

CITY OF EL PASO, TEXAS
AGENDA ITEM DEPARTMENT HEAD'S SUMMARY FORM

DEPARTMENT: POLICE

AGENDA DATE: October 16, 2007

CONTACT PERSON/PHONE: ASSISTANT CHIEF PAUL CROSS / 564-7310
Jorge Acosta / 564-7119

DISTRICT(S) AFFECTED: Citywide

SUBJECT:

To approve an amendment to the Resolution authorizing the City Manager to electronically submit a grant proposal to the Criminal Justice Division (Office of the Governor of the State of Texas) for the Violence Against Women ACT (VAWA) grant program in the amount of \$75,860.40 with an in-kind match of \$54,253.53 and cash match of \$19,368.12 for a total of \$149,482.05. In Accordance with Ordinance 16016 Section 1, which states "that unless a granting agency requires that the City's top elected official be listed as the grant official in a grant document, the City Council hereby designates the City Manager or his or her designee to be listed as the authorized official and as the official with financial authority or similar designations on all grant applications, acceptances, and other documents and to sign all grant applications, acceptances, and other grant documents on behalf of the City of El Paso." The signature of the "Highest Elected Official" is not required for electronic submittal; Resolution of Mayor and City Council is required.

BACKGROUND / DISCUSSION:

The VAWA grant will fund the Domestic Abuse Response Team (DART) with program staff of two (2) caseworkers and one (1) police officer to provide a variety of services to local victims of crime.

PRIOR COUNCIL ACTION:

Yes. The City of El Paso received VAWA funding in 2006.

AMOUNT AND SOURCE OF FUNDING:

State Grant Proceeds will fund this item. Grant is in the amount of \$75,860.40 with an in-kind match of \$54,253.53 and cash match of \$19,368.12. Cash match is being provided from the General fund 21010050-01101-506000.

*****REQUIRED AUTHORIZATION*****

LEGAL: (if required) _____

FINANCE: (if required) _____

DEPARTMENT HEAD: _____

(Example: if RCA is initiated by Purchasing, client department should sign also)
Information copy to appropriate Deputy City Manager

APPROVED FOR AGENDA:

CITY MANAGER: _____

DATE: 10-5-07

07 OCT -8 AM 10:51
CITY CLERK DEPT.

RESOLUTION

07 OCT -8 AM 10:51

WHEREAS, the City Council adopted a Resolution on April 24, 2007 in which the El Paso City Council agrees to provide applicable matching funds for the said project as required by the Office of the Attorney General Crime Victim Services Division grant application; and

WHEREAS, it is necessary to revise the matching funds from the amount \$54,253.53 in in-kind to the amount of \$19,368.12 in cash match and \$54,253.53 in in-kind for a total of \$73,621.65 in matching funds; and

WHEREAS, except as previously and herein amended, the Resolution dated April 24, 2007 to operate the Domestic Abuse Response Team for the July 1, 2007 – June 30, 2008 year shall remain in full force and effect; and

WHEREAS, the El Paso City Council finds it in the best interest of the citizens of El Paso that the Victim Services Unit be operated for the July 1, 2007 – June 30, 2008 year; and

WHEREAS, the El Paso City Council agrees to provide the applicable cash match for the said project as required by the Office of the Attorney General Crime Victim Services Division grant application; and

WHEREAS, The El Paso City Council agrees that in the event of loss or misuse of the Criminal Justice Division funds, the El Paso City Council assures that the funds will be returned to the Office of the Attorney General Crime Victim Services Division in full.

WHEREAS, the El Paso City Council designates City Manager Joyce Wilson as the grantee's authorized official. The authorized official is given the power to apply for, accept, reject, alter or terminate, authorize the transfer of funds of the grant on behalf of the applicant agency.

NOW THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:

1. That the El Paso City Council approves submission of the grant application for the Other Victim Assistance Grants (OVAG) project to the Office of the Attorney General Crime Victim Services Division.
2. The City Manager be authorized to sign the grant application including all understandings and assurances contained therein, and apply for, accept, reject, alter or terminate the grant in the amount of \$75,860.40, from the City of El Paso Police Department to the Office of the Governor, Criminal Justice Division, the purpose of continuing the efforts of the Police Department's Domestic Abuse Response Team.

3. The City of El Paso agrees to provide a cash match in the amount of \$19,368.12 and in-kind match in the amount of \$54,253.53 for a total of \$73,621.65 in matching funds.

4. The El Paso City Council agrees that the existence of an award will not be used to offset or decrease total salaries, expenses and allowances that the City receives or provides to its Police Department at or after the time the grant is awarded.

5. The City Manager be authorized to sign Cooperative Working Agreements relating to the grant with the following agencies: El Paso County Sheriff's Office; Diocesan Migrant and Refugee Services, Inc., Battered Spouse Program; STARS; El Paso County District Attorney, Victim Assistance Program; El Paso County District Attorney, Domestic Violence Unit; El Paso County Attorney's Office, VOCA Protective Orders Program; Center Against Family Violence; Advocacy Center for the Children of El Paso; West Texas Community Supervision and Corrections Department, Victim Services Program; Rio Grande Council of Governments; and Family Service of El Paso, Crime Survivors Counseling Program.

ADOPTED this 16th day of October 2007.

