Collin County Grant Summary Form

	Collill C	ounty Ora	Submit complet	ed form along	a savith	one electronic	copy of th
Department Name			grant applicatio	n and all sup	portir	ng documentation	on to the
Collin County Sheriff's Office			Auditor's Office	not less than	14 0	days prior to the	scheduled
Contact Person (Grant Liais	on)		Commissioner	Court meeting	g. If	you have any q	uestions
Tully Yount	1		contact Janna	Caponera at (972)	548-4638 .	
Title Title	Phone / Extens	ion					
Captain	972-548-6805	Cuant D	escription				
		Grant De		g Source		Application	on Type
Grant Title and Funding Yea			State	godiec		✓ New Grant	
Y2023 STEP-Comprehensiv			✓ Federal			Renewal	
Grantor (include sub-granti	ng agencies)		Other:			Amendme	nt
TxDOT			Other.	Pavm	ent	Method	
			✓ Cost Rein	nbursement		Other:	
	Requested Cor	mm Court	Grant Period	The control of the co			
Application/Award Deadline	January		October	1 2022	to	Septembe	r 30, 2023
January 6, 2022	January	3, 2022	October	1, 2022			
Brief Description FY2022-2023 STEP-Compre	honeivo Program	The grant will a	orovide overtime	enforcement	opp	ortunities for a y	earlong
program with 5 mobilizations,	4 which occur with	h major holiday	s. Please refer t	o attachment			
program with 5 mobilizations,							
						In-Kind	
Grant Categories /	Federal Funds	State Funds	Local Funds	County Ma	tch	Match	Total
Funding Sources	\$ 21,997.01			\$ 5,657	15		\$ 27,654
Personnel	Ψ 21,007.01		N			- 2	\$
Operating							\$
Capital Equipment							\$
Indirect Costs	\$ 21,997.01	\$ -	\$ -	\$ 5,657	.15	\$ -	\$ 27,65
Total # of FTEs	\$ 21,007.01	-					
# OIFIES							
Performance Me	asures		Current FY F		ate		Next F
Applicable Outcome	Measures	Q1	Q2	Q3		Q4	Project
Performance Measures bas	sed on deputies.						
							-
The Department named abore for the management of any							
forth butha Crantor and ite	related agencies 0	r agents, as we	ell as those of the	e County, and	its f	inancial and ad	ministrative
departments. To that end,	olease find enclose	ed the following	items for initial	review:			
Creat Summary For	m						
✓ Memo of request to !!	Commissioner Cou	urt for applicati	on/award accept	tance and app	orova	ıl	
✓ Flectronic copy of th	e original, complet	ed application/	/award				
☑ Approval to apply Co	ourt Order (for awa	ard only)	ente to he submit	tted to the Gr	antor		
✓ Approval to apply Co	k-up documentation	on or amendine	SING TO DE SUDITIO				
Completed by:		1	<u>- 1</u>	y %	,	1 .	de.
Shee:CE Tim C	KINNER	Y~~	~ つを	me		12/1	1121
Department Head / Designee Pr		Signature				Date	
Department nead / Designee Fi	into italio	-					

Grant Resource-Benefit Summary

Title	Cont	Contact Person (Grant Liaison)	rant Liaison)
Graffit Title	= 		
FY2023 STEP-Comprehensive Program	Inlly	I ully Yount	L LIBA
Grant Period	Phor	Phone / Ext	Department
October 1, 2022 to September 30, 2023		972-548-6805	Collin County Sheriff's Office
COLINTY DESCRIBED			
Match Amount	Identify Match Source	Source	Benefits to County and Citizens
sh \$ 5,657.15	0001-50001-0001-64-10-0000-	1-10-0000-	The match will come from account number 0001-50001-0001-64-10-0000-
0			Approved by M. Chacon.
☐ No Match Required	I		
Implementation / Start Up Amount	Description	_	
1) Equipment			
2) Training			
3) Inter-departmental / Other:			
☐ No Implem / Start-up Costs			
Operational / Maintenance Amount	Description	_	
1) Recurring Maintenance			
2) Salary / Benefits			
3) Continuing Ed / Training			
4) Office / Program Space			
5) Travel			
6) Other:			
☐ No Oper / Maintenance Costs			

Identify Match Source

Amount

NON-COUNTY RESOURCES REQUIRED

1) Voluntary / Donation

Match