Notice of Grant Award

Corporation for National and Community Service

250 E Street SW, Suite 300 Washington, DC 20525-0001 (202) 606-5000

Senior Companion Program Grantee

City of Jacksonville, Florida

EIN: 596000344

117 W Duval St Ste 400 Jacksonville FL 32202-3700

UEI: HMGLC26EUPC4

Award Information BT22-111 Previous Application - Agreement No.: 215CHFLO03

Agreement No.: 24

24SCHFL001

Performance Period:

07/01/2024 - 06/30/2027

Amendment No.: 0

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Budget Period:

07/01/2024 - 06/30/2027

CFDA No.:

94.016

Grant Year:

1

Purpose

The purpose of this award is to assist the grantee in carrying out a national service program as authorized by the Domestic and Volunteer Service Act of 1973, as amended (42 U.S.C. Chapter 22).

Funding Information	n		
Year 1	Previously Awarded This Year	This Award/ Amendment	Total Current Year
Total Obligated by CNCS	\$0	\$264,582	\$264,582
Grantee's Unobligated Balance (Carryover)	\$0	\$0	\$0
Total Available	\$0	\$264,582	\$264,582
Cumulative Funding fo	r Project Per	iod	
Total Awarded in Previous	Amendments		\$0
Total CNCS Funds Awards	ed to Date		\$264,582

Funding Source and Amount

2024--OPE1-P77-OPO-26000-4101

\$264,582.00

Award Description

This award funds the approved 2024–25 SCP program. Your 2024–25 statutory match is 10.00% and your budgetary match is 19.60%. This award is approved to add \$2,500 in one-time additional funds for travel related to training in FY 24.

Terms of Acceptance: By accepting funds under this grant, recipient agrees to comply with General Terms and Conditions found at https://americorps.gov/sites/default/files/document/FY2024-General-Terms-Conditions-508-20230919.pdf and the Program Terms and Conditions found at https://americorps.gov/sites/default/files/document/20240502-2024-FGP-SCP-Program-Specific-508TC.pdf. Recipient also agrees to comply with assurances and certifications made in the grant application, supporting documents, and with applicable federal statutes, regulations and guidelines.

Corporation for National and Community Service:

For Official Use Only

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24SCHFL001

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Performance Period:

07/01/2024 - 06/30/2027

Amendment No.:

07/01/2024 - 06/30/2027

CFDA No.:

Budget Period: Grant Year:

05/28/2024

City of Jacksonville, Florida

Legal Applicant

Award Date

Paulette Supria

Signature

Senior Grants Officer

Joe Slater

Project Director

Julius Smiley

Grants Officer

Joe Slater

Julius Smiley

Certifying Official/Executive Officer

Program Officer

Budget Narrative: City of Jacksonville Senior Companion Program for City of Jacksonville, Florida

Section I. Volunteer Support Expenses

DALM: no DB employes in grant amounts moved to 549058

A. Project Personnel Expenses

Position/Title -Qty -Annual Salary -% Time	CNCS Share	Grantee Share	Total Amount	Excess Amount
Clerical Support Aide III- PT @15.37 an hour for 1300 hrs = 19,981.00: - 1 person(s) at 19981 each x 100 % usage	19,981	0	19,981	0
Special Pay Pensionable: - 1 person(s) at 930 each x 100 % usage	0	930	930	0
Project Director @ 55,920. each X100% usage: - 1 person(s) at 55920 each x 100 % usage	34,300	21,620	55,920	0
Volunteer Coordinator-1 person(s) 100% usage @ 16.47: - 1 person(s) at 35294 each x 100 % usage	35,294	0	35,294	0
Category Totals	89,575	22,550	112,125	0

