

REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office:

Res/Ord No.: 4817

Sponsor(s): Alfred Jordan

Date: February 1, 2016

SUBJECT	<p>Action Requested <input type="checkbox"/> Resolution <input checked="" type="checkbox"/> Ordinance</p> <p>Project/Title: <u>The Gender Specialized Tracker Program</u></p>																				
<p>BUDGET INFORMATION</p> <p><i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td><td>\$47,234.17</td></tr> <tr> <td>Amount previously authorized this fiscal year:</td><td>\$</td></tr> <tr> <td>Total amount authorized after this legislative action:</td><td>\$47,234.17</td></tr> <tr> <td>Amount budgeted for this item *:</td><td>\$</td></tr> <tr> <td>Source of funding (name of fund) and account code number</td><td>FROM ACCT 010-2810 47,234.17</td></tr> <tr> <td></td><td>TO ACCT 010-2124 47,234.17</td></tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input checked="" type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable): 40,032.00 Prior Year Actual Amount Spent (if applicable): 40,032.00</p>	Amount authorized by this legislation this fiscal year:	\$47,234.17	Amount previously authorized this fiscal year:	\$	Total amount authorized after this legislative action:	\$47,234.17	Amount budgeted for this item *:	\$	Source of funding (name of fund) and account code number	FROM ACCT 010-2810 47,234.17		TO ACCT 010-2124 47,234.17								
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PRIOR LEGISLATION	<p>Prior ordinances and (date): 4715 Dated 03/05/15 Prior resolutions and (date):</p>																				
CONTACT INFORMATION	<p>RLA drafted by (name, title, & phone): Carl Bayless, Grant Accountant, 816-435-4775</p>																				
REQUEST SUMMARY	<p>This is a request to appropriate \$47,234.17 from the undesignated fund balance of the 2016 Grant fund in acceptance of a grant awarded to the Family Court Division by the Missouri Department of Public Safety. The project is named "Gender Specialized Tracker Program". The goal of the program is to fund a position to provide gender specific monitoring of youths showing at risk factors. The project began October 1, 2015 and will continue through September 30, 2016. The total grant project is \$47,234.17 and there is no match requirement.</p> <p>Please appropriate the \$47,234.17 into the accounts listed below:</p> <table> <tr> <td>5010 Regular Salaries</td><td>\$ 28,151.24</td><td>5110 Workers Comp</td><td>140.76</td></tr> <tr> <td>5040 FICA</td><td>2,153.56</td><td>5150 Long Term Disability</td><td>140.76</td></tr> <tr> <td>5050 Pension</td><td>3,138.85</td><td>6360 Life Ins</td><td>31.20</td></tr> <tr> <td>5060 Ins Benefits</td><td>13,337.04</td><td></td><td></td></tr> <tr> <td>5070 Unemployment Ins</td><td>140.76</td><td></td><td></td></tr> </table> <p>TOTAL APPROPRIATION : \$47,234.17</p>	5010 Regular Salaries	\$ 28,151.24	5110 Workers Comp	140.76	5040 FICA	2,153.56	5150 Long Term Disability	140.76	5050 Pension	3,138.85	6360 Life Ins	31.20	5060 Ins Benefits	13,337.04			5070 Unemployment Ins	140.76		
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CLEARANCE	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance – Affirmative Action/Prevailing Wage (County Auditor's Office)</p>																				
ATTACHMENTS																					
REVIEW	<table> <tr> <td>Department Director:</td><td>Date:</td></tr> <tr> <td>Finance (Budget Approval): Roy Fairchild, Fiscal and Budget Officer</td><td>Date: 01/08/16</td></tr> <tr> <td>Division Manager: Mary Marquez, Deputy Court Administrator</td><td>Date: 01/08/16</td></tr> <tr> <td>County Counselor's Office:</td><td>Date:</td></tr> </table>	Department Director:	Date:	Finance (Budget Approval): Roy Fairchild, Fiscal and Budget Officer	Date: 01/08/16	Division Manager: Mary Marquez, Deputy Court Administrator	Date: 01/08/16	County Counselor's Office:	Date:												
Department Director:	Date:																				
Finance (Budget Approval): Roy Fairchild, Fiscal and Budget Officer	Date: 01/08/16																				
Division Manager: Mary Marquez, Deputy Court Administrator	Date: 01/08/16																				
County Counselor's Office:	Date:																				

Fiscal Information (to be verified by Budget Office in Finance Department)

- ☐ This expenditure was included in the annual budget.
- ☐ Funds for this were encumbered from the _____ Fund in _____.
- ☐ There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- ☐ Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- ☒ Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:
010-2810	Grant Fund – Undesignated Fund Balance	\$47,234.17


- ☐ This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- ☐ This legislative action does not impact the County financially and does not require Finance/Budget approval.

Supplemental Appropriation Request Jackson County, Missouri

Funds sufficient for this appropriation are available from the source indicated below.

