

Mary Rumbaugh Director

October 2, 2025	BCC Agenda Date/Item:
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Board of County Commissioners Clackamas County

Approval of a Renewal Grant Application to the Oregon Department of Veterans' Affairs to operate the County Veterans Services Office. Grant value is \$1,197,076 for 1 year. Funding is through the Oregon Department of Veterans' Affairs for \$286,590, plus \$663,747 in budgeted FY26 County General Funds and \$246,739 in assigned Fund Balance.

Previous Board Action/Review	No previous Board Action	; this is a new request to	renew last year's funding.
Performance	Safe, Secure, and Livable	Communities.	
Clackamas			
Counsel Review	NA	Procurement Review	NA
Contact Person	Tracy Garell, Director,	Contact Phone	(503) 655-8641
	Social Services Division		

EXECUTIVE SUMMARY: The Social Services Division (CCSSD) of the Health, Housing, and Human Services Department seeks approval to apply for Oregon Department of Veterans' Affairs (ODVA) FY25 funding to support the County Veterans Services Office (VSO) operations. VSO services support Clackamas County residents in accessing disability, needs-based pension, Veterans' Affairs (VA) health care, and other benefits earned through military service.

In FY25, ODVA funds supported both staffing and program costs. Staff held 2,153 in-office and phone interviews with veterans or family members that resulted in 1069 claims to attain VA services or benefits. In FY25, Clackamas VSO staff supported participants in securing \$20,183,202 in benefits. Additionally, CVSO Staff participated in Veterans' Advisory Council meetings, monthly Homeless Veteran Coordination meetings, a Tri-County VSO Leadership meeting, and trainings hosted by ODVA, NVLSP (National Veterans Legal Services Program, and CVO (Coalition of Veterans Organizations), and local outreach events.

The total funds include \$663,747 in budgeted County General Funds.

RECOMMENDATION: Staff respectfully request that the Board of County Commissioners approve applying for directly appropriated funds and authorize Chair Roberts or his designee to sign on behalf of Clackamas County.

Respectfully submitted,

Wary Rumbaugh
Mary Rumbaugh
Director of Health, Housing, and Human Services Department

For Filing Use Only

Financial Assistance Application Lifecycle Form

Use this form to track your potential award from conception to submission.

Sections of this form are designed to be completed in collaboration between department program and fiscal staff.

If renewal or direct appropriation, complete sections I, II, IV & V only. Section III is not required.

If Disaster or Emergency Relief Funding, EOC will need to approve prior to being sent to the BCC

CONCEPTION

Section I: Funding Opportunit	y Information - To Be	Completed by Red	quester
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✓ Direct Appropriation (no application)

No

Award type:

Subrecipient Award

Direct Award

Award Renewal? Yes

Lead Fund # and Department:	240 H3S - Social Services
Name of Funding Opportunity:	ODVA Veterans' Enhancement Grant, FY26

Funding Source: Federal – Direct	Federal – Pass through State Local
Requestor Information: (Name of staff initiating form)	R.E. ("Ari") Szego
Requestor Contact Information:	rszego@clackamas.us
Department Fiscal Representative:	Doug Green
Program Name & Prior Project #: (please specify)	ODVA CVSO

Brief Description of Project:

To operate the County's Veterans' Services Office which connects Clackamas County Veterans and their families to earned benefits
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Name of Funding Agency: Oregon Department of Veterans' Affairs

Notification of Funding Opportunity Web Address: ODVA_DL_CVSO-NSOFunding@odva.oregon.gov

OR

Application Packet Attached:

Completed By: R.E. Szego

Date: rev 09/08/25

** NOW READY FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTATIVE **

Section II: Funding Opportunity Information - To Be Completed by Department Fiscal Rep

Competitive Application

Non-Competing Application

Assistance Listing Number (ALN), if applicable:	N/A	Funding Agency Award Notification Date:	08/11/25
Announcement Date:	N/A	Announcement/Opportunity #:	ODVA Veterans' Enhancement, FY26
Grant Category/Title	ODVA Veteran's Enhancement, FY26	Funding Amount Requested:	\$286,590 plus \$246,739 carry forward
Allows Indirect/Rate:	indirect part of budget unk. if pd. by State or County	Match Requirement:	\$663,747 (maintenance of effort, not match)
Application Deadline:	08/30/24 - extension requested	Total Project Cost:	\$1,197,076
Award Start Date:	07/01/25	Other Deadlines and Description:	N/A
Award End Date	06/30/26		IN/A
Completed By:	R.E. Szego	Program Income Requirements:	N/A
Pre-Application Meeting Schedule:	N/A		

Additional funding sources available to fund this program? Please describe:

The county is required to provide maintenance of effort funds to support the county's Veterans Services Office. These funds are provided from County General Fund.

How much General Fund will be used to cover costs in this program, including indirect expenses?

\$663,747 in budgeted CGF.

How much Fund Balance will be used to cover costs in this program, including indirect expenses?

\$246,739 in carry forward funds.

In the next section, limit answers to space available.

Section III: Funding Opportunity Information - To Be Completed at Pre-Application Meeting by Dept Program and Fiscal Staff

Fiscal 1. Are there other revenue sources required, available, or will be used to fund the program? Have they already been secured? Please list all funding sources and amounts.
2. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, local grant, etc.)?
3. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are those sources?
4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?
Organizational Capacity: 1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?
2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?
3. If this is a pilot project, what is the plan for sun setting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?
4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIR	
Name (Typed/Printed) Date S	Signature
Program Approval:	
Other information necessary to understand this award, if any.	
3. What are the objectives of this funding opportunity? How will we meet these objectives?	
2. Who, if any, are the community partners who might be better suited to perform this work?	
Mission/Purpose: 1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?	
3. What are the fiscal reporting requirements for this funding?	
2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? I grant timeframe?	if not, is it feasible to develop a data source within the
Reporting Requirements 1. What are the program reporting requirements for this grant/funding opportunity?	
Collaboration 1. List County departments that will collaborate on this award, if any.	

ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN

Section IV: Approvals

Department: keep original with your grant file.

Manage 9/8/25	Teresa D Christopherson
Date	Signature
2)	1) 24 6 14 0
Sep 9, 2025	Denise Swarfson (Sep 9, 2025 15:58:28 PDT)
Date	Signature
	50· / // / / /
Sep 9, 2025	Elizabeth Comfort
Date	Signature
ISASTER OR EMERGENCY RELIEF APPLICATIONS ONLY)	
Date	Signature
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Il grant <u>awards</u> must be approved by the Board on their weekly consent Approved:	t agenda regardless of amount per local budget law 294.338.) Denied:
Approved:	Denied: Signature m@clackamas.us for Gary Schmidt's
Approved: Date Date Date O,000 email form to BCC staff at CA-Financialtea	Denied: Signature m@clackamas.us for Gary Schmidt's
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Approved: Date Date Date County Administration Attestation	Denied: Signature m@clackamas.us for Gary Schmidt's
	Sep 9, 2025 Date Sep 9, 2025 Date Sep 9, 2025

H3S-SS_Lifecycle_Fund 240_ODVA_Bet Enhancement Grant FY26_03-2025 rev090825 TCauth-Updated

Final Audit Report 2025-09-10

Created: 2025-09-09

By: Qudsia Sediq (QSediq@clackamas.us)

Status: Signed

Transaction ID: CBJCHBCAABAAB0bBgsrX2Mo1HUYPxhJ72yUzZBqIh3Hx

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- Document created by Qudsia Sediq (QSediq@clackamas.us) 2025-09-09 10:20:19 PM GMT- IP address: 198.245.132.3
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