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## CHAMPAIGN COUNTY BOARD OF HEALTH

Brookens Administrative Center  
1776 E. Washington  
Urbana, IL 61802

Phone: (217) 384-3772  
Fax: (217) 384-3896

### Champaign County Board of Health

**Tuesday, July 29, 2008**

**6:00 p.m.**

**Brookens Administrative Center, 1776 E. Washington  
Meeting Room 2  
Urbana, Illinois**

### AGENDA

<u>ITEM</u>		<u>PAGE NO.</u>
<b>A. Call to Order</b>		
<b>B. Roll Call</b>		
<b>C. Approval of Agenda/Addendum</b>		
<b>D. Approval of Minutes</b>		
1. June 24, 2008		1-5
<b>E. Public Participation on Agenda Items Only</b>		
<b>F. Correspondence and Communications</b>		
1. Provena 2007 Community Benefit Annual Report <i>(Will Be Provided at the Meeting)</i>		
2. Report From Board Members on Monitoring Assignments		6
<b>G. RPC Senior Wellness Program</b>		
1. Senior Wellness Program Quarterly Report		7-19
<b>H. Treasurer's Report</b>		
1. Invoice Submitted by CUPHD for May 2008		20-27
2. Invoice Submitted by CUPHD for June 2008		28-39
3. Report from Budget Subcommittee		
4. FY2009 Board of Health Budget <i>(Included in July Budget Subcommittee Agenda Packet)</i>		
<b>I. Issues Regarding CUPHD</b>		
1. Report from Acting CUPHD Administrator		
2. Division Monthly Reports – June 2008		
<b>J. Issues Regarding CIDES</b>		
1. Monthly Report – June 2008		

**K. Other Business**

1. Resolution Thanking Thomas O'Rourke for His Years of Service
2. Date of August Meeting
3. Status Report as to Ongoing Items to be Addressed at Future Board of Health Meetings

**L. Public Participation on Non-Agenda Items Only**

**M. Adjournment**

1 **CHAMPAIGN COUNTY BOARD OF HEALTH**

2  
3 **Monthly Meeting**  
4 **Tuesday, June 24, 2008, 6:00 p.m.**  
5

6 **Call to Order & Roll Call**  
7

8 The Board of Health held its monthly meeting on June 24, 2008 in Meeting Room 2 at the  
9 Brookens Administrative Center, 1776 East Washington, Urbana. The meeting was called to order at  
10 6:01 p.m. by Julian Rappaport. Stan James, Thomas O'Rourke, John Peterson, Julian Rappaport, and  
11 Carrie Storrs were present at the time of roll call. Bobbi Scholze and Betty Segal arrived later. Nezar  
12 Kassem and Prashanth Gowda were absent. The staff members present were Kat Bork (Board of  
13 Health Secretary) and Susan McGrath (Senior Assistant State's Attorney). Others present were Mark  
14 Driscoll (Mental Health), Nancy Greenwalt (CIDES Executive Director), Julie Pryde (CUPHD Acting  
15 Administrator), Stephanie Record (Crisis Nursery), Wanda Tracey (Crisis Nursery), and C. Pius Weibel  
16 (County Board Chair).  
17

18 **Approval of Agenda/Addendum**  
19

20 **MOTION** by James to approve the agenda and addendum; seconded by Peterson. **Motion**  
21 **carried.**  
22

23 Scholze entered the meeting at 6:02 p.m.  
24

25 Rappaport announced this was the final meeting for O'Rourke and Storrs as Board members.  
26 He thanked them for their service and made note of O'Rourke's many years on the Board.  
27

28 **Approval of Minutes**  
29

30 **MOTION** by James to approve the April 29, 2008 minutes; seconded by Peterson.  
31

32 Rappaport requested his comment on Line 209 be changed from "nifty" to "interesting" and his  
33 name be correctly spelled on Line 215.  
34

35 **Motion carried as amended.**  
36

37 **MOTION** by Storrs to approve the May 27, 2008 minutes; seconded by Peterson. **Motion**  
38 **carried.**  
39

40 **Public Participation on Agenda Items Only**  
41

42 There was no public participation on the agenda items.  
43

44 **ADDENDUM**

45 **Crisis Nursery Perinatal Depression Program Update**  
46

47 Stephanie Record, the incoming Executive Director of Crisis Nursery spoke about the Perinatal  
48 Depression Program which is being jointly funded by the Board of Health and the Mental Health

49 Board. They have a program director and a staff member in place. Wanda Tracey, also from Crisis  
50 Nursery, spoke about providing service to mothers identified as at-risk for perinatal depression. They  
51 plan to provide services for twenty-five mothers outside of Champaign-Urbana in a collaborative effort  
52 with CUPHD. Crisis Nursery will develop a referral procedure jointly with CUPHD. They will have  
53 home visits and interaction groups to limit isolation. Tracey stated the literature suggests that 10%-  
54 20% of mothers are depressed after childbirth. Rappaport asked if Crisis Nursery would provide  
55 quarterly reports to the Mental Health Board and Driscoll answered yes. Rappaport asked for the  
56 Board of Health to receive the quarterly reports and to hear about anything substantive from Crisis  
57 Nursery as one of the entities proving the funding. Tracey said the Nursery was willing to have  
58 someone come to the Board's monthly meetings to give a verbal or written report. The Board did not  
59 feel that level of reporting was necessary and James suggested the quarterly reports would be sufficient  
60 as the program is getting started. The Board was very excited about the program.

61  
62 Segal entered the meeting at 6:14 p.m.

63  
64 Scholze inquired about outcomes and measures of success. Tracey said the Crisis Nursery staff  
65 has some evaluation tools in place to evaluate the wellbeing of the mothers through self-evaluation and  
66 a combination of scales. Scholze was interested in what will be measured. Bork agreed to email the  
67 original program proposal to Scholze. Scholze would get together with Crisis Nursery to further  
68 discuss the program. Tracey and Record encouraged any Board members to visit the nursery to learn  
69 more about the program and the operation. McGrath explained the Memorandum of Understanding  
70 with Mental Health Board would formalize the relationship between the two boards. Rappaport as the  
71 Board President has to be authorized by the Board to sign it.

72  
73 **MOTION** by James to approve the Memorandum of Understanding with Mental Health Board;  
74 seconded by Storrs. **Motion carried.**

75  
76 Rappaport signed the MOU originals for Driscoll. The Board agreed Rappaport and Segal  
77 would continue to serve as evaluators for this program.

78  
79 **Correspondence and Communications**

80  
81 Kassem and Gowda had contacted Bork to explain that they would be unable to attend the  
82 meeting.

