

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**

**VOCA 2018-2019**

**Organization: Community Initiatives, Inc.**

**Grant No.: VOCA-2018-Community Initiatives, In-00114**

**VOCA Personnel Budget: 1**

**Agency Name:** Community Initiatives, Inc.

Complete the table below and provide information about each position requested. In the Budget Narrative section indicate if the salary/benefit expenses listed include costs that are anticipated during the 12 month period. For example, raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty. Failure to provide VOCA allowable job descriptions may result in a reduction to your request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is VOCA funded.

**RATE:** A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

	Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: (Executive) Program Director	\$94,924.03	\$23,731.01	25%	0.25

**Personnel Narrative:** Fund 25% of salary & benefits of (Executive) Program Director to provide training, orientation and direct supervision to two VOCA-funded Child Advocate positions and MSW intern and supervise all staff.

Sub-Total	\$94,924.03	\$23,731.01		0.25
-----------	-------------	-------------	--	------

<b>Agency Contribution for Personnel Expenses</b>	\$71,193.02
---------------------------------------------------	-------------

<b>Pay Schedule: (choose one from the drop-down menu)</b>	Semi-Monthly
-----------------------------------------------------------	--------------

**Position Number:**

Hours per week = 40  
Hourly Rate = \$37.26

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$77,500.80		\$77,500.80	\$3,229.20
FICA		7.65%	\$5,928.81	\$247.03
Retirement		4%	\$3,100.03	\$129.17
Health Ins.			\$6,420.00	\$267.50

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**  
**VOCA 2018-2019**  
**Organization: Community Initiatives, Inc.**  
**Grant No.: VOCA-2018-Community Initiatives, In-00114**  
**VOCA Personnel Budget: 1**

Life Ins.		\$200.00	\$8.33
Dental Ins.		\$720.00	\$30.00
Workers Comp	0.3%	\$232.50	\$9.69
Unemployment (1st \$7K)	0.51%	\$35.70	\$1.49
Other:		\$786.18	\$32.76
	TOTAL	\$94,924.03	\$3,955.17

Explanation (if applicable):

Other = Employer-paid Disability

Is this position used as a matching expense Y/N?

Yes

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**  
**VOCA 2018-2019**  
**Organization: Community Initiatives, Inc.**  
**Grant No.: VOCA-2018-Community Initiatives, In-00114**  
**VOCA Personnel Budget: 2**

**Agency Name:** Community Initiatives, Inc.

Complete the table below and provide information about each position requested. In the Budget Narrative section indicate if the salary/benefit expenses listed include costs that are anticipated during the 12 month period. For example, raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty. Failure to provide VOCA allowable job descriptions may result in a reduction to your request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is VOCA funded.

**RATE:** A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

	Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Child Advocate #1	\$59,249.53	\$44,437.15	75%	0.75

**Personnel Narrative:** Fund 75% of salary/benefits to provide crisis intervention, case mgt, follow up to child abuse victims. Determines service needs, links family to services. Liaise b/w child and providers, assist child and family in navigating child protection system.

Sub-Total	\$59,249.53	\$44,437.15		0.75
-----------	-------------	-------------	--	------

<b>Agency Contribution for Personnel Expenses</b>	\$14,812.38
---------------------------------------------------	-------------

<b>Pay Schedule: (choose one from the drop-down menu)</b>	Semi-Monthly
-----------------------------------------------------------	--------------

**Position Number:**

Hours per week = 40  
Hourly Rate = \$22.37

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$46,529.60		\$46,529.60	\$1,938.73
FICA		7.65%	\$3,559.51	\$148.31
Retirement		0%	\$0	\$0
Health Ins.			\$7,356.00	\$306.50

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2018-2019

Organization: Community Initiatives, Inc.

