

**GRANTS ECAF
SUMMARY WORKSHEET**

I. REVENUE:

Revenue Source	Original Grant	Amendment(s)	Total	Match
TXIX Fee for Service	\$195,000		\$195,000	N/A
Total	\$195,000		\$195,000	

II. EXPENDITURES:

Item/Service	Original Grant	Amendment(s)	Total	Match
Care Transitions Services	\$195,000		\$195,000	N/A
Total	\$195,000		\$195,000	

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 No

Appropriation exists in Dept 20 Pending Grants.

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 No

Date 12/31/2023. The program may be extended if continuation funds are received from Washington State DSHS.

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
N/A	\$	\$	\$
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 In pending grants budget but not in grant work plan.

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: