

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**

**VOCA 2019-2020**

**Organization: Suncoast Center, Inc.**

**Grant No.: VOCA-2019-Suncoast Center, Inc.-00103**

**Version Date: 08/16/2019 11:47:17**

**VOCA Personnel Budget: 1**

**Agency Name:** Suncoast 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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Sexual Assault Specialist II	\$39,219.27	\$29,414.46	75%	0.75

**Personnel Narrative:** 94.119(b) Sexual Assault Specialist II to advocate on behalf of victims of sexual violence crimes through crisis intervention, support at forensic exams, and legal advocacy. Request 75% VOCA funding.

<b>Sub-Total</b>	\$39,219.27	\$29,414.46		0.75
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<b>Agency Contribution for Personnel Expenses</b>	\$9,804.81
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<b>Pay Schedule: (choose one from the drop-down menu)</b>	Bi-Weekly
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**Position Number:**

Hours per week = 40  
Hourly Rate = \$17.01

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary		\$35,380.80	\$1,360.80
FICA	7.65%	\$2,706.63	\$104.10

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VOCA Personnel Budget: 1

Retirement	2.25%	\$796.07	\$30.62
Health Ins.		\$0	\$0
Life Ins.		\$0	\$0
Dental Ins.		\$0	\$0
Workers Comp	0.86%	\$304.27	\$11.70
Unemployment	0.45%	\$31.50	\$1.21
(1st \$7K)			
Other:		\$0	\$0
TOTAL		\$39,219.27	\$1,508.43

Explanation (if applicable):

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

Yes

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**Organization: Suncoast Center, Inc.**

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**Version Date: 08/16/2019 11:47:17**

**VOCA Personnel Budget: 2**

**Agency Name:** Suncoast 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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Sexual Assault Specialist	\$45,686.93	\$34,265.20	75%	0.75

Personnel Narrative: 94.119(b) Sexual Assault Specialist to advocate on behalf of victims of sexual violence crimes through crisis intervention and legal advocacy. Request 75% VOCA funding.

Sub-Total	\$45,686.93	\$34,265.20		0.75
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<b>Agency Contribution for Personnel Expenses</b>	<b>\$11,421.73</b>
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<b>Pay Schedule: (choose one from the drop-down menu)</b>	<b>Bi-Weekly</b>
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Position Number:

Hours per week = 40  
Hourly Rate = \$16.83

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary		\$35,006.40	\$1,346.40
FICA	7.41%	\$2,593.97	\$99.77

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VOCA Personnel Budget: 2

Retirement	0%	\$0	\$0
Health Ins.		\$7,322.00	\$281.62
Life Ins.		\$73.00	\$2.81
Dental Ins.		\$152.00	\$5.85
Workers Comp	0.86%	\$301.06	\$11.58
Unemployment (1st \$7K)	0.45%	\$31.50	\$1.21
Other:		\$207.00	\$7.96
TOTAL		\$45,686.93	\$1,757.19

Explanation (if applicable):

Other: Long Term & AD&D Disability. FICA rate may differ due to agency offers tax deferred 125 cafeteria plan.

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

Yes

**OFFICE OF THE FLORIDA ATTORNEY GENERAL  
VOCA 2019-2020**

**Organization: Suncoast Center, Inc.  
Grant No.: VOCA-2019-Suncoast Center, Inc.-00103  
Version Date: 08/16/2019 11:47:17  
VOCA Personnel Budget: 3**

**Agency Name:** Suncoast 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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Child Advocate	\$47,752.58	\$35,814.43	75%	0.75
Personnel Narrative:	94.119(b) Child Advocate to provide advocacy services to primary and secondary victims of child abuse. Request 75% VOCA funding.			
Sub-Total	\$47,752.58	\$35,814.43		0.75

**Agency Contribution for Personnel Expenses** \$11,938.15

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

**Position Number:**

Hours per week = 40  
Hourly Rate = \$17.58

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$36,566.40		\$36,566.40	\$1,406.40
FICA		7.44%	\$2,720.54	\$104.64
Retirement		1%	\$365.66	\$14.06
Health Ins.			\$7,322.00	\$281.62

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VOCA Personnel Budget: 3

Life Ins.		\$73.00	\$2.81
Dental Ins.		\$152.00	\$5.85
Workers Comp	0.86%	\$314.47	\$12.10
Unemployment	0.45%	\$31.50	\$1.21
(1st \$7K)			
Other:		\$207.00	\$7.96
	TOTAL	\$47,752.58	\$1,836.64

Explanation (if applicable):

Other: Long Term & AD&D Disability. FICA rate may differ due to agency offers tax deferred 125 cafeteria plan.

