### COUNTY OF MENDOCINO

REQUEST FOR APPRO	PRIATION, C	CANCELLATIO	ON OR REVISION	NOF FUNDS	. 17
Dept. No. DA 2070 Department of Z	District L	Horney's	Office	Date 05-20	
To County Auditor—Controller:  The following request is deemed nec	essary. Please rep	ort as to available b	anacesfor forward to Co	ounty Administrator.	
TRANSFER FROM FUND_2// <i>D</i> BUDGET_0464/	AUDITOR BALANCE	TRANSFER TO	_ BUDGET <u> 0 4 6 4</u>	EILE COR	AUDITOR BALANCE
Scries 1000 Dehit		Series		1118	
93 86/0// \$ -23,67	2	93 2000	862060	\$ <u>183</u>	
93 86/02/ \$ - 7,780	4	93	862120	\$ 7/8	
93 86/022 \$ -1,370	2	93	862150	\$ -210	-
93 86/023 \$ -3/8	,	93	862170	\$ 3,335	
93 861024 \$ -3,83		93	862187	\$ - 2,860	
861030 -4,70			862239	\$ 2,341	
TOTAL - \$41,683		4000	814370	\$ - 300	
Annual Sudget had available for	inds at	4. 4	Total	\$ 41,683	•
Annual Sudget had available for fisical year end (sept. 20) due to for 13 pay periods, and had budge	to one posi	TION VULANEL	, Adid not	sappon wish ?	redistribute
JUSTIFICATION: As stated above or attached memo.	Ped 10 Pep 10 DEF	rce carpo, w PARTMENT HEAD	By Bu		yse venicle;
T. COLINITY ADMINISTRATION			-,-		
To COUNTY ADMINISTRATOR					
Sufficient balances remain in the accounts indicate	ed to effect transfe	er as requested.			
Insufficient balances are available to meet the abo	ve request within	departmental budge	t. Requires transfer of	\$	
from other sources.	•		1		
REMARKS:			•		
No. Date	ALIDITA	OD CONTROLLED	D.		
		OR-CONTROLLER	By		
COUNTY ADMINISTRATOR RECOMMENDATE COMMENTS:	ATION	PPROVAL	DENIED		
				•	
D. J.					
Date		COUN	NTY ADMINISTRATO	R	
ACTION OF BOARD OF SUPERVISORS:					
Approved as requested Approved a	s revised	Other			
REMARKS:					
Date		Den			
		By: Deputy	y Clerk, Board of Super	visors	
I. E. No Date		By:		· · · · · · · · · · · · · · · · · · ·	
v				· · · · · · · · · · · · · · · · · · ·	

