

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

VOCA Personnel Budget: 1

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Shelter Advocate #1 | \$38,737.46 | \$38,737.46 | 100% | 1 |
| Personnel Narrative: | Will provide core services, including counseling, information & referral groups, advocacy, hotline, transportation, victims compensation and support. | | | |
| Sub-Total | \$38,737.46 | \$38,737.46 | | 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 = \$14.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$29,120.00 | | \$29,120.00 | \$1,120.00 |
| FICA | | 7.65% | \$2,227.68 | \$85.68 |
| Retirement | | 3% | \$873.60 | \$33.60 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

VOCA Personnel Budget: 1

| | | | |
|--------------|-------|-------------|------------|
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$652.58 | \$25.10 |
| | % | | |
| Unemployment | 1.42% | \$99.40 | \$3.82 |
| (1st \$7K) | | | |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$38,737.46 | \$1,489.90 |

Explanation (if applicable):

Other Category - Vision Insurance

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

No

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

VOCA Personnel Budget: 2

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Shelter Advocate #2 | \$38,737.46 | \$38,737.46 | 100% | 1 |

Personnel Narrative: Will provide core services, including counseling, information & referral groups, advocacy, hotline, transportation, victims compensation and support.

| | | | | |
|-----------|-------------|-------------|--|---|
| Sub-Total | \$38,737.46 | \$38,737.46 | | 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 = \$14.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$29,120.00 | | \$29,120.00 | \$1,120.00 |
| FICA | | 7.65% | \$2,227.68 | \$85.68 |
| Retirement | | 3% | \$873.60 | \$33.60 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 2

| | | | |
|--------------|-------|-------------|------------|
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$652.58 | \$25.10 |
| | % | | |
| Unemployment | 1.42% | \$99.40 | \$3.82 |
| (1st \$7K) | | | |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$38,737.46 | \$1,489.90 |

Explanation (if applicable):
Other Category - Vision Insurance

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

No

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 3

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Shelter Advocate #3 | \$38,737.46 | \$19,368.73 | 50% | 0.5 |

Personnel Narrative: Will provide core services, including counseling, information & referral groups, advocacy, hotline, transportation, victims compensation and support.

| | | | | |
|-----------|-------------|-------------|--|-----|
| Sub-Total | \$38,737.46 | \$19,368.73 | | 0.5 |
|-----------|-------------|-------------|--|-----|

Agency Contribution for Personnel Expenses \$19,368.73

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

Position Number:

Hours per week = 40
 Hourly Rate = \$14.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$29,120.00 | | \$29,120.00 | \$1,120.00 |
| FICA | | 7.65% | \$2,227.68 | \$85.68 |
| Retirement | | 3% | \$873.60 | \$33.60 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

VOCA Personnel Budget: 3

| | | | |
|--------------|-------|-------------|------------|
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$652.58 | \$25.10 |
| | % | | |
| Unemployment | 1.42% | \$99.40 | \$3.82 |
| (1st \$7K) | | | |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$38,737.46 | \$1,489.90 |

Explanation (if applicable):

Other Category - Vision Insurance

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

Yes

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 4

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Shelter Advocate #4 | \$38,737.46 | \$38,737.46 | 100% | 1 |

Personnel Narrative: Will provide core services, including counseling, information & referral groups, advocacy, hotline, transportation, victims compensation and support.

| | | | | |
|-----------|-------------|-------------|--|---|
| Sub-Total | \$38,737.46 | \$38,737.46 | | 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 = \$14.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$29,120.00 | | \$29,120.00 | \$1,120.00 |
| FICA | | 7.65% | \$2,227.68 | \$85.68 |
| Retirement | | 3% | \$873.60 | \$33.60 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 4

| | | | |
|--------------|--------------|--------------------|-------------------|
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$652.58 | \$25.10 |
| | % | | |
| Unemployment | 1.42% | \$99.40 | \$3.82 |
| (1st \$7K) | | | |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$38,737.46 | \$1,489.90 |

Explanation (if applicable):
 Other Category - Vision Insurance

Is this position used as a matching expense Y/N? No

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

**Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 5**

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Facility Maintenance/Housekeeper | \$36,389.33 | \$18,194.66 | 50% | 0.5 |

Personnel Narrative: Responsible for housekeeping and maintenance of shelter facility and grounds used to house domestic violence survivors and their children.

| | | | | |
|-----------|-------------|-------------|--|-----|
| Sub-Total | \$36,389.33 | \$18,194.66 | | 0.5 |
|-----------|-------------|-------------|--|-----|

Agency Contribution for Personnel Expenses \$18,194.67

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

Position Number:

Hours per week = 40
Hourly Rate = \$13.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$27,040.00 | | \$27,040.00 | \$1,040.00 |
| FICA | | 7.65% | \$2,068.56 | \$79.56 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 5

| | | | |
|----------------------------|--------------|--------------------|-------------------|
| Retirement | 3% | \$811.20 | \$31.20 |
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$605.97 | \$23.31 |
| | % | | |
| Unemployment (1st \$7K) | 1.42% | \$99.40 | \$3.82 |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$36,389.33 | \$1,399.59 |

Explanation (if applicable):

Other Category - Vision Insurance

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

Yes

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 6

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Court Advocate #1 | \$38,737.46 | \$38,737.46 | 100% | 1 |

Personnel Narrative: Will provide core services, including counseling, information & referral groups, advocacy, hotline, transportation, court accompaniment, court support, victims compensation and support.

| | | | | |
|-----------|-------------|-------------|--|---|
| Sub-Total | \$38,737.46 | \$38,737.46 | | 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 = \$14.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$29,120.00 | | \$29,120.00 | \$1,120.00 |
| FICA | | 7.65% | \$2,227.68 | \$85.68 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 6

| | | | |
|----------------------------|--------------|--------------------|-------------------|
| Retirement | 3% | \$873.60 | \$33.60 |
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$652.58 | \$25.10 |
| | % | | |
| Unemployment (1st \$7K) | 1.42% | \$99.40 | \$3.82 |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$38,737.46 | \$1,489.90 |

Explanation (if applicable):
Other Category - Vision Insurance

Is this position used as a matching expense Y/N? No

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 8

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Outreach Advocate | \$38,737.46 | \$38,737.46 | 100% | 1 |

Personnel Narrative: Will provide core services, including counseling, information & referral groups, advocacy, hotline, transportation, victims compensation and support.

| | | | | |
|-----------|-------------|-------------|--|---|
| Sub-Total | \$38,737.46 | \$38,737.46 | | 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 = \$14.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$29,120.00 | | \$29,120.00 | \$1,120.00 |
| FICA | | 7.65% | \$2,227.68 | \$85.68 |
| Retirement | | 3% | \$873.60 | \$33.60 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: 8

| | | | |
|--------------|--------------|--------------------|-------------------|
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$652.58 | \$25.10 |
| | % | | |
| Unemployment | 1.42% | \$99.40 | \$3.82 |
| (1st \$7K) | | | |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$38,737.46 | \$1,489.90 |

Explanation (if applicable):
Other Category - Vision Insurance

Is this position used as a matching expense Y/N? No

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

**Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: Court Advocate #2 7**

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Court Advocate #2 | \$38,737.46 | \$19,368.73 | 50% | 0.5 |

Personnel Narrative: Will provide core services, including counseling, information & referral groups, advocacy, hotline, transportation, court accompaniment, court support, victims compensation and support.

| | | | | |
|-----------|-------------|-------------|--|-----|
| Sub-Total | \$38,737.46 | \$19,368.73 | | 0.5 |
|-----------|-------------|-------------|--|-----|

| | |
|---|-------------|
| Agency Contribution for Personnel Expenses | \$19,368.73 |
|---|-------------|

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

Position Number:

Hours per week = 40
Hourly Rate = \$14.00

| | | RATE | Yearly Employer Cost | Per Pay Period Approved Budget |
|--------------|-------------|-------|----------------------------|-----------------------------------|
| Gross Salary | \$29,120.00 | | \$29,120.00 | \$1,120.00 |
| FICA | | 7.65% | \$2,227.68 | \$85.68 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Personnel Budget: Court Advocate #2 7

| | | | |
|----------------------------|-------|-------------|------------|
| Retirement | 3% | \$873.60 | \$33.60 |
| Health Ins. | | \$5,421.12 | \$208.50 |
| Life Ins. | | \$40.56 | \$1.56 |
| Dental Ins. | | \$229.56 | \$8.83 |
| Workers Comp | 2.241 | \$652.58 | \$25.10 |
| | % | | |
| Unemployment (1st \$7K) | 1.42% | \$99.40 | \$3.82 |
| Other: | | \$72.96 | \$2.81 |
| | TOTAL | \$38,737.46 | \$1,489.90 |

Explanation (if applicable):
Other Category - Vision Insurance

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

Yes

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

VOCA Contractual/Fee for Service Budget

Agency name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Mental Health Therapy for Participants Budget Narrative: Professional mental health therapy services provided by licensed therapists for victims/survivors of domestic violence within the safety of the Shelter. 15 minute sessions - 600 sessions annually. | \$25.00 | 600 | \$15,000.00 |
| Contractual Subtotal | | | \$15,000.00 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL
VOCA 2019-2020
Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214
Version Date: 05/09/2019 13:12:15
VOCA Operating Budget