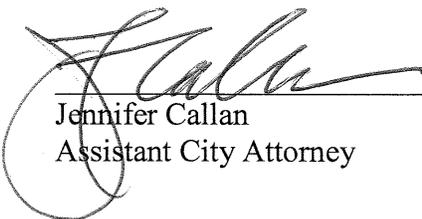
CITY OF EL PASO

John Cook
Mayor

ATTEST:

Richarda Duffy Momsen
City Clerk

APPROVED AS TO FORM:



Jennifer Callan
Assistant City Attorney

07 OCT - 8 AM 10:51
CITY CLERK DEPT.

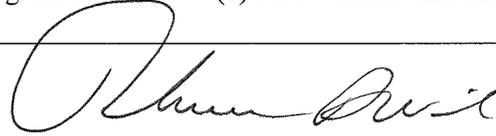
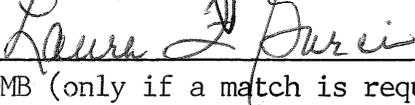
GRANT INFORMATION APPLICATION FORM (GIAF)

Departments planning to apply for a grant are requested to complete and submit this form, electronically or in person, to applicable individuals listed below for informational purposes only. This form must be submitted to Office of Management and Budget (OMB) **ONLY** if matching funds are required. **PRIOR AUTHORIZATION IS NOT REQUIRED FOR DEPARTMENTS TO APPLY FOR A GRANT.** If required by funding agency, the GIF may also be used, once application is completed, to certify legal review prior to obtaining City Manager's signature.

1. DEPARTMENT Grant Applicant/Contact Person Name: Monica Hernandez Title: Grant Planner Phone: (915) 564-7342 Requires Mayor or City Manager's Signature? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	2. GRANT DATA Grant Title: Violence Against Women Act Due Date: May 1, 2007 Fax No. (915) 564-7177
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3. FINANCIAL DATA Amount of Funding Request: \$75,860.40 Amount of Matching Funds: \$19,368.12 Amount of In-kind: \$54,253.53 Total Amount Requested \$149,482.05 Account No. for Matching Funds: 21010050-01101-506000	4. GRANT CLASSIFICATION <input type="checkbox"/> Competitive (award based on competition among eligible Applicants) <input type="checkbox"/> Entitlement (a set of funds determined under a formula grant) <input checked="" type="checkbox"/> Continuation (on-going funding from existing funding agency) <input type="checkbox"/> Other: Grant allows for operating/administrative costs: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Notice: Legal Department must provide grant review prior to City Manager or Mayor's signature if required by grant.
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Brief Summary of Grant Description: The VAWA grant will fund the Domestic Abuse Response Team (DART) with program staff of two (2) case workers and one (1) police officer to provide a variety of services to local victims of crime.

Required Signatures	
1. 	10-4-07
Department Director	Date
2. 	10/5/07
Financial Services / Grants Services Division	Date
3. 	10-5-07
Legal Department	Date
4. 	10-5-07
Dep. City Manager	Date
5. 	10/5/07
OMB (only if a match is required)	Date

07 OCT - 8 AM 10:51
CITY CLERK DEPT.

[Print This Page](#)**Agency Name:** El Paso, City of**Grant/App:** 1341310 **Start Date:** 9/1/2007 **End Date:** 8/31/2008**Project Title:** Domestic Abuse Response Team**Status:** Pending CJD Review

Eligibility Information

Introduction

The Criminal Justice Division (CJD) publishes funding opportunities, known as **Requests for Applications (RFA)**, through the Texas Secretary of State. Click [here](#) to visit the Secretary of State's website to locate the RFAs in the appropriate Texas Register issue.

In addition, CJD requires all applicants and grantee organizations to adhere to the *Texas Administrative Code (TAC)* as adopted. Click [here](#) to view the current TAC, or click [here](#) to view the previous versions of the TAC.

Submission Process

When applying for a grant pursuant to an **RFA** published in the *Texas Register* by CJD, applicants must submit their applications according to the requirements provided in the **RFA**. CJD may also consider applications for grants that are not submitted pursuant to an **RFA**. Applicants will be selected in accordance with *1 TAC*, §3.7.

Selection Process

All applications submitted to CJD are reviewed for eligibility, reasonableness, availability of funding, and cost-effectiveness. For applications submitted pursuant to an **RFA**, the executive director will select a review group, COG, or other designee to prioritize the applications and submit a priority listing to the executive director, who will render the final funding decision. A review group may include staff members, experts in a relevant field, and members of an advisory board or council. For more information regarding the selection process, see *1 TAC*, §3.7.

Funding Decisions

All grant funding decisions rest completely within the discretionary authority of CJD. The receipt of an application for grant funding by CJD does not obligate CJD to fund the grant or to fund it at the amount requested.

Neither the approval of a project nor any grant award shall commit or obligate CJD in any way to make any additional, supplemental, continuation, or other award with respect to any approved project or portion thereof.

CJD makes no commitment that a grant, once funded, will receive priority consideration for subsequent funding. For more information regarding the application process, see *1 TAC*, §3.7 and 3.9.

Adoptions by Reference

All grantees receiving federal and state funds must comply with the applicable statutes, rules, regulations, and guidelines related to the funding source under which the grant is funded. In instances where both federal and state requirements apply to a grantee, the more restrictive requirement applies. For more information regarding grant funding, see *1 TAC*, §3.19.

Community Plans

Each community, consisting of a single county or a group of counties, must file with a COG a community plan that addresses the community's criminal justice priorities. A community plan should assess local trends and data; identify problems, resources, and priorities; develop effective strategies; and set goals and objectives. For more information regarding community plans, see *1 TAC*, §3.51.

Juvenile Justice and Youth Projects

Juvenile justice projects or projects serving delinquent or at-risk youth, regardless of the funding source, must address at least one of the priorities developed in coordination with the Governor's Juvenile Justice Advisory Board to be eligible for funding. For more information regarding these priorities, see *1 TAC*, §3.53.

Monitoring

CJD will monitor the activities of grantees as necessary to ensure that grant funds are used for authorized purposes in compliance with all applicable statutes, rules, regulations, guidelines, and the provisions of grant agreements, and that grantees achieve grant purposes. Grantees must make available to CJD or its agents all requested records relevant to a monitoring review. For more information regarding monitoring, see *1 TAC*, §3.2601.

