The Home and Community-Based Services (HCBS) rules ensure that people with disabilities have full access to, and enjoy the benefits of, community living through long-term services and supports in the most integrated settings of their choosing. In order to assist in determining eligibility for compliance funding, providers must complete this evaluation. Both "Yes" and "No" answers require an explanation. A "No" response *could* mean a service setting is out of compliance with the HCBS rules and is potentially eligible for funding to make necessary adjustments. Once this evaluation is completed, it should act as a guide for filling out the provider compliance funding concept, which is required for any provider to be eligible for compliance funding. **Completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules. Only providers requesting compliance funding need to complete this evaluation.**

Federal Requirements #1-5 apply to providers of all services, including residential and nonresidential settings. Federal Requirements #6-10 are additional requirements that apply only to provider-owned or controlled residential settings.

The column labeled "Guidance" contains a series of questions intended to help identify compliance or non-compliance with each requirement as it relates to the HCBS rules. While responses to these questions can help in the determination of whether or not a particular requirement is met, these responses may not be the sole factor in this determination.

More information on the HCBS rules and this form can be found at www.dds.ca.gov/HCBS.

Questions may be directed to <u>HCBSregs@dds.ca.gov.</u>

Date(s) of Evaluation: November 21, 2019	Completed by: Christina Sanders	
Vendor Name, Address, Contact: Serenit	y Group Homes Inc.	
4186 W Swift Ave Ste #108 Fresno, CA 93722		
Brenda R.Y. McBee (559) 250-1112		
Vendor Number: HC0997/ HC0131		
Service Type and Code: 915/ 915		

Federal Requirement #1: The setting is integrated in, and supports full access of individuals receiving Medicaid HCBS to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.	 <u>Guidance:</u> Do individuals receive services in the community based on their needs, preferences and abilities? Does the individual participate in outings and activities in the community as part of his or her plan for services? If an individual wants to seek paid employment, does the home staff refer the individual to the appropriate community agency/resource? Do individuals have the option to control their personal resources, as appropriate? 		
 Does the service and/or program meet this requirement? □x Yes □ No Please explain: We have (2) Adult Residential Facilities and (1) Group Home. 4 Males in one location 3 Females in the other. All of our individuals have their own desires in going into the community for various reasons or activities. Currently there is a huge lack of transportation that has made it very difficult to accommodate each individual's needs. 			
Federal Requirement #2: The setting is selected by the individual from among setting options, including non- disability-specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.	 <u>Guidance:</u> Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals? Does each individuals' IPP document the different setting options that were considered prior to selecting this setting? 		
Does the service and/or program meet this requirement? \Box Yes \Box x No			

Please explain:

Yes. There are IPPs on file for each individual. However, the individual's options for different settings is being slowly introduced to them we feel that the need of having a PCP Consultant come in to assist with the type of steps needed to help the individual transition and help enhance their choices different activities that they may want to join in.

Federal Requirement #3: Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.	 <u>Guidance:</u> Does the provider inform individuals, in a manner they can understand, of their rights to privacy, dignity, respect, and freedom from coercion and restraint? Does the provider communicate, both verbally and in writing, in a manner that ensures privacy and confidentiality? Do staff communicate with individuals based on their needs and preferences, including alternative methods of communication where needed (e.g., assistive technology, Braille, large font print, sign language, 	
	participants' language, etc.)?	
Does the service and/or program meet this requirement? Please explain: Although communication is a barrier with most of our individuals they are asked		

Although communication is a barrier with most of our individuals they are asked questions that require either a "yes" or "no" response. Training for the clients and staff with a Sign Language Consultant will help enhance communication between our staff and our individuals, so that our staff can better connect with the needs of our individuals. Some of our individuals use limited signing as a way to communicate if we can have the training for all the individuals it will help bridging the language barrier

Guidance:

	Federal	Requirem	ent #4:	
--	----------------	----------	---------	--

	<u>O di dai i o di</u>
Optimizes but does not regiment individual initiative, autonomy, and independence in making life choices, including, but not limited to, daily activities, physical environment, and with whom to interact.	 Does the provider offer daily activities that are based on the individuals' needs and preferences? Does the provider structure their support so that the individual is able to interact with individuals they choose to interact with, both at home and in community settings? Does the provider structure their support so that the individual is able to participate in activities that interest them and correspond with their IPP goals?

