GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

HEALTH & HUMAN SERVICES

571 County Road A

Green Lake WI 54941 VOICE: 920-294-4070 FAX: 920-294-4139

Email: glcdhhs@greenlakecountywi.gov



FOX RIVER INDUSTRIES

222 Leffert St. PO Box 69 Berlin WI 54923-0069

VOICE: 920-361-3484 FAX: 920-361-1195

Email: fri@greenlakecountywi.gov

Post Date: 10/25/23

The following documents are included in the packet for Transportation Committee Meeting held on Tuesday, October 31, 2023.

- October 31, 2023, Transportation Committee Meeting agenda.
- April 24, 2023, Transportation Committee Meeting Draft Minutes.
- 85.21 2024 Grant Application



GREEN LAKE COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

Office: 920-294-4070 FAX: 920-294-4139 Email: glcdhhs@co.green-lake.wi.us

Health & Human Services Transportation Committee Meeting Notice

Date: October 31, 2023, Time: 10:00 AM Green Lake County Government Center 571 County Road A, County Board Room #0902 Green Lake, WI

AGENDA

Committee Members

Dick Trochinski Chuck Buss Ryan Bamberg Sarah Theel Rebecca Bays Dawn Brantley Jon Vandeyacht Vacant

Virtual attendance at meetings is optional. If technical difficulties arise, there may be instances when remote access may be compromised. If there is a quorum attending in person, the meeting will proceed as scheduled.

- 1. Call to Order
- 2. Certification of Open Meeting Law
- 3. Pledge of Allegiance
- 4. PUBLIC HEARING 10:00AM
- 5. Recess for public hearing on the 2024 85.21 Grant at 10:00AM. Regular business will resume at the conclusion of the public hearing.
- 6. Minutes: (4/24/23)
- 7. Correspondence
- 8. 5-year Coordinated Plan Renewal Requirement
- 9. Service Provider Rider Rates
- 10. 85.21 Specialized Transportation Association Grant Update
- 11. 5310 Grant Update
- 12. Gas/Repair Costs
- 13. Veterans Transportation update
- 14. Committee Discussion
- 15. Future Meeting Date TBD
- 16. Future Agenda items for action & discussion
- 17. Adjourn

This meeting will be conducted through in person attendance or audio/visual communication. Remote access can be obtained through the following link:

Microsoft Teams meeting

Join on your computer, mobile app or room device

Click here to join the meeting Meeting ID: 299 236 186 100

Passcode: KbRZMA

<u>Download Teams</u> | <u>Join on the web</u>

Or call in (audio only)

+1 920-659-4195,,102238247# United States, Green Bay

Phone Conference ID: 102 238 247#

Find a local number | Reset PIN

Please note: Meeting area is accessible to the physically disabled. Anyone planning to attend who needs visual or audio assistance, should contact the County Clerk's Office, 294-4005, not later than 3 days before date of the meeting.

Transportation Committee Meeting

April 24, 2023

The regular meeting of the Health and Human Services Transportation Meeting was called to order by Sarah Petit, HHS Admin at 10:00am on Monday, April 24, 2023, in the County Board Room, Green Lake County Government Center, Green Lake WI. The meeting was held in person and via Teams. The requirements of the open meeting law were certified as being met. The Pledge of Allegiance was recited.

Present: Richard Trochinski, Chuck Buss, Ryan Bamberg, Dawn Brantley, Sarah Theel, Rebecca Bays (via Teams).

Absent: Jon Vandeyacht

Others Present: Kayla Yonke, Financial/Business Manager, Jason Jerome, HHS Director, Sarah Petit, HHS Admin, Debbie Stobbe, Fox River Industries, Mary Neubauer (via Teams), Elizabeth Ladwig (via Teams).

Election of Chair

HHS Admin Sarah Petit called for nominations for Chair of the Transportation Committee. Brantley nominated Chuck Buss. Petit called for nominations three times. No other nominations. Motion/Second (Trochinski/Brantley) to cast a unanimous ballot for Chuck Buss Chair Transportation Committee. All ayes, motion carried.

Minutes of 11/16/2022

Motion/second (Trochinski/Bamberg) to approve the minutes of the 11/16/2022 meeting as presented with no corrections or changes. All Ayes. motion carried.

Correspondence: N/A

85.21 Specialized Transportation Association Grant Update

Bamberg reported- 85.21 Specialized Transportation Funding is funding provided by the State of Wisconsin to Counties to provide specialized transportation for elderly and disabled individuals. Berlin transportation added an after-hours ride option to their transportation service. Princeton is currently without drivers due to drivers' personal insurance requirements needing a commercial policy. Short term solution being worked on. Discussion followed.

53.10 Grant Update

Brantley reported- WI DOT audit went well. Will be writing for 53.10 Transportation grant. Southern Green Lake will not be included in grant this time, they will write their own. Competition for funding continues to grow. Goal is to keep current fleet running longer. Discussion followed.

Gas/Repair Costs

Brantley reported- nothing out of ordinary for gas/repair costs.

Veterans Transportation Updates: No Report

Committee Discussion

Future meeting date: November 13, 2023, at 10:00am

Future Agenda Items: N/A

<u>Adjourn</u>

Chair Buss adjourned the meeting at 10:24am.



2024 APPLICANT INFORMATION FORM

For additional information on this Application Workbook, please refer to the §85.21 Application Guidelines for CY2024

County of	Green Lake							
Primary Contact for this G	Grant Program							
Name	Ryan Bamberg							
Telephone Number	920-294-4070		Extension					
Email Address	rbamberg@greenlakecou	intywi.gov						
Application Preparer (if dif	ferent than primary contact)							
Name								
Organization								
Telephone Number			Extension					
Email Address								
Applicant Status	Place your initials in box to the right county government or an agency of organized as a non-profit under Wi	of the county department. Priv		RB				
Organization Info		lace your initials in the box certifying all organization information, including contacts and titles, have een updated in the BlackCat Online Grant Management System (GMS) and are true and correct to the est of your knowledge.						
Federal Grant Match	Please place an "X" next to any fee	deral grant that will be using §	85.21 funds as local match.					
	5310 X	5307	5311					
	Other (Please explain)							
Coordination	derived.		page number(s) in which your §85.21 pro	oject(s) is/are				
	Title of Coordinated Plan:	Green Lake County						
The goal(s) and/or strategies from which your project is included: A - Update County Website to include updated Contact numbers for all providers C - Increase Marketing and Education to reach people who are not aware E - Recruit new drivers (Market to areas not explored yet like								
• , ,	Coordinated plan in which goals may be referenced:	Pages 12 and 13						
	ate whether or not §85.21 state aid nce during the calendar year.	will be used for the transports	ation of persons who cannot walk or perso	ons who walk				
YES x	/If no please explain how the Ame	aricans with Disabilities Act (A	DA) requirements for equivalency of serv.	ice hetwoon				
NO	ambulatory and non-ambulatory pa		ובאה) וביקטוויפוויפווים וטו פיקטועמופוונץ סו servi	ice beiween				

TRUST FUND SPENDING PLAN

County of

Green Lake

Instructions: Please record your plan on how your county will spend down their trust fund over the next three years.

Be as specific as possible. Do NOT include 2023 purchases made with trust funds.

If non-vehicle capital		ture Item rovide description on seco	Planned year of purchase (YYYY)		ust Used for oject	
Maintenance of 5310) vans	2024		\$3,000.00		
Maintenance of 5310) vans	2025		\$-		
Maintenance of 5310) vans			2026		\$-
		Tatal mu	-:4			2 222 22
			ojected cost o	or 3-year pian	\$	3,000.00
Estimated amoun	t of state aid to b 12/31/2023	e held in trust on	\$3,633.31			
Will auto calculate based on	year entered above	Enter the amount of funds next three years. If]		
Spending plan for 2024 =	\$ 3,000.00	Funds added for 2024 =		Estimated balance on 12/31/24 =		\$ 633.31
Spending plan for 2025 =	\$-	Funds added for 2025 =		Estimated balance on 12/31/25 =		\$ 633.31
Spending plan for 2026 =	\$-	Funds added for 2026 =		Estimated balance on 12/31/26 =		\$ 633.31
Dat	e complete	09/26/2023				
P	repared by	Ryan Bamberg				
Narrative for non- exception. If already re	vehicle equip	ment purchases. sapproval, please list da	*Please explain w ate approval recei	hy you are requesting WisD ved. (Hint: Use ALT and Enter	OT approval to start a new	for an paragraph.)
To a state of the same	- 4	vour parrativo, plaa		to cocond node		

For additional space to complete your narrative, please scroll down to second page.

TRUST FUND SPENDING PLAN

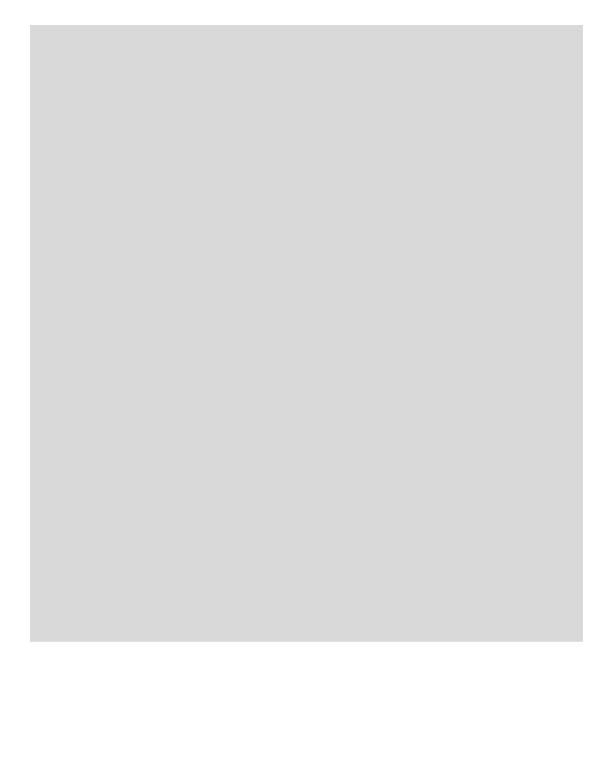
Continued

County of

Green Lake

Narrative for non-vehicle equipment purchases continued.

(Hint: Use "ALT" and "Enter" to start a new paragraph.)



APPLICANT CHECKLIST

County of

Green Lake

Required Components	Complete
Update Contact Information in BlackCat Online Grant Management System	
Upload completed application workbook:	
Application Information Form	
Complete Vehicle Inventory (regardless of funding source)	
Third Party Contracts	
Trust Fund Plan (for counties with a signed board resolution)	
Project Descriptions and Budgets	
Review Summary Tab	
Upload Transmittal Letter	
Upload Public Hearing and Notice	
Upload Local Review Form	
If applicable: Upload Third Party Contracts &/or Leases to the Resources Tab	

VEHICLE INVENTORY

Count Green Lake

Instructions: Please provide your **entire** specialized transit vehicle inventory.

(Include all vehicles used to transport seniors or individuals with disabilities.)

Vehicle Type	Full VIN Number	Model Year	Current Mileage	No. of Ambulatory / Wheelchair Positions	Fu	unding Source (mark with X)		Place "X" in box to indicate if vehicle is	
(Minivan, Medium Bus, etc.)	Full VIIN Nullibel	Model Feal	Current Mileage	(Ambulatory/Non- Ambulatory)	5310	85.21	Trust	Other	leased to another party.
Minibus	1GB3G2BL1B1179646	2011	111,933	10/1	x				x
Minibus	1FDEE35P39DA90938	2010	151,584	10/1	х				x
Minibus	1FDEE3FL7DDB12816	2013	155,068	10/1	х				x
Minibus	1GB3G2BLXB1190192	2011	181,826	12/0	х				x
Minibus	1FDEE3FL5DDB12815	2013	132,225	12/0	х				x
Minibus	1FDES8PV7JKA14544	2018	102,278	6/2	х				x
Minibus	1FDES8PV7JKA14545	2018	85,900	6/2	х				x
Minivan	2C4RDGBG6DR787191	2013	162,754	3/2	х				x
Minibus	1FDEE3FS7KDC55527	2020	61,198	12/0	х				x
Minivan	2C7WDGBGXGR396491	2016	152,737	3/2	х				x
SGLCST	SC7WDGB0KR779395	2019	63,229	3/1	х				x
SGLCST	2C4RC1CG5NR224195	2022	13,030	3/1	х				x
minivan	1GBDV13W98D115780	2008	90,000	4/1	х				x

If you have more vehicles than can fit onto one sheet, please add another copy of this sheet.
*Right click on the tab, select **Move or Copy**, select **Vehicle Inventory**, check the box to **Create a copy**, click **OK**.

