
CHAMPAIGN COUNTY BOARD OF HEALTH

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Champaign County Board of Health

**Tuesday, March 19, 2013
5:30 PM**

**Location: Champaign-Urbana Public Health District
201 W. Kenyon, Champaign, IL
Main Conference Room
(Park & Enter on North Side of Facility)**

AGENDA

<u>ITEM</u>	<u>PAGE NO.</u>
A. Call to Order	
B. Roll Call	
C. Approval of Agenda/Addenda	
D. Approval of Minutes	
1. October 23, 2012	1-2
2. September 25, 2012	3-4
E. Public Participation on Agenda Items Only	
F. Correspondence and Communications	
G. SmileHealthy	
1. Monthly Report – October 2012	5-8
2. Monthly Report – November 2012	9-11
3. Monthly Report – December 2012	12-14
4. Monthly Report – January 2013	15-17
5. Monthly Report – February 2013	18-21
H. CUPHD	
1. Approval of CUPHD Invoice for September 2012 Services	22-42
2. Approval of CUPHD Invoice for October 2012 Services	43-56
3. Approval of CUPHD Invoice for November 2012 Services	57-70
4. Approval of CUPHD Invoice for December 2012 Services	71-78
5. Approval of CUPHD Invoice for January 2013 Services	79-90
6. CUPHD Monthly Division Reports – November & December 2012 And January & February 2013	
Reports can be viewed at: http://www.c-uphd.org/monthly-reports.html	
a. Administrative Training	
b. Environmental Health	
c. Human Resources	
d. Infectious Disease	
e. Maternal & Child Health	
f. Planning & Research	
g. Wellness & Health Promotion	

I. Old Business

1. Intergovernmental Agreement
2. Environmental Health
 - a. Publicizing Food Establishment Inspections
 - b. Private Sewage Program – National Pollution Discharge Elimination System (NPDES) Permitting Program for Surface Discharging Private Sewage Disposal Systems
 - c. Potable Water Program – Change to the Illinois Water Well Construction Code to Allow for Permitting and Licensing of Geothermal Vertical Closed Loops by the Illinois Department of Public Health

91-94

J. Other Business

K. Public Participation on Non-Agenda Items Only

L. Adjournment

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CHAMPAIGN COUNTY BOARD OF HEALTH

Tuesday, October 23, 2012

Call to Order

The Champaign County Board of Health held a meeting on October 23, 2012 at the Champaign-Urbana Public Health District office, 201 W. Kenyon Road, Champaign. The meeting was called to order at 5:30 PM by President, Bobbi Scholze.

Roll Call

Upon roll call, the following Board members were found to be present: Bobbi Scholze, President, Stan James, David Thies and Krista Jones. Dr. Michael Ruffatto was in attendance at 5:35 PM and Dr. John Peterson, Treasurer, was in attendance at 5:38 PM. Betty Segal, Secretary, was absent.

Also present were Julie A. Pryde, CUPHD Administrator, Amy Roberts, CUPHD, and Nancy Greenwalt, SmileHealthy Executive Director.

Approval of Agenda/Addendum

Stan James made a motion to approve the October 23, 2012 agenda. David Thies seconded the motion. With all in favor, the motion carried.

Approval of Minutes

David Thies made a motion to approve the August 22, 2012 meeting minutes. Dr. Michael Ruffatto seconded the motion. With all in favor, the motion carried.

Public Participation on Agenda Items Only

There was no public participation regarding agenda items.

Correspondence and Communications

There was no correspondence.

Smile Healthy

Stan James made a motion to receive and place on file the August 2012 and September 2012 SmileHealthy monthly reports. Krista Jones seconded the motion. With all in favor, the motion carried. SmileHealthy attended a back to school program in Rantoul in September and will be at the Mahomet schools in November.

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CUPHD

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56 Dr. Peterson made a motion to approve the CUPHD invoices for July 2012
57 and August 2012. David Thies seconded the motion. With all in favor, the motion
58 carried.

59

60 CUPHD Monthly Reports are available on-line. Planning and Research
61 has been added to the available reports. Stan James made a motion to accept
62 and place on file. Krista Jones seconded the motion. With all in favor, the motion
63 carried.

64

Old Business

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67 The Bylaws of the Champaign County Board of Health have been
68 amended. A final copy is to be given to all board members.

69

70 There was no new information regarding the Correction to Sewage
71 Complaints Projected for 2012-13.

72

73 There was no new information regarding the Intergovernmental
74 Agreement.

75

76 A new ordinance will be presented in relation to publicizing food
77 establishment inspections. Mr. Roberts is currently receiving feedback from food
78 establishments regarding the notices; all information will be presented to the
79 Champaign County Board in January.

80

81 Letters have been distributed by CUPHD regarding the Private Sewage
82 Program and upcoming changes.

83

84 There was no new information regarding the Potable Water Program.

85

Other Business

87

88 There was no other business to address.

89

Public Participation on Non-Agenda Items Only

91

92 Due to the changes in the bylaws, upcoming meetings will be held in
93 March, June, August and November. Copies of updated bylaws and contact
94 information are to be distributed to the board members.

95

Adjournment

97

98 The meeting was adjourned at 6:01 PM.



Public Health
Prevent. Promote. Protect.

Champaign-Urbana Public Health District

**BOARD OF HEALTH
Joint Study Session
September 25, 2012**

On September 25, 2012, the Board of Health of the Champaign-Urbana Public Health District (CUPHD) and the Board of Health of Champaign County held a Joint Study Session at 201 W. Kenyon, Champaign, IL. Ms. Carol Elliott called the meeting to order at 5:35 PM. Upon roll call, the following CUPHD board members were found to be present: Carol Elliott, Chair, Pius Weibel, Secretary, and Pam Borowski; the following County board members were found to be present: Bobbi Scholze, President, Betty Segal, Secretary, Dr. John Peterson, Treasurer, Stan James, and Dr. Michael Ruffatto. David Thies and Krista Jones were absent. Also in attendance was Dr. Banks from the University of Illinois.

Pius Weibel made a motion for Carol Elliot to chair the meeting. Bobbi Scholze seconded the motion. With all in favor, the motion carried.

Jim Roberts, Director of Environmental Health at CUPHD, gave a presentation regarding publicizing food establishment inspections. He presented six options on how to proceed.

Option #1 follows the traditional model based upon CUPHD's practice since its establishment in 1937. If a food establishment is open then they are in compliance. Publicizing inspection reports is not a program standard required by IDPH or by public acts.

Option #2 would require a regulatory authority to place a sign or placard in a conspicuous location stating that the most recent inspection report is available upon request.

Option #3 would be to post the most recent report on the door at the main entrance. Stan James' concern is the door being blocked when someone stops to read the report. The full report would be available on-line.

Option #4 would be to post a rating score or grade but Mr. Roberts doesn't feel that would be meaningful due to the fact that the score could be the same for several minor issues or a couple of major issues.

**Joint Study Session
September 25, 2012
Page 2**

Suggestions for the County permit include adding the phone number to the top of the permit, including the address, using larger print and stating what the permit is for (i.e. retail food establishment). The inspection report and permit are to be kept separate.

Option #5 would be a placard (version #4) highlighting the status and performance indicators. Three color-coded placards would be used with this option: green for "in compliance"; yellow for "re-inspection required"; and red for "closed". A change to the organization of the forms was suggested. The forms will also be marked if an issue was corrected-on-site (COS). A new ordinance will need to be established. Fines for repeat inspections were also discussed. Mr. Roberts has gathered input from two establishments for feedback regarding the forms and has suggested that Environmental Health staff also gather input from additional operators throughout the month of October.

Option #6 would be to post a summary of the inspection reports. A "snapshot" would be posted on-line which could be accessed by a QR code.

Mr. Roberts also presented several additional discussion points: there would be a disclosure for all non-temporary food establishments; the display placard could be (self) laminated; the location of the placards needs to be determined; there will need to be legal assistance regarding enforcement; and the ordinance will require language barring the removal of the placard.

C. Pius Weibel will abstain from voting on the issue.

Jim Roberts would like to move forward with this process in 2013. The CUPHD Board of Health and the Champaign County Board of Health agreed to move forward with Option #5 and to draft the appropriate ordinance. Mr. Roberts will present the final version to the Champaign County Board.

The Intergovernmental Agreement will expire November 30, 2013. Jim Roberts has several changes to make to Appendix A.

With no further business to be discussed, Ms. Carol Elliott adjourned the meeting at 7:02 PM.

Chair

Secretary



**Champaign County Board of Health
Monthly Report for October 2012, Fiscal Year 2012**

Total number of patients seen from all programs this month: **142**

Total number of unique patients in BOH Fiscal Year 2012: **1683**

Breakdown of current month of patients for all programs by town.

- Broadlands: **3**
- Champaign: **50**
- Homer: **2**
- Ludlow: **3**
- Mahomet: **2**
- Ogden: **2**
- Rantoul: **42**
- Savoy: **6**
- Seymour: **2**
- St. Joseph: **3**
- Thomasboro: **1**
- Urbana: **17**
- Other: **2**

Clinic Events

- Oct 2 Rantoul Head Start
- Oct 4 Rantoul Head Start
- Oct 9 Champaign Head Start
- Oct 16 CDAP at First Presbyterian
- Oct 18 Rantoul Head Start
- Oct 23 Savoy Head Start
- Oct 25 Prairie Center Provena Sponsored Day
- Oct 30 CDAP First Presbyterian

Education and Outreach

October 2, Tolono Head Start, staff hygienist (Jeana) presented education materials to **20 children**.

Savoy Head Start, staff hygienist (Jeana) presented education materials to **58 children**.

October 3, Garden Hills Elementary school, After school program, staff hygienist (Jeana) along with volunteer (Lisa Lipon), Peg Boyce and 3 dental hygiene students, presented education materials and supplies to **45 children** and **8 adults**.

October 4, Savoy Head Start, staff hygienist (Jeana) presented educational materials to **58 children**.

SmileHealthy – Mobile Dental Clinics - Frances Nelson Dental Center Coordinators
Head Start Dental Clinic - Child Dental Access Program - Dental Health Education
PO Box 154, Champaign, IL 61824-0154 – phone 217.359.7404 – fax: 217.352-9745
www.smilehealthy.org

October 9, Provena Medical Center, Family Nutrition and Dental Referral Program, staff hygienist (Jeana) presented educational materials and supplies to **1 adult**.

October 10, Douglas Center, After school program, Peg Boyce along with 4 dental hygiene students presented education materials and supplies to **40 children**.

October 11, Rantoul Head Start, staff hygienist (Jeana) presented dental educational materials to **72 children**.

October 11, Provena Medical Center, Family Nutrition and Dental Referral Program, there were no attendees on this day.

October 13, Lincoln Square Mall, Disability Expo, staff hygienist (Jeana) along with 7 volunteers presented education materials and supplies to **200 adults** and **50 children**.

October 15, Orchard Downs Multicultural Center, staff hygienist (Jeana) presented information about dental hygiene as a career and about SmileHealthy to **40 children**.

October 16, Rantoul Head Start, staff hygienist (Jeana) presented education materials to **40 children**.

October 17, Urbana Neighborhood Connections, after school program, staff hygienist (Jeana) along with 3 dental hygiene students presented education materials and supplies to **35 children** and **3 adults**.

October 18, Urbana Head Start, staff hygienist (Jeana) presented education materials to **54 children**.

Savoy Head Start, monthly parent meeting, staff hygienist (Jeana) presented education materials and distributed "Water Only" cups to **30 adults**.