Does the service and/or program meet this requirement? $\Box x$ **Yes** \Box **No** Please explain:

With limitations on transportation we can't meet the needs of our individuals. We are not able to have our individuals interact with other peers of their choice or participate in the

activities their choice. Currently, the daily activities that our individuals participate in are in group settings.

 Federal Requirement #5: Facilitates individual choice regarding services and supports, and who provides them. Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available? Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled review of services? 		
	Facilitates individual choice regarding services and supports, and who provides	 Does the provider support individuals in choosing which staff provide their care to the extent that alternative staff are available? Do individuals have opportunities to modify their services and/or voice their concerns outside of the scheduled

Does the service and/or program meet this requirement? \Box Yes $\Box \times No$

Please explain:

With a 1:1 ration in the Female facility and 1:2 ration in the Male facility at this time it is very difficult for our individuals to have their own choice of staff. Being that both facilities have limited staff it makes it extremely hard for our individuals to have their own access to modify their service with and limited transportation.

Only providers of services in **provider-owned or controlled residential settings** need to complete the remainder of this evaluation. In **provider-owned or controlled residential settings**, in addition to the above requirements, the following requirements must also be met:

Federal Requirement #6: The unit or dwelling is a specific physical place that can be owned, rented or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city or other designated entity. For settings in which landlord/tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each participant and that the document provides protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law.	 <u>Guidance:</u> As applicable, does each individual have a lease, residency agreement, admission agreement, or other form of written residency agreement? Are individuals informed about how to relocate and request new housing?
--	--

Does the service and/or program meet this requirement? \Box Yes $\Box x$ No

Please explain:

Our individuals do have an agreement statement. The individuals are very low functioning so therefore, they are not at this time capable of living on their own. With more PCP training for our individuals and staff that can result in the enhancement of our individuals becoming more independent.

Federal Requirement #7: Each individual has privacy in his/her sleeping or living unit: Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed. Individuals sharing units have a choice of roommates in that setting. Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.	 <u>Guidance:</u> Do individuals have a choice regarding roommates or private accommodations? Do individuals have the option of furnishing and decorating their sleeping or living units with their own personal items, in a manner that is based on their preferences? Do individuals have the ability to lock their bedroom doors when they choose?
---	---

Does the service and/or program meet this requirement? \Box Yes \Box x No

Please explain:

In each facility our individuals have their rooms and they do have the option of decorating their room as they wish to. They currently do not have doors with locks for their privacy.

Federal Requirement #8: Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.	 <u>Guidance:</u> Do individuals have access to food at any time? Does the home allow individuals to set their own daily schedules? Do individuals have full access to typical facilities in a home such as a kitchen, dining area, laundry, and comfortable seating in shared areas? 	
Does the service and/or program meet this requirement? \Box Yes \Box x No Please explain: For both of our Adult facilities regarding the staff / client ratio our individuals do not have access to their food at any time. Both facilities are on scheduled meal plans. The individuals do have access to typical facilities in the home with staff. The request to more PCP training will help with the independence of our individuals.		
Federal Requirement #9: Individuals are able to have visitors of their choosing at any time.	 <u>Guidance:</u> Are visitors welcome to visit the home at any time? Can individuals go with visitors outside the home; such as for a meal or shopping, or for a longer visit outside the home, such as for holidays or weekends? 	
Does the service and/or program meet this requirement? Yes □x No Please explain: Due to the limitations of staff the individuals do not have visitors at any time. Both facilities have set times for visitors. Although some of the individual's families will come and take them on day outings or maybe overnight. Our individuals do have the option of going out with other peers and staff of choice, however, it is difficult most times with lack of transportation and staff. All outings are planned activities.		
Federal Denviroment #10:	Quideness	

duals have the freedom to out inside and outside the

home or are they primarily restricted
to one room or area?
 Are grab bars, seats in bathrooms,
ramps for wheelchairs, etc., available
so that individuals who need those
supports can move about the setting
as they choose?
•
 Are appliances and furniture
accessible to every individual?