Auditor's Copy - White Bd. of Supervisors - Yellow Department - Blue

Chief Admin. - Golden rod Auditor's File - Green Requesting Dept. - Pink

	Original Budget	Proposed Change	Revised Allocation	Prop	osed Change	Current Allocation
BU 0464			Annual	İ		Annual
Victim Witness Assistance Program	Original		Budget	1		Budget
July 1, 2016 through September 30, 2017	Budget		Modification 1			Modification 2
Revenues					4.	
825810	(43,725)	43,725.00				
827700 OTHER REVENUE	(1,500)	•	(1,500.00			(1,500.00
827801 GRANT REVENUE VOCA15	(22,000.00)		(22,000.00			(22,000.00)
827801 GRANT REVENUE VOCA16	(148,517.00)	(93,305)	(241,822.00	, .		(241,822.00
827801 GRANT REVENUE VAW0	(84,758.00)		(84,758.00)	,		(84,758.00
827801 GRANT REVENUE SUBTOTAL	(255,275)	(93,305.00)	(348,580.00			(348,580.00
Total Revenues	(300,500)	(49,580.00)	(350,080.00)	l		(350,080.00)
Expenses					i	
861011 REGULAR EMPLOYEES	164,175	17,654.00	181,829.00		(23,672.00)	158,157.00
861012 EXTRA HELP		· · · · · · · · · · · · · · · · · · ·				-
861013 OVERTIME REG EMP	'	-	·			<u> </u>
861021 CO CONT TO RETIREMENT	46,920	5,150.00	52,070.00		(7,784.00)	44,286.00
861022 CO CONT TO OASDI	9,165	1,107.00	10,272.00	İ	(1,370.00)	8,902.00
861023 CO CONT TO OASDI-MEDIC	2,143	262.00	2,405.00		(318.00)	2,087.00
861024 CO CONT TO RET INCREMENT	17,708	2,216.00	19,924.00		(3,832.00)	16,092.00 <sup>-</sup>
861030 CO CONT TO EMPLOYEE INSURANCE	48,360	683.00	49,043.00		(4,707.00)	44,336.00
Personnel Subtotal	288,471	27,072.00	315,543.00	minus	(41,683.00)	273,860.00
861031 CO CONT UNEMPLOYMENT INSURANCE	1,231	-	1,231.00	ĺ		1,231.00
861035 CO CONT WORKERS COMPENSATION I	73		73.00		· .	73.00
Series 1000 Personnel Subtotal	289,775	27,072.00	316,847.00			275,164.00
862060 COMMUNICATIONS	1,617	·	1,617.00		783.00	2,400.00
862101 INSURANCE-GENERAL	1,238	<del>.</del>	1,238.00		-	1,238.00
862120 MAINTENANCE-EQUIPMENT		-			718.00	718.00
862150 MEMBERSHIPS	210	- -	210.00		(210.00)	-
862170 OFFICE EXPENSE	4,000	. <u>.</u>	4,000.00		3,335.00	7,335.00
862187 EDUCATION & TRAINING	2,860	-	2,860.00		(2,860.00)	
862239 SPEC DEPT EXP	500	22,508.00	23,008.00		. 2,341.00	25,349.00
862253 TRAVEL & TRSP OUT OF COUNTY	300		300.00		(300.00)	
Series 2000 Subtotal	10,725	22,508.00	33,233.00	plus	3,807.00	37,040.00
864370 EQUIPMENT	-				37,876.00	37,876.00
Series 4000 Subtotal	<u>-</u>		•	plus	37,876.00	37,876.00
865380 INTRAFUND TRANSFERS		-				
865802 OPERATING TRANSFER OUT						
Series 5000 Subtotal	<u>-</u>	·	-			•
Total Expenses	300,500	49,580.00	350,080.00		<u>-</u>	350,080.00
Net County Cost		•	-			_



September 29, 2017

C. David Eyster County of Mendocino District Attorney Mendocino County - District Attorney 100 North State Street, Room G-10 Ukiah, CA 95482-4416 RECEIVED

OCT 0 4 2017

MENDOCINO COUNTY DISTRICT ATTORNEY

Subject:

**Approval of Subaward Modification #2** 

Victim Witness Assistance Program (VW)

Subaward #: VW16 35 0230

Dear Mr. Eyster:

The California Governor's Office of Emergency Services (Cal OES) has received and approved the enclosed subaward modification request, for the subject grant.

Please contact your Program Specialist if you have any questions about this modification.

VSPS GRANTS PROCESSING

Enclosure

c: Subrecipient file Program Specialist

### **GRANT SUBAWARD MODIFICATION**

•	alifornia Governo		ergency Servic	es			. 1	Subaward #	#: <u>VW 16 3</u>	35 0230
	350 Schriever Ave ather, CA 95655						2	Modification	ı# <u>2</u>	
3. Subrecip 4. Project	oient/Implemer Title: Vic	nting Agency: tim Witness				Attorney's	Office			
	Person: Kat			ال		707-463-4	194	Fax:	707-463	3-4214
	.ddress: Cav						iod: <u>7/1/201</u>	6 to 9	9/30/2017	
7. Paymer	nt Mailing Add	ress: PO E	30x 1000, l						Check he	ere if new. 🧏
	Current Allocation		Grant	2016/2010/2010/2016	sion to Bu	uaget 	Require	di <b>Ma</b> tch.		
FISCAL YEAR	Select Acronym from list	A. Personal Services	B. Operating Expenses	C. Equipment	Fund Total	A. Personal Services	B. Operating Expenses	C. Equipment	Match Total	Total
15	VOCA	\$21,754	\$246		\$22,000				\$0	\$22,000
16	VOCA	\$209,982	\$31,840		\$241,822				\$0	\$241,822
16	VWA0	\$83,807	\$951	٠.	\$84,758				\$0	\$84,758
Yr	Fund			-	\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
	Lhange (add (	(+) or subtract	(-) from budg	jeted amount	}	<u> </u>				
15	VOCA	(\$21,754)	(\$246)	\$22,000	\$0				\$0	\$0
16	VOCA	(\$5,745)	\$405	\$5,340	\$0				\$0	\$0 ~
16	VWA0	(\$14,184)	\$3,648	\$10,536	\$0				\$0	\$0 ~
Yr	Fund	**	***************************************	• •	\$0				\$0	\$0
Yr	Fund				\$0				\$0	\$0
Revised Al	llocation				<u></u>	,I				
15	VOCA	\$0	\$0	\$22,000	\$22,000	\$0	\$0	\$0	\$0	\$22,000
16	VOCA	\$204,237	\$32,245	\$5,340	\$241,822	\$0	\$0	\$0	\$0	\$241,822
16	VWA0	\$69,623	\$4,599	\$10,536	\$84,758	\$0	\$0	\$0	\$0	\$84,758 ~
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Yr	Fund	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Requesting positions w	cation for Moo g an increase i vas only filled	n equipment 13 out of the 3	and operatin 32 budgeted	g expenses pay periods,	and a decrea thereby requ	se in person uiring a reallo	nel expenses cation of fund		oudgeted ad	
	niplent Approvals				er og englissen grande st	High and address of the State o	101120000000000000000000000000000000000	artment Ar	4.00010 0.000000000000000000000000000000	
	Welsh, Assis		ci Allomey	9/28/17		cjal Officer (typ		attilent Ai	109°	28-17
Project Dire	ctor Signature			Date	NAMES OF TAXABLE PARTY OF TAXABLE PARTY.	cial Officer Sig	nature		Date	
Ça∩DES A	oproval Signatur	es ::	<u>/</u>	CaliOES	USE ONLY	1.	л. Al	المبيرا	n.,	
Program Sr	hea S	rekson	<u> </u>	9/2 Date	<b>1//</b> 7 Un	JUL nit Chief	Y(A	MUL	Date	4/29/
JVI.	17M/	U UM	My.	Date	19/17		<b>V</b> .	MEC	EIV	EM
Grants Prod	cessing	•		Date				SEP	2 9 2017	7

Grant Subaward Modification - Cal OES 2-223 (Revised 9/2017)

