

# VOCA Personnel Budget

## [VOCA Personnel Budget Report](#)

**Agency Name:** ODI dba CIL Jacksonville

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
<b>Position:</b> <i>Disabled Victims Advocate *</i>	\$49,592.51	\$37,194.38	75% *	.75
<b>Personnel Narrative:</b> <i>The ILRC has incorporated up to a 2% increase at time of annual review, 401k match up to 3% and additional benefits cost. *</i>				
<b>Sub-Total</b>	<b>\$49,592.51</b>	<b>\$37,194.38</b>		<b>.75</b>

### Agency Contribution for Personnel Expenses

\$12,398.13

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

*Bi-Weekly \**

### Position Number:

1

Hours per week =

40.000 \*

Hourly Rate =

\$18.15 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$37,752.00		\$37,752.00	\$1,452.00
<b>FICA</b>		7.6500% *	\$2,888.03	\$111.08
<b>Retirement</b>		3.0000% *	\$1,132.56	\$43.56

Health Ins.			\$6,063.00 *	\$233.19
Life Ins.			\$409.00 *	\$15.73
Dental Ins.			\$299.00 *	\$11.50
Workers Comp		1.5000% *	\$566.28	\$21.78
Unemployment (1st \$7K)		5.4000% *	\$378.00	\$14.54
Other:			\$104.64	\$4.02
TOTAL			\$49,592.51	\$1,907.40

Explanation (if applicable):

*Other: Vision Insurance 8.72 x 12 months = 104.64*

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

No \*

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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
<b>Position:</b> 2020-2021 Increased Funding *	\$19,223.00	\$19,223.00	100% *	0.00
<b>Personnel Narrative:</b>	Additional funding request from the 2020-2021 VOCA Grant application for approved VOCA allowable costs, due to increased budget authority*			
<b>Sub-Total</b>	<b>\$19,223.00</b>	<b>\$19,223.00</b>		<b>0.00</b>

### Agency Contribution for Personnel Expenses

\$0.00

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

Bi-Weekly \*

### Position Number:

2

Hours per week =

0.000 \*

Hourly Rate =

\$0.00 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$0.00		\$0.00	\$0.00
<b>FICA</b>		0.0000% *	\$0.00	\$0.00
<b>Retirement</b>		0.0000% *	\$0.00	\$0.00

Health Ins.			\$0.00 *	\$0.00
Life Ins.			\$0.00 *	\$0.00
Dental Ins.			\$0.00 *	\$0.00
Workers Comp		0.0000% *	\$0.00	\$0.00
Unemployment (1st \$7K)		0.0000% *	\$0.00	\$0.00
Other:			\$19,223.00	\$739.35
TOTAL			\$19,223.00	\$739.35

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:** ODI dba CIL Jacksonville

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 Budget Narrative		Number	Cost Per Item	Total
Description of Operating Cost: <i>Motel Hotel Assistance</i>	Budget Narrative: <i>To provide an alternative to shelter for victims with special needs or if shelters are at capacity or if sheltering would prohibit immediate access to family. An explanation will be provided prior to service provision. 7 nights x \$60=420.00 x 10</i>	10	\$420.00	\$4,200.00
Description of Operating Cost: <i>Emergency Financial Assistance</i>	Budget Narrative: <i>Assistance to victims who, secondary to victimization, have critical financial needs such as an electric bill, app fee for housing or deposit for housing, window/door lock repair or replacement, and food.</i>	15	\$300.00	\$4,500.00
Description of Operating Cost: <i>Cell Phone Plan for advocate</i>	Budget Narrative: <i>Cell phone to be used for VOCA needs only. The advocate will need a data and texting plan to stay in contact with consumers as the advocate will work in the field frequently. 12 months x \$85 = \$540.00 (Used Only by Program)</i>	12	\$85.00	\$1,020.00
Description of Operating Cost: <i>Transportation Assistance</i>	Budget Narrative: <i>Assistance for victims to meet their needs relating to stabilization after victimization. Funds are for monthly bus passes or Uber. 10 x \$50.274</i>	10	\$50.27	\$502.70
Operating Subtotal				\$10,222.70



# VOCA Training Budget

- 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 may be required prior to incurring costs associated with training.
- The narrative must include the name of the training, detailed information on the training, how attendance at the requested training will benefit crime victims and specific costs requested. VOCA funds will reimburse registration, lodging, travel and meals.

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## 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: <i>Victims Designation Training</i>	Budget Narrative: <i>Training cost for advocate and her supervisor to attend the required Victims Designation training update that was delayed due to Covid 19. Cost includes the training, travel and accommodations.</i>	1	\$2,000.00	\$2,000.00
Training Subtotal				\$2,000.00

# Victims Served and Types of Services

**Agency Name:** ODI Dba CIL Jacksonville

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)					\$68,640.08
# of Victims to be Served	Type of Victim	\$ 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.
7	Adult Physical Assault (Includes Aggravated and Simple Assault)	\$7,392.01	10.77 %	0	
3	Adult Sexual Assault	\$3,168.00	4.62 %	0	
2	Adults Sexually Abused/Assaulted as Children	\$2,112.00	3.08 %	0	
0	Arson	\$0.00	0.00 %	0	
6	Bullying (Verbal, Cyber or Physical)	\$6,336.01	9.23 %	0	
2	Burglary	\$2,112.00	3.08 %	0	
2	Child Physical Abuse or Neglect	\$2,112.00	3.08 %	0	
0	Child Pornography	\$0.00	0.00 %	0	
0	Child Sexual Abuse/Assault	\$0.00	0.00 %	0	
15	Domestic and/or Family Violence	\$15,840.02	23.08 %	0	
0	DUI/DWI Incidents	\$0.00	0.00 %	0	
5	Elder Abuse or Neglect	\$5,280.01	7.69 %	0	
3	Hate Crime: Racial/Religious/Gender/Sexual Orientation/Other (Explanation Required)	\$3,168.00	4.62 %	0	
0	Human Trafficking: Labor	\$0.00	0.00 %	0	
2	Human Trafficking: Sex	\$2,112.00	3.08 %	0	
10	Identity Theft/Fraud/Financial Crime	\$10,560.01	15.38 %	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	
4	Robbery	\$4,224.00	6.15 %	0	
4	Stalking/Harassment	\$4,224.00	6.15 %	0	



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			
<b>Total Victims Served</b>	<b>65</b>	<b>\$68,640.08</b>	<b>100.00 %</b>	<b>0</b>	<b>SubTotal</b>	<b>\$0.00</b>	<b>\$0.00</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.

# 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.
65	Information and Referral	0	
40	Personal Advocacy/Accompaniment	0	
30	Emotional Support or Safety Services	0	
30	Shelter/Housing Services	0	
15	Criminal/Civil Justice System Assistance	0	
10	Number of Victims Assisted with a Victim Compensation Application	0	
<b>Total Services</b>	<b>190</b>	<b>0</b>	<b>Subtotal of "Other" Services</b>