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Agency Name: Hidalgo County

Grant/App: 3848101 **Start Date:** 10/1/2019 **End Date:** 10/1/2020

Project Title: Human Trafficking Unit

Status: Application Pending Submission

Eligibility Information

Your organization's Texas Payee/Taxpayer ID Number:
746000717

Application Eligibility Certify:

Created on: 2/19/2019 11:51:45 AM By: Ricardo Rodriguez

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

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Status: Application Pending Submission

Profile Information

Applicant Agency Name: Hidalgo County
Project Title: Human Trafficking Unit
Division or Unit to Administer the Project: Hidalgo County Criminal District Attorney's Office
Address Line 1: 100 E Cano
Address Line 2:
City/State/Zip: Edinburg Texas 78539
Start Date: 10/1/2019
End Date: 10/1/2020

Regional Council of Governments(COG) within the Project's Impact Area: Lower Rio Grande Valley Development Council
Headquarter County: Hidalgo
Counties within Project's Impact Area:

Grant Officials:

Authorized Official

Name: Richard F. Cortez
Email: countyjudge@co.hidalgo.tx.us
Address 1: 100 East Cano, 2nd Floor
Address 1:
City: Edinburg, Texas 78539
Phone: 956-318-2600 Other Phone:
Fax: 956-318-2699
Title: The Honorable
Salutation: Judge
Position: Hidalgo County Judge

Project Director

Name: Ricardo Rodriguez
Email: ricardo.rodriguez@da.co.hidalgo.tx.us
Address 1: Hidalgo County Courthouse
Address 1: 100 N. Closner, Room 303
City: Edinburg, Texas 78539
Phone: 956-318-2300 Other Phone: 956-318-2310
Fax: 956-318-2078
Title: The Honorable
Salutation: Mr.
Position: Criminal District Attorney

Financial Official

Name: Maria Arcilia Duran
Email: arcilia.duran@auditor.co.hidalgo.tx.us
Address 1: 2808 S. Business Hwy 281
Address 1:
City: Edinburg, Texas 78539
Phone: 956-318-2511 Other Phone:
Fax: 956-318-2577
Title: Ms.
Salutation: Ms.
Position: County Auditor

Grant Writer

Name: Rosie Martinez
Email: rosa.martinez@da.co.hidalgo.tx.us
Address 1: 100 E Cano
Address 1: Administrative Bldg 2nd Floor
City: Edinburg, Texas 78539
Phone: 956-292-7616 Other Phone: 956-569-0231
Fax:
Title: Ms.
Salutation: Ms.
Position: Victims Unit Director

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Grant Vendor Information

Organization Type: County

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):
746000717

Data Universal Numbering System (DUNS):

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Narrative Information

Introduction

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Applicant agrees to not engage in activities that jeopardize victim safety, deter or prevent physical or emotional healing for victims, or allow offenders to escape responsibility for their actions.

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A peace officer or attorney representing the state may not 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 or on the basis of the results of a polygraph examination.

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Compliance with State and Federal Laws, Programs and Procedures

Local units of government, including cities, counties and other general purpose political subdivisions, as appropriate, and institutions of higher education that operate a law enforcement agency, must comply with all aspects of the programs and procedures utilized by the U.S. Department of Homeland Security ("DHS") to: (1) notify DHS of all information requested by DHS related to illegal aliens in Agency's custody; and (2) detain such illegal aliens in accordance with requests by DHS. Additionally, counties and municipalities may NOT have in effect, purport to have in effect, or make themselves subject to or bound by, any law, rule, policy, or practice (written or unwritten) that would: (1) require or authorize the public disclosure of federal law enforcement information in order to conceal, harbor, or shield from detection fugitives from justice or aliens illegally in the United States; or (2) impede federal officers from exercising authority under 8 U.S.C. § 1226(a), § 1226(c), § 1231(a), § 1357(a), § 1366(1), or § 1366(3). Lastly, eligible applicants must comply with all provisions, policies, and penalties found in Chapter 752, Subchapter C of the Texas Government Code.

Each local unit of government, and institution of higher education that operates a law enforcement agency, must download, complete and then upload into eGrants the CEO/Law Enforcement Certifications and Assurances Form certifying compliance with federal and state immigration enforcement requirements. This Form is required for each application submitted to OOG and is active until August 31, 2021 or the end of the grant period, whichever is later.

