

STATE OF NORTH CAROLINA OFFICE OF STATE BUDGET AND MANAGEMENT

BEVERLY EAVES PERDUE GOVERNOR

ANDY WILLIS
STATE BUDGET DIRECTOR

August 12, 2011

MEMORANDUM

TO: Senator Phil Berger, President Pro-Tempore of the Senate

Representative Thom Tillis, Speaker of the House of Representatives

FROM:

Andy Willis

State Budget Director

SUBJECT: Consultation on Expenditure of Grant Awards

Pursuant to Section 5.4 of Session Law 2010-31 (Senate Bill 897), the Office of State Budget and Management is to report to the Joint Legislative Commission on Governmental Operations prior to expending funds received from grant awards. Funding is anticipated to be received and expended for grants included in the attached Notifications of Application for Grant Funds/Awards.

If you have any questions or concerns, please contact me by telephone 919-807-4717 or email to andy.willis@osbm.nc.gov.

Thank you.

AW\k1

9 Grant application deadline (MM/DD/YY) 10 Start date of grant (MM/DD/YY) 11 End date of grant (MM/DD/YY) 12 Application type 13 Is this grant already in agency's continuation budget? 14 Budget code the grant will be expended in (XXXXX) 15 Fund code (XXXXX or NA) 16 Is there a state matching requirement? 17 If yes, what is the matching requirement? Return completed form as email attachment and indicate in message that proper agency sign-offs have been obtained. Contact your OSBM budget analyst if you have questions 28 Amount of grants funds <u>applied for</u> in each year. 29 Amount of grants funds <u>awarded</u> in each year.... 30 Purpose of grant or amendment..... 25 26 24 23 22 Will any of these funds be passed through to local govern-21 Is an additional General Fund appropriation required to meet 19 Is there a maintenance of effort (MOE) requirement? 20 If yes, what is the MOE? <u>__</u> 27 31 Comments 7 CFDA number. 8 Grant title 3 Contact person (name) 2 Division (except in DHHS) Department Are new FTEs funded through the grant? Will additional state monies be required to continue the the state match requirement? program if grant expires or is reduced? ments or non-state entities? If yes, identify affected entities by type If yes, is this a requirement of the grant? If yes, give the number by type for each year: Phone number .. DHHS only, choose division from drop down list. If yes, what is the source of state funds being used OSSIN to match grant funds. Notification of Application for Grant Funds/Awards, 2011-12 Permanent Office of State Budget and Management, 116 West Jones Street, Raleigh, NC 27603-8005, 919-807-4700 Instructions at http://www.osbm.state.nc.us/files/grants_instr.pdf Time-Limited 8 Ö \$1,847,00 Tomato Commodity - Tuta absoluta Survey Cooperative stephen.schmidt@ncagr.gov This is the preaward. Amt requested \$27,932. Agreement # (11-8237-0810-CA). Copies to Donna Cox, Catherine Stogner, Teri Overton 8/11/11 ADM Plant Industry (12-009-PI) To survey for an exotic pest of tomatoes in the major production areas of NC 09/15/12 Stephen P. Schmidt JSDA, APHIS, PPQ 9/16/11 SFY 2010-11 Actual iculture and Consumer Services SFY 2011-12 Authorized Complete either Authorized or Proposed For 2011-12 SFY 2011-12 Proposed \$27,932.00 SFY 2012-13 Proposed SFY 2013-14 Proposed SFY 2014-15 Proposed

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Office of State B	Office of State Budget and Management, 116 West Jones Street, Raleigh, NC 27603-8005, 919-807-4700.	Vest Jones Street, Raleigh, N	05/Awards, 20 027603-8005, 919-807-4700	1 1 2		
	Instructions at http://www.osom.state.nc.us/files/pdf_files/grants_instripdf Department of Agriculture and Consumer Services	Consumer Services	ants_instr.pdf		efet feft frá manamisma mégafskálódamanamannyg telendega módnázá d egert is a as	
Division (except in DHHS)	Plant Industry (12-008PI)					
3 Contact person (name)	Stanhan P. Schmidt					
	919-733-6930					
E-mail Funding Entity (grantor)	stephen.schmidt@ncagr.gov	r.gov				
	OBON, MERINA					
8 Grant title	Asain Defoliator Survey					
9 Grant application deadline (MM/DD/YY)	08/15/11					
S	09/16/11					
11 End date of grant (MM/DD/YY)	09/15/12					
13 is this grant already in agency's continuation budget?	New					
Budget code the grant will be expended in (XXXXX)						
15 Fund code (XXXX or NA)	TBD					
17 If yes, what is the matching requirement?	\$1,539.00					
18 If yes, what is the source of state funds being used to match grant funds.		THE REPORT OF THE PROPERTY OF				
19 Is there a maintenance of effort (MOE) requirement? 20 If yes, what is the MOE?	No					
propriation required to meet	No					
22 Will any of these funds be passed through to local govern-	No					
ments or non-state entities?						
23 If yes, identify affected entities by type						
0 5	20					
25 If yes, is this a requirement of the grant?						
20 Are new miles lunded inrough the grants	No	E 27 20	3)			
		Complete either Authorized or Proposed	orized or Proposed			
	SFY 2010-11	SFY 2011-12	1/3	SFY 2012-13	SFY 2013-14	SFY 2014-15
27 If yes, give the number by type for each year. Permanent	Actual	Autnonzed	Proposed	Proposed	Proposed	Proposed
	3 <i>d</i>				######################################	- Province in the manual stay to be provided as a second contract of the second contract of
28 Amount of grants funds applied for in each year			\$23,912.00			
29 Amount of grants funds awarded in each year					Annual memberana ana ana ang ang alah dah dah ana ana ang kalah dah pipilida / digan dah ana asa at at at ana da	reovel manamentenan nejes opprinsistische minte selectricks is delinatummentena
30 Purpose of grant or amendment	To survey for Asian defoliator moths at ports of entry in North Carolina	moths at ports of entry in No	rth Carolina.	на шту и дей пите на пите на под переда на пите де переда на пите де переда на пите де переда на пите		erő élemetett közössésés éstetétéségé ververe da kilánassádos jegégégésen kilánass
31 Comments	This is the preaward. Amt applied for \$23,912. Cooperative Agreement #(11-8237-0812-CA). Copies to Donna Cox. Catherine Stooner. Test Overton 8(11771 ADM)	plied for \$23,912, Cooperativ	e Agreement #(11-8237-0812	-CA). Copies to Donna Cox.	Catherine Stooner Ten Over	ton 8/11/11 ACM
	and the second s				Control and Charles See 1	MON OUT STILL NOW
Dotters commission from an example who shows and and instruction.				MANAGEM PARAMETER PROTECTION OF CONTROL CONTRO		
		2 2 TABLE 2 2 TABLE 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	** C. L			The state of the s

Notification	of Application	for Grant Fur	nds/Awards, 20	011-12		
OSBM Office of State B		West Jones Street, Raleigh, bm.state.nc.us/files/pdf_files/	NC 27603-8005, 919-807-470 grants_instr.pdf	00.		
1 Department	Department of Environment	and Natural Resources	,			
2 Division (except in DHHS)	Div of Water Quality					
DHHS only, choose division from drop down list	, , , , , , , , , , , , , , , , , , , ,					
3 Contact person (name)	Larry Sutton					
4 Phone number	Larry Sutton					
	807-6320					
5 E-mail	larry.sutton@ncdenr.g	<u>IOV</u>				
6 Funding Entity (grantor)	EPA					
7 CFDA number	66.454					
8 Grant title	250(J)604(B) - Water Quali	ity Management Planning				
U State title		.,				
9 Grant application deadline (MM/DD/YY)	08/05/11					
10 Start date of grant (MM/DD/YY)	10/01/11					
11 End date of grant (MM/DD/YY)	09/30/13					
12 Application type	Continuation/renewal					
13 Is this grant already in agency's continuation budget?	Yes					
	14300					
14 Budget code the grant will be expended in (XXXXX)	1710					
15 Fund code (XXXX or NA)						
16 Is there a state matching requirement?	No					
17 If yes, what is the matching requirement?						
18 If yes, what is the source of state funds being used						
18 If yes, what is the source of state funds being used to match grant funds.						
19 Is there a maintenance of effort (MOE) requirement?	No					
20 If yes, what is the MOE?						
21 Is an additional General Fund appropriation required to meet	No					
the state match requirement?						
22 Will any of these funds be passed through to local govern-	Yes					
ments or non-state entities?						
23 If yes, identify affected entities by type	local govt AND private non-	profit				
24 Will additional state monies be required to continue the	Yes					
program if grant expires or is reduced?						
25 If yes, is this a requirement of the grant?	No					
26 Are new FTEs funded through the grant?	No					
20 7 to now 1 125 tanded allough the grant	117	For 2	011-12			
			thorized or Proposed			
	SFY 2010-11	SFY 2011-12	SFY 2011-12	SFY 2012-13	SFY 2013-14	SFY 2014-15
	Actual	Authorized	Proposed	Proposed	Proposed	Proposed
27 If yes, give the number by type for each year: Permanent						
Time-Limi	ted					
28 Amount of grants funds applied for in each year			\$269,000.00			
29 Amount of grants funds <u>awarded</u> in each year						
30 Purpose of grant or amendment	This grant supports the NC Water Quality Management Planning activities.					
30 Fulpose of grant of amendment	This grant supports the 140	Water Quality Management 1	lanning activities.			
31 Comments	This grant wil be in fund coo	de 1710, and will not have any	/ new positions.			
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teturn completed form as email attachment and indicate in message that pro-	oper agency sign-offs have be	en obtained Contact your OS	SBM budget analyst if you have	e guestions		