COMMUNITY DEVELOPMENT BLOCK GRANT
CORONAVIRUS RESPONSE

II. CDBG-CV APPLICATION

COMPLETE APPLICATION CHECKLIST

Please submit each section of the application, including this checklist:

- ☐ **A. CDBG-CV Application Cover Page,** *limit 1 page*
- ☐ **B. CDBG-CV Application Worksheet** , *limit 2 pages*
- ☐ **C. CDBG-CV Application Narrative,** *limit 7 pages*
- ☐ **D. Budget: Revenues and Expenditures,** attached separately, *limit 1 page*

  Budget worksheet MUST match budget listed on the Cover Page, Summary page, and in the narrative

Required documents for non-profit organizations:

- ☐ **Verification of 501(c)3 or 6 Status,** *limit 1 page*
- ☐ **Agency Organizational Chart** to show how the proposed program fits into the overall organizational structure; include program staff or positions, *limit 1 page*
- ☐ **Most Recent Agency Operating Budget *Summary***, *limit 1 page*
- ☐ **Most Recent Independent Auditors Report and identified findings** or *if an Audit is not available* the most recent 990 Financial Statement
- ☐ **Complete list of Board Members**

Signature of the Executive Authority **Date**

15.11.2020

JERRE R. BRYANT CITY ADMINISTRATOR

Name **Title**

A. CDBG-CV COVER PAGE, limit 1 page

CDBG-CV COVER PAGE

Service Type	☐ Small Business Assistance Program ☐ Rental/Mortgage Assistance ☐ Homeless Prevention	☐ Food Assistance ☒ Other	
CDBG-CV Type	☒ Prevention of the Coronavirus ☒ Preparation for the Coronavirus ☒ Response to the Coronavirus		
Operating Agency	City of Westbrook		
Program Name	Public Health Specialist for Coronavirus Coordination		
Program Area	☒ Cumberland County Entitlement Jurisdiction ☐ City of South Portland ☒ Other City of Westbrook		
Mailing Address	c/o Westbrook Fire & Rescue Department 570 Main Street Westbrook, ME 04092		
Address Services are Delivered	TBD but more than likely 570 Main St. Westbrook, ME 04092		
Executive Director /Town Manager	Jerre Bryant	Phone 207-854-9105 x1212	Email jbryant@westbrook.me.us
Project Director	Andrew Turcotte	Phone 207-854-0644 x2305	Email aturcotte@westbrook.me.us
Financial Contact	Suzanne Knight	Phone 207-854-9105 x1204	Email sknight@westbrook.me.us
Person who completed the Application	Andrew Turcotte	Phone 207-854-0644 x2305	Email aturcotte@westbrook.me.us
Amount of CDBG-CV Funds Requested $111,075		Total Program Budget $111,075	
Estimated number of people who will be served: 20,000		**OR** Estimated number of businesses served:	
DUNS Number	145236159	Tax ID 01-6000038	

B. CDBG-CV WORKSHEET, *limit 2 pages*

1. **HUD National Objective**. All CDBG-CV programs must serve Low and Moderate Income Clientele

   ☒ **Low and Moderate Income Clientele** (LMC): an activity which provides benefits to a specific group of persons who qualify as LMI.

2.

A. Describe the beneficiaries or clients served by the program.	A. all residents of Westbrook
B. How many will be served by the proposed program? (unduplicated -per year)	B. all residents of Westbrook
C. How many are *CCEJ Resident*?	C. 100% of the residents of Westbrook
D. How many are *low to moderate income residents of a CCEJ town/City*? See income data in the instructions	D. 17,615
E. What percentage of total clients are low to moderate income residents of the CCEJ? *(To calculate = D/B * 100; Must be > 51%)*	E.61.03%

3. **Employees.** *Program specific, not for the entire organization.*

A. Is this a new (pilot) program?	A. yes
B. How many employees are currently employed in this program?	B. 0
C. How many employees will be employed in this program if it receives CDBG-CV funding?	C. 1
D. How many employees will be employed in this program if it does not receive CDB-CV funding?	D. 0

4. **Documentation**

A. How will the beneficiaries' information be collected and documented?	A. all beneficiaries will be tracked through electronic mechanisms and reported out.
B. What documentation will be used to prove the funds are going to the prevention, preparation or response to the Coronavirus?	B the nature of this position is specifically for the prevention, preparations and response to COVID-19.
C. How will the units of service be tracked and documented?	C. this will be tracked by hours/weeks worked by employee.
D. How will the outcomes be measured, collected, and documented?	D. outcomes will be reported in a quarterly report or as needed monthly.

