Agenda Item #: 3Q-1

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

Meeting Date: May 6, 2025	[X]	Consent Ordinance]]]	======= Regular Public Hearing
Department: Criminal Justice Comm Submitted For: Criminal Justice Com	nmissio				
I. EXECUTIV		======== = F	===		
Motion and Title: Staff recommends of Modification (GAM) 1 of the Department Justice Assistance Grant (JAG) Program FY 2023) #15PBJA-22-GG-02127-JAG	ent of J n – Loca	ustice (DOJ) I	Ξdw	ard	Byrne Memorial
Summary: In 2022, the Criminal Justice grant (R2023-0195) as part of the JAG L the period of October 1, 2021 through allocating these funds to the existin implemented by the City of Riviera Bear for transitional services for adults release who are reentering society. In County FN by the County's Reentry Program, preshad unspent funds of \$35,526.25 from 2025. In accordance with County PPN submitted as a receive and file agendanumber to process the acceptance of required. Countywide (HH)	Local Son h Septeng Palifich. This sed from Y 2024, and poin FY 20 M CW-Caritem a	olicitation Progember 30, 202 m Beach Consider 30, 202 m Beach Consider award provider jail and prison approximately strelease. The 023 that has 10-051, this grand will facilitate	ram 25. unty led on to 707 e C beel ant a	n (C The con Pal 7 ac ity n re adju	FDA#16.738) for e CJC approved deentry Program dinuation funding Im Beach County dults were served of Riviera Beach eallocated to FY ustment is being appropriate grant
Background and Justification: The Jacriminal justice funding to state and loc local government with critical funding programs. JAG awards are based or population and violent crime. The JAG jurisdictions from DOJ.	al juriso g nece n a sta	dictions. It provessary to supported to the supported to	vide: port a wi	s st : a ith	tates and units of broad range of factors including
Attachments: 1) GAM 1 for Grant Award 15PBJA-22	-GG-02	2127-JAGX	2 200 100 1	===	
Recommended by: Management	Øirect	Ache li	J		4/24/2025 Date
Approved by: Assistant C	R Dunty	Administrator	····		-/ /29/ 05 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)					

NET FISCAL IMPACT	*				
#ADDITIONAL FTE					
POSITIONS (CUMULATIVE)					
Is Item Included In Current B Is this item using Federal Fu Is this item using State Fund	nds? Ye	s X No s X No s No			
Budget Account Exp No: Fu Rev No: Fu				it <u>7727</u> Objec it <u>7727</u> RevS	
B. Recommended Sources of Fund: 1507-Criminal of Unit: 7727-JAG DOJ Grant: JAG DOJ FY23	ustice Grant FY23 15PB	Fund 14 JA22GG0212	I36-Justice So 7JAGX	ervices Grant	Fund
*No additional fiscal imp from FY23 to FY25.	pact. This G	AM approved	reallocating t	he \$35,526.2	5 unspent
C. Departmental Fiscal Rev	ew:	Pe	Digitally signed by Mi DN: DC=org, DC=pbi Enterprise, OU=PSD =Marianela Diaz, E=1 Date: 2025.04.17 17:	cgov, OU= , OU≂Users, CN MDiaz@pbc.gov	
	III. REVIEW	COMMENTS	S :		
A. OFMB Fiscal and/or C	ontract Dev	and Contro	l Comments	: 10	
OFMB MO Alger	4/24/2029 M 4/24	5	Contract	Dev. & Cont	1/1/5 4/25/25 rol 6 4/25/25
B. Legal Sufficiency Assistant County Att	d 4-29-25 brney			V	

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

C.

Other Department Review

Department Director

ATTACHMENT 1

☐ Home	Active Funded Award (15PBJA-22-GG-02127-JAGX)	NDING ACTIVE				
(A) Entity Brofile	Awarded Entity Legal Name (PALM BI		s As: (BOARD OF COMMISS	ions)		(_Actions ~
Entity Profile	Current Entity Legal Name (COUNTY	OF PALM BEACH) Doing Business	As: ()			
28 Entity Users	Solicitation Title: BJA FY 22 I	Edward Byrne Memorial Justice Assistanc	e Grant Program - LSolicitation Cat	egory: Category 2 - App	licants with eligible allocation amounts of \$25,00	00 or more
② Entity Documents	Project Title: Criminal ju	stice Initiatives	Federal Award	Amount \$131,548.00		
Entity Documents	Project Period: 10/1/21 - 9	3/30/25	Program Office	: BJA		
	Managing Office: OJP		UEI:	XL2DNFMPCR44		
	DO) Grant Manager: Tarasa Na	olitano	TIN:	*****0785		
Avvards	Grant Award Administrator: Dawn Cav	eness				
☐ Monitoring	FAW Case ID FAW-1708:	77				
					Case details	
	Assignments				Last updated by	
				To the state of th	Queue	***
	Task	As	signed to		processor(GenerateQuarterlyFFRProces (22d ago)	sur)
	5mo Programmatic (Active)	Fu	nded Awards	Begin	Created by	
	,				Agent(System-Queue-ServiceLevel.Proce	essEvent)
				Ì	(2y ago)	
				in the state of th	DOI Grant Manager	
					DOJ Grant Manager Tarasa Napolitano	
	✓ FUNDED AWARD INITIAL SE	ACTIVE INITIATE C	PROGRAMMATIC C	FINANCIAL C	Phone	
				Tabate C	202-598-7372	
		UFMS HANDOFF				
					Email	
	Funded Award Information			·	Tarasa.Napolitano@usdoJ.gov	
				_	Participants (7)	,
	Award Package Award Cone	<u>va</u>	Attachments Performance M		, ,,	
	Funding Balance and Availabilit	y Federal Financial Report (FFR)	Grant Award Modification (GA	M)	Dawn Caveness	E3 %
	Closeout				Grant Award Administrator	
	Post-award Initial Award				Felicia Landerman	"
	POSE-SYSTEM INICIAL PROPRIE				Entity Administrator	8 %
				1 2 Next		
	Name C	ategory Comment	Uploaded By	Date	D John Port Financial Manager	
	Updated PalmBCBudget	Updated Pal	mBCBudget		-	
Tenisina December	Detail Worksheet FY22 DOj	Detail Works	heet FY22	11/26/24	Tarasa Napolitano GrantManag	er 🖽 🐍
Training Resources	Final Submitted 08-04- Fi 2022_A-460666 \$281\$29	le DOJ Final Sul 04-2022_A-4		12:40 PM	-	
Privacy Policy	\$28002\$29.xlsm	(002)		Note that the state of the stat	Katherine Shover	हता है इंद्रा
	the state of the s		entropy of the second second		mr · = YM	Per 1 (1)

Budget Detai										
(DO) Financial Guide, Section	erence costs which is defined broadly t 3.10)	to include meetings, r	etreats, sem	inars, sympo	osia, and tr	aining activ	ities? - Y/	N		
A. Personnel Name	Position		Merce:		Comp	utation		···		
List each name, if known.	List each position, if known.	Sh	ow annual sale	ory rate & amol	-		roject for e	ach name/positio	n,	
		Salary	Rate	Time W		Percenta		Total Cost	Non-Federal	Federal
				year		Time	7		Contribution	Request
			· .	ļ			Total(s)	\$0 \$0	\$0	\$0 \$0
Narrative							70(0)(3)	20	20	- JU
	Name ed position receiving fringe benefits.	Base						Total Cost \$0 \$0	Non-Federal Contribution \$0	Federal Request \$0 \$0
C. Travel Purpose of Travel Indicate the purpose of each trip or type of trip (troining, advisory group meeting)	Location Indicate the travel destination.	Type of Expense Ladging, Meols, Etc.	Basis Per day, mile, trip, Etc.	1	<i>Compute ti</i>	ne cost of each		utation ense X the number	er of people travelin	g.
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
			N/A					\$0		\$0
Narrative				.L	L		Total(s)	\$0	\$0	\$0
	Item im of equipment that will be purchased	# of Re		ute the cost (e.g				rased × the cost p Total Cost	er item) Non-Federal Contribution	Federal Request \$0
Alamana tan			12		22.5		Total(s)	\$0	\$0	\$0

5. Supplies								
	apply Items items to be purchased with grant funds.	Describe the item and the	compute the co		omputation ation: The number o	f each item to be pur	chased X the cost per	item.
	- - ,	# of Items		Unit C		Total Cost	Non-Federal Contribution	Federal
						\$0	CONTRIBUTION	Request \$0
Narrative					Tota	l(s) \$0	\$0	\$0
			······································				***************************************	
F. Construction					NGSK ANDREAS FOR THE SERVICE	97.77 °C		
Purpose Praylde the purpose of the	Description of Work			C	Computation		······································	
construction	Oescribe the construction project(s)	Comput	e the costs (e.g.,	, the number	of each item to be	purchased X the cost		Professor
		# of Items		Cos	t	Total Cast	Non-Federal Contribution	Federal Request
					To be	\$0	1	\$0
Narrative					Tota	(s) \$0	\$0	\$0
G. Subawards (Subgrants)				27.200				
Descri	ption	Purpose		ļ	Consultant			
					is the suboword f consultant? If yes, the section below	use		
Provide a description of the activities	s to be carried out by subreciplents.	Describe the purpose of the subawar	rd (subgrant)		exploin associat travel expense	ed		
					included in the co	est.		
						Total Cost	Non-federal Contribution	Federal Request
Adult Case Management Services - I	Ríviera Beach Provide	e Adult Ex-Offender Reentry services throu for individuals returning to Palm Be		E initiative	No	\$96,022	\$0	\$96,022
Consultant Travel (if necessa	ry)				Tot	al(s) \$96,022	\$0	\$96,022
Purpose of Travel Indicate the purpose of each trip or	Location	Type of Expense	1			Computatio	n	
type of trip (training, advisory group meeting)	Indicate the travel destination.	Hotel, airfare, per dien	π	Com	pute the cost of ea	th type of expense X t	he number of people	traveling.
				Cost	l or	of Total Cost	Non-Federal Contribution	Federal Request
						So		\$0
Narrative				•		otal \$0	\$0	\$0
1. P. M. Martin, Phys. Lett. 11 (1997)	provide Adult Ex-Offender Reentry s	ervices through the RESTORE Initia	ative for indiv	/iduals ret	urning to Palm I	Seach County thro	ough the Local Jai	l, the Florida
Department of Corrections of Case Management services with develop individual service plant of action; provide or brought and faction; provide or brought Rate: Services October 4, 2022.	r Federal Correctional Institutions. will include: the provision of a caseloa ans for all clients that identify barrier. ker services to holistically address cli are reimbursed on a unit rate approv vices Unit Cost = Unit rates as approv	id of active participants; provide in is to successful reentry; document ients' needs. red by the Palm Beach County Boa	ndividual case all client con	e manager tact and p	nent sessions w rogress, includi	ith all clients at re ng time and date,	gularly scheduled type of contact, o	d intervals; outcome and

