



Le Sueur County, MN

Tuesday, October 17, 2017

Board Meeting

Item 8

10:45 a.m. Vicki Walechka, Victim Witness (5 min)

RE: Grant Agreement

Staff Contact:



Minnesota Department of Public Safety ("State") Commissioner of Public Safety Office of Justice Programs 445 Minnesota Street, Suite 2300 St. Paul, MN 55101-2139	Grant Program: Crime Victim Services 2018 Grant Agreement No.: A-CVS-2018-LESUEAO-00045
Grantee: Le Sueur County Attorney's Office 88 South Park Avenue PO Box 156 Le Center, Minnesota 56057	Grant Agreement Term: Effective Date: 10/1/2017 Expiration Date: 9/30/2019
Grantee's Authorized Representative: Vicki Walechka, Coordinator Le Sueur County Attorney's Office Victim/Witness Program 88 South Park Avenue Le Center, Minnesota 56057 (507) 357-8512	Grant Agreement Amount: Original Agreement \$150,400.00 Matching Requirement \$28,990.00
State's Authorized Representative: Casey Cashman, Grants Manager Crime Victim Services 445 Minnesota Street Suite 2300, Bremer Tower St. Paul, Minnesota 55101 (651) 201-7352	Federal Funding: CFDA 16.575 \$115,958 State Funding: Minnesota Laws of 2017, Chapter 95, Article 1, Section 11, Subdivision 7 Special Conditions: Attached and incorporated into this grant agreement. See page 3.

Under Minn. Stat. § 299A.01, Subd 2 (4) the State is empowered to enter into this grant agreement.

Term: Effective date is the date shown above or the date the State obtains all required signatures under Minn. Stat. § 16B.98, subd. 7, whichever is later. Once this grant agreement is fully executed, the Grantee may claim reimbursement for expenditures incurred pursuant to the Payment clause of this grant agreement. Reimbursements will only be made for those expenditures made according to the terms of this grant agreement. Expiration date is the date shown above or until all obligations have been satisfactorily fulfilled, whichever occurs first.

The Grantee, who is not a State employee will:

Perform and accomplish such purposes and activities as specified herein and in the Grantee's approved Crime Victim Services 2018 Application ("Application") which is incorporated by reference into this grant agreement and on file with the State at 445 Minnesota Street, Suite 2300, St. Paul, Minnesota 55101-2139. The Grantee shall also comply with all requirements referenced in the Crime Victim Services 2018 Guidelines and Application which includes the Terms and Conditions and Grant Program Guidelines (<http://app.dps.mn.gov/Egrants>), which are incorporated by reference into this grant agreement.

Budget Revisions: The breakdown of costs of the Grantee's Budget is contained in Exhibit A, which is attached and incorporated into this grant agreement. As stated in the Grantee's Application and Grant Program Guidelines, the Grantee will submit a written change request for any substitution of budget items or any deviation and in accordance with the Grant Program Guidelines. Requests must be approved prior to any expenditure by the Grantee.

Matching Requirements: (If applicable.) As stated in the Grantee's Application, the Grantee certifies that the matching requirement will be met by the Grantee.

DPS Grant Agreement non-state (04/14)



Payment: As stated in the Grantee's Application and Grant Program Guidance, the State will promptly pay the Grantee after the Grantee presents an invoice for the services actually performed and the State's Authorized Representative accepts the invoiced services and in accordance with the Grant Program Guidelines. Payment will not be made if the Grantee has not satisfied reporting requirements.

Certification Regarding Lobbying: (If applicable.) Grantees receiving federal funds over \$100,000.00 must complete and return the Certification Regarding Lobbying form provided by the State to the Grantee.

1. ENCUMBRANCE VERIFICATION

Individual certifies that funds have been encumbered as required by Minn. Stat. §§ 16A.15 and 16C.05.

Signed: _____

Date: _____

Grant Agreement No. A-CVS-2018-LESUEAO-00045/3-50727

3. STATE AGENCY

By: _____
(with delegated authority)

Title: _____

Date: _____

2. GRANTEE

The Grantee certifies that the appropriate person(s) have executed the grant agreement on behalf of the Grantee as required by applicable articles, bylaws, resolutions, or ordinances.

By: _____

Title: _____

Date: _____

By: _____

Title: _____

Date: _____

Distribution: DPS/FAS
Grantee
State's Authorized Representative



Special Conditions

1. Time limitations on funding use:

\$17,221.00 is available from October 1, 2017 through June 30, 2019.

\$115,958.00 is available from October 1, 2017 through September 30, 2019. It is only available to the Grantee to spend upon receipt of funds from the US Department of Justice and notification from the State.

\$17,221.00 is available from July 1, 2018 through September 30, 2019.

2. Special Duties:

\$150,400 for general crime services in Le Sueur County.

Budget Summary

Budget		VOCA	State	Match
Budget Category				
Personnel				
PT Admin Assistant		\$8,000.00	\$2,000.00	\$0.00
Victim/Witness Coordinator		\$103,308.00	\$25,844.00	\$1,683.00
Total		\$111,308.00	\$27,844.00	\$1,683.00
Payroll Taxes & Fringe				
Payroll Taxes & Fringe		\$0.00	\$5,598.00	\$27,307.00
Total		\$0.00	\$5,598.00	\$27,307.00
Travel & Training				
Travel & Training		\$2,000.00	\$0.00	\$0.00
Total		\$2,000.00	\$0.00	\$0.00
Office & Program Expenses				
Office & Program Expenses		\$650.00	\$0.00	\$0.00
Total		\$650.00	\$0.00	\$0.00
Direct Client Assistance				
Direct Client Assistance		\$2,000.00	\$1,000.00	\$0.00
Total		\$2,000.00	\$1,000.00	\$0.00
Total		\$115,958.00	\$34,442.00	\$28,990.00