

Town of Richmond

**Request for Special Appropriations**

**Request for Fiscal Year: 2026**

Organization's Name: VT Center for Independent Living

Address: 11 East State Street

City, State, Zip: Montpelier, VT 05602

Website address: [www.vcil.org](http://www.vcil.org)

**A. GENERAL INFORMATION**

1. Program Name: N/A

2. Contact Person/Title: Linda Schwaner, Development Director

Telephone Number: 802-224-1819 E-mail address: lindam@vcil.org

3. Total number of individuals served in the last complete fiscal year by this program: ~1,800

4. Total number of the above individuals who are Town residents: 2

Please attach any documentation that supports this number. *Please see attached summary report.*

Percent of people served who are Town residents: <1%

5. Amount of Request: \$375.00

6. Total Program Budget: \$3,189,568

Percent of total program budget you are requesting from the Town of Richmond: <.01%

7. Please state or attach the mission of your agency: *Please see attached.*

8. Will the funding be used to:

X Maintain an existing program       Expand an Existing Program

Start a new program

9. Has your organization received funds from the Town in the past for this or a similar program? Yes.

If yes, please answer the following:

a. Does the amount of your request represent an increase over your previous appropriation? If yes, explain the reason(s) for the increase. N/A

b. Were any conditions or restrictions placed on the funds by the Selectboard? If yes, describe how those conditions or restrictions have been met. N/A

**B. PROGRAM OVERVIEW**

1. Statement of Need: Identify the issue or need that the program will address (use statistical data to justify the need for the program). To what extent does this need or problem exist in the Town of Richmond?

VCIL has specific programs that benefit the residents of Richmond, including the Sue Williams Freedom Fund, which provides grant dollars for assistive technology not otherwise covered by insurance (hearing aids, vehicle modifications, scooters etc), Meals on Wheels for people under the age of 60 and who have a disability (the Council on Aging serves people over the age of 60) and the Home Access Program, providing ramps and bathroom modifications to residents. VCIL's Peer Advocate Counselors (PACs) offer peer-to-peer services for people seeking assistance because of barriers they are experiencing. All of our PACs have disabilities themselves and have navigated many of these barriers already. This past year two residents received meals from our Meals on Wheels (MOW) program and one resident utilized our Information, Referral and Assistance program.

In addition to people served, VCIL offers technical assistance to the business community on the Americans with Disabilities Act and other disability-related laws.

According to the U.S. Census, 20 percent of Vermonters have a disability. The programs offered at VCIL to residents of Richmond afford them greater independence.

## 2. Program Summary:

- a. Identify the target/recipients of program services. Specify the number of Town residents your program will serve during the fiscal year and explain the basis upon which this number is calculated. Indicate any eligibility requirements your program has with respect to age, gender, income or residence.

In the previous year, VCIL served two residents of Richmond. Considering that 20 percent of the population has a disability, this number can vary greatly from year to year depending on the needs of the residents.

In addition to the number of residents, the type of service will vary. Some business owners needing technical assistance can reach out for a quick phone call, while another resident may need a home modification which can cost over \$15,000.

Eligibility varies from program to program. For the business community, anyone that has a question about disability-related laws can contact us.

For the Home Access Program and Sue Williams Freedom Fund there are income limits (must not exceed 80 percent of the HUD median income), and one must have a disability that directly relates to the need requested (home modification or assistive technology). Our Meals on Wheels program is for people with disabilities under the age of 60 (Council on Aging takes over at 60).

The Peer Advocate Counseling Program is offered to anyone who has a disability and wants to work on specific independent living goals. The peer must be engaged in the process of working on goals identified.

- b. Identify what is to be accomplished or what change will occur from participating in the program. How will people be better off as a result of participating in the program? Describe the steps you take to make the project known to the public, and make the program accessible and inclusive?

VCIL staff work with program participants to develop an Independent Living plan and that plan addresses specific goals to living independently and the steps needed to obtain the goals. The peer advocate counseling staff work with peers to achieve those goals. Residents on our Meals on Wheels program receive one hot and nutritious meal a day which they do not feel they are able to do on their own in their current living situation. Our outreach team continues to work to let more people know who VCIL is and what we do with a focus on underserved populations. We have a PSA about VCIL and videos are on YouTube for our Youth Transition Program. Our Youth Transition staff travels to schools to discuss what the options are after high school.

Other outreach techniques include social media (Facebook and YouTube), VCIL's website, and outreach to community organizations, the state and other partners about our services/programs, we also ran ads on WCAX about our services.

