

CHAMPAIGN COUNTY BOARD
COMMITTEE OF THE WHOLE
Finance/ Policy, Personnel, & Appointments/Justice & Social Services Agenda
County of Champaign, Urbana, Illinois
Tuesday, August 11, 2020 at 6:30 p.m.

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

<u>Agenda Items</u>	Page #
I. <u>Call to Order</u>	
II. <u>Roll Call</u>	
III. <u>Approval of Agenda/Addenda</u>	
IV. <u>Approval of Minutes</u>	1 - 8
A. June 9, 2020	
V. <u>Public Participation</u>	
• Being accepted remotely through Zoom – for instructions go to: <u>http://www.co.champaign.il.us/CountyBoard/Committee Of The Whole/2020/200811 Meeting/200811Zoom Meeting Instructions.pdf</u>	
VI. <u>Presentations</u>	
A. Veteran’s Assistance Commission – Brad Gould	
VII. <u>Communications</u>	
VIII. <u>Justice and Social Services</u>	
A. Monthly Reports – All reports are available on each department’s webpage through the department reports page at: http://www.co.champaign.il.us/CountyBoard/Reports.php	
• Probation & Court Services – May & June 2020 and 2 nd Quarter Report	
• Public Defender – June & July 2020	
• Emergency Management Agency – March, April, May & June 2020	
• Animal Control – April & May 2020	
B. Rosecrance Re-Entry Financial Report – May & June 2020 (information only)	9 -10
C. Update on the 2020 Census (information only)	11
D. <u>Other Business</u>	
E. <u>Chair’s Report</u>	
F. <u>Designation of Items to be Placed on the Consent Agenda</u>	
IX. <u>Finance</u>	
A. Budget Amendments/Transfers	
1. Budget Amendment 20-00042	12 - 21
Fund 089 County Public Health Fund / Dept 049 Board of Health	

Increased appropriations: \$2,302,323
Increased revenue: \$2,302,343
Reason: Appropriate for 100% of CURE Program Grant funding for COVID-19 related public health expenses (grant ends 12/30/20), and 75% of COVID-19 Contact Tracing Grant funding (grant ends 6/30/21).

2. Budget Amendment 20-00041 22 - 24
Fund 075 Regional Planning Comm / Dept 889 Emerg Soln Grant – CARES
Increased Appropriations: \$80,000
Increased Revenue: \$80,000
Reason: Emergency Solutions Grant – CARES Act funding – see attached

- B. Treasurer
 1. Monthly Report – 2nd Distribution Settlement Report and Comparison of Collections Versus Delinquencies – Reports are available on the Treasurer’s webpage at: <http://www.co.champaign.il.us/treasurer/reports.php>

- C. Auditor
 1. Monthly Report – June & July 2020– Reports are available on the Auditor’s webpage at: <http://www.co.champaign.il.us/auditor/countyboardreports.php>

- D. County Executive
 1. Labor/Management Health Insurance Committee recommendation for employee health insurance & related benefits for FY2021 25 - 29

 2. CURE Program Grant Funding (for information only) 30 - 38

- E. Other Business

- F. Chair’s Report

- G. Designation of Items to be Placed on the Consent Agenda

- X. **Policy, Personnel, & Appointments**
 - A. County Executive
 1. Request for Authorization to send the Director of IT Job Description to the Job Evaluation Committee for Re-evaluation and Review 39 - 43

 2. Request for Authorization to send the Circuit Court Secretary Job Description to the Job Evaluation Committee for Re-Evaluation and Review 44 - 49

 3. Monthly HR Report – June 2020 50 - 52

 4. Appointments/Reappointments (persons to be appointed distributed at the meeting)
Applicants (*italics indicates incumbent*):
 - a. Drainage District Commissions – 1 Term Each, 9/1/2020 – 8/31/2023 53 - 80
 - Beaver Lake Drainage District – *Steven Hammel*
 - Blackford Slough Drainage District – *LaVern Zehr*
 - Conrad & Fisher Drainage District – *Harlan Trotter*

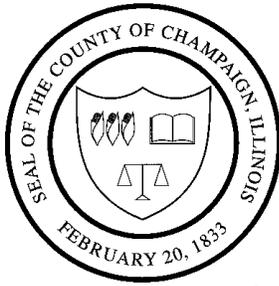
- Fountain Head Drainage District – *Robert Barker*
 - Kankakee Drainage District – *Patrick Feeney*
 - Kerr & Compromise Drainage District – *Wayne Emkes*
 - Longbranch Mutual Drainage District – *Norman Uken*
 - Okaw Drainage District – *Larry Dallas*
 - Owl Creek Drainage District – *Leonard Delaney*
 - Pesotum Consolidated Drainage District – *Chris Hausman*
 - Raup Drainage District – *Stephen Osterbur*
 - St. Joseph #3 Drainage District – *Charles Daly*
 - St. Joseph #4 Drainage District – *Travis Fruhling*
 - St. Joseph #6 Drainage District – *Bruce Stickers*
 - Salt Fork Drainage District – *Dennis Bergman*
 - Sangamon & Drummer Drainage District – *John Leonard*
 - Silver Creek Drainage District – *Cecil Hudson*
 - Somer #1 Drainage District – *Chris Conerty*
 - Two Mile Slough Drainage District – *Jonathan Schroeder*
 - Triple Fork Drainage District – *Lowell “Pete” Johnson*
 - Union D.D. #1 of Philo & Crittenden – *Robert Grove*
 - Union D.D. #1 of Philo & Urbana – *Roy C. Douglas*
 - Union D.D. #2 of St. Joseph & Ogden – *Dwight Raab*
 - Union D.D. #3 of South Homer & Sidney – *Linda LeeDrotz*
 - Union D.D. of Stanton & Ogden Townships – *Les Olson*
 - Upper Embarras River Basin Drainage District – *J. Andrew Edwards*
 - Willow Branch Drainage District – *Steve Maddock*
 - Wrisk Drainage District – *Steven Herriott*
- b. Drainage District Commission – 1 Unexpired Term, 9/1/20 – 8/31/2021 81
- Union D.D. #2 of St. Joseph & Ogden – *Travis Fruhling*
- c. Drainage District Commission – 1 Unexpired Term, 9/1/20 – 8/31/2022 82 - 83
- Lower Big Slough Drainage District – *Mark Wood*
 - St. Joseph #6 Drainage District – *BJ Hackler*
- d. County Board of Health – 1 Unexpired Term, ending 6/30/23 84 - 85
- *Lyndon Goodly*
- B. County Clerk 86 - 88
1. June & July 2020 Report and Semi-Annual Report
 2. Update on Website (discussion only)
- C. Other Business
- D. Chair’s Report
1. County Executive appointments expiring September 2020 (information only)
 - a. None
 2. Currently vacant appointments made by the County Executive – full list and information is available on the County’s website at:
<http://www.co.champaign.il.us/CountyExecutive/appointments/CurrentVacantOpenings.pdf>

E. Designation of Items to be Placed on the Consent Agenda

XI. Other Business

XII. Adjournment

All meetings are at Brookens Administrative Center – 1776 E Washington Street in Urbana – unless otherwise noted. To enter Brookens after 4:30 p.m., enter at the north (rear) entrance located off Lierman Avenue. Champaign County will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities. Please contact the Office of the County Executive, 217-384-3776, as soon as possible but no later than 48 hours before the scheduled meeting.



CHAMPAIGN COUNTY BOARD
COMMITTEE OF THE WHOLE
Finance/ Policy, Personnel, & Appointments/Justice & Social Services
County of Champaign, Urbana, Illinois
Tuesday, June 9, 2020 at 6:30 p.m.
Lyle Shields Meeting Room, Brookens Administrative Center,
1776 East Washington Street, Urbana, Illinois

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MINUTES – Subject to Approval

- Members Present:** Lorraine Cowart, Connie Dillard-Myers, Jodi Eisenmann, Aaron Esry, Cynthia Fears, Stephanie Fortado, Jim Goss, Stan Harper, Mike Ingram, Jim McGuire, Kyle Patterson, Jon Rector, Chris Stohr, Steve Summers, Leah Taylor, Eric Thorsland, James Tinsley, Jodi Wolken, Charles Young, Giraldo Rosales
- Members Absent:** Brad Clemmons
- Others Present:** Darlene Kloeppel (County Executive), Tami Ogden (Deputy Director of Finance), Isak Griffiths (Deputy Director of Administration), Megan Robison (Recording Secretary), Aaron Ammons (County Clerk), AJ Jimenez (Lead Tax Extension Specialist), George Danos (Auditor), Marisol Hughes (Treasurer), Alejandra Aguero (Chief Deputy Treasurer), Joel Palomaki (ERP Project Manager)
-

I. Call to Order

Chair Rosales called the meeting to order at 6:33 p.m.

II. Roll Call

A verbal roll call was taken, and a quorum was declared present.

III. Approval of Agenda/Addenda

MOTION by Mr. Young to approve the agenda; seconded by Mr. Harper. Upon vote, the **MOTION CARRIED** unanimously.

IV. Approval of Minutes

A. May 12, 2020

MOTION by Mr. Thorsland to approve the minutes of May 12, 2020; seconded by Mr. Stohr. Upon vote, the **MOTION CARRIED** unanimously.

V. Public Participation

Lindsey Hall, Superintendent – Mahomet-Seymour School District, spoke about property tax disbursements. First, she thanked everyone for the timely disbursement of the first installment. Then she explained how a school employee called the Treasurer’s Office and was informed that the second installment would not be posted before June 30th (the end of the school’s fiscal year). Ms. Hall explained why this is a problem for school districts. She stressed how much the school districts need these payments in a timely manner.

55 John Bambenek is a local homeowner and explained how he has paid his property taxes, but the
56 website does not reflect his payment and is showing that late fees have been assessed. He stated
57 that other County residents have expressed the same issues. He asked the County Board, or
58 County Recorder, to withhold property tax liens on homes until the property tax issues have been
59 sorted out.
60

61 Dan Hudson, Owner – Hudson Farm Wedding and Events, expressed his desire for the County to
62 allow business owners to re-open much quicker than the current schedule allows. He explained
63 how this is impacting his business.
64

65 Annie Murray, Owner – Pear Tree Estate, explained how many of her clients are now going to
66 other counties to hold events and how this is impacting her business and employees of many
67 years. She requested that the County work to re-open faster than scheduled.
68

69 Ms. Fears joined the meeting during public participation.
70

71 **VI. Presentations**

72 A. Soil & Water Conservation District
73

74 Joe Rothermel, Champaign County Soil & Water Conservation Chairman, began by introducing himself
75 and the other presenters:

76 Steve Stierwalt, Vice-Chairman

77 Renee Weitekamp, Administrative Coordinator

78 Erin Bush, Resource Conservationist
79

80 He stated the purpose of this presentation is to inform the County Board about the functions of the district
81 and their funding. Mr. Rothermel stated that the SWCD is a local unit of government that was established
82 in 1943, does not have any taxing authority and their top two priorities for FY2020 are soil erosion and
83 water quality. He also showed where they receive funding for their daily operations, explaining that
84 funding from the Department of Agriculture can be unreliable and funding from the County Board is very
85 vital to keeping the office running. They also explained many of the programs where the District is
86 involved, how County Board funding has assisted to return over \$2 million back into the County, and
87 their upcoming projects. The Board of Directors meets once a month in the evenings.
88

89 Ms. Cowart joined the meeting during the presentation.

90 Mr. Young left the meeting during the presentation.
91

92 **VII. Communications**
93

94 None
95

96 **VIII. Policy, Personnel, & Appointments**

97 A. County Executive

98 1. Monthly HR Report – May 2020
99

100 Received and placed on file
101

102 2. Appointments/Reappointments (persons to be appointed distributed at the meeting)

103 **Applicants (*italics indicates incumbent*):**

104 a. Drainage District #2 Town of Scott – 1 position – unexpired term ending 8/31/2022

- 105 • Larry Zahnd

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MOTION by Mr. Harper to recommend County Board approval of a resolution appointing Larry Zahnd to Drainage District #2 Town of Scott; seconded by Mr. Goss. Upon vote, the **MOTION CARRIED** unanimously.

- b. Eastern Illinois Economic Development Authority Board – 1 position – unexpired term ending 1/22/2025
 - Dale Crane

MOTION by Mr. Goss to recommend County Board approval of a resolution appointing Dale Crane to the Eastern Illinois Economic Development Authority Board; seconded by Ms. Michaels. Upon vote, the **MOTION CARRIED** unanimously.

- c. Bailey Memorial Cemetery Association – 4 positions – term 7/1/2020-6/30/2026
 - Gary Fisher
 - Thomas Barnhart
 - Michael J. Freese, Jr.

MOTION by Ms. Cowart to recommend County Board approval of a resolution appointing Gary Fisher, Thomas Barnhart and Michael J. Freese, Jr. to the Bailey Memorial Cemetery Association; seconded by Mr. Esry. Upon vote, the **MOTION CARRIED** unanimously.

- d. Prairie View Cemetery Association – 3 positions – term 7/1/2020-6/30/2026
 - Pamela Carpenter
 - Marc Shaw
 - Clark Wise

MOTION by Mr. McGuire to recommend County Board approval of a resolution appointing Pamela Carpenter, Marc Shaw and Clark Wise to the Prairie View Cemetery Association; seconded by Ms. Wolken. Upon vote, the **MOTION CARRIED** unanimously.

- e. Mt. Olive Cemetery Association – 3 positions – term 7/1/2020-6/30/2026
 - David McCormick

MOTION by Ms. Wolken to recommend County Board approval of a resolution appointing David McCormick to the Mt. Olive Cemetery Association; seconded by Ms. Cowart. Upon vote, the **MOTION CARRIED** unanimously.

- f. Yearsley Cemetery Association – 1 position – term 7/1/2020-6/30/2026
 - Phillip Roy Nigg

MOTION by Ms. Michaels to recommend County Board approval of a resolution appointing Phillip Roy Nigg to the Yearsley Cemetery Association; seconded by Ms. Wolken. Upon vote, the **MOTION CARRIED** unanimously.

- g. Champaign County Board of Health – 2 positions – term 7/1/2020-6/30/2023
 - John Peterson

154 **MOTION** by Ms. Taylor to recommend County Board approval of a resolution appointing John
155 Peterson to the Champaign County Board of Health; seconded by Ms. Cowart. Upon vote, the
156 **MOTION CARRIED** unanimously.

- 157
158 h. Champaign County Forest Preserve District – 1 position – term 7/1/2020-6/30/2025
159 • *Andrew Kerins*
160 • *Brendan McGinty*

161
162 **MOTION** by Mr. Thorsland to recommend County Board approval of a resolution appointing
163 Andrew Kerins to the Champaign County Forest Preserve District; seconded by Ms. Taylor.
164 Upon vote, the **MOTION CARRIED** unanimously.

- 165
166 i. Sangamon Valley Public Water District - 1 position – unexpired term ending 5/31/2025
167 • *Frank Howard*
168 • *Michelle Grindley*

169
170 **MOTION** by Mr. Goss to recommend County Board approval of a resolution appointing
171 Michelle Grindley to the Sangamon Valley Public Water District; seconded by Mr. Rosales.
172 Discussion followed. Upon vote, the **MOTION CARRIED**.

- 173
174 B. County Clerk
175 1. May 2020 Report

176
177 Received and placed on file – Discussion followed regarding the tax cycle and the Rantoul TIF
178 District issues. Mr. Ammons stated the County Clerk is not legally responsible to track TIF
179 districts for any levying bodies.

180
181 C. Other Business

182
183 None

184
185 D. Chair's Report

- 186 1. County Executive appointments expiring July 2020 (information only)
187 a. Champaign County Housing Authority – 1 position – term 8/1/2020-7/31/2025
188
189 2. Currently vacant appointments made by the County Executive

190
191 Upcoming and current vacancies mentioned

192
193 E. Designation of Items to be Placed on the Consent Agenda

194
195 VIII. 2. a, b, c, d, e, f, g, h

196
197 **IX. Justice and Social Services**

- 198 A. Monthly Reports
199 • Probation & Court Services – April 2020
200 • Public Defender – April & May 2020

201
202 Received and placed on file

203

204 B. Rosecrance Re-Entry Financial Report – April 2020

205

206 Information only

207

208 C. Other Business

209

210 None

211

212 D. Chair's Report

213

214 Mr. Patterson made a statement about the current events that have been occurring throughout the nation.
215 He asked that everyone take a step back and listen to what others have to say.

216

217 E. Designation of Items to be Placed on the Consent Agenda

218

219 None

220

221 X. Finance

222

A. Budget Amendments/Transfers

223

1. Budget Amendment 20-00022

224

Fund 080 General Corporate / Dept 075 General County

225

Increased appropriations: \$4,095

226

Increased revenue: \$-530,637

227

Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
228 reduction of property tax revenues, and post-judgment interest costs recorded as increased
229 expenditure.

230

231

2. Budget Amendment 20-00023

232

Fund 080 General Corporate / Dept 017 Cooperative Extension Srv

233

Increased appropriations: \$146

234

Increased revenue: \$-18,895

235

Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
236 reduction of property tax revenues, and post-judgment interest costs recorded as increased
237 expenditure.

238

239

3. Budget Amendment 20-00024

240

Fund 088 Ill Municipal Retirement / Dept 073 Ill Municipal Retirement

241

Increased appropriations: \$866

242

Increased revenue: \$-112,132

243

Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
244 reduction of property tax revenues, and post-judgment interest costs recorded as increased
245 expenditure.

246

247

4. Budget Amendment 20-00025

248

Fund 089 County Public Health Fund / Dept 049 Board of Health

249

Increased appropriations: \$420

250

Increased revenue: \$-54,389

251

Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
252 reduction of property tax revenues, and post-judgment interest costs recorded as increased
253 expenditure.

254

- 255 5. Budget Amendment 20-00027
256 Fund 076 Tort Immunity Tax Fund / Dept 075 General County
257 Increased appropriations: \$824
258 Increased revenue: \$-106,658
259 Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
260 reduction of property tax revenues, and post-judgment interest costs recorded as increased
261 expenditure.
262
- 263 6. Budget Amendment 20-00030
264 Fund 188 Social Security Fund / Dept 075 General County
265 Increased appropriations: \$716
266 Increased revenue: \$-92,707
267 Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
268 reduction of property tax revenues, and post-judgment interest costs recorded as increased
269 expenditure.
270
- 271 7. Budget Amendment 20-00031
272 Fund 090 Mental Health / Dept 053 Mental Health Board
273 Increased appropriations: \$1,648
274 Increased revenue: \$-213,491
275 Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
276 reduction of property tax revenues, and post-judgment interest costs recorded as increased
277 expenditure.
278
- 279 8. Budget Amendment 20-00032
280 Fund 108 Developmental Disability Fund / Dept 050 Developmental Disability Board
281 Increased appropriations: \$1,363
282 Increased revenue: \$-176,585
283 Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
284 reduction of property tax revenues, and post-judgment interest costs recorded as increased
285 expenditure.
286
- 287 9. Budget Amendment 20-00026
288 Fund 083 County Highway / Dept 060 Highway
289 Increased appropriations: \$884
290 Increased revenue: \$-114,427
291 Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
292 reduction of property tax revenues, and post-judgment interest costs recorded as increased
293 expenditure.
294
- 295 10. Budget Amendment 20-00028
296 Fund 084 County Bridge / Dept 060 Highway
297 Increased appropriations: \$443
298 Increased revenue: \$-57,390
299 Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
300 reduction of property tax revenues, and post-judgment interest costs recorded as increased
301 expenditure.
302
- 303 11. Budget Amendment 20-00029
304 Fund 103 Hwy Fed Aid Matching Fund / Dept 060 Highway
305 Increased appropriations: \$36

306 Increased revenue: \$-4,592
307 Reason: Court-ordered refund Carle Foundation Property Tax Exemption Case recorded as a
308 reduction of property tax revenues, and post-judgment interest costs recorded as increased
309 expenditure.
310

311 **OMNIBUS MOTION** by Ms. Fortado to recommend County Board approval of resolutions
312 authorizing budget amendments 20-00022, 20-00023, 20-00024, 20-00025, 20-00027, 20-00030,
313 20-00031, 20-00032, 20-00026, 20-00028 and 20-00029; seconded by Mr. Summers. Discussion
314 followed. Upon vote, the **MOTION CARRIED** unanimously.
315

316 12. Budget Amendment 20-00033
317 Fund 104 Early Childhood Fund / Dept 876 EHS Exp Cares
318 Increased appropriations: \$80,000
319 Increased revenue: \$80,000
320 Reason: Please see attached memo
321

322 **MOTION** by Mr. Ingram to recommend County Board approval of a resolution authorizing
323 budget amendment 20-00033; seconded by Mr. Rosales. Upon vote, the **MOTION CARRIED**
324 unanimously.
325

326 13. Budget Amendment 20-00034
327 Fund 104 Early Childhood Fund / Dept 875 HS-EHS Cares
328 Increased appropriations: \$507,000
329 Increased revenue: \$507,000
330 Reason: Please see attached memo
331

332 **MOTION** by Ms. Cowart to recommend County Board approval of a resolution authorizing
333 budget amendment 20-00034; seconded by Ms. Fears. Discussion followed. Upon vote, the
334 **MOTION CARRIED** unanimously.
335

336 B. Treasurer

337 1. Monthly Report – 1st Distribution Settlement Report
338

339 Received and placed on file – Ms. Hughes read the memo that she provided to the Board members and
340 Ms. Aguero explained the current processes and difficulties. Discussion followed regarding some
341 suggestions for the public website issues. They stated their current timeline is approximately two weeks
342 to completely process the property tax payments.
343

344 Mr. Harper left meeting at 8:10 p.m.
345

346 C. Auditor

347 1. Monthly Report – May 2020
348

349 Received and placed on file
350

351 D. County Executive

352 1. Update on ERP selection process
353

354 Mr. Palomaki spoke about replacing the current finance, HR and payroll systems. The County received
355 seven proposals, they chose three finalists for demos and they are recommending the Tyler Technology

356 Munis ERP System. Discussion followed regarding the current users of this system, how it will be
357 supported and the annual fees.

358 2. FY2020 General Fund Budget Projection Report
359

360 Ms. Ogden presented her budget projection updates. She explained there are many assumptions being
361 made with the impact from COVID-19 and the revenue streams that have not been posted. She focused on
362 the major categories and the variances in each. Discussions between the County Executive and
363 Department Heads are occurring regarding ways to mitigate loses for FY2020.

364
365 E. Other Business

366
367 None

368
369 F. Chair's Report

370
371 None

372
373 G. Designation of Items to be Placed on the Consent Agenda

374
375 X. A. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13
376

377 **XI. Other Business**
378

379 Mr. Ingram mentioned the current marches and presentations that are happening locally. He asked that
380 County Board Members support the efforts and make sure the voices are heard.

381
382 Mr. Ammons resumed his conversation about the Rantoul TIF District issues. He asked that County
383 Board members, in this district, express their concerns to the school district.

384
385 **XII. Adjournment**
386

387 Chair Rosales adjourned the meeting at 9:14 p.m.
388
389
390

Rosecrance, Inc (Formerly Community Elements)
 Champaign Co Re-Entry Grant
 For the Month Ending June 30, 2020

	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total YTD
1. Personnel Costs	\$21,071	\$19,686	\$19,741	\$19,163	\$21,110	\$20,278	\$25,424	\$20,247	\$21,540	\$22,432	\$20,568	\$20,805	\$252,065
2. Payroll Taxes/Benefits	\$7,305	\$6,311	\$4,664	\$6,206	\$7,604	\$6,305	\$8,354	\$5,476	\$5,383	\$5,465	\$5,151	\$5,396	\$73,620
Computer Hardware & Software	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Equipment	\$0												
Property Insurance	\$91	\$63	\$51	\$51	\$51	\$167	\$62	\$62	\$62	\$62	\$62	\$62	\$846
Building & Grounds Maintenance	\$44	\$113	\$53	\$37	\$43	\$59	\$118	\$194	\$0	\$37	\$118	\$90	\$819
Utilities	\$156	\$148	\$124	\$54	\$101	\$122	\$122	\$108	\$135	\$74	\$88	\$112	\$1,344
Janitorial Service	\$271	\$200	\$297	\$188	\$190	\$170	\$202	\$268	\$355	\$403	\$269	\$281	\$3,094
Equip Maintenance Agreements	\$14	\$662	\$88	\$22	\$29	\$48	\$248	\$101	\$84	\$73	\$220	\$62	\$1,651
Depreciation	\$853	\$826	\$817	\$833	\$840	\$815	\$664	\$661	\$661	\$557	\$660	\$575	\$8,762
Total Occupancy	\$1,429	\$2,012	\$1,430	\$1,185	\$1,254	\$1,381	\$1,416	\$1,394	\$1,297	\$1,206	\$1,330	\$1,182	\$16,516
Office Supplies	\$392	\$80	\$190	\$1,292	\$62	\$76	\$97	\$63	\$121	\$339	\$1,000	\$140	\$3,852
Contractual / Professional Fees	\$1,228	\$824	\$929	\$1,322	\$309	\$730	\$964	\$897	\$1,235	\$804	\$900	\$958	\$11,100
Travel / Training	\$173	\$370	\$337	\$282	\$827	\$265	\$1,634	\$294	\$368	\$131	\$90	\$126	\$4,897
Client Assistance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Rent	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Telephone / Cell Phone	\$149	\$274	\$197	\$176	\$173	\$190	\$197	\$253	\$251	\$248	\$255	\$245	\$2,608
Liability / Malpractice Insurance	\$218	\$46	\$14	\$14	\$14	\$1,057	\$246	\$242	\$251	\$247	\$247	\$247	\$2,843
Moving & Recruiting	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Program Expenses	\$31,965	\$29,603	\$27,502	\$29,640	\$31,353	\$30,282	\$38,332	\$28,866	\$30,446	\$30,872	\$29,541	\$29,099	\$367,501
ALLOCATED M&G	\$6,901	\$6,888	\$6,232	\$6,198	\$6,365	\$7,068	\$6,140	\$4,513	\$6,283	\$5,499	\$5,496	\$6,691	\$74,274
TOTAL EXPENSE	\$38,866	\$36,491	\$33,734	\$35,838	\$37,718	\$37,350	\$44,472	\$33,379	\$36,729	\$36,371	\$35,037	\$35,790	\$441,775
Re-Entry Indirect - 11.9% Max													
Max M&G Allowed	\$4,318	\$3,999	\$3,715	\$4,004	\$4,235	\$4,090	\$5,178	\$3,899	\$4,112	\$4,170	\$3,990	\$3,931	\$49,640
Champaign County Total	\$36,283	\$33,602	\$31,217	\$33,644	\$35,588	\$34,372	\$43,510	\$32,765	\$34,558	\$35,042	\$33,531	\$33,030	\$417,141
Champaign County Paid	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$99,999

Rosecrance, Inc (Formerly Community Elements)
 Champaign Co Re-Entry Grant
 For the Month Ending May 31, 2020

	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Total YTD
1. Personnel Costs	\$21,071	\$19,686	\$19,741	\$19,163	\$21,110	\$20,278	\$25,424	\$20,247	\$21,540	\$22,432	\$20,568	\$231,260
2. Payroll Taxes/Benefits	\$7,305	\$6,311	\$4,664	\$6,206	\$7,604	\$6,305	\$8,354	\$5,476	\$5,383	\$5,465	\$5,151	\$68,224
Computer Hardware & Software	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Equipment	\$0											
Property Insurance	\$91	\$63	\$51	\$51	\$51	\$167	\$62	\$62	\$62	\$62	\$62	\$784
Building & Grounds Maintenance	\$44	\$113	\$53	\$37	\$43	\$59	\$118	\$194	\$0	\$37	\$31	\$729
Utilities	\$156	\$148	\$124	\$54	\$101	\$122	\$122	\$108	\$135	\$74	\$88	\$1,232
Janitorial Service	\$271	\$200	\$297	\$188	\$190	\$170	\$202	\$268	\$355	\$403	\$269	\$2,813
Equip Maintenance Agreements	\$14	\$662	\$88	\$22	\$29	\$48	\$248	\$101	\$84	\$73	\$220	\$1,589
Depreciation	\$853	\$826	\$817	\$833	\$840	\$815	\$664	\$661	\$661	\$557	\$660	\$8,187
Total Occupancy	\$1,429	\$2,012	\$1,430	\$1,185	\$1,254	\$1,381	\$1,416	\$1,394	\$1,297	\$1,206	\$1,330	\$15,334
Office Supplies	\$392	\$80	\$190	\$1,292	\$62	\$76	\$97	\$63	\$121	\$339	\$1,000	\$3,712
Contractual / Professional Fees	\$1,228	\$824	\$929	\$1,322	\$309	\$730	\$964	\$897	\$1,235	\$804	\$900	\$10,142
Travel / Training	\$173	\$370	\$337	\$282	\$827	\$265	\$1,634	\$294	\$368	\$131	\$90	\$4,771
Client Assistance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Rent	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Telephone / Cell Phone	\$149	\$274	\$197	\$176	\$173	\$190	\$197	\$253	\$251	\$248	\$255	\$2,363
Liability / Malpractice Insurance	\$218	\$46	\$14	\$14	\$14	\$1,057	\$246	\$242	\$251	\$247	\$247	\$2,596
Moving & Recruiting	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Program Expenses	\$31,965	\$29,603	\$27,502	\$29,640	\$31,353	\$30,282	\$38,332	\$28,866	\$30,446	\$30,872	\$29,541	\$338,402
ALLOCATED M&G	\$6,901	\$6,888	\$6,232	\$6,198	\$6,365	\$7,068	\$6,140	\$4,513	\$6,283	\$5,499	\$5,496	\$67,583
TOTAL EXPENSE	\$38,866	\$36,491	\$33,734	\$35,838	\$37,718	\$37,350	\$44,472	\$33,379	\$36,729	\$36,371	\$35,037	\$405,985
Re-Entry Indirect - 11.9% Max												
Max M&G Allowed	\$4,318	\$3,999	\$3,715	\$4,004	\$4,235	\$4,090	\$5,178	\$3,899	\$4,112	\$4,170	\$3,990	\$45,709
Champaign County Total	\$36,283	\$33,602	\$31,217	\$33,644	\$35,588	\$34,372	\$43,510	\$32,765	\$34,558	\$35,042	\$33,531	\$384,111
Champaign County Paid	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$8,333	\$91,666

Latest Updates from the 2020 Census Complete Count Committee in Champaign County

Non-Response Follow Up (NRFU) beginning this week

- NRFU is the Census Bureau term for their employees going door-to-door where people have not filled out their Census form yet.
- NRFU will begin on Friday, July 31 in Champaign County. CCRPC's Partnership Specialist does not know in which parts of the County they will begin. Please be aware, though, in case you get questions from residents asking if this is a legitimate activity (it is).
- NRFU begins nationwide on Tuesday, August 11, but the Census Bureau will begin earlier in some parts of the country.
- Attached are two documents from the Census Bureau with more information about NRFU.

Census Hiring Questions

I have received several questions this month about the Census Bureau hiring temporary employees, and want to share what I know:

- Yes, the Census Bureau is still hiring. People can apply at <https://2020census.gov/en/jobs.html>.
- Some trainings have occurred, but local staff has not been notified when and where these trainings are happening.
- If someone asks you questions about Census jobs, hiring decisions, or training events, please have them contact these Census Bureau employees:
 - Brian Matheny, Area Census Office Manager, Peoria, brian.c.matheny@2020census.gov
 - Barbara (Bobbi) Trist, Recruiting Assistant, Urbana, barbara.s.trist@2020census.gov

Mobile Questionnaire Assistance (MQA)

Several agencies are beginning to resume in-person Census assistance. Please contact Gabe Lewis at RPC if you have an idea for providing assistance outdoors. Gabe will share ideas and requests with RPC, the Census Bureau, CUPHD, or other agencies to consider hosting an assistance event and will also create Facebook events for these events for anyone to share.

Census Bureau to Email Households

- The Census Bureau will begin emailing households in low-responding areas to encourage them to respond to the 2020 Census. Millions of emails will be sent this week and then grow in numbers and continue into September. These emails supplement a final campaign reminding people to respond to the 2020 Census on their own, as Census takers begin asking households to respond to the Census.
- These emails will go to households in Census block groups with a response rate lower than 50%, and will include households who may have already responded within these block groups. The email messages will come from 2020census@subscriptions.census.gov.
- The Census Bureau is also considering sending text messages to people living in low response areas, and will make an announcement when those plans are finalized.
- <https://2020census.gov/en/news-events/press-releases/2020-email.html>

Census Deadline Extended until October 31

Remember that the original Census deadline of July 31st has been extended 3 months until Saturday, October 31st due to the pandemic. Thank you for your continued support to get a complete count in our area!

FUND 089 COUNTY PUBLIC HEALTH FUND DEPARTMENT 049 BOARD OF HEALTH

INCREASED APPROPRIATIONS:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
089-049-533.07 PROFESSIONAL SERVICES	1,020,375	1,020,375	3,322,698	2,302,323
TOTALS	1,020,375	1,020,375	3,322,698	2,302,323

INCREASED REVENUE BUDGET:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
089-049-332.38 CURE PROGRAM	0	0	156,039	156,039
089-049-334.38 IDPH CV-19 CRISIS GRANT	0	60,000	2,206,284	2,146,284
TOTALS	0	60,000	2,362,323	2,302,323

EXPLANATION: APPROPRIATE FOR 100% OF CURE PROGRAM GRANT FUNDING FOR COVID-19 RELATED PUBLIC HEALTH EXPENSES (GRANT ENDS 12/30/20), AND 75% OF COVID-19 CONTACT TRACING GRANT FUNDING (GRANT ENDS 6/30/21).

DATE SUBMITTED:

7/29/2020

AUTHORIZED SIGNATURE

** PLEASE SIGN IN BLUE INK **



APPROVED BY BUDGET & FINANCE COMMITTEE:

DATE:

Local CURE
Allotment Detail

Allotment B Detail: Per capita and low-income population distribution to Certified Local Public Health Departments, based on IDPH's Local Health Protection Grant formula

Certified Local Public Health Department	IDPH FY20 Formula %	Allotment B Amount
Adams County Public Health Department	1.6644%	\$208,054
Bond County Public Health Department	0.6108%	\$76,353
Boone County Public Health Department	0.6378%	\$79,731
Brown County Public Health Department	0.6034%	\$75,421
Bureau County Public Health Department	0.6542%	\$81,775
Calhoun County Public Health Department	0.6020%	\$75,245
Carroll County Public Health Department	0.6091%	\$76,139
Cass County Public Health Department	0.6078%	\$75,976
Champaign County Public Health Department	1.2483%	\$156,039
Champaign - Urbana Public Health Department	1.9264%	\$240,794
Christian County Public Health Department	0.7350%	\$91,872
Clark County Public Health Department	0.6101%	\$76,264
Clay County Public Health Department	0.6082%	\$76,029
Clinton County Public Health Department	0.6643%	\$83,042
Coles County Public Health Department	1.2227%	\$152,834
Crawford County Public Health Department	0.6126%	\$76,580
Cumberland County Public Health Department	0.6064%	\$75,796
DeKalb County Public Health Department	1.4540%	\$181,747
DeWitt-Piatt Bi-County Public Health Department	1.2207%	\$152,590
Douglas County Public Health Department	0.6129%	\$76,618
East Side Public Health Department	4.1751%	\$521,889
Edgar County Public Health Department	0.6114%	\$76,419
Effingham County Public Health Department	0.6966%	\$87,072
Egyptian Public Health Department	1.8275%	\$228,443
Fayette County Public Health Department	0.6146%	\$76,823
Ford County Public Health Department	0.6085%	\$76,057
Franklin-Williamson Bi-County Health Department	2.8101%	\$351,260
Fulton County Public Health Department	1.0760%	\$134,499
Greene County Public Health Department	0.6081%	\$76,011
Grundy County Public Health Department	0.6356%	\$79,450
Hamilton County Public Health Department	0.6044%	\$75,547
Hancock County Public Health Department	0.6120%	\$76,500
Henderson County Public Health Department	0.6035%	\$75,436
Henry County Public Health Department	1.0912%	\$136,395
Iroquois County Public Health Department	0.6195%	\$77,434
Jackson County Public Health Department	1.8642%	\$233,025
Jasper County Public Health Department	0.6054%	\$75,676
Jefferson County Public Health Department	0.7460%	\$93,246
Jersey County Public Health Department	0.6148%	\$76,854

➕ View up to date information on how Illinois is handling the Coronavirus Disease 2019 (COVID-19) from the State of Illinois Coronavirus Response Site (<https://coronavirus.illinois.gov/>)



(/dceo/)

The Local CURE Program

Coronavirus Relief Fund (CRF) Assistance for Local Governments

If you represent a municipality, you will receive your funding without an application, but please enter your contact information [here](https://app.smartsheet.com/b/form/87e229b9530c49979a55ced74938b01c) (<https://app.smartsheet.com/b/form/87e229b9530c49979a55ced74938b01c>) to receive a grant agreement.

If you represent a county, you will receive your funding without an application, but please enter your contact information [here](https://app.smartsheet.com/b/form/19cf3724b57b4551aded7f0a13f94a87) (<https://app.smartsheet.com/b/form/19cf3724b57b4551aded7f0a13f94a87>) to receive a grant agreement.

For questions or technical assistance related to Local CURE, please email us at: CEO.CURE@illinois.gov (<mailto:CEO.CURE@illinois.gov>)

Click [here](https://illinois.webex.com/illinois/onstage/g.php?MTID=e238434a9ac7b986c470dc0b924bf125b) (<https://illinois.webex.com/illinois/onstage/g.php?MTID=e238434a9ac7b986c470dc0b924bf125b>) to register for the Local CURE Program Launch webinar on July 29th at 11am.

The Local Coronavirus Urgent Remediation Emergency (or Local CURE) Support Program (Section 3-10 of [Public Act 101-0636](http://www.ilga.gov/legislation/publicacts/101/PDF/101-0636.pdf) (<http://www.ilga.gov/legislation/publicacts/101/PDF/101-0636.pdf>)) is a support program for units of local government as defined by the Illinois Constitution. The Local CURE program is appropriated to the department under Section 5 of Article 30 of [Public Act 101-0637](http://www.ilga.gov/legislation/publicacts/101/PDF/101-0637.pdf) (<http://www.ilga.gov/legislation/publicacts/101/PDF/101-0637.pdf>) in State Fiscal Year 2021 for \$250,000,000 and administrative rules for the program can be found under Title 14 Ill. Admin. Code Part 700.

"Units of local government" means counties, municipalities, townships, special districts, and units, designated as units of local government by law, which exercise limited governmental powers or powers in respect to limited governmental subjects, but does not include school districts. (Illinois Constitution, Article VII, Section 1.)

The Local CURE program:

- Is a local government assistance program which applies to all units of local government (as defined by the Illinois Constitution) outside of Cook, Lake, Will, Kane, & DuPage counties.
- Is federally funded from the Coronavirus Relief Fund using dollars allocated to Illinois through the CARES Act.
- Will reimburse units of local government for costs that:
 - are necessary expenditures incurred due to the public health emergency with respect to COVID-19;
 - were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the unit of local government; and
 - were incurred during the period beginning March 1, 2020 and ending December 30, 2020.

Examples of costs which are eligible for reimbursement under the program:

- Medical expenses, including but not limited to: expenses of establishing temporary public medical facilities and other measures to increase COVID-19 treatment capacity, costs of providing COVID-19 testing, and emergency medical response expenses;
- Public health expenses, including but not limited to: expenses for communication and enforcement by local governments of public health orders related to COVID-19;
- Payroll expenses for public safety, public health, health care, human services, and similar employees whose services were substantially dedicated to mitigating or responding to COVID-19;
- Expenses for actions taken to facilitate compliance with COVID-19 related public health measures;
- Any other COVID-19 related expenses reasonably necessary for the unit of local government to respond to the public health emergency that satisfies the Local CURE Program eligibility criteria. Local governments must document how expenses are related to COVID-19.

Examples of costs which are ineligible for reimbursement under the program:

- Governmental revenue shortfall replacement;
- Damages covered by insurance;
- Payroll or benefits expenses for employees whose work duties are not substantially dedicated to mitigating or responding to the COVID-19 public health emergency;
- Expenses associated with the provision of economic support in connection with COVID-19;
- Reimbursement to donors for donated items or services;
- Workforce bonuses other than hazard pay or overtime;
- Severance pay;
- Legal settlements;

- Indirect costs or administrative costs; and
- Incurred expenses that have been or will be reimbursed through another State or federal funding opportunity.

Reimbursable Expenditure Test:

If “TRUE” can be answered for all of the below, Local CURE funds may be used

- The expense is connected to the COVID-19 emergency.
- The expense is “necessary”.
- The expense is not filling a short fall in government revenues.
- The expense is not funded thru another budget line item, allotment or allocation, as of March 27, 2020.
- The expense is not being reimbursed through a different emergency response program.
- The expense wouldn't exist without COVID-19 OR would be for a “substantially different” purpose.

The process for receiving assistance:

1. Based on rule or application, DCEO drafts a certification outlining a “not to exceed” value for which the local government may claim reimbursements under the program.

***NOTE: DCEO will draft certifications and send them to local governments for review in the month of August. County, Municipality, and Certified Public Health Departments do not need to apply, the proper certification document will be delivered via email through your designated point of contact.**

A. For County and Municipal Governments

- i. County and Municipalities DO NOT need to apply for assistance.
- ii. 14 Ill. Admin. Code § 700.80(a) allocates 80% of the program's assistance and by rule the department has determined how much will be initially allocated to each County and Municipality. The searchable PDF linked below indicates each amount.

[Allotment A Detail: Per capita formula allotments for Counties & Municipalities \(/dceo/CURE/Local%20CURE_Allotment%20A%20County%20and%20Municipality%20Detail_Final_06302020.pdf\)](#)

B. For Certified Local Public Health Departments

- i. Certified Local Public Health Departments DO NOT need to apply for assistance.
- ii. 14 Ill. Admin. Code § 700.80(b) allocates 5% of the program's assistance and by rule the department has determined how much will be initially allocated to each Certified Local Public Health Department. The searchable PDF linked below indicates each amount.

[Allotment B Detail: Per capita and low-income population distribution to Certified Local Public Health Departments, based on IDPH's Local Health Protection Grant](#)

[formula \(/dceo/CURE/Local%20CURE_Allotment%20B%20Local%20Health%20Dept.%20Detail_Final_06302020.pdf\)](#)

- C. For all other Units of Local Government
- i. All other units of local government not covered by the above allotments must apply for assistance under the program.
 - ii. 14 Ill. Admin. Code § 700.80(c) allocates 8% of the program's assistance for other units of local government.
 - iii. Local governments serving areas which have been most disproportionately impacted by the COVID-19 public health emergency will be prioritized in the application process.

To find out if your local government serves a disproportionately impacted area, follow the link below.

[Zip Codes that Qualify as a Disproportionately Impacted Area \(/dceo/CURE/DIA%20Zip%20Codes_Outside%20of%20collar%20counties.pdf\)](#)

The application for Allotment C is now closed.

- D. All remaining funds appropriated for the program and those which are unclaimed may be reallocated late in the calendar year so the department may direct assistance to where it is most needed.
2. Next, local governments will complete reimbursement requests and send them to DCEO's partner for review.
 - A. In mid-August DCEO and a qualified partner will host technical assistance calls and webinars to explain the process for the program and distribute a manual for completing reimbursement requests.
 3. Our partner will review reimbursement requests and support documentation for eligibility, as well as verify that costs are not claimed under another program.
 4. Upon a positive review, DCEO will release the reimbursement payment to the local government.
 5. Throughout the process DCEO's partner will provide ongoing technical assistance.

What to do in preparation for the program:

- Make sure your unit of local government is registered with SAM.gov.
- Review the program's administrative [rules \(/dceo/CURE/14-700RG-Emergency%20Rules%20FINAL%20Website%207.2.20.pdf\)](#) (soon to be posted under 14 Ill. Admin. Code § 700)
- Start collecting receipts for COVID-19 related expenses & digitize them; the department will seek PDFs and other electronic forms of back-up for reimbursements.

- In addition, carefully consider descriptions and rationale on how expenditures were necessary in the local government’s response to the COVID-19 public health emergency.
- Begin organizing year to date expenditures into the categories listed in the “eligible for reimbursement” section above.
 - Payroll for public health and safety employees
 - Budgeted personnel and services diverted to a substantially different use
 - Improvement to telework capabilities of public employees
 - Medical expenses
 - Public health expenses
 - Distance learning
 - All items not listed above
- Watch [this \(https://www.youtube.com/watch?v=ErJUL0c6E5Q&feature=youtu.be\)](https://www.youtube.com/watch?v=ErJUL0c6E5Q&feature=youtu.be) webinar recording to learn more about the program.
 - Or review [this presentation \(/dceo/CURE/DCEO%20Local%20CURE%20PPT_Final.pdf\)](/dceo/CURE/DCEO%20Local%20CURE%20PPT_Final.pdf)

The timeline for the program:

Date	Action Item
July 1st	Program details are made available on DCEO’s website.
July 6th	Open application for other units of local government.
July 24th	Close application for other units of local government.
Early August	Host technical assistance webinar.
Mid August	Reimbursement period begins.
November 1st	DCEO to conduct an optional reallocation of funds to areas with remaining need.
December 30th	On an accrual basis, this is the final day a cost may be attributed to the program.

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(<https://www.facebook.com/illinoisdceo>)

COVID-19 Help

Coronavirus.Illinois.gov (<https://coronavirus.illinois.gov/>)

INTER-GOVERNMENTAL AGREEMENT



BETWEEN
THE STATE OF ILLINOIS, DEPARTMENT OF PUBLIC HEALTH
AND
Champaign County

The Illinois Department of Public Health (Grantor), with its principal office at Office of Health Protection, 525 W. Jefferson St., 2nd Floor, Springfield, IL 62761, and Champaign County (Grantee), with its principal office at 1776 E. Washington, Urbana, IL 61802 and payment address (if different than principal office) at 1776 E. Washington, Urbana, IL 61802, hereby enter into this Inter-governmental Grant Agreement (Agreement), pursuant to the Intergovernmental Cooperation Act, 5 ILCS 220/1 et seq. Grantor and Grantee are collectively referred to herein as "Parties" or individually as a "Party."

PART ONE - THE UNIFORM TERMS
RECITALS

WHEREAS, it is the intent of the Parties to perform consistent with all Exhibits and attachments hereto and pursuant to the duties and responsibilities imposed by Grantor under the laws of the state of Illinois and in accordance with the terms, conditions and provisions hereof.

NOW, THEREFORE, in consideration of the foregoing and the mutual agreements contained herein, and for other good and valuable consideration, the value, receipt and sufficiency of which are acknowledged, the Parties hereto agree as follows:

ARTICLE 1

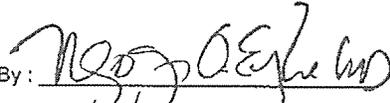
AWARD AND GRANTEE-SPECIFIC INFORMATION AND CERTIFICATION

- 1.1. DUNS Number, SAM Registration; Nature of Entity. Under penalties of perjury, Grantee certifies that 097322861 is Grantee's correct DUNS number, that 37-6006910 is Grantee's correct FEIN or Social Security Number, and that Grantee has an active State registration and SAM registration (if federal funds). Grantee is doing business as a Governmental.
If Grantee has not received a payment from the state of Illinois in the last two years, Grantee must submit a W-9 tax form with this Agreement.
- 1.2. Amount of Agreement. Grant Funds shall not exceed \$2,861,712.00, of which \$2,861,712.00 are federal funds. Grantee agrees to accept Grantor's payment as specified in the Exhibits and attachments incorporated herein as part of this Agreement.
- 1.3. Identification Numbers. If applicable, the Federal Award Identification Number (FAIN) is 6NU50CK000559-01-08, the federal awarding agencies are U.S. Centers for Disease Control and Prevention and U.S. Department of the Treasury, and the Federal Award dates are 05/19/2020 and 03/27/2020. If applicable, the Catalog of Federal Domestic Assistance (CFDA) Names are Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) and Coronavirus Relief Funds and Numbers are 93.323. and 21.019. The Catalog of State Financial Assistance (CSFA) Number is 482-00-2426. The State Award Identification Number is 05180108H.

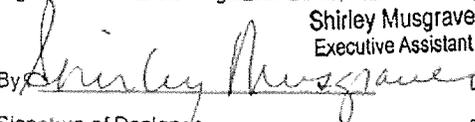
- 1.4. Term. This Agreement shall be effective on June 1, 2020 and shall expire on May 31, 2021, unless terminated pursuant to this Agreement.
- 1.5. Certification. Grantee certifies under oath that (1) all representations made in this Agreement are true and correct and (2) all Grant Funds awarded pursuant to this Agreement shall be used only for the purpose(s) described herein. Grantee acknowledges that the Award is made solely upon this certification and that any false statements, misrepresentations, or material omissions shall be the basis for immediate termination of this Agreement and repayment of all Grant Funds.
- 1.6. Signatures. In witness whereof, the Parties hereto have caused this Agreement to be executed by their duly authorized representatives

Illinois Department of Public Health

Champaign County

By: 
 Signature of Director: Ngozi O. Ezike, MD

By: 
 Signature of Authorized Representative

Shirley Musgrave
 Executive Assistant
 By: 

Date: 7/13/20

Signature of Designee
 Date: 7-14-2020

Printed Name: JULIE A. PRYDE

Printed Name: Ngozi O. Ezike, M.D.

Printed Title: ADMINISTRATOR

Printed Title: Director of Public Health

E-mail: jpryde@C-UPHD.ORG

Designee

By: _____

Signature of First Other Approver, if Applicable

Date: _____

Printed Name: _____

Printed Title: _____

Other Approver

By: _____

Signature of Second Other Approver, if Applicable

Date: _____

Printed Name: _____

Printed Title: _____

Second Other Approver

From: Henkel, Scott [mailto:Scott.Henkel@illinois.gov]
Sent: Tuesday, July 14, 2020 10:08 AM
To: Julie Pryde <jpryde@c-uphd.org>
Cc: DPH.OHPt <DPH.OHPt@illinois.gov>; Henkel, Scott <Scott.Henkel@illinois.gov>; Lane, Brandy <Brandy.Lane@Illinois.gov>; Clark, Heidi <Heidi.Clark@illinois.gov>; Bryant, William <William.Bryant@Illinois.gov>; Amanda Knight <aknight@c-uphd.org>; Candi Crause <ccrause@c-uphd.org>
Subject: Champaign County COVID-19 Contact Tracing Executed Grant Agreement

Dear Ms. Pryde:

Attached please find an executed copy of your health department’s COVID-19 Contact Tracing Grant Agreement (COVIDCT-20).

PAYMENT

Upon execution of this Agreement, the Department shall authorize an initial disbursement in the amount of twenty-five percent (25%) of the total Award. Future payments to the Grantee are subject to the Grantee’s submission and certification of eligible costs incurred and any documentation as required by the Department. Payment shall be initiated upon the Department’s approval of eligible costs and cash amount requested for reimbursement of those costs. This means that we will start the payment process upon execution; however, the 25% payment will not arrive until after the Comptroller’s office receives a payment voucher. The initial 25% payment is meant to cover your initial expenses including the first quarter of the grant period. The remaining expenses (75%) will be paid based on reimbursements submitted through EGrAMS and subject to IDPH approval.

FINANCIAL REPORTING

We have set up quarterly reimbursements in EGrAMS. Quarterly reimbursements will be required including how the initial 25% payment was expended during the first or subsequent quarter(s). The following chart shows the reporting periods and due dates for contact tracing grant.

	Start Date	End Date	Report Due Date
1st Quarter	06/01/2020	08/31/2020	09/30/2020
2nd Quarter	09/01/2020	11/30/2020	12/31/2020
3rd Quarter	12/01/2020	02/28/2021	03/31/2021
4th Quarter	03/01/2021	05/31/2021	06/30/2021

PERFORMANCE/PROGRESS REPORTING

Performance reporting will not submitted through EGrAMS. Additional information on progress reporting and performance metrics will be provided in the near future.

If you have any questions, you may contact me by email at scott.henkel@illinois.gov or by phone at (217) 785-2075.

Thank you,
 Scott Henkel
 Illinois Department of Public Health
 Office: (217) 785-2075

Reason for Amendment

The Emergency Solutions Grant – Coronavirus Aid, Relief, and Economic Security (CARES) Act funding provides for expansion of our HMIS (Homeless Management Information System) data-driven referral platform and increases capacity at the Emergency Shelter for Families. Funding will be utilized to support special projects related to making HMIS more useful for coordination among agencies addressing COVID-19 impacts. Funding will also be utilized to expand our capacity to serve homeless families, providing a non-congregate setting to decrease the likelihood of virus transmission and the provision of isolated quarters in the event of quarantine. The enhanced funding will be utilized to serve an additional 24 households (approximately 72 adults and children). Federal eligibility criteria are focused on families with minor children and includes those sleeping in uninhabitable places such as cars, outdoors, motels paid for by a charitable or governmental entity and those fleeing domestic violence. The goal is to discharge families to a more stable, permanent housing arrangement.

FUND 075 REGIONAL PLANNING COMM DEPARTMENT 889 EMERG SOLN GRNT - CARES

INCREASED APPROPRIATIONS:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
See attached				
TOTALS	0	0	80,000	80,000

INCREASED REVENUE BUDGET:

ACCT. NUMBER & TITLE	BEGINNING BUDGET AS OF 12/1	CURRENT BUDGET	BUDGET IF REQUEST IS APPROVED	INCREASE (DECREASE) REQUESTED
See attached				
TOTALS	0	0	80,000	80,000

EXPLANATION: SEE ATTACHED.

DATE SUBMITTED:

7/30/2020

AUTHORIZED SIGNATURE

** PLEASE SIGN IN BLUE INK **

Elizabeth Murphy

APPROVED BY BUDGET & FINANCE COMMITTEE:

DATE:



OFFICE OF THE CHAMPAIGN COUNTY EXECUTIVE

1776 East Washington Street, Urbana, Illinois 61802-4581

Darlene A. Kloeppel, County Executive

MEMORANDUM

To: Jim Goss, Chair of Finance; and
Stephanie Fortado, Deputy Chair of Finance; and
Honorable Members of the Finance Committee of the Whole

From: Angela Lusk and Barb Mann, Co-Chairs, and
Members of the Labor Management Health Insurance Committee

Date: July 27, 2020

Subject: Employee Health Insurance and Related Benefit Plans for FY2021

The Champaign County Labor Management Health Insurance Committee submits the following recommendations for employee health insurance and other benefit plans for FY2021:

Health Insurance Recommendation

BlueCross BlueShield of Illinois PPO

This plan covers January 1 through December 31, 2021, with a premium rate increase of 6.92%. The four plan tiers to be offered at the current FY2020 rate, and the proposed FY2021 rate are reflected below:

Tier	FY2020 Monthly Premium	FY2021 Monthly Premium	FY2021 Monthly Increase
Employee Only	\$840	\$898	\$58
Employee + Spouse	\$1,112	\$1,189	\$77
Employee + Children	\$1,050	\$1,123	\$73
Family	\$1,815	\$1,941	\$126

A Benefit Plan Summary is attached to this Memorandum and remains unchanged from the current plan. Employee premium contributions are based on the terms of their employment and/or their respective collective bargaining agreement.

Other Benefit Plans: No rate increases in FY2021

Employer Paid:

Benefit Planning Consultants (BPC) Flex Spending Account Plan Administration
Life Insurance (Basic)

Employee Paid (Voluntary):

Delta Dental
Life Insurance
Eye Med Vision
Allstate Cancer
Allstate Accident

A Renewal Rate Summary for all coverages effective January 1, 2021, is attached to this Memorandum for your review.

REQUESTED ACTION

The Finance Committee of the Whole recommends to the Champaign County Board approval of offering the BlueCross Blue Shield of Illinois PPO Plan and other benefit plans for FY2021.

Champaign County PPO Plan

\$2,000 Deductible, \$2,000 OPX \$25 OV

Effective January 1, 2020



BlueCross BlueShield of Illinois

BENEFIT HIGHLIGHTS

PPO Network

This provides only highlights of the benefit plan. After enrollment, members will receive a Certificate that more fully describes the terms of coverage.

Program Basics

PPO
(In-Network)

Non-PPO
(Out-of-Network)

Lifetime Benefit Maximum

Per individual

Unlimited

Individual Coverage Deductible

Per calendar year.

\$2,000

\$4,000

Family Coverage Deductible

Per calendar year.

\$4,000

\$8,000

Individual Coverage Out-of-Pocket Expense (OPX) Limit

The amount of money that any individual will have to pay toward covered health care expenses during any one calendar year, including the deductible and Rx. The following items will not be applied to the out-of-pocket expense limit:

- Claims for uncovered services
- Preauthorization Penalties
- Charges that exceed the eligible charge

\$2,000

\$4,000

Family Coverage Out-of-Pocket Expense (OPX) Limit

\$4,000

\$8,000

Physician Services

Physician Office Visits

One copayment per day when you receive services from a Family Practice, Internal Medicine, OB/GYN, or Pediatrician. Surgeries, therapies and certain diagnostic procedures performed in a physician's office may be subject to the deductible and/or coinsurance, including mental health and substance abuse services.

\$25 Copay

80% after deductible

Specialist Office Visits

One copayment per day when you receive services from a specialist. Surgeries, therapies and certain diagnostic procedures performed in a physician's office may be subject to the deductible and/or coinsurance.

\$50 Copay

80% after deductible

Vision Exams

Vision screenings and examinations for determining the refractive state of the eyes are covered. No materials are covered under this benefit.

\$40 Copay

not covered

Preventive Care

Services that have a rating of "A" or "B" in the current recommendations of the United States Preventive Services Task Force ("USPSTF"). Includes benefits for routine physical examinations, well child care and routine diagnostic tests including, but not limited to: PSA, Pap Smear, Bone Density, and Colonoscopy. Health Education and Counseling services including, but not limited to: Smoking Cessation and Obesity.

100%

80% after deductible

Maternity Services

Copayment applies to first prenatal visit (per pregnancy). All other maternity physician covered services are paid the same as Medical / Surgical Services.

\$25 Copay

80% after deductible

Medical / Surgical Services

Coverage for surgical procedures, inpatient visits therapies, allergy injections or treatments, and certain diagnostic procedures as well as other physician services

100% after deductible

80% after deductible

Hospital Services

Inpatient Hospital Services

Coverage includes services received in a hospital, skilled nursing facility, coordinated home care and hospice, including mental health and substance abuse services. Room allowances based on the hospital's most common semi-private room rates.

100% after deductible

80% after deductible

Outpatient Hospital Services

Coverage for services includes, but is not limited to outpatient or ambulatory surgical procedures, x-ray, lab tests, chemotherapy, radiation therapy, renal dialysis, and mammograms performed in a hospital or ambulatory surgical center, including mental health and substance abuse services. Routine mammograms performed in an in-network outpatient hospital setting are payable at 100%, no deductible will apply.

100% after deductible

80% after deductible

Outpatient Emergency Care (Accident or Illness)

Emergency Medical and Emergency Accident. Applies to both in- and out-of-network emergency room visits. The per-occurrence is waived if the member is admitted to the hospital.

\$200 Copay, then 100% Ambulance Transportation \$100 per transport

Champaign County PPO Plan

\$2,000 Deductible, \$2,000 OPX \$25 OV

Effective January 1, 2019



BENEFIT HIGHLIGHT

PPO Network

Additional Services

Muscle Manipulation Services

Coverage for spinal and muscle manipulation services provided by a physician or chiropractor. Related office visits are paid the same as other Physician Office Visits.

- Maximum of 30 visits per calendar year

PPO
(In-Network)

Non-PPO
(Out-of-Network)

100% after deductible

80% after deductible

Therapy Services – Speech, Occupational and Physical

Coverage for services provided by a physician or therapist.

100% after deductible

80% after deductible

Temporomandibular Joint (TMJ) Dysfunction and Related Disorders

100% after deductible

80% after deductible

Other Covered Services

- Private duty nursing (Please refer to Certificate for details)
- Artificial limbs and other prosthetic devices
- Blood and blood components
- Skilled Nursing
- Ambulance services
- Orthotic appliances
- Prosthetic appliances
- Medical supplies

100% after deductible

80% after deductible

Prescription Drug Card

Prescription Drug benefit paid at 100% after co-payment at participating pharmacy. CVS (including CVS inside a Target Store) and Doc's Drugs are not covered pharmacies under this BCBS Plan.

Benefits at a non-contracting pharmacy are covered at 75% of the amount that would have been paid at a contracting pharmacy minus the appropriate copayment amount.

Mail Order Prescription Drug Program – provides up to a 90-day supply of maintenance drugs used on a continuous basis for treatment of chronic health conditions.

- * \$7 copay for generic drugs
- * \$25 copay for preferred brand drugs
- * \$50 copay for non-preferred brand drugs
- * \$100 copay for specialty drugs

Mail Order: 2X retail copay, 90-day supply maintenance drugs (specialty drugs not available thru mail order)

To Locate a Participating Provider: Visit our Web site at www.bcbsil.com/providers and use our Provider Finder® tool. Search the network named Participating Provider Option (PPO).

****This is a general summary of your benefits.** Please refer to your Summary of Benefits and Coverage (SBC), or you may request a copy of the policy or plan document by calling Customer Service, for additional details and a description of the plan requirements and benefit design. This plan does not cover all health care expenses. Please carefully review the plan's limitations and exclusions.

Out of network benefits are subject to maximum allowable charge limitations which will limit the amount of charges that will be allowed or considered to be eligible to be paid. This means that generally less than the full amount of the charge will count toward the out of network deductible and less than the full amount of the charge will be covered at the out of network coinsurance limit. Members will be responsible for the differences between the allowed amount and the amount (if any) that the insurance plan will pay.

Renewal Rate Summary for January 1, 2021

Coverage	Vendor	Rate Action
Medical	BCBSIL	6.92%
Dental PPO Plan	Delta Dental	0% (Year 1 of another 2 year rate)
Dental Network	Delta Dental	0% (Year 1 of another 2 year rate)
Life (Basic)	RSLI	0% (Year 2 of a 2 year rate)
Life (Voluntary)	RSLI	0% (Year 2 of a 2 year rate)
Vision (Voluntary)	Eye Med	0% (Year 1 of another 4 year rate)
Cancer	Allstate	No rate change
Accident	Allstate	No rate change
Flex Plan	BPC	No Rate change (Year 2 of a 2 year rate)



OFFICE OF THE CHAMPAIGN COUNTY EXECUTIVE

1776 East Washington Street, Urbana, Illinois 61802-4581

Darlene A. Kloeppel, County Executive

MEMORANDUM

To: Jim Goss, Deputy Chair – Finance; and
Stephanie Fortado, Assistant Deputy Chair – Finance; and
Honorable Members of the Finance Committee of the Whole

From: Tami Ogden, Deputy Director of Finance

Date: July 29, 2020

Subject: Local CURE Program Coronavirus Relief Fund Grant Assistance

Champaign County has been awarded up to \$1,330,616 through the Local CURE Program for Coronavirus Relief Fund assistance. The allotment is based on a per capita formula, and reimburses eligible expenses incurred March 1 through December 30. Local CURE funds may be used if the following apply:

- The expense is connected to the COVID-19 emergency.
- The expense is “necessary”.
- The expense is not filling a short fall in government revenues.
- The expense is not funded thru another budget line item, allotment or allocation, as of March 27, 2020.
- The expense is not being reimbursed through a different emergency response program.
- The expense wouldn’t exist without COVID-19 OR would be for a “substantially different” purpose.

A Certification form has been requested from the Department of Commerce and Economic Opportunity (DCEO), and the County has been reviewing guidance provided by DCEO and the Department of the Treasury, as well as tracking COVID-related costs. Reimbursable costs incurred to-date include tempered safety glass in multiple county offices and courtrooms, facility renovations to accommodate social distancing in both staff and public areas, equipment and subscriptions allowing employees to telework, equipment and supplies for disinfection of public facilities, and administrative leave.

Additionally, the County has applied for FEMA Public Assistance through the Illinois Emergency Management Agency (IEMA). This funding is more restrictive in nature and specific to “emergency” protective measures. Reimbursement is provided at 75 percent. Costs incurred to-date that are eligible for this funding are disinfection of eligible public facilities, communication of general health and safety information to the public, and Emergency Operation Center costs.

The County will make every effort to utilize these grants to the fullest extent possible. Budget amendments are not being requested at this time; however, may be forthcoming as we continue to review ongoing grant guidance being provided by state and federal agencies.

LOCAL CORONAVIRUS URGENT REMEDIATION EMERGENCY SUPPORT PROGRAM
("Local CURE Program")

FINANCIAL SUPPORT CONDITIONS AND CERTIFICATION

Champaign County ("Local Government"), with its principal office at **1776 E Washington St, Urbana, IL 61802**, is eligible to receive an amount not to exceed **\$1,330,616** ("allotment") as financial support pursuant to the Local CURE Program.

The Local CURE Program is funded from financial assistance the State of Illinois received through the U.S. Department of the Treasury's Coronavirus Relief Fund (CFDA No. 21.019) authorized under section 601(a) of the Social Security Act, as added by section 5001 of the Coronavirus Aid, Relief and Economic Security Act, P.L. 116-136 ("CARES Act").

As a Local Government recipient of financial support through the Local CURE program, the Local Government is required to utilize the financial support received from the Illinois Department of Commerce and Economic Opportunity (the "Department") for the specific purposes as set forth below. To participate in the Local CURE Program, the Local Government must remain in compliance with the terms and certifications stated herein. Please review the items below carefully, as the Local Government and its representative shall warrant that all material facts presented are accurate. If the Local Government is unable to provide this assurance, it is ineligible to receive financial support under the Local CURE Program.

The Department may enter into an agreement with one or more third parties to assist in the administration of the Local CURE Program. The Local Government shall adhere to all instructions or guidance issued by the Department's third party vendors in addition to those of the Department.

The allowable uses of program funds and eligible expenditures set forth in this certification will be modified by the Department, in accordance with the Illinois Administrative Procedure Act, if the CARES Act or the U.S. Department of the Treasury guidance is amended to authorize different categories of eligible uses or eligible expenses.

The Local Government should return this signed Financial Support Conditions and Certification by **October 1, 2020**.

FINANCIAL SUPPORT CONDITIONS

As the authorized representative of the Local Government, I agree and certify that the Local Government:

General Information

1. Provided true and accurate information on the following documents, as applicable: the application and the IRS Form W-9.
2. Will have, by the time Local Government submits its first request for reimbursement, an active registration on the federal System for Award Management (“SAM”) and will maintain an active SAM registration throughout the duration of the Local Government’s participation in the Local CURE Program.
3. Is a “unit of local government” as defined by the Illinois Constitution, Article VII, Section 1 and has the legal authority to apply for and receive financial support under the Local CURE Program.
4. Is not located completely within one or more of the five Illinois counties that received direct allotments from the CARES Act fund (Cook, DuPage, Kane, Lake, or Will).

Local CURE Program Requirements

5. Has incurred or will incur eligible costs, as defined by 14 Ill. Admin. Code Part 700, for which it will seek reimbursement from the Department under the Local CURE Program. Specifically, the costs incurred by the Local Government:
 - a. are necessary expenditures incurred due to the public health emergency with respect to COVID-19;
 - b. are not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the unit of local government; and
 - c. were or will be incurred during the period that begins on March 1, 2020 and ends December 30, 2020.
6. Understands that pursuant to the Local CURE Program, the Local Government will only be permitted to seek reimbursement from the Department for costs that have already been expended for services performed or goods received. No advance payments will be permitted.
7. Shall seek reimbursement from one or more of the following five categories of eligible incurred expenses:
 - a. Medical expenses, including but not limited to: expenses of establishing temporary public medical facilities and other measures to increase COVID-19 treatment capacity, costs of providing COVID-19 testing, and emergency medical response expenses;
 - b. Public health expenses, including but not limited to: expenses for communication and enforcement by local governments of public health orders related to COVID-19;
 - c. Payroll expenses for public safety, public health, health care, human services, and similar employees whose services were substantially dedicated to mitigating or responding to COVID-19;
 - d. Expenses for actions taken to facilitate compliance with COVID-19 related public health measures; and
 - e. Any other COVID-19 related expenses reasonably necessary to the function of government, or for other uses approved by the Department, that satisfy the Local CURE Program eligibility criteria. The Local Government must document how expenses are related to COVID-19.

8. Understands that to be eligible for reimbursement, the Local Government must have had services performed or received goods to respond directly to the public health emergency with respect to COVID-19 by December 30, 2020.
9. Understands that it is Local Government's responsibility to communicate with and report to the Department Local Government's needs regarding the allotment on a regular basis, as directed by the Department. This includes the requirement that Local Government report as soon as practicable if it believes that a portion of the allotment will not be utilized by the Local Government, OR if Local Government is in need of additional funds in excess of the allotment, for costs which will be incurred by December 30, 2020 and which will comply with all the Local CURE Program requirements.
10. Understands that on or around **November 1, 2020**, the Department will send a notice to Local Government indicating that it must report in detail: (a) how Local Government intends to spend the remainder of the initial allotment, and (b) any anticipated eligible expenses through December 30, 2020 in excess of the local government's initial allotment. If, by **December 1, 2020**, Local Government does not submit a report to the Department, or the detailed report submitted by Local Government reveals that some or all of the allotment will not be utilized by the Local Government, the Department will redirect, in accordance with 14 Ill. Admin. Code Part 700, the projected unspent balance to other local governments eligible for the Local CURE Program, which have reported a need for funds.
11. Understands that all requests for reimbursement for any Local CURE Program allotment received by Local Government before February 1, 2021 must be received by the Department or its third party administrator by **January 31, 2021**.
12. Understands that if Local Government's allotment has a remaining balance of funds for which Local Government has not sought reimbursement by January 31, 2021, on **February 1, 2021**, the remaining balance will be redirected to one or more local governments eligible for the Local CURE Program, which have a need for funds.
13. Understands that if the Local Government receives an allotment on or after **February 1, 2021**, the Local Government must submit all requests for reimbursement for this allotment to the Department or its third party administrator by **February 28, 2021**.
14. Understands that for any allotment received by Local Government on or after December 1, 2020, to be eligible for reimbursement, the Local Government must have had services performed or received goods to respond directly to the public health emergency with respect to COVID-19 by December 30, 2020.
15. Understands that the Local Government will submit to the Department or its third party administrator requests for reimbursement on forms provided by the Department or its third party administrator, including all required supporting documentation and in the manner requested by the Department or third party administrator, that the third party administrator will review the information received for eligibility, and if approved, the payment(s) will be released by the Department to the Local Government.
16. Understands that funds received through the Local CURE Program may not be used to fill shortfalls in the Local Government's revenue to cover expenditures that would not otherwise qualify under the program unless the Department authorizes such expenditures, in accordance with the Illinois Administrative Procedure Act, after a modification to the CARES Act or subsequent guidance issued by the U.S. Department of the Treasury.

17. Shall not seek reimbursement for incurred expenses under the Local CURE Program for which the Local Government has received or will receive a duplicate benefit through another State or federal funding opportunity.
18. Understands that any funding provided through the Local CURE Program is authorized under section 601(a) of the Social Security Act, as added by section 5001 of the CARES Act. The Local Government shall follow all requirements of the CARES Act, including, but not limited to, all related guidance, including subsequent guidance, issued by the U.S. Department of the Treasury.
19. Shall use the funds received from the Department in accordance with the requirements of the Local CURE Program, including the statute (20 ILCS 605/605-1045), rules (14 Ill. Admin. Code Part 700), including any amendments thereto, and all written guidance and manuals issued by the Department and/or its third party administrator. The Department, as the administrator of the Local CURE Program, has the authority to take any action necessary to bring Local Government into compliance with the program requirements.
20. Understands that the Department reserves the right to seek a refund from the Local Government if the Department, another State agency or the federal government finds that the Local Government: (a) made a false or fraudulent statement to the Department or its third party administrator; (b) made a false or fraudulent claim for funds; or (c) spent the Local CURE Program funds on ineligible expenses or for duplicate costs that were reimbursed through another federal or State program.

Local CURE Program Administrative Requirements

21. Shall provide all necessary forms, documentation and information as required or requested by the Department or its third party administrator(s) to operate the Local CURE Program.
22. Shall submit all required reports and information requested by the Department or the third party administrator including, but not limited to, information demonstrating funds received under the Local CURE Program were deposited in an account held by the Local Government.
23. When requesting a reimbursement, shall submit a report certifying the costs, as required by 2 CFR 200.415, and provide all documentation and information required by 14 Ill. Admin. Code Part 700, and any other information requested by the Department or its third party administrator.
24. Shall include Local CURE funding in the applicable financial statement and/or audit of the Local Government, including a Single Audit pursuant to the Single Audit Act (31 U.S.C. §§7501-7507).
25. Shall not seek reimbursement for costs paid to an entity on the federal or State debarred and suspended list.
26. Shall comply with the following provisions of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200): 2 CFR 200.303 regarding internal controls; 2 CFR 200.330 through 200.332 regarding subrecipient monitoring and management; subpart E regarding cost eligibility requirements; and subpart F regarding audit requirements.

General Administrative Requirements

27. Is complying with all relevant State and federal laws and regulations.
28. And its affiliate(s), is/are not barred from receiving the Local CURE Program funds because the Local Government, or its affiliate(s), is/are delinquent in the payment of any debt to the State, unless the Local Government, or its affiliate(s), has/have entered into a deferred payment plan to pay off the debt, and the Local Government acknowledges the Department may terminate and/or seek a refund of the Local Government's Local CURE Program allotment if this certification is false (30 ILCS 500/50-11).
29. Shall continue to comply, as applicable, with the provisions of the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), the Copeland Act (40 U.S.C. 276c and 18 U.S.C. 874), the Davis-Bacon Act (40 U.S.C. 276a-276-1), the Drug-Free Workplace Act of 1988 (44 CFR, Part 17, Subpart F), the Fair Labor Standards Act (29 U.S.C. 201), and the Illinois Prevailing Wage Act (820 ILCS 130/1).
30. Shall comply with all relevant laws and regulations concerning non-discrimination.
31. Shall pay no appropriated funds to any person for influencing or attempting to influence an officer or employee of federal, State or local government, or an employee of a member of any federal, State or local government in connection with the awarding of any State and federal contract, the making of any State and federal grant, the making of any State and federal loan, the entering into any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any State and federal contract, grant, loan or cooperative agreement.
32. Shall prohibit employees, contractors, and subcontractors from using their positions for a purpose that constitutes or presents an appearance of personal or organizational conflict of interests or personal gain.
33. Has no action, lawsuit or proceeding pending or, to the knowledge of the Local Government, threatened which questions the legality or propriety of the transactions contemplated by the receipt of funds through the Local CURE Program or which will have a material adverse effect on the performance required by the Local Government.
34. Has not received any notice of any investigation conducted or charges, complaints or actions brought by the State of Illinois or any governmental body within the State of Illinois regarding the Local Government or its principals and key personnel that will be involved in the use of the Local CURE Program funds received.
35. Has not received any notice that any of its principals or key personnel that will be involved in the use of the Local CURE Program funds are the subject of any criminal investigations or charges.
36. Understands that neither the Department nor the Local Government shall be liable for actions chargeable to the other party related to the Department's provision of funds to the Local Government including, but not limited to, the negligent acts and omissions of a party's agents, employees or subcontractors in the performance of their duties, unless such liability is imposed by law.
37. Understands that receiving funds pursuant to the Local CURE Program is contingent upon and subject to the availability of sufficient funds. The Department may terminate or suspend the Local Government's allotment, in whole or in part, without penalty or further payment being required, if (i) sufficient funds have not been appropriated or otherwise made available to the Department by the State or the federal funding source, (ii) the Governor or the Department

reserves funds, or (iii) the Governor or the Department determines that funds will not or may not be available for payment. The Department shall provide notice, in writing, to the Local Government of any such funding failure and its election to terminate or suspend Local Government's allotment as soon as practicable. Any suspension or termination pursuant to this paragraph will be effective upon the date of the written notice unless otherwise indicated.

Accessibility of Records and Retention

38. Shall make books, records, related papers, supporting documentation, financial records and personnel relevant to the Local CURE Program available to authorized Department representatives, the Illinois Auditor General, Illinois Attorney General, any Executive Inspector General, federal authorities, and any other person as may be authorized by the Department (including auditors), by the State of Illinois or by federal statute. Local Government shall cooperate fully in any such audit or inquiry. Failure by the Local Government to maintain books, records, financial records and supporting documentation shall establish a presumption in favor of the State for the recovery of any funds paid by the State under the Local CURE Program for which adequate books, records, financial records and supporting documentation are not available to support disbursement.
39. Understands that the Department or its third party administrator will conduct monitoring of the Local CURE Program to ensure funds were spent in accordance with the Local CURE Program statute and the administrative rules.
40. Shall provide to any agent authorized by the Department, upon presentation of credentials, full access to, and the right to examine, any document, papers and records either in hard copy or electronic format, of the Local Government involving transactions related to the Local CURE Program.
41. Shall maintain for five (5) years from the date of submission of the final request for reimbursement, adequate books, all financial records and supporting documents, statistical records and all other records pertinent to the Local CURE Program. If any litigation, claim or audit is started before the expiration of the retention period, the records must be retained until all litigation, claims or audit exceptions involving the records have been resolved and final action taken.

Other Expenditures Prohibited by the CARES Act

42. Shall not seek reimbursement under the Local CURE Program for expenditures prohibited by section 5001(b) of the CARES Act, including, but not limited to:
 - a. advocacy for the legalization of any drug or other substance included in Schedule I of the schedules of controlled substances established under Section 202 of the Controlled Substances Act;
 - b. dissemination of deliberately false or misleading scientific information;
 - c. lobbying; or
 - d. expenses for an elective abortion or on research in which a human embryo is destroyed, discarded, or knowingly subjected to risk of injury or death. The prohibition on payment for abortions does not apply to an abortion if the pregnancy is the result of an act of rape or incest; or in the case where a woman suffers from a physical disorder, physical injury, or physical illness, including a life-endangering physical condition

caused by or arising from the pregnancy itself, that would, as certified by a physician, place the woman in danger of death unless an abortion is performed.

Please Answer the Following Questions:

1. Does the Local Government intend to use the full allotment of funds set forth in the first paragraph, above? Yes No
 - a. If yes, the Local Government agrees that it shall notify the Department as soon as practicable if the Local Government determines that it will not use its full allotment.
 - b. If no, approximately, how much of the allotment does the Local Government plan to use? \$ _____

2. Does the Local Government have or estimate it will have additional Local CURE Program eligible expenses greater than the allotment set forth in the first paragraph, above?
Yes No
 - a. If yes, please provide an estimate of the additional funds needed and the types of expenses generally. _____

3. Does the Local Government plan to use any of the funds received through the Local CURE program from the Department as a required match component for another State or federal program? Yes No
 - a. If yes, please describe the program(s). FEMA

CERTIFICATION

The individual below, acting in the capacity to represent the Local Government in completion of this certification, certifies that all information contained herein, is true to the best of his/her knowledge and belief.