Rantoul Head Start, monthly parent meeting, staff hygienist (Jeana) presented education materials and distributed "Water Only" cups to **25 adults**.

October 23, Champaign Head Start, staff hygienist (Jeana) presented education materials to **50 children**.

CUPHD, CU Fit Families, staff hygienist (Jeana) attended monthly meeting along with 12 community members.

Champaign Head Start, staff hygienist (Jeana) **delivered 51** "Water Only" cups to be given to **parents** who had not received a cup by the teachers at Parent-Teacher home visits.

Urbana Head Start, staff hygienist (Jeana) **delivered 55** "Water Only" cups to be given to parents who had not yet received a cup, by the teachers at Parent-Teacher home visits.

Savoy Head Start, staff hygienist (Jeana) **delivered 107** "Water Only" cups to be given to parents who had not yet received a cup, by the teachers at Parent-Teacher



home visits.

Rantoul Head Start, staff hygienist (Jeana) **delivered 78** "Water Only" cups to be given to parents who had not yet received a cup, by the teachers at Parent-Teacher home visits.

October 26, Crisis Nursery, Halloween outreach event, 2 SmileHealthy interns, Dan Pagel and Liz McInerney along with 2 volunteers presented education materials and supplies to **20 children** and **15 adults**.

October 27, Armory at U of I, Fall Festival, SmileHealthy interns and volunteers presented education materials and supplies to **100 children** and **50 adults**.

Only those in **bold** are counted towards our education contacts.

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SmileHealthy
Champaign County Board of Health
Fiscal Year 2012 Report

	Dec 11	Jan 12	Feb 12*	March 12	April 12	May 12	June 12	July 12	Aug 12	Sep 12	Oct 12	Nov 12	Total
Bondville		1											1
Broadlands		3		2							3		8
Champaign	21	32	30	55	46	42	8	72	19	76	50		451
Dewey													0
Fisher								1					1
Foosland				1		1		1					3
Gifford	1				4			1	3	1			10
Homer			1	1	1				4		2		9
Ivesdale													0
Ludlow	1			1	1			1	2	1	3		10
Mahomet	2	4	5	8	1	8		3	3	6	2		42
Ogden	1		1	5	1	3	1		1	2	2		17
Penfield			2			1				2			5
Pesotum			2	1									3
Philo			3			2		2					7
Rantoul	36	29	31	35	17	73	2	51	54	83	42		453
Royal			2	2									4
Sadorus	3		6							1			10
Savoy	6	2	3	7	3	9	3	3	10	7	6		59
Seymour		2	1								2		5
Sidney						3	2		1				6
St. Joseph	2	3		2	36	1		5	2	4	3		58
Thomasboro		26				4		1	1	2	1		35
Tolono	28	3	15	3		3	1	8	1				62
Urbana	18	18	24	27	22	25	6	34	14	24	24		236
Other/Unk		296	221	27	6		2		2	3	2		559
Total	119	419	347	177	138	175	25	183	117	212	142	0	

**Total Unique
Patients in FY**

119	514	891	990	1120	1283	1292	1404	1482	1629	1683
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Education

Contacts	362	393	1042	835	1266	306	462	40	845	337	1305	7193
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Champaign and Urbana children seen either live outside city limits and are county residents or are part of the Head Start program and paid for by Medicaid or other funding.

*Feb will include patients from Give Kids A Smile with C-UPHD and IDDS.



**Champaign County Board of Health
Monthly Report for November 2012, Fiscal Year 2012**

Total number of patients seen from all programs this month: **208**

Total number of unique patients in BOH Fiscal Year 2012: **1816**

Breakdown of current month of patients for all programs by town.

- | | |
|------------------------|------------------------|
| • Champaign: 40 | • Savoy: 7 |
| • Fisher: 1 | • Seymour: 4 |
| • Ludlow: 15 | • Sidney: 2 |
| • Mahomet: 59 | • St. Joseph: 8 |
| • Ogden: 2 | • Thomasboro: 2 |
| • Penfield: 1 | • Tolono: 2 |
| • Pesotum: 1 | • Urbana: 24 |
| • Philo: 3 | • Other: 1 |
| • Rantoul: 36 | |

Clinic Events

Nov. 1 Urbana Head Start
 Nov. 6 CDAP First Presbyterian Church
 Nov. 9 Savoy Head Start
 Nov. 10 Provena Sponsored Day @ Provena
 Nov. 13 Seals Mahomet
 Nov. 15 Seals Mahomet
 Nov. 16 Pediatric Restorative Outpatient Surgery
 Nov. 20 Rantoul Head Start
 Nov. 27 CDAP First Presbyterian Church
 Nov. 29 Provena Sponsored Day @ Provena

Education and Outreach

November 1 - Savoy Head Start, staff hygienist presented dental education and supplies to **56 children**

November 5 - Urbana Head Start, Parent Meeting, staff hygienist met with parents, discussed sippy cup use and classroom education, **25 adults**.

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November 6 - Savoy Head Start, staff hygienist presented dental education and supplies to **56 children**.

November 7 - Provena Medical Center, Family Nutrition and Dental Referral Program, staff hygienist presented oral health and nutrition education to **4 adults**.

November 8 - Rantoul Head Start, staff hygienist presented dental education and supplies to **72 children**.

Urbana Neighborhood Connections After School Program, staff hygienist along with 2 volunteers presented dental education and supplies to **25 children**.

Booker T. Washington Wellness Event, 4 volunteers presented dental education and supplies to **30 adults** and **45 children**.

Diabetes Coalition planning meeting, staff hygienist along with 8 community members prepared for Diabetes Expo.

November 12 - Christie clinic, Diabetes Expo, staff hygienist along with 2 volunteers presented Diabetes dental education materials and supplies to **110 adults**.

November 13 - Savoy Head Start, staff hygienist presented dental education and materials to **56 children**.

Orchard Downs Multicultural Center, Baby Bingo night, staff hygienist presented dental education and supplies to **30 adults**.

November 15 - Urbana Head Start, staff hygienist presented education materials to **54 children**.

Provena Medical Center, Family Nutrition Dental Referral Program, staff hygienist presented education materials and supplies to **4 adults**.

November 20 - Rantoul Head Start, staff hygienist presented education materials to **38 children**.

November 27 - Champaign Head Start, staff hygienist presented dental education materials to **40 children**.

Only those in **bold** are counted towards our education contacts.

SmileHealthy
Champaign County Board of Health
Fiscal Year 2012 Report

	Dec 11	Jan 12	Feb 12*	March 12	April 12	May 12	June 12	July 12	Aug 12	Sep 12	Oct 12	Nov 12	Total
Bondville		1											1
Broadlands		3		2							3		8
Champaign	21	32	30	55	46	42	8	72	19	76	50	40	491
Dewey													0
Fisher								1				1	2
Foosland				1		1		1					3
Gifford	1				4			1	3	1			10
Homer			1	1	1				4		2		9
Ivesdale													0
Ludlow	1			1	1			1	2	1	3	15	25
Mahomet	2	4	5	8	1	8		3	3	6	2	59	101
Ogden	1		1	5	1	3	1		1	2	2	2	19
Penfield			2			1				2			6
Pesotum			2	1									4
Philo			3			2		2				3	10
Rantoul	36	29	31	35	17	73	2	51	54	83	42	36	489
Royal			2	2									4
Sadorus	3		6							1			10
Savoy	6	2	3	7	3	9	3	3	10	7	6	7	66
Seymour		2	1								2	4	9
Sidney						3	2		1			2	8
St. Joseph	2	3		2	36	1		5	2	4	3	8	66
Thomasboro		26				4		1	1	2	1	2	37
Tolono	28	3	15	3		3	1	8	1			2	64
Urbana	18	18	24	27	22	25	6	34	14	24	24	24	260
Other/Unk		296	221	27	6		2		2	3	2	1	560
Total	119	419	347	177	138	175	25	183	117	212	142	208	

**Total Unique
Patients in FY**

119	514	891	990	1120	1283	1292	1404	1482	1629	1683	1816
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Education

Contacts	362	393	1042	835	1266	306	462	40	845	337	1305	645	7838
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Champaign and Urbana children seen either live outside city limits and are county residents or are part of the Head Start program and paid for by Medicaid or other funding.

*Feb will include patients from Give Kids A Smile with C-UPHD and IDDS.



**Champaign County Board of Health
Monthly Report for December 2012, Fiscal Year 2013**

Total number of patients seen from all programs this month: **132**

Total number of unique patients in BOH Fiscal Year 2012: **132**

Breakdown of current month of patients for all programs by town.

- Broadlands: **2**
- Champaign: **33**
- Gifford: **1**
- Ludlow: **1**
- Mahomet: **3**
- Philo: **1**
- Rantoul: **40**
- Savoy: **6**
- Sidney: **2**
- Tolono: **17**
- Urbana: **20**
- Other: **6**

Clinic Events

12/4 Savoy H.S.
 12/6 Rantoul H.S.
 12/7 Unity West
 12/11 Savoy H.S.
 12/13 Rantoul
 12/14 Provena Sponsored Wesley Church
 12/14 P.R.O.P.S.
 12/18 CDAP First Presbyterian
 12/21 P.R.O.P.S.

Education and Outreach

December 4, Savoy Head Start, staff hygienist, presented educational materials to **58 children**.

December 5, Provena Medical Center, Family Nutrition and Dental Referral Program, staff hygienist presented educational materials and supplies to **2 adults** and **2 children**.

Meeting at Frances Nelson for preparations for El Toro Health fair, March, 2013. There were 4 present.

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www.smilehealthy.org

December 6, Savoy Head Start, staff hygienist presented educational materials to **58 children.**

December 10, Frances Nelson Health Center, staff hygienist met with Shirley Walker, educator to discuss dental education needs for the health center.

December 11, Savoy Head Start, staff hygienist presented educational materials to **58 children.**

CUPHD, CU Fit Families monthly meeting, staff hygienist along with 11 community members attended meeting.

December 13, Rantoul Head Start, staff hygienist presented educational materials to **72 children.**

Carle Hospital, staff hygienist met with Alan Rinehart and Barb Dahlenberg to plan for Dental Emergency Education Referral Program.

December 18, Champaign Head Start, staff hygienist presented education materials to **50 children.**

Rantoul Head Start, staff hygienist presented education materials to **40 children.**

December 20, Urbana Head Start, staff hygienist presented education materials to **54 children.**

Only those in **bold** are counted towards our education contacts.

SmileHealthy
Champaign County Board of Health
Fiscal Year 2012 Report

	Dec 12	Jan 13	Feb 13	March 13	April 13*	May 13	June 13	July 13	Aug 13	Sep 13	Oct 13	Nov 13	Total
Bondville													0
Broadlands	2												2
Champaign	33												33
Dewey													0
Fisher													0
Foosland													0
Gifford	1												1
Homer													0
Ivesdale													0
Ludlow	1												1
Mahomet	3												3
Ogden													0
Penfield													0
Pesotum													0
Philo	1												1
Rantoul	40												40
Royal													0
Sadorus													0
Savoy	6												6
Seymour													0
Sidney	2												2
St. Joseph													0
Thomasboro													0
Tolono	17												17
Urbana	20												20
Other/Unk	6												6
Total	132	0	0	0	0	0	0	0	0	0	0	0	

Total Unique Patients in FY 132

Education

Contacts 394

394

Champaign and Urbana children seen either live outside city limits and are county residents or are part of the Head Start program and paid for by Medicaid or other funding.

