

## CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES

## GRANT SUBAWARD AMENDMENT

SUBAWARD #: VW16 36 0100

Federal Grant # \_\_\_\_\_ FIPS# 019-00000 Amendment# 1  
 Project # \_\_\_\_\_ DUNS# 932953037 Performance Period 07/01/2016 to 9/30/2017

This amendment is between the California Governor's Office of Emergency Services, hereafter called Cal OES, and the  
 Grant Subrecipient: County of Fresno

Grant Subaward #VW16 36 0100 is hereby amended to:

## AMENDMENT TO FUNDS:

Increase the 2016 VOCA funds by \$435,511 from \$1,053,452 to \$1,488,963;

Increase the Total Project Cost by \$435,511 from \$1,414,585 to \$ 1,850,096.

## AMENDMENT TO END DATE:

To change the end of Performance Period of the Subaward from 6/30/2017 to 9/30/2017.

All other provisions of this agreement shall remain as previously agreed upon.

ATTEST:

BERNICE E. SEIDEL, Clerk  
 Board of Supervisors

By Rose Cuyf  
 Deputy

Subrecipient (Certification and Signature of Authorized Agent)				
By (Authorized Signature)		Date		
<u>[Signature]</u>		<u>June 20, 2017</u>		
Printed Name		Title		
Brian Pacheco		Chairman, Board of Supervisors		
Address				
2281 Tulare St., Room 301, Fresno, CA 93721-2198				
Governor's Office of Emergency Services (For Cal OES use only)				
By Director or Designee		Date		
Printed Name		Title		
Amount Encumbered by this Document	Program/Component	Match	Item	
Prior Amount Encumbered	Fund Source	Chapter	Statute	Fiscal Year
Total Amount Encumbered to Date	PCA #	Project #	CFDA #	
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.				
Signature of Cal OES Fiscal Officer		Date		

# GRANT SUBAWARD MODIFICATION

MAIL TO: California Governor's Office Of Emergency Services  
3650 Schriever Ave  
Mather, CA 95655:

1. Subaward #: VW16 36 0100  
2. Modification # 1

3. Subrecipient/Implementing Agency: County of Fresno - Probation

4. Project Title: Victim Witness Assistance

5. Contact Person: Rosalinda Acosta Phone: (559) 600-1295 Fax: (559) 455-2427

Email Address: racosta@co.fresno.ca.us 6. Performance Period: 7/1/2016 to 9/30/2017

7. Payment Mailing Address: 3333 E American Ave Ste B, Fresno, CA 93725-9248 ☐ Check here if new.

## 8. Revision to Budget

FISCAL YEAR	Current Allocation Select Acronym from list	Grant Funds				Required Match				Total
		A. Personal Services	B. Operating Expenses	C. Equipment	Fund Total	A. Personal Services	B. Operating Expenses	C. Equipment	Match Total	
16	VOCA	\$949,928	\$45,524	\$58,000	\$1,053,452				\$0	\$1,053,452
16	VWR0	\$361,133			\$361,133				\$0	\$361,133
16	VWA0				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
Proposed Change {add (+) or subtract (-) from budgeted amount}										
16	VOCA	\$379,661	\$5,850	\$50,000	\$435,511				\$0	\$435,511
16	VWR0	(\$361,133)			(\$361,133)				\$0	(\$361,133)
16	VWA0	\$361,133			\$361,133				\$0	\$361,133
Yr	Fund				\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
Revised Allocation										
16	VOCA	\$1,329,589	\$51,374	\$108,000	\$1,488,963	\$0	\$0	\$0	\$0	\$1,488,963
16	VWR0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
16	VWA0	\$361,133	\$0	\$0	\$361,133	\$0	\$0	\$0	\$0	\$361,133
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

9. Justification for Modification: (If necessary, continue the justification on page 3.) ☒ Check to Total

Amendment attached to Increase VOCA 16 funding. Also attached is the budget that shows both changes for VOCA 16 increase and to move \$97,770 of the VWR0 16 to the Match 16 column for the match requirement. In addition, the end of Performance Period is being changed from 6/30/2017 to 9/30/2017.

