

Juvenile Justice Crime Prevention Act - Youthful Offender Block Grant 2019 Expenditure and Data Report Due Date: October 1, 2019

On or before October 1, 2019, each county is required to submit to the Board of State & Community Corrections (BSCC) a report on its Juvenile Justice Crime Prevention Act (JJCPA) and Youthful Offender Block Grant (YOBG) programs during the preceding year. For JJCPA this requirement can be found at Government Code (GC) Section 30061(b)(4)(C) and for YOBG it can be found at Welfare & Institutions Code Section (WIC) 1961(c). These code sections both call for a consolidated report format that includes a description of the programs and other activities supported by JJCPA and/or YOBG funds, an accounting of all JJCPA and YOBG expenditures during the prior fiscal year, and countywide juvenile justice trend data.

Prior to submitting this report save the file using the following naming convention: "(County Name) 2019 JJCPA-YOBG Report." For example, Yuba County would name its file "Yuba 2019 JJCPA-YOBG Report".

Once the report is complete, attach the file to an email and send it to: **JJCPA-YOBG@bscc.ca.gov**. All reports will be posted to the BSCC website. We encourage you to review your report for accuracy before sending it to the BSCC. Please do **NOT** change the report form to a PDF document.

| A. CONTACT INFORMATION                  |               |                         |  |
|---|---------------|-------------------------|--|
| COUNTY NAME                             |               | DATE OF REPORT          |  |
| Del Norte                               |               | 9/19/2019               |  |
| B. PRIMARY CONTACT                      |               |                         |  |
| NAME                                    |               | TITLE                   |  |
| Lonnie Reyman                           |               | Chief Probation Officer |  |
| TELEPHONE NUMBER                        | EMAIL ADDRESS |                         |  |
| (707) 464-7215 Ireyman@co.del-norte.ca  |               | <u>.us</u>              |  |
| C. SECONDARY CONTACT (                  | OPTIONAL)     |                         |  |
| NAME                                    |               | TITLE                   |  |
| Katrina Jackson                         |               | Assistant Chief         |  |
| TELEPHONE NUMBER                        | EMAIL ADDRESS |                         |  |
| (707)0464-7215 Ireyman@co.del-norte.ca  |               | <u>.us</u>              |  |
| COMPLETING THE REMAINDER OF THE REPORT: |               |                         |  |

The report consists of several worksheets. Each worksheet is accessed by clicking on the labeled tabs below. (You are currently in the worksheet titled "**CONTACT INFORMATION**".) Complete the report by providing the information requested in each worksheet.

On the worksheet "**REPORT 1**," you will pull data directly from your Juvenile Court & Probation Statistical System (JCPSS) Report 1 that you received from the California Department of Justice (DOJ) for 2018. Similarly, for the worksheet labeled "**REPORT 3**," you will pull information directly from your 2018 JCPSS Report 3. On the worksheet "**ARREST DATA**," you will obtain data from the DOJ's Open Justice public website.

On the worksheet "**TREND ANALYSIS**," you will describe how the programs and activities funded by JJCPA-YOBG have, or may have, contributed to the trends seen in the data included in REPORT 1, REPORT 3, and ARREST DATA.

On the "**EXPENTITURE DETAILS**" worksheet, you are required to provide a detailed accounting of actual expenditures for each program, placement, service, strategy, or system enhancement that was funded by JJCPA and/or YOBG during the preceding fiscal year. This worksheet is also where you are asked to provide a description of each item funded.

In the blank boxes below, enter the data from your Report 3 received from DOJ as titled below: Juvenile Court Dispositions Resulting From Petitions for Delinquent Acts, January 1 - December 31, 2018 Age by Petition Type, Sex, Race/Ethnic Group, Defense Representation, Court Disposition and Wardship Placement Report 3

Petition Type

| New        | 34  |
|------------|-----|
| Subsequent | 188 |
| TOTAL      | 222 |

#### **Court Disposition**

| Informal Probation          | -   |
|-----------------------------|-----|
| Non-Ward Probation          | 5   |
| Wardship Probation          | 197 |
| Diversion                   | -   |
| Deferred Entry of Judgement | -   |

