TEHAMA COUNTY AUDITOR'S OFFICE **GRANT FUNDING INFORMATION**

AUDITOR	USE ONLY
Rec'd By:	

Form A-135 (Rev 8-21-07)

(Attach full copy of application and/or Notice of Award									
DEPARTMENT			PHONE NUMBER			T UNIT			
District Attorney	Jeffery Eldred 52				4296		11		
TITLE OF GRANT Tehama County Victim/Witness Center									
GRANTOR AGENCY State of California-Emergency Management Agency									
GRANT OBJECTIVES To assist victims/witnesses in criminal cases									
			,						
GRAND I.D. NO. VW25 (2 9101				Federal Cata applicable):	- \			
GRANT PERIOD From:	10/01/25 To:		09/30/26		Applicable (Code and/or	N		
DATE APPLICATION APPRO	OVED BY BOAF	XD:			Legislative l	Reference:			
DATE BOARD ACCEPTED I	UNDS OR APPI	ROVED	CONTRAC	T: .					
IS GRANT RENEWABLE? (Check all applicable)	Yes N	No	Annually X	Indefinite	Specific N	lo. of Years			
GRANT FUNDING Fiscal Year: 2021/2022 Fiscal Year:									
FEDERAL		81,937	2021/2022	<u></u>	iscai Year:				
STATE		52,176							
OTHER	Ψ1	\$0			-				
1. TOTAL GRANT FUNDS	\$3	34,113							
COUNTY FUNDING									
HARD MATCH (dollars)		\$0							
SOFT MATCH (In-kind)		\$0							
2. TOTAL COUNTY MATCH	1	\$0							
USE OF FUNDS									
PERSONNEL (attach detail)		\$0							
SERVICES/SUPPLIES		\$0							
EQUIPMENT OTHER CHARGES		\$0				····			
TOTAL FUNDS (must also = 1	+2 above)	\$0 \$0							
IF HARD MATCH REQUIRED,	- 2 above)	3 U				***	-		
IDENTIFY FUNDING SOURCE	:								
IS MATCH FUNDING APPRO		ı	ISTING BU	DGET?	Yes		No		
METHOD OF PAYMENT OF GRANT FUNDS: Reimburse X Advance									
ANTICIPATED DATE(S) OF RECEIPT OF GRANT FUNDS: Every quarter									
EXPENDITURE DEADLINE:	9/30/2	022							
IS INTEREST EARNING ON GRANT FUNDS REQUIRED BY LAW?			AW?	Yes		No X			
WILL THERE BE IMPACTS TO HOUSING, STAFF OR OTHER				Yes X		No			
COUNTY SUPPORT SERVICES? (If yes, please explain. Use attachment if needed.)									
A 0.9 Victim/Witness Coordinator position, 1.0 Victim/Witness Advocate position and a .50 Victim Advocate position									
would be lost if this grant application is not approved.									
Natthin 3.				10/2	12-				
DEPARTMENT HEAD SIGN	ATURE			•	DATE	Form A-135	(Rev 8-21-07)		