
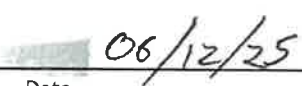
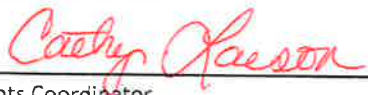




NEW GRANT SET-UP FORM

Departments that have received a grant award must complete this form and submit it to the Grants Coordinator, along with a copy of the fully executed grant agreement, PRIOR to incurring any grant related expenses. Funds will become available for spending after revenue and expenditure codes are established by Office of Budget and Finance and a budget resolution has been adopted by the City Council.

1. DEPARTMENT (Grant Applicant/Contact Person) Name: <u>LaFayette Hodges</u> Title: <u>Grants Coordinator</u> Phone: <u>352-369-7085</u> Fax No.: <u>lhodges@ocalapd.gov</u>		2. GRANT DATA Grant Title: <u>Bicycle Pedestrian</u> Funding Agency: <u>IPTM</u> Grant Award Date: <u>Jun 11, 2025</u> Period of Performance: <u>7/1/25-6/30/26</u>	
3. FINANCIAL DATA Amount of Grant Award: <u>47,099</u> Amount of Matching Funds: <u>0</u> Amount of in-kind (specify source): <u>0</u> Total project amount: <u>47,099</u> Amount of Future Financial Obligations/Commitments: <u>\$2000 for other benefits not incorporated into the grant</u>		5. STAFFING REQUIREMENTS Anticipated Salary Costs: _____ Anticipated Overtime Costs: <u>43,699</u> Anticipated Benefit Costs: <u>3,400</u> Will fund existing or new employees? <u>0</u>	
6. BRIEF DESCRIPTION OF PURPOSE OF THE GRANT: <u>the University of North Florida Institute of Police Technology and Management has awarded \$47099 for reimbursement of overtime expenses incurred by sworn officers conducting high visibility enforcement and education</u>			
7. COUNCIL APPROVAL Has the budget resolution and contract been approved by City Council? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, please provide the meeting date(s) of approval. _____ If no, please provide the anticipated meeting date items will be presented to City Council. <u>Jul 1, 2025</u>			
REQUIRED SIGNATURES			
LaFayette Hodges Grant Project Manager		Jun 11, 2025 Date	
 Department Director		 Date <u>06/12/25</u>	
 Grants Coordinator		<u>6-20-25</u> Date	
OFFICE OF BUDGET & FINANCE USE ONLY			
Assigned Expenditure Code: <u>001-050-857</u>		<u>Munis # 250772</u>	
Assigned Revenue Code: <u>001-334-000-000-09-35164</u>			
Date Department Notified of Appropriate Account Code: <u>6-20-25</u>			