor reserves the right to request additional information necessary to substantiate reimbursement requests.
- (E) Payments under this Agreement may be processed by Electronic Funds Transfer (EFT). The Grantee may register to receive payments by EFT at the Contract and Payment Express Website (<http://www.cpexpress.state.mi.us>).

XIX. CLOSEOUT

- (A) A determination of project completion, which may include a site inspection and an audit, shall be made by the Grantor after the Grantee has met any match obligations, satisfactorily completed the activities, and provided products and deliverables described in Appendix A.
- (B) Upon issuance of final payment from the State, the Grantee releases the Grantor of all claims against the Grantor arising under this Agreement. Unless otherwise provided in this Agreement or by State law, final payment under this Agreement shall not constitute a waiver of the Grantor claims against the Grantee.
- (C) The Grantee shall refund to the Grantor any funds allowed by this Agreement that remain unspent by September 30, 2023, within 14 days of the Grantor demand. Monies (debts) which have been due and owing to the Agency more than 180 days may be referred to the Michigan Department of Treasury by the MVAA.

XX. CANCELLATION

This Agreement may be canceled by the Grantor, upon 30 days written notice, due to Executive Order, budgetary reduction, other lack of funding, upon request by the Grantee, or upon mutual agreement by the Grantor and Grantee. The Grantor may honor requests for just and equitable compensation to the Grantee for all satisfactory and eligible work completed under this Agreement up until 30 days after written notice, upon which time all outstanding reports and documents are due to the Grantor and the Grantor will no longer be liable to pay the Grantee for any further charges to the Agreement.

XXI. TERMINATION

(A) This Agreement may be terminated by the Grantor as follows:

(1) Upon 30 days written notice to the Grantee:

- a. If the Grantee fails to comply with the terms and conditions of the Agreement, or with the requirements of the authorizing legislation cited on page 1, or the rules promulgated thereunder, or other applicable law or rules.
- b. If the Grantee knowingly and willingly presents false information to the Grantor for the purpose of obtaining this Agreement or any payment under this Agreement.
- c. If the Grantor finds that the Grantee, or any of the Grantee's agents or representatives, offered or gave gratuities, favors, or gifts of monetary value to any official, employee, or agent of the Grantor in an attempt to secure a subcontract or favorable treatment in awarding, amending, or making any determinations related to the performance of this Agreement.
- d. If the Grantee or any subcontractor, manufacturer, or supplier of the Grantee appears in the register of persons engaging in unfair labor practices that is compiled by the Michigan Department of Licensing and Regulatory Affairs or its successor.
- e. During the 30-day written notice period, the Grantor shall withhold payment for any findings under subparagraphs a through d, above and the Grantee will immediately cease charging to the grant and stop earning match for the project (if applicable).

(2) Immediately and without further liability to the Grantor if the Grantee, or any agent of the Grantee, or any agent of any subcontract is:

- a. Convicted of a criminal offense incident to the application for or performance of a State, public, or private contract or subcontract;
- b. Convicted of a criminal offense, including but not limited to any of the following: embezzlement, theft, forgery, bribery, falsification or destruction of records, receiving stolen property, or attempting to influence a public employee to breach the ethical conduct standards for State of Michigan employees;
- c. Convicted under State or federal antitrust statutes;
- d. Convicted of any other criminal offense that, in the sole discretion of the State, reflects on the Grantee's business integrity; or
- e. Added to the federal or state Suspension and Debarment list.

(A) If the Agreement is terminated, the Grantor reserves the right to require the Grantee to repay all or a portion of funds received under this Agreement.

(B) Termination for Non-Appropriation— the Grantee acknowledges that continuation of the Agreement is subject to appropriation or availability of funds for the grant. If funds are not appropriated or otherwise made available, the Grantor must terminate the Agreement.

XXII. IRAN SANCTIONS ACT

By signing this Agreement, the Grantee is certifying that it is not an Iran linked business, and that its contractors are not Iran linked businesses, as defined in MCL 129.312.

PROGRAM-SPECIFIC BOILERPLATE

XXIII. DISCLOSURE OF INFORMATION

All reports and other printed or electronic material prepared by or for the Grantee under the Agreement will not be distributed without the prior written consent of the Grantor except for items disclosed in response to a Freedom of Information Act request, Court Order or subpoena.

PROJECT-SPECIFIC REQUIREMENTS – APPENDIX A

Standard Language

- (A) Grantee will receive an initial up-front payment up to a maximum of \$50,000 for the CVSF Grant. The remaining balance will be paid on a reimbursement basis.
- (B) If, at the end of the Fiscal Year (September 30, 2023), there are unspent funds remaining from the initial advance payment the Grantee will return the balance of those funds to the State upon demand.
- (C) The Grantee will provide verification of funds spent down from the original advance with the Quarterly Reports in the form and format prescribed by the Grantor. For example, certified time sheets, itemized receipts, invoices, and proof of payment or other appropriate documentation to support and verify expenditures. Examples of acceptable proof of payment include copies of cancelled checks and/or general ledger reports that include dates, transaction IDs, vendor names, and amounts.
- (D) Progress Reports and Quarterly Financial Reports will be due according to the schedule listed.
- (E) All reports will be submitted in the form and format prescribed by the Grantor.
- (F) Failure to properly complete progress reports, financial reports, and claims reports may delay payments.
- (G) Travel rates, lodging, meals, and mileage reimbursement will be paid up to the allowable State of Michigan travel rates (see attached). Expenses above the State of Michigan rates will be the sole responsibility of the Grantee. *Be cautious of using travel sites such as Expedia, if the site cannot provide a detailed invoice for hotel, airfare, car, the expense will not be reimbursed.
- (H) Expenses incurred prior to the Start Date or after the End Date and not authorized by MVAA will not be reimbursed.
- (I) FY2023 funds may not be used to support contracts, services, or purchases prior to October 1, 2022, or beyond September 30, 2023.
- (J) All purchases must be paid for no later than September 30, 2023, with the exception of payroll charged to the grant.
- (K) Obtain a PIV card by September 24, 2023, which will be verified by MVAA and the USDVA.
- (L) Must provide no less than 20 hours of veteran service operations per week unless an exception has been requested of and approved by MVAA.
- (M) All receipts and invoices must include be itemized, dated and include the name and address of the vendor.
- (N) Failure to comply with reporting requirements may result in the State terminating the Agreement.

As the Grantee, it is your responsibility to review the following reporting criteria and supply appropriate supporting documents as it applies to your grant.

Quarterly reports should be succinct and have all Personally Identifiable Information (PII) and Personal Health Information (PHI) redacted prior to submission.

	GRANTEE MUST HOLD PHYSICAL COPIES FOR 5 YRS. FROM DATE OF LAST CVSF GRANT PAYMENT	GRANTEE MUST INCLUDE WITH QUARTERLY REPORTS
Travel/meetings:		
Airline ticket receipt	X	X
Airline baggage fee receipt	X	X
Receipts for transportation (such as tolls, parking, taxis, shuttles, ferries, and public transportation)	X	X
Mileage (if requesting reimbursement) proof (MapQuest or similar), to/from the destination is required if the mileage is being charged by the Grantee directly. If contracting with an outside transportation service, a map is not required.	X	
Training/conference receipt	X	X
Agenda	X	X
Meal receipts	X	X
<i>Travel insurance is not a reimbursable expense.</i> <i>Air travel is limited to commercial coach fare only. Additional costs incurred due to changing travel arrangements for the benefit of passenger preference is at the expense of the County.</i> <i>Air travel must be at the lowest available airfare.</i> <i>Reimbursement of baggage for one piece of personal luggage is allowed; reimbursing overweight or additional baggage fees is not an allowable expense.</i>		
<i>The cost of transportation from the traveler's home or official workstation, whichever is closer, to and from a training, station or terminal is reimbursable.</i> <i>Mileage reimbursement for privately owned and County-owned vehicles for business is based on actual miles traveled.</i> <i>Requests for fuel purchase will be denied (exception only for rental vehicles).</i> <i>Mileage reimbursement for privately owned vehicles may be reimbursable at the SoM premium rate. Local policy prevails.</i> <i>Mileage reimbursement for County-owned vehicles will be at the standard SoM mileage rate.</i>		
<i>Reimbursement for actual costs of meals cannot exceed the applicable maximum published state rate including tax and gratuities.</i>		
County hosted events/meetings:		
Sign-in sheet for meetings where meals are served	X	X
Agenda/program	X	X
Detailed invoices/receipts for food/catering	X	X
Detailed invoices/receipts for other meeting costs	X	X
Proof of payment	X	X
<i>Reimbursement for costs of catered meals cannot exceed the applicable maximum published state rate including gratuities.</i> <i>Sales tax is not reimbursable.</i>		
Emergency relief:		
Veteran/spouse/eligible dependent first name & last initial	X	X
Veteran application/request for service	X	
Dates of military service	X	
Character of discharge	X	
Itemized detailed receipt	X	X
Proof of payment	X	X
Members of review panel (if applicable)	X	
Appeal process (if case denied)	X	

Vouchers/gift cards/gas cards to veterans:		
	GRANTEE MUST HOLD PHYSICAL COPIES FOR 5 YRS. FROM DATE OF LAST CVS F GRANT PAYMENT	GRANTEE MUST INCLUDE WITH QUARTERLY REPORTS
Log with first name, last initial of veteran/spouse/eligible dependent	X	
Veteran application/request for service	X	
Copy of receipt for purchase of cards	X	X
Copy of itemized receipt(s) with store name and date of purchases made by veteran/spouse/eligible dependent with card(s)	X	X
<i>Veterans must return receipts for purchases with gift/gas cards.</i>		
Dental/medical/psychological services:		
Patient first name & last initial	X	X
Date of service and service provided	X	X
Veteran application/request for services (proof of need if applicable)	X	
Proof of payment	X	X
Advertising:		
Copy of subcontract for ad services	X	
Invoice (including dates ads have run)	X	X
Proof of payment	X	X
Vehicle/trailer purchase:		
Copy of Title/registration	X	X
Sales receipt	X	X
Proof of payment	X	X
Transportation services:		
Veteran's first name & last initial	X	X
Veteran application/request for services (proof of need if applicable)	X	
Date of transport	X	X
Copy of subcontract (if applicable)	X	
Invoice if subcontracted; mileage proof with MapQuest (or similar) to/from destination if requesting mileage reimbursement	X	X
Proof of payment	X	X
Service animals:		
Veteran's first name & last initial	X	X
Veteran application/request for service	X	
Detailed invoice including purchase of dog and services	X	X
Description of animal (breed, age, gender)	X	
Dates of service for training	X	
Dates of service for boarding, if applicable	X	
Detailed veterinarian invoice to include dates of service and proof of payment, if applicable	X	X
Proof of payment	X	X
Personal services for veterans:		
Copy of subcontract with provider	X	
Veteran application/request for service	X	
Copy of invoice	X	X
Receipt/proof of payment	X	X



FY2023 COUNTY VETERAN SERVICE FUND GRANT

GRANT APPLICATION TEMPLATE

This is the only approved template for use in submitting the County Veteran Service Fund (CVSF) grant request.

Definitions to determine the proper individual to list as a contact can be found in the Grant Guidance. Your Authorizing Official is the person able to accept funds and enter the County into agreements and contracts. This is usually the Chairperson of the Board of Commissioners.

CONTACT INFORMATION

Applicant County	St. Clair County		
Total Grant Amount	\$93,831		
SIGMA Vendor Code	CV0048270	SIGMA Address Code	046

Project Director	Elizabeth Sawielski
Mailing Address	200 Grand River Avenue, Suite 104, Port Huron, MI 48060
Phone	810-989-6945
E-mail Address	esawielski@stclaircounty.org

Financial Officer	Dena Alderdyce, Accounting Manager
Mailing Address	200 Grand River Avenue, Suite 203, Port Huron, MI 48060
Phone	810-989-6324
E-mail Address	dalderdyce@stclaitcounty.org

Authorized Official	Karry Hepting, C.P.A., Administrator Controller
Mailing Address	200 Grand River Avenue, Suite 203, Port Huron, MI 48060
Phone	810-989-6900
E-mail Address	KAHepting@stclaircounty.org

All assistance, programming, and service initiatives need to be submitted with separate project narrative, budget narrative, and Excel request forms. Please duplicate the Project Detail, Budget Narrative, and Excel request sheets as needed for each initiative/program/salaries your county is seeking funding. Attach pages as needed.

Grant amount requested above is the TOTAL of ALL initiatives/programs/salaries.

PROJECT DETAIL

Project Title	County Office Improvements
Grant Focus Area	Connecting veterans to benefits

PROJECT NARRATIVE

Detailed project narrative must be provided below:

St. Clair County Department of Veterans Affairs would like to add an upgrade to our office and promote a safe workspace for our staff and veterans that walk-in by adding a non-slip mat at the entrance.

BUDGET NARRATIVE/JUSTIFICATION

Budget Narrative/Justification must be provided below. In addition, an **itemized list** of all expenditures, including salary if applicable, must be provided in the Excel budget templates provided. Add Excel spreadsheets as an attachment for each initiative.

St. Clair County Department of Veterans Affairs is requesting \$120.00 for a non-slip mat.

1 - 3x5 Non-slip mat at \$120.00 = \$120.00

One initiative per page. Make additional sheets for each initiative.				
Applicant County		Grant Number		SIGMA Vendor Code
St. Clair County		FOR MVAA USE ONLY		CV0048Z70
I. Project / Initiative Name				
County Office Improvement				
II. Project Total (Amount requested for this initiative)				
				\$120.00
III. Expenditure Details				
Item / Service Description	Quantity	Cost Per Unit	Cost	
3x5 non-slip mat	1	\$120.00	\$120.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
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			\$0.00	
			\$0.00	
			\$0.00	
			Total	\$120.00



LOGO MAT PRICING

FREE ARTWORK SETUP
FREE DIGITAL PROOF
STANDARD PROCESSING 2 WEEKS
CUSTOM SIZES WILL BE QUOTED

MOST POPULAR SIZES

2ft X 3ft mat - \$90.00

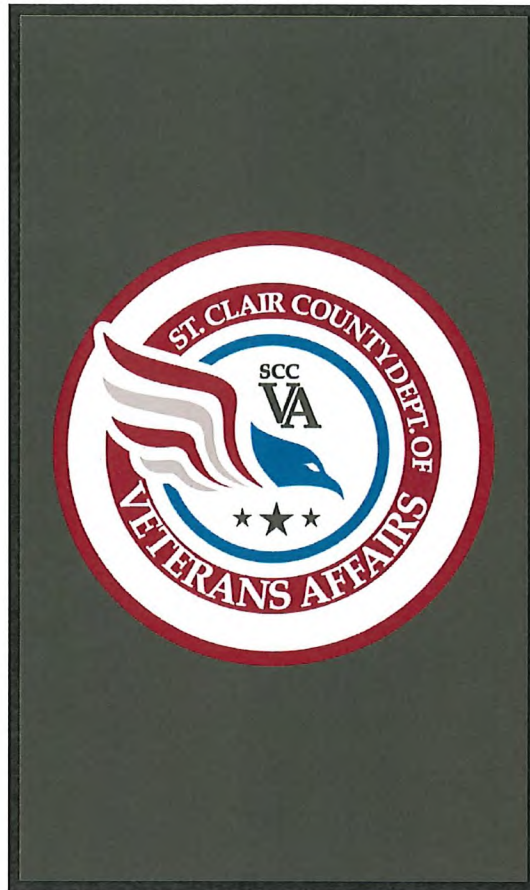
3ft X 5ft mat - \$120.00

3ft X 10ft mat - \$200.00

4ft X 6ft mat - \$180.00

4ft X 8ft mat - \$270.00

6ft X 8ft mat - \$380.00



FINISHED MATS ARE SIZED TO INDUSTRY STANDARD WITH AN ADDITIONAL 3% VARIANCE

DESIGN NAME: St. Clair County VA 3x5' Portrait

COLORS BG:  388 C3:  140 C5:  120 C2:  107 C4:  112	DESIGN NOTES TYPE: Walk Off Logo Mat SIZE: 3x5' STYLE: Portrait REFERENCE: 135412727 BORDER TYPE: Normal Border DESIGNER NOTES: I hope this is what you wanted. In case of any change please resend this with a hand drawing markup. Thanks! APPROVED: _____	
---	--	--

Please refer to our terms and conditions for the supply of goods. Please note that the manufacturing process may result in minor variations between color and definition of the artwork above and on the finished product. For exact colors please refer to Millennium's logo carpet swatches.

PROJECT DETAIL

Project Title	Marketing-Advertising
Grant Focus Area	Connecting veterans to benefits

PROJECT NARRATIVE

Detailed project narrative must be provided below:

The goal of the marketing and advertising campaign is to advertise and raise awareness of the benefits and resources available to veterans and their dependents in St. Clair County. The campaign will direct them to St. Clair County Department of Veterans Affairs so that accredited Veteran Service Officers (VSOs) can advise, assist, and advocate for them to receive earned benefits.

Various media platforms will be used to target veterans from any era.

Radio - WGRT 102.3FM, RadioFirst: Q-Country 107, 96.9 WBTI, ROCK 105.5, 1380 WPHM, 92.7 WHLX The Hills

Social media - Facebook and Instagram posts

Print ads - Vacationland, Thumbcoast Senior, Chamber of Commerce booklet, Blue Water Senior Options

Digital ads - Chamber of Commerce online directory, Local IQ, EBWTV

Printed materials - brochures, event fliers, posters, plaques, etc.

BUDGET NARRATIVE/JUSTIFICATION

Budget Narrative/Justification must be provided below. In addition, an **itemized list** of all expenditures, including salary if applicable, must be provided in the Excel budget templates provided. Add Excel spreadsheets as an attachment for each initiative.

St. Clair County is requesting \$60,045 for Marketing-Advertising

WGRT 102.3 = \$10,000

62-thirty second spots plus 2 bonus spots each Saturday and Sunday

Web Link-on rotating advertisers at WGRT.com

DJ/Media Support

\$833.33/month for 12 months = \$10,000

RadioFirst = \$16,588

Jan.- March: 300-thirty second on-air and live stream commercials on all 5 stations (Q-Country 107 - \$1800, 96.9 WBTI - \$1020, ROCK 105.5 - \$660, 1380 WPHM - \$660, 92.7 WHLX The Hills - \$300)

\$1800 + \$1020 + 660 + 660 + \$300 = \$4,440

April-May: 45-thirty second on-air & live stream commercials on Q-Country 107 @\$50 (\$2250), 20 promotional announcements, 6 live breaks, link to web site, Facebook mention (\$749)

\$2,250 + \$749 = \$2,999

June-August: 100-thirty second and live stream commercials on Q-Country 107 @\$45 (\$4500), 100 promotional announcements over all stations, 8 weeks of web site exposure and 2 Facebook posts (\$450)

\$4500 + \$450 = \$4,950

Sept-Nov: 80-thirty second on-air and live commercials on Q-Country 107 @\$45 each (\$3600), logo on feature page, 2 Facebook posts, 50 promotional announcements (\$599)

\$3600+\$599 = \$4,199

EBWTV (Blue Water Television Network) = \$100/wk = \$5,200

2 on location feature stories, 10 community news features, 15 second commercial, one spotlight, 15 second commercial monthly, company link to web site

ILOCAL IQ: \$15,000

Social media ad campaign: (daily reach of 13,000-24,000 people per day) \$1191/month x 12 months = \$14,292. Listings management campaign: \$59/month x 12 months = \$708

\$14,292 + \$708 = \$15,000

PRINT ADS = \$3,257

Vacationland (May '23-'24): \$649

Chamber of Commerce (print & online directory) = \$608

Thumbcoast Senior magazine: quarter page ad for six issues (\$250 x 6) = \$1,500

Blue Water Senior Options newspaper: \$500

PRINTING OF MARKETING AND OUTREACH MATERIALS = \$10,000

Printing of event fliers, event posters, office brochures, and other materials including but not limited to recognition plaques, yearly reports, etc.

One initiative per page. Make additional sheets for each initiative.					
Applicant County		Grant Number		SIGMA Vendor Code	
St. Clair County		FOR MVAA USE ONLY		CV0048270	
I. Project / Initiative Name					
Marketing-Advertising					
II. Project Total (Amount requested for this initiative)					
					\$60,045.00
III. Expenditure Details					
Item / Service Description		Quantity	Cost Per Unit	Cost	
WGRT 102.3		12	\$833.33	\$10,000.00	
RadioFirst		11	\$1,508.00	\$16,588.00	
EBWTV		52	\$100.00	\$5,200.00	
Ilocal IQ		12	\$1,250.00	\$15,000.00	
Print Ads		1	\$3,257.00	\$3,257.00	
Printing of marketing/outreach materials		1	\$10,000.00	\$10,000.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
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				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
			Total	\$60,045.00	



St. Clair County Department of Veteran's Affairs Annual Contract

Spot Package

Option #1

62-thirty second spots plus 2 bonus spots on each Saturday & Sunday
Approximately \$683.33 per month

Option #2

38-sixty second spots plus 2 bonus spots on each Saturday
Approximately \$683.33 per month

Web Link-on Rotating Advertisers at WGRT.com

\$50.00 per month

DJ/Media Support

\$100.00 per month

* Priority guest opportunity on WGRT's Local News Podcast on Memorial Day and Veteran's Day. You provide guests and we will feature them on our radio show and podcast the Friday before each of those holidays.

* Your events will be featured on our website's Events page and Community Bulletin Board Announcements. Add your events to our website, and we will prioritize them for on-air announcements.

* Business of the Week featured business in our Weekly Beat E-Newsletter

* Our community engagement team finds creative ways to support our customers year-round. We may attend one of your events, visit your business, or feature you in a social media post. We love finding fun ways to support our customers!