Agency name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Travel | 12,000 | \$0.45 | \$5,400.00 |
| Budget Narrative: Mileage for court and outreach advocates to meet with for relocation, counsel, etc., and/or attend court with domestic violence survivors. Estimated 400 miles per month for 3 advocates, total 12,000 miles annually | | | |
| Description of Operating Cost: Mobile Phones | 12 | \$162.50 | \$1,950.00 |
| Budget Narrative: Provide court and outreach mobile phones at approximately \$65.00 per month per phone. (2 advocates \$130.00 per month; 1 advocate \$65.00 @ 50% -- \$32.50 per month)Monthly Total \$162.50 | | | |
| Description of Operating Cost: Office Supplies | 12 | \$150.00 | \$1,800.00 |
| Budget Narrative: Office supplies needed for serving crime victims including but not limited to; paper, pens, file folders, printer ink, and other office type supplies needed for serving victims. | | | |
| Description of Operating Cost: Small Office Equipment - Computers | 3 | \$800.00 | \$2,400.00 |
| Budget Narrative: Provide laptop type computers advocates for serving victims | | | |
| Description of Operating Cost: Small Office Furniture | 1 | \$2,000.00 | \$2,000.00 |
| Budget Narrative: Purchase needed office furniture such as desk, chairs, file cabinets, etc. for offices serving crime victims. | | | |

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

VOCA Operating Budget

| | | | |
|---|----|----------|-------------|
| Description of Operating Cost: | 12 | \$250.00 | \$3,000.00 |
| General Liability and Commercial Insurance | | | |
| Budget Narrative: | | | |
| Commercial insurance will be pro-rated based on sq. ft of space used by advocates serving victims and liability will be pro-rated by amount per staff paid by VOCA. | | | |
| Description of Operating Cost: | 12 | \$250.00 | \$3,000.00 |
| Office phones, internet and fax | | | |
| Budget Narrative: | | | |
| Cost of landline office phones, internet, and fax machine calculated per FTE. | | | |
| Description of Operating Cost: | 3 | \$400.00 | \$1,200.00 |
| Small Office Equipment - Printers & Software | | | |
| Budget Narrative: | | | |
| Provide printers for advocates for serving victims, provide specialized software for client tracking program | | | |
| Operating Subtotal | | | \$20,750.00 |

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

VOCA Training Budget: Attend Victim Designation Training and Updates

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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: Attend Victim Designation Training and Updates Budget Narrative: Mileage, lodging, Per Diem fees associated with staff attending mandatory victim designation training and updates | 4 | \$1,200.00 | \$4,800.00 |
| Training Subtotal | | | \$4,800.00 |

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

**Organization: Domestic Abuse Council, Inc.
Grant No.: VOCA-2019-Domestic Abuse Council, I-00214**

Version Date: 05/09/2019 13:12:15

Victims Served and Types of Services

Agency Name: Domestic Abuse Council of Volusia County, Inc. d/b/a Beacon Center

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) \$291,169.42

| # of Victims to be Served | Type of Victim \$291,169.42 | \$ Amount per Category | % of Total Grant Amount | # of Other Types of Victims to be Served | For other types of crimes, identify and list each separately below. |
|----------------------------------|---|-------------------------------|--------------------------------|---|--|
| 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 | |
| 0 | Child Sexual Abuse/Assault | \$0 | 0.00% | 0 | |
| 4125 | Domestic and/or Family Violence | \$291,169.42 | 100.00% | 0 | |
| 0 | DUI/DWI Incidents | \$0 | 0.00% | 0 | |
| 0 | Elder Abuse or Neglect | \$0 | 0.00% | 0 | |
| 0 | Hate Crime: Racial/Religious/Gender/Sexual Orientation/Other | \$0 | 0.00% | 0 | |

OFFICE OF THE FLORIDA ATTORNEY GENERAL

VOCA 2019-2020

Organization: Domestic Abuse Council, Inc.

Grant No.: VOCA-2019-Domestic Abuse Council, I-00214

Version Date: 05/09/2019 13:12:15

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 |
| 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 |
| Total Victims Served | | 4125 | \$291,169.42 | 100.00% |

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.

| # of Victims to be Served | Type of Service | # of Other Types of Services to be Provided | For other types of services, identify and list each separately below. |
|----------------------------------|---|--|--|
| 4125 | Information and Referral | 0 | |
| 1000 | Personal Advocacy/Accompaniment | 0 | |
| 4125 | Emotional Support or Safety Services | 0 | |
| 250 | Shelter/Housing Services | 0 | |
| 400 | Criminal/Civil Justice System Assistance | 0 | |
| 250 | Number of Victims Assisted with a Victim Compensation Application | 0 | |
| Total Services | 10150 | 0 | Subtotal of "Other" Services |