

MEMORANDUM

Date: June 8, 2026
To: Finance and Personnel Committee
From: Owen Carter, Deputy Director of Program Operations for Health & Human Services *OC*
Re: Acceptance of DCEO, Liheap State Supplemental Grant Award 27-254023

Community Services is seeking City Council approval to accept the Low Income Home Energy Assistance Program, Liheap State Supplemental grant from Department of Commerce and Economic Opportunity (DCEO) for \$4,030,301. The grant does NOT require a cost match. The grant term is from June 1, 2026 to August 31, 2027 and the granting agency-assigned award number is 27-254023.

The Grant Purpose

LIHEAP eligible clients receive a direct vendor payment to their electric and/or heating bill. This allows clients to alleviate utility cost burdens.

How Grant Funds Will Be Used

The funds will pay for approved client's electric and/or heating bills, client's energy usage education, staff training, payroll, and administration. The grant does NOT require the city to bear any additional costs.

RESOLUTION
of the
CITY COUNCIL OF THE CITY OF ROCKFORD, ILLINOIS
SUBMITTED BY: FINANCE AND PERSONNEL COMMITTEE

RESOLUTION APPROVING ACCEPTANCE OF GRANT AWARD

WHEREAS, the City of Rockford has been selected by the Illinois Department of Commerce and Economic Opportunity to receive a Low Income Home Energy Assistance Program (LIHEAP) grant award; and

WHEREAS, the grant has been awarded for the purpose of providing eligible clients with a direct vendor payment to their electric and/or heating bill; and

WHEREAS, the City of Rockford intends to use the funds to pay for approved clients' electric and/or heating bill, energy usage education, staff training, payroll, and administration; and

WHEREAS, the City of Rockford will receive \$4,030,301.00 to provide such services.

BE IT RESOLVED, THEREFORE, by the City Council of the City of Rockford that the City of Rockford accept the grant award and that the Mayor execute a Grant Agreement and any necessary documents in furtherance of acceptance.

BE IT FURTHER RESOLVED that this Resolution shall be in full force and effective immediately upon its adoption.

The above and foregoing Resolution was adopted by the City Council of the City of Rockford, Illinois, this _____ day of June 2026.

Mayor Thomas P. McNamara
City of Rockford, Illinois

ATTEST:

ANGELA HAMMER, Legal Director
Ex Officio Keeper of the Records and
Seal of the City of Rockford, Illinois

ROCKFORD, IL.

Committee Action Taken Date: June 8, 2026

RECOMMENDATION FOR RESOLUTION

TO THE CITY COUNCIL OF THE CITY OF ROCKFORD:

Council Members:

The Committee on Finance & Personnel, to whom was referred the matter of approving acceptance of the Illinois Department of Commerce and Economic Opportunity Low Income Home Energy Assistance Program (LIHEAP) grant award, hereby begs leave to report recommending approval of said award. The Legal Director shall prepare the appropriate resolution.

Kevin Frost (Chair)

Chad Tuneberg (Vice chair)

Frank Beach

Dawn Granath

Jaime Salgado

Frost:	Ayes:___	Nays:___	Absent:___
Tuneberg:	Ayes:___	Nays:___	Absent:___
Beach:	Ayes:___	Nays:___	Absent:___
Granath:	Ayes:___	Nays:___	Absent:___
Salgado:	Ayes:___	Nays:___	Absent:___

Illinois Grant Accountability and Transparency Notice of State Award

STATE OF ILLINOIS GRANT INFORMATION	
State Award Identification	Name of State Agency (Grantor): Commerce And Econ Opp Department/Organziation Unit: Office of Community Assistance
State Award ID Number (SAIN)	90-65792
State Program Description	The Low Income Home Energy Assistance (LIHEAP) funded through the Department of Health and Human Services (HHS), and the Supplemental Low Income Energy Assistance Fund (SLIHEAP) is implemented through designated grantees to provide services to eligible low income households in Illinois. The client assistance funds available through this grant assist eligible households with the costs of home energy by incorporating fuel assistance, home weatherization and other related measures in accordance with the current LIHEAP regulations and requirements. Up to 15% of the HHS and 10% of the SLIHEAP funding can be utilized for Weatherization activities.
Announcment Type	Initial
Agency (Grantor) Contact Information	Name: Leslie Ann Lesko Phone: 217-552-2206 Email: LeslieAnn.Lesko@illinois.gov

