

Collin County Grant Summary Form

Department Name Sheriff's Office		Submit completed form along with one electronic copy of the grant application and all supporting documentation to the Auditor's Office not less than 14 days prior to the scheduled Commissioner Court meeting. If you have any questions contact Janna Caponera at (972) 548-4638.
Contact Person (Grant Liaison) Mark Sanderson		
Title Major	Phone / Extension x - 5109	

Grant Description		
Grant Title and Funding Year ICAC Supplemental Agreement (2013-MC-FX-K036)	Funding Source ☐ State ☒ Federal ☐ Other:	Application Type ☐ New Grant ☐ Renewal ☒ Amendment
Grantor (include sub-granting agencies) City of Dallas	Payment Method ☒ Cost Reimbursement ☐ Other:	
Application/Award Deadline	Requested Comm. Court December 14, 2015	Grant Period July 1, 2013 to June 30, 2016

Brief Description
 This is a supplemental award to the original grant (2013-MC-FX-K036) extending the grant period through June 30, 2016 and increasing the funds provided by \$18,000.00. Total funding through the life of the grant would be \$51,000.00

Grant Categories / Funding Sources	Federal Funds	State Funds	Local Funds	County Match	In-Kind Match	Total
Personnel						\$ -
Operating	\$ 18,000.00					\$ 18,000.00
Capital Equipment						\$ -
Indirect Costs						\$ -
Total	\$ 18,000.00	\$ -	\$ -	\$ -	\$ -	\$ 18,000.00
# of FTEs						0

Performance Measures Applicable Outcome Measures	Current FY Progress to Date				Next FY Projected
	Q1	Q2	Q3	Q4	
N/A					

The Department named above is applying for the Grant Program named above, and if awarded, will accept full responsibility for the management of any funds awarded to the County under this grant, and will adhere to any policies and procedures set forth by the Grantor and its related agencies or agents, as well as those of the County, and its financial and administrative departments. To that end, please find enclosed the following items for initial review:

- ☒ Grant Summary Form
- ☒ Memo of request to Commissioner Court for application/award acceptance and approval
- ☐ Electronic copy of the original, completed application/award
- ☐ Approval to apply Court Order (for award only)
- ☒ All attachments, back-up documentation or amendments to be submitted to the Grantor

Completed by:	Signature	Date: 11-30-15
Department Head / Designee Printed Name		

Grant Resource-Benefit Summary

☐ Preliminary
☐ Final

Grant Title ICAC Supplemental Agreement (2013-MC-FX-K036)	Contact Person (Grant Liaison) Mark Sanderson	
Grant Period July 1, 2013 to June 30, 2016	Phone / Ext x - 5109	Department Sheriff's Office

COUNTY RESOURCES REQUIRED

Match	Amount	Identify Match Source
1) Cash	\$ -	
2) In-Kind	\$ -	
☒ No Match Required		

Implementation / Start Up

Implementation / Start-up Costs	
1) Equipment	
2) Training	
3) Inter-departmental / Other:	
☒ No Implement / Start-up Costs	

Operational / Maintenance

Operational / Maintenance	Amount	Percent
1) Recurring Maintenance		
2) Salary / Benefits		
3) Continuing Ed / Training		
4) Office / Program Space		
5) Travel		
6) Other:		
☒ No Oper / Maintenance Costs		

NON-COUNTY RESOURCES REQUIRED

Match	Amount	Identify Match Source
1) Voluntary / Donation		

Benefits to County and Citizens

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