

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**

**VOCA 2019-2020**

**Organization: Child Protection Center, Inc.**

**Grant No.: VOCA-2019-Child Protection Center, -00031**

**Version Date: 07/12/2019 13:33:08**

**VOCA Personnel Budget: 1**

**Agency Name:** Child Protection Center, 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<br>(from chart below) | Total Amount<br>VOCA Funded | Percent VOCA<br>Funded | VOCA Funded<br>FTE |
|---|---|-----------------------------|------------------------|--------------------|
| Position: CPT Case<br>Coordinator (Joseph<br>Matteen) | \$56,612.73                             | \$14,153.18                 | 25%                    | 0.25               |

Personnel Narrative: 25% of the case coordinator's time will be spent on VOCA cases and VOCA allowable services as reflected in the attached job description.

|           |             |             |  |      |
|-----------|-------------|-------------|--|------|
| Sub-Total | \$56,612.73 | \$14,153.18 |  | 0.25 |
|-----------|-------------|-------------|--|------|

|   |                    |
|---|--------------------|
| <b>Agency Contribution for Personnel Expenses</b> | <b>\$42,459.55</b> |
|---|--------------------|

|   |                  |
|---|------------------|
| <b>Pay Schedule: (choose one from the drop-down menu)</b> | <b>Bi-Weekly</b> |
|---|------------------|

Position Number:

Hours per week = 40  
Hourly Rate = \$21.33

|              |             | RATE  | Yearly<br>Employer<br>Cost | Per Pay Period<br>Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$44,366.40 |       | \$44,366.40                | \$1,706.40                        |
| FICA         |             | 7.65% | \$3,394.03                 | \$130.54                          |
| Retirement   |             | 7%    | \$3,105.65                 | \$119.45                          |

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|              |       |             |            |
|--------------|-------|-------------|------------|
| Health Ins.  |       | \$4,788.33  | \$184.17   |
| Life Ins.    |       | \$551.88    | \$21.23    |
| Dental Ins.  |       | \$386.28    | \$14.86    |
| Workers Comp | 0.013 | \$6.17      | \$0.24     |
|              | 85%   |             |            |
| Unemployment | 0.2%  | \$14.00     | \$0.54     |
| (1st \$7K)   |       |             |            |
| Other:       |       |             | \$0        |
|              | TOTAL | \$56,612.73 | \$2,177.41 |

Explanation (if applicable):

Life insurance includes: Life, short term & long term disability.

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

No

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**Organization: Child Protection Center, Inc.**

**Grant No.: VOCA-2019-Child Protection Center, -00031**

**Version Date: 07/12/2019 13:33:08**

**VOCA Personnel Budget: 2**

**Agency Name:** Child Protection Center, 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<br>(from chart below) | Total Amount<br>VOCA Funded | Percent VOCA<br>Funded | VOCA Funded<br>FTE |
|--|---|-----------------------------|------------------------|--------------------|
| Position: CPT Case<br>Coordinator (Erick<br>Quevedo) | \$59,394.41                             | \$14,848.60                 | 25%                    | 0.25               |

**Personnel Narrative:** 25% of the case coordinator's time will be spent on VOCA cases and VOCA allowable services as reflected in the attached job description

|           |             |             |  |      |
|-----------|-------------|-------------|--|------|
| Sub-Total | \$59,394.41 | \$14,848.60 |  | 0.25 |
|-----------|-------------|-------------|--|------|

|   |                    |
|---|--------------------|
| <b>Agency Contribution for Personnel Expenses</b> | <b>\$44,545.81</b> |
|---|--------------------|

|   |                  |
|---|------------------|
| <b>Pay Schedule: (choose one from the drop-down menu)</b> | <b>Bi-Weekly</b> |
|---|------------------|

**Position Number:**

Hours per week = 40  
Hourly Rate = \$22.51

|              |             | RATE  | Yearly<br>Employer<br>Cost | Per Pay Period<br>Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$46,820.80 |       | \$46,820.80                | \$1,800.80                        |
| FICA         |             | 7.65% | \$3,581.79                 | \$137.76                          |
| Retirement   |             | 7%    | \$3,277.46                 | \$126.06                          |

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VOCA Personnel Budget: 2

|              |       |             |            |
|--------------|-------|-------------|------------|
| Health Ins.  |       | \$4,788.33  | \$184.17   |
| Life Ins.    |       | \$519.24    | \$19.97    |
| Dental Ins.  |       | \$386.28    | \$14.86    |
| Workers Comp | 0.013 | \$6.51      | \$0.25     |
|              | 85%   |             |            |
| Unemployment | 0.2%  | \$14.00     | \$0.54     |
| (1st \$7K)   |       |             |            |
| Other:       |       |             | \$0        |
|              | TOTAL | \$59,394.41 | \$2,284.40 |

Explanation (if applicable):

Life insurance includes: Life, short term & long term disability.

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

No

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**Grant No.: VOCA-2019-Child Protection Center, -00031**

**Version Date: 07/12/2019 13:33:08**

**VOCA Personnel Budget: 3**

**Agency Name:** Child Protection Center, 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<br>(from chart below) | Total Amount<br>VOCA Funded | Percent VOCA<br>Funded | VOCA Funded<br>FTE |
|--|---|-----------------------------|------------------------|--------------------|
| Position: CPT Case Coordinator (Gabriella Lopez) | \$49,489.81                             | \$12,372.45                 | 25%                    | 0.25               |

**Personnel Narrative:** 25% of the case coordinator's time will be spent on VOCA cases and VOCA allowable services as reflected in the attached job description.

|           |             |             |  |      |
|-----------|-------------|-------------|--|------|
| Sub-Total | \$49,489.81 | \$12,372.45 |  | 0.25 |
|-----------|-------------|-------------|--|------|

|   |             |
|---|-------------|
| <b>Agency Contribution for Personnel Expenses</b> | \$37,117.36 |
|---|-------------|

|   |           |
|---|-----------|
| <b>Pay Schedule: (choose one from the drop-down menu)</b> | Bi-Weekly |
|---|-----------|

**Position Number:**

Hours per week = 40  
Hourly Rate = \$18.39

|              |             | RATE  | Yearly<br>Employer<br>Cost | Per Pay Period<br>Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$38,251.20 |       | \$38,251.20                | \$1,471.20                        |
| FICA         |             | 7.65% | \$2,926.22                 | \$112.55                          |
| Retirement   |             | 7%    | \$2,677.58                 | \$102.98                          |

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VOCA Personnel Budget: 3

|              |       |             |            |
|--------------|-------|-------------|------------|
| Health Ins.  |       | \$4,788.33  | \$184.17   |
| Life Ins.    |       | \$440.88    | \$16.96    |
| Dental Ins.  |       | \$386.28    | \$14.86    |
| Workers Comp | 0.013 | \$5.32      | \$0.20     |
|              | 85%   |             |            |
| Unemployment | 0.2%  | \$14.00     | \$0.54     |
| (1st \$7K)   |       |             |            |
| Other:       |       |             | \$0        |
|              | TOTAL | \$49,489.81 | \$1,903.45 |

Explanation (if applicable):

Life insurance includes: life, short term & long term disability.

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

No

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**VOCA 2019-2020**  
**Organization: Child Protection Center, Inc.**  
**Grant No.: VOCA-2019-Child Protection Center, -00031**  
**Version Date: 07/12/2019 13:33:08**  
**VOCA Personnel Budget: 4**

**Agency Name:** Child Protection Center, 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<br>(from chart below) | Total Amount<br>VOCA Funded | Percent VOCA<br>Funded | VOCA Funded<br>FTE |
|--|---|-----------------------------|------------------------|--------------------|
| Position: CPT Case<br>Coordinator (HG) | \$52,092.74                             | \$13,023.18                 | 25%                    | 0.25               |