Does the service and/or program meet this requirement? \Box **Yes** \Box **x No** Please explain:

Please explain:

Our individuals in both locations have access to move inside and outside the home. They are not restricted to one room or area. Currently neither facility has grab rails, seats in bathrooms, or wheelchair ramps. Our appliances are not accessible to our individual's needs.

CONTACT INFORMATION

Brenda R.Y. Mc Bee	
(559) 250-1112	
Frsgarrett2@aol.com	
	(559) 250-1112

ACKNOWLEDGEMENT

By checking the box below, I acknowledge that completion of this evaluation is for the sole purpose of applying for compliance funding and does not take the place of future provider assessments that the Department may require to determine provider compliance with the HCBS settings rules.

□ x I AGREE

Existing regional center vendors may receive funding to make changes to service settings and/or programs to help them come into compliance with the HCBS rules. To be considered for funding, vendors must complete and submit this form and the provider compliance evaluation form as one packet to the regional center with which it has primary vendorization.

Instructions:

- The concept form on the next page must be used, may not exceed four pages plus the budget worksheet and any cost back up, and must be kept in Arial 12-point font. Submit the form in Microsoft Word or PDF format. An extra half page is permitted to answer questions about prior funding, but the rest of the concept must be within the standard page requirements.
- There has been a significant change in the form and process compared to prior years. In order to receive funding, this 2019-20 form must be used.
- For providers that operate programs with several vendor numbers involved in one concept, one evaluation and concept form should be submitted and should list all vendor numbers for related/included programs. If multiple programs owned by the same parent company have different compliance evaluations or concepts, additional applications can be submitted but should be attached in the same document as the other owned programs so they can be reviewed together.
- The results of the evaluation should be clearly laid out in the section referring to identification of federal requirements that are currently out of compliance, which the concept will address.
- The concept form includes detailed information that describes the funding requests and supports how the requests will assist the provider to come into compliance.
- There should be a clear link between what is being requested and the federal requirement currently out of compliance.
- Concepts should demonstrate how the requested change in service delivery will impact individuals in offering more choices or opportunities in the community.

Strengths of previously funded concepts:

- Identified the need as well as proposed a plan to provide outreach and information regarding the HCBS rules to individuals served and members of their support teams.
- Discussed the need for additional funds in order to effectively support individuals served on a more individualized basis in overcoming barriers to community integration and employment, as appropriate.
- Prioritized the preferences of individuals served and utilized their feedback in the development of the concept.
- Implemented train-the-trainer certification for person-centered planning/thinking and training regarding the HCBS rules.
- Enabled residents to age in place and exercise more choice and independence.

More information on the HCBS rules and this form can be found at www.dds.ca.gov/HCBS.

