



Illinois
Department of Commerce
& Economic Opportunity

June 19, 2023

Ms. Sandy Hart
Lake County Board Chairperson
LAKE COUNTY
1 N GENESEE ST FL 1
Waukegan, IL 60085-8103

Re: Grant No. 21-661001

Dear Ms. Hart:

Enclosed is your fully executed copy of the modification/waiver to the above referenced grant agreement (the "Agreement"). Please retain this copy in your files for reference during the administration of the grant and for future audit and monitoring purposes.

Please be advised that the requested modification/waiver was approved based on information provided by your agency/organization. Pursuant to Section 3.7 of the pre-GATA Agreement, or Article XII of the post-GATA Agreement, as applicable, you are hereby reminded that: (i) during the time period specified in the Agreement, the Grantee is required to maintain books, records and supporting documents related to all disbursements of funds provided under the Agreement, including those which are the subject of the modification/waiver; and (ii) the Grantee's failure to maintain and provide such records during a subsequent monitoring or audit conducted in accordance with applicable provisions of the Agreement, shall establish a presumption in favor of the Department for the recovery of funds for which adequate documentation is not available.

Should you have any questions regarding the modification/waiver, please contact your DCEO Grant Manager.

Sincerely,

Kristin A. Richards
Director

cc: DCEO Grant Manager

www.ildceo.net

500 East Monroe
Springfield, Illinois 62701-1643
217/782-7500 · TDD: 800/785-6055

100 West Randolph Street, Suite 3-400
Chicago, Illinois 60601-3219
312/814-7179 · TDD: 800/785-6055

2309 West Main, Suite 118
Marion, Illinois 62959-1180
618/997-4394 · TDD: 800/785-6055

AMENDMENT TO THE GRANT AGREEMENT



BETWEEN
THE STATE OF ILLINOIS, DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY
AND
Lake County

The Illinois Department of Commerce and Economic Opportunity (Grantor) with its principal office at 607 E Adams St, Springfield, IL 62701, and Lake County (Grantee), with its principal office at 1 N Genesee St Fl 1, Waukegan, IL 60085-8103, and payment address (if different than principal office) at N/A, hereby agree that the following amendment (Amendment) shall amend the Grant Agreement (Agreement), which is described below. Grantor and Grantee are collectively referred to herein as "Parties" or individually as a "Party."

All terms and conditions set forth in the original Agreement and any subsequent amendment, but not amended herein, shall remain in full force and effect as written. In the event of a conflict, the terms of this Amendment shall prevail. This Amendment is authorized by Paragraph 26.5 of the Agreement.

WHEREAS, it is the intent of the Parties to perform consistent with all terms herein and pursuant to the duties and responsibilities imposed by Grantor under the laws of the State of Illinois and in accordance with the terms, conditions and provisions hereof.

NOW, THEREFORE, in consideration of the foregoing and the mutual agreements contained in the Agreement and herein, and for other good and valuable consideration, the value, receipt and sufficiency of which are acknowledged, the Parties hereto agree as follows:

ARTICLE I
AWARD AND AMENDMENT INFORMATION AND CERTIFICATION

1.1. Original Agreement. The Agreement, numbered 21-661001, has an original term from 10/01/2022 to 09/30/2023.

1.2. Prior Amendments. Below is the list of all prior amendments to the Agreement (mark N/A if none):

Amendment Number	Effective Date (MM/DD/YYYY)
001	03/06/2023

1.3. Current Agreement Term. The Agreement expires on 09/30/2023, unless terminated pursuant to the Agreement.

1.4. Item(s) Altered. Identify which of the following Agreement elements are amended herein (check all that apply):

- | | |
|--|--|
| ☐ Exhibit A (Project Description) | ☐ Award Term |
| ☐ Exhibit B (Deliverables/Milestones) | ☒ Award Amount |
| ☒ Exhibit C (Payment) | ☐ PART TWO (Grantor-Specific Terms) |
| ☐ Exhibit D (Contact Information) | ☐ PART THREE (Project-Specific Terms) |
| ☐ Exhibit E (Performance Measures) | ☒ Budget |
| ☐ Exhibit F (Performance Standards) | ☐ Budget (Unilateral) |