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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 must be designated. 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:

Enter the Address for the Civil Rights Liaison:

Enter the Phone Number for the Civil Rights Liaison [(999) 999-9999 x9999]:

Overall Certification

Each applicant agency must certify to the specific requirements detailed above as well as to comply with all requirements within the CJD Funding Announcement, the *Guide to Grants*, the *Grantee Conditions and Responsibilities*, any authorizing or applicable state and federal statutes and regulations to be eligible for this program.

I certify to all of the application content & requirements.

Project Abstract :

Problem Statement :

Supporting Data :

Project Approach & Activities:

Capacity & Capabilities:

Performance Management :

Data Management:

Target Group :

Evidence-Based Practices:

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Status: Application Pending Submission

Project Activities Information

Reserved

This section left intentionally blank.

Selected Project Activities:

ACTIVITY	PERCENTAGE:	DESCRIPTION
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CJD Purpose Areas

PERCENT DEDICATED	PURPOSE AREA	PURPOSE AREA DESCRIPTION
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Measures Information

Objective Output Measures

OUTPUT MEASURE	TARGET LEVEL
----------------	--------------

Objective Outcome Measures

OUTCOME MEASURE	TARGET LEVEL
-----------------	--------------

Custom Output Measures

CUSTOM OUTPUT MEASURE	TARGET LEVEL
-----------------------	--------------

Custom Outcome Measures

CUSTOM OUTCOME MEASURE	TARGET LEVEL
------------------------	--------------

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Budget Details Information

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
----------	-----------------	-------------	-----	---------------	------------------	-----	-------	--------

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Source of Match Information

Detail Source of Match/GPI:

DESCRIPTION	MATCH TYPE	AMOUNT
-------------	------------	--------

Summary Source of Match/GPI:

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

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Status: Application Pending Submission

Budget Summary Information

Budget Summary Information by Budget Category:

CATEGORY	OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
----------	-----	------------	---------------	-----	-------

Budget Grand Total Information:

OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

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Resolution from Governing Body

Applications from nonprofit corporations, local units of governments, and other political subdivisions must include a resolution that contains the following:

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.

Upon approval from your agency's governing body, upload the approved resolution to eGrants by clicking on the **Upload Files** sub-tab located in the **Summary** tab.

Contract Compliance

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

- 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.

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?

- 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?

- Yes
 No
 N/A

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]:

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

Sources of Financial Support

Each applicant must provide the amount of grant funds expended during the most recently completed fiscal year for the following sources:

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

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

Single Audit

Applicants who expend less than \$750,000 in federal grant funding or less than \$750,000 in state grant funding 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 2 CFR Part 200, Subpart F - Audit Requirements.

Has the applicant agency expended federal grant funding of \$750,000 or more, or state grant funding of \$750,000 or more during the most recently completed fiscal year?

- Yes
 No

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 State of Texas Single Audit Circular; or CFR Part 200, Subpart F - Audit Requirements.

Enter the date of your last annual single audit:

Debarment

Each applicant agency will certify that it and its principals (as defined in 2 CFR Part 180.995):

- 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 enumerated in the above bullet; 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.

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General Information and Instructions

Agency Type

Implementing Agency Type - Government

Which designation best describes your agency (select only one):

- Corrections
- Courts
- Juvenile justice
- Law enforcement
- Prosecutor
- Other – describe below

If Other is selected describe below:

Purpose of Award

Check all that apply:

- Continue an OOG-funded victim project funded in a previous year
- Expand or enhance an existing project not funded by OOG in the previous year
- Start up a new victim services project
- Start up a new Native American victim services project
- Expand or enhance an existing Native American project

Type of Crime Funding Distribution

Identify the percent of funding dedicated to each type of victimization. The percentages provided below should not include matching funds. Cumulative total for all types of victimization must equal 100%.