I declare under penalty of perjury that the above statements are true and correct.

Authorized Representative

	<u>Darlene Kloepfel</u>	<u>County Executive</u>	<u>8-6-2020</u>
Signature	Name	Title	Date

dkloepfel@ccrpc.org
E-mail

<u>376006910</u>	<u>961922478</u>
Local Government FEIN	Local Government DUNS Number

Primary Local Government Contact for Local CURE Program

Name: Tami Ogden

Title: Director of Finance

Address: 1776 E. Washington Urbana IL 61802

Phone: 217-819-3430

E-mail: togden@co.champaign.il.us



OFFICE OF THE CHAMPAIGN COUNTY EXECUTIVE

1776 East Washington Street, Urbana, Illinois 61802-4581

Darlene A. Kloeppel, County Executive

MEMORANDUM

TO: Charles Young, Chair of Policy, Personnel and Appointments
Jon Rector, Vice Chair of Policy, Personnel and Appointments
Committee of the Whole County Board Members

FROM: Isak Griffiths, Deputy Director of Administration

DATE: August 11, 2020

RE: Request for Job Evaluation Committee Review of Information Technology Director
Position

ISSUE:

IT Director Andy Rhodes has announced his retirement at the end of 2020. In preparing for his departure, he has recommended that the position description for IT Director be updated to reflect current position responsibilities and be evaluated for possible salary adjustment.

REQUEST:

Please recommend the IT Director position be forwarded to the Job Evaluation Committee for consideration and review. If it is determined that a salary adjustment is advisable, the JEC's recommendations will be returned to the COW for consideration.

Included:

1. request for job re-evaluation for
IT Manager / Chief Information Officer position
2. current job description
3. draft of revised job description

Champaign County Job Description

Job Title: Information Technology Manager
Department: Information Technology
Reports to: Director of Information Technology
FLSA Status: Exempt
Grade Range: L*
Approved Date: August, 2009

SUMMARY Responsible for the design, installation and maintenance of network and communications infrastructure for the County. Works with the Business Applications Manager to review and analyze software/hardware needs recommending changes and upgrades to provide efficient, effective and timely service to County technology users. Responsible for the security and integrity of the County's data network.

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

Assesses current and future data infrastructure needs for the County and recommends new hardware to meet those needs.

Confers with user departments regularly to identify computerization needs and determines how the desired results can be achieved.

Establishes and recommends backup and data security policies and procedures.

Assures system documentation by directing the creation and maintenance of system documents.

Maintains and develops the ITIL compliant technology service desk.

Promotes the training of user department personnel in the use of PC's, terminals, printers and other peripherals.

Recommends and directs software changes and updates to keep department systems up-to-date.

Manages the Systems Administrator, Security Analyst and Desktop Support Technician in the provision of technical services to County users.

Works with team members on special projects to assist various offices, departments and committees in establishing goals and deadlines.

Maintains contacts with all user departments, hardware vendors and other systems representatives.

SUPERVISORY RESPONSIBILITIES Directly supervises 3 positions in the IT group: Security Analyst, Systems Administrator and Desktop Support Technician.

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

EDUCATION AND/OR EXPERIENCE Bachelor's Degree (B.S./B.A.) in Data Processing or equivalent from a four-year college or technical school and 5-7 years of experience in government system design and programming including three years in a supervisory role. Requires knowledge and skill in current programming used by the County or equivalent combination of education and experience.

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

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

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

COMPUTER SKILLS to perform this job successfully, an individual should have knowledge of Project Management software and Word Processing software.

CERTIFICATES, LICENSES, REGISTRATIONS as required.

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

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

Champaign County Job Description

Job Title: Chief Information Officer
Department: Information Technologies
Reports to: County Executive
FLSA Status: Exempt
Grade Range: (*Job Evaluation Review requested*)
Prepared Date: July 2020

SUMMARY Responsible for overall planning, organizing, and execution of all IT functions for Champaign County. This includes directing all IT operations to meet customer requirements as well as the support and maintenance of existing infrastructure, applications, and development of new technical solutions.

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

Develops and coordinates a long-term strategic plan for county-wide information technology management.

Participates in county-wide efforts to provide information and solicit feedback on county information technology services and programs to ensure access and increase awareness of IT services for all departments and employees.

Directs and supervises County IT staff to ensure appropriate assignment of job duties to enhance maximum delivery of services by IT.

Ensures the consistency and maintainability of existing applications by maintaining and enforcing standards/procedures for implementing technical solutions as directed by the County Executive.

Performs liaison duties between users, operations, and programming personnel in the areas of system design, modifications, trouble-shooting or requests for IT services.

Directs IT staff in production/implementation tasks according to a documented schedule that meets or exceeds customer expectations.

Recommends appropriate IT policy/budgeting changes/enhancements to elected officials for ultimate approval by the County Board.

Ensures county websites, portals, and social media pages and published information are current and relevant.

Bring emerging technologies and support to the county.

Write and evaluate RFPs, RFQs, bids for technical equipment and services.

Develops and administers budget for County's IT expenditures, including development of performance-based planning/documentation.

Other duties as assigned.

SUPERVISORY RESPONSIBILITIES Manages IT Division staff. Responsible for overall direction, coordination, and evaluation of this unit. Carries out supervisory responsibilities in accordance with the organization's policies and applicable laws. Responsibilities include interviewing, hiring and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

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

EDUCATION and EXPERIENCE Minimum of a four-year degree from an accredited college or university in computer sciences, business administration, public administration, mathematics or related field; master's degree preferred. At least five years' experience in technical operations management and/or an equivalent combination of training and experience. Project Management experience strongly preferred.

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

TECHNICAL SKILLS Broad knowledge of information technology processing systems, concepts, and methodologies. Demonstrated aptitude for learning new technologies.

REASONING ABILITY Ability to define, analyze, and interpret problems, data, and technical instructions, and establish facts, and draw valid conclusions. Deal with abstract and concrete variables.

CERTIFICATES, LICENSES, REGISTRATIONS not required.

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

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

Thomas J. Difanis

Circuit Judge
Room 341A
Courthouse
101 East Main Street
Urbana, Illinois 61801

Sixth Judicial Circuit
Champaign County

Telephone (217) 384-3704
Fax (217) 384-8424

**TO: Charles Young, Chair, Policy, Personnel & Appointments
Jon Rector, Vice Chair, Policy, Personnel & Appointments**

FROM: Thomas J. Difanis, Presiding Judge

DATE: July 31, 2020

RE: Circuit Court Executive Assistant Position

Please recommend the attached job description for an Executive Assistant to be sent to the Job Content Evaluation Committee for review.

Thank you.

Included:

1. request for job re-evaluation for Circuit Court
Executive Secretary / Executive Assistant position
2. current job description
3. draft of revised job description

Champaign County Job Description

Job Title: Executive Secretary
Department: Circuit Court
Reports to: Court Administrator
FLSA Status: Non-Exempt
Prepared Date: November, 2017

SUMMARY Performs a variety of responsible and confidential secretarial, clerical and administrative duties for the Presiding Judge of the Circuit Court.

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

Maintains Presiding Judge's calendar; types daily schedule; schedules appointments, hearings, trials, etc.

Maintains personnel files and time sheets for Court Clerks.

Prepares the annual Court calendar outlining jury weeks, Court Holidays, Grand Jury days and Jury Commission days; mails copies to all concerned entities.

Prepares a variety of reports.

Schedules Court Clerks.

Sets up and maintains filing systems.

Performs responsible and complex administrative and secretarial duties for the Presiding Judge of Champaign County.

SUPERVISORY RESPONSIBILITIES May occasionally supervise several Court Clerks.

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

EDUCATION and/or EXPERIENCE Graduation from a 2-year program with some word processing and personal computer training supplemented by three years of responsible secretarial experience or an acceptable equivalent combination of education and experience. Requires good knowledge of the operations of the criminal justice system and court procedures. Should type error-free approximately 70 wpm.

LANGUAGE SKILLS Ability to read and interpret documents such as governmental regulations, legal documents, operating instructions and procedure manuals. Ability to write routine reports and correspondence. Ability to speak effectively with the public and employees

of the organization. Requires good knowledge of the English language and spelling.

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

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

CERTIFICATES, LICENSES, REGISTRATIONS As required.

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

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

Champaign County Job Description

Job Title: Executive Assistant to Court Administrator

Department: Circuit Court

Reports to: Court Administrator

FLSA Status: Non-Exempt

Prepared Date: July 2020

SUMMARY Assists the Court Administrator in providing comprehensive support to the Presiding Judge of Champaign County by carrying out responsible and complex administrative and fiscal functions in the department; supervises clerical staff.

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

Assists and acts in a confidential capacity to the Court Administrator and Presiding Judge involving department operations including matters regarding the formulation, determination, and effectuation of the management policies of the department. This position is excluded from the bargaining unit.

Provides office support to the Court Administrator and Presiding Judge: assists with document drafting and distribution; maintains files and coordinates calendars, schedules, and meetings; prepares reports and correspondence; processes mail; maintains website content; facilitates requests for information and support.

Performs purchasing tasks for the department by contacting vendors, preparing and typing requisitions, approving invoices for payment, and maintaining records of purchases and inventory of equipment. Orders all supplies and forms used by judges and staff. Recommends equipment improvements and upgrades while responsible for maintaining technology inventory of the office.

Maintains and produces the judges' bond court schedules and bi-weekly reminders of judges meetings, prepares orders for special jury requests, prepares all jury orders, maintains judges' vacation schedules, prepares payment contracts for contract attorneys, distribution orders for payments from Marriage and Civil Union fund, and jury commissioner appointment orders and bonds. Processes payments to jurors for service.

Assists in departmental budget preparation by gathering data required for budget projections, performing routine mathematical calculations, and completing budget documents. Maintains records of subsequent budgetary expenditures.

Provides administrative support for the Champaign County Law Library and Legal Self-Help Center. Supports the work of project coordinators in consultation with judiciary. With the assistance of the Problem-Solving Court Coordinator, manages the Drug Court Fund. Submits requisitions for payment, maintains all records pertaining to the Law Library, Drug Court, and Foreclosure Mediation funds, and produces quarterly reports of the fund activity.

Assists in the procurement of grants and monitors grant awards.

Prepares quarterly reports to the Administrative Office of the Illinois Courts, any reports required for awarded grants, and audits receipt and expenditure of grant or contract funds.

Prepares vouchers requesting reimbursement from the state for language interpreter expenses and sexually violent persons cases.

Coordinates the court's language access activities: schedules and compensates interpreters for court hearings, mediations, help center appointments, and jury service; maintains equipment used for remote video interpreting; acquires translated court documents as needed; works with the Court Administrator and Language Access division of AOIC to ensure effective communication with individuals with disabilities or with limited English proficiency. Prepares vouchers requesting reimbursement from the state for interpreting services. Collects and reports data on interpreting services and sends to the Chief Judge quarterly.

Assists the Court Administrator in providing accommodations under the Americans with Disabilities Act for court users.

Attends meetings, training sessions, and conferences as appropriate.

Stands in and acts as back-up for the Court Administrator as needed.

Performs court bookkeeping and compiles accurate financial records including receipt of funds, disbursements, and operational costs. Ensures that accurate and prompt billings are established, costs are charged to proper funds, and payments are received.

Responsible for the preparation of the department's bi-weekly payroll and benefit changes. Computes attendance for department employees and calculates wages; submits records for payment.

Performs personnel tasks for the department. Assists and may be responsible for the hiring procedure, disciplinary action, and the direct supervision of the court clerk and other support staff and the coordination of work direction and assignments pertaining to the county employees of the court. Maintains personnel files. Reviews and posts seniority lists pursuant to AFSCME agreement.

Oversees the coordination of Circuit Court weddings, assigning scheduling and processing duties among support staff as needed. Maintains the Marriage and Civil Union fund pursuant to Supreme Court rules. Works with the Court Administrator to reconcile the fund each month and sends quarterly budget documents to the Chief Judge. Coordinates and complies with AOIC audits.

SUPERVISORY RESPONSIBILITIES Provides direction and periodically supervises 12 to 15 clerical employees. Assists in carrying out supervisory responsibilities in accordance with the collective bargaining agreement, the county's policies, and applicable laws. Responsibilities may include interviewing, hiring, and training employees; planning, assigning, and directing work; appraising performance; rewarding and disciplining employees; addressing complaints and resolving problems.

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

EDUCATION and/or EXPERIENCE Minimum of an associate degree with emphasis in business or public administration and five years of experience in public sector or equivalent

combination of education and experience. Management skills are necessary. Experience with budgeting and using Microsoft Excel or similar applications required. Good knowledge of the operations of the court system or county government is preferred.

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

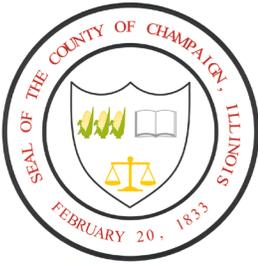
MATHEMATICAL SKILLS Ability to add, subtract, multiply and divide in all units of measure, using whole numbers, common fractions and decimals. Ability to compute rate, ratio and percent and to draw and interpret bar graphs.

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

CERTIFICATES, LICENSES, REGISTRATIONS As required.

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

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



OFFICE OF THE CHAMPAIGN COUNTY EXECUTIVE

1776 East Washington Street, Urbana, Illinois 61802-4581

Darlene A. Kloeppe, County Executive

MONTHLY HR REPORT JUNE 2020

VACANT POSITIONS LISTING

VACANT POSITIONS AS OF COB 06/30/2020

*** Highlighted vacancies were new this month

FUND	DEPT	EMPLOYEE NAME	JOB TITLE	HOURLY RATE	REG HRS	REGULAR SALARY	FY 2020 HRS	FY 2020 SALARY
80	26	vacant 5/22/20 (Axelrod)	Account Clerk	15.40	1950	30,030.00	1965.0	30,261.00
80	28	vacant 12/31/19 (Simmering)	Desktop Support Technician	18.21	1950	35,509.50	1965.0	35,782.65
80	30	vacant 8/12/19 (Jones)	Account Clerk	15.40	1950	30,030.00	1965.0	30,261.00
80	30	vacant 1/20/20 (Kelly)	Chief Deputy Circuit Clerk	43.57	1950	84,961.50	1965.0	85,615.05
80	30	vacant 10/21/19 (Ward)	Legal Clerk	14.53	1950	28,333.50	1965.0	28,551.45
80	31	vacant 6/2/2020 (Carleton)	EXECUTIVE SECRETARY	20.36	1560	31,761.60	1572.0	32,005.92
80	40	vacant 2/23/20 (Melero)	Clerk	14.62	1950	28,509.00	1965.0	28,728.30
80	40	vacant 3/17/20 (Maxey)	Deputy Sheriff--Patrol	36.38	2080	75,670.40	2096.0	76,252.48
80	40	vacant 5/8/20 (Briggs)	DEPUTY SHERIFF--PATROL	26.31	2080	54,724.80	2096.0	55,145.76
80	41	vacant 6/1//20 (Pickett)	ADMIN LEGAL SECRETARY	17.08	1950	33,306.00	1965.0	33,562.20
80	51	vacant 3/2 (Wileaver)	Court Services Officer	20.37	1950	39,721.50	1965.0	40,027.05
80	51	vacant 5/18/20 (Devoe)	Court Services Officer	20.37	1950	39,721.50	1965.0	40,027.05
80	140	vacant 10/31/16 (Syme)	Clerk	14.53	1950	28,333.50	1965.0	28,551.45
80	140	vacant 6/24/20 (Abbott)	CORRECTIONAL OFFICER	21.57	2080	44,865.60	2096.0	45,210.72
80	140	vacant 5/1/20 (Melchor)	Court Security Officer	19.60	2080	40,768.00	2096.0	41,081.60
80	140	VACANT 4/2/20 (King)	Master Control Officer (FT)	17.03	2080	35,422.40	2096.0	35,694.88
80	140	vacant 2/3/20 (Young)	Master Control Officer (PT)	16.57	1040	17,232.80	1048.0	17,365.36
614	23	vacant 4/25/19 (Judth)	Clerk	14.53	1040	15,111.20	1048.0	15,227.44
-- TOTAL --						694,012.80		699,351.36

