

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
Enhancement of resident Areas-Modification of resident outside areas to create shared space for outdoor social gatherings	4,383.50	
Expansion of Dining room and upgrade to allow more comfortable seating	6,000.00	
Resident electronic activity purchase - purchase computers, Projectors specifically for resident use.		1,000.00
Staff training and development - This will assist having better home staff to work with residents		3,000.00
Outdoor activities - engage the residents by going to shopping malls & movies to enjoy outdoor activities.		4,353.50
Resident manual activities - purchase therapy supplies to have the residents more engaged and more fit.		2,000.00
Total Requested Per Funding Source	10,383.50	10,383.50
Total Funding Requested	20,767.00	

- o **RESIDENT COUNCIL REPRESENTATIVE APPROVAL:** I, Gail Denman (name of representative), have reviewed the Proposed EQUAL 2025-2026 Spending Plan for Aradia Residence (name of facility), 710-F-063 (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: Gail Denman

- o **RESIDENT PETITION IN SUPPORT:** We, the undersigned, are SSI/SSP/SN recipients residing at Aradia Residence (name of facility), 710-F-063 (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: Scherrod Brooks

Resident Signature: Scherrod Brooks

Resident Name: Jalia Wohl

Resident Signature: Jalia Wohl

Resident Name: Tracy Brogdon

Resident Signature: Tracy Brogdon

INCOMPLETE WITHOUT RESIDENT(S) SIGNATURE(S)