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

Yes

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**VOCA 2019-2020**  
**Organization: Suncoast Center, Inc.**  
**Grant No.: VOCA-2019-Suncoast Center, Inc.-00103**  
**Version Date: 08/16/2019 11:47:17**  
**VOCA Personnel Budget: 4**

**Agency Name:** Suncoast 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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Child Advocate	\$48,712.04	\$36,534.03	75%	0.75
Personnel Narrative:	94.119(b) Child Advocate to provide advocacy services to primary and secondary victims of child abuse. Request 75% VOCA funding.			

Sub-Total	\$48,712.04	\$36,534.03		0.75
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<b>Agency Contribution for Personnel Expenses</b>	\$12,178.01
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<b>Pay Schedule: (choose one from the drop-down menu)</b>	Bi-Weekly
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**Position Number:**

Hours per week = 40  
Hourly Rate = \$17.79

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$37,003.20		\$37,003.20	\$1,423.20
FICA		7.39%	\$2,734.54	\$105.17
Retirement		2.25%	\$832.57	\$32.02
Health Ins.			\$7,322.00	\$281.62

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VOCA Personnel Budget: 4

Life Ins.		\$74.00	\$2.85
Dental Ins.		\$186.00	\$7.15
Workers Comp	0.86%	\$318.23	\$12.24
Unemployment	0.45%	\$31.50	\$1.21
(1st \$7K)			
Other:		\$210.00	\$8.08
	TOTAL	\$48,712.04	\$1,873.54

Explanation (if applicable):

Other: Long Term & AD&D Disability. FICA rate may differ due to agency offers tax deferred 125 cafeteria plan.

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

Yes



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**VOCA Personnel Budget: 5**

**Agency Name:** Suncoast Center, Inc.

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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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Sexual Assault Manager	\$68,767.69	\$34,383.84	50%	0.5

Personnel Narrative: 94.120 (b) Sexual Assault Manager is to meet the community needs for advocacy , forensic medical exams, maint accreditation through Florida Counsel Against Sexual Violence. Request 50% VOCA funding.

Sub-Total	\$68,767.69	\$34,383.84		0.5
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<b>Agency Contribution for Personnel Expenses</b>	\$34,383.85
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<b>Pay Schedule: (choose one from the drop-down menu)</b>	Bi-Weekly
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Position Number:

Hours per week = 40  
Hourly Rate = \$26.44

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$54,995.20	\$54,995.20	\$2,115.20

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VOCA Personnel Budget: 5

FICA	7.52%	\$4,135.64	\$159.06
Retirement	2.25%	\$1,237.39	\$47.59
Health Ins.		\$7,322.00	\$281.62
Life Ins.		\$110.00	\$4.23
Dental Ins.		\$152.00	\$5.85
Workers Comp	0.86%	\$472.96	\$18.19
Unemployment (1st \$7K)	0.45%	\$31.50	\$1.21
Other:		\$311.00	\$11.96
TOTAL		\$68,767.69	\$2,644.91

Explanation (if applicable):

Other: Long Term & AD&D Disability. FICA rate may differ due to agency offers tax deferred 125 cafeteria plan.

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

No

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**VOCA Personnel Budget: 6**

**Agency Name:** Suncoast Center, Inc.

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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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: SAVE TEAM Lead Examiner	\$86,905.72	\$21,726.43	25%	0.2

**Personnel Narrative:** 94.119(b) Lead Examiner ensures victims have access to a quality medical examination. This position provides quality assurance, medical and clinical training and supervision which are vital to the program. Request 25% VOCA funding.