	tion	Purpose		Consultan	17					
Provide a description of the product contract and an estimate of the cost cornate free and open competition in istification must be provided for sole the Simplified Acquisition Thres	s. Applicants are encouraged to awarding contracts. A separate source procurements in excess of	Describe the purpose of t	the contract	is the suboward consultant? if ye the section belo explain associa travel expens included in the	s, use w to ited es					
					Tot	milaer (Non-Federal Contribution	Federal Request		
	· · · · · · · · · · · · · · · · · · ·							\$0		
onsultant Travel (if necessar)	<i>)</i>	1 1/25 445 444 11 1 1 1 144 4 4		To	tal(s)	\$0	\$0	\$0		
Purpose of Travel dicate the purpose of each trip or	Location	Type of Exp	ense		Com	Computation				
type of trip (training, advisory group meeting)	indicate the travel destina	tion. Hotel, airfare, pe	r diem Cor	npute the cost of e	ach type of ex	pense X the n	umber of people to	raveling.		
			Cost		of Tot	tal Cost	Non-Federal Contribution	Federal Request		
						\$0		\$0		
rrotive					Total	\$0	\$0	50		
Other Costs	in a final and in the first of	T	· · · · · · · · · · · · · · · · · · ·							
Descri list and describe items that will be reproduction, telephone, janito investigative or co	paid with grants funds (e.g. rent, orial, or security services, and			putation is for computation				·g		
		Quantity Ba	sis Cost	Length of	Time To	otal Cost	Non-Federal Contribution	Federal Request		
	· , .			<u></u>		\$0		\$0		
larrative	47 : 1 				otal(s)	\$0	\$0	\$0		

	Description sproved rate is and how it is applie	d.	Compute the indirect costs for i		e program wh	hich allow suc	Non-Federal	1		
	Description				n ee program wh			Federa		
	Description	d.		hose portions of th	n ee program wh	hich allow suc	Non-Federal	Federal Request		

Budget Detai										
oes this budget contain conf POJ Financial Guide, Section	erence costs which is defined brod	odly to include meetings, re	treats, sem	inars, sympo	sia, and ti	roining activi	ties? - Y/	٧		
Personnel							19.19.P			
Name List each name, if known.	Position List each position, if known.	rh-			-	utation				
	Die eddy position, y whown.	3.00	Show annual salary rate & amount of time devoted to the Time Worked Porton					nch name/positio		
		Solary	Rate	(# of hours, day	ys, months,	Percentag Time		Total Cast	Non-Federal Contribution	Federal Request
			·····	,	, 			\$0		\$0
		1.5,47,574444		1		1	Total(s)	\$0	\$0	\$0
arrative									T	<u> </u>
Fringe Benefits										······
	Name					Computation	n		······	
List each grant-suppor	ted position receiving fringe benefits.			ļ	Show th	e basis for comp	outation.			
		Base			Ra	te		Total Cost	Nan-Federal Contribution	Federal Request
								\$0		\$0
arrative							Total(s)	\$0	\$0	\$0
. Travel		December 1								
Purpose of Travel	Location	Type of Expense	Basis				Comp	utation		
ndicate the purpose of each trip or type of trip (troining, advisory group meeting)	Indicate the travel destination	Lodging, Meals, Etc.	Per day, mile, trip, Etc.		Compute t	the cost of each	type of ехр	ense X the numb	er of people travelin	ìg.
			:	Cost	Quantity	# of Staff	# of	Yotal Cost	Non-Federal	Federal
							inps		CONTROCTOR	Request
			N/A		ļ		Tat-#-1	\$0		\$0
larrative			<u> </u>				rotai(s)	<u> </u>	\$0	\$0
indicate the purpose of each trip or type of trip (training, advisory	Location	Type of Expense Lodging, Meals, Etc.	Per day, mile,		Compute t	the cost of each	type of exp	ense X the numb		Fe
							Total(s)	\$0	\$0	\$0
arrative							- v-ur(a)	70	1 30	1 30
). Equipment										
List and describe each it	Item					Computation	on			
A BARANA	tern of equipment that will be purchased		Comp	ute the cost (e.	,, the numb	er of each item	to be purel	ased X the cost p	er Item)	
<u></u>	tem of equipment that will be purchased	# of Ites		ute the cost (e.		er of each item	to be purci	Total Cost	Non-Federal Contribution	Federal Request
	tem of equipment that will be purchased	# of Ites		ute the cost (e.			to be purci	Total Cost	Non-Federal	Request
	tem of equipment that will be purchased	# of her		ute the cost (e.		t Cost	to be purci	r	Non-Federal	1

