Comprehensive Drug Court Implementation NOTICE OF GRANT AWARD El Dorado County

The Department of Alcohol and Drug Programs hereinafter called the Grantor, hereby makes a grant award of funds for the Comprehensive Drug Court Implementation (CDCI) Grant Award to El Dorado County, hereinafter called the Grantee, for the duration set forth in this Grant Award.

7 tward.					
Grantee Project Director (Name, Address and Telephone Number)	Grant Award Number: CDCI-10/11-09				
	Award Period: January 1, 2011 thru December 31, 2011				
	Project Budget Period January 1, 2011 thru December 31, 2011				
Grantee Financial Officer (Name, Address and Telephone Number)	State General Fund Amount: \$93,334				
	Match Amount: \$18,667				
	Total Project Amount: \$112,001				

This Notice of Grant Award and the following attached documents are incorporated into the Notice of Grant Award by reference: The approved Application (proposal) submitted by a county alcohol and drug program administrator in partnership with the presiding judge, the Request for Applications, the Comprehensive Drug Court Implementation Act (Health & Safety Code § 11970.1 through §11970.35 inclusive), and the Terms and Conditions of the Grant Award.

The Grantee hereby signifies its acceptance of this Grant Award and agrees to administer the grant project in accordance with the terms and conditions set forth in or incorporated by reference in this Grant Award.

and conditions set forth in or incorp	orated by refere	nce in this C	Grant Awa	ard.					
STATE OF CALIFORNIA				GRAN	TEE				
Department of Alcohol and Drug Programs				Shirley White El Dorado Public Health Department 415 Placerville Dr., Ste. R Placerville, CA 95667					
By (Authorized Signature)				By (Authorized Signature) Shirley White, APP Program Mgr Date					
Printed Name and Title				AOD Printed Name and Title Shirley White					
Susan Lussier, Deputy Director, Div	vision of Adminis	stration		Coun	ty Alcohol and Drug	g Program Administrator			
Address: Department of Alcohol and Drug Office of Criminal Justice and Collad Drug Court Coordinator 1700 K Street, 5 th Floor Sacramento, CA 95811-4037 Funds Eligible for Adult Drug Cour Funds Eligible for Juvenile Drug C Funds Eligible for Dependency Drug Total 2010/2011 Allocation:	boration t ourt	\$4 \$9	50,544 12,790 \$0 03,334	Norma Suzanne Presid Hoho El Dou 1354 South	ding Judge Frinted July W able Suzanne N. Kin ado County Superio Johnson Boulevard, Lake Tahoe, CA 95	of the Board of Supervisors / Date Name, Title, and Address Supervisors / Date Date Date Date Suite 2			
		FOR	STATE L	ISE ON	1LY				
Budget Revision Number		···							
PGA , Index, and Object:	Item:	٥	Chapter		Statute	Fiscal Year:			
51015 / 6009 / 702 13	#4200-101	0001			2010	2010-2011			
I hereby certify upon my personal ki	nowledge that b	udgeted fun	ds are av	ailable	for the period and pi	urpose of the expenditure stated above			
SIGNATURE OF ADP ACCOUNTIN	NG OFFICER			Date					