83  
84 **Treasurer's Report**  
85 **Invoice submitted by CUPHD for April 2008**

86  
87 **MOTION** by Peterson to pay the CUPHD April 2008 invoice; seconded by James. **Motion**  
88 **carried.**

89  
90 **RPC Senior Wellness Program Invoice for Third Quarter**

91  
92 Provided for information only to accompany the report presented at a previous meeting.

93  
94

95 Report from Budget Subcommittee

96  
97 Peterson stated the Budget Subcommittee met before the Board meeting at 4:30 p.m. The  
98 subcommittee came out of its second meeting with a good idea of what it will recommend for the  
99 FY2009 budget. Deb Busey, the County Administrator of Finance and HR Management, projected an  
100 increase in the property tax levy. CUPHD is requesting an increase of \$53,000 for an incremental  
101 budget. The other programs, RPC Senior Wellness, CIDES, and Mental Health Board joint funding,  
102 requested funding equal to the FY2008 levels. Peterson explained the Board of Health as \$600,000 in  
103 carryover and County's General Corporate Fund is not doing well financially, so the Budget  
104 Subcommittee is recommending the Board reduce its request for a subsidy from the County Board to  
105 \$45,000. Peterson broached the subject of loaning the County Board some of the Board of Health's  
106 carryover for operating expenses at the meeting. Busey was not sure if such action was possible, but  
107 she will look into it. Peterson stated the Board should operate under the assumption that the carryover  
108 will be reduced when the County Board subsidy is finished, but he wants to make it clear to the County  
109 Board the valuable programs the Board of Health is funding. They recognize the County Board will  
110 not continue the subsidy indefinitely. The last Budget Subcommittee meeting will be held before the  
111 July Board meeting, after which they will have a recommendation for the Board's approval.

112  
113 The Board discussed the possibly of providing a loan to the County Board. Rappaport  
114 encouraged any Board members with budget questions to attend the next Budget Subcommittee  
115 meeting on July 29<sup>th</sup> at 4:30 p.m.

116  
117 Issues Regarding CUPHD

118 Report from Acting CUPHD Administrator

119  
120 Pryde's report was distributed and she described the new initiatives and a new grant at  
121 CUPHD. CUPHD will be purchasing software to send emails or text messages on public health and  
122 tornado emergencies for the entire County with Bioterrorism money. There have been no positive tests  
123 for salmonella and three dead birds were tested for the West Nile Virus. The sidewalk project ends in  
124 August and Pryde included some of the advertisements that have gone out for CUPHD programs.  
125 Storrs asked how many birds CUPHD could take for West Nile. Pryde said it was ten.

126  
127 Division Monthly Reports – May 2008

128  
129 Rappaport said there was no mobile unit report in the May division reports. Pryde explained  
130 that the mobile unit report was moved to Infectious Disease and the lack of a report might have been  
131 an error because of the switch. Pryde wanted the mobile to stop going to Ludlow, Gifford, and  
132 Seymour because no one has visited the mobile in those towns. She wants to return to those towns for  
133 specific clinics, such as during flu season. Rappaport asked for the reports to be available on the  
134 CUPHD website a week before the monthly meetings so the Board can read them. Julie agreed to do  
135 so and indicated it would not be problem.

136  
137 Segal asked if people from Ludlow, Seymour, and Gifford visit the clinic and suggested using  
138 these people as contacts. Pryde said they do have people from those areas coming in for maternal and  
139 child health services. She will try to get it in the newspaper. Rappaport again recommended CUPHD  
140 develop relationships with individuals like James or a networking person in the local communities to

141 get word out about the mobile unit. Pryde reminded the Board that she included advertising in the  
142 mobile program budget and it was cut. She explained the advertising included staff going door to  
143 door. Rappaport suggested a subcommittee work with the mobile unit staff to brainstorm about some  
144 creative problem solving in this area.

145  
146 Report on CUPHD Contract

147  
148 O'Rourke said a meeting was held on May 28<sup>th</sup> with CUPHD Board to discuss the CUPHD  
149 contract. They had a productive meeting discussing issues such as billing. The CUPHD Board raised  
150 some verbiage issues and it was agreed the attorneys would meet and agree on terminology. McGrath  
151 said she and Grosser met on Monday and she will send him a draft of the contract language for when  
152 they meet on Friday. The goal is to bring the contract back in July or August for approval. The Board  
153 discussed the contract. O'Rourke said Carol Elliott did a masterful job in smoothly leading the  
154 meeting. Rappaport thanked O'Rourke for being a leading force in developing the contract.

155  
156 Issues Regarding CIDES  
157 Monthly Report – May 2008

158  
159 The report was received by the Board.

160  
161 Other Business  
162 Assignment of Monitoring Responsibilities for Board Members

163  
164 Rappaport wanted to give the Board members assignments to track particular programs. He  
165 distributed the list with his recommendations. He included Cherryl Ramirez on the list because her  
166 term on the Board will begin in July. Rappaport reviewed the list and why he assigned each member  
167 to each program based on their qualifications.

168  
169 Date of August Meeting

170  
171 The Legislative Budget Hearings are scheduled for August 25<sup>th</sup> and 26<sup>th</sup>. Bork suggested  
172 moving the Board of Health meeting from August 26<sup>th</sup> to August 19<sup>th</sup> or September 2<sup>nd</sup>. Segal and  
173 Rappaport voiced a preference for August 19<sup>th</sup>. Following discussion, the Board agreed to tentatively  
174 reschedule the August meeting to the 19<sup>th</sup> and would consider canceling if there is a lack of agenda  
175 items.

176  
177 Status Report as to Ongoing Items to be Addressed by the Board of Health in Future Meetings

178  
179 James asked about the grant the Board gave CUPHD to fund comprehensive sexual education.  
180 Pryde said they have staff in training and the schools were very excited about it.

181  
182 Storrs stated she is drafting a plan to explore a merger of CUPHD, County Board of Health,  
183 and the Mental Health Board into one entity, including the level of public support for the initiative. She  
184 requested this item be placed on the next meeting's agenda.

185  
186

187 **Public Participation on Non-Agenda Items Only**

188

189 There was no public participation on non-agenda items.

190

191 **Adjournment**

192

193 The meeting was adjourned at 7:10 p.m.

194

195 Respectfully submitted,

196

197 Kat Bork

198 Board of Health Secretary

199

200 *Secy's note: The minutes reflect the order of the agenda and may not necessarily reflect the order of business conducted at the meeting.*

## Tentative Monitoring Assignments for Board Members

Gowda ----- Maternal and Child Health (Secretary)

James----- Infectious Disease, Mobile Unit (Budget Committee)

Kassem----- CIDES

O'Rourke----- Contract Committee

Peterson--- Environmental Health (Treasurer's Report, Budget Committee)

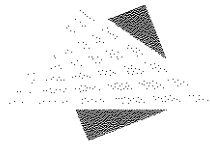
Rappaport----- Administrator's Report (ex-officio committees)

Ramirez----- Wellness Health Promotion

Scholze----- RPC Senior Program

Segal----- Crisis Nursery (Mental Health Board Committee)





## **Champaign County Regional Planning Commission-Senior Services Champaign County Public Health Wellness Quarterly Report 3/1/08 – 6/30/08**

The goal for the Senior Wellness Program is for community members to locate and identify at-risk elders, 60 years of age and older, particularly those who are isolated and provide information and/or assistance to maintain their current living environment and improve their quality of life. The community liaisons/gatekeepers will participate in community activities to enhance their ability to identify and link senior citizens to programs and services and/or create new services.

### **Objectives:**

- To report the data generated from the June 2008 Senior Wellness Survey to the village and survey respondents
- To provide ongoing opportunities (i.e. meetings, newspaper articles, links with faith based communities, contact with elected officials) to inform communities of resources and programs
- Provide educational modules for community liaisons/gatekeepers in their village to support their efforts to identify and refer seniors in need including a community resource guide
- Provide opportunities for seniors with information and services to remain in their community

### **Analysis and Assessment**

#### **March – May**

- Senior Service Staff accompanied CUPHD Mobile Vans in Tolono, Gifford, Mahomet, Rantoul, Ludlow to outreach to seniors
- Senior Wellness draft surveys were reviewed and refined following meetings of a subgroup of the Senior Services of Champaign County Advisory Board. The Advisory Board strongly recommended the term “community” be changed to “village”, the survey should be shortened and the language changed, and the survey should provide more narrative opportunities following questions and sections.
- Senior Wellness Survey topics
  1. Housing,
  2. Transportation
  3. Health and Human Services

## Champaign County Public Health Wellness Quarterly Report (cont'd)

### June 2008

Senior Wellness surveys were dispersed by Advisory Board members to the residents of communities in which they reside and to other volunteer rural community members. Senior Services staff facilitated efforts and provided opportunities for additional participation through requests, mailings and telephone interviews to some key informants.

Survey feedback was received from the following villages - **Fisher, Gifford, Homer, Mahomet, Philo, Sidney, St. Joseph, Thomasboro, and Tolono.** Over 60% of the survey results were received from seniors. Respondents included seniors and non-seniors, senior groups, elected officials, Township Supervisors, and others identified by members of their community.

Approximately **120 surveys were distributed and 93 returned.** It is the hope that these respondents will participate in follow up meetings and training for community liaison/gatekeepers.

The following is a synopsis of the preliminary results and needs gleaned from surveys. A more complete review of the data is to follow.

#### Housing/Home Maintenance

- Lawn care and snow removal
- Cleaning gutters
- Home adaptation for those with mobility challenges
- Mortgage and utility costs
- Financial assistance and/or identification of laborers to repair home

#### Transportation

- All types of needs listed but particularly to healthcare providers
- "Big need several should not be driving but needs to get to C-U"
- "Need Mass Transit"

#### Health and Human Services

- Mental Health services
- "Flu Clinics/Vans"
- "Diabetic"
- Large number of respondents marked "I don't know" if their village/community had services

#### **Attachments:**

- 5/14 Senior Wellness Meeting agenda**
- Senior Wellness Survey**
- Senior Wellness Survey Program Timeline**



**Social Services Division**

Case Management

- Community Gardens
- Court Diversion Services
- Family & Community Development
- Financial Literacy
- Individual Development Accounts
- Norman Housing Advocacy
- School-to-Work Transition Skills
- Tax Aide

Community Services

- CSBG Scholarships
- Emergency Rent Assistance
- Information and Referral
- LIHEAP
- Shelter Plus Care
- Senior Home Repair

Independent Service Coordination for DD

- Bogard Monitoring
- Pre-admission Screening (PAS)
- PUNS
- Individual Service and Support Advocacy (ISSA)
- Service Coordination (SC)

**Senior Services**

- Elder Care
- Information, Referral and Advocacy
- Pharmaceutical Benefit Assistance
- Rural Rider

See our website at:  
[www.ccrpc.org](http://www.ccrpc.org)

**Senior Wellness Meeting**

**Wednesday, May 14<sup>th</sup>**  
**8 – 11:00**

**Regional Planning Commission**  
**John Dimit Conference Room**

8 – 8:15 Meeting begins: Introductions and roles

**Agenda Items**

8:15 – 8:45 Overview Public Health Senior Wellness Program

8:45 – 9:00 Timelines for grant: Now until 12/1/08

9:00 – 9:30 Review Maturing of Illinois Survey

**9:30 – 9:40 Break**

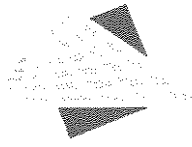
\*9:40 – 10:15 Identify dates and times for ongoing community meeting spaces(s) for the purpose of feedback from surveys, gatekeeper training, community resource identification and development

- Gifford
- St. Joseph
- Sidney/Philo
- Tolono
- Mahomet /Fisher

**Are there scheduled community meetings in which we could hold a pre/post meeting?**

10:15 - Questions/Feedback

**\*Action Item for 5/14**



**Social Services Division**

Case Management

- Community Gardens
- Court Diversion Services
- Family & Community Development
- Financial Literacy
- Individual Development Accounts
- Norman Housing Advocacy
- School-to-Work Transition Skills
- Tax Aide

Community Services

- CSBG Scholarships
- Emergency Rent Assistance
- Information and Referral
- LIHEAP
- Shelter Plus Care
- Senior Home Repair

Independent Service

Coordination for DD

- Bogard Monitoring
- Pre-admission Screening (PAS)
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- Individual Service and Support Advocacy (ISSA)
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Senior Services

- Elder Care
- Information, Referral and Advocacy
- Pharmaceutical Benefit Assistance
- Rural Rider

See our website at:  
[www.ccrpc.org](http://www.ccrpc.org)

May/June 2008

Dear Survey Participant,

Regional Planning Commission Senior Services, funded by a grant from Champaign County Board of Public Health, is reaching out to provide additional support to rural communities through a “Senior Wellness Program”. It is our hope that by listening to “targeted” rural communities served by the county’s public health department we can better respond to their needs. We want to help ensure that older adults living in rural communities will have opportunities to remain safe and well in their own homes.

We are grateful for your willingness to complete the “Senior Wellness Survey”. Your contribution will have a significant impact on our success. Please feel free to add your written comments anywhere you feel necessary on the survey. Personal comments will be kept confidential.

If you would like information on any of the survey topics, or need information on other topics or assistance with any issues, please call Champaign County Regional Planning Commission at 328-3313 and ask for Senior Services. Assisting seniors and providing information is what we do.

Our Thanks To You !

*Senior Services*

**Champaign County Regional Planning**  
**Commission-Senior Services**  
**Senior Wellness Survey**

*Based on a portion of*

**The Maturing of Illinois:  
Getting Communities on Track for an Aging Population  
Livable Communities for All Ages  
Survey**

Village: \_\_\_\_\_

Persons/Positions Interviewed (optional) \_\_\_\_\_

**Age range of person completing survey:**

\_\_\_\_\_ **Under 60 years of age**

\_\_\_\_\_ **60 years of age and above**

### **Available Housing (continued)**

3. Are there any special housing complexes or apartment buildings especially designed for older people in your village?

Yes    No    I don't know

4. Are you aware of older adults who are unable to find appropriate housing within your village? For example, is housing accessible or are there long waiting lists?

Yes    No    I don't know

5. What type of housing needs to be developed to meet the future needs of seniors in your village? (check all that apply)

- Single-family
- Multi-family homes
- Mobile or modular homes
- Assisted living facilities
- Assisted living facilities with dementia care
- Nursing homes with add-on apartments
- Nursing homes with dementia care
- Supportive living facilities
- Shared living facilities
- Other, please list: \_\_\_\_\_

5a. Are any of these housing options available now? Please list:

---

### **Property Tax Relief**

1. Do you pay property tax on your home?  Yes    No

2. Are you taking advantage of property tax reduction programs for older homeowners?

Yes    No

# Transportation

**What types of transportation are available in your village?  
(Please check all that apply)**

- Regularly scheduled bus or other public transportation service that picks up passengers at established stops.
- Wheelchair accessible transportation
- Taxi service
- A local organization (such a senior centers, churches, or other groups) that offers van service to meal sites, doctor's appointments, or special recreational excursions?
- An organized volunteer driver program

## Drivability

**1. Does your village have street signs with letters large enough to be seen at a distance?**

- Yes    No

**2. Are street signs readable at night?**

- Yes    No

**3. Do parking lots have an ample number of parking places that are easy to use?**

- Yes    No

**4. Are there well-marked parking spaces for individuals with disabilities?**

- Yes    No

# Health and Human Services

1. Do members of your village have access to an information hotline that provides information on services for older adults?

Yes  No  I don't know

2. Do the members of your village have a directory of services for older persons?

Yes  No  I don't know

3. Do members of your village have access to a meals-on-wheels or other home delivered meals programs?

Yes  No  I don't know

4. Do members of your village have access to congregate meals (e.g., low cost meals provided at a central location, such as a senior center or restaurant)?

Yes  No  I don't know

5. Are specialized support groups for older residents and caregivers of seniors available to residents of your village? (e.g., bereavement, stress management, etc.)

Yes  No  I don't know

6. Is there a hotline or another communication system available for your village to learn about opportunities to volunteer?

Yes  No  I don't know

7. Are there any senior centers, or community gathering places for seniors living in your village?

Yes  No  I don't know

If yes, please list: \_\_\_\_\_



**Health Services (continued)**

Yes, I need more information on health services. Please explain. \_\_\_\_\_  
\_\_\_\_\_

Please explain the types of health services needed in your village  
\_\_\_\_\_  
\_\_\_\_\_

**Please check health related transportation needs for your village.**

\_\_\_ To doctors, clinics, therapy

\_\_\_ To my pharmacy

\_\_\_ Exercise class

\_\_\_ Other health related activities: \_\_\_\_\_  
\_\_\_\_\_

**Thank you for taking the time to complete this survey!**

## Glossary

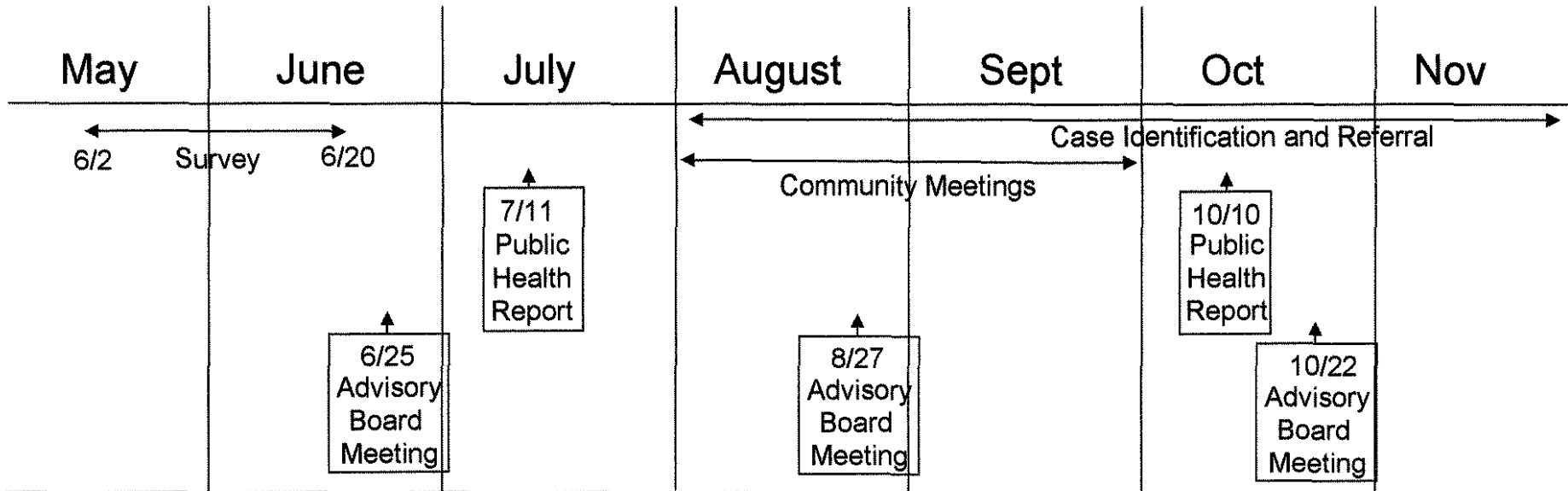
Senior: A person 60 years or older.

Assisted Living Facilities: A facilities where housing is combined with personalized supportive services and health care, designed to meet the individual needs of persons who need help with the activities of daily living, but do not need the skilled medical care provided in a nursing home.

