



WEST PIEDMONT REGION

PY24-25 IFA
Martinsville & Danville
West Piedmont Workforce Development Board

PY24-25 IFA

Virginia Career Works – Martinsville Center

One-Stop Center Name: Virginia Career Works: Martinsville Workforce Center

PARTNER ENTITY or PARTNER PROGRAM	# OF POSITIONS	% of Total	SQUARE FEET OCCUPIED	% of Total	Customers Receiving Service	% of Total
Virginia Works	9.00	31.03%	2,009.00	38.92%	9.00	39.13%
WIOA Title I Adult	2.00	6.90%	400.00	7.75%	2.00	8.70%
WIOA Title I Dislocated Worker	1.00	3.45%	200.00	3.87%	1.00	4.35%
WIOA Title I Youth	2.00	6.90%	320.00	6.20%	2.00	8.70%
VEC - Unemployment Insurance	0.00	0.00%	0.00	0.00%	0.00	0.00%
Virginia Works	1.00	3.45%	80.00	1.55%	1.00	4.35%
DARS Title IV	6.00	20.69%	1,086.00	21.04%	0.00	0.00%
DOE - Adult Ed	1.00	3.45%	64.00	1.24%	1.00	4.35%
DOE - Perkins		0.00%		0.00%		0.00%
DSS - SNAP		0.00%		0.00%		0.00%
DSS - TANF	1.00	3.45%	100.00	1.94%	1.00	4.35%
Pathways/Promise Grant		0.00%		0.00%		0.00%
Patrick & Henry Community College	1.00	3.45%	100.00	1.94%	1.00	4.35%
Community Action Agency (STEP)	1.00	3.45%	100.00	1.94%	1.00	4.35%
WPWDB	0.00	0.00%	320.00	6.20%	0.00	0.00%
Community Recovery Program	1.00	3.45%	100.00	1.94%	1.00	4.35%
Goodwill SCSEP	1.00	3.45%	100.00	1.94%	1.00	4.35%
Virginia Works	1.00	3.45%	80.00	1.55%	1.00	4.35%
Wagner-Peyser		0.00%		0.00%		0.00%
YouthBuild	1.00	3.45%	103.00	2.00%	1.00	4.35%
J		0.00%		0.00%		0.00%
K		0.00%		0.00%		0.00%
TOTALS:	29.00	100.00%	5162.00	100%	23.00	100%

List each partner's programs providing service through Virginia's Career Works Center: If the allocation is for a Comprehensive Center, at minimum, all partner programs as required by the Virginia Combined State Plan must be included.

-Once program is inserted in Column A row within table above, the balance of the spreadsheets will be automatically populated with the program name information. The balance of the spreadsheets should be formatted appropriately to display the information.

Square Foot Occupied is the sum of the floor area of each office, work station, or other room or space that is assigned to or reserved for the use of one or more partners rather than being shared by all.

OF POSITIONS are the # of staff that each program has dedicated to the One-Stop Center. The # OF POSITIONS are represented in full time position equivalence in relation to 40 hour workweeks. The formula to determine the # to enter is: **# of hours per week that a program staffs the One-Stop Center/40 (full time workweek hours)**.

Customers Receiving Service are the # of people served by each program either at, or through the One-Stop Center. Includes customers received by the One-Stop Center who received services from multiple programs. These customers will be counted by each program serving them.

***Workshops & Accessibility Survey**

TOTAL COSTS BY PARTNER OR PARTNER PROGRAM

ONE-STOP CENTER NAME: Virginia Career Works: Martinsville Workforce Center

COSTS	BUDGET/ EXPENSE	Virginia Works	WIOA Title I Adult	WIOA Title I Dislocated Worker	WIOA Title I Youth	VEC - Unemploy ment Insurance	Virginia Works	DARS Title IV	DOE - Adult Ed	DOE - Perkins	DSS - SNAP	DSS - TANF	Pathways/ Promise Grant	Patrick & Henry Community College	Community Action Agency (STEP)	WPWDB	Community Recovery Program	Goodwill SCSEP	Virginia Works	Wagner- Peysner	YouthBuild	TOTALS:	
Staff Costs:																							
Salaries	\$40,539	\$12,581	\$2,796	\$1,398	\$2,796		\$1,398	\$8,387	\$1,398			\$1,398		\$1,398	\$1,398		\$1,398	\$1,398	\$1,398			\$1,398	\$40,539
Benefits	\$12,567	\$3,900	\$867	\$433	\$867		\$433	\$2,600	\$433			\$433		\$433	\$433		\$433	\$433	\$433			\$433	\$12,567
INFRASTRUCTURE COSTS																							
Facility Costs:																							
Rent	\$174,949	\$68,088	\$13,557	\$6,778	\$10,845		\$2,711	\$36,806	\$2,169			\$3,389		\$3,389	\$3,389	\$10,845	\$3,389	\$3,389	\$2,711			\$3,491	\$174,949
Utilities (Garbage)	\$2,337	\$910	\$181	\$91	\$145		\$36	\$492	\$29			\$45		\$45	\$45	\$145	\$45	\$45	\$36			\$47	\$2,337
Repairs																							
Security (Fire Alarm)	\$420	\$163	\$33	\$16	\$26		\$7	\$88	\$5			\$8		\$8	\$8	\$26	\$8	\$8	\$7			\$8	\$420
Property Tax																							
Furniture & Fixtures																							
Other (itemize below)																							
Equipment/Communication Costs:																							
Computer Hardware	\$1,320	\$410	\$91	\$46	\$91		\$46	\$273	\$46			\$46		\$46	\$46		\$46	\$46	\$46			\$46	\$1,320
Computer Software																							
Data Paln																							
Telephone Equipment																							
Telephone Service Fees	\$8,917	\$3,489	\$775	\$388	\$775		\$388		\$388			\$388		\$388	\$388		\$388	\$388	\$388			\$388	\$8,917
Cell Phones																							
Copier Equipment	\$3,848	\$1,194	\$265	\$133	\$265		\$133	\$796	\$133			\$133		\$133	\$133		\$133	\$133	\$133			\$133	\$3,848
Fax Equipment																							
Fax Service Fees																							
Other Operations:																							
Contract: One-Stop Operator																							
General Supplies	\$2,006	\$623	\$138	\$69	\$138		\$69	\$415	\$69			\$69		\$69	\$69		\$69	\$69	\$69			\$69	\$2,006
Freight & Messenger																							
Printing (Outreach, Community Awareness, Signage)																							
Other Outside Services (itemize below)																							
Recruiting/Outreach																							
Marketing/Community Awareness																							
Staff Training																							
Staff Travel																							
TOTAL COSTS	\$246,903	\$91,358	\$18,703	\$9,351	\$15,949		\$5,220	\$49,858	\$4,670			\$5,909		\$5,909	\$5,909	\$11,016	\$5,909	\$5,909	\$5,220			\$6,012	\$246,903
PARTNER RATIO		37.0%	7.6%	3.8%	6.5%		2.1%	20.2%	1.9%			2.4%		2.4%	2.4%	4.5%	2.4%	2.4%	2.1%			2.4%	100.0%

OK!

Allocated costs, Direct and Indirect, must equal the amount on the One-Stop Center Budget spreadsheet (1st sheet in this workbook)

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, _____ John Tyler Freeland _____ certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.



Signature

5-17-2024

Date

John Tyler Freeland, CEO

Print Name and Title

West Piedmont Workforce Development Board

Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Shawn Brenner, certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.



Signature

5/21/2024

Date

Shawn Brenner, Chief Executive Officer

Print Name and Title

Ross Innovative Employment Solutions

Agency Name

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Commissioner Carrie Roth, certify that I have read the information contained in this Infrastructure Funding Agreement (Martinsville One-Stop) which begins July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement (Martinsville One-Stop) _____ (Initial).

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.



Signature



Date

Carrie Roth, Commissioner

Print Name and Title

Virginia Works

Agency Name

Area 17 West Piedmont Region – Martinsville One-Stop Site IFA

July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Lisa A. Martinez certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.

Lisa A. Martinez
Signature

5/31/24
Date

Lisa A. Martinez, Senior Procurement Officer
Print Name and Title

Virginia Department for Aging and Rehabilitative Services
Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, Stacey Wright certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

My signature certifies my understanding of the terms outlined herein and in agreement with:

This IFA Modification as outlined/described below:

Kent 230.04 + S/C 55.09 = # 285.13

I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.

Stacey Wright
Signature

8/21/24
Date

Stacey Wright - Regional Program Manager
Print Name and Title

West Piedmont Regional Adult Education
Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, J. Gregory Hodges certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.