#### **BUDGET CATEGORY AND LINE ITEM DETAIL**

Subrecipie	nt: County of Mendoo	ino Distr	ict Att	orney		······································	Subaward	i #: VW 16	35 0230			
							V604.45	VOCA 15	VC 24.45	VOCA	\	
A. Persona	Services - Salaries/	Employe				<del></del>	VOCA 15	Match	VOCA 16	Match 16	VWA0 16	COST
			ļ	Per Pay	Peri	od .	· · · · · · · · · · · · · · · · · · ·		·			
POSITION:	Advocate			•								
	400.000/											
FTE:	100.00%			4 000	l	20.5			44.400	11.050	. 4.044	F0 000
Salary:	FICA		\$ \$	1,823 99	X	32.5 32.5	-	-	44,199	11,050 600	4,011	59,260
Benefits:	Medicare		\$	23	X	32.5	-	-	2,400 558	139	218 51	3,218
	Retirement		<sup>Ψ</sup>	534	X	32.5			12,947	3,237	1,175	748 17,359
	Retirement COLA		\$	213	x	32.5	<u> </u>	-	5,164	1,291	469	6,924
	Health Insurance		\$	700	x	32.5	_		16,972	4,243	1,540	22,755
POSITION:	Advocate	· ·	Ψ	100	Î	02.0			10,072	1,210	1,040	22,700
FTE:	100.00%											
Salary:	700.0070		\$	1,769	x	32.5	_	_	42,889	10,742	3,892	57,523
Benefits:	FICA		\$	105	Х	32.5	-	'-	2,546	638	231	3,415
	Medicare		\$	25	Х	32.5	_	-	606	152	55	813
	Retirement	į	\$	476	х	32.5		-	11,541	2,890	1,047	15,478
	Retirement COLA		\$	152	х	32.5	-	. <b>-</b>	3,685	923	334	4,942
•	Health Insurance		\$	229	х	32.5	-	-	5,552	1,391	504	7,447
OSITION:	Advocate											
FTE:	100.00%									· .		
3alary:			\$	1,632	χ.	13.0	-	-	15,827	3,957	1,436	21,220
3enefits:	FICA	-	\$	97	X	13.0		-	941	235	85	1,261
	Medicare	I	\$	23	Х	13.0	-	-	223	56	20	299
	Retirement		\$	473	Х	13.0	-	-	4,587	1,147	416	6,150
	Retirement COLA		\$	195	Х	13.0	-	-	1,891	473	172	2,536
	Health Insurance		\$	212	Х	13.0			2,056	514	187	2,757
OSITION:	Staff Assistant	f					ĺ					
·TE:	100.00%										.	
Salary:	10010070	]	\$	620	х	16.3	_	_	15,032	3,758	1,364	20,154
enefits:	FICA		\$	31	Х	32.5	-	_	752	188	68	1,008
	Medicare	l	\$	7	х	32.5	-	-	170	42	15	227
•	Retirement		\$	163	Х	32.5	-	-	3,952	988	359	5,299
. *	Retirement COLA		\$	52	Х	32.5	- 1	-	1,261	315	114	. 1,690
	Health Insurance	<u> </u>	\$	350	X ·	32.5		· · -	8,486	2,121	770	11,377
;						ł					1	
										ļ		
										-		
4								·				
									Ī			
ersonal Sec	tion Totals						-	-	204,237	51,090	18,533	273,860
	SECTION TOTAL		<del></del>							×		
				<del></del>				·-···	<del></del>	U01	W23	273,860

## BUDGET CATEGORY AND LINE ITEM DETAIL

•		<i>Q.</i> d # VW 16 :		T			1	
B. Operating Costs Office Supplies Office Furniture (Sofa and Chair) JustWare VOCA Report Communications Emergency Fund	VOCA 15	VOCA Match	VOCA 16 \$ 6,600 \$ 1,745 \$ 8,000 \$ 2,400 \$ 13,500	\$ \$ \$	VOCA latch 16 314 436 2,000	VWA0 16	\$ \$ \$ \$	COST 6,91 2,18 10,00 2,40 15,34
							*************************	
								- - -
rating Section Totals  RATING SECTION TOTAL	\$ -	\$ -	\$ 32,245 \$	} ,	4,599 \$			36,844

# BUDGET CATEGORY AND LINE ITEM DETAIL

C. Equipment		VOCA 15	VOCA 15 Match	VOCA 16	VOCA Match 16	VWA0 16	COST
Vehicle Dodge Durango SUV		\$22,000.00	\$5,500.00			\$4,036.00	\$37,876.0
							\$
					'		\$
							\$   \$
		1				,	\$
		1	1				\$ \$
		i I	1.				\$
			<u>.</u>				\$ \$
						1	\$(
		1	. 1				\$( \$(
			1	1			\$(
			1				\$0 \$0
							\$0
							\$0 \$0
				i			\$0
							\$0 \$0
							\$0
							\$0 \$0
							\$0
	. 1						\$0 \$0
							\$0
							\$0 \$0
							\$0
							\$0 \$0
					•		\$0
							\$0 \$0
	,						\$0 \$0
<u> </u>							\$0
pment Section Totals  IPMENT SECTION TOTAL		\$22,000	\$5,500	\$5,340	\$1,000	\$4,036	\$0 \$37,876
IPWENT SECTION TOTAL							/
				<u> </u>	10534	**************************************	\$37,876
egory Totals					XXXXXXX	***************************************	
as Section 12G on the Grant Subaward F	ace Sheet	\$22,000	\$5,500 \$	\$241,822	\$56,689 \$	22,569	
tal Project Cost		$\frac{\sqrt{2N^2 \log n} \cdot 2n \log n}{2\log n} \cdot \frac{1}{\log n} \cdot \frac{1}{\log n}$		38 7 35 2 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>	<b>********</b>