Continuing Care Retirement Communities: A campus style community that includes separate housing for those who live very independently, assisted living facilities that offer more support, and nursing homes for those needing skilled nursing care. Residents then move from one housing choice to another as their needs change.

Supportive Living Facilities: Housing facilities certified for Medicaid by Illinois Department of Health Care and Family Services. They provide apartment style housing combined with personal care and other services for Medicaid clients. This program was developed as an alternative to nursing home care for low-income older persons and persons with disabilities.

# SENIOR WELLNESS PROGRAM TIMELINE



17

<p><b>TASKS TO BE COMPLETED</b></p> <ul style="list-style-type: none"> <li>Gatekeeper Curriculum</li> <li>Newspaper Articles</li> <li>Grant Writing</li> <li>Program Development</li> <li>Gatekeeper Maintenance Program</li> <li>Other</li> </ul>
--

	<b>COMMUNITY MEETINGS</b>
<b>1st</b>	<ul style="list-style-type: none"> <li>• Feedback results from survey</li> <li>• Gatekeeper/Community Liaison Training (Part I)</li> <li>• Team Bonding</li> <li>• # to call: Eldercare Locator / SIS / 1<sup>st</sup> Call for Help</li> </ul>
<b>2nd</b>	<ul style="list-style-type: none"> <li>• Gatekeeper/Liaison Training (Part II)</li> <li>• Resource Booklet/Community Distribute</li> <li>• Gatekeeper Booklet</li> <li>• Case Examples / Role Play</li> </ul>

CHAMPAIGN COUNTY PUBLIC HEALTH BOARD								
AGENCY QUARTERLY REPORT								
AGENCY:		Champaign County Regional Planning Commission						
CONTRACT NAME:		Champaign County County Public Health Board						
FY: 2008		Reporting Period:		04/01/08 - 06/30/08		Original		X
						Revision #		
OPERATING FUND REVENUE AND EXPENSES								
			TOTAL AGENCY		Total Budget for		CCPHB	
			YTD		CCPHB Contract		Revenue	
<b>REVENUE</b>								
1.	CC United Way Allocation							
2.	U-Way Designated Donations							
3.	Contributions							
4.	Special Events / Fundraising							
5.	Contrib / Assoc. Organizations							
6.	Allocation From Other U-Way							
7.	Grants *							
	a) CCMHB							
	b) ECIAAA							
	c) Champaign County							
	d) Townships							
	e) City of Champaign							
	f) City of Urbana							
	g) CSBG #05-23138							
	h) Champaign Cnty Public Hlth Bd							
					\$25,000		\$25,000	
8.	Membership Dues							
9.	Program Service Fees*							
	a) Training Fees							
	b) Referral Fees							
	c)							
	d)							
	e)							
10.	Sales of Goods & Services							
11.	Interest Income							
12.	Rental Income							
13.	In-Kind Contributions							
14.	Miscellaneous							
<b>Total Revenue</b>					\$25,000		\$25,000	
* Please list individual revenue sources (do not combine sources) -- Add lines as necessary								
12/06								



Invoice Number:	0806
Date of Invoice:	June 27, 2008
Billing Period:	May-08

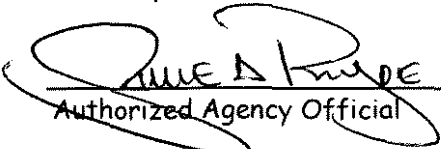
To:  
 Champaign County Public Health Department  
 Att'n.: Evelyn Boatz  
 1776 East Washington Street  
 Urbana, Illinois 61801

For the Following Expenses:

533.07 Professional Services	\$	39,832.02
533.07 Professional Services - Bio-T Grant	\$	7,363.30
533.07 Professional Services - TFC Grant	\$	3,059.71
533.07 Professional Services - West Nile Virus Grant	\$	-
533.07 Professional Services - Non-Community Water - CU Surveys	\$	-
<b>Total Amount Due to CUPHD per Contract</b>	<b>\$</b>	<b><u>50,255.03</u></b>

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.

  
 \_\_\_\_\_  
 Authorized Agency Official

Champaign-Urbana Public Health District

**County Contract Billing  
May 31, 2008**

**30 - Mobile Services**

Billing: 6,436.00  
A1: 6,436.00  
A2: -  
A4: -

**30 - IBCCP**

Billing: 747.34  
A1: 709.25  
A2: 30.58  
A4: 7.51

**40 - Family Health**

Billing: 2,749.84  
A1: 2,422.75  
A2: 254.79  
A4: 72.30

**70 - Env. Health**

Billing: 22,836.92  
A1: 19,944.18  
A2: 2,443.11  
A4: 449.63

**90 - Administration**

Billing: 7,061.92  
A1: 6,318.01  
A2: 680.45  
A4: 63.46

**1215 - Bio-Terrorism Grant  
May 2008**

Billing: 7,363.30  
A1: 6,800.98  
A2: 499.72  
A4: 62.60

**1420 - TFC Grant  
May 2008**

Billing: 3,059.71  
A1: 2,760.61  
A2: 262.81  
A4: 36.29

**7330 - West Nile Virus**

Billing: -  
A1: -  
A2: -  
A4: -

**7415 - Non-Community Water Grant**

Billing: -  
A1: -  
A2: -  
A4: -

Total Professional Services	39,832.02
Total County Grants	10,423.01
<b>TOTAL AMOUNT DUE</b>	<b>50,255.03</b>

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH**  
**Office of Health Promotion**  
**REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Fiscal Contact Person: Esther Thomas  
 Telephone Number: 217-531-4262  
 Email Address: ethomas@cuphd.org  
 Date Submitted: 06/20/08

In the box below, please enter reimbursement amounts submitted for your FY08 grant.									
\$13,125.00		Advanced Payment Amount							
\$2,285.91	July	\$2,011.26	October	\$2,059.64	January	\$2,215.77	April		
\$1,610.79	August	\$2,550.33	November	\$1,952.70	February	\$3,059.71	May		
\$1,784.25	September	\$1,727.68	December	\$2,648.93	March	\$0.00	June		
							\$23,906.97	YTD	

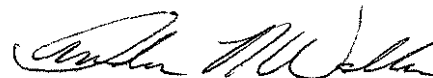
**Agency Name:** **Champaign County Public Health Department**  
**FEIN #:** **37-6006910**  
**Contract #:** **83281009**  
**Program Name:** **IL Tobacco Free Communities**

