

Board of Crawford County Commissioners

Commission Meeting Agenda

CRAWFORD COUNTY COURTHOUSE, COMMISSIONERS' BOARD ROOM
Girard, KS Tuesday, **October 8, 2019, 10:00 AM.**

- I. Meeting called to order**
 - a. Pledge of Allegiance
- II. Business from a previous meeting**
 - a. **Approval of consent agenda**
 - i. Consent agenda additions or deletions
 - 1. Approval of the **October 4, 2019** minutes of the Board of County Commissioners.
 - b. **Signing of motions from the previous meeting**

| | | |
|-----------|-----|---|
| Motion 19 | 326 | That the consent agenda be approved including: Approval of the October 1, 2019 minutes |
| Motion 19 | 327 | To approve the September 2019 Clerk's Report as presented |
| Motion 19 | 328 | To recess this open session and go into a closed executive session for a period of not more than 15 minutes to discuss items that would be deemed privileged in the Attorney-Client Relationship and to include the Board of County Commissioners and County Counselor Jim Emerson and to reconvene by 10:25 AM |
| Motion 19 | 329 | To approve the Kansas Department of Transportation Bureau of Maintenance Highway Permit Use of Right of Way Agreement between the Secretary of Transportation and Crawford County Sewer District #3 and authorize the Chairman to sign |

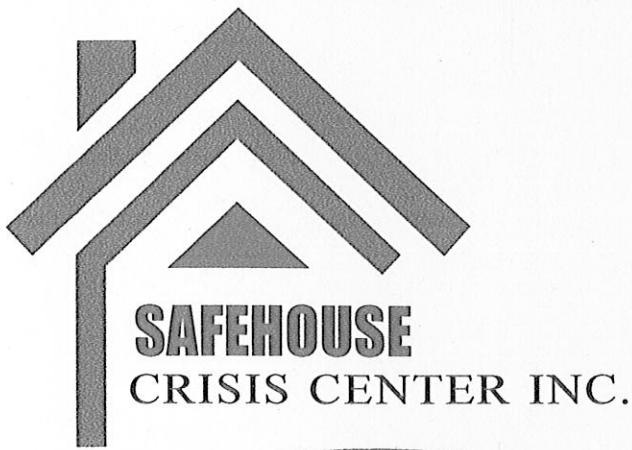
- III. New Business**
 - a. Scheduled public hearings and opening of announced bids
 - b. Proclamations and orders of the Board
 - c. Messages from the Crawford County Local Board of Health
 - d. Messages from the public
 - e. Messages from appointed officials
 - f. **Messages from other governmental entities**
 - i. Mr. Mac Young, District Court Administrator addressing new phone system for the Judicial Center.
 - g. Messages from elected officials
 - h. **New Business**
 - i. Mr. Pyle, County Clerk
 - ii. **Mr. Emerson, County Counselor**

Board of Crawford County Commissioners

1. Presenting the Kansas Housing Resource Corporation Emergency Solutions Grant Recipient Request for Reimbursement and Financial Status Report.
 - iii. Chairman Moody, Commissioner
 - iv. Mr. Johnson, Commissioner
 - v. Mr. Blair, Commissioner
- IV. Old Business**
- a. **Old Business**
 - i. Mr. Pyle, County Clerk
 - ii. Mr. Emerson, County Counselor
 - iii. Chairman Moody, Commissioner
 - iv. Mr. Johnson, Commissioner
 - v. Mr. Blair, Commissioner
- V. Future Business and Announcements**
- a. **Future Business**
 - i. **October 11, 2019 – 10:00 AM** Public Hearing on Grant Application for Osage Township Fire Station.
 - b. **Announcements**
 - i. **October 14, 2019** – The Courthouse will be closed in observance of Columbus Day.

VI. Motion for adjournment

Individuals who wish to have their name listed on the official meeting agenda should please call the County Clerk's Office (620-724-6115) by 12:00 p.m. on the day preceding the meeting at which they wish to appear. Individuals are welcome to appear without their name on the agenda. Advance notification simply makes it easier for the County Clerk's Office to prepare the agenda. Thank you. If you are an individual with special needs, please contact the County Clerk's Office in advance of your attendance at the meeting so any necessary arrangements can be made.



Jim Emerson
County Counselor
Crawford County
P.O. Box 249
Girard, KS 66743-0249

October 3, 2019

Dear Mr. Emerson:

Please find enclosed the ESG Financial Status Report for the months of July, August, and September 2019, for the signature of the Chair of the County Commissioners.

