Addressing Child Trauma and Supporting Behavioral Health in Community Action Opportunities (CAO) Head Start Classrooms

**RFP for Coronavirus State and Local Fiscal Recovery Funds**

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**Community Action Opportunities**

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Application Form

**Question Group**

Buncombe County requests proposals for projects to help the community recover from and respond to COVID-19 and its negative economic impacts.

Buncombe County has been awarded $50,733,290 in Coronavirus State and Local Fiscal Recovery Funds (Recovery Funding), as part of the American Rescue Plan Act. This infusion of federal resources is intended to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery.

Buncombe County is committed to investing these funds in projects that:

- Align to county strategic plan and community priorities
- Support equitable outcomes for most impacted populations
- Leverage and align with other governmental funding sources
- Make best use of this one-time infusion of resources
- Have a lasting impact

Proposals shall be submitted in accordance with the terms and conditions of this RFP and any addenda issued hereto.

Click here for the full terms and conditions of the RFP

**Coronavirus State and Local Fiscal Recovery Funds**

Name of Project.

Addressing Child Trauma and Supporting Behavioral Health in Community Action Opportunities (CAO) Head Start Classrooms

**Amount of Funds Requested**

$986,475.00

**Recovery Fund Eligible Category**

Please select one:

Enhance behavioral and mental health services

**Brief Project Description**

Provide a short summary of your proposed project.

CAO seeks funding for a Head Start Trauma Informed Classroom (HSTIC) for children needing special services due to traumatic stress. Trained professionals will staff the HSTIC using best practices:

- Keeping HSTIC team informed
- Easing transitions that trigger unhealthy emotional responses
- Providing choices giving child a sense of control
- Providing structure/consistency in the classroom and environmental supports to reduce triggers
- Developing strengths/interests of the child contributing to positive self-concept
- Making out plan to go to a safe place if child feels overwhelmed
- Engaging family as active team members

CAO will employ an Early Childhood Behavioral Health (ECBH) Coach to work with HSTIC teachers, children and family members. The Coach will engage with 500 children and their teachers in CAO Buncombe Co Head Start classrooms promoting best practices for emotional/behavioral health of children. Community observations and education are part of this project.

Project Plan*

Explain how the project will be structured and implemented, including timeframe.

Structure:
The purpose of the HSTIC is to create a learning environment giving children with traumatic stress the skills and support they need to shift behaviors and be successful in a Head Start or Kindergarten classroom. Staffing in the HSTIC will include one teacher and one assistant teacher. The EHBB Coach is available for consultations. Objectives include:

- Creating an appropriate learning environment for children with traumatic stress
- Reducing trauma induced emotional and behavioral challenges for children and families
- Increasing pro-social and academic skills such as attention span and concentration, approach-skills, and emotional regulation
- Limiting the number of HSTIC preschoolers to ten
- Hiring trained and certified education professionals to staff the classroom
- Improve challenging behaviors in each child to the point that will enable the child to enter a Head Start or Kindergarten classroom with more children and less supports

Implementation/Timeframe:
- March 2022-Hire ECBH Coach
- March/April 2022-Hire/Identify HSTIC teaching staff.
- April/August 2022-Get referrals for HSTIC from Head Start classrooms. Use ECBH Coach and Head Start Program Manager for Family Services to inform parents about the program and get their buy in. Head Start staff will be trained as to need and purpose of the HSTIC. Use appropriate assessment to measure challenging behaviors and trauma history.
- June 2022-Arrange for visit to The Circle Trauma Informed Classroom in Virginia by HSTIC staff, ECBH Coach, the site Education Supervisor, and other Head Start staff.
- July 2022-In preparation for the 2022 school year, transform a classroom into the descriptive Trauma Informed Classroom environment. See Budget and Budget Narrative for details.
- August 2022-Use appropriate assessment to measure challenging behaviors of children selected for HSTIC.
- September 22-Confirm referral for Parent Child Interaction Therapy and/or Trauma Focused Cognitive Behavioral Therapy as clinically appropriate and available for parents with children in the HSTIC
- January 2023-Conduct a mid-year evaluation of children in the HSTIC, using same assessments used in the initial evaluation.
- January/April 2023-Continue training for parents and Head Start staff by CAO ECBH Coach.
- May 2023-Use evaluation tools for final year-end determination of improved child behaviors within the HSTIC.
- June 2023-Have a debriefing with those involved in the HSTIC to improve services next school year. Note-ECHH Coach will work with Head Start staff to understand their role in supporting the HSTIC.
Statement of Need*
Describe the need that this project will address. Include data to demonstrate the need, and cite the source of the data.

There are children in Head Start classrooms that have experienced child trauma, and are in need of special services to stabilize and increase their sense of safety, resulting in positive behaviors. The following is data collected during three years of Head Start classes:

School Year 2018-19
- 608 - Total number of children coming through the Head Start program in one year: enrolled, drop out.
- 39 - Children having referral to Mental Health Consultant scores on the Ages & Stages-Social Emotional Scale (ASQSE)
- 67 – Children that Mental Health Consultant consulted with including either teachers or families.
- 38 - Children receiving direct Mental Health Services or were referred for Mental Health Services

School Year 2019-2020
- 624 - Total number of children coming through the Head Start program in one year: enrolled, drop out.
- 41 - Children having referral to Mental Health Consultant scores on the ASQSE
- 61 – Children that Mental Health Consultant consulted with including either teachers or families.
- 22 - Children receiving direct Mental Health Services or were referred for Mental Health Services

School Year 2020-2021
- 388 - Total number of children coming through the Head Start program in one year: enrolled, drop out.
- 28 - Children having referral to Mental Health Consultant scores on the ASQSE
- 36 – Children that Mental Health Consultant consulted with including either teachers or families.
- 9 - Children receiving direct Mental Health Services or were referred for Mental Health Services

The data above was pulled from ChildPlus, the original Head Start data management software. With ChildPlus, Head Start children’s data are centralized allowing analytical reports and other information to be stored and accessed.

Link to COVID-19*
Identify a health or economic harm resulting from or exacerbated by the public health emergency, describe the nature and extent of that harm, and explain how the use of this funding would address such harm.

The pandemic is disproportionately affecting people of color. According to the Mayo Clinic “...recent data from the Centers for Disease Control and Prevention show non Hispanic American Indian or Alaska Native people had an age adjusted COVID hospitalization rate about 5.3 times that of non Hispanic white people. COVID hospitalization rates among non Hispanic Black people and Hispanic or Latino people were both about 4.7 times the rate of non Hispanic white people.” Also many people of color have underlying health conditions making them more vulnerable to COVID. (Source: https://www.mayoclinic.org/diseases-conditions/coronavirus/expert-answers/coronavirus-infection-by-race/faq-20488802 ) This year 65% of Head Start families are Black Indigenous People of Color subject to all of the above mentioned disparities arising from COVID. Head Start families lost jobs during the pandemic, resulting in more pressure and stress. When parents are stressed, children are often negatively affected which can lead to child trauma. When exposed to trauma, children may have nightmares, flashbacks, memory lapses, increased irritability, difficulty sleeping, or numbing symptoms. In addition, “Traumatic stress may interfere with children's ability to concentrate, learn, and perform in school.” (Source: What is Child Traumatic Stress, The National Child Traumatic Stress Network - https://www.samhsa.gov/sites/default/files/programs_campaigns/childrens_mental_health/what-is-child-traumatic-stress.pdf ) A HSTIC can alleviate/mitigate child trauma by providing extensive services and an appropriate learning environment. There is an opportunity to shift negative behavior to more positive and
socially acceptable conduct. HSTIC parents are invited to volunteer in the classroom after training and when it is appropriate. By giving parents the opportunity to work and observe in the HSTIC, they have the chance to see how teachers interact with the children and learn some of those techniques.

**Population Served**

Define the population to be served by this project, including volume and demographic characteristics of those served.

The demographic Head Start population of the school year starting in August 2020 and ending in May 2021 included: 206 White, 75 Black, 2 Indian/Alaskan, 2 Pacific Islander, 3 Asian, 37 Multi/Biracial, 90 Latina/Latino, 4 Other, 7 Unspecified. We anticipate a Head Start enrollment population of approximately 500 children in the 2022–2023 school year with proportionally similar demographics. Student population within a Trauma Informed Classroom must be small because of the nature of the behaviors and the need for as much personalized attention as possible. The population of the HSTIC is ten. The anticipated number of children served by the ECBH Coach in the 2022-2023 school year is 500.

There is a model Trauma Informed Classroom nearby. The Greater Richmond (Virginia) SCAN – Stop Child Abuse Now – created The Circle Preschool Program providing high quality early childhood education and intensive trauma focused treatment. "The program helps young children who have experienced trauma more fully benefit from their education by preventing short-term reactions to trauma from becoming long-term challenges in the classroom and in life. SCAN anticipates children being involved in the Circle Preschool Program for at least a year. Children will be better able to return to preschool or enter kindergarten more able to adjust, learn and grow. (Source: http://grscan.com/programs/the-circle-preschool-program/)

Research shows that 10 to 20% of children exhibit challenging behaviors in preschool settings. This number doubles for children living in poverty or who are considered at-risk.

Our plan is to send HSTIC staff, the ECBH Coach and appropriate Head Start staff to view, and be trained by SCAN staff.

**Results**

Describe the proposed impact of the project. List at least 3 performance measures that will be tracked and reported. If possible, include baselines and goals for each performance measure.

The HSTIC will decrease challenging/internalizing behaviors, stress in parenting and increase social emotional strengths and skills. The classroom will serve 10 families and allow observations up to two teacher teams per week. These teacher team observations will potentially reach 1,296 additional students and their families (two teaching teams X 18 children per team X 36 weeks of school). The following are measures we can use in the classroom and at home, at enrollment, midway through the year, and at the end of the year. Desired outcomes/goals and impact of the project include:

- **NOTE:** Measures will be anonymous. Baselines will be determined at enrollment.
  - Ages and Stages Questionnaire-Social Emotional (we already use this with parents to gauge Social Emotional behaviors at home).
**Evaluation***
Describe the data collection, analysis, and quality assurance measures you will use to assure ongoing, effective tracking of contract requirements and outcomes.

Data collection will be through the above-mentioned measures - Ages and Stages Questionnaire-Social Emotional, Childhood Behavior Checklist, Strengths and Difficulties Questionnaire. ChildPlus documentation, Teaching Strategies Gold (TSG) and individual children’s positive and challenging behaviors can be tracked with various tracking tools such as Antecedent/Behavior/Consequence form and Behavior Frequency Chart that are individualized to meet each child’s personal goals. Internalized and externalized behaviors, relationship/attachment behaviors and pro-social and academic skills such as attention span and concentration, approach-skills, emotional regulation will be observed by teacher and teacher assistant. Tracking will be monitored by teachers, supervisors and Early Childhood Behavioral/Mental Health Coach. The team will convene on an agreed upon schedule to review progress and challenges within the HSTIC.

**Equity Impact***
How will this effort help build toward a just, equitable, and sustainable COVID-19 recovery? How are the root causes and/or disproportionate impacts of inequities addressed?

Characters 1,270
Low wealth Head Start families are disproportionately affected by the pandemic. Many Head Start parents lost jobs and as a result, sources of income dried up. These economic challenges resulted in personal stress and financial strain on Head Start households. When parents are stressed, children are affected. According to an article published in the U.S. National Library of Medicine, “...economic hardship led to economic pressure which was associated with parental emotional distress and couple conflict. This conflict was associated with harsh parenting and child problem behavior.” (Source: The Effects of Economic Hardship, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4742411/)

Children experiencing stressful home environments and exhibiting problematic behaviors are subject to child traumatic stress. By providing special environments and services as those found in a Trauma Informed Classroom, children with child traumatic stress have an opportunity to shift problematic behaviors to more positive and socially acceptable conduct, thus reducing possible disruption in parent or caregiver employment in order to address challenging behaviors at school. Establishing a HSTIC will enable children mitigate their negative behavior and hopefully return to a regular Head Start classroom or Kindergarten within 12 to 18 months. In addition, providing trauma-informed therapy and education to families will help decrease the impact and recurrence of generational child trauma.

**Project Partners***
Identify any subcontractors you intend to use for the proposed scope of work. For each subcontractor listed, indicate:
1.) What products and/or services are to be supplied by that subcontractor and;
2.) What percentage of the overall scope of work that subcontractor will perform.

Also, list non-funded key partners critical to project.

We will not have subcontractors; however, we will have partners.
HSTIC children and their parents require ongoing therapeutic services. Some children within regular Head Start classrooms also need therapeutic services. Community Action Opportunities (CAO) Head Start program will create a Memorandum of Understanding (MOU) with a local mental health service provider, Family Preservation Services (FPS) a local for-profit agency. FPS provides a number of therapeutic services including Behavior Intervention, Wrap-Around Services, and Outpatient Therapy.

Other potential partners are Carolina Pediatric Therapy, Mountain Child Advocacy Center, and Buncombe Partnership for Children (Circle of Security Parenting classes).

**Capacity**

Describe the background, experience, and capabilities of your organization or department as it relates to capacity for delivering the proposed project and managing federal funds.

CAO is in its 57th year of service in eight Western North Carolina counties. CAO is part of a network of 1,000 Community Action Agencies (CAA) across the country, founded through President Lyndon Johnson’s War on Poverty in 1964. Anti-poverty work and eliminating barriers to economic self-sufficiency are at the heart of what CAs do. Each CAA offers distinct services and programs determined by regular Community Assessments and Strategic Planning. CAO programs include Head Start, a high quality, early childhood education program for low wealth families at 100% of the Federal Poverty Guidelines (FPG). For example, a family of four at 100% FPG earns approximately $26,000 annually. CAO Head Start classrooms have a Five Star rating, the highest rating possible, from the North Carolina Division of Child Development and Early Education. Each classroom is structured in a developmentally appropriate way, using best practices in early childhood education. CAO Head Start uses the following tools to determine the social-emotional needs of Head Start children: Ages and Stages Questionnaire-Social Emotional (ASQ-SE), Teaching Strategies Gold to capture observational assessments, and the Teaching Pyramid Observation Tool. Using these instruments, the Head Start program created measurements that were used to secure funding from the Community Foundation of Western North Carolina for the purpose of incorporating Social Emotional Literacy (SEL) Centers in each Head Start class, and a SEL Coach to work with children, teachers and parents. While we have made inroads with our SEL grant from the CFWNC, we have Head Start children with more severe emotional issues involving childhood trauma. Although there is no clear percentage of Head Start children affected by trauma, indications are that a significant number of children in Head Start classrooms are in need of a more in-depth, trauma-focused classroom devoted solely to treating children with child traumatic stress.

**Budget**

Provide a detailed project budget including all proposed project revenues and expenditures, including explanations and methodology. For all revenue sources, list the funder and denote whether funds are confirmed or pending. For project expenses, denote all capital vs. operating costs, and reflect which specific expenses are proposed to be funded with one-time Buncombe County Recovery Funds.

Download a copy of the budget form [HERE](#). Complete the form, and upload it using the button below.

Copy of Copy of Copy of CAO-Recovery-Funds-budget-template-3.xlsx

**Special Considerations**

Provide any other information that might assist the County in its selection.
To create long-term, much needed services for CAO Head Start children, we request 3 years of funding for the HSTIC which will embed the program into the CAO Head Start model. Funding includes salary for an ECBH Coach to provide guidance and consultation with HSTIC staff and services to the expected 500 children and 25+ Head Start teachers.
File Attachment Summary

**Applicant File Uploads**

- Copy of Copy of Copy of CAO-Recovery-Funds-budget-template-3.xlsx
## Coronavirus State and Local Fiscal Recovery Funds
### Proposed Project Budget

<table>
<thead>
<tr>
<th>Organization Name:</th>
<th>Community Action Opportunities</th>
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<tr>
<td>Project Name:</td>
<td>Addressing Child Trauma and Supporting Behavioral Health in Head Start Classrooms</td>
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<tr>
<td>Amount Requested:</td>
<td>$328,825.00 each year for three years, totalling $985,475.00</td>
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### Proposed Project Revenue Funder

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<th>Amount</th>
<th>Confirmed or Pending?</th>
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<tr>
<td>Proposed Buncombe COVID Recovery Funds</td>
<td>$985,475 over a period of three years</td>
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<td>We are requesting three years of funding in order to embed the Trauma Informed Classroom in the CAO Head Start model; and provide an Early Childhood Behavioral Health Coach to work with all Head Start children and teachers promoting best practices in childhood behavioral health.</td>
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### Proposed Project Expenses