Vendor name	Serenity Group Homes, Inc.						
Vendor number(s)	HC0997/ HC0131						
Primary regional center	Central Valley Regional Center						
Service type(s)	(2) Adult Residential Facilities						
Service code(s)	915/ 915						
Number of consumers currently served	7						
Current staff to consumer ratio	1:3						
1. Please provide a brief description of the service/setting that includes what a typical day consists of and how services are currently provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.							
and Social Disabilities. Some also with behavior challenges as well as self-care deficits, 7days a week 24 hours a day. A typical day will usually consist of assisting and managing our individual's daily routine in the homes. Staff will ensure that each one of our individuals are able to perform self-care skills as independently as possible. Staff will assist with meals, medications, supervise in outings and activities, they will assist our individuals with any preparations needed to attend Day or Work programs. Our individuals will normally arrive back to the homes between 2pm-4pm. They will come in and do their chores, they can then interact in group activities and or outings. As an example, in group settings they will work on their IPP goals (practice counting money, learning their age, etc.), play board games, and participate in community walks. Often times they may choose to have leisure time and they may want to watch television, play games on their tablet, listen to music or other activities they may choose in the activity room. Our individuals will have dinner at 6pn every evening, at 7pm they will have turns showering, given medications, and by 8pm our individuals are in bed. With the limitations on transportation and staff the weekend will usually consist of group outings like community walks, going to the 99cent store, going to 7-11, neighborhood parks, and any other community events that are offered.							
Project Narrative Description:							
Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.							
Our staff is capable, committed and open to the social culture of how our individuals are perceived. However, being Person Centered requires a lot of flexibility, creativity, and the willingness to try what may seem impossible to enhance the humanity and dignity of our individuals. Believing that we are being Person Centered does not make our staff Person Centered. Having that in mind the training, the guidance and the implementation of these concepts are essential to uncovering the essence of a "Person-Centered" concept in our program. Attaining a Person-Centered Planning Consultant who specializes in identifying, mapping, and implementing our concept will help with the enhancement of our individual's lifestyles and ongoing with quarterly and annual visits along with consultation to ensure the propose outcomes. Also, additional Person Centered and Vocational training given to our staff with help the enhancement of our individual's needs with each of our individuals have their own preferred community activity. With the vocational training provided to our staff, our staff will be able to help with the continued coaching and teaching necessary life skills to our individuals, with that, a Vocational Consultant will be key to coming in and training our staff with these life skills. Adding a Sign Language Consultant will help the essent the communication barrier. The access to new vehicles through HCBS that are easy for our individuals to get in and out of will help resolve the transportation needs of our consumers as they should want to go out on the outings of choice at the time they should want. Serenity Group Homes, Inc. will be able to promote non-regimented individualized community activities of choice for all our individuals. Although we encourage our individuals to choose their own preferred activities, it is a challenge to accommodate everyone's wish due to lack of transportation.							
3. Identify which HCBS federal requirements this concept addresses that are currently out of compliance. Could be all or a subset of those identified as out of compliance on the evaluation.							

1 2_x 3 4 5_x 6_x 7_x 8_x 9x_10x_
4. For each HCBS out-of-compliance federal requirement that is being addressed by this concept, describe the barriers to compliance and why this concept is necessary. If this information is in the evaluation section, please copy it here.
When it comes to effectively teaching our individuals basic life skills, job training, money management and utilizing Person Centered practices Serenity Group Homes, Inc.'s Administration and staff require training to learn the effective techniques. Our individuals need coaching to develop skills to integrate into the community, obtain jobs, and achieve life goals. Lack of knowledge does not allow the providers to appropriately meet the individual's growth and needs in order to gain employment and successfully integrate into the community. Again, and also in addition to that we don't have enough vehicles to meet their PCP needs and preferences. Having grab rails added in the showers will help enhance autonomy with our individuals with wanting to take their showers or baths without needing the assistance of staff. Changing the doors and adding doors that have locks giving the choice of locking their doors to our individuals if they should choose to.
Washing their own clothes has been a challenge to our individuals who are not able to independently reach the knobs to operate the machines and to load and unload. The request for front load washers and dryers will extremely be useful with their autonomy in caring for their own clothing. New microwaves with help our individuals on going into the kitchen are a preparing/ warming their own foods and or snacks. Having computers, printers, fax machines placed in our activity rooms with in the enhancement our individuals in many ways. With the computers in place our individuals will have access to
going online for certain things they choose to do. Enhancing our individual's wants to look for jobs, leaning the skills of looking online for learning activities like sewing or Hipp Hopp exercise dance classes all activities that our individuals already have interests in. If for no other reason all of our individuals enjoy playing video games and not all of our individuals have their own tablets or lpods.
Bringing in Sign Language Consultant will help bridge the communications barrier between staff and the individuals. Training provided to the individuals and staff will increase the ability for staff to understand and cater to the wants and needs of our individuals.
5. For each out-of-compliance federal requirement that is addressed in this concept, please explain how the concept will bring the vendor into compliance.
Funding for a PCP Consultant, Vocational Consultant, funding for Administrators to obtain sustainable training and possible certifications in these areas. With this training staff will learn how to engage with the individuals and cater to their preferences and needs. Funding for additional transportation will provide the individuals with the ability of participating in the activities of their choice. Funding for appliances will help with the autonomy of all our individuals in having the independency of washing their own clothing and or preparing their own food or snacks. Funding for home improvements (I.e. grab rails) for the showers to ensure the safety and the independency of our individuals showering or bathing while maintaining a healthy hygiene. Providing funds for a Sign Language Consultant will certainly improve the communication staff will have with our individuals. The funding request for Fed Req # 2, 5, 6, 7, 8, 9, and 10 will help with the enhancement of all of our individuals and will bring both facilities into complete compliance.
6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?
We are asking for training, remodels, upgrades to appliances, and transportation to meet Fed Reg #2, 5, 6, 7, 8, 9, and 10, By

