From:	Rachael Andrews
То:	Williams, Antoinette L.
Cc:	Britney Hough
Subject:	Law Enforcement Training Grant Award
Date:	Tuesday, December 28, 2021 3:24:54 PM
Attachments:	LET Award Package Instructions.pdf
	Reimbursement Selection Form.pdf
	DESIGNATION OF GRANT OFFICIALS FORM.pdf
	LET Special Conditions FY22 final.pdf
	K76-8-012 AWARD.pdf
	K76-8-012 SAR.pdf
	dekalbpd let 22 approved budget.xlsx

Good afternoon,

Please find attached the necessary documents for your FY'22 Law Enforcement Training Grant Award. You will have 45 days from the delivery of this email to upload the required documents to the link provided <u>here</u>. Please note that when uploading the award packet to the provided Formstack link, you will select **Britney Hough** as your grant specialist. The following documents are attached:

- Award Packet Instructions
- Subgrant Award
- Special Conditions
- Subgrant Adjustment Request (SAR)
- Award Packet Forms
- Approved Budget (your original budget has been revised to show only what was approved).

Please note that a **Grant Award Acceptance Webinar** is currently being recorded and will be posted to the agency's YouTube channel. A subsequent email will be sent out later this week with the link which will provide a walk through on how to complete and upload your award packet.

In the meantime, should you have any questions or concerns, please let me know.

Sincerely, Rachael --Rachael Andrews Planning & Policy Development Specialist <u>Criminal Justice Coordinating Council</u> 104 Marietta St. NW, Suite 440, Atlanta, GA 30303 O: 404-657-1956 V: 404-654-1774

## **DESIGNATION OF GRANT OFFICIALS**

LEGAL NAME OF AGENCY:		
PROJECT TITLE:		
GRANT NUMBER:		
☐ Mr. ☐ Ms.		
PROJECT DIRECTOR NAME (Type or Prin	nt)	
Title and Agency		
Official Agency Mailing Address	City	Zip
Daytime Telephone Number	Fax Number	
E-Mail Address		
☐ Mr. ☐ Ms.		
FINANCIAL OFFICER (Type or Print)		
Title and Agency		
Official Agency Mailing Address	City	Zip
Daytime Telephone Number	Fax Number	
E-Mail Address		
☐ Mr. ☐ Ms.		
AUTHORIZED OFFICIAL (Type or Print)		
Title and Agency		
Official Agency Mailing Address	City	Zip
Daytime Telephone Number	Fax Number	
E-Mail Address		

#### OFFICE OF THE GOVERNOR CRIMINAL JUSTICE COORDINATING COUNCIL

#### SUBGRANT AWARD

SUBGRANTEE: DeKalb County Government

IMPLEMENTING	FEDERAL FUNDS:	\$	25,000
AGENCY: DeKalb County Government	MATCHING FUNDS:	\$	0
PROJECT NAME: Law Enforcement Training	TOTAL FUNDS:	\$	25,000
SUBGRANT NUMBER: K76-8-012	GRANT PERIOD:	01/	/01/22-12/30/22

This award is made under the State of Georgia Law Enforcement Training Program grant. The purpose is to provide a law enforcement training grant program for state and local law enforcement agencies. The program is designed to grant funds on a competitive basis to qualified state and local law enforcement agencies to support scenario-based, hands-on training for law enforcement officers in use of force or de-escalation. This grant program is subject to the administrative rules established by the Criminal Justice Coordinating Council.

The award is made in accordance with the plan set forth in the application of the Subgrantee and subject to any attached special conditions. The Subgrantee has agreed through the executed copy of certified assurances to be subject to all applicable rules, regulations, and conditions. This Subgrant shall become effective on the beginning date of the grant period, provided that within forty-five (45) days of the award execution date (below) the properly executed original of this "Subgrant Award" is returned to the Criminal Justice Coordinating Council.

AGENCY APPROVAL

#### SUBGRANTEE APPROVAL

Signature of Authorized Official

by that

Jay Neal, Director Criminal Justice Coordinating Council

Date Executed: 01/01/22

Typed Name & Title of Authorized Official

Date

58-6000814-001

Employer Tax Identification Number (EIN)

INTERNAL USE ONLY

TRANS CD	REFERENCE	ORDER	EFF DATE	TYPE	PAY DATE	INVOICE	E CONTRACT #
102	01	1	01/01/22	9		**	K76-8-012
OVERRIDE	ORGAN	CLASS		PROJEC	Γ	VEI	IDOR CODE
2	46	4		01			
THEM CODE	DECODID	ION 25 CH			EXDENCE ACC	m	
ITEM CODE	DESCRIPT	. 10N 25 CF	IAKACIERS		EXPENSE ACC	1	AMOUNT
1	Law Enfor	cement Tr	aining		624.41	\$	25 <b>,</b> 000

#### CRIMINAL JUSTICE COORDINATING COUNCIL SUBGRANT ADJUSTMENT REQUEST FEDERAL GRANT #

ADJ REQUEST #: 1

SUBGRANT #: K76-8-012

REQUEST D	ATE :
-----------	-------

#### SUBGRANTEE: DeKalb County Government

#### PROJECT NAME: DeKalb Co. PD LET

NATURE OF ADJUSTMENT:	REVISED BUDGET Go To SECTION I
Mark all that apply.	PROJECT PERIOD AND/OR EXTENSION. GO TO SECTION II
Mark arr chae appry.	PROJECT OFFICIALS/ADDRESSES Go To SECTION III
Adjustments of each type	PROJECT PERSONNEL Go To SECTION III
shown should be entered	GOALS AND OBJECTIVES GO TO SECTION III
in the section indicated.	OTHER

MUST BE JUSTIFIED AND EXPLAINED THOROUGHLY IN SECTION IV.

#### SECTION I. REQUEST FOR BUDGET CHANGE - JUSTIFY IN SECTION IV.

C	URREN	T APPROVED	REVISIONS +/-	REVISED BUDGET
PERSONNEL	\$	25,000		
EQUIPMENT		0		
SUPPLIES		0		
TRAVEL		0		
PRINTING		0		
OTHER		0		
TOTAL	\$	25,000		
Federal	L\$	25,000		
Match	\$	0		

#### SECTION II. REQUEST FOR CHANGE IN PROJECT PERIOD - JUSTIFY IN SECTION IV.

CURREN	IT GRANT	PERIOD	
Start	Date:	01/01/22	
End	Date:	12/30/22	

REQUESTED GRANT PERIOD End Date:

FOR EXTENSION, 
 Start Date:
 # OF MONTHS:

NOTE: The maximum extension request cannot exceed 12 months.

### SECTION III. REQUESTS FOR REVISIONS TO PROJECT OFFICIALS/ADDRESSES, PROJECT PERSONNEL, GOALS AND OBJECTIVES, AND/OR OTHER NON-BUDGET, NON-PERIOD CHANGES (JUSTIFY IN SECTION IV.)

PRINT DATE: 12/21/21	CRIMINAL JUSTICE COORDINATING COUNC	CIL PAGE 2 of 2
GMIS DOCUMENT 3A	SUBGRANT ADJUSTMENT REQUEST	
	FEDERAL GRANT #	ADJ REQUEST #: 1
	REQUEST DATE:	
SUBGRANTEE: DeKalb Cou	nty Government	SUBGRANT #: K76-8-012
PROJECT NAME: DeKalb	Co. PD LET	
SECTION IV. JUSTIFICA	TION OF ALL REQUESTED ADJUSTMENTS, REVIS	IONS, AND/OR CHANGES

All requested adjustments in Sections I, II & III (page 1) must be justified in detail in this Section. Include item costs, descriptions, equipment lists, detailed explanations, and any other information that would further clarify and support your request for adjustment. Attach additional pages as needed.

SUBMITTED BY:

Signature of Financial	Officer or Projec	ct Director	Title	e Da	ate
CJCC ROUTING AND APPROV	ALS: Reviewed By: Authorized By:	Approval	Disapproval 	Reviewer Signature	

#### CRIMINAL JUSTICE COORDINATING COUNCIL FY22 LAW ENFORCEMENT TRAINING GRANT PROGRAM SPECIAL CONDITIONS

1. Non-compliance with any of the special conditions contained within this document, may result in the termination of this.

2. The grantee agrees to comply with all applicable laws, regulations, policies, and guidance (including specific cost limits, prior approval and reporting requirements, where applicable) when using grant funds for the purpose of hosting or attending any conferences, meetings, trainings, and other events, including the provision of food and/or beverages, and costs of attendance at such events.

Initials

3. The grantee must collect, maintain, and submit data to CJCC that measures the performance and effectiveness of activities under this award in the manner, and within the timeframes specified by CJCC.

Initials \_\_\_\_\_

4. The grantee understands and agrees that CJCC may withhold award funds or may impose other related requirements if the grantee does not satisfactorily and promptly address outstanding issues from audits required by the State of Georgia, or other outstanding issues that arise in connection with audits, investigations, or reviews of CJCC awards.

Initials

5. The grantee agrees to comply with CJCC grant monitoring guidelines, protocols, and procedures, and to cooperate with CJCC on all grant monitoring requests, including requests related to desk reviews and/or site visits. The recipient agrees to provide to CJCC all documentation necessary to complete monitoring tasks. Further, the grantee agrees to abide by reasonable deadlines set by CJCC for providing requested documents. Failure to cooperate with CJCC's grant monitoring activities may result in sanctions affecting the grantee's grant awards, including, but not limited to: withholdings and/or other restrictions, designation of the grantee as a High Risk Grantee, or termination of an award(s).

Initials \_\_\_\_\_

6. The recipient agrees to cooperate with any assessments, evaluation efforts, or information or data collection requests, including, but not limited to, the provision of any information required for the assessment or evaluation of any activities within this project.

Initials

7. The grantee agrees to comply with any additional requirements that may be imposed by CJCC during the during the period of performance for this award if the grantee is designated as a "High Risk Grantee."

Initials \_\_\_\_\_

8. The grantee agrees to inform CJCC at least 45 days prior to any training, conference, or meeting for prior approval when using grant funding.

Initials \_\_\_\_\_

 The recipient shall transmit to CJCC copies of all official award-related press releases at least fifteen (15) working days prior to public release. Advance notice permits time for coordination of release of information by CJCC where appropriate and to respond to press or public inquiries.

Initials \_\_\_\_\_

10. Award recipients must provide to CJCC, using the Designation of Grant Official Form, the Point of Contact (POC), Financial Point of Contact (FPOC), and Authorized Representative contact information, including telephone number and e-mail address. If any information or has changes during the award period, a Subgrant Adjustment Request (SAR) must be submitted in writing to document changes.

Initials \_\_\_\_\_

11. The grantee agrees to track, account for, and report on all funds from this award separately from all other funds. Accordingly, the accounting systems of the grantee must ensure that funds from this award are not comingled with funds from any other source. The grantee further agrees that all personnel whose activities are to be charged to the award will maintain timesheets to document hours worked for activities related to this award and non-award related activities.

Initials \_\_\_\_\_

12. All grantees must have written policies and procedures which govern the fiscal management of grant funds.

Initials \_\_\_\_\_

13. The grantee certifies that 1) title to all equipment and/or supplies purchased with funds under this grant award shall vest in the agency that purchased the property; 2) equipment and/or supplies will be maintained in accordance with established local or state procedures as long as the equipment and/or supplies are used for program-related purposes; and 3) once the equipment is no longer utilized for its grant-funded purpose, the grantee will notify CJCC of the available equipment and determine its future use to assure it is utilized in furtherance of the goals and objectives of the grant program and the State of Georgia

Initials \_\_\_\_\_

14. The grantee certifies that grant funds will not be used to supplant funds that would otherwise be made available for grant-funded initiatives. Grant funds must be used to supplement existing funds for program activities and not replace funds appropriated for the same purpose. Potential supplanting will be the subject of application review, as well as pre-award review, post-award monitoring, and audit.

Initials \_\_\_\_\_

15. The grantee must submit Subgrant Adjustment Request #1 with the completed award package. The adjustment request must be accompanied by a detailed project budget that itemizes all projected expenditures. The project budget and summary will not be established, or officially approved, until the grantee receives a written approval notice from the CJCC. All project costs and project activities must coincide with the approved budget, summary, and implementation plan unless subsequent revisions are approved by the CJCC.

Initials \_\_\_\_\_

16. The grantee must submit subsequent requests to revise the budget, project summary, and project plan prior to implementing any substantial changes, but no later than 60 days prior to the end of the subgrant period.

