# FTEs Classification ———————————————————————————————————	 (Estimated cost)	\$0
# FTES Classification ————————————————————————————————————	_	
	_ _	
# FTES Classification	_	
# FTES Classification		
U ETE - Classift and the	on	
If new FTEs are needed, complete the	following. Attach additional sheet	if needed.
Who will complete the work? Existing	; FTE(s) $oxtimes$ Existing project FTE(s) $oxtimes$	New FTE(s)
1. Internal Operations (Admin., Operation	s, Direct Service, etc.) (Estimated cost)	\$ 700,000
EXPENDITURES		
	Total Resources	\$700,000
		, ,
Subtotal County Funded Match	002 333310301013 AIII	\$350,000
0 11		ount \$250,000 ount <u>\$100,000</u>
Match Source (General Fund, Patient		
Is match required: Yes No	If yes, match amount required	
Estimated amount, contract not yet	awaraca.	
* Estimated amount, contract not yet		Grant Award \$350,000
Grantor: WA State Military-EMD & De	ont of Homoland Socurity (DHS)	Grant Award \$350,000
Grant Term: From 11/01/2023 to 0	09/30/2024	
Existing/ongoing program X Yes Source of grant funding: Federal [New program ☐ Yes ✓ State ☐ Local ☐ Other ☐	
management programs.		
	anagement operating budget to en	_
		mont agancies to
Purpose of Grant: EMPG funding is av	and all a land a constant and a	_

Total FTEs 2. Pass Thru	(Estimated cost)	\$0
Total FTEs		
# FTEs Classification		
If new FTEs are needed, complete the fo	llowing. Attach additional sheet	if needed.
Who will complete the work? Existing F7		
1. Internal Operations (Admin., Operations, D	irect Service, etc.) (Estimated cost)	\$ 300,000
EXPENDITURES		
	Total Resources	\$300,000
Subtotal County Funded Match	2 333310301010	\$150,000
		nount \$50,000
·	•	ount \$100,000
Is match required: Yes No Match Source (General Fund, Patient Fe	If yes, match amount required	
Jamestala manufinada Vas DNa	If we want he was with a service of	l. ¢150.000
* Estimated amount, contract not yet aw	varded.	
Grantor: WA State Military-EMD & Dept	. of Homeland Security (DHS)	Grant Award \$150,000
Grant Term: From 11/01/2022 to 09/	/30/2024	
Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🔀	New program Yes State Local Other [
_		
supplement their local emergency management programs.		_
	ded to local emergency manage	ement agencies to
Purpose of Grant: EMPG funding is awar		

Department: Emergency Management	Division: 039 Fund:	130 Prog	ram: 23 EMPG-R
Purpose of Grant: EMPG funding is awar supplement their local emergency management programs.		_	_
Existing/ongoing program \(\subseteq \text{Yes} \) Source of grant funding: Federal \(\subseteq \) Grant Term: From 11/01/2023 to 09/		Other 🗌	
Grantor: WA State Military-EMD & Dept	. of Homeland Security	(DHS) Gran	nt Award \$150,000
* Estimated amount, contract not yet aw	arded.		
Is match required: X Yes No Match Source (General Fund, Patient Fe	If yes, match amount es, In-Kind, etc.). If Cou	•	,
GF Program Support DAC 00	2-539310561011	Amount	\$100,000
GF Program Support DAC 00	2-539310561013	Amount	<u>\$50,000</u>
Subtotal County Funded Match			\$150,000
	Total Resources		\$300,000
EXPENDITURES			
3. Internal Operations (Admin., Operations, D	irect Service, etc.) (Estimated	cost) \$ 30	0,000
•			0,000 lew FTE(s)
3. Internal Operations (Admin., Operations, D Who will complete the work? Existing FT If new FTEs are needed, complete the fol	E(s) Existing project	FTE(s) N	lew FTE(s)
Who will complete the work? Existing FT	E(s) Existing project	FTE(s) N	lew FTE(s)
Who will complete the work? Existing FT If new FTEs are needed, complete the following the following states are needed.	E(s) Existing project	FTE(s) N	lew FTE(s)
Who will complete the work? Existing FT If new FTEs are needed, complete the following the following states are needed.	E(s) Existing project	FTE(s) N	lew FTE(s)
Who will complete the work? Existing FT If new FTEs are needed, complete the following the following states are needed.	E(s) Existing project	FTE(s) N	lew FTE(s)
Who will complete the work? Existing FT If new FTEs are needed, complete the fol # FTEs Classification ———————————————————————————————————	E(s) Existing project	FTE(s)	lew FTE(s)

