Grant Resource-Benefit Summary

Grant Title District Attorney Victim Assistance Coordinator VOCA Grant				Contact Person Deborah F. Harr	(Grant Liaison)	Preliminal	
Grant Period	ice C	oordinator VOC	A Grant	Phone / Ext	Department		
	to	August 31	, 2026	4326	Collin County District Attorney's Office		
COUNTY RESOURCES REQU Match 1) Cash	JIRED	Amount 23,168.50	Identify	Match Source	Benefits to County and Citizens The purpose of this program is to provide services and assistance direct to victims of crime to speed their recovery and aid them through the		
2) In-Kind	\$	-			criminal justice process. This will be a 1 year	ar grant period. OOG will pay:	
✓ No Match Required					\$69,505.50 and cash match will come from	DA General Fund: \$23,168.50	
Implementation / Start Up 1) Equipment	F	Amount	De	escription			
2) Training							
3) Inter-departmental / Other:No Implem / Start-up Costs							
Operational / Maintenance		Amount	De	escription			
1) Recurring Maintenance							
2) Salary / Benefits							
3) Continuing Ed / Training							
4) Office / Program Space							
5) Travel							
6) Other:							
☑ No Oper / Maintenance Cos	sts						
	-						
NON-COUNTY RESOURCES Match	REQU	JIRED Amount	Identify	Match Source			
1) Voluntary / Donation							

Collin County Grant Summary Form

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Department Name	al- Office		Submit completed form along with one electronic copy of the grant application and all supporting documentation to the					
Collin County District Attorne	•							
Contact Person (Grant Liai	son)		Auditor's Office not less than 14 days prior to the scheduled Commissioner Court meeting. If you have any questions					
Deborah F. Harrison	1			Caponera at (97	•	, 4		
Title	Phone / Exten	sion			•			
Chief Felony Prosecutor	4326							
		Grant De	escription		I	·		
Grant Title and Funding Ye			Funding Source Application Type					
District Attorney Victim Assist		VOCA Grant	State		☐ New Gra			
Grantor (include sub-grant			X Federal		☑ Renewal			
Office of the Governor (OOG), Victim Assistar	ice, General Vic						
				-	t Method			
				nbursement	Other:			
Application/Award Deadline	<u>-</u>		Grant Period					
February 13, 2025	January	27, 2025	Septembe	r 1, 2025 to	August	31, 2026		
Brief Description The purpose of this program								
Grant Categories / Funding Sources	Federal Funds	State Funds	Local Funds	County Match	In-Kind Match	Total		
Personnel	69,505.50	\$		\$ 23,168.50		\$ 92,674.00		
Operating						\$ -		
Capital Equipment						\$ -		
Indirect Costs						\$ -		
Total	\$ 69,505.50	\$	\$ -	\$ 23,168.50	\$ -	\$ 92,674.00		
# of FTEs						(
						Next FY		
	Performance Measures			Current FY Progress to Date				
Applicable Outcome	Measures	Q1	Q2	Q3	Q4	Projected		
Provide serivices to Collin Co	ounty							
						_		
The Department named above for the management of any further forth by the Grantor and its redepartments. To that end, ploof Grant Summary Form Memo of request to Corollogical Electronic copy of the Approval to apply Courollogical All attachments, back-	unds awarded to the elated agencies or ease find enclose ommissioner Cour original, complete rt Order (for award	he County under agents, as well d the following in t for application d application/awd	r this grant, and l as those of the tems for initial re /award acceptal /ard	l will adhere to a County, and its eview: nce and approva	ny polices and financial and a	procedures set		
Completed by:								
Deborah F. Harrison		Deborah 7. 7	4arrison		January 21, 2	025		
Department Head / Designee Print	od Nama	Signature	•		Date			