



No. \_\_\_\_\_

Date: June 25, 2008 Meeting Date Request: July 1, 2008

Deadline for Action: July 1, 2008 Contact Person: Diana R. Serna

Department: Urban County Program Phone: (956) 787-8127 Fax: (956) 787-5291

Diana R. Serna, UCP Director : *[Signature]*

**Caption:**

The Urban County Program requests approval of Subrecipient Agreement with the Children's Advocacy Center (Abused & Neglected Children) in the amount of \$51,500.00 for Urban County Program Year 21 (2008).

**Background:**

All funding will be utilized for the payment of a voucher system for direct services provided by child forensic interviewers, child advocates, family counselors, nurses and executive director to abused and neglected children. (See the attached Exhibits)

**Subrecipient:** Children's Advocacy Center

<b>Individual Agreement amounts:</b>	Hidalgo County Precinct #1	10,000.00
	Hidalgo County Precinct #2	9,000.00
	Hidalgo County Precinct #3	15,000.00
	<u>Hidalgo County Precinct #4</u>	<u>17,500.00</u>

**Total Funding Amount:** \$51,500.00

Manager: \_\_\_\_\_ Finance: \_\_\_\_\_

**Please Initial for approval:**

Legal Counsel _____	Budget _____	Human Resources _____
Dept./Fund No. _____	Amt. Expended: \$ _____	Funds/Staffing Budgeted: Yes: _____ No: _____
Account Code: _____	Impact on Future Budget: Yes _____ No _____	

**Comments:**

**Action taken by Commissioner's Court:**

Approved \_\_\_\_\_ Tabled \_\_\_\_\_ Denied \_\_\_\_\_ Motion made by \_\_\_\_\_ Seconded \_\_\_\_\_ Vote \_\_\_\_\_

**Exhibit A  
STATEMENT OF WORK**

**Section I** In summary, describe the services that the agency / organization provide to the community.

The goal of this project is to continue reducing the emotional trauma on child victims of violent crime by providing a coordinated one-stop shop team investigation, child forensic interviews, sexual assault examinations, therapy/crisis intervention counseling, case review, case tracking and follow-up services using a multidisciplinary team approach.

**Section II** State the CDBG grant amount awarded and state the name of awarding City / Pct.

\$ 10,000 Awarded By: Pct. 1

**Section III** List the proposed type of expenditure(s) utilizing CDBG funds.  
(Salaries) of the Child Forensic Interviewer1 Child Forensic Interviewer 2, Child Forensic Interviewer 3, Child Advocate 1, Child Advocate 1, Child Advocate 2, Crime Victims Liaison/Support Advocate, Family Counselor, Nurse 1 Nurse 2 and Executive Director.

**Section IV** List the services that will be provided and how they will be performed as a result of CDBG funds.

Child Forensic Interviews, Crisis Intervention/Counseling, Therapy/ Support Groups, Follow-Up On Services Referred, Personal Advocacy, General Criminal Justice Support/Advocacy, Accompaniment (to hospital, court) when necessary, Assistance Filing Compensation Claims, Telephone Contact Information, and Referral Services

**Section V** As a result of the CDBG award; describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Figure 1.	2006	2007	Measurable Goal
Child abuse victims of all races between 2 through 17 years of age			
Number of Precinct # 1 Low - Moderate Income Cases	215	232	8% increases
Number of other Area Cases	788	781	
Grand Total	1,003	1,013	

**Section VI** Describe the program beneficiaries, estimated number to be serviced, economic background and area of residency.

This project target group is serious physically and sexually abused children in Hidalgo County Precinct # 1, outside city limits of Donna, Weslaco, Mercedes, Progreso Edcouch Elsa and La Villa inside city limits of Alamo. This group includes both female and male victims of all races, less than 17 years of age. Other underserved population will be victims of other violent crimes (e.g., murder, robbery assault etc.)

**Section VII** List all of the locations with physical address where the service(s) will be provided.

The services will be provided at the following address/location(s): A) Edinburg, TX (525 W. Wisconsin Rd.) Edinburg, TX 78539

Initials \_\_\_\_\_

**Exhibit B-1  
GRANT BUDGET**

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed two amendments to the grant budget for the term of the agreement.

TYPE OF EXPENDITURES	BUDGETED AMOUNT
<b>Salary/Benefits</b>	<b>\$ 10,000</b>
1) Child Forensic Interviewer 1	
2) Child Forensic Interviewer 2	
3) Child Forensic Interviewer 3	
4) Family Advocate 1	
5) Family Advocate 2	
4) Crime Victims Liaison/Support Advocate	
5) Family Counselor (LPC)	
6) Nurse 1	
7) Nurse 2	
8) Nurse 3	
9) Executive Director	
<b>TOTAL GRANT BUDGET</b>	<b>\$ 10,000</b>

Initials \_\_\_\_\_

**Exhibit B-2  
PAYMENT SCHEDULE**

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009 For the Months of...</b>	<b>Estimated Amount of Expenditures</b>	<b>Type of Budgeted Expenditures</b>
<b>JULY</b>	\$909.09	Salary
<b>AUGUST</b>	\$909.09	Salary
<b>SEPT</b>	\$909.09	Salary
<b>OCT</b>	\$909.09	Salary
<b>NOV</b>	\$909.09	Salary
<b>DEC</b>	\$909.09	Salary
<b>JAN</b>	\$909.09	Salary
<b>FEB</b>	\$909.09	Salary
<b>MAR</b>	\$909.09	Salary
<b>APR</b>	\$909.09	Salary
<b>MAY</b>	\$909.10	Salary
<b>JUNE</b>		
<b>TOTALS:</b>	<b>\$10,000</b>	

Initials \_\_\_\_\_

**Exhibit C**  
**SCHEDULE OF ACTIVITY**

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. Schedule should not exceed Subrecipient contract time frame of eleven months from effective contract date.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009</b> <b>For the months of...</b>	<b>Number of</b> <b><u>Unduplicated</u></b> <b>Beneficiaries to be</b> <b>Serviced</b>	<b>Services Provided</b>
<u>JULY</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>AUGUST</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>SEPT</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>OCT</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>NOV</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>DEC</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JAN</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>FEB</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAR</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>APR</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAY</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JUNE</u>	<u>10</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>

Initials \_\_\_\_\_

**Exhibit A  
STATEMENT OF WORK**

**Section I** In summary, describe the services that the agency / organization provide to the community.

The goal of this project is to continue reducing the emotional trauma on child victims of violent crime by providing a coordinated one-stop shop team investigation, child forensic interviews, sexual assault examinations, therapy/crisis intervention counseling, case review, case tracking and follow-up services using a multidisciplinary team approach.

**Section II** State the CDBG grant amount awarded and state the name of awarding City / Pct.

\$ 9,000 Awarded By: \_\_\_\_\_ Pct. 2

**Section III** List the proposed type of expenditure(s) utilizing CDBG funds.

(Salaries) of the Child Forensic Interviewer1 Child Forensic Interviewer 2, Child Forensic Interviewer 3, Child Advocate 1, Child Advocate 1, Child Advocate 2, Crime Victims Liaison/Support Advocate, Family Counselor, Nurse 1 Nurse 2 and Executive Director.

**Section IV** List the services that will be provided and how they will be performed as a result of CDBG funds.

Child Forensic Interviews, Crisis Intervention/Counseling, Therapy/ Support Groups, Follow-Up On Services Referred, Personal Advocacy, General Criminal Justice Support/Advocacy, Accompaniment (to hospital, court) when necessary, Assistance Filing Compensation Claims, Telephone Contact Information, and Referral Services

**Section V** As a result of the CDBG award; describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Figure 1.	2006	2007	Measurable Goal
Child abuse victims of all races between 2 through 17 years of age			
Number of Precinct # 2 Low - Moderate Income Cases	68	88	29% increases
Number of other Area Cases	935	925	
<b>Grand Total</b>	<b>1,003</b>	<b>1,013</b>	

**Section VI** Describe the program beneficiaries, estimated number to be serviced, economic background and area of residency.

This project target group is serious physically and sexually abused children in Hidalgo County Precinct #2, city of San Juan and city of Hidalgo. This group includes both female and male victims of all races, less than 17 years of age. Other underserved population will be victims of other violent crimes (e.g., murder, robbery assault etc.)

**Section VII** List all of the locations with physical address where the service(s) will be provided.

The services will be provided at the following address/location(s): A) Edinburg, TX (525 W. Wisconsin Rd.) Edinburg, TX 78539

Initials \_\_\_\_\_

**Exhibit B-1  
GRANT BUDGET**

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed two amendments to the grant budget for the term of the agreement.

<b>TYPE OF EXPENDITURES</b>	<b>BUDGETED AMOUNT</b>
<b>Salary/Benefits</b>	<b>\$ 9,000</b>
1) Child Forensic Interviewer 1	
2) Child Forensic Interviewer 2	
3) Child Forensic Interviewer 3	
4) Family Advocate 1	
5) Family Advocate 2	
4) Crime Victims Liaison/Support Advocate	
5) Family Counselor (LPC)	
6) Nurse 1	
7) Nurse 2	
8) Nurse 3	
9) Executive Director	
<b>TOTAL GRANT BUDGET</b>	<b>\$ 9,000</b>

Initials \_\_\_\_\_

**Exhibit B-2  
PAYMENT SCHEDULE**

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009 For the Months of...</b>	<b>Estimated Amount of Expenditures</b>	<b>Type of Budgeted Expenditures</b>
<b>JULY</b>	818.18	<b>Salary</b>
<b>AUGUST</b>	818.18	<b>Salary</b>
<b>SEPT</b>	818.18	<b>Salary</b>
<b>OCT</b>	818.18	<b>Salary</b>
<b>NOV</b>	818.18	<b>Salary</b>
<b>DEC</b>	818.18	<b>Salary</b>
<b>JAN</b>	818.18	<b>Salary</b>
<b>FEB</b>	818.18	<b>Salary</b>
<b>MAR</b>	818.18	<b>Salary</b>
<b>APR</b>	818.18	<b>Salary</b>
<b>MAY</b>	818.20	<b>Salary</b>
<b>JUNE</b>		
<b>TOTALS:</b>	<b>\$9,000</b>	

Initials \_\_\_\_\_

**Exhibit C**  
**SCHEDULE OF ACTIVITY**

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. Schedule should not exceed Subrecipient contract time frame of eleven months from effective contract date.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009</b> <b>For the months of....</b>	<b>Number of</b> <b><u>Unduplicated</u></b> <b>Beneficiaries to be</b> <b>Serviced</b>	<b>Services Provided</b>
<u>JULY</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>AUGUST</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>SEPT</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>OCT</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>NOV</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>DEC</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JAN</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>FEB</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAR</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>APR</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAY</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JUNE</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>

Initials \_\_\_\_\_

**Exhibit A  
STATEMENT OF WORK**

**Section I** In summary, describe the services that the agency / organization provide to the community.  
The goal of this project is to continue reducing the emotional trauma on child victims of violent crime by providing a coordinated one-stop shop team investigation, child forensic interviews, sexual assault examinations, therapy/crisis intervention counseling, case review, case tracking and follow-up services using a multidisciplinary team approach.

**Section II** State the CDBG grant amount awarded and state the name of awarding City / Pct.  
 \$ 15,000 Awarded By: \_\_\_\_\_ Pct. 3

**Section III** List the proposed type of expenditure(s) utilizing CDBG funds.  
(Salaries) of the Child Forensic Interviewer1 Child Forensic Interviewer 2, Child Forensic Interviewer 3, Child Advocate 1, Child Advocate 1, Child Advocate 2, Crime Victims Liaison/Support Advocate, Family Counselor, Nurse 1 Nurse 2 and Executive Director.

**Section IV** List the services that will be provided and how they will be performed as a result of CDBG funds.  
Child Forensic Interviews, Crisis Intervention/Counseling, Therapy/ Support Groups, Follow-Up On Services Referred, Personal Advocacy, General Criminal Justice Support/Advocacy, Accompaniment (to hospital, court) when necessary, Assistance Filing Compensation Claims, Telephone Contact Information, and Referral Services

**Section V** As a result of the CDBG award; describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Figure 1.	2006	2007	Measurable Goal
<b>Child abuse victims of all races between 2 through 17 years of age</b>			
Number of Precinct # 3 Low - Moderate Income Cases	84	104	24% Increase
Number of other Area Cases	919	929	
<b>Grand Total</b>	<b>1,003</b>	<b>1,033</b>	

**Section VI** Describe the program beneficiaries, estimated number to be serviced, economic background and area of residency.  
This project target group is serious physically and sexually abused children in Hidalgo County Precinct #3, outside city limits of Mission. This group includes both female and male victims of all races, less than 17 years of age. Other underserved population will be victims of other violent crimes (e.g., murder, robbery assault etc.)

**Section VII** List all of the locations with physical address where the service(s) will be provided.

The services will be provided at the following address/location(s): A) Edinburg, TX (525 W. Wisconsin Rd.) Edinburg, TX 78539

Initials \_\_\_\_\_

**Exhibit B-1  
GRANT BUDGET**

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed two amendments to the grant budget for the term of the agreement.

<b>TYPE OF EXPENDITURES</b>	<b>BUDGETED AMOUNT</b>
<b>Salary/Benefits</b>	<b>\$ 15,000</b>
1) Child Forensic Interviewer 1	
2) Child Forensic Interviewer 2	
3) Child Forensic Interviewer 3	
4) Family Advocate 1	
5) Family Advocate 2	
4) Crime Victims Liaison/Support Advocate	
5) Family Counselor (LPC)	
6) Nurse 1	
7) Nurse 2	
8) Nurse 3	
9) Executive Director	
<b>TOTAL GRANT BUDGET</b>	<b>\$ 15,000</b>

Initials \_\_\_\_\_

**Exhibit B-2  
PAYMENT SCHEDULE**

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009 For the Months of...</b>	<b>Estimated Amount of Expenditures</b>	<b>Type of Budgeted Expenditures</b>
<b>JULY</b>	1,363.63	<b>Salary</b>
<b>AUGUST</b>	1,363.63	<b>Salary</b>
<b>SEPT</b>	1,363.63	<b>Salary</b>
<b>OCT</b>	1,363.63	<b>Salary</b>
<b>NOV</b>	1,363.63	<b>Salary</b>
<b>DEC</b>	1,363.63	<b>Salary</b>
<b>JAN</b>	1,363.63	<b>Salary</b>
<b>FEB</b>	1,363.63	<b>Salary</b>
<b>MAR</b>	1,363.63	<b>Salary</b>
<b>APR</b>	1,363.63	<b>Salary</b>
<b>MAY</b>	1,363.70	<b>Salary</b>
<b>JUNE</b>		
<b>TOTALS:</b>	<b>\$15,000</b>	

Initials \_\_\_\_\_

**Exhibit C**  
**SCHEDULE OF ACTIVITY**

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. Schedule should not exceed Subrecipient contract time frame of eleven months from effective contract date.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009</b> <b>For the months of....</b>	<b>Number of</b> <b><u>Unduplicated</u></b> <b>Beneficiaries to be</b> <b>Serviced</b>	<b>Services Provided</b>
<u>JULY</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>AUGUST</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>SEPT</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>OCT</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>NOV</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>DEC</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JAN</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>FEB</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAR</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>APR</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAY</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JUNE</u>	<u>6</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>

Initials \_\_\_\_\_

**Exhibit A  
STATEMENT OF WORK**

**Section I**

In summary, describe the services that the agency / organization provide to the community.

The goal of this project is to continue reducing the emotional trauma on child victims of violent crime by providing a coordinated one-stop shop team investigation, child forensic interviews, sexual assault examinations, therapy/crisis intervention counseling, case review, case tracking and follow-up services using a multidisciplinary team approach.

**Section II**

State the CDBG grant amount awarded and state the name of awarding City / Pct.

\$ 17,500 Awarded By: \_\_\_\_\_ Pct. 4

**Section III**

List the proposed type of expenditure(s) utilizing CDBG funds.

(Salaries) of the Child Forensic Interviewer 1, Child Forensic Interviewer 2, Child Forensic Interviewer 3, Child Advocate 1, Child Advocate 1, Child Advocate 2, Crime Victims Liaison/Support Advocate, Family Counselor, Nurse 1 Nurse 2 and Executive Director.

**Section IV**

List the services that will be provided and how they will be performed as a result of CDBG funds.

Child Forensic Interviews, Crisis Intervention/Counseling, Therapy/ Support Groups, Follow-Up On Services Referred, Personal Advocacy, General Criminal Justice Support/Advocacy, Accompaniment (to hospital, court) when necessary, Assistance Filing Compensation Claims, Telephone Contact Information, and Referral Services

**Section V**

As a result of the CDBG award; describe how funds will provide an increase in services or provide a new service to extremely low and/or low to moderate income residents. (EX: Additional ESL classes will be offered; new sports program will be created for the youth, etc.)

