UTILIZATION REPORT FOR MISCELLANEOUS FEDERAL GRANT PROGRAM APPROPRIATION AND PERSONNEL GRANT PROGRAM REQUEST

| Date: | 11/03/2014 | Grant ID | | CFDA 93.323 | | | Legislative Review Date: | | | | |
|---|---|---|---|---|---|--|---|--|--|--------------------------------------|--|
| Agency: A | Arkansas Departr | nent of H | ealth | _ Program T | ītle: | State | and Trib | al Youth Suicid | le Prever | ntion Grant | |
| Granting (| Grant #: | | | | | | | | | | |
| Effective I | Date of Authorizati | on: Beginning: | | 09/30/2014 | | | Ending: | | | | |
| Purpose o | f Grant / Reason f | or additio | | | | | | | | | |
| The Arkan: The grant and Menta Arkansas h project, Th | sas Department of is managed by the il Health Services A nas been awarded to ne funding will be u oviders improve fo | Health (Al Suicide Pr dministrati his funding sed to inci | OH) has been arevention Branci ion. The funding. These dollars | warded a Gam h within the Co g is expected to s will fund a po er of youth-se | rett Le enter to tot opula | ee Smitt for Mer al \$3,68 tion-foc | State a stal Heal 10,000 or used Ark | nd Tribal Suicide th Services in the er five years. The ansas Youth Suic | Prevention Substance Is is the fit aide Preve | n Grant. e Abuse rst time that | |
| | | | Dev | ject-Grant I | Enne | lime | | | | | |
| | rea Code: | | 45 | Jecr-Giatif | rund | ing | | | | | |
| Funds Cen Fund Code | | | 9P 0000 | | Continuation of Existing Program: Change in Existing Program: | | | | | | |
| | Area Code: | H | | | | | New Pro | | ram: | | |
| | | New Federal Funds | | State Matching Funds | | | Other Matching Punds | | Project Total | | |
| Regular Sa | alaries | | 77,665 | | | 100,000 | Parter Miller | | 30. S.A. 17 | 77,66 | |
| Extra Help | | | 0 | | | | | | | 77,00. | |
| Operating | Expenses | | 578,441 | | | | | | 4 1 | 578,44 | |
| Personal S | ervices Matching | 26,148 | | | | | | | | 26,14 | |
| Conference | e &Travel Expense | | 19,350 | | | | | | | 19,35 | |
| Profession | al Fees | | | | | | | | | | |
| Capital Ou | tlay | | | | | | | | | | |
| Data Proce | | | | | | | | | | | |
| | Recovery and ent Act of 2009 | | | | | | | Hu | | | |
| Others: | | _ | | | - | | | | | | |
| Total | | \$ | 701,604 | \$ | | | \$ | | \$ | 701 604 | |
| Add | | 1. 7 | | <u> </u> | | | | | 1.7 | 701,604 Remove | |
| | | | | | | | | | | Kentoye | |
| | | inding Perce | rcentages | | | | Type of Federal Grant | | | | |
| FY 15 [| Federal 100 % | S | itate % | Other | % | | tal | | \A/TA | П | |
| FY 16 | 100 % | | % | | % % | 100 | <u>%</u> | | WIA | - | |
| FY 17 | 100 % | | % | | % | 100 | % | | Non-WIA | | |
| FY 18 FY 19 | 100 % 100 % | | % | | % % | 100 | % % | | ARRA | | |
| | | | | | 70 | 100 | 70 | | | | |
| nticipated | Duration of Fede | ral Funds | 09/ | 29/2019 | | _ ! | DEA TOO | State = 1 1 | | | |
| ositions (| to be establishe | d: (list ea | ch position sep | parately) | | | Items req in complia | State Technology uested for information nce with Technology Tate Technology Pla | on technology Plans as su | Date sy must be abmitted to | |
| Personnel | | Cost | Commitment | | | | | Class | | * Gr 66 & 99 or | |
| Area | Position Number | Center | Item | | tion Tit | on Title C | | Grade | Line Item Maximum | | |
| HL98 | | 610070 | 501:00:00 | Health Program Sp | | | ecialist : | II LO48C | C118 | | |
| HL98 | | 610070 | 501:00:00 | Health Program Specia | | | ecialist I | II L043C | C119 | | |

Remove State funds will not be used to replace federal funds when such funds expire, unless appropriated by the General Assembly and authorized by the Governor.

Add

Office Personnel Mgmt