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<th>Capital or Operating Expense?</th>
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<td>$68,653.00</td>
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<td>Operating Expense</td>
<td>Salary plus fringe for a full time teacher for the Head Start Trauma Informed Classroom (HSTIC)</td>
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<td>$41,588.00</td>
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<td>$ 41,588.00</td>
<td>Operating Expense</td>
<td>Salary plus fringe for a full time teacher assistant for the HSTIC</td>
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<td>$4,000.00</td>
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<td>Operating Expense</td>
<td>Salary for part time substitutes to cover teacher absences during illness and staff trainings.</td>
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<td>$98,000.00</td>
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<td>$ 98,000.00</td>
<td>Operating Expense</td>
<td>Salary plus fringe for a full time Early Childhood Behavioral Health Coach for the HSTIC and Head Start children and classrooms</td>
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<td>$24,000</td>
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<td>Operating Expense</td>
<td>Classroom set up will include furniture for a typical Head Start teaching/learning space. Special materials and tools will be purchased for the HSTIC including: large motor activity equipment (mats for tumbling, jumping, running in place; small indoor climbing equipment, etc.; small motor sensory activities (sand/water tables; therapy putty; slime, etc.); vestibular activities (rocking chairs, wiggle chairs, yoga balls, swing, Bilbo chairs, spinning chairs); proprioceptive activities (small trampoline, weighted blankets or pillows, weighted vests or backpacks and sound blocking earphones.</td>
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<td>$5,000.00</td>
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<td>Operating Expense</td>
<td>Building Maintenance/Adjustments for the needs of the HSTIC including lighting other than fluorescents, muted colors for walls, noise blocking panels, shades for windows, and one-way viewing mirror.</td>
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<td>Parent Activities Funding for parent meetings, training sessions, and consultations. Family Assistance will provide resources for parents who may need help with transportation to and from meetings, clothing and food for family members. Other teacher-approved items for parents can be purchased through this line item. Capital for Community Engagement allows the creation handouts, booklets, information pieces for members of the community interested in learning more about the HSTIC.</td>
<td>$12,000.00</td>
<td>Operating Expense</td>
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<td>Professional Development includes visits to and trainings from The Circle Preschool Program located at The Greater Richmond (Virginia) SCAN – Stop Child Abuse Now organization. The HSTIC teacher, assistant teacher, and Early Childhood Mental/Behavioral Health Coach as well as the Education Site Supervisor, Program Manager for Family Services and a Family Services Associate will travel to SCAN for observations, meetings and trainings with the Circle Preschool Program staff.</td>
<td>$20,000.00</td>
<td>Operating Expense</td>
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<td>Food Expense includes refreshments for meetings with HSTIC children and parents, CAO internal training sessions for Head Start staff, and other staff supplying services to the Head Start program (Finance, Technology, and Human Resources departments; meetings with community members and other early childhood service providers.</td>
<td>$6,000.00</td>
<td>Operating Expense</td>
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<td>Parent Incentive is a $100 gift card given each month to HSTIC parents when their child has an attendance rate of 85% for the month. This is in addition to volunteering in the TIC classroom twice a month; attending Parent Trainings and Parent-Teacher Meetings and completing an Activity Log of one-on-one time spent with their child in the HSTIC.</td>
<td>$10,000.00</td>
<td>Operating Expense</td>
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<td>Indirect Cost part of the Cost Pool which allocates elements of cost incurred by Community Action Opportunities and identifies shared costs that require allocation. Using the multiple allocation base method, shared costs are accumulated in interim pools to be budgeted and managed. Each pool is allocated individually to benefitting functions by means of a base which best measures their relative benefits.</td>
<td>$32,367.00</td>
<td>Operating Expense</td>
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<td>Information Technology part of the cost pool which allocates elements of cost incurred by Community Action Opportunities and identifies shared costs that require allocation. Using the multiple allocation base method, shared costs are accumulated in interim pools to be budgeted and managed. Each pool is allocated individually to benefitting functions by means of a base which best measures their relative benefits.</td>
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<td>Facilities Operations part of the cost pool which allocates elements of cost incurred by Community Action Opportunities and identifies shared costs that require allocation. Using the multiple allocation base method, shared costs are accumulated in interim pools to be budgeted and managed. Each pool is allocated individually to benefitting functions by means of a base which best measures their relative benefits.</td>
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<td>Facilities and Fleet Allocations part of the cost pool which allocates elements of cost incurred by Community Action Opportunities and identifies shared costs that require allocation. Using the multiple allocation base method, shared costs are accumulated in interim pools to be budgeted and managed. Each pool is allocated individually to benefiting functions by means of a base which best measures their relative benefits.</td>
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<td>Total</td>
<td>$ 328,825.00</td>
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