SL COUNTY BUDGET REQUEST / ADJUSTMENT FORM

Executive Summary

Request Item No: 820000	For Fiscal Year:	2019						
Requesting Organization: 820000	00 DISTRICT ATTOR	NEY Date of Request:	21-Aug-19					
Budget Adjust Type(s): New Re	venue or Expense	Ongoing (Y or N):	Ν					
		If Yes, next year's CF impact:	\$0					
		Net FTE Change:	0.00					
Description and Justification:								
VOCA Grant Operating Counseling/CJC: The District Attorney's Office has been awarded VOCA grants for both								

VOCA Grant Operating Counseling/CJC: The District Attorney's Office has been awarded VOCA grants for both our Counseling Unit and the Children's Justice Center. These grants are effective 7/1/19 and run through 6/30/21. This budget request is to add the revenue neutral spending authority related to 3.5 FTE that were awarded under the grant.

Fund Impact

SUMMARY OF FUND IMPACT BY FUND						
FUND:	110 GENERAL					
	FUND					
Fund Impact (Budgetary)	\$0					
Fund Impact (Transfers)	\$0					
TOTAL FUND IMPACT	\$0					

DEPT		EVDENCE	BAL SHEET	CNTY FUNDING				
	REVENUE	EXPENSE	BAL SHEET	CNTY FUNDING				
8200000300 CJC SO VALLEY	2,900	-						
8200000400 CRIMINAL JUSTICE	9,725							
TOTALS	12,625	12,625	0	0				
Approvals								
Division Director:			Date:					
Dept. or Elected Fiscal Mgr:			Date:					
Dept. Dir. or Elected Official:			Date:					
Facilities Division Director:			Date:					
Chief Financial Officer:	App 10/0		Date:					
	Approve							
Mayor or Designee:			Date:					
	Approve							
Council Action:			Date:					
	Approve							

		Bud	get Adjustme	ent Detail			
t Year:	2019		\star Requesting De	partment: 820000	000 DISTRICT ATTORNEY		
t Period:	ost June Year-End	* Req Item No:	820000YE02 -	* Adjustment Title:	VOCA Grant Operating Couns	eling/CJC	
ment Type(s):	New Revenue or Exper	nse 🗨		•			
Expense Budge	et String(s):	_					
FUND	SUB-DEPT ID		EXPENSE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT	
110	8200000400		615025			6	
110	8200000400		615035				
110	8200000400		615030				
110	8200000300		615025				
110	8200000300		615035				
110	8200000300		615020				
			TOTAL	EXPENDITURES Page 1	 	\$12	
				NDITURES ALL PAGES		\$12	
Revenue Budge	et String(s):						
FUND	SUB-DEPT ID		REVENUE ACCOUNT	PROG/ACT ID (OPT)	PROJECT ID (CAP)	AMOUNT	
110	8200000400		415000				
110	8200000300		415000				
			TO	TAL REVENUES Page 1	-	\$12	
				REVENUES ALL PAGES		\$12	
Balance Sheet/	Fund Unrestriction S		eet strings only required for P if applicable.			φ12	
FUND	SUB-DEPT ID	Check			AMOUNT		
10112	000 02. 1 10		BAL SHT or 499999				
			BAL_SHT or 499999				
			BAL_SHT or 499999				
				ANCE SHEET CHANGE	·		
					-		
*	Ongoing (Y or N):	Ν		No. of New FTEs:	0.00	(2)	
	t year's CF impact:	\$0	No. of N	ew Time Limited FTEs:	0.00	(2)	
11 103, 1104	i year s or impact.	ψυ		o. of Transferred FTEs:			
				No. of Abolished FTEs:	0.00	(2) (2)	
Fund Balance 1	Fransfers.			No. of Abolished Fills.	0.00	(2)	
From Fund		To Fund	To Dont ID	Amount	7		
From Fund	From Dept ID	TO FUNd	To Dept ID	Amount	-		
					-		
]		
iption and justif	ication: (Attach addit	ional pages as neede	ed.)*				
istrict Attorney's	Office has been award	ed VOCA grants for b	oth our Counseling Unit a spending authority related	nd the Children's Justice	Center. These grants are e	ffective 7/1/19 and	
JII 0/30/21. THIS D	uuget request is to ad	u me revenue neutral	spending authority related	I TO 3.3 FIE THAT WERE AW	arded under the grant.		

(1) If the request is for a grant, include the dates the grant will expire and what obligations are required of the County after the grant expires.