Initials \_\_\_\_\_

17. All project costs not exclusively allocated within the approved budget must be requested and approved via the Subgrant Adjust Request (SAR) process prior to any funds being expended.

Initials \_\_\_\_\_

18. The grantee agrees to submit requests for reimbursement on either a monthly or quarterly basis, as selected by the grantee at the time of award. Subgrant Expenditure Reports are due 15 days after the end of the month (if reporting monthly) or 30 days after the end of the quarter (if reporting quarterly).

Initials \_\_\_\_\_

19. All contracts under this award should be competitively awarded unless circumstances preclude competition. The grantee agrees to comply with their governing body's procurement policies. Should the grantee not have procurement policies in place, the grantee agrees to comply with the procurement policies of the state which can be found at <a href="http://doas.ga.gov/state-purchasing/law-administrative-rules-and-policies">http://doas.ga.gov/state-purchasing/law-administrative-rules-and-policies</a>

Initials \_\_\_\_\_

20. The recipient understands and agrees that misuse of award funds may result in a range of penalties, including suspension or debarment from state grants, termination of this grant award coupled with recoupment of monies provided under an award, and civil and/or criminal penalties.

Initials \_\_\_\_\_

Please be advised that failure to comply with any of the Special Conditions will result in material noncompliance with the Subgrant Agreement, thus subjecting the Subgrant Agreement to possible termination by the CJCC.

Authorized Official Signature

Date

## CRIMINAL JUSTICE COORDINATING COUNCIL REIMBURSEMENT SELECTION FORM

SUBGRANT NUMBER:	
AGENCY NAME:	

## 1. SELECT A SCHEDULE FOR SUBMITTING REIMBURSEMENTS (CHECK ONE BOX)

- D MONTHLY (Requests for reimbursement are due 15 days after the end of the month)
- QUARTERLY (Requests for reimbursement are due 30 days after the end of the quarter)

## 2. SELECT A PROCESS FOR RECEIVING REIMBURSEMENT PAYMENTS (CHECK ONE BOX)

□ <u>ELECTRONIC FUNDS TRANSFER</u> (Reimbursements will be deposited into the bank account listed below. A voided check must be attached to ensure proper routing of funds.)

BANK NAME:
BANK ROUTING NUMBER:
AGENCY CONTACT TELEPHONE NUMBER:
AGENCY AUTHORIZED OFFICIAL NAME AND TITLE:
AGENCY AUTHORIZED OFFICIAL SIGNATURE:

□ **<u>CHECK</u>** (Reimbursements will be mailed in the form of a check to the address listed below)

MAILING ADDRESS:
CITY, STATE & ZIP:
ATTENTION:
AGENCY AUTHORIZED OFFICIAL SIGNATURE:

### For CJCC Use ONLY

CJCC Auditor:	
Phone Number:	
Grant Award Number:	
GBI Entry Initial/Date:	

# Budget Detail Worksheet

OMB Approval NO.: 1121-0329

Expires 11/30/2020

*For a 508 compliant, accessible version of the Budget Detail Worksheet, use the following link:* https://ojp.gov/funding/Apply/Forms/BudgetDetailWorksheet/BDW508.pdf

Worksheet Instructions

Note: This document requires macros be enabled to work properly. Please ensure that macros are enabled before entering any data. You may be able to enable macros by choosing the "Enable this content" option from the Security Warning Ribbon above.



the document as pictured here. If you elected to disable macros,

### **Budget Sheet Instructions**



Budget Detail - Year 3	
Budget Detail - Year 4	
Budget Detail - Year 5	
Budget Summary	
Example - Budget Det	ail Sheet
Definitions	
Budget Category Des	criptions:
Personnel	List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization. In the budget narrative, include a description of the responsibilities and duties of each position in relationship to fulfilling the project goals and objectives. All requested information must be included in the budget detail worksheet and budget narrative.
Fringe Benefits	Fringe benefits should be based on actual known costs or an approved negotiated rate by a Federal agency. If not based on an approved negotiated rate, list the composition of the fringe benefit package. Fringe benefits are for the personnel listed in the budget category (A) and only for the percentage of time devoted to the project. All requested information must be included in the budget detail worksheet and budget narrative.
Travel	Itemize travel expenses of staff personnel (e.g. staff to training, field interviews, advisory group meeting, etc.). Describe the purpose of each travel expenditure in reference to the project objectives. Show the basis of computation (e.g., six people to 3-day training at \$X airfare, \$X lodging, \$X subsistence). In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and the unit costs involved. Identify the location of travel, if known; or if unknown, indicate "location to be determined." Indicate whether applicant's formal written travel policy or the Federal Travel Regulations are followed. Note: Travel expenses for consultants should be included in the "Consultant Travel" data fields under the "Subawards (Subgrants)/Procurement Contracts" category.
Equipment	List non-expendable items that are to be purchased (Note: Organization's own capitalization policy for classification of equipment should be used). Expendable items should be included in the "Supplies" category. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technological advances. Rented or leased equipment costs should be listed in the "Contracts" data fields under the "Subawards (Subgrants)/Procurement Contracts" category. In the budget narrative, explain how the equipment is necessary for the success of the project, and describe the procurement method to be used. All requested information must be included in the budget detail worksheet and budget narrative.
Supplies	List items by type (office supplies, postage, training materials, copy paper, and expendable equipment items costing less than \$5,000, such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project. All requested information must be included in the budget detail worksheet and budget narrative.

## **Budget Sheet Instructions**

Construction	Provide a description of the construction project and an estimate of the costs. Minor repairs or renovations may be allowable and should be classified in the "Other" category. OJP does not currenly fund construction programs. Consult with the program office before budgeting funds in this category. All requested information must be included in the budget detail worksheet and budget narrative.
Subawards (Subgrants), Procurement Contracts, & Consultant Fees	Subawards (see "Subaward" definition at 2 CFR 200.92): Provide a description of the Federal award activities proposed to be carried out by any         subrecipient and an estimate of the cost (include the cost per subrecipient, to the extent known prior to application submission). For each subrecipient, enter the subrecipient entity name, if known. Please indicate any subaward information included under budget category G. Subawards         (Subgrants)/Procurement Contracts by including the label "(subaward)" with each subaward entry.         Procurement contracts (see "Contract" definition at 2 CFR 200.22): Provide a description of the product or service to be procured by contract and an estimate of the cost. Indicate whether the applicant's formal, written Procurement Policy or the Federal Acquisition Regulation is followed. Applicants are encouraged to promote free and open competition in awarding procurement contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold set in accordance with 41 U.S.C. 1908 (currently set at \$150,000).         Consultant Fees:       For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project. Consultant fees in excess of the DOJ grant-making component's maximum rate for an 8-hour day (currently \$650) require additional justification and prior approval from the respective DOJ grant-making component. All requested information must be included in the budget detail worksheet and budget narrative.
Other Costs	List items (e.g., rent, reproduction, telephone, janitorial or security services, and investigative or confidential funds) by type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, or provide a monthly rental cost and how many months to rent. All requested information must be included in the budget detail worksheet and budget narrative.