Personnel Narrative: 25% of the case coordinator's time will be spent on VOCA cases and VOCA allowable services as reflected in the attached job description

|           |             |             |  |      |
|-----------|-------------|-------------|--|------|
| Sub-Total | \$52,092.74 | \$13,023.18 |  | 0.25 |
|-----------|-------------|-------------|--|------|

**Agency Contribution for Personnel Expenses** \$39,069.56

**Pay Schedule: (choose one from the drop-down menu)** Bi-Weekly

Position Number:

Hours per week = 40  
Hourly Rate = \$19.47

|              |             | RATE  | Yearly<br>Employer<br>Cost | Per Pay Period<br>Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$40,497.60 |       | \$40,497.60                | \$1,557.60                        |
| FICA         |             | 7.65% | \$3,098.07                 | \$119.16                          |
| Retirement   |             | 7%    | \$2,834.83                 | \$109.03                          |
| Health Ins.  |             |       | \$4,788.33                 | \$184.17                          |

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VOCA Personnel Budget: 4

|              |       |             |            |
|--------------|-------|-------------|------------|
| Life Ins.    |       | \$468.00    | \$18.00    |
| Dental Ins.  |       | \$386.28    | \$14.86    |
| Workers Comp | 0.013 | \$5.63      | \$0.22     |
|              | 85%   |             |            |
| Unemployment | 0.2%  | \$14.00     | \$0.54     |
| (1st \$7K)   |       |             |            |
| Other:       |       |             | \$0        |
|              | TOTAL | \$52,092.74 | \$2,003.57 |

Explanation (if applicable):

Life insurance includes: life, short term & long term disability

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

No



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**VOCA Personnel Budget: CPC Victim Advocate (Natalia Tyrell) 5**

**Agency Name:** Child Protection Center, 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.

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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<br>(from chart below) | Total Amount<br>VOCA Funded | Percent VOCA<br>Funded | VOCA Funded<br>FTE |
|--|---|-----------------------------|------------------------|--------------------|
| Position: CPC Victim Advocate (Natalia Tyrell) | \$46,556.22                             | \$46,556.22                 | 100%                   | 1                  |

**Personnel Narrative:** The victim advocate position provides victim advocacy to victims of child physical and sexual abuse and their families. 100% of their time is spent on VOCA allowable activities as reflected in the job description.

|           |             |             |  |   |
|-----------|-------------|-------------|--|---|
| Sub-Total | \$46,556.22 | \$46,556.22 |  | 1 |
|-----------|-------------|-------------|--|---|

**Agency Contribution for Personnel Expenses** \$0.00

**Pay Schedule: (choose one from the drop-down menu)** Bi-Weekly

**Position Number:**

Hours per week = 40  
Hourly Rate = \$17.17

|              |             | RATE  | Yearly<br>Employer<br>Cost | Per Pay Period<br>Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$35,713.60 |       | \$35,713.60                | \$1,373.60                        |
| FICA         |             | 7.65% | \$2,732.09                 | \$105.08                          |
| Retirement   |             | 7%    | \$2,499.95                 | \$96.15                           |

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VOCA Personnel Budget: CPC Victim Advocate (Natalia Tyrell) 5

|              |       |             |            |
|--------------|-------|-------------|------------|
| Health Ins.  |       | \$4,788.33  | \$184.17   |
| Life Ins.    |       | \$417.00    | \$16.04    |
| Dental Ins.  |       | \$386.28    | \$14.86    |
| Workers Comp | 0.013 | \$4.96      | \$0.19     |
|              | 85%   |             |            |
| Unemployment | 0.2%  | \$14.00     | \$0.54     |
| (1st \$7K)   |       |             |            |
| Other:       |       |             | \$0        |
|              | TOTAL | \$46,556.22 | \$1,790.62 |

Explanation (if applicable):

Life insurance includes: Life, short term & long term disability.

