

Application Information Form

Program:

Victim/Witness Assistance - VW24

Grant Subaward Performance Period:

10/01/2024 to 09/30/2025

Subrecipient:

County of Yolo - District Attorney's Office

Subrecipient UEI:

XS9DVURSTTA5

Subrecipient Federal Employer ID:

94-6000548

Implementing Agency:

Yolo County District Attorney

Payment Address

*301 2ND ST
WOODLAND
California
Yolo County
95695-3415*

Primary Location of Project/Services

Address

301 2ND ST

City:

Woodland

Address 2

County:

Yolo County

Zip Code:

95695-3415

Contact Information Form

Navigation Instructions:

- All required fields are marked with an *.
- Use the **SAVE** button at least every 30 minutes to avoid losing data.
- When done, click the **SAVE** button.

Form Specific Instructions:

- Individuals identified below will be the official points of contact for the Grant Subaward. For descriptions of these positions see Subrecipient Handbook Section 3.005 or other applicable Program Supplemental guidance.
- The Grant Subaward Director and Financial Officer cannot be the same individual.
- Each individual must have a unique email address.
- Organization Authorized Agents must be denoted as being a Grant Subaward Authorized Agent in order to submit the application.

Grant Subaward Contacts

Grant Subaward Director

First Name:	<i>Melinda</i>	Last Name:	<i>Aiello</i>
Title:	<i>Chief Deputy</i>	Email:	<i>melinda.aiello@yolocounty.gov</i>
Phone:	<i>(530) 219-8768</i>	State:	<i>CA</i>
Address:	<i>301 2ND ST</i>	Zip Code:	<i>95695-3415</i>
City:	<i>WOODLAND</i>		

Financial Officer

Name:	<i>Nikki</i>	Last Name:	<i>Abaurea</i>
Title:	<i>Chief Fiscal Admin Officer</i>	Email:	<i>nikki.abaurea@yolocounty.gov</i>
Phone:	<i>(530) 406-4505</i>	State:	<i>CA</i>
Address:	<i>301 2ND ST</i>	Zip Code:	<i>95695-3415</i>
City:	<i>WOODLAND</i>		

Programmatic Point of Contact:

Name:	<i>Laura</i>	Last Name:	<i>Valdes</i>
Title:	<i>Victim Services Program Manager</i>	Email:	<i>laura.valdes@yolocounty.gov</i>
Phone:	<i>(530) 666-8207</i>	State:	<i>CA</i>
Address:	<i>301 2ND ST</i>	Zip Code:	<i>95695-3415</i>
City:	<i>WOODLAND</i>		

Financial Point of Contact:

Name:	<i>Nancy</i>	Last Name:	<i>Wheeler</i>
Title:	<i>Senior Accounting Technician</i>	Email:	<i>nancy.wheeler@yolocounty.gov</i>
Phone:	<i>(530) 666-8385</i>	State:	<i>CA</i>
Address:	<i>301 2ND ST</i>	Zip Code:	<i>95695-3415</i>
City:	<i>WOODLAND</i>		

Chair of the Governing Body

Name:	<i>Lucas</i>	Last Name:	<i>Frerichs</i>
Title:	<i>Chair - Board of Supervisor</i>	Email:	<i>lucasf@yolocounty.gov</i>
Phone:	<i>(530) 219-8768</i>	State:	<i>CA</i>
Address:	<i>625 Court Street</i>	Zip Code:	<i>95695-3448</i>
City:	<i>Woodland</i>		

Grant Subaward Authorized Agent

Melinda Aiello

Grant Subaward Assurances Form

Applicable Grant Subaward Assurances

This document is a binding affirmation that the Subrecipient will comply with the assurances required by the federal program/fund source.

Assurance	Acknowledgement
Federal Fund Grant Subaward Assurances - 2024 VOCA.pdf	<input checked="" type="checkbox"/> *
Program Standard Assurance Addendum	<input checked="" type="checkbox"/> *
Standard Certification of Compliance	<input checked="" type="checkbox"/> *

Subrecipients expending \$1,000,000 or more in federal funds annually must comply with the single audit requirement established by the Federal Office of Management and Budget (OMB) Uniform Guidance 2 CFR Part 200, Subpart F and arrange for a single audit by an independent Certified Public Accountant (CPA) firm annually. Audits conducted under this section will be performed using the guidelines established by the American Institute of Certified Public Accountants (AICPA) for such audits. *

Subrecipient expends \$1,000,000 or more in federal funds annually.

Subrecipient does not expend \$1,000,000 or more in federal funds annually.

Federal Funding Accounting and Transparency Act (FFATA)

In the preceding year, did the Subrecipient receive:

Has the Subrecipient received \$25,000,000 or more in federal funds in the preceding fiscal years? *

Yes No

Does the amount of federal funds received, equal 80% or more of the Subrecipient's annual gross revenue? *

Yes No

Programmatic Narrative Form

Navigation Instructions:

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Narrative Questions/Responses

Question 1 *

Briefly describe the plan to provide all mandatory services outlined in the VW Supplemental Program Components and indicate any significant changes to your Program for the 2024-25 Grant Subaward performance period.

District Attorney Jeff Reisig provides unwavering support to the VS Program. This includes collaborative efforts with other elected officials in the city, county, and state. Yolo County VS is well-known throughout the state of California for its standards of quality. Other counties send new hires to shadow Yolo County's advocates.

Referrals have increased since law enforcement started handing out Marsy's cards upon first contact. Referrals are processed through the setup division in the DA's Office. Once a case is referred from a law enforcement agency to the DA's Office for review and criminal charging, an electronic referral is sent to VS. This process has been successful as shown by the many cases received for victim assistance at early stages of the criminal justice system. Receiving cases at early stages of the court process allows advocates to build a stronger rapport with the victim and facilitate necessary services so the CJ process is easier to understand and endure. The DA's office sends letters to victims when a charging decision has been made regarding their victimization. VS also receives referrals from local service providers. Clients also telephone VS seeking assistance after finding the program in an outreach event, online, or by word-of-mouth.

VS, and the DA's Office staff, regularly participate in community outreach events. Outreach is normal for the District Attorney's Office and opportunities are sought regularly. Mentionable outreach events include participation in the "Día de los Niño's" event; Phoenix Coalition Pride Day event; Immigrant Farmworkers' Seasonal Housing Outreach events; the annual National Crime Victims' Rights Week Victim Tribute in April 2024 was conducted in-person and virtually. Many guests attended the victim tribune ceremony. Along with the guests physically present, over 500 guests attended the ceremony through virtual connection - watching live.

VS has OA's with all local law enforcement agencies, as well as Empower Yolo: the county's family resource center. EY provides therapy and advocacy for all aged sexual assault victims, individual and family services in domestic violence, and a comprehensive family resource center. There is also an agreement with the Yolo County Department of Health and Human Services. Other local agencies with informal agreements, include: Crime Victims Assistance Network- iCAN (a statewide victim group), Mothers Against Drunk Driving (MADD),

Question 2 *

This section is for additional space to answer Question 1.

and Court Appointed Special Advocates (CASA).

VS also has a Memorandum of Understanding (MOU) with Sacramento Co. VS Assistance Center to receive, verify, and make recommendations on granting awards on applications completed by victims in Yolo County to the California Victim Compensation Program for reimbursement. This MOU expedites the claims process for victims, rather than filing claims with the State.

Advocacy continues through sentencing and may be restarted upon a defendant's release from custody. VS staff may accompany their clients and assigned Deputy DA to various prisons for hearings on inmates sentenced to life crimes. VS staff provide Victim Satisfaction Surveys at the end of cases. Started in 2008, they've provided a clearer picture of how well services are being provided by VS and the attorneys in the DA's Office. The survey expanded to include a law enforcement evaluation and probation component, enabling a well-rounded picture of services offered to victims and their experience. The surveys also identify areas of service that can benefit from improvement. Based on survey results, VS modified policies to provide victims and families with follow-up case disposition letters, feedback showed it was difficult to retain all the information shared in the many phone calls that take place throughout prosecution.

Contact with victims is documented in the case management software LawSuite, created by the County's Information Technology Department and the DA's Office IT Manager. The module tracks victims' contact made by program staff by service type. Those contacts are compiled with the computer program producing project statistics. The data is forwarded to the California Office of Emergency Services (CalOES), the Office for Victim Services (OVC) Performance Measurement Tool (PMT) on a regular basis and used by the DA's Office to report to the County Board of Supervisors through the annual report.

The staff of VS is paid through the Victim/Witness grant funds from CalOES and consists of one Program Manager, one Senior Program Assistant, three Program Assistants and one Legal Process Clerk. All assistant staff have attended the basic training and senior staff have completed the Advanced Advocate training mandated by CalOES.

Court hearings are attended via Zoom links or in person. Victim meetings are also done in a virtual setting or face-to-face. This was established during COVID and has become the new normal. This also applies to providing virtual

Question 3 *

Briefly describe the optional services listed in the VW Supplemental Program Components that your VW Center provides to victims/survivors.

Yolo County Victim Advocates are trained to provide required mandatory services, including: crisis intervention; emergency assistance to victims and their families; referral counseling for any needs the victim may have; direct/follow-up counseling for victims or survivors of crime; assistance with California Compensation Program (CalVCB) applications for reimbursement of expenses relating to a crime; property return from law enforcement to the victim or survivors; orientation to the criminal justice system; court support; presentations to area service agencies; public and media presentations; case dispositions on matters involving the victim; and employer/friend/relative notifications of the status of the criminal case at the victim's request. All these services are rights afforded to crime victims. Additional services include restitution assistance; witness notification; a court waiting area; temporary restraining order assistance; transportation assistance; employer intervention; and funeral arrangements. Other services rendered to Yolo County victims are those outlined in California Constitutional Law Proposition 9, which provide all victims with rights to justice and due process.

Question 4 *

Provide a brief status update of the VW Center's crisis response and Mass Victimization (MV) Assistance plan for crime-related MV/terrorism incidents. Include after hours contact information.

Major accomplishments the MVA program had during 2023/2024 include: continued assistance and lead in the Sierra Nevada North Region for MVA activities such as trainings, meetings, go-to person. They developed procedures and protocols for this call to emergency service and guided program staff in understanding their roles when a response is needed. They have continued to execute other MOU agreements with a wide variety of organizations and agencies. MOUs issued, including local schools, cities, law enforcement, CCVAA regional Victim Services and DA's Offices, hospitals, and OES departments. The MVA has met requirements of the grant to involve community-based organizations and form MOU agreements; including Salvation Army, Empower Yolo, Multi-Disciplinary Interview Center (MDIC), and the Woodland Opera House. The MVA is also executed an operational agreement with the Consulate General of Mexico. Regarding the CCVAA regional (Sierra Nevada North) agreements, Yolo County has taken a leadership role in assisting and organizing the Northern California MVA Programs. Building collaboration and ongoing quarterly meetings allow for trust and bonds to be formed. Yolo County is one of 14 counties in the Sierra Nevada North Mass Violence Advocate Collaboration (including: Yolo, Sacramento, Sutter, Yuba, Colusa, El Dorado, Placer, Nevada, Sierra, Plumas, Butte, Glen, Lake, and Mendocino). Yolo County leads and directs quarterly meetings, held via Zoom, To inspire new leadership and have each county practice the role of leading in emergency situations, Yolo County MVA has delegated a representative from each county to lead a quarterly meeting and report into Yolo. This cohort along with the relationships that have been built amount the counties, will prove invaluable in the event of an emergency event. Yolo County has played in the lead county and include other counties such as Butte County requesting to shadow the MVA to assist with the creation of their MVA program. The Yolo County Office of Emergency Services identifies Yolo County as a member of the Inland Region Crisis Response Group, to include Yolo, Sacramento, Stanislaus, Placer, El Dorado, Amador, Nevada, Alpine, Calaveras, San Joaquin, and Tulare. The MVA participates in these regional quarterly meetings.

The MVA provides training to law enforcement agencies, community agencies, and Yolo County staff. Victim advocates in Yolo County DA's Office are trained.

After hours contact: Laura Valdes 530 908-4817

Question 5 *

Describe how volunteers are used to support the Program. If volunteers are not used, email a completed Volunteer Waiver Request to your Grants Analyst for approval and upload the approved copy to your VW24 Application.

Volunteers, interns, and extra help staff are an intricate part of the Program. Victim Services currently houses seven interns/community volunteers and two extra help staff who are UC Davis, Woodland Community College, or California State University Sacramento students. All volunteers, student interns, and extra help staff must go through a background investigation, including "Live Scan" fingerprinting prior to their admission into the District Attorney's Office and before they can access sensitive/confidential information. The typical duties of Yolo County Victim Services volunteers/interns/extra help consist of court coverage; locating case status/dispositions; updating warrant case status; computer data entry; assisting with preparation of mailed documents to victim services clients; work up and submittal of CalVCB applications; filing files and documents; photocopying and all other duties as assigned and directed. All duties assigned to volunteers/interns/Extra Help are at the discretion, direction and under the supervision of the case assigned advocate. Volunteer/interns/extra help do not have direct contact with Victim Services clients unless they are directed, accompanied, and supervised by the case assigned advocate. All Victim Services volunteers and staff are required to keep monthly functional time sheets to properly report time keeping of volunteers and staff to the funding agency. These timesheets have been a huge help to the program in achieving the delivery of the best possible services to Yolo County victims of crime.

Question 6 *

List information for all field offices in the county including address, telephone numbers, employees assigned to the office, and supervisor(s) contact information.

301 Second Street Woodland, CA 95695 (530) 666-8187 Program Manager - Laura Valdes (530) 666-8207; (530) 908-4817

Question 7 *

This section is for additional space to answer Question 6.

N/A

Subrecipient Risk Assessment Form

Per Title 2 CFR § 200.332, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding.

How many years of experience does your current grant manager have managing grants?	>5 years
How many years of experience does your current bookkeeper/accounting staff have managing grants?	>5 years
How many grants does your organization currently receive?	>10 grants
What is the approximate total dollar amount of all grants your organization receives?	\$3,000,000
Are individual staff members assigned to work on multiple grants?	Yes
Do you use timesheets to track the time staff spend working on specific activities/projects?	Yes
How often does your organization have a financial audit?	Annually
Has your organization received any audit findings in the last three years?	Yes
Do you have a written plan to charge costs to grants?	Yes
Do you have written procurement policies?	Yes
Do you get multiple quotes or bids when buying items or services?	Always
How many years do you maintain receipts, deposits, cancelled checks, invoices?	>5 years
Do you have procedures to monitor grant funds passed through to other entities?	Yes

Funding Source Allocation

Instructions:

- Please be sure to review page for accuracy.

Funding Source Allocation

Funding Source Name	Fiscal Year	Type	Amount Available	Total Match Amount Required	Available Funding Total	Funding Requested	Cash Match Amount	In Kind Match Amount	Total Project Costs
2024 VCGF	2024	State	\$183,914	\$0	\$183,914	\$183,914	\$0	\$0	\$183,914
2024 VOCA	2024	Federal	\$222,639	\$0	\$222,639	\$222,639	\$0	\$0	\$222,639
2024 VWA0	2024	State	\$41,140	\$0	\$41,140	\$41,140	\$0	\$0	\$41,140
			\$447,693	\$0	\$447,693	\$447,693	\$0	\$0	\$447,693

Budget Cost Categories

Cost Form Selection(s)

- Personnel Costs
- Volunteer Costs
- Contractor/Consultant Costs
- Rent Costs
- Travel Costs
- Equipment Costs
- Financial Assistance For Client's Costs
- Second-Tier Subward Costs
- Audit Costs
- Indirect Costs
- Other Operating Costs
- Match Waiver

s.VW24 Yolo MW (002).pdf

Personnel Budget Category Form

Navigation Instructions:

- All required fields are marked with an *.
- Use the **SAVE** button at least every 30 minutes to avoid losing data.
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Personnel Costs

Budget/Project Line-Item *

Legal Process Clerk II

Description *

Provide direct services & support to victims per Govt Code 13897

*1 FTE @ 40 hours per week * 52 weeks * \$22.17 per hour = \$46,113.6 - Will only claim up to \$46,093*

Benefits are not included in grant funding request/funded by general funds

Hourly

Pay per Hour *	Number of Hours/Week *	Salary	Number of Weeks *	Hours of Full-Time Workweek *
\$22.17	40.00		52.00	40.00
	Full-Time Equivalent in Hours	FTE	Salary Calculation Total	

2,080

100.00%

\$46,114

Does this position provide benefits? *

Yes

No

Benefits Percentage *

72.15%

Benefits Calculation

\$33,271

Benefits Description *

Benefits = retirement @ 41.57%, health insurance @ 22.93%, and OASDI/Medicare @ 7.65%

Benefits not included in grant funding request

Calculation Total (Includes Benefits if provided)

\$79,385

Fund Source Allocations

Fund Source Allocations Instructions

- Select the Fund Source(s) to support the line-item
- Add amount(s)
- Click the + symbol to request money from another funding source.
- Click the - symbol to remove request from a funding source.

Applications

VW24027301

Funding Source Name	Fiscal Year	Type	Allocation	Cash Match Amount	In Kind Match Amount	Match Amount	Total	State Funds Used to Match Federal Requirements	Federal Fund
2024 VCGF	2024	State	\$23,057	\$0	\$0	\$23,057	\$		
2024 VOCA	2024	Federal	\$23,036	\$0	\$0	\$23,036	\$		
				\$46,093		\$0	\$0	\$0	\$46,093

Personnel Budget Category Form

Navigation Instructions:

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Personnel Costs

Budget/Project Line-Item *

Senior Victim Service Advocate
Description *

Develop comprehensive crisis response plan and protocols, community outreach, develop timelines to meet mass victimization objects, etc. Provide direct services & support to victims per Govt Code 13897

100% MVA Advocate

*1 FTE @ 40hrs per week * 52 weeks @ 37.42 per hour = \$77,834*

<input checked="" type="checkbox"/> Hourly		Salary	
Pay per Hour *	Number of Hours/Week *	Number of Weeks *	Hours of Full-Time Workweek *
\$37.42	40.00	52.00	40.00
	Full-Time Equivalent in Hours	FTE	Salary Calculation Total
	2,080	100.00%	\$77,834
Does this position provide benefits? *		<input checked="" type="checkbox"/> Yes	No
Benefits Percentage *	Benefits Calculation		
56.44 %	\$43,929		

Benefits Description *

Benefits = Retirement @ 41.57%, Health Insurance @ 7.22%, and OASDI/Medicare @ 7.65%

Will only claim up to \$2,031 for the grant period
Calculation Total (Includes Benefits if provided)

\$121,763

Fund Source Allocations

Fund Source Allocations Instructions

- Select the Fund Source(s) to support the line-item
- Add amount(s)
- Click the + symbol to request money from another funding source.
- Click the - symbol to remove request from a funding source.

Funding Source Name	Fiscal Year	Type	Allocation	Cash Match Amount	In Kind Match Amount	Match Amount	Total	State Funds Used to Match Federal Match Requirements	Federal Fund
2024 VCGF	2024	State	\$39,927	\$0	\$0	\$39,927	\$		
2024 VOCA	2024	Federal	\$39,938	\$0	\$0	\$39,938	\$		
				\$79,865		\$0	\$0	\$0	\$79,865

Personnel Budget Category Form

Navigation Instructions:

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Personnel Costs

Budget/Project Line-Item *

Victim Service Advocate # 2

Description *

Provide direct services & support to victims per Govt Code 13897

1 FTE @ 40hrs per week * 52 weeks * \$31.32 per hour = \$65,145.60 - Will only claim up to \$63,835

Hourly

Pay per Hour *	Number of Hours/Week *	Full-Time Equivalent in Hours	Salary	FTE	Number of Weeks *	Hours of Full-Time Workweek *	Salary Calculation Total	Benefits Calculation
\$31.32	40.00				52.00	40.00		
	2,080		100.00%		\$65,146			
Does this position provide benefits? *					<input checked="" type="checkbox"/> Yes	No		
Benefits Percentage *			Benefits Calculation					
87.39 %			\$56,931					
Benefits Description *								

Benefits = Retirement @ 41.57%, Health Insurance @ 38.17%, and OASDI/Medicare @ 7.65%

Benefits not included in grant funding request

Calculation Total (Includes Benefits if provided)

\$122,077

Fund Source Allocations

Fund Source Allocations Instructions

- Select the Fund Source(s) to support the line-item
- Add amount(s)
- Click the + symbol to request money from another funding source.
- Click the - symbol to remove request from a funding source.

Funding Source Name	Fiscal Year	Type	Allocation	Cash Match Amount	In Kind Match Amount	Match Amount	Total	State Funds Used to Match Federal Match Requirements	Federal Fund
2024 VCGF	2024	State	\$19,540	\$0	\$0	\$19,540	\$		
2024 VOCA	2024	Federal	\$31,534	\$0	\$0	\$31,534	\$		
2024 VWA0	2024	State	\$12,761	\$	\$	\$12,761	\$		
				\$63,835		\$0	\$0	\$0	\$63,835

Personnel Budget Category Form

Navigation Instructions:

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Personnel Costs

Budget/Project Line-Item *

Victim Service Advocate #3
Description *

Provide direct services & support to victims per Govt Code 13897

1 FTE @ 40 hours per week * 52 weeks * \$28.46 per hour = \$59,196.8. will only claim up to \$57,866

Pay per Hour *	Number of Hours/Week *	Salary	Number of Weeks *	Hours of Full-Time Workweek *
\$28.46	40.00		52.00	40.00

Full-Time Equivalent in Hours

FTE

Salary Calculation Total

2,080

100.00%

\$59,197

Does this position provide benefits? *

Yes

No

Benefits Percentage *

Benefits Calculation

91.92 %

\$54,414

Benefits Description *

Benefits = Retirement @ 41.57%, Health Insurance @ 42.70%, and OASDI/Medicare @ 7.65%

Benefits not included in grant funding request

Calculation Total (Includes Benefits if provided)

\$113,611

Fund Source Allocations

Fund Source Allocations Instructions

- Select the Fund Source(s) to support the line-item
- Add amount(s)
- Click the + symbol to request money from another funding source.
- Click the - symbol to remove request from a funding source.

Funding Source Name	Fiscal Year	Type	Allocation	Cash Match Amount	In Kind Match Amount	Match Amount	Total	State Funds Used to Match Federal Requirements	Federal Fund
2024 VWA0	2024	State	\$11,549	\$0	\$0	\$11,549	\$		
2024 VCGF	2024	State	\$17,712	\$0	\$0	\$17,712	\$		
2024 VOCA	2024	Federal	\$28,605	\$	\$	\$28,605	\$		
				\$57,866		\$0	\$0	\$0	\$57,866

Personnel Budget Category Form

Navigation Instructions:

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Personnel Costs

Budget/Project Line-Item *

Victim Service Advocates #1

Description *

Provide direct services & support to victims per Govt Code 13897

1 FTE @ 40 hours per week * 52 weeks * \$41.14 per hour = \$85,571.2. Will only claim up to \$84,240

<input checked="" type="checkbox"/> Hourly	Pay per Hour *	Number of Hours/Week *	Full-Time Equivalent in Hours	Salary	FTE	Number of Weeks *	Hours of Full-Time Workweek *	Salary Calculation Total	Benefits Calculation
	\$41.14	40.00				52.00	40.00		
			2,080	100.00%				\$85,571	
									<input checked="" type="checkbox"/> Yes No
								\$47,740	

Benefit rate is calculated at 7.65% OASDI/Medicare, 6.57% health insurance, and 41.57% in retirement cost.

Benefits are not included in grant funding request

Calculation Total (Includes Benefits if provided)

\$133,311

Fund Source Allocations

Fund Source Allocations Instructions

- Select the Fund Source(s) to support the line-item
- Add amount(s)
- Click the + symbol to request money from another funding source.
- Click the - symbol to remove request from a funding source.

Funding Source Name	Fiscal Year	Type	Allocation	Cash Match Amount	In Kind Match Amount	Match Amount	Total	State Funds Used to Match Federal Requirements	Federal Fund
2024 VCGF	2024	State	\$25,781	\$0	\$0	\$25,781	\$		
2024 VWA0	2024	State	\$16,830	\$0	\$0	\$16,830	\$		
2024 VOCA	2024	Federal	\$41,629	\$0	\$0	\$41,629	\$		
				\$84,240		\$0	\$0	\$0	\$84,240

Personnel Budget Category Form

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Personnel Costs

Budget/Project Line-Item *

Victim Service Program Manager
Description *

Provide direct services & support to victims per Govt Code 13897

*1 FTE @ 40hrs per week * 52 weeks * 55.67 per hour = \$115,793.6, \$95,649 (87.9% VS) \$20,144 (12.9% MVA)*

Provide direct services & support to victims per Govt Code 13897

<input checked="" type="checkbox"/> Hourly			Salary		
Pay per Hour *	Number of Hours/Week *			Number of Weeks *	Hours of Full-Time Workweek *
\$55.67	40.00			52.00	40.00
	Full-Time Equivalent in Hours		FTE	Salary Calculation Total	
	2,080		100.00%	\$115,794	
Does this position provide benefits? *				<input checked="" type="checkbox"/> Yes	No
Benefits Percentage *			Benefits Calculation		
72.76 %			\$84,251		
Benefits Description *					

Benefits = retirement @ 41.57%, Health Insurance @ 23.54%, OASDI/Medicare @ 7.65%
Benefits not included in grant funding request
Calculation Total (Includes Benefits if provided)

\$200,045

Fund Source Allocations

Fund Source Allocations Instructions

- Select the Fund Source(s) to support the line-item
- Add amount(s)
- Click the + symbol to request money from another funding source.
- Click the - symbol to remove request from a funding source.

Funding Source Name	Fiscal Year	Type	Allocation	Cash Match Amount	In Kind Match Amount	Match Amount	Total	State Funds Used to Match Federal Match Requirements	Federal Fund
2024 VOCA	2024	Federal	\$57,897	\$0	\$0	\$57,897	\$		
2024 VCGF	2024	State	\$57,897	\$0	\$0	\$57,897	\$		
				\$115,794		\$0		\$0	\$115,794

Application Signatures Form

Assurances/Signatures

Authorized Body of Five *

This certifies that each member of the Approval Authority has approved the HSGP application for funding.

Proof of Authority/Governing Body Resolution *

This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

Upload Proof of Authority/Governing Body Resolution *

Standard Certification of Compliance *

By checking this box, I certify the Subrecipient will comply with the requirements of the Standard Certification of Compliance. I am fully aware that this certification is made under penalty of perjury under the laws of the State of California.

Program Standard Assurance Addendum *

The undersigned represents that he/she is authorized to enter into this Addendum for and on behalf of the Applicant/Subrecipient. Applicant/Subrecipient understands that failure to comply with this Addendum or any of the assurances may result in suspension, termination, reduction, or de-obligation of funding. Applicant/Subrecipient agrees to repay funds in the event there is a violation of grant assurances.

Fund Assurances *

By checking this box, I certify I have read all applicable Federal Fund Grant Subaward Assurances and the Subrecipient will comply with the requirements. I am fully aware that this certification is made under penalty of perjury under the laws of the State of California.

California Public Records Act *

I understand the Grant Subaward applications are subject to the California Public Records Act, Government Code section 7920.000 et seq.

Additional information: Do not put any personally identifiable information or private information on this application. If you believe that any of the information you are putting on this application is exempt from the Public Records Act, please attach a statement that indicates what portions of the application and the basis for the exemption. Your statement that the information is not subject to the Public Records Act will not guarantee that the information will not be disclosed.

Upload California Public Records Act Exemption

Authorized Agent

Name: *Melinda Aiello*
Signature: *Melinda Aiello*

Title: *Chief Deputy District Attorney*
Date: *09/27/2024*