Your organization's Texas Payee/Taxpayer ID Number:

17460007499009

Application Eligibility Certify:

Created on: 3/19/2007 10:48:32 AM By: Monica Hernandez

Profile Information

Introduction

The **Profile Details** section collects information about your organization such as the name of your agency and project title, the geographic area your project will serve and information about your grant officials.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

In addition, you have a 2-hour time limit for each tab where you will need to complete the information correctly and then click the **Save and Continue** button. There is a timestamp in the upper-right hand corner of the page that notes when you first clicked on the tab. From that point, you have 2 hours to complete the information on that tab correctly. If you do not complete the information correctly (for the required fields) and then you click on the **Save and Continue** button, you will be redirected to the eGrants Home Page. If this happens, your data will not be saved in the system. You may also choose to compose a message on this page for CJD to review. This can be done by typing in the **Notes By Grantee / CJD** message box.

Email Addresses & Grant Officials Information

Grant Officials Information:

Enter a valid and unique email address for each grant official and click the **Verify Email and Set Official to the Project** button. If you receive an error message regarding an email address, the grant official you are trying to assign to the project has not registered for a user account in eGrants. Please inform the agency's grant official or designee that they must log in to the [eGrants Home Page](#), and register for a user account. If you need technical assistance, please contact the [eGrants Help Desk](#) by email.

Updating Grant Officials:

To reassign a grant official - **Authorized Official**, **Financial Officer**, or **Project Director** - to your grant project, ensure that the new official registers for a user account in eGrants *first*, then download the 'Designation of Grant Officials Change Form'. If your organization is designating a new Authorized Official, check your records to see if a new Resolution is required. Upload the new Resolution to your grant project on the 'Summary / Upload Files' sub-tab. Then, fax the signed form to CJD at (512) 475-2440. Once CJD receives the signed form (and a revised Resolution if applicable), then CJD will update your grant project in eGrants.

Forms

[Designation of Grant Officials Change Form](#) - used to assign or reassign grant officials.

Getting Started

On this tab you will notice a certain icon that is displayed.

-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Applicant Agency Name: El Paso, City of**Project Title:** Domestic Abuse Response Team**Division or Unit to Administer the Project:** Police Department - Victim Services**Address Line 1:** 2 Civic Center Plaza**Address Line 2:**

City/State/Zip: El Paso Texas 79901
Payment Address Line 1: 2 Civic Center Plaza
Payment Address Line 2: 7th Floor
Payment City/State/Zip: El Paso Texas 79901
Start Date: 9/1/2007
End Date: 8/31/2008

Regional Council of Governments(COG) within the Project's Impact Area: Rio Grande Council of Governments
Headquarter County: El Paso
Counties within Project's Impact Area: El Paso

Grant Officials:

Authorized Official

User Name: Carmen Arrieta-Candelaria
Email: arrietacx@elpasotexas.gov
Address 1: 2 Civic Center Plaza
Address 1:
City: El Paso, Texas 79901
Phone: 915-541-4293 Other Phone: 915-541-4011
Fax: 915-541-4446
Agency:
Title: Ms.
Salutation: Ms.

Project Director

User Name: Adrian Medina
Email: 1533@ci.el-paso.tx.us
Address 1: 911 North Raynor
Address 1:
City: El Paso, Texas 79903
Phone: 915-564-7037 Other Phone: 915-564-7342
Fax: 915-564-7177
Agency:
Title: Mr.
Salutation: Lieutenant

Financial Official

User Name: William Studer
Email: StuderWF@elpasotexas.gov
Address 1: 2 Civic Center Plaza 7th fl
Address 1:
City: El Paso, Texas 79901
Phone: 915-541-4215 Other Phone:
Fax: 915-541-4760
Agency:
Title: Mr.
Salutation: Mr.

Grant Writer

User Name: Monica Hernandez
Email: hernandezm2@ci.el-paso.tx.us
Address 1: 911 North Raynor
Address 1:
City: El Paso, Texas 79903
Phone: 915-564-7342 Other Phone: 915-564-7344
Fax: 915-564-7177
Agency:
Title: Ms.
Salutation: Ms.

Grant Vendor Information

Introduction

The **Grant Vendor** section of the application collects grant payment information for your organization. The following items will be auto-filled from previous data you supplied in eGrants: Organization Type, State Payee Identification Number, and Data Universal Numbering System (DUNS) identifier (if applicable).

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error

messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

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Direct Deposit

In order to receive payments from CJD, complete the Vendor Direct Deposit Authorization and Application for Payee Identification Number forms which can be downloaded from the Texas Comptroller's [website](https://fm.xcpa.state.tx.us/fm/forms/index.php) at <https://fm.xcpa.state.tx.us/fm/forms/index.php> and Form W-9 which can be downloaded from the Internal Revenue Services' [website](http://www.irs.gov/) at <http://www.irs.gov/>. Send these completed and signed forms to the Office of the Governor, Financial Services Division, Post Office Box 12428, Austin, Texas 78711.

Getting Started

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Organization Type: Unit of Local Government (City, Town, or Village)

Organization Option: applying to provide direct services to victims only

Applicant Agency's State Payee Identification Number (e.g., Federal Employer's Identification (FEI) Number or Vendor ID):
17460007499009

Data Universal Numbering System (DUNS): 058873019

Payment Address Line 1: 2 Civic Center Plaza

Payment Address Line 2: 7th Floor

Payment City/State/Zip: El Paso Texas 79901

Narrative Information

Introduction

The **Narrative** section is the description of your project. It is important that the information you provide about your project is clear and as concise as possible.