PART XI

		IENSIVE DRUG PROPOSED BU			TATION		
		FINOF OOLD DO	DOL1 KLG	OLG1		<u> </u>	
Mail Completed Form To:		Complete the fe	ollowing as	noted on	the Notice of Gra	ant Award:	
Department of Alcohol and Drug Programs Office of Criminal Justice Collaboration		County: E	L DORADO)	Grant Awa	rd # CDCI-10-11-09	
Attn: Drug Court County Analyst		Grantee: EDC HEALTH SERVICES DEPT. PH - ALCOHOL & DRUG PROGRAMS					AMS
1700 K Street, 5th Floor Sacramento, CA 95811-4037		Address: 929 Spring Street					
(916) 445-7456		City/Zip: F	Placerville,	CA 95667	7		
Fax (916) 327-9285		Phone: (5	530) 621-61 ₋	46	Email Address	: shirley.white@edcgov.	us
		Project Yo	ear 2010-1	1			
	Sec	ction I - Adult I	Drug Cour	t Budge	t		
	Α	B. Non-Treat	lment		С	Ď	
BUDGET LINE ITEMS	Proposed Treatment and Related Costs	Non-Treatment Related Costs (Must be less than 15% of total allocation)		10/20 Percent Match Requirement		Total Treatment and Related Costs and Non-Treatment Related Costs (Do not include Match Amount)	
				_		Col A + B = D	
Personnel	. ,	\$	1,017.00	\$	8,306.00	\$	19,133.00
Fringe Benefits		\$	468.00	· '	1,803.00	\$	8,801.00
Travel Training	\$ 1,750.00 \$ -	\$	400.00	\$ \$		\$	2,150.00
Supplies	\$ 660.00	\$	200.00	\$		\$	400.00 860.00
Contractual Services	\$ 18,990.00	\$	210.00	\$		\$	19,200.00
Indirect Costs	10,000.00	\$	-	\$	_	\$	18,200.00
Subtotal of Section I	\$ 47,849.00	\$	2,695.00	\$	10,109.00	\$	50,544.00
<u>-</u>	Section II - Juve	enile Drug Cou	irt and De	nendenc	y Drug Court		
	A A		arcuire De	pendend		D	
		B Non-Treatment Related Costs (Must be less than 15% of total allocation)			C		
BUDGET LINE ITEMS	Proposed Treatment and Related Costs	Non-Treat Related C (Must be les	Costs ss than		C Percent Match equirement	Total Treatment and Related Non-Treatment Related (Do not include Match A	l Costs
	Proposed Treatment and Related Costs	Non-Treat Related C (Must be les 15% of total a	Costs ss than Ilocation)	R	Percent Match equirement	Total Treatment and Relate Non-Treatment Related (Do not include Match A Col A+B=D	I Costs Amount)
Personnel	Proposed Treatment and Related Costs \$ 10,283.00	Non-Treat Related C (Must be les 15% of total a	Costs ss than Ilocation)	\$	Percent Match equirement 5,023.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D	I Costs Amount) 10,283.00
Personnel Fringe Benefits	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00	Non-Treat Related C (Must be les 15% of total al \$	Costs ss than Ilocation)	\$ \$	Percent Match equirement	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D \$	I Costs Amount)
Personnel Fringe Benefits Other Administration Costs	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ -	Non-Treat Related C (Must be let 15% of total al \$ \$	Costs ss than (location)	\$ \$ \$	Percent Match equirement 5,023.00 2,310.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A+B=D \$ \$	1 Costs Amount) 10,283.00 4,729.00
Personnel Fringe Benefits Other Administration Costs Travel	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00	Non-Treat Related C (Must be les 15% of total al \$ \$ \$	costs ss than !location)	\$ \$ \$ \$	Percent Match equirement 5,023.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D \$ \$ \$	10,283.00 4,729.00 - 425.00
Personnel Fringe Benefits Other Administration Costs Travel Training	\$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$	costs ss than !location) - - - 25.00 275.00	\$ \$ \$ \$ \$	Percent Match equirement 5,023.00 2,310.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies	\$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ - \$ 960.00	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$	25.00 275.00 50.00	\$ \$ \$ \$ \$ \$	Percent Match equirement 5,023.00 2,310.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services	\$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$ \$ \$	25.00 275.00 4,000.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	5,023.00 2,310.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ - \$ 960.00 \$ 20,000.00	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$	25.00 275.00 50.00	\$ \$ \$ \$ \$ \$ \$ \$	Percent Match equirement 5,023.00 2,310.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services Indirect Costs Subtotal of Section II	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ - \$ 960.00 \$ 20,000.00	Non-Treat Related C (Must be les 15% of total a \$ \$ \$ \$ \$ \$ \$ \$ \$	25.00 275.00 275.00 4,000.00 2,068.00	\$ \$ \$ \$ \$ \$ \$ \$	5,023.00 2,310.00 	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A+B=D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00 2,068.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services Indirect Costs	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ - \$ 960.00 \$ 20,000.00	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	25.00 275.00 275.00 4,000.00 2,068.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	5,023.00 2,310.00 	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A+B=D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00 2,068.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services Indirect Costs Subtotal of Section II GRAND TOTAL (Total of Section I and Section II) Additional Information: 1. Section I is restricted to fund 2. Section II line item budget m 3. Grand total must equal the c	## Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ 400.00 \$ 960.00 \$ 20,000.00 \$ 36,372.00 \$ 84,221.00 \$ 84,221.00 \$ 10 \$	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	25.00 275.00 275.00 4,000.00 2,068.00 6,418.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	5,023.00 2,310.00 	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A + B = D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00 2,068.00 42,790.