Please limit the CDBG-CV Worksheet to 2 (two) Pages.

C. CDBG-CV APPLICATION NARRATIVE

In a separate document please answer the following questions; you have ***a maximum of 5*** single-sided pages. Be as direct and specific as necessary. Please include question headings, but in order to save space please *do not* restate the question in your response.

1. Program Description

Describe the program being proposed. Make sure to explain the "who, what, when, and where". Is this a new program or an expansion of an existing program?

2. Need for the Program and CDBG-CV Funds as it relates to the Coronavirus

Describe the need in our community, how this need is related to the Coronavirus, and why CDBG-CV funds are essential to address this need.

3. Project Management

Define who will manage the project and how they will manage it. Describe the applicant's experience in delivering and managing this or similar programs. Please summarize current licensing and accreditations obtained.

4. Readiness to proceed

Describe the steps that have been completed or must be completed to initiate the project. These may include community support, staffing, securing an appropriate location, marketing, and networking.

Describe the program's timeline with dates and times, including the earliest possible start dates, end dates, and milestones as applicable.

5. Budget for the Project

Provide a narrative explaining the budget and expenses for the program. *Describe exactly what and who the CDBG-CV will pay for in this program.* Describe how the dollars spent in South Portland will be tracked separately.

Please ensure that budget amounts listed in the narrative match the cover page and budget worksheet.

6. Partnerships, Collaboration, and Outreach

Describe how you are collaborating with CCEJ towns/cities and other non-profit organizations to form a cohesive approach to the coronavirus. What steps will you take to make sure there is not a duplication of services? How will you reach out to families or businesses in need?

D. BUDGET: REVENUES AND EXPENDITURES, limit 1 page.

Complete provided Excel budget form including leveraged funding sources.

Community Development Block Grant

Coronavirus Response Application

CPCOG

City of Westbrook

May 10, 2020

BACKGROUND

COVID-19 a mild to severe respiratory illness that is caused by a coronavirus (*Severe acute respiratory syndrome coronavirus 2* of the genus *Betacoronavirus*), is transmitted chiefly by contact with infectious material (such as respiratory droplets) or with objects or surfaces contaminated by the causative virus, and is characterized especially by fever, cough, and shortness of breath and may progress to pneumonia and respiratory failure.

On December 31, 2019, the Chinese City of Wuhan reported an outbreak of pneumonia from an unknown cause. The outbreak was found to be linked to the Human seafood market because of a shared history of exposure by many patients. After a full-scale investigation, China's Center for Disease Control activated a level 2 emergency response on January 4, 2020. A novel coronavirus was officially identified as a causative pathogen for the outbreak (Phelan 2020).

Coronavirus was first discovered in the 1960's and is a respiratory RNA virus, most commonly associated with the common cold. However, we have had two highly pathogenic forms of coronavirus that have originated from animal reservoirs, leading to global pandemics. This includes SARS-CoV in 2002-2004 and MERS CoV in 2012 which created a combined 10,000 plus cases worldwide.

The International Committee on Taxonomy of Viruses names the 2019-nCoV officially as severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which causes the coronavirus disease, COVID-19, on February 11, 2020 (Gorbalenya 2020).

The first reported case in the United States, according to the CDC, came on January 20, 2020 from a man who returned from visiting Wuhan on January 15, 2020. By the end of January, local and community transmission had occurred and by the beginning of February,

death had started to occur. By the end of March, cases had been confirmed in all 50 states, the District of Columbia, and all inhabited U.S. territories except American Somoa. As of May 4, 2020, the United States has the most confirmed active cases and deaths in the world and its death rate was 206 per million people, the tenth-highest rate globally (Statista, 2020). At present, globally, there are 4,161,867 confirmed cases and 281,397 deaths associated with COVID. In the United States, there are 1,372,415 confirmed cases and 80,157 deaths. As of today, in the State of Maine, there are 1,436 confirmed cases and 64 fatalities. Of the confirmed cases in the State, Westbrook accounts for nearly 65 of those cases. And certainly, these numbers are underreported given the testing capacity and we are currently tracking just under 200 cases in Westbrook that are either suspected or have been confirmed positive with COVID-19,

Symptoms of COVID-19 include cough, shortness of breath, difficulty breathing, or at least two of the following symptoms: chills, shaking with chills, muscle pain, headache, sore throat, and loss of taste or smell. Symptoms can range from mild to severe and may appear up to two weeks after exposure to the virus, according to the CDC. Some people with COVID-19 don't display any symptoms.

