

Home and Community-Based Services (HCBS) Rules DEPARTMENT FUNDING GUIDANCE

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 non-residential 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 <https://www.dds.ca.gov/initiatives/cms-hcbs-regulations/>.

Questions may be directed to HCBSregs@dds.ca.gov.

Date(s) of Evaluation: 2/8/21	Completed by: Aaron DeBruyn and Aaron Graff
Vendor Name, Address, Contact: Northern Humboldt Employment Services 1309 11 th St. Suite #103 Arcata, CA 95521	
Vendor Number: HR0237	
Service Type and Code: Community Integration, 55	

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<p><u>Federal Requirement #1:</u> <i>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.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain: Northern Humboldt Employment Services' participants have had the opportunity to work hand in glove with the greater North Bay community for the last 15 years. The settings they train and work in are typically visited and used by hundreds of people a day that represent every demographic of the community. Each individual has complete control of their personal resources, and are free to provide their transportation any way they choose. If there is a goal or objective of competitive employment, the Coordinator will team up with Training Specialist to plan how best we can support the individual. The purpose of the van (concept #2) would be to address a need for more individualized work opportunities that are customized to each individual's specific employment goals. For example if Program Participants would like to start their own businesses and contract out services i.e. painter, gardener, recycler, window washer, office cleaner, delivery worker, bulk mail processor, etc. the van could be used to haul tools, materials, and cargo.</p>	
<p><u>Federal Requirement #2:</u> <i>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.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider have a current regional center Individual Program Plan (IPP) on file for all individuals? • Does each individual's IPP document the different setting options that were considered prior to selecting this setting?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: Yes, typically the Regional Center Service Coordinator will set up a program tour after the individual has stated in their IPP that they would like to try a</p>	

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<p>supported employment program. Sometimes visits to other programs are discussed in the program tour to facilitate a comparison.</p>	
<p><u>Federal Requirement #3:</u> <i>Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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.)?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: Yes, our participants are given the right to have meetings in a private setting to discuss their service options or address an issue or incident. Additionally, documents and communications are kept confidential. Communications are done in a way that respects the individual's rights and preferences. Each individual has a locker and two hooks for personal items. Wifi is available to all, and individuals are free to use tech devices when not in a current training session. Bathrooms are used independently, and non-binary options are available. Personal grooming and other self-care needs are done independently also. Restraints, secured perimeters, delayed egress devices, etc. are not needed and are never used.</p>	
<p><u>Federal Requirement #4:</u> <i>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.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Does the provider offer daily activities that are based on the individual's 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?

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<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Please explain:</p> <p>Program participants are given choices of work assignments and focus areas for skills. We also discuss their preferences for staff and community partners on training sites, and absences are allowed for necessities and activities that provide enrichment.</p> <p>Our staff encourages each individual to take the initiative to gain more independence, and make the choices that will improve their lives. The cargo cycles are to be used to give Program Participants more autonomy with their tools and transportation and provide more individualized work opportunities. They would also meet the requests for a more creative way to provide their services to the community, while addressing physical fitness goals and objectives at the same time.</p>	
<p><u>Federal Requirement #5:</u> <i>Facilitates individual choice regarding services and supports, and who provides them.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain: Yes, program participants have a chance to discuss how their service is provided on a daily basis. The Coordinator is available at the beginning of the day to discuss any change in preferences, grievances from the prior day, or their work assignment. If changes need to be made we work as a team to come up with a solution. At the end of the day there is also time for the Coordinator to meet with the program participant and their staff to discuss challenges and/or achievements that came about that day.</p>	

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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:

<p><u>Federal Requirement #6:</u></p> <p><i>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.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain:</p>	
<p><u>Federal Requirement #7:</u></p> <p><i>Each individual has privacy in his/her sleeping or living unit:</i></p> <p><i>Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors as needed.</i></p> <p><i>Individuals sharing units have a choice of roommates in that setting.</i></p> <p><i>Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Please explain:</p>	

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<p><u>Federal Requirement #8:</u> <i>Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain:</p>	
<p><u>Federal Requirement #9:</u> <i>Individuals are able to have visitors of their choosing at any time.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain:</p>	
<p><u>Federal Requirement #10:</u> <i>The setting is physically accessible to the individual.</i></p>	<p><u>Guidance:</u></p> <ul style="list-style-type: none"> • Do individuals have the freedom to move about 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?
<p>Does the service and/or program meet this requirement? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain:</p>	

CONTACT INFORMATION

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Contact Name: Aaron DeBruyn
Contact Phone Number: 707-499-3043
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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.