Grand Total Annual Package \$10,000 at approximately 833.33/ month for 12 months





2023 ANNUAL BREAKDOWN

One Day Sale—Plan C—\$4,440

⇒ Commercials run January—March

⇒ (60) :30 On-air & Live Stream Commercials on Q-Country 107 @ \$30 each

⇒ \$30.00 X 60 Spots = \$1,800.00

⇒ (60) :30 On-air & Live Stream Commercials on 96.9 WBTI @ \$17 each

⇒ \$17.00 X 60 Spots = \$1,020.00

⇒ (60) :30 On-air & Live Stream Commercials on ROCK 105.5 @ \$11 each

⇒ \$11.00 X 60 Spots = \$660.00

⇒ (60) :30 On-air & Live Stream commercials on 1380 WPHM @ \$11 each

⇒ \$11.00 X 60 Spots = \$660.00

⇒ (60) :30 On-air & Live Stream commercials on 92.7 WHLX The Hills @ \$5 each

⇒ \$5.00 X 60 Spots = \$300.00

⇒ \$1,800.00 + \$1,020.00 + \$660.00 + \$660.00 + \$300.00 = \$4,440.00

Box Office Blast—\$2,999

⇒ Commercials run April—May

⇒ (45):30/:60 On-air & Live Stream Commercials on Q-Country 107 @ \$50 each

⇒ \$50.00 X 45 Spots = \$2,250.00

⇒ 20 Promotional announcements about your Box Office Blast

⇒ 6 Live breaks during Box Office Blast

⇒ Link on the Q-Country (WSAQ) website

⇒ Facebook mention on Q-Country about remote

} = \$749.00

⇒ \$2,250.00 + \$749.00 = \$2,999.00

Vacationland—\$649

⇒ May 2023—March 2024

⇒ 1/8 Page = \$649.00

Boats & Boots—\$4,950

⇒ Commercials run June—August

⇒ (100) :30/:60 On-air & Live Stream Commercials on Q-Country 107 @ \$45 each

⇒ \$45.00 X 100 Spots = \$4,500.00

⇒ 100 Promotional announcements over all stations

⇒ 8 Weeks of website exposure on Q-Country

⇒ Inclusion in a minimum of 2 Facebook post

} = \$450.00

⇒ \$4,500.00 + \$450.00 = \$4,950.00

5 Station Digital Plan—\$14,460

⇒ Banners to run October 2023—October 2024

⇒ EACH MONTH:

⇒ (50) :30 Live Stream commercials & Rotating Top Banner ad on 96.9 WBTI @ \$200 a month

⇒ \$200.00 X 12 months = \$2,400.00

⇒ (50) :30 Live Stream commercials & Rotating Top Banner ad on Q-Country 107 @ \$460 a month

⇒ \$460.00 X 12 months = \$5,520.00



2023 ANNUAL BREAKDOWN CONTINUED

~~5 Station Digital Plan Continued—\$14,460~~

⇒ Banners to run October 2023—October 2024

⇒ EACH MONTH:

⇒ (50) :30 Live Stream commercials & Rotating Top Banner ad on Rock 105.5 @ \$130 a month

⇒ \$130.00 X 12 months = \$1,560.00

⇒ (20) :30 On-air & Live Stream commercials & Rotating Top Banner ad on 92.7 WHLX @ \$160 a month

⇒ \$160.00 X 12 months = \$1,920.00

⇒ (50) :30 Live Stream commercials & Rotating Side Banner ad on 1380 WPHM @ \$255 a month

⇒ \$255.00 X 12 months = \$3,060.00

⇒ \$2,400.00 + \$5,520.00 + \$1,560.00 + \$1,920.00 + \$3,060.00 = \$14,460.00

Honoring Heroes—\$4,199

⇒ Commercials run September—November

⇒ (80) :30/:60 On-air & Live Stream Commercials on Q-Country 107 @ \$45 each

⇒ \$45.00 X 80 Spots = \$3,600.00

⇒ Logo featured on contest page

⇒ Minimum of 2 Facebook posts

⇒ Minimum 50 promotional announcements

⇒ \$3,600.00 + \$599.00 = \$4,199.00

} = \$599.00

~~96.9 WBTI—Christmas Music—Shine—\$799~~

⇒ Commercials run late November—December

⇒ (30) :30 On-air & Live Stream Holiday Greetings on 96.9 WBTI @ \$25 each

⇒ \$25.00 X 30 Spots = \$750.00

⇒ Minimum of 10 promotional announcements on all stations @ \$49.00

⇒ \$750.00 + \$49.00 = \$799.00

Total Value: \$59,734

**Total Investment:
\$32,496**

This station does not discriminate in the sale of advertising time, and will accept no advertising which is placed with an intent to discriminate on the basis of race or ethnicity. Advertiser hereby certifies that it is not buying broadcasting air time under this advertising sales contract for a discriminatory purpose, including but not limited to decisions not to place advertising on particular stations on the basis of race, national origin, or ancestry.

Authorization

RadioFirst
PORT HURON

Date

RadioFirst Port Huron, 808 Huron Avenue, Port Huron, MI 48060 | Phone: 810.982.9000 | Fax: 810.488.8234

ebw.tv General Advertising Package

Business Name: St. Clair County Department of Veterans Affairs

Contact Person: Elizabeth Sawielski

Phone: (810) 989-6945

Advertising Package:



Premier+

\$100 a week (\$5200/yr - can be billed monthly, quarterly or pay in full)

Agreement:

St. Clair County Department of Veterans Affairs, 200 Grand River Ave, 48060 agrees to a one year (52 weeks) **Premier+** General Advertising Package with *ebw.tv*.

ebw.tv will fulfill the contract as described on page #2 of this agreement from

September 1, 2022 through August 30, 2023

Invoices for services provided by *ebw.tv* are payable to:
Blue Water Television Network, LLC
2235 Woodstock Dr.
Port Huron, MI 48060

ebw.tv General Advertising Package

ebw.tv Premier+ Sponsor

\$100 a week (\$5200/yr - can be billed monthly, quarterly or pay in full)

News Feature

- 2 on location feature stories about your business or event you like to promote
- 10 community news features with your business name, linked to your business on *ebw.tv* website and mentioned as a sponsor on the Facebook post.

15 second commercial

- includes a professional voice over, music background, titles and graphics
- you provide - images, business logo, script or text
- upgrade \$200 for video/photos produced on-location of your business

Spotlight

- You or a guest you provide will be interviewed on *ebw.tv* Spotlight, an interview program highlighting local businesses, non-profits and economic development in our community.

Spotlight - Ad Rotation

- your 15 second commercial plays monthly on *ebw.tv* Spotlight

Website

- Your company linked on *ebw.tv* website

For St. Clair County Dept. of Veterans Affairs

Nancy Deising _____

Date _____

For ebw.tv:

John Fleming

5/11/2022



Sawielski, Elizabeth

From: Faulk, Rita <RFaulk@localiq.com>
Sent: Monday, May 09, 2022 2:42 PM
To: Sawielski, Elizabeth; Smith, Chris
Cc: Gougeon, Lori; Flint, David
Subject: Local IQ Marketing Budget October 1, 2022 thru September 30, 2023
Attachments: SCC Dept of Vet Affairs Listings Mgmt 5-9-22.pdf

EMAIL ORIGIN EXTERNAL: Use proper judgment and caution when opening attachments, clicking links, or responding to this email.

Hello Liz,

We can certainly utilize the new budget of \$15,000 in the very best way possible to meet your needs and goals. As mentioned on the phone, we could break this down to a monthly spend of **\$1250**.

Beginning October 1, 2022 thru September 30, 2023:

- **Social Media Ad Campaign: \$1191 per month x 12 months = \$14,292. Total**

Covering an audience of all of St. Clair County using a combination of Facebook and Instagram platforms, including all ages and genders. We would provide a Daily Reach of 13,000-24,000 people per day. The monthly impressions (how many times your ads are delivered each month) would be 107,000 to 146,206. (**Reference the grader tool to give all of the accurate details).

- **Listings Management Campaign: \$59 per month x 12 months= \$708. Total**

Keeping all of the directory listings details consistent every month. Thereby following Google Best Practices, increasing the Quality Score and raising the Organic Google Rankings so St. Clair County Department of Veteran Affairs shows up consistently and as high as possible when people are searching online for Veteran Services. (**See Att. for further details).

- **Total Monthly Spend: \$1250 x 12 = \$15.000 Annual Spend**

****GRADER TOOL:**

Sawielski, Elizabeth

From: Joyce Doyle <jdoyle@bluewaterchamber.com>
Sent: Thursday, May 05, 2022 1:30 PM
To: Sawielski, Elizabeth
Subject: Fwd: SCCVA

EMAIL ORIGIN EXTERNAL:

Hi Liz,
your spend with the chamber:
membership \$249/year BUT if you add \$60 to the yearly fee we can link to your website and your social media
- great perk of membership!
print and online directory ad \$608/year
you have the odd event fee, \$20-\$40 per chamber event.
Let me know if you need more information.
Thank you
Joyce Doyle
cell 810-858-2896

----- Forwarded message -----

From: **Thelma Castillo** <tcastillo@bluewaterchamber.com>
Date: Thu, May 5, 2022 at 11:48 AM
Subject: Fwd: SCCVA
To: Joyce Doyle <jdoyle@bluewaterchamber.com>

----- Forwarded message -----

From: **Sawielski, Elizabeth** <esawielski@stclaircounty.org>
Date: Thu, May 5, 2022 at 11:28 AM
Subject: SCCVA
To: Thelma Castillo <tcastillo@bluewaterchamber.com>

Thelma,

I don't have Joyce's email address. Can you guys just send me over how much we spend each year with you and what it includes? I need to include it in a grant request I'm working on and they just sprang in on me with a 2 week deadline... Ekk!

Thank you,

Liz

ThumbCoast SENIOR

CONTENT

- 2 From the Editor
- 4 Veronica & Walter Smith
- 6 Mark Maki
- 7 Margaret Brown & Fred Winchell

VOLUME 1, NUMBER 1 SPRING 2022

ThumbCoast Senior is published quarterly by The Write Company, 511 Le Salle Blvd., Fort Huron, MI 48060. Circulation 3,000.

Editor & Publisher:

Patti Samar, owner, The Write Company

Advertising, questions, comments or story ideas:
Email: Patti.Samar@ajl.com

Mission:

ThumbCoast Senior is the premiere publication for people 50 years or better who live, work and play in the Blue Water Area of Michigan.

Its stories and features are written and designed to be inspirational, motivational and encouraging.
www.ThumbCoastSenior.com

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The Write Company is a writing, graphic design and marketing consultation firm. View our online portfolio at: www.TheWriteCompany.net

THE WRITE COMPANY
Copywriting & Design, Brand Identity, Logo, Marketing Consultation

www.TheWriteCompany.net

**Blue Water
PUBLISHING**
Creating the Blue Water Area's Voice



ThumbCoast Senior is proudly an inclusive, LGBTQ-friendly publication that promotes diversity of all kinds.

ThumbCoast SENIOR

Should your business reach the senior market?

- Seniors control 70% of the nation's wealth. (Source: AARP)
- Seniors are the wealthiest age cohort in the world, together with older professionals (45-64 years). (Source: Brookings Institution)
- Older adults have much higher rates of health services utilization than do non-elderly persons (Source: National Institutes of Health)
- Age-55-plus households account for nearly half (47 percent) of all spending on home renovations, about \$90 billion a year (Source: AARP)
- Half of those buying a new vehicle in 2017 were over the age of 55 compared with around 30 percent in 2007. (Source: Green Car Congress)

Publication information:

- **Publication schedule:** Bi-Monthly. Magazine will be distributed in: January/March/May/July/September/November
- **First issue:** May 2022
- **Distribution:** 5,000+ each issue: print & digital
- **Distributed to** all advertisers; chambers of commerce in the Blue Water Area; and selected locations where seniors hang out
- **Available to download online** at www.ThumbCoastSenior.com
- **Your ad will connect** directly to your business website with a click
- **All ads provided** to ThumbCoast Senior must be CMYK color and 300 dpi/pdf
- **All ads must be paid in full prior to printing.**

Bi-Monthly Magazine

January/March/May/July/
September/November

Ad Deadline: First Day of the Month of Publication



Business directory ad

\$125 (per issue)

(no bleeds allowed & business card information/format ONLY allowed)
3.625" wide x 7.406" tall
FREE ONLINE AD on the TCS website!

one-year
contract discount:
10% off!
billed per issue



Quarter page ad:

\$250 (per issue)

3.625" wide x 4.8125" tall
FREE ONLINE AD on the TCS website!

one-year
contract discount:
10% off!
billed per issue



Half page ad:

\$500 (per issue)

7.5" wide x 4.8125" tall
FREE ONLINE AD on the TCS website!

one-year
contract discount:
10% off!
billed per issue



Full page ad:

\$1,000 (per issue)

7.5" wide x 4.8125" tall
FREE ONLINE AD on the TCS website!