Sub-Total	\$86,905.72	\$21,726.43		0.2
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<b>Agency Contribution for Personnel Expenses</b>	\$65,179.29
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<b>Pay Schedule: (choose one from the drop-down menu)</b>	Bi-Weekly
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**Position Number:**

Hours per week =	32
Hourly Rate =	\$40.00

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary		\$66,560.00	\$2,560.00
FICA	6.93%	\$4,612.61	\$177.41

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VOCA Personnel Budget: 6

Retirement	2%	\$1,331.20	\$51.20
Health Ins.		\$13,131.00	\$505.04
Life Ins.		\$132.00	\$5.08
Dental Ins.		\$158.00	\$6.08
Workers Comp	0.86%	\$572.42	\$22.02
Unemployment	0.45%	\$31.50	\$1.21
(1st \$7K)			
Other:		\$377.00	\$14.50
TOTAL		\$86,905.72	\$3,342.53

Explanation (if applicable):

Other: Long Term & AD&D Disability. FICA rate may differ due to agency offers tax deferred 125 cafeteria plan.

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

No

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**VOCA 2019-2020**

**Organization: Suncoast Center, Inc.**

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**VOCA Personnel Budget: 8**

**Agency Name:** Suncoast Center, Inc.

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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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Out Patient Manager	\$68,462.12	\$17,115.53	25%	0.25
Personnel Narrative:	94.120 Out Patient Manager provides direct clinical supervision, assure training needs and coordination of activities that facilitate the provision of direct service staff. They monitor caseloads, clinical risk and quality of care. VOCA funds 25%.			
Sub-Total	\$68,462.12	\$17,115.53		0.25

**Agency Contribution for Personnel Expenses** \$51,346.59

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

**Position Number:**

Hours per week = 40  
Hourly Rate = \$26.45

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary		\$55,016.00	\$2,116.00
FICA	7.28%	\$4,005.17	\$154.04
Retirement	3%	\$1,650.48	\$63.48

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VOCA Personnel Budget: 8

Health Ins.		\$6,736.84	\$259.11
Life Ins.		\$107.00	\$4.12
Dental Ins.		\$137.00	\$5.27
Workers Comp	0.86%	\$473.14	\$18.20
Unemployment	0.45%	\$31.50	\$1.21
(1st \$7K)			
Other:		\$305.00	\$11.73
	TOTAL	\$68,462.12	\$2,633.16

Explanation (if applicable):

Other: Long Term & AD&D Disability. FICA rate may differ due to agency offers tax deferred 125 cafeteria plan.

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

No

**OFFICE OF THE FLORIDA ATTORNEY GENERAL**

**VOCA 2019-2020**

**Organization: Suncoast Center, Inc.**

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**Version Date: 08/16/2019 11:47:17**

**VOCA Personnel Budget: Out Patient Manager 7**

**Agency Name:** Suncoast 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 (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
Position: Out Patient Manager	\$59,091.33	\$14,772.83	25%	0.25

**Personnel Narrative:** 94.120 Out Patient Manager provides direct clinical supervision, assure training needs and coordination of activities that facilitate the provision of direct service staff. They monitor caseloads, clinical risk and quality of care. VOCA funds 25%.

Sub-Total	\$59,091.33	\$14,772.83		0.25
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<b>Agency Contribution for Personnel Expenses</b>	\$44,318.50
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<b>Pay Schedule: (choose one from the drop-down menu)</b>	Bi-Weekly
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**Position Number:**

Hours per week = 40  
Hourly Rate = \$25.29

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$52,603.20		\$52,603.20	\$2,023.20
FICA		7.65%	\$4,024.15	\$154.77
Retirement		3%	\$1,578.10	\$60.70

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VOCA Personnel Budget: Out Patient Manager 7

Health Ins.		\$0	\$0
Life Ins.		\$104.00	\$4.00
Dental Ins.		\$0	\$0
Workers Comp	0.86%	\$452.39	\$17.40
Unemployment	0.45%	\$31.50	\$1.21
(1st \$7K)			
Other:		\$298.00	\$11.46
	TOTAL	\$59,091.33	\$2,272.74

Explanation (if applicable):

Other: Long Term & AD&D Disability. FICA rate may differ due to agency offers tax deferred 125 cafeteria plan.

