

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 FRF ineligible Additional information requested FRF Eligibility Category:
(1) Public Health and Economic Impact (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

Returned for the following reasons (Ineligibility Reasons/Paragraphs 5.E.(1)-(10) of FRF Procedures): Missing Form Expenditure Plan incomplete Funds will not be obligated by Supporting documentation missing Project will not be completed by 12/31/2026 12/31/2024 Ineligible purpose Incorrect Signatory Submitter failed to timely submit CARES reports Inconsistent with applicable NN or Additional information submitted is insufficient federal laws to make a proper determination Other Comments: We have modified the requested expenditure code from 5.18, Water Infrastructure, to 1.14, Other Public Health Services, to be consistent with previously approved projects. Name of DOJ Reviewer: Navalyn R. Platero Signature of DOJ Reviewer:

Disclaimers:

If additional information has been requested and you wish to provide it, please resubmit all the required forms updated to include the additional information. Full resubmission will expedite the Initial Eligibility Determination process. Therefore, please include a new RFS form indicating resubmission, revised Appendix A, Budget Form 1, and other supporting documents. **Please email your resubmission to arpa@nndoj.org.** Please be aware that under Resolution BFS-31-21 a Project or Program can only be reviewed twice, therefore it is critical that you include all the requested additional information for your second submission.

An NNDOJ Initial Eligibility Determination is based on the documents provided, which NNDOJ will assume are true, correct, and complete. Should the Project or Program change in any material way after the initial determination, the requestor must seek the advice of NNDOJ. An initial determination is limited to review of the Project or Program as it relates to whether the Project or Program is a legally allowable use – it does not serve as an opinion as to whether or not the Project or Program should be funded, nor does it serve as an opinion as to whether or not the amount requested is reasonable or accurate.

APPENDIX A

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

Part 1. Identification of parties.

Governance-Certified Chapter Cornfields Chapter requesting FRF:	Date prepared: 11/01/2023
Chapter's P.O. Box 478	
mailing address: Ganado, Arizona 86505	phone & email: (928) 755-5912 aearle@nnchpaters.org website (if any):
This Form prepared by: Alfreda Earle	phone/email; (928) 755-5912 aearte@nnchapters.org
Alfreda Earle, Chapter Manager CONTACT PERSON'S name and title	(928) 755-5912 aearle@nnchapters.org
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
Part 2 Evnanditura Diam data ta	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 and what COVID-related needs will be addressed: 	how the funds will be used, for what purposes, the location(s) to be served,
bathroom addition. The project will provide an ad	equate bathroom to improve basic quality of life, oviding indoor bathroom use prevents the spread of
0.5	☐ document attached
(b) Explain how the Program or Project will benefit the Navajo Nation	the state of the s
The project will benefit the community of Cornfield necessary for sanitation and hygiene safety. This addressing major sanitation needs to prevent red providing proper sanitation facilities.	ls Chapter by providing home bathroom additions project will promote public health and hygiene by use COVID-19 infection and other illness by
	document attached
(c) A prospective timeline showing the estimated date of completion that may prevent you from incurring costs for all funding by Decem or Project(s) by December 31, 2026:	of the Project and/or each phase of the Project. Disclose any challenges ber 31, 2024 and/or fully expending funds and completing the Program(s)

APPENDIX A

The project will have funds encumbered no later than December 31, 2024 and will be fully expended by December 31, 2026.
(d) Identify who will be responsible for implementing the Program or Project:
Comfields Chapter.
Commence Chapter.
(e) Explain who will be responsible for exemptions and resistances and fault. Division in the 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.
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: Preparer: Signature of Proportion CONTACT PERSON Approved by Approved by Signature of Chapter President Approved by Appro
Approved by: Signature of Chapter Manager or CSC Approved to submit for Review: Signature of CCO Chapter ASO Approved to submit for Review:

THE NAVAJO NATION PROGRAM BUDGET SUMMARY

Page _ l of _ 4 BUDGET FORM 1

PART I. Business Unit	No.: New	Program Title:	Corns	Pields Chapler Bathroom Additions		Division/Branch:	Exec/DCD	
Prepared By:	Alfreda Earle	Program Title: Bathroom Addition S Division/Branch: EXEC_/DCD Part Phone No.: (928) 755-5912 Email Address:						
PART II. FUNDING SOU	Alfreda Earle Fiscal Year //erm ////23- //2/31/26 TOTAL: NOWLEDGE THAT THE INFOR		Total	PART III. BUDGET SUMMARY	500 CT 50	NNC Approved		
NN Fiscal Recovery Fund	s //2/3//26	75,000.00	No. (928) 755-5912 Email Address:					
				3500 Meeting Expenses				
				4000 Supplies				
				5000 Lease and Rental				
				5500 Communications and Utilities				
		V		6000 Repairs and Maintenance				
				6500 Contractual Services				
				7000 Special Transactions				
							75.000	75.000
				9000 Capital Outlay				
					1			
					TOTAL	\$0.00	75,000.00	75,000
				PART IV. POSITIONS AND VEHICLES		(D)	(E)	
				Total # of Positions E	Budgeted:	0	0	1
					_	-		
PART V. I HEREBY ACK	NOWLEDGE THAT THE INF	ORMATION CON	TAINED	IN THIS BUDGET PACKAGE IS COMPLE	TE AND AC	CURATE.		
SUBMITTED BY:	Alfreda Earl	le		APPROVED BY:	Arbin I	Mitchell, p∕irec	tor	
	Program Manager's	Printed Name		Divis	ion Directo	HBranch Chief's Pr	inted Name	
	Antrula	E.l.						
	Program Mahager's Sig	nature and Date		Division	Director / E	ranch Chief's Signa	ture and Date	