Full page Adveritorial:

\$1,500 (per issue)

Ad size without bleed:
~7.5" wide x 10" tall
We will write a 400 word story about your business, and take a photo to accompany the story. For less, it will be marked "Paid advertisement" at the bottom.
FREE ONLINE AD on the TCS website!

Magazine Display Ad Creation

\$100 for 1x ads; **FREE** with multiple insertion order

What are you waiting for? Contact us today:

Patti Samar, Editor/Publisher
pjsamar@aol.com

BUDGET NARRATIVE/JUSTIFICATION

Budget Narrative/Justification must be provided below. In addition, an **itemized list** of all expenditures, including salary if applicable, must be provided in the Excel budget templates provided. Add Excel spreadsheets as an attachment for each initiative.

St. Clair County Department of Veterans Affairs is requesting \$12,331 for Marketing-Promotional Items

Items to be purchased:

4" Military window clings

- (5 branches x 500 each @ .93 cents) = approx \$2,325

Tumblers

- 125 X \$15.00 = \$1,875 + setup/handling/art & shipping \$350 = 2,225

Non-woven Hit Sports Pack (drawstring backpack)

- 250 x \$4.31 + set-up \$320 = \$1397

Post-it custom printed notepad 3" x 4"

- 1,000 x .46 + set-up \$30 = \$490

Zinc 2" Challenge coin nickel plating

- 250 x \$10.00 = \$2,500

3/8" Custom silkscreen ribbed polyester lanyards

- \$1.20 x 500 + set-up \$90 = \$690

Coin pouch with ID window and split ring

- \$2.04 x 500 + \$190 set-up = \$1,210

3x3 Round corner magnet

- .43 x 1000 = \$430

Pens

- .52 x 1000 + set-up \$15 = \$535

Office staff branded clothing

- 7 qty. x \$22.00 each short sleeve polo shirts with county veteran logo = \$154

- 7 qty. x \$25.00 each long sleeve polo shirts with county veteran logo = \$175

Set-up fee not to exceed \$200.00

Delivery

- not to exceed \$50.00

Budget Request

[illegible]

Sawielski, Elizabeth

From: Cara Warczinsky-Furness <cara@allegraporthuron.com>
Sent: Thursday, May 12, 2022 1:48 PM
To: Sawielski, Elizabeth
Cc: Chuck Warczinsky
Subject: Promotional Product Pricing

EMAIL ORIGIN EXTERNAL: Use proper discretion and caution when opening attachments, clicking links or responding to this email.

Hi Liz,

Chuck asked me to verify the promotional products pricing for your budget. I do want to remind you that these prices do frequently change so I cannot guarantee that they will be the same when you order them. I also wanted to let you know that the multiple color logo does impact and change the pricing as you will see below. Most of the prices on our website are typically for one color only.

Non-woven Hit Sports Pack:

250 would currently be \$4.31 each plus \$320 setup plus shipping and tax (if applicable). The multiple colors increase the setup and per piece cost on this particular item.

Zinc 2" Challenge Coin Nickel Plating:

250 will be around \$10.00 each - without having the exact artwork they were unable to give me an exact price for a multiple color imprint due to their production process but as of right now we should be safe under \$10.00 (again depending on what prices do this could change). Shipping and tax (if applicable) would be additional.

Custom Lanyard - I switched to the same vendor that I had previously quoted from just with the new size because we are familiar with their quality. That vendor doesn't have a 3/8" size so I included the 1/2" and 5/8" sizes. Let me know if the 3/8" is crucial and I will requote it:

500 1/2" lanyards would currently be \$1.17 each plus \$90 setup plus shipping and tax (if applicable).

500 5/8" lanyards would currently be \$1.20 each plus \$90 setup plus shipping and tax (if applicable).

Post-it custom printed notepad 3" x 4":

1000 would currently be \$0.46 each plus \$30 setup plus shipping and tax (if applicable).

Coin pouch with ID window and split ring - this particular item has a two color maximum for imprint so I based pricing on that.

500 would be \$2.04 each plus \$190 setup charge for the two colors plus shipping and tax (if applicable).

If you want me to requote anything using the one-color logo imprint, please let me know. We have some customers who will do that with some of their products depending on the particular use and logo requirements in order to reduce costs a bit. Please let me know if you have any questions or need any other information. Again, these prices do change periodically so I can't guarantee that they will be the same when you are ready to order. Thanks for the opportunity to quote, Liz! Have a great day!

Cara Warczinsky-Furness

PROJECT DETAIL

Project Title	Veteran Outreach and Engagement Activities
Grant Focus Area	Increase Service Provisions; Connect Veterans to Benefits

PROJECT NARRATIVE

Detailed project narrative must be provided below:

St. Clair County Department of Veterans Affairs will host multiple veteran outreach and engagement events between October 1, 2022 and September 30, 2023.

The goal of these events will be to connect with St. Clair County veterans, dependents, and veteran connected families to inform and educate on benefits, programs, and resources available to them. St. Clair County Department of Veterans Affairs will invite other county veteran organizations, veteran service providers, and veteran program supporters to set-up a booth, table, or give them an opportunity to speak and offer services on sight.

Emphasis will be on benefits and resources that promote mental and physical health, education, employment, and general quality of life. County VSOs will be available at these events to answer questions and educate the audience. Food will be offered appropriate to the event and time of day.

In addition to these outreach and engagement activities we would like to offer a gas card incentive to connect new veterans to available benefits. We plan to hold two incentive events in 2023 and provide a \$20 gas card to every veteran that is new to the VA process and comes into the St. Clair County Department of Veterans Affairs for an appointment with a VSO.

BUDGET NARRATIVE/JUSTIFICATION

Budget Narrative/Justification must be provided below. In addition, an **itemized list** of all expenditures, including salary if applicable, must be provided in the Excel budget templates provided. Add Excel spreadsheets as an attachment for each initiative.

St. Clair County Department of Veterans Affairs is requesting \$6,100 for veteran outreach and engagement events.

We are planning to hold 12 engagement activities over a 12 month period with attendance of approximately 30 individuals per event. Events are expected to be catered at no more than \$10.00 per person which falls under the Michigan State Rate for catering. Food is an effective way to draw an audience, create a welcoming environment, and to encourage conversation and camaraderie.

12 months x 30 people x \$10 per person = \$3,600

Requesting funds to hold gas card incentives to connect new veterans to available benefits. Planning two incentive events in 2023 to provide \$20 gas cards to every veteran that is new to the VA process and comes into the St. Clair County Department of Veterans Affairs for an appointment with a VSO.

Speedway Gas Cards

125 cards x \$20 each = \$2,500

One initiative per page. Make additional sheets for each initiative.					
Applicant County		Grant Number		SIGMA Vendor Code	
St. Clair County		FOR MVAA USE ONLY		CV0048270	
I. Project / Initiative Name					
Veteran Outreach and Engagement Activities					
II. Project Total (Amount requested for this initiative)					
					\$6,100.00
III. Expenditure Details					
Item / Service Description		Quantity	Cost Per Unit	Cost	
Catering		360	\$10.00	\$3,600.00	
Gas Cards		125	\$20.00	\$2,500.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
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				\$0.00	
				\$0.00	
				\$0.00	
			Total	\$6,100.00	



810-966-8371
www.ChefShells.com

GOOD FOOD — THAT'S WHAT WE DO!
TASTE AND SEE THE DIFFERENCE!

Breakfast Menu Favorites

Donuts & Coffee

\$3 per person

Fresh Homemade Donuts
Coffee

Continental

\$8.50 per person

Assorted Pastries with Spreads
Fresh Fruit & dip
Coffee & Juice

Hot Breakfasts

\$13 per person

All of our hot breakfasts include Fresh fruit & dip, Coffee, and Juice.

Hearty Start

Buttermilk Pancakes or French Toast with Maple Syrup
Scrambled Eggs
Bacon & Sausage

American Traditional

Scrambled eggs
Bacon & Sausage
Hash Brown Potatoes
Muffins & Bagels

Upscale Breakfast

Quiche Lorraine
(spinach, bacon, cheddar swiss cheese)
Muffins, bagels & croissants

We can custom create any menu to meet your needs.
Prices do not include 18% service fee or 6% Michigan State sales tax.
Paper Products & Local Delivery are complimentary.

*-10%
VETERAN
DISCOUNT*



810-966-8371
www.ChefShells.com

GOOD FOOD — THAT'S WHAT WE DO!
TASTE AND SEE THE DIFFERENCE!

Lunchtime Favorites

Boxed Lunch - \$11.00 per person

Sandwich:
Choice of Ham,
Turkey or Roast Beef on
Croissant, Wrap, or Bread

Bag of Chips
Cookie
Drink

Lunch / Lite Dinner \$12.00 Per Person

Choose 1 of the following:

- Roadkill Roy Pulled Pork BBQ Sandwiches
with choice of Cole Slaw or Redskin Potato
Salad

The following dinners come with a Tossed Salad:

- Lasagna (meat or vegetable) with
Garlic Breadstick
- Chicken Stew with Buttermilk Biscuits
- Beef Stroganoff on Buttered Noodles
 - Individual Pot Pies
(Chicken, Turkey, or Shepard)
- Oriental Chicken Stir Fry with Rice
- Meatballs (Stroganoff, BBQ, or Sweet & Sour)
with Buttered Noodles

Lunch

\$11.00 per person

Homemade Soups or Salads - Choose 1

Sandwich Platter
with Assorted Breads, Meats & Cheese

Desserts - Choose 1 or Assortment

Salad Choices

Tossed Garden Salad
Cole Slaw
Spinach Salad
Caesar Salad
Traverse City Cherry Chicken Salad
Marinated Vegetable & Pasta Salad
Chicken Bowtie Pasta Salad
Redskin Potato Salad
Vegetable Platter with Dip

Dessert Choices

Fresh Fruit and Dip
Double Chocolate Brownies
Peanut Butter Brownies
Fresh Baked Cookies
Fruit Cobbler
Mini Fritters
Donuts

We can custom create any menu to meet your needs.
Prices do not include 18% service fee or 6% Michigan State sales tax.
Paper products and local delivery are complimentary.

PROJECT DETAIL

Project Title	Veteran Emergency Assistance Program
Grant Focus Area	Increase Service Provisions

PROJECT NARRATIVE

Detailed project narrative must be provided below:

This program is intended to aid peacetime and wartime veterans and their eligible dependents who are experiencing a temporary, financial hardship that a grant will resolve. Grant assistance will be provided as funds of last resort. The grant may be combined with other agencies and other programs such as the Michigan Veterans Trust Fund and Soldiers and Sailors Relief fund to resolve the hardship. The requirement of an 'Emergent Need' as is reflected in MVTF Policy #101 will need to be met. The application itself is designed to mirror most of the requirements of the MVTF excepting the allowance for Peacetime Era veterans to apply/qualify for the SCC Emergency Relief/Hardship Fund.

All applicants must be residents of St. Clair County. The veteran's character of discharge must have been either Honorable or General Under Honorable Conditions from the United States Air Force, Army, Coast Guard, Marine Corps, Navy or Women's Auxiliary.

The following types of expenses may be considered:

- Auto Insurance
- Food, Paper Products, Cleaning Supplies, Personal Care Items, Household Supplies
- Property Taxes
- Auto Loan Payments
- Fuel for Vehicles related to necessary Travel
- Rent / Mortgage
- Auto Purchase
- Auto Repairs
- Fuel, Oil, Wood and Wood Pellets for Home Heating
- Medical Bills
- Dental Work
- Utility Bills
- Child Care
- Home Repairs, Appliances, Adaptive Medical Equipment (related to habitability)
- Temporary Shelter

All payments will be made directly to the service provider/vendor.

Applicants must complete the St. Clair County Department of Veterans Affairs Relief/Hardship Fund Application.

All requests up to \$500 may be approved by the St. Clair County Marketing/Outreach Coordinator. If the Marketing/Outreach Coordinator determines that a payment is not warranted, the applicant may appeal the decision to the Trust Fund Agent/Director.

Otherwise the Trust Fund Agent/Director will jointly review applications and determine whether or not to approve the request. Approved applications can be for the requested amount or a lesser amount deemed more appropriate. Approval or Denial of an application will be by a simple majority vote with a tie constituting approval.

There is no limit to the number of grant requests an applicant can submit. However, unless determined otherwise by the Trust Fund Agent/Director, no more than \$2,500 in total will be paid to, or on behalf of, an applicant.

BUDGET NARRATIVE/JUSTIFICATION

Budget Narrative/Justification must be provided below. In addition, an **itemized list** of all expenditures, including salary if applicable, must be provided in the Excel budget templates provided. Add Excel spreadsheets as an attachment for each initiative.

St. Clair County is Requesting \$15,185 for Veteran Emergency Assistance.

Emergency assistance is application/needs based, therefore, it is not possible to determine the categories or amount of relief to be provided. The lump sum amount will be budgeted to cover the expense types listed in the Project Narrative and will not exceed the request amount.

One initiative per page. Make additional sheets for each initiative.					
Applicant County		Grant Number		SIGMA Vendor Code	
St. Clair County		FOR MVAA USE ONLY		CV0048270	
I. Project / Initiative Name					
Veteran Emergency Assistance Program					
II. Project Total (Amount requested for this initiative)					
					\$15,185.00
III. Expenditure Details					
Item / Service Description		Quantity	Cost Per Unit	Cost	
Emergency assistance funds		1	\$15,185.00	\$15,185.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
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				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
				\$0.00	
			Total	\$15,185.00	

St. Clair County Emergency Relief Policy:

1. **Refer to other agencies.** – Each one of these sources is listed as a “payer of last resort”. What this means is that they’re supposed to exhaust any local resources/services before they are able to consider payment. Depending on the type of assistance requested this may be a simple hand off to DNOT, Habitat for Humanity, DHHS, food pantry, Salvation Army or something like that but not every emergency has a viable resource in the community. Still, they need to show an effort has been made.
2. **Michigan Veterans Trust Fund** – This should be our go-to initially. If they’ll qualify for this, since it’s kind of the most restrictive, they’ll qualify for the other two below. Just a few things to keep in mind:
 - a. **Must be Wartime, 180 Days Active Service**
 - i. **See Trust Fund Agent for Possible Exceptions**
 - b. **Must have an Honorable Discharge**
 - c. **Un-Remarried Surviving Spouse / Dependents can also apply**
 - d. **‘Emergent Need’** – This is super important and really the main barrier to approval. It should also be applied to the other two funding sources below.
Defined as:
 - i. “An unforeseen circumstance causing a temporary financial emergency or hardship that a grant will resolve. The key factor in determining whether or not a grant is approved is the ability of the applicant to manage the obligation for which aid is requested after a grant is made. If there is no reasonable expectation that the MVTF grant would enable the applicant to resume his/her financial responsibility, then a grant does not meet policy.”
 - e. All applications must be processed through the county’s Trust Fund Agent and, depending on amount requested, local MVTF Board.
 - f. No limit for the amount requested, however, applicant should show a concerted effort to resolve the situation on their own and/or can make partial payments coordinated through MVTF or local Trust Fund Agent.
3. **Soldiers and Sailors Relief Fund** – The difference between this Fund and the MVTF is where the actual funds come from. This is more limited when it comes to amounts requested and is administered by the County Veterans Affairs Director. Notes:
 - a. **Must be Wartime, 180 Days Active Service**
 - i. **See Director for Possible Exceptions**
 - b. **Must have an Honorable Discharge**
 - c. **Un-Remarried Surviving Spouse / Dependents can also apply**
 - d. **‘Emergent Need’** – While this can be slightly more relaxed than the MVTF they still need to show that they meet the requirements of an ‘emergent need’.
 - e. All applications, after reviewed for MVTF eligibility, are to be forwarded to the Director for approval/payment.

- f. Payments can be no more than **\$2,000** with rare exceptions. Should be looking at between **\$100 to \$1,000**.
- g. Funding Source is **920222** which is part of the millage fund and accounted for through Treasurer.

4. St. Clair County Department of Veterans Affairs Emergency Relief Fund

- a. **Can be Wartime or Peacetime**
- b. **Discharge Must be any Other Than Dishonorable**
- c. **Un-Remarried Surviving Spouse / Dependents can also apply**
- d. **'Emergent Need'** – As above so below. Situationally dependent, however, as no two are the same. All requests are to be processed by local Trust Fund Agent and reviewed with staff/director for accountability purposes.
- e. All requests are to be processed by local Trust Fund Agent and reviewed with staff/director for accountability purposes.
- f. Payments can be no more than **\$2,000** with rare exceptions. Should be looking at between **\$100 to \$1,000**.
- g. Funding source is first through Line Item **295682-4916**. This is the Donation Line Item.
 - i. Secondary funding source is Line Item **295682-7194** specifically established for Veteran Hardship Expenses.

St. Clair County Dept. of Veterans Affairs Emergency Relief/Hardship Fund Guidelines

This program is intended to aid peacetime and wartime veterans and their eligible dependents who are experiencing a temporary, financial hardship that a grant will resolve. Grant assistance will be provided as funds of last resort. The grant may be combined with other agencies and other programs such as the Michigan Veterans Trust Fund and Soldiers and Sailors Relief fund to resolve the hardship. The requirement of an '**Emergent Need**' as is reflected in MVTF Policy #101 will need to be met. The application itself is designed to mirror most of the requirements of the MVTF excepting the allowance for Peacetime Era veterans to apply/qualify for the SCC Emergency Relief/Hardship Fund.

All applicants must be residents of St. Clair County. The veteran's character of discharge must have been either Honorable or General Under Honorable Conditions from the United States Air Force, Army, Coast Guard, Marine Corps, Navy or Women's Auxiliary.

The following types of expenses may be considered:

- Auto Insurance
- Food, Paper Products, Cleaning Supplies, Personal Care Items, Household Supplies
- Property Taxes
- Auto Loan Payments
- Fuel for Vehicles related to necessary Travel
- Rent / Mortgage
- Auto Purchase
- Auto Repairs
- Fuel, Oil, Wood and Wood Pellets for Home Heating
- Medical Bills
- Dental Work
- Utility Bills
- Child Care
- Home Repairs, Appliances, Adaptive Medical Equipment (related to habitability)
- Temporary Shelter

All payments will be made directly to the service provider/vendor.

Applicants must complete the St. Clair County Department of Veterans Affairs Relief/Hardship Fund Application.

All requests up to \$500 may be approved by the St. Clair County Marketing/Outreach Coordinator. If the Marketing/Outreach Coordinator determines that a payment is not warranted, the applicant may appeal the decision to the Trust Fund Agent/Director.

Otherwise the Trust Fund Agent/Director will jointly review applications and determine whether or not to approve the request. Approved applications can be for the requested amount or a lesser amount deemed more appropriate. Approval or Denial of an application will be by a simple majority vote with a tie constituting approval.

There is no limit to the number of grant requests an applicant can submit. However, unless determined otherwise by the Trust Fund Agent/Director, no more than \$2,500 in total will be paid to, or on behalf of, an applicant.

Documents Required to Apply for SCC Veterans Affairs Veteran Relief/Hardship Fund

For Applicant Use

- Provide an email address for alternate form of contact see box 7 and 15
- Discharge papers, separation report, DD-214s and DD-215s (Must show dates of active duty and the character of service, last DD-214 is required).
- Proof of Michigan residency (provide at least 1 of the following: Driver's license, voter registration, State of Michigan I.D., lease agreement, etc.).
- Marriage certificate; birth certificates of minor children (if legal dependents).
- Death and marriage certificate if veteran is deceased.
- All monthly bills (all utilities, medical premiums, medical bills, rent, mortgage and etc.). See application. Send in all that apply.
- Proof of current income coming into the home (check stubs, bank account statement showing direct deposit, Social Security documents, VA compensation, etc.). See application. Send in all that apply.
- If requesting auto repairs, payments or insurance payments provide the following: Proof of valid driver's license, vehicle insurance and registration. Auto repairs must include two estimates from licensed mechanics.
- If requesting home repairs you must include at least two estimates from licensed contractors. If you have a mortgage or land contract on the home you must provide a copy of your most recent mortgage/land contract statement.
- If requesting dental work you must provide two estimates for the requested work. Dental work will only be considered in the case of health emergencies and a physician's statement should be provided to show this.

Required Documents Checklist

DOCUMENTS THAT MUST BE VERIFIED BY INTERVIEWER

(The following documents when verified do not need to be sent in with completed apps.)

UNIVERSAL DOCUMENTS NEEDING VERIFICATION

- ☐ DD214s/DD215s
- ☐ All household income
- ☐ All household expenses
- ☐ Divorce Decree if applicable
- ☐ Marriage/Birth Certificate(s) if applicable
- ☐ Death Certificate if applicable
- ☐ POA/Guardian/Conservator if applicable
- ☐ Proof of new employment if applicable

DOCUMENTS NEEDING VERIFICATION FOR AUTOMOTIVE RELATED REQUESTS

- ☐ Current Driver's License
- ☐ Current auto insurance
- ☐ Current auto registration

DOCUMENTS NEEDING VERIFICATION FOR HOUSING RELATED REQUESTS

- ☐ Mortgage/land contract statement/agreement
- ☐ Two estimates if possible from licensed contractors
- ☐ Confirm Property Taxes Are Current Year To Date

I certify the above marked documents have been verified needing no further review.

Interviewers Signature: _____

St. Clair County Department of Veterans Affairs
APPLICATION FOR AN EMERGENCY RELIEF/HARDSHIP

1. VETERAN'S NAME (Last, First, Middle Initial)		2. DATE OF BIRTH		3. COUNTY OF RESIDENCE	
4. STREET ADDRESS		CITY	ZIP CODE	5. PHONE NUMBER	
6. SOCIAL SECURITY #		7. EMAIL ADDRESS		8..VETERAN DECEASED? DATE OF DEATH	
9. TYPE OF DISCHARGE		ENTRY DATE(S)		RELEASE DATE(S)	
Be Sure To Include All Active Duty Servies			REQUIRED*	YEARS	MONTHS
World War II: 12/7/41 – 12/31/46			180 days*		
Korean Conflict: 6/27/50 – 1/31/55			180 days*		
Post Korean: 2/1/55 – 2/27/61. (Must have the Armed Forces Expeditionary Medal <i>AFEM</i> or Vietnam Service Metal <i>VSM</i> listed on DD214.)			180 days*		
Vietnam Era: 2/28/61 – 5/7/75			180 days*		
Persian Gulf: 8/2/90 – to be determined			180 days*		
Other Conflicts: (Must have the Armed Forced Expeditionary Medal— <i>AFEM</i>) (WW1 requires 90 days)			180 days*		
<i>I have reviewed the service dates and certify this applicant meets the service requirements for the Michigan Veterans Trust Fund.</i>					
SIGNNATURE OF INTERVIEWER				DATE	
The remaining sections are to be filled out by the applicant (with assistance, if necessary). Answer all items/state “none” if appropriate.					
NAME OF APPLICANT (If other than veteran)		RELATIONSHIP	PHONE NUMBER	REASON VETERAN IS NOT APPLYING	
ADDRESS (including Street, City, ZIP Code)			10. EMAIL ADDRESS		
List each legal dependent of the veteran, including relationship & age (spouse & children) (Policy BTP-102)					
NAME		RELATIONSHIP		AGE	
MOST RECENT EMPLOYER (Veteran)		FROM TO	MOST RECENT EMPLOYER (Spouse)		FROM TO
HAS VETERAN RECEIVED MVTF ASSISTANCE IN THE PAST		DATE	COUNTY		
For:		Amount:			
Purpose for seeking emergency grant. Items listed here are the only ones that will be considered by the committee.					
Type of assistance requested (Mortgage, Rent, Electric, etc.)	(a)	(b)	(c)	(d)	(e)
Amount Needed					
ADDITIONAL COMMENTS					
I certify that the above information is true and factual to the best of my knowledge, and I authorize the St. Clair County Department of Veterans Affairs to receive and transmit any information that may be necessary to document my request for financial assistance.					
SIGNATURE OF APPLICANT				DATE	

St. Clair County Department of Veterans Affairs
INCOME, EXPENSES and ASSETS STATEMENT

Under the authority of Public Act 9 of 1946, (MCL 35.601-610), the following information is required to supplement Page 1 of this application.

VETERAN'S NAME	APPLICANT'S NAME (if other than veteran)	DATE
----------------	--	------

MONTHLY INCOME		MONTHLY EXPENSES		
TYPE	AMOUNT	TYPE	AMOUNT	COMMENTS
Wages (Veteran)		Rent		
Wages (Spouse)		Mortgage		
Social Security (Veteran)		Food		
Social Security (Spouse)		Heating/Gas		
SSI Benefits		Auto Payment(s)		
VA Compensation		Electricity		
Military Retirement		Telephone		
VA Pension		Garbage/Water/Sewer		
Civilian Pension		Property Taxes		
Rental Income		Insurance (House)		
Investments		Medical*/Prescriptions		
Unemployment		Car Insurance		
ADC		Child Support/Care		
Food Stamps		Gasoline		
SDI (State)		Cable TV		
Other		Credit Cards		
		Other		
Total		Total:		

ASSETS (annotate Totals)				LIABILITIES (Balances)	
Savings / Checking		Bonds / CDs		Mortgage Balance	
Real Estate (Home Value)		Auto Year/Model		Loan(s) Balance	
IRAs		Auto Year/Model		Credit Cards	
Other-Real Estate		Other		Medical Bills	

I hereby certify that I and/or my dependents have no other financial resources other than those listed above. Combined with the information on the emergency grant application, this is an accurate presentation of my financial status.

SIGNATURE OF APPLICANT	DATE
------------------------	------

St. Clair County Emergency Relief/Hardship Request -Interview QUESTIONS

Veteran/Applicant:

Date of Application:

What unforeseen situation occurred that caused your need for applying? When did it occur?

Provide a detailed plan to maintain future financial responsibilities, if a grant were to be awarded

Applicant's signature and date

SUBMISSION OF APPLICATION

Type an "X" in the box for confirmation of the following statements.

I understand that my County must become registered to do business with the State of Michigan prior to receiving any grant funding. Registration is available at the following website: www.michigan.gov/SIGMAVSS .	X
I understand that the grant agreement must be signed by the Authorizing Official before grant funds can be expended.	X
I have included Itemized budget attachments for each initiative/program/salary request.	X
I have included FY17 and current year County budgets for the organization structure that provides assistance to veterans and/or family members.	X
I understand that I should receive an email confirmation of submission of my application within 24 business hours, and if I do not receive an email confirmation, I should contact the agency for confirmation.	X
I understand that remote access to the United States Department of Veterans Affairs computing systems to obtain PIV cards for county veteran services officers must be established no later than September 24, 2022.	X

Signature: 

Date: 5/18/22

SELECT Organization key: 295682
BUDGET: AMENDED BUDGET

Page 1 of CATEGORY 600		Health and Welfare		ORG KEY 295682		Veterans Millage	
OBJECT	OBJECT Description	Projected	I N C O M E Generated	% Generated	Budgeted	E X P E N S E S Expended	% Expended
=====	=====	=====	=====	=====	=====	=====	=====
4007	Current Property Taxes	573,609.00	566,179.15	98.7 Under			
4033	Current Personal Property Tax	0.00	1,333.65	No Budget	1,000.00	330.00	33.0 Under
4043	Dimnt Real Prp Tx-Extra Voted	0.00	563.98	No Budget	282,335.00	260,932.59	92.4 Under
4573	Local Comm Stabilization Shar	0.00	10,629.55	No Budget	21,836.00	40,901.01	87.3 Over
4580	LCSA	0.00	0.00	No Budget	37,206.47	37,206.47	98.8 Under
4883	Interest on Delinquent Taxes	0.00	226.44	No Budget	600.00	604.00	0.7 Over
4916	Cntrbts&Donatn Frm Privat Srcs	0.00	245.00	No Budget	4,235.00	3,445.85	81.4 Under
4996	Appropriation Transfer In	0.00	8,097.44	Over	22,587.00	13,103.35	58.0 Under
5050	Salaries&Wages-Appntd Official				18,829.95	18,829.95	99.9 Under
5099	Salaries&Wages-Regular				4,406.00	4,403.73	99.9 Under
5105	Salaries&Wages - Parttime				912.00	905.40	99.3 Under
5182	Employer Provided Health Insur				2,735.00	2,698.18	98.7 Under
5231	Employer Provided Life Insur				1,500.00	3,735.98	149.1 Over
5248	Employer Provided Disblty Insr				6,500.00	9,317.88	43.4 Over
5290	Employer 457 Match				1,250.00	3,258.00	160.6 Over
5330	Employer's FICA Contribution				750.00	246.50	32.9 Under
5347	Employer's Medicare Contributn				0.00	503.01	No Budget
5363	Unemployment Insurance				5,500.00	9,260.20	68.4 Over
5380	Workers Compensation Insurance				5,000.00	819.20	16.4 Under
5394	Employee Mileage Reimbursement				700.00	426.89	61.0 Under
5396	Employee Travel				1,500.00	4.00	0.3 Under
5397	Employee Meals				600.00	389.44	64.9 Under
5398	Employer Provided Uniforms				1,350.00	1,287.48	95.4 Under
5404	Employee Dues & Subscriptions				3,000.00	2.49	0.1 Under
5446	Supplies				2,158.50	2,158.50	72.0 Under
6749	Professional Services				80,590.91	80,590.91	61.2 Over
7013	Maintenance Contracts				6,000.00	231.23	3.9 Under
7185	Other Institutional Services				2,500.00	2,475.00	99.0 Under
7541	Telephone				200.00	603.94	202.0 Over
7591	Cellular Phone				300.00	319.96	6.7 Over
7700	Licenses, Permits, & Fees				0.00	300.00	No Budget
7723	Postage/Freight				0.00	150.00	No Budget
8036	Program Promotion				0.00	156.00	No Budget
8300	Printing and Publishing				1,000.00	3,406.38	240.6 Over
8531	Training				93,913.00	93,913.00	100.0
8581	County Membership						
8795	Repairs and Maintenance						
8977	Equipment Rental						
8993	Building Rental						
9208	Miscellaneous						
9480	Uncapitalized Assets < \$5,000						
9934	Appropriation Transfer Out	0.00	0.00	No Budget			
** ORG KEY TOTAL **		581,706.00*	587,275.21*	1.0 Over	581,706.00*	596,916.52*	2.6 Over
BALANCE:			-9,641.31				
** CATEGORY TOTAL **		581,706.00*	587,275.21*	1.0 Over	581,706.00*	596,916.52*	2.6 Over
BALANCE:			-9,641.31				

SELECT Organization key: 295682
BUDGET: AMENDED BUDGET

Page 1 of CATEGORY 600		Health and Welfare		ORG KEY		Veterans Millage	
				295682			
OBJECT	OBJECT Description	*-----INCOME-----*		*-----EXPENSES-----*			
=====	=====	Projected	Generated % Generated	Budgeted	Expended % Expended	=====	=====
***GRAND TOTAL ***		581,706.00*	587,275.21* 1.0 Over	581,706.00*	596,916.52*	2.6 Over	
BALANCE:		-9,641.31					

SELECT Organization key: 295682
BUDGET: AMENDED BUDGET

Page 1 of CATEGORY 600 Health and Welfare

ORG KEY ORG KEY Description		I N C O M E		E X P E N S E S	
=====	=====	Projected	Generated	Budgeted	Expended
=====	=====	=====	=====	=====	=====
295682	Veterans Millage	581,706.00	587,275.21	581,706.00	596,916.52
			1.0 Over		2.6 Over
** CATEGORY TOTAL **		581,706.00*	587,275.21*	581,706.00*	596,916.52*
BALANCE:		-9,641.31	1.0 Over		2.6 Over
*** G R A N D T O T A L ***		581,706.00*	587,275.21*	581,706.00*	596,916.52*
BALANCE:		-9,641.31	1.0 Over		2.6 Over

SELECT Organization key: 295682
BUDGET: AMENDED BUDGET

----- I N C O M E -----		*----- E X P E N S E S -----*	
Projected	Generated	Budgeted	Expended
=====	=====	=====	=====
600 Health and Welfare	581,706.00 587,275.21 1.0 Over	581,706.00	596,916.52 2.6 Over
*** G R A N D T O T A L ***	581,706.00* 587,275.21* 1.0 Over	581,706.00*	596,916.52* 2.6 Over
BALANCE:	-9,641.31		