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

No

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**VOCA 2019-2020**

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**VOCA Contractual/Fee for Service Budget**

**Agency name:** Child Protection Center, Inc.

For each contractual service listed, include a description of the service to be provided, the business name of the contractor, the cost per unit of service, and the estimated units of service to be used. Indicate in the narrative section how the number of services requested was determined. Also, give a description of a unit of service, e.g., a 60 minute unit of legal services, a 60 minute individual therapy session, and a 90 minute group therapy session.

Therapy must be requested at a maximum of the following rates, per 15 minute increment/unit:

Individual Therapy- \$25 per unit

Family Therapy- \$12.25 per unit/per person

Group Therapy- \$8 per unit/per person

**EXAMPLE - Budget Narrative:**

Therapy, Inc., will provide therapy for adult survivors of incest. It is anticipated that this service will be used approximately 10 times during the year.

**Contractual Services - Contracts for specialized services:**

| Name of Business or Contractor / Budget Narrative  | Cost Per Unit of Service | Estimated Units of Service | Total        |
|--|--------------------------|----------------------------|--------------|
| Name of Business or Contractor:<br>CMS Approved Psychologist Dr. Brad Broeder<br>Budget Narrative:<br>The cost of the psychological will be no more than \$650. Psychological will be provided locally by a CMS approved provider. There is a limit of \$1800 per victim case. We will use the client number to track expenditures per case.               | \$650.00                 | 15                         | \$9,750.00   |
| Name of Business or Contractor:<br>CPC Therapy Program: Individual Therapy<br>Budget Narrative:<br>One on one client therapy with a therapist. Therapy may be received by child victim, his/her non-offending caregiver(s), and sibling(s). Therapy is billed in 15 minute units at \$25.00 per unit.  | \$25.00                  | 7,400                      | \$185,000.00 |
| Name of Business or Contractor:<br>CPC Therapy Program: Family Therapy<br>Budget Narrative:<br>Family members/caretakers in a session with the primary victim to address family dynamics, roles, communications within the family system. Family therapy is billed in 15 minute increments at \$12.25 per unit per person in the session. Family is 90 min | \$12.25                  | 625                        | \$7,656.25   |

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**VOCA Contractual/Fee for Service Budget**

|   |          |     |              |
|---|----------|-----|--------------|
| Name of Business or Contractor:   | \$8.00   | 250 | \$2,000.00   |
| CPC Therapy Program: Group Therapy  |          |     |              |
| Budget Narrative:   |          |     |              |
| Three or more individuals with similar needs in a therapeutic group led by a therapist and co-facilitator. Group services are billed in 15 minute increments at \$8 per unit per person in the group. Group is 90 minutes.                                |          |     |              |
| Name of Business or Contractor:   | \$125.00 | 200 | \$25,000.00  |
| CPC therapy Program: In Depth Assessments   |          |     |              |
| Budget Narrative:   |          |     |              |
| An evaluation process involving the objective collection and interpretation of data that helps to determine the impact of sexual abuse has had on a client's coping capacity and overall functioning. Used to develop treatment goals and interventions.  |          |     |              |
| Name of Business or Contractor:   | \$25.00  | 500 | \$12,500.00  |
| CPC Therapy Program: Standard Assessment Tools  |          |     |              |
| Budget Narrative:   |          |     |              |
| Provide a standardized and structured approach to measuring problems commonly experienced by sexually abused children, and assist in providing more precise assessment of target problems. Tools should be administered within 30 days of intake.         |          |     |              |
| Name of Business or Contractor:   | \$97.00  | 125 | \$12,125.00  |
| CPC Therapy Program: Treatment Plan   |          |     |              |
| Budget Narrative:   |          |     |              |
| The treatment plan is created in partnership with the client and provides direction for the course of treatment. Includes goals, objectives, and interventions that are individualized, relevant, and measurable. Must be completed in the first 45 days. |          |     |              |
| Name of Business or Contractor:   | \$48.50  | 75  | \$3,637.50   |
| CPC Therapy Program: Treatment Plan Review  |          |     |              |
| Budget Narrative:   |          |     |              |
| Purpose is to document client progress toward treatment goals, identify areas in need of continued intervention, and make necessary revisions to goals. Objectives, interventions, and/or discharge criteria that reflects the client's current needs.    |          |     |              |
| Contractual Subtotal  |          |     | \$257,668.75 |

