

COCHISE COUNTY GRANT APPROVAL FORM

Form Initiator: Patricia G. Munoz

Date Prepared: Jul 29, 2014

Point of Contact: Patricia G. Munoz

Phone Number: 5204328815

Department: Adult Probation

PRIMARY GRANT

Primary Grantor: Arizona Supreme Court Administrative Office of the Courts

CFDA: www.CFDA.gov

Grant Title: Adult Drug Court

Grant Term From: Jul 1, 2014

To: Jun 30, 2015

Total Award Amount: 14000

New Grant: Yes No

Grant No.:

Amendment No.:

Funding No.: 591

If new, Finance will assign a funding number.

Strategic Plan: Public Safety

District:

Mandated by Law? Yes No

Number of Positions Funded:

Asset(s) Acquired: N/A

Briefly describe the purpose of the grant.

To provide treatment services to offenders in the Drug Court program.

If this is a mandated service, cite the source. If not mandated, cite indications of local customer support for this

The Drug Court program in Cochise County has been operating for eight years. The program provides a higher level of supervision for clients who are deemed eligible to participate in the program.

PRIMARY FUNDING SOURCE:

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Other Funds:

Total Funds:

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Other Funds:

Total Funds:

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Total Revenue:

Has this amount been Yes No

Method of collecting funds: Lump Sum Quarterly Draw Reimbursement

Is revertment of unexpended funds required at the end of grant period? Yes No

(a) Total A-87 Cost Allocation: (b) Amount of overhead allowed by grant:

County Subsidy (a) - (b):

Does Grantor accept indirect costs as an allowable expenditure? Yes No

If yes, dollar amount or percentage allowed:

Second Grantor:

Grant Term From: To:

Secondary Award Amount:

Grant No.:

Amendment No.:

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Other Funds:

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Other Funds:

Total Revenue:

Has this amount been Yes No

Method of collecting funds: Lump Sum Quarterly Draw Reimbursement

Is reversion of unexpended funds required at the end of grant period? Yes No

(a) Total A-87 Cost Allocation: (b) Amount of overhead allowed by grant:

County Subsidy (a) - (b):

Does Grantor accept indirect costs as an allowable expenditure? Yes No

If yes, dollar amount or percentage allowed:

Is County match required? Yes No

County Match Source:

County match dollar amount or percentage:

Signature: Patricia S. Ymura

Board Approval: _____

Date _____

[Print Form](#)

[Submit by Email to Finance](#)

Please e-mail completed form to FinanceIdevore@cochise.az.gov.

NOTE: Once approved by the Board of Supervisors, the department is responsible for sending a copy of the fully executed grant document to the Finance Department

ADDENDUM A
ADULT DRUG COURT
COCHISE COUNTY
FY 2015

Addendum date: July 1, 2014

Note: This addendum supersedes all previously dated addendums.

TOTAL AMOUNT AWARDED:	\$14,000	<u>APPROVED FTE'S</u>	
		Personnel PO/SO	0.00
		Personnel - Other	<u>0.00</u>
		Total	0.00

BUDGET CATEGORY	APPROVED BUDGET
A. Personnel PO/SO	\$ -
B. Personnel - Other	\$ -
C. PO/SO ERE	\$ -
D. Other ERE	\$ -
E. Operating	\$ -
F. Contract	\$ 14,000
TOTAL AMOUNT TO BE DISBURSED	\$ 14,000

SCHEDULED DISBURSEMENTS:			
July 31, 2014	October 31, 2014	March 13, 2015	May 15, 2015
\$3,500	\$3,500	\$3,500	\$3,500

RETAINED FUNDS	AMOUNT
A. Vehicle	\$ -
B. Other	\$ -
TOTAL AMOUNT TO BE RETAINED	\$ -

Signed: **Kathy Waters**
 Digitally signed by Kathy Waters
 DN: cn=Kathy Waters, o=Arizona
 Supreme Court, ou=Adult Probation
 Services Division,
 email=kwaters@courts.az.gov, c=US
 Date: 2014.07.07 16:21:54 -07'00'

Director, Adult Probation Services Division

Signed: **Edward T. Gilligan**
 Digitally signed by Edward T. Gilligan
 DN: cn=Edward T. Gilligan, o=Arizona
 Superior Court in Cochise County,
 ou=Adult Probation Department,
 email=egilligan@cochise.az.gov, c=US
 Date: 2014.07.14 16:22:22 -07'00'

Chief Probation Officer

Finance Office Receipt: _____

Date _____