☐ Exhibit G (Specific Conditions)

☐ Funding Source

☐ Other (specify):

- 1.5. **Effective Date.** This Amendment shall be effective on N/A. If an effective date is not identified in this Paragraph, the Amendment shall be effective upon the last dated signature of the Parties.
- 1.6. **Certification.** Grantee certifies under oath that (1) all representations made in this Amendment are true and correct and (2) all Grant Funds awarded pursuant to the Agreement shall be used only for the purpose(s) described therein, including all subsequent amendments. Grantee acknowledges that the Award is made solely upon this certification and that any false statements, misrepresentations, or material omissions shall be the basis for immediate termination of the Agreement and repayment of all Grant Funds.
- 1.7. **Signatures.** In witness whereof, the Parties hereto have caused this Amendment to be executed by their duly authorized representatives.

ILLINOIS DEPARTMENT OF COMMERCE AND
ECONOMIC OPPORTUNITY

Lake County

Kristin A. Richards
By: _____
Signature of Kristin A. Richards, Director

Kenneth D. Allen
By: _____
Signature of Authorized Representative

Jennifer Serino
By: _____
Signature of Authorized Representative

Date: June 2, 2023

6
By: _____
Signature of Designee

Printed Name: Jennifer Serino

Date: 6/13/2023

Printed Title: Director, Workforce Development

Printed Name: _____

Email: jserino@lakecountyil.gov

Printed Title: _____

Designee

By: _____
Signature of First Other Approver, if Applicable

Date: _____

Printed Name: _____

Printed Title: _____

Other Approver

By: _____
Signature of Second Other Approver, if Applicable

Date: _____

Printed Name: _____

Printed Title: _____
Second Other Approver

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**ARTICLE II
AMENDMENTS**

- 2.1 Exhibit C Changes. The first line of Exhibit C is amended as follows: Grantee shall receive \$28,391.21 under this Agreement.
- 2.2 Award Amount Changes. This first sentence of Paragraph 1.2 of the Agreement is amended as follows: Grant Funds shall not exceed \$28,391.21, of which \$28,391.21 are federal funds.
- 2.3 Budget Changes. The Budget is revised by increasing Grant Funds as detailed in the attached revised Budget.

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STATE OF ILLINOIS		UNIFORM GRANT BUDGET MODIFICATION TEMPLATE			Commerce & Economic Opportunity	
Organization Name:	Lake County Workforce Development	UEI#	W2VVMR6ZKNT21	NOFO #	N/A	
CSFA #	420-30-0074	CSFA Description:	Trade Adjustment Assistance	Fiscal Year:	2023	
SECTION A -- STATE OF ILLINOIS FUNDS				Grant #	21-661001	
Revenues			TOTAL REVENUE			
(a). State of Illinois Grant Amount Requested			\$ 28,391.21			
BUDGET SUMMARY STATE OF ILLINOIS FUNDS						
Budget Expenditure Categories		OMB Uniform Guidance Federal Awards	Current Approved Budget	Modification Amount	New Budget Amount	
13. Direct Administrative costs		200.413 (c)	\$ 930.54	\$ 487.39	\$ 1,417.93	
15. A. <u>Program Specific – Training</u>			\$ 12,919.07	\$ (2,360.77)	\$ 10,558.30	
B. <u>Program Specific – Case Management</u>			\$ 4,761.18	\$ 11,653.80	\$ 16,414.98	
16. Total Direct Costs (lines 1-15)		200.413	\$ 18,610.79	\$ 9,780.42	\$ 28,391.21	
18. Total Costs State Grant Funds (16 &17)			\$ 18,610.79	\$ 9,780.42	\$ 28,391.21	

SECTION - A (continued) Indirect Cost Rate Information

If your organization is requesting reimbursement for indirect costs on line 17 of the Budget Summary, please select one of the following options.

1) ☐

Our Organization receives direct Federal funding and currently has a Negotiated Indirect Cost Rate Agreement (NICRA) with our Federal Cognizant Agency. A copy of this agreement will be provided to the State of Illinois' Indirect Cost Unit for review and documentation before reimbursement is allowed. This NICRA will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations.

NOTE: (If this option is selected, please provide basic Negotiated Indirect Cost Rate Agreement information in area designated below)

Your Organization may not have a Federally Negotiated Indirect Cost Rate Agreement. Therefore, in order for your Organization to be reimbursed for Indirect Costs from the State of Illinois, your Organization must either:

A. Negotiate an Indirect Cost Rate with the State of Illinois' Indirect Cost Unit with guidance from your State Cognizant Agency on an annual basis.

B. Elect to use the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois Awards.

C. Use a Restricted Rate designated by programmatic or statutory policy. (See Notice of Funding Opportunity for Restricted Rate Programs)

2a) ☒

Our Organization currently has a Negotiated Indirect Cost Rate Agreement with the State of Illinois that will be accepted by all State of Illinois Agencies up to any statutory, rule-based or programmatic restrictions or limitations. Our Organization is required to submit a new Indirect Cost Rate Proposal to the Indirect Cost Unit within six (6) months after the close of each fiscal year (2 CFR 200 Appendix IV (C)(2)(c)).

NOTE: (If this option is selected, please provide basic Indirect Cost Rate information in area designated below)

2b) ☐

Our Organization currently does not have a Negotiated Indirect Cost Rate Agreement with the State of Illinois. Our Organization will submit our initial Indirect Cost Rate Proposal (ICRP) immediately after our Organization is advised that the State award will be made and, in no event, later than three (3) months after the effective date of the State award (2 CFR 200 Appendix IV (C)(2)(b)). The initial ICRP will be sent to the State of Illinois' Indirect Cost Unit.

NOTE: (Check with your State of Illinois Agency for information regarding reimbursement of indirect costs while your proposal is being negotiated)

3) ☐

Our Organization has never received a Negotiated Indirect Cost Rate Agreement from either the Federal government or the State of Illinois and elects to charge the de minimis rate of 10% modified total direct cost (MTDC) which may be used indefinitely on State of Illinois awards (2 CFR 200.414 (c)(4)(f) & (200.68).

NOTE: (Your Organization must be eligible, see 2 CFR 200.414 (f), and submit documentation on the calculation of MTDC within your Budget Narrative under Indirect Costs)

For Restricted Rate Programs (check one) -- Our Organization is using a restricted indirect cost rate that:

4) ☐

_____ Is included as a "Special Indirect Cost Rate" in our NICRA (2 CFR 200 Appendix IV (5) Or;

_____ Complies with other statutory policies (please specify):

The Restricted Indirect Cost Rate is _____ %

5) ☐

No reimbursement of Indirect Cost is being requested. (Please consult your program office regarding possible match requirements)

Basic Negotiated Indirect Cost Rate Agreement information
if Option (1) or (2a) is selected

Period Covered by the NICRA: From: 10/1/2022 To: 9/30/2023 (mm/dd/yyyy)
Approving Federal/State agency (please specify): Department of Transportation
The Indirect Cost Rate is: 18.2 % The Distribution Base is: Salaries and Wages

