

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY

Meeting Date: April 1, 2025 ☒ Consent ☐ Regular
 ☐ Ordinance ☐ Public Hearing

Department: Criminal Justice Commission
Submitted For: Criminal Justice Commission

I. EXECUTIVE BRIEF


Motion and Title: Staff recommends motion to receive and file: Grant Adjustment Modification (GAM) 1 of the Department of Justice (DOJ) Edward Byrne Memorial Justice Assistance Grant (JAG) Program – Local Solicitation Federal FY 2022 (County FY 2023) #15PBJA-22-GG-02127-JAGX.

Summary: In 2022, the Criminal Justice Commission (CJC) was awarded a \$131,548 grant (R2023-0195) as part of the JAG Local Solicitation Program (CFDA#16.738) for the period of October 1, 2021 through September 30, 2025. The CJC approved allocating these funds to the existing Palm Beach County Reentry Program implemented by the City of Riviera Beach. This award provided continuation funding for transitional services for adults released from jail and prison to Palm Beach County who are reentering society. In County FY 2024, approximately 707 adults were served by the County's Reentry Program, pre and post release. The City of Riviera Beach had unspent funds of \$35,526.25 from FY 2023 that has been reallocated to FY 2025. In accordance with County PPM CW-O-051, this grant adjustment is being submitted as a receive and file agenda item. **No County matching funds are required.** Countywide (HH)

Background and Justification: The JAG Program is the primary provider of federal criminal justice funding to state and local jurisdictions. It provides states and units of local government with critical funding necessary to support a broad range of programs. JAG awards are based on a statutory formula with factors including population and violent crime. The JAG is an allocation that comes directly to local jurisdictions from DOJ.

Attachments:

- 1) GAM 1 for Grant Award 15PBJA-22-GG-02127-JAGX

Recommended by:  3/5/2025
 Department Director Date

Approved by:  3/17/25
 Assistant County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact

| Fiscal Years | 2025 | 2026 | 2027 | 2028 | 2029 |
|-------------------------|------|------|------|------|------|
| Personal Services | | | | | |
| Operating Costs | | | | | |
| Grants & Aids | | | | | |
| External Revenues | | | | | |
| Program Income (County) | | | | | |
| In-Kind Match (County) | | | | | |
| NET FISCAL IMPACT | * | | | | |
| #ADDITIONAL FTE | | | | | |
| POSITIONS (CUMULATIVE) | | | | | |

Is Item Included In Current Budget? Yes X No
Is this item using Federal Funds? Yes X No
Is this item using State Funds? Yes No X

Budget Account Exp No: Fund 1507/1436 Department 820/662 Unit 7727 Object VAR
Rev No: Fund 1507/1436 Department 762/662 Unit 7727 RevSc 3129/8249

B. Recommended Sources of Funds/Summary of Fiscal Impact:

Fund: 1507-Criminal Justice Grant Fund 1436-Justice Services Grant Fund
Unit: 7727-JAG DOJ FY23 15PBJA22GG02127JAGX
Grant: JAG DOJ FY23 15PBJA22GG02127JAGX

*No additional fiscal impact. This GAM approved reallocating the \$35,526.25 unspent from FY23 to FY25.

Digitally signed by Mariana Diaz
DN: DC=org, DC=pubgov, OU=Enterprise, OU=PSD, OU=Users, CN=Mariana Diaz, E=MDiaz@pubc.gov
Date: 2025.03.05 11:25:05-05'00'

C. Departmental Fiscal Review: _____

III. REVIEW COMMENTS:

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

ASDUAL 3/6/2025
OFMB OPA 815
MD 3/5 APP 315

Brenda Brach 3-11-25
Contract Dev. & Control
26 3.11.25

B. Legal Sufficiency

Alex C. Wind 3-11-25
Assistant County Attorney

C. Other Department Review

Department Director

(THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.)

ATTACHMENT 1

Katherine Hatos

From: Dawn Caveness-Davenport
Sent: Friday, February 21, 2025 10:25 AM
To: Katherine Hatos
Cc: Angelique J. Pickett
Subject: FW: 15PBJA-22-GG-02127-JAGX
Attachments: Copy of PalmBCBudget Detail Worksheet FY22 DOJ Final Submitted 08-04-2022_A-460666 (1) (002).xlsm

DCD

From: Velazquez, Gerardo (OJP) <Gerardo.Velazquez@usdoj.gov>
Sent: Tuesday, November 26, 2024 12:42 PM
To: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Subject: FW: 15PBJA-22-GG-02127-JAGX

This Message Is From an External Sender

This message came from outside your organization.

Good afternoon Dawn,

I have uploaded your updated budget changes to the grant file. This is your approved budget.

Gerardo Velazquez
State Policy Advisor
Programs Office
Cell: 202-598-7412
Email: Gerardo.velazquez@usdoj.gov

Visit bja.ojp.gov [bja.ojp.gov]

 [\[twitter.com\]](https://twitter.com) 
[\[facebook.com\]](https://facebook.com) 
[\[youtube.com\]](https://youtube.com)



BJA

Bureau of Justice Assistance
U.S. Department of Justice

PLEASE INCLUDE THE GRANT AWARD NUMBER IN THE SUBJECT LINE OF ALL CORRESPONDENCE

Justice Grants website [justicegrants.usdoj.gov] | Help with JustGrants: JustGrants.Support@usdoj.gov | 1-833-872-5175

For financial assistance, please contact the Office of the Chief Financial Officer (OCFO) at ask.ocfo@ojp.usdoj.gov or 1-800-458-0786.

For ASAP assistance, please contact the ASAP Help Desk at 1-855-868-0151 (option 2, option 3) or ASAPHelpDesk@fiscal.treasury.gov
For specific assistance with BJA's Performance Metric Tool (PMT), please contact PMT Help Desk at bjapmt@csrincorporated.com or 1-888-252-6867.

From: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Sent: Tuesday, November 26, 2024 12:28 PM
To: Velazquez, Gerardo (OJP) <Gerardo.Velazquez@usdoj.gov>
Subject: [EXTERNAL] 15PBJA-22-GG-02127-JAGX

As per our conversation, please see the updated budget narrative for your approval.

DCD

From: Marianela Diaz <MDiaz@pbc.gov>
Sent: Tuesday, November 26, 2024 10:01 AM
To: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Cc: John Port <JPort@pbc.gov>; Jessica Hidalgo J. <JHidalgo@pbc.gov>; Angelique J. Pickett <AJPickett@pbc.gov>; Katherine Hatos <KHatos@pbc.gov>
Subject: RE: GAM needed for DOJ award

Good morning,

It's been a couple of weeks, checking to see if any update.

Thanks,
Marianela

From: Marianela Díaz
Sent: Tuesday, November 12, 2024 11:29 AM
To: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Cc: John Port <JPort@pbc.gov>; Jessica Hidalgo J. <JHidalgo@pbc.gov>
Subject: RE: GAM needed for DOJ award

Updated to include narrative. Also, attached is the approved BCC item.

Thanks,
Marianela

From: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Sent: Friday, November 8, 2024 3:08 PM
To: Marianela Diaz <MDiaz@pbc.gov>
Cc: John Port <JPort@pbc.gov>
Subject: FW: GAM needed for DOJ award

Good afternoon,

The grant manager would like you to add a narrative to the budget.

DCD

From: Dawn Caveness-Davenport
Sent: Thursday, November 7, 2024 3:17 PM
To: 'Gerardo.velazquez@usdoj.gov' <Gerardo.velazquez@usdoj.gov>
Subject: FW: GAM needed for DOJ award

Good afternoon,

I am following up on this request.

DCD

From: Dawn Caveness-Davenport
Sent: Friday, October 4, 2024 9:11 AM
To: 'Velazquez, Gerardo (OJP)' <Gerardo.Velazquez@usdoj.gov>
Subject: FW: GAM needed for DOJ award

Good morning,

As requested, please see the updated budget attached.

DCD

From: Marianela Diaz <MDiaz@pbc.gov>
Sent: Thursday, October 3, 2024 5:20 PM
To: Dawn Caveness-Davenport <DCavenes@pbc.gov>; Jessica Hidalgo J. <JHidalgo@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>
Subject: RE: GAM needed for DOJ award

Please see attached.

We are taking the \$35,526 from Year 1 and adding it to Year 3 (same agency – RB).

From: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Sent: Thursday, October 3, 2024 2:45 PM
To: Marianela Diaz <MDiaz@pbc.gov>; Jessica Hidalgo J. <JHidalgo@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>
Subject: RE: GAM needed for DOJ award

Good afternoon,

I need the updated budget for DOJ. That shows the updated budget. ☺

DCD

From: Marianela Diaz <MDiaz@pbc.gov>
Sent: Wednesday, October 2, 2024 3:21 PM
To: Jessica Hidalgo J. <JHidalgo@pbc.gov>; Dawn Caveness-Davenport <DCavenes@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>
Subject: RE: GAM needed for DOJ award

Attached is the final approved contract.

From: Marianela Diaz
Sent: Tuesday, September 10, 2024 8:15 AM
To: Jessica Hidalgo J. <JHidalgo@pbc.gov>; Dawn Caveness-Davenport <DCavenes@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>
Subject: RE: GAM needed for DOJ award

Good morning,

The contract with the City of Riviera Beach is scheduled for BCC approval today (Motion C.4). Page 193 shows the \$35,526 from DOJ.

<https://www.pbcgov.com/pubInf/Agenda/20240910/3X2.pdf>

We can ask for the final executed contract next week and provide you with a copy to submit to DOJ.

Thanks,
Marianela

From: Jessica Hidalgo J. <JHidalgo@pbc.gov>
Sent: Friday, August 30, 2024 10:53 AM
To: Dawn Caveness-Davenport <DCavenes@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: RE: GAM needed for DOJ award

Hi Dawn,

The full \$35,320 will be allocated for Case Management, with a Unit Rate of \$15.52 per 15 minutes of services delivery. See breakdown below:

$\$15.52 \text{ per } 15 \text{ minutes} \times 4 \text{ (per hour)} \times 568.99\text{hrs} = \$35,320$



Jessica Hidalgo
Manager, Criminal Justice Programs
Public Safety Department
205 N Dixie Highway | West Palm Beach, Florida 33401

Phone: (561) 355-2326 | Email: jhidalgo@pbc.gov

From: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Sent: Thursday, August 29, 2024 3:46 PM
To: Jessica Hidalgo J. <JHidalgo@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: RE: GAM needed for DOJ award

Good afternoon,

Has this budget been completed? I need it before DOJ can render an answer.

DCD

From: Jessica Hidalgo J. <JHidalgo@pbc.gov>
Sent: Thursday, June 6, 2024 11:36 AM
To: Dawn Caveness-Davenport <DCavenes@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: RE: GAM needed for DOJ award

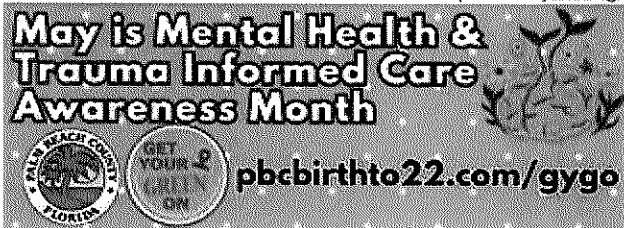
Hi Dawn,

John and I are currently discussing the proposed budget as it relates to the agency's unit rate. The contracts won't go before the BCC until August 20th for final approval.

Thanks,



Jessica Hidalgo
Manager, Criminal Justice Programs
Public Safety Department
205 N Dixie Highway | West Palm Beach, Florida 33401
Phone: (561) 355-2326 | Email: jhidalgo@pbc.gov



From: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Sent: Thursday, June 6, 2024 11:21 AM
To: Jessica Hidalgo J. <JHidalgo@pbc.gov>; John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: RE: GAM needed for DOJ award

Hey Jessica,

Has the budget been completed? I know DOJ is going to request the budget.

DCD

From: Jessica Hidalgo J. <JHidalgo@pbc.gov>
Sent: Tuesday, April 30, 2024 4:15 PM
To: John Port <JPort@pbc.gov>; Dawn Caveness-Davenport <DCavenes@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: RE: GAM needed for DOJ award

Hi Dawn,

We would be reducing RB FY 23 by \$35,526.25 and moving it to RB FY 25 (Oct 2024 to Sept 2025). We currently have contracts drafted but they most likely will not go before the BCC until July/August.

Jessica Hidalgo

Manager, Criminal Justice Programs
Palm Beach County Public Safety Department
205 N. Dixie Highway, Room 5.1130
West Palm Beach, Florida 33401
JHidalgo@pbcgov.org
Office: (561) 355-2326
Cell: (561) 727-9883





From: John Port <JPort@pbc.gov>
Sent: Tuesday, April 30, 2024 4:02 PM
To: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>; Jessica Hidalgo J. <JHidalgo@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: RE: GAM needed for DOJ award

I'm deferring to Jessica for these specifics.

Thank you,

John Port
Financial Analyst II
Palm Beach County
Public Safety Department
20 South Military Trail
West Palm Beach, FL 33415
☎ Phone: (561) 712-6658

 Fax: (561) 712-1353
 Email: jport@pbc.gov



From: Dawn Caveness-Davenport <DCavenes@pbc.gov>
Sent: Tuesday, April 30, 2024 2:48 PM
To: John Port <JPort@pbc.gov>
Cc: Katherine Shover <KShover@pbc.gov>; Jessica Hidalgo J. <JHidalgo@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: FW: GAM needed for DOJ award

Good afternoon John,




We have been working with the grant funder. The total funding for this grant is \$131,548.00. For clarification, are we reducing \$35,526.25 from the Riviera Beach total funding? Who is the funding being allocated to? What is the time period? Do you have a copy of the contract?

DCD

From: John Port <JPort@pbc.gov>
Sent: Thursday, April 18, 2024 3:52 PM
To: Katherine Shover <KShover@pbc.gov>; Dawn Caveness-Davenport <DCavenes@pbc.gov>
Cc: Jessica Hidalgo J. <JHidalgo@pbc.gov>; Marianela Diaz <MDiaz@pbc.gov>
Subject: RE: GAM needed for DOJ award

Gentle reminder that we can assist when you need further information for the GAM.

Thank you,

John Port
Financial Analyst II
Palm Beach County
Public Safety Department
20 South Military Trail
West Palm Beach, FL 33415
 Phone: (561) 712-6658
 Fax: (561) 712-1353
 Email: jport@pbc.gov



From: Katherine Shover <KShover@pbcgov.org>
Sent: Tuesday, February 27, 2024 3:33 PM
To: John Port <JPort@pbcgov.org>; Dawn Caveness-Davenport <DCavenes@pbcgov.org>
Cc: Jessica Hidalgo J. <JHidalgo@pbcgov.org>; Marianela Diaz <MDiaz@pbcgov.org>
Subject: RE: GAM needed for DOJ award

Thank you. We will work on the request.

Katherine

From: John Port <JPort@pbcgov.org>
Sent: Tuesday, February 27, 2024 1:24 PM
To: Katherine Shover <KShover@pbcgov.org>; Dawn Caveness-Davenport <DCavenes@pbcgov.org>
Cc: Jessica Hidalgo J. <JHidalgo@pbcgov.org>; Marianela Diaz <MDiaz@pbcgov.org>
Subject: GAM needed for DOJ award

Good afternoon Dawn and Katherine,

Just a note to inform you that after our budget discussion in Reentry, we determined we would like to use the remaining \$35,526.25 from 15PBJA-22-GG-02127-JAGX award to fund Reentry programs for FY25. Please move forward with the GAM and let us know when you need further information.

Thank you,

John Port
Financial Analyst II
Palm Beach County
Public Safety Department
20 South Military Trail
West Palm Beach, FL 33415
☎ Phone: (561) 712-6658
☎ Fax: (561) 712-1353
✉ Email: jport@pbcgov.org



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Budget Detail - Year 1

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N
(DOI Financial Guide, Section 3.10)

A. Personnel

| Name | Position | Computation | | | | | | |
|---------------------------|-------------------------------|---|------|--|--------------------|------------|--------------------------|-----------------|
| List each name, if known. | List each position, if known. | Show annual salary rate & amount of time devoted to the project for each name/position. | | | | | | |
| | | Salary | Rate | Time Worked (# of hours, days, months, years) | Percentage of Time | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | |

B. Fringe Benefits

| Name | Computation | | | | |
|---|---------------------------------|------|------------|--------------------------|-----------------|
| List each grant-supported position receiving fringe benefits. | Show the basis for computation. | | | | |
| | Base | Rate | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

C. Travel

| Purpose of Travel | Location | Type of Expense | Basis | Computation | | | | | | |
|--|----------------------------------|----------------------|---------------------------|--|----------|------------|------------|------------|--------------------------|-----------------|
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Indicate the travel destination. | Lodging, Meals, Etc. | Per day, mile, trip, Etc. | Compute the cost of each type of expense X the number of people traveling. | | | | | | |
| | | | | Cost | Quantity | # of Staff | # of Trips | Total Cost | Non-Federal Contribution | Federal Request |
| | | | N/A | | | | | \$0 | | \$0 |
| Total(s) | | | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | | | |

D. Equipment

| Item | Computation | | | | |
|---|--|-----------|------------|--------------------------|-----------------|
| List and describe each item of equipment that will be purchased | Compute the cost (e.g., the number of each item to be purchased X the cost per item) | | | | |
| | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

| | | | | | | |
|---|---|--|---|---------------------------------|---------------------------------|------------------------|
| | | | | | | |
| E. Supplies | | | | | | |
| Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i> | | Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i> | | | | |
| | | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | \$0 | | \$0 |
| Total(s) | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | |
| | | | | | | |
| F. Construction | | | | | | |
| Purpose <i>Provide the purpose of the construction</i> | Description of Work <i>Describe the construction project(s)</i> | Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i> | | | | |
| | | # of Items | Cost | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | \$0 | | \$0 |
| Total(s) | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | |
| | | | | | | |
| G. Subawards (Subgrants) | | | | | | |
| Description <i>Provide a description of the activities to be carried out by subrecipients.</i> | Purpose <i>Describe the purpose of the subaward (subgrant)</i> | Consultant? <i>Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost.</i> | | | | |
| | | | Total Cost | Non-Federal Contribution | Federal Request | |
| Adult Case Management Services - Riviera Beach | Provide Adult Ex-Offender Reentry services through the RESTORE Initiative for individuals returning to Palm Beach County. | No | \$96,022 | \$0 | \$96,022 | |
| Total(s) | | | \$96,022 | \$0 | \$96,022 | |
| Consultant Travel (if necessary) | | | | | | |
| Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i> | Location <i>Indicate the travel destination.</i> | Type of Expense <i>Hotel, airfare, per diem</i> | Computation <i>Compute the cost of each type of expense X the number of people traveling.</i> | | | |
| | | | Cost | Duration or Distance | # of Staff | Federal Request |
| | | | | | | \$0 |
| Total | | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | |
| The City of Riviera Beach will provide Adult Ex-Offender Reentry services through the RESTORE Initiative for individuals returning to Palm Beach County through the Local Jail, the Florida Department of Corrections or Federal Correctional Institutions. | | | | | | |
| Case Management services will include: the provision of a caseload of active participants; provide individual case management sessions with all clients at regularly scheduled intervals; develop individual service plans for all clients that identify barriers to successful reentry; document all client contact and progress, including time and date, type of contact, outcome and plan of action; provide or broker services to holistically address clients' needs. | | | | | | |
| Contract/Unit Rate: Services are reimbursed on a unit rate approved by the Palm Beach County Board of County Commissioners (BOCC). Approval pending, agenda item scheduled for October 4, 2022. | | | | | | |
| Adult Case Management Services Unit Cost = Unit rates as approved by BOCC. | | | | | | |

| | | | | | | | | | |
|--|---|--|--------------------|---|----------------------|------------|--------------------------|--------------------------|-----------------|
| H. Procurement Contracts | | | | | | | | | |
| Description <i>Provide a description of the products or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold (currently \$150,000).</i> | | Purpose <i>Describe the purpose of the contract</i> | | Consultant? <i>Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost.</i> | | | | | |
| | | | | | | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | | | | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 | |
| Consultant Travel (if necessary) | | | | | | | | | |
| Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i> | Location <i>Indicate the travel destination.</i> | Type of Expense <i>Hotel, airfare, per diem</i> | | Computation <i>Compute the cost of each type of expense X the number of people traveling.</i> | | | | | |
| | | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | | \$0 | | \$0 |
| Total | | | | | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | | |
| | | | | | | | | | |
| I. Other Costs | | | | | | | | | |
| Description <i>List and describe items that will be paid with grants funds (e.g. rent, reproduction, telephone, janitorial, or security services, and investigative or confidential funds).</i> | | Computation <i>Show the basis for computation</i> | | | | | | | |
| | | Quantity | Basis | Cost | Length of Time | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | | \$0 | | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | | |
| | | | | | | | | | |
| J. Indirect Costs | | | | | | | | | |
| Description <i>Describe what the approved rate is and how it is applied.</i> | | Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i> | | | | | | | |
| | | Base | Indirect Cost Rate | | | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | | \$0 | | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | | |
| | | | | | | | | | |

Budget Detail - Year 2

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N

(DOJ Financial Guide, Section 3.10)

A. Personnel

| Name | Position | Computation | | | | | | |
|---------------------------|-------------------------------|---|------|--|--------------------|------------|--------------------------|-----------------|
| List each name, if known. | List each position, if known. | Show annual salary rate & amount of time devoted to the project for each name/position. | | | | | | |
| | | Salary | Rate | Time Worked (# of hours, days, months, years) | Percentage of Time | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | |
| | | | | | | | | |

B. Fringe Benefits

| Name | Computation | | | | |
|---|---------------------------------|------|------------|--------------------------|-----------------|
| List each grant-supported position receiving fringe benefits. | Show the basis for computation. | | | | |
| | Base | Rate | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |
| | | | | | |

C. Travel

| Purpose of Travel | Location | Type of Expense | Basis | Computation | | | | | | |
|--|----------------------------------|----------------------|---------------------------|--|----------|------------|------------|------------|--------------------------|-----------------|
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Indicate the travel destination. | Lodging, Meals, Etc. | Per day, mile, trip, Etc. | Compute the cost of each type of expense X the number of people traveling. | | | | | | |
| | | | | Cost | Quantity | # of Staff | # of Trips | Total Cost | Non-Federal Contribution | Federal Request |
| | | | N/A | | | | | \$0 | | \$0 |
| Total(s) | | | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | | | |
| | | | | | | | | | | |

D. Equipment

| Item | Computation | | | | |
|---|--|-----------|------------|--------------------------|-----------------|
| List and describe each item of equipment that will be purchased | Compute the cost (e.g., the number of each item to be purchased X the cost per item) | | | | |
| | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

| | | | | | | | | | | | |
|--|--|--------------------------------------|---|--|-----------|---|--------------------------|-----------------|------------|--------------------------|-----------------|
| | | | | | | | | | | | |
| E. Supplies | | | | | | | | | | | |
| Supply Items | | | | Computation | | | | | | | |
| Provide a list of the types of items to be purchased with grant funds. | | | | Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item. | | | | | | | |
| | | | | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | | \$0 | | | \$0 | | |
| | | | | Total(s) | | \$0 | \$0 | | \$0 | | |
| Narrative | | | | | | | | | | | |
| | | | | | | | | | | | |
| F. Construction | | | | | | | | | | | |
| Purpose | | Description of Work | | Computation | | | | | | | |
| Provide the purpose of the construction | | Describe the construction project(s) | | Compute the costs (e.g., the number of each item to be purchased X the cost per item) | | | | | | | |
| | | | | # of Items | Cost | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | | \$0 | | | \$0 | | |
| | | | | Total(s) | | \$0 | \$0 | | \$0 | | |
| Narrative | | | | | | | | | | | |
| | | | | | | | | | | | |
| G. Subawards (Subgrants) | | | | | | | | | | | |
| Description | | | Purpose | | | Consultant? | | | | | |
| Provide a description of the activities to be carried out by subrecipients. | | | Describe the purpose of the subaward (subgrant) | | | Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost. | | | | | |
| | | | | | | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | | | | | \$0 | | |
| | | | Total(s) | | | \$0 | \$0 | | \$0 | | |
| Consultant Travel (if necessary) | | | | | | | | | | | |
| Purpose of Travel | | Location | | Type of Expense | | Computation | | | | | |
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | | Indicate the travel destination. | | Hotel, airfare, per diem | | Compute the cost of each type of expense X the number of people traveling. | | | | | |
| | | | | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | | | | \$0 | | \$0 |
| | | | | | | Total | | \$0 | \$0 | | \$0 |
| Narrative | | | | | | | | | | | |
| | | | | | | | | | | | |

| H. Procurement Contracts | | | | | | | | | | |
|--|--|--|-------|--|---|--|--------------------------|--------------------------|--------------------------|-----------------|
| Description <i>Provide a description of the products or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold (currently \$150,000).</i> | | Purpose <i>Describe the purpose of the contract</i> | | | Consultant? <i>Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost.</i> | | | | | |
| | | | | | | | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | | | | | \$0 | |
| | | | | | Total(s) | | \$0 | \$0 | \$0 | |
| Consultant Travel (if necessary) | | | | | | | | | | |
| Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i> | | Location <i>Indicate the travel destination.</i> | | Type of Expense <i>Hotel, airfare, per diem</i> | | Computation <i>Compute the cost of each type of expense X the number of people traveling.</i> | | | | |
| | | | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | | | \$0 | | \$0 |
| | | | | | Total | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | | | |
| | | | | | | | | | | |
| I. Other Costs | | | | | | | | | | |
| Description <i>List and describe items that will be paid with grants funds (e.g. rent, reproduction, telephone, janitorial, or security services, and investigative or confidential funds).</i> | | Computation <i>Show the basis for computation</i> | | | | | | | | |
| | | Quantity | Basis | Cost | Length of Time | Total Cost | Non-Federal Contribution | Federal Request | | |
| | | | | | | \$0 | | \$0 | | |
| | | Total(s) | | | | \$0 | \$0 | \$0 | | |
| Narrative | | | | | | | | | | |
| | | | | | | | | | | |
| J. Indirect Costs | | | | | | | | | | |
| Description <i>Describe what the approved rate is and how it is applied.</i> | | Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i> | | | | | | | | |
| | | Base | | Indirect Cost Rate | | Total Cost | Non-Federal Contribution | Federal Request | | |
| | | | | | | \$0 | | \$0 | | |
| | | Total(s) | | | | \$0 | \$0 | \$0 | | |
| Narrative | | | | | | | | | | |
| | | | | | | | | | | |

Budget Detail - Year 3

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N

(DOJ Financial Guide, Section 3.10)

A. Personnel

| Name | Position | Computation | | | | | | |
|---------------------------|-------------------------------|---|------|--|--------------------|------------|--------------------------|-----------------|
| List each name, if known. | List each position, if known. | Show annual salary rate & amount of time devoted to the project for each name/position. | | | | | | |
| | | Salary | Rate | Time Worked (# of hours, days, months, years) | Percentage of Time | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | |

B. Fringe Benefits

| Name | Computation | | | | |
|---|---------------------------------|------|------------|--------------------------|-----------------|
| List each grant-supported position receiving fringe benefits. | Show the basis for computation. | | | | |
| | Base | Rate | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

C. Travel

| Purpose of Travel | Location | Type of Expense | Basis | Computation | | | | | | |
|--|----------------------------------|----------------------|---------------------------|--|----------|------------|------------|------------|--------------------------|-----------------|
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Indicate the travel destination. | Lodging, Meals, Etc. | Per day, mile, trip, Etc. | Compute the cost of each type of expense X the number of people traveling. | | | | | | |
| | | | | Cost | Quantity | # of Staff | # of Trips | Total Cost | Non-Federal Contribution | Federal Request |
| | | | N/A | | | | | \$0 | | \$0 |
| Total(s) | | | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | | | |

D. Equipment

| Item | Computation | | | | |
|---|--|-----------|------------|--------------------------|-----------------|
| List and describe each item of equipment that will be purchased | Compute the cost (e.g., the number of each item to be purchased X the cost per item) | | | | |
| | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

| | | | | | | | | | |
|---|--|--------------------------------------|---|--|-----------|---|----------------------|--------------------------|--------------------------|
| | | | | | | | | | |
| E. Supplies | | | | | | | | | |
| Supply Items | | | | Computation | | | | | |
| Provide a list of the types of items to be purchased with grant funds. | | | | Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item. | | | | | |
| | | | | # of Items | Unit Cost | | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | | \$0 | | \$0 |
| | | | | Total(s) | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | | |
| | | | | | | | | | |
| F. Construction | | | | | | | | | |
| Purpose | | Description of Work | | Computation | | | | | |
| Provide the purpose of the construction | | Describe the construction project(s) | | Compute the costs (e.g., the number of each item to be purchased X the cost per item) | | | | | |
| | | | | # of Items | Cost | | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | | \$0 | | \$0 |
| | | | | Total(s) | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | | |
| | | | | | | | | | |
| G. Subawards (Subgrants) | | | | | | | | | |
| Description | | | Purpose | | | Consultant? | | | |
| Provide a description of the activities to be carried out by subrecipients. | | | Describe the purpose of the subaward (subgrant) | | | Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost. | | | |
| | | | | | | | | Total Cost | Non-Federal Contribution |
| | | | | | | | | | Federal Request |
| Adult Case Management Services - Riviera Beach | | | Provide Adult Ex-Offender Reentry services through the RESTORE Initiative for individuals returning to Palm Beach County. | | | | | \$35,526 | \$35,526 |
| | | | | | | Total(s) | | \$35,526 | \$0 |
| | | | | | | | | \$0 | \$35,526 |
| Consultant Travel (if necessary) | | | | | | | | | |
| Purpose of Travel | | Location | | Type of Expense | | Computation | | | |
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | | Indicate the travel destination. | | Hotel, airfare, per diem | | Compute the cost of each type of expense X the number of people traveling. | | | |
| | | | | | | Cost | Duration or Distance | # of Staff | Total Cost |
| | | | | | | | | | \$0 |
| | | | | | | | | | \$0 |
| | | | | | | Total | | \$0 | \$0 |
| Narrative | | | | | | | | | |
| The City of Riviera Beach will provide Adult Ex-Offender Reentry services through the RESTORE Initiative for individuals returning to Palm Beach County through the Local Jail, the Florida Department of Corrections or Federal Correctional Institutions. | | | | | | | | | |
| Case Management services will include: the provision of a caseload of active participants; provide individual case management sessions with all clients at regularly scheduled intervals; develop individual service plans for all clients that identify barriers to successful reentry; document all client contact and progress, including time and date, type of contact, outcome and plan of action; provide or broker services to holistically address clients' needs. | | | | | | | | | |
| Contract/Unit Rate: Services are reimbursed on a unit rate approved by the Palm Beach County Board of County Commissioners (BOCC). Approved 9/10/24 R2024-1133. | | | | | | | | | |
| Adult Case Management Services Unit Cost = \$15.52 per each 15 minutes of service delivery. | | | | | | | | | |

| H. Procurement Contracts | | | | | | | | |
|---|---|--|---|--------------------------|-----------------|------------|--------------------------|-----------------|
| Description Provide a description of the products or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold (currently \$150,000). | Purpose Describe the purpose of the contract | Consultant? Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost. | | | | | | |
| | | | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | \$0 | | | |
| | | | Total(s) | \$0 | \$0 | \$0 | | |
| Consultant Travel (if necessary) | | | | | | | | |
| Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Location Indicate the travel destination. | Type of Expense Hotel, airfare, per diem | Computation Compute the cost of each type of expense X the number of people traveling. | | | | | |
| | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| | | | Total | \$0 | \$0 | \$0 | | |
| Narrative | | | | | | | | |
| | | | | | | | | |

| I. Other Costs | | | | | | | | |
|---|---|-------|------|----------------|------------|--------------------------|-----------------|-----|
| Description List and describe items that will be paid with grants funds (e.g. rent, reproduction, telephone, janitorial, or security services, and investigative or confidential funds). | Computation Show the basis for computation | | | | | | | |
| | Quantity | Basis | Cost | Length of Time | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | \$0 | | \$0 | |
| | | | | | Total(s) | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | |
| | | | | | | | | |

| J. Indirect Costs | | | | | | |
|--|---|--------------------|------------|--------------------------|-----------------|-----|
| Description Describe what the approved rate is and how it is applied. | Computation Compute the indirect costs for those portions of the program which allow such costs. | | | | | |
| | Base | Indirect Cost Rate | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | \$0 | | \$0 | |
| | | | Total(s) | \$0 | \$0 | \$0 |
| Narrative | | | | | | |
| | | | | | | |

Budget Detail - Year 4

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N

(DOJ Financial Guide, Section 3.10)

A. Personnel

| Name | Position | Computation | | | | | | |
|---------------------------|-------------------------------|---|------|--|--------------------|------------|--------------------------|-----------------|
| List each name, if known. | List each position, if known. | Show annual salary rate & amount of time devoted to the project for each name/position. | | | | | | |
| | | Salary | Rate | Time Worked (# of hours, days, months, years) | Percentage of Time | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | |

B. Fringe Benefits

| Name | Computation | | | | |
|---|---------------------------------|------|------------|--------------------------|-----------------|
| List each grant-supported position receiving fringe benefits. | Show the basis for computation. | | | | |
| | Base | Rate | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

C. Travel

| Purpose of Travel | Location | Type of Expense | Basis | Computation | | | | | | |
|--|----------------------------------|----------------------|---------------------------|--|----------|------------|------------|------------|--------------------------|-----------------|
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Indicate the travel destination. | Lodging, Meals, Etc. | Per day, mile, trip, Etc. | Compute the cost of each type of expense X the number of people traveling. | | | | | | |
| | | | | Cost | Quantity | # of Staff | # of Trips | Total Cost | Non-Federal Contribution | Federal Request |
| | | | N/A | | | | | \$0 | | \$0 |
| Total(s) | | | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | | | |

D. Equipment

| Item | Computation | | | | |
|---|--|-----------|------------|--------------------------|-----------------|
| List and describe each item of equipment that will be purchased | Compute the cost (e.g., the number of each item to be purchased X the cost per item) | | | | |
| | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

| | | | | | | | | | |
|--|--|--|--|---|------|---|--------------------------|--------------------------|--------------------------|
| | | | | | | | | | |
| E. Supplies | | | | | | | | | |
| Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i> | | | Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i> | | | | | | |
| | | | # of Items | Unit Cost | | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | | \$0 | | \$0 | |
| | | | | | | Total(s) | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | | |
| | | | | | | | | | |
| F. Construction | | | | | | | | | |
| Purpose <i>Provide the purpose of the construction</i> | | Description of Work <i>Describe the construction project(s)</i> | | Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i> | | | | | |
| | | | | # of Items | Cost | | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | | \$0 | | \$0 |
| | | | | | | | Total(s) | \$0 | \$0 |
| Narrative | | | | | | | | | |
| | | | | | | | | | |
| G. Subawards (Subgrants) | | | | | | | | | |
| Description <i>Provide a description of the activities to be carried out by subrecipients.</i> | | | Purpose <i>Describe the purpose of the subaward (subgrant)</i> | | | Consultant? <i>Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost.</i> | | | |
| | | | | | | | | Total Cost | Non-Federal Contribution |
| | | | | | | | | | \$0 |
| | | | | | | | Total(s) | \$0 | \$0 |
| Consultant Travel (if necessary) | | | | | | | | | |
| Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i> | | Location <i>Indicate the travel destination.</i> | | Type of Expense <i>Hotel, airfare, per diem</i> | | Computation <i>Compute the cost of each type of expense X the number of people traveling.</i> | | | |
| | | | | | | Cost | Duration or Distance | # of Staff | Total Cost |
| | | | | | | | | | \$0 |
| | | | | | | Total | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | | |
| | | | | | | | | | |

| H. Procurement Contracts | | | | | | | | |
|---|---|--|---|--------------------------|-----------------|--------------------------|--------------------------|-----------------|
| Description Provide a description of the products or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold (currently \$150,000). | Purpose Describe the purpose of the contract | Consultant? Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost. | | | | | | |
| | | | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | \$0 | | | |
| Total(s) | | | \$0 | \$0 | \$0 | | | |
| Consultant Travel (if necessary) | | | | | | | | |
| Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Location Indicate the travel destination. | Type of Expense Hotel, airfare, per diem | Computation Compute the cost of each type of expense X the number of people traveling. | | | | | |
| | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| Total | | | \$0 | \$0 | \$0 | | | |
| Narrative | | | | | | | | |
| | | | | | | | | |
| I. Other Costs | | | | | | | | |
| Description List and describe items that will be paid with grants funds (e.g. rent, reproduction, telephone, janitorial, or security services, and investigative or confidential funds). | Computation Show the basis for computation | | | | | | | |
| | Quantity | Basis | Cost | Length of Time | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | \$0 | | \$0 | |
| Total(s) | | | | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | |
| | | | | | | | | |
| J. Indirect Costs | | | | | | | | |
| Description Describe what the approved rate is and how it is applied. | Computation Compute the indirect costs for those portions of the program which allow such costs. | | | | | | | |
| | Base | Indirect Cost Rate | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | \$0 | | \$0 | | | |
| Total(s) | | | \$0 | \$0 | \$0 | | | |
| Narrative | | | | | | | | |
| | | | | | | | | |

Budget Detail - Year 5

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N

(DOI Financial Guide, Section 3.10)

A. Personnel

| Name | Position | Computation | | | | | | |
|---------------------------|-------------------------------|---|------|--|--------------------|------------|--------------------------|-----------------|
| List each name, if known. | List each position, if known. | Show annual salary rate & amount of time devoted to the project for each name/position. | | | | | | |
| | | Salary | Rate | Time Worked (# of hours, days, months, years) | Percentage of Time | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| Total(s) | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | |
| | | | | | | | | |

B. Fringe Benefits

| Name | Computation | | | | |
|---|---------------------------------|------|------------|--------------------------|-----------------|
| List each grant-supported position receiving fringe benefits. | Show the basis for computation. | | | | |
| | Base | Rate | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |
| | | | | | |

C. Travel

| Purpose of Travel | Location | Type of Expense | Basis | Computation | | | | | | |
|--|----------------------------------|----------------------|---------------------------|--|----------|------------|------------|------------|--------------------------|-----------------|
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Indicate the travel destination. | Lodging, Meals, Etc. | Per day, mile, trip, Etc. | Compute the cost of each type of expense X the number of people traveling. | | | | | | |
| | | | | Cost | Quantity | # of Staff | # of Trips | Total Cost | Non-Federal Contribution | Federal Request |
| | | | N/A | | | | | \$0 | | \$0 |
| Total(s) | | | | | | | | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | | | |
| | | | | | | | | | | |

D. Equipment

| Item | Computation | | | | |
|---|--|-----------|------------|--------------------------|-----------------|
| List and describe each item of equipment that will be purchased | Compute the cost (e.g., the number of each item to be purchased X the cost per item) | | | | |
| | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request |
| | | | \$0 | | \$0 |
| Total(s) | | | \$0 | \$0 | \$0 |
| Narrative | | | | | |

| | | | | | | | | | | | |
|--|--|--------------------------------------|---|--|---|--|--------------------------|--------------------------|-----------------|--------------------------|-----------------|
| | | | | | | | | | | | |
| E. Supplies | | | | | | | | | | | |
| Supply Items | | | | Computation | | | | | | | |
| Provide a list of the types of items to be purchased with grant funds. | | | | Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item. | | | | | | | |
| | | | | # of Items | Unit Cost | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | | \$0 | | | \$0 | | |
| | | | | Total(s) | | \$0 | \$0 | \$0 | | | |
| Narrative | | | | | | | | | | | |
| | | | | | | | | | | | |
| F. Construction | | | | | | | | | | | |
| Purpose | | Description of Work | | Computation | | | | | | | |
| Provide the purpose of the construction | | Describe the construction project(s) | | Compute the costs (e.g., the number of each item to be purchased X the cost per item) | | | | | | | |
| | | | | # of Items | Cost | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | | \$0 | | | \$0 | | |
| | | | | Total(s) | | \$0 | \$0 | \$0 | | | |
| Narrative | | | | | | | | | | | |
| | | | | | | | | | | | |
| G. Subawards (Subgrants) | | | | | | | | | | | |
| Description | | | Purpose | | Consultant? | | | | | | |
| Provide a description of the activities to be carried out by subrecipients. | | | Describe the purpose of the subaward (subgrant) | | Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost. | | | | | | |
| | | | | | | | Total Cost | Non-Federal Contribution | Federal Request | | |
| | | | | | | | | | \$0 | | |
| | | | | | Total(s) | | \$0 | \$0 | \$0 | | |
| Consultant Travel (if necessary) | | | | | | | | | | | |
| Purpose of Travel | | Location | | Type of Expense | | Computation | | | | | |
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | | Indicate the travel destination. | | Hotel, airfare, per diem | | Compute the cost of each type of expense X the number of people traveling. | | | | | |
| | | | | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | | | | \$0 | | \$0 |
| | | | | | | Total | | \$0 | \$0 | \$0 | |
| Narrative | | | | | | | | | | | |
| | | | | | | | | | | | |

| H. Procurement Contracts | | | | | | | | |
|---|---|--|---|--------------------------|-----------------|--------------------------|--------------------------|-----------------|
| Description Provide a description of the products or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold (currently \$150,000). | Purpose Describe the purpose of the contract | Consultant? Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost. | | | | | | |
| | | | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | | | \$0 | | | |
| | | | Total(s) | \$0 | \$0 | \$0 | | |
| Consultant Travel (if necessary) | | | | | | | | |
| Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Location Indicate the travel destination. | Type of Expense Hotel, airfare, per diem | Computation Compute the cost of each type of expense X the number of people traveling. | | | | | |
| | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | \$0 | | \$0 |
| | | | Total | \$0 | \$0 | \$0 | | |
| Narrative | | | | | | | | |
| | | | | | | | | |
| I. Other Costs | | | | | | | | |
| Description List and describe items that will be paid with grants funds (e.g. rent, reproduction, telephone, janitorial, or security services, and investigative or confidential funds). | Computation Show the basis for computation | | | | | | | |
| | Quantity | Basis | Cost | Length of Time | Total Cost | Non-Federal Contribution | Federal Request | |
| | | | | | \$0 | | \$0 | |
| | | | | | Total(s) | \$0 | \$0 | \$0 |
| Narrative | | | | | | | | |
| | | | | | | | | |
| J. Indirect Costs | | | | | | | | |
| Description Describe what the approved rate is and how it is applied. | Computation Compute the indirect costs for those portions of the program which allow such costs. | | | | | | | |
| | Base | Indirect Cost Rate | Total Cost | Non-Federal Contribution | Federal Request | | | |
| | | | \$0 | | \$0 | | | |
| | | | Total(s) | \$0 | \$0 | \$0 | | |
| Narrative | | | | | | | | |
| | | | | | | | | |

Budget Summary

| Budget Summary | | | | | | | | | | | |
|--|-----------------|---------------------|-----------------------|---------------------|-----------------------|---------------------|-----------------------|---------------------|-----------------------|---------------------|------------------|
| Note: Any errors detected on this page should be fixed on the corresponding Budget Detail tab. | | | | | | | | | | | |
| | Year 1 | | Year 2 (if needed) | | Year 3 (if needed) | | Year 4 (if needed) | | Year 5 (if needed) | | |
| Budget Category | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | Total(s) |
| A. Personnel | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| B. Fringe Benefits | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| C. Travel | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| D. Equipment | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| E. Supplies | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| F. Construction | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| G. Subawards (Subgrants) | \$96,022 | \$0 | \$0 | \$0 | \$35,526 | \$0 | \$0 | \$0 | \$0 | \$0 | \$131,548 |
| H. Procurement Contracts | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| I. Other | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| Total Direct Costs | \$96,022 | \$0 | \$0 | \$0 | \$35,526 | \$0 | \$0 | \$0 | \$0 | \$0 | \$131,548 |
| J. Indirect Costs | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| Total Project Costs | \$96,022 | \$0 | \$0 | \$0 | \$35,526 | \$0 | \$0 | \$0 | \$0 | \$0 | \$131,548 |
| Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N | | | | | | | | | | No | |