



## Grant Proposal Notification

GPN Number: 007-24  
(Completed by Finance Department)

Date of Notification: 01/24/2024  
(MM/DD/YYYY)

Parent Committee Agenda Date: 02/20/2024  
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 02/02/2024  
(MM/DD/YYYY)

Name of Grant: Violent Crimes Victim Assistance Grant PY25

Name of Grantor: Illinois Attorney General's Office

Originating Entity: \_\_\_\_\_  
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: DuPage County State's Attorney's Office

Department Contact: Robin Bolton, Finance Manager, ext. 8146  
(Name, Title, and Extension)

Parent Committee: Judicial Public Safety Committee

Grant Amount Requested: \$ 40,000.00

Type of Grant: Continuation  
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant:  Yes  No

Source of Grant:  Federal  State  Private  Corporate

If Federal, provide CFDA: \_\_\_\_\_ If State, provide CSFA: \_\_\_\_\_

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1. Justify the department’s need for this grant.

This grant provides partial reimbursement of the salary of a Victim Advocate. This Victim Advocate assists victims crime throughout the court process.

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

This grant would address the Quality of Life Imperative by providing funding for a Victim Advocate that assists victims of violent crime in DuPage County.

3. What is the period covered by the grant?

07/01/2024 to: 06/30/2025  
(MM/DD/YYYY) (MM/DD/YYYY)

3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. \_\_\_\_\_ and \_\_\_\_\_  
(MM/YY) (Duration)

4. Will the County provide “seed” or startup funding to initiate grant project? (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)



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6.3. Does the grant award require the positions to be retained beyond the grant term? (Yes or No) No

6.3.1. If yes, please 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 allow for direct administrative costs? (Yes or No) No

7.1. If yes, please answer the following:

7.1.1. Total estimated direct administrative costs for project

7.1.2. Percentage of direct administrative costs covered by grant

7.1.3. What percentage 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? 0%

9. Are matching funds required? (Yes or No): No

9.1. If yes, please answer the following:

9.1.1. What percentage 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. What Company-Accounting Unit(s) will provide the matching requirement? \_\_\_\_\_
10. What amount of funding is already allocated for the project? \$47,396.00
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? 1000-6500
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): Yes
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$87,396.00