Minnesota Department of Public Safety ("State")	Grant Program:	
Office of Justice Programs	ARPA Survivor Support and Prevention Grant	ts
445 Minnesota Street, Suite 2300	2022	
St. Paul, MN 55101-2139	Grant Contract Agreement No.: A-ARPS-2022-RAMS-SOS-00027	
Grantee:	<b>Grant Contract Agreement Term:</b>	•
Ramsey County-Sexual Offense Services (SOS)	Effective Date: 1/1/2022	
555 Cedar Street	<b>Expiration Date:</b> 3/31/2023	
St Paul, Minnesota 55101-2260		
Grantee's Authorized Representative:	<b>Grant Contract Agreement Amount:</b>	•
Emily Huemann, Program Supervisor	Original Agreement \$510,0	00.00
Ramsey County-Sexual Offense Services (SOS)	Matching Requirement	\$0.00
555 Cedar Street		
St. Paul, Minnesota 55101-2260		
(651) 266-1280		
emily.huemann@ramseycounty.us		
State's Authorized Representative:	Federal Funding: CFDA 21.027	
Kristine Kvols, Grant Manager	FAIN: None	
Office of Justice Programs	State Funding: None	
445 Minnesota Street, Suite 2300	Special Conditions: None	
St. Paul, MN 55101-2139		
(651) 815-2270		
Kristine.Kvols@state.mn.us		

Under Minn. Stat. § 299A.01, Subd 2 (4) the State is empowered to enter into this grant contract agreement.

**Term:** The creation and validity of this grant contract agreement conforms with Minn. Stat. § 16B.98 Subd. 5. Effective date is the date shown above or the date the State obtains all required signatures under Minn. Stat. § 16B.98, subd. 7, whichever is later. Once this grant contract agreement is fully executed, the Grantee may claim reimbursement for expenditures incurred pursuant to the Payment clause of this grant contract agreement. Reimbursements will only be made for those expenditures made according to the terms of this grant contract agreement. Expiration date is the date shown above or until all obligations have been satisfactorily fulfilled, whichever occurs first.

## The Grantee, who is not a state employee will:

Perform and accomplish such purposes and activities as specified herein and in the Grantee's approved ARPA Survivor Support and Prevention Grants 2022 Application ("Application") which is incorporated by reference into this grant contract agreement and on file with the State at 445 Minnesota Street, Suite 2300, St. Paul, Minnesota, 55101-2139. The Grantee shall also comply with all requirements referenced in the ARPA Survivor Support and Prevention Grants 2022 Guidelines and Application which includes the Terms and Conditions and Grant Program Guidelines (<a href="https://app.dps.mn.gov/EGrants">https://app.dps.mn.gov/EGrants</a>), which are incorporated by reference into this grant contract agreement.

**Budget Revisions:** The breakdown of costs of the Grantee's Budget is contained in Exhibit A, which is attached and incorporated into this grant contract agreement. As stated in the Grantee's Application and Grant Program Guidelines, the Grantee will submit a written change request for any substitution of budget items or any deviation and in accordance with the Grant Program Guidelines. Requests must be approved prior to any expenditure by the Grantee.

*Matching Requirements:* (If applicable.) As stated in the Grantee's Application, the Grantee certifies that the matching requirement will be met by the Grantee.



## **Grant Contract Agreement**

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**Payment:** As stated in the Grantee's Application and Grant Program Guidance, the State will promptly pay the Grantee after the Grantee presents an invoice for the services actually performed and the State's Authorized Representative accepts the invoiced services and in accordance with the Grant Program Guidelines. Payment will not be made if the Grantee has not satisfied reporting requirements.

*Certification Regarding Lobbying:* (If applicable.) Grantees receiving federal funds over \$100,000.00 must complete and return the Certification Regarding Lobbying form provided by the State to the Grantee.

1. ENCUMBRANCE VERIFICATION Individual certifies that funds have been encumbered as	3. STATE AGENCY	
required by Minn. Stat. § 16A.15.	Signed:	1.11 1. 4. 5.
Signed:	(Wit	h delegated authority)
Date:	Date:	
Grant Contract Agreement No./ P.O. No. <u>A-ARPS-2022-RAMS-SO</u>	<u>9S-00027 / 3-78639</u>	
Project No.(indicate N/A if not applicable): N/A		
2. GRANTEE		
The Grantee certifies that the appropriate person(s) have executed the grant contract agreement on behalf of the Grantee as required by applicable articles, bylaws, resolutions, or ordinances.		
Signed:		
Print Name:		
Title:		
Date:		
Signed:		
Print Name:	<b>.</b>	DDG TILG
Title:	Distribution:	Grantee State's Authorized Representative

A-ARPS-2022-RAMS-SOS-00027

## **Budget Summary**

ARPS: SOS Sexual Offense Services	
Budget Category	Award
Personnel	
1 FTE Planning Specialist	\$71,324.00
Payroll tax & fringe	\$95,570.00
Three (3) Program Assistant	\$187,044.00
Total	\$353,938.00
Program Expenses	
Emerg Asst COVID	\$68,309.00
Feedback Incentives	\$7,500.00
Staff cell phones and computers	\$14,860.00
Total	\$90,669.00
Indirect Costs	
Adm Costs	\$35,393.00
Total	\$35,393.00
Other Expenses	
Community Events	\$6,000.00
Total	\$6,000.00
Contract Services	
Policy and Protocol incentives to culturally specific service providers	\$24,000.00
Total	\$24,000.00
Total	\$510,000.00