VCIL strives to be accessible and inclusive. We have policies and procedures for reasonable accommodations. We complete cultural competency assessments and continuously work to be more inclusive of our programming, additional straining will take place in FY'24.

## 3. Program Funding:

- a. Identify how Town funds, specifically, will be used (i.e., funds will provide "X" amount of units of service.)

VCIL will use the funding for our Peer Advocacy Counseling Program (PAC) and for Information, Referral and Assistance (IR&A). These programs are at the heart of VCIL's work and allow residents to access information about disability-related laws, services and programs. The PAC program provides residents one-on-one support when overcoming barriers they are experiencing because of disability. We work with residents to develop an Independent Living Plan and set goals. We then work one on one in helping residents achieve those goals. Our peer counselors all have disabilities themselves and understand through personal experience and training how to overcome obstacles that people with disabilities often face, especially when seeking housing, employment and transportation services.

- b. List the other agencies to whom you are submitting a request for funds for this program and the amount requested. How would this program be modified should revenues be lost? VCIL appreciates the assistance from the town and these funds, combined with grants received from other organizations, cities/towns and private donations, enable us to offer the services when needed to individuals with disabilities. (please see attached budget and FY'25 Towns Requesting allocations from)

## C. ORGANIZATIONAL CAPACITY

1. Describe your agency's capability to provide the program including its history, previous experience providing this service, management structure and staff expertise.

Since 1979, the Vermont Center for Independent Living (VCIL) has provided services to enhance the lives of people with disabilities with a vision of people with disabilities living independently and staying where they choose, in their Richmond home.

VCIL evaluates the needs of individuals with disabilities through an annual survey. The need of individuals range from getting and understanding information to access programs/services, accessing transportation, needs for meals on wheels and accessibility modifications in the home. Many of the individuals VCIL works with are considered "vulnerable" and through support and other services residents are less exposed to vulnerabilities.

VCIL employs people who have disabilities and they work 1:1 with residents who have disabilities and use their personal experience as an individual who has a disability to help others navigate complicated systems, and teach the skills that allow individuals to be more confident and advocate for their own needs.

VCIL provides technical assistance to business owners and municipalities on the Americans with Disabilities Act (ADA) and other disability related laws. This allows for businesses to be less exposed to complaints and litigation and allows people with disabilities to have access to goods, services and employment opportunities.

VCIL provides home access modifications to those who have physical disabilities and need a ramp or bathroom access, Meals on Wheels to people with disabilities under the age of 60 who cannot prepare their own meal, assistive technology grants and farm assessments. VCIL is also home to the VT Telecommunications Equipment Distribution Program (VTEDP) which provides telecommunications equipment to enable low-income Deaf, Deaf-blind, and hard of hearing individuals to communicate by telephone.

These services all make a difference in individual lives and allow individuals with disabilities to achieve personal goals of living in their own home, raising children, going to community outings, employment and volunteerism.

2. How will you assess whether/how program participants are better off? Describe how you will assess program outcomes. Your description should include: what (what kind of data), how (method/tool for collecting the data), from whom (source of data) and when (timing of data collection).

Every January, VCIL sends out a survey to over 1,000 peers statewide that measures overall satisfaction with VCIL, what has improved in their life as a result of working with VCIL, advocacy issues peers would like to see us focus on and satisfaction within the particular program peer was enrolled in. This past year's survey once again focused on support groups in light of the pandemic. Since many of our peers have compromised immune systems they are still feeling isolated. We now have a Traumatic Brain Injury, Men's Group, Women's Group and a Deaf and Hard of Hearing support group and asked what other groups people would be interested in. There is also a "Long Haulers Group" that VCIL is involved in for people experiencing ongoing issues from Covid-19.

As an organization, VCIL uses Results Based Accountability as the tool for evaluation and planning. We also see the direct result of skills training and social interaction in the increase in peer leaders who are conducting workshops, facilitating meetings, and talking to their legislators about advocacy issues that affect them. An audit at the end of a fiscal year to determine how many of our peers have reached their set goal is also a way for our Peer Advocate Counselors (PACs) to measure success or to follow-up with said peer to find out what else needs to be done.

3. Summarize or attach program and or service assessments conducted in the past two years.

Please find peer survey attached. In addition, programs within VCIL have evaluation procedures.

4. Does your organization have a strategic plan and a strategic planning process in place? If yes, please attach your plan.