Indirect Costs	Indirect costs are allowed only if: a) the applicant has a current, federally approved indirect cost rate; or b) the applicant is eligible to use and elects to use
	the "de minimis" indirect cost rate described in 2 C.F.R. 200.414(f). (See paragraph D.1.b. in Appendix VII to Part 200—States and Local Government and
	Indian Tribe Indirect Cost Proposals for a description of entities that may not elect to use the "de minimis" rate.) An applicant with a current, federally
	approved indirect cost rate must attach a copy of the rate approval, (a fully-executed, negotiated agreement. If the applicant does not have an approved
	rate, one can be requested by contacting the applicant's cognizant Federal agency, which will review all documentation and approve a rate for the applicant
	organization, or if the applicant's accounting system permits, costs may be allocated in the direct costs categories. (Applicant Indian tribal governments, in
	particular, should review Appendix VII to Part 200—States and Local Government and Indian Tribe Indirect Cost Proposals regarding submission and
	documentation of indirect cost proposals.) Narrative for any indirect costs should clearly state which direct costs the indirect cost agreement is being
	applied to. All requested information must be included in the budget detail worksheet and budget narrative.
	In order to use the "de minimis" indirect rate an applicant would need to attach written documentation to the application that advises DOJ of both the
	applicant's eligibility (to use the "de minimis" rate) and its election. If the applicant elects the de minimis method, costs must be consistently charged as
	either indirect or direct costs, but may not be double charged or inconsistently charged as both. In addition, if this method is chosen then it must be used
	consistently for all federal awards until such time as the applicant entity chooses to negotiate a federally approved indirect cost rate.

Duduct Data	il Vour 1								
Budget Deta	ll - Year 1								
Deas this hudget contain con	foronce costs which is defined	l broadly to	includo montingo, rotros		ominare cumposia an	d training activities?	) ////		
(DOJ Financial Guide, Section	ference costs which is defined	i brodaly to	include meetings, retred	its, si	eminars, symposia, an	a training activities?	' - Y/N		
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.						
		S	alary Rat	e	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-support	ted position receiving fringe benefits				Show the	e basis for computation.			
			Base		Rat	e	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				Comp	outation		
Indicate the purpose of each trip or type of trip (training, advisory	Indicate the travel destination.	Lodging, Meals,	Per day, mile, trip,		Compute the	e cost of each	type of exp	pense X the numb	er of people traveli	na.
group meeting)		Etc.	Etc.		compute and		type of exp			
							# . f			Fadaval
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
										- 4
			N1/A					ćo		ćo.
			N/A					\$0		\$0
			N/A				Total(s)		\$0	\$0 <b>\$0</b>

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 purch	hased X the cost	per item)	
	# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	\$0	\$0	\$0
E. Supplies					
Supply Items		Computation			

Provide a list of the types oj	f 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 purc	hased X the cost	per item)	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		<b>Request</b> \$0						
			Total(s)	\$0 <b>\$0</b>	\$0	Request						

G. Subawards (Subgrants)									
Descrip	otion		Purpose		Consu	ltant?			
Provide a description of the act subrecipi		,	Describe the purpose of the subaward (subgrar	nt)	Is the subay consultant? the section explain as travel ex included in	If yes, use below to sociated spenses			
							Total Cost	Non-Federal Contribution	Federal Request
									\$0
						Total(s)	\$0	\$0	\$0
Consultant Travel (if necessar	y)								
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 destind	ition.	Hotel, airfare, per diem	Com	oute the cost o	of each type	e of expense X the	e 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

Descrip	tion		Purpose		Consu	ltant?			
Provide a description of the product contract and an estimate of the cost promote free and open competiti separate justification must be provid in excess of the Simplified Acquisition	s. Applicants are encouraged to on in awarding contracts. A ed for sole source procurements	Describe the purpose of the contract			Is the subay consultant? the section explain as travel ex included in	If yes, use below to sociated penses			
							Total Cost	Non-Federal Contribution	Federal Request
Blue to Gold, LLC		Re	eal World (Closed In-person) De-Escalation Trainin	g	Ye	S	\$25,000	\$0	\$25,000
						Total(s)	\$25,000	\$0	\$25 <i>,</i> 000
Consultant Travel (if necessar)	<i>v</i> )								
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 destinc	ition.	Hotel, airfare, per diem	Comp	oute the cost o	of each type	e 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								
The aim of the training is to te				ress situations. The tr	aining will also provi	de officers wit	th common sens	se, practical
tools that prevent situations f	from escalating and creating	elevated use of force encoun	ters.					
<i>I. Other Costs</i> Descrij	ntion			Comp	utation			
List and describe items that will be				comp				
reproduction, telephone, janito	orial, or security services, and			Show the basis	for computation			
investigative or co	nfidential funds).						_	
								<b>F</b> (1) (1)
		Quantity	Basis	Cost	Length of Time	Total Cost	Non-Federal Contribution	Federal Request
							contribution	nequest
						40		40
						\$0	4.0	\$0
					Total(s)	\$0	\$0	\$0
Narrative								
1								

Federal Request
\$0
\$0

	·/									
Budget Deta	ll - Year 2									
Does this budget contain con	ference costs which is defined	l broadly to	include meetings, retreat	ts, ser	minars, symposia, an	d training activities?	? - Y/N			
(DOJ Financial Guide, Section		·				<u> </u>	-			
A. Personnel	T									
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.							
		S	alary Rate	?	<b>Time Worked</b> (# 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-support	ed position receiving fringe benefits	i.			Show the	e basis for computation.				
			Base		Rat	e	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				Comp	outation		
Indicate the purpose of each trip or type of trip (training, advisory	Indicate the travel destination.	Lodging, Meals,	Per day, mile, trip,		Compute the	e cost of each	type of exp	pense X the numb	er of people traveli	na.
group meeting)		Etc.	Etc.		compute and		type of exp			
							# . f			Fadaval
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
										- 4
			N1/A					ćo		ćo.
			N/A					\$0		\$0
			N/A				Total(s)		\$0	\$0 <b>\$0</b>