Department: Emergency Management	Division: 039 Fund: 130	Program: 24EMPG
Purpose of Grant: EMPG funding is awar supplement their local emergency mana management programs.		_
Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🔀	New program Yes State Local Other]
Grant Term: From 11/01/2024 to 08/	31/2025	
Grantor: WA State Military-EMD & Dept	. of Homeland Security (DHS)	Grant Award \$400,000
* Estimated amount, contract not yet aw	arded.	
Is match required: Yes No Match Source (General Fund, Patient Fe	If yes, match amount required:	
•		ount \$275,000
5 11	2-339310301013 AIII0	ount \$125,000
Subtotal County Funded Match		\$400,000
	Total Resources	\$800,000
EXPENDITURES		
1. Internal Operations (Admin., Operations, Di	rect Service, etc.) (Estimated cost)	\$800,000
Who will complete the work? Existing FT	E(s) Existing project FTE(s)	New FTE(s)
If new FTEs are needed, complete the fol	lowing. Attach additional sheet it	f needed.
# FTEs Classification		
Total FTEs		
2. Pass Thru	(Estimated cost)	\$0
	Total Expenditure	\$800,000

# FTEs Classification # FTEs Classification Total FTEs Pass Thru	(Estimated cost)	\$400,000
# FTEs Classification	I	
	I	
	I	
	1	
If now ETEs are needed semplets the fa	_	ieeueu.
Who will complete the work? Existing F		
1. Internal Operations (Admin., Operations,	<u> </u>	246,646
EXPENDITURES		
	Total Resources	\$646,646
,	, , , ,	,
Match Source (General Fund, Patient F	•	·
Is match required: Yes No	If yes, match amount required:	\$0
Grantor: WA State Military-EMD & Dep	ot. of Homeland Security (DHS) G	rant Award \$646,646
Grant Term: From 09/01/20 to 07/3	31/24	
Existing/ongoing program $oxtimes$ Yes Source of grant funding: Federal $oxtimes$		
Whatcom Counties.		
	d recover from catastrophic and/or	terrorist events. Funds nanagement agencies
units to prevent, deter, respond to, and are awarded to Region One. Region Or	used to enhance the canability of I	ocal governmental
are awarded to Region One. Region Or		ocal governmental

Who will comp	perations (A plete the wo e needed, co	dmin., Operations, Dire rk? Existing FTE omplete the follo Classification	(s) Existing wing. Attach ac	project FTE(s) [
1. Internal O Who will comp If new FTEs are	perations (A plete the wo e needed, co	rk? Existing FTE	(s) 🛭 Existing	project FTE(s) [New FTE(s)
1. Internal O Who will comp If new FTEs are	perations (A plete the wo e needed, co	rk? Existing FTE	(s) 🛭 Existing	project FTE(s) [New FTE(s)
Internal O Who will comp	perations (A plete the wo e needed, co	rk? Existing FTE	(s) 🛭 Existing	project FTE(s) [New FTE(s)
Internal O Who will comp	perations (A plete the wo e needed, co	rk? Existing FTE	(s) 🛭 Existing	project FTE(s) [New FTE(s)
Internal O Who will comp	perations (A	rk? Existing FTE	(s) 🛭 Existing	project FTE(s) [New FTE(s)
1. Internal O	perations (A			_	<u> </u>
		dmin., Operations, Dire	ct Service, etc.) (EStil	mated cost)	\$ 219,770
EXPENDITUE	\LJ				
	RES				
			Total Resou	rces	\$419,770
iviatell soufce	(General Fl	ana, radent ree:	s, m-nmu, etc.).	ii County fullat	eu, enter DAC.
Is match requir		und, Patient Fee	If yes, match an	•	
Is match requir	rod: 🗆 Vo	s 🔀 No	If you match an	agunt required	\$0
Grantor: WA S	tate Military	y-EMD & Dept. (of Homeland Se	curity (DHS)	Grant Award \$419,770
Grant Term	i: From 09/0	01/21 to 08/31/2	24		
_	_		State Loca	l Other _	
O .	going progra		New program	Yes	
	o Region On ally recogniz	e. Region One	consists of the l	ocal emergency	management agencies Skagit, Snohomish &
units to preven		_			f local governmental
Purpose of Gra	nt. CUCD fu				