Note: All applicants must certify to the eligibility requirements specific to the fund source. The minimum requirements to complete this page are the **Program Requirements**, **Problem Statement**, **Supporting Data**, **Goal Statement**, and **Project Summary** sections. We recommend that you complete any sections applicable to your project to assist in the application review process.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

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Getting Started

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Primary Mission and Purpose

The S.T.O.P. Violence Against Women Act (VAWA) program provides assistance in developing and strengthening effective law

enforcement, prosecution, and court strategies to combat violent crimes against women and in developing and strengthening victim services in such cases.

Funding Levels

The anticipated funding levels for the VAWA program are as follows:

- Minimum Award - \$5,000
- Maximum Award – None
- The VAWA program requires a grantee match of at least 35% which is calculated on the total project costs, not on the amount requested from CJD. The match requirement may be met through cash and/or in-kind contributions. Nonprofit, nongovernmental victim service organization that assist domestic violence, dating violence, sexual assault, or stalking victims are exempt from the match requirement.

For more information regarding grantee match, please click on the **Budget** tab, and then click on the **Source of Match** tab in eGrants.

Note: If you include matching funds that exceed the minimum match requirement, you will be held to that amount throughout the grant period.

Program Requirements

Preferences – Preference will be given to applicants who demonstrate cost effective programs focused on a comprehensive and effective approach to services that compliment the Governor's strategies.

Program Emphasis – The applicant agrees to implement comprehensive strategies addressing violence against women that are sensitive to the concerns and safety of the victims and hold offenders accountable for their crimes.

Indicate the percentage (%) of your project that benefits:

Note: Although each area under the **Program Emphasis** section may not be applicable to all applicants, you must enter a numeric value in each box. Applicants should enter a zero ('0') in the boxes below if the area is not applicable to this project.

Victim Services – any nonprofit, nongovernmental organization that assists domestic violence, dating violence, sexual assault, or stalking victims.

0

Law Enforcement – any public agency charged with policing functions.

100

Prosecution – any public agency charged with direct responsibility for prosecuting criminal offenders.

0

Court – any court system responsible for addressing domestic violence, dating violence, sexual assault, or stalking.

0

Other – any initiative that indirectly affects victims of domestic violence, dating violence, sexual assault or stalking.

0

Forensic Medical Examination Payments – Applicants will not require victims of sexual assault to participate in the criminal justice system or cooperate with law enforcement in order to be provided with a forensic medical exam or to be reimbursed for charges incurred on account of such an exam.

Polygraph Testing Prohibition – Applicants will not ask or require an adult or child victim of an alleged sex offense to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an offense. In addition, the refusal of a victim to submit to a polygraph or other truth telling examination will not prevent the investigation, charging, or prosecution of an alleged sex offense.

Nondisclosure of Confidential or Private Information – Applicants will not disclose any personally identifying information or individual information collected in connection with services requested, utilized, or denied; or, reveal individual client information without informed, written, reasonably time-limited consent of the person about whom information is sought. If release of information is compelled by statutory or court mandate, applicants will make reasonable attempts to provide notice to victims affected by the disclosure of information and take steps necessary to protect the privacy and safety of the persons affected by the release of information.

Civil Rights Liaison - Applicants must designate a civil rights liaison who will serve as the grantee's civil rights point of contact and who will be responsible for ensuring that the grantee meets all applicable civil rights requirements. The designee will act as the grantee's liaison in civil rights matters with CJD and with the federal Office of Justice Programs.

Enter the Name of the Civil Rights Liaison:

Linda Ball Thomas

Enter the Address for the Civil Rights Liaison:

2 Civic Center Plaza 3rd Floor El Paso, TX 79901

Enter the Phone Number for the Civil Rights Liaison [(999) 999-9999]:
(915) 541-4105

Certification

Each applicant agency will certify to the specific criteria detailed above under **Program Requirements** to be eligible for funding under the S.T.O.P. Violence Against Women Act (VAWA) Fund Program Solicitations.

I certify to all of the above eligibility requirements.

Problem Statement:

Please provide a detailed account in the Problem Statement section of the existing issues your project will target.

Enter your problem statement:

El Paso has seen an increase in the need for immediate crisis intervention and stabilization to help female victims of crime begin the healing process immediately after a crime has been committed. A lack of awareness results in female victims who are uninformed about the rights and resources available to assist them with any physical or emotional trauma suffered as a result of a crime. The Domestic Abuse Response Team attempts to educate these victims about their rights and the various assistance services available.

Supporting Data:

Provide as much supporting data, to include baseline statistics and the sources of your data, which are pertinent to where the grant project is located and/or targeted. Do not use statewide data for a local problem or national data for a statewide problem.

Enter your supporting data:

In the City of El Paso the number of Incidents of Violence in 2006 was approximately 31,608. Number of Compensation Year Victims Served Applications 2006 10,848 1,060 2005 9,455 1,131 2004 9,920 1,199 2003 7,621 626 2002 7,032 577 Source: El Paso Police Department, City of El Paso

Community Plan:

For projects that have a local or regional impact target area, provide information regarding the community plan need(s) that your project will address.

Enter your community planning needs:

This project will help prevent domestic violence and family violence, and violence among females, as well as assist female victims of crime and neglect through the following activities: a. Providing the community with education and referrals for preventing violence. b. Assisting in obtaining protective orders through education and referrals. This project will also provide female victims of crime and neglect with support services and/or information and referral through the following: a. Identify multi-disciplinary, comprehensive psychotherapy and/or counseling programs. b. Provide female victims with referrals to emergency shelters, transitional living centers, and assist in locating permanent housing. c. Provide information about rights for crime victims, the state compensation fund, and facilitate an understanding among female victims as to the processes of the criminal justice system. d. Provide crisis intervention and outreach, and identify support groups for female victims of sexual assault and the significant others. e. Provide emotional support, grief counseling, conflict and trauma resolution, and identify group or family therapy for female victims of crime. f. Provide updates about their cases to female victims of crime as they progress through the criminal justice system. g. Assure that female victims know that they have the opportunity to submit a statement to the court regarding the impact of the crime committed against them and their families. The project will also coordinate community efforts in the assistance for female victims of crime by providing opportunities to use volunteers and student interns from the high school level to the post-graduate level in service learning situations. The project will provide adequate training and continuing education to service providers, volunteers and student interns.

