	ent receiving grant: person: Wendy Sv			ervices/P	arks and f	V1791	
	ow long is the grant for? 1 year					07/01/2	2024
Does the grant require you to fund this function after the grant is over?				Starting Date:			
Does the	e grant require you to fund the	his function	on after the g	rant is over?		Yes	No
Does the grant require a match?					$\frac{X}{x}$	Yes	No
If yes, d	If yes, does the grant allow the match to be In-Kind services?					Yes	No
Percenta	age of match to grant 50			<u>%</u>			
C 4		1,250					
Grant ma	atch amount required <u>\$ </u>	-,		_			
	are the matching funds comir			Services; Reserv	e for Contingency	y)?	
0012107	72-033190-23812 (project account	set up for t	nis grant)				
	e grant cover canital costs or	r start-un	costs?			Ves x-	none required No
Does the	e grant cover capital costs or			sts or start-up co	sts: \$	Yes	none required No
Does the	e grant cover capital costs or ow much do you think will be a detail listing of costs)			sts or start-up co	sts: \$	Yes x-	none required No
Does the If no, ho (Attach a	ow much do you think will be a detail listing of costs)	e needed	in capital cos	-	sts: \$		
Does the If no, ho (Attach a	ow much do you think will be a detail listing of costs) adding any additional positi	e needed	in capital cos	funds?		Yes	No No
Does the If no, ho (Attach a	ow much do you think will be a detail listing of costs)	e needed	in capital cos	funds?			
Does the If no, ho (Attach a Are you If yes, p	ow much do you think will be a detail listing of costs) adding any additional positi blease list. (If additional spa	e needed	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
Does the If no, ho (Attach a Are you If yes, p	ow much do you think will be a detail listing of costs) adding any additional positional spanning and the control of the cost	e needed	in capital cos	funds?			
Does the If no, ho (Attach a Are you If yes, p Acct.	ow much do you think will be a detail listing of costs) adding any additional positional space list. (If additional space lists addition	ions utilizace is need	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
Does the If no, ho (Attach a Are you If yes, p Acct. 011.12	w much do you think will be a detail listing of costs) adding any additional positional space list. (If additional space list. (Bescription Regular Salaries Wages (1)	ions utilizace is need	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
Does the If no, ho (Attach a Are you If yes, p Acct. 11.12 11.13	w much do you think will be a detail listing of costs) adding any additional positional space list. (If additional space list. (If additional space) Description Regular Salaries Other Salaries & Wages (In Social Security)	ions utilizace is need	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
Does the If no, ho (Attach a Are you If yes, p Acct. 011.12 011.13 012.11 012.12	w much do you think will be a detail listing of costs) adding any additional positional space list. (If additional space list. (If additional space list) Description Regular Salaries Other Salaries & Wages (In Social Security) Retirement — Contribution	ions utilizace is need	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
Does the If no, ho (Attach a Are you If yes, p Acct. 011.12 011.13 012.11 012.12 012.13	w much do you think will be a detail listing of costs) adding any additional positional spansitional spansit	ions utilizace is need	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
Does the If no, ho (Attach a Are you If yes, p Acct. 011.12 011.13 012.11 012.12 012.13 012.14	ow much do you think will be a detail listing of costs) adding any additional positional space list. (If additional space list. (If additional space list.) Description Regular Salaries Other Salaries & Wages (Isocial Security) Retirement – Contribution Insurance – Life & Health Worker's Compensation	ions utilizace is need	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
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Does the If no, ho (Attach a Are you If yes, p Acct. 11.12 11.13 12.11 12.12 12.13 12.14	ow much do you think will be a detail listing of costs) adding any additional positional space list. (If additional space list. (If additional space list.) Description Regular Salaries Other Salaries & Wages (Isocial Security) Retirement – Contribution Insurance – Life & Health Worker's Compensation	ions utilizace is need	in capital costing the grant ded, please at	funds? tach a schedule.)	Yes >	No No
Does the If no, ho (Attach a Are you If yes, p Acct. 011.12 012.11 012.12 012.13 012.14 012.17	Description Regular Salaries Other Salaries & Wages (I Social Security Retirement – Contribution Insurance – Life & Health Worker's Compensation S/Sec. Medicare Matching TOTAL	ions utilizace is need	in capital costing the grant ded, please at Position	funds? tach a schedule. Position	Position	Yes Position	Position
Does the If no, ho (Attach a Are you If yes, p Acct. 011.12 012.11 012.12 012.13 012.14 012.17	w much do you think will be a detail listing of costs) adding any additional positional space list. (If additional space list. (If additional space list) Description Regular Salaries Other Salaries & Wages (In Social Security Retirement — Contribution Insurance — Life & Health Worker's Compensation S/Sec. Medicare Matching	ions utilizace is need	in capital costing the grant ded, please at Position	funds? tach a schedule. Position	Position	Yes Position	Position
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Does the If no, ho (Attach a Are you If yes, p Acct. 11.12 11.13 12.11 12.12 12.13 12.14 12.17	Description Regular Salaries Other Salaries & Wages (I Social Security Retirement – Contribution Insurance – Life & Health Worker's Compensation S/Sec. Medicare Matching TOTAL	ions utilizace is need	in capital costing the grant ded, please at Position	Founds? tach a schedule. Position capital, start-up,	Position	Yes Position	Position
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	Grant Amount	Other Match Costs Not Covered	Match	Total
First Year	\$11,250.00	\$	\$11,250.00	\$22,500.00
Second Year	\$	\$	\$	\$
Third Year	\$	\$	\$	\$
Fourth Year	\$	\$	\$	\$
Fifth Year	\$	\$	\$	\$

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Date: