

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS
ACTION AGENDA SUMMARY

DEPT: DISTRICT ATTORNEY *31*

BOARD AGENDA # *B-4

Urgent

Routine

AGENDA DATE JANUARY 11, 2011

CEO Concurs with Recommendation YES NO

4/5 Vote Required YES NO

(Information Attached)

SUBJECT:

Approval to Accept the Fiscal Year 2010-2011 Grant from California Emergency Management Agency for the Unserved/Underserved Victim Advocacy Outreach Program.

STAFF RECOMMENDATIONS:

1. Accept the FY 2010-2011 Grant from California Emergency Management Agency for the Unserved/Underserved Victim Advocacy Outreach Program totaling \$106,821 for the Federal FY.
2. Authorize the District Attorney to sign the grant award agreement including any extension, or amendments.
3. Direct the Auditor-Controller to establish a new fund and organizational number for the Unserved/Underserved Victim Advocacy Outreach Program, transfer appropriations from Elder Abuse Advocacy to the new fund and org number and increase appropriations and estimated revenue as detailed in the attached Budget Journal form.

FISCAL IMPACT:

Estimated revenue and appropriations for the Elder Abuse Advocacy grant totaling \$73,553 are reflected in the Fiscal Year 2010-2011 Final Adopted Budget. The grant is based on the Federal Fiscal Year of October 1 through September 30. The County budget was established using fourth quarter grant funds from Federal FY 2009-2010 and the first three quarters of the assumed FY 2010-2011 grant award renewal, normally a non-competitive, automatic process. The grant was changed for FY 2010-2011 to a competitive process and re-named the Unserved/Underserved Victim Advocacy Outreach Program. Stanislaus County was awarded \$106,821 for the Federal Fiscal Year of October 1, 2010 cont. page 2

BOARD ACTION AS FOLLOWS:

No. 2011-032

On motion of Supervisor O'Brien, Seconded by Supervisor Withrow

and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Withrow, DeMartini, and Chairman Monteith

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None

1) X Approved as recommended

2) _____ Denied

3) _____ Approved as amended

4) _____ Other:

MOTION:

Christine Ferraro

ATTEST: CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval to Accept the Fiscal Year 2010-2011 Grant from California Emergency Management Agency for the Unserved/Underserved Victim Advocacy Outreach Program.

FISCAL IMPACT:

through September 30, 2011, meaning \$80,116 is available for the remainder of the County's current fiscal year and \$26,705 would be available to begin fiscal year 2011-2012. A new Special Revenue fund reflecting the new program name is recommended to be established. The appropriations and estimated revenue from the former Elder Abuse Advocacy program in the amount of \$43,554 will be transferred to the new fund and an increase of \$36,562 in both appropriations and estimated revenue will be needed to properly fund the \$80,116 available for the Unserved/Underserved Victim Advocacy Outreach Program in the County's fiscal year 2010-2011. There is no exposure to the County General Fund. The grant will fund a victim advocate position, training/conference expenditures, Catholic Charities services of outreach and educational activities on elder/dependent abuse, advocate phone usage and required independent audit costs.

DISCUSSION:

The District Attorney's Office has been awarded funding for the Elder Abuse Advocacy Program since Fiscal Year 2000-2001. For nine consecutive years, the grant has been non-competitive renewing each year. This Fiscal Year, however, the grant became competitive and only proposals from qualified applicants were awarded funds. The selected applicants will be funded for a five year period, starting in Fiscal Year 2010-2011. Years two through five will need an application for continuation funding to be submitted. The District Attorney's Office was selected to receive funding for the Unserved/Underserved Victim Advocacy and Outreach Program.

According to the Stanislaus County Community Health Assessment, it is estimated that the 60+ population will continue to rise and will reach 98,500 by the year 2015. The prevalence of elder and dependent adult abuse is significant but often goes unreported to law enforcement. A study by the National Center on Elder Abuse in 2005 estimated that only 1 out of 5 cases is reported. Stanislaus County Adult Protective Services received 1,722 referrals of suspected abuse and neglect for Fiscal Year 2009-2010. It is estimated from the National Center on Elder Abuse that another 8,000, or more, instances of abuse may have gone unreported. Victims in these populations tend to be more isolated, are easily victimized and often silent about the abuse. The victim advocate dedicated to this underserved population visits the victims at home and in hospitals, provides transportation to court, helps with claims for victim compensation, and gives referral information. The District Attorney's Victim Services Unit served 143 elder and dependent adult victims in Fiscal Year 2009-2010. This agenda item is being submitted for Board approval in order to authorize acceptance of the grant and to authorize the District Attorney to sign the final grant award.

Approval to Accept the Fiscal Year 2010-2011 Grant from California Emergency Management Agency for the Unserved/Underserved Victim Advocacy Outreach Program.

POLICY ISSUES:

Acceptance of this grant will assist the District Attorney's Office in meeting the Board's goal of A Safe Community.

STAFFING IMPACTS:

There are no staffing impacts at this time. The current staff level is able to sustain the requirements of the grant reporting.

CONTACT INFO:

Birgit Fladager, District Attorney (209) 525-5550



PUBLIC SAFETY AND VICTIM SERVICES PROGRAMS DIVISION
CALIFORNIA EMERGENCY MANAGEMENT AGENCY

VICTIM SERVICES BRANCH
3650 SCHRIEVER AVENUE
MATHER, CALIFORNIA 95655
TELEPHONE: (916) 324-9101
FAX: (916) 324-8554



December 29, 2010

Birgit Fladager
District Attorney
Stanislaus County
P.O. Box 442
Modesto, CA 95353

Dear Ms. Fladager:

SUBJECT: NOTIFICATION OF APPLICATION APPROVAL
Unserved/Underserved Victim Advocacy and Outreach Program (201002122)
Award #: UV10 01 0500
Cal EMA ID#: 099-00000

Congratulations! The California Emergency Management Agency (Cal EMA) has approved your application in the amount of \$106,821, subject to Budget approval. A copy of your approved subgrant is enclosed for your records.

Cal EMA will make every effort to process payment requests within 60 days of receipt.

This subgrant is subject to the Cal EMA Recipient Handbook. You are encouraged to read and familiarize yourself with the Cal EMA Recipient Handbook, which can be viewed on Cal EMA's website at www.calema.ca.gov.

Any funds received in excess of current needs, approved amounts, or those found owed as a result of a close-out or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal EMA.

Should you have questions on your subgrant, please contact your Program Specialist.

LEVS Grant Processing

Enclosure

c: Recipient's file

**County of Stanislaus: Auditor-Controller
Legal Budget Journal**

Database
Set of Books



FMS11IDB.CO.STANISLAUS.CA.US.PROD
County of Stanislaus

Balance Type	Budget
Category	* List - Text Budget - Upload
Source	* List - Text
Currency	* List - Text USD
Budget Name	List - Text LEGAL BUDGET
Batch Name	Text
Journal Name	Text
Journal Description	Text Increase appropriations and revenue for UV grant award
Journal Reference	Text
Organization	List - Text Stanislaus Budget Org

Upl	Fund	Org	Acc't	GL Proj	Loc	Misc	Other	Debit		Credit		Period	Line Description
								incr appropriations decr est revenue (format > number > general)		decr appropriations incr est revenue			
Pb	1686	0023208	62400	0000000	000000	000000	000000	1,950				JAN-11	Tsfr fr EA & incr app
Pb	1686	0023208	63280	0000000	000000	000000	000000	24,300				JAN-11	Tsfr fr EA & incr app
Pb	1686	0023208	67040	0000000	000000	000000	000000	2,329				JAN-11	Tsfr fr EA & incr app
Pb	1686	0023208	50000	0000000	000000	000000	000000	47,682				JAN-11	Tsfr fr EA & incr app
Pb	1686	0023208	60400	0000000	000000	000000	000000	180				JAN-11	Tsfr fr EA & incr app
Pb	1686	0023208	62630	0000000	000000	000000	000000	1,125				JAN-11	Tsfr fr EA & incr app
Pb	1686	0023208	66180	0000000	000000	000000	000000	2,550				JAN-11	Tsfr fr EA & incr app
Pb	1686	0023208	26520	0000000	000000	000000	000000			43,554		JAN-11	Tsfr fr EA
Pb	1686	0023208	26520	0000000	000000	000000	000000			36,562		JAN-11	Increase revenue
Pb	1706	0023206	50000	0000000	000000	000000	000000			43,165		JAN-11	Tsfr from EA
Pb	1706	0026206	62400	0000000	000000	000000	000000			389		JAN-11	Tsfr from EA
Pb	1706	0023206	26520	0000000	000000	000000	000000	43,554				JAN-11	Tsfr from EA

Totals: 123,670 123,670

Explanation: Increase appropriations and revenue for UV grant and transfer expenditures to new fund/org

