| Grant Title/Project Name: | COVID-19 HAVA CARES Act |
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| Department: | Elections |
| Requestor: | Jenifer Favreau |
| Contact Email: | jfavreau@wilco.org |
| Contact Phone Number: | 512-943-1628 |
| Start Date: | 3/28/2020 |
| End Date: | 12/31/2020 |
| Please select request category: | Asset, Personnel, Service, \$509,529.12 |
| Describe the purpose of the grant in detail to include all requirements. | The grant will cover allowable expenses created by the COVID-19 response. The grant request will ask for reimbursement for the following areas: Voting Processing - costs for printing and mailing balllots, additional equippment, high-speed batch scanner used to digitize images for ballot board and archiving, electronic letter opener and miscellaneous items. Staffing - additional poll workers due to an additional week of early voting implemented by proclamation of Governor Abbot on May 11th, temporary help to assist wit cleaning and sanitizing of voting equipment. Security & Training - webinar services to facilitate virtual trainings, printing or purchase of traininng materials. Communicaton - purchase of signage at polling locations regarding COVID-19 precautions, social media to provide important information regarding safety, and information on curb side ballots. Supplies - Could purchase electronic poll books that do not require a signature, protective shields, hand sanitizing stations, hand sanitizer, antibacterial wipes disposable face masks, disposable gloves, paper towels, social distancing floor markers, etc. |
| Select the type of grant your department is applying for: | Federal Pass-thru |
| What is the amount of the grant? | \$509,529.12 |
| Please provide a breakdown of the total cost above. | All expenses that are requested for grant funding are necessary to hold the elections in July and November. These purchases will ensure the safety of the workers and those voting. The cost breakdown for each item is not yet availabile. |
| Is there a match requirement? | Yes |
| What is the source of the match? | Chapter 19 Matching Funds. |
| Does the grant cover the cost of the request 100%? | Yes |
| f not, how much is left unpaid? | |
| What is the plan to obtain grants/funds for the remaining amount? | |
| List other similar assets in the County and/or region and if they are available for use? | |
| How is this asset request different from any similar assets currently in the County and/or region? | |
| What types of events/purpose would this asset be used for that cannot be accomplished with a current County asset? | |
| How often do these events occur? | |
| dentify the number of personnel required to operate this asset and/or be available for the | |