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 purch	hased X the cost	per item)			
	# of Items Unit Cost Total Cost Non-Federal Contribution						
			\$0		\$0		
		Total(s)	<b>\$0</b>	\$0	\$0		
E. Supplies							
Supply Items		Computation					

Provide a list of the types of	items to be purchased with grant funds.	Describe the item and the c	ompute the costs. Computation: The number of ea	ch item to be pur	chased X the cost p	er 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 purc	hased 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)									
Descrip	otion		Purpose		Consu	ltant?			
Provide a description of the act subrecipi		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 necessar	y)								
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 destind	ition.	Hotel, airfare, per diem	Com	oute the cost o	of each type	e of expense X the	e 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

H. Procurement Contracts					1				
Descrip	tion		Purpose		Consu	tant?			
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).Describe the purpose of the contractIs 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 necessar	y)								
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 destinc	ition.	Hotel, airfare, per diem	Comp	oute the cost o	of each type	e 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										
<b>Descri</b> List and describe items that will be	paid with grants funds (e.g. rent,				utation					
reproduction, telephone, janita investigative or co	orial, or security services, and nfidential funds).	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		Computation							
Describe what the approved rate is and how it is applied.	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 Deta	il - Year 3										
Does this budget contain con (DOJ Financial Guide, Section	ference costs which is defined	broadly to	include meetings, retre	eats, se	eminars, symposia, an	d training activities?	- Y/N				
A. Personnel	<u>13.107</u>										
Name	Position		Computation								
List each name, if known.	List each position, if known.		Show ann	ual salaı	ry rate & amount of time d	evoted to the project for	each name/posit	ion.			
		S	alary Ro	ate	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											
2	Name					Computation					
List each grant-support	ed position receiving fringe benefits.					e basis for computation.					
			Base		Rat	e	Total Cost	Non-Federal Contribution	Federal Request		
							\$0		\$0		
						Total(s)	\$0	\$0	\$0		

Narrative										
C. Travel										
C. Travel Purpose of Travel	Location	Type of Expense	Basis				Comp	outation		
Purpose of Travel	Location	Type of Expense					Comp	utation		
Indicate the purpose of each trip		Lodging, Meals,	Per day,		Compute the	e cost of each			er of people traveli	'na.
Purpose of Travel	Location Indicate the travel destination.				Compute the	e cost of each			er of people traveli	ing.
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory		Lodging, Meals,	Per day, mile, trip,		Compute the	e cost of each	type of exp			
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory		Lodging, Meals,	Per day, mile, trip,	Cost		e cost of each <b># of Staff</b>	type of exp <b># of</b>		er of people traveli Non-Federal Contribution	Federal
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory		Lodging, Meals,	Per day, mile, trip,	Cost			type of exp	ense X the numb	Non-Federal	
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory		Lodging, Meals, Etc.	Per day, mile, trip, Etc.	Cost			type of exp <b># of</b>	ense X the numb	Non-Federal	Federal Request
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory		Lodging, Meals, Etc.	Per day, mile, trip,	Cost			type of exp <b># of</b>	ense X the numb	Non-Federal	Federal
Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory		Lodging, Meals, Etc.	Per day, mile, trip, Etc.	Cost			type of exp <b># of</b>	ense X the numb	Non-Federal	Federal Request

D. Equipment									
Item		Computation							
List and describe each item of equipment that will be purchased	Compute	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				
E. Supplies									
Supply Items		Computation							

Provide a list of the types of	items to be purchased with grant funds.	Describe the item and the c	ompute the costs. Computation: The number of ea	ch item to be pur	chased X the cost p	er 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			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 necessar	y)								
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 destind	ition.	Hotel, airfare, per diem	Compute the cost of each type of expense X the number of people trave				traveling.	
			·	Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
							\$0		\$0
						Total	\$0	\$0	\$0
Narrative									

## H. Procurement Contracts

H. Procurement Contracts									
Descrip	tion	Purpose			Consu	tant?			
Provide a description of the product contract and an estimate of the cost promote free and open competiti separate justification must be provid in excess of the Simplified Acquisition	s. Applicants are encouraged to ion in awarding contracts. A led for sole source procurements	Describe the purpose of the contract			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 necessar)	y)								
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				of each type	e 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									
<b>Descri</b> List and describe items that will be	paid with grants funds (e.g. rent,				utation				
reproduction, telephone, janita investigative or co	orial, or security services, and nfidential funds).	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		Computation			
Describe what the approved rate is and how it is applied.	Comput	e the indirect costs for those portions of the program	m which allow su	ch costs.	
	Base	Indirect Cost Rate	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	\$0	\$0	\$0
Narrative					

	·/ \/								
Budget Deta	11 - Year 4								
Does this budget contain con	ference costs which is defined	l broadly to	include meetings, retreat	ts, ser	minars, symposia, an	d training activities?	? - Y/N		
(DOJ Financial Guide, Section		·		-		-	-		
A. Personnel									
Name	Position				Comp	utation			
List each name, if known.	List each position, if known.		Show annual	salary	rate & amount of time d	evoted to the project for	each name/posit	ion.	
		S	alary Rate	2	<b>Time Worked</b> (# 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-support	ed position receiving fringe benefits	i.			Show the	e basis for computation.			
			Base		Rat	te	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				Comp	outation		
Indicate the purpose of each trip or type of trip (training, advisory	Indicate the travel destination.	Lodging, Meals,	Per day, mile, trip,		Compute the	e cost of each	type of exp	pense X the numb	er of people traveli	na.
group meeting)		Etc.	Etc.		compute and		type of exp			
							# . f			Fadaval
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
										- 4
			NI / A					ćo		ćo.
			N/A					\$0		\$0
			N/A				Total(s)		\$0	\$0 <b>\$0</b>

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 purch	hased X the cost	per item)	
	# of Items	Unit Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	<b>\$0</b>	\$0	\$0
E. Supplies					
Supply Items		Computation			