* Feb will include patients from Give Kids A Smile with C-UPHD and IDDS.



**Champaign County Board of Health
Monthly Report for January 2013, Fiscal Year 2013**

Total number of patients seen from all programs this month: **173**

Total number of unique patients in BOH Fiscal Year 2012: **276**

Breakdown of current month of patients for all programs by town.

- Broadlands: **1**
- Champaign: **44**
- Ludlow: **1**
- Mahomet: **15**
- Rantoul: **42**
- Sadorus: **2**
- Savoy: **9**
- St. Joseph: **3**
- Thomasboro: **32**
- Tolono: **3**
- Urbana: **20**
- Other: **1**

Clinic Events

Jan 8 First Presbyterian CDAP
 Jan 14 Rantoul Head Start
 Jan 16 Mahomet Restorative
 Jan 22 Champaign Head Start CF2 only
 Jan 23 Rantoul Head Start
 Jan 24 Rantoul Head Start
 Jan 24 Patterson/Parson Day
 Jan 25 Thomasboro Grade School
 Jan 25 P.R.O.P.S
 Jan 26 Wesley Church Presence Sponsored Day
 Jan 28 Mahomet Restorative
 Jan 30 Champaign Head Start

Education and Outreach

January 8, Presence Health Care, Family Nutrition and Dental Referral Program, there were not any participants at this event.

Savoy Head Start, staff hygienist presented education materials and supplies to **108 children**.

January 9, Rantoul Head Start, staff hygienist presented education materials and supplies to **72 children**.

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www.smilehealthy.org

Frances Nelson Health Center, staff hygienist presented education materials to **10 adults** during well-child visits.

January 14, Community Elements, National Alliance on Mental Illness monthly meeting, Staff hygienist presented education on SmileHealthy programs, oral health, distributed supplies and materials to **30 adults**.

January 15, Rantoul Head Start, staff hygienist presented education materials and supplies to **38 children**.

January 16, Presence Health Care, El Toro Health fair planning meeting, discussed needs for health fair, 10 community members present.

January 17, Urbana Head Start, staff hygienist presented education materials and supplies to **54 children**.

Frances Nelson Health Center, staff hygienist presented education materials to **10 adults** during well child visits.

January 18, Frances Nelson Health Center, staff hygienist presented education materials to **8 adults** during well-child visits.

January 21, Frances Nelson Health Center, staff hygienist presented education materials to **10 adults** during well-child visits.

January 22, Champaign Head Start, staff hygienist presented education materials to **36 children**. Champaign Head Start, staff hygienist applied fluoride varnish to 7 early head start children.

*Presence Health Care, Family Nutrition and Dental Referral Program, there were no participants at this program.

January 23, Daily Soup Kitchen, New Covenant Fellowship, staff hygienist met with staff at soup kitchen to plan for upcoming speaking event.

Frances Nelson Health Center, staff hygienist presented education materials to **12 women** during pre-natal visits.

January 24, Savoy Head Start, staff hygienist presented education materials and supplies to **54 children**.

Champaign Urbana Public Health Department, Diabetes Coalition meeting, staff hygienist attended monthly meeting along with 12 community members.

January 29, Frances Nelson Health Center, staff hygienist presented education materials to **9 adults** during well-child visits.

January 30, Frances Nelson Health Center, staff hygienist presented education materials to **10 women** during pre-natal visits.

Only those in **bold** are counted towards our education contacts.

SmileHealthy
Champaign County Board of Health
Fiscal Year 2012 Report

	Dec 12	Jan 13	Feb 13	March 13	April 13*	May 13	June 13	July 13	Aug 13	Sep 13	Oct 13	Nov 13	Total
Bondville													0
Broadlands	2	1											3
Champaign	33	44											77
Dewey													0
Fisher													0
Foosland													0
Gifford	1												1
Homer													0
Ivesdale													0
Ludlow	1	1											2
Mahomet	3	15											18
Ogden													0
Pesotum													0
Philo	1												1
Rantoul	40	42											82
Royal													0
Sadorus		2											2
Savoy	6	9											15
Seymour													0
Sidney	2												2
St. Joseph		3											3
Thomasboro		32											32
Tolono	17	3											20
Urbana	20	20											40
Other/Unk	6	1											7
Total	132	173	0	0	0	0	0	0	0	0	0	0	

**Total Unique
Patients in FY**

132 276

Education

Contacts

394 461

855

Champaign and Urbana children seen either live outside city limits and are county residents or are part of the Head Start program and paid for by Medicaid or other funding.

*Feb will include patients from Give Kids A Smile with C-UPHD and IDDS.



**Champaign County Board of Health
Monthly Report for February 2013, Fiscal Year 2013**

Total number of patients seen from all programs this month: **216**

Total number of unique patients in BOH Fiscal Year 2012: **457**

Breakdown of current month of patients for all programs by town.

- Champaign: **42**
- Homer: **4**
- Mahomet: **8**
- Philo: **11**
- Rantoul: **45**
- Sadorus: **6**
- Savoy: **15**
- Sidney: **28**
- St. Joseph: **3**
- Thomasboro: **1**
- Tolono: **22**
- Urbana: **31**
- Other: **0**

Clinic Events

- Feb 4 Unity East ½ Day
- Feb 4 CDAP First Presbyterian
- Feb 6 UHS
- Feb 8 Unity Jr. High
- Feb 11 Rantoul Head Start
- Feb 13 Rantoul Head Start
- Feb 15 P.R.O.P.S.
- Feb 15 Wesley Church Presence sponsored
- Feb 18 Rantoul Head Start
- Feb 20 Rantoul Head Start
- Feb 25 CDAP First Presbyterian
- Feb 27 Savoy Head Start

Education and Outreach

February 1

Prenatal Clinic, Frances Nelson Health Center, staff hygienist presented education materials and supplies to **8 women**.

February 5

SmileHealthy – Mobile Dental Clinics - Frances Nelson Dental Center Coordinators
Head Start Dental Clinic - Child Dental Access Program - Dental Health Education
PO Box 154, Champaign, IL 61824-0154 – phone 217.359.7404 – fax: 217.352-9745
www.smilehealthy.org

Savoy Head Start, staff hygienist presented education materials and supplies to **54 children**.

Well Child visits, FNHC, staff hygienist presented education materials and supplies to **9 families**.

February 6

Daily Soup Kitchen, New Covenant Fellowship, staff hygienist presented education materials and supplies to **40 adults**.

February 7

Savoy Head Start, staff hygienist presented education materials and supplies to **54 children**.

February 8

FNHC, Prenatal visits, staff hygienist presented educational materials to **6 women**.

FNHC, Well child visits, staff hygienist presented education materials to **12 families**.

February 12

Savoy Head Start, staff hygienist presented education materials and supplies to **54 children**.

Provena Medical Center, Family Nutrition and Dental Referral Program, no participants.

FNHC, Well Child visits, staff hygienist presented education materials to **10 families**.

February 13

FNHC, Prenatal clinic, staff hygienist presented education materials to **8 women**.

Douglas Park, After school program, staff hygienist presented education materials and supplies to **28 children** and **3 adults**.

February 14

Rantoul Head Start, staff hygienist presented education materials and supplies to **72 children**.

FNHC, Well Child visits, staff hygienist presented education materials and supplies to **9 families**.

February 18

FNHC, Well Child visits, staff hygienist presented education materials and supplies to **11 families**.

February 19



Rantoul Head Start, staff hygienist presented education materials and supplies to **36 children**.

Champaign Head Start, staff hygienist presented education materials and supplies to **36 children**.

Urbana Head Start, staff hygienist presented education materials and supplies to **5 adults** for parent meeting.

February 20

FNHC, Prenatal clinic, staff hygienist presented education materials to **14 women**.

February 21

Urbana Head Start, staff hygienist presented education materials and supplies to **54 children**

February 22

FNHC, Well Child visits, staff hygienist presented education materials and supplies to **10 families**.

February 26

Provena Medical Center, Family Nutrition Dental Referral Program, staff hygienist presented education materials and supplies to **2 adults**.

February 27

Provena Medical Center, El Toro Health Fair Planning meeting, staff hygienist along with 10 community members planned health fair for El Toro employees.

FNHC, Prenatal clinic, staff hygienist presented education materials to **8 women**.

February 28

FNHC, Well child visits, staff hygienist presented education materials to **11 families**.

CUPHD, Diabetes Coalition meeting, staff hygienist along with 12 community and health professionals met to discuss community Diabetes awareness and needs.

Only those in **bold** are counted towards our education contacts.

SmileHealthy – Mobile Dental Clinics - Frances Nelson Dental Center Coordinators
 Head Start Dental Clinic - Child Dental Access Program - Dental Health Education
 PO Box 154, Champaign, IL 61824-0154 – phone 217.359.7404 – fax: 217.352-9745
www.smilehealthy.org

SmileHealthy
Champaign County Board of Health
Fiscal Year 2012 Report

	Dec 12	Jan 13	Feb 13	March 13	April 13*	May 13	June 13	July 13	Aug 13	Sep 13	Oct 13	Nov 13	Total
Bondville													0
Broadlands	2	1											3
Champaign	33	44	42										119
Dewey													0
Fisher													0
Foosland													0
Gifford	1												1
Homer			4										4
Ivesdale													0
Ludlow	1	1											2
Mahomet	3	15	8										26
Ogden													0
Penfield													0
Pesotum													0
Philo	1		11										12
Rantoul	40	42	45										127
Royal													0
Sadorus		2	6										8
Savoy	6	9	15										30
Seymour													0
Sidney	2		28										30
St. Joseph		3	3										6
Thomasboro		32	1										33
Tolono	17	3	22										42
Urbana	20	20	31										71
Other/Unk	6	1											7
Total	132	173	216	0	0	0	0	0	0	0	0	0	

**Total Unique
Patients in FY**

132 276 457

Education

Contacts

394 461 554

1409

Champaign and Urbana children seen either live outside city limits and are county residents or are part of the Head Start program and paid for by Medicaid or other funding.

*Feb will include patients from Give Kids A Smile with C-UPHD and IDDS.

Invoice Number:	1210
Date of Invoice:	November 15, 2012
Billing Period:	September-12

To:


Champaign County Public Health Department
 1776 East Washington Street
 Urbana, Illinois 61802

For the Following Expenses:

533.07 Professional Services - LHPG Communicable Disease	\$	3,622.59
533.07 Professional Services - LHPG Disease Intervention	\$	5,115.67
533.07 Professional Services - LHPG Hepatitis	\$	740.41
533.07 Professional Services - LHPG Tuberculosis	\$	3,193.00
533.07 Professional Services - LHPG Food	\$	15,644.25
533.07 Professional Services - LHPG Water	\$	3,431.84
533.07 Professional Services - LHPG Sewage	\$	5,209.41
533.07 Professional Services - Vital Statistics	\$	216.33
533.07 Professional Services - Administration	\$	12,634.83
533.07 Professional Services - PHEP Grant	\$	7,778.06
533.07 Professional Services - TFC Grant	\$	5,630.65
533.07 Professional Services - Vector Surveillance & Control Grant	\$	2,565.02
533.07 Professional Services - County Well Water Testing	\$	160.89
Total Amount Due to CUPHD per Contract	\$	65,942.95

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.



