

EQUAL 2025-2026 Proposed Spending Plan

Summary Budget

This form must be used by applicants to provide a detailed budget justification. For each line item provide a full description of the item, justification of the need for the item as it relates to the resident priorities identified, and explanation of how costs were determined. *Additional pages may be added but must all conform to this format and include the Resident Council Representative Approval or Resident Petition in Support.*

Budget Line Items	Capital Improvement Project Funds Requested	Local Assistance Project Funds Requested
Flooring for resident apartments and common areas (New wood-look), Handi-capped ramp to new Gazebo	\$12,114.00	
Resident activities, supplies, entertainers, Food + Rentals for resident picnics. Landscaping in Patio area and around new Gazebo.		\$12,114.00
Total Requested Per Funding Source	\$12,114.00	\$12,114.00
Total Funding Requested	\$24,228.00	

o **RESIDENT COUNCIL REPRESENTATIVE APPROVAL:** I, N/A. (name of representative), have reviewed the Proposed EQUAL 2025-2026 Spending Plan for Bernardine Apartments (name of facility), 520-S-054 (operating certificate #), and agree that the proposed use of these funds is consistent with the priorities of SSI/SSP/SN residents' priorities.

Resident Council Representative Signature: N/A

✓ **RESIDENT PETITION IN SUPPORT:** We, the undersigned, are SSI/SSP/SN recipients residing at Bernardine Apartments, 520-S-054 (operating certificate #). We have reviewed the Proposed EQUAL 2025-2026 Spending Plan and agree that the proposed use of funds is consistent with our priorities.

Resident Name: Bohdanna Kmbykiewicz
 Resident Name: Marietta Crispino
 Resident Name: Phyllis Smith

Resident Signature: B. Bohanna Kmbykiewicz
 Resident Signature: Marietta Crispino
 Resident Signature: Phyllis A. Smith

INCOMPLETE WITHOUT RESIDENT(S) SIGNATURE(S)