Department: Emergency Management	Division: 039 Fund: 130	Program: 22SHSP
Purpose of Grant: SHSP funding is to be us units to prevent, deter, respond to, and re are awarded to Region One. Region One and the federally recognized tribal govern Whatcom Counties.	ecover from catastrophic and consists of the local emergen	/or terrorist events. Funds cy management agencies
Existing/ongoing program \boxtimes Yes Source of grant funding: Federal \boxtimes S	New program Yes State Other	
Grant Term: From 09/01/22 to 08/31/2	24	
Grantor: WA State Military-EMD & Dept. o	of Homeland Security (DHS)	Grant Award \$423,105
Is match required: Yes No	If yes, match amount require	d: \$0
Match Source (General Fund, Patient Fee	s, In-Kind, etc.). If County fun	ded, enter DAC.
	Total Resources	\$423,105
EXPENDITURES	Total Resources	\$423,105
EXPENDITURES 1. Internal Operations (Admin., Operations, Dire		\$423,105 \$ 200,000
	ct Service, etc.) (Estimated cost)	\$ 200,000
1. Internal Operations (Admin., Operations, Dire	ct Service, etc.) (Estimated cost) (s)	\$ 200,000 New FTE(s)
1. Internal Operations (Admin., Operations, Dire Who will complete the work? Existing FTE	ct Service, etc.) (Estimated cost) (s)	\$ 200,000 New FTE(s)
1. Internal Operations (Admin., Operations, Directly Who will complete the work? Existing FTE If new FTEs are needed, complete the follows:	ct Service, etc.) (Estimated cost) (s)	\$ 200,000 New FTE(s)
1. Internal Operations (Admin., Operations, Direct Who will complete the work? Existing FTE If new FTEs are needed, complete the followant # FTEs Classification ————————————————————————————————————	ct Service, etc.) (Estimated cost) (s)	\$ 200,000 New FTE(s)
1. Internal Operations (Admin., Operations, Directly Who will complete the work? Existing FTE If new FTEs are needed, complete the follows:	ct Service, etc.) (Estimated cost) (s)	\$ 200,000 New FTE(s)
1. Internal Operations (Admin., Operations, Direct Who will complete the work? Existing FTE If new FTEs are needed, complete the followant # FTEs Classification ————————————————————————————————————	ct Service, etc.) (Estimated cost) (s)	\$ 200,000 New FTE(s)

Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ————— Total FTEs 2. Pass Thru (Estimated cost) \$350,000
Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ———————————————————————————————————
Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ———————————————————————————————————
Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.
Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.
Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)
_ `` _ `
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$300,000
EXPENDITURES
Total Resources \$650,000
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.
Is match required: Yes No If yes, match amount required: \$0
* Estimated amount, contract not yet awarded.
Grantor: WA State Military-EMD & Dept. of Homeland Security (DHS) Grant Award \$650,00
Grant Term: From 09/01/23 to 08/31/25
Source of grant funding: Federal State Local Other
Existing/ongoing program X Yes New program Yes
and the federally recognized tribal governments within Island, San Juan, Skagit, Snohomish & Whatcom Counties.
units to prevent, deter, respond to, and recover from catastrophic and/or terrorist events. Fu are awarded to Region One. Region One consists of the local emergency management agenci