B. Personnel Fringe Benefits

Item -Description	CNCS Share	Grantee Share	Total Amount	Excess Amount	
FICA: Federal Insurance Contribution Act is not required for Local government employee with Pension Plan Benefits	0	0	0	0	
Health Insurance: Health Insurance Premium is based on individual election rate. (\$559.08 month x 12) 2 FTE	4,079	9,339	13,418	0	
Retirement: Retirement benefits	0	14,000	14,000	0	0
Life Insurance: Group Life Insurance: Proportional percentage of 2 FTE. Base rate covered City employee based on total cost negotiated with insurance company.	132	214	346	0	The state of the s
Medicare @ 1.45%: Federal mandated tax @ 1.45% of gross wages. Total wages for 2 FTE	662	1,840	2,502	0	
Pension DB: Defined Benefit (DB) pension Clerical Support III \$325 month x 12) x 2 employees	1,365	6,435	7,800	0	
Pension Liability Unfunded: GEPP Unfunded Liability @ .29% of EM'EE gross wages.	96	705	801	0	0
Diability Trust @ .3%: Disability Trust: Allocation based on a base premium charge for all activities dependent on the local total budgeted salary	99	590	689	0	
Worker's Compensation @ 3% of Gross Wages: Worker's Comp. Worker's Compensation insurance for 2 FTE based on negotiated rate by the City of Jacksonville	990	4,098	5,088	0	
Group Dental Insurance: Group dental rate (\$15/mth x 12 mths). 2 Full time employees. Rate based on Ind. choice (\$18 0 year per EM'EE)	36	324	360	0	
Category Totals	7,459	37,545	45,004	0	

C. Project Staff Travel

Local Travel

Purpose -Calculation	CNCS Share	Grantee Share	Total Amount	Excess Amount
Local Travel: Local Travel: \$300/12 months = \$25.00 monthly per 1 FTE. Project Director. Purpose of local travel is for recruitment, outreach, home visits, and volunteer assignments.	300	0	300	0
Category Totals	300	0	300	0

Long Distance Travel

Purpose -Destination -Other Travel -Trans. Amount -Meals/ Lodging	CNCS Share	Grantee Share	Total Amount	Excess Amount
Long Distance Travel - State of FL.: Conferences, trainings, and seminars (\$75 a night @ 3 nights) Transportation \$296.81 for 667 miles @ \$.445 per mile. Meals (\$45 per day x 3 days for 1 employee)- Meals/Lodging 135 Trans 297 Other 77	509	0	509	0
Long Distance Travel: Americorps Conference: Long Distance Travel AmeriCorps conferences Transportation: \$350/person Air; taxi parking \$120 Meals/Lodging (AmeriCorps Seniors Convening) \$2500 Tras 700 other 240- Meals/Lodging 2,500 Trans 350 Other 590	3,440	0	3,440	0
Category Totals	3,949	0	3,949	0

D. Equipment

Item/Purpose -Qty -Unit Cost	CNCS Share	Grantee Share	Total Amount	Excess Amount
Category Totals	0	0	0	0

E. Supplies

Item/ Purpose -Calculation	CNCS Share	Grantee Share	Total Amount	Excess Amount
Supplies: Supplies: Consumable program supplies-copy paper, ink cartridges', Program Calendar for staff and volunteer, stapler, filing cabinets (3); binders, and file folders. No single supply item exceeds \$1000.00	826	364	1,190	0
Category Totals	826	364	1,190	0

F. Contractual and Consultant Services

Purpose -Calculation	CNCS Share	Grantee Share	Total Amount	Excess Amount
Category Totals	0	0	0	0

I. Other Volunteer Support Costs

ltem	CNCS Share	Grantee Share	Total Amount	Excess Amount
Criminal Background Check:	0	0	0	0

Printing: Volunteer Forms \$421, Invitations & Envelopes,\$1037:	1,037	421	1,458	0
Postage 4 rolls= 400 Stamps @ \$0.68=\$272.00:	272	0	272	0
Memberships-National Senior Corps Association (NSCA) membership (\$150); Florida AmeriCorps Seniors Professionals (FASP) \$75.00:	225	0	225	0
In-Services Supplies and Training: 29 volunteers X \$45.00 -to cover educational and training materials and mail-out for volunteer.:	800	505	1,305	0
Cost Allocations Plan- (not exceed) 30%:	0	2,088	2,088	0
Criminal Background Check- (3)Staff members @ \$45.25= \$136, and 29 Volunteers @ \$45.25=1312,Total \$1,448:	1,312	136	1,448	0
Category Totals	3,646	3,150	6,796	0

J. Indirect Costs

Calculation -Rate Type -Rate -Rate Claimed -Cost Basis	CNCS Share	Grantee Share	Total Amount	Excess Amount
Category Totals	0	0	0	0
Section Totals	105,755	63,609	169,364	0
PERCENTAGE	62.44%	37.56%		