Provide a list of the types of	items to be purchased with grant funds.	Describe the item and the c	ompute the costs. Computation: The number of ea	ch item to be pur	chased X the cost p	er 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 purc	hased 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)									
Descrip	otion		Purpose		Consu	ltant?			
Provide a description of the act subrecipi		,	Describe the purpose of the subaward (subgrar	nt)	Is the subay consultant? the section explain as travel ex included in	If yes, use below to sociated spenses			
							Total Cost	Non-Federal Contribution	Federal Request
									\$0
						Total(s)	\$0	\$0	\$0
Consultant Travel (if necessar	y)								
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 destind	ition.	Hotel, airfare, per diem	Com	oute the cost o	of each type	e of expense X the	e 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

H. Procurement Contracts					1				
Descrip	tion		Purpose		Consu	tant?			
Provide a description of the product contract and an estimate of the cost promote free and open competit separate justification must be provid in excess of the Simplified Acquisition	s. Applicants are encouraged to ion in awarding contracts. A led for sole source procurements		Describe the purpose of the contract		Is the subar consultant? the section explain as travel ex included in	If yes, use below to sociated penses			
							Total Cost	Non-Federal Contribution	Federal Request
									\$0
						Total(s)	\$0	\$0	\$0
Consultant Travel (if necessar	y)								
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 destinc	ition.	Hotel, airfare, per diem	Comp	oute the cost o	of each type	e 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								
<b>Descri</b> List and describe items that will be	paid with grants funds (e.g. rent,				utation			
reproduction, telephone, janita investigative or co	orial, or security services, and nfidential funds).	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		Computation			
Describe what the approved rate is and how it is applied.	Comput	e the indirect costs for those portions of the program	m which allow su	ch costs.	
	Base	Indirect Cost Rate	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	\$0	\$0	\$0
Narrative					

Budget Deta	il - Year 5								
Does this budget contain con (DOJ Financial Guide, Section	ference costs which is defined	broadly to	include meetings, i	retreats, se	eminars, symposia, an	d training activities?	' - Y/N		
A. Personnel	<u>15.107</u>								
Name	Position				Comp	utation			
List each name, if known.	List each position, if known.		Show	annual salar	ry rate & amount of time d	evoted to the project for	each name/posit	ion.	
		S	alary	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									
P. Eringo Bonofito									
B. Fringe Benefits	Name	[				Computation			
List each grant-support	ted position receiving fringe benefits.					e basis for computation.			
			Base		Rat	te	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				Comp	outation		
Indicate the purpose of each trip or type of trip (training, advisory	Indicate the travel destination.	Lodging, Meals,	Per day, mile, trip,		Compute the	e cost of each	type of exp	pense X the numb	er of people traveli	na.
group meeting)		Etc.	Etc.		compute and		type of exp			
							# . f			Fadaval
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	Federal Request
										- 4
			NI / A					ćo		ćo.
			N/A					\$0		\$0
			N/A				Total(s)		\$0	\$0 <b>\$0</b>

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 purch	hased X the cost	per item)			
	# of Items Unit Cost Total Cost Non-Federal Contribution						
			\$0		\$0		
		Total(s)	<b>\$0</b>	\$0	\$0		
E. Supplies							
Supply Items		Computation					

Provide a list of the types of	items to be purchased with grant funds.	Describe the item and the c	ompute the costs. Computation: The number of ea	ch item to be pur	chased X the cost p	er 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 purc	hased 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)									
Descrip	otion		Purpose		Consu	ltant?			
Provide a description of the act subrecipi		,	Describe the purpose of the subaward (subgrar	nt)	Is the subay consultant? the section explain as travel ex included in	If yes, use below to sociated spenses			
							Total Cost	Non-Federal Contribution	Federal Request
									\$0
						Total(s)	\$0	\$0	\$0
Consultant Travel (if necessar	y)								
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 destind	ition.	Hotel, airfare, per diem	Com	oute the cost o	of each type	e of expense X the	e 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

H. Procurement Contracts					1					
Descrip	tion		Purpose		Consu	tant?				
Provide a description of the product contract and an estimate of the cost promote free and open competit separate justification must be provid in excess of the Simplified Acquisition	s. Applicants are encouraged to ion in awarding contracts. A led for sole source procurements		Describe the purpose of the contract		Is the subar consultant? the section explain as travel ex included in	If yes, use below to sociated penses				
							Total Cost	Non-Federal Contribution	Federal Request	
									\$0	
						Total(s)	\$0	\$0	\$0	
Consultant Travel (if necessar	y)									
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 destinc	ition.	Hotel, airfare, per diem	Comp	oute the cost o	of each type	e of expense X the	number of people	traveling.	
				Cost	Duration or Distance	# of Staff	Total CostNon-FederalFederalContributionRequest			
							\$0		\$0	
						Total	\$0	\$0	\$0	

Narrative								
I. Other Costs								
List and describe items that will be	Description       Computation         st and describe items that will be paid with grants funds (e.g. rent,       Image: Computation							
reproduction, telephone, janita investigative or co	orial, or security services, and nfidential funds).	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		Computation			
Describe what the approved rate is and how it is applied.	Comput	e the indirect costs for those portions of the program	m which allow su	ch costs.	
	Base	Indirect Cost Rate	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
		Total(s)	\$0	\$0	\$0
Narrative					

**Budget Summary** 

# Budget Summary

	No	ite: Any erro	rs detected c	on this page s	should be fixe	ed on the cor	rresponding	Budget Deta	il tab.		
	Yea	nr 1	Yec	nr 2	Yec	nr 3	Yea	ar 4	Yec	ır 5	
			(if ne	eded)	(if ne	eded)	(if ne	eded)	(if ne	eded)	
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)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
H. Procurement Contracts	\$25,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$25,000
I. Other	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Direct Costs	\$25,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$25,000
J. Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Project Costs	\$25,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$25,000
Does this budget contain co	nference costs v	which is defined	broadly to inclue	de meetings, ret	reats, seminars,	symposia, and tr	raining activities	? - Y/N		No	

# Budget Detail

# **EXAMPLE**

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			Computat	ion					
List each name, if known.	List each position, if known.		Show annual salary ra	te & amount of time devote	ed to the project for eac	ch name/position				
		Salary	Rate	Time Worked (# of hours, days, months, years)	Percentage of Time	Total Cost	Non-Federal Contribution	Federal Request		
John Smith	Executive Director	\$140,000	yearly	1	5%	\$7,000	\$0	\$7,000		
Jane Doe	Project Manager	\$90,000	yearly	1	75%	\$67,500	\$0	\$67,500		
Alex Jones	Program Assistant	\$22	\$22 hourly 1,040 100% \$22,880 \$0 \$							
		•			Total(s)	\$97,380	\$0	\$97,380		
Narrativo										

#### Narrative

John Smith, Executive Director, will provide oversight on the entire award providing 5% of this time to the project.

