			nt Summa	. ,		
Department Name			Submit completed form along with one electronic copy of the			
Collin County Sheriff's Office				on and all suppor		
Contact Person (Grant Liais	on)			e not less than 14 Court meeting.		
Andrew Hatch				Caponera at (97)		questions
Title	Phone / Exten	sion	Cornact carma	caponora at (0)	2, 0 10 4000.	
Captain	6892					
The Republic State of the Control of		Grant De	escription	SHOULD STREET		
Grant Title and Funding Yea	r			g Source		ation Type
FY24 UASI Security Elections			☐ State		✓ New Gra	ant
Grantor (include sub-grantir	ig agencies)		✓ Federal		Renewal	l
Office of the Governor (OOG)			Other:		Amendm	nent
State Homeland Security Prog	ram-Grants-LET	PA		-	nt Method	
				nbursement	Other:	
Application/Award Deadline	Requested Co		Grant Period			
April 4,2024	March 2	25, 2024	Septembe	er 1, 2024 to	August	1 31, 2025
Brief Description Fund partial salary and benefi						
	-		74			
Grant Categories /	Federal Funds	State Funds	Local Funds	County Match	In-Kind	Total
Funding Sources Personnel	40,115.10				Match	\$ 40,115.10
Operating	10,110.10				l-	\$ -
Capital Equipment						\$ -
Indirect Costs						\$ -
Total	\$ 40,115.10	\$ -	\$ -	\$ -	\$ -	\$ 40,115.10
	4 40,110.10		Ψ -		Ι -	0
# OTFIES	(A)					
# of FTEs	100					
Performance Mea	sures		Current FY Pr	ogress to Date		Next FY
		Q1	Current FY Pr	ogress to Date	Q4	Next FY Projected
Performance Mea Applicable Outcome M	Measures	Q1		_	Q4	
Performance Mea Applicable Outcome Mea Applicable Outcome Mea Provide Services to Collin Cou 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	le is applying for the day awarded to the ated agencies or ase find enclosed	ne Grant Progra ne County under agents, as well d the following it	m named above this grant, and as those of the ems for initial re	Q3 e, and if awarded will adhere to an County, and its fiview:	, will accept full y polices and p nancial and ad	Projected I responsibility procedures set
Performance Mea Applicable Outcome Mea Applicable Outcome Mea Provide Services to Collin Cou 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	Measures Inty Residents e is applying for the date agencies or ase find enclosed mmissioner Courbriginal, complete to Order (for awarder)	ne Grant Progra ne County under agents, as well d the following ite rt for application/aw d application/aw d only)	m named above this grant, and vas those of the ems for initial re-	Q3 e, and if awarded will adhere to an County, and its fiview:	, will accept full y polices and p inancial and ad	Projected I responsibility procedures set ministrative
Performance Mea Applicable Outcome Mea Applicable Outcome Mea Provide Services to Collin Cou 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 condition of the	e is applying for the day awarded to the day are find enclosed mmissioner Courbriginal, complete to Order (for award up documentation	ne Grant Progra ne County under agents, as well d the following ite rt for application/aw d application/aw d only)	m named above this grant, and vas those of the ems for initial re-	Q3 e, and if awarded will adhere to an County, and its fiview:	, will accept full y polices and p nancial and ad	Projected I responsibility procedures set ministrative

Grant Resource-Benefit Summary

Grant Title					Contact Person	(Grant Liaiso
FY24 UASI Sec	curity Elections				Andrew Hatch	
Grant Period					Phone / Ext	Department
Septembe	er 1, 2024	to	August 3	1, 2025	6892	Collin County Sh
COUNTY DES	OURCES REQU	IIDEN				
Match	JUNCES REQU	JIKED	Amount	Identify	Match Source	Benefits to Coun
1) Cash		\$	-			The Research Spe
		-				required.
2) In-Kind		\$	-			
☐ No Match R	Required					
		Name				
Implementatio			Amount	De	scription	
1) Equipment						
2) Training		-				
3) Inter-denar	tmental / Other:					
☐ No Implem	/ Start-up Costs	8				
Operational / N	V laintenance		Amount	De	scription	
1) Recurring N	<i>M</i> aintenance					
2) Salary / Bei	nefits					
3) Continuing	Ed / Training					
4) Office / Pro	gram Space					
5) Travel						
6) Other:						
☐ No Oper / N	Maintenance Co	sts				
NON COUNTY	DESCUIDATE	DEOU	IIDED			
Match	RESOURCES	KEQU	Amount	Identify	Match Source	
1) Voluntary /	Donation		· unodiff			