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520 West Chestnut St. Louisville, KY 40202-2235 (502) 582-7706 FAX (502) 582-7712

July 5, 2018

Mr. Scott Hooper Dr. Martin Pollio JCPS - Communication Disorders Program 3332 Newburg Road Louisville, KY 40218

Dear Mr. Hooper and Dr. Pollio:

\$5,675,000

The 65th annual WHAS Crusade for Children was a tremendous success! The people of Kentuckiana responded generously again this year to improve the lives of children with special needs.

After careful consideration, the WHAS Crusade for Children Advisory Council has awarded your agency a grant of **\$16,290**. Your grant number is **G2019186**. Please read, sign and return the original of the enclosed **GRANT ACCEPTANCE FORM** by September 1, 2018. Also enclosed is the "agency report form" which is to be submitted online on March 15th & September 15th and the "agency reimbursement form" to be used when requesting payment.

Please share this good news with a story in your newsletter, the local paper or on your social media platforms. We appreciate our grant recipients who display the Crusade logo somewhere on your website to showcase our partnership.

Thank you for your commitment to children with special needs. If you have any questions, please do not hesitate to call me or Janene Hickerson. We can be reached by e-mail at dawn@whascrusade.org, janene@whascrusade.org or call 502-582-7706.

We also want to share our exciting news that we will be moving to an online grants management system for next year's grant requests. The window to apply for grants will open in October 2018 and close mid-January 2019. We will notify you by letter and email when we make the transition.

Sincerely,

Dawn Lee

President & CEO

Enclosures (3) -

Grant Acceptance Form Grant Report Form

Grant Reimbursement Form

Grant Acceptance Form

G2019186

JCPS - Communication Disorders Program

\$16,290

Grant Number

Agency

Amount

Your grant is to be used for the following:

\$16,290 for 30 iPads

WHAS CRUSADE FOR CHILDREN RULES:

- **Grant Scope** Grant money can be used only for the specific items requested in your grant application and approved by the Crusade Advisory Council. Any changes in your grant items must be made in writing and approved by the Advisory Council.
- Grant Period The grant year is September 1, 2018 August 31, 2019 and the money must be spent in that time period. All requests for reimbursement need to be in the Crusade office no later than September 30, 2019. On October 1, 2019, grants will be closed and balances returned to the Crusade.
- Savings Your grant is for the specific items requested in the application and approved by the Crusade Advisory Council. If you are able to save money on your purchases, for example due to lower prices, the savings are to be returned to the Crusade.
- **Public Accountability** When funds are used for the erection of buildings, purchase of vehicles or installation of equipment, the Advisory Panel requires that an appropriate marker be placed to identify them as gifts from the Crusade. (These markers are not paid for by Crusade grant funds.) Please send a photo of the equipment, vehicle or construction along with a close-up shot of how it is marked as being provided by the Crusade.
- **Vehicles** When buying a vehicle, the Crusade will not pay for insurance, license and transfer of title or any other expense connected with buying a vehicle.
- Insurance Equipment, buildings and vehicles purchased in whole or part with Crusade funds MUST BE FULLY INSURED.
- **Buildings** Agencies receiving Crusade grants for remodeling or construction of a building must require the general contractor to post a performance bond as well as a bond covering payment to all contractors.
- Requesting Payment Please use the enclosed "Agency Reimbursement Form." It is imperative that you use the enclosed preprinted forms. Make as many copies as you need. If you would like the Agency Reimbursement Form in an electronic format, you can download it from the Crusade website at www.whascrusade.org. Please limit your requests for reimbursement to no more than 12 during the grant year. This helps with our costs. You must request your reimbursement in the same categories listed in your grant application. It is acceptable to request multiple items on one reimbursement form. Providing clear and proper backup documentation will expedite the processing of your reimbursement. Feel free to attach a spreadsheet or a summary if necessary.

Salaries - We must have a copy of: 1) accurate time sheets with hours worked and rate-of-pay or 2) payroll registers/statements containing each person's name, payroll employee number, rate of pay and hours worked. There can be no exceptions. These must be with every request. **Reminder** - we do not pay benefits or employer payroll taxes, therefore, do not include these in your salary reimbursement request. Salaries are reimbursed in 12 payments (or fewer) over the course of the grant year.

Equipment, computers, software and supplies – The agency must pay the vendor and request reimbursement from the Crusade. The Crusade does not pay vendors directly. A copy of the vendor invoice **must** be included with the Agency Reimbursement Form – packing slips and purchase orders are **not** acceptable. Make sure items on the reimbursement form can easily be identified on the original grant request list. **The WHAS Crusade for Children does not pay sales tax**. If the agency does not use its tax-exempt status on a purchase, the Crusade will not reimburse the sales tax portion of the invoice.

Items the Crusade does not pay: administrative costs, shipping costs, sales tax, food, benefits or travel expenses/lodging, employee continuing education/training, installation, postage, leases, PR or public awareness campaigns and extended warranties

• Agency Report Form – This report is due 2 times during the grant year: March 15 and Sept 15. Failure to submit a report can result in delay of payment or even suspension of grant.

Your signature certifies that you have read, understand and accept the WHAS Crusade for Children Rules. No funds will be released until this original is returned to: WHAS Crusade for Children, 520 W. Chestnut St., Louisville, Kentucky 40202

Signature	Title	Date



Send To:

ATTN: Grant Reimbursement WHAS Crusade for Children 520 W. Chestnut St. Louisville, KY 40202

AGENCY REIMBURSEMENT FORM

Grant Number: G2019186	
Agency Name: JCPS - Communicatio	n Disorders Program
Check Payable to	
Mailing Address	
City/State/Zip	
Contact Name	Phone Number
Email Address	
Proper backup documentation must be inc The documentation should be separated in subtotal for each category.	luded with the fully completed Reimbursement Form. Ito the same categories as the grant was awarded with a
Total Amount Requested \$	
Print Name	Signature
	Date
	DE OFFICE USE ONLY
Grants Manager Approval	Date
CEO Approval	Date
G/L Account Number	Payment Number



AGENCY REPORT FORM

(Please submit this report online @ whascrusade.org The report is located in the grants section)

Reports are due March 15, 2019 and September 15, 2019

Date	
Grant Number: G2019186	
Agency Name: JCPS - Communic	ation Disorders Program
Amount Awarded	\$
Amount Spent to date	\$
Amount Remaining	\$
Will the remaining amount be spent	? (Check one) yes no
If you answered no, please explain	
Projected completion date	·
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Number of children with special nee	ds projected to be helped in grant application
Actual number of children helped:	Kentucky Indiana Kentucky Indiana
Signed	Title
Send to: Attn: Agency Report Forn WHAS Crusade for Childr 520 W. Chestnut St.	n OR Email: janene@whascrusade.org

Louisville, KY 40202