**Collin County Grant Summary Form** 

Danastmant Nama	00111111	Journey Ord	Submit comple	ted form along v	vith one electron	nic conv of the
Department Name				on and all suppor		
Collin County Sheriff's Office				not less than 1		
Contact Person (Grant Liaiso	on)			Court meeting.		
Andrew Hatch	lpt /5 /		contact Janna	Caponera at (97	2) 548-4638.	
Title	Phone / Extens	sion				
Captain	6892	C+ D-		erio de la companya		
		Grant De	scription		A !!	(1
Grant Title and Funding Year				g Source	1	tion Type
FY23 Collin County SHSP CIK			State		New Gra	
Grantor (include sub-grantin	ig agencies)		✓ Federal		✓ Renewal	
Office of the Governor (OOG)	O	2.4	U Other:	Davis	Amendm	ent
State Homeland Security Prog	ram-Grants-LETT	A	Cost Boin		t Method	
A li 4i /A d Doo dline	Damusated Co		Grant Period	nbursement	☐ Other:	
Application/Award Deadline	Requested Co		December of the second	1 2022	August	31, 2024
February 9, 2023	January	23,2023	Septembe	er 1, 2023 to	August	31, 2024
<b>Brief Description</b> Fund software/equipment for the		0 - 0 - 20	D)/F Al 6			al and tonining
Grant Categories /				I	In-Kind	1
Funding Sources	Federal Funds	State Funds	Local Funds	County Match	Match	Total
Personnel						\$ -
Operating	\$ 45,126.00					\$ 45,126.00
Capital Equipment						\$ -
Indirect Costs						\$ -
Total	\$ 45,126.00	\$ -	\$ -	\$ -	\$ -	\$ 45,126.00
# of FTEs						0
						1
Performance Mea	sures			rogress to Date		Next FY
Applicable Outcome N	Measures	Q1	Q2	Q3	Q4	Projected
Provide Services to Collin Cou	unty Residents					
The Department named above for the management of any fur forth by the Grantor and its rel departments. To that end, ple  Grant Summary Form Memo of request to Co Electronic copy of the of Approval to apply Cour All attachments, back-	nds awarded to the ated agencies or ase find enclosed ommissioner Courbriginal, completed torder (for awar	ne County under agents, as well d the following it t for application d application/av d only)	r this grant, and as those of the ems for initial re /award acceptar vard	will adhere to an County, and its eview: nce and approva	ny polices and p financial and ad	rocedures set
Completed by:						
Jeff Price, Assistant Chief D	eputy				January 10, 2	023
Department Head / Designee Printed		Signature			Date	

## **Grant Resource-Benefit Summary**

Grant Title		Contact Person (Grant Liaison)		Preliminary
FY23 Collin County SHSP CIKR		Andrew Hatch	☐ Final	a
Grant Period September 1, 2023 to	August 31, 2024	Phone / Ext 6892	Department Collin County Sheriff's Office	
REQUIRED	Amount Identify M	Identify Match Source	Benefits to County and Citizens	
eh hs	11.		Fund software/equipment for the Fustion Center that will oversee DVE. Also funding is being requested for travel and training for DVE. This will be a 1	VE. Also be a 1
2) In-Kind \$	1		year grant period.	
☐ No Match Required				
olementation / Start Up	Amount Desc	Description		
1) Equipment				
2) Training				
3) Inter-departmental / Other:				
☐ No Implem / Start-up Costs				
Operational / Maintenance	Amount Des	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				