Department: Emergency Management	Division: 039 Fund: 130	Program: 24SHSP
Purpose of Grant: SHSP funding is to be units to prevent, deter, respond to, and are awarded to Region One. Region One and the federally recognized tribal gover Whatcom Counties.	recover from catastrophic and/o consists of the local emergency	or terrorist events. Funds management agencies
Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🔀	New program Yes State Local Other	
Grant Term: From 09/01/24 to 08/31	/26	
Grantor: WA State Military-EMD & Dept.	of Homeland Security (DHS)	Grant Award \$650,000
* Estimated amount, contract not yet awa	arded.	
Is match required: Yes No	If yes, match amount required:	\$0
Match Source (General Fund, Patient Fe	es, In-Kind, etc.). If County funde	ed, enter DAC.
	T. (18)	6550.000
	Total Resources	\$650,000
EXPENDITURES	Total Resources	\$650,000
EXPENDITURES 3. Internal Operations (Admin., Operations, Dir.)		\$650,000 \$ 300,000
	rect Service, etc.) (Estimated cost)	\$ 300,000
3. Internal Operations (Admin., Operations, Dia	rect Service, etc.) (Estimated cost) E(s)	\$ 300,000 New FTE(s)
3. Internal Operations (Admin., Operations, Dir Who will complete the work? Existing FT	rect Service, etc.) (Estimated cost) E(s)	\$ 300,000 New FTE(s)
3. Internal Operations (Admin., Operations, Dir Who will complete the work? Existing FT If new FTEs are needed, complete the following	rect Service, etc.) (Estimated cost) E(s)	\$ 300,000 New FTE(s)
3. Internal Operations (Admin., Operations, Dir Who will complete the work? Existing FT If new FTEs are needed, complete the following	rect Service, etc.) (Estimated cost) E(s)	\$ 300,000 New FTE(s)
3. Internal Operations (Admin., Operations, Dir Who will complete the work? Existing FT If new FTEs are needed, complete the following	rect Service, etc.) (Estimated cost) E(s)	\$ 300,000 New FTE(s)
3. Internal Operations (Admin., Operations, Dir Who will complete the work? Existing FT If new FTEs are needed, complete the foll # FTEs Classification ———————————————————————————————————	rect Service, etc.) (Estimated cost) E(s)	\$ 300,000 New FTE(s)

Department: Emergency Management	Division: 039	Fund: 130	Program: 20UASI
Purpose of Grant: UASI funding is provide of Bellevue, King, Pierce and Snohomish (attacks involving CBRNE devices and to m	Counties to enhar	nce their cap	acity to prevent terrorist
Existing/ongoing program X Yes Source of grant funding: Federal X	New program State Local	Yes Other	
Grant Term: From 09/01/20 to 05/31/	24		
Grantor: WA State Military-EMD & Dept.	of Homeland Sec	urity (DHS)	Grant Award \$459,113
Is match required: 🗌 Yes 🔀 No	If yes, match am	ount require	d: \$0
Match Source (General Fund, Patient Fee	es, In-Kind, etc.). I	f County fun	ded, enter DAC.
			1
	Total Resour	ces	\$459,113
EXPENDITURES	Total Resour	ces	\$459,113
EXPENDITURES 1. Internal Operations (Admin., Operations, Dire			\$459,113 \$ 459,113
	ect Service, etc.) (EStim	nated cost)	\$ 459,113
1. Internal Operations (Admin., Operations, Dire	ect Service, etc.) (Estim	nated cost) roject FTE(s)	\$ 459,113
1. Internal Operations (Admin., Operations, Directions) Who will complete the work? Existing FTE	ect Service, etc.) (Estim	nated cost) roject FTE(s)	\$ 459,113
1. Internal Operations (Admin., Operations, Directly Who will complete the work? Existing FTE If new FTEs are needed, complete the follows:	ect Service, etc.) (Estim	nated cost) roject FTE(s)	\$ 459,113
1. Internal Operations (Admin., Operations, Directly Who will complete the work? Existing FTE If new FTEs are needed, complete the follows:	ect Service, etc.) (Estim	nated cost) roject FTE(s)	\$ 459,113
1. Internal Operations (Admin., Operations, Directly Who will complete the work? Existing FTE If new FTEs are needed, complete the follows:	ect Service, etc.) (Estim	nated cost) roject FTE(s)	\$ 459,113
1. Internal Operations (Admin., Operations, Directly) Who will complete the work? Existing FTE If new FTEs are needed, complete the followant of the following formula in	ect Service, etc.) (Estim E(s)	nated cost) roject FTE(s)	\$ 459,113

Department: Emergency Management	Division: 039	Fund: 130	Program: 21UASI
Purpose of Grant: UASI funding is provious of Bellevue, King, Pierce and Snohomisl attacks involving CBRNE devices and to	h Counties to enha	nce their capa	acity to prevent terrorist
Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🔀	New program State Local	Yes Other [
Grant Term: From 09/01/21 to 08/3	1/24		
Grantor: WA State Military-EMD & Dep	t. of Homeland Se	curity (DHS)	Grant Award \$538,455
Is match required: Yes X No	If yes, match an	nount required	d: \$0
Match Source (General Fund, Patient F	ees, In-Kind, etc.).	If County fund	led, enter DAC.
	Total Resou	rces	\$538,455
EXPENDITURES	Total Resou	rces	\$538,455
EXPENDITURES 1. Internal Operations (Admin., Operations, I			\$538,455 \$ 538,455
	Direct Service, etc.) (EStil	mated cost)	\$ 538,455
1. Internal Operations (Admin., Operations, I	Direct Service, etc.) (Esting	mated cost) project FTE(s)	\$ 538,455 New FTE(s)
1. Internal Operations (Admin., Operations, I	Direct Service, etc.) (Esting String)	mated cost) project FTE(s)	\$ 538,455 New FTE(s)
1. Internal Operations (Admin., Operations, I Who will complete the work? Existing F If new FTEs are needed, complete the fo	Direct Service, etc.) (Esting String)	mated cost) project FTE(s)	\$ 538,455 New FTE(s)
1. Internal Operations (Admin., Operations, I Who will complete the work? Existing F If new FTEs are needed, complete the fo	Direct Service, etc.) (Esting String)	mated cost) project FTE(s)	\$ 538,455 New FTE(s)
1. Internal Operations (Admin., Operations, I Who will complete the work? Existing F If new FTEs are needed, complete the fo # FTEs Classification ————————————————————————————————————	Direct Service, etc.) (Esting Existing ollowing. Attach ac	mated cost) project FTE(s)	\$ 538,455 New FTE(s)

Who will complete the work? Existing	FTE(s) Existing project FTE(s) Notes of standard for the standard formula for the standard for the standard formula for the standard formula for the standard for the standard formula for the standard formula for the standard formula for the standard for the st	· · · · · · · · · · · · · · · · · · ·
Who will complete the work? Existing If new FTEs are needed, complete the # FTEs Classification ———————————————————————————————————	following. Attach additional sheet if nee	· · · · · ·
Who will complete the work? Existing If new FTEs are needed, complete the	following. Attach additional sheet if nee	· · · · · ·
Who will complete the work? Existing If new FTEs are needed, complete the	following. Attach additional sheet if nee	· · · · · ·
Who will complete the work? Existing If new FTEs are needed, complete the	following. Attach additional sheet if nee	· · · · · ·
Who will complete the work? Existing		· · · · · ·
•		
	s, Direct Service, etc.) (Estimated cost) \$36	7,606
EXPENDITURES		
	Total Resources	\$367,606
, , , , , , , , , , , , , , , , , , ,		
, <u> </u>	Fees, In-Kind, etc.). If County funded, e	·
Is match required: Yes No	If yes, match amount required:	\$0
* Estimated amount, contract not yet	awarded.	
Grantor: WA State Military-EMD & De	ept. of Homeland Security (DHS) Gran	nt Award \$367,606
Grant Term: From 09/01/22 to 05/	/31/25	
Existing/ongoing program X Yes Source of grant funding: Federal	New program ☐ Yes ☑ State ☐ Local ☐ Other ☐	
_	ish Counties to enhance their capacity t to meet the unique needs of high urban	•
of Bellevue, King, Pierce and Snohomi		City of Seattle, City
· •	vided to the specific urban areas of the	o'. (o o'.

Who will complete the work? Exist If new FTEs are needed, complete t # FTEs Classification ———————————————————————————————————	ting FTE(s)	
Who will complete the work? Exist If new FTEs are needed, complete t	ting FTE(s)	New FTE(s)
Who will complete the work? Exist If new FTEs are needed, complete t	ting FTE(s)	New FTE(s)
Who will complete the work? Exist If new FTEs are needed, complete t	ting FTE(s)	New FTE(s)
Who will complete the work? Exist If new FTEs are needed, complete t	ting FTE(s)	New FTE(s)
Who will complete the work? Exist	ting FTE(s)	New FTE(s)
•		<u></u>
EXPENDITURES		
	Total Resources	\$600,000
materi source (serierari ana) rank	ener ees, in mila, etsi, in eesine, ranaes, r	enter Enter
· <u> </u>	ent Fees, In-Kind, etc.). If County funded,	·
Is match required: Yes No	o If yes, match amount required:	\$0
* Estimated amount, contract not y	yet awarded.	
Grantor: WA State Military-EMD &	Dept. of Homeland Security (DHS) Gra	nt Award \$600,000
Grant Term. 110m 03/01/23 to	03/31/20	
Grant Term: From 09/01/23 to		
Existing/ongoing program X Ye Source of grant funding: Federa		
attacks involving CBRNE devices and	ish Counties to enhance their capacity to ped to meet the unique needs of high urban	
Bellevue, King, Pierce and Snohomi	•	City of Seattle, City of
	provided to the specific urban areas of the	ov

