EXECUTIVE DOCUMENT SUMMARY

Department: Administration		Submittal Da	ites
Contact Person:	Deborah Allen	Select Meeting Type: Regula	r Session
Telephone Number:	231-256-8100	Date of Meeting:	
Financial/Source Selec	tion Method	Nichigan Vatorona A	ffaire Agonov
✓ Select One: Grant		Vendor: Michigan Veterans A	
Other:		Address/ Phone:	
Account No.:			
CIP Project?		Description: Orant Applicati	~ .
If Grant, Match Account No.:		Description: Grant Application	5n
Budgeted Amount:	Cr	ontracted Amount:	
	Document	t Description	
Request to Waive Board Policy on	Bid Requirements	Department Head/Elected Offici	al Authorization
Leelanau County contracts with	n Grand Traverse Cou	nty for its Veterans services.	
		n June 15, and is seeking approv ts to assist in engaging the Coun	
The grants are for the following (addition of flagpole and Space		and an addition to the County Ve /ice flag).	teran's Memorial
<i>Suggested Recommendation:</i> I move that the County Board of applications to the Michigan Ve			Service Fund Grant

Department Approval:

Date: 06/20/2023



Late Addition #1 FY24 COUNTY VETERAN SERVICE FUND GRANT GRANT APPLICATION TEMPLATE

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

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

CONTACT INFORMATION

Applicant County	Leelanau		
Total Grant Amount	\$ 63,125		
SIGMA Vendor Code	CV0053862	SIGMA Address Code	001

Project Director	Michael Roof
Mailing Address	2650 Lafranier Rd, Traverse City, MI 49686
Phone	231-995-6069
E-mail Address	mroof@gtcountymi.gov

Financial Officer	Sean Cowan
Mailing Address	8527 E. Government Center Dr., Ste 101, Suttons Bay, MI 49682
Phone	231-256-8106
E-mail Address	scowan@leelanau.gov

Authorized Official	Deborah Allen
Mailing Address	8527 E. Government Center Dr., Ste 101, Suttons Bay, MI 49682
Phone	231-256-8100
E-mail Address	dallen@leelanau.gov

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

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

PROJECT DETAIL

Project Title Advertising

Grant Focus Area) Enhance / Increase Services

PROJECT NARRATIVE

Detailed project narrative must be provided below:

Overview

Leelanau County Veterans Services is staffed through the Grand Traverse County Department of Veterans Affairs. There is a VA-accredited County Veteran Service Officer (CVSO) at the Administrator's Office every Tuesday to assist Veterans with any questions or services.

Advertising Campaign

The Goal of the Advertising Campaign is to increase awareness of the benefits and resources available to Veterans and their dependents in Leelanau County. The Advertising Campaign will direct them to Leelanau County Veterans Services so that our VA-accredited CVSO can advise, assist and advocate for them to receive the veterans benefits to which they are entitled.

We will use various forms of advertising to reach our goal of increasing visits to our office.

Areas of advertising will include:

Newspaper Ads Billboards

Total Cost \$ 11,820.00

BUDGET NARRATIVE/JUSTIFICATION

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

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SUBMISSION OF APPLICATION

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

I understand that my County must become registered to do business with the State of Michigan prior to receiving any grant funding. Registration is available at the following website: www.michigan.gov/SIGMAVSS.	
I understand that the grant agreement must be signed by the Authorized Official before grant funds can be expended.	
I have included itemized budget attachments for each initiative/program/salary request.	
I have included FY17 and current year county budgets for the organization structure that provides assistance to veterans and/or family members.	
I understand that I should receive an email confirmation of submission of my application within 24 business hours, and if I do not receive an email confirmation, I should contact the agency for confirmation.	
I understand that remote access to the United States Department of Veterans Affairs computing systems to obtain PIV cards for county veteran services officers must be established no later than September 24, 2023.	