 Authorized Agency Official

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 27180009
 Program Name: PHP FY 2012
 Billing Period: Sep-12
 Preparer's Email: ethomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$1,194.52	\$0.00
Subtotal Fringe Benefits			\$431.55	\$0.00
Subtotal Contractual			\$0.00	\$0.00
Subtotal Travel			\$0.00	\$0.00
Subtotal Commodities			\$0.00	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$0.00	\$0.00
Administrative Costs			\$0.00	\$0.00
Grand Total (Page Total)			\$1,626.07	\$416.67
Adjustment to total		Adjusted total		\$416.67

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 11-9-12

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

**Illinois Department of Public Health
 Office of Preparedness & Response
 Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
FEIN: 37-6006910
Date Submitted: 11/9/2012

Grant Number: 27180009
Program Name: PHP FY 2012
Billing Period: Sep-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	9/1/12-9/30/12	\$116.99	
Social Security	FICA/Medicare	9/1/12-9/30/12	\$86.99	
Group Insurance	Health, Life, Worker's Comp & Unemployment	9/1/12-9/30/12	\$227.57	
Subtotal Fringe Benefits			\$431.55	
Contractual				
Subtotal Contractual			\$0.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012

Grant Number: 27180009
 Program Name: PHP FY 2012
 Billing Period: Sep-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Travel				
Subtotal Travel			\$0.00	\$0.00
Commodities				
Subtotal Commodities			\$0.00	\$0.00
Printing				
Subtotal Printing			\$0.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012

Grant Number: 27180009
 Program Name: PHP FY 2012
 Billing Period: Sep-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Equipment				
Subtotal Equipment			\$0.00	\$0.00
Telecommunications				
Subtotal Telecommunications			\$0.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department Grant Number: 37180009A
 FEIN: 37-6006910 Program Name: PHP FY 2013
 Date Submitted: 11/9/2012 Billing Period: Aug-12
 Preparer's Name: Esther Thomas Preparer's Email: ethomas@c-uphd.org
 Preparer's Phone: 217-531-4262

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$1,721.13	\$11.38
Subtotal Fringe Benefits			\$483.39	\$2.10
Subtotal Contractual			\$1,892.00	\$0.00
Subtotal Travel			\$43.92	\$0.00
Subtotal Commodities			\$24.49	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$80.00	\$0.00
Administrative Costs			\$0.00	\$603.84
Grand Total (Page Total)			\$4,244.93	\$617.32
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 11-9-12

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department Grant Number: 37180009A
 FEIN: 37-6006910 Program Name: PHP FY 2013
 Date Submitted: 11/9/2012 Billing Period: Aug-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Salaries and Wages				
Jane Li	Emergency Response Planner	8/1/12-8/31/12	\$699.09	
Awais Vaid	Epidemiologist	8/1/12-8/31/12	\$620.41	
Jim Roberts	Environmental Health Director	8/1/12-8/31/12	\$108.78	
Candi Crause	Infectious Disease Director	8/1/12-8/31/12	\$0.00	
Julie Pryde	Administrator	8/1/12-8/31/12	\$0.00	
Jamie Perry	Nursing Services Manager	8/1/12-8/31/12	\$198.36	
Theresa Truelove	Nurse	8/1/12-8/31/12	\$26.84	
Jennifer Deakin	Nurse	8/1/12-8/31/12	\$17.25	
Penny Shonkwiler	Nurse	8/1/12-8/31/12	\$50.40	
Various CUPHD staff	EP Training	8/1/12-8/31/12		\$11.38
Subtotal Salaries and Wages			\$1,721.13	\$11.38

Illinois Department of Public Health
 Office of Preparedness & Response
 Reimbursement Certification Form

Grantee Name: Champaign County Public Health Department Grant Number: 37180009A
 FEIN: 37-6006910 Program Name: PHP FY 2013
 Date Submitted: 11/9/2012 Billing Period: Aug-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	8/1/12-8/31/12	\$171.31	\$1.17
Social Security	FICA/Medicare	8/1/12-8/31/12	\$127.00	\$0.87
Group Insurance	Health, Life, Worker's Comp & Unemployment	8/1/12-8/31/12	\$185.08	\$0.06
Subtotal Fringe Benefits			\$483.39	\$2.10
Contractual				
Regional Planning Commission	GIS Service	8/1/12-8/31/12	\$1,892.00	
Subtotal Contractual			\$1,892.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Aug-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Travel				
Jane Li	Local & Area Meetings	8/1/12-8/31/12	\$22.20	
Awais Vaid	Local & Area Meetings	8/1/12-8/31/12	\$21.72	
Subtotal Travel			\$43.92	\$0.00
Commodities				
Masks N More	Office Supplies	8/1/12-8/31/12	\$22.85	
R.K. Dixon	Office Supplies	8/1/12-8/31/12	\$1.64	
Subtotal Commodities			\$24.49	\$0.00
Printing				
Subtotal Printing			\$0.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department Grant Number: 37180009A
 FEIN: 37-6006910 Program Name: PHP FY 2013
 Date Submitted: 11/9/2012 Billing Period: Aug-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Equipment				
Subtotal Equipment			\$0.00	\$0.00
Telecommunications				
Motorola	Starcom Radio Fees	8/1/12-8/31/12	\$80.00	
Subtotal Telecommunications			\$80.00	\$80.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Sep-12
 Preparer's Email: ethomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$1,278.04	\$0.00
Subtotal Fringe Benefits			\$459.56	\$0.00
Subtotal Contractual			\$2.97	\$0.00
Subtotal Travel			\$83.72	\$0.00
Subtotal Commodities			\$2.77	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$80.00	\$0.00
Administrative Costs			\$0.00	\$617.32
Grand Total (Page Total)			\$1,907.06	\$617.32
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 11-9-12

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Sep-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Salaries and Wages				
Jane Li	Emergency Response Planner	9/1/12-9/30/12	\$657.71	
Awais Vaid	Epidemiologist	9/1/12-9/30/12	\$464.09	
Jim Roberts	Environmental Health Director	9/1/12-9/30/12	\$72.74	
Candi Crause	Infectious Disease Director	9/1/12-9/30/12	\$0.00	
Julie Pryde	Administrator	9/1/12-9/30/12	\$0.00	
Jamie Perry	Nursing Services Manager	9/1/12-9/30/12	\$83.50	
Theresa Truelove	Nurse	9/1/12-9/30/12	\$0.00	
Jennifer Deakin	Nurse	9/1/12-9/30/12	\$0.00	
Penny Shonkwiler	Nurse	9/1/12-9/30/12	\$0.00	
Subtotal Salaries and Wages			\$1,278.04	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department Grant Number: 37180009A
 FEIN: 37-6006910 Program Name: PHP FY 2013
 Date Submitted: 11/9/2012 Billing Period: Sep-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	9/1/12-9/30/12	\$124.85	
Social Security	FICA/Medicare	9/1/12-9/30/12	\$92.84	
Group Insurance	Health, Life, Worker's Comp & Unemployment	9/1/12-9/30/12	\$241.87	
Subtotal Fringe Benefits			\$459.56	\$0.00
Contractual				
USPS/Fitney Bowes	Postage	9/1/12-9/30/12	\$2.97	
Subtotal Contractual			\$2.97	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Sep-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Travel				
Jane Li	Local & Area Meetings	9/1/12-9/30/12	\$16.50	
Awais Vaid	Local & Area Meetings	9/1/12-9/30/12	\$7.88	
Brandon Meline	Local & Area Meetings - Zip car for Jane Li, Springfield meeting	9/1/12-9/30/12	\$59.34	
Subtotal Travel			\$83.72	\$0.00
Commodities				
Jane Li	Office Supplies	9/1/12-9/30/12	\$1.38	
R.K. Dixon	Office Supplies	9/1/12-9/30/12	\$1.39	
Subtotal Commodities			\$2.77	\$0.00
Printing				
Subtotal Printing			\$0.00	\$0.00

Illinois Department of Public Health
 Office of Preparedness & Response
 Reimbursement Certification Form

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/9/2012
 Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Sep-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Equipment				
Subtotal Equipment			\$0.00	\$0.00
Telecommunications				
Motorola	Starcom Radio Fees	9/1/12-9/30/12	\$80.00	
Subtotal Telecommunications			\$80.00	\$0.00

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM

Fiscal Contact Person: Esther Thomas

Telephone Number: 217-531-4262

Email Address: esthomas@cuphd.org

Date Submitted: 11/15/12

Please submit reimbursements to: Illinois Department of Public Health, Tobacco Control Program,
 Attn: Gail DeVito, 535 W. Jefferson, 2nd Floor, Springfield IL 62761 or email to gail.devito@illinois.gov

Agency Name: Champaign County Public Health Department		In the box below, please enter reimbursement amounts submitted for your FY11 grant.												
FEIN #:	37-6006910	July	August	September	October	November	December	January	February	March	April	May	June	YTD
		\$1,713.98												\$1,713.98
Grant #:	33281009A	Billing Period: July-12												
Program Name:	Illinois Tobacco-Free Communities													
Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH										Components (specify)	
Personal Services (Salary & Wages)														
Nikki Hillier	Program Coordinator	7/1/12-7/31/12												\$600.67
Jennifer Jackson	Health Educator II	7/1/12-7/31/12												\$688.76
Total Personal Services														\$1,289.43
Fringe Benefits														
FICA	FICA	7/1/12-7/31/12												\$88.60
IMRF	IMRF	7/1/12-7/31/12												\$112.15
Workmen's Compensation	Workmen's Compensation	7/1/12-7/31/12												\$22.30
Group Insurance	Health, Life & Unemployment	7/1/12-7/31/12												\$11.90
Total Fringe Benefits														\$234.95
Contractual Services														
USPS/Pitney Bowes	Postage	7/1/12-7/31/12												\$7.45
Total Contractual														\$7.45
Travel														
Nikki Hillier	Meetings, programs, outreach mileage	7/1/12-7/31/12												\$19.43
Jennifer Jackson	National Tobacco Conference	7/1/12-7/31/12												\$160.00
Total Travel														\$179.43
Printing														
R.K. Dixon	Photocopies	7/1/12-7/31/12												\$2.72
Total Printing														\$2.72
Supplies														
Total Supplies														\$0.00
Grand Total														\$1,713.98

Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.


 Authorized Agency Official
 Date: 11-15-12

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Fiscal Contact Person: Esther Thomas
 Telephone Number: 217-531-4262
 Email Address: esthomas@cuphd.org
 Date Submitted: 11/15/12

Please submit reimbursements to: Illinois Department of Public Health, Tobacco Control Program,
 Attn: Gail DeVito, 635 W. Jefferson, 2nd Floor, Springfield IL 62761 or email to gail.devito@illinois.gov

Agency Name: FEIN #:	In the box below, please enter reimbursement amounts submitted for your FY11 grant.												
	July	August	September	October	November	December	January	February	March	April	May	June	YTD
Champaign County Public Health Department 37-6006910	\$1,713.98	\$2,488.45											\$4,202.43
Grant #:	33281009A												
Program Name:	Illinois Tobacco-Free Communities												
Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Components (specify)									
Personal Services (Salary & Wages) Nikki Hillier Jennifer Jackson	Program Coordinator Health Educator II	8/1/12-8/31/12 8/1/12-8/31/12	\$525.36 \$480.04										
Total Personal Services			\$1,005.40										
Fringe Benefits													
FICA		8/1/12-8/31/12	\$69.54										
IMRF		8/1/12-8/31/12	\$91.80										
Workmen's Compensation		8/1/12-8/31/12	\$16.06										
Group Insurance		8/1/12-8/31/12	\$3.43										
Total Fringe Benefits			\$180.83										
Contractual Services													
Comcast Financial Agency Corp	Insight Spotlight TV commercials	8/1/12-8/31/12	\$137.00										
WDWS	uRock radio advertisements	8/1/12-8/31/12	\$100.00										
Total Contractual			\$237.00										
Travel													
Nikki Hillier	National Tobacco Conference - J.Jackso	8/1/12-8/31/12	\$889.78										
Jennifer Jackson	National Tobacco Conference	8/1/12-8/31/12	\$174.49										
Total Travel			\$1,064.27										
Printing													
R.K. Dixon	Photocopies	8/1/12-8/31/12	\$0.95										
Total Printing			\$0.95										
Supplies													
Total Supplies			\$0.00										
Grand Total			\$2,488.45										

Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.