GRANTEE INFORMATION	
Grantee / Subrecipient Information	Name: City of Rockford Health & Human Services Department Address: 612 N Church Street, Rockford, IL 61103 Phone: Email:
Grantee Identification	GATA: 671698 UEI: L8CRGBLX2DA3 FEIN: 366125747
Period of Performance	Start Date: 6/1/2026 End Date: 8/31/2027

FUNDING INFORMATION			
FUND	CSFA	CFDA	AMOUNT
550	420-70-0090	N/A	\$4,030,301.00
TOTAL			\$4,030,301.00

(M) Currently used by State of Illinois for "Match" or "Maintenance of Effort" (MOE) requirements on Federal Funding. Funding is subject to Federal Requirements and may not be used by Grantee for other match requirements on other awards.

Illinois Grant Accountability and Transparency Notice of State Award

TERMS AND CONDITIONS	
Grantee Indirect Cost Rate Information	Rate: 0% Base: Waive Period: 1/1/2026-12/31/2026
Research & Development	No
Cost Sharing or Matching Requirements	No
Uniform Term(s)	CODE of FEDERAL REGULATIONS Title 2: Grants and Agreements PART 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR 200) Grant Accountability and Transparency Act (GATA), 30 ILCS 708/1 Illinois Administrative Code
Grantor-Specific Term(s)	This Notice of State Award (NOSA) is not an agreement. This NOSA is not a guarantee of an agreement. Grantor-Specific Terms that will be included in the final grant agreement can be found by clicking on "Uniform Grant Agreement Template" under the Grant Agreement Overview section at: https://dceo.illinois.gov/aboutdceo/grantopportunities/learning-library.html
Program-Specific Term(s)	Information about the LIHEAP Specific Terms and requirements can be found in the Energy Assistance Act (305 ILCS 20) and the Illinois Administrative Rules (47 Ill Adm. Code 100). THE FOLLOW ARE GATA EXCEPTIONS AND ARE NOT REQUIRED FOR THIS PROGRAM: NOTICE OF FUNDING OPPORTUNITY 5/7/2026 DCEO needs to formalize this deviation in the CSFA. It was previously approved by Jennifer Butler on 5/18/16 however, that was prior to exceptions being tracked in the CSFA. It was previously approved, but the support was not maintained. Deviations to 2 CFR 200 Subpart C, Subpart D and Subpart E, except for 200.203, 200.216 and 200.331-200.333, and 44 IL Admin 7000.50(b) and all of 44 IL Admin 7000.310 except 7000.310(a)(1), 7000.310(a)(2), 7000.310(b)(1), 7000.310(b)(2)

**Illinois Grant Accountability and Transparency
Notice of State Award****SPECIFIC CONDITIONS ASSIGNED TO GRANTEE - FISCAL AND ADMINISTRATIVE****The nature of the additional requirements****GATA Conditions:**

None

Agency Adjustments / Explanation:

NO FISCAL & ADMINISTRATIVE CONDITIONS

The reason why the additional requirements are being imposed**GATA Conditions:**

None

Agency Adjustments / Explanation:

None

The nature of the action needed to remove the additional requirement, if applicable**GATA Conditions:**

None

Agency Adjustments / Explanation:

None

The time allowed for completing the actions, if applicable**GATA Conditions:**

None

Agency Adjustments / Explanation:

None

The method for requesting reconsideration of the additional requirements imposed**GATA Conditions:**

None

Agency Explanation:

Your assigned OCA Fiscal Monitor will review your ICQ responses and any associated risks during the next fiscal monitoring visit. No further action required at this time.

Illinois Grant Accountability and Transparency Notice of State Award

SPECIFIC CONDITIONS ASSIGNED TO GRANTEE - PROGRAMMATIC

The nature of the additional requirements

Agency Adjustments / Explanation:

NO PROGRAMMATIC CONDITIONS

The reason why the additional requirements are being imposed

Agency Adjustments / Explanation:

The nature of the action needed to remove the additional requirement, if applicable

Agency Adjustments / Explanation:

The time allowed for completing the actions, if applicable

Agency Adjustments / Explanation:

The method for requesting reconsideration of the additional requirements imposed

Agency Explanation:

Your assigned OCA LIHEAP Grant Manager will review your PRAQ responses and any associated risks during the next LIHEAP program monitoring visit. No further action required at this time.

Illinois Grant Accountability and Transparency Notice of State Award

SIGNATURE PAGE

Circle one: Accept NOSA / Reject NOSA

Institution / Organization

Signature

Name of Official

Title (Chief Financial Officer or equivalent)

Date of Execution