Grant No.: VOCA-2018-Community Initiatives, In-00114

VOCA Personnel Budget: 2

Life Ins.		\$200.00	\$8.33
Dental Ins.		\$720.00	\$30.00
Workers Comp	0.3%	\$139.59	\$5.82
Unemployment (1st \$7K)	0.27%	\$18.90	\$0.79
Other:		\$725.93	\$30.25
	TOTAL	\$59,249.53	\$2,468.73

Explanation (if applicable):

Other = Employer-paid Disability.

Is this position used as a matching expense Y/N?

Yes

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**

**VOCA 2018-2019**

**Organization: Community Initiatives, Inc.**

**Grant No.: VOCA-2018-Community Initiatives, In-00114**

**VOCA Personnel Budget: Child Advocate #2 3**

**Agency Name:** Community Initiatives, Inc.

Complete the table below and provide information about each position requested. In the Budget Narrative section indicate if the salary/benefit expenses listed include costs that are anticipated during the 12 month period. For example, raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty. Failure to provide VOCA allowable job descriptions may result in a reduction to your request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is VOCA funded.

**RATE:** A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

	Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Child Advocate #2	\$46,381.78	\$34,786.33	75%	0.75

**Personnel Narrative:** Fund 75% of salary & benefits to provide crisis intervention, case mgmt., follow up to child abuse victims. Determine service needs, link family to services. Liaise b/w child and providers, assist child/family in navigating child protection system.

Sub-Total	\$46,381.78	\$34,786.33		0.75
-----------	-------------	-------------	--	------

<b>Agency Contribution for Personnel Expenses</b>	\$11,595.45
---------------------------------------------------	-------------

<b>Pay Schedule: (choose one from the drop-down menu)</b>	Semi-Monthly
-----------------------------------------------------------	--------------

**Position Number:**

Hours per week =	40
Hourly Rate =	\$17.07

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$35,505.60		\$35,505.60	\$1,479.40
FICA		7.65%	\$2,716.18	\$113.17
Retirement		0%	\$0	\$0
Health Ins.			\$6,420.00	\$267.50

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2018-2019

Organization: Community Initiatives, Inc.

Grant No.: VOCA-2018-Community Initiatives, In-00114

VOCA Personnel Budget: Child Advocate #2 3

Life Ins.		\$200.00	\$8.33
Dental Ins.		\$720.00	\$30.00
Workers Comp	0.3%	\$106.52	\$4.44
Unemployment (1st \$7K)	0.51%	\$35.70	\$1.49
Other:		\$677.78	\$28.24
	TOTAL	\$46,381.78	\$1,932.57

Explanation (if applicable):

Other = Employer-paid Disability

Is this position used as a matching expense Y/N?

Yes

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**  
**VOCA 2018-2019**  
**Organization: Community Initiatives, Inc.**  
**Grant No.: VOCA-2018-Community Initiatives, In-00114**  
**VOCA Operating Budget**

**Agency name:** Community Initiatives, Inc.

Office supplies such as paper, pencils, toner, printing, books, postage, transportation for victims; monthly service costs for telephone or utilities; staff travel (for direct service to crime victims only), etc. Furniture and equipment costing less than \$2,500 should be requested from this budget category. In the narrative section, provide a brief description of the operating expenses and note if the cost is pro-rated. Indicate how the number and cost of services requested were determined (by FTE? by % use? by sq/ft?).

**EXAMPLE- Narrative Response:**

The Victim Advocate will need monthly telephone service calculated at \$20 per month, which is the standard rate budgeted for new positions in this agency.

