

Exhibit A
STATEMENT OF WORK
Precinct #1

Section I In summary, describe the service(s) that the agency / organization provides to the community.

The IVHI provides first aid kits to Colonia residents with limited to no access to health care by establishing and maintaining social networks. Through the work of Promotores (Community Health workers), the kits are refilled as needed and the residents receive health related educational and referral support. Each social network includes approximately 10 families that share responsibility for the kit. The kit is available to the residents and any visitors.

Section II State the CDBG grant amount awarded and state the name of awarding City / Precinct.
\$ 10,000.00 Awarded By: Precinct #1

Section III List the proposed type of expenditure(s) utilizing CDBG funds.

Salaries and fringe benefits of staff providing direct services, purchase of first aid supplies, supplies for first aid manuals, and mileage for promotores (community health workers).

Section IV List the services that will be provided, how they will be performed as a result of CDBG funds, and when they will be performed.

Kits will be supplied to new networks and restocked in existing networks as utilized by colonia residents. Promotores will visit the colonias regularly. A first aid manual will be distributed with each kit; individual educational programming and health care referrals will be provided as needed. Additional manuals will also be made available to any family requesting one for their home. Promotores will make their visits Monday –Friday between the hours of 8 am and 5 pm. There may be occasions when Promotores will have to visit families on weekends or after 5 PM to best serve the needs of some families.

Section V As a result of the CDBG award, describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Funding of this project will allow the families in the participating colonias of Pct. #1 to continue to receive first aid supplies and expanded educational and referral services.

Section VI Describe the program beneficiaries (age/gender), estimated number to be serviced, economic background and area of residency.

Services will be provided to approximately 250 low-income residents living in Pct. #1 of Hidalgo County. The majority of the residents are of Hispanic ethnicity and with minimal to no health care coverage and very limited access to health care.

Section VII List the location(s) with a physical address where the service(s) will be provided.

Services will be provided to colonias located in Precinct #1, including those with existing social networks. But not limited to the following: Zacatal, Cameron #1, Cameron #2, Capetillo, Relampago, WaterFalls, Tierra Bella, South Donna, Balli, La Pinata, Pioneer, and Frontera.

Exhibit B-1
GRANT BUDGET
Precinct #1

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed up to two (2) amendments to the budgeted amounts. Proposed changes to the budgeted amounts must be submitted in writing to UCP **prior to the preceding month of the change.**

TYPE OF EXPENDITURES	BUDGETED AMOUNT
Salaries & fringe benefits for staff providing direct services (Community Health Workers, etc)	\$ 8,000.00
First Aid Supplies & Supplies for First Aid Manuals	\$ 1,000.00
Mileage for staff providing direct services (Community Health Workers)	\$ 1,000.00
	\$
	\$
	\$
TOTAL GRANT BUDGET:	\$ 10,000.00

Initials _____

Revised June 2009

Exhibit B-2
PAYMENT SCHEDULE
Precinct # 1

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval **prior to the preceding month of the change**. Subrecipient will be allowed up to two (2) amendments to the payment schedule.

2009 - 2010 For the Months of...	Estimated Amount Of Expenditures	Type of Budgeted Expenditures
July	\$910.00	Personnel, first aid supplies, first aid manual supplies, mileage
August	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
September	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
October	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
November	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
December	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
January	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
February	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
March	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
April	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
May	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
TOTAL:	\$ 10,000.00	

Note: Monthly expenditures are considered proposed. Amendments to the payment schedule must be requested when the *actual* monthly expenditure **exceeds** the estimated amount by 50%. If the *actual* monthly expenditure is **less** than 50% of the estimated amount, an amendment must be requested to the Urban County Program for review and approval.

Initials _____

Revised June 2009

Exhibit C
SCHEDULE OF ACTIVITY
 Precinct #1

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. The schedule should not exceed the agreement time frame of eleven months.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval **prior to the preceding month of the change**. The subrecipient will be allowed up to two (2) amendments for the term of the agreement.

2009 - 2010 For the months of...	Number of Unduplicated Beneficiaries to be Serviced	Services Provided
July	200	Continuation of 1 st Aid Project
August	10	Continuation of 1 st Aid Project
September	10	Continuation of 1 st Aid Project
October	5	Continuation of 1 st Aid Project
November	5	Continuation of 1 st Aid Project
December	5	Continuation of 1 st Aid Project
January	5	Continuation of 1 st Aid Project
February	5	Continuation of 1 st Aid Project
March	5	Continuation of 1 st Aid Project
April	0	Continuation of 1 st Aid Project
May	0	Continuation of 1 st Aid Project
Total for the Year:	250	

Note: The number of unduplicated (individual) beneficiaries to be served should be counted only **once** per year.

Initials _____

Revised June 2009

Exhibit A
STATEMENT OF WORK
 Precinct #2

Section I In summary, describe the service(s) that the agency / organization provides to the community.