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**VOCA Operating Budget**

**Agency name:** Child Protection Center, 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:<br>Staff travel  | 14,000 | \$0.45        | \$6,300.00  |
| Budget Narrative:<br>CPC staff travels to satellite locations in DeSoto County, North Port, and Venice to provide therapy and intervention services to children and families impacted from the traumas of child abuse. We anticipate travelling 14,000 miles at .445=\$6,230.       |        |               |             |
| Description of Operating Cost:<br>PAR Trauma Assessment Tools   | 300    | \$6.40        | \$1,920.00  |
| Budget Narrative:<br>Our therapists utilize trauma assessment tools: TFCBT, TFCYC, CBI etc. These instruments cost approximately \$6.40 each and are considered the gold standard in assessing child abuse trauma.  |        |               |             |
| Description of Operating Cost:<br>Office Supplies:  | 12     | \$250.00      | \$3,000.00  |
| Budget Narrative:<br>Office supplies for VOCA programs is approximately \$3,000 annually. This is based on actual costs from previous fiscal year. Includes paper, ink cartridges, etc.   |        |               |             |
| Description of Operating Cost:<br>North Port Rent for VOCA Personnel  | 12     | \$361.56      | \$4,338.72  |
| Budget Narrative:<br>North Port rent is evenly split between our therapy program (50%) and CPT (50%). Total rent is \$2,892.49. VOCA is paying 25% of the case coordinators salary for VOCA services and 25% of the rent \$1,446.245 x 25%=\$361.56 per month x 12 mon.= \$4,338.73 |        |               |             |
| Description of Operating Cost:<br>Indirect Cost for CPC Staff Accountant  | 26     | \$833.14      | \$21,661.64 |
| Budget Narrative:   |        |               |             |

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**VOCA Operating Budget**

Staff Accountant spends 40% of her time processing payroll, time sheets, and uploads the financial back-up with the monthly VOCA invoice. 40% of salary & benefits =\$21661.71 divided by 26 pay periods=\$833.14 per pay period. See Note regarding rate.

Operating Subtotal

\$37,220.36

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VOCA Training Budget: TFCBT 10 hour on line course Victim Services Training Offered by FCPTI  
Krimes Against Kids Conference

Agency Name: Child Protection Center, Inc.

Training requested must be to enhance delivery of victim services.

Travel associated with training must adhere to the State of Florida Travel Rules.

If awarded funds in this category, additional information will be required prior to incurring costs associated with training.

The narrative should include the name and detailed information on the training and a justification for how it will enhance

direct services to crime victims. VOCA funds will only reimburse registration, lodging and travel.

**Florida Administrative Rules related to travel expenses:**

[Click Here](#)

**Section 112.061, Florida Statutes- Travel Expenses:**

[Click Here](#)

**Reference Guide for State Expenditures:**

[Click Here](#)

**Training Expenses:**

| Description of Training Expenses and a Budget Narrative   | Number | Cost Per Item | Total      |
|---|--------|---------------|------------|
| Description of Training Expenses:<br>TFCBT 10 hour on line course<br>Budget Narrative:<br>MUSC Trauma Focused Cognitive Behavioral Therapy 10 hour course is recognized as a foundation course for the therapist to become familiar with TFCBT model and is recognized by the National Child Traumatic Stress Network. Cost is \$35 per person. | 5      | \$35.00       | \$175.00   |
| Description of Training Expenses:<br>Victim Services Training Offered by FCPTI<br>Budget Narrative:<br>Approved training provided by Florida Crime Prevention Institute and associated travel costs for the five VOCA Personnel reflected in the grant. Training will enhance therapeutic intervention skills working with abuse victims.       | 3      | \$2,000.00    | \$6,000.00 |
| Description of Training Expenses:<br>Krimes Against Kids Conference<br>Budget Narrative:<br>Registration is \$350 x 4 people (\$1400) plus hotel at \$150 per night x 12 nights (\$1800) plus millage (1115.15 miles x .445 =\$496.24 Conference will enhance intervention and therapeutic skills of staff                                      | 4      | \$924.06      | \$3,696.24 |
| Training Subtotal   |        |               | \$9,871.24 |