I AGREE

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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 backup, 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.
- Using a form from previous years will negatively impact a concept score, so please ensure the current FY 20-21 form is 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 and opportunities.

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 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 a sustainable plan for person-centered planning/thinking and training regarding the HCBS rules.
- Enabled residents to age in place and exercise more choice and independence.

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Vendor name	Northern Humboldt Employment Services (NHES)
Vendor number(s)	HR0237
Primary regional center	Redwood Coast Regional Center (RCRC)
Service type(s)	Community Integration
Service code(s)	055
Number of consumers typically and currently served	15-16
Typical and current staff-to-consumer ratio	1:2
<p>1. Please provide a brief description of the service/setting. Include what a typical day consists of during regular program as well as how services are currently being provided. This response must include the baseline/current levels for any aspects of the program for which the concept proposes funding.</p>	
<p>The service uses partners in the community for skills training in various focuses of work. Each day Program Participants are assigned to a work activity at their desired site in the community. For example; Program Participants provide a litter and graffiti abatement service for the City of Arcata on their bike trail and in the marsh and wildlife sanctuary. This proposal for pedal powered equipment will give the Program Participants independence from relying on our staff and work truck to carry out this service they provide for the city.</p>	
<p>Project Narrative Description: While filling out this section, reflect on how services are typically provided and how that might have changed in the past year. Think about what has been learned in the past year and how that might shape services going forward. Funding awarded through this concept can span the course of up to two years which would allow time to shape services to be more person-centered and align with the HCBS federal requirements.</p>	
<p>2. Please provide a brief summary narrative of the concept for which you are requesting funding, including justification for the funding.</p>	
<p>Concept #1- Pedal powered equipment with cargo capabilities would meet the request of Program Participants to provide their own transportation of themselves and tools from task to task. Their goal is to increase their independence while providing a much needed service to the community, and at the same time helping some with ISP objectives related to health and fitness.</p> <p>Concept #2- The proposal for a vehicle will allow NHES to help meet Program Participant's goals to explore new opportunities in the community for competitive integrated employment, internships, and unique self-employment start-ups.</p>	
<p>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.</p>	
<p>1 <u> x </u> 2 <u> </u> 3 <u> </u> 4 <u> x </u> 5 <u> </u> 6 <u> </u> 7 <u> </u> 8 <u> </u> 9 <u> </u> 10 <u> </u></p>	

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Concept #1 will reduce participant's dependence on staff and a work vehicle to carry out their service they provide to the community, and also allow each individual to work on their own pace.

The concept #2 will give NHES a dedicated vehicle for our Competitive/Customized Employment Specialist to find new partners in the community for employment in competitive integrated settings, and assist Program Participants with self-employment goals.

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.

For concept # 1, the litter abatement service on the bike trails and wildlife sanctuary require NHES Training Specialists to drive Program Participants to trailheads and they walk from there to where the litter and graffiti is, and then backtrack. The cargo bikes allow individualized transportation at their own pace, and the ability to do a loop trip without relying on NHES staff to drive them from trailhead to trailhead.

For concept # 2, the current fleet of full sized crew cab pickups and vans are fully in use every day and are not appropriate for individualized job opportunities and searching for community partners willing to try the Customized Employment approach. The vehicle addresses this problem.

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 by March 2023.

These concepts will address the need to have a dedicated vehicle for the development of competitive and self-employment opportunities (FR#1), and will give current Program participants greater autonomy in their transportation and work activities (FR#4).

6. What are the proposed outcomes and objectives of the concept, and what are the methods of achieving and tracking them?

The objective of Concept #1 is to allow Program Participants to provide their own transportation while addressing the litter and dumping that occurs on the city's rails to trails bike path and in the marsh and wildlife sanctuary. Many of these problem areas are far out of reach from a vehicle and hauling materials out can be quite difficult. The outcome of creating a pedal powered clean-up unit is that the program participants will have a more enjoyable method of carrying out their service to the community while also working on objectives related to exercise and fitness. Quite simply, this is achieved by carrying out the work to the City of Arcata's satisfaction and showing the community's trail users how efficient and innovative NHES's Program Participants can be while enhancing their community.

The objective of the Concept #2 is to provide a dedicated vehicle for a Competitive Employment Specialist to travel the community in search of new opportunities for competitive employment, and assist Program Participants with self-employment goals. The outcome would be more partners in the community that would consider the Customized Employment approach or hire Program Participants in a competitive

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employment position. Achieving this outcome would be tracked by the success rate of job placement for referrals from RCRC and current Program Participants.

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.

