

GRANT NAME: Florida Blue Foundation - Mental Well-being Teens GRANT # _____

AMOUNT OF GRANT: \$300,000

DEPARTMENT RECEIVING GRANT: Parks, Recreation & Conservation

CONTACT PERSON: Beth Powell TELEPHONE: 772-226-1785

1. How long is the grant for? 3 Year Starting Date: July 1, 2024

2. Does the grant require you to fund this function after the grant is over? _____ Yes No

3. Does the grant require a match? _____ Yes No
 If yes, does the grant allow the match to be In-Kind services? _____ Yes _____ No

4. Percentage of match to grant 0 %

5. Grant match amount required \$ 0

6. Where are the matching funds coming from (i.e. In-Kind Services; Reserve for Contingency)?

7. Does the grant cover capital costs or start-up costs? _____ Yes No
 If no, how much do you think will be needed in capital costs or start-up costs: \$ _____
 (Attach a detail listing of costs)

8. Are you adding any additional positions utilizing the grant funds? Yes _____ No
 If yes, please list. (If additional space is needed, please attach a schedule.)

Acct.	Description	Position	Position	Position	Position	Position
011.12	Regular Salaries	52327.96 Yr 1	54944.36 Yr 2	57691.57 Yr 3		
011.13	Other Salaries & Wages (PT)					
012.11	Social Security					
012.12	Retirement – Contributions					
012.13	Insurance – Life & Health					
012.14	Worker’s Compensation					
012.17	S/Sec. Medicare Matching					
	TOTAL	\$79,383.23 Yr 1	\$82,651.20 Yr 2	\$86,085.32 Yr 3		

9. What is the total cost of each position including benefits, capital, start-up, auto expense, travel and operating?

Salary and Benefits	Operating Costs	Capital	Total Costs
\$79,383.23 Yr 1	approx. \$22,000		\$101,383.23 approx Yr 1
\$82,651.20 Yr 2	approx. \$15,000		\$97,651.20 approx Yr 2
\$86,085.32 Yr 3	approx. \$15,000		\$101,085.32 approx Yr 3

10. What is the estimated cost of the grant to the county over five years? \$ _____ less than \$15,000 for contingency allocated in operating budgets

	Grant Amount	Other Match Costs Not Covered	Match	Total
First Year	\$ 100,000.00	\$ 40.00	\$	\$ 100,040.00
Second Year	\$ 100,000.00	\$ 40.00	\$	\$ 100,040.00
Third Year	\$ 100,000.00	\$ 40.00	\$	\$ 100,040.00
Fourth Year	\$	\$	\$	\$
Fifth Year	\$	\$	\$	\$

Signature of Preparer: Elizabeth Powell

Digitally signed by: Elizabeth Powell
 DN: CN = Elizabeth Powell email = bpowell@indianriver.gov C = US O = Indian River
 County OU = Parks Recreation and Conservation
 Date: 2024.02.26 15:37:27 -0500

Date: _____