# Budget Detail - Year 1

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N (DOJ Financial Guide, Section 3.10)

| ١. | Pers | onnel |  |
|----|------|-------|--|
|    |      |       |  |

| Name                      | Position                      | Computation                                    |   |  |          |     |                             |                    |  |  |
|---------------------------|-------------------------------|--|---|--|----------|-----|-----------------------------|--------------------|--|--|
| List each name, if known. | List each position, if known. | Sh   | Show annual salary rate & amount of time devoted to the project for each name/position. |  |          |     |                             |                    |  |  |
|                           |                               | Salary Rate /# of house drug months Total Cost |   |  |          |     | Non-Federal<br>Contribution | Federal<br>Request |  |  |
|                           |                               |  |   |  |          | \$0 |                             | \$0                |  |  |
|                           |                               |  |   |  | Total(s) | \$0 | \$0                         | \$0                |  |  |

Narrative

| B. Fringe Be | nefits |
|--------------|--------|
|--------------|--------|

| D. Tringe Denegres  |                                      |                                 |     |     |     |  |  |  |  |
|---|--------------------------------------|---------------------------------|-----|-----|-----|--|--|--|--|
| Name  | Computation                          |                                 |     |     |     |  |  |  |  |
| List each grant-supported position receiving fringe benefits. |                                      | Show the basis for computation. |     |     |     |  |  |  |  |
|   | Base Rate Total Cost Non-Federal Req |                                 |     |     |     |  |  |  |  |
|   |                                      |                                 | \$0 |     | \$0 |  |  |  |  |
|   |                                      | Total(s)                        | \$0 | \$0 | \$0 |  |  |  |  |
| Narrative   |                                      |                                 |     |     |     |  |  |  |  |

| C. Travel  |                                  |                      |                              |      |            |                |               |                  |                             |                    |
|--|----------------------------------|----------------------|------------------------------|------|------------|----------------|---------------|------------------|-----------------------------|--------------------|
| Purpose of Travel  | Location                         | Type of Expense      | Basis                        |      |            |                | Comp          | utation          |                             |                    |
| Indicate the purpose of each trip or<br>type of trip (training, advisory<br>group meeting) | Indicate the travel destination. | Lodging, Meals, Etc. | Per day, mile,<br>trip, Etc. |      | Compute th | e cost of each | type of exp   | ense X the numbe | er of people traveling      | g.                 |
|  |                                  |                      |                              | Cost | Quantity   | # of Staff     | # of<br>Trips | Total Cost       | Non-Federal<br>Contribution | Federal<br>Request |
|  |                                  |                      | N/A                          |      |            |                |               | \$0              |                             | \$0                |
|  |                                  |                      |                              |      |            |                | Total(s)      | \$0              | \$0                         | \$0                |
| Narrative  |                                  |                      |                              |      |            |                |               |                  |                             |                    |
| D. Equipment   |                                  |                      |                              |      |            |                |               |                  |                             |                    |
|  | ltem                             |                      |                              |      |            | Computation    | on            |                  |                             |                    |
|  |                                  |                      |                              |      |            |                |               |                  |                             |                    |

| Supplies  Supplies  Supplies  Supplies  Supplies  Supplies  Supplies  Supply Items  Provide a list of the types of items to be purchased with grant funds.  Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.  # of Items  Unit Cost  Total (cst  Non-Federal Request Request Federal Request For item Supplies  Total (cst  Non-Federal Request Request Supplies  Total (cst  Non-Federal Request Request Supplies  Total (cst  Non-Federal Request Request Supplies Su | List and describe each item of equipment that will be purchased                   | Compute the cost (e.g., the number of each item to be purchased X the cost per item) |   |                   |                             |                           |  |  |  |
|--|---|--|---|-------------------|-----------------------------|---------------------------|--|--|--|
| Supplies  Supply Items Supply Items Provide a list of the types of terms to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request Footage Foota |   | # of Items   |   | Total Cost        |                             | Federal<br>Request        |  |  |  |
| Supplies  Supply Items  Fravide a list of the types of items to be purchased with grant funds.  Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.  # of Items Unit Cost Total Cost Contribution Figure 1 Federal Contribution Figure 2 Federal Contribution Figure 3 Federal Fede | <u> </u>  |  | Total(s)  | \$0               | \$0                         | \$0                       |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  | larrative   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Supply Items Provide a list of the types of items to be purchased with grant funds.  # of Items Unit Cost Total Cost Contribution Federal Request  \$0  Total(s) \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  \$0  |   |  |   |                   |                             |                           |  |  |  |
| Provide a list of the types of items to be purchased with grant funds.    Bescribe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.   Federal Request   |   |  |   |                   |                             |                           |  |  |  |
| # of Items Unit Cost Total Cost Contribution Request \$0 \$0 \$0  Total(s) \$0 \$0 \$0  arrative   | Supply Items  |  | Computation                                       |                   |                             |                           |  |  |  |
| # of Items Unit Cost Total Cost Contribution Request \$0 \$0 \$0  Total(s) \$0 \$0 \$0  arrative   |   |  |   |                   |                             |                           |  |  |  |
| # Of Items Unit Cost   Total Cost   Contribution   Request   | Provide a list of the types of items to be purchased with grant funds.            | Describe the item and the o  | compute the costs. Computation: The number of eac | h item to be purc | hased X the cost pe         | r item.                   |  |  |  |
| So   So   So   So   So   So   So   So  | Provide a list of the types of items to be purchased with grant funds.            | Describe the item and the o  | compute the costs. Computation: The number of eac | h item to be purc |                             |                           |  |  |  |
| Total(s) \$0 \$0 \$0  arrative   | Provide a list of the types of items to be purchased with grant funds.            |  |   |                   | Non-Federal                 | Federal                   |  |  |  |
| Total(s) \$0 \$0 \$0  arrative   | Provide a list of the types of items to be purchased with grant funds.            |  |   |                   | Non-Federal                 | Federal                   |  |  |  |
| arrative   | Provide a list of the types of items to be purchased with grant funds.            |  |   | Total Cost        | Non-Federal                 | Federal<br>Request        |  |  |  |
|  | Provide a list of the types of items to be purchased with grant funds.            |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
|  | Provide a list of the types of items to be purchased with grant funds.            |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
|  |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request        |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request        |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request        |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request        |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request        |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
| Construction   | Provide a list of the types of items to be purchased with grant funds.  Narrative |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |
|  |   |  | Unit Cost   | Total Cost        | Non-Federal<br>Contribution | Federal<br>Request<br>\$0 |  |  |  |

| <b>Purpose</b> Provide the purpose of the |                                | Computation |   |                           |                           |                     |                             |                    |  |  |
|---|--------------------------------|-------------|---|---------------------------|---------------------------|---------------------|-----------------------------|--------------------|--|--|
| construction                              | Describe the construction pr   | oject(s)    | Compute                                 | the costs (e.g., the numb | per of each item to be pu | rchased X the cost  | per item)                   |                    |  |  |
|   |                                |             | # of Items                              | Co                        | ost                       | Total Cost          | Non-Federal<br>Contribution | Federal<br>Request |  |  |
|   |                                |             |   |                           |                           | \$0                 |                             | \$0                |  |  |
|   |                                |             |   |                           | Total(:                   | <i>\$</i> 0         | \$0                         | \$0                |  |  |
| Narrative                                 |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     |                             |                    |  |  |
| G. Subawards (Subgrants)                  |                                |             |   |                           |                           |                     |                             |                    |  |  |
| Descri                                    | ation                          |             | Purpose                                 |                           | Consultant?               |                     |                             |                    |  |  |
| Descri                                    | ption                          |             | Fulpose                                 |                           | Consultants               |                     |                             |                    |  |  |
|   |                                |             |   |                           | Is the subaward for a     | ,                   |                             |                    |  |  |
|   |                                |             |   |                           | consultant? If yes, us    |                     |                             |                    |  |  |
| Provide a description of the a            | ctivities to be carried out by |             | Describe the purpose of the subaward    | (subgrant)                | the section below to      |                     |                             |                    |  |  |
| subrecip                                  | ients.                         |             | bescribe the purpose of the subuware    | (Subgrunt)                | explain associated        |                     |                             |                    |  |  |
|   |                                |             |   |                           | travel expenses           |                     |                             |                    |  |  |
|   |                                |             |   |                           | included in the cost.     |                     |                             |                    |  |  |
|   |                                |             |   |                           |                           |                     | Non-Federal                 | Federal            |  |  |
|   |                                |             |   |                           |                           | Total Cost          | Contribution                | Request            |  |  |
|   |                                |             |   |                           |                           |                     | 20                          | nequest            |  |  |
|   |                                |             |   |                           |                           |                     |                             | \$0                |  |  |
|   |                                |             |   |                           |                           | 5) \$0              | \$0                         | \$0                |  |  |
| Consultant Travel (if necessar            | ~)                             |             |   |                           | 70007                     | 7 70                | , ,,,                       | 70                 |  |  |
| Purpose of Travel                         | Location                       |             | Type of Expense                         |                           |                           | Computation         |                             |                    |  |  |
| Indicate the purpose of each trip or      |                                |             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                           |                           |                     |                             |                    |  |  |
| type of trip (training, advisory          | Indicate the travel destina    | ition.      | Hotel, airfare, per diem                | Con                       | mpute the cost of each t  | ype of expense X th | e number of people          | traveling.         |  |  |
| group meeting)                            |                                |             |   | l l                       |                           |                     |                             |                    |  |  |
| group meeting)                            |                                |             |   |                           | Duration # of             |                     | Non Saday 1                 | Fodoral            |  |  |
| group meeting)                            |                                |             |   | Cost                      | Duration # of or Staff    | Total Cost          | Non-Federal<br>Contribution | Federal<br>Request |  |  |

