

← **Local Health Department Name Selection:** Click on the cell "Local Health Department Name". An arrow in a white box will appear on the right hand side of the cell. Click the arrow. A list of local health department names will appear. Select your local health department from the list provided.

Preventative Services		66.28%
Access to and Linkage to Clinical Care	\$4,112.98	
Chronic Disease Prevention	\$9,856.06	
Fatality Review & Prevention	\$2,439.39	
Health-Related Areas during Emergencies/Disasters	\$4,237.38	
Immunization	\$6,654.05	
Infectious Disease Surveillance and Prevention	\$4,674.88	
Lead Case Management and Risk Assessment	\$3,570.71	
Maternal and Child Health	\$4,668.56	
Student Health	\$4,737.38	
Trauma and Injury Prevention	\$4,612.38	
Tuberculosis (TB) Control and Case Management	\$3,189.39	
Vital Records	\$1,297.89	
Regulatory Services		33.72%
Food Protection	\$14,748.32	
Environmental Public Health	\$12,748.32	
Tattoo, Body Piercing, Eyelash Safety and Sanitation	\$0.00	

Subtotal will total automatically. Please do not enter anything into this row +											
6. Operating Supplies Subtotal:		\$4,000.00	\$3,500.00								
7. Repair and Maintenance Supplies		Preventive Amount Minimum 60% of HFI Funding	Regulatory Amount Maximum 40% of HFI Funding	Is the Funding Per Core Service Evenly Distributed?	Summary List of Preventative Core Services Addressed By Budget Request	No. of Preventative Services Selected	List of Preventative %	Summary List of Regulatory Core Services Addressed By Budget Request	No. of Regulatory Services Selected	List of Regulatory %	Justification (How does this fit in the Core Service Selected)
1	Generator Repair/Maintenance Supplies	\$2,000.00		YES	Access to and Linkage to Clinical Care Health-Related Areas during Emergencies/Disasters Immunization	3					
2	Office Equipment Repair/Maintenance Supplies	\$3,000.00		YES	Access to and Linkage to Clinical Care Health-Related Areas during Emergencies/Disasters Immunization Lead Case Management and Risk Assessment Tuberculosis (TB) Control and Case Management Vital Records	6					
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
Subtotal will total automatically. Please do not enter anything into this row +											
7. Repair and Maintenance Supplies Subtotal:		\$5,000.00	\$0.00								
8. Program/Partner Support Supplies		Preventive Amount Minimum 60% of HFI Funding	Regulatory Amount Maximum 40% of HFI Funding	Is the Funding Per Core Service Evenly Distributed?	Summary List of Preventative Core Services Addressed By Budget Request	No. of Preventative Services Selected	List of Preventative %	Summary List of Regulatory Core Services Addressed By Budget Request	No. of Regulatory Services Selected	List of Regulatory %	Justification (How does this fit in the Core Service Selected)
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
Subtotal will total automatically. Please do not enter anything into this row +											
8. Other Supplies Subtotal:		\$0.00	\$0.00								
Other Services and Charges				Core Services Addressed By Budget Request							
9. Professional Services		Preventive Amount Minimum 60% of HFI Funding	Regulatory Amount Maximum 40% of HFI Funding	Is the Funding Per Core Service Evenly Distributed?	Summary List of Preventative Core Services Addressed By Budget Request	No. of Preventative Services Selected	List of Preventative %	Summary List of Regulatory Core Services Addressed By Budget Request	No. of Regulatory Services Selected	List of Regulatory %	Justification (How does this fit in the Core Service Selected)
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
Subtotal will total automatically. Please do not enter anything into this row +											
9. Professional Services Subtotal:		\$0.00	\$0.00								
10. Communication, Transportation and Professional Development		Preventive Amount Minimum 60% of HFI Funding	Regulatory Amount Maximum 40% of HFI Funding	Is the Funding Per Core Service Evenly Distributed?	Summary List of Preventative Core Services Addressed By Budget Request	No. of Preventative Services Selected	List of Preventative %	Summary List of Regulatory Core Services Addressed By Budget Request	No. of Regulatory Services Selected	List of Regulatory %	Justification (How does this fit in the Core Service Selected)
1	Cell Phone/Phone	\$500.00	\$500.00	YES	Access to and Linkage to Clinical Care Health-Related Areas during Emergencies/Disasters Lead Case Management and Risk Assessment Trauma and Injury Prevention	4		Food Protection Environmental Public Health	2		CELL PHONES ARE NECESSARY IN AN EMERGENCY OR EVEN TO GET IN CONTACT WITH A PATIENT OR VENDOR.

[illegible]

[illegible]

[illegible]

6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
Subtotal will total automatically. Please do not enter anything into this row ➔												
21. Improvements Other Than Buildings Subtotal:		\$0.00	\$0.00									
22. Machinery and Equipment (No Vehicles)		Quantity	Preventive Amount Minimum 60% of HPI Funding	Regulatory Amount Maximum 40% of HPI Funding	Is the Funding Per Core Service Evenly Distributed?	Summary List of Preventative Core Services Addressed By Budget Request	No. of Preventative Services Selected	List of Preventative %	Summary List of Regulatory Core Services Addressed By Budget Request	No. of Regulatory Services Selected	List of Regulatory %	Justification (How does this fit in the Core Service Selected)
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
Subtotal will total automatically. Please do not enter anything into this row ➔												
22. Machinery and Equipment (No Vehicles) Subtotal:		\$0.00	\$0.00									
23. Machinery and Equipment (Vehicles Only)*** Goes towards 10%		Quantity	Preventive Amount Minimum 60% of HPI Funding	Regulatory Amount Maximum 40% of HPI Funding	Is the Funding Per Core Service Evenly Distributed?	Summary List of Preventative Core Services Addressed By Budget Request	No. of Preventative Services Selected	List of Preventative %	Summary List of Regulatory Core Services Addressed By Budget Request	No. of Regulatory Services Selected	List of Regulatory %	Justification (How does this fit in the Core Service Selected)
1		1										
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
Subtotal will total automatically. Please do not enter anything into this row ➔												
23. Machinery and Equipment (Vehicles Only) Subtotal:		\$0.00	\$0.00									
24. Future Capital Outlays*** Goes towards 10%			Preventive Amount Minimum 60% of HPI Funding	Regulatory Amount Maximum 40% of HPI Funding	Is the Funding Per Core Service Evenly Distributed?	Summary List of Preventative Core Services Addressed By Budget Request	No. of Preventative Services Selected	List of Preventative %	Summary List of Regulatory Core Services Addressed By Budget Request	No. of Regulatory Services Selected	List of Regulatory %	Justification (How does this fit in the Core Service Selected)
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												
17												
18												
19												
20												
Subtotal will total automatically. Please do not enter anything into this row ➔												
24. Future Capital Outlays Subtotal:		\$0.00	\$0.00									