Collin County Grant Summary Form

| | Collin | Journey Gra | int Summa | | | |
|---|---|--|---|---|--------------------------------------|----------------------|
| Department Name | | | | | with one electro orting document | |
| Collin County Sheriff's Office | | | | | 4 days prior to t | |
| Contact Person (Grant Liaiso | on) | | | | If you have any | |
| Andrew Hatch | | | | Caponera at (97 | | quodiono |
| Title | Phone / Extens | sion | | , | _, | |
| Captain | 6892 | | | | | |
| | | Grant De | escription | | | |
| Grant Title and Funding Year | | | Funding | g Source | Applica | ation Type |
| FY23 Collin County SHSP CIKR | | ☐ State | | ☐ New Gra | ant | |
| Grantor (include sub-grantin | g agencies) | | ✓ Federal | | ☑ Renewa | I |
| Office of the Governor (OOG) | | | Other: | | ☐ Amendm | nent |
| State Homeland Security Prog | ram-Grants-LETF | PA | | Paymer | nt Method | |
| - | | | ☑ Cost Reim | nbursement | Other: | |
| Application/Award Deadline | Requested Co | mm. Court | Grant Period | | | |
| February 9, 2023 | January | 23,2023 | Septembe | r 1, 2023 t | o Augus | t 31, 2024 |
| Brief Description | | | | | | |
| Fund salary and benefits for fu | II time Sheriff's O | ffice Research | Specialis for the | Fustion Center | that will overse | e Critical |
| Infastructure. This will be a 1 y | | | | | | |
| Grant Categories / Funding Sources | Federal Funds | State Funds | Local Funds | County Match | In-Kind Match | Total |
| Personnel | \$ 65,465.00 | 100 A 2 10 A 100 A 1 | | | Wildow | \$ 65,465.00 |
| Operating | + 50,100.00 | | | | | \$ - |
| Capital Equipment | | | | | | \$ - |
| Indirect Costs | | | | | | \$ - |
| Total | \$ 65,465.00 | 6 | 6 | \$ - | 6 | \$ 65,465.00 |
| | \$ 65,465.00 | \$ - | \$ - | 7 | \$ - | \$ 65,465.00 |
| # of FTEs | | | | | | 1 0 |
| Performance Meas Applicable Outcome M | | Q1 | Current FY Pr | ogress to Date | Q4 | Next FY Projected |
| Provide Services to Collin Cou | inty Residents | | | | | |
| | | | | | | |
| | | | | | | |
| The Department named above for the management of any fur forth by the Grantor and its relicited departments. To that end, ple Grant Summary Form Memo of request to Co Electronic copy of the control | nds awarded to the ated agencies or ase find enclosed mmissioner Cour original, complete t Order (for award | e County under agents, as well the following it t for application d application/av d only) | this grant, and as those of the ems for initial revaluation acceptant and | will adhere to a County, and its view: nce and approve | ny polices and p financial and ac | procedures set |
| | | | | | | |
| Completed by: | | | \ | | longers 40 0 | 022 |
| Jeff Price, Assistant Chief De | | Signatura | | | January 10, 2 Date | 023 |
| Department Head / Designee Printed | name | Signature | | | Date | |

Grant Resource-Benefit Summary

| Grant Title | | Contact Person | Contact Person (Grant Liaison) |
|-------------------------------------|----------------|-----------------------|---|
| FY23 Collin County SHSP CIKR | | Andrew Hatch | |
| Grant Period | August 31 2024 | Phone / Ext | Department Collin County Sheriff's Office |
| | | | |
| Match | Amount | Identify Match Source | Benefits to County and Citizens |
| 1) Cash | 1 | | The Research Specialist/Analyst will be paid by OOG at 100%. No match required. |
| 2) In-Kind | · · | | |
| ☐ No Match Required | | | |
| 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 | | | |
| | | | |
| NON-COUNTY RESOURCES REQUIRED Match | ount | Identify Match Source | |
| 1) Voluntary / Donation | | | |