**Operating:**

Description of Operating Cost and a Budget Narrative	Number	Cost Per Item	Total
Description of Operating Cost: Equipment: Wireless Panic Button-Alert Police	1	\$590.00	\$590.00
Budget Narrative: The panic button will improve the response to escalating adult conflict associated with a child abuse victim. The cost includes the entire package - receiver, panic button, install labor and annual monitoring to commence with grant award.			
Operating Subtotal			\$590.00

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**  
**VOCA 2018-2019**  
**Organization: Community Initiatives, Inc.**  
**Grant No.: VOCA-2018-Community Initiatives, In-00114**  
**Victims Served and Types of Services**

**Agency Name:** Community Initiatives, Inc.

The number of victims indicated should include the number of new victims provided services by VOCA funded and matching staff during the grant period. The figures indicated should be based on historical data and/or the anticipated need of the population served through the VOCA project. If awarded funding, the applicant agency will be expected to fulfill these performance measures.

Recipients of VOCA funding are required to provide services to victims of Federal crimes and to provide assistance with the VOCA Crime Victim Compensation program.

**VOCA Grant Request**

**(from the Budget Summary Page) \$103,544.49**

<b># of Victims to be Served</b>	<b>Type of Victim \$103,544.49</b>	<b>\$ Amount per Category</b>	<b>% of Total Grant Amount</b>	<b># of Other Types of Victims to be Served</b>	<b>For other types of crimes, identify and list each separately below.</b>
0	Adult Physical Assault (Includes Aggravated and Simple Assault)	\$0	0.00%	0	
0	Adult Sexual Assault	\$0	0.00%	0	
0	Adults Sexually Abused/Assaulted as Children	\$0	0.00%	0	
0	Arson	\$0	0.00%	0	
0	Bullying (Verbal, Cyber or Physical)	\$0	0.00%	0	
0	Burglary	\$0	0.00%	0	
0	Child Physical Abuse or Neglect	\$0	0.00%	0	
0	Child Pornography	\$0	0.00%	0	
400	Child Sexual Abuse/Assault	\$103,544.49	100.00%	0	
0	Domestic and/or Family Violence	\$0	0.00%	0	
0	DUI/DWI Incidents	\$0	0.00%	0	
0	Elder Abuse or Neglect	\$0	0.00%	0	
0	Hate Crime: Racial/Religious/Gender/S exual Orientation/Other (Explanation Required)	\$0	0.00%	0	



**OFFICE OF THE FLORIDA ATTORNEY GENERAL**  
**VOCA 2018-2019**  
**Organization: Community Initiatives, Inc.**  
**Grant No.: VOCA-2018-Community Initiatives, In-00114**  
**Victims Served and Types of Services**

0	Human Trafficking: Labor	\$0	0.00%	0
0	Human Trafficking: Sex	\$0	0.00%	0
0	Identity Theft/Fraud/Financial Crime	\$0	0.00%	0
0	Kidnapping	\$0	0.00%	0
0	Mass Violence (Domestic/International)	\$0	0.00%	0
0	Other Vehicular Victimization (e.g., Hit and Run)	\$0	0.00%	0
0	Robbery	\$0	0.00%	0
0	Stalking/Harassment	\$0	0.00%	0
0	Survivors of Homicide Victims	\$0	0.00%	0
0	Teen Dating Victimization	\$0	0.00%	0
0	Terrorism (Domestic/International)	\$0	0.00%	0
<b>Total Victims Served</b>	<b>400</b>	<b>\$103,544.49</b>	<b>100.00%</b>	<b>0</b>

Indicate the number of victims projected to receive the following services. In this section, only count a victim once, regardless of how many times the victim received a particular service. The total amount for any one service may not exceed the total number of victims projected to be served. See the VOCA Definitions for a description of each service.

<b># of Victims to be Served</b>	<b>Type of Service</b>	<b># of Other Types of Services to be Provided</b>	<b>For other types of services, identify and list each separately below.</b>
400	Information and Referral	0	
400	Personal Advocacy/Accompaniment	0	
400	Emotional Support or Safety Services	0	
0	Shelter/Housing Services	0	
0	Criminal/Civil Justice System Assistance	0	
400	Number of Victims Assisted with a Victim Compensation Application	0	
<b>Total Services</b>	<b>1600</b>	<b>0</b>	<b>Subtotal of "Other" Services</b>