Collin County Grant Summary Form

Department Name	John C	bounty Of	Submit comple		ith one electro	nic copy of the	
Collin County Sheriff's Office	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						
Contact Person (Grant Liais							
Andrew Hatch							
Title	Phone / Extens	sion	contact Janna	Caponera at (97)	2) 548-4638.		
Captain	6892						
		Grant D	Description				
Grant Title and Funding Ye	ar			g Source	Applica	ation Type	
FY24 Collin County SHSP CIKR			☐ State ☐ New Gra				
Grantor (include sub-grant	✓ Federal ✓ Renewal Other: Amendm			I			
Office of the Governor (OOG) State Homeland Security Program-Grants-LETPA							
			Payment Method Cost Reimbursement Other:				
February 8, 2024	February 5, 2024		September 1, 2024 to August 31, 2025				
Brief Description	Toblacity 0, 2027 Coptember 1, 2027 to August 31, 20						
Infrastructure.							
Grant Categories / Funding Sources	Federal Funds	State Funds	Local Funds	County Match	In-Kind Match	Total	
Personnel	\$ 72,484.00				Mississi	\$ 72,484.00	
Operating						\$ -	
Capital Equipment						\$ -	
Indirect Costs						\$ -	
Total	\$ 72,484.00	\$ -	\$ -	\$ -	\$ -	\$ 72,484.00	
# of FTEs						(
Performance Me	asures		Current FY Progress to Date			Next FY	
Applicable Outcome Measures		Q1 Q2 Q3 Q4				Projected	
Provide Services to Collin Co	ounty Residents						
The Department named above for the management of any further forth by the Grantor and its redepartments. To that end, plood Grant Summary Form Memo of request to Correct Electronic copy of the Approval to apply Courther All attachments, back-	unds awarded to the elated agencies or ease find enclosed ommissioner Cour original, complete urt Order (for award	e County under agents, as well the following the following the following the following the following the following the following the following the following	er this grant, and ill as those of the items for initial re n/award acceptar ward	will adhere to an County, and its fi view: nce and approval	y polices and p nancial and ad	procedures set	
Completed by:		77. <	-10:		1/2-1-	44	
Jim Skinner, Sheriff			W June	•	1/40/2	7	
Department Head / Designee Printe	ed Name	Signature			Date		

Grant Resource-Benefit Summary

			Contact Person	on (Grant Liaison)			
			Andrew Hatch	☐ Final			
Grant Period			Phone / Ext	Department			
September 1, 2024 to	August 31	, 2025	6892	Collin County Sheriff's Office			
COUNTY DESCUIDED DECUID							
COUNTY RESOURCES REQUIRE	Amount	Identif	y Match Source	Benefits to County and Citizens			
1) Cash		Idontil	y maton course	The Research Specialist/Analyst will be paid by OOG at 100%. No match			
I) Casii	\$ -			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 REC	QUIRED Amount	Identif	y Match Source				
Voluntary / Donation							