**Billing Period:** **May-08**

22

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Components (specify)
<b>Personal Services</b>				
Nikki Hillier	Health Educator II	5/1/08-5/31/08	\$709.05	
Jennifer Jackson	Health Educator	5/1/08-5/31/08	\$576.14	
Kari Schweighart	Health Educator	5/1/08-5/31/08	\$516.88	
<b>Fringes</b>				
FICA	FICA	5/1/08-5/31/08	\$128.71	
IMRF	IMRF	5/1/08-5/31/08	\$134.10	
Health Insurance	Health Insurance	5/1/08-5/31/08	\$232.65	
Life Insurance	Life Insurance	5/1/08-5/31/08	\$1.38	
Unemployment	Unemployment	5/1/08-5/31/08	\$27.32	
Worker's Comp.	Worker's Comp.	5/1/08-5/31/08	\$8.97	
<b>Travel</b>				
Jennifer Jackson	Mileage	5/1/08-5/31/08	\$197.96	
Kari Schweighart	Mileage	5/1/08-5/31/08	\$21.71	
<b>Contractual</b>				
Mrs. Linda Meachum	Stipends	5/1/08-5/31/08	\$50.00	
Ms. Kari Calcagno	Stipends	5/1/08-5/31/08	\$50.00	
Dean's Superior Blueprint, Inc.	Printing	5/1/08-5/31/08	\$360.00	
Canon Financial Services, Inc.	Printing	5/1/08-5/31/08	\$7.29	
R.K. Dixon Co.	Printing	5/1/08-5/31/08	\$7.44	
Nikki Hillier	Postage	5/1/08-5/31/08	\$16.25	
USPS/Pitney Bowes	Postage	5/1/08-5/31/08	\$13.86	
<b>Supplies</b>				
<b>Equipment</b>				
<b>Grand Total</b>			<b>\$3,059.71</b>	

*Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.*



**Authorized Agency Official**

6-23-08

**Date**



**Illinois Department of Public Health  
Office of Preparedness & Response  
Reimbursement Certification Form**

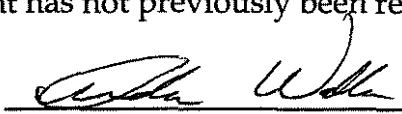
Grantee Name: Champaign County Public Health Department  
 FEIN: 37-6006910  
 Date Submitted: 6/20/2008  
 Preparer's Name: Esther Thomas  
 Preparer's Phone: 217-531-4262

Grant Number: 87181009  
 Program Name: BT Grants  
 Billing Period: May-08  
 Preparer's Email: ethomas@cuphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
<b>Subtotal Salaries and Wages</b>			\$3,555.27	
<b>Subtotal Fringe Benefits</b>			\$1,285.38	
<b>Subtotal Contractual</b>			\$2,177.75	
<b>Subtotal Travel</b>			\$68.12	
<b>Subtotal Commodities</b>			\$196.78	
<b>Subtotal Printing</b>			\$0.00	
<b>Subtotal Equipment</b>			\$0.00	
<b>Subtotal Telecommunications</b>			\$80.00	
<b>Grand Total (Page Total)</b>			\$7,363.30	
<b>Adjustment to total</b>		<b>Adjusted total</b>		

**CERTIFICATION:** The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official



Date

6-23-08

<b>Illinois Department of Public Health, Office of Preparedness and Response Use only</b>	
Control Number	Processing date

**Illinois Department of Public Health  
Office of Preparedness & Response  
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department  
 FEIN: 37-6006910  
 Date Submitted: 6/20/2008

Grant Number: 87181009  
 Program Name: BT Grants  
 Billing Period: May-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
<b>Salaries and Wages</b>				
John Dwyer	Emergency Response Planner	5/1/08-5/31/08	\$1,433.94	
Awais Vaid	Epidemiologist	5/1/08-5/31/08	\$1,210.10	
Rachella Thompson	CD Investigator	5/1/08-5/31/08	\$911.23	
<b>Subtotal Salaries and Wages</b>			\$3,555.27	

**Illinois Department of Public Health  
Office of Preparedness & Response  
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department  
 FEIN: 37-6006910  
 Date Submitted: 6/20/2008

Grant Number: 87181009  
 Program Name: BT Grants  
 Billing Period: May-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
<b>Fringe Benefits</b>				
Retirement	IMRF	5/1/08-5/31/08	\$254.98	
Social Security	FICA/Medicare	5/1/08-5/31/08	\$244.74	
Group Insurance	Health, Life, Worker's Comp & Unemployment	5/1/08-5/31/08	\$785.66	
<b>Subtotal Fringe Benefits</b>			\$1,285.38	
<b>Contractual</b>				
Champaign Co. Regional Planning Commission	GIS Data	5/1/08-5/31/08	\$2,100.00	
Illinois Public Health Assoc.	Conference Registration	5/1/08-5/31/08	\$33.60	
Canon Financial Services, Inc.	Copying	5/1/08-5/31/08	\$19.21	
R.K. Dixon	Copying	5/1/08-5/31/08	\$19.62	
USPS/Pitney	Postage	5/1/08-5/31/08	\$5.32	
<b>Subtotal Contractual</b>			\$2,177.75	





Invoice Number:	0807
Date of Invoice:	July 18, 2008
Billing Period:	June-08

To:  
 Champaign County Public Health Department  
 Att'n: Evelyn Boatz  
 1776 East Washington Street  
 Urbana, Illinois 61801

For the Following Expenses:

533.07 Professional Services	\$	39,832.02
533.07 Professional Services - Bio-T Grant	\$	4,825.53
533.07 Professional Services - TFC Grant	\$	2,338.77
533.07 Professional Services - West Nile Virus Grant	\$	-
533.07 Professional Services - Non-Community Water - CU Surveys	\$	150.00
<b>Total Amount Due to CUPHD per Contract</b>	<b>\$</b>	<b><u>47,146.32</u></b>

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.

