



**BOARD OF SUPERVISORS AGENDA ITEM REPORT**  
**CONTRACTS / AWARDS / GRANTS**

Award  Contract  Grant

Requested Board Meeting Date: 08/01/2017

\* = *Mandatory, information must be provided*

or Procurement Director Award

**\*Contractor/Vendor Name/Grantor (DBA):**

Arizona Criminal Justice Commission

**\*Project Title/Description:**

Crime Victim Assistance Program Grant

**\*Purpose:**

Pima County Attorney Office is designated as operational unit to administer Crime Victim Assistance Fund. Amendment to extend grant for three more months and receive additional funding. \*In-kind effort match, no extra funding required.

**\*Procurement Method:**

Not Applicable.

**\*Program Goals/Predicted Outcomes:**

To alleviate crime victims of the trauma during on-scene or telephone crisis interventions and to provide them with information and support to safely and successfully navigate the criminal justice system.

**\*Public Benefit:**

Provides funding to support direct services to crime victims.

**\*Metrics Available to Measure Performance:**

Quarterly Activity and Financial Reports.

**\*Retroactive:**

Yes, the request and application process.

**Contract / Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e.,15-123): \_\_\_\_\_

Effective Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_

Expense Amount: \$\* \_\_\_\_\_  Revenue Amount: \$ \_\_\_\_\_

**\*Funding Source(s) required:**

Funding from General Fund?  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

Contract is fully or partially funded with Federal Funds?  Yes  No

**\*Is the Contract to a vendor or subrecipient?**

Were insurance or indemnity clauses modified?  Yes  No

If Yes, attach Risk's approval

Vendor is using a Social Security Number?  Yes  No

If Yes, attach the required form per Administrative Procedure 22-73.

**Amendment / Revised Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e.,15-123): \_\_\_\_\_

Amendment No.: \_\_\_\_\_ AMS Version No.: \_\_\_\_\_

Effective Date: \_\_\_\_\_ New Termination Date: \_\_\_\_\_

Prior Contract No. (Synergen/CMS): \_\_\_\_\_

Expense or  Revenue  Increase  Decrease Amount This Amendment: \$ 0

Is there revenue included?  Yes  No If Yes \$ \_\_\_\_\_

**\*Funding Source(s) required:** Special Revenue.

Funding from General Fund?  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**Grant/Amendment Information** (for grants acceptance and awards)  Award  Amendment

Document Type: GTAM Department Code: PCA Grant Number (i.e.,15-123): 18\*002

Effective Date: 6/30/2017 Termination Date: 9/30/2017 Amendment Number: #1

Match Amount: \$ 26,725.00  Revenue Amount: \$ 26,725.00

**\*All Funding Source(s) required:** State Funds passed through the Arizona Criminal Justice Commission

**\*Match funding from General Fund?**  Yes  No If Yes \$ 26,725.00 % 100

**\*Match funding from other sources?**  Yes  No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**\*Funding Source:** In-kind effort match by PCA, no extra funding required.

**\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**

Contact: Rozana Villanes

Department: Pima County Attorney

Telephone: 724-5631

Department Director Signature/Date: [Signature] 7/17/17

Deputy County Administrator Signature/Date: [Signature] 7/18/2017

County Administrator Signature/Date: [Signature] 7/18/2017

(Required for Board Agenda/Addendum Items)

**Grant Adjustment Notice (GAN)**

Date 3/1/2017 Status PM Approved Adjustment Number 1

Grant Number VA-17-027 CFDA Number Grantee Manager Laura Penny

**Grantee Name and Address**

Laura Penny  
 Pima County Attorney's Office (Administrative Services) (Administrative Services)  
 32 North Stone Ave  
 Suite 1400  
 Tucson, AZ 85701-1412

**Project Title**

Victim Services 2017

**Adjusted Grant Award Amount**

Previous Award Amount	\$213,800.00
Grant Award Amount Adjustment	\$53,450.00
New Grant Award Amount	\$267,250.00

**Adjusted Grant Period**

Start Date	7/1/2016	Current End Date	6/30/2017	New End Date	9/30/2017
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**Budget Adjustment**

Category	Current Budget Amount	Requested Budget Change	Adjusted Budget Amount
Personnel (Full Time/Part Time)	\$79,105.00	\$19,786.00	\$98,891.00
Personnel (Overtime)	\$0.00	\$0.00	\$0.00
Personnel (ERE)	\$27,795.00	\$6,939.00	\$34,734.00
Consultant/Contractual Services	\$0.00	\$0.00	\$0.00
Travel (In State)	\$0.00	\$0.00	\$0.00
Travel (Out of State)	\$0.00	\$0.00	\$0.00
Match	\$106,900.00	\$26,725.00	\$133,625.00
Operating Expenses (Supplies)	\$0.00	\$0.00	\$0.00
Operating Expenses (Registration/Training)	\$0.00	\$0.00	\$0.00
Operating Expenses (Other)	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00

Equipment Purchases  
(Capital)

Equipment Purchases (Non-Capital)	\$0.00	\$0.00	\$0.00
Total	\$213,800.00	\$53,450.00	\$267,250.00

**Justification**

We request an extension of our current Victim Services Grant through the first quarter of FY2018. The additional three months of funding will enable us to retain two current Victim Service Division Assistant Advocates and continue working to achieve the project's stated goals and objectives. It also will give us enough time to secure the funding needed to retain (and possibly expand) the project's staff so that we can continue it beyond 9/30/17.

**ACJC Comments**

The GAN should be adding \$53,450.00 in requested dollars, increasing the total adjusted budget amount to \$267,250.00. This GAN requests reduces the total amount of the grant to \$53,450.00

Prepared By:

Janet Hart

Approved By Grant Coordinator:

Dorinda Johns (5/23/2017)

Approved By:

Laura Penny, Victim Services Division  
Director

Approved By Program Manager:

Larry Grubbs (5/23/2017)