

VOCA and SVAA Grant Award and Acceptance Form

Grant Period 10/1/2016 – 9/30/2017

Organization: City of Columbus/Franklin County Municipal Court Dept of Probation Services
 Applicant Name: Melinda Brooks
 Street Address 1: 375 S. High St. 8th Floor
 Street Address 2:
 City, State, ZIP: Columbus, Ohio 43215

Phone: (614)645-1960

Funding Stream: 2017VOCA

County: Franklin

Award Number: 2017-VOCA-43556982

VOCA Award: \$143,123.53

SVAA Award: \$0.00

Awarded Costs

Cost	Total	Grant Dollars	Cash Match	In-Kind Match	VOCA/SVAA
Adele Lifer	\$76,479.30	\$76,479.30	\$0.00	\$8,902.19	VOCA
Tasha Jones	\$58,064.83	\$58,064.83	\$0.00	\$0.00	VOCA
General Supplies	\$500.00	\$500.00	\$0.00	\$0.00	VOCA
scanners and label makers	\$1,230.00	\$1,230.00	\$0.00	\$0.00	VOCA
Cell Phones	\$600.00	\$600.00	\$0.00	\$0.00	VOCA
Mileage	\$300.00	\$300.00	\$0.00	\$0.00	VOCA
Training costs	\$2,000.00	\$2,000.00	\$0.00	\$0.00	VOCA

bus passes	\$3,199.50	\$3,199.50	\$0.00	\$0.00	VOCA
Victim Assistance (no gas/grocery cards)	\$500.00	\$500.00	\$0.00	\$0.00	VOCA
Books and materials	\$249.90	\$249.90	\$0.00	\$0.00	VOCA
In-Kind Match	\$0.00	\$0.00	\$0.00	\$26,878.69	VOCA

This grant is subject to all rules, regulations, and criteria included in the grant application and special conditions attached hereto.

Mike DeWine, Ohio Attorney General
Crime Victims Section
30 E. Broad St., Fl. 23
Columbus, OH 43215

Signature of Approving Official



D. Michael Sheline
Assistant Section Chief

The undersigned, having received the statement of grant award/acceptance and the conditions attached thereto, does hereby accept this grant and agrees to the conditions pertaining thereto, this
____ Day of _____, 20____

Signature of Authorized Official



Title: Court Administrator

Signature of Authorized Official

Title: _____