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services Indirect Costs Subtotal of Section II GRAND TOTAL (Total of Section I and Section II) Additional Information: 1. Section I is restricted to fund 2. Section II line item budget m 3. Grand total must equal the color in the section II is restricted to fund 2. Section II line item budget m 3. Grand total must equal the color in the section II is restricted to fund 3. Grand total must equal the color in the section II is restricted to fund 3. Grand total must equal the color in the section II is restricted to fund 3. Grand total must equal the color in the section II is restricted to fund 3. Grand total must equal the color in the section II is restricted to fund 4. Administration Costs I hereby certify that all costs are color in the section II is restricted to fund 4. Administration Costs I hereby certify that all costs are color in the section II is restricted to fund 4. Administration Costs I hereby certify that all costs are color in the section II is restricted to fund 4. Administration Costs I hereby certify that all costs are color in the section II is restricted to fund 4. Administration Costs I hereby certify that all costs are color in the section II is restricted to fund 4. Administration Costs I hereby certify that all costs are color in the section II is restricted to fund 4. Administration Costs I hereby certify that all costs are color in the section II is restricted to fund I hereby certify that all costs are color in the section II is restricted to fund I hereby certify that all costs are color in the section II is restricted to fund I hereby certify that all costs are color in the section II is restricted to fund I hereby certify that all costs are color in the section II is restricted to fund I hereby certify that all costs are color in the section II is restricted to fund I hereby certify that all costs are color in the section II is restricted to fund I hereby certify that all costs	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ 20,000.00 \$ 36,372.00 \$ 84,221.00 \$ 84,221.00 Is serving adult convicted felons that be equal to or less than fund county's combined subtotal amountsistent with the Terms and Consistent with the Term	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	25.00 275.00 275.00 4,000.00 2,068.00 6,418.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Percent Match equirement 5,023.00 2,310.00	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A+B=D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00 2,068.00 42,790.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services Indirect Costs Subtotal of Section II GRAND TOTAL (Total of Section I and Section II) Additional Information: 1. Section I is restricted to fund 2. Section II line item budget m 3. Grand total must equal the c	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ - \$ 960.00 \$ 20,000.00 \$ 36,372.00 \$ 84,221.00 Is serving adult convicted felons that be equal to or less than fund county's combined subtotal amountsistent with the Terms and Company Administrator	Non-Treat Related C (Must be les 15% of total al \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	25.00 275.00 275.00 4,000.00 2,068.00 6,418.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	5,023.00 2,310.00 	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A+B=D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00 2,068.00 42,790.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services Indirect Costs Subtotal of Section II GRAND TOTAL (Total of Section I and Section II) Additional Information: 1. Section I is restricted to fund 2. Section II line item budget m 3. Grand total must equal the colline of th	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ - \$ 960.00 \$ 20,000.00 \$ 36,372.00 \$ 84,221.00 Is serving adult convicted felons that be equal to or less than fund county's combined subtotal amountsistent with the Terms and Company Administrator	Non-Treat Related C (Must be let 15% of total al \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ Shade in the second of the seco	25.00 275.00 275.00 4,000.00 2,068.00 6,418.00 9,113.00 simile and depe	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ Please pri	5,023.00 2,310.00 1,225.00 8,558.00 18,667.00 g courts as of May 20 At name of Adminis	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A+B=D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00 2,068.00 42,790.00
Personnel Fringe Benefits Other Administration Costs Travel Training Supplies Contractual Services Indirect Costs Subtotal of Section II GRAND TOTAL (Total of Section I and Section II) Additional Information: 1. Section I is restricted to fund 2. Section II line item budget m 3. Grand total must equal the colline of th	Proposed Treatment and Related Costs \$ 10,283.00 \$ 4,729.00 \$ - \$ 400.00 \$ - \$ 960.00 \$ 20,000.00 \$ 36,372.00 \$ 84,221.00 Is serving adult convicted felons must be equal to or less than fund county's combined subtotal amounty scombined subtotal scombined scombined subtotal scombined subtotal scombined subtotal scombined scomb	Non-Treat Related C (Must be let 15% of total al \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ Shade in the second of the seco	25.00 275.00 275.00 4,000.00 2,068.00 6,418.00 9,113.00 simile and depe	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ Please pri	5,023.00 2,310.00 1,225.00 8,558.00 18,667.00 g courts as of May 20 At name of Adminis	Total Treatment and Relater Non-Treatment Relater (Do not include Match A Col A+B=D \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	10,283.00 4,729.00 - 425.00 275.00 1,010.00 24,000.00 2,068.00 42,790.00