GRANTS ECAF
SUMMARY WORKSHEET

I. REVENUE:

Revenue Source	Original Grant	Amendment(s)	Total	Match
WA DCYF	**$18,643,712**		**$18,643,712**	N/A
Total	**$18,643,712**		**$18,643,712**	**N/A**

II. EXPENDITURES:

Item/Service	Original Grant	Amendment(s)	Total	Match
Administration	790,539.89		790,539.89	N/A
Program Support	2,357,767.11		2,357,767.11	N/A
PassThru	15,495,405		15,495,405	N/A
Total	**$18,643,712**		**$18,643,712**	**N/A**

III. FTE's: List any new FTEs that will be required. (N/A if not applicable)

Quantity	Classification	Type (Regular or Project)	Duration
N/A			

IV. SC 17 Completed: ☐ Yes

V. Revenue Information

*Was grant **revenue** included in the current year's budget?*	☐ *Yes (if you include the pending grants budget)* ☐ *No*
If "no" check appropriate box for accompanying action request. n/a (covered within existing appropriation)	☐ *Budget Transfer* ☐ *Supplemental Appropriation* ☐ *Emergency Appropriation*
Will related program be terminated at grant end date?	☐ *Yes Date* ☐ *No*
a. *If no, what is the source of ongoing funding?*	
b. *If yes, what costs might the County expect to incur at termination (including possible unemployment compensation costs)? None expected*	

VI. PROJECTED ADDITIONAL COUNTY COST IMPACT: (N/A if in current budget)

Source/Narrative	Current Year	Next Year	Ongoing Annual
	$	$	$
Total	$	$	$

Will potential increase of future County funds be required? (If "yes" complete a. and b. below.)	☐ *Yes* ☐ *No*

a. *Include a brief description of costs*

b. *Describe how program will be funded after grant expires.*

*Was this **work** included in the current year's approved budget and work plan?*	☐ Yes ☐ No
If match is required, does this Grant allow use of already authorized County expenditures to achieve the match?	☐Yes ☐ No ☐ N/A

If responding "no" to both of above questions:
What cuts or reductions in service will be implemented to reduce or offset the increased cost to the County due to the grant?

VII. PROJECTED COUNTY SAVINGS: (N/A if in current budget)

Source/Narrative	Current Year	Next Year	Ongoing Annual
Total			

Describe the projected short and long term saving or cost reductions to existing sources, including county general funds, as a result of the grant program: