



NAVAJO NATION DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

ETHEL B. BRANCH
Attorney General

HEATHER CLAH
Deputy Attorney General

DEPARTMENT OF JUSTICE
INITIAL ELIGIBILITY DETERMINATION
FOR NAVAJO NATION FISCAL RECOVERY FUNDS

RFS/HK Review #: HK0729

Date & Time Received: 12/27/23 at 13:56

Date & Time of Response: 1/09/24 at 17:00

Entity Requesting FRF: Cornfields Chapter

Title of Project: Bathroom Additions

Administrative Oversight: Division of Community Development

Amount of Funding Requested: \$75,000.00

Eligibility Determination:

- FRF eligible (checked)
FRF ineligible
Additional information requested

FRF Eligibility Category:

- (1) Public Health and Economic Impact (checked)
(2) Premium Pay
(3) Government Services/Lost Revenue
(4) Water, Sewer, Broadband Infrastructure

U.S. Department of Treasury Reporting Expenditure Category:
1.14, Other Public Health Services

THE NAVAJO NATION
FISCAL RECOVERY FUNDS REQUEST FORM & EXPENDITURE PLAN
FOR GOVERNANCE-CERTIFIED CHAPTERS

Part 1. Identification of parties.

Governance-Certified Chapter requesting FRF: Cornfields Chapter

Date prepared: 11/01/2023

Chapter's P.O. Box 478
mailing address: Ganado, Arizona 86505

phone & email: (928) 755-5912 aearle@nnchapters.org
website (if any): _____

This Form prepared by: Alfreda Earle
Alfreda Earle, Chapter Manager
CONTACT PERSON'S name and title

phone/email: (928) 755-5912 aearle@nnchapters.org
(928) 755-5912 aearle@nnchapters.org
CONTACT PERSON'S info

Title and type of Project: Bathroom Additions

Chapter President: Morgan Cleveland, Sr.

phone & email: (928) 755-5912

Chapter Vice-President: Wallace James, Jr.

phone & email: (928) 755-5912 wjamesjr@naataanii.org

Chapter Secretary: Sharon C. Smith

phone & email: ssmith86504@gmail.com

Chapter Treasurer: Sharon C. Smith

phone & email: ssmith86504@gmail.com

Chapter Manager or CSC: Alfreda Earle

phone & email: (928) 755-5912 aearle@nnchapters.org

DCD/Chapter ASO: Toni Mina

phone & email: (928) 654-3933 tmina@nndcd.org

List types of Subcontractors or Subrecipients that will be paid with FRF (if known): Cornfields Chapter

document attached

Amount of FRF requested: 75,000.00

FRF funding period: November 01, 2023 - December 31, 2026

indicate Project starting and ending/deadline date

Part 2. Expenditure Plan details.

(a) Describe the Program(s) and/or Project(s) to be funded, including how the funds will be used, for what purposes, the location(s) to be served, and what COVID-related needs will be addressed:

This project will construct bathroom additions on homes within the Cornfields Community. Funds will purchase building materials and supplies for the construction and hire workers to construct the bathroom addition. The project will provide an adequate bathroom to improve basic quality of life, meet health care needs, and sanitation needs. Providing indoor bathroom use prevents the spread of health related illnesses that may cause increased vulnerability to COVID-19 complications.

document attached

(b) Explain how the Program or Project will benefit the Navajo Nation, Navajo communities, or the Navajo People:

The project will benefit the community of Cornfields Chapter by providing home bathroom additions necessary for sanitation and hygiene safety. This project will promote public health and hygiene by addressing major sanitation needs to prevent reduce COVID-19 infection and other illness by providing proper sanitation facilities.

document attached

(c) A prospective timeline showing the estimated date of completion of the Project and/or each phase of the Project. Disclose any challenges that may prevent you from incurring costs for all funding by December 31, 2024 and/or fully expending funds and completing the Program(s) or Project(s) by December 31, 2026:

APPENDIX A

The project will have funds encumbered no later than December 31, 2024 and will be fully expended by December 31, 2026.

document attached

(d) Identify who will be responsible for implementing the Program or Project:

Cornfields Chapter.

document attached

(e) Explain who will be responsible for operations and maintenance costs for the Project once completed, and how such costs will be funded prospectively:

The homeowner will be responsible for the operation and maintenance upon project completion.

document attached

(f) State which of the 66 Fiscal Recovery Fund expenditure categories in the attached U.S. Department of the Treasury Appendix 1 listing the proposed Program or Project falls under, and explain the reason why:

The project is covered under Expenditure Category 5.18 Water and Sewer: Other. The project will enable families access safe, sanitary bathrooms without compromising their health and safety using outside facilities. The goal is to provide an adequate bathroom to improve basic quality of life, meet health care needs, and sanitation needs and to prevent the spread of COVID-19 and other contagious viruses and illnesses.

document attached

Part 3. Additional documents.

List here all additional supporting documents attached to this FRF Expenditure Plan (or indicate N/A):

Expenditure Categories Table indicating 2.3. Chapter Resolution.

Chapter Resolution attached

Part 4. Affirmation by Funding Recipient.

Funding Recipient affirms that its receipt of Fiscal Recovery Funds and the implementation of this FRF Expenditure Plan shall be in accordance with Resolution No. CJY-41-21, the ARPA, ARPA Regulations, and with all applicable federal and Navajo Nation laws, regulations, and policies:

Chapter's Preparer: Angela Eagle
signature of Preparer/CONTACT PERSON

Approved by: Angela Eagle
signature of Chapter Manager or CSC

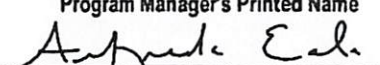
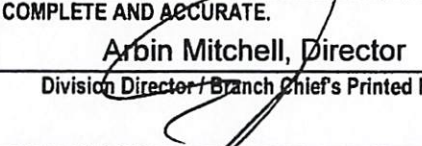
Approved by: Ngan Chantel Sr
signature of Chapter President (or Vice-President)

Approved by: Toni
signature of CCD Chapter ASO

Approved to submit for Review: [Signature]
signature of CCD Director

FY 2024

**THE NAVAJO NATION
PROGRAM BUDGET SUMMARY**

PART I. Business Unit No.: <u>New</u>		Program Title: <u>Cornfields Chapter Bathroom Addition S</u>		Division/Branch: <u>Exec/DCD</u>				
Prepared By: <u>Alfreda Earle</u>		Phone No.: <u>(928) 755-5912</u>		Email Address: <u>aearle@nnchapters.org</u>				
PART II. FUNDING SOURCE(S)	Fiscal Year /Term	Amount	% of Total	PART III. BUDGET SUMMARY	Fund Type Code	(A) NNC Approved Original Budget	(B) Proposed Budget	(C) Difference or Total
NN Fiscal Recovery Funds	<u>11/1/23 - 12/31/24</u>	75,000.00	100%	2001 Personnel Expenses				
				3000 Travel Expenses				
				3500 Meeting Expenses				
				4000 Supplies				
				5000 Lease and Rental				
				5500 Communications and Utilities				
				6000 Repairs and Maintenance				
				6500 Contractual Services				
				7000 Special Transactions				
				8000 Public Assistance			75,000	75,000
				9000 Capital Outlay				
				9500 Matching Funds				
				9500 Indirect Cost				
				TOTAL		\$0.00	75,000.00	75,000
				PART IV. POSITIONS AND VEHICLES		(D)	(E)	
				Total # of Positions Budgeted:		<u>0</u>	<u>0</u>	
				Total # of Vehicles Budgeted:		<u>0</u>	<u>0</u>	
TOTAL:		\$75,000.00	100%					
PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.								
SUBMITTED BY: <u>Alfreda Earle</u>			APPROVED BY: <u>Arbin Mitchell, Director</u>					
Program Manager's Printed Name			Division Director / Branch Chief's Printed Name					
								
Program Manager's Signature and Date			Division Director / Branch Chief's Signature and Date					

Jaron Charley, Program Manager

THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIA

PART I. PROGRAM INFORMATION:
 Business Unit No.: _____ New _____ Program Name/Title: Comfields Chapter / Bathroom Additions

PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:
 CF-FEB2023-008 The Fiscal Reovery Funds are specifically intend to respond to the COVID-19 public health emergency and its negative economic impacts, including assistance to households, and repond to the workers performing essentail work during the COVID-19 public health emergency and make necessary investments in water, sewer, and/or broadband infrastructure.

PART III. PROGRAM PERFORMANCE CRITERIA:

	1st QTR		2nd QTR		3rd QTR		4th QTR	
	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual
1. Goal Statement: To raise the standard of living by constructing bathroom addition. Program Performance Measure/Objective: Build bathroom addition for community members that need bathroom addition.								
2. Goal Statement: Program Performance Measure/Objective:	1/10 ac		1/10 ac		1/10 ac		1/10 ac	
3. Goal Statement: Program Performance Measure/Objective:								
4. Goal Statement: Program Performance Measure/Objective:								
5. Goal Statement: Program Performance Measure/Objective:								

PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.

Alfreda Earle
 Program Manager's Printed Name
Alfreda Earle
 Program Manager's Signature and Date

Arbin Mitchell, Director
 Division Director/Branch Chief's Printed Name
[Signature]
 Division Director/Branch Chief's Signature and Date

Jaron Charley, Program Manager

FY 2024

THE NAVAJO NATION
DETAILED BUDGET AND JUSTIFICATION

Page 3 of 4
BUDGET FORM 4

PART I. PROGRAM INFORMATION:			
Program Name/Title: <u>Comfields Chapter / Bathroom Addition</u>		Business Unit No.: <u>New</u>	
PART II. DETAILED BUDGET:			
(A)	(B)	(C)	(D)
Object Code (LOD 6)	Object Code Description and Justification (LOD 7)	Total by DETAILED Object Code (LOD 6)	Total by MAJOR Object Code (LOD 4)
8000	Assistance		
8500	Infrastructure		75,000
	8535 - Bathroom Additions	75,000	
TOTAL		75,000	75,000



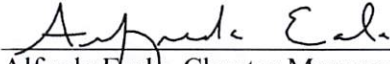
CORNFIELDS CHAPTER

P.O. Box 478, Ganado, Arizona 86505 – PH# (928) 755-5912 – FAX# (928) 755-5917

Email: cornfields@navajochapters.org Website: cornfields.navajochapters.org

MEMORANDUM

TO: Leonora Henderson, MBA
Senior Program and Projects Specialist

FROM: 
Alfreda Earle, Chapter Manager
Cornfields Chapter

DATE: December 18, 2023

SUBJECT: Cornfields Chapter Bathroom Additions

This is to inform you that Cornfields Chapter has identified 10 individuals who need bathroom additions. These individuals are on a funded project with IHS. Since, these individuals are identified by IHS there will be no application.

I have attached the names from IHS. If you have questions contact me at (928) 755-5912 or via email at aearle@navajochapters.org. Thank you.

ATTACHMENTS