The strategic plan should include a mission statement, goals, and action steps to achieve the goals, and measures that assess the accomplishments of the goals.

Please find our strategic plan attached.

5. What is the authorized size of your board of directors? Up to 15 members.

How many meetings were held by the board last year?

Full board meetings are held quarterly, in addition we have Program, Executive and Finance Committees made up of board members, and the committees meet six times a year. After the flood several more "emergency" meetings were held in order to move forward work from home policies, bid approval for building repairs etc.

6. Does your organization have an audit performed? If yes, the audit must be provided to the Town Manager upon request. Yes.

I, the undersigned, confirm the information contained herein is accurate and can be verified as such. I understand and agree that if the requested funds are approved, the disbursement of funds are subject to all conditions established by the Richmond Selectboard.



Signature of Applicant: \_\_\_\_\_

Date: 10/20/2023

Print Name of Applicant and Title: Sarah Lauderdale, Executive Director

**A. 4 THE VERMONT CENTER FOR INDEPENDENT LIVING #03-0271000**  
**TOWN OF RICHMOND**  
**SUMMARY REPORT**

**Request Amount: \$375.00**

For over 45 years, The Vermont Center for Independent Living (VCIL) has been teaching people with disabilities and the Deaf how to gain more control over their lives and how to access tools and services to live more independently. VCIL employees (85% of whom have a disability) conduct public education, outreach, individual advocacy and systems change advocacy to help promote the full inclusion of people with disabilities into community life.

In FY'24 (10/2023-9/2024) VCIL responded to thousands of requests from individuals, agencies and community groups for information, referral and assistance and program services for individuals living with a disability. VCIL Peer Advocate Counselors (PACs) provided one-on-one peer counseling to **293** individuals to help increase their independent living skills. VCIL's Home Access Program (HAP) assisted **233** households with information on technical assistance and/or alternative funding for modifications; **115** of these received financial assistance to make their bathrooms and/or entrances accessible. Our Sue Williams Freedom Fund (SWFF) provided **149** individuals with information on assistive technology; **43** of these individuals received funding to obtain adaptive equipment. **320** individuals had meals delivered through our Meals on Wheels (MOW) program for individuals with disabilities under the age of 60. Our Vermont Telecommunications Equipment Distribution Program (VTEDP) served **38** people and provided **31** peers with adaptive telecommunications enabling low-income Deaf, Deaf-blind, Hard of Hearing and individuals with disabilities to communicate by telephone.

VCIL's central office is located in downtown Montpelier (although we are working from home and temporary space also in Montpelier) as our office (along with so many others) was devastated in the July flood. We have four branch offices in Bennington, Chittenden, Rutland and Windham Counties. Our PACs and services are available to people with disabilities throughout Vermont.

During our FY'24, **3** residents of **Richmond** received services from the following programs

- Meals on Wheels (MOW)  
(\$**1,300.00** spent on meals for residents)
- Information, Referral and Assistance (I,R&A)

## **7**

### **Mission Statement**

The Mission of the Vermont Center for Independent Living is to empower Vermonters with disabilities, Deaf Vermonters, and others to tear down the physical, communication, and attitudinal barriers that keep us from realizing our full human potential.

Together, we will build communities to:

- achieve our human and civil rights and equal access to services and opportunities;
- have available ongoing resources and options for independent Living;
- realize our power to control and direct our own lives.

We join together to celebrate our diversity and the common goal for the full inclusion of all persons in the life of our communities.

**B.3.b****C&T's VCIL Requested Appropriations From**

<b>City/Town</b>	<b>FY24 Amount Requested</b>		<b>City/Town</b>	<b>FY24 Amount Requested</b>
Albany	150.00		Fayston	100.00
Alburgh	175.00		Ferrisburgh	250.00
Andover	55.00		Fletcher	75.00
Arlington	295.00		Glover	245.00
Bakersfield	95.00		Goshen	80.00
Barnet	280.00		Grafton	105.00
Barre City	3000.00		Granby	105.00
Barre Town	2000.00		Granville	80.00
Belvidere	195.00		Greensboro	210.00
			Guildhall	75.00
Berkshire	180.00		Hartford	845.00
Berlin	1000.00		Hartland	160.00
Bethel	150.00		Highgate	380.00
Bloomfield	75.00		Hinesburg	200.00
Brattleboro	1600.00		Hubbardton	155.00
Bridport	190.00		Huntington	250.00
Brighton	150.00		Isle La Motte	295.00
Brookfield	500.00		Jamaica	250.00
Brookline	80.00		Jay	200.00
Brookline	80.00		Jericho	150.00
Brunswick	50.00		Leicester	145.00
Calais	415.00		Lemington	75.00
Cambridge	385.00		Lowell	90.00
Cavendish	100.00		Ludlow	360.00
Charlotte	200.00		Lunenburg	200.00
Corinth	170.00		Maidstone	150.00
Coventry	130.00		Manchester	420.00
Craftsbury	140.00		Marshfield	150.00
Danby	180.00		Middlesex	195.00
Dummerston	100.00		Middletown Springs	100.00
Duxbury	150.00		Milton	300.00
East Montpelier	250.00		Monkton	195.00
Eden	165.00		Montpelier	5000.00
Elmore	400.00		Mount Holly	100.00
Essex/Junc.	1500.00		Mount Tabor	55.00
Fairfax	500.00		New Haven	215.00
Fairlee	155.00		Newark	300.00

City/Town	FY24 Amount Requested	City/Town	FY24 Amount Requested
Newfane	220.00	Tunbridge	150.00
North Hero	310.00	Underhill	200.00
Northfield	1000.00	Victory	70.00
Peru	140.00	Waitsfield	450.00
Pittsfield	75.00	Walden	145.00
Pittsford	314.00	Wallingford	250.00
Plainfield	100.00	Waltham	100.00
Plymouth	175.00	Warren	480.00
Poultney	420.00	Washington	365.00
Pownal	440.00	Waterbury	600.00
Proctor	250.00	Weathersfield	185.00
Randolph	1000.00	Wells	160.00
Readsboro	230.00	West Fairlee	130.00
Richmond	375.00	West Windsor	140.00
Royalton	305.00	Westfield	95.00
Rupert	120.00	Westford	100.00
Rutland City	10,000	Westminster	110.00
Rutland Town	535.00	Westmore	80.00
Ryegate	265.00	Weston	230.00
Sandgate	95.00	Wheelock	85.00
Searsburg	90.00	Williamstown	500.00
Shaftsbury	1000.00	Williston	600.00
Sheldon	100.00	Woodbury	210.00
Shrewsbury	170.00	Woodford	250.00
St. Albans Town	500.00	Worcester	200.00
St. George	100.00		
Stannard	80.00		
Starksboro	250.00		
Stockbridge	230.00		
Stowe	420.00		
Strafford	200.00		
Stratton	500.00		
Sudbury	80.00		
Sutton	1000.00		
Swanton	500.00		
Tinmouth	80.00		
Townshend	255.00		



**C.3**

**VCIL 2024 peer survey**

**VCIL 2023 peer survey (services received Jan. 2023-Dec. 2024)**

Thank you for taking time to let us know about your experience with our organization this past year. **For those of you who return completed surveys by February 29, 2024, you will be entered into a drawing to receive one of three \$100 debit cards.**

If you would prefer to take the survey:

- Over the phone, please call 1-800-639-1522 (voice)
- By using ASL please call Val Hughes at 802-275-0099 (videophone)

**Satisfaction with VCIL Overall**

**1. Please select which program(s) you have utilized (select all that apply)**

<input type="checkbox"/>	Americans with Disabilities Act Technical Assistance	<input type="checkbox"/>	Peer Advocacy Counseling Program
<input type="checkbox"/>	Home Access Program (HAP)	<input type="checkbox"/>	Sue Williams Freedom Fund (SWFF)
<input type="checkbox"/>	Meals on Wheels (MOW) (if under age 60)	<input type="checkbox"/>	VT Telecommunications Equipment Distribution Program (VTEDP)
<input type="checkbox"/>		<input type="checkbox"/>	Other: _____

**Please rate your overall experience with VCIL. Select Agree to Disagree for each of the following items.**

		<b>Agree</b>	<b>Disagree</b>
<b>2.</b>	Staff members are well informed	<input type="checkbox"/>	<input type="checkbox"/>
<b>3.</b>	Staff members treat me with respect	<input type="checkbox"/>	<input type="checkbox"/>
<b>4.</b>	I receive(d) my services in a timely manner	<input type="checkbox"/>	<input type="checkbox"/>
<b>5.</b>	I am satisfied with my overall experience	<input type="checkbox"/>	<input type="checkbox"/>

**6. What has improved in your life as a result of working with VCIL?**

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**7. VCIL works with the Vermont Coalition of Disability Rights (VCDR) which sends regular legislative updates related to disability issues through email. Yes! Add me to the email list serve!**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_