The U.S. CDC is leading a multiagency effort to combat the COVID-19 pandemic. CDC staff members have been deployed to dozens upon dozens of locations in the United States and internationally. CDC staff members are working with state and local health departments and other public health authorities to assist with case identification, contact tracing, evaluation of persons under investigation (PUI) for COVID-19, and medical management of cases, as well as the research and academic institutions to understand the virulence, risk for transmission, and other characteristics of this novel virus.

PROPOSAL

The City of Westbrook is proposing to add a Public Health Specialist position with the primary goals of tracking coronavirus cases, providing follow up and guidance as warranted to those that have been diagnosed or suspected of having COVID-19, providing for surveillance as needed, providing for outreach and education and finally, setting up for antibody testing and vaccination for employees and or for the general public.

This is a new position that would be either temporary Special Duty Assignment or Term Limited Temp (TLT) in nature although the goal would be to fund long term though the following mechanisms: grant funding, private/public partnership, municipality, or through NGO. The Public Health Specialist, TLT (one year) position works in close collaboration with the City's Health Officer, Infectious Disease Officer, and with other members of the COVID Task Force. In addition, the position will also collaborate with Maine CDC, specifically District 2 (Cumberland County) and members of their Communicable Disease Epidemiology Section, Public Health Nurses (PHN), Program Leads/Subject Matter Experts (SME) staff, and Disease Research and Intervention Specialists (DRIS) on COVID-19 related activities. Major activities of responsibility include performing case and outbreak investigations and providing consultation and clinical support to health care providers and to the public and supporting immunization activities (including vaccination clinics) and immunity assessments (drawing blood for titer).

The position would also be responsible to track all suspected and confirmed COVID-19 cases. In addition to the tracking, this individual would be responsible for conducting follow up with these patients to monitor disease progression and also conduct further surveillance, trace contact investigation, and as warranted, include Maine CDC for follow up and testing. Additionally, this position will also be responsible for the following:

Mass Vaccination for Employees - Develop and implement plans for public safety and other city employees. Also develop vaccination plan for employees within congregate care facilities within Westbrook and other District 2 locations as deemed appropriate after consult between District 2 public health and partnering communities, with the goal of mass vaccination, to minimize absenteeism and maximize the healthcare workforce available to manage the surge resulting from this pandemic event.

Employee Workplace Policies - Develop and implement plans focused on family support for employees, absentee policies, plans for respiratory isolation of COVID-19 like illness.

Personal Protection Equipment (PPE) and Systems – Develop and implement specific plans to provide adequate worker infection control education and to improve existing stockpiles to levels adequate to insure our public safety employees, healthcare personnel and essential workforce are supplied with proper equipment to respond to a pandemic event.

Healthcare System Decompression - Develop plans and procedures to decompress the healthcare system and to provide for optimal utilization. This would include systematic planning and integrated risk communications messaging designed to optimize access to the highest quality health care for all citizens while managing patients and population health needs in the most appropriate care setting including at home, in the community, and at various healthcare facility locations. Key to such optimization of health care is comprehensive situational awareness inclusive of all health care providers including the primary care community, school nurses, public health personnel, hospital staff, and State and local governmental leadership. Such situational awareness is key for the allocation of scarce assets at the local, State, regional, and federal levels. The goal would be ensuring adequate healthcare system capacity and capability for patient care during this pandemic event.

Alternate Care Site (ACS) Capability – Develop and implement specific plans to establish and/or enhance current State/healthcare system ACS plans and equipment for patient care outside the hospital setting (e.g., schools, hotels, gymnasiums, armories, stadiums, convention centers) during a pandemic event. Establishment of ACS is critical to providing appropriate high-quality health care in a resource constrained environment, with the goal of providing care and allocating scarce equipment, supplies, and personnel. Planning should therefore include thresholds for altering triage algorithms and otherwise optimizing the allocation of scarce resources. Effective planning and implementation will depend on close collaboration among State and local health departments (e.g., State Public Health Agencies, MaineCare, State Survey Agencies), provider associations, community partners, MEMA, Cumberland County EMA, mental health and substance abuse treatment facilities, and other healthcare systems including Maine Health and Northern Light.