J. Gregory Hodges
Signature

05/17/2024
Date

J. Gregory Hodges, President
Print Name and Title

Patrick & Henry Community College
Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, _____Michael R. Armbrister __certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

My signature certifies my understanding of the terms outlined herein and in agreement with:

This IFA Modification as outlined/described below:

Step, Inc. agrees to pay for only 1/3 of rent and shared costs in the amount of \$1,970.00 at the Martinsville One Stop.

I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.



May 21, 2024

Signature

Date

Michael R. Armbrister, Executive Director

Print Name and Title

Solutions That Empower People, Inc.

Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Greg Preston certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

My signature certifies my understanding of the terms outlined herein and in agreement with:

This IFA Modification as outlined/described below:

Piedmont Community Services to pay a total of \$3,389.00 for the rental space at the Martinsville 1 Stop.

I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.



Signature

5/21/2024

Date

Greg Preston

Print Name and Title

Piedmont CSB

Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Teresa C. Fontaine certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

My signature certifies my understanding of the terms outlined herein and in agreement with:

This IFA Modification as outlined/described below:

N/A

I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.

Teresa C. Fontaine
Signature

5/24/2024
Date

Teresa C. FONTAINE Executive Director
Print Name and Title

Southern Area Agency on Aging
Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Amy W. Rice certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.

Amy W. Rice
Signature

5/20/2024
Date

Amy W. Rice, Director III
Print Name and Title

Henry - Martinsville DSS
Agency Name

West Piedmont Region – Martinsville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Brenda Moore certify that I have read the information contained in this Infrastructure Funding Agreement Martinsville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Martinsville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- c) 1 year from effective date or June 30, 2025
- d) Upon modified termination, whichever occurs earlier.

Brenda Moore

07/15/2024

Signature

Date

Brenda Moore, CIO

Print Name and Title

Agency Name

PY24-25 IFA

Virginia Career Works – Danville Center

One-Stop Center Name:

Virginia Career Works: Danville Workforce Center

PARTNER ENTITY or PARTNER PROGRAM	# OF POSITIONS	% of Total	SQUARE FEET OCCUPIED	% of Total	Customers Receiving Service	% of Total
Virginia Works	9.00	30.00%	889.00	19.83%	9.00	31.03%
WIOA Title I Adult	2.00	6.67%	200.00	4.46%	2.00	6.90%
WIOA Title I Dislocated Worker	1.00	3.33%	100.00	2.23%	1.00	3.45%
WIOA Title I Youth	2.00	6.67%	220.00	4.91%	2.00	6.90%
Virginia Works	1.00	3.33%	105.00	2.34%	1.00	3.45%
		0.00%		0.00%		0.00%
DARS Title IV	1.00	3.33%	120.00	2.68%		0.00%
DOE - Adult Ed	1.00	3.33%	64.00	1.43%	1.00	3.45%
DOE - Perkins		0.00%		0.00%		0.00%
DSS - SNAP		0.00%		0.00%		0.00%
DSS - TANF	1.00	3.33%	100.00	2.23%	1.00	3.45%
		0.00%		0.00%		0.00%
Danville Community College	1.00	3.33%	100.00	2.23%	1.00	3.45%
Pittsylvania County Community Action	8.00	26.67%	1,617.00	36.06%	8.00	27.59%
WPWDB	1.00	3.33%	512.80	11.44%	1.00	3.45%
SAAA	1.00	3.33%	0.00	0.00%	1.00	3.45%
YouthBuild	1.00	3.33%	100.00	2.23%	1.00	3.45%
		0.00%		0.00%		0.00%
TAX	0.00	0.00%	356.00	7.94%	0.00	0.00%
I		0.00%		0.00%		0.00%
J		0.00%		0.00%		0.00%
K		0.00%		0.00%		0.00%
TOTALS:	30.00	100.00%	4483.80	100%	29.00	100%

List each partner's programs providing service through Virginia's Career Works Center: If the allocation is for a Comprehensive Center, at minimum, all partner programs as required by the Virginia Combined State Plan must be included.

-Once program is inserted in Column A row within table above, the balance of the spreadsheets will be automatically populated with the program name information. The balance of the spreadsheets should be formatted appropriately to display the information.

Square Foot Occupied is the sum of the floor area of each office, work station, or other room or space that is assigned to or reserved for the use of one or more partners rather than being shared by all.

OF POSITIONS are the # of staff that each program has dedicated to the One-Stop Center. The # OF POSITIONS are represented in full time position equivalence in relation to 40 hour workweeks. The formula to determine the # to enter is: **# of hours per week that a program staffs the One-Stop Center/40 (full time workweek hours)**.

Customers Receiving Service are the # of people served by each program either at, or through the One-Stop Center. Includes customers received by the One-Stop Center who received services from multiple programs. These customers will be counted by each program serving them.

Note: This spreadsheet allocates costs based on a suggested allocation method (see color key above). Partners may agree on a different basis for allocation, as long as it is appropriately supportable and applied consistently. If a different allocation method is applied, the percentages on the Partner Information tab must be revised to reflect the agreed on basis.

West Piedmont Region – Danville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, _____ John Tyler Freeland _____ certify that I have read the information contained in this Infrastructure Funding Agreement Danville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Danville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.



Signature

5-17-24

Date

John Tyler Freeland, CEO

Print Name and Title

West Piedmont Workforce Development Board

Agency Name

West Piedmont Region – Danville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Shawn Brenner, certify that I have read the information contained in this Infrastructure Funding Agreement Danville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Danville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.



Signature

5/21/2024

Date

Shawn Brenner, Chief Executive Officer

Print Name and Title

Ross Innovative Employment Solutions

Agency Name

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Commissioner Carrie Roth, certify that I have read the information contained in this Infrastructure Funding Agreement (Danville One-Stop) which begins July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

❖ Infrastructure Funding Agreement (Danville One-Stop) _____ (Initial).

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- a) 1 year from effective date or June 30, 2025
- b) Upon modified termination, whichever occurs earlier.

Carrie Roth
Signature

7-19-2024
Date

Carrie Roth, Commissioner
Print Name and Title

Virginia Works
Agency Name

West Piedmont Region – Danville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Stacey Wright certify that I have read the information contained in this Infrastructure Funding Agreement Danville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

My signature certifies my understanding of the terms outlined herein and in agreement with:

This IFA Modification as outlined/described below: #
Rent 190.08 + S/C 64.08 = 254.16

I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

Infrastructure Funding Agreement Danville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- a) 1 year from effective date or June 30, 2025
- b) Upon modified termination, whichever occurs earlier.

Stacey Wright
Signature

5/21/24
Date

Stacey Wright - Regional Program Manager
Print Name and Title

West Piedmont Regional Adult Education
Agency Name

West Piedmont Region – Danville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Dr. Carl B. Smalls certify that I have read the information contained in this Infrastructure Funding Agreement Danville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

My signature certifies my understanding of the terms outlined herein and in agreement with:

This IFA Modification as outlined/described below:

Pay only shared costs in the amount of \$2,444.00

I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Danville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.



Signature

7/11/24
Date

Dr. Carl B. Smalls, VP of Finance and Administration

Print Name and Title

Danville Community College

Agency Name

West Piedmont Region – Danville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, Teresa C. Fontaine certify that I have read the information contained in this Infrastructure Funding Agreement Danville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

My signature certifies my understanding of the terms outlined herein and in agreement with:

This IFA Modification as outlined/described below:

Pay shared cost only in the amount of \$602.00

I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Danville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.

Teresa C. Fontaine
Signature

5/24/2024
Date

Teresa C. Fontaine Executive Director
Print Name and Title

Southern Area Agency on Aging
Agency Name

West Piedmont Region – Danville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

By signing my name below, I, John Moody certify that I have read the information contained in this Infrastructure Funding Agreement Danville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Danville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.

John Moody
Signature

6/26/2024

Date

John Moody, Director

Print Name and Title

Danville Department of Social Services

Agency Name

West Piedmont Region – Danville One-Stop Site IFA July 1, 2024 to June 30, 2025

Authority and Signature

One completed, signed, and dated Authority and Signature page is required for each signatory official.

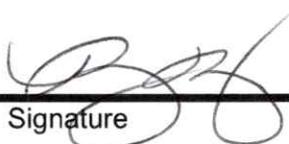
By signing my name below, I, Regina Berger certify that I have read the information contained in this Infrastructure Funding Agreement Danville One-Stop Center dated July 1, 2024. All questions have been discussed and answered satisfactorily.

By signing this document, I also certify that I have the legal authority to bind my agency (outlined below) to the terms of:

- ❖ Infrastructure Funding Agreement Danville One-Stop Center.

I understand that this Infrastructure Funding Agreement (IFA) may be executed in counterparts, each being considered an original, and that this IFA expires either:

- 1 year from effective date or June 30, 2025
- Upon modified termination, whichever occurs earlier.


Signature

6/27/24
Date

Regina Berger, Director
Print Name and Title

Pittsylvania Co. DSS
Agency Name