VOCA Funded FTEs/Operating 2019

8200000_YE01 Personnel Description	Hourly	Annual Salary	601040 1560 hours Salary	603025 18.47% Retirement	603040 0.48% LTD	603050 Health	603005 7.65% FICA	Total Benefits	Total Annual	Oct-Dec 2019
Case Manager 14	21.45	44,606.04	33,462.00	6,180.43	160.62	14,187.89	2,559.84	23,088.78	56,550.78	18,850.26
Data Specialist 12	8.07	16,785.60	12,589.20	2,325.23	60.43	4,078.90	963.07	7,427.63	20,016.83	6,672.28
MDT Manager 15		51,360.00 9 MONTHS 3 MONTHS	38,516.40 84,567.60 28,189.20	7,113.98 15,619.64 5,206.55	184.88 405.92 135.31	12,094.14 30,360.94 10,120.31	2,946.50 6,469.42 2,156.47	22,339.51 Total Persor	60,855.91 Inel Counseling	20,285.30 45,807.84
			601040	603025	603040	603050	603005			
Personnel		Annual	160 hours	18.47%	0.48%		7.65%	Total		
Description	Hourly	Salary	Salary	Retirement	LTD	Health	FICA		Total Dec 2019	
Forensic Interviewer 14	26.91	56,160.00	4,305.22	795.17	20.67	1,644.00	329.35	2,789.19 Tota	7,094.40 I Personnel CJC	7,094.40
8200000_YE02								Total Person	nel Request	52,902.24
Operating								•	VOCA	(45,807.84)
		price	quantity	total				9	STATE of UTAH	(3,547.20)
Counseling								(CJC Friends	(3,547.20)
2 computers with monitors	615025	1,200.00	2	2,400.00						0.00
1 privacy screen	615035	150.00	1	150.00						
3 laptops	615025	1,500.00	3	4,500.00						
3 laptop accessories	615035	75.00	3	225.00						
side chair	615035	350.00	1	350.00						
3 phones	615030	700.00	3	2,100.00						
				9,725.00						
CIC										
1 computer with mnitors	615025	1,200.00	1	1,200.00						
desk and chair	615035	1,000.00	1	1,000.00						
telephone	615020	700.00	1	700.00 2,900.00						
			erating Total VOCA	12,625.00 (12,625.00)						



GARY R. HERBERT Governor

SPENCER J. COX Lieutenant Governor

August 6, 2019

Lorianne Szendre Salt Lake County District Attorney 2001 S State Street Ste. S3-600 Salt Lake City, UT 84190

Dear Ms. Szendre,

I am pleased to inform you that the Utah Office for Victims of Crime (UOVC) has approved a VOCA award in support of Salt Lake County Attorney Victim Services for the amount of **\$524,490.31** for year 1 and **\$577,462.38** for year 2 for a total award amount of **\$1,101,952.69**. Please use the assigned grant number **19VOCA052** in all correspondence regarding this contract. The grant award period is July 1, 2019 through June 30, 2021. The CFDA number for this award is 16.575.

By accepting this award, you assume administrative and financial responsibilities including the timely submission of all financial and programmatic reports, and resolution of all audit findings. Should your organization not adhere to the terms and conditions of this award, it is subject to termination for cause or other administrative action as appropriate. For these reasons, I encourage you to read the Certified Assurances and Grant Conditions, as they summarize important grant management issues.

Please note, all project-related materials and accounting records must be maintained for a period of three years from the date of your last financial status report, unless an audit has been initiated or unresolved audit findings remain. All records must be maintained until the audit findings are resolved.

Please find a completed copy of your contract on the online grants management system utahgrants.utah.gov. Quarterly grant progress reports, performance measure reports, and financial status reports must be submitted at least quarterly no later than October 31, January 31, April 30, and July 15. Financial reports may be submitted monthly.

If you have any questions regarding this award, please contact Pauli Romine, Grant Analyst, at (801) 333-3531 or promine@utah.gov. We look forward to working with you during the coming program year.

Sincerel Gary Scheller, Director Utah Office for Victims of Crime

State of Utah

OFFICE FOR VICTIMS OF CRIME

GARY A. SCHELLER Director; UOVC



State of Utah

OFFICE FOR VICTIMS OF CRIME

GARY R. HERBERT Governor

SPENCER J. COX Lieutenant Governor

August 9, 2019

Susanne Mitchell Salt Lake County Children's Justice Center

GARY A. SCHELLER Director, UOVC

Dear Ms. Susanne:

I am pleased to inform you that the Utah Office for Victims of Crime (UOVC) has approved a VOCA award in support of AGENCY/PROGRAM for the amount of **\$77,674.99** for year 1 and **\$96,645.01** for year 2 for a total award amount of **\$174,320**. Please use the assigned grant number **19VOCA011** in all correspondence regarding this contract. The grant award period is July 1, 2019 through June 30, 2021. The CFDA number for this award is 16.575.

By accepting this award, you assume administrative and financial responsibilities including the timely submission of all financial and programmatic reports, and resolution of all audit findings. Should your organization not adhere to the terms and conditions of this award, it is subject to termination for cause or other administrative action as appropriate. For these reasons, I encourage you to read the Certified Assurances and Grant Conditions, as they summarize important grant management issues.

Please note, all project-related materials and accounting records must be maintained for a period of three years from the date of your last financial status report, unless an audit has been initiated or unresolved audit findings remain. All records must be maintained until the audit findings are resolved.

Please find a completed copy of your contract on the online grants management system utahgrants.utah.gov. Quarterly grant progress reports, performance measure reports, and financial status reports must be submitted at least quarterly no later than October 31, January 31, April 30, and July 15. Financial reports may be submitted monthly.

If you have any questions regarding this award, please contact Vickie Bushman, Grant Analyst, at (801) 333-3526 or vsbushman@utah.gov. We look forward to working with you during the coming program year.

Sincerely,

Gary Scheller, Director Utah Office for Victims of Crime