Mendocino County Victim Witness Assistance Program (VAV)		īg d	Subaward #: VW16 35 0230	35 0230	
Victim Witness Assistance Program (VMV)		ċ			11:10
		ב ב	Performance Period: 07/01/16 - 09/30/17 Latest Request: June 2017, Not Final 201	d: 07/01/16 - 09/. ne 2017, Not Fir	30/17 ial 201
A. Personal Services - Salaries/Employee Benefits	<u>fits</u>				
F/S/L Funding Source	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
F 15VOCA	0	0	c	, C	6
F 16VOCA	204,237	150,914	53.323		53 323
S 16VWA0	69,623	69,186	437	0	437
Total A. Personal Services - Salaries/Employee Benefits:	Benefits: 273,860	220,100	53,760	0	53,760
B. Operating Expenses					
F/S/L Funding Source	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
F 15VOCA	0	0	0	C	
F 16VOCA	32,245	0	32,245	C	32 245
S 16VWA0	4,599	0	4,599	0	4,599
Total B. Operating Expenses:	36,844	0	36,844	0	36,844
C. Equipment					
F/S/L Funding Source	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
	22,000	0	22,000	0	22,000
	5,340	0	5,340	0	5,340
S 16VWA0	10,536	0	10,536	0	10,536
Total C. Equipment:	37,876	0	37,876	0	37,876
	Budget Amount	Paid/Expended	Balance	Pending	Pending Balance
Total Local Match:	0	0	0	0	0
Total Funded:	348,580	220,100	128,480	0	128,480
Total Project Cost:	348,580	220,100	128,480	0	128,480

F/S/L (Funding Types): F=Federal, S=State, L=Local Match Paid/Expended=posted in ledger w/Claim Schedule, Pending=Processed. but not vet in Claim Schedule

### 2015-16 Subrecipient Handbook: 2331 Automobiles

If automobiles are allowable pursuant to the terms of the program, projects must provide substantial justification demonstrating the grant-related need. If not previously approved in the initial Grant Subaward, then a justification must be submitted with a Grant Subaward Modification (Cal OES Form 2-223) and include the following information:

a. Describe the need for a vehicle, including the size of the service area and the need to provide direct service away from the office;

Mendocino County is located on the north coast of the U.S. state of California. As of the 2010 census, the population was 87,841 with an area of 3,878 square miles. Our Victim Witness Program serves victims throughout the county including the coastal and northern region populations. These regions are separated from the main office in Ukiah by treacherously winding roads and rugged mountain ranges. Our advocates need a vehicle to travel to these areas as well as to service areas in closer proximity to our Ukiah office.

b. Describe the lack of available agency vehicles;

The Victim Witness Program currently has two vehicles that are over thirteen years old with over 100,000 miles on them; according to county standards and IRS depreciation tables, these vehicles are considered to be completely depreciated.

c. Describe the lack of available personal vehicles for which mileage can be charged or a reason why the agency will not allow personal vehicle usage during working hours; and

Mendocino County policy is that county vehicles should be used whenever possible when traveling on county business. Advocates as well as the county do not have vehicles suited for times when advocates have to drive on rough dirt roads to provide client services so we need an all-terrain as well as a reliable vehicle for these situations.

d. Include a cost analysis for the vehicle purchase as compared to other options, including lease and personal vehicle use with mileage.

Mendocino County mileage reimbursement for employees using their own vehicles is the \$0.54 per mile federal rate. County vehicles have a reimbursement rate of \$0.17 per mile. Since the DA's Office keeps vehicles for the duration of at least twelve years, the cost of a \$36,548 Dodge Durango today would average out to \$3,046 per year. While the current cost of leasing a Durango is approximately \$3,348 per year, over a twelve year period, factoring in a 2.5% annual inflation rate, the leased vehicle would cost about \$46,188 compared to the \$36,548 cost of the purchased vehicle with a savings of approximately \$9,639.