## 10. Subrecipient Approvals

Rosalinda Acosta

Project Director (typed name)

Greg Reinke

Financial Officer (typed name)

Project Director Signature

Date

Financial Officer Signature

Date

Cal OES Approval Signatures

Cal OES USE ONLY

Program Specialist

Date

Unit Chief

Date

Grants Processing

Date

# **GRANT SUBAWARD MODIFICATION**

## **Cal OES 2-223 INSTRUCTIONS**

### **9. Justification for Modification (cont.)**

Change in Official Designated from Ernest Buddy Mendes to Brian Pacheco.

Change in Executive Director from Michael L. Elliott to Rick Chavez.

Change in Project Director title from Deputy Chief Probation Officer to Assistant Chief Probation Officer.

## PROJECT CONTACT INFORMATION

Subrecipient: County of Fresno

Subaward #: VW16 36 0100

Provide the name, title, address, telephone number, and e-mail address for the project contacts named below. **NOTE: If you use a PO Box address, a street address is also required for package delivery and site visit purposes.**

1. The **Project Director** for the project:

Name: Rosalinda Acosta

Title: Assistant Chief Probation Officer

Telephone #: (559) 600-1295

Fax#: (559) 455-2427

Email Address: racosta@co.fresno.ca.us

Address/City/Zip: 3333 E. American Ave. Ste B, Fresno, CA 93725-9248

2. The **Financial Officer** for the project:

Name: Greg Reinke

Title: Probation Administrative Division Director

Telephone #: (559) 600-1247

Fax#: (559) 455-4785

Email Address: greinke@co.fresno.ca.us

Address/City/Zip: 3333 E. American Ave. Ste B, Fresno, CA 93725-9248

3. The **person** having **Routine Programmatic** responsibility for the project:

Name: Nancy Dominguez

Title: Probation Services Manager

Telephone #: (559) 600-1675

Fax#: (559) 455-2430

Email Address: ndominguez@co.fresno.ca.us

Address/City/Zip: 2233 Kern Street, Fresno, CA 93720-2613

4. The **person** having **Routine Fiscal Responsibility** for the project:

Name: Norabelle Elegado

Title: Senior Accountant

Telephone #: (559) 600-1246

Fax#: (559) 600-1304

Email Address: nelegado@co.fresno.ca.us

Address/City/Zip: 3333 E. American Ave. Ste B, Fresno, CA 93725-9248

5. The **Executive Director** of a Community Based Organization or the **Chief Executive Officer** (i.e., chief of police, superintendent of schools) of the implementing agency:

Name: Rick Chavez

Title: Chief Probation Officer

Telephone #: (559) 600-1298

Fax#: (559) 455-2427

Email Address: RRChavez@co.fresno.ca.us

Address/City/Zip: 3333 E. American Ave. Ste B, Fresno, CA 93725-9248

6. The **Official Designated** by the Governing Board to enter into the Grant Subaward for the City/County or Community-Based Organization, as stated in Section 14 of the Grant Subaward Face Sheet:

Name: Brian Pacheco

Title: Chairman, Board of Supervisors

Telephone #: (559) 600-1000

Fax#: (559) 600-1609

Email Address: District1@co.fresno.ca.us

Address/City/Zip: 2281 Tulare St., Room 301, Fresno, CA 93721-2198

7. The **chair** of the **Governing Body** of the subrecipient:

Name: Brian Pacheco

Title: Chairman, Board of Supervisors

Telephone #: (559) 600-1000

Fax#: (559) 600-1609

Email Address: District1@co.fresno.ca.us

Address/City/Zip: 2281 Tulare St., Room 301, Fresno, CA 93721-2198

## SIGNATURE AUTHORIZATION

Subaward #: VW16 36 0100

Subrecipient: County of Fresno

Implementing Agency: Probation

\*The **Project Director** and **Financial Officer** are **REQUIRED** to sign this form.

\***Project Director:** Rosalinda Acosta

Signature: 

Date: 5/31/17

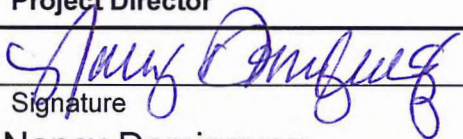
\***Financial Officer:** Greg Reinke

Signature: 

Date: 5-31-17

The following persons are authorized to sign for the

**Project Director**

Signature: 

Nancy Dominguez

Print Name

Signature

Print Name

Signature

Print Name

Signature

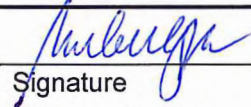
Print Name

Signature

Print Name

The following persons are authorized to sign for the

**Financial Officer**

Signature: 

Norabelle Elegado

Print Name

Signature

Print Name

Signature

Print Name

Signature

Print Name

Signature

Print Name



## CERTIFICATION OF ASSURANCE OF COMPLIANCE

I, **Brian Pacheco** hereby certify that  
(official authorized to sign Subaward; same person as Section 15 on Subaward Face Sheet)

SUBRECIPIENT: **County of Fresno**

IMPLEMENTING AGENCY: **Probation**

PROJECT TITLE: **Victim Witness Assistance**

is responsible for reviewing the *Subrecipient Handbook* and adhering to all of the Subaward requirements (state and/or federal) as directed by Cal OES including, but not limited to, the following areas:

### I. Federal Grant Funds

Subrecipients expending \$750,000 or more in federal grant funds annually are required to secure an audit pursuant to OMB Uniform Guidance 2 CFR Part 200, Subpart F and are allowed to utilize federal grant funds to budget for the audit costs. See Section 8000 of the Subrecipient Handbook for more detail.

- ☒ The above named Subrecipient receives \$750,000 or more in federal grant funds annually.
- ☐ The above named Subrecipient does not receive \$750,000 or more in federal grant funds annually.

### II. Equal Employment Opportunity — (*Subrecipient Handbook Section 215I*)

It is the public policy of the State of California to promote equal employment opportunity (EEO) by prohibiting discrimination or harassment in employment because of ancestry, age (over 40), color, disability (physical and mental, including HIV and AIDS), genetic information, gender, gender identity, gender expression, marital status, medical condition (genetic characteristics, cancer or a record or history of cancer), military, veteran status, national origin, race, religion (includes religious dress and grooming practices), sex (includes pregnancy, childbirth, breastfeeding and/or related medical conditions) sexual orientation, or request for family medical leave. **Cal OES-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.**

Please provide the following information:

Equal Employment Opportunity Officer: **Jean M. Rousseau**

Title: **County Administrative Officer**

Address: **2281 Tulare, Suite 304, Fresno, CA 93721**

Phone: **(559) 600-1710**

Email: **jrousseau@co.fresno.ca.us**

### **III. Drug-Free Workplace Act of 1990 – (Subrecipient Handbook, Section 2152)**

The State of California requires that every person or organization subawarded a grant or contract shall certify it will provide a drug-free workplace.

### **IV. California Environmental Quality Act (CEQA) – (Subrecipient Handbook, Section 2153)**

The California Environmental Quality Act (CEQA) (*Public Resources Code, Section 21000 et seq.*) requires all Cal OES funded projects to certify compliance with CEQA. Projects receiving funding must coordinate with their city or county planning agency to ensure that the project is compliance with CEQA requirements.

### **V. Lobbying – (Subrecipient Handbook Section 2154)**

Cal OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, 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 making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

### **VI. Debarment and Suspension – (Subrecipient Handbook Section 2155)**

*(This applies to federally funded grants only.)*

Cal OES-funded projects must certify that it and its principals 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 covered transactions by any federal department of agency.

### **VII. Proof of Authority from City Council/Governing Board**

The above-named organization (Applicant) accepts responsibility for and will comply with the requirement to obtain a signed resolution from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of Cal OES, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Subaward, including civil court actions for damages, shall be the responsibility of the grant Subrecipient and the authorizing agency. The State of California and Cal OES disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from Cal OES shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

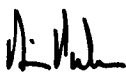
### **VIII. Civil Rights Compliance**

The Subrecipient complies will all laws that prohibit excluding, denying or discriminating against any person based on actual or perceived race, color, national origin, disability, religion, age, sex, gender identity, and sexual orientation in both the delivery of services and employment practices and does not use federal financial assistance to engage in explicitly religious activities.