per kem.	Request	\$0	A Federal Request So So So So		ol Federal m Request	\vdash		pole traveling.	al Federal on Request	SS DS	
	Contribution	0\$	t per item) Non-Federal Contribution \$50		Non-Federal	os		the number of peo	t Non-Federal Contribution	os .	
och item to be pu	Total Cost		rehozed X the cost p Total Cost 50 50 51 50 51 50 51 51	.	Total Cost	0\$ (5	Ę	type of expense X	Total Cost	S S	
Computation ration: The number of e		Total(s)	Computation or of each item to be purch est Total(s)	Consultant? Consultant? is the subaward for a consultant? If yes, use wuldin seaschort of	travel expenses icluded in the cost.	Total(s)		Compute the cost of each type of expense X the	Duration # of or Distance Staff	Total	
Com	Unit Cost		Com Com Cost		5			Comput	Cost Di		
the compute the c			Compute the costs (e.g., the number of each item to be purchased X the cast per item) Cost Total Cost Cont	oward (subgrant)			asus	r dlem			
	# of Items		# of frems	Purpose Describe the purpose of the sub		The state of the s	Type of Expense	Hotel, airfare, per dien			
Supply Items Provide a list of the types of items to be purchased with grant funds.			Description of Work Describe the construction project(s)	n r e carried out by subrecipients.		17777111/2	Location	Indicate the travel destination.			
E. Supplies Supply Provide a list of the types of items		Narrotive	F. Construction Purpose Provide the purpose of the construction	G. Subawards (Subgrants) Description Provide a description of the activities to be			Consultant Travel (if necessory) Purpose of Travel	type of trip (training, advisory group meeting)			Narrative

	rtion	Pui	Consu	Consultant?						
Provide a description of the produc contract and an estimate of the cost promate free and open competition is justification must be provided for sale the Simplified Acquisition Thre	s. Applicants are encouraged to n owarding contracts. A separate source procurements in excess of	Describe the purp	is the subm consultant? the section explain as travel ex included in	If yes, use below to sociated penses						
							Total Cost	Non-Federal Contribution	Federal Request	
									\$0	
Consultant Travel (if necessar	y)					Total(s)	\$0	\$0	\$0	
Purpose of Travel Indicate the purpose of each trip or	Location	Туре	of Expense				Computation			
type of trip (training, advisory group meeting)	indicate the travel destina	tion. Hotel, dir	rfare, per diem		ompute the cast	of each type	of expense X the	raveling.		
				Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Cantribution	Federal Request	
							\$0		\$0	
larrative					Total	\$0	\$0	\$0		
Other Costs Descrip					nputation			·		
List and describe Items that will be reproduction, telephone, janita investigative or co	rial, or security services, and ofidential funds).	Show the basis for computation								
		Quantity	Basis	Cast	Length	of Time	Total Cost	Non-Federal Contribution	Federal Request	
							So		\$0	
Varrative		<u> </u>	····			Total(s)	\$0	\$0	\$0	
Describe what the op,	Description proved rate is and how it is applied.		Compute	the indirect costs fo	Computar those portions o		m which allow suc			
Describe what the op,	Description proved rate is and how it is applied.		Compute				Total Cost	h costs. Non-Federal Contribution	Request	
Describe what the op	Description proved rate is and how it is applied.		Compute		those portions o		Total Cost	Non-Federal	Federal Request S0	

Budget Detail										
100) Financial Guide, Section 3	rence costs which is defined broadly to .10)	include meetings, r	etreats, sem	inars, symp	osia, and tr	aining activi	ities? - Y/	'N		
A. Personnel Name	Position				Comm	utation				
List each name, if known.	List each position, if known.	Sh	ow annual said	ry rate & amo	-		roject for e	ach name/positio	n .	
		Salary	Rate	(# of hours, de	Time Worked Percentage of (6 of hours, days, months, years)			Total Cost	Non-Federal Contribution	Federal Request
				<u> </u>			Total(s)	\$0 \$0	\$0	\$0 \$0
B. Fringe Benefits List each gront-supporte Narrative	Name d position receiving fringe benefits.	Base						SO \$0	Non-Federal Contribution \$0	Federal Request \$0 \$0
C. Travel Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory	Location Indicate the travel destination.	Type of Expense Lodging, Meals, Etc.	Basis Per day, mile, trip, fitc.		Compute ti	ne cost of each	·	utation	r of people travelin	g.
group meeting)			1							T _ ,
		1	·· . T	Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
			N/A					\$0		\$0
Narrative			,				Total(s)	\$0	\$0	\$0
D. Equipment Ust and describe each iter	Item of equipment that will be purchased	# of Ite	Compi	ite the cost (e.				rosed X the cost p Total Cost	er (tem) Non-Federal Contribution	Federal Request
		. Aleksiya		1			Total(s)	\$0	\$0	\$0

									-	
E. Supplies Su	pply Items	Na saryew		400004486		omputatio				
Provide a list of the types of it	tems to be purchased with gront fur	rds.	Describe the item and the	e compute the cos	ts. Compute	ition: The nun	nber of each	item to be purch	ased X the cost per	item.
			# of Items		Unit C	ost		Total Cost	Non-Federal Contribution	Federal Request
								\$0	_	\$0
Narrative					·		Total(s)	\$0	\$0	\$0
F. Construction Purpose Provide the purpose of the construction Narrative	Description of Wor		***************************************	ute the costs (e.g.,	(t		ssed X the cost po Total Cost \$0 \$0	Non-Federal Contribution	Federal Request \$0 \$0
G. Subowards (Subgrants) Descri	ption		Purpose			Consul	tant?			
Provide a description of the activities			Describe the purpose of the subow	ard (subgrapt)		is the subav consultant? the section explain as: travel ex included in	vard for a If yes, use below to sociated penses			
								Total Cost	Non-Federal Contribution	Federal Request
Adult Case Management Services - R	liviera Beach	Provide Adı	ult Ex-Offender Reentry services thr for individuals returning to Palm		E Initiative			\$35,526	- Constitution	\$35,526
Consultant Travel (if necessar	ry)						Total(s)	\$35,526	\$0	\$35,526
Purpose of Travel Indicate the purpose of each trip or	Location	· · · · · · · · · · · · · · · · · · ·	Type of Expens	se			:	Computation		
type of trip (training, advisory group meeting)	Indicate the travel destina	rtion.	Hotel, alrfare, per di	em	Con		of each type	of expense X the	number of people	traveling.
					Cost	Duration ar Distance	# of Staff	Total Cost	Non-Federal Contribution	Federol Request
								\$0		\$0
Narrative							Total	\$0	\$0	\$0
The City of Riviera Beach will Department of Corrections or Case Management services w develop individual service pla plan of action; provide or bro Contract/Unit Rate: Services Adult Case Management Servi	· Federal Correctional Institut will include: the provision of a uns for all clients that identify ker services to holistically ad are reimbursed on a unit rate	caseload of barriers to dress client approved l	f active participants; provide successful reentry; documer 's' needs. by the Palm Beach County Bo	individual case nt all client con	e manager tact and p	nent sessio rogress, in	ins with al	clients at reg ne and date, t	ularly scheduled ype of contact, d	d intervals;

			Federal Request	\$0	S		raveling.	Federal Request	S.	\$\$			Federal Request	0\$	0\$	Federal Request 50 \$0
			Non-Federal Contribution		\$0		Compute the cast of each type of expense X the number of people traveling.	Non-Federal Contribution		\$0			Non-Federal Contribution		0\$	Non-Federal Contribution \$9
			Total Cost		\$	Computation	s of expense X the	Total Cost	05	Şa			Total Cost	88		Top 1
	Consultant?	is the suboward for o consultant? If yes, use the section below to explain associated travel expenses included in the cost.			Total(s)		cost of each type	ion # of Staff		Total	n	putation	Length of Time		Total(s)	utation ans of the program fre Total(s)
	8	is the s consult the se explo tres includ					Compute the	Cost Ourotion			Computation Show the basis for comp	the basis for com				Compute for those portions in direct Cost Rate
	Purpose	Describe the purpose of the contract				Type of Expense	Hotel, airfare, per diem		TO THE PARTY OF TH		WORS	Maus	Quantity Basis Cost	Average de la constant de la constan		Computation Computation Computation Space Indirect Cost Rate
H. Proturement Contracts	Description	Provide a description of the products or services to be procured by contract and on estimate of the costs. Applicants ore 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).					type of trip (training, advisory indicate the travel destination. group meeting)			Narrative	I. Other Costs Description List and describe items frost will be position reproduction, telephone, jointorine, or security services, and	investigative or confidential funds).	One		Mercetion	Admostive Describe what the approved rate is and how it is applied. Marrative

oes this hudget coatain conf									
OF Financial Contain Confi	erence costs which is defined broadly	to include meetings, re	etreats, sem	iπars, symposia, and	troining activi	ties? - Y/I	N		
O) Financial Guide, Section Personnel	3.10}						<u></u>		
Name List each name, if known.	Position Ust each position, if known.		OH PRO		putation		L		
Est cour nume, y known.	usi each position, if known.	ji jehawi sas	ow annual spic	ry rate & amount of time	Percenta		ach name/positio		Federal
		Salary	Rate	(N of hours, days, months years)	Time		Total Cost	Nan-Federal Contribution	Request
							so		50
larrative						Total(s)	\$0	\$0	\$0
							·····		
I. Fringe Benefits	Name				Computatio	n			
List each grant-suppor	ted position receiving fringe benefits.			Show	the basis for com				
		Base			Rate	zie e	Total Cost	Non-Federal Contribution	Federal Request
			***************************************				\$0		\$0
larrative	2000 100 100 100 100 100 100 100 100 100		<u></u>			Total(s)	\$0	\$0	\$0
	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		····			·		***************************************
Travel Purpose of Travel	Location	Type of Expense	Basis	T		Coms	outation		
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory	Location	Type of Expense	Basis Per doy, mile trip, Etc.		te the cost of each		outation	er of people travelin	
Purpose of Travel Indicate the purpose of each trip or	Location	Type of Expense	Per day, mile		il bestesi			***************************************	rg. Federal
Purpose of Travel indicate the purpose of each trip or type of trip (training, advisory	Location Indicate the travel destination.	Type of Expense	Per day, mile	Compu	il bestesi	type of exp	pense X the numbe	er of people travelin	ng.
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 Lodging, Meals, Etc.	Per day, mile trip, Etc.	Cost Quant	ty # of Staff	type of exp	Total Cost	er of people travelin	rederal Request
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	Per day, mile trip, Etc.	Compu	ty # of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request \$0
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 Lodging, Meals, Etc.	Per day, mile trip, Etc.	Cost Quant	ty # of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request \$0
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory	Location Indicate the travel destination.	Type of Expense Lodging, Meals, Etc.	Per day, mile trip, Etc.	Cost Quant	ty # of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request \$0
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting) Narrative D. Equipment	Location Indicate the travel destination.	Type of Expense Lodging, Meals, Etc.	Per day, mile trip, Etc.	Cost Quant	Computati	# of Trips Total(s)	Total Cost So SO	Non-Federal Contribution \$0	Federal Request \$0
Purpose of Travel indicate the purpose of each trip or type of trip (training, advisory group meeting) Narrative D. Equipment	Location Indicate the travel destination.	Type of Expense Lodging, Meals, Etc.	Per day, mile trip, Etc.	Cost Quant	Computati	# of Trips Total(s)	Total Cost So SO	Non-Federal Contribution \$0	Federal Request \$0
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting) Narrative D. Equipment	Location Indicate the travel destination.	Type of Expense Lodging, Meals, Etc.	Per day, mile trip, Etc.	Cost Quant	Computati	# of Trips Total(s)	Total Cost \$0 \$0	Non-Federal Solution Non-Federal Contribution \$0 Per item;	Federal Request \$0 \$0
Purpose of Travel Indicate the purpose of each trip of Type of trip (training, advisory group meeting) Varrative	Indicate the travel destination. Indicate the travel destination.	Type of Expense Lodging, Meals, Etc.	Per day, mile trip, Etc.	Cost Quant	Computation of continuous continu	# of Trips Total(s)	Total Cost So So So Total Cost Analysis of the cost of the co	Non-Federal Solution Non-Federal Contribution \$0 Per item;	Federal Request

. Supplies							
30	pply Items		(omputation	100		
	tems to be purchased with grant funds.	Describe the item and the compute				hased X the cost per	item. Federal
		# of Items	Unit C	ost	Total Cost	Contribution	Request
	<u> </u>			Total	\$0 5) \$0	\$0	\$0 \$0
larrative							
. Construction Purpose Provide the purpose of the	Description of Work Describe the construction project(s)	Compute the cos		Computation	urchased X the cost _I	per item)	
construction			to leigh the numbe			Total Cort Non-Federal	
construction		# of Items	Cos		Total Cost	Non-Federal Contribution	Federal Request
				ŧŧ	ŝo	Contribution	Request \$0
		# of items			ŝo		Request
Jarrotive:				ŧŧ	ŝo	Contribution	Request \$0
Varrotiv∈	otton		Cos	ŧŧ	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Contribution	Request \$0
Sa Subawards (Subgrants) Descri	ption to be carried out by subrecipients.	Purpose	Cos	Consultant? Is the subaward for consultant? If yes, the section below explain associate travel expenses:	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Contribution	\$0 \$0 \$0
S. Subawards (Subgrants) Descri	ption to be carried out by subrecipients.	Purpose Describe the purpose of the suboward (subgr	Cos	Consultant? Is the subaward for consultant? If yes, the section below explain associate travel expenses:	so s	SO SO Non-Federal	\$0 \$0
S. Subawards (Subgrants) Description of the activities Consultant Travel (If necessa	otion to be carried out by subrecipients.	Purpose Describe the purpose of the suboward (subgr	Cos	Consultant? Is the subaward for consultant? If yes, the section below explain associate travel expenses:		Non-Federal Contribution \$0	\$0 \$0 \$0 Federal Request
Subawords (Subgrants) Descri	otion to be carried out by subrecipients.	Purpose Describe the purpose of the suboward (subgr	Cos cont)	Consultant? Is the subaward for consultant? If yes, the section below explain associate travel expenses included in the control of the contr	so s	Non-Federal Contribution	Federal Request \$0 \$0
iarrative Subawards (Subgrants) Description of the activities of	to be carried out by subrecipients.	Purpose Describe the purpose of the suboward (subgr	Cos cont)	Consultant? Is the subaward for consultant? If yes, the section below explain especiates to ravel expectate to the consultant of the cons	a see o Computation Computation type of expense X ti	Non-Federal Contribution \$0 \$ tenumber of people	Federal Request \$0 \$0
S. Subawards (Subgrants) Descri Provide a description of the activities Consultant Travel (if necessa Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting)	to be carried out by subrecipients. ry) Location Indicate the travel destination.	Purpose Describe the purpose of the suboward (subgr Type of Expense Hotel, cirfare, per diem	Cos Cos	Consultant? Is the suboward for consultant? If yes, the section below explain associate travel expenses included in the consultant in the	a see o Computation Computation type of expense X ti	Non-Federal Contribution \$0 \$ 1	Federal Request \$0 \$0 troveling.

Provide a description of the products or se contract and an estimate of the costs. Appi promote free and open competition in warm justification must be provided for sole source the Simplified Acquisition Threshold (c	rvices to be procured by			Consultan	t?			
	licants are encouraged to ling contracts. A separate procurements in excess of	Describe the purpose of the con	roct	is the subaward consultant? If yes the section belo explain associo travel expens included in the d	s, use ow to oted			
					7	otal Cost	Non-Federal Contribution	Federal Request
								\$0
Consultant Travel (If necessary)				To	tal(s)	\$0	\$0	\$0
Purpose of Travel Indicate the purpose of each trip or	Location	Type of Expense			Cor	mputation		
type of trip (troining, advisory group meeting)	Indicate the travel destination.	Hotel, olrfarz, per diem	Corr	pute the cost of e	och type of	expense X the	number of people t	roveling.
			Cost		of toff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Narrative					Total	\$0	\$0	\$0
I. Other Costs Description								***
Uescription List and describe items that will be paid will reproduction, telephone, janitorial, or investigative or confidenti	security services, and			utation for computation				
		Quantity Basis	Cost	Length of Ti	ime 1	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Norrutive				То	tal(s)	\$0	\$0	\$0
J. Indirect Costs Descri Describe what the opproved t		Comput	e the indirect costs for the	Computation see portions of the	program w	which allow suc	costs.	
		Bose :	Indirect (Cost Rate	-	Total Cost	Non-Federal Contribution	Federal Request
	· · · · · · · · · · · · · · · · · · ·			To	otal(s)	\$0	\$0	\$0

		0.000 (20.00000000000	ii ii ii							
Budget Detai	I - Year 5									
Ooes this budget contain conf	erence costs which is defined broo	adly to include meetings, re	treats, sen	ninars, sympo:	sia. and tr	ainina activiti	es? - Y/	N I		
DOJ Financial Guide, Section	3.10)									
Name	Position				Compi	utation	<u></u>	<u> </u>		
List each name, if known.	List each position, if known.	Sho	w annuai sal			evated to the proj	ect for ec	och name/position	1.	
	44.	Sälary	Rate	Time Wo	z, manths,	Percentage Time	of	Total Cost	Non-Federal Contribution	Federal Request
				years	,			\$0		\$0
		[To	tal(s)	\$0	\$0	\$0
Norrative			· .							
B. Fringe Benefits			2007/08/08/07/14		ter tear ville			·······	·····	
	Name				(Computation				
List each grant-suppor	ted position receiving fringe benefits.				Show the	e basis for compu	itotion.			
		Base	7.		Roi	te		Total Cost	Non-Federal Contribution	Federal Possest
			<u></u>					\$0	CONCUDENCE	Request
				1		Te	otal(s)	\$0	\$0	\$0 \$0
Narrative								40	7 ~	1 70
C. Travel							(5) (5)		. :	
Purpose of Travel	Location	Type of Expense	Basis				Comp	utation		
Indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destination	todging, Meals, Etc.	Per day, mile trip, Etc.	e,	Campute ti	he cost of each ty	rpe of exp	ense X the numbe	er of people travelin	ng.
				Cost	Quantity		# of Trips	Total Cost	Non-Federal Contribution	Federal Request
			N/A					\$0		\$0
						7	otai(s)	\$0	\$0	\$0
Narrotive				··		:				
D. Equipment							95-55.			
12	Item					Computation				
Ust and describe each li	tem of equipment that will be purchased		· · · · · · · · · · · · · · · · · · ·	pute the cost (e.g	,, the numb	er of each item to	be pura	hased X the cost p		1 6.3.
		# of Ite	ms		Unit	Cost		Total Cost	Non-Federal Contribution	Federal Request
								\$0		So
7446455455							(at-1/-			
Narrative			<u> </u>				otal(s)	\$0	\$0	\$0