Type of Crime	Percent of Funds Dedicated to Crime Funds Dedicated to Crime	
	<i>Enter whole percentages only</i>	<i>Current Award x Percent Entered</i>
Child Physical Abuse	0	\$0.00
Child Sexual Abuse	0	\$0.00
Domestic and Family Violence	0	\$0.00
Child Sexual Assault	0	\$0.00
Adult Sexual Assault	0	\$0.00
Adults Molested As Children	0	\$0.00
Adult Human Trafficking	0	\$0.00

Child Human Trafficking 0

\$0.00

SUM of %'s
Sum of % MUST = 100% ⁰

SUM of Funds
Sum of Funds MUST = OOG Current Budget \$0.00

Use of Funds

Does this project provide **DIRECT SERVICES** to victims:

- Yes
- No

Types of Victimization

Check the types of victimization that best describe the victims the grant-funded project will serve. "Other" refers to a type that is not associated with any of the types provided in the list. Check all that apply:

Type of Victimization

- Adult sexual assault
- Adults sexually abused/assaulted as children
- Child physical abuse or neglect
- Child pornography
- Child sexual abuse/assault
- Domestic and/or family violence
- Human trafficking: labor
- Human trafficking: sex
- Stalking/harassment
- Teen dating victimization
- Other

If Other is TRUE provide explanation:

Budget and Staffing

Answer the questions below based on your current fiscal year. Report the total budget available to the victim services program by source of funding. Do not report the entire agency budget, unless the entire budget is devoted to victim services program.

Annual funding amounts allocated to all victimization programs and/or services for the current fiscal year:

Identify by source the amount of funds allocated to the victimization program/services budget for your agency. DO NOT COUNT FUNDS IN MORE THAN ONE CATEGORY. OTHER FEDERAL includes all federal funding except the award amount for this grant.

OOG Current Budget:	\$0.00
Other State Funds:	\$0.00
Other Local Funds:	\$0.00
Other Federal Funds:	\$0.00
Other Non-Federal Funds:	\$0.00
Total Victimization Program Budget:	\$0.00

Total number of paid staff for all grantee victimization program and/or services:

COUNT each staff member once. Both full and part time staff should be counted as one staff member. DO NOT prorate based on FTE.

Total number of staff:	0
------------------------	---

Number of staff hours funded through THIS grant award (plus match) for grantee's victimization programs and/or services:

Total COUNT of hours to work by all staff supporting the work of this award, including match.

Total number of hours:	0
------------------------	---

Number of volunteer staff supporting the work of this award (plus match) for grantee's victimization programs and/or services:

COUNT each volunteer staff once. DO NOT prorate based on FTE.

Total number of volunteer staff:	0
----------------------------------	---

Number of volunteer hours supporting the work of this award (plus match) for grantee's victimization programs:

Total COUNT of hours to work by all volunteers supporting the work of the award, including match.

Total hours to work by all volunteers:	0
--	---

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Grant/App: 3848101
Start Date: 10/1/2019
Project Title: Human Trafficking Unit
Status: Application Pending Submission
End Date: 10/1/2020
Fund Source: CU-Child Sex Trafficking Unit (CSTU)
Current Program Manager:
Liquidation Date:
Original Award: \$0.00
Current Budget: \$0.00
Current Award: \$0.00
CFDA: NONE
OOG Solicitation: CU20 PY20 Child Sex Trafficking - Prevention, Investigation and Prosecution (CSEC-Rider 25) **Announcement**

[Eligibility](#)
[Profile](#)
[Narrative](#)
[Activities](#)
[Measures](#)
[Budget](#)
[Documents](#)
[Victim.Services](#)
[Conditions.of.Funding](#)
[Submit.Application](#)
[Summary](#)
[Upload.Files](#)
[My.Home](#)

General Information and Instructions

Conditions of Funding

Current Condition(s) of Funding	Date Created	Date Met	Hold Funds-Project Level	Hold Funds-Line Item Level
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View All Current Budget Line Item Hold(s) for this Project

Condition(s) of Funding for a Budget Line Item(s) Hold: To access and view the **Condition(s) of Funding for a Budget Line Item(s) Hold** click the **Show Budget Line Item Condition of Funding** button and the applicable Condition(s) of Funding for a Budget Line Item(s) will display. To view the specific budget line item that the condition of funding has a 'Hold Expense' on, click the **View** in the Details column. The budget line item detail will display below in the **View those Budget Line Item(s) with a Pending Hold** section.

Show Budget Line Item Conditions of Funding

▼ Select the number of records to display per page.

