



FY2018
BP1/PHEP Funding

Applicant Information

Legal Name of Applicant Agency:
Mailing Address:

Collin County

Street / PO Box: 4300 Community Avenue
City: McKinney
Zip: 75071

Payee Name:

Collin County

Payee Mailing Address:

Street / PO Box: 4300 Community Avenue
City: McKinney
Zip: 75071

State of Texas Comptroller Vendor ID # (9
digit + 3 digit mail code):
DUNS # (9 digits required for subrecipient contractors):

Type of Entity (Choose one)

City: ☐ Click on appropriate box
County: ☒
Other Political Subdivision: ☐

Project Period

Start Date: 7/1/2017
End Date: 6/30/2018

Counties Served

County(ies) Served:

Collin County

Amount of Funding Allocated:

\$545,327.00

CONTACT PERSON INFORMATION

Legal Business Name: Collin County

This form provides information about the appropriate contacts in the contractor's organization in addition to those on the FACE PAGE. If any of the following information changes during the term of the contract, please send written notification to the Contract Management Unit.

Health Director/CEO Candy Blair
Phone: 972-548-5504 Ext:
Fax:
E-mail: cblair@co.collin.tx.us

Mailing Address (street, city, county, state, & zip):

825 N. McDonald St. #130

B-13/FSR Rep: Eileen Prentice
Phone: 972-548-4796 Ext:
Fax: 972-548-4751
E-mail: eprentice@co.collin.tx.us

Mailing Address (street, city, county, state, & zip):

2300 Bloomdale #4192, McKinney, TX 75071

PHEP (HAZARDS) Program Leader: James McCrone
Phone: 972-548-5535 Ext:
Fax: 972-548-4747
E-mail: lhudson@co.collin.tx.us

Mailing Address (street, city, county, state, & zip):

4300 Community Avenue, McKinney, TX 75071

SNS (CRI) Coordinator: Amy Davis
Phone: 214-491-6832 Ext:
Fax: 972-548-4747
E-mail: aldavis@co.collin.tx.us

Mailing Address (street, city, county, state, & zip):

4300 Community Avenue, McKinney, TX 75071

Authorized Signatory Keith Self
Phone: 972-548-4623 Ext:
Fax:
E-mail: keith.self@collincountytx.gov

Mailing Address (street, city, county, state, & zip):

2300 Bloomdale #4192, McKinney, TX 75071

Emergency Contact Lynnette Hudson
Cell Phone: 214-250-6627 Ext:
Fax: 972-548-4747
E-mail: lhudson@co.collin.tx.us

Mailing Address (street, city, county, state, & zip):

4300 Community Avenue, McKinney, TX 75071

BUDGET SUMMARY (REQUIRED)

Legal Name of Respondent:

Collin County

Budget Categories	Total Budget (1)	DSHS Funds Requested (2)	Direct Federal Funds (3)	Other State Agency Funds* (4)	Local Funding (Match) (5)	Other Funds (6)
A. Personnel	\$374,957	\$328,601			\$46,356	
B. Fringe Benefits	\$140,027	\$131,868			\$8,159	
C. Travel	\$14,538	\$14,538			\$0	
D. Equipment	\$0	\$0			\$0	
E. Supplies	\$35,370	\$35,370			\$0	
F. Contractual	\$0	\$0			\$0	
G. Other	\$34,950	\$34,950			\$0	
H. Total Direct Costs	\$599,842	\$545,327	\$0	\$0	\$54,515	\$0
I. Indirect Costs	\$0	\$0				
J. Total (Sum of H and I)	\$599,842	\$545,327	\$0	\$0	\$54,515	\$0
				Match Percentage	10.00%	

If the Contractor is using Indirect Costs as Match, then enter the amount in Line 16, Column H.

Legal Name of Respondent:

Collin County

PERSONNEL		Vacant Y/N	Job Summary	FTEs	Certification or License (Enter NA if not required)	Estimated Monthly Salary/Wage	Number of Months	Salary/Wages Requested for Project
Name + Functional Title								
PHEP Coordinator		Y	Coordinates PHEP grant deliverables & activities, supervises PHEP team	1.00	NA	\$5,343	12	\$64,116
Lynnette Hudson, PHEP Planner		N	Performs PHEP activities including special needs, first responder safety, hospital coordination	1.00	NA	\$4,777	12	\$57,324
Tracy Spurgin, Administrative Assistant, PHEP		N	Tracks & maintains documentation for PHEP team	0.75	NA	\$3,572	12	\$32,148
Nathan Peterson, MRC Coordinator		N	Coordinates volunteers for SNS and emergency preparedness activities	0.50	NA	\$3,930	12	\$23,580
Jawaid Asghar, Epidemiologist		N	Coordinates epidemiology services and disease investigation	0.80	NA	\$6,778	12	\$65,069
Susana Ramos, Epidemiology Analyst		N	Performs disease & contact investigations, influenza surveillance, rabies PEP distribution	1.00	NA	\$3,843	12	\$46,116
Vada Caffery, Administrative Assistant, Epi		N	Tracks & maintains documentation for Epidemiology team	1.00	NA	\$3,354	12	\$40,248
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
TOTAL FROM PERSONNEL SUPPLEMENTAL SHEETS								\$0
SalaryWage Total								\$328,601