  
 \_\_\_\_\_  
 Authorized Agency Official

Champaign-Urbana Public Health District

**County Contract Billing  
June 30, 2008**

**30 - Mobile Services**

Billing: 6,436.00  
A1: 6,436.00  
A2: -  
A4: -

**30 - IBCCP**

Billing: 747.34  
A1: 709.25  
A2: 30.58  
A4: 7.51

**40 - Family Health**

Billing: 2,749.84  
A1: 2,422.75  
A2: 254.79  
A4: 72.30

**70 - Env. Health**

Billing: 22,836.92  
A1: 19944.18  
A2: 2,443.11  
A4: 449.63

**90 - Administration**

Billing: 7,061.92  
A1: 6,318.01  
A2: 680.45  
A4: 63.46

**1215 - Bio-Terrorism Grant**

June 2008  
Billing: 4,825.53  
A1: 4,347.17  
A2: 415.76  
A4: 62.60

**1420 - TFC Grant**

June 2008  
Billing: 2,338.77  
A1: 2,140.63  
A2: 191.63  
A4: 6.51

**7330 - West Nile Virus**

Billing: -  
A1: -  
A2: -  
A4: -

**7415 - Non-Community Water Grant**

Billing: 150.00  
A1: 150.00  
A2: -  
A4: -

Total Professional Services	39,832.02
Total County Grants	7,314.30
<b>TOTAL AMOUNT DUE</b>	<b>47,146.32</b>

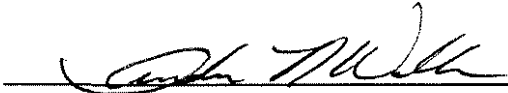
**Illinois Department of Public Health  
Office of Preparedness & Response  
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department  
 FEIN: 37-6006910  
 Date Submitted: 7/15/2008  
 Preparer's Name: Esther Thomas  
 Preparer's Phone: 217-531-4262

Grant Number: 87181009  
 Program Name: BT Grants  
 Billing Period: Jun-08  
 Preparer's Email: ethomas@cuphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
<b>Subtotal Salaries and Wages</b>			\$2,824.92	
<b>Subtotal Fringe Benefits</b>			\$1,076.20	
<b>Subtotal Contractual</b>			\$88.24	
<b>Subtotal Travel</b>			\$139.91	
<b>Subtotal Commodities</b>			\$466.26	
<b>Subtotal Printing</b>			\$150.00	
<b>Subtotal Equipment</b>			\$0.00	
<b>Subtotal Telecommunications</b>			\$80.00	
<b>Grand Total (Page Total)</b>			\$4,825.53	
<b>Adjustment to total</b>		<b>Adjusted total</b>		

**CERTIFICATION:** The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 7-15-08

<b>Illinois Department of Public Health, Office of Preparedness and Response Use only</b>	
Control Number	Processing date



**Illinois Department of Public Health  
Office of Preparedness & Response  
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department  
 FEIN: 37-6006910  
 Date Submitted: 7/15/2008

Grant Number: 87181009  
 Program Name: BT Grants  
 Billing Period: Jun-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Comments
<b>Salaries and Wages</b>				
John Dwyer	Emergency Response Planner	6/1/08-6/30/08	\$1,286.95	
Awais Vaid	Epidemiologist	6/1/08-6/30/08	\$877.33	
Rachella Thompson	CD Investigator	6/1/08-6/30/08	\$660.64	
<b>Subtotal Salaries and Wages</b>			\$2,824.92	







**ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
Office of Health Promotion  
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Fiscal Contact Person: Esther Thomas  
 Telephone Number: 217-531-4262  
 Email Address: ethomas@cuphd.org  
 Date Submitted: 07/16/08

*In the box below, please enter reimbursement amounts submitted for your FY08 grant.*

<b>Agency Name:</b> Champaign County Public Health Department	\$2,285.91	July	\$2,011.26	October	\$2,059.64	January	\$2,215.77	April	
<b>FEIN #:</b> 37-6006910	\$1,610.79	August	\$2,550.33	November	\$1,952.70	February	\$3,059.71	May	
<b>Contract #:</b> 83281009	\$1,784.25	September	\$1,727.68	December	\$2,648.93	March	\$2,338.77	June	
<b>Program Name:</b> IL Tobacco Free Communities								\$26,245.74	YTD

**Billing Period:** June-08

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Componets (specify)
<b>Personal Services</b>				
Nikki Hillier	Health Educator II	6/1/08-6/30/08	\$514.06	
Jennifer Jackson	Health Educator	6/1/08-6/30/08	\$417.70	
Kari Schweighart	Health Educator	6/1/08-6/30/08	\$374.74	
<b>Fringes</b>				
FICA	FICA	6/1/08-6/30/08	\$93.85	
IMRF	IMRF	6/1/08-6/30/08	\$97.78	
Health Insurance	Health Insurance	6/1/08-6/30/08	\$232.65	
Life Insurance	Life Insurance	6/1/08-6/30/08	\$1.38	
Unemployment	Unemployment	6/1/08-6/30/08	\$0.00	
Worker's Comp.	Worker's Comp.	6/1/08-6/30/08	\$6.51	
<b>Travel</b>				
<b>Contractual</b>				
Canon Financial Services, Inc.	Printing	6/1/08-6/30/08	\$2.10	
R.K. Dixon Co.	Printing	6/1/08-6/30/08	\$1.47	
National Cenemedia	TV / Radio Commercials	6/1/08-6/30/08	\$140.00	
<b>Supplies</b>				
RDJ Specialties, Inc.	Program Materials	6/1/08-6/30/08	\$325.00	
Trainers Warehouse	Program Materials	6/1/08-6/30/08	\$131.53	
<b>Equipment</b>				
<b>Grand Total</b>			<b>\$2,338.77</b>	

*Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.*



**Authorized Agency Official**

7-17-08

**Date**

Champaign County Public Health Department  
 Potable Water Supply Program  
 Non-Community Public Water Supplies Surveyed

Quarter	Surveys Completed in Quarter	Compensation
Apr - Jun 2008	34	\$ 425.00

# of CU Surveys	x \$12.50 each
12	\$ 150.00

# of CC Surveys	x \$12.50 each
22	\$ 275.00

Amount owed to Champaign-Urbana Public Health District

\$ 150.00

ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
 OFFICE OF HEALTH PROTECTION  
 DIVISION OF ENVIRONMENTAL HEALTH  
 REIMBURSEMENT CERTIFICATION FORM

AGREEMENT TYPE: Ordinance

AGENCY NAME: Champaign County Public Health Department  
 ADDRESS: %Champaign -Urbana Public Health District  
 210 W. Kenyon Road  
 Champaign, IL 61820

PROGRAM: Safe Drinking Water 063 (474) [ ]  
 Ground Water Permit (256) [ ]

FY 2008 – 4th QUARTER  
 Billing Period Quarter Ending: June 30, 2008

FEIN Number: 37-6005435  
 Contact Number: 85380365

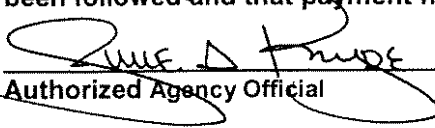
Services Performed	Surveys Completed in Quarter	Compensation
Non-Community Public Water Supplies Surveyed <u>Transient Supplies</u> Survey(s) x \$50 ÷ 4	34	\$425.00
<b>TOTAL</b>		<b>\$425.00</b>

Ground Water Permits	Permits Issued in Quarter	Compensation
Permit(s) x \$75	N/A	\$N/A

<b>TOTAL COMPENSATION</b>	<b>\$425.00</b>
---------------------------	-----------------

**CERTIFICATION:**

I hereby certify that the goods and/or services claimed above are necessary expenditures for the program and are a part of the approved budget, that appropriate purchasing procedures have been followed and that payment has not previously been requested or received.