Requesting Department		CEO	Data Entry		Auditors Office Only	
Lori Acree		Signature	Keyed by	Prepared By		Approved By
1/6/2011	1/6/11	Date	Date	Date	1-25-11	Date

Cal EMA

099-00000

Award # UV 10 010500

**CALIFORNIA EMERGENCY MANAGEMENT AGENCY
GRANT AWARD FACE SHEET (Cal EMA 2-101)**

The California Emergency Management Agency, hereafter designated Cal EMA, hereby makes a grant award of funds to the following:

1. Grant Recipient: County of Stanislaus

hereafter designated Recipient, in the amount and for the purpose and duration set forth in this grant award.

2. Implementing Agency: District Attorney

3. Project Title: underserved / Underserved Victim Advocacy & Outreach Program 4. Grant Period: 10/01/10 to 09/30/11

*Select the Grant year and fund source(s) from the lists below or type the appropriate acronym in box 9. Enter the amount(s) from each source. Please do not enter both State and Federal fund sources on the same line. Add any cash match(s). Block 10G is the Grant Award total amount.

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
10/11	5. VOCA		\$106,821		\$18,605	\$8,400	\$26,705	
Select	6. Select						\$0	
Select	7. Select						\$0	
Select	8. Select						\$0	
Select	9.						\$0	
	10. TOTALS	\$0	\$106,821	\$106,821	\$18,605	\$8,400	\$26,705	10. Grand Total: \$133,526

11. This grant award consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify I am vested with the authority, and have the approval of the City/County Financial Officer, City Manager, County Administrator, or Governing Board Chair, to enter into this grant award agreement; and all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Cal EMA Program Guidelines, the Cal EMA Recipient Handbook, the Federal OJP Financial Guide and Program Guidelines (if applicable), and the Cal EMA audit requirements, as stated in the applicable RFP or RFA. The grant recipient further agrees to all legal conditions and terms incorporated by reference in the applicable RFP or RFA, and agrees that the allocation of funds is contingent on the enactment of the State Budget.

12. Official Authorized to Sign for Applicant/Grant Recipient: _____ Federal Employer ID Number: _____

Name: Birgit Fladager Title: District Attorney

Payment Mailing Address: 832 12th, Street, Ste. 300 City: Modesto Zip: 95354

Telephone: (209) 525-5550 (area code) FAX: (209) 525-6933 (area code) Email: birgit.fladager@standa.org

Signature: [Signature] Date: 8-23-10

(FOR CalEMA USE ONLY)

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

Cal EMA Fiscal Officer: [Signature] Date: 12/23/10 Cal EMA Director (or designee): [Signature] Date: 12/23/10

Yr/Chapter: 2010-11 / 712 PCA No: 18200
Item: 0690-102-0890 Fed Cat. #: 16.575
Component: 40.20.451
Program: Underserved/Underserved Victim Advocacy & Outreach Program
Fund: Federal Trust
Match Req.: 20% C/IK based on TPC
Project No.: 10VOCA Amount: \$ 106,821

545826

PROJECT CONTACT INFORMATION

PO

Applicant County of Stanislaus Grant Number UV10010500
[FOR OES USE ONLY]

Provide the name, title, address, telephone number, and e-mail address for the project contacts named below. If a section does not apply to your project, enter "N/A." NOTE: If you use a PO Box address, a street address is also required for package delivery and site visit purposes.

1. The **Project Director** for the project:

Name: BIRGIT FLADAGER Address: PO BOX 442/832 12TH ST., SUITE 300
Title: DISTRICT ATTORNEY City: MODESTO Zip: 95353/95354
Telephone #: (209) 525-5550 Fax #: (209) 525-6945
(Area Code) (Area code)
E-Mail Address: birgit.fladager@standa.org

2. The **Financial Officer** for the project:

Name: LARRY HAUGH Address: 1010 10TH STREET, SUITE 5100
Title: AUDITOR-CONTROLLER City: MODESTO Zip: 95354
Telephone #: (209) 525-6398 Fax #: (209) 525-6226
(Area Code) (Area code)
E-Mail Address: haughl@stancounty.com

3. The **person having routine programmatic responsibility** for the project:

Name: GAY MCDANIEL Address: 832 12TH STREET, SUITE 300
Title: PROGRAM COORDINATOR City: MODESTO Zip: 95354
Telephone #: (209) 525-5541 Fax #: (209) 525-6945
(Area Code) (Area code)
E-Mail Address: gay.mcdaniel@standa.org After Hours # (209) 652-1655