All appropriate documentation must be maintained on file by the project and available for Cal OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the Subrecipient may be ineligible for subaward of any future grants if the Cal OES determines that any of the following has occurred: (1) the Subrecipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

### CERTIFICATION

I, the official named below, am the same individual authorized to sign the Subaward [Section 15 on Grant Subaward Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant Subrecipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: 

Authorized Official's Typed Name: Brian Pacheco

Authorized Official's Title: Chairman, Board of Supervisors

Date Executed: June 20, 2017

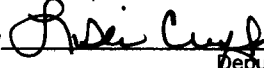
Federal Employer ID #: 95-6000512 Federal DUNS # 932953037

Current System for Award Management (SAM) Expiration Date: \_\_\_\_\_

Executed in the City/County of: Fresno/Fresno

ATTEST:

BERNICE E. SEIDEL, Clerk  
Board of Supervisors

By   
Deputy

**AUTHORIZED BY:** *(not applicable to State agencies)*

- |   |  |
|---|--|
| <input type="checkbox"/> City Financial Officer | <input checked="" type="checkbox"/> County Financial Officer |
| <input type="checkbox"/> City Manager           | <input type="checkbox"/> County Manager                      |
| <input type="checkbox"/> Governing Board Chair  |  |

Signature: 

Typed Name: Oscar J. Garcia

Title: Auditor-Controller/Treasurer-Tax Collector



## BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: County of Fresno		Subaward #: VW16350100				
		VOCA 16	MATCH		VWR0 16	COST
<b>A. Personal Services – Salaries/Employee Benefits</b>						
Project Coordinator (Probation Services Manager) 1 @ 100%						\$0
Salary - (\$3,024 x 1.1 pay period) = \$3,326 (FY17)			\$3,326			\$3,326
Salary - (\$3,106 x 25 pay period) = \$77,650 (FY17)			\$77,650			\$77,650
Salary - (\$3,106 x 6.5 pay period) = \$20,189 (FY18)			\$20,189			\$20,189
Unemployment - .00044 of salary - \$80,976 x .00044 = \$36 (will not claim) (FY17)						\$0
Unemployment - .00044 of salary - \$20,189 x .00044 = \$9 (will not claim) (FY18)						\$0
Retirement - 60.16% of Salary (\$80,976 x 60.16% = \$48,715) (FY17)			\$48,715			\$48,715
Retirement - 65.83% of Salary (\$20,189 x 65.83% = \$13,290) (FY18)			\$13,290			\$13,290
OASDI - 7.65% of Salary (\$80,976 x 7.65% = \$6,195) (FY17)			\$6,195			\$6,195
OASDI - 7.65% of Salary (\$20,189 x 7.65% = \$1,544) (FY18)			\$1,544			\$1,544
Health Insurance - \$5,821 per annum per FTE (FY17)			\$5,821			\$5,821
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE) (FY18)			\$1,839			\$1,839
Life & Disability Insurance - \$292 per annum (Manager only) (will not claim) (FY17)						\$0
Life & Disability Insurance - \$214 per annum (Manager only) (will not claim) (FY18)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY18)						\$0
SR. VICTIM WITNESS ADVOCATE 3 @ 100 % (Step 4)						
Salary - (\$1,866 x 26.1 pay period x 3 employees = \$146,108) (FY17)		\$146,108				\$146,108
Salary - (\$1,903 x 6.5 pay period x 3 employees = \$37,109) (FY18)		\$37,109				\$37,109
Unemployment - .00044 of salary (\$146,108 x .00044 = \$64) (will not claim) (FY17)						\$0
Unemployment - .00044 of salary (\$37,109 x .00044 = \$16) (will not claim) (FY18)						\$0
Retirement - 60.16% of Salary (\$146,108 x 60.16% = \$87,898) (FY17)		\$87,898				\$87,898