Goal Statement:

Provide a brief description of the overall goals and objectives for this project.

Enter a description for the overall goals and objectives:

The goal of this project is to provide female victims of crime with an increased awareness of victim's rights, available resources and immediate crisis intervention.

Cooperative Working Agreement (CWA):

When a grantee intends to carry out a grant project through cooperating or participating with one or more outside organizations, the grantee must obtain authorized approval signatures on the cooperative working agreement (CWA) from each participating organization. Grantees must maintain on file a signed copy of all cooperative working agreements, and they must submit to CJD a list of each participating organization and a description of the purpose of each **CWA**. Cooperative working agreements do not involve an exchange of funds.

For this project, provide the name of the participating organization(s) and a brief description of the purpose(s) for the **CWA(s)**. You should only provide information here that this project's successful operation is contingent on for the named service or participation from the outside organization.

Note: A **Sample CWA** is available [here](#) for your convenience.

Enter your cooperating working agreement(s):

Continuation Projects:

For continuation projects only, if your current or previous year's project is NOT on schedule in accomplishing the stated objectives, briefly describe the major obstacles preventing your organization from successfully reaching the project objectives as stated within your previous grant application. (Data may be calculated on a pro-rated basis depending on how long the current or previous year's project has been

operating.)

Enter your current grant's progress:

Project Summary:

Briefly summarize the entire application, including the project's problem statement, supporting data, goal, target group, activities, and objectives. Be sure that the summary is easy to understand by a person not familiar with your project and that you are confident and comfortable with the information if it were to be released under a public information request.

Enter your summary statement for this project:

Female victims of family violence, sexual assault and stalking resulting in bodily injury, death or emotional trauma should receive immediate intervention at the scene of a crime from advocates trained in crisis intervention and stabilization to help victims start the healing process sooner. The Domestic Abuse Response Team (DART), is comprised of two case managers, one DART officer and ten trained volunteers who respond to crime scenes at the request of police dispatchers, police officers investigating the crime, the victim's families and/or at the request of the victim's themselves. The team will respond to each request and will provide crisis intervention, explain available services, make appropriate referrals and conduct follow-up sessions with each victim as needed. The team serves citizens of the City of El Paso (population 592,099 - US Census Bureau, 2004 Population Estimate - which falls within the jurisdiction of the El Paso Police Department (EPPD). The EPPD responded to approximately 31,608 incidents of violence in 2006. The team prioritizes incidents involving female victims of violent crime resulting in bodily injury, death or emotional trauma. The team responds to calls from patrol officers and supervisors and reports to crime scenes, hospitals or facilities where victims might be. They immediately assess the situation, determine what services are needed and assist the victims. The team is current on Texas Crime Victim Compensation requirements and benefits, available community resources and have a working knowledge of the criminal justice system. The team is trained in vicim awareness and sensitivity, cultural norms, crisis intervention and the completing of TCVC applications. They provide continuous training to current volunteers during regularly scheduled monthly meetings. The team will increase the volunteer pool by organizing at least two training sessions per year. The team will inform patrol officers about the services offered by attending training at the regional commands. The team proposes to increase the number of victims served, the number of call outs, the number of TCVC applications filed and increase their volunteer pool by 5% in 2007-2008.

Project Activities Information

Introduction

The **Project Activities** section of the application gathers information about the type of activities your project will incorporate.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

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Getting Started

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-  = a **pencil** icon - click on this icon to edit your selections.
-  = a **pencil** icon with a **red slash** through it – click on this icon to cancel your edits.
-  = a **red delete** icon – click on this icon to delete the item.
-  = a **diskette** icon - click on this icon to save your work. When this icon appears, it is your queue to save the item that you are working on; otherwise, your data will be lost.
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Reserved

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Selected Project Activities:

ACTIVITY	PERCENTAGE:	DESCRIPTION
Crisis Services	25.00	Emergency services provided to help victims during the crisis phase. Services include providing information and/or referrals, accompaniment, advocacy for all necessary crisis procedures (medical, law enforcement, legal, shelter, etc.), and crime victim compensation filing.
		Victims are identified soon after the offense, provided information on victims rights (e.g., restitution,

Legal Advocacy	25.00	crime victim compensation), and provided comprehensive crisis and follow-up support needed to keep them engaged in the investigation and prosecution process.
Public Presentations	25.00	Provide public education and enhance awareness of victims and victim services. Presentation topics include family violence, sexual assault, and how to help crime victims access services.
Training and Technology	25.00	Provide training to law enforcement and DART staff who respond to victims of crime. Training topics include sensitivity to victims issues, recognizing signs of abuse or exploitation, cultural sensitivity, or new laws.

Geographic Area:

The target geographic area for this project is the City of El Paso, Texas.

Target Audience:

The target audience is female victims of family violence, sexual assault, and stalking.

Gender:

The target gender of our project is female.

Ages:

This project targets age groups from 17 years of age and above.

Special Characteristics:

The special characteristics of our target group includes an underserved population consisting of a disadvantaged, monolingual Spanish population, and homeless.

Measures Information

Introduction

The **Project Measures** section of the application collects data to track the performance of your proposed project toward its stated objectives. Output measures demonstrate the level of activity of a project. Outcome measures demonstrate the impact of a project in a targeted area, reflecting the extent to which the goals and objectives of the project have been achieved. Output and outcome measures displayed on this page correspond to activities selected or created on the **Activities** page.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

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Reserved

This section left intentionally blank.