4. The **person having routine fiscal responsibility** for the project:

Name: LORI ACREE Address: 832 12TH STREET, SUITE 300
Title: ACCOUNTANT City: MODESTO Zip: 95354
Telephone #: (209) 525-5505 Fax #: (209) 525-6933
(Area Code) (Area code)
E-Mail Address: lori.acree@standa.org

5. The **Executive Director** of a nonprofit organization or the **Chief Executive Officer** (e.g., chief of police, superintendent of schools) of the implementing agency:

Name: RICK ROBINSON Address: 1010 10TH STREET, SUITE 5100
Title: CHIEF EXECUTIVE City: MODESTO Zip: 95354
Telephone #: (209) 525-6333 Fax #: (209) 525-6226
(Area Code) (Area code)
E-Mail Address: rickceo@stancounty.com

6. The **Chair** of the **governing body** of the recipient: (Provide contact information other than that of the recipient)

Name: JEFF GROVER Address: 1010 10TH STREET, SUITE 6500
Title: CHAIRMAN, BOARD OF SUPERVISORS City: MODESTO Zip: 95354
Telephone #: (209) 525-6560 Fax #: (209) 525-6472
(Area Code) (Area code)
E-Mail Address: groverj@stancounty.com

SIGNATURE AUTHORIZATION

Grant Award #:

UV10010500

Dee

Grant Recipient:

STANISLAUS COUNTY

Implementing Agency:

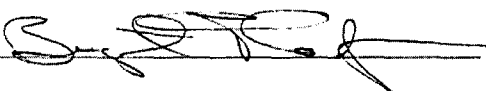
DISTRICT ATTORNEY'S OFFICE

*The Project Director and Financial Officer are **REQUIRED** to sign this form.

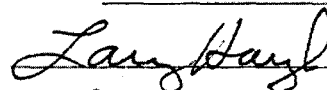
*Project Director: BIRGIT FLADAGER

*Financial Officer: LARRY HAUGH

Signature:



Signature:



Date:

8-23-10

Date:

8-24-10

The following persons are authorized to sign for the
Project Director

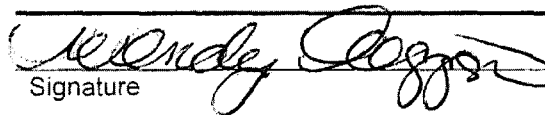
The following persons are authorized to sign for the
Financial Officer



Signature

Gay McDaniel, Program Coordinator

Name



Signature

Wendy Duggan, Financial Manager

Name

Signature

Name

Signature

Name

Signature

Name

Signature

Name



Signature

Lauren Klein, Assistant Auditor-Controller

Name

Signature

Name

Signature

Name

Signature

Name

CERTIFICATION OF ASSURANCE OF COMPLIANCE
Victims of Crime Act (VOCA) Fund

I, Birgit Fladager hereby certify that
(official authorized to sign grant award; same person as Section 12 on Grant Award Face Sheet)

RECIPIENT: STANISLAUS COUNTY

IMPLEMENTING AGENCY: DISTRICT ATTORNEY'S OFFICE

PROJECT TITLE: Underserved Victim Advocacy and Outreach Program

is responsible for reviewing the *Grant Recipient Handbook* and adhering to all of the Grant Award Agreement requirements (state and/or federal) as directed by Cal EMA including, but not limited to, the following areas:

I. Federal Grant Funds

Recipients expending \$500,000 or more in federal grant funds annually are required to secure an audit pursuant to OMB Circular A-133 and are allowed to utilize federal grant funds to budget for the audit costs. See Section 8000 of the Recipient Handbook for more detail.

- The above named recipient receives \$500,000 or more in federal grant funds annually.
- The above named recipient does not receive \$500,000 or more in federal grant funds annually.

II. Equal Employment Opportunity – (Recipient Handbook Section 2151)

It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of race, religious creed, color, national origin, ancestry, disability (mental and physical) including HIV and AIDS, medical condition (cancer and genetic characteristics), marital status, sex, sexual orientation, denial of family medical care leave, denial of pregnancy disability leave, or age (over 40). **Cal EMA-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.**

Please provide the following information:

Equal Employment Opportunity Officer: Ramon Bawan

Title: Human Resources Manager

Address: 832 12th Street, Suite 300, Modesto, CA 95354

Phone: (209) 525-5565

Email: ramon.bawan@standa.org

III. Drug-Free Workplace Act of 1990 – (Recipient Handbook, Section 2152)

The State of California requires that every person or organization awarded a grant or contract shall certify it will provide a drug-free workplace.