For Concept #1 it is worth noting that we have already utilized our own personal biking equipment and creative cargo ideas to test pilot this concept. We have attached a couple photos to show our pilot program of this concept. It came about out of a desire by program participants to have a new and creative way to address the difficulty of providing their litter and graffiti abatement services on trails. It has been a fun concept and has received a lot of cheering on by the public. Now we are proposing this concept for additional funding to give Program Participants more appropriate equipment that is designed for the job and allows individuals to work at their own pace.

For Concept #2 RCRC consumers have been requesting Customized and Competitive Employment opportunities, and some NHES participants have shown interest in starting businesses and becoming self-employed. It was identified that NHES would need a vehicle for these purposes.

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

For Concept #1 the cargo bikes will provide what the Program Participants are asking for. Not only are they looking for a more enjoyable way of carrying out their service, but some also have stated goals related to getting in better shape. In these cases we are encouraging these goals because they are not only important to them, but also important for them.

For Concept #2 the vehicle would be used to address goals and objectives of Competitive Employment by individuals in their IPP and ISP.

9. Please address your plan for maintaining the benefits, value, and success of your project at the conclusion of 2020-21 HCBS Funding.

For Concept #1 we will carve out funds in the budget to provide routine maintenance on the pedal-powered equipment. We will also do our best to raise excitement in Arcata City Hall and the community by presenting our fossil-fuel-free way of keeping the city clean and green. We can do this by contacting local press and online news and presenting before City Council.

For Concept #2 we already have a transportation department in our school district that provides mechanical upkeep at designated service intervals. We are hopeful that the business community will accept our pursuit of assisting individuals with Customized Employment, and that will result in more individuals reaching their goals of independence.

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

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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). This information can be found at this [link](#).

For Concept #1 we did some research with and obtained feedback form our Program Participants in what pedal powered vehicles they would like to operate and have included an invoice for the two cargo bikes. If funded, we are not requesting funds for upkeep and maintenance over the span of the project/concept because we already have a budget for equipment and maintenance.

For Concept #2 we have found a fuel efficient vehicle that has the cargo area to transport things related to self-employment activities that Program Participants desire. We have contacted a local dealer and have included an invoice for this vehicle. If funded, the school district will pay the invoice and NHES gets the keys. Maintenance for the vehicles over the span of the project will be performed by the transportation department.

Car/vehicle = \$35,000.00 (Harper Ford estimated \$30,869.00)

Front loader cargo quadricycle and front loader cargo tricycle = \$2866.69

Locks, helmets, and lights = \$500.00

please see attached HCBS concept budget spreadsheet

11. Please address sustainability of funding sources for all programs or concepts requiring any funding past the timeframe of the requested funding, especially those that involve staff or other long-term costs. Please mark "not applicable" if costs will all be incurred during the program timeframe; up to two years.

Not applicable. There are no long-term costs for Concept #1 or Concept #2 other than maintenance cost which we have addressed in #10 of this proposal.

12. We operate with DDS funds under code 055, but have never received prior funding for a project/concept.

12. Have you or the organization you work with been a past recipient of DDS funding? If yes, what fiscal year(s)?	HCBS Funding	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	If Yes, FY(s)
	Disparity Funding	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	If Yes, FY(s)
	CPP Funding	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	If Yes, FY(s)
	CRDP Funding	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	If Yes, FY(s)
If yes to any question be sure to answer questions 13 and 14.			

For providers who have received prior HCBS, Disparity, CPP or CRDP 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.

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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.

HCBS CONCEPT BUDGET						
Vendor Name		Northern Humboldt Employment Services				
Vendor Number(s)		HR0237				
	Wage and Benefits	Year 1 Budget		Year 2 Budget		Total
		FTE	Annual Cost	FTE	Annual Cost	Cost
Personnel (wage + benefits)						
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Position Description			\$ -		\$ -	\$ -
Personnel Subtotal			\$ -		\$ -	\$ -
Operating expenses						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Operating Subtotal			\$ -		\$ -	\$ -
Administrative Expenses						
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
Administrative Subtotal			\$ -		\$ -	\$ -
Capital expenses						
Ford Transit Connect Wagon			\$ 35,000			\$ 35,000
Worksman Cycles			\$ 2,867			\$ 2,867
Locks, Helmets, and lights			\$ 500			\$ 500
						\$ -
						\$ -
						\$ -
						\$ -
Capital Subtotal			\$ 38,367		\$ -	\$ 38,367
Total Concept Cost			\$ 38,367		\$ -	\$ 38,367

See Attachment F for budget details and restrictions