THIRD PARTY PROVIDERS

County of

Green Lake

Instructions: Please complete the table below for any existing or anticipated third party contracts for your specialized transportation services. Upload a copy of the lease or contract to a folder in the **Resources** tab. (If there are no projects or vehicles that are contracted or leased out, please put **None** in the first gray box.)

Project Name	Anticipated or Known Contractor Name	Type of Agreement (Lease or Contract)	Start Date (MM/DD/YY)	Expiration Date (MM/DD/YY)	Last Bid Date	Contract Price	If over \$10k, was a competitive solicitation completed?	Year of Contract (1 to 5)
City of Berlin	Sara Rutkowski	Contract	01/01/2024	12/31/2024	N/A	26,007	No	1
Southern Green Lake County Sr. Transportation	Sarah Theel	Contract	01/01/2024	12/31/2024	N/A	24,613	No	1
Fox River Industries	Dawn Brantley	Contract	01/01/2024	12/31/2024	N/A	12,633	No	1
City of Green lake	Barb Dugenske City Clerk	Contract	01/01/2024	12/31/2024	N/A	3,964	No	1
City of Princeton	Mary Neubauer City Clerk	Contract	01/01/2024	12/31/2024	N/A	12,672	No	1

If you have more vehicles than can fit onto one sheet, please add a copy of this sheet. *Right click on tab, select Move or Copy, select Vehicle Inventory, check the box to Create a copy, click OK.

PROJECT 1 DESCRIPTION

County of

Green Lake

Instructions

- Use this section to describe a specific project that will use s.85.21 funds.
- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name	City of Berlin				
Third Party Provider	City of Berlin				
Date contract last updated	09/13/2023				
Type of Service ∖	(<i>Place an "x" nex</i>	ext to the type of service you will Voucher	be providing for the	nis project.)	
Ve	hicle Purchase	 Managem	ent Study		
	Planning Study	Brief description of Study			
Other (provid		Transportation Operating Assi for individuals in the Commun		le route door to d	oor service
General Project Summai	ry (Provide a briet	ef description of this project. Use AL	_T and Enter to start	' a new paragraph.)	
_	-	vides service to elderly (over a			_
City of Berlin a	and within a five	e mile radius around the City.	Service is provid	ed with a four(4) p	assenger,

wheelchair accessible mini van. This is a flexible route, door to door service. Individuals wishing to schedule a ride must call the Berlin Senior Center to schedule the ride. Medical trips take priority over all others. All rides are scheduled on a first come first serve basis. This is a fee based transportation service. The fee can be reduced or waived by the project manager in cases where the rider is unable to pay. The primary funding source for this service is 85.21 funding, along with City of Berlin funds, County funds, rider fees and contributions.

			PROJECT	DESCRIPTIC	N, Contir	nued		
	hy of Service ounties, as well as	cities/areas that	are serviced thou	gh this project. U	se ALT and E	Enter to start a new	line.)	
	The city of Bei	rlin and those I	iving within a f	ive mile radius	in Green L	ake County.		
Service I	H <mark>ours</mark> (Indicate	e your general hou	urs of service for t	this project.)				
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Start Time		8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM		
End Time		4:00 PM	4:00 PM	4:00 PM	4:00 PM	4:00 PM		
	ditional description (if applicable)							
Service	Anyone wantir schedule a rid		ervice must cal for the pickup t	I the Berlin Sr. ime with the ri	Center. Th	ne project manag se priority areas		
Passenger Eligibility (Briefly indicate passenger eligibility requirements for this project.)								
J		he age of 55, or						

Passenger Revenue (Briefly describe passenger revenue requirements for this project.)

This is a fee based service. Trips within the City of Berlin are charged \$2.00 per ride. Fees for out of town trips are: Ripon - \$25.00; Oshkosh - \$45.00; Wautoma - \$35.00; Wild Rose - \$45.00; Appleton -\$55.00; Fond du Lac - \$45.00; Montello -\$35.00; Madison - \$100.00. Fees can be waived or reduced by the Project manager if the rider cannot afford to pay. Fees are collected by the driver at the time of the trip.

PROJECT BUDGET

Section Description			Amount
Annual Expenditures			
Enter the amount of <u>total</u> expenditures for this project.	Г	^ 44	202.22
	Expenses	\$44	982.00
*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the Annual Financial Report that you will submit at the end of the calendar year.			
Annual Revenue			
Enter the amount for <u>each</u> funding source that will be used for this proj *When complete, please scroll to bottom of this page to ensure the <u>Expenditu</u>		evenue equals \$0.	
A. §85.21 funds from annual allocation		Total from A.	\$26,007.00
B. §85.21 funds from trust fund		Total from B.	\$3,000.00
C. County Match Funds		Total from C.	\$3,800.00
D. Passenger Revenue		Total from D.	\$5,000.00
E. Older American Act (OAA) funding		Total from E.	
F. §5310 Operating or Mobility Management funds		Total from F.	
G. Other funds (Provide name and/or description and record total amount in the		Total from G.	\$7,175.00
box to the right of the description. Include sources such as other			
grants and/or programs.) 1. City of Berlin	Total	\$7,175.00	
	_		
2.	Total		
3.	Total		
	rotar		
4.	Total		
5.	Total		
6.	Total		
Revenue	e Total	\$44.	982.00
Expenditures should equal rev	renue	\$	0.00

PROJECT 2 DESCRIPTION

County of

Green Lake

Instructions

- Use this section to describe a specific project that will use s.85.21 funds.
- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name	Southern Green Lake County Senior Transportation								
Third Party Provider	Southern Gre	en Lake County Senior Transportation							
Date contract last updated									
Type of Service	(Place an "x" ne	ext to the type of service you will be providing for this project.)							
V	olunteer Driver	Voucher Program							
Ve	hicle Purchase	Management Study							
	Planning Study	Brief description of Study							
Other (provid	de explanation)	Transportation Operating Assistance for Flexible route door to door service for individuals in the Community							
General Project Summar	' y (Provide a bri	ef description of this project. Use ALT and Enter to start a new paragraph.)							
transportation Two, five pass to transport cli occasionally o days notice is the service. M The fee may be	service to the enger minivans ients when all van weekends in required for ouedical trips take lowered or was	Senior Transportation provides a respond to call, door to door elderly and handicapped persons who live in Southern Green Lake County. It is are wheelchair accessible and volunteer drivers also use private vehicles wans are committed to trips. Service is provided Monday through Friday and an emergency. A two day or more notice is required for local trips and five it of town trips. Any person over the age of 55 or handicapped may request be priority over all other trips. This is a fee based transportation service. It is also by the project manager for individuals who are unable to pay. The his project is 85.21 funding, along with County funding, rider fees and							

PROJECT DESCRIPTION, Continued

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(List the counties, as well as cities/areas that are serviced though this project. Use ALT and Enter to start a new line.)

Green Lake County, Markesan, Marquette, Manchester, Kingston, Dalton, Mackford, Princeton, Green Lake, and rural Southern Green Lake County.

Service Hours (Indicate your general hours of service for this project.)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time		8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	
End Time		4:00 PM	4:00 PM	4:00 PM	4:00 PM	4:00 PM	

Additional description
(if applicable)

Service Requests (Briefly describe how your service is requested for this project.)

Riders may call the project manager or the van dirvers directly to schedule a ride. Two days advance notice is required for local rides, and five days advance notice is required for out of town travel. Service priority areas are medical, nutrition related, employment and recreational reasons.

Passenger Eligibility (Briefly indicate passenger eligibility requirements for this project.)

Anyone over the age of 55 or handicapped may use the service. Individuals who are not elderly or handicapped may ride on a space available basis only.

Passenger Revenue (Briefly describe passenger revenue requirements for this project.)

This is a fee based service. Fees are collected at the time of the trip. Fees are; Markesan - \$20.00; Green Lake - \$25.00; Princeton - \$20.00; Ripon - \$30.00; Waupun - \$30.00; Berlin - \$35.00; Beaver Dam - \$35.00; Appleton - \$60.00; Fond du lac - \$40.00; Madison - \$75.00; Milwaukee - \$90.00; Neenah - \$55.00; Oshkosh - \$45.00. There is a \$10.00 per hour fee for trips over 4 hours. Fees can be waived or reduced by the project manager if the rider cannot afford the charge.