**Please turn over,  
questions on both sides**

**8. Would you be interested in participating in on line support groups?**

Yes  No

**If yes, what type of groups?**

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**9. I'd like to become a member of VCIL to receive the quarterly newsletter and invites to VCIL events.** Yes  No

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

I do not have email, **please mail my newsletter** (provide name)

**10. Are you able to connect with your healthcare providers when you need to?** Yes  No

If no, why not? \_\_\_\_\_

**Number of Covid infections:**

**11. How many times have you ever had COVID?** \_\_\_\_\_

**12. How many times have you had COVID in the past year?** \_\_\_\_\_

**13. On a scale of 1-5 (with 1 being "no action taken" and 5 being "many actions taken"), how would you rate your current level when it comes to protecting yourself and others from COVID?**

No Actions Taken

Many Actions Taken

1

2

3

4

5

**14. In the past year, have you limited any of the following activities for yourself or others in your household as a result of COVID concerns?**

**(Check all that apply)**

Medical or dental care

Education/schooling

Work or volunteer hours

In-person visits with friends or family

Going to the grocery store or pharmacy

Other necessary activities (voting, visits to post office, DMV, pet care, car care, etc.)

Other: \_\_\_\_\_

**If you have ever had a COVID-19 infection:**

**15. Did you get any new or worse symptoms after the start of the infection?** If yes, how many months did they last? \_\_\_\_\_

**16. Do you think you might have Long COVID?**

Yes  No  Unsure

**17. Do you feel like you are sick more often than you used to be?**

Yes  No  Unsure

**18. Is there anything VCIL can do to help with any of the above impacts?** \_\_\_\_\_

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**19. If VCIL offered a service of assisting people with Social Security applications (SSI or SSDI), would you be interested in that service?**

Yes  No

**20. Are you registered to vote?** Yes  No

**21. If no, would you like to be?** Yes  No

**22. Do you have internet access other than on your cell phone?**

Yes  No

**23. County of Residence (optional)** \_\_\_\_\_

**Thank you for your input!**

If you **do not** receive Meals on Wheels through VCIL, the survey is now complete. (**If you are 60 or over, VCIL does not provide your meals.**)

If you are **under 60 and receive Meals on Wheels (MOW)**, Please turn over, for MOW portion of survey.

**Satisfaction with Meals on Wheels (if you are under age 60)**

		<b>Agree</b>	<b>Disagree</b>
<b>24.</b>	I received my application in a timely manner.		
<b>25.</b>	VCIL Meals on Wheels staff were helpful.		
<b>26.</b>	Meals on Wheels staff were easy to reach.		

**27. Do you eat the meals that are delivered?**

Yes  No  Sometimes

**28. On the days you eat a meal from Meals on Wheels, how much additional food do you eat? (check all that apply)**

It is my only meal  I eat 2 other meals  
 I eat 1 other meal  I eat snacks

**29. How often are you satisfied with the variety of foods.**

Always  Usually  Sometimes  Seldom  Never

**30. How would you rate the quality of Meals on Wheels overall?**

Excellent  Very Good  Good  Fair  Poor

**31. Do services received from Meals on Wheels help you to:**

Eat healthier foods?  Yes  No  Not sure  
 Feel better?  Yes  No  Not sure  
 Improve your health?  Yes  No  Not sure  
 Continue to live at home?  Yes  No  Not sure

**32. What recommendations do you have for improving Meals on Wheels? (please note, we do not prepare the meals)**

**33. In addition to my Meals on Wheels meal, I eat the following: (check all that apply)**

<input type="checkbox"/>	I eat microwavable meals	<input type="checkbox"/>	I eat at community meals
<input type="checkbox"/>	I eat sandwiches	<input type="checkbox"/>	I eat with family/friends
<input type="checkbox"/>	I eat take-out food	<input type="checkbox"/>	Other:

**4. If VCIL no long provided Meals on Wheels for you, what would you do? (check all that apply)**

<input type="checkbox"/>	Get help from family and friends	<input type="checkbox"/>	Move to a nursing home or assisted living facility
<input type="checkbox"/>	Move in with family	<input type="checkbox"/>	Other:

## C.4

To empower Vermonters with Disabilities, Deaf Vermonters, and others to tear down the physical, communication, and attitudinal barriers that keep us from realizing our full human potential