Objective Output Measures

	CURRENT	TARGET
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OUTPUT MEASURE	DATA	LEVEL
Number of active volunteers.	123	135
Number of community outreach efforts.	11	20
Number of times survivors are accompanied to court.	121	148
Number of new publications or presentations developed.	0	2
Number of presentations provided (by topic or target audience).	29	40
Number of publications or presentations revised.	0	2
Number of professionals trained (does not include program staff).	595	650
Number of safety plans developed.	2439	2500
Number of training events provided.	33	45
Number of training hours.	188	225
Number of victims seeking services who were not served.	0	0
Number of victims / survivors seeking services who were served.	6064	6200
Number of survivors assisted through legal process.	114	125
Number of survivors assisted with crime victim compensation applications.	1105	1125
Number of survivors provided information and / or referral.	6064	6200
Number of survivors provided with medical advocacy.	0	0
Number of survivors receiving crisis counseling.	1495	1550
Number of survivors receiving information and / or referral (in person / by phone).	6064	6200
Number of survivors receiving advocacy for emergency services (e.g., legal assistance, shelter, law enforcement, etc.).	1270	1400
Number of volunteers recruited.	80	95
Number of volunteers trained.	160	188

Custom Objective Output Measures

CUSTOM OUTPUT MEASURE	CURRENT DATA	TARGET LEVEL
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Objective Outcome Measures

OUTCOME MEASURE	CURRENT DATA	TARGET LEVEL
Number of child permanent placement achieved (for CASA programs).	0	0
Number of professionals with increased knowledge.	380	420
Number of clients returning for services as a result of a new victimization.	18	0
Number of clients returning for legal assistance as a result of a new victimization.	18	0
Number of subscribers issued publications or presentation materials.	250	325

Custom Objective Outcome Measures

CUSTOM OUTCOME MEASURE	CURRENT DATA	TARGET LEVEL
-------------------------------	---------------------	---------------------

Documents Information

Introduction

The **Supporting Documentation** section of the application contains general grantee requirements. Please select or enter the appropriate responses in the areas below.

Important Note Regarding Resolutions: CJD has implemented an "Upload" feature to enable applicants to submit resolutions from governing bodies electronically with their application. It is not necessary to submit your resolution to CJD by fax or email. If your application is awarded, CJD will place a special condition on each application submitted and notify your agency via email with instructions to upload the resolution to eGrants. At that time you will be required to login to eGrants and submit each resolution electronically using the "Upload" feature in eGrants. The special condition will be removed once the resolution is uploaded. Click on the **Upload Files** sub tab under the **Summary** tab in eGrants to upload documents at any time.

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Certification and Assurances

Each applicant must click on this link to review the standard [Certification and Assurances](#).

Resolution by Governing Body

Except for state agencies, each applicant must provide information related to the [resolution](#) from its governing body, such as the city council, county commissioners' court, school board, or board of directors. Please ensure that the resolution approved by your governing body addresses items one through four below.

1. Authorization by your governing body for the submission of the application to CJD that clearly identifies the name of the project for which funding is requested;
2. A commitment to provide all applicable matching funds;
3. A designation of the name and/or title of an authorized official who is given the authority to apply for, accept, reject, alter, or terminate a grant (Note: If a name is provided, you must update CJD should the official change during the grant period.); and
4. A written assurance that, in the event of loss or misuse of grant funds, the governing body will return all funds to CJD.

If your agency's governing body has approved a resolution for this project, enter the date for this approval below:

4/25/2007

Contract Compliance

Will CJD grant funds be used to support any contracts for professional services?

Select the Appropriate Response:

Yes

No

For applicant agencies that selected **Yes** above, describe how you will monitor the activities of the sub-contractor(s) for compliance with the contract provisions (including equipment purchases), deliverables, and all applicable statutes, rules, regulations, and guidelines governing this project.

Enter a description for monitoring contract compliance:

Lobbying

For applicant agencies requesting grant funds in excess of \$100,000, have any federally appropriated funds been paid or will be paid 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 awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant loan, or cooperative agreement?

Select the Appropriate Response:

- Yes
 No
 N/A

For applicant agencies that selected either **No** or **N/A** above, have any non-federal funds been paid or will be paid 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 in connection with this federal contract, loan, or cooperative agreement?

Select the Appropriate Response:

- Yes
 No
 N/A

Single Audit

Has the applicant agency expended combined grant federal funding or combined grant state funding of \$500,000 or more during the most recently completed fiscal year?

Select the Appropriate Response:

- Yes
 No

Enter the amount (\$) of combined Federal Funds:

55930067

Enter the amount (\$) of combined State Funds:

12476665

Enter the amount (\$) of Local Government Funds:

0

Enter the amount (\$) of Private Funds:

0

Provide the name and amount for any other source of financial support not listed above:

Other Sources of Financial Support:

Note: Applicants who expend less than \$500,000 in combined federal or combined state funds are exempt from the Single Audit Act and cannot charge audit costs to a CJD grant. However, CJD may require a limited scope audit as defined in OMB Circular A-133.

In addition, for applicant agencies that selected **Yes** above, provide the date of your organization's last annual single audit, performed by an independent auditor (in accordance with the Single Audit Act Amendments of 1996 and OMB Circular A-133).

Enter the date of your last annual single audit:

4/10/2006

Fiscal Year

Provide the begin and end date for the applicant agency's fiscal year (e.g., 09/01/20xx to 08/31/20xx).