View those Budget Line Item(s) with a Pending Hold

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Name: Maria Arcilia Duran
Email: arcilia.duran@auditor.co.hidalgo.tx.us
Address 1: 2808 S. Business Hwy 281
Address 1:
City: Edinburg, Texas 78539
Phone: 956-318-2511 Other Phone:
Fax: 956-318-2577
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Grant Writer

Name: Rosie Martinez
Email: rosa.martinez@da.co.hidalgo.tx.us
Address 1: 100 E Cano
Address 1: Administrative Bldg 2nd Floor
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Phone: 956-292-7616 Other Phone: 956-569-0231

Fax:

Title: Ms.

Salutation: Ms.

Position: Victims Unit Director

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Overall Certification

Each applicant agency must certify to the specific requirements detailed above as well as to comply with all requirements within the CJD Funding Announcement, the *Guide to Grants*, the *Grantee Conditions and Responsibilities*, any authorizing or applicable state and federal statutes and regulations to be eligible for this program.

_ I certify to all of the application content & requirements.

Project Abstract :

Problem Statement :

Supporting Data :

Project Approach & Activities:

Capacity & Capabilities:

Performance Management :

Data Management:

Target Group :

Evidence-Based Practices:

Project Activities Information

Reserved

This section left intentionally blank.

Selected Project Activities:

ACTIVITY	PERCENTAGE:	DESCRIPTION
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CJD Purpose Areas

PERCENT DEDICATED	PURPOSE AREA	PURPOSE AREA DESCRIPTION
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Measures Information

Objective Output Measures

OUTPUT MEASURE	TARGET LEVEL
----------------	--------------

Objective Outcome Measures

OUTCOME MEASURE	TARGET LEVEL
-----------------	--------------

Custom Output Measures

CUSTOM OUTPUT MEASURE	TARGET LEVEL
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Custom Outcome Measures

CUSTOM OUTCOME MEASURE	TARGET LEVEL
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Resolution from Governing Body

Applications from nonprofit corporations, local units of governments, and other political subdivisions must include a resolution that contains the following:

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.

Upon approval from your agency's governing body, upload the approved resolution to eGrants by clicking on the **Upload Files** sub-tab located in the **Summary** tab.

Contract Compliance

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

- 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.

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?

- 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?

- Yes
- No
- N/A

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]:

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

Sources of Financial Support

Each applicant must provide the amount of grant funds expended during the most recently completed fiscal year for the following sources:

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

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

Single Audit

Applicants who expend less than \$750,000 in federal grant funding or less than \$750,000 in state grant funding 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 2 CFR Part 200, Subpart F - Audit Requirements.

Has the applicant agency expended federal grant funding of \$750,000 or more, or state grant funding of \$750,000 or more during the most recently completed fiscal year?

- Yes
- No

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 State of Texas Single Audit Circular; or CFR Part 200, Subpart F - Audit Requirements.

Enter the date of your last annual single audit:

Debarment

Each applicant agency will certify that it and its principals (as defined in 2 CFR Part 180.995):

- 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 enumerated in the above bullet; 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.

Fiscal Capability Information

Section 1: Organizational Information

THIS SECTION APPLIES TO NONPROFIT CORPORATIONS ONLY

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:

Section 2: Accounting System

THIS SECTION APPLIES TO NONPROFIT CORPORATIONS ONLY

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:

Section 3: Financial Capability

THIS SECTION APPLIES TO NONPROFIT CORPORATIONS ONLY

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:

Section 4: Budgetary Controls

THIS SECTION APPLIES TO NONPROFIT CORPORATIONS ONLY

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:

Section 5: Internal Controls

THIS SECTION APPLIES TO NONPROFIT CORPORATIONS ONLY

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

Budget Information by Budget Line Item:

CATEGORY	SUB CATEGORY	DESCRIPTION	OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL	UNIT/%
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Source of Match Information

Detail Source of Match/GPI:

DESCRIPTION	MATCH TYPE	AMOUNT
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Summary Source of Match/GPI:

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

Budget Summary Information

Budget Summary Information by Budget Category:

CATEGORY	OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
----------	-----	------------	---------------	-----	-------

Budget Grand Total Information:

OOG	CASH MATCH	IN-KIND MATCH	GPI	TOTAL
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Condition Of Fundings Information

Condition of Funding / Project Requirement	Date Created	Date Met	Hold Funds	Hold Line Item Funds
--	--------------	----------	------------	----------------------