FY2023 TAA Indirect Worksheet

UPDATED 09/14/2021

Please enter data in the blue highlighted cells

GATA Line	GRS Exp Code	Description	Total Costs	Direct Cost Base Exclusions	Direct Cost Base	Indirect Cost Rate = 18.20%	Notes (for de minimis calculations)	Error Checks
13	1000	DIRECT ADMINISTRATION	\$ 1,417.93		\$ 1,417.93		Exclude from Calculations	
	10XX	Total ADMIN	\$ 1,417.93		\$ 1,417.93			
15A	2000	TRAINING COSTS	\$ 10,558.30		\$ 10,558.30		Exclude from Calculations	
15B	3000	CASE MANAGEMENT COSTS	\$ 16,414.98	\$ 12,173.81	\$ 4,241.17		See Below	
	3010	Personnel Case Management	\$ 517.95		\$ 517.95		Not Excludable	
	3015	Fringe Benefits Case Management	\$ 589.58	\$ 589.58	\$ -		Not Excludable	
	3020	Other Case Management	\$ 15,213.18	\$ 11,584.23	\$ 3,628.95		*** See Notes Below	
		Travel	\$ -		\$ -		Not Excludable	
		Equipment	\$ -		\$ -		Total Amount of Equipment is Excludable	
		Supplies	\$ -		\$ -		Not Excludable	
		Contractual and Subawards	\$ 10,452.00	\$ 10,452.00	\$ -		*See Note Below	
		Consultant	\$ -		\$ -		Not Excludable	
		Occupancy	\$ -		\$ -		Exclude only rent portion	
		prior TCM Personnel	\$ 3,628.95		\$ 3,628.95		Not Excludable	
		prior TCM Fringes	\$ 471.76	\$ 471.76	\$ -		Not Excludable	
		prior TCM Indirect	\$ 660.47	\$ 660.47	\$ -		Not Excludable	
		Indirect Case Management	\$ 94.27		\$ -			
	3025	Indirect Case Management	\$ 94.27		\$ -			
	20XX	TOTAL PROGRAM	\$ 26,973.28		\$ 4,146.90		Program Direct Cost Base	
		GRANT TOTAL	\$ 28,391.21					

Total Indirect Costs \$ 754.74 Calculated from Table Above
 Program Indirect \$ 754.74 Must Equal Indirect-Program in Section A
 Check for Accuracy (Must Equal Zero) \$ (0.00) Must Equal Zero

Comments:

Total Personnel CM = \$517.95 + 3,628.95 = \$4,146.90.

\$4,146.90 x 18.2% = \$754.74.

Indirect CM \$660.47 was awarded on initial grant establishment. Indirect CM increase for Mod 02 requested in amount of \$94.27. Results in TCM Indirect total of \$754.74)

* If a subaward includes training or work-based learning, those amounts have to be reported under Training Costs and not subawards.

** Training items would be excludable if they are part of a subaward.

*** MOU Infrastructure and Shared Costs must be excluded from the indirect base. Operational costs that are included in the indirect cost pool must be excluded.

\$ 200.68 Modified Total Direct Cost (MTDC)

MTDC means all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and subawards and subcontracts up to the first \$25,000 of each subaward or subcontract (regardless of the period of performance of the subawards and subcontracts under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs and the portion of each subaward and subcontract in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

<https://www.gpo.gov/fdsys/pkg/CFR-2014-title2-vol1/pdf/CFR-2014-title2-vol1-sec200-68.pdf>

For TAA MTDC exclusions include: equipment; occupancy (rent only); and tuition remission (direct training costs).

Lake County Work

13). Direct Administrative Costs - (2 *CFR* 200.413 (c)) The salaries of administrative and clerical staff should normally be treated as indirect (F&A) costs. Direct charging of these costs may be appropriate only if all of the following conditions are met: (1) Administrative or clerical services are integral to a project or activity; (2) Individuals involved can be specifically identified with the project or activity; (3) Such costs are explicitly included in the budget or have the prior written approval of the State awarding agency; and (4) The costs are not also recovered as indirect costs.

[illegible]

Total Direct Administrative Costs \$ 487.39

Direct Administrative Narrative (State):

The Business manager is responsible for the invoice processing and reporting associated with the grant.

Section C - Budget Modification Worksheet & Narrative

15). **Training:** Trade Adjustment Assistance offers a variety of benefits and reemployment services to assist eligible participants to prepare for and obtain suitable employment. Those services may include job retraining and related expenses including tuition, supplies, training related consumables; travel and/or subsistence assistance; OJTs; apprenticeships; job search; and/or relocation allowances for eligible participants. This amount reflects the amount of training related funds needed as expressed by the information provided on the Participant Detail form (DCEO/OET/Trade #023).

Description	Quantity	Basis	Cost	Length of time	Total Cost
See Form 023 Participant Detail					
					\$ (2,360.77)
					\$ -
				State Total	\$ (2,360.77)
				Total Training	\$ (2,360.77)

Training Narrative (State):

Trade Adjustment Assistance offers a variety of benefits and reemployment services to assist unemployed workers to prepare for and obtain suitable employment. Those services may include job retraining and related expenses including tuition, supplies, training related consumables; transportation and/or subsistence assistance; job search and/or relocation allowances for eligible participants. (20 CFR 618.400 - 618.460; 20 CFR 618.600 - 618.665)

Section C - Budget Modification Worksheet & Narrative

Lake County Workfor

- 15). **Case Management:** Costs associated with providing case management services to eligible participants being served from Certs per 22-TAA-01, Change 1 as defined by the Trade Program including:
- Salaries: Compensation for services of employees rendered during the period of performance under the award, including but not necessarily limited to wages and salaries as defined in 2 CFR 200.430
 - Fringe Benefits: Allowances and services provided by employer to their employees in addition to regular salaries and wages as outlined in 2 CFR 200.431 for individual personnel providing services to Trade Program participants
 - Other Case Management: Costs associated with the provision of case management services including but not limited to the Trade Program's share of the One Stop Infrastructure and Shared Costs as defined by the Workforce Innovation and Opportunity Act.
 - Indirect: Includes the allowable costs defined in 2 CFR 200.414 as applicable.

Description	Quantity	Basis	Cost	Length of time	Total Cost
<i>Personnel Case Management</i>	<i>See Form 024 Case Mgmt Detail</i>				
<i>Fringe Benefits Case Management</i>			\$		517.95
<i>Other Case Management</i>			\$		589.58
<i>Indirect Case Management</i>			\$		10,452.00
			\$		94.27
			<i>State Total</i>		<i>11,653.80</i>

Total Case Management \$ 11,653.80

GRANT EXCLUSIVE LINE ITEM Narrative (State):

Trade Adjustment Assistance is a required one-stop partner through WIOA and integrates provision of benefits and services available to trade-affected workers being served from Certs per 22-TAA-01, Change 1 with the delivery of employment and case management services including testing, counseling, assessment and placement services; paying infrastructure costs where the TAA Program is being carried out; and being a party to the memorandum of understanding required under the regulations implementing WIOA where the TAA Program is being carried out. (20 CFR 618.300)

Section C - Cumulative Budget Worksheet & Narrative

Lake County Workforc

Previously Approved

Budget Narrative Summary--When you have completed the budget worksheet, transfer the totals for each category to the spaces below to the uniform template provided (SECTION A & B). Verify the total costs and the total project costs. Indicate the amount of State requested funds and the amount of non-State funds that will support the project.

<i>Budget Category</i>	<i>State</i>	<i>Total</i>
<i>13. Direct Administrative Costs</i>	\$ 930.54	\$ 930.54
<i>15A. Training</i>	\$ 12,919.07	\$ 12,919.07
<i>15B. Case Management</i>	\$ 4,761.18	\$ 4,761.18

State Request \$ 18,610.79

Non-State Amount

TOTAL PROJECT COSTS	\$ 18,610.79
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Modification

<i>Budget Category</i>	<i>State</i>	<i>Total</i>
<i>13. Direct Administrative Costs</i>	\$ 487.39	\$ 487.39
<i>15A. Training</i>	\$ (2,360.77)	\$ (2,360.77)
<i>15B. Case Management</i>	\$ 11,653.80	\$ 11,653.80

State Request \$ 9,780.42

Non-State Amount

TOTAL PROJECT COSTS	\$ 9,780.42
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Cumulative

<i>Budget Category</i>	<i>State</i>	<i>Total</i>
<i>13. Direct Administrative Costs</i>	\$ 1,417.93	\$ 1,417.93

<i>15A. Training</i>	\$	10,558.30	\$	10,558.30
<i>15B. Case Management</i>	\$	16,414.98	\$	16,414.98

<i>State Request</i>	\$	28,391.21
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Non-State Amount

<i>TOTAL PROJECT COSTS</i>	\$	<i>28,391.21</i>
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Trade Act Program Application

Modification Overview Form

FOR DCEO OFFICE USE ONLY

Trade Grant Number: 21-661001

Training: \$ (2,360.77)

Direct Admin: \$ 487.39

Case Management: \$ 11,653.80

Trade Grant Total: \$ 9,780.42

Please provide the following information about the applicant

Mod Request #: 2

Request Type: ☒ Funding Modification ☐ No Cost Modification ☐ Grant Date Extension Only

Grant Period: Trade: 10 / 1 / 2022 to 9 / 30 / 2023

of Planned Participants: Carry Over: 2 10/01 - 03/31: 1 04/01 - 09/30: 0

List below the events being submitted for consideration and Check the box next to any event that has not been included in a previous application or modification (continue on a separate sheet for additional events).

New Event	Trade Cert. #	IEBS ID	Company Name	City	State	Carry Over	Planned Participants	
							10/01 - 03/31	04/01 - 09/30
☐	94528	20190225L01	HSBC Technology and Services	Arlington Heights	IL	1		0
☐	94137	20180808001	Acuity Brands lighting, Inc	Des Plaines	IL	1		0
☒	96116	20220707002	Motorola Mobility Holdings LLC	Chicago	IL	0	1	0
☐								
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# of Events from Attached Sheet:		0	Total # of Events	3	Subtotal # Attached Sheet:		0	0

Grant Recipient Authorization (only if No Cost Modification):

_____/_____/_____
 Typewritten Name & Title Signature Date

DCEO Authorization (only if No Cost Modification):

_____/_____/_____
 Typewritten Name Signature Date

Trade Act Program Application Participant Detail

Complete this Participant Detail form for each modification.

Trade Grant Number: 21-661001

Participant Name	Participant Number Place all letter extensions in second column	Trade Training				1E-C Supportive Services			Accrued Costs Paid thru	Total Training Funds Committed	Funds Needed this Grant				Total Planned Trade Training Expenditures	Future Trade Training Commitment	
		Training	Transportation	Subsistence	Out-of-Area Job Search	Out-of-Area Job Relocation	Transportation	Child Care			Other	Prior Period (10/1/20 - 9/30/22)	Trade Training	Trade Training			Trade Training
TOTALS:	3	0	0	0	0	0	0	0	\$73,864.17	\$91,716.87	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$20,213.47	
PRIOR TRAINING TOTAL																	
1	Francine Luchsinger	1	1						\$61,169.24	\$63,018.55	\$1,849.31	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
2	Orfida Castillo	1							\$12,694.93	\$13,403.92	\$708.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
3	Chisun Heo	1	1						\$0.00	\$15,294.40	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,294.40	
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Section D - TAA Funding and Participant Detail Summary

Lake County Workforce

Trade Case Management - Personnel (Salaries & Wages) (2 CFR 200.430) -- Available for Certifications per 22-TAA-01, Change 1. List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project and length of time working on the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization. Include a description of the responsibilities and duties of each position in relationship to fulfilling the project goals and objectives in the narrative space provided below. Also, provide a justification and description of each position (including vacant positions). Relate each position specifically to program objectives. Personnel cannot exceed 100% of their time on all active projects.

[illegible]

Trade Act Program Application Case Management Detail

\$	-
\$	-
<i>Total Personnel CM</i>	<i>\$ 517.95</i>

Trade Case Management - Personnel (Salaries & Wages) Cost Narrative (State):

We are transitioning employees starting 7/1/2023. Diane Luosa is retiring but will be returning as a contingent worker through a staffing agency. We have removed her remaining personnel costs originally budgeted. Cliff Smith will be taking over the role for the remaining three months of the grant.

Trade Case Management - Fringe Benefits (2 CFR 200.431) -- Available for Certifications per 22-TAA-01, Change 1. Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in category (1) direct salaries and wages, and only for the percentage of time devoted to the project. Provide the fringe benefit rate used and a clear description of how the computation of fringe benefits was done. Provide the total. If a fringe benefit rate is not used, show how the fringe benefits were computed for each position.

[illegible]**Trade Case Management - Fringe Benefits Cost Narrative (State):**

**Trade Act Program Application
Case Management Detail**

We have removed the remaining fringe associated with Diane and added Cliff's fringe for the remaining three months of the grant. Once Diane is contingent no fringe will be charged.

Trade Act Program Application Case Management Detail

Trade Case Management Other: The provision of a client-centered approach in the delivery of applicable career services for participants being served from Certs per 22-TAA-01, Change 1/co-enrolled in the dislocated worker and trade programs. A breakdown of the TCM - Other costs must be provided in the narrative.

Description	Quantity	Basis	Cost	Length of time	Trade Other Cost
<i>Travel</i>			\$		-
<i>Equipment</i>			\$		-
<i>Supplies</i>			\$		-
<i>Contractual and Subawards</i>	200	Hr	\$	52.26	10,452.00
<i>Consultant</i>			\$		-
<i>Occupancy</i>			\$		-
<i>Telecommunications</i>			\$		-
<i>Training and Education (Staff)</i>			\$		-
<i>Miscellaneous</i>			\$		-
			<i>Total CM Other</i>		<i>10,452.00</i>

Trade Case Management Other Cost Narrative (State):

Contractual case management has been budgeted on the contractual and subawards line.

Trade Act Program Application Case Management Detail

Trade Case Management Indirect Cost (2 CFR 200.414) -- Provide the most recent indirect cost rate agreement information with the itemized budget. The applicable indirect cost rate(s) negotiated by the organization with the cognizant negotiating agency must be used in computing indirect costs (F&A) for a program budget. The amount for indirect costs should be calculated by applying the current negotiated indirect cost rate(s) to the approved base(s). After the amount of indirect costs is determined for the program, a breakdown of the indirect costs should be provided in the narrative below.

Description	Base	Rate	Indirect Cost
Direct salaries	\$ 4,146.90	18.20%	\$ 754.74
prior Indirect cost from Mod	(660.47)	100.00%	\$ (660.47)
00			
		<i>Total Indirect CM</i>	<i>\$ 94.27</i>

Trade Case Management - Indirect Cost Narrative (State):

The increase in indirect is only associated with Cliff's expenses as Diane will no longer be charged an indirect rate.

TOTAL Case Management \$ 11,653.80

Agreement No 21-661001

1.2. Amount of Agreement. Grant Funds shall not exceed ~~\$10,610.70~~ ^{28,391.21} of which ~~\$10,610.70~~ ^{28,391.21} are federal funds. Grantee agrees to accept Grantor's payment as specified in the Exhibits and attachments incorporated herein as part of this Agreement

1.3. Identification Numbers. If applicable, the Federal Award Identification Number (FAIN) is TA-36047-21-55-A-17, the federal awarding agency is Department Of Labor, and the Federal Award date is 10/01/2020. If applicable, the Assistance Listing Program Title is Trade Adjustment Assistance and Assistance Listing Number is 17.24S. The Catalog of State Financial Assistance (CSFA) Number is 420-30-0074 and the CSFA Name is Trade Adjustment Assistance Program - Formula. The State Award Identification Number is 74-38446.

1.4. Term. This Agreement shall be effective on 10/01/2022 and shall expire on 09/30/2023 (the "term") unless terminated pursuant to this Agreement.

