## VOCA Personnel Budget

## VOCA Personnel Budget Report

## Agency Name: City of Blountstown

Complete the summary table and salary grid below and provide information about each position requested. The position title included in each summary table must be exactly as it appears on the job description. In the Budget Narrative section indicate if the salary/benefit expenses listed include 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 (do not lump duties under one header, unless each sub-duty also includes percentages). Failure to provide VOCA allowable job descriptions may result in a reduction to the request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is requested as VOCA funded and/or utilized as Match.

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: Victim Advo	cate *	\$43,580.04	\$32,685.03	75%*	.75
Personnel Narrative:	Victim's Advocate position will	be funded 75 percent by VC	OCA Grant and 25 percen	t by the City of Blountst	town. *
	Sub-Total	\$43,580.04	\$32,685.03		.75
Agency Contribution for	Personnel Expenses		[	\$10	),895.01
Pay Schedule: (choose	one from the drop-down menu)				
			Bi-Week	dy *	
Position Number:		1			
	Hours per week =		40.000*		
	Hourly Rate =		\$13.46*		
				early plover	Per Pay Period

		RATE	Employer Cost	Per Pay Period Approved Budget
Gross Salary	\$27,996.80		\$27,996.80	\$1,076.80
FICA		6.1000% *	\$1,707.80	\$65.68
Retirement		23.2700% *	\$6,514.86	\$250.57

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Health Ins.		\$6,124.92 *	\$235.57
Life Ins.		\$48.60*	\$1.87
Dental Ins.		\$0.00 *	\$0.00
Workers Comp	4.2400% *	\$1,187.06	\$45.66
Unemployment (1st \$7K)	0.0000% *	\$0.00	\$0.00
Other:		\$	\$0.00
	TOTAL	\$43,580.04	\$1,676.15

Explanation (if applicable):

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

Yes\*

\$0.00

\$0.00

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Personnel:

Retirement

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funde FTE	əd
Position: 2020-2021 In	ncreased Funding *	\$8,415.00	\$8,415.00	100%*		0.00
Personnel Narrative:	Additional funding request fron authority*	n the 2020-2021 VOCA Gr	ant application for approv	ed VOCA allowable cost	ts, due to increased budge	t
	Sub-Total	\$8,415.00	\$8,415.00			0.00
Agency Contribution for	Personnel Expenses				\$0.00	
Pay Schedule: (choose of	one from the drop-down menu)					
			Bi-Wee	kly*		
Position Number:		2				
	Hours per week =		0.000*			
	Hourly Rate =		\$0.00 *			
		RATE	En	éarly nployer Cost	Per Pay Period Approved Budget	
Gross Salary	\$0.	00		\$0.00		\$0.00
FICA		0.000%*		\$0.00		\$0.00

0.0000% \*

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	TOTAL	\$8,415.00	\$323.65
Other:		\$8,415.00	\$323.65
Unemployment (1st \$7K)	0.0000% *	\$0.00	\$0.00
Workers Comp	0.0000% *	\$0.00	\$0.00
Dental Ins.		\$0.00 *	\$0.00
Life Ins.		\$0.00 *	\$0.00
Health Ins.		\$0.00 *	\$0.00

Explanation (if applicable): Additional funding request from the 2020-2021 VOCA Grant application for approved VOCA allowable costs, due to increased budget authority

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

No \*

# **VOCA Operating Budget**

### Agency name: City of Blountstown

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 or meeting attendance to coordinate victim services), etc. Furniture and equipment costing less than \$2,500 should be requested from this budget category. Items requested should not be grouped and each item must be requested as a separate line item, with the exception of general office supplies. 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; etc.). If the agency is requesting funds to purchase computer hardware or software, this constitutes maintaining or establishing a computer network system. Complete the Special Conditions Certification form accordingly.

#### **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 Bu	dget Narrative	Number	Cost Per Item	Total
Description of Operating Cost: <i>Covid</i> Expenses	1	\$10,000.00	\$10,000.00	
		С	perating Subtotal	\$10,000.00

# Victims Served and Types of Services

### Agency Name: Blountstown Police Department

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)						\$53,100.03	
# of Victims to be Served	Type of Victim	\$ Amount per Category	% of Total Grant Amount	of Victi	er Types ns to be ved	For other types of crimes, ic each separately be	
54	Adult Physical Assault (Includes Aggravated and Simple Assault)	\$25,152.65	47.37 %		0		
11	Adult Sexual Assault	\$5,123.69	9.65 %		0		
0	Adults Sexually Abused/Assaulted as Children	\$0.00	0.00 %		0		
0	Arson	\$0.00	0.00 %		0		
0	Bullying (Verbal, Cyber or Physical)	\$0.00	0.00 %		0		
5	Burglary	\$2,328.95	4.39 %		0		
14	Child Physical Abuse or Neglect	\$6,521.06	12.28 %		0		
0	Child Pornography	\$0.00	0.00 %		0		
4	Child Sexual Abuse/Assault	\$1,863.16	3.51 %		0		
19	Domestic and/or Family Violence	\$8,850.01	16.67 %		0		
0	DUI/DWI Incidents	\$0.00	0.00 %		0		
0	Elder Abuse or Neglect	\$0.00	0.00 %		0		
0	Hate Crime: Racial/Religious/Gender/Sexual Orientation/Other (Explanation Required)	\$0.00	0.00 %		0		
0	Human Trafficking: Labor	\$0.00	0.00 %		0		
0	Human Trafficking: Sex	\$0.00	0.00 %		0		
5	Identity Theft/Fraud/Financial Crime	\$2,328.95	4.39 %		0		
0	Kidnapping	\$0.00	0.00 %		0		
0	Mass Violence (Domestic/International)	\$0.00	0.00 %		0		
0	Other Vehicular Victimization (e.g., Hit and Run)	\$0.00	0.00 %		0		
2	Robbery	\$931.58	1.75 %		0		
0	Stalking/Harassment	\$0.00	0.00 %		0		

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0	Survivors of Homicide Victims	\$0.00	0.00 %	0			
0	Teen Dating Victimization	\$0.00	0.00 %	0			
0	Terrorism (Domestic/International)	\$0.00	0.00 %	0			
Total Victims Served	114	\$53,100.03	100.00 %	0	SubTotal	\$0.00	\$0.00

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.
40	Information and Referral	0	
20	Personal Advocacy/Accompaniment	0	
11	Emotional Support or Safety Services	0	
0	Shelter/Housing Services	0	
114	Criminal/Civil Justice System Assistance	0	
72	Number of Victims Assisted with a Victim Compensation Application	0	
Total Services	257	0	Subtotal of "Other" Services