The IVHI provides first aid kits to Colonia residents with limited to no access to health care by establishing and maintaining social networks. Through the work of Promotores (Community Health workers), the kits are refilled as needed and the residents receive health related educational and referral support. Each social network includes approximately 10 families that share responsibility for the kit. The kit is available to the residents and any visitors.

Section II State the CDBG grant amount awarded and state the name of awarding City / Precinct.
 \$ 10,000.00 Awarded By: Precinct #2

Section III List the proposed type of expenditure(s) utilizing CDBG funds.

Salaries and fringe benefits of staff providing direct services, purchase first aid supplies, supplies for first aid manuals, and mileage for promotores (community health workers).

Section IV List the services that will be provided, how they will be performed as a result of CDBG funds, and when they will be performed.

Kits will be supplied to new networks and restocked in existing networks as utilized by colonia residents. Promotores will visit the colonias regularly. A first aid manual will be distributed with each kit; individual educational programming and health care referrals will be provided as needed. Additional manuals will also be made available to any family requesting one for their home. Promotores will make their visits Monday –Friday between the hours of 8 am and 5 pm. There may be occasions when Promotores will have to visit families on weekends or after 5 PM to best serve the needs of some families.

Section V As a result of the CDBG award, describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Funding of this project will allow the families in the participating colonias of Pct. #1 to continue to receive first aid supplies and expanded educational and referral services.

Section VI Describe the program beneficiaries (age/gender), estimated number to be serviced, economic background and area of residency.

Services will be provided to approximately 250 low-income residents living in Pct. #2 of Hidalgo County. The majority of the residents are of Hispanic ethnicity and with minimal to no health care coverage and very limited access to health care.

Section VII List the location(s) with a physical address where the service(s) will be provided.

Services will be provided to colonias located in Precinct #2, including those with existing social networks, but not limited to the following: Rancho Blanco (2), South Tower Heights (1), South Tower Estates (2), Pantera(2), El Gato(2), Whitewings 1, Whitewings 2, Whitewings 3, and Roadrunner. The number in parentheses indicates multiple social networks within a particular colonia.

Exhibit B-1
GRANT BUDGET
 Precinct #2

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed up to two (2) amendments to the budgeted amounts. Proposed changes to the budgeted amounts must be submitted in writing to UCP **prior to the preceding month of the change.**

TYPE OF EXPENDITURES	BUDGETED AMOUNT
Salaries and fringe benefits for staff providing direct services (community health workers)	\$ 8,000.00
Supplies for First Aid Kits and Manuals	\$ 1,000.00
Mileage for staff providing direct services (community health workers)	\$ 1,000.00
	\$
	\$
	\$
TOTAL GRANT BUDGET:	\$ 10,000.00

Initials _____

Revised June 2009

Exhibit B-2
PAYMENT SCHEDULE
 Precinct #2

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval **prior to the preceding month of the change**. Subrecipient will be allowed up to two (2) amendments to the payment schedule.

2009 - 2010 For the Months of...	Estimated Amount Of Expenditures	Type of Budgeted Expenditures
July	\$910.00	Personnel, first aid supplies, first aid manual supplies, mileage
August	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
September	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
October	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
November	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
December	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
January	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
February	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
March	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
April	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
May	\$909.00	Personnel, first aid supplies, first aid manual supplies, mileage
TOTAL:	\$ 10,000.00	

Note: Monthly expenditures are considered proposed. Amendments to the payment schedule must be requested when the *actual* monthly expenditure **exceeds** the estimated amount by 50%. If the *actual* monthly expenditure is **less** than 50% of the estimated amount, an amendment must be requested to the Urban County Program for review and approval.

Initials _____

Revised June 2009

Exhibit C
SCHEDULE OF ACTIVITY
 Precinct #2

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. The schedule should not exceed the agreement time frame of eleven months.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval **prior to the preceding month of the change**. The subrecipient will be allowed up to two (2) amendments for the term of the agreement.

2009 - 2010 For the months of....	Number of <u>Unduplicated</u> Beneficiaries to be Serviced	Services Provided
July	200	Continuation of 1 st Aid Project
August	10	Continuation of 1 st Aid Project
September	10	Continuation of 1 st Aid Project
October	5	Continuation of 1 st Aid Project
November	5	Continuation of 1 st Aid Project
December	5	Continuation of 1 st Aid Project
January	5	Continuation of 1 st Aid Project
February	5	Continuation of 1 st Aid Project
March	5	Continuation of 1 st Aid Project
April	0	Continuation of 1 st Aid Project
May	0	Continuation of 1 st Aid Project
Total for the Year:	250	

Note: The number of unduplicated (individual) beneficiaries to be served should be counted only **once** per year.

Initials _____

Revised June 2009

Exhibit A
STATEMENT OF WORK
 Precinct #3

Section I In summary, describe the service(s) that the agency / organization provides to the community.

The IVHI provides first aid kits to Colonia residents with limited to no access to health care by establishing and maintaining social networks. Through the work of Promotores (Community Health workers), the kits are refilled as needed and the residents receive health related educational and referral support. Each social network includes approximately 10 families that share responsibility for the kit. The kit is available to the residents and any visitors.

Section II State the CDBG grant amount awarded and state the name of awarding City / Precinct.
 \$ 15,000.00 Awarded By: Precinct #3

Section III List the proposed type of expenditure(s) utilizing CDBG funds.

Salaries and fringe benefits for staff providing direct services, purchase of first aid supplies, supplies for first aid manuals, and mileage for promotores (community health workers).

Section IV List the services that will be provided, how they will be performed as a result of CDBG funds, and when they will be performed.

Kits will be supplied to new networks and restocked in existing networks as utilized by colonia residents. Promotores will visit the colonias regularly. A first aid manual will be distributed with each kit; individual educational programming and health care referrals will be provided as needed. Additional manuals will also be made available to any family requesting one for their home. Promotores will make their visits Monday -Friday between the hours of 8 am and 5 pm. There may be occasions when Promotores will have to visit families on weekends or after 5 PM to best serve the needs of some families.

Section V As a result of the CDBG award, describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Funding of this project will allow the families in the participating colonias of Pct. #3 to continue to receive first aid supplies and expanded educational and referral services.

Section VI Describe the program beneficiaries (age/gender), estimated number to be serviced, economic background and area of residency.

Services will be provided to approximately 300 low-income residents living in Pct. #3 of Hidalgo County. The majority of the residents are of Hispanic ethnicity and with minimal to no health care coverage and very limited access to health care.

Section VII List the location(s) with a physical address where the service(s) will be provided.

Services will be provided to colonias located in Precinct #3, including those with existing social networks, but not limited to the following: Sanchez Ranch (2), OT (1), Ojo de Agua (2), Perezville(1), Abram(1), Carlos Acres(2), Sunny Haven(1), Sotira(1), and Los Trevinos(1). The numbers in parentheses indicate multiple social networks within a colonia.

Exhibit B-1
GRANT BUDGET
 Precinct #3

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed up to two (2) amendments to the budgeted amounts. Proposed changes to the budgeted amounts must be submitted in writing to UCP **prior to the preceding month of the change.**

TYPE OF EXPENDITURES	BUDGETED AMOUNT
Salaries and fringe benefits for staff providing direct services (community health workers).	\$10,800.00
Supplies for first aid kits and manuals	\$ 2,100.00
Mileage for staff providing direct services (community health workers).	\$ 2,100.00
	\$
	\$
	\$
TOTAL GRANT BUDGET:	\$ 15,000.00

Initials _____

Revised June 2009

Exhibit B-2
PAYMENT SCHEDULE
 Precinct #3

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval **prior to the preceding month of the change**. Subrecipient will be allowed up to two (2) amendments to the payment schedule.

2009 - 2010 For the Months of...	Estimated Amount Of Expenditures	Type of Budgeted Expenditures
July	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
August	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
September	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
October	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
November	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
December	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
January	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
February	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
March	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
April	\$1,364.00	Personnel, first aid supplies, first aid manual supplies, mileage
May	\$1,360.00	Personnel, first aid supplies, first aid manual supplies, mileage
TOTAL:	\$ 15,000.00	

Note: Monthly expenditures are considered proposed. Amendments to the payment schedule must be requested when the *actual* monthly expenditure **exceeds** the estimated amount by 50%. If the *actual* monthly expenditure is **less** than 50% of the estimated amount, an amendment must be requested to the Urban County Program for review and approval.

Initials _____

Revised June 2009

Exhibit C
SCHEDULE OF ACTIVITY
 Precinct #3

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. The schedule should not exceed the agreement time frame of eleven months.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval **prior to the preceding month of the change**. The subrecipient will be allowed up to two (2) amendments for the term of the agreement.

2009 - 2010 For the months of...	Number of Unduplicated Beneficiaries to be Serviced	Services Provided
July	100	Continuation of 1 st Aid Project
August	50	Continuation of 1 st Aid Project
September	50	Continuation of 1 st Aid Project
October	50	Continuation of 1 st Aid Project
November	25	Continuation of 1 st Aid Project
December	25	Continuation of 1 st Aid Project
January	0	Continuation of 1 st Aid Project
February	0	Continuation of 1 st Aid Project
March	0	Continuation of 1 st Aid Project
April	0	Continuation of 1 st Aid Project
May	0	Continuation of 1 st Aid Project
Total for the Year:	300	

Note: The number of unduplicated (individual) beneficiaries to be served should be counted only **once** per year.

Initials _____

Revised June 2009