

GOVERNMENT

Grant Proposal Notification

GPN Number:013-25		Da	ate of Notification:	04/14/2025
(Completed by Finance Department)			(MM/DD/YYYY)
Parent Committee Agenda Date:	05/06/2025	Grant Application Due Date:	04/11/2025	
(Completed by Finance Department) (MM/DD/YYYY)			(MM/DD/YYYY)
Name of Grant:	Paul Coverdell F	orensic Scie	ence/NFSIA F	FY 24
Name of Grantor:	Illinois Criminal Justice Information Authority (ICJIA)			
Originating Entity:	DOG/OJP/BJA (Name the entity from which the funding originates, if Grantor is a pass-thru entity)			
County Department:	Sheriff's Office, Crime Lab			
Department Contact:	Claire Dragovich, Laboratory Director x2101			
Parent Committee:	JPS			
Grant Amount Requested:	\$ 171,088.00			
ype of Grant: (Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)		ease Specify)		
Is this a new non-recurring Gran	t: Yes	✓ No		
Source of Grant:	Ederal	✓ State	Private] Corporate
If Federal, provide CFDA:	If Federal, provide CFDA: If State, provide CSFA:			
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1. Justify the department's need for this grant.

The purpose of this grant is to improve the quality and timeliness of forensic science provided by a crime lab. Additionally for this solicitation it also requires at least 62% must be spent specifically on opioid-related activities. The laboratory receives funding through Sheriff's Office crime lab general funds and crime lab fees (only assessed for convictions in drug cases). The grant provides funding for continuing accreditation, proficiency tests, replacement and update of obsolete equipment and continuing education. Specifically opioid-related the plan includes funding for a replacement drug standard cabinet and a mass spectrometer with an atmospheric pressure solids analysis probe system (ASAP-MS), supplies, proficiency tests and training.

2. Based on the County's Strategic Plan, which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

This funding opportunity correlates with the County's plan for 'community well-being' and 'safe community'. (https://www.dupagecounty.gov/government/county_board/strategic_plan/) The laboratory provides accredited forensic services to any law enforcement agency working within DuPage County. The laboratory is responsive to our customer needs by expediting analysis in cases involving suspected overdose, violent crime by unknown subject, threat to life by unknown subject and pending court date.

3.	What is the period covered by the grant?		_ to:
		(MM/DD/YYYY)	(MM/DD/YYYY)
	3.1. If period is unknown, estimate the year the project or project pha	ase will begin and ant	ticipated duration:
	3.1.1 O7/25 and 1 year (MM/YY) (Duration)		
4.	Will the County provide "seed" or startup funding to initiate grant pro	oject? (Yes or No)	No
	4.1. If yes, please identify the Company-Accounting Unit used for the	funding	
5.	If grant is awarded, how is funding received? (select one):		
	5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)		
	5.2. After expenditure of costs (reimbursement-based)	\checkmark	



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- 6. Does the grant allow for Personnel Costs? (Yes or No)
 - 6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

Yes

6.1.1. Total salary	\$0.00	Percentage covered by grant		
6.1.2. Total fringe benefits	\$0.00	Percentage covered by grant		
6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No):				

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

6.2. Will receipt of this gran	nt require the hiring of additional staff? (Yes or No):	No
6.2.1. If yes, how many	new positions will be created?		
6.2.1.1. Full-tim	ne Part-time	Temporary	
6.2.1.2. Will the	e headcount of the new position(s) be pla	aced in the grant accountin	•
6.2.1.2.1.	If no, in what Company-Accounting Unit	t will the headcount(s) be p	(Yes or No) placed?



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	6.3. Does the grar	nt award require the positions to be retained beyond the grant term? (Yes or No)	No
	6.3.1. If yes, p	ease answer the following:	
	6.3.1.1.	How many years beyond the grant term?	
	6.3.1.2.	What Company-Accounting Unit(s) will be used?	
	6.3.1.3.	Total annual salary	
	6.3.1.4.	Total annual fringe benefits	
7.	Does the grant allo	ow for direct administrative costs? (Yes or No)	Yes
	7.1. If yes, please	answer the following:	
	7.1.1. Total es	timated direct administrative costs for project	
	7.1.2. Percent	age of direct administrative costs covered by grant	
	7.1.3. What pe	ercentage of the grant total is the portion covered by the grant	
8.	What percentage	of the grant funding is non-personnel cost / non-direct administrative cost?	100%
9.	Are matching func	ls required? (Yes or No):	No
	9.1. If yes, please	answer the following:	
	9.1.1. What pe	ercentage of match funding is required by granting entity?	
	9.1.2. What is	the dollar amount of the County's match?	



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	9.1.3. V	Vhat Company-Accounting Unit(s) will provide the matching requirement?	
10	. What amou	unt of funding is already allocated for the project?	\$0.00
	10.1.	If allocated, in what Company-Accounting Unit are the funds located?	
	10.2.	Will the project proceed if the funding opportunity is not awarded? (Yes or No)	No
11	. What is the	e total project cost (Grant Award + Match + Other Allocated Funding)?	\$171,088.00