

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
RESIDENT RECREATIONAL ACTIVITIES		\$230.50
OUTDOOR SEATING FOR RESIDENTS (PARTIAL PAYMENT)	\$230.50	
Total Requested Per Funding Source	\$230.5	\$230.5
Total Funding Requested	\$461.00	

o **RESIDENT COUNCIL REPRESENTATIVE APPROVAL:** I, Diane Light (name of representative), have reviewed the Proposed EQUAL 2025-2026 Spending Plan for THE ABBOTS At BOHEMIA (name of facility), 700-F-913 (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: Diane Light

o **RESIDENT PETITION IN SUPPORT:** We, the undersigned, are SSI/SSP/SN recipients residing at THE ABBOTS At BOHEMIA (name of facility), 700-F-913 (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: Marie Musuneci  
 Resident Name: Jane Donohue  
 Resident Name: Michelle W...  
W. Moldawski  
Jean Pedro  
Diana

Resident Signature: Maryann Balanta  
 Resident Signature: Frederica Murray  
 Resident Signature: Ruth W...

INCOMPLETE WITHOUT RESIDENT(S) SIGNATURE(S)