### VISION:

To be recognized as the place where we join together to celebrate our diversity and the common goal for the full inclusion of all persons in the life of our communities

### STRATEGIC PILLARS:

Independent Living	Program Awareness	Financial Sustainability	Organizational Effectiveness	Legislative Advocacy
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### STRATEGIC OBJECTIVES:

<ol style="list-style-type: none"> <li>1. Provide access to services/equip. that will enable People with Disabilities to remain in their own homes and access their communities.</li> </ol>	<ol style="list-style-type: none"> <li>1. Better define &amp; articulate what VCIL is and does.</li> <li>2. Develop a PR Campaign.</li> <li>3. Increase Membership.</li> </ol>	<ol style="list-style-type: none"> <li>1. Diversify &amp; expand revenue sources.</li> <li>2. Build financial Reserves.</li> </ol>	<ol style="list-style-type: none"> <li>1. Refine program procedures.</li> <li>2. Continue collaborations and partnerships with other agencies.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assess important disability related issues at the local, state, and federal level.</li> <li>2. Prioritize &amp; Develop strategies for advocacy.</li> </ol>
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### LONG TERM STRATEGIC OUTCOMES:

<ul style="list-style-type: none"> <li>• Accessible housing stock is increased</li> <li>• Peers are able to advocate for their needs</li> <li>• Adaptive Equip is readily available</li> </ul>	<ul style="list-style-type: none"> <li>• VCIL will be recognized as the place to go for help with disability related issues</li> </ul>	<ul style="list-style-type: none"> <li>• VCIL's dependence on state and federal grants will be reduced</li> <li>• Adequate operating reserves</li> </ul>	<ul style="list-style-type: none"> <li>• Strong program offerings with VCIL</li> <li>• No wrong door – peers can enter any agency and get referred to services needed</li> </ul>	<ul style="list-style-type: none"> <li>• Public buildings and events will be accessible to all</li> <li>• The disability voice will be included in laws</li> </ul>
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### PERFORMANCE MEASUREMENT:

<ul style="list-style-type: none"> <li>• #/% increase in # living indep..</li> </ul>	<ul style="list-style-type: none"> <li>• Awareness levels</li> </ul>	<ul style="list-style-type: none"> <li>• % Revenue by source</li> </ul>	<ul style="list-style-type: none"> <li>• Consumer satisfaction</li> </ul>	<ul style="list-style-type: none"> <li>• Increased access</li> </ul>
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<b>a. Vermont Center for Independent Living</b>			
<b>FY'25 Approved Budget</b>			
<b>INCOME</b>	<b>FY25 Budget</b>	<b>EXPENSES</b>	<b>FY25 Budget</b>
	<b>Approved</b>		<b>Approved</b>
<b>Federal Grants</b>		<b>Specific Assistance</b>	
704 North Balance Prior Year	220,000		
704 North	762,927	VHCB	386,503
704 South	332,070	Meals on Wheels	389,879
SILC grant	168,000	SILC Grant	53,000
NIDILRR	16,000	EDP equipment	36,000
US Aging Vaccine	238,800	<b>Total Specific Assistance</b>	<b>865,382</b>
<b>State Grants</b>		<b>Salaries &amp; Fringe</b>	
VHCB	545,000	Salaries	1,069,456
Meals on Wheels	499,521	Fringe Benefits	386,584
		<b>Total Salaries &amp; Fringe</b>	<b>1,456,040</b>
<b>Other Grants</b>			
EDP grant	75,000	<b>Operating Expenses</b>	
VR Youth	100,000	Professional Services	484,416
P2P	137,250	Board Expenses	3000
		Reasonable Accomodations	29,500
<b>Misc Income</b>		Occupancy	105,581
Cities & Towns	55,000	Travel-Mileage	13,500
Donations - Unrestricted	35,000	Printing & Publication	400
Other Income	5,000	Telecommunications	25,684
		Supplies	40,150
		General Insurance	18,332
		Postage	10,800
		Equip Lease, Repair & Maint	13,000
		Advertising & Outreach	16,000
		Dues & Subscriptions	8,500
		Training/conferences/travel	15,000
		Depreciation Expense	12,000
		Peer Skills Trainings/Stipends	4,200
		Reserve/Special Projects	68,083
		<b>Total Operating Expenses</b>	<b>868,146</b>
<b>Total Income</b>	<b>3,189,568</b>	<b>Total Expenses</b>	<b>3,189,568</b>
		<b>Net Income</b>	<b>0</b>