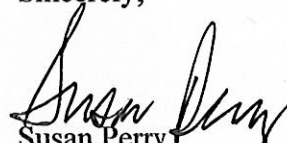
Please forward the FSR to James Chiselom at Kansas Housing Resources Corporation. Please be aware that this must be accompanied by a letter from the County with an Invoice on Letterhead, or a Cover Letter on Letter-Head that contains the following:

- 1) The Grant number of the funds being requested.
- 2) The date of the request.
- 3) The amount being requested.
- 4) Name of the authorized person making the request.
- 5) The signature of the authorized person making the request.

Mr. Chiselom has informed us that the only time we need to send the paper backup is for the First Quarter. However, I have enclosed a CD with copies of all documents for the Grant year for your convenience.

If you have any questions or concerns, please feel free to contact me Susan Perry, (Fiscal Consultant), or Rebecca Brubaker, Executive Director), at (620) 231-8692.

Sincerely,


Susan Perry
Fiscal Consultant

CRAWFORD COUNTY – EMERGENCY SOLUTIONS GRANT 2019
ERR FILE # 2019 ESG

Required reporting of information for salary & benefits included in the grant:

Name: Kara Mishmash

Title: Residential Manager

Beginning date: Hired August 2018

Qualifications of Employee: Has 3 years of Hotel Management experience working with staff and building issues.

2018 Emergency Solutions Grant ESG Match Documentation

| | | | |
|--|-----------|--|---|
| Name of Sub Recipient : | Date: | Type of Match - (total amount of grant or amount of request for reimbursement) | |
| CRAWFORD COUNTY | 10/3/2019 | CASH DONATION TOWARD TOTAL MOUNT OF GRANT | |
| Sub Recipient Agency: SAFEHOUSE CRISIS CENTER | | Sub Recipient Agency DUNS #: 928337427 | |
| Address: 409 N. WALNUT | | City/State/Zip: PITTSBURG, KS 66762 | |
| Executive Director: REBECCA BRUBAKER | | Executive Director Email: rebecca.safehouse@yahoo.com | Executive Director Phone: 620-231-8692 |

MATCH DOCUMENTATION:

| Eligible Category | Amount of Match | Description of Match | Source of funds | Contract Term | *Documentation Attached Y/N |
|---------------------|-----------------|--|---------------------------------|--------------------------|--------------------------------|
| Street Outreach | | | | | |
| Emergency Shelter: | \$10,000 | Cash Donation to Support Mission | UW of SW Missouri and SE Kansas | \$833 Monthly Donation | Y |
| Homeless Prevention | \$10,892 | Staff Salaries-Upkeep Technician, Shelter Services | SGF Funded | \$2,723 Reimbursed Qtrly | Y |
| Rapid Re Housing | | | | | |
| HMIS | | | | | |

TOTAL AMOUNT OF ESG MATCH: \$20,000 **TOTAL AMOUNT OF ESG (request or grant):** 100% 100% Y/N Y

Name Rebecca Brubaker Signature _____ Title Executive Director

Date _____

***DOCUMENTATION OF MATCH MUST BE PROVIDED. AWARD LETTERS FOR OTHER GRANT SOURCES THAT ARE USED AS MATCH MUST BE ATTACHED. IN-KIND MATCH MUST BE DOCUMENTED THROUGH PROOF OF IN-KIND SERVICES AND VALUE OF SERVICES.**

**KANSAS HOUSING RESOURCE CORPORATION
EMERGENCY SOLUTIONS GRANT (ESG)
RECIPIENT REQUEST FOR REIMBURSEMENT AND FINANCIAL STATUS REPORT**

| | | |
|---|---|---|
| SUB RECIPIENT ORGANIZATION (CITY, COUNTY) SAFEHOUSE CRISIS CENTER - CRAWFORD COUNTY | | CASH OUTLAYS FOR MONTH(S) OF July, August, and September, 2019 |
| CONTRACT NUMBER ESG - FFY2019 | DATE REQUEST SUBMITTED October 3, 2019 | |
| PART A. BUDGET CATEGORY | | |
| A. ADMINISTRATION | \$0.00 | COMMENTS |
| B. STREET OUTREACH | \$0.00 | |
| C. EMERGENCY SHELTER | \$5,655.00 | |
| D. HMIS | \$0.00 | |
| E. HOMELESS PREVENTION | \$0.00 | |
| F. RAPID RE-HOUSING | \$0.00 | |
| F. SUB-TOTAL ESG FUNDS REQUESTED | \$5,655.00 | |
| G. LOCAL MATCH OUTLAYS | \$5,655.00 | |
| H. TOTAL PROJECT OUTLAYS | \$11,310.00 | |

