GRANTS ECAF SUMMARY WORKSHEET

I. REVENUE:

Revenue Source	Original Grant	Amendment(s)	Total	Match
Puget Sound Taxpayer Accountability Act	\$285,427.78	\$25,401.38	\$310,829.16	N/A
Total	\$285,427.78	\$25,401.38	\$310,829.16	N/A

II. EXPENDITURES:

Item/Service	Original Grant	Amendment(s)	Total	Match
Contracted Services	\$285,427.78	\$25,401.38	\$310,829.16	N/A
Total	¢005 407 70	¢05 404 20	¢240.920.40	NI/A
Total	\$285,427.78	. ,	\$310,829.16	N/A
III. FTE's: List any new FTEs that will be required. (N/A if not applicable)				
Quantity Classification		Type (Regular or P	roject) Duratior	ו

IV. SC 17 Completed: 🖂 Yes

V. Revenue Information

Was grant revenue included in the current year's budget?	⊠ Yes □ No
If "no" check appropriate box for accompanying action request. n/a (covered within existing appropriation)	Budget Transfer Supplemental Appropriation Emergency Appropriation
<i>Will related program be terminated at grant end date?</i>	☐ Yes Date ⊠ No
a. If no, what is the source of ongoing funding?	The funding continues thru 2034
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
N/A	\$	\$	\$
Total	\$	\$	\$

Will potenti	ial 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	⊠ <i>N/A</i>

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?

N/A

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

Source/Narrative	Current Year	Next Year	Ongoing Annual
N/A			
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:

N/A