Retirement - 65.83% of Salary (\$37,109 x 65.83% = \$24,429) (FY18)		\$24,429				\$24,429
OASDI - 7.65% of Salary (\$146,108 x 7.65% = \$11,177) (FY17)		\$11,177				\$11,177
OASDI - 7.65% of Salary (\$37,109 x 7.65% = \$2,839) (FY18)		\$2,839				\$2,839
Health Insurance - \$5,821 per annum per FTE (\$5,821 x 3 = \$17,463) (FY17)		\$17,463				\$17,463
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE x 3 EE) (FY18)		\$5,518				\$5,518
Benefit Administration - \$128 per annum per FTE = (\$128 x 3 = \$384) (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE = (\$128/6.5 x 3 = \$59) (will not claim) (FY18)						\$0
VICTIM WITNESS ADVOCATE 1 @ 100 %						
Salary - (\$1,748 x 26.1 pay period = \$45,623) (FY17)		\$45,623				\$45,623
Salary - (\$1,783 x 6.5 pay period = \$11,590) (FY18)		\$11,590				\$11,590
Unemployment - .00044 of salary (\$45,623 x .00044 = \$20) (will not claim) (FY17)						\$0
Unemployment - .00044 of salary (\$11,590 x .00044 = \$5) (will not claim) (FY18)						\$0
Retirement - 60.16% of Salary (\$45,623 x 60.16% = \$27,447) (FY17)		\$27,447				\$27,447
Retirement - 65.83% of Salary (\$11,590 x 65.83% = \$7,629) (FY18)		\$7,629				\$7,629
OASDI - 7.65% of Salary (\$45,623 x 7.65% = \$3,490) (FY17)		\$3,490				\$3,490
OASDI - 7.65% of Salary (\$11,590 x 7.65% = \$887) (FY18)		\$887				\$887
Health Insurance - \$5,821 per annum per FTE (FY17)		\$5,821				\$5,821
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE) (FY18)		\$1,839				\$1,839
Benefit Administration - \$128 per annum per FTE (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY18)						\$0
VICTIM WITNESS ADVOCATE 2@ 100 %, RETIREMENT @ TIER 2						
Salary - (\$1,748 x 26.1 pay period x 2 employees = \$91,246) (FY17)		\$91,246				\$91,246
Salary - (\$1,783 x 6.5 pay period = \$23,179) (FY18)		\$23,179				\$23,179
Unemployment - .00044 of salary (\$91,246 x .00044 = \$40) (will not claim) (FY17)						\$0
Unemployment - .00044 of salary (\$23,179 x .00044 = \$10) (will not claim) (FY18)						\$0
Retirement - 56.47% of Salary (\$91,246 x 56.47% = \$51,526) (FY17)		\$51,526				\$51,526
Retirement - 62.68% of Salary (\$23,179 x 62.68% = \$14,529) (FY18)		\$14,529				\$14,529
OASDI - 7.65% of Salary (\$91,246 x 7.65% = \$6,980) (FY17)		\$6,980				\$6,980
OASDI - 7.65% of Salary (\$23,179 x 7.65% = \$1,773) (FY18)		\$1,773				\$1,773
Health Insurance - \$5,821 per annum per FTE = (\$5,821 x 2 = \$11,642) (FY17)		\$11,642				\$11,642
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE x 2 EE) (FY18)		\$3,679				\$3,679
Benefit Administration - \$128 per annum per FTE (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY18)						\$0
VICTIM WITNESS ADVOCATE 1 @ 100 %, RETIREMENT @ TIER 1						
Salary - (\$1,748 x 26.1 pay period x employees = \$45,623) (FY17)		\$45,623				\$45,623
Salary - (\$1,783 x 6.5 pay period = \$11,590) (FY18)		\$11,590				\$11,590
Unemployment - .00044 of salary (\$45,623 x .00044 = \$20) (will not claim) (FY17)						\$0
Unemployment - .00044 of salary (\$11,590 x .00044 = \$5) (will not claim) (FY18)						\$0
Retirement - 60.16% of Salary (\$45,623 x 60.16% = \$27,447) (FY17)		\$27,447				\$27,447
Retirement - 65.83% of Salary (\$11,590 x 65.83% = \$7,629) (FY18)		\$7,629				\$7,629
OASDI - 7.65% of Salary (\$45,623 x 7.65% = \$3,490) (FY17)		\$3,490				\$3,490
OASDI - 7.65% of Salary (\$11,590 x 7.65% = \$887) (FY18)		\$887				\$887
Health Insurance - \$5,821 per annum per FTE (FY17)		\$5,821				\$5,821

## BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: County of Fresno		Subaward #: VW16350100				
		VOCA 16	MATCH		VWR0 16	COST
<b>A. Personal Services – Salaries/Employee Benefits</b>						
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE) (FY18)		\$1,839				\$1,839
Benefit Administration - \$128 per annum per FTE (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY18)						\$0
VICTIM WITNESS ADVOCATE 1 @ 100 %, RETIREMENT @ TIER 5						
Salary - (\$1,454 x 25.1 pay period = \$36,495) (FY17)		\$36,495				\$36,495
Salary - (\$1,499 x 1 pay period = \$1,499) (FY17)		\$1,499				\$1,499
Salary - (\$1,499 x 6.5 pay period = \$9,744) (FY18)		\$9,744				\$9,744
Unemployment - .00044 of salary (\$37,994 x .00044 = \$17) (will not claim) (FY17)						\$0
Unemployment - .00044 of salary (\$9,744 x .00044 = \$4) (will not claim) (FY18)						\$0
Retirement - 45.69% of Salary (\$37,994 x 45.69% = \$17,359) (FY17)		\$17,359				\$17,359
Retirement - 51.86% of Salary (\$9,744 x 51.86% = \$5,053) (FY18)		\$5,053				\$5,053
OASDI - 7.65% of Salary (\$37,994 x 7.65% = \$2,907) (FY17)		\$2,907				\$2,907
OASDI - 7.65% of Salary (\$9,744 x 7.65% = \$745) (FY18)		\$745				\$745
Health Insurance - \$5,821 per annum per FTE (FY17)		\$5,821				\$5,821
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE) (FY18)		\$1,839				\$1,839
Benefit Administration - \$128 per annum per FTE (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY18)						\$0
VICTIM WITNESS ADVOCATE 4 @ 100 %, STEP 1 RETIREMENT @ TIER 5						
Salary - (\$1,394 x 15 pay period X 4 EE = \$83,640) (FY17)		\$83,640				\$83,640
Salary - (\$1,409 x 11 pay period X 4 EE = \$61,996) (FY17)		\$61,996				\$61,996
Salary - (\$1,409 x 6.5 pay period X 4 EE = \$36,634) (FY18)		\$36,634				\$36,634
Unemployment - .00044 of salary (\$145,636 x .00044 = \$64) (will not claim) (FY17)						\$0
Unemployment - .00044 of salary (\$36,634 x .00044 = \$16) (will not claim) (FY18)						\$0
Retirement - 45.69% of Salary (\$145,636 x 45.69% = \$66,541) (FY17)		\$40,499	\$26,042			\$66,541
Retirement - 45.69% of Salary (\$36,634 x 51.86% = \$66,541) (FY18)			\$18,998			\$18,998
Health Insurance - \$5,821 per annum per FTE = (\$5,821 x 4 EE = \$22,284) (FY17)			\$22,284			\$22,284
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE x 4 EE = \$7,358)			\$7,358			\$7,358
Benefit Administration - \$128 per annum per FTE - (\$128 x 4 = 512) = \$ (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY18)						\$0
PROGRAM TECHNICIAN 1 @ 85%						
Salary - (\$1,872 x .1 pay period x 85% = \$190) (FY17)			\$187			\$187
Salary - (\$1,899 x 26 pay period x 85% = \$39,534) (FY17)			\$49,374			\$49,374
Salary - (\$1,899 x 6.5 pay period x 85% = \$10,492) (FY18)			\$10,492			\$10,492
Unemployment - .00044 of salary (\$49,561 x .00044 = \$22) (will not claim) (FY17)						\$0
Unemployment - .00044 of salary (\$49,561 x .00044 = \$5) (will not claim) (FY18)						\$0
Retirement - 60.16% of Salary (\$49,561 x 60.16% = \$29,816) (FY17)			\$29,816			\$29,816
Retirement - 60.16% of Salary (\$10,492 x 65.83% = \$6,907) (FY18)			\$6,907			\$6,907
OASDI - 7.65% of Salary (\$49,561 x 7.65% = \$3,791) (FY17)			\$3,791			\$3,791
OASDI - 7.65% of Salary (\$10,492 x 7.65% = \$803) (FY18)			\$803			\$803
Health Insurance - \$5,821 per annum per FTE = (\$5,821 x 85% = \$4,948) (FY17)			\$4,948			\$4,948
Health Insurance - \$7,386 per annum per FTE = (\$7,386/26.1 x 6.5 PPE x .85 EE = \$1,564)			\$1,564			\$1,564
Benefit Administration - \$128 per annum per FTE - (\$128 x 4 = 512) = \$ (will not claim) (FY17)						\$0
Benefit Administration - \$128 per annum per FTE (will not claim) (FY18)						\$0
EH VICTIM WITNESS 8 @ 100 % 1,100 HRS MAX						
Salary - (\$17.43 per hr x 940 hrs x 8 EE = \$163,842) (FY17)		\$163,842				\$163,842
Salary - (\$17.43 per hr x 100 hrs x 8 EE = \$13,944) (FY18)		\$13,944				\$13,944
OASDI - 7.65% of Salary (\$163,842 x 7.65% = \$12,534) (will only claim \$10,753)		\$10,753				\$10,753
OASDI - 7.65% of Salary (\$13,944 x 7.65% = \$1,067) (will not claim) (FY18)		\$0				\$0
PROBATION STUDENT WORKER 9 @ 100 % 1,200 HRS MAX						
Salary - (\$10 per hr x 940 hrs x 9 EE = \$84,600) (FY17)		\$84,600				\$84,600
Salary - (\$10 per hr x 100 hrs x 9 EE = \$9,000) (will not claim) (FY18)		\$0				\$0
OASDI - 7.65% of Salary (\$94,000 x 7.65% = \$6,472) (FY17)		\$6,472				\$6,472
OASDI - 7.65% of Salary (\$9,000 x 7.65% = \$689) (will not claim) (FY18)		\$0				\$0
Personal Section Totals		\$1,329,589	\$361,133		\$0	\$1,690,722
<b>PERSONAL SECTION TOTAL</b>						<b>\$1,690,722</b>



# BUDGET CATEGORY AND LINE ITEM DETAIL

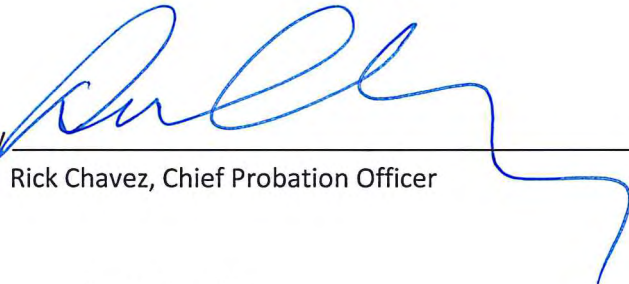
Subrecipient: County of Fresno		Subaward #: VW16350100			
		VOCA 16	MATCH	VWR0 16	COST
<b>B. Operating Expenses</b>					
Vehicle Charges/Maintenance \$250 x 18 months x 2 vehicles = \$9,000		\$9,000			\$9,000
Training					
40 Hour Entry Level Victim/Witness Training (15 VWAs)		\$22,965			\$22,965
Lodging - (\$114 x 5 nights x 15 advocates)	8550				
Meals- (5 Breakfast @ \$15; 5 Lunches @ \$16; 6 Dinners @ \$28 = \$323); (\$323 x 15 advocates)	4845				
Incidental Expenses = (\$5 per day x 5 days x 15 advocates)	375				
Parking - (\$25 per day x 5 day x 5 vehicles)	625				
	14395				
Continued Educational Training (19 VWAs, 1 PSM)					
Lodging - (\$114 x 3 nights x 20 = \$6,840) will only claim \$3,795	3795				
Meals- (3 Breakfast @ \$15; 3 Lunches @ \$16; 4 Dinners @ \$28 = \$205); (\$205 x 20)	4100				
Incidental Expenses = (\$5 per day x 3 days x 20)	300				
Parking - (\$25 per day x 3 day x 5 vehicles)	375				
	8570				
Office Expense					
Printing of brochures describing available services	9159	\$19,409			\$19,409
Outreach Program (Pamphlets, Tables, Chairs, Carts, Tablecloth, Tote, Pens for Victims)	6650				
Postage - \$200 x 12 months	3600				
	19409				
<b>OPERATING SECTION TOTAL</b>		\$51,374	\$0	\$0	\$51,374
<b>OPERATING SECTION TOTAL</b>					<b>\$51,374</b>

### BUDGET CATEGORY AND LINE ITEM DETAIL

[illegible]

Amendment I to the Victim/Witness Assistance Program Grant Agreement No. 16-500 with the State of California, Governor's Office of Emergency Services.


Reviewed and Recommended for Approval

By  Date: 5-31-17  
Rick Chavez, Chief Probation Officer

Approved as to Legal Form:  
Daniel C. Cederborg, County Counsel

By  Date: 5-31-17

Approved as to Accounting Form:  
Oscar J. Garcia, Auditor-Controller-Treasurer/Tax Collector

By  Date: 6-2-17

Fund: 0001  
Subclass: 10000  
ORG: 3432  
Account: 7295