FRINGE BENEFITS

Itemize the elements of fringe benefits in the space below:

FRINGE BENEFITS: FICA/Medicare (salary x 0.0765), Insurance Premiums (\$1050 for medical/dental/RX and \$4.95 for term life per month), Long Term Disability (salary x 0.0026), Short Term Disability \$3.20/month, Long Term Care \$15/month, Retirement (salary x 0.08), Supplement Death Benefit (salary x 0.0025), Unemployment Insurance (salary x 0.001)

Total Number of FTEs:	6.05	Fringe Benefit Rate %	40.13%
Fringe Benefits Total			\$131,868

TRAVEL Budget Category Detail Form

Legal Name of Respondent:

Collin County

Conference / Workshop Travel Costs		Justification	Location City/State	Number of: Days & Employees	Travel Costs	
Description of Conference/Workshop						
Quarterly PHEP Contractor Meeting (four meetings)	Contractor meeting conducted by DSHS	Austin, TX	4 meetings / 2 days / 1 employee	Mileage	\$2,250	
				Airfare	\$0	
				Meals	\$200	
				Lodging	\$1,000	
				Other Costs	\$200	
				Total	\$3,650	
Public Health Preparedness Summit	Conference for Public Health and Emergency Preparedness Professionals	New Orleans	5 days/2 employees	Mileage	\$100	
				Airfare	\$900	
				Meals	\$600	
				Lodging	\$1,625	
				Other Costs	\$200	
				Total	\$3,425	
2018 Texas Emergency Management Conference	Conference for Public Health and Emergency Preparedness Professionals	San Antonio, Texas	5 days/2 employees	Mileage	\$100	
				Airfare	\$900	
				Meals	\$600	
				Lodging	\$1,625	
				Other Costs	\$200	
				Total	\$3,425	
2018 Preparedness Coalition Symposium	Conference for Public Health and Emergency Preparedness Professionals	Galveston	4 days/2 employees	Mileage	\$100	
				Airfare	\$700	
				Meals	\$500	
				Lodging	\$1,350	
				Other Costs	\$200	
				Total	\$2,850	
TOTAL FROM TRAVEL SUPPLEMENTAL CONFERENCE/WORKSHOP BUDGET SHEETS					\$0	

Total for Conference / Workshop Travel

\$13,350

Other / Local Travel Costs

Justification	Number of Miles	Mileage Reimbursement Rate	Mileage Cost (a)	Other Costs (b)	Total (a) + (b)
Out of office meetings, seminars, exercises, training, including day travel within DFW metroplex. Will be utilized by all BT funded staff.	1100	\$0.540	\$594		\$594
Short seminars, conferences, meetings within state of Texas. Will be utilized by all BT funded staff.	1100	\$0.540	\$594		\$594
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
			\$0		\$0
TOTAL FROM TRAVEL SUPPLEMENTAL OTHER/LOCAL TRAVEL COSTS BUDGET SHEETS					\$0

Total for Other / Local Travel

\$1,188

Other / Local Travel Costs:

\$1,188

Conference / Workshop Travel Costs:

\$13,350

Total Travel Costs:

\$14,538

Indicate Policy Used:

Respondent's Travel Policy

State of Texas Travel Policy

Total Amount Requested for Supplies:

\$35,370

Legal Name of Respondent:

Legal Name of Respondent:

Revised: 3/25/2014

	TOTAL FROM OTHER SUPPLEMENTAL BUDGET SHEETS	\$0

Total Amount Requested for Other:

\$34,950

PERSONNEL Budget Category Detail Form (Match)

Legal Name of Respondent:

Collin County

PERSONNEL		Vacant Y/N	Job Summary	FTEs	Certification or License (Enter NA if not required)	Estimated Monthly Salary/Wage	Number of Months	Salary/Wages Requested for Project
Name + Functional Title								
MATCH - Dr. Muriel Marshall, Health Authority		N	Oversees Epidemiology department and performs Health Authority duties for PHEP	0.17	NA	\$20,625	12	\$41,085
MATCH - Eileen Prentice, Accountant I		N	Completes FSRs and maintains fiscal auditing documentation	0.08	NA	\$5,857	12	\$5,271
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
								\$0
						SalaryWage Total		\$46,356

FRINGE BENEFITS Itemize the elements of fringe benefits in the space below:

FRINGE BENEFITS: FICA/Medicare (salary x 0.0765), Insurance Premiums (\$1050 for medical/dental/RX and \$4.95 for term life per month), Long Term Disability (salary x 0.0026), Short Term Disability \$3.20/month, Long Term Care \$15/month, Retirement (salary x 0.08), Supplement Death Benefit (salary x 0.0025), Unemployment Insurance (salary x 0.001)

	Fringe Benefit Rate %	17.60%
	Fringe Benefits Total	\$8,159