**Collin County Grant Summary Form** 

Department Name		Journey Gra		ted form along w	/ith c	ne electron	ic copy of the
Health Care Services	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 Liaise							
Taylor Burton							
Title	Phone / Exten	sion	contact danna	Caponera at (51)	_, 0	<del>10-100</del> 0.	
Assistant Public Health Director	or 972-548-4464						
		Grant De	scription				
<b>Grant Title and Funding Yea</b>			Funding Source Applicat			ion Type	
Cities Readiness Initiative (CR		State			New Gran	nt	
Grantor (include sub-granting agencies)			☑ Federal		☑ Renewal		
Texas Department of State He	Other:			☐ Amendment		ent	
		I			t Method		
				nbursement		Other:	
Application/Award Deadline	Requested Co	mm. Court	Grant Period				
January 31, 2025	May 5	5, 2025	July 1,	2025 to	)	June 3	0, 2026
<b>Brief Description</b> The CRI grant is meant to ens							
Grant Categories / Funding Sources	Federal Funds	State Funds	Local Funds	County Match		In-Kind Match	Total
Personnel		\$ 116,744.00		\$ 20,602.00	\$	6,678.00	\$ 144,024.00
Operating		\$ 3,344.00			\$	6,665.00	\$ 10,009.00
Capital Equipment							\$ -
Indirect Costs		\$ 13,343.00					\$ 13,343.00
Total	\$ -	\$ 133,431.00	\$ -	\$ 20,602.00	\$	13,343.00	\$ 167,376.00
# of FTEs							(
		T	0 (5)(5				N ( = ) (
Performance Measures		Current FY Progress to Date					Next FY
Applicable Outcome N	leasures	Q1	Q2	Q3	ı	Q4	Projected
					-		
		<u> </u>	<u> </u>				<u> </u>
The Department named above for the management of any fur forth by the Grantor and its relidepartments. To that end, ple  Grant Summary Form  Memo of request to Co  Electronic copy of the co Approval to apply Cour  All attachments, back-to	nds awarded to the ated agencies or ase find enclosed mmissioner Courbriginal, complete to Order (for award	ne County under agents, as well the following it t for application/ d application/aw d only)	this grant, and as those of the cems for initial redaydaward acceptaryard	will adhere to ang County, and its fi view: nce and approval	y po nan	lices and pro	ocedures set
Completed by:							
Taylor Burton		Tanh	or Burton	<b>1</b> .	Anr	il 4, 2025	
Denartment Head / Designee Printer	d Name	Signature	vi v www	<u> </u>	Date	, 2320	

## **Grant Resource-Benefit Summary**

Grant Title Cities Readiness Initiative (CRI) FY 2026				Contact Person	☐ Preliminary		
				Taylor Burton			
Grant Period				Phone / Ext	Department		
July 1, 2025 t	0	June 30	, 2026	972-548-4464	Health Care Services		
COUNTY RESOURCES REQUI	RED						
Match		Amount	Identify M	latch Source	Benefits to County and Citizens		
1) Cash	\$	20,602.00	Existing staff s	salary/fringe	This grant is used to promote and protect the exigent disaster or emergency. These situation		
2) In-Kind	\$	13,343.00	-		natural weather disaster, man-made acciden		
☐ No Match Required					The primary mechanism for a CRI response		
			_		(PODs) to conduct mass prophylaxis operation medicaiton or vaccines to County residents to		
Implementation / Start Up		Amount	Des I	cription	and death from a specific disease or health r		
1) Equipment							
2) Training					The funds for this grant are used for personn response plans, preparedness exercises, co-		
3) Inter-departmental / Other:					response supplies and resources, training ar health preparedness activites, and other rela		
$\hfill \square$ No Implem / Start-up Costs					ricular proparedness delivites, and earler rela	ted expeditioes and daties.	
Operational / Maintenance		Amount	Des	cription			
1) Recurring Maintenance							
2) Salary / Benefits							
3) Continuing Ed / Training							
4) Office / Program Space							
5) Travel							
6) Other:							
☐ No Oper / Maintenance Cost	ts						
NON COUNTY RESOURCES R	EOUID	ED					
NON-COUNTY RESOURCES R Match		בט Amount	Identify M	latch Source			
1) Voluntary / Donation							