UNEMPLOYMENT REPORT

Notice of Claims Received – 21
Head Start – 21 (part year staff)

Benefit Determination – 1

Head Start – 1 - denied

PAYROLL REPORT

JUNE PAYROLL
INFORMATION

	6/5/2020		6/12/2020-FCO, FCS RETRO	
Pay Group	EE's Paid	Total Payroll \$\$	EE's Paid	Total Payroll \$\$
General Corp	510	\$1,020,165.28	100	\$51,865.19

RPC/Head Start	316	\$456,181.31		
Total	826	\$1,476,346.59	100	\$51,865.19

Pay Group	6/19/2020	
	EE's Paid	Total Payroll \$\$
General Corp	512	\$1,012,239.48
RPC/Head Start	330	\$419,345.74
Total	842	\$1,431,585.22

HEALTH INSURANCE/BENEFITS REPORT

Total Number of Employees Eligible: 686

General County Union (includes AFSCME & FOP):

206 Single ; 39 EE+spouse ; 67 EE+child(ren) ; 14 Family ; 76 waived

Non-bargaining employees:

127 Single ; 37 EE+spouse ; 44 EE+child(ren) ; 9 Family ; 66 waived

Life Insurance Premium paid by County: \$ 1,774.11

Health Insurance Premium paid by County: \$410,742.95

TURNOVER REPORT

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

General County

June 2020: 1.01% average over the last 12 months

June 2020: 6 out of 596 Employees left Champaign County: 5 resignations, 1 death

WORKERS' COMPENSATION REPORT

Entire County Report	June 2019	June 2020
New Claims		0
Closed		3
Open Claims		27
Year To Date Total		17
On-going # of claims filed)		

EEO REPORT

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

	ads closing this month:		ads with no end date:	
	Female Court Services Officer - Probation/Court Services		Deputy Coroner/Autopsy Coroner	
Jun 2020 Monthly EEO Report General County Only				
Total Applicants	14		19	33
Male	5		2	7
Female	9		16	25
NonBinary				0
Undisclosed			1	1
Hispanic or Latino	0		3	3
White	10		15	25
Black or African-American	4		1	5
Native Hawaiian or Other Pacific Islander	0		0	0
Asian	0		0	0
American Indian or Alaska Native	0		0	0
Two or more races	0		0	0
Undisclosed	0		0	0
Veteran Status	2		0	2

ADMINISTRATIVE SUPPORT to COUNTY BOARD REPORT

Agendas Posted	15	Meetings Staffed	5	Minutes Posted	6
Appointments Posted	45	Notification of Appointment	35	Contracts Posted	4
Calendars Posted	5	Resolutions Prepared	34	Ordinances Prepared	1

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Steven Hammel

ADDRESS: 2101 Belmont Park Lane Champaign IL 61822-9401
Street City State Zip Code

EMAIL: [REDACTED] PHONE: (217) 621-6432

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Beaver Lake Drainage District

BEGINNING DATE OF TERM: September 1, 2020 ENDING DATE: August 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?
I have served on the Beaver Lake Drainage District for the last 3 years. I farm and understand water flow. I have repaired many tiles that have broken down.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
I have served on the board the last 3 years and have attended several drainage district workshops and seminars.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.
Champaign County Farm Bureau Board - I have served 5 1/2 years and this will end in January 2021, giving me more time to devote to this.

Former member of Somer Township board.

Steven J Hammel
Signature

Date: 07/08/2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: LAVERN ZEH

ADDRESS: P.O. BOX 626, 309 EAST FRANKLIN FISHER IL 61843
Street City State Zip Code

EMAIL: _____ PHONE: 217-897-1597

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: BLACKFORD SLOUGH DRAINAGE DISTRICT

BEGINNING DATE OF TERM: 9/1/20 ENDING DATE: 8/31/23

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

55 YRS, FARMING - NOW RETIRED
25 YRS. - COMMISSIONER - BLACKFORD SLOUGH DISTRICT
20 YRS - TREASURER & CHAIRMAN - BLACKFORD DISTRICT

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

25 YRS ON BLACKFORD BOARD

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

COMMISSIONER CHAMPAIGN CO FOREST PRESERVE - 2003 - 2009

Lavern Zehr
Signature

Date: 7/1/20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Harlan R Trotter

ADDRESS: 776 E RD 2500 N Deer Illinois 61846
Street City State Zip Code

EMAIL: _____ PHONE: 8988763

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Conrad and Fisher

BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: 8/31/2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?

I have been on the Board for many years and had a lot of experience in drainage work

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

We just did a renewal tax levy for district

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Harlan R Trotter
Signature

Date: 7-9-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/20/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Robert W Baker

ADDRESS: 5512 W Windsor RD Champaign IL 61822
Street City State Zip Code

EMAIL: [REDACTED] PHONE: 217-202-2020

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: fountain head drainage district

BEGINNING DATE OF TERM: sept 1 2020 ENDING DATE: aug 31 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? (Yes) No

2. What experience and background do you have which you believe qualifies you for this appointment?

I have been a commissioner for fountain head for over 30 years.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

Know how everything operates for taxes and fees I was responsible for detachment to city of Champaign and still work with them on other issues

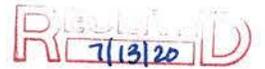
4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

None

Robert W Baker
Signature

Date: 7-12-20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner



PLEASE TYPE OR PRINT IN BLACK INK

NAME: Patrick Feeney

ADDRESS: 1474 E. 1500. Rd. Monticello IL 61856
Street City State Zip Code

EMAIL: feeneyfarms1@gmail.com PHONE: (217) 621-3938

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: KAWKAKEE DRAINAGE DISTRICT

BEGINNING DATE OF TERM: SEP 1, 2020 ENDING DATE: AUG. 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

I have served as Commissioner for KAWKAKEE DRAINAGE DIST. for many years.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I understand the operations, taxes & fees that are needed for operation of KAWKAKEE DRAINAGE DIST.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

PREMIER COOPERATIVE BOARD MEMBER

Signature:

Date: 7/7/20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner



PLEASE TYPE OR PRINT IN BLACK INK

NAME: WAYNE F. EMKES

ADDRESS: 102 S. CHURCH ST. THOMASBORO IL 61878
Street City State Zip Code

EMAIL: jd619@aol.com PHONE: 217 643-3604

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: KEAR- COMPROMISE D.D.

BEGINNING DATE OF TERM: Sept. 2020 ENDING DATE: AUG 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? (Yes) No
2. What experience and background do you have which you believe qualifies you for this appointment?

I have held this position for approx. 40 years

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I have been treasurer of this district for many years

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Ellis Drainage District

Wayne F. Emkes
Signature

Date: July 12, 2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/10/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: NORMAN UKEN

ADDRESS: 2419 COUNTY RD. URBANA IL 61802
Street City State Zip Code
1800 E

EMAIL: NONE PHONE: 643-3015 217-621-6676
Cell

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Longbranch Mutual
CHAMPAIGN COUNTY BOARD

BEGINNING DATE OF TERM: SEPT 1, 2020 ENDING DATE: AUG 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? (Yes) No

2. What experience and background do you have which you believe qualifies you for this appointment?

LANDOWNER
HAVE SERVED ON THE LONGBRANCH DRAINAGE DISTRICT
BOARD FOR SEVERAL YEARS.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

HAVING BEEN ON THE BOARD SEVERAL TERMS, I HAVE HELPED WITH OUR TAX
LEVY AND MET WITH OUR ATTORNEY ANNUALLY, HELPED CHECK THE
DRAINAGE BOUNDARIES AND CHECK TAXES AND FEES. THE COUNTY
FAILED TO PUT OUR ACCESSED FEE ON THE TAX BILLS THIS YEAR.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

NONE

Norman Uken
Signature

Date: July 6, 2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Larry W Dallas

ADDRESS: 650 E CR 1450 N Tuscola IL 61953
Street City State Zip Code

EMAIL: lwDallas53@gmail.com PHONE: 217-840-4297

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Okaw Drainage District

BEGINNING DATE OF TERM: Sept 1 2020 ENDING DATE: August 31 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

I have undertaken several drainage projects on my own land and have a good understanding of drainage principles. I am on the Upper Kaskaskia watershed group that looks at the river as a whole entity

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I have been on the Okaw Board for 20+ years. I have been an active participant in most of the repairs and projects we have done

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Douglas County Union # 20 Drainage District

Larry W Dallas
Signature

Date: July 1, 2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner



PLEASE TYPE OR PRINT IN BLACK INK

NAME: Leonard Delaney

ADDRESS: 58 CR 3000N Fisher Illinois 61843
Street City State Zip Code

EMAIL: LCD FARMS 1@gmail.com PHONE: (217) 417-1748

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Owl Creek Drainage District

BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: _____

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

I am a landowner in the district. I have farmed in the area for 28 years. I am a current Owl Creek drainage commissioner.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I am currently on the drainage district and have full knowledge of all operations.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Owl Creek Drainage District
President Fisher Unit School District # 1.

Leonard Delaney
Signature

Date: 7/13/20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/20/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Chris Hausman

ADDRESS: 948 Co Rd 100N Pesotum IL 61863
Street City State Zip Code

EMAIL: [REDACTED] PHONE: 217 417 3619

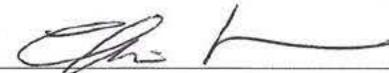
Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Pesotum Consolidated Drainage District

BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: AUG 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?
I've been involved with Drainage since I've been farming, 1991 Full Time. I understand how our District is laid out, with our main tile and our sub district in the village of Pesotum. Maintaining our District tile is the number one priority. I've also been involved with the IL. Assc of Drainage Districts.
3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
Our District covers approx 4000 acres. we Levy each year in order to maintain our 1 1/2 miles of open Ditch, and our District tile. I pay the Bills that the District occurs
4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.
 - IL Assc of Farm Business Farm Management VP.
 - ILLINI FS operating Board.
 - Longview Bank Board
 - Pesotum Fire District Trustee.

Signature 

Date: 7/14/20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/22/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Stephen M. Osterbur

ADDRESS: 1767 CR 2400 N Thomasboro IL 61878
Street City State Zip Code

EMAIL: [REDACTED] PHONE: 217-979-3455

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Raup Drainage Dist

BEGINNING DATE OF TERM: 10-1-20 ENDING DATE: 9-30-23

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

farmer + land owner

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

fix ditches + keep flooding to a minimum.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Church Board

Stephen M. Osterbur
Signature

Date: 7-22-20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Charles M. Daly
ADDRESS: 1701 County Rd #400N. Urbana IL 61802
Street City State Zip Code
EMAIL: [REDACTED] PHONE: 217 202 4892
 Check Box to Have Email Address Redacted on Public Documents
NAME OF APPOINTMENT BODY OR BOARD: St Joseph Drainage Dist #3
BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: 8/31/2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?

30 + Years of Drainage
District Commissioner

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

30 + Years

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

St. Joseph District #3

Charles M. Daly
Signature

Date: 7/1/20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Fire, Cemetery, Water, & Farmland Assessment

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Travis W. Fruhling

ADDRESS: 1301 State Route 49 S. Homer Illinois 61849
Street City State Zip Code

EMAIL: Fruhlingfarms@yahoo.com PHONE: 217-493-1032

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: UDD No. 2 Towns of St. Joseph & Ogden, 97-MC-43

BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: 8/30/2023 *AK.*

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.

1. What experience and background do you have which you believe qualifies you for this appointment?

I have good knowledge of the districts drainage system
from working in this district for over 15 years

2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

It is a 3 commissioners board for a fair and wide knowledge
base to maintain and operate the district. This is also crucial
for future years of good drainage. All major decisions will be
voted on an approval by courts or by district tax payers

3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No If yes, please explain:

N/A

Travis W. Fruhling
Signature

5/18/20
Date

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: BRUCE STIKKERS

ADDRESS: 115 E EVERGREEN DR. ST. JOSEPH, IL 61873
Street City State Zip Code

EMAIL: BJSTIKKERS@SBCGLOBAL.NET PHONE: 217-469-2793

Check Box to Have Email Address Redacted on Public Documents St. Joseph

NAME OF APPOINTMENT BODY OR BOARD: DRAINAGE DISTRICT #6

BEGINNING DATE OF TERM: AUGUST 2020 ENDING DATE: AUGUST 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

a) RESIDENT/LANDOWNER SINCE 1977

b) 15 YRS AS RESOURCE CONSERVATIONIST AT CHAM. CO. SWCA - WORKED WITH DRAINAGE DISTRICTS AND ASSISTED THEM WITH FUNDING FOR PROJECTS

c) RETIRED - FLEXIBLE SCHEDULE

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I HAVE BEEN COMMISSIONER FOR 3 YEARS. I HAVE WORKED WITH DISTRICTS IN COUNTY TO DESIGN AND FUND DRAINAGE PROJECTS. I HAVE ALSO WORKED WITH CHAM CO. PLANNING + ZONING ON

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

NO PUBLIC BOARDS BUT SEVERAL OTHERS:

DRAINAGE FOR NEW DEVELOPMENTS

- 1) CHAM CO. EXTENSION EDUCATION FOUNDATION
- 2) LINCOLN HERITAGE RESOURCE CONSERVATION + DEVELOPMENT
- 3) PHEASANTS FOREVER.
- 4) HEADWATERS INVASIVE PLANT PARTNERSHIP

Bruce Stickers
Signature

Date: 7/6/2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/10/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Dennis Bergman

ADDRESS: 1997 CR 3000N Rantoul IL 61866
Street City State Zip Code

EMAIL: DTBergman@MCHSI.Com PHONE: 217-841-4883

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Salt Fork Drainage

BEGINNING DATE OF TERM: Sept 1 - 2020 ENDING DATE: Aug 31 - 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?
Being a landowner on the 2 1/2 mile of the drainage district gives me a good look of what is going on with tile draining into the creek, I have been on the drainage comm for 27 years and have made a lot of improvements over the years
3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
Operations is checking the districts washouts and coverts, make sure the stream flow is not blocked along the district also to know the districts boundaries, setting tax levy for the maintainen each year
4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

None at this time

Dennis Bergman
Signature

Date: 7-7-20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/2/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: John Leonard

ADDRESS: 254 E 300N RD Gibson City IL 60936
Street City State Zip Code

EMAIL: jpl61072@gmail.com PHONE: 217-841-0401

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Sangamon and Drummer Drainage District

BEGINNING DATE OF TERM: 8-31-2020 ENDING DATE: 8-31-2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

I have farmed in this area for over 25 years and have served on this drainage district board for several years. I am interested in maintaining the Sangamon River and Drummer Creek to allow good drainage for the farmland and other properties in the District.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I am familiar with the Drainage District's revenue and expenses and the responsibilities of the District to maintain the drainage district's drainage system.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

I am presently a Commissioner of the Kumler Drainage District in McLean and DeWitt Counties.