Section II. Volunteer Expenses

A. Stipends

Item - # -Annual Stipend	CNCS Share	Grantee Share	Total Amount	Excess Amount
Corporation Funded: - 29 x 4176	121,104	0	121,104	0
Non-Corporation Funded: - 0 x 4176	0	0	0	0
Category Totals	121,104	0	121,104	0

B. Other Volunteer Costs

Item -Description	CNCS Share	Grantee Share	Total Amount	Excess Amount
Meals: Meals: 29 SCP x 7 meals per pay period x 26 pay periods x \$2.50 =\$13,195	13,195	0	13,195	0
Uniforms:	0	0	0	0
Insurance: CIMA accident Insurance (29 volunteers @ 4.55= \$131.95AmeriCrops Seniors Volunteers Liability (29 @ \$1.35 = \$39.15 + FL Surplus Lines Tax \$4.95 + FI Stamping Fee \$0.06 = \$44.15) AmeriCorps Seniors Excess Auto Liability (543	0	543	0
Recognition: 29 Volunteers x \$149.65= \$4339.85 per Two Recognition Event:	3,440	900	4,340	0
Volunteer Travel: 29 SCP Vols. @ (5.2 mls a day) =150.8 mls a day x 208 days) = 31,366.4 mls for (12 months) @ .655/per mile	20,545	0	20,545	0

\$20,545				
Physical Examinations:	0	0	0	0
Category Totals	37,723	900	38,623	0
Section Totals	158,827	900	159,727	0
PERCENTAGE	99.44%	.56%		

Budget Totals	264,582	64,509	329,091	0
PERCENTAGE	80.40%	19.60%		
Requi		10.00%		

Source of Funds

Section	Description
Section I. Volunteer Support Expenses	Source of Matching funds, City of Jacksonville General Revenue Funds. Funds is Secure. 64,509
Section II. Volunteer Expenses	Source of Matching funds of \$64,424.00 through City of Jacksonville General Revenue Funds. The fund is secured.

Budget Narrative: City of Jacksonville Senior Companion Program for City of Jacksonville, Florida

Section I. Volunteer Support Expenses

A. Project Personnel Expenses

Position/Title -Qty -Annual Salary -% Time	ne CNCS Share Grantee Share		Total Amount	Excess Amount
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Health Insurance: Health Insurance Premium is based on individual election rate. (\$559.08 month x 12) 2 FTE	4,079	9,339	13,418~	0
Retirement: Retirement benefits	0	14,000	14,000	0
Life Insurance: Group Life Insurance: Proportional percentage of 2 FTE. Base rate covered City employee based on total cost negotiated with insurance company.	132	214	346 \	0
Medicare @ 1.45%: Federal mandated tax @ 1.45% of gross wages. Total wages for 2 FTE	662	1,840	2,502∖	0
Pension DB: Defined Benefit (DB) pension Clerical Support III \$325 month x 12) x 2 employees	1,365	6,435	7,800 (0
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Category Totals	300	0	300	0

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Category Totals	0	0	0	0

I. Other Volunteer Support Costs

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Criminal Background Check:	0	0	0	0

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Printing: Volunteer Forms \$421, Invitations & Envelopes,\$1037:	1,037	421	1,458	0 1	547216
Postage 4 rolls= 400 Stamps @ \$0.68=\$272.00:	272	0	272	0	542001 17= 19=
Memberships-National Senior Corps Association (NSCA) membership (\$150); Florida AmeriCorps Seniors Professionals (FASP) \$75.00:	225	0	225	0	554 col
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Uniforms.	0	0	0	0	
Insurance: CIMA accident Insurance (29 volunteers @ 4.55= \$131.95AmeriCrops Seniors Volunteers Liability (29 @ \$1.35 = \$39.15 + FL Surplus Lines Tax \$4.95 + Fl Stamping Fee \$0.06 = \$44.15) AmeriCorps Seniors Excess Auto Liability (543	0	543	0	54502C
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					7552060

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Physical Examinations:	0	0	0	0
Category Totals	37,723	900	38,623	0
Section Totals	158,827	900	159,727	0
PERCENTAGE	99.44%	.56%		

Budget Totals	264,582	64,509	329,091	0
PERCENTAGE	80.40%	19.60%		
Requi	Required Match		10.00%	

Source of Funds

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