

Collin County Grant Summary Form

Department Name Auditor		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 Janna Caponera at (972) 548-4638.
Contact Person (Grant Liaison) Janna Caponera		
Title Grant Accounting and Reporting	Phone / Extension 4638	

Grant Description		
Grant Title and Funding Year Indigent Defense Formula Grant FY 2025	Funding Source <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other:	Application Type <input type="checkbox"/> New Grant <input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Amendment
Grantor (include sub-granting agencies) Texas Indigent Defense Commission - Office of the Governor	Payment Method <input type="checkbox"/> Cost Reimbursement <input type="checkbox"/> Other:	
Application/Award Deadline November 15, 2024	Requested Comm. Court October 28, 2024	Grant Period October 1, 2024 to September 30, 2025

Brief Description
Reimburse for the state approved defense services for indigent defendants. Amount of award has not been calculated yet. The amount received in FY 2024 was \$424,555.00.

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 Measures Applicable Outcome Measures	Current FY Progress to Date				Next FY Projected
	Q1	Q2	Q3	Q4	

The Department named above is applying for the Grant Program named above, and if awarded, will accept full responsibility for the management of any funds awarded to the County under this grant, and will adhere to any policies and procedures set forth by the Grantor and its related agencies or agents, as well as those of the County, and its financial and administrative departments. To that end, please find enclosed the following items for initial review:

- Grant Summary Form
- Memo of request to Commissioner Court for application/award acceptance and approval
- Electronic copy of the original, completed application/award
- Approval to apply Court Order (for award only)
- All attachments, back-up documentation or amendments to be submitted to the Grantor

Completed by: Linda Riggs	
Department Head / Designee Printed Name	Signature
	Date

Grant Resource-Benefit Summary

Grant Title Indigent Defense Formula Grant FY 2025	Contact Person (Grant Liaison) Janna Caponera	
Grant Period October 1, 2024 to September 30, 2025	Phone / Ext 4638	Department Auditor

<input checked="" type="checkbox"/>	Preliminary
<input type="checkbox"/>	Final

COUNTY RESOURCES REQUIRED

Match	Amount	Identify Match Source
Ind Cash	\$ -	
2) In-Kind	\$ -	
<input checked="" type="checkbox"/> No Match Required		

Implementation / Start Up	Amount	Description
1) Equipment		
## Training		
3) Inter-departmental / Other:		
<input checked="" type="checkbox"/> Rei 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		
<input type="checkbox"/> Other:	Unknown	Defense Costs
No Oper / Maintenance Costs		

NON-COUNTY RESOURCES REQUIRED

Match	Amount	Identify Match Source
1) Voluntary / Donation		

Benefits to County and Citizens
State defense for indigent defendants.