John Leonard
Signature

Date: 7-1-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Cecil L. Hudson

ADDRESS: 1341 CR 1800 E. Urbana IL. 61802
Street City State Zip Code

EMAIL: chudson@illinois.edu PHONE: 217-841-2370

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Silver Creek Drainage Dist

BEGINNING DATE OF TERM: not sure ENDING DATE: 8/31/2023
9/1/2020

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

I hold the commissioner position now and have for several years

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I assign people to work on this drainage ditch and check for tabement of funds at Champaign County Treasurer/collectors etc.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Cecil L. Hudson
Signature

Date: 7-1-20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner



PLEASE TYPE OR PRINT IN BLACK INK

NAME: Chris J. Coherly

ADDRESS: 1916 CR 1800 E Urbana IL 61802
Street City State Zip Code

EMAIL: illinicon@aol.com PHONE: 217-202-9514

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Somer #1 Drainage District

BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: 8/31/2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No I have family interest

2. What experience and background do you have which you believe qualifies you for this appointment?
35 + years of farming in the district

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
Extensive

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.
None

Signature

Date: 7/16/20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/21/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Jonathan Schroeder

ADDRESS: 684 CR 400 N Sadorus, IL 61872
Street City State Zip Code

EMAIL: [REDACTED] PHONE: 217-369-0856

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Two Mile Slough Drainage District

BEGINNING DATE OF TERM: 08/31/2020 ENDING DATE: 08/31/2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. **IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.**

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?
I and my family currently own and farm in the district. First appointed to fill an remaining term and finishing first full term. Lived and farmed my whole life in district. Served on many boards in county, both elected and appointed. Very familiar dealing with public funds, ordinances, local state and federal laws. History of working with local governments and organizations concerned with drainage, conservation and water quality.
3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
Working with the district attorney, related associations to keep current new laws concerning drainage districts and other issues helps to make well informed decisions for land owners. After 4 years of servitude, it's cool to connect the dots from what I can see above ground to what's underground. Currently the district has no major projects. Keeping an eye on maintenance fees and building up funds in areas that will need major replacement in future.
4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.
Two Mile Slough DD

Jonathan M. Schroeder
Signature

Date: 07/16/2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner



PLEASE TYPE OR PRINT IN BLACK INK

NAME: LOWELL ^{* PETE *} JOHNSON

ADDRESS: 3215 CR 1700 E RANTOUL IL 61866
Street City State Zip Code

EMAIL: PETE JOHNSON FARMS YAHOO COM PHONE: 217-377-2902

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: CHAMP. CO. BOARD ? Triple Fork ?

BEGINNING DATE OF TERM: 1965 - 9/1/2020 ENDING DATE: 8/30/2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?
I SERVE ON IADD LEGAL COUNCIL BOARD NOW.
FAITHFUL ON BEING A GOOD SOIL STEWARD

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
HAVE SERVED FOR TRIPLE FORK 50 PLUS YEARS.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

- TRIPLE FORK DRAINAGE COMM.
- BIG SLOUGH DRAINAGE COMM.
- WILD CAT DRAINAGE COMM.

SERVED
50 PLUS YEARS
30 PLUS YEARS
30 PLUS YEARS
Pete (BIRTH DATE 5-6-45)

ILLINOIS ASSOCIATION OF DRAINAGE DISTRICTS, SECRETARY FOR LEGAL COUNCIL, IADD

Lowell Johnson
Signature

Date: JULY 1, 2020

PLEASE CALL ME UPON RECEIPT.

217-377-2902

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Robert Grove

ADDRESS: 1470 Co Rd 1100N Urbana Ill 61802
Street City State Zip Code

EMAIL: _____ PHONE: 217 305 5529

Check Box to Have Email Address Redacted on Public Documents Union #1 Philo + Criffenden

NAME OF APPOINTMENT BODY OR BOARD: Drainage Dist.

BEGINNING DATE OF TERM: Sept 1, 2020 ENDING DATE: 8/31/2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?

20+ years on Dist.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

20+ years on Dist.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Locust Grove Cemetery

Robert W. Grove
Signature

Date: 7-3-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Roy C Douglas

ADDRESS: 4512 S. Philo Rd Urbana IL 61802
Street City State Zip Code

EMAIL: roydouglas@volcomail.net PHONE: 217-202-4543

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Union Drainage District #1 of Philo & Urbana

BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: Aug 31, 2020

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?

life long resident
farming the ground for 43 years

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

served for several terms
currently serving as president

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

part - CCFB, Premier Coop, CCFA

Roy C Douglas
Signature

Date: 7-2-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Dwight Raab

ADDRESS: 1502 County Rd. 2350 E., St. Joseph, IL 61873

EMAIL: Dwight.raab@gmail.com PHONE: 217-840-1699

Check Box to Have E-mail Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: UDD 2
of the towns of St. Joseph and Ogden/97-MC-43

Beginning Date Of Term: september 2020

Ending Date: August 30, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

I am familiar with the necessity for the upkeep of open drainage ditches and tile lines. I have lived in rural areas served by drainage districts for most of my life. My work with farmers and small-town businesses further illustrates the need, to me, for proper drainage for all who live and work within a drainage district.

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

I have worked with farmers during my career. Many of my clients have served as drainage District commissioners and have educated me about the mission and operations of drainage districts, and their importance. My work is financial and involves accounting, so I am well acquainted with financial operations as well.

Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving. None

Signature: Dwight A Raab
Dwight Raab

Date: 11 APRIL 2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Linda K. LecDroz ^{last name}

ADDRESS: 508 S. Lincoln St. Philo IL 61864
Street City State Zip Code

EMAIL: [REDACTED] PHONE: 217-621-0047

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: #3 South Homer and Sidney Drainage District

BEGINNING DATE OF TERM: 9/1/20 ENDING DATE: 8/31/23

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?
I farm over 300 A that are drained by this district, now with my husband and before with my father.
3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
I served as a commissioner since 2017. Before me, my father served, and I have his notes. I am aware of the work that has been completed, and I consult with the district's attorney.
4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.
none


Signature

Date: 7-5-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/16/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: LES OLSON

ADDRESS: 2316 County Road 1950N Saint Joseph IL 61873
Street City State Zip Code

EMAIL: _____ PHONE: 469-7139

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Drainage Commissioner Union D.D. Stanton + Ogden

BEGINNING DATE OF TERM: Sept 2020 ENDING DATE: Sept 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?

Life Long Farmer
Formerly worked for Contractor Maintaining Drainage Ways
Commissioner on 2 Districts for over 25 years

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

20 Years of Service on District (Very good Knowledge)

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Spoon River Drainage District

Les Olson
Signature

Date: 7/13/2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: J. ANDREW EDWARDS

ADDRESS: 990A CR 1350 E TOLONO IL 61880
Street City State Zip Code

EMAIL: _____ PHONE: 217-369-4014

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: UPPER EMBRASS DRAINAGE

BEGINNING DATE OF TERM: AUG 31 2020 ENDING DATE: TBA AUG 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?

FARMER

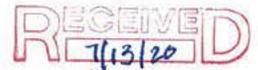
3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
EXP AS PAST COMM.

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

J. Edwards
Signature

Date: 7-1-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner



PLEASE TYPE OR PRINT IN BLACK INK

NAME: Steven Maddock

ADDRESS: 1945 CR 2200E St. Joseph IL 61873
Street City State Zip Code

EMAIL: [REDACTED] PHONE: (217) 469-2495

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: Willow Branch Drainage District

BEGINNING DATE OF TERM: September 1, 2020 ENDING DATE: August 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? (Yes) No
2. What experience and background do you have which you believe qualifies you for this appointment?
Have farmed for over 35 years
Worked for U of I Agr. Engr Dept. for 31 years
in the soil & water division on many research projects.
3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?
Have been on this drainage district already many years.
4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.
Currently on Stanton Special Drainage District.

Steven Maddock
Signature

Date: 7-7-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/14/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Steven Herriott

ADDRESS: 1926 Co Rd 800 N Sidney, IL, 61877
Street City State Zip Code

EMAIL: Steven.herriott@hotmail.com PHONE: 778-6948

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: wrisk Drainage Dist

BEGINNING DATE OF TERM: Sept. 1, 2020 ENDING DATE: Aug. 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?

Have been on the wrisk Drainage
For several years

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

Have served as treasure for
several years

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

None

Steven Herriott
Signature

Date: 7/7/20

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Fire, Cemetery, Water, & Farmland Assessment

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Travis W. Fruhling

ADDRESS: 1301 State Route 49 S. Homer Illinois 61849
Street City State Zip Code

EMAIL: Fruhlingfarms@yahoo.com PHONE: 217-493-1032

Check Box to Have Email Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD: UDD No. 2 Towns of St. Joseph & Ogden, 97-MC-43

BEGINNING DATE OF TERM: 9/1/2020 ENDING DATE: 8/31/2021

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.

1. What experience and background do you have which you believe qualifies you for this appointment?

I have good knowledge of the districts drainage system
from farming in this district for over 15 years

2. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

It is a 3 commissioner board for a fair and wide knowledge
base to maintain and operate the district. This is also critical
for future years of good drainage. All major decisions will be
voted on an approved by courts or by district tax payers

3. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the appointed body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No If yes, please explain:

N/A

Travis W. Fruhling
Signature

5/18/20
Date

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/26/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Mark Wood

ADDRESS: 2636 County Rd. 2300 N., Gifford, IL 61847

EMAIL: mwfarm1963@gmail.com PHONE: 217-369-9400

Check Box to Have E-mail Address Redacted on Public Documents

NAME OF APPOINTMENT BODY OR BOARD:

Lower Big Slough Special Drainage District 97-MC-40

Beginning Date Of Term: upon approval

Ending Date: September 2020 - Aug 31, 2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No
2. What experience and background do you have which you believe qualifies you for this appointment?
I Farm in The Big Slough DRAINAGE District
3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

Signature: Mark Wood
Mark Wood

Date: 7-10-2020

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM
Drainage District Commissioner

RECEIVED
7/23/20

PLEASE TYPE OR PRINT IN BLACK INK

NAME: BJ Hackler

ADDRESS: 401 S Third St Joseph IL 61873
Street City State Zip Code

EMAIL: hacklerbj@gmail.com PHONE: 217-493-7244

Check Box to Have Email Address Redacted on Public Documents St. Joseph

NAME OF APPOINTMENT BODY OR BOARD: Drainage District #6

BEGINNING DATE OF TERM: August 2020 ENDING DATE: 8/31/22

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION. Please note that an Oath & Bond are required per statute, before each commissioner enters upon his or her duties. Please contact the attorney for the drainage district for further information regarding the Oath & Bond.

1. Do you own land within the drainage district? Yes No

2. What experience and background do you have which you believe qualifies you for this appointment?

- Resident / Landowner of Drainage District #6 since 1965
- Mayor of Village of St Joseph 36 yrs
- Familiar w/ history of drainage district #6 and village Master Storm Water Plan
- Knowledge of studies governing state laws of drainage districts having served 21 yrs in Municipal League

3. What is your knowledge of the appointed body's operations, property holdings, staff, taxes, and fees?

- 36 yrs experience w/ budgets, appropriations, levy's and operation of Drainage District #6

4. Please list any boards, commissions, or public positions to which you have been appointed or elected and are currently serving.

- United Methodist Church Pastor / Parish Relations Committee Chairman
- Previous United Methodist Church Finance Committee Chairman
- Congressional Appointment Federal EPA - 4 yrs

BJ Hackler
Signature

Date: 7/18/2020

Looking forward to the opportunity of working w/ the 2 Drainage District #6 Commissioners, Attorney, & Engr

CHAMPAIGN COUNTY APPOINTMENT REQUEST FORM

PLEASE TYPE OR PRINT IN BLACK INK

NAME: Lyndon J. Goodly, DVM
ADDRESS: 2103 Wiggins St Champaign IL 61822
EMAIL: ljgoodly@gmail.com PHONE: 217-778-9733

Check Box to Have Email Address Redacted on Public Documents
Health Board

NAME OF APPOINTMENT BODY OR BOARD: Health Board

BEGINNING DATE OF TERM: 08/01/2020 ENDING DATE: 06/30/2023

The Champaign County Board appreciates your interest in serving your community. A clear understanding of your background and philosophies will assist the County Board in establishing your qualifications. Please complete the following questions by typing or legibly printing your response. IN ORDER TO BE CONSIDERED FOR APPOINTMENT, OR REAPPOINTMENT, A CANDIDATE MUST COMPLETE AND SIGN THIS APPLICATION.

1. What experience and background do you have which you believe qualifies you for this appointment/reappointment?
I have been a licensed veterinarian since 1990 and have served as the Institutional Veterinarian for the University of Illinois Urbana Champaign since August 2004. Part of my official responsibilities is to direct the Occupational Health and Safety Program for all Animal Users on campus. I have also served on the Institutional Biosafety Committee, which ensures research personnel safety when working with biological and chemical agents. Outside of my professional life, I volunteer as a Family to Family Coordinator for Champaign NAMI (National Alliance on Mental Illness).

2. What do you believe is the role of a trustee/commissioner/board member and how do you envision carrying out the responsibilities of that role?
I believe every person has a moral and ethical responsibility to serve humanity in the communities they live and work. Health Board Members should seek to listen, learn, and represent the best interests of the general public whom we serve. I envision working closely with other Board members and the Public Health Department to understand the challenges and opportunities our community faces. I would seek to make sure each segment of our community feels connected to the workings of the Board of Health.

3. What is your knowledge of the appointed body's operations, specifically property holdings and management, staff, taxes, fees?
I am new to the Board, so will work hard to enhance my understanding of it's daily operations and the guidelines and bylaws that govern it's operations.

4. Can you think of any relationship or other reason that might possibly constitute a conflict of interest if you are selected to serve on the body for which you are applying? (This question is not meant to disqualify you; it is only intended to provide information.) Yes No If yes, please explain:

5. Would you be available to regularly attend the scheduled meeting of the appointed body?

Yes No If no, please explain:

The facts set forth in my application for appointment are true and complete. I understand this application is a document of public record that will be on file in the County Board Office.



Signature

07/31/2020

Date



Aaron Ammons
Champaign County Clerk
Champaign County, Illinois

1776 East Washington Street
Urbana, IL 61802
Email: mail@champaigncountyclerk.com
Website: www.champaigncountyclerk.com

Vital Records: (217)384-3720
Elections: (217)384-3724
Fax: (217)384-1241
TTY: (217)384-8601

COUNTY CLERK
MONTHLY REPORT
JUNE
2020

Liquor Licenses & Permits	25.00
Civil Union Licenses	70.00
Marriage License	6,440.00
Interests	19.72
State Reimbursements	-
Vital Clerk Fees	17,811.48
Tax Clerk Fees	8,265.37
Refunds of Overpayments	19.00
TOTAL	32,650.57
Additional Clerk Fees	1,340.00



Aaron Ammons
Champaign County Clerk
Champaign County, Illinois

1776 East Washington Street
Urbana, IL 61802
Email: mail@champaigncountyclerk.com
Website: www.champaigncountyclerk.com

Vital Records: (217)384-3720
Elections: (217)384-3724
Fax: (217)384-1241
TTY: (217)384-8601

COUNTY CLERK
MONTHLY REPORT
JULY
2020

Liquor Licenses & Permits	-
Civil Union Licenses	70.00
Marriage License	6,860.00
Interests	21.31
State Reimbursements	-
Vital Clerk Fees	20,491.50
Tax Clerk Fees	2,783.07
Refunds of Overpayments	<u>33.75</u>
TOTAL	30,259.63
Additional Clerk Fees	1,470.00



Aaron Ammons
Champaign County Clerk
 Champaign County, Illinois

1776 East Washington Street
 Urbana, IL 61802
 Email: mail@champaigncountyclerk.com
 Website: www.champaigncountyclerk.com

Vital Records: (217)384-3720
 Elections: (217)384-3724
 Fax: (217)384-1241
 TTY: (217)384-8601

SEMI-ANNUAL REPORT

June 2020

Liquor Licenses & Permits	665.00
Civil Union License	140.00
Marriage License	22,820.00
Interests	272.56
State Reimbursements	-
Vital Clerk Fees	108,766.17
Tax Clerk Fees	34,061.27
Refunds of Overpayments	35.50

TOTAL

Additional Clerk Fees	7,322.00
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State of Illinois)
) SS
 Champaign County)

I, Aaron Ammons, do solemnly swear that the foregoing account is in all respects true, according to the best of my knowledge and belief; and that I have neither received nor directly or indirectly agreed to receive, or be paid for my own or another's benefit, any other money, article or consideration than therein stated, nor am I entitled to any fee or emolument for the period therein mentioned, other than those therein specified.

Signed this 1 day
 of July, A.D. 2020



 AARON AMMONS
 Champaign County Clerk