## Budget Summary

*Note: Any errors detected on this page should be fixed on the corresponding Budget Detail tab.*

| Budget Category | Year 1 | | Year 2 (if needed) | | Year 3 (if needed) | | Year 4 (if needed) | | Year 5 (if needed) | | Total(s) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | Federal Request | Non-Federal Request | |
| A. Personnel | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| B. Fringe Benefits | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| C. Travel | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| D. Equipment | $5,164 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $5,164 |
| E. Supplies | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| F. Construction | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| G. Subawards (Subgrants) | $5,164 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $5,164 |
| H. Procurement Contracts | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| I. Other | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| Total Direct Costs | $10,328 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $10,328 |
| J. Indirect Costs | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 |
| Total Project Costs | $10,328 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $10,328 |
| Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N | | | | | | | | | No | | |

# *Budget Detail - Year 1*

*Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N*
(DOJ Financial Guide, Section 3.10)

### A. Personnel

| **Name**<br><br>*List each name, if known.* | **Position**<br><br>*List each position, if known.* | **Computation**<br><br>*Show annual salary rate & amount of time devoted to the project for each name/position.* | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | **Salary** | **Rate** | **Time Worked**<br>*(# of hours, days, months, years)* | **Percentage of Time** | **Total Cost** | **Non-Federal Contribution** | **Federal Request** |
| | | | | | | $0 | | $0 |
| | | | | | *Total(s)* | **$0** | **$0** | **$0** |
| ***Narrative*** | | | | | | | | |
| | | | | | | | | |

### B. Fringe Benefits

| **Name**<br><br>*List each grant-supported position receiving fringe benefits.* | **Computation**<br><br>*Show the basis for computation.* | | | | |
|---|---|---|---|---|---|
| | **Base** | **Rate** | **Total Cost** | **Non-Federal Contribution** | **Federal Request** |
| | | | $0 | | $0 |
| | | *Total(s)* | **$0** | **$0** | **$0** |
| ***Narrative*** | | | | | |

**C. Travel**

| Purpose of Travel | Location | Type of Expense | Basis | Computation | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| *Indicate the purpose of each trip or type of trip (training, advisory group meeting)* | *Indicate the travel destination.* | *Lodging, Meals, Etc.* | *Per day, mile, trip, Etc.* | *Compute the cost of each type of expense X the number of people traveling.* | | | | | | |
| | | | | Cost | Quantity | # of Staff | # of Trips | Total Cost | Non-Federal Contribution | Federal Request |
| | | | N/A | | | | | $0 | | $0 |
| | | | | | | | Total(s) | $0 | $0 | $0 |

**Narrative**

## D. Equipment

| Item<br><br>*List and describe each item of equipment that will be purchased* | Computation<br><br>*Compute the cost (e.g., the number of each item to be purchased X the cost per item)* | | | | |
| --- | --- | --- | --- | --- | --- |
| | **# of Items** | **Unit Cost** | **Total Cost** | **Non-Federal Contribution** | **Federal Request** |
| Air Purification System | 1 | $5,164.00 | $5,164 | $0 | $5,164 |
| **Total(s)** | | | **$5,164** | **$0** | **$5,164** |

| Narrative | |
| --- | --- |

The Waycross Police Department will purchase equipment including an air purification system for the police department's property and evidence storage rooms to protect personnel from dangerous airborne contaminants including narcotics fumes and biohazards. The department obtained a quote for an air purification system in order to obtain the unit cost. The Waycross Police Department will follow the city purchasing policies when purchasing the listed equipment.

## E. Supplies

| Supply Items<br><br>*Provide a list of the types of items to be purchased with grant funds.* | Computation<br><br>*Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.* | | | | |
| --- | --- | --- | --- | --- | --- |
| | **# of Items** | **Unit Cost** | **Total Cost** | **Non-Federal Contribution** | **Federal Request** |
| | | | $0 | | $0 |
| **Total(s)** | | | **$0** | **$0** | **$0** |

| Narrative | |
| --- | --- |

| | | | | | | |
|---|---|---|---|---|---|---|
| | | | | | | |

**F. Construction**

| Purpose | Description of Work | Computation | | | | |
|---|---|---|---|---|---|---|
| *Provide the purpose of the construction* | *Describe the construction project(s)* | *Compute the costs (e.g., the number of each item to be purchased X the cost per item)* | | | | |
| | | **# of Items** | **Cost** | **Total Cost** | **Non-Federal Contribution** | **Federal Request** |
| | | | | $0 | | $0 |
| | | | **Total(s)** | **$0** | **$0** | **$0** |
| **Narrative** | | | | | | |

