

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
Front Porch/Back Patio Upgrades	\$7,975	
Activity Enhancements, Entertainment, Outings & Specialty Food		\$7,975
Total Requested Per Funding Source	\$7,975	\$7,975
Total Funding Requested	\$15,950	

o **RESIDENT COUNCIL REPRESENTATIVE APPROVAL:** I, Betty Voudry *Betty Voudry* (name of representative), have reviewed the Proposed EQUAL 2024-2025 Spending Plan for The Mansion (name of facility), 760-F-012 (operating certificate #), and agree that the proposed use of these funds is consistent with the priorities of SSI/SSP/SN residents' priorities.

o **RESIDENT PETITION IN SUPPORT:** We, the undersigned, are SSI/SSP/SN recipients residing at 11 South Union (name of facility), 760-F-012 (operating certificate #). We have reviewed the Proposed EQUAL 2024-2025 Spending Plan and agree that the proposed use of funds is consistent with our priorities.

Resident Name: Betty Voudry
 Resident Name: _____
 Resident Name: _____

Resident Signature: *Betty Voudry*
 Resident Signature: _____
 Resident Signature: _____

INCOMPLETE WITHOUT RESIDENT(S) SIGNATURE(S)

APPROVED

2024-2025 EQUAL

Digitally signed by APPROVED
 2024-2025 EQUAL
 Date: 2025.02.10 15:18:18
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