  
 Authorized Agency Official

Date 7/10/08

**IMPORTANT NOTICE:**

Return to: Illinois Department of Public Health  
 Division of Environmental Health  
 Attn: Elaine Beard  
 525 W. Jefferson St.  
 Springfield, IL 62761  
 Call 217-785-2069, if you have any questions.

RETURN BY  
**DUE DATE-07/21/08**  
 IN ORDER TO RECEIVE  
 COMPENSATION

**END OF FY 2008**

# Illinois Department of Public Health Non-Community Drinking Water Program

## Quarterly Compensation Report

Survey Date History- Agency: **CHAMPAIGN CO PUBLIC HLTH DEPT**

Monday, July 07, 2008

County: Champaign

Fips: 019

System Type: Transient

<u>PWS ID</u>	<u>SDWIS ID</u>	<u>PWS Name</u>	<u>Last Survey</u>	<u>Status</u>	<u>Coliforms Due-Freq-Bottles</u>
0124875	IL3124875	ECO WATER	8/1/2006	A	----
0142000	IL3142000	FIRST CHRISTIAN CHURCH	8/2/2006	A	10/14/2008--YR --1R
0138917	IL3138917	LIVING WORD OMEGA CHURCH	8/14/2006	A	10/7/2008--YR --1R
0139576	IL3139576	JERRYS IGA-KIRBY-GLACIER VEND	8/15/2006	A	----
0127860	IL3127860	ST JOSEPH IGA:WATER VEND UNIT	8/21/2006	A	----
0124842	IL3124842	GORDON HANNAGAN AUCTION CO	9/6/2006	A	9/9/2008--YR --1R
0132357	IL3132357	COUNTY MARKET-PHILO RD	1/17/2007	A	----
0133520	IL3133520	SCHNUCKS-CHAMP	4/4/2007	A	----
0149419	IL3149419	D & D FOODS EENIGENBURG (149419)	4/10/2007	A	10/28/2008--YR --1D
0121194	IL3121194	IMMANUEL LUTHERAN CHURCH (121194)	4/16/2007	A	9/2/2008--YR --1R
0068544	IL3068544	IMMANUEL LUTHERAN CHURCH (68544)	4/18/2007	A	5/20/2009--YR --1R
0121103	IL3121103	FAITH BAPTIST CHURCH (121103)	5/7/2007	A	9/2/2008--YR --1R
0148106	IL3148106	ALTO VINEYARD	6/12/2007	A	9/2/2008--QT --1D
0131177	IL3131177	MALIBU BAY LOUNGE	6/13/2007	A	9/23/2008--YR --1R
0149401	IL3149401	WALMART CULLIGAN VENDING (149401)	7/30/2007	A	----
0151332	IL3151332	WALMART SUPERCENTER - RANTOUL	8/1/2007	A	----
0122754	IL3122754	MAHOMET IGA VENDING UNIT	8/21/2007	A	----
0136697	IL3136697	SCHNUCKS-URB	9/5/2007	A	----
0139584	IL3139584	JERRY IGA-ROUND BARN-GLACIER V	10/10/2007	A	----
0141101	IL3141101	CULLIGAN VEND AT WALMART SAVOY	10/10/2007	A	----
0136788	IL3136788	COUNTY MARKET-KIRBY	10/16/2007	A	----
0141119	IL3141119	CULLIGAN VENDING MEIJER	10/16/2007	A	----
0008441	IL3008441	THE OASIS OF PENFIELD INC	10/31/2007	A	1/15/2009--YR --1R
0122986	IL3122986	RANTOUL IGA RO UNIT	10/31/2007	A	----
0138941	IL3138941	HARDYS REINDEER RANCH	11/19/2007	A	8/26/2008--QT --1R
0119586	IL3119586	ELMERS CLUB 45	12/3/2007	A	8/26/2008--YR --1R
0123232	IL3123232	GORDYVILLE SALOON INC	12/3/2007	A	9/9/2008--YR --1R
0151779	IL3151779	SAVE-A-LOT (151779)	1/9/2008	A	----
0149856	IL3149856	WAL-MART SUPERCENTER #5403	1/23/2008	A	----
0068601	IL3068601	GASLAND FOOD MART	4/7/2008	A	5/20/2009--YR --1D
0108670	IL3108670	CHAMPAIGN MARATHON (108670)	4/7/2008	A	8/5/2008--YR --1R
0121590	IL3121590	ILLINI PRAIRIE REST AREAS	4/7/2008	A	9/2/2008--YR --1D
0150151	IL3150151	SCHUREN NURSERY	4/7/2008	A	10/25/2008--YR --1R
0131839	IL3131839	BRICKHOUSE	4/21/2008	A	9/23/2008--YR --1R



otal Number of Systems for CHAMPAIGN CO PUBLIC HLTH DEPT = (34)

otal Number of Active Systems not Surveyed (due or past due) by CHAMPAIGN CO PUBLIC HLTH DEPT = (0)

otal Number of Active Systems with a Current Survey by CHAMPAIGN CO PUBLIC HLTH DEPT = (34)

**ACTIVE SYSTEMS:**

<u>WS #</u>	<u>SDWIS #</u>	<u>Agency</u>	<u>Name</u>	<u>Status</u>	<u>Activity Date</u>
008425	IL3008425	CHAMPAIGN CO PUBLIC HLTH DEPT	UNCLE BUCKS SPORTS BAR	I	1/10/2005
068569	IL3068569	CHAMPAIGN CO PUBLIC HLTH DEPT	RUDICIL GARAGE	I	10/13/2004
122689	IL3122689	CHAMPAIGN CO PUBLIC HLTH DEPT	JERRYS IGA-URB	I	9/3/2004
131169	IL3131169	CHAMPAIGN CO PUBLIC HLTH DEPT	JEHOVAH WITNESSES KINGDOM HALL	I	5/16/2006
136705	IL3136705	CHAMPAIGN CO PUBLIC HLTH DEPT	COUNTY MARKET-BRDWY	I	9/7/2005
136796	IL3136796	CHAMPAIGN CO PUBLIC HLTH DEPT	COUNTY MARKET-GLNPK	I	1/8/2008
141168	IL3141168	CHAMPAIGN CO PUBLIC HLTH DEPT	PHILS PLACE	I	3/1/2004