Date: January 21, 2016

ORD # 4817

<u>Department / Division</u>	<u>Character/Description</u>	<u>From</u>	<u>To</u>
Grant Fund - 010			
2129 Gender Tracker	45856 - Increase Revenues	47,234	
2810	Undesignated Fund Balance		47,234
2810	Undesignated Fund Balance	47,234	
2129 Gender Tracker	55010-Salary		28,151
2129 Gender Tracker	55040 FICA		2,154
2129 Gender Tracker	55050 Pension		3,139
2129 Gender Tracker	55060 Insurance		13,337
2129 Gender Tracker	55070 Unempl Ins		141
2129 Gender Tracker	55110 Workmen's Comp		141
2129 Gender Tracker	55150 Long Term Disability		141
2129 Gender Tracker	56360 Life Ins		31
			
Budgeting		47,234	47,234

Ord. 4817

2143

**Missouri Department of Public Safety
Office of the Director****AWARD OF CONTRACT****PO Box 749
Jefferson City, MO 65102
573/751-4905
www.dps.mo.gov**

Contractor Name:

Jackson County Family Court

Project Title:

Jackson Co 2015 Gender Specific Tracker Program

Contract Period:

FROM: **10/1/2015** TO: **9/30/2016**

State Funds Awarded:

\$47,234.17

Contract Number:

2013-Title2-21

Award is hereby made in the amount and for the period shown above to the above mentioned Contractor. This award is subject to compliance with the general conditions governing grants and contracts, as well as any attached Special Conditions. This award is also subject to compliance with all current applicable federal and state laws, regulations and guidelines.

The undersigned hereby certify acceptance of the above described contract on the terms and conditions specified or incorporated by reference above and herein, including those stated in the contract application.

Authorized Official Signature:

Mary Marquez 12-21-2015
Mary Marquez, Deputy Court Administrator Date

Project Director Signature:

Kelly Hams-Pearson 11/16/15
Kelly Hams-Pearson, Asst. Dir. Field Svcs Date

This contract shall be in effect for the duration of the contract period stated herein, and funds shall become available on the award date with the signed return of this form to the Missouri Department of Public Safety and the signature of the director of the Department of Public Safety.

[Signature]
Director, Missouri Department of Public Safety

1-5-16
Award Date

Ord. 4817

**2013-Title2-21-Jackson Co-2015 Gender Specific Tracker Program (2015-2018)****Title II Formula Grant**

Award Year:	2015	Status:	Submitted
Contract Number:	2013-Title2-21	Approved Date:	
Reporting Period:	10/01/2015 - 12/31/2015	Paid Date:	
Claim Number:	2013-Title2-21 - 001	Vendor Number:	446000524
Submitted By:	Carl Bayless	Invoice Number:	
Submitted Date:	01/08/2016	Check Number:	
Is This Your Final Report:	No		

Applicant and Organization

Applicant Name:	Ms. Elizabeth	Orth	Organization Information					
	Title First Name	Last Name	Applicant Agency: Jackson County Family Court					
Job Title:	Program Manager		Organization Type: Government					
Email:	elizabeth.orth@courts.mo.gov		Federal Tax ID#: 446000524					
Mailing Address:	2729 Gillham Road		DUNS #: 180647497					
Street Address 1:			CCR Code:					
Street Address 2:			Valid Until Date					
	Kansas City	Missouri	64108	Organization Website: www.family-court.org/				
	City	State/Province	Postal Code/Zip					
Phone:	816-881-6579			Mailing Address: 625 E 26 Street				
Fax:	816-881-6504			Street Address 1:				
				Street Address 2:				
				City:	Kansas City	Missouri	64108	2719
				City	State/Province	Postal Code/Zip	+ 4	
				County:	Jackson			
				Congressional District:	05			
				Phone:	202-225-4535			
				Fax:	202-225-4403			
							Ext.	

Detail of Expenditure

Attachment	Description	File Name	File Size	Type
Detail of Expenditures	Oct - Dec 2015 Detail of Expenditures	2015 10-12.xls	59 KB	xls

Reimbursement

Budget Category	Details	Contract Budget	Prior Expenses	Available Balance	Expenses This Period	Total Expenses To Date	Contract Match	Prior Match Expenses	Remaining Match Requirement	Match Expenses This Period	Total Match To Date	Match Percentage	Total Expenses and Match To Date
Personnel													
Klinda Simmons	100.00(% of Grant Funded Time)	\$28,151.24	\$0.00	\$28,151.24	\$6,218.59	\$6,218.59	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	00%	\$6,218.59
Sub Total		\$28,151.24	\$0.00	\$28,151.24	\$6,218.59	\$6,218.59	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	00%	\$6,218.59
Personnel Benefits													
Disability Insurance	100.00(% of Funding Requested)	\$140.76	\$0.00	\$140.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	--	\$0.00
FICA/Medicare	100.00(% of Funding Requested)	\$2,153.56	\$0.00	\$2,153.56	\$457.45	\$457.45	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	00%	\$457.45
Life Insurance	100.00(% of Funding Requested)	\$31.20	\$0.00	\$31.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	--	\$0.00
Medical Insurance	100.00(% of Funding Requested)	\$13,337.04	\$0.00	\$13,337.04	\$1,111.42	\$1,111.42	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	00%	\$1,111.42
Pension	100.00(% of Funding Requested)	\$3,138.88	\$0.00	\$3,138.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	--	\$0.00
Unemployment Comp	100.00(% of Funding Requested)	\$140.76	\$0.00	\$140.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	--	\$0.00
Workers Comp	100.00(% of Funding Requested)	\$140.76	\$0.00	\$140.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	--	\$0.00
Sub Total		\$19,082.93	\$0.00	\$19,082.93	\$1,568.87	\$1,568.87	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	00%	\$1,568.87
Totals		\$47,234.17	\$0.00	\$47,234.17	\$7,787.46	\$7,787.46	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	00%	\$7,787.46

Named Attachments

Attachment	Description	File Name	File Size	Type
Personnel	Back up for personnel Oct - Dec 2015	2015-2016 010-2187 GENDER SPECIFIC PERSONNEL ATTACH 10-12.pdf	123 KB	pdf
Travel/Training			123 KB	
Supplies/Operations			123 KB	
Contractual			123 KB	

Other Attachments

Description	File Name	File Size
Timesheets Oct-Dec 2015	Timecard 10-01 thru 12-30 - Simmons, Klinda.pdf	85 KB