Jane Doe, Project Manager, will manage the project, complete reports, and submit deliverables spending 75% of her time on the project.

Alex Jones, Program Assistant, will provide the project manager assistance where needed spending 1,040 hours on the project.

 B. Fringe Benefits

 Computation

 Name
 Computation

 List each grant-supported position receiving fringe benefits.
 Show the basis for computation.

 Base
 Rate
 Total Cost
 Federal Request

John Smith		\$7	,000		25.00	)%		\$1,750	\$0	\$1,750
Jane Doe		\$6	7,500		25.00	)%		\$16,875	\$0	\$16,875
Alex Jones		\$2	2,880		25.00	)%		\$5,720	\$0	\$5,720
							Total(s)	\$24,345	\$0	\$24,345
Narrative										
C. Travel										
Purpose of Travel	Location	Type of Expense	Basis				Com	putation		
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 eacl	h type of exp	pense X the numb	per of people travel	ing.
				Cost	Quantity	# of Staff	# of Trips	Total Cost	Non-Federal Contribution	
		1								Request
Project Manager Training	Reno, NV	Other	N/A	\$50.00	1	1	1	\$50	\$0	<b>Request</b> \$50
Project Manager Training Project Manager Training	Reno, NV Reno, NV		N/A N/A	\$50.00 \$50.00	1	1	1	\$50 \$50	\$0 \$0	

Project Manager Training	Reno, NV	Mileage	Mile	\$0.51	100	1	1	\$51	\$0	\$51
Project Manager Training	Reno, NV	Meals	Day	\$51.00	5.5	1	1	\$281	\$0	\$281
Project Manager Training	Reno, NV	Lodging	Night	\$94.00	5	1	1	\$470	\$0	\$470
Project Manager Field Travel	Various	Mileage	Mile	\$0.51	250	1	20	\$2,550	\$0	\$2,550
Mandatory Orientation Training	Washington, DC	Local Travel	N/A	\$25.00	1	3	1	\$75	\$0	\$75
Mandatory Orientation Training	Washington, DC	Other	N/A	\$50.00	1	3	1	\$150	\$0	\$150
Mandatory Orientation Training	Washington, DC	Transportation	Round-trip	\$500.00	1	3	1	\$1,500	\$0	\$1,500
Mandatory Orientation Training	Washington, DC	Mileage	Mile	\$0.51	100	1	1	\$51	\$0	\$51
Mandatory Orientation Training	Washington, DC	Meals	Day	\$71.00	3.5	3	1	\$746	\$0	\$746
Mandatory Orientation Training	Washington, DC	Lodging	Night	\$224.00	3	3	1	\$2,016	\$0	\$2,016
Narrative							Total(s)	\$8,590	\$0	\$8,590

Per award guidelines, key memebers must attend orientation training in Washington, DC. WE are following our own written travel policy. Lodging is for 3 nights and meals are budgeted at 3.5 days as the two travel days are computed at .75 days. Mileage to get to the airport and local travel is for taxi to and from the airport. Also baggage fees of \$50 is \$25 each way.

The project manager will attend trainin in REno, NV. We are following our own written travel policy. Lodging is for 5 nights and meals are budgeted at 5.5 days as the two travel days are computed at .75 days. Mileage to get to the airport and local travel is for taxi to and from the airport. Also, baggage fees of \$50 is for \$25 each way.

The project manager will use her own vehicle to travel to complete field work with the average trip around 250 miles and an anticipated 20 trips.

#### D. Equipment

Item			Computation			
List and describe each item of equipment that	t will be purchased	Compute the	cost (e.g., the number of each item to be purchase	ed X the cost per	item)	
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
Dell Laptop Computer		1	\$2,547	\$2,547	\$0	\$2,547
			Total(s)	\$2,547	\$0	\$2,547
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 comp	oute the costs. Computation: The number of each i	tem to be purcha	sed X the cost per i	tem.
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
Printer	1	\$500.00	\$500	\$0	\$500
Locking file cabinet	2	\$1,000.00	\$2,000	\$0	\$2,000
Flatbed scanner	1	\$400.00	\$400	\$0	\$400
General office supplies	12	\$150.00	\$1,800	\$0	\$1,800
		Total(s)	\$4,700	\$0	\$4,700
Narrative					

The project manager will need a printer to print reports. A locking file cabinet is needed to keep client information secure. A flatbed scanner is needed to scan various documents collected in the field. General office supplies will be used bt all personnel on this project and include: pens, pencils, paper, binder clips, and other basic supplies. The office supplies are based on 12 months at \$150 per month. This amount was determined based upon other projects of this size that we have completed in the past.

F. Construction	Construction As a rule, construction costs are not allowable. Consult with the program office before budgeting funds in this category.						
Purpose	Description of Work	Computation					
Provide the purpose of the construction	Describe the construction project(s)	<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         \$0						\$0	
Narrative							

G. Subawards (Subgrants)					1		<b>-</b>		
Descri	ption		Purpose		Consu	ultant			
Provide a description of the au subrecip			Describe the purpose of the subaward (subgrant) Is the subaward for a consultant?						
						Total Cost	Non-Federal Contribution	Federal Request	
Conduct field activition	es in a remote area	Provide serv	rices and conduct field work in a remote area included in	the project No \$25,000			\$0	\$25,000	
						Total(s)	\$25,000	\$0	\$25,000
Consultant Travel (if necessa	ry)			-					
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 destine	ation.	Hotel, airfare, per diem	Comp	ute the cost	of each typ	e of expense X th	e number of people	traveling.
				Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
							\$0		\$0
						Total	\$0	\$0	\$0
Narrative									