IV. California Environmental Quality Act (CEQA) – (Recipient Handbook, Section 2153)

The California Environmental Quality Act (CEQA) (*Public Resources Code, Section 21000 et seq.*) requires all Cal EMA funded projects to certify compliance with CEQA. Projects receiving funding must coordinate with their city or county planning agency to ensure that the project is compliance with CEQA requirements.

V. Lobbying – (Recipient Handbook Section 2154)

Cal EMA grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

VI. Debarment and Suspension – (Recipient Handbook Section 2155)

(This applies to federally funded grants only.)

Cal EMA-funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

VII. Proof of Authority from City Council/Governing Board

The above-named organization (applicant) accepts responsibility for and will comply with the requirement to obtain written authorization from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of Cal EMA, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and Cal EMA disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from Cal EMA shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

VIII. Special Condition for Grant Awards with Victims of Crime Act (VOCA) Fund

The grant recipient agrees to administer the grant in accordance with the VOCA, the VOCA Program Guidelines, and the Office of Justice Programs Financial Guide.

All appropriate documentation must be maintained on file by the project and available for Cal EMA or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the Recipient may be ineligible for award of any future grants if the Cal EMA determines that any of the following has occurred: (1) the Recipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

CERTIFICATION

I, the official named below, am the same individual authorized to sign the Grant Award Agreement [Section 12 on Grant Award Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: 

Authorized Official's Typed Name: Birgit Fladager

Authorized Official's Title: District Attorney

Date Executed: 8-23-10


Federal Employer ID #: _____ Federal DUNS # _____

Current Central Contractor Registration Yes No

Executed in the City/County of: Stanislaus

AUTHORIZED BY: *(not applicable to State agencies)*

- | | |
|---|--|
| <input type="checkbox"/> City Financial Officer | <input checked="" type="checkbox"/> County Financial Officer |
| <input type="checkbox"/> City Manager | <input type="checkbox"/> County Manager |
| <input type="checkbox"/> Governing Board Chair | |

Signature: 

Typed Name: Larry Haugh

Title: Stanislaus County Auditor-Controller

BUDGET CATEGORY AND LINE ITEM DETAIL

A. Personal Services – Salaries/Employee Benefits	10 VOCA	10 VOCA MATCH CASH	VOCA MATCH In Kind	COST
Victim Advocate (Interviewer II)				\$0
				\$0
				\$0
Salary (\$1,411.54 x 26 pay periods)	36,700			\$36,700
Retirement (\$208.20 x 26 pay periods)	5,413			\$5,413
Health Insurance (\$535.39 x 26 pay periods)	13,920			\$13,920
Unemployment Insurance (\$27.08/month x 12 months)	325			\$325
Worker's Comp Insurance (\$11.42/month x 12 months)	137			\$137
FICA (\$87.52 x 26 pay periods)	2,276			\$2,276
Medicare (\$20.47 x 26 pay periods)	532			\$532
Employee Assistance Program (\$4.92/month x 12 months)	59			\$59
On-Call Pay (7 days x \$43/day x 14 weeks)	4,214			\$4,214
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
Accountant (10.5%)				\$0
				\$0
				\$0
Salary (\$4,056.16 x 12 x 10.5%)		5,111		\$5,111
Retirement (\$598.28 x 12 x 10.5%)		754		\$754
Health Insurance (\$582.16 x 12 x 10.5%)		734		\$734
Unemployment Insurance (\$27.08 x 12 x 10.5%)		34		\$34
Worker's Comp Insurance (\$11.42 x 12 x 10.5%)		14		\$14
FICA (\$251.48 x 12 x 10.5%)		317		\$317
Medicare (\$58.81 x 12 x 10.5%)		74		\$74
Employee Assistance Program (\$4.92 x 12 x 10.5%)		6		\$6
				\$0
				\$0
				\$0
				\$0
Program Coordinator (10.5%)				\$0
				\$0
				\$0
Salary (\$5,183.71 x 12 x 10.5%)+16		6,547		\$6,547
Retirement (\$764.60 x 12 x 10.5%)		963		\$963
Health Insurance (\$1,109 x 12 x 10.5%)		1,397		\$1,397
Employee Assistance Program (\$4.92 x 12 x 10.5%)		6		\$6
Unemployment Insurance (27.08 x 12 x 10.5%)		34		\$34
Worker's Comp Insurance (11.42 x 12 x 10.5%)		14		\$14
FICA/Medicare (396.55 x 12 x 10.5%)		500		\$500
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
Personal Section Totals	\$63,576	\$16,505		
PERSONAL TOTAL	<i>SK</i>	<i>SK</i>		\$80,081

