

**STATE OF SOUTH CAROLINA
DEPARTMENT OF PUBLIC SAFETY
Office of Highway Safety and Justice Programs
PAUL COVERDELL FORENSIC SCIENCE IMPROVEMENT GRANT**

Grant #

App #

To Be Completed by Project Director

Section 1

County Name: ▼

Other county/counties this project will serve:

Section 2

Grant Period:

Begin:

End:

Section 3

Project Title:

Section 4

Project Summary (max. 300 characters):

Section 5

Type of Application

a. ▼

b. Year of Funds : ▼

Other:(Specify)

c. ▼

Section 6

a. Organization Type : ▼

Other:(Specify)

b. U. S. Congressional District

Section 7

Agency DUNS number*:
(fedgov.dnb.com/webform)

Has your agency registered with System for Award Management (SAM) (formerly CCR - Central Contractor Registration)?* **Yes**
(www.sam.gov)

* This data is not required to submit this application but will become necessary for federal reporting requirements if this project is awarded.

FEIN:

City

State

(Please use the Name/Address
above instead of this field)
Name and Address of Implementing
Agency

Agency Name

Address

10 Digit Zip

(Area) Phone #:

(Area) Fax #:

COMPLETE PAGES 2&3 BEFORE COMPLETING THIS SECTION

Section 8

BUDGET

Use whole dollars only (For example: \$1,500 not \$1,500.00)

a. BUDGET CATEGORIES	GRANTOR	AGENCY MATCH	TOTAL
Personnel	<input type="text" value="\$0"/>	<input type="text" value="\$0"/>	<input type="text" value="\$0"/>
Contractual Services	<input type="text" value="\$0"/>	<input type="text" value="\$0"/>	<input type="text" value="\$0"/>
Travel	<input type="text" value="\$0"/>	<input type="text" value="\$0"/>	<input type="text" value="\$0"/>
Equipment	<input type="text" value="\$28,742"/>	<input type="text" value="\$0"/>	<input type="text" value="\$28,742"/>
Other	<input type="text" value="\$1,925"/>	<input type="text" value="\$0"/>	<input type="text" value="\$1,925"/>
TOTAL:	<input type="text" value="\$30,667"/>	<input type="text" value="\$0"/>	<input type="text" value="\$30,667"/>
b. PERCENTAGE:	100%	0%	100%

Section 9

APPROPRIATION OF NON-GRANTOR
MATCHING FUNDS

Other (Explain):

MATCHING FUNDS
CATEGORIES

GRANTOR CASH TOTAL

PERSONNEL

SALARIES	% of Time On Project	Quantity			
Position Title					
<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
TOTAL SALARIES:			\$0	\$0	\$0

EMPLOYER CONTRIBUTIONS (Fringe Benefits)

	% or Rate	X Base			
Social Security & Medicare (FICA)	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Retirement	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Worker's Compensation Insurance	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Unemployment Insurance (on first \$7,000 only)	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Health Insurance	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Dental Insurance	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Pre-Retirement Death Benefit	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Accident Death Benefit (Police Officers)	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
Other Employer Contributions (Itemize)	<input type="text"/>	<input type="text"/>	\$0	\$0	\$0
TOTAL EMPLOYER CONTRIBUTIONS:			\$0	\$0	\$0
TOTAL PERSONNEL:			\$0	\$0	\$0

CONTRACTUAL SERVICES:

(Itemize - DO NOT include professional fees for doctors, psychologists, etc.)

<input type="text"/>	\$0	\$0	\$0
TOTAL CONTRACTUAL SERVICES	\$0	\$0	\$0

TRAVEL:

(Itemize-include mileage, airline cost, lodging, per diem, parking, car rental)

<input type="text"/>	\$0	\$0	\$0
TOTAL TRAVEL:	\$0	\$0	\$0

Show Section 2-A Disabled

MATCHING FUNDS

CATEGORIES

GRANTOR CASH TOTAL

EQUIPMENT (\$1,000 or more per Unit):

(Itemize - DO NOT USE BRAND NAME. - Also, DO NOT include leased, rented items or software)

ITEM

QUANTITY

FTIR Spectrophotometer	1	\$28,742	\$0	\$28,742
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TOTAL EQUIPMENT:		\$28,742	\$0	\$28,742
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Other:

South Carolina tax @ 6%		\$1,725	\$0	\$1,725
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Shipping		\$200	\$0	\$200
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TOTAL OTHER:		\$0	\$0	\$0
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BUDGET NARRATIVE

List items under each Budget Category heading. Explain exactly how each item in your budget (both grantor and match) will be utilized. It is important that the necessity of these items, as they relate to the operation of the project, be established. Dollar amounts DO NOT have to be provided

Equipment:

FTIR Spectrophotometer - used to examine and identify controlled substances - \$28,742

Other:

Tax - South Carolina sales tax required on all purchases - \$1,725

Shipping - Fee to have instrument shipped from the manufacturer - \$200