We are asking for training, remodels, upgrades to appliances, and transportation to meet Fed Req #2, 5, 6, 7, 8, 9, and 10. By providing funding for a PCP Consultant, Vocational Consultant, Sign Language Consultant, and providing additional training to Administration and staff we can help to qualitatively change the way they provide the support our individual needs. Having additional

transportation that is easy for our individuals to get in and out of easily can help with the integration of the ones who enjoy the community and to make it more comfortable for those who are newer to community integration do it with ease. Bathrooms to be renovated will help our individuals maintain a healthy hygiene and prepare more options in their day and or work programs. Upgrades to our laundry facilities will help with the independency pf our individuals with washing their own clothes. Maintaining and continuous documentation in our individual's IPP will help our staff track their progress. Quarterly training with staff to keep them knowledgeable about our individual's needs. Regular repair/ maintenance on appliances and vehicles for longevity.

7. Please describe how and/or what was done to include input from the individuals served in developing this concept? Discuss not only the development of the concept, but also what steps were taken to identify the interests and desires of the individuals and who was involved in that process.

Our individuals all have communication barriers. However, they all understand what is being said and asked of them. The staff at Serenity Group Homes, Inc. Has developed a method of communication by asking a series of yes/no questions in which the individuals can reply with either a yes/no answer or with head motions. Staff is still not yet up to par with the PCP approach but with the addition training from a Sign Language Consultant that funding has been requested for will help lessen those barriers

8. Please describe how the concept you propose will enable you to provide more personcentered services to your clients.

We are asking for funding to have a PCP brought in to train both staff and the individuals with the transitioning of our individuals into the community and better the staff with knowing how to connect with the needs of our individuals. Some of the funding will also be applied to Administrators so that they can obtain sustainable training and possible certification in these areas. It is important for the Administrator and Lead Staff to sustain the PCP culture with new staff, therefore, if staff were to terminate the Administrator and Lead Staff can train new staff coming in on the transition techniques, the train the trainer model.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2019-20 HCBS Funding.

The items that we are requesting will be one-time purchases. Serenity Group Homes, Inc. expects to maintain them independently and will select vehicles and materials that are long lasting and have warranties.

10. Write a brief narrative below explaining each major cost category and timeline. Complete the budget template at the end of the concept sheet. An excel version with formulas is available. When applicable, budgets should include personnel/benefits, operating costs such as consultants or training, administrative expenses/indirect costs, and capital costs (assets lasting more than 2 years). If project spans 2 years or occurs in phases, budget should be separated by phase/year.