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

Agency Name: Hidalgo County Gran/App: 3848101 Start Date: 10/1/2019
 Project Title: Human Trafficking Unit Status: Application Pending Submission End Date: 10/1/2020 Fund Source: CU-Child Sex Trafficking Unit (CSTU)
 Current Program Manager: Liquidation Date:
 Original Award: \$0.00
 Current Budget: \$0.00 Current Award: \$0.00 CFDA: NONE OOG Solicitation: CU20 PY20 Child Sex Trafficking - Prevention, Investigation and Prosecution (CSEC-Ridor 25) **Announcement**

Eligibility Profile Narrative Activities Measures Budget Documents Victim.Services Conditions.of.Funding Submit.Application Summary Upload.Files My.Home
 Grant.History Award.Preview Grant.Issues

General Information and Instructions

Grant Award Documents

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[Responsibilities Memo](#)

[Print Statement of Grant Award](#)

Statement of Grant Award (SOGA)

The Statement of Grant Award is the official notice of award from the Office of the Governor (OOG). This Grant Agreement and all terms, conditions, provisions and obligations set forth herein shall be binding upon and shall inure to the benefit of the Parties and their respective successors and assigns and all other State of Texas agencies and any other agencies, departments, divisions, governmental entities, public corporations, and other entities which shall be successors to each of the Parties or which shall succeed to or become obligated to perform or become bound by any of the covenants, agreements or obligations hereunder of each of the Parties hereto.

The approved project narrative and budget for this award are reflected in eGrants on the 'Narrative' and 'Budget/Details' tabs. By accepting the Grant Award in eGrants, the Grantee agrees to strictly comply with the requirements and obligations of this Grant Agreement including any and all applicable federal and state statutes, regulations, policies, guidelines and requirements. In instances where conflicting requirements apply to a Grantee, the more restrictive requirement applies.

The Grant Agreement includes the Statement of Grant Award; the OOG Grantee Conditions and Responsibilities; the Grant Application in eGrants; and the other identified documents in the Grant Application and Grant Award, including but not limited to: 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; Chapter 783 of the Texas Government Code, Title 34, Part 1, Chapter 20, Subchapter E, Division 4 of the Texas Administrative Code, and the Uniform Grant Management Standards (UGMS) developed by the Comptroller of Public Accounts; the state Funding Announcement or Solicitation under which the grant application was made, and for federal funding, the Funding Announcement or Solicitation under which the OOG was awarded funds; and any applicable documents referenced in the documents listed above. For grants awarded from the U.S. Department of Justice, the current applicable version of the Department of Justice Grants Financial Guide and any applicable provisions in Title 28 of the CFR apply. For grants awarded from the Federal Emergency Management Agency (FEMA), all Information Bulletins and Policies published by the FEMA Grants Program Directorate apply. The OOG reserves the right to add additional responsibilities and requirements, with or without advance notice to the Grantee.

By clicking on the 'Accept' button within the 'Accept Award' tab, the Grantee accepts the responsibility for the grant project, agrees and certifies compliance with the requirements outlined in the Grant Agreement, including all provisions incorporated herein, and agrees with the following conditions of grant funding. The grantee's funds will not be released until the grantee has satisfied the requirements of the following Condition(s) of Funding and Other Fund-Specific Requirement(s), if any, cited below:

Grant Number:	3848101	Award Amount:	\$0.00
Date Awarded:	PREVIEW - AWARD NOT ACTIVE	Grantee Cash Match:	\$0.00
Grant Period:	10/01/2019 - 10/01/2020	Grantee In Kind Match:	\$0.00
Liquidation Date:	12/30/2020	Total Project Cost:	\$0.00
Program Fund:	CU-Child Sex Trafficking Unit (CSTU)		
Grantee Name:	Hidalgo County		
Project Title:	Human Trafficking Unit		
Grant Manager:			
DUNS Number:			

CFDA:	N/A
Federal Awarding Agency:	N/A - State Funds
Federal Award Date:	N/A - State Funds
Federal/State Award ID Number:	2020-CU-ST-0121
Total Federal Award/State Funds Appropriated:	\$1.00
Pass Thru Entity Name:	Texas Office of the Governor - Criminal Justice Division (CJD)
Is the Award R&D:	No
Federal/State Award Description:	To prevent victimization, identify and recover, promote healing, and bring justice to sex-trafficking survivors.