**G. Subawards (Subgrants)**

| Description | Purpose | Consultant? | |
|---|---|---|---|

| Provide a description of the activities to be carried out by subrecipients. | Describe the purpose of the subaward (subgrant) | Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost. | | | | |
|---|---|---|---|---|---|---|
| | | | | Total Cost | Non-Federal Contribution | Federal Request |
| The Ware County Sheriff's Office will purchase ballistic shields. | Waycross and Ware County have been declared disparate for the JAG grant and agree to split the funds equally. | | | $5,164 | $0 | $5,164 |
| | | | Total(s) | $5,164 | $0 | $5,164 |

**Consultant Travel (if necessary)**

| Purpose of Travel | Location | Type of Expense | Computation | | | | | |
|---|---|---|---|---|---|---|---|---|
| Indicate the purpose of each trip or type of trip (training, advisory group meeting) | Indicate the travel destination. | Hotel, airfare, per diem | Compute the cost of each type of expense X the number of people traveling. | | | | | |
| | | | Cost | Duration or Distance | # of Staff | Total Cost | Non-Federal Contribution | Federal Request |
| | | | | | | $0 | | $0 |
| | | | | | Total | $0 | $0 | $0 |

| **Narrative** | |
|---|---|
| Waycross and Ware County have been declared disparate for the JAG grant and agree to split the funds equally. The Ware County Sheriff's Office will use grant funds to purchase equipment to include ballistic shields to protect deputies when they are serving high-risk search warrants and arrest warrants. The Sheriff's Office will follow county purchasing policies when making the equipment purchase. | |

**H. Procurement Contracts**

| Description | Purpose | Consultant? | |
|---|---|---|---|

| *Provide a description of the products or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold (currently $150,000).* | *Describe the purpose of the contract* | *Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost.* | | | |
|---|---|---|---|---|---|
| | | | *Total Cost* | *Non-Federal Contribution* | *Federal Request* |
| | | | | | $0 |
| | | Total(s) | $0 | $0 | $0 |

**Consultant Travel (if necessary)**

| **Purpose of Travel** *Indicate the purpose of each trip or type of trip (training, advisory group meeting)* | **Location** *Indicate the travel destination.* | **Type of Expense** *Hotel, airfare, per diem* | **Computation** *Compute the cost of each type of expense X the number of people traveling.* | | | | | |
|---|---|---|---|---|---|---|---|---|
| | | | | *Cost* | *Duration or Distance* | *# of Staff* | *Total Cost* | *Non-Federal Contribution* | *Federal Request* |
| | | | | | | | $0 | | $0 |
| | | | | | | Total | $0 | $0 | $0 |

**Narrative**

**I. Other Costs**

| **Description** | **Computation** |
|---|---|

| *List and describe items that will be paid with grants funds (e.g. rent, reproduction, telephone, janitorial, or security services, and investigative or confidential funds).* | *Show the basis for computation* | | | | | | |
|---|---|---|---|---|---|---|---|
| | *Quantity* | *Basis* | *Cost* | *Length of Time* | *Total Cost* | *Non-Federal Contribution* | *Federal Request* |
| | | | | | $0 | | $0 |
| | | | | *Total(s)* | $0 | $0 | $0 |
| **Narrative** | | | | | | | |
| | | | | | | | |

**J. Indirect Costs**

| **Description** *Describe what the approved rate is and how it is applied.* | **Computation** *Compute the indirect costs for those portions of the program which allow such costs.* | | | | |
|---|---|---|---|---|---|
| | *Base* | *Indirect Cost Rate* | *Total Cost* | *Non-Federal Contribution* | *Federal Request* |
| | | | $0 | | $0 |
| | | *Total(s)* | $0 | $0 | $0 |
| **Narrative** | | | | | |