| SUB RECIPIENT ORGANIZATION (CITY/COUNTY) | TOTAL PAGE OF SUB-AWARDEE | CONTRACT NUMBER |
|--|---------------------------|-----------------|
| SAFEHOUSE CRISIS CENTER - CRAWFORD COUNTY | ESG - FFY2019 | |
| DETAILED BREAKDOWN OF EXPENDITURES SUMMARY (list expenditures by categories for which reimbursement is requested) | | |
| A. ADMINISTRATION | | |
| Eligible Admin Expenses | \$0.00 | \$0.00 |
| Other | \$0.00 | \$0.00 |
| TOTAL ADMINISTRATION (Amount should match Page 2, Line E, Col. 2) | \$0.00 | \$0.00 |
| B. STREET OUTREACH | | |
| Engagement | \$0.00 | \$0.00 |
| Case management | \$0.00 | \$0.00 |
| Emergency Health / Mental Health | \$0.00 | \$0.00 |
| Transportation | \$0.00 | \$0.00 |
| Other (Specify) | \$0.00 | \$0.00 |
| TOTAL STREET OUTREACH (Amount should match Page 2, Line E, Col. 3) | \$0.00 | \$0.00 |
| C. EMERGENCY SHELTER | | |
| Essential Services | | |
| Case management | \$2,930.00 | \$0.00 |
| Life skills | \$0.00 | \$0.00 |
| Child care | \$0.00 | \$0.00 |
| Health-Mental Health/Substance Abuse | \$0.00 | \$0.00 |
| Education Services | \$0.00 | \$0.00 |
| Employment/Job training | \$0.00 | \$0.00 |
| Transportation | \$0.00 | \$0.00 |
| Legal services | \$0.00 | \$0.00 |
| Operations | | |
| Maintenance (minor or routine) | \$0.00 | \$0.00 |
| Rent | \$0.00 | \$0.00 |
| Staff Costs | \$0.00 | \$0.00 |
| Insurance | \$0.00 | \$0.00 |
| Utilities | \$2,725.00 | \$0.00 |
| Food | \$0.00 | \$0.00 |
| Hotel/motel | \$0.00 | \$0.00 |
| Supplies | \$0.00 | \$0.00 |
| TOTAL EMERGENCY SHELTER (Amount should match Page 2, Line E, Col. 4) | \$5,655.00 | \$0.00 |
| D. HMIS | | |
| Hardware/Software | \$0.00 | \$0.00 |
| Data collection | \$0.00 | \$0.00 |
| Data quality/Data analysis | \$0.00 | \$0.00 |
| Training | \$0.00 | \$0.00 |
| TOTAL HMIS (Amount should match Page 2, Line E, Col. 5) | \$0.00 | \$5,655.00 |
| D. HOMELESS PREVENTION | | |
| Rental Assistance (short term) | \$0.00 | \$0.00 |
| Rental Assistance (medium term) | \$0.00 | \$0.00 |
| Rental Assistance (arrears) | \$0.00 | \$0.00 |
| Housing Relocation & Stabilization Services/Financial Assistance | | |
| Moving costs | \$0.00 | \$0.00 |
| Rental application fees | \$0.00 | \$0.00 |
| Security deposits | \$0.00 | \$0.00 |
| Last month's rent | \$0.00 | \$0.00 |
| Utility deposits | \$0.00 | \$0.00 |
| Utility payments | \$0.00 | \$0.00 |
| Services | | |
| Housing search & placement | \$0.00 | \$0.00 |
| Housing stability case management | \$0.00 | \$0.00 |
| Mediation | \$0.00 | \$0.00 |
| Legal services | \$0.00 | \$0.00 |
| Credit repair | \$0.00 | \$0.00 |
| TOTAL HOMELESS PREVENTION (Amount should match Page 2, Line E, Col. 6) | \$0.00 | \$0.00 |
| D. RAPID RE-HOUSING | | |
| Rental Assistance (short term) | \$0.00 | \$0.00 |
| Rental Assistance (medium term) | \$0.00 | \$0.00 |
| Rental Assistance (arrears) | \$0.00 | \$0.00 |
| Housing Relocation & Stabilization Services/Financial Assistance | | |
| Moving costs | \$0.00 | \$0.00 |
| Rental application fees | \$0.00 | \$0.00 |
| Security deposits | \$0.00 | \$0.00 |
| Last month's rent | \$0.00 | \$0.00 |
| Utility deposits | \$0.00 | \$0.00 |
| Utility payments | \$0.00 | \$0.00 |
| Services | | |
| Housing search & placement | \$0.00 | \$0.00 |
| Housing stability case management | \$0.00 | \$0.00 |
| Mediation | \$0.00 | \$0.00 |
| Legal services | \$0.00 | \$0.00 |
| Credit repair | \$0.00 | \$0.00 |
| TOTAL RAPID RE HOUSING (Amount should match Page 2, Line E, Col. 7) | \$0.00 | \$0.00 |
| TOTAL PROJECT OUTLAYS (REQUEST FOR REIMBURSEMENT) (Amount should match Page 2, Line E, Col. 8) | | |
| | | \$5,655.00 |

SUB RECIPIENT ORGANIZATION (CITY/COUNTY)
SAFEHOUSE CRISIS CENTER - CRAWFORD COUNTY

CONTRACT NUMBER
ESG - FFY2019

PART B. FINANCIAL STATUS REPORT

REPORT AS OF **10/14/2018** CONTRACT PERIOD BEGINNING: **July 01, 2019 to June 30, 2020**

| BUDGET CATEGORY | COL. (1) | COL. (2) | COL. (3) | COL. (4) | COL. (5) | COL. (6) | COL. (7) | COL. (8) | COL. (9) | COL. (10) |
|---|----------|----------|-----------------|-------------------|----------|---------------------|------------------|-----------------|----------------------|----------------------|
| | | ADMIN. | Street Outreach | Emergency Shelter | HMIS | Homeless Prevention | Rapid Re-housing | TOTAL ESG FUNDS | LOCAL MATCHING FUNDS | TOTAL PROJECT BUDGET |
| A. TOTAL PROJECT BUDGET | | | | | | | | \$0.00 | \$0.00 | \$0.00 |
| B. APPROVED BUDGET ADJUSTMENTS | | \$555.00 | | \$20,892.00 | \$0.00 | | | \$20,892.00 | \$20,892.00 | \$41,784.00 |
| C. ADJUSTED PROJECT BUDGET | | \$555.00 | \$0.00 | \$20,892.00 | \$0.00 | \$0.00 | \$0.00 | \$20,892.00 | \$20,892.00 | \$41,784.00 |
| D. CUMULATIVE CASH OUTLAYS (Line "F" from Previous report; -0- if first report) | | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| E. CURRENT REIMBURSEMENT REQUEST (from totals on pg 3) | | \$0.00 | \$0.00 | \$5,655.00 | \$0.00 | \$0.00 | \$0.00 | \$5,655.00 | \$5,655.00 | \$11,310.00 |
| F. CUMULATIVE CASH OUTLAYS (Line "D" plus line "E") | | \$0.00 | \$0.00 | \$5,655.00 | \$0.00 | \$0.00 | \$0.00 | \$5,655.00 | \$5,655.00 | \$11,310.00 |
| G. UNLIQUIDATED OBLIGATIONS (A. Total Project Budget less F. Cash Outlays) | | \$555.00 | \$0.00 | \$15,237.00 | \$0.00 | \$0.00 | \$0.00 | \$15,237.00 | \$15,237.00 | \$30,474.00 |
| H. TOTAL CASH OUTLAYS & UNLIQUIDATED OBLIGATIONS (Lines "F" + "G") | | \$555.00 | \$0.00 | \$20,892.00 | \$0.00 | \$0.00 | \$0.00 | \$20,892.00 | \$20,892.00 | \$41,784.00 |

| | | | |
|---|--|---|---|
| RECIPIENT ORGANIZATION (CITY/COUNTY) | | CONTRACT NUMBER | |
| SAFEHOUSE CRISIS CENTER - CRAWFORD COUNTY | | ESG - FFY2019 | |
| PART C. CERTIFICATION STATEMENT | | PART D. FOR KANSAS HOUSING RESOURCES CORPORATION ONLY | |
| <p>I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.</p> | | DATE REIMBURSEMENT REQUEST RECEIVED | AMOUNT AUTHORIZED FOR PAYMENT |
| | | AUTHORIZED BY (ESG COORDINATOR) | DATE SUBMITTED TO FISCAL FOR PAYMENT |
| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL | | VOUCHER NUMBER AND DATE | DATE CHECK MAILED TO RECIPIENT ORGANIZATION |
| TYPED OR PRINTED NAME | | OTHER (NOTE REASONS FOR VARIANCES AND/OR OTHER INFORMATION REGARDING PAYMENT) | |
| TYPED OR PRINTED TITLE | | | |
| DATE | | | |
| PREPARED BY | | | |
| PREPARER'S SIGNATURE | | | |
| TYPED OR PRINTED NAME Rebecca Brubaker Susan Perry | | | |
| TYPED OR PRINTED TITLE Executive Director Fiscal Consultant | | | |
| TELEPHONE NUMBER | | | |
| 620-231-8692 | | | |