Who will complete the work? Existing F If new FTEs are needed, complete the fo # FTEs Classification ——————— Total FTEs 4. Pass Thru	ollowing. Attach additional sheet if nee	
Who will complete the work? Existing F If new FTEs are needed, complete the fo # FTEs Classification ———————————————————————————————————	ollowing. Attach additional sheet if nee	
Who will complete the work? Existing F If new FTEs are needed, complete the fo	ollowing. Attach additional sheet if nee	
Who will complete the work? Existing F If new FTEs are needed, complete the fo	ollowing. Attach additional sheet if nee	
Who will complete the work? Existing F If new FTEs are needed, complete the fo	ollowing. Attach additional sheet if nee	
·	TE(s) Existing project FTE(s) . N	New FTE(s)
3. Internal Operations (Admin., Operations, D	Direct Service, etc.) (Estimated cost) \$60	0,000
EXPENDITURES		
	Total Resources	\$600,000
Match Source (General Fund, Patient Fe	ees, m-Kina, etc.j. It County funded, e	nter DAC.
Is match required: Yes No	If yes, match amount required:	\$0
* Estimated amount, contract not yet av		707 War a 4000,000
Grantor: WA State Military-EMD & Dep	t. of Homeland Security (DHS) Gra	nt Award \$600,000
Grant Term: From 09/01/24 to 05/3	1/27	
Existing/ongoing program $igtimes$ Yes Source of grant funding: Federal $igtimes$	New program Yes State Local Other	
attacks involving CBRNE devices and to r	•	event terrorist
Bellevue, King, Pierce and Snohomish Co		ity of Seattle City of
· —		gram: 24UASI

Division: **039** Fund: **130**

Program: 23RCPGP

Department: **Emergency Management**

Purpose of Grant: RCPGP's purpose incidents by improving and expandi preparedness, with the objective to gaps, and encourage innovative reg is specifically to be used to address Lifeline, in housing, and/or Logistics	ng regional collaboration for catast build on existing regional efforts, c ional solutions related to catastrop a local gap in the Food, Water, Shel	rophic incident lose known capability hic incidents. RCPGP-19 tering Community
Existing/ongoing program Yes Source of grant funding: Federal Grant Term: From 09/1/2023-08	State Local Other	
Grantor: WA State Military-EMD & I	Dept. of Homeland Security (DHS)	Grant Award \$3,000,000
Is match required: Yes No Match Source (General Fund, Patie	If yes, match amount required nt Fees, In-Kind, etc.). If County fund	,
	Total Resources	\$3,150,000
EXPENDITURES		
1. Internal Operations (Admin., Operati	ons, Direct Service, etc.) (Estimated cost)	\$ 3,000,000
Who will complete the work? Existing	ng FTE(s)	New FTE(s)
If new FTEs are needed, complete th	e following. Attach additional sheet	if needed.
# FTEs Classificat	cion	
		
	<u> </u>	
Total FTEs		
Total FTEs 2. Pass Thru	(Estimated cost)	\$0

Who will complete the	e work? Existing FTE(s) Existing project FTE(s) Ned, complete the following. Attach additional sheet if needs. Classification Classification (Estimated cost)	
Who will complete the If new FTEs are neede # FTEs	e work? Existing FTE(s) $oxedsymbol{oxed}$ Existing project FTE(s) $oxedsymbol{\Box}$ Ned, complete the following. Attach additional sheet if ned	New FTE(s)
Who will complete the	e work? Existing FTE(s) $oxedsymbol{oxed}$ Existing project FTE(s) $oxedsymbol{\Box}$ Ned, complete the following. Attach additional sheet if ned	New FTE(s)
Who will complete the	e work? Existing FTE(s) $oxedsymbol{oxed}$ Existing project FTE(s) $oxedsymbol{\Box}$ Ned, complete the following. Attach additional sheet if ned	New FTE(s)
Who will complete the	e work? Existing FTE(s) $oxedsymbol{oxed}$ Existing project FTE(s) $oxedsymbol{\Box}$ Ned, complete the following. Attach additional sheet if ned	New FTE(s)
Who will complete the	e work? Existing FTE(s) Existing project FTE(s) .	New FTE(s)
•		
	Ons (Admin., Operations, Direct Service, etc.) (Estimated cost) \$ 57	
EXPENDITURES		
	Total Resources	\$57,000
·		
	ral Fund, Patient Fees, In-Kind, etc.). If County funded, e	•
Is match required:	Yes No If yes, match amount required:	\$0
* Estimated amount, o	contract not yet awarded.	
Grantor: Wa State Mi	ilitary Dept. and State Enhanced 911 Grant A	ward \$57,000
Grant Term: From	n 07/01/23 to 06/30/24	
_	nding: Federal State Local Other Other	
	program Yes New program Yes	
Coordinator's profess	sional development.	
• •	e State E911 Coordination Office (SECO) policies. This Stoods, and services to support the Snohomish County-wice	
110 CC 0F0/2\ +	e E911 County Coordinator Professional Development Co t to support the emergency communication service as re	-
reimbursement grant		
Purpose of Grant: The reimbursement grant	onal Development Contract (CCPD)	