SELECT Organization key: 295682
BUDGET: AMENDED BUDGET

Page 1 of CATEGORY 600		Health and Welfare	Veterans Millage	
		ORG KEY 295682		
OBJECT	DESCRIPTION	I N C O M E	E X P E N S E S	%
=====	=====	=====	=====	=====
4007	Current Property Taxes	661,684.00	0.00	No Budget
4033	Current Personal Property Tax	1,000.00	330,157.00	113,801.93 34.5 Under
4043	Delinqt Real Prp Tx-Extra Voted	500.00	44,100.00	7,950.74 18.0 Under
4883	Interest on Delinquent Taxes	100.00	71,361.00	29,025.94 40.7 Under
4916	CntrbtndDonatn Frm Privat Srcs	500.00	360.00	133.98 37.2 Under
4956	Refunds and Rebates Received	0.00	3,302.00	1,137.88 34.5 Under
5050	Salaries&Wages-Appntd Official	0.00	23,620.00	8,353.89 35.4 Under
5099	Salaries&Wages-Regular	0.00	23,266.00	7,735.40 33.2 Under
5105	Salaries&Wages - Parttime	0.00	5,441.00	1,809.17 33.3 Under
5182	Employer Provided Health Insur	0.00	300.00	97.33 32.4 Under
5231	Employer Provided Life Insur	0.00	2,252.00	732.34 32.5 Under
5248	Employer Provided Disblty Insr	0.00	2,000.00	1,195.86 59.8 Under
5290	Employer 457 Match	0.00	5,000.00	2,867.58 57.4 Under
5330	Employer's FICA Contribution	0.00	1,000.00	848.00 84.8 Under
5347	Employer's Medicare Contributn	0.00	0.00	614.00 No Budget
5363	Unemployment Insurance	0.00	500.00	0.00 Under
5380	Workers Compensation Insurance	0.00	5,000.00	2,355.28 47.1 Under
5394	Employee Mileage Reimbursement	0.00	1,000.00	0.00 Under
5396	Employee Travel	0.00	700.00	0.00 Under
5397	Employee Meals	0.00	10,000.00	1,273.85 12.7 Under
5398	Employer Provided Uniforms	0.00	600.00	371.51 61.9 Under
5404	Employee Dues & Subscriptions	0.00	2,500.00	596.10 23.8 Under
5446	Supplies	0.00	0.00	11.00 No Budget
6749	Professional Services	0.00	2,000.00	370.15 18.5 Under
7013	Maintenance Contracts	0.00	40,069.00	24,260.72 60.5 Under
7194	Veterans Relief - Hardship	0.00	500.00	931.00 86.2 Over
7541	Telephone	0.00	2,500.00	2,095.00 83.8 Under
7591	Cellular Phone	0.00	250.00	0.00 Under
7700	Licenses, Permits, & Fees	0.00	300.00	186.61 62.2 Under
7723	Postage/Freight	0.00	0.00	180.00 No Budget
8036	Program Promotion	0.00	2,000.00	0.00 Under
8300	Printing and Publishing	0.00	83,706.00	0.00 Under
8531	Training	0.00	663,784.00	663,784.00* 31.5 Under
8581	County Membership	0.00	665,823.14	665,823.14* 0.3 Over
8795	Repairs and Maintenance	0.00	663,784.00	663,784.00* 31.5 Under
8993	Building Rental	0.00	665,823.14	665,823.14* 0.3 Over
9480	Uncapitalized Assets < \$5,000	0.00	663,784.00	663,784.00* 31.5 Under
9934	Appropriation Transfer Out	0.00	665,823.14	665,823.14* 0.3 Over
** ORG KEY TOTAL **		663,784.00*	665,823.14*	0.3 Over
BALANCE:		456,647.88		
** CATEGORY TOTAL **		663,784.00*	665,823.14*	0.3 Over
BALANCE:		456,647.88		
*** G R A N D T O T A L ***		663,784.00*	665,823.14*	0.3 Over
BALANCE:		456,647.88		

SELECT Organization key: 295682
BUDGET: AMENDED BUDGET

Page 1 of CATEGORY 600 Health and Welfare

ORG KEY		ORG KEY Description		I N C O M E		E X P E N S E S	
=====	=====	=====	=====	Generated	% Generated	Budgeted	% Expended
=====	=====	=====	=====	=====	=====	=====	=====
295682	Veterans Millage	663,784.00	665,823.14	0.3 Over	663,784.00	209,175.26	31.5 Under
** CATEGORY TOTAL **		663,784.00*	665,823.14*	0.3 Over	663,784.00*	209,175.26*	31.5 Under
BALANCE:		456,647.88					
*** G R A N D T O T A L ***		663,784.00*	665,823.14*	0.3 Over	663,784.00*	209,175.26*	31.5 Under
BALANCE:		456,647.88					

SELECT Organization key: 295682
BUDGET: AMENDED BUDGET

CATEGORY CATEGORY Description		I N C O M E		E X P E N S E S	
=====		=====		=====	
		Projected	Generated	Budgeted	Expended
		=====	=====	=====	=====
600	Health and Welfare	663,784.00	665,823.14	663,784.00	209,175.26
			0.3 Over		31.5 Under
*** G R A N D T O T A L ***		663,784.00*	665,823.14*	663,784.00*	209,175.26*
BALANCE:		456,647.88			31.5 Under

FY23 County Quarterly Activity Report						
	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep		
County:					Applications directly sent to VA	Applications sent to VSO - AL, VFW, DAV, VVA
Claims Activity	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep		
Federal Burial Allowance						
Clothing Allowance						
Survivors Pension						
Death Indemnity Compensation						
Educational Claims						
Non-Service Connected Pension						
Special Adapted Automotible						
Special Adapted Housing						
Service Connected Compensation						
TOTAL Claims						
Appeals Process						
Supplemental Claims						
Higher-Level Reviews						
Board of Veterans Appeals						
TOTAL Appeal Process						
Support Services						
Michigan Veteran Trust Fund Applications						
Soldiers/Sailors Relief Fund Applications						
County Burial Allowance Application						
Home Loan Guarantee Certificate of Eligibilty						
CHAMPVA application						
Healthcare Enrollment Apps						
Total Support Services						
Other Activities						
Personal Interviews						
File Reviews						
Claim Status Checks						
Demographics						
Aging and Elderly Veterans (70+)						
Female Veterans						
If you have a female veteran over the age of 70 each should be counted, once for age and once for gender, if a person fits both categories they should be counted under each category						



FY23 COUNTY VETERAN SERVICE FUND GRANT

PIV Verification Form for Affiliates

By digitally signing this form you are certifying that you currently have an active VA PIV Card and are providing the full date of expiration that is displayed on the lower section of the card. Providing false information relating to a government ID card can result in disciplinary action and removal of the access by the Agency.

Instructions: Forward form to your VA.gov email and open while signed into Citrix. Select certificates (side margin area), fill out the form, then look for “digitally sign” at the top. To sign, highlight the signature block and then "sign" with current PIV credentials. Please return completed form to MVAAGrants@michigan.gov on or before September 24, 2023. Thank you.

County

Name on PIV Card:

Exact date of expiration to include month, day, and year:

Signature of Employee: (must digitally sign using PIV Card)

Contact Wynette Adamson at adamsonw@michigan.gov or (517) 243-8619 with questions.

Michigan Veterans Affairs Agency		
	County Veteran Service Fund Grant	
	Change Notice #__	
	Project / Budget Amendment	
Grant No:	Grantee:	Budget Period
23*	(County)	FY23
Project Director:	Email Address:	SIGMA Vendor Code
(Name)	Project Director Email Address	

This form is required for requesting any changes to grant activities that differ from those outlined in the signed grant agreement. Activities include, but are not limited to, focus areas, budget items, staffing, etc. Activities that differ from those stated in the signed agreement will not be covered under the grant agreement until the change form has been submitted, signed and approved, and returned to the Grantee by the MVAA. Amendment deadline for FY23 is June 30, 2023.

Complete all questions below as thoroughly as possible. If necessary, submit any documentation that may support your change request. If additional space is needed attach a Word Document.

1. Describe, in detail, the area of your grant agreement you are requesting to change.

2. Provide an updated budget for your request(s). *Reduction and Increase must balance .*

Project Name (Project Reduction Here)	Project Name (Project Increase Here)

Project Director Printed Name and Signature (Grantee)	Date
Authorizing Official Printed Name and Signature (Grantee)	Date
MVAA Program Manager Printed Name and Signature	Date
Chief Financial Officer, Department of Military and Veterans Affairs	Date

Michigan Veterans Affairs Agency				
	County Veteran Service Fund Progress Report			
Grant No: 23*	Grantee: (COUNTY)	Budget Period: (QUARTER)	Project Director: (NAME)	Email Address: (PROJECT DIRECTOR E-MAIL)
	SIGMA Address Code:	SIGMA Vendor Code:		
Use Additional Sheets if Necessary				
Major Tasks Completed During Reporting Period				
List any challenges to fulfilling the terms of the grant application. Write NA if not applicable				
Number of increased VSO hours paid for by Grant Funds				
Number of Trust Fund Applications Completed by staff funded through the Grant				

**County Veteran Service Fund Grant
Reimbursement Request**

One initiative per page. Make additional sheets for each initiative.						
Applicant County		Grant Number			SIGMA Vendor Code	
I. Project / Initiative Name						
II. Project Total						
III. Expenditure Details						
Line Item	Date	Item / Service Description	Cost Per Unit	Quantity	Cost	MVAA USE ONLY
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
					0.00	
			Total		\$0.00	
IV. Authorization and Certification						
I certify that this is a true and correct statement of expenditures for the above named items during the listed reporting period and that the documentation to support these expenditures is available for review.						
Prepared By			Date			
Email Address			Signature			
Phone Number						
Please number each receipt clearly to identify with the line item it represents						

County Veteran Service Fund Grant
Staff Budget Quarterly Report

One staff member per page. Make additional sheets for each staff member.				
Applicant County		Grant Number		SIGMA Vendor Code
		FOR MVAA USE ONLY		
I. Project / Initiative Name				
Salary and Fringes				
II. Quarter				
(Q1, 2, 3, or 4)				
III. Expenditure Details				
Name	Position	Hourly Rate	Total # of Hours Worked this Quarter	Total
				\$0.00

Fringe Benefits	Hourly Rate	Percentage	Hours Worked	Total
Employer FICA				\$0.00
Retirement				\$0.00
Hospital Insurance				\$0.00
Dental Insurance				\$0.00
Vision Insurance				\$0.00
Unemployment				\$0.00
Workers Compensation				\$0.00
Life Insurance				\$0.00
Insurance Waiver				\$0.00
State Taxes				\$0.00
City Taxes				\$0.00
Health Care Savings				\$0.00
Child Care Savings				\$0.00
Medical				\$0.00
Other				\$0.00
Other				\$0.00
Other				\$0.00
Other				\$0.00

Salary Total	\$0.00
Fringe Benefits Total	\$0.00
Total Salary	\$0.00

County Veteran Service Fund Grant - Employee Time Sheet

Attachment C

	Employee:			
	County:			
	Pay Period Dates:			
	<u>Day</u>	<u>Date</u>	CVSF Hours	Activities Performed - specific duties each day
Week 1:	Sunday			
	Monday			
	Tuesday			
	Wednesday			
	Thursday			
	Friday			
	Saturday			
Week 2:	Sunday			
	Monday			
	Tuesday			
	Wednesday			
	Thursday			
	Friday			
	Saturday			
	TOTAL PERFORMED HOURS:		0.00	
By signature, I certify that the data recorded on this timesheet is true and accurate and the hours used were in support of the County Veteran Service Fund Grant.				
	Employee Signature			Date
	Supervisor Signature			Date

MVAA Training and Travel Reimbursement Form

Name:		Date:		SIGMA Vendor Code:		Grant Number:	
Address of Official Work Station:				Organization:			
Reason for Travel:				Destination:			

