Cook County Department of Emergency Management and Regional Security COOK COUNTY DISASTER RESPONSE AND RECOVERY FUND

Agency / Bureau / Department:	Date:	
Project Name:	Primary Contact:	
identified partn	n overview of your work plan for a new arrivals response ers, shelter locations (if applicable), and other response portunity will support suburban municipalities that are wil	activities.
2. Describe the	timeline of your proposed response.	
contracts you	dget breakdown of all the costs you intend to incur as have in place, their duration, the costs associated wit ds or services on an as needed basis, please list those c	h each contract, and if you are simply