

GRANT SUMMARY	
Grant Title:	PER CAPITA GRANT IN AID FUNDING
MUNIS #:	20381514
City Department:	Health Department
City Contact Person & Phone:	Maritza Bond, Director of Health, (203) 946-6978 MBond@newhavenct.gov
Funding Level:	\$ 260,706.33
Funding Period:	July 1, 2024 through June 30, 2025
Funding Source:	State of Connecticut Department of Public Health
Funding Source Contact Person & Phone	Sue Walden, Health Program Associate, 860-509-7660
Purpose of Program:	To support Health Department programs and staffing needs.
Personnel (salary):	\$137,489
Personnel (Worker's Comp):	\$87,993
Personnel (Med. Benefit):	\$63,245
Non-Personnel (total):	\$51,753.33
Non-Personnel (M & U):	\$4,812
New or Renewal?	Renewal
Limits on spending (e.g., Admin. Cap)?	Expenditures that exceed a budget line item by more than 20% must be approved in writing by the State Department of Public Health.
Reporting requirements: Fiscal	Annual expenditure report.
Reporting requirements: Programmatic	Annual expenditure reports are required
Due date of first report:	July 2025
Audit Requirements:	An annual financial audit with management letters and audit recommendations. Compliance federal and state single audit standards as applicable.