**Collin County Grant Summary Form** 

Department Name	3011111	ounty Ord	Submit comple		vith one electro	nic conv of the	
Collin County District Attorney			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				
Deborah F. Harrison	ln: /= /		contact Janna	Caponera at <b>(97</b>	2) 548-4638.		
Title	Phone / Exten	sion					
Chief Felony Prosecutor	x4326		L				
		Grant De	escription				
Grant Title and Funding Y						ition Type	
ICAC 15PJDP-22-GK-04883-MECP & Interlocal Agreement			State		New Grant		
Grantor (include sub-granting agencies)			✓ Federal		☑ Renewal		
City of Dallas		☐ Other:		Amendment			
		Payme		nt Method			
	✓ Cost Reimbursement ☐ Other:						
Application/Award Deadli	ne Requested Co	mm. Court	<b>Grant Period</b>				
	=	10, 2025	October	1, 2024 to	Septemb	er 30, 2025	
Brief Description		<u> </u>		,	•	,	
This is an extenstion of the funds to be used in the area requirement for matching fu	a of on-line child abo	use cases. The	award amount	is not to exceed	\$16,000, and		
Grant Categories /	Federal Funds	State Funds	Local Funds	County	In-Kind	Total	
Funding Sources				Match	Match		
Personnel						\$ -	
Operating	\$ 16,000.00					\$ 16,000.00	
Capital Equipment						\$ -	
Indirect Costs						\$ -	
Total	\$ 16,000.00	\$ -	\$ -	\$ -	\$ -	\$ 16,000.00	
# of FTEs						0	
Performance M	easures		Current FY Pr	ogress to Date		Next FY	
Applicable Outcome	e Measures	Q1	Q2 Q3		Q4	Projected	
N/A							
The Department named aborder the management of any forth by the Grantor and its departments. To that end,  Grant Summary Form Memo of request to General Electronic copy of the Approval to apply Co All attachments, back	funds awarded to the related agencies or please find enclosed more commissioner Course original, complete our torder (for award)	ne County under agents, as well de the following in the for application de application/avellonly)	er this grant, and I as those of the items for initial re l/award acceptar vard	will adhere to a County, and its eview: nce and approva	ny polices and financial and a	procedures set	
Deborah F. Harrison		Deborah 7. 7	4arrison		January 23, 20	025	
Department Head / Designee Pri	inted Name	Signature			Date		

## **Grant Resource-Benefit Summary**

Grant Title				(Grant Liaison)	Preliminary
ICAC 15PJDP-22-GK-04883-ME	CP & Interlocal Ag	reement	Deborah F. Harr		Final
Grant Period	Cantamban	20 2025	Phone / Ext	Department	
October 1, 2024 to	September 30, 2025		x4326	Collin County District Attorney	
COUNTY RESOURCES REQUI	RED				
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	7 4110 51111				
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 Cost	S				
NON-COUNTY RESOURCES R					
Match	Amount	Identify	Match Source		
1) Voluntary / Donation					