The agency will make a subawa	ard to provide services and	conduct fie	ld work in a remote area. The \$25,000 was calc	ulated bas	sed upon a	similar si	ze project con	pleted in the sa	ame area.
H. Procurement Contracts Descript	tion		Purpose		Consu	ultant			
					Const				
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).		Describe the purpose of the contract			Is the cont consul				
							Total Cost	Non-Federal Contribution	Federal Request
William Peni	n, CPA		Accounting Assistance		Ye	es	\$9,400	\$0	\$9,400
ABC Comp	pany	Surv	Survey creation and data entry services from submitted surveys.			0	\$40,000	\$0	\$40,000
Consultant Travel (if necessary	<i>.</i> ,)				-	Total(s)	\$49,400	\$0	\$49,400
Purpose of Travel	Location		Type of Expense Computat				Computation		
Indicate the purpose of each trip or type of trip (training, advisory group meeting)	Indicate the travel destina	ation. 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								
ABC Company will put together c also be available for thos unable project manager.			-					•
William Penn will assist in compl services.	eting financial reports as w	ell as tracking award exp	enditures. Mr. Penn's r	rate is \$47 per hou	ur, and we estimate th	hat Mr. Penn v	vill provide 200	hours of
I. Other Costs Descriptio	on			Comput	tation			
List and describe items that will be paid reproduction, telephone, janitorial, investigative or confide	d with grants funds (e.g. rent, , or security services, and	t, Show the basis for computation						
		Quantity	Basis	Cost	Length of Time	Total Cost	Non-Federal Contribution	Federal Request
Rent		500	sq feet	2.51	12	\$15,060	\$0	\$15,060
Telephone		1	monthly rate	50	12	\$600	\$0	\$600
Reproduction		500	per copy	0.05	12	\$300	\$0	\$300
Postage		1000	quarterly newsletter	0.5	4	\$2,000	\$0	\$2,000
					Total(s)	\$17,960	\$0	\$17,960
Narrative								
Rent is charged at \$2.51 per squa Telephone is based upon \$50 per Reproduction is based on 500 co Postage for mailing a quarterly n	r month for 12 months. pies per month for 12 mot							

<b>Description</b> 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	Federa Reques	
Indirect Costs		\$121,725	12.54%	\$15,265	\$0	\$15,265	
			Total(s)	\$15,265	\$0	\$15,265	
rative							
rect costs are based o	n Federally approved rate of 12.54% on Tot	tal Direct Labor (Personnel + Fringe).					
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rect costs are based o	n Federally approved rate of 12.54% on Tot	tal Direct Labor (Personnel + Fringe).					

Definitions				
Additional information can be fou	nd in the DOJ Financial Guide			
DOJ Financial Guide				
Term	Definition			
6 <b>4</b> - 4 - 1	Match is the recipient share of the project costs. Match may either be "in-kind" or "cash." In-kind match includes the value of donated services. Cash match includes actual cash spent by the recipient and must have a cost relationship to the Federal award that is being matched. (Example: Match on administrative costs should be other administrative costs, not other matching on program costs).			
Match	Sample Nen Federal Match Calculation:			
	Sample Non-Federal Match Calculation: Match Calculation: If the match is 25%, the calculation is as follows: Federal Request: <b>\$350,000</b> Divided by .75 or 75%: <b>\$466,667</b> Multiplied by match amount .25 or 25%			
	equal required match amount: \$116,667			
Approved Negotiated Rate	Approved Negotiated Rate is any current fringe benefits rate approved for the grant recipient by their cognizant Federal agency.			
Expendable	An expendable item is any materials that are consumed during the course of the project such as office supplies, program supplies etc. Expendable items are usually considered to be consumed when issued and are not recorded as returnable inventory.			
Non-Expendable	A non-expendable item is tangible property having a useful life of more than two years and an acquisition cost of \$5,000 or more per unit. (Note: Organization's own capitalization policy may be used for items costing less than \$5,000).			
Renovations	Costs incurred for ordinary rearrangements, alterations and restoration of facilities are considered allowable. Special arrangement and alteration costs incurred specifically for the project are allowable with the prior approval of the awarding agency.			
Federal Acquisition Regulations	The Federal Acquisition Regulations are established for the codification and publication of uniform policies and procedures for acquisition by all executive agencies. The Federal Acquisition Regulations System consists of the Federal Acquisition Regulation (FAR), which is the primary document, and agency acquisition regulations that implement or supplement the FAR.			
	Procurement by noncompetitive proposals is procurement through the solicitation from only one source, or after solicitation of a number of sources, competition is determined inadequate.			
Sole Source	<ul> <li>Grant recipients may make the initial determination that competition is not feasible if one of the following circumstances exists:</li> <li>1. The item of service is available only from a single source.</li> <li>2. The public exigency or emergency for the requirement will not permit a delay resulting from a competitive solicitation.</li> <li>3. After solicitation of a number of sources, competitions is considered inadequate.</li> </ul>			

	A transaction in which the buyers and sellers of a product act independently and
	have no relationship to each other. The concept of an arm's length transaction is
	to ensure that both parties in the deal are acting in their own self interest and are
	not subject to any pressure or duress from the other party.
Arm-Length Transaction	
	Generally, costs of renting facilities are not allowable where one party to the
	rental agreement is able to control or substantially influence the actions of the
	other (e.g. organizations under common control through common officers.
	Directors or members).
	Confidential funds are those monies allocated to:
	Purchase of Services (P/S).
	This category includes travel or transportation of a non-Federal officer or an
	informant; the lease of an apartment, business front, luxury-type automobiles,
	aircraft or boat, or similar effects to create or establish the appearance of
	affluence; and/or meals, beverages, entertainment, and similar expenses
	(including buy money and flash rolls, etc.) for undercover purposes, within
	reasonable limits.
Confidential Funds	Purchase of Evidence (P/E).
	This category is for P/E and/or contraband, such as narcotics and dangerous drugs,
	firearms, stolen property, counterfeit tax stamps, and so forth, required to
	determine the existence of a crime or to establish the identity of a participant in a
	crime.
	Purchase of Specific Information (P/I).
	This category includes the payment of monies to an informant for specific
	information. All other informant expenses would be classified under P/S and
	Fully Executed Negotiated Agreement is a signed, approved indirect cost rate
Fully Executed Negotiated	agreement which reflects an understanding reached between the grant recipient
Agreement	
	and the cognizant Federal agency. The cognizant Federal agency is the Federal agency that generally provides the
Cognizant Federal Agency	most Federal financial assistance to the recipient of funds. Cognizance is assigned
0	by the Office of Management and Budget (OMB). Cognizant agency assignments
	for the largest cities and counties are published in the Federal Register.