Damantina and Nillian	Collin	County C			-	141		
Department Name				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				
North Central Texas Fusion Center								
Contact Person (Grant Liaison)								
Kelley Stone				contact Janna Caponera at (972) 548-4638.				
Title	Phone / Extens	sion						
Director	5537							
		Grant	t Descr					
Grant Title and Funding Year							ition Type	
Secured Communications Private Law Enforcement Grant				State		☑ New Grant		
Grantor (include sub-granting agencies)				Federal		☐ Renewal		
Secured Communications, LLC			V	☑ Other: ☐ Amendm			ent	
				Payment Method				
Application/Award Deadline				= cost (tollingarderilerit				
Application/Award Deadline Requested Comm. Court				Grant Period nonths from date of grant appito				
nmediate/Until funds are obligate Brief Description	9		ion	ins from dat	e of grant appito		/# · · · · · · · · · · · · · · · · · · ·	
Secured Communications, LLC	announced the	availahility of	f privato	grant funds	to nav for a limit	ed number of	aligible law	
enforcement agencies to receiv								
program is intended to assist ag	encies with prote	ecting non-re	adio cor	nmunicator	s from intercenting	on vulnerahilitia	s associated	
with mobile phone and tablet co								
\$30/user license/month. While f								
fulll year.	,	3		, 200.				
Grant Categories /	Federal Funds	State Fun	ds L	ocal Funds	County Match	In-Kind	Total	
Funding Sources		Otato : un			Tourity materi	Match		
Personnel	ļ						\$ -	
Operating							\$ -	
Capital Equipment				·			\$ -	
Indirect Costs							\$ -	
Total	\$ -	\$ -	- \$	-	\$ -	\$ -	\$ -	
# of FTEs							1	
Performance Meas	ures		Cu	rrent FY P	rogress to Date		Next FY	
Applicable Outcome Measures		Q1		Q2 Q3 Q4		04	Projected	
		<u> </u>	$ \Gamma$		1	<u> </u>	1 10,000.00	
Software Installat	ion							
2011000 2101011VI	1010		\dashv					
			\dashv				1	
			$\neg \neg$	***************************************				
		l			-l	L		
The Department named above i	is applying for the	e Grant Prod	gram na	med above	and if awarded.	will accept full	responsibility for	
the management of any funds a								
by the Grantor and its related ag								
departments. To that end, plea								
☐ Grant Summary Form								
☐ Memo of request to Com	missioner Court	for application	on/awai	d acceptan	ce and approval			
☐ Electronic copy of the ori								
☐ Approval to apply Court (
☐ All attachments, back-up			ents to b	e submitted	to the Grantor			
Completed by:		1-1	10.	51		9/11	111	
- record		Nel	icy	UTE	MC	ajort	116	
Department Head / Designee Printed	Name	Signature				Date /		