1.5. Certification. Grantee certifies under oath that (1) all representations made in this Agreement are true and correct and (2) all Grant Funds awarded pursuant to this Agreement shall be used only for the purpose(s) described herein. Grantee acknowledges that the Award is made solely upon this certification and that any false statements, misrepresentations, or material omissions shall be the basis for immediate termination of this Agreement and repayment of all Grant Funds.

Agreement No 21-661001

EXHIBIT C

PAYMENT

28,391.21

Grantee shall receive \$~~18,618.79~~ under this Agreement.

Enter specific terms of payment here:

The Award amount listed above is not a guarantee of payment, and Grantee's receipt of Grant Funds is contingent upon all terms and conditions of this Agreement.

Variable Advance/Remainder based on cash needs/reimbursement (Not to Exceed 25% Advance)

The Grantor shall authorize an initial disbursement in an amount sufficient to address the Grantee's immediate cash needs according to their reported and Grantor approved obligations. Thereafter, the payments may be made for the dual purpose of reimbursing for expenditures incurred as well as documented cash needs of the Grantee as approved by the Grantor.

CERTIFICATION	STATE OF ILLINOIS UNIFORM GRANT BUDGET TEMPLATE	AGENCY: Commerce & Economic Opportunity
Organization Name: Lake County Workforce Development	CSFA Description: Trade Adjustment Assistance	NOFO # N/A
CSFA #: 420-30-0074	UEI # W2VMR6ZKNT21	Fiscal Year(s): 2023

(2 CFR 200.415)

"By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate and that any false, fictitious, or fraudulent information or the omission of any material fact, could result in the immediate termination of my grant award(s).

County of Lake
 Institution/Organization
 DocuSigned by:
Emily Mitchell
 Signature ID: 8564189

County of Lake
 Institution/Organization
 DocuSigned by:
Jennifer Serino
 Signature ID: 8CE340C

Emily Mitchell
 Name of Official
 Business Manager
 Title
 Chief Financial Officer (or equivalent)
 5/24/2023
 Date of Execution

Jennifer Serino
 Name of Official
 Director
 Title
 Executive Director (or equivalent)
 5/24/2023
 Date of Execution

Note: The State awarding agency may change required signers based on the grantee's organizational structure. The required signers must have the authority to enter into contractual agreements on behalf of the organization.

☐ Unilateral Modification/Waiver, no grantee signature required.

Workforce Development Department

Jennifer Serino
Director

1 North Genesee Street, 1st
Floor Waukegan, Illinois 60085
Phone 847-377-3450
Fax 847-249-2214



May 24th, 2023

Ms. Susan Boggs
Office of Employment and Training
Illinois Dept. of Commerce & Economic
Opportunity 500 East Monroe, 9th Floor.
Springfield, IL 62701-1643

Attn: Ms. Crystal Bigelow

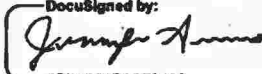
Please accept this letter and attached documents for the identified trade participants. The Trade Grant modification will address the training and employment plans of the two existing Trade participants and one new Trade participant. The circumstances related to the Trade Grant Modification encompass a request for additional Direct Admin, Trade Case Management funds, and a reduction in Trade Training funds resulting in Total Grant Funds of \$28,391.21. The revisions to training plans for existing trade participants, the addition of a trade participant, and Trade Case Management funding through the end of the grant terms support the Trade Grant modification request. The Trade Grant funding request for Grant Number 21-661001 in the amount of \$28,391.21 included within this letter supports the trade petitions below.

The list of the events that are included in this application is as follow:

1. Acuity Brands Lighting Inc -Petition 94137
2. HSBC Technology and Services- Petition 94528
3. Motorola Mobility Holdings LLC-Petition 96116

The documents have been reviewed and I agree with the contents of the grant application. Please contact the Lake County Workforce Development Department if you require additional information.

Sincerely,

DocuSigned by:

5EEAD21D6CE340C...

Jennifer Serino
Director, Lake County Workforce

Received 05/24/2023 cb