	Total Expenditures	\$57,000
4. Pass Thru	(Estimated cost)	\$0
Total FTEs		
# FTEs Classification	· ·	
If new FTEs are needed, complete the fol		
Who will complete the work? Existing FT	·	
3. Internal Operations (Admin., Operations, Di	rect Service, etc.) (Estimated cost)	\$ 57,000
EXPENDITURES		
	Total Resources	\$57,000
Match Source (General Fund, Patient Fe	es, in-kind, etc.). If County fund	ded, effici DAC.
	If yes, match amount required	·
* Estimated amount, contract not yet aw		
Grantor: Wa State Military Dept. and St	ate Enhanced 911 Gr	ant Award \$57,000
Grant Term: From 07/01/24 to 06/30	/25	
Source of grant funding: Federal		
Existing/ongoing program 🔀 Yes	·	
Coordinator's professional development	i.	
118-66-050(3) and the State E911 Coord funding for travel, goods, and services to	ination Office (SECO) policies. T	his State grant provides
Purpose of Grant: The E911 County Coor reimbursement grant to support the em	-	_
Coordinator Professional Development	Contract (CCPD)	
Consultant and Designation of Designation and	(2222)	_

Who will complete	ations (Admin., Operations, Dir	rect Service, etc.) (Estimated cost) \$ 57,00 (E(s) Existing project FTE(s) New lowing. Attach additional sheet if needs (Estimated cost)	w FTE(s)
5. Internal Opera Who will complete If new FTEs are nee # I	ations (Admin., Operations, Dire the work? Existing FTI eded, complete the foll	E(s) Existing project FTE(s) Nev	w FTE(s)
5. Internal Opera Who will complete If new FTEs are nee # I	ations (Admin., Operations, Dire the work? Existing FTI eded, complete the foll	E(s) Existing project FTE(s) Nev	w FTE(s)
5. Internal Opera Who will complete If new FTEs are need	ations (Admin., Operations, Dire the work? Existing FTI eded, complete the foll	E(s) Existing project FTE(s) Nev	w FTE(s)
5. Internal Opera Who will complete If new FTEs are need	ations (Admin., Operations, Dire the work? Existing FTI eded, complete the foll	E(s) Existing project FTE(s) Nev	w FTE(s)
5. Internal Opera	ations (Admin., Operations, Dir	E(s) Existing project FTE(s) Nev	w FTE(s)
5. Internal Opera	ations (Admin., Operations, Dir		
		rect Service, etc.) (Estimated cost) \$57,0	00
EXPENDITURES			
		Total Resources	\$57,000
•	,	, , , , , , , , , , , , , , , , , , , ,	
-	_ _	es, In-Kind, etc.). If County funded, ent	·
Is match required:	☐ Yes ⊠ No	If yes, match amount required:	\$0
* Estimated amou	nt, contract not yet awa	arded.	
Grantor: Wa State	Military Dept. and Sta	ate Enhanced 911 Grant Awa	ard \$57,000
_	rom 07/01/25 to 06/30,		
	· ·	New program ☐ Yes State ☐ Local ☐ Other ☐	
•	_		
funding for travel,		nation Office (SECO) policies. This Stat support the Snohomish County-wide	•
	ant to support the emo	ergency communication service as requ	uired by WAC
•		dinator Professional Development Con	tract grant is a
Purpose of Grant: reimbursement gr	The E911 County Coord		