 Authorized Agency Official
 Date 11.15.12


**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Fiscal Contact Person: Esther Thomas
 Telephone Number: 217-531-4262
 Email Address: esthomas@c-uphd.org
 Date Submitted: 11/15/12

Please submit reimbursements to: Illinois Department of Public Health, Tobacco Control Program,
 Attn: Gail DeVito, 535 W. Jefferson, 2nd Floor, Springfield IL 62761 or email to gail.devito@illinois.gov

Agency Name: Champaign County Public Health Department FEIN #: 37-6006910		In the box below, please enter reimbursement amounts submitted for your FY11 grant.					
		July	August	September	October	November	December
Grant #: 33281009A		January	February	March	April	May	June
Program Name: Illinois Tobacco-Free Communities		September-12					
Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Components (specify)			
Personal Services (Salary & Wages)							
Nikki Hillier	Program Coordinator	9/1/12-9/30/12	\$409.67				
Jennifer Jackson	Health Educator II	9/1/12-9/30/12	\$212.74				
Talia Oakley	Health Educator I	9/1/12-9/30/12	\$469.56				
Total Personal Services			\$1,091.97				
Fringe Benefits							
FICA	FICA	9/1/12-9/30/12	\$80.28				
IMRF	IMRF	9/1/12-9/30/12	\$105.30				
Workmen's Compensation	Workmen's Compensation	9/1/12-9/30/12	\$10.23				
Group Insurance	Health, Life & Unemployment	9/1/12-9/30/12	\$108.20				
Total Fringe Benefits			\$304.01				
Contractual Services							
Total Contractual			\$0.00				
Travel							
Total Travel			\$0.00				
Printing							
R.K. Dixon	Photocopies	9/1/12-9/30/12	\$0.25				
Total Printing			\$0.25				
Supplies							
CUPHD Central Supply	Office Supplies	9/1/12-9/30/12	\$31.99				
Total Supplies			\$31.99				
Grand Total			\$1,428.22				\$5,630.55 YTD

Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.


 Authorized Agency Official
 Date 11/15/12

County Vector Surveillance & Control
September 2012

	Sep-12
PERSONAL SERVICES	
Jeff Blackford	\$1,002.16
Tyler Hassert	\$307.06
Jim Roberts	\$9.77
Veronica Steege	\$373.11
Total Personal Services	1,692.10
FRINGE BENEFITS	
IMRF	103.50
FICA	129.01
Health Insurance	139.75
Life Insurance	0.42
Illinois Unemployment Comp.	23.46
Workmen's Compensation	88.10
Total Fringe Benefits	484.24
Total Personal Services & Fringe Benefits	2,176.34
CONTRACTUAL SERVICES	
Printing	0.35
Training	60.00
Total Contractual Services	60.35
TRAVEL	
Mileage	306.92
Total Travel	306.92
TELECOMMUNICATIONS	
Total Telecommunications	-
SUPPLIES	
Office Supplies	15.84
Program Materials	5.57
Total Supplies	21.41
Total	2,565.02

County Well Water Testing
September 2012

	Sep-12
PERSONAL SERVICES	
Michael Flanagan	\$105.91
Tammy Hamilton	\$8.38
Total Personal Services	114.29
FRINGE BENEFITS	
FICA	8.74
IMRF	11.11
Health Insurance	2.40
Life Insurance	0.09
Illinois Unemployment Comp.	-
Workmen's Compensation	5.56
Total Fringe Benefits	27.90
Total Personal Services & Fringe Benefits	142.19
CONTRACTUAL SERVICES	
Printing	0.05
Postage	16.98
Total Contractual Services	17.03
SUPPLIES	
Total Supplies	-
TRAVEL	
Mileage	1.67
Total Travel	1.67
EQUIPMENT	
Total Equipment	-
Total	160.89

Invoice Number:	1211
Date of Invoice:	November 21, 2012
Billing Period:	October-12

To:

Champaign County Public Health Department
 1776 East Washington Street
 Urbana, Illinois 61802

For the Following Expenses:

533.07 Professional Services - LHPG Communicable Disease	\$	3,622.59
533.07 Professional Services - LHPG Disease Intervention	\$	5,115.67
533.07 Professional Services - LHPG Hepatitis	\$	740.41
533.07 Professional Services - LHPG Tuberculosis	\$	3,193.00
533.07 Professional Services - LHPG Food	\$	15,644.25
533.07 Professional Services - LHPG Water	\$	3,431.84
533.07 Professional Services - LHPG Sewage	\$	5,209.41
533.07 Professional Services - Vital Statistics	\$	216.33
533.07 Professional Services - Administration	\$	12,634.83
533.07 Professional Services - PHEP Grant	\$	28,149.48
533.07 Professional Services - TFC Grant	\$	1,516.23
533.07 Professional Services - Vector Surveillance & Control Grant	\$	1,617.98
533.07 Professional Services - County Well Water Testing	\$	49.58
Total Amount Due to CUPHD per Contract	\$	<u>81,141.60</u>

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.



 Authorized Agency Official


**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/20/2012
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 27180009
 Program Name: PHP FY 2012
 Billing Period: Oct-12
 Preparer's Email: ethomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$0.00	\$0.00
Subtotal Fringe Benefits			\$0.00	\$0.00
Subtotal Contractual			\$0.00	\$0.00
Subtotal Travel			\$0.00	\$0.00
Subtotal Commodities			\$0.00	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$25,000.00	\$0.00
Subtotal Telecommunications			\$0.00	\$0.00
Administrative Costs			\$0.00	\$833.33
Grand Total (Page Total)			\$25,000.00	\$833.33
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 11/21/12

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/20/2012

Grant Number: 27180009
 Program Name: PHP FY 2012
 Billing Period: Oct-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	10/1/12-10/31/12	\$0.00	
Social Security	FICA/Medicare	10/1/12-10/31/12	\$0.00	
Group Insurance	Health, Life, Worker's Comp & Unemployment	10/1/12-10/31/12	\$0.00	
Subtotal Fringe Benefits			\$0.00	
Contractual				
Subtotal Contractual			\$0.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/20/2012
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Oct-12
 Preparer's Email: esthomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$2,211.64	\$0.00
Subtotal Fringe Benefits			\$838.08	\$0.00
Subtotal Contractual			\$0.45	\$0.00
Subtotal Travel			\$4.30	\$0.00
Subtotal Commodities			\$15.01	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$80.00	\$0.00
Administrative Costs			\$0.00	\$617.32
Grand Total (Page Total)			\$3,149.48	\$617.32
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 11-21-12

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 11/20/2012

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Oct-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	10/1/12-10/31/12	\$214.69	
Social Security	FICA/Medicare	10/1/12-10/31/12	\$159.61	
Group Insurance	Health, Life, Worker's Comp & Unemployment	10/1/12-10/31/12	\$463.78	
Subtotal Fringe Benefits			\$838.08	\$0.00
Contractual				
USPS/Pitney Bowes	Postage	10/1/12-10/31/12	\$0.45	
Subtotal Contractual			\$0.45	\$0.00

Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form

Grantee Name: Champaign County Public Health Department
FEIN: 37-6006910
Date Submitted: 11/20/2012

Grant Number: 37180009A
Program Name: PHP FY 2013
Billing Period: Oct-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Travel				
Jane Li	Local & Area Meetings	10/1/12-10/31/12	\$4.30	
Subtotal Travel			\$4.30	\$0.00
Commodities				
Jane Li	Office Supplies	10/1/12-10/31/12	\$10.71	
R.K. Dixon	Office Supplies	10/1/12-10/31/12	\$4.30	
Subtotal Commodities			\$15.01	\$0.00
Printing				
Subtotal Printing			\$0.00	\$0.00

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Fiscal Contact Person: Esther Thomas
 Telephone Number: 217-531-4262
 Email Address: esthomas@i-sphhd.org
 Date Submitted: 11/20/12

Please submit reimbursements to: Illinois Department of Public Health, Tobacco Control Program,
 Attn: Gail DeVito, 535 W. Jefferson, 2nd Floor, Springfield IL 62761 or email to gail.devito@illinois.gov

Agency Name: FEIN #:	Champaign County Public Health Department						In the box below, please enter reimbursement amounts submitted for your FY11 grant.					
	July	August	September	October	November	December	January	February	March	April	May	June
37-6006910	\$1,743.98	\$2,488.45	\$1,428.22	\$1,516.23								
Grant #:	33281009A						October-12					
Program Name:	Illinois Tobacco-Free Communities						Amount Claimed from IDPH					
Name / Vendor:	Title / Purpose						Components (Specify)					
Personal Services (Salary & Wages)												
Nikki Hillier	Program Coordinator						\$472.22					
Jennifer Jackson	Health Educator II						\$300.89					
Talia Oakley	Health Educator I						\$387.39					
Total Personal Services							\$1,160.50					
Fringe Benefits												
FICA	FICA						\$84.14					
IMRF	IMRF						\$109.11					
Workmen's Compensation	Workmen's Compensation						\$12.63					
Group Insurance	Health, Life & Unemployment						\$108.83					
Total Fringe Benefits							\$314.71					
Contractual Services												
Total Contractual							\$0.00					
Travel												
Nikki Hillier	Meetings, programs, outreach mileage						\$36.62					
Total Travel							\$36.62					
Printing												
R.K. Dixon	Photocopies						\$4.40					
Total Printing							\$4.40					
Supplies												
Total Supplies							\$0.00					
Grand Total							\$1,516.23					

Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.


 Authorized Agency Official
 Date 11-21-12

County Vector Surveillance & Control
October 2012

	Oct-12
PERSONAL SERVICES	
Jeff Blackford	\$658.30
Tyler Hassert	\$216.99
Veronica Steege	\$244.69
Total Personal Services	1,119.98
FRINGE BENEFITS	
IMRF	67.33
FICA	85.41
Health Insurance	101.71
Life Insurance	0.27
Illinois Unemployment Comp.	15.93
Workmen's Compensation	58.30
Total Fringe Benefits	328.95
Total Personal Services & Fringe Benefits	1,448.93
CONTRACTUAL SERVICES	
Printing	0.30
Postage	2.25
Total Contractual Services	2.55
TRAVEL	
Mileage	166.50
Total Travel	166.50
TELECOMMUNICATIONS	
Total Telecommunications	-
SUPPLIES	
Total Supplies	-
Total	1,617.98

County Well Water Testing
October 2012

	Oct-12
PERSONAL SERVICES	
Michael Flanagan	33.69
Tammy Hamilton	1.15
Total Personal Services	34.84
FRINGE BENEFITS	
FICA	2.66
IMRF	3.34
Health Insurance	0.55
Life Insurance	0.02
Illinois Unemployment Comp.	-
Workmen's Compensation	1.75
Total Fringe Benefits	8.32
Total Personal Services & Fringe Benefits	43.16
CONTRACTUAL SERVICES	
Printing	0.04
Postage	6.38
Total Contractual Services	6.42
SUPPLIES	
Total Supplies	-
TRAVEL	
Total Travel	-
EQUIPMENT	
Total Equipment	-
Total	49.58

Invoice Number:	1212
Date of Invoice:	December 6, 2012
Billing Period:	November-12

To:

Champaign County Public Health Department
 1776 East Washington Street
 Urbana, Illinois 61802

For the Following Expenses:

533.07 Professional Services - LHPG Communicable Disease	\$	3,622.59
533.07 Professional Services - LHPG Disease Intervention	\$	5,115.67
533.07 Professional Services - LHPG Hepatitis	\$	740.41
533.07 Professional Services - LHPG Tuberculosis	\$	3,193.00
533.07 Professional Services - LHPG Food	\$	15,644.25
533.07 Professional Services - LHPG Water	\$	3,431.84
533.07 Professional Services - LHPG Sewage	\$	5,209.41
533.07 Professional Services - Vital Statistics	\$	216.33
533.07 Professional Services - Administration	\$	12,634.83
533.07 Professional Services - PHEP Grant	\$	4,944.87
533.07 Professional Services - TFC Grant	\$	3,857.87
533.07 Professional Services - Vector Surveillance & Control Grant	\$	1,290.49
533.07 Professional Services - County Well Water Testing	\$	42.64
Total Amount Due to CUPHD per Contract	\$	<u>59,944.20</u>

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.



 Authorized Agency Official

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 12/6/2012
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 27180009
 Program Name: PHP FY 2012
 Billing Period: Nov-12
 Preparer's Email: ethomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$795.42	\$0.00
Subtotal Fringe Benefits			\$300.37	\$0.00
Subtotal Contractual			\$140.00	\$0.00
Subtotal Travel			\$0.00	\$0.00
Subtotal Commodities			\$0.00	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$0.00	\$0.00
Administrative Costs			\$0.00	\$833.33
Grand Total (Page Total)			\$1,235.79	\$833.33
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 12-6-12

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form

Grantee Name: Champaign County Public Health Department
FEIN: 37-6006910
Date Submitted: 12/6/2012

Grant Number: 27180009
Program Name: PHP FY 2012
Billing Period: Nov-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Salaries and Wages				
Jane Li	Emergency Response Planner	11/1/12-11/30/12	\$295.42	
Awais Vaid	Epidemiologist	11/1/12-11/30/12	\$500.00	
Jim Roberts	Environmental Health Director	11/1/12-11/30/12	\$0.00	
Candi Crause	Infectious Disease Director	11/1/12-11/30/12	\$0.00	
Julie Pryde	Administrator	11/1/12-11/30/12	\$0.00	
Subtotal Salaries and Wages			\$795.42	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 12/6/2012

Grant Number: 27180009
 Program Name: PHP FY 2012
 Billing Period: Nov-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	11/1/12-11-30/12	\$76.69	
Social Security	FICA/Medicare	11/1/12-11-30/12	\$56.98	
Group Insurance	Health, Life, Worker's Comp & Unemployment	11/1/12-11-30/12	\$166.70	
Subtotal Fringe Benefits			\$300.37	
Contractual				
MedPro Waste Disposal	Expired vaccine disposal	11/1/12-11-30/12	\$140.00	
Subtotal Contractual			\$140.00	\$0.00


**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 12/6/2012
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Nov-12
 Preparer's Email: ethomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$2,633.93	\$218.78
Subtotal Fringe Benefits			\$994.70	\$98.08
Subtotal Contractual			\$0.45	\$0.00
Subtotal Travel			\$0.00	\$0.00
Subtotal Commodities			\$0.00	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$80.00	\$0.00
Administrative Costs			\$0.00	\$300.46
Grand Total (Page Total)			\$3,709.08	\$617.32
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official  Date 12-6-12

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 12/6/2012

Grant Number: 37180009A
 Program Name: PHF FY 2013
 Billing Period: Nov-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	11/1/12-11/30/12	\$253.95	\$20.94
Social Security	FICA/Medicare	11/1/12-11/30/12	\$188.72	\$15.59
Group Insurance	Health, Life, Worker's Comp & Unemployment	11/1/12-11/30/12	\$552.03	\$61.55
Subtotal Fringe Benefits			\$994.70	\$98.08
Contractual				
USPS/Pitney Bowes	Postage	11/1/12-11/30/12	\$0.45	
Subtotal Contractual			\$0.45	\$0.00


ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM

Fiscal Contact Person: Esther Thomas
 Telephone Number: 217-531-4262
 Email Address: esthomas@i-uphd.org
 Date Submitted: 12/06/12

Please submit reimbursements to: Illinois Department of Public Health, Tobacco Control Program,
 Attn: Gail DeVito, 535 W. Jefferson, 2nd Floor, Springfield IL 62761 or email to gail.devito@illinois.gov

Agency Name: Champaign County Public Health Department FEIN #: 37-6006910		In the box below, please enter reimbursement amounts submitted for your FY11 grant.					
		July	August	September	October	November	December
Grant #: 33281009A		January	February	March	April	May	June
Program Name: Illinois Tobacco-Free Communities		Billing Period: November-12					
Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Components (Specify)			
Personal Services (Salary & Wages)							
Nikki Hillier	Program Coordinator	11/1/12-11/30/12	\$846.14				
Jennifer Jackson	Health Educator II	11/1/12-11/30/12	\$789.72				
Talia Oakley	Health Educator I	11/1/12-11/30/12	\$1,210.00				
Total Personal Services			\$2,845.86				
Fringe Benefits							
FICA	FICA	11/1/12-11/30/12	\$205.62				
IMRF	IMRF	11/1/12-11/30/12	\$267.86				
Workmen's Compensation	Workmen's Compensation	11/1/12-11/30/12	\$32.17				
Group Insurance	Health, Life & Unemployment	11/1/12-11/30/12	\$331.42				
Total Fringe Benefits			\$837.07				
Contractual Services							
Total Contractual			\$0.00				
Travel							
Talia Oakley	Meetings, programs, outreach mileage	11/1/12-11/30/12	\$174.94				
Total Travel			\$174.94				
Printing							
Total Printing			\$0.00				
Supplies							
Total Supplies			\$0.00				
Grand Total			\$3,857.87				

Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.


 Authorized Agency Official
 Date 12.6.12

County Vector Surveillance & Control
November 2012

	Nov-12
PERSONAL SERVICES	
Jeff Blackford	\$381.14
Jim Roberts	\$390.90
Veronica Steege	\$158.58
Total Personal Services	930.62
FRINGE BENEFITS	
IMRF	91.33
FICA	79.91
Health Insurance	126.57
Life Insurance	0.33
Illinois Unemployment Comp.	5.47
Workmen's Compensation	56.26
Total Fringe Benefits	359.87
Total Personal Services & Fringe Benefits	1,290.49
CONTRACTUAL SERVICES	
Total Contractual Services	-
TRAVEL	
Total Travel	-
TELECOMMUNICATIONS	
Total Telecommunications	-
SUPPLIES	
Total Supplies	-
Total	1,290.49

County Well Water Testing
November 2012

	Nov-12
PERSONAL SERVICES	
Michael Flanagan	11.23
Tammy Hamilton	16.11
Total Personal Services	27.34
FRINGE BENEFITS	
FICA	2.08
IMRF	2.74
Health Insurance	3.42
Life Insurance	0.02
Illinois Unemployment Comp.	-
Workmen's Compensation	0.66
Total Fringe Benefits	8.92
Total Personal Services & Fringe Benefits	36.26
CONTRACTUAL SERVICES	
Postage	6.38
Total Contractual Services	6.38
SUPPLIES	
Total Supplies	-
TRAVEL	
Total Travel	-
EQUIPMENT	
Total Equipment	-
Total	42.64

Invoice Number:	1301
Date of Invoice:	February 5, 2013
Billing Period:	December-12

To:
 Champaign County Public Health Department
 1776 East Washington Street
 Urbana, Illinois 61802

For the Following Expenses:

533.07 Professional Services - LHPG Communicable Disease	\$	3,834.09
533.07 Professional Services - LHPG Disease Intervention	\$	5,418.33
533.07 Professional Services - LHPG Hepatitis	\$	576.75
533.07 Professional Services - LHPG Tuberculosis	\$	2,339.92
533.07 Professional Services - LHPG Food	\$	13,372.91
533.07 Professional Services - LHPG Water	\$	5,371.59
533.07 Professional Services - LHPG Sewage	\$	7,062.33
533.07 Professional Services - Vital Statistics	\$	146.00
533.07 Professional Services - Administration	\$	13,596.25
533.07 Professional Services - PHEP Grant	\$	3,955.10
533.07 Professional Services - TFC Grant	\$	2,346.05
533.07 Professional Services - Vector Surveillance & Control Grant	\$	-
533.07 Professional Services - County Well Water Testing	\$	42.85
Total Amount Due to CUPHD per Contract	\$	58,062.17

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.



 Authorized Agency Official

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

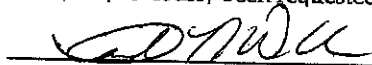
Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 1/23/2013
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Dec-12
 Preparer's Email: ethomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$2,761.80	\$0.00
Subtotal Fringe Benefits			\$1,098.82	\$0.00
Subtotal Contractual			\$0.45	\$0.00
Subtotal Travel			\$11.28	\$6.66
Subtotal Commodities			\$2.75	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$80.00	\$0.00
Administrative Costs			\$0.00	\$610.66
Grand Total (Page Total)			\$3,955.10	\$617.32
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official



Date

1-23-13

Illinois Department of Public Health, Office of Preparedness and Response Use only
 Control Number _____ Processing date _____

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 1/23/2013

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Dec-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	12/1/12-12/31/12	\$274.24	
Social Security	FICA/Medicare	12/1/12-12/31/12	\$196.97	
Group Insurance	Health, Life, Worker's Comp & Unemployment	12/1/12-12/31/12	\$627.61	
Subtotal Fringe Benefits			\$1,098.82	\$0.00
Contractual				
USPS/Pitney Bowes	Postage	12/1/12-12/31/12	\$0.45	
Subtotal Contractual			\$0.45	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 1/23/2013

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Dec-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Travel				
Jane Li	Local & Area Meetings	12/1/12-12/31/12	\$4.06	
Jim Roberts	Local & Area Meetings	12/1/12-12/31/12	\$7.22	
CUPHD Staff	EP Training	12/1/12-12/31/12		\$6.66
Subtotal Travel			\$11.28	\$6.66
Commodities				
R.K. Dixon	Office Supplies	12/1/12-12/31/12	\$2.75	
Subtotal Commodities			\$2.75	\$0.00
Printing				
Subtotal Printing			\$0.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 1/23/2013

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Dec-12

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Equipment				
Subtotal Equipment			\$0.00	\$0.00
Telecommunications				
Motorola	Starcom Radio Fees	12/1/12-12/31/12	\$80.00	
Subtotal Telecommunications			\$80.00	\$0.00

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Fiscal Contact Person: Ether Thomas
 Telephone Number: 217-531-4282
 Email Address: etthomas@icphd.org
 Date Submitted: 01/22/13

Please submit reimbursements to: Illinois Department of Public Health, Tobacco Control Program,
 Attn: Gail DeVito, 635 W. Jefferson, 2nd Floor, Springfield IL 62781 or e-mail to gail.devito@illinois.gov