PROJECT BUDGE	T		
Section Description			Amount
Annual Expenditures			
Enter the amount of <u>total</u> expenditures for this project. Total	Expenses	\$43	,650.00
*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the Annual Financial Report that you will submit at the end of the calendar year.			,
Annual Revenue			
Enter the amount for <u>each</u> funding source that will be used for this project when complete, please scroll to bottom of this page to ensure the <u>Expenditu</u>		evenue equals \$0.	
A. §85.21 funds from annual allocation		Total from A.	\$24,613.00
B. §85.21 funds from trust fund		Total from B.	
C. County Match Funds		Total from C.	\$3,965.00
D. Passenger Revenue		Total from D.	\$15,072.00
E. Older American Act (OAA) funding		Total from E.	
F. §5310 Operating or Mobility Management funds		Total from F.	
G. Other funds (Provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.)		Total from G.	\$0.00
1.	Total		
2.	Total		
3.	Total		
4.	Total		
5.	Total		
6.	Total		

Expenditures should equal revenue \$0.00

Revenue Total

\$43,650.00

PROJECT 3 DESCRIPTION

County of

Green Lake

Instructions

• Use this section to describe a specific project that will use s.85.21 funds.

project is 85.21 funds, County funds and passenger co-pays.

- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name	Fox Rivers	Industries				
Third Party Provider	Fox River Ind	ustries				
Date contract last updated						
Type of Service	(Place an "x" ne	ext to the type o	f service you wil	ll be providi	ng for this project.	.)
V	olunteer Driver/		Vouche	er Program		
Vehicle Purchase			Managen	nent Study		
	Planning Study		Brief description of Study			
Other (provid		•	Operating Ass		r Flexible route o	door to door service
General Project Summary (Provide a brief description of this project. Use ALT and Enter to start a new paragraph.)						
Fox River Industries provides a fixed route door to door bus/van service twice daily. Services are generally provided weekdays only with fixed routes running from 6:30 am to 9:30 am and 3:00 pm to 5:30 pm. On-call rides will be provided between 9:30 am and 2:30 pm each day. Persons requesting pickup						
on route must call in at least one day in advance. Call-ins are served as time and available drivers permit. Reservations for total use of a vehicle must be called in at least 5 days in advance. Primary transportation target group is the developmentally disabled, although the elderly(over 55) and						

handicapped of any age are encouraged to ride. Fox River Industries has 9 vans and busses, seven of which are wheelchair accessible. These vehicles, when not in use by Fox River Industries are available for rental to the general public needing a accessible vehicle. The primary source of revenue for this

PROJECT DESCRIPTION, Continued

Georg	rani	hv of	Ser	vice

(List the counties	. as well as cities/areas	that are serviced	though this project.	Use ALT and Enter to	o start a new line.)

Service Hours (Indicate your general hours of service for this project.)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time		6:30 AM	6:30 AM	6:30 AM	6:30 AM	6:30 AM	
End Time		5:30 PM	5:30 PM	5:30 PM	5:30 PM	5:30 PM	

Additional	description
(if	applicable)

Service Requests (Briefly describe how your service is requested for this project.)

Each day the fixed routes run morning and evening to pick up developmentally disabled individuals for work and day programs. The busses/vans are also used through out the day for medical and recreational trips for the developmentally disabled. All rides are coordinated by the project manager at Fox River Industries. Community members wishing to schedule use of a vehicle would call Fox River Industries.

Passenger Eligibility (Briefly indicate passenger eligibility requirements for this project.)

Primary passenger group is the developmentally disabled, although elderly and handicapped individual	ls
are also eligible to ride.	

Passenger Revenue (Briefly describe passenger revenue requirements for this project.)

The co-pays for those using the fixed routes are: \$.75 per oneway trip in town; and \$1.25 per oneway trip out of town. For those wishing to rent a vehicle the charge is \$.75 per mile with a \$20.00 minimum.

PROJECT	BUDGET	
Section Description		Amount
Annual Expenditures		
Enter the amount of <u>total</u> expenditures for this project.	Total Expenses	\$191,625.00

provid	se note: Breakdown of expenses is not required at this time. You will de the breakdown of actual expenses in the Annual Financial Report ou will submit at the end of the calendar year.			
Enter th	Revenue ne amount for <u>each</u> funding source that will be used for this procomplete, please scroll to bottom of this page to ensure the <u>Expenditu</u>		evenue equals \$0	
A. §8	35.21 funds from annual allocation		Total from A.	\$12,633.00
В. §8	35.21 funds from trust fund		Total from B.	
C. C	ounty Match Funds		Total from C.	\$4,508.00
D. Pa	assenger Revenue		Total from D.	\$615.00
E. O	lder American Act (OAA) funding		Total from E.	
F. §5	5310 Operating or Mobility Management funds		Total from F.	\$54,186.00
G. O	ther funds (Provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.)		Total from G.	\$119,683.00
1.	5310	Total	\$119,683.00	
2.		Total		
3.		Total		
4.		Total		
5.		Total]
6.		Total]
	Reven	ue Total	\$191	1,625.00

Expenditures should equal revenue **\$0**

PROJECT 4 DESCRIPTION

County of

Green Lake

Instructions

- Use this section to describe a specific project that will use s.85.21 funds.
- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name	City of Gre	en Lake				
Third Party Provider	City of Green	Lake				
Date contract last updated						
Type of Service	(Place an "x" n	ext to the type o	f service you wil	ll be providi	ing for this project.)
\	/olunteer Driver		Vouche	r Program		
Ve	ehicle Purchase		Managen	nent Study		
	Planning Study		Brief description of Study			
Other (provi	de explanation)		Operating Ass		r Flexible route d	loor to door service
for the elderly owned vehicle stipend wage. required. Serving handicapped.	een Lake Trans age 55 or olde es, are utilized i A two day not vice is available To arrange a r	sportation Prog r and handicap in providing the ice for short tri e 5 days per we ide the individu	ram is a respor ped individuals e service. The v ps is required a eek. The service ual must call Gr	nd to call, on the are volunteer cand a one version is availab	door to door trans a. Volunteer driv Irivers are paid o week notice for o	sportation service vers, using privately n a mileage plus out of town trips is r the age of 55 or

PROJECT DESCRIPTION, Continued

	Geography of Service (List the counties, as well as cities/areas that are serviced though this project. Use ALT and Enter to start a new line.) The City of Green Lake and those living within a 5 mile radius in Green Lake County.								
Service H	ours (Indicate	your general hou	rs of service for	this project.)	,				
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
Start Time		8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM			
End Time		5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM			
	Additional description (if applicable) Service Requests (Briefly describe how your service is requested for this project.) Services are requested by calling the project manager at Green Lake City Hall.								
Passenge	er Eligibility <i>(B</i>	riefly indicate pas	ssenger eligibility	requirements for	this project.)				
	Anyone over th	e age of 55 or	handicapped i	s eligible to us	e the servic	е			
Passenge	er Revenue (Br	iefly describe pas	ssenger revenue	requirements for	this project.)				
3	This is a fee ba Green Lake; \$2	sed service. F 2.00; Princeton u Lac - \$25.00;	ees are collect - \$10.00; Berli Appleton - \$3	ted by the driven in - \$15.00; Ripe 5.00; and Madis	er at the tim on - \$15.00;	e of the ride. Cu Waupun - \$25.00 . The project ma			

PROJECT BUD	GET		
Section Description		,	Amount
Annual Expenditures			
Enter the amount of <u>total</u> expenditures for this project.	otal Expenses	\$9,0	00.00
*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the Annual Financial Report that you will submit at the end of the calendar year.			
Annual Revenue			
Enter the amount for <u>each</u> funding source that will be used for this *When complete, please scroll to bottom of this page to ensure the <u>Expel</u>		evenue equals \$0.	
A. §85.21 funds from annual allocation		Total from A.	\$3,964.00
B. §85.21 funds from trust fund		Total from B.	
C. County Match Funds		Total from C.	\$1,236.00
D. Passenger Revenue		Total from D.	\$2,270.00
E. Older American Act (OAA) funding		Total from E.	
F. §5310 Operating or Mobility Management funds		Total from F.	
G. Other funds (Provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.)	r	Total from G.	\$1,530.00
1. Surplus	Total	\$1,530.00	
2.	Total		
3.	Total		
4.	Total		
5.	Total		

Revenue Total \$9,000.00

Total

Expenditures should equal revenue \$0.00

6.

PROJECT 5 DESCRIPTION

County of Green

Green Lake

Instructions

- Use this section to describe a specific project that will use s.85.21 funds.
- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name	City of Prir	ceton							
Third Party Provider	City of Prince	eton							
Date contract last updated									
ype of Service (Place an "x" next to the type of service you will be providing for this project.)									
V	olunteer Driver		Vouche	r Program					
Ve	ehicle Purchase		Managen	nent Study					
	Planning Study		Brief description of Study						
Other (provid			Operating Ass in the Commu		r Flexible route o	door to door service			
General P <u>roject Summar</u>	-								
handicapped p providing the s required for sh age of 55 or ha project manag	persons in the a service. The vl nort trips and a andicapped is e	area. Volunteel ounteers are pa one week noticeligible to use t . The primary	r drivers, using aid mileage and ce is required f he service. To	privately of a stipend or long trip request se	os out of the area ervice the individ	_			

PROJECT DESCRIPTION, Continued

	f Princeton and the	ose living withi	n a five mile ra	dius in Gree	n Lake County.□	
ce H <mark>ours</mark> (Ind	dicate your general hou	urs of service for	this project.)			
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
art ne	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM	
d ne	5:00 PM	5:00 PM	5:00 PM	5:00 PM	5:00 PM	
<u> </u>	(Briefly describe how y s must call the proj					
Individual:	s must call the proj	ject manager to	o arrange a ride	er this project.)	rvice.	
Individuals	s must call the proj	ssenger eligibility	o arrange a ride	r this project.)	rvice.	

PROJECT BL	JDGET		
Section Description			Amount
Annual Expenditures			
Enter the amount of <u>total</u> expenditures for this project.			
 ;	Total Expenses	\$16	,141.00
*Please note: Breakdown of expenses is not required at this time. You w provide the breakdown of actual expenses in the Annual Financial Rep that you will submit at the end of the calendar year.			
Annual Revenue			
Enter the amount for <u>each</u> funding source that will be used for the *When complete, please scroll to bottom of this page to ensure the Ex		evenue equals \$0.	
A. §85.21 funds from annual allocation		Total from A.	\$12,672.00
-			Ψ12,012.00
B. §85.21 funds from trust fund		Total from B.	
C. County Match Funds		Total from C.	\$2,469.00
D. Passenger Revenue		Total from D.	\$1,000.00
E. Older American Act (OAA) funding		Total from E.	
F. §5310 Operating or Mobility Management funds		Total from F.	
G. Other funds		Total from G.	\$0.00
(Provide name and/or description and record total amount in t box to the right of the description. Include sources such as or			
grants and/or programs.) 1.	Total]
	Total		I
2.	Total		
			•
3.	Total		
4.	Total		
			-
5.	Total		
			1
6.	Total		
	Revenue Total	\$16	,141.00

Expenditures should equal revenue

\$0.00

COUNTY ELDERLY TRANSPORTATION 2024 PROJECT BUDGET SUMMARY

County of	of Green Lake									
Project Name	City of Berlin	Southern Green Lake County Senior Transportation	Fox Rivers Industries	City of Green Lake	City of Princeton	0	0	0	Totals	
Project Expenses										
Total Project Expenses	\$44,982.00	\$43,650.00	\$191,625.00	\$9,000.00	\$16,141.00	\$0.00	\$0.00	\$0.00	\$305,398.00	
Project Revenue hy	Project Revenue by Funding Source									
§85.21 Annual Allocation	\$26,007.00	\$24,613.00	\$12,633.00	\$3,964.00	\$12,672.00	\$0.00	\$0.00	\$0.00	\$79,889.00	
§85.21 Trust Fund	\$3,000.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,000.00	
County funds	\$3,800.00	\$3,965.00	\$4,508.00	\$1,236.00	\$2,469.00	\$0.00	\$0.00	\$0.00	\$15,978.00	
Passenger Revenue	\$5,000.00	\$15,072.00	\$615.00	\$2,270.00	\$1,000.00	\$0.00	\$0.00	\$0.00	\$23,957.00	
Older American Act (OAA)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
§5310 grant funds	\$0.00	\$0.00	\$54,186.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$54,186.00	
Total from other funds	\$7,175.00	\$0.00	\$119,683.00	\$1,530.00	\$0.00	\$0.00	\$0.00	\$0.00	\$128,388.00	
1.	\$7,175.00	\$0.00	\$119,683.00	\$1,530.00	\$0.00	\$0.00	\$0.00	\$0.00	\$128,388.00	
2.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
3.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
4.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
5.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
6.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Expenses - revenue =	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	