Collin County Grant Summary Form

Department Name		Journey Ora	Submit comple		ith one electron	nio conv of the		
			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					
Collin County Animal Services								
Contact Person (Grant Liaison)								
Misty Brown				Caponera at (97)		•		
Title	Phone / Extens	sion			-			
Assistant Director	5593							
		Grant De	scription					
Grant Title and Funding Yea	r		Funding	g Source	Applica	ition Type		
MuttNation Foundation			☐ State		✓ New Gra	int		
Grantor (include sub-grantir		☐ Federal		☐ Renewal	Renewal			
		✓ Other: ☐ Amendm			nent			
Mirlanda Lamberts MuttNation	Foundation			Paymen	t Method			
			☐ Cost Reim	bursement	Other:			
Application/Award Deadline	Requested Co	mm. Court	Grant Period					
March 31, 2024		25, 2024	October	1, 2024 to	Septemb	er 30,2025		
Brief Description		-, -		,				
Funding will be used for spay/ Amount is only stated upon av		cats in the rural :	area. Amount of	grant is not kno	wn at time of ap	pplication.		
Grant Categories / Funding Sources	Federal Funds	State Funds	Local Funds	County Match	In-Kind Match	Total		
Personnel						\$ -		
Operating						\$ -		
Capital Equipment						\$ -		
Indirect Costs						\$ -		
Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
# of FTEs						0		
Performance Mea	sures		Current FY Pr	ogress to Date		Next FY		
Applicable Outcome Measures		Q1 Q2 Q3		Q3	Q4	Projected		
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-to	ands awarded to the ated agencies or lease find enclosed ammissioner Courbriginal, complete to Order (for award	e County under agents, as well a the following ite to for application/awd only)	this grant, and the cas those of the cas those of the cas for initial recassion acceptants	will adhere to any County, and its fi view: nce and approval	y polices and p nancial and adı	rocedures set		
Completed by:								
Linda Riggs								
Department Head / Designee Printe	d Name	Signature			Date			

Grant Resource-Benefit Summary

Grant Title MuttNation Foundation Grant Period			Contact Person	(Grant Liaison)		Prelim
			Misty Brown			
			Phone / Ext	Department	7	
October 1, 2024 to September 30,2025		5593	Collin County Animal Services			
COUNTY RESOURCES REQUIR	ED					
Match	Amount	Identify	Match Source	Benefits to County and Citizens		
1) Cash	\$ -					
2) In-Kind	\$ -					
No Match Required						
Implementation / Start Up	Amount	De	escription			
1) Equipment						
2) Training						
3) Inter-departmental / Other:						
No Implem / Start-up Costs						
Operational / Maintenance	Amount	De	escription	7		
Recurring Maintenance						
2) Salary / Benefits						
3) Continuing Ed / Training						
4) Office / Program Space						
5) Travel						
Other:	Unknown	Defense Co	sts			
No Oper / Maintenance Costs						
NON-COUNTY RESOURCES RE	OUIDED					
Match	Amount	Identify	Match Source			
1) Voluntary / Donation						