Enter the Begin Date [mm/dd/yyyy]:

9/1/2007

Enter the End Date [mm/dd/yyyy]:

8/31/2008

Equal Employment Opportunity Plan (EEO)

Type I Entity: Defined as an applicant that meets one or more of the following criteria:

- the applicant has less than 50 employees;
- the applicant is a non-profit organization;
- the applicant is a medical institution;
- the applicant is an Indian tribe;
- the applicant is an educational institution, or
- the applicant is receiving a single award of less than \$25,000.

Requirements for a Type I Entity:

- The applicant is not required to prepare an EEOP because it is a Type I Entity as defined above, pursuant to 28 CFR 42.302; and
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

Type II Entity: Defined as an applicant that meets the following criteria:

- the applicant has 50 or more employees, and
- the applicant is receiving a single award of \$25,000 or more, but less than \$500,000.

Requirements for a Type II Entity: Federal law requires a Type II Entity to formulate an EEOP and keep it on file.

- The applicant agency is required to formulate an EEOP in accordance with 28 CFR 42.301, et seq., subpart E;
- the EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP is available for review by the public and employees or for review or audit by officials of CJD, CJD's designee, or the Office of Civil Rights, Office of Justice Programs, U.S. Department of Justice, as required by relevant laws and regulations;
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services; and
- the EEOP is required to be on file in the office of (enter the name and address where the EEOP is filed below):

Enter the name of the person responsible for the EEOP and the address of the office where the EEOP is filed:

Linda Ball Thomas, 2 Civic Center Plaza, Third Floor, El Paso, TX 79901

Type III Entity: Defined as an applicant that is NOT a Type I or Type II Entity.

Requirements for a Type III Entity: Federal law requires a Type III Entity to formulate an EEOP and submit it for approval to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.

- The EEOP is required to be formulated and signed into effect within the past two years by the proper authority;
- the EEOP has been submitted to the Office of Civil Rights (OCR), Office of Justice Programs, U.S. Department of Justice and has been approved by the OCR, or it will be submitted to the OCR for approval upon award of the grant, as required by relevant laws and regulations; and
- the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

Based on the definitions and requirements above, the applicant agency certifies to the following entity type:

Select the appropriate response:

- Type I Entity
 Type II Entity
 Type III Entity

Debarment

Each applicant agency will certify that it and its principles:

- 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 participation in this transaction by any federal department or agency;
- Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; or
- Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses unenumerated in section 1.2(a) in the Certification and Assurances document cited above in the **Introduction**; and have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default.

Select the appropriate response:

- I Certify
 Unable to Certify

If you selected **Unable to Certify** above, please provide an explanation as to why the applicant agency cannot certify the statements.

Enter the debarment justification:

Fiscal Capability Information

Introduction

This **Fiscal Capability** section of the application collects information from nonprofit corporations applying for CJD grant funds.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error

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Organizational Information

Enter the Year in which the Corporation was Founded:

Enter the Date that the IRS Letter Granted 501(c)(3) Tax Exemption Status:

Enter the Employer Identification Number Assigned by the IRS:

Enter the Charter Number assigned by the Texas Secretary of State:

Accounting System

The grantee organization must incorporate an accounting system that will track direct and indirect costs for the organization (general ledger) as well as direct and indirect costs by project (project ledger). The grantee must establish a time and effort system to track personnel costs by project. This should be reported on an hourly basis, or in increments of an hour.

Is there a list of your organization's accounts identified by a specific number (i.e., a general ledger of accounts).

Select the appropriate response:

- Yes
- No

Does the accounting system include a project ledger to record expenditures for each Program by required budget cost categories?

Select the appropriate response:

- Yes
- No

Is there a timekeeping system that allows for grant personnel to identify activity and requires signatures by the employee and his or her supervisor?

Select the appropriate response:

- Yes
- No

If you answered 'No' to any question above in the Accounting System section, in the space provided below explain what action will be taken to ensure accountability.

Enter your explanation:

Financial Capability

Grant agencies should prepare annual financial statements. At a minimum, current internal balance sheet and income statements are required. A balance sheet is a statement of financial position for a grant agency disclosing assets, liabilities, and retained earnings at a given point in time. An income statement is a summary of revenue and expenses for a grant agency during a fiscal year.

Has the grant agency undergone an independent audit?

Select the appropriate response:

- Yes
- No

Does the organization prepare financial statements at least annually?

Select the appropriate response:

- Yes
- No

According to the organization's most recent Audit or Balance Sheet, are the current total assets greater than the liabilities?

Select the appropriate response:

- Yes
- No

If you selected 'No' to any question above under the Financial Capability section, in the space provided below explain what action will be taken to ensure accountability.

Enter your explanation:

Budgetary Controls

Grant agencies should establish a system to track expenditures against budget and / or funded amounts.

Are there budgetary controls in effect (e.g., comparison of budget with actual expenditures on a monthly basis) to include drawing down grant funds in excess of:

a) Total funds authorized on the Statement of Grant Award?

- Yes
 No

b) Total funds available for any budget category as stipulated on the Statement of Grant Award?

- Yes
 No

If you selected 'No' to any question above under the Budgetary Controls section, in the space provided below please explain what action will be taken to ensure accountability.

Enter your explanation:

Internal Controls

Grant agencies must safeguard cash receipts, disbursements, and ensure a segregation of duties exist. For example, one person should not have authorization to sign checks and make deposits.

Are accounting entries supported by appropriate documentation (e.g., purchase orders, vouchers, receipts, invoices)?

Select the appropriate response:

- Yes
 No

Is there separation of responsibility in the receipt, payment, and recording of costs?

Select the appropriate response:

- Yes
 No

If you selected 'No' to any question above under the Internal Controls section, in the space provided below please explain what action will be taken to ensure accountability.