		In the box below, please enter reimbursement amounts submitted for your FY11 grant.					
Agency Name:	Champaign County Public Health Department	\$1,713.98	July	\$1,516.23	October	January	April
FEIN #:	37-6006910	\$2,488.45	August	\$3,857.87	November	February	May
Grant #:	33281009A	\$1,428.22	September	\$2,346.05	December	March	June
Program Name:	Illinois Tobacco-Free Communities	\$13,360.80 YTD					
Billing Period:	December-12						
Agency Name	Agency Address	Period/Date Invoiced	Amount Billed from (Date)	Amount Paid (Date)	Balance Due (Date)	Comments	
Personal Services (Salary & Wages)							
Nikki Hillier	Program Coordinator	12/1/12-12/31/12	\$550.09				
Jennifer Jackson	Health Educator II	12/1/12-12/31/12	\$421.68				
Talia Oakley	Health Educator I	12/1/12-12/31/12	\$671.42				
Total Personal Services			\$1,643.19				
Fringe Benefits							
FICA	FICA	12/1/12-12/31/12	\$119.06				
IMRF	IMRF	12/1/12-12/31/12	\$161.10				
Workmen's Compensation	Workmen's Compensation	12/1/12-12/31/12	\$29.65				
Group Insurance	Health, Life & Unemployment	12/1/12-12/31/12	\$226.19				
Total Fringe Benefits			\$536.00				
Contractual Services							
USPS/Pitney Bowes	Postage	12/1/12-12/31/12	\$0.45				
Total Contractual			\$0.45				
Travel							
Nikki Hillier	Meetings, programs, outreach mileage	12/1/12-12/31/12	\$19.43				
Jennifer Jackson	Meetings, programs, outreach mileage	12/1/12-12/31/12	\$100.46				
Talia Oakley	Meetings, programs, outreach mileage	12/1/12-12/31/12	\$23.31				
Total Travel			\$143.20				
Printing							
R.K. Dixon	Photocopies	12/1/12-12/31/12	\$23.21				
Total Printing			\$23.21				
Supplies							
Total Supplies			\$0.00				
Grand Total			\$2,346.05				

Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.


 Authorized Agency Official 1-22-13
 Date

County Well Water Testing
December 2012

	Dec-12
PERSONAL SERVICES	
Michael Flanagan	\$11.23
Tammy Hamilton	\$5.75
Total Personal Services	16.98
FRINGE BENEFITS	
FICA	1.31
IMRF	1.67
Health Insurance	1.29
Life Insurance	0.01
Illinois Unemployment Comp.	-
Workmen's Compensation	0.62
Total Fringe Benefits	4.90
Total Personal Services & Fringe Benefits	21.88
CONTRACTUAL SERVICES	
Printing	0.09
Postage	17.55
Total Contractual Services	17.64
SUPPLIES	
Total Supplies	-
TRAVEL	
Mileage	3.33
Total Travel	3.33
EQUIPMENT	
Total Equipment	-
Total	42.85

Invoice Number:	1302
Date of Invoice:	March 5, 2013
Billing Period:	January-13

To:

Champaign County Public Health Department
 1776 East Washington Street
 Urbana, Illinois 61802

For the Following Expenses:

533.07 Professional Services - LHPG Communicable Disease	\$	3,834.09
533.07 Professional Services - LHPG Disease Intervention	\$	5,418.33
533.07 Professional Services - LHPG Hepatitis	\$	576.75
533.07 Professional Services - LHPG Tuberculosis	\$	2,339.92
533.07 Professional Services - LHPG Food	\$	13,372.91
533.07 Professional Services - LHPG Water	\$	5,371.59
533.07 Professional Services - LHPG Sewage	\$	7,062.33
533.07 Professional Services - Vital Statistics	\$	146.00
533.07 Professional Services - Administration	\$	13,596.25
533.07 Professional Services - PHEP Grant	\$	6,170.20
533.07 Professional Services - TFC Grant	\$	2,255.65
533.07 Professional Services - Smoke-Free IL Citation Fee Reimb.	\$	125.00
533.07 Professional Services - Vector Surveillance & Control Grant	\$	-
533.07 Professional Services - County Well Water Testing	\$	58.79
Total Amount Due to CUPHD per Contract	\$	60,327.81

CERTIFICATION:

I hereby certify that the amounts billed above agree with the approved budget; that appropriate purchasing procedures have been followed, and that reimbursement has not previously been requested or received.



 Authorized Agency Official

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

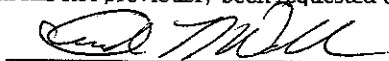
Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 3/5/2013
 Preparer's Name: Esther Thomas
 Preparer's Phone: 217-531-4262

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Jan-13
 Preparer's Email: ethomas@c-uphd.org

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind from LHD
Subtotal Salaries and Wages			\$2,889.16	\$29.81
Subtotal Fringe Benefits			\$1,205.38	\$7.10
Subtotal Contractual			\$1,978.46	\$0.00
Subtotal Travel			\$14.49	\$0.00
Subtotal Commodities			\$2.71	\$0.00
Subtotal Printing			\$0.00	\$0.00
Subtotal Equipment			\$0.00	\$0.00
Subtotal Telecommunications			\$80.00	\$0.00
Administrative Costs			\$0.00	\$580.41
Grand Total (Page Total)			\$6,170.20	\$617.32
Adjustment to total		Adjusted total		

CERTIFICATION: The undersigned hereby certifies that the goods and/or services claimed above are necessary expenditures for the program, are listed in the Department's approved budget (when a budget was requested and approved), that appropriate purchasing procedures have been followed, that payment has been made as indicated and that reimbursement has not previously been requested or received.

Authorized Grantee Official



Date

3-5-13

Illinois Department of Public Health, Office of Preparedness and Response Use only	
Control Number	Processing date

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
FEIN: 37-6006910
Date Submitted: 3/5/2013

Grant Number: 37180009A
Program Name: PHP FY 2013
Billing Period: Jan-13

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Salaries and Wages				
Jane Li	Emergency Response Planner	1/1/13-1/31/13	\$1,392.14	
Awais Vaid	Epidemiologist	1/1/13-1/31/13	\$1,280.16	
Jim Roberts	Environmental Health Director	1/1/13-1/31/13	\$44.72	
Candi Crause	Infectious Disease Director	1/1/13-1/31/13	\$0.00	
Julie Pryde	Administrator	1/1/13-1/31/13	\$0.00	
Jamie Perry	Nursing Services Manager	1/1/13-1/31/13	\$0.00	
Theresa Truelove	Nurse	1/1/13-1/31/13	\$0.00	
Jennifer Deakin	Nurse	1/1/13-1/31/13	\$0.00	
Penny Shonkwiler	Nurse	1/1/13-1/31/13	\$172.14	
Various CUPHD Staff	EP training	1/1/13-1/31/13		\$29.81
Subtotal Salaries and Wages			\$2,889.16	\$29.81

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
FEIN: 37-6006910
Date Submitted: 3/5/2013

Grant Number: 37180009A
Program Name: PHP FY 2013
Billing Period: Jan-13

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Fringe Benefits				
Retirement	IMRF	1/1/13-1/31/13	\$291.20	\$3.06
Social Security	FICA/Medicare	1/1/13-1/31/13	\$204.02	\$2.27
Group Insurance	Health, Life, Worker's Comp & Unemployment	1/1/13-1/31/13	\$710.16	\$1.77
Subtotal Fringe Benefits			\$1,205.38	\$7.10
Contractual				
UIUC Vet Med	GIS Services	1/1/13-1/31/13	\$1,978.00	
USPS/Pitney Bowes	Postage	1/1/13-1/31/13	\$0.46	
Subtotal Contractual			\$1,978.46	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health DepartmentGrant Number: 37180009AFEIN: 37-6006910Program Name: PHP FY 2013Date Submitted: 3/5/2013Billing Period: Jan-13

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Travel				
Awais Vaid	Local & Area Meetings	1/1/13-1/31/13	\$11.66	
Jim Roberts	Local & Area Meetings	1/1/13-1/31/13	\$2.83	
Subtotal Travel			\$14.49	\$0.00
Commodities				
R.K. Dixon	Office Supplies	1/1/13-1/31/13	\$2.71	
Subtotal Commodities			\$2.71	\$0.00
Printing				
Subtotal Printing			\$0.00	\$0.00

**Illinois Department of Public Health
Office of Preparedness & Response
Reimbursement Certification Form**

Grantee Name: Champaign County Public Health Department
 FEIN: 37-6006910
 Date Submitted: 3/5/2013

Grant Number: 37180009A
 Program Name: PHP FY 2013
 Billing Period: Jan-13

Name / Vendor	Title / Purpose	Period / Date Incurred	Amount Claimed from IDPH	Amount Matched / In-Kind by LHD
Equipment				
Subtotal Equipment			\$0.00	\$0.00
Telecommunications				
Motorola	Starcom Radio Fees	1/1/13-1/31/13	\$80.00	
Subtotal Telecommunications			\$80.00	\$0.00


**ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Office of Health Promotion
REIMBURSEMENT CERTIFICATION / EXPENDITURE FORM**

Fiscal Contact Person: Esther Thomas
 Telephone Number: 217-631-4282
 Email Address: esthomas@c-uphd.org
 Date Submitted: 02/22/13

Please submit reimbursements to: Illinois Department of Public Health, Tobacco Control Program,
 Attn: Gail DeVito, 535 W. Jefferson, 2nd Floor, Springfield IL 62761 or email to gail.devito@illinois.gov

		In the box below, please enter reimbursement amounts submitted for your FY11 grant.					
Agency Name:	Champaign County Public Health Department	July	August	September	October	November	December
FEIN #:	37-6006910	\$1,713.98	\$2,488.45	\$1,428.22	\$1,516.23	\$3,857.87	\$2,266.65
Grant #:	33281009A						
Program Name:	Illinois Tobacco-Free Communities						
Billing Period:	January-13						\$15,606.45 YTD
Personal Services (Salary & Wages)	PERSONAL SERVICES	Period of Service	Amount from IDPH	Comments (Specify)			
Nikki Hillier	Program Coordinator	1/1/13-1/31/13	\$496.59				
Jennifer Jackson	Health Educator II	1/1/13-1/31/13	\$484.23				
Tafia Oakley	Health Educator I	1/1/13-1/31/13	\$692.59				
Total Personal Services			\$1,673.41				
Fringe Benefits							
FICA	FICA	1/1/13-1/31/13	\$120.39				
IMRF	IMRF	1/1/13-1/31/13	\$166.35				
Workmen's Compensation	Workmen's Compensation	1/1/13-1/31/13	\$29.61				
Group Insurance	Health, Life & Unemployment	1/1/13-1/31/13	\$257.14				
Total Fringe Benefits			\$573.49				
Contractual Services							
USPS/Pitney Bowes	Postage	1/1/13-1/31/13	\$6.20				
Total Contractual			\$6.20				
Travel							
Total Travel			\$0.00				
Printing							
R.K. Dixon	Photocopies	1/1/13-1/31/13	\$2.55				
Total Printing			\$2.55				
Supplies							
Total Supplies			\$0.00				
Grand Total			\$2,255.65				

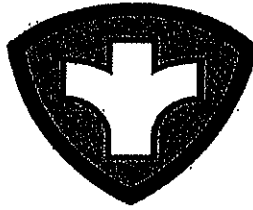
Certification: This signed document hereby certifies the goods and/or services claimed are necessary expenditures for the program, appropriate purchasing procedures have been followed, payment has been made as indicated and a reimbursement has not previously been requested or received.