|   |   |            |  | 1   |   |   |            | I                           |                    |
|---|---|------------|--|---|---|---|------------|-----------------------------|--------------------|
|   |   |            |  |   |   |   | \$0        |                             | \$0                |
| Į.  |   |            |  | ļ   | !!  | Total   | \$0        | \$0                         | \$0                |
| Narrative   |   |            |  |   |   |   |            |                             |                    |
|   |   |            |  |   |   |   |            |                             |                    |
| H. Procurement Contracts  |   |            |  |   |   |   |            |                             |                    |
| Descrip   | otion   |            | Purpose  | Consultant?   |   |   |            |                             |                    |
| Provide a description of the produc<br>contract and an estimate of the cost<br>promote free and open competition in<br>justification must be provided for sol<br>of the Simplified Acquisition Thro | s. Applicants are encouraged to<br>n awarding contracts. A separate<br>le source procurements in excess |            | Describe the purpose of the contract   |   | Is the subav<br>consultant?<br>the section<br>explain as:<br>travel ex<br>included in | If yes, use<br>below to<br>sociated<br>penses |            |                             |                    |
|   |   |            |  |   |   |   | Total Cost | Non-Federal<br>Contribution | Federal<br>Request |
| Law enforcement grade Automated L<br>cameras with updated software. Profi<br>safety assessments, camera set-up an   | essional services for site and  | technologi | will allow for up to date product and software wit cal advances. The contract affords upgrades to proneeded. The Byrne IAG funds will be used to imple | duct and  | No  |   | \$21,420   |                             | \$21,420           |
|   |   |            |  |   |   | Total(s)                                      | \$21,420   | \$0                         | \$21,420           |
| Consultant Travel (if necessary   |   |            |  |   |   |   |            |                             |                    |
| Purpose of Travel Indicate the purpose of each trip or type of trip (training, advisory group meeting)  | Location  Indicate the travel destina   | tion.      | Type of Expense  Hotel, airfare, per diem  | <b>Computation</b> Compute the cost of each type of expense X the number of people traveling. |   |   |            | traveling.                  |                    |
| 3 y   |   |            |  | Cost  | Duration<br>or<br>Distance  | # of<br>Staff                                 | Total Cost | Non-Federal<br>Contribution | Federal<br>Request |
|   |   |            |  |   |   |   | \$0        |                             | \$0                |
|   |   |            |  | •   |   | Total   | \$0        | \$0                         | \$0                |

| Narrative   |  |  |   |  |  |                             |                                     |                      |
|---|--|--|---|--|--|-----------------------------|-------------------------------------|----------------------|
| The Humboldt County Sheriff's Office software along with professional serv Leasing the Automated License Plate additional cost during the time of the would be a certainty, costing more in The Humboldt County Sheriff's Office proprietary items that are desired and | vices for site assessme<br>Readers (ALPR) was the<br>contract. With rapid<br>the long run. | nts, implementation, integrat<br>he most cost effective based o<br>technological changes to bot<br>County's Procurement policies | ion, mainter<br>on our projec<br>th hardware<br>s. Dependin | nance, and testing.  tt. Lease consideration  and software, the like  g on the system type t | a allowed for latest te<br>lihood of purchased of<br>that fits our project w | echnology and equipment bed | software update<br>coming quickly c | es at no<br>obsolete |
| I. Other Costs  |  |  |   |  |  |                             |                                     |                      |
| <b>Description</b> List and describe items that will be paid with reproduction, telephone, janitorial, or se investigative or confidential  | ecurity services, and  |  |   |  | utation<br>for computation   |                             |                                     |                      |
|   |  | Quantity   | Basis   | Cost   | Length of Time   | Total Cost                  | Non-Federal<br>Contribution         | Federal<br>Request   |
|   |  |  |   |  |  | \$0                         |                                     | \$0                  |
|   |  |  |   |  | Total(s)   | \$0                         | \$0                                 | \$0                  |
| Narrative   |  |  |   |  |  |                             |                                     |                      |
|   |  |  |   |  |  |                             |                                     |                      |
| J. Indirect Costs   |  | _  |   |  |  |                             |                                     |                      |
| Descript  | tion   |  |   |  | Computation  |                             |                                     |                      |

Describe what the approved rate is and how it is applied.

Compute the indirect costs for those portions of the program which allow such costs.

|           | Base | Indirect Cost Rate | Total Cost | Non-Federal<br>Contribution | Federal<br>Request |
|-----------|------|--------------------|------------|-----------------------------|--------------------|
|           |      |                    | \$0        |                             | \$0                |
|           |      | Total              | (s) \$0    | \$0                         | \$0                |
| Narrative |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |
|           |      |                    |            |                             |                    |