

FINANCIAL COST ESTIMATE (OPTIONAL)

<b>1. NAME OF PROGRAM / ASSISTANCE:</b>		Local Border Security Program FY 2015																																																																					
<b>2. APPLICANT NAME:</b>		Hidalgo County Pct 3 Constable Department																																																																					
<b>3. ESTIMATED MONTHLY EXPENSES:</b>																																																																							
<i>a. Personnel Estimate</i>																																																																							
Position	Number of Personnel	Hourly Rate	Overtime Rate (Time and 1/2)	Number of O/T Hours per Person per Day	Number of Days	Salary	FICA 7.65%	Retirement 10.63%	Unemployment Comp 0.60%	W/C 3.12%	Total Salary & Fringe																																																												
Sgt II	1	\$23.57	\$35.36	4	6	\$848.52	\$64.91	\$90.20	\$5.09	\$26.47	\$1,035.19																																																												
Sr Deputy	3	\$22.95	\$34.43	4	6	\$2,478.60	\$189.61	\$263.48	\$14.87	\$77.33	\$3,023.89																																																												
Sr Deputy	2	\$21.43	\$32.15	4	6	\$1,542.96	\$118.04	\$164.02	\$9.26	\$48.14	\$1,882.41																																																												
Sr Deputy	1	\$20.70	\$31.05	4	6	\$745.20	\$57.01	\$79.21	\$4.47	\$23.25	\$909.14																																																												
Deputy	5	\$19.48	\$29.22	4	6	\$3,506.40	\$268.24	\$372.73	\$21.04	\$109.40	\$4,277.81																																																												
			\$0.00			\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00																																																												
<b>Total Personnel Estimates</b>										<b>\$11,128.45</b>																																																													
<i>b. Travel &amp; Per Diem Estimate</i>																																																																							
Position	Number of Personnel	Commercial Travel Costs	Mileage from / to County	Estimated Ave. Daily Miles	Number of Days	Total Mileage Cost	Hotel Rate \$85 Maximum	Hotel Tax Rate	Meals \$36 Maximum	Travel Totals																																																													
						\$0.00		\$0.00		\$0.00																																																													
						\$0.00		\$0.00		\$0.00																																																													
<b>Total Travel &amp; Per Diem Estimate</b>										<b>\$0.00</b>																																																													
<i>c. Operational Cost Estimate</i>																																																																							
	<b>Number of Cars</b>	<b>Number of Miles per Car</b>	<b>Number of Days</b>	<b>Rate per Mile</b>	<b>Subtotal</b>	<b>FILL IN SHADED FIELDS ONLY</b>																																																																	
Mileage	12	80	10	\$0.560	\$5,376.00																																																																		
Fuel Costs																																																																							
Other Costs																																																																							
<b>Total Operational Cost Estimate</b>					<b>\$5,376.00</b>																																																																		
*NOTE: Estimate either for fuel or mileage, not both.																																																																							
<b>4. NUMBER OF MONTHS IN THE GRANT PERIOD:</b>						<b>7. TOTAL AMOUNT OF APPLICATION</b>																																																																	
7						<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="10"></td> <td colspan="2" style="text-align: center;"><b>Total Grant</b></td> </tr> <tr> <td colspan="10">a. Personnel Estimate</td> <td colspan="2" style="text-align: right;">\$77,899.15</td> </tr> <tr> <td colspan="10">b. Travel &amp; Per Diem Estimate</td> <td colspan="2" style="text-align: right;">\$0.00</td> </tr> <tr> <td colspan="10">c. Operational Cost Estimate</td> <td colspan="2" style="text-align: right;">\$37,632.00</td> </tr> <tr> <td colspan="10" style="text-align: right;"><b>Total Expenses</b></td> <td colspan="2" style="text-align: right;"><b>\$115,531.15</b></td> </tr> </table>																<b>Total Grant</b>		a. Personnel Estimate										\$77,899.15		b. Travel & Per Diem Estimate										\$0.00		c. Operational Cost Estimate										\$37,632.00		<b>Total Expenses</b>										<b>\$115,531.15</b>	
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<b>5. ARE YOU PAID MONTHLY OR BI-MONTHLY:</b>																																																																							
BI-MONTHLY																																																																							
<b>6. INDICATE THE NUMBER OF HOURS IN YOUR PAY PERIOD:</b>																																																																							
80																																																																							
						<b>8. TYPE OF PAYMENT YOU PREFER: (check one)</b>																																																																	
						Reimbursement <input checked="" type="checkbox"/> ONE TIME Advance Payment Request <input type="checkbox"/>																																																																	