NEED

Based on the 2010 U.S. Census, the population in Westbrook was 17.494, however the estimated population today is 19,760. Westbrook is the 9th largest community in the State of Maine, currently growing at 2.03% annually, and during the past decade, the City has grown by 12.95%. The poverty rate in Westbrook is 15.29% and the race most likely to end up in poverty are blacks in Hispanics. In fact, blacks and Hispanics are 56.85% and 20.92% more likely to be in poverty in Westbrook than white (13.25%). Additionally, these groups are also less likely to seek preventative healthcare.

As with any community, the health of its population is influenced by both its social and economic circumstances and the healthcare services available. On average, the socioeconomic status of blacks and Hispanics in the United States is considerably lower than whites

(Caucasians). These groups also face additional barriers to receiving healthcare services of higher quality. Some of these barriers are a result of their lower socioeconomic status, while others are due to secondary to the specific features of the races.

The low average socioeconomic status of these races compared to whites is reflected in their annual household income, educational attainment, occupational characteristics, and asset accumulation. The low average income and educational attainments of these groups create obstacles to receiving timely healthcare services and low-income people are less likely able to afford out-of-costs for care, even if they have health insurance. Low education may impair individual's ability to navigate the often complex, healthcare delivery system, communicate with healthcare providers, and understand providers instructions. Additionally, these groups low income and occupational characteristics are associated with low rates of health insurance coverage. And lacking health insurance makes the cost of health care prohibitive for many people and is the most important barrier to adequate health care access, especially during and after a pandemic. This position is vital to ensuring that these, often forgotten individuals, who happen to make up a large percentage of our population, have access to the healthcare resources and do not become just another statistic.

CDBG funding, at present is the only way to fund this innovative program given that as municipalities were building their FY 21 budgets, there city/town leaders were not anticipating a pandemic coming in and crippling their communities or economies. Furthermore, as this crisis continues to unfold, the impact on communities bottom line will be driven not only by the overall economic conditions, but specifically where parts of the economy where revenue is generated: retail sales, income and wages, and real estate.

Unfortunately, federal aid is a small percentage of Westbrooks total municipal budget while state aid is a much larger percentage and with a potential loss of a significant amount of revenue sharing, the City's economic situation is dire. With that said, the City will no longer, at least short term, be able to add new positions and will thus, need to rely on federal programs, including the Community Development Block Grant (CDBG) to fund critical programs, such as this one, for our community, one that is currently vulnerable from the coronavirus.

DATA

We would be looking to utilize applications to track cases as well as identify a tool that's major function is disease surveillance; to ensure that we have the right information available to assist the Public Health Specialist at the right time to inform decisions and actions across the public health system. Furthermore, this data needs to be tracked in real time and reported out for grant purposes.

Surveillance will need to involve gathering a wide variety of data about COVID-19 from a wide range of sources, to provide the Public Health Specialist, the Public Health Officer, Infectious Disease Officer, and members of the Task Force, etc., to provide us with situational awareness.

We need to understand the area of the County which are most affected by the pandemic, whether particular groups of people are affected, whether symptoms are getting more severe and when the outbreak may have peaked. This is when used to inform public health action to help prevent and control the disease. Surveillance will also be used to provide data to modelers at Maine CDC, which will help predict how this outbreak and future, most likely in the fall and winter will progress based on a range of different scenarios.

PUBLIC HEALTH EDUCATION

Part of the Public Health Specialist role will be to ensure ongoing education and communication with the task group members, internal and external stakeholders, and the public now that this pandemic is within our community. In addition, the position will be responsible for coordinating COVID-19 communication activities with news media and other channels to ensure consistent messaging.

The Public Health Specialist will be responsible for communicating early, empathetically, accurately, and effectively. Early communication of COVID-19 information helps limit misinformation and rumors that could contribute to confusion and fear. Empathetic communication conveys concern and reassurance, empowers people, and reduces emotional turmoil. Accurate communication provides the facts about a situation and what is being done to resolve it. Effective communication helps build understanding and guide the public, media, healthcare providers, and other groups in responding to COVID-19 and complying with public health, state, and federal recommendations. Finally, the Public Health Specialist will aid in the following:

1. **Meet with county and local existing emergency planning and operations team to update the emergency communication plan.**
   - Review all aspects of your plan, such as staffing, communication strategies, trainings, tools, policies, equipment, systems and procedures for clearing and approving information, and other resources.
   - Develop or update your plan based on various scenarios your county or local community may face during a COVID-19 or other pandemic outbreak.

2. Establish systems for sharing information with key partners and stakeholders.

- Identify everyone in your chain of communication (e.g., new and existing partners and stakeholders, others in your own agency, and other health departments), and create or update a comprehensive contact list.
- Maintain up-to-date primary and secondary contact information for everyone in the chain.
- Determine when and what type of information to share with those in your communication chain.
- Identify platforms, establish a hotline, automated text messaging, email, social media, and a website, to help disseminate information to internal and external partners and audiences.

3. Encourage community members to plan for COVID-19.

- Promote the practice of everyday preventive actions before outbreak occurs (e.g., staying home when sick, covering coughs and sneezes with a tissue, washing hands often, and cleaning frequently touched surfaces). Identify up-to-date resources and tools to household members plan and prepare for COVID-19.

4. Create a COVID-19 communication workgroup with representatives from key partners and stakeholders.

- Include communication, marketing, and public relations professionals who work in various community settings, such as childcare programs, healthcare facilities,

pharmacies, schools, workplaces, community- and faith-based organizations, and public and private organizations.

- Discuss with the workgroup the emergency communication plan for your local community and county government.
- Determine how to coordinate COVID-19 outbreak communication between workgroup members. Encourage their participation in other community-wide COVID-19 readiness activities.

5. Engage communities in a dialogue about COVID-19 readiness.

- Conduct needs assessments or focus groups with community members to gather information about their knowledge, attitudes, beliefs, and challenges related to COVID-19. Use their feedback to improve your communication strategies, messages, and materials.

The goal for the Public Health Specialist is to work closely with workgroup members and key partners and stakeholders to address COVID-19 readiness challenges and barriers identified by audiences in our community. Identifying solutions to help audiences move past barriers may help people change habits and better adapt to changing circumstances during an outbreak.

6. Identify target audiences and communication channels.

- Work with workgroup members and key partners and stakeholders to define audiences and develop strategies to reach every member of the community. One major goal is to

identify additional strategies that may be needed to reach high-risk and vulnerable populations that exist within Westbrook such as the following:

- pregnant women
- infants and children
- older adults
- persons with disabilities
- persons with access and functional needs
- individuals with underlying medical conditions
- individuals with food insecurity

This position will collaborate as stated with multiple stakeholders and if COVID-19 cases start to reduce significantly over the next fiscal year and this pandemic ends, the position will focus on other key initiatives and activities by the District Public Health Office needs, although the main focus will be on pandemic influenza initiatives. However, activities will also be determined based on community needs secondary from community assessments and community profiles.

Health information and health promotion activities will be designed to reduce health risk and promote better health for the citizens of Westbrook as well as residents within Cumberland County. Health communication plans and activities, including social marketing, as well as risk communication plans will also be measured as will be our COVID-19 response activities.

GRANT MANAGEMENT

This Public Health Specialist job description is currently being drafted by the Fire Chief/Health Officer. Andrew Turcotte is currently in that position and is the one spearheading this project. In addition to being appointed the Health Officer, Andy is also a registered nurse,

critical care paramedic and holds designation in human resource management, in addition to multiple other credentials.

An office has already been established within public safety and the framework for said position has also already been established. Furthermore, the position would work closely as stated with the Health Officer, Infectious Disease Officer, the COVID task force and also with our partners at public health and Maine CDC. In addition, where this position would be the face of our community health program, establishing relationships is paramount and we have also established a list of contacts in which this person would directly interact or partner with on a regular basis, including a number of our local non-profits and our healthcare delivery systems.

To ensure that the most highly qualified candidate is selected, I have already reached out to a number of my peers and would certainly reach out to others within the public health arena to have them be on the hiring committee. Once a candidate is hired, an orientation period would begin and part of that would be to ensure that the candidate is paired with a mentor. There would be weekly one-on-ones, more often if needed and evaluations at three, six and twelve months. We would also ensure that continuing education training was provided, as part of our in-kind giving.

The City of Westbrook started preparing for COVID-19 back in January. Although we have secured PPE, cleaning material and updated our continuity of operations plan, we were unable to secure additional positions due to the financial situation created secondary to coronavirus. With that said, this is a position that would provide much needed support, specific to the preparation, coordination,

FUNDING

Funding will be used for salary and benefits for one FTE. Some additional monies will be used for laptop and marketing/educational materials which will be used for outreach campaigns.