Signature: ______Authorized Official

Date: _____

Fiscal Year 2024

County Veteran Servid

Budget Request

One initiative	per page. Make ac	Iditional sheets	for each initiative.	
Applicant County	Grant Nu		SIGMA Vend	or Code
Leelanau	FOR MVAA U	SE ONLY		
I. Project / Initiative Name	•			
Advertising Campaign				
II. Project Total (Amount request	ed for this initiative	e)		
				\$5,887
III. Expenditure Details				
Item / Service Des	cription	Quantity	Cost Per Unit	Cost
Billboard Advertising	•	6	\$950.00	\$5,700.00
				\$0.00
Newspaper Advertising		12	\$510.00	\$6,120.00
				\$0.00
				\$0.00
		+ +		\$0.00
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			Tetal	\$0.00
			Total	\$11,820.00



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CONTACT INFORMATION

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Project Director	Michael Roof
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Grant amount requested above is the TOTAL of ALL initiatives/programs/salaries.

PROJECT DETAIL

Project Title Outreach Meal Presentations

Grant Focus Area) Enhance / Increase services

PROJECT NARRATIVE

Detailed project narrative must be provided below:

Overview

Leelanau County Veterans Services is staffed through the Grand Traverse County Department of Veterans Affairs. There is a VA-accredited County Veteran Service Officer (CVSO) at the Administrator's Office every Tuesday to assist Veterans with any questions or services.

Outreach Meal Presentations

The goal of the Outreach Meal Presentations is to increase awareness of the benefits and resources available to Veterans and their dependents in Leelanau County. During the breakfast, lunch or dinner meal, the office will provide a presentation regarding Veterans benefits. Each time there is a meal event, the topic will be of a different nature. These events will direct them to the Leelanau County Veterans Services so that our VA CVSO can advise, assist and advocate on their behalf to receive the Veterans benefits to which they are entitled.

Total Cost \$ 8,000

BUDGET NARRATIVE/JUSTIFICATION

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

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SUBMISSION OF APPLICATION

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I understand that I should receive an email confirmation of submission of my application within 24 business hours, and if I do not receive an email confirmation, I should contact the agency for confirmation.	
I understand that remote access to the United States Department of Veterans Affairs computing systems to obtain PIV cards for county veteran services officers must be established no later than September 24, 2023.	

Signature: ______Authorized Official

Date: _____

Fiscal Year 2024

County Veteran Servid Later Addition

Budget Request

	Budget Nequest			
	per page. Make additional sh			
Applicant County	Grant Number		SIGMA Vendo	r Code
Leelanau	FOR MVAA USE ONLY			
I. Project / Initiative Name				
Outreach meals				
II. Project Total (Amount requeste	d for this initiative)			
				\$6,000.00
III. Expenditure Details				
			Cost Per	
Item / Service		Quantity	Unit	Cost
Veterans' Meals (4 Break	fasts, Lunch or Dinners)	4	\$2,000.00	8000.00
				0.00
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				0.00
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			Total	\$8,000.00



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

PROJECT DETAIL

Project Title Veterans Memorial

Grant Focus Area) Enhance / Increase services

PROJECT NARRATIVE

Detailed project narrative must be provided below:

Overview

Leelanau County Veterans Services is staffed through the Grand Traverse County Department of Veterans Affairs. There is a VA-accredited County Veteran Service Officer (CVSO) at the Administrator's Office every Tuesday to assist Veterans with any questions or services.

Veterans Memorial

The focus of this project is to update the Veterans Memorial in Leelanau County. The memorial was constructed before the creation of the Space Force branch of service. Many members of the public would like to see this addition to the memorial site.

Total Cost \$ 12,370.00

BUDGET NARRATIVE/JUSTIFICATION

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-

SUBMISSION OF APPLICATION

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Signature: ______Authorized Official

Date: _____

Fiscal Year 2024

County Veteran Servid Later Addition

Budget Request

	Budget nequest			
	e per page. Make additional sh	eets for each		
Applicant County	Grant Number		SIGMA Vendo	r Code
Leelanau	FOR MVAA USE ONLY			
. Project / Initiative Name				
Veterans Memorial Project				
II. Project Total (Amount request	ed for this initiative)			
				\$6,000.00
III. Expenditure Details				
			Cost Per	
Item / Servic	e Description	Quantity	Unit	Cost
20' Aluminum C	outdoor Flagpole	2	\$3,675.00	7350.00
Lat	oor	1		2500.00
Estimat	ed Fried	1	\$1,875.00	1875.00
Slab	work	1		600.00
milage for	contractor	1	\$45.00	45.00
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			Total	\$12,370.00