Jaron Charley, Program Manager

FY 2024

THE NAVAJO NATION PROGRAM PERFORMANCE CRITERIA

Page 2 of 4

Business Unit No.: New Program Na	me/Title: Comfields	Chapter / 2	Bathroo	m Ad	dition	1 <		
ANT III. I LAN OF OPERATION/RESULUTION NUMBER/PURPOSE OF DECCEASS.				Concession with the last of th	AND DESCRIPTION OF THE PERSON NAMED IN	the second	-	
CF-FEB2023-008 The Fiscal Reovery Funds are specifically intend to respond to the COVI and repond to the workers performing essential work during the COVID-19 public health en	D-19 public health er nergency and make n	nergency ar ecesary inv	id its negativestments in	e economic water, sewe	impacts, inc r, and/or bro	cluding assite padband infra	nce to hous structure.	eholds,
ART III. PROGRAM PERFORMANCE CRITERIA:	1st	TR	2nd	OTR	3rd	QTR	//L	QTR
1. Goal Statement:	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actu
To raise the standard of living by constructing bathroom addition.								
Program Performance Measure/Objective:								
Build bathroom addition for community members that need bathroom addition.	3110		110		10.0			
2. Goal Statement:	ai		ac		110 ac		1410 ac	_
Program Performance Measure/Objective:								
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Goal Statement:								
Program Performance Measure/Objective:								
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Program Performance Measure/Objective:								
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. Goal Statement:								
Program Performance Measure/Objective:								
	ГТ	Т	T	T				
TIV. THEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THO	ROUGHLY REVIEWE	D.						
Alfreda Earle Program Manager's Printed Name	_	Arbi	n-Witch	ell, Dire	tor)		
A A A C O		Division	BirectonBr	erich Chief	Printed M	ame		
Brown Markey Clareton and Date	7 _		(4				
Program Manager's Signature and Date	/a T	liviginn Die	ector/Branc	hlopa C	Z Z	10.1		

FY 2024

THE NAVAJO NATION DETAILED BUDGET AND JUSTIFICATION

Page <u>3</u> of <u>4</u> BUDGET FORM 4

PART I. P	ROGRAM INFORMATION:			· · · · · · · · · · · · · · · · · · ·
	Program Name/Title:	Comfields Chapter/Bathroom AdditionBusiness Unit No.:	Na	
		One of the control of	New	-
PART II.	DETAILED BUDGET:			
(A)		(B)	(C)	(0)
			Total by	(D) Total by
Object		Object Code Description and Justification # OD TO	DETAILED	MAJOR
Code		Object Code Description and Justification (LOD 7)	Object Code	Object Code
(LOD 6)			(LOD 6)	(LOD 4)
	Assistance		12000	75,000
, ,	Infrasture		1	75,000
	8535 - Bathroom Additions		75.000	-
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		TOTA	L 75,000	75 000

FOR OMB USE ONLY:

Resolution No:

FMIS Set Up Date:

THE NAVAJO NATION PROJECT BUDGET SCHEDULE

PART I. Business Unit No.: New		-		-																		PA	RT II.			Proje	ct Inf	ormatic	on
Project Title: Cornfields Ch																						Pro	ject Typ	oe:	Bath	nroom A	Additio	n	
Project Description Purchase	and (constru	uct Bat	hroon	n Addi	tion fo	r Con	nmunit	y mer	nbers												Plan	nned St	art Date	9:	11/0	1/202	3	
																						Plan	nned Er	nd Date:	:	12/31	/2026		
Check one box:	7	Origin	al Bud	get		Bud	get Re	evision		Bu	dget F	tealloc	ation		Budg	get M	odifica	tion				Proj	ect Ma	nager:	Alfre	eda Earl	le		
PART III.		PART IV. Use Fiscal Year (FY) Quarters to complete the information below. O = Oct.; N = Nov.; D = Dec., etc.														_													
List Project Task separately; such		FY 2023 FY 2024																	xpected roject e										
as Plan, Design, Construct, Equip or Furnish.		1st Q	tr.		2nd Q	tr		3rd Qt	r	Π	4th Qt	,		1st Qt	,	Γ	2nd Qt		T			Π	411.0		1				QUS.
	0		D	J	F	M	A	M	J	J	A	S	0	N	D	J	F	M	A	3rd Qt M	J	J	4th Q	S.	-	Date	_12/3	1/2026_	\top
The project will have construction funds encumbered no later than Dec. 31, 2024 and will be fully expended by Dec. 31, 2026 Purchase Supplies Construction	X	X	X	X	х	х	x	X	x	X	X	X	X	X	X	×	X	X	×	X	×	X	X .	X					
ART V. Expected Quarterly Expenditures		\$		10.	\$	0	10,	\$	0	15,	\$ 000.00	0	15,	\$	0	10.	\$	0	10.	\$ 000.00	0	5	\$ 6,000.000)			JECT 75,000	TOTAL	

Company No:

OMB Analyst



CORNFIELDS CHAPTER

P.O. Box 478, Ganado, Arizona 86505 – PH# (928) 755-5912 – FAX# (928) 755-5917 Email: <u>cornfields@navajochapters.org</u> 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