 Authorized Agency Official

2-25-13

 Date



Public Health

Prevent. Promote. Protect.

Champaign-Urbana Public Health District

CHECK REQUEST

Requested By Nikki Hillier Date 01/15/13
Amount \$ \$125.00

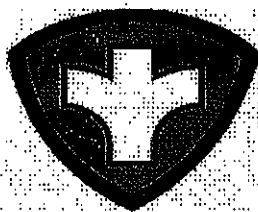
Vendor Information:

Payable to Illinois Department of Public Health
Address 535 W. Jefferson, 2nd Floor
City Springfield State IL ZIP 62761
Contact Person Gail DeVito Phone 217-785-1054 (Office)
Payable for Half of the money from a SFI citation
take from the money from St. joe IGA

Check Required When? ASAP Mail Check? Yes No

APPROVAL:
Requested By: SJ Approved By Division Director (< \$249): [Signature]

Transaction Number	Date	Description	Amount	Department	New Amount
11251013	01/15/2013	Smoking Fine - 1st - 107	125.00	10100	125.00
		Total	125.00		125.00



Public Health
Prevent. Promote. Protect.

Champaign-Urbana Public Health District

CHECK REQUEST

Requested By Esther Thomas Date 01/11/13
 Amount \$ \$250.00

Vendor Information:

Payable to Champaign County Public Health Department
 Address 1776 East Washington Street
 City Urbana State IL ZIP 61802
 Contact Person _____ Phone _____
 Payable for Smoke-Free Illinois Act Citation collected from St. Joseph IGA

Check Required When? next check run Mail Check? Yes No

APPROVAL:

Requested By:

Approved By Division Director (≤ \$249):

CHAMPAIGN-URBANA PUBLIC HEALTH DISTRICT

Check Date 1/28/2013
 Check Number 85381

Champaign County Public Health Department
 1776 East Washington Street
 Urbana, IL 61802

Account Number	Description	Amount	Debit/Credit	Net Amount
1111	1/11/2013	Smoke-Free Illinois Act Citation collected from St. Joseph IGA	\$250.00	\$250.00
	Totals	\$250.00	\$0.00	\$250.00

SMOKE-FREE ILLINOIS LOT CITATION (MAY 1992)

1. Licensee Name 2. Licensee Address 3. Licensee City 4. Licensee State 5. Licensee Zip 6. Licensee Phone	7. License Number 04538 8. License Issue Date 9. License Expiration Date 10. License Status
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11. Licensee Signature 12. Licensee Title 13. Licensee Date	14. Licensee Signature 15. Licensee Title 16. Licensee Date
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17. Licensee Signature 18. Licensee Title 19. Licensee Date	20. Licensee Signature 21. Licensee Title 22. Licensee Date
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23. Licensee Signature 24. Licensee Title 25. Licensee Date	26. Licensee Signature 27. Licensee Title 28. Licensee Date
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29. Licensee Signature 30. Licensee Title 31. Licensee Date	32. Licensee Signature 33. Licensee Title 34. Licensee Date
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35. Licensee Signature 36. Licensee Title 37. Licensee Date	38. Licensee Signature 39. Licensee Title 40. Licensee Date
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County Well Water Testing
January 2013

	Jan-13
PERSONAL SERVICES	
Michael Flanagan	\$18.59
Tammy Hamilton	\$13.80
Total Personal Services	32.39
FRINGE BENEFITS	
FICA	2.46
IMRF	3.39
Health Insurance	2.98
Life Insurance	0.02
Illinois Unemployment Comp.	1.38
Workmen's Compensation	0.87
Total Fringe Benefits	11.10
Total Personal Services & Fringe Benefits	43.49
CONTRACTUAL SERVICES	
Printing	0.44
Postage	14.86
Total Contractual Services	15.30
SUPPLIES	
Total Supplies	-
TRAVEL	
Total Travel	-
EQUIPMENT	
Total Equipment	-
Total	58.79



CHAMPAIGN-URBANA PUBLIC HEALTH DISTRICT ♦ CHAMPAIGN COUNTY PUBLIC HEALTH DEPARTMENT

Inspection Notice

GENERAL COMPLIANCE

On this date, this establishment was found to be in general compliance with minimum local ordinance standards.

Establishment Name	Permit Number
Address	City/Village
Environmental Health Specialist	Date Inspection Conducted/Notice Posted

Routine
 Re-inspection

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS FOUND DURING THIS INSPECTION

= NUMBER OF VIOLATIONS FOUND OUT OF COMPLIANCE IN THIS CATEGORY

COS = CORRECTED ON-SITE DURING THIS INSPECTION

R = REPEAT VIOLATION

#	VIOLATION CATEGORY	COS	R
	EMPLOYEE(S) WORKING WHILE ILL		
	POOR HYGIENIC PRACTICE(S)		
	ALLOWING CONTAMINATION BY HANDS		
	USING FOOD FROM UNAPPROVED SOURCE(S)		
	ALLOWING CROSS-CONTAMINATION		
	IMPROPER CHEMICAL STORAGE, LABELING OR USE		
	INADEQUATE TIME & TEMPERATURE CONTROL OF POTENTIALLY HAZARDOUS FOOD(S)		
	NO DISPLAY OF CONSUMER ADVISORY REGARDING RAW OR UNDERCOOKED FOODS		
	PROHIBITED FOODS WERE SERVED TO HIGHLY SUSCEPTIBLE POPULATIONS		
	INSUFFICIENT NUMBER OF FOOD SAFETY CERTIFIED MANAGERS		
	USING UNAPPROVED PROCEDURES FOR SPECIALIZED PROCESSES		
	OTHER _____		



Champaign-Urbana Public Health District ♦ Champaign County Public Health Department
201 W. Kenyon Road, Champaign, IL 61820 ♦ (217) 373-7900 or (217) 363-3269 ♦ c-uphd.org

THIS PLACARD IS THE PROPERTY OF THE CUPHD/CCPHD AND SHALL NOT BE REMOVED, COPIED OR ALTERED IN ANY WAY UNDER PENALTY OF LAW
FOR INSPECTION REPORTS, CONTACT THE OWNER OR SCAN THE QR CODE ABOVE TO VIEW THE CUPHD WEBSITE



CHAMPAIGN-URBANA PUBLIC HEALTH DISTRICT ♦ CHAMPAIGN COUNTY PUBLIC HEALTH DEPARTMENT

Inspection Notice

REINSPECTION REQUIRED

On this date, this establishment was inspected and found to be in substandard compliance. A reinspection will be required. Due to the cooperation of the establishment, none of the operation was required to close.

Establishment Name _____		Permit Number _____	
Address _____		City/Village _____	
Environmental Health Specialist _____		Date Inspection Conducted/Notice Posted _____	

Routine
 Reinspection

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS FOUND DURING THIS INSPECTION

= NUMBER OF VIOLATIONS FOUND OUT OF COMPLIANCE IN THIS CATEGORY

COS = CORRECTED ON-SITE DURING THIS INSPECTION

R = REPEAT VIOLATION

#	VIOLATION CATEGORY	COS	R
	EMPLOYEE(S) WORKING WHILE ILL		
	POOR HYGIENIC PRACTICE(S)		
	ALLOWING CONTAMINATION BY HANDS		
	USING FOOD FROM UNAPPROVED SOURCE(S)		
	ALLOWING CROSS-CONTAMINATION		
	IMPROPER CHEMICAL STORAGE, LABELING OR USE		
	INADEQUATE TIME & TEMPERATURE CONTROL OF POTENTIALLY HAZARDOUS FOOD(S)		
	NO DISPLAY OF CONSUMER ADVISORY REGARDING RAW OR UNDERCOOKED FOODS		
	PROHIBITED FOODS WERE SERVED TO HIGHLY SUSCEPTIBLE POPULATIONS		
	INSUFFICIENT NUMBER OF FOOD SAFETY CERTIFIED MANAGERS		
	USING UNAPPROVED PROCEDURES FOR SPECIALIZED PROCESSES		
	OTHER _____		



Champaign-Urbana Public Health District ♦ Champaign County Public Health Department
201 W. Kenyon Road, Champaign, IL 61820 ♦ (217) 373-7900 or (217) 363-3269 ♦ c-uphd.org

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CHAMPAIGN-URBANA PUBLIC HEALTH DISTRICT
CHAMPAIGN COUNTY PUBLIC HEALTH DEPARTMENT

Inspection Notice

CLOSED

This establishment was found to have violations which constitute a danger to public health or safety or has violated other provisions of applicable ordinances. As a result, this establishment has been ordered to be closed.

Facility Name	Permit Number
Address	City/Village
Environmental Health Specialist	Date Inspection Conducted/Notice Posted
<input type="checkbox"/> Routine <input type="checkbox"/> Reinspection	

X = NOT IN COMPLIANCE

	DANGERS TO PUBLIC HEALTH OR SAFETY
	IMMINENT HEALTH HAZARD
	UNCONTROLLED FOODBORNE ILLNESS RISK FACTORS
	UNSATISFACTORY COMPLIANCE w/ LOCAL ORDINANCE

	VIOLATING PROVISIONS OF APPLICABLE ORDINANCES
	OPERATING WITHOUT A VALID HEALTH PERMIT
	LACK OF FEE PAYMENT
	OTHER _____



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www.c-uphd.org ♦ eh@c-uphd.org

Renee P. Wade
Public Health Administrator
Jim Roberts
Director of Environmental Health



CHAMPAIGN-URBANA PUBLIC HEALTH DISTRICT ♦ CHAMPAIGN COUNTY PUBLIC HEALTH DEPARTMENT

Inspection Notice

GENERAL COMPLIANCE

On this date, this establishment was found to be in general compliance with minimum local ordinance standards.

Establishment Name <i>Champaign County Nursing Home</i>	Permit Number <i>1044</i>
Address <i>500 Art Bartell Dr.</i>	City/Village <i>Urbana</i>
Environmental Health Specialist <i>SW</i>	Date Inspection Conducted/Notice Posted <i>12-03-2012</i>
<input checked="" type="checkbox"/> Routine <input type="checkbox"/> Re-inspection	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS FOUND DURING THIS INSPECTION
 # = NUMBER OF VIOLATIONS FOUND OUT OF COMPLIANCE IN THIS CATEGORY
 COS = CORRECTED ON-SITE DURING THIS INSPECTION
 R = REPEAT VIOLATION

#	VIOLATION CATEGORY	COS	R
	EMPLOYEE(S) WORKING WHILE ILL		
	POOR HYGIENIC PRACTICE(S)		
<i>2</i>	ALLOWING CONTAMINATION BY HANDS	<i>2</i>	<i>0</i>
	USING FOOD FROM UNAPPROVED SOURCE(S)		
	ALLOWING CROSS-CONTAMINATION		
	IMPROPER CHEMICAL STORAGE, LABELING OR USE		
<i>1</i>	INADEQUATE TIME & TEMPERATURE CONTROL OF POTENTIALLY HAZARDOUS FOOD(S)	<i>1</i>	<i>0</i>
	NO DISPLAY OF CONSUMER ADVISORY REGARDING RAW OR UNDERCOOKED FOODS		
	PROHIBITED FOODS WERE SERVED TO HIGHLY SUSCEPTIBLE POPULATIONS		
	INSUFFICIENT NUMBER OF FOOD SAFETY CERTIFIED MANAGERS		
	USING UNAPPROVED PROCEDURES FOR SPECIALIZED PROCESSES		
	OTHER _____		



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