List of Application Errors and Incomplete Information

List of Application Errors and Incomplete Information:

Item(s) that Need to be Resolved	Tab Name
Error! The Project End Date day must be the last day of the month	Profile
Required: County / Counties within the Impact Area.	Profile
Required: Zip Code must be in the format #####-####.	Profile
Required: Data Universal Numbering System (DUNS) is a required field. You must enter the DUNS number assigned to your agency.	GrantVendor
Required: The Direct Deposit form must be uploaded before you can submit your application.	GrantVendor
Required: The W9 form must be uploaded before you can submit your application.	GrantVendor
Required: The Texas Payee ID form must be uploaded before you can submit your application.	GrantVendor
Required: Information regarding contract compliance.	Documents
Required: Information regarding lobbying assurances.	Documents
Required: Information regarding lobbying assurances.	Documents
Required: Information regarding the grantee's fiscal year.	Documents
Required: Information regarding the grantee's fiscal year.	Documents
Required: Information regarding Sources of Financial Support.	Documents
Required: Information regarding Sources of Financial Support.	Documents
Required: Information regarding single audits.	Documents
Required: Information regarding debarment certification.	Documents
Required: The name of the civil rights liaison.	Narrative
Required: The address for the civil rights liaison.	Narrative
Required: The phone number for the civil rights liaison.	Narrative
Required: Overall certification requirement.	Narrative
Required: All Narrative questions must be answered.	Narrative
Invalid: The Dedicated Percentage column for the OOG and Grantee-Defined Project Activities under the Detailed Project Activity Area must total 100 %.	Activities
Required: Information regarding the Budget Details tab.	Budget Details
You must select an Agency Type.	Victim Services
You must select at least one choice from Purpose of Award.	Victim Services
The Sum of Percents must equal 100 percent.	Victim Services
The Sum of Funds must equal the Current Award Amount.	Victim Services
You must check either Yes or No under Direct Services.	Victim Services
Please enter the Number of Paid Staff.	Victim Services

Agency Name: Hidalgo County

Grant/App: 3848101

Start Date: 10/1/2019

Project Title: Human Trafficking Unit

Status: Application Pending Submission

End Date: 10/1/2020

Fund Source: CU-Child Sex Trafficking Unit (CSTU)

Current Program Manager:

Liquidation Date:

Original Award: \$0.00

Current Budget: \$0.00

Current Award: \$0.00

CFDA: NONE

OOG Solicitation: CU20 PY20 Child Sex Trafficking - Prevention, Investigation and Prosecution (CSEC-Ridor 25) Announcement

[Eligibility](#) [Profile](#) [Narrative](#) [Activities](#) [Measures](#) [Budget](#) [Documents](#) [Victim.Services](#) [Conditions.of.Funding](#) [Submit.Application](#) [Summary](#) [Upload.Files](#) [My.Home](#)
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Grant Issues Summary

Go to	Message	Created by	Date
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Agency Name: Hidalgo County
Grant/App: 3348101
Start Date: 10/1/2019
Project Title: Human Trafficking Unit
Status: Application Pending Submission
End Date: 10/1/2020
Fund Source: CU-Child Sex Trafficking Unit (CSTU)
Current Program Manager:
Liquidation Date:
Original Award: \$0.00
Current Award: \$0.00
CFDA: NONE
OOG Solicitation: CU20 PY20 Child Sex Trafficking - Prevention, Investigation and Prosecution (CSEC-Rider 25) **Announcement**
Current Budget: \$0.00

[Eligibility](#)
[Profile](#)
[Narrative](#)
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General Information and Instructions

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[View When are My Uploaded Documents Archived?](#)

Upload Documents

Complete this section to upload documents to this project in eGrants.

Enter the Description of the File to be uploaded, then click the Browse button:

When the Name of the File displays in the box below, click on the Upload button:

 No file chosen

Uploaded Documents

This section displays all of the files that you have uploaded to eGrants to date. To view the contents of your file, click on the link in the 'Click to View' column.

10 Items Per Page ▼ Select the number of records to display per page.

Click to View	File Description	Uploaded By	Date / Time File Uploaded	Size of File
1				