	Date(s)	Departure Time	Arrival Time	Quantity	Rate	Total	MVAA USE ONLY
Conference Registration Fee						0	
Airline Ticket						0	
Mileage						0	
Hotel						0	
Baggage Fee						0	
Ground Transportation						0	
Parking						0	
Tolls						0	
Breakfast						0	
Lunch						0	
Dinner						0	
Breakfast						0	
Lunch						0	
Dinner						0	
Breakfast						0	
Lunch						0	
Dinner						0	
Breakfast						0	
Lunch						0	
Dinner						0	
Breakfast						0	
Lunch						0	
Dinner						0	
Total Reimbursement Request						\$0.00	\$0.00

DEPARTMENT OF TECHNOLOGY, MANAGEMENT & BUDGET, VEHICLE AND TRAVEL SERVICES SCHEDULE OF TRAVEL RATES FOR CLASSIFIED AND UNCLASSIFIED EMPLOYEES Effective October 1, 2022
--

MICHIGAN SELECT CITIES*

	Individual	Group Meeting (pre-arranged and approved)
Lodging**	\$85.00	
Breakfast	\$11.75	\$14.75
Lunch	\$11.75	\$14.75
Dinner	\$28.00	\$31.00

MICHIGAN IN-STATE ALL OTHER

	Individual	Group Meeting (pre-arranged and approved)
Lodging**	\$85.00	
Breakfast	\$9.75	\$12.75
Lunch	\$9.75	\$12.75
Dinner	\$22.00	\$25.00
Lodging	\$51.00	
Breakfast	\$9.75	
Lunch	\$9.75	
Dinner	\$22.00	
Per Diem Total	\$92.50	

OUT-OF-STATE SELECT CITIES*

	Individual	Group Meeting (pre-arranged and approved)
Lodging**	Contact Conlin Travel	
Breakfast	\$15.00	\$18.00
Lunch	\$15.00	\$18.00
Dinner	\$29.00	\$32.00

OUT-OF-STATE ALL OTHER

	Individual	Group Meeting (pre-arranged and approved)
Lodging**	Contact Conlin Travel	
Breakfast	\$11.75	\$14.75
Lunch	\$11.75	\$14.75
Dinner	\$27.00	\$30.00
Lodging	\$51.00	
Breakfast	\$11.75	
Lunch	\$11.75	
Dinner	\$27.00	
Per Diem Total	\$101.50	

Incidental Costs Per Day (with overnight stay) \$5.00

Mileage Rates	Current
Premium Rate	\$0.625 per mile
Standard Rate	\$0.440 per mile

* See Select Cities Listing

** Lodging available at State rate, or call Conlin Travel at 877-654-2179 or www.somtravel.com

SELECT CITY LIST
SCHEDULE OF TRAVEL RATES FOR CLASSIFIED AND UNCLASSIFIED EMPLOYEES
Effective October 1, 2022

Michigan Select Cities/Counties		
	CITIES	COUNTIES
	Ann Arbor, Auburn Hills, Beaver Island, Detroit, Grand Rapids, Holland, Leland, Mackinac Island, Petoskey, Pontiac, South Haven, Traverse City	Grand Traverse, Oakland, Wayne
Out of State Select Cities/Counties		
STATE	CITIES	COUNTIES
Alaska	All locations	
Arizona	Phoenix, Scottsdale, Sedona	
California	Arcata, Edwards AFB, Eureka, Los Angeles, Mammoth Lakes, McKinleyville, Mill Valley, Monterey, Novato, Palm Springs, San Diego, San Francisco, San Rafael, Santa Barbara, Santa Monica, South Lake Tahoe, Truckee, Yosemite National Park	Los Angeles, Mendocino, Orange, Ventura
Colorado	Aspen, Breckenridge, Grand Lake, Silverthorne, Steamboat Springs, Telluride, Vail	
Connecticut	Bridgeport, Danbury	
District of Columbia	Washington DC (See also Maryland & Virginia)	
Florida	Boca Raton, Delray Beach, Fort Lauderdale, Jupiter, Key West, Miami	
Georgia	Brunswick, Jekyll Island	
Hawaii	All locations	
Idaho	Ketchum, Sun Valley	
Illinois	Chicago	Cook, Lake
Kentucky	Kenton	
Louisiana	New Orleans	
Maine	Bar Harbor, Kennebunk, Kittery, Rockport, Sandford	
Maryland	Baltimore City, Ocean City	Montgomery, Prince George
Massachusetts	Boston, Burlington, Cambridge, Martha's Vineyard, Woburn	Suffolk
Minnesota	Duluth, Minneapolis, St. Paul	Hennepin, Ramsey
Nevada	Las Vegas	
New Mexico	Santa Fe	
New York	Bronx, Brooklyn, Lake Placid, Manhattan, Melville, New Rochelle, Queens, Riverhead, Ronkonkoma, Staten Island, Tarrytown, White Plains	Suffolk
Ohio	Cincinnati	
Pennsylvania	Pittsburgh	Bucks
Puerto Rico	All locations	
Rhode Island	Bristol, Jamestown, Middletown, Newport, Providence	Newport
Texas	Austin, Dallas, Houston, L.B. Johnson Space Center	
Utah	Park City	Summit
Vermont	Manchester, Montpelier, Stowe	Lamoille
Virginia	Alexandria, Fairfax, Falls Church	Arlington, Fairfax
Washington	Port Angeles, Port Townsend, Seattle	
Wyoming	Jackson, Pinedale	

Department of Human Services Board - Reappointment

Summary:

ATTACHMENTS:

	Description	Upload Date	Type
📎	Department of Human Services Board - Reappointment	9/22/2022	Cover Memo
📎	DHS Roster	9/22/2022	Cover Memo



COUNTY OF ST. CLAIR

Board of Commissioners

JEFFREY L. BOHM
Chairperson
District 5
3453 St. Clair Shores Blvd.
East China, MI 48054
Cell: 810-874-6554
jbohm@stclaircounty.org

JORJA BALDWIN
Vice-Chairperson
District 2
3660 Vineyard Lane
Fort Gratiot, MI 48059
Cell: 810-887-9853
jbaldwin@stclaircounty.org

GREG MCCONNELL
District 1
108 S. Hunter St.
Capac, MI 48014
Cell: 810-300-3368
gmccconnell@stclaircounty.org

LISA M. BEEDON
District 3
2877 Military St.
Port Huron, MI 48060
Cell: 810-683-9617
lbeedon@stclaircounty.org

DUKE DUNN
District 4
755 Victorian Woods Ct.
Marysville, MI 48040
Cell: 810-355-5226
ddunn@stclaircounty.org

DAVID RUSHING
District 6
12618 Masters Rd.
Riley, MI 48041
Home: 810-392-2127
drushing@stclaircounty.org

DAVE VANDENBOSSCHE
District 7
214 South Belle River Ave.
Marine City, MI 48039
Cell: 810-459-2710
dvandenbossche@stclaircounty.org

OFFICE ADDRESS:
200 Grand River Ave.
Suite 203
Port Huron, MI 48060
Phone: 810-989-6900
Fax: 810-985-3463
www.stclaircounty.org

VISION: We are the leader in innovative, customer-centered government.

MISSION: To continually improve public services that enhance the community for citizens and future generations of St. Clair County.

September 12, 2022

Ms. Barbara Hanneke
Director
Harbor Impact Ministries
1963 Allen Rd.
Kimball, MI 48074

Re: Department of Human Services Board

Dear Barbara:

A review of various Boards and Commissions indicates that your term on the Department of Human Services Board will expire on October 31, 2022.

If you are interested in being considered for reappointment as District 5 Representative for a three-year term please check one of the boxes listed below and return this letter to the County Administrator/Controller's Office no later than Monday, September 26, 2022. You may also submit your response by email to lkern@stclaircounty.org.

Sincerely,

Karry Hepting
Administrator/Controller

cc: Pat Howe

☐ I **do not** wish reappointment to the Department of Human Services Board.

☒ I **wish** to be considered for reappointment to the Department of Human Services Board.

Boards and Commissions Committee Report

Department of Human Services

	<i>Position</i>	<i>Term</i>	<i>Expiration</i>
Rev. Thomas Joseph Seppo 7234 2nd St. Lakeport MI 48059 <i>Home Phone</i> <i>Work Phone</i> (810) 966-8660 <i>Mobile Phone</i> (810) 357-1885 <i>Email</i> tseppo@optrans.org	District 1 Chairperson	3 Years	10/31/2023
Ms. Barbara K. Hanneke 1963 Allen Rd. Kimball MI 48074 <i>Home Phone</i> (810) 367-3259 <i>Work Phone</i> (810) 662-3936 <i>Mobile Phone</i> (810) 334-6742 <i>Email</i> millemay@prodigy.net	District 5 Vice Chair	3 Years	10/31/2025 10/31/2022
Lisa M. Beedon 2877 Military St. Port Huron MI 49060 <i>Home Phone</i> (810) 683-9617 <i>Work Phone</i> (810) 989-6900 <i>Mobile Phone</i> <i>Email</i> lbeedon@stclaircounty.org	Represents BOC's		
Ms. Juanita Gittings 3550 Armour Port Huron MI 48060 <i>Home Phone</i> (810) 987-6096 <i>Work Phone</i> <i>Mobile Phone</i> (810) 434-4557 <i>Email</i> jag7505@comcast.net	State Appointed Member	3 Years	10/31/2024

Health Department September Points of Interest

Summary:

ATTACHMENTS:

Description		Upload Date	Type
	Sept POI	9/28/2022	Cover Memo

SEPTEMBER 2022



Points of Interest...

- The St. Clair County Health Department is very pleased to announce that Dr. Najibah Rehman, MD, MPH was approved by the BOC to transition from the interim to permanent, part-time Medical Director. She will serve the county 16 hours per week.
- The St. Clair County Health Department (SCCHD) welcomed back students again this fall. Continued collaboration with RESA and SC4 provides TEC Health Science and SC4 Nursing students to gain clinical experience in various public healthcare programs under the supervision of the Nursing division.
- The Environmental Health Division recently received a State of Michigan grant to participate in a long-term groundwater monitoring project in Kimball Township. The investigation is in response to an EGLE site inspection at a facility in which oil, paper sludge, metal and plastic drums, crushed car and stained soil were observed. Environmental Health staff sampled three nearby residential wells to determine the presence of contaminants of concern. Fortunately, none of the targeted volatile and semi-organic compounds were found.
- Several Nursing staff attended various in-person trainings this month, including the Michigan Family Planning Update, Child, Adolescent & School Health conference, MALPH Leadership Training, as well as Basic Life Support (CPR/Recertification).
- Walk-In for flu, covid boosters and other needed vaccinations at the health department's main office on Mondays, from 10:00am – 6:00pm and Wednesdays, from 8:00am-4:00pm. Appointments are available on other days, call (810) 987-5300 to schedule.
- The Preventive Health and Immunization team began seeing a resident for presumptive pulmonary tuberculosis in August 2022. Directly observed therapy (DOT) was initiated. Infection control measures were taken to ensure there was no spread of disease.
- The St. Clair County Health Department received Tecovirimat (TPOXX) from the strategic national stockpile to prescribe to individuals meeting criteria after testing positive for Monkeypox. SCCHD continues to be a hub for Jynneos Monkeypox vaccine and is actively immunizing high-risk individuals.
- September was National Recovery Month and the SCCHD Director-Health Officer and members of the Health Education team were invited to participate as a panel member and session presenters during the month long, virtual Recovery Summit webinar series sponsored by St. Clair County Community Mental Health and the St. Clair County Community Services Coordinating Body.