E. Supplies Si	upply Items			Computation				
	items to be purchased with grant funds.	Describe the item and the com	oute the costs. Comp	utation: The num	ber of eac	i ltem to be purch		
		# of Items	Unit	Cost		Total Cost	Non-Federal Contribution	Federal Request
	· · · · · · · · · · · · · · · · · · ·			. 1	「otal(s)	\$0 \$0	ėn	\$0
Narrotive					Otons)	şu j	\$0 [\$0
F. Construction								
Purpose Provide the purpose of the	Description of Work Describe the construction project(s)			Computation	n	·		
construction	:	# of Items	costs (e.g., the numb	ost	o se purch	Total Cast	Non-Federal	Federol
						\$0	Contribution	Request \$0
Narrative					Total(s)	\$0	\$0	\$0
Manotive								
G. Subawards (Subgrants) Descri	ption	Purpose		Consult	ant?		-	
Provide a description of the activities	s to be carried out by subreciplents.	Describe the purpose of the suboward (su	ibgrant)	Is the subaw consultant? If the section t explain assi travel exp included in t	f yes, use pelow to pciated enses			
						Total Cost	Non-Federal Contribution	Federal Request
ne esté d'anne est a		et messer e e			Total(s)	4		\$0
Consultant Travel (if necessar Purpose of Travel	T			·		\$0	\$0	\$0
Indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the trovel destination,	Type of Expense Hotel, diffare, per diem	Co	empute the cost o		Computation of expense X the	number of people t	raveling.
			Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Narrative					Total	\$0	\$0	\$0

H. Procurement Contracts		Purpose							· · · · · · · · · · · · · · · · · · ·	
Descrip	tion	Pu	rpose			Consul	tant?			
Provide a description of the produc contract and an estimate of the cost promate free and open competition in justification must be provided for sole the Simplified Acquisition Three	s. Applicants are encouraged to n awarding contracts. A separate source procurements in excess of	Describe the pur	pose of the con	tract		Is the subave consultant? the section explain as travel ex included in	if yes, use below to lociated penses			
								Total Cost	Non-Federal Contribution	Federal Request
										\$0
Consultant Travel (if necessar	ν)						Total(s)	\$0	\$0	\$0
Purpose of Travel	Location		of Expense					Computation		*************
indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destina	tion. Hotel, ali	rfare, per diem		Con	pute the cost	of each type	of expense X the	number oj people t	raveling,
					Cast	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federai Request
						Distance		\$o		\$0
						l	Total	\$0	\$0	\$0
Narrative	. 					******				
I. Other Costs Descrip					Com	ustation				· · · · · · · · · · · · · · · · · · ·
Ust and describe items that will be reproduction, telephone, janita	paid with grants funds (e.g. rent, rial, or security services, and			Shi		utation for computed	ion			
investigative or cor	fidential funds).	. 1947/48/98/XX							<u> </u>	<u> </u>
		Quantity	Basis	Co	st	Length	of Time	Total Cost	Non-Federal Contribution	Federal Request
								\$0		\$0
Narrative						*******	Total(s)	\$0	\$0	\$0
L. Indirect Costs										¹ garan w
	Description proved rate is and how it is applied.		Compu	te the indirect	costs for the	Computati		n which allow suc	h carte	
		Base			Indirect			Total Cost	Non-Federal Contribution	Federal Request
							• • • • • • • • • • • • • • • • • • • •	\$0		\$0
				1			Total(s)	\$0	\$0	\$0
Narrative								· · · · · · · · · · · · · · · · · · ·		

Budget Summary

Note: Any errors detected on this page should be fixed on the corresponding Budget Detail tab.

	Yeo	or 1	ł	ar 2 eded)	1	ar 3 eded)	i	ar 4 eded)	Į.	ar 5 eeded)	
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	\$85,526	\$0	\$0	\$0	\$0	\$6	\$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 cor			roadly to include	meetings, retrea	its. seminars, syn	nposia, and train	ing activities? - Y	7N		No	