SK

BUDGET CATEGORY AND LINE ITEM DETAIL

B. Operating Expenses	10 VOCA	10 VOCA MATCH CASH	VOCA Match in kind	COST
				\$0
Public Presentation & Outreach Materials	\$2,000			\$2,000
Brochures (10,000 x .15)	\$1,500			\$1,500
				\$0
				\$0
Advocate Phone Costs (\$20 x 12)	\$240			\$240
				\$0
DA Office Space (1 10' x 10' @ 21/Sq ft) (Work Space for Advocate)		\$2,100		\$2,100
				\$0
				\$0
Catholic Charities Contract for Social Workers Hours (approx 1,500 hrs x \$25/hr)	\$32,400		\$6,000	\$38,400
				\$0
SEAPA/Catholic Charities Office Space (1 10' x 10' @ 21/Sq ft) (Work Space for Volunteers and Staff)			\$2,100	\$2,100
				\$0
				\$0
GA Crime Victims Assistance Association Fees for Program Coordinator	\$100			\$100
				\$0
Program Office Supplies	\$600			\$600
				\$0
				\$0
CAL EMA TRAINING (Program Coordinator & Financial Person)				\$0
Mileage (400 miles x .50/mile)	\$200			\$200
Hotel (2 nights x \$140 x 2)	\$560			\$560
Meals (3 days x \$40/day x 2)	\$240			\$240
				\$0
NOVA CONFERENCE - AUG, 2011 (Advocate & Program Coordinator)				\$0
Registration (\$450 x 2)	\$900			\$900
Lodging (5 nights x \$100/night x 2)	\$1,000			\$1,000
Meals (6 days x \$40/day x 2)	\$480			\$480
Transportation-Airfare \$300 x 2	\$600			\$600
Airport Shuttle	\$25			\$25
				\$0
ELDER ABUSE/DEPENDENT ADULT CONFERENCE	\$2,500			\$2,500
*Co-sponsored by Victim Services and Catholic Charities-Mailings, Program Materials, Reproduction Costs, Trainer Fee				\$0
				\$0
				\$0
				\$0
				\$0
Operating Section Totals	\$43,245	\$2,100	\$8,100	
OPERATING TOTAL	<i>SK</i>	<i>8 10,200 SK</i>		\$53,445

AW

LEVS Budget Summary Report

UV10 Unserved/Underserved Victim Advocacy and Outreach Program Stanislaus County Unserved/Underserved Victim Advocacy & Outreach Program	Award #: UV10 01 0500 Award Period: 10/01/10 - 09/30/11 Latest Request: , Not Final 201
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A. Personal Services - Salaries/Employee Benefits

<u>F/S/L</u>	<u>Funding Source</u>	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
F	10VOCA	63,576	0	63,576	0	63,576
L	10VOCA	16,505	0	16,505	0	16,505
Total A. Personal Services - Salaries/Employee Benefits:		80,081	0	80,081	0	80,081

B. Operating Expenses

<u>F/S/L</u>	<u>Funding Source</u>	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
F	10VOCA	43,245	0	43,245	0	43,245
L	10VOCA	10,200	0	10,200	0	10,200
Total B. Operating Expenses:		53,445	0	53,445	0	53,445

C. Equipment

<u>F/S/L</u>	<u>Funding Source</u>	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
F	10VOCA	0	0	0	0	0
L	10VOCA	0	0	0	0	0
Total C. Equipment:		0	0	0	0	0

	<u>Budget Amount</u>	<u>Paid/Expended</u>	<u>Balance</u>	<u>Pending</u>	<u>Pending Balance</u>
Total Local Match:	26,705	0	26,705	0	26,705
Total Funded:	106,821	0	106,821	0	106,821
Total Project Cost:	133,526	0	133,526	0	133,526

F/S/L (Funding Types): F=Federal, S=State, L=Local Match

Paid/Expended=posted in ledger w/Claim Schedule, Pending=Processed, but not yet in Claim Schedule

12/29/10