Enter your explanation:

Budget Details Information

Introduction

This **Budget** section of your application details budget line items for your proposed project. To create a new budget line item, click on the icon in the **New Budget Item** column. You will be directed to a different area on this page to make selections specific to the budget category. After making your selection, write a brief description of the line item in the **Expenditure Description** box and enter the amount of CJD funds, Cash Match, and if applicable, In Kind Match in the areas provided. In the percentage box, you can enter a percentage for Personnel or number of items to be purchased for Supplies and/or Equipment. When you have finished, click on the **Add New Budget Line Item** button. Repeat this process for each budget line item needed in each budget category. If you need to edit your entries, click on the '+' icon to expand the budget grid. You will notice that a *pencil* icon will display after expanding the grid. Click on the *pencil* icon to be directed to the editing section on this page and follow the instructions in this area to complete your edits.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

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-  = a **plus** icon – click on this icon to expand a list of items.
-  = a **minus** icon – click on this icon to collapse a list of items.

-  = a **new** icon – click on this icon to add a new item.
-  = a **pencil** icon - click on this icon to edit your selections.
-  = an **information** icon - this help icon is next to certain items that may need further explanation. Simply click and review the information provided in the pop up window.

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
Supplies and Direct Operating Expenses	Cellular, Fax, Pager, and/or Office Telephone	Airtime for three (3) cellular telephones @ \$50.00 per month, per telephone.	\$1,800.00	\$0.00	\$0.00	\$0.00	\$1,800.00	0
Personnel	Certified Peace Officer - Police Department	Police Officer - acts as a facilitator between EPPD and victims; addresses repeat calls; identifies training needs; conducts public information sessions and law enforcement training. Fringe benefits - FICA, Medicare, Workers Comp, Unemployment, Health & Life Insurance, Pension. Salary \$43,225.40 + Fringe \$11,028.13.	\$0.00	\$54,253.53	\$0.00	\$0.00	\$54,253.53	100
Personnel	Coordinator	Case Manager I - provides immediate crisis intervention, telephone contacts, information and referrals, assists with TCVC applications. Fringe Benefits - FICA, Medicare, Workers Compensation, Unemployment, Health & Life Insurance, and Pension. Salary \$28,840.00. Cash match Fringe \$9,684.06.	\$28,840.00	\$9,684.06	\$0.00	\$0.00	\$38,524.06	100
Personnel	Coordinator	Case Manager II - Provides immediate crisis intervention, telephone contacts, information and referrals, and assists with TCVC applications. Fringe Benefits - FICA, Medicare, Workers Compensation, Unemployment, Health & Life Insurance, and Pension. Salary \$28,840.00. Cash match Fringe \$9,684.06.	\$28,840.00	\$9,684.06	\$0.00	\$0.00	\$38,524.06	100
Travel and Training	In-State Registration Fees, Training, and/or Travel	In-state travel and training conferences using the El Paso Police Department's travel policies, which includes \$59.00 per diem and \$120.00 per night for lodging, plus lowest airfare and applicable conference fees.	\$8,880.40	\$0.00	\$0.00	\$0.00	\$8,880.40	0
Supplies and Direct Operating Expenses	Office Equipment and/or Furniture (based on price)	Copier Lease @ .239 per copy for 12,552 copies	\$3,000.00	\$0.00	\$0.00	\$0.00	\$3,000.00	0
Supplies and Direct Operating Expenses	Office Supplies (e.g., paper, postage, calculator)	Consumable office supplies (printer paper, staples, envelopes, tape, postage, pens).	\$4,500.00	\$0.00	\$0.00	\$0.00	\$4,500.00	0

Source of Match Information

Introduction

The **Source of Match** section of your application collects information regarding the source and amount of **Cash Match** and **In Kind Match**. Please enter the description and amounts of match in the spaces provided below and select whether the item is 'Cash Match' or 'In-Kind Match'. After entering an item click on the **Add New Item** button. When an item has been added, it will appear in the 'Edit the Source(s) of Match Reported' table. You may edit each of the items added to this table by clicking on the 'pencil' icon. If you edited an item in the table, click on the 'diskette' icon to save your edited entries.

For further information regarding matching funds refer to *1 TAC, §3.3*; for program income refer to *1 TAC, §3.73* and *§3.87*.

Click on the **Save and Continue** button at any time to save the information entered on this page. If you do not click on this button and navigate away from the page, your work will be lost. When you click the **Save and Continue** button, you may receive several error messages that instruct you to complete the required fields. Your data on any given tab will not save to the system until all required fields are complete and correct.

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Detail Source of Match/GPI:

DESCRIPTION	MATCH TYPE	AMOUNT
General Fund	Cash Match	\$73,621.65

Summary Source of Match/GPI:

Total Report	Cash Match	In Kind	GPI Federal Share	GPI State Share
\$73,621.65	\$73,621.65	\$0.00	\$0.00	\$0.00

Budget Summary Information

Budget Summary Information by Budget Category:

CATEGORY	CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
Personnel	\$57,680.00	\$73,621.65	\$0.00	\$0.00	\$131,301.65
Supplies and Direct Operating Expenses	\$9,300.00	\$0.00	\$0.00	\$0.00	\$9,300.00
Travel and Training	\$8,880.40	\$0.00	\$0.00	\$0.00	\$8,880.40

Budget Grand Total Information:

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CJD	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
\$75,860.40	\$73,621.65	\$0.00	\$0.00	\$149,482.05

Condition Of Fundings Information

DESCRIPTION	CREATED	MET	HOLD FUND
Resolution: The approved resolution uploaded in the eGrants system designates Joyce Wilson, City Manager as the Authorized Official and the eGrants Profile information has Carmen Arrieta-Candelaria as the Authorized Official. Please clarify and revise either the resolution or the eGrants system.	8/21/2007 3:48:00 PM	8/31/2007	False
	7/24/2007 3:39:23 PM		False
	7/24/2007 3:39:23 PM		False

You are logged in as **User Name:** EPPDGrants