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**

**VOCA 2019-2020**

**Organization: Child Protection Center, Inc.**

**Grant No.: VOCA-2019-Child Protection Center, -00031**

**Version Date: 07/12/2019 13:33:08**

**Victims Served and Types of Services**

**Agency Name:** Child Protection Center, 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) \$402,017.74**

| <b># of Victims<br/>to be<br/>Served</b> | <b>Type of Victim<br/>\$402,017.74</b>                                | <b>\$ Amount<br/>per<br/>Category</b> | <b>% of Total<br/>Grant<br/>Amount</b> | <b># of Other<br/>Types<br/>of Victims<br/>to be<br/>Served</b> | <b>For other<br/>types of crimes,<br/>identify and list each<br/>separately below.</b> |
|--|---|---------------------------------------|--|---|--|
| 0  | Adult Physical Assault<br>(Includes Aggravated and<br>Simple Assault) | \$0                                   | 0.00%                                  | 0   |  |
| 0  | Adult Sexual Assault  | \$0                                   | 0.00%                                  | 0   |  |
| 0  | Adults Sexually<br>Abused/Assaulted as<br>Children                    | \$0                                   | 0.00%                                  | 0   |  |
| 0  | Arson   | \$0                                   | 0.00%                                  | 0   |  |
| 0  | Bullying (Verbal, Cyber or<br>Physical)                               | \$0                                   | 0.00%                                  | 0   |  |
| 0  | Burglary  | \$0                                   | 0.00%                                  | 0   |  |
| 150                                      | Child Physical Abuse or<br>Neglect                                    | \$120,124.82                          | 29.88%                                 | 0   |  |
| 2  | Child Pornography   | \$1,601.66                            | 0.40%                                  | 0   |  |
| 330                                      | Child Sexual<br>Abuse/Assault   | \$264,274.61                          | 65.74%                                 | 0   |  |
| 0  | Domestic and/or Family<br>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:<br>Racial/Religious/Gender/S<br>exual Orientation/Other   | \$0                                   | 0.00%                                  | 0   |  |



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**Victims Served and Types of Services**

|                       |   |             |                     |                |
|-----------------------|---|-------------|---------------------|----------------|
|                       | (Explanation Required)                            |             |                     |                |
| 0                     | Human Trafficking: Labor                          | \$0         | 0.00%               | 0              |
| 5                     | Human Trafficking: Sex                            | \$4,004.16  | 1.00%               | 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              |
| 15                    | Teen Dating Victimization                         | \$12,012.48 | 2.99%               | 0              |
| 0                     | Terrorism (Domestic/International)                | \$0         | 0.00%               | 0              |
| <b>Total</b>          |   | <b>502</b>  | <b>\$402,017.74</b> | <b>100.00%</b> |
| <b>Victims Served</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  |  |
| 300                              | Personal Advocacy/Accompaniment                                   | 0  |  |
| 512                              | Emotional Support or Safety Services                              | 0  |  |
| 0                                | Shelter/Housing Services  | 0  |  |
| 150                              | Criminal/Civil Justice System Assistance                          | 0  |  |
| 75                               | Number of Victims Assisted with a Victim Compensation Application | 0  |  |
| <b>Total Services</b>            | <b>1437</b>   | <b>0</b>   | <b>Subtotal of "Other" Services</b>  |