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

No



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**VOCA Contractual/Fee for Service Budget**

**Agency name:** Suncoast 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
<b>Name of Business or Contractor:</b> James E Lewis PH.D <b>Budget Narrative:</b> 94.120 (d) Contractual Agreement is secured with local psychologist who has been pre-approved by Children's Medical Services to provide psychological test and evaluations. Client number is used to track the expenditures.Request \$6,500 VOCA funds	\$650.00	10	\$6,500.00
<b>Name of Business or Contractor:</b> 211 Tampa Bay Cares, Inc. <b>Budget Narrative:</b> 94.120 (d) Contractual Agreement with the 211 Tampa Bay Cares Inc. to provide 24/7 toll free referral information related to sexual violence.The contract amount is \$1,184.75 per month,we request 50% to be funded by VOCA.	\$592.38	12	\$7,108.56
<b>Name of Business or Contractor:</b> Suncoast Center Inc <b>Budget Narrative:</b> 94.119 (c) Fee for service Individual therapy provided by agency personnel. We propose 22,514 Individual Therapy reimbursed in 15 minute increments /units at	\$25.00	22,514	\$562,850.00

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VOCA Contractual/Fee for Service Budget

\$25 per unit.

Name of Business or Contractor:	\$12.25	713	\$8,734.25
Suncoast Center Inc			
Budget Narrative:			
94.119 (c) Fee for service Family therapy provided by agency personnel. We propose 713.25 Family Therapy reimbursed in 15 minute			
Name of Business or Contractor:	\$8.00	426	\$3,408.00
Suncoast Center Inc			
Budget Narrative:			
94.119 (c) Fee for serviceGroup therapy provided by agency personnel. We propose 427 Group Therapy reimbursed in 15 minute			
Contractual Subtotal			\$588,600.81

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VOCA 2019-2020

Organization: Suncoast Center, Inc.

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VOCA Operating Budget

**Agency name:** Suncoast 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: Rent -2960 Roosevelt	12	\$364.12	\$4,369.44
Budget Narrative: 94.121 (d) Rent- Agency rents office to provide Trauma Services.The annual rate in FY19-20 is \$34,059 and is allocated to programs based on the FTEs in the location.Sexual Assault staff 3.90 FTE / location FTE 30.4 = 12.83%. \$34,059 x 12.83%=\$4,369.			
Operating Subtotal			\$4,369.44

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VOCA 2019-2020

Organization: Suncoast Center, Inc.

Grant No.: VOCA-2019-Suncoast Center, Inc.-00103

Version Date: 08/16/2019 11:47:17

VOCA Training Budget: Victims Services Practitioner Designation training

Agency Name: Suncoast 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:	2	\$2,000.00	\$4,000.00
Victims Services Practitioner Designation training			
Budget Narrative:			
Required Victims Services Practitioner Designation training budgeted for two positions @ \$2,000			
Training Subtotal			\$4,000.00

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**Victims Served and Types of Services**

**Agency Name:** Suncoast 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) \$820,997.00**

<b># of Victims to be Served</b>	<b>Type of Victim \$820,997.00</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>
10	Adult Physical Assault (Includes Aggravated and Simple Assault)	\$7,672.87	0.93%	0	
175	Adult Sexual Assault	\$134,275.22	16.36%	0	
315	Adults Sexually Abused/Assaulted as Children	\$241,695.38	29.44%	0	
0	Arson	\$0	0.00%	0	
0	Bullying (Verbal, Cyber or Physical)	\$0	0.00%	0	
0	Burglary	\$0	0.00%	0	
75	Child Physical Abuse or Neglect	\$57,546.52	7.01%	0	
0	Child Pornography	\$0	0.00%	0	
375	Child Sexual Abuse/Assault	\$287,732.59	35.98%	0	
115	Domestic and/or Family Violence	\$88,238.00	10.75%	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	\$0	0.00%	0	

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**Victims Served and Types of Services**

	(Explanation Required)			
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
5	Survivors of Homicide Victims	\$3,836.43	0.47%	0
0	Teen Dating Victimization	\$0	0.00%	0
0	Terrorism (Domestic/International)	\$0	0.00%	0
<b>Total Victims Served</b>	<b>1070</b>	<b>\$820,997.01</b>	<b>100.93%</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>
600	Information and Referral	15	Neuropsychological Evaluations
175	Personal Advocacy/Accompaniment	0	
940	Emotional Support or Safety Services	0	
10	Shelter/Housing Services	0	
115	Criminal/Civil Justice System Assistance	0	
1100	Number of Victims Assisted with a Victim Compensation Application	0	
<b>Total</b>	<b>2955</b>	<b>15</b>	<b>Subtotal of "Other"</b>

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**Victims Served and Types of Services**

**Services**

**Services**