Administrative costs, if any, must comply with DDS' vendor requirements, including a cap of 15% of the sum of personnel/benefits, consulting, and operating costs (must exclude capital costs).

http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=4629.7&lawCod e=WIC

PCP Consultant- immediately upon funding Training Materials/ Supplies- immediate upon funding Vocational Consultant- immediately upon finding Sign Language Consultant- immediate upon funding Doors with locks/Grab Rails- immediate upon funding Contractors- immediate upon funding

Vehicles-immediate upon funding Auto Insurance- immediate upon funding Appliances- within 1-2 months after funding Computers/ faxes/ printers-within 1-2 months after funding Internet service- within 1-2 months after funding							
11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the time frame of the requested grant, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program time frame.							
"not applicable							
12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	HCBS Funding xNoYes. If Yes, FY(s) NoYes. If Yes, FY(s) Disparity Funding NoYes. If Yes FY(s) CPP Funding NoYes. If Yes FY(s) If yes to any question be sure to answer questions 13 and 14.						
For providers who have re	ceived prior HCBS, Disparity or CPP Funding from DDS						
13. If your organization has received prior funding from any of the above sources, please provide an update on the prior funding project. You may copy and paste from progress update(s) previously provided to regional centers or DDS.							
"not applicable"							
14. If your organization received prior funding, please explain how the current funding request is not redundant with any prior funding received and/or builds on the prior funding but was not part of the original funding.							
"not applicable"							

HCBS CONCEPT BUDGET					1			
Vendor Name SERENITY GROUP HOMES INC.								
Vendor Number(s)		HC0997/ HC					-	
			Yea	r 1 Budget	Yea	ar 2 Budget		Total
		Salary and						
		Benefits	FTE	Annual Cost	FTE	Annual Cost		Cost
Personnel (salary + benefits	i)				-			
Position Description PCP Co				\$ 58,000		\$ -	\$	58,000
Position Description Vocational Consultant				\$ 40,000		\$ -	\$	40,000
Position Description Sign Language Consultant				\$ 6,240		\$ -	\$	6,240
Position Description Program Director				\$ 50,000		\$ -	\$	50,000
Position Description Direct Staff				\$ 40,000		\$ -	\$	40,000
Position Description Direct Staff				\$ 40,000		\$ -	\$	40,000
Position Description Direct				\$ 40,000		\$ -	\$	40,000
Position Decription Direct S				\$ 40,000		\$ -	\$	40,000
DPosition Description Direct	t Staff			\$ 40,000		\$ -	\$	40,000
Personnel Subtotal		_		\$ 354,240		\$-	\$	354,240
Operating expenses							r.	
Vehicles (2) GMC			-	\$60,000	-		\$	60,000
Auto Insur			-	\$4000	-		\$	4,000
Grab Rails and I			-	\$3000	-		\$	3,000
Subcontra			_	\$5000	_		\$	5,000
(2) Dell Large Scree	en Computers		_	\$2,000	_		\$	2,000
Appliance Up	ogrades		_	\$ 7,200			\$	7,200
Training Materia	al/ Supplies			\$10,000			\$	10,000
Office Sup	oplies			\$5000			\$	5,000
Facility C	Cost			\$ 19,200			\$	19,200
Rent/ Internet/ Fax machine	es/ Printers			\$ 18,630			\$	18,630
Operating Subtotal				\$ 134,030		\$-	\$	134,030
Administrative Expenses			-		_	-		
Vehicles/ Insu	urance			\$15,000			\$	15,000
Gas				\$1,500			\$	1,500
Meals	5			\$1,820			\$	1,820
Cell Phones				\$2 <i>,</i> 400			\$	2,400
Clerical W	/ages			\$30,000			\$	30,000
Account	tant			\$14,000	-		\$	14,000
Rent				\$15,600	-		\$	15,600
Postage			-	\$5,000	-		\$	5,000
Administrative Subtotal		•	ľ	\$85,320		\$-	\$	85,320
Capital expenses				•		-	-	
	Repairs			\$7000			\$	7,000
Landsca				\$960			\$	960
Computer / Offic				\$ 6,000			\$	6,000
Utilitie				\$7200			\$	7,200
Funiture /			-	\$ 37,000			\$	37,000
			-	, 0.,000			\$	-
			-				\$	-
			-				\$	
			-				\$	
Capital Subtotal				\$ 58,160		\$-	\$ \$	58,160
Total Concept Cost				\$ 631,750		\$ -	\$	631,750
i otal concept Cost				÷ 031,/30		Ŷ	Ŷ	031,750

See Attachment F for budget details and restrictions