Figure 1.	2005	2006	Measurable Goal
Child abuse victims of all races between 2 through 17 years of age			
Number of Precinct # 4 Low - Moderate Income Cases	50	80	60% increase
Number of other Area Cases	953	933	
<b>Grand Total</b>	<b>1,003</b>	<b>1,013</b>	

**Section VI**

Describe the program beneficiaries, estimated number to be serviced, economic background and area of residency.

This project target group is serious physically and sexually abused children in Hidalgo County Precinct #3, outside city limits of Edinburg. This group includes both female and male victims of all races, less than 17 years of age. Other underserved population will be victims of other violent crimes (e.g., murder, robbery assault etc.)

**Section VII**

List all of the locations with physical address where the service(s) will be provided.

The services will be provided at the following address/location(s): A) Edinburg, TX (525 W. Wisconsin Rd.) Edinburg, TX 78539

Initials \_\_\_\_\_

**Exhibit B-1  
GRANT BUDGET**

Subrecipient agrees to follow the approved list of expenditures. If necessary and upon Urban County approval, the Subrecipient will be allowed two amendments to the grant budget for the term of the agreement.

<b>TYPE OF EXPENDITURES</b>	<b>BUDGETED AMOUNT</b>
<b>Salary/Benefits</b>	<b>\$ 17,500</b>
1) Child Forensic Interviewer 1	
2) Child Forensic Interviewer 2	
3) Child Forensic Interviewer 3	
4) Family Advocate 1	
5) Family Advocate 2	
4) Crime Victims Liaison/Support Advocate	
5) Family Counselor (LPC)	
6) Nurse 1	
7) Nurse 2	
8) Nurse 3	
9) Executive Director	
<b>TOTAL GRANT BUDGET</b>	<b>\$ 17,500</b>

Initials \_\_\_\_\_

**Exhibit B-2  
PAYMENT SCHEDULE**

Subrecipient must submit a payment schedule to expend the CDBG award by completing the table below. Proposed changes to the payment schedule must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009 For the Months of...</b>	<b>Estimated Amount of Expenditures</b>	<b>Type of Budgeted Expenditures</b>
<b>JULY</b>	1,590.90	<b>Salary</b>
<b>AUGUST</b>	1,590.90	<b>Salary</b>
<b>SEPT</b>	1,590.90	<b>Salary</b>
<b>OCT</b>	1,590.90	<b>Salary</b>
<b>NOV</b>	1,590.90	<b>Salary</b>
<b>DEC</b>	1,590.90	<b>Salary</b>
<b>JAN</b>	1,590.90	<b>Salary</b>
<b>FEB</b>	1,590.90	<b>Salary</b>
<b>MAR</b>	1,590.90	<b>Salary</b>
<b>APR</b>	1,590.90	<b>Salary</b>
<b>MAY</b>	1,591.00	<b>Salary</b>
<b>JUNE</b>		
<b>TOTALS:</b>	<b>\$17,500</b>	

Initials \_\_\_\_\_

**Exhibit C**  
**SCHEDULE OF ACTIVITY**

Subrecipient hereby agrees to perform services as outlined in Exhibit A. A proposed monthly schedule of activity should be provided in the table below. Schedule should not exceed Subrecipient contract time frame of eleven months from effective contract date.

Proposed changes to the schedule of activity must be submitted in writing to UCP for review and approval prior to the proceeding month of the change. Subrecipient will be allowed up to two amendments for the term of the agreement.

<b>2008 - 2009</b> <b>For the months of...</b>	<b>Number of</b> <b><u>Unduplicated</u></b> <b>Beneficiaries to be</b> <b>Serviced</b>	<b>Services Provided</b>
<u>JULY</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>AUGUST</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>SEPT</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>OCT</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>NOV</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>DEC</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JAN</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>FEB</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAR</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>APR</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>MAY</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>
<u>JUNE</u>	<u>5</u>	<u>One-on-one or small group on-site and off-site crisis interventions and forensic interviews</u>

Initials \_\_\_\_\_