PARTNERSHIPS

As always, when in a pandemic or epidemic, you cannot work in a vacuum. To reduce redundancy or more importantly to reduce the potential to miss cases, collaboration is key. We currently are working with key stakeholders to include Public Health and Maine CDC. In addition, we are working with all of our congregate care facilities (nursing homes, public housing, group homes, etc.,) as well as our health care partners, which includes hospitals and urgent care facilities in an effort to rapidly identify those that are suspected of having or those that have been confirmed with COVID-19. Once cases are identified, Maine CDC is notified so that they can begin tracking, but as we all know, they have only so many resources and we have witnessed cases get missed. Furthermore, contract tracing can only go so far. Additionally, currently only facilities that have three or more cases will have full investigations. This position will provide additional flexibility to provide for enhanced investigations, screenings and tracings and it is vital to do this in collaboration with our partners.

Furthermore, food insecurity and ensuring that residents are still able to make doctors important are also important. This position will help be a liaison between some of the services that currently exist within Westbrook and our residents and as needed to help ensure that our residents still have the necessary services that they need (food delivery, can make doctors appointments, whether in person or via telehealth).

Another very important role as stated for the Public Health Specialist will be the patient follow ups. These calls more than ever will help close the loop to ensure that folks are either

recovering or in some cases, end up becoming symptomatic and may need additional resources, which we have seen as we are currently following up at this moment. At present, we are finding a number of our residents are either home and have fully recovered while some are in the hospital. While still tragically, some have lost their lives to COVID-19. We have also identified that some patients, as stated, need additional services, whether that is food delivery, medication delivered to their home or in some cases, they feel socially isolated and need some additional support, all of which this position can provide and most importantly, all of which are crucial services to provide in a pandemic situation.

We currently track calls for service utilizing our computer aided dispatch and through MEFIRS (our Maine EMS database). Those calls that are suspected or confirmed COVID are then moved into a database in which admin do follow up. The Public Health Specialist would have access to this database.

And finally, we have set weekly conference calls with our partnering agencies, to include our partners at Public Health, Maine EMS, Cumberland County Fire Chiefs, and our local COVID task force. And we do this to ensure that we are all on the same page with information and to ensure that there is not a duplication of efforts, where there does not have to be.

In closing, we will provide the necessary progress and fiscal reports, specific to the timelines, goals, and objectives for the major domains as presented, to include incident management, jurisdictional recovery, informational management, countermeasures and mitigation, surge management, and bio surveillance. We feel this is a novel and worthwhile project that will enhance the health and wellbeing of the residents of Westbrook and as needed, the other communities within Cumberland County. We appreciate your consideration for this particular grant.

REFERENCES

Phelan, AL et al. The novel coronavirus originating in Wuhan, China: Challenges for global health governance. JAMA. 2020, 323(8):*709-10 doi:10.1001/jama.2020.1097.*

Gorbalenya AE et al. Severe acute respiratory syndrome-related coronavirus: The species and its viruses – a statement of the Coronavirus Study Group. bioRvix. Published Jan 1, 2020. *doi: 10:11.1101/2020.02.07.937862*

"COVID-19 deaths worldwide per one million population as of April 21, 2020 by country," Statista, May 4, 2020

CDBG-CV BUDGET FORM , *limit 1 page*

Complete one program budget spreadsheet for each program application.

PROGRAM OR PROJECT NAME: Public Health Specialist for Coronavirus Coordination
OPERATING AGENCY: City of Westbrook

Revenues: List ALL funding sources for the proposed program.	Please indicate: Secured or Projected	Revenues TOTAL
CDBG-CV Request	$111,073	
Other HUD Funds (please list)		
a.		
Other Federal Funds (please list)		
a.		
b.		
State/ County Funds (please list)		
a.		
b.		
Local Funds		
Private Funds (Grants, Fundraising, etc, please list)		
a.		
b.		
In Kind Services		
mileage reimbursement office and office supplies		
TOTAL PROGRAM or PROJECT REVENUE		

EXPENDITURES: Feel free to edit categories as relevant to your program	CDBG-CV Expenditures in CCEJ (excluding South Portland)	CDBG-CV Expenditures in South Portland	Expenditures All Other Sources	TOTAL Expenditures
Employee Salaries	75,000			$75,000
Employee Fringe Benefits	33,375			$33,375
Materials/Supplies	$500			$500
Equipment				
Advertising & Public Information	$1,000			$1,000
Other, please specify				
a. laptop	$1,200			$1,200
c.				
d.				
TOTAL PROGRAM or PROJECT EXPENSES				