#### Wardship Placements

| Own/Relative's Home         | 27    |
|-----------------------------|-------|
| Non-Secure County Facility  | 2     |
| Secure County Facility      | 167   |
| Other Public Facility       | 1     |
| Other Private Facility      | -     |
| Other                       | -     |
| California Youth Authority* | -     |
| TOTAL                       | . 197 |

### **Subsequent Actions**

| Technical Violations | 188 |
|----------------------|-----|
|----------------------|-----|

### Sex (OPTIONAL)

| Male   |       |   |
|--------|-------|---|
| Female |       |   |
|        | TOTAL | - |

### Race/Ethnic Group (OPTIONAL)

| Hispanic         |   |
|------------------|---|
| White            |   |
| Black            |   |
| Asian            |   |
| Pacific Islander |   |
| Indian           |   |
| Unknown          |   |
| TOTAL            | - |

Please use this space to explain any exceptions and/or anomalies in the data reported above:

\* The JCPSS reports show "California Youth Authority," however it is now called the "Division of Juvenile Justice."

### COUNTYWIDE JUVENILE JUSTICE DATA for:

**Del Norte** 

In the blank boxes below, enter the data from your Report 1 received from DOJ as titled below: Referrals of Juveniles to Probation Departments for Delinquent Acts, January 1 - December 31, 2018 Age by Referral Type, Gender, Race/Ethnic Group, Referral Source, Detention, Prosecutor Action, and Probation Department Disposition Report 1

**Probation Department Disposition** 

| Informal Probation | 6  |
|--------------------|----|
| Diversions         | 3  |
| Petitions Filed    | 38 |

### Gender (OPTIONAL)

| Male   |       |   |
|--------|-------|---|
| Female |       |   |
|        | TOTAL | - |

#### Race/Ethnic Group (OPTIONAL)

| Hispanic         |       |
|------------------|-------|
| White            |       |
| Black            |       |
| Asian            |       |
| Pacific Islander |       |
| Indian           |       |
| Unknown          |       |
| TO               | TAL - |

Please use this space to explain any exceptions and/or anomalies in the data reported above:

| COUNTYWIDE   | JUVENILE JUSTICE DATA for:             | Del Norte      |  |  |  |
|--|--|----------------|--|--|--|
|  |  |                |  |  |  |
| In the blank boxes below, enter your juvenile arrest data from last year (2018). |  |                |  |  |  |
|  | Arrest data by county can be found at: |                |  |  |  |
| htt  | ps://openjustice.doj.ca.gov/crime-stat | istics/arrests |  |  |  |
| <u></u>  | ps://openjustice.doj.ca.gov/chine-stat |                |  |  |  |
|  |  |                |  |  |  |
|  |  |                |  |  |  |
| Arrests  |  |                |  |  |  |
|  | Felony Arrests                         | 8              |  |  |  |
|  | Misdemeanor Arrests                    | 43             |  |  |  |
|  | Status Arrests                         | -              |  |  |  |
|  | TOTAL                                  | 51             |  |  |  |
|  |  |                |  |  |  |
|  |  |                |  |  |  |
| Gender   | (OPTIONAL)                             |                |  |  |  |
|  | Male                                   |                |  |  |  |
|  | Female                                 |                |  |  |  |
|  | TOTAL                                  | -              |  |  |  |
|  |  |                |  |  |  |
|  |  |                |  |  |  |
| Race/Eth   | n <u>nic Group (OPTIONAL)</u>          |                |  |  |  |
|  | Black                                  |                |  |  |  |
|  | White                                  |                |  |  |  |
|  | Hispanic                               |                |  |  |  |
|  | Other                                  |                |  |  |  |
|  | TOTAL                                  | -              |  |  |  |
|  |  |                |  |  |  |
|  |  |                |  |  |  |
|  |  |                |  |  |  |
|  |  |                |  |  |  |

Please use this space to explain any exceptions and/or anomalies in the data reported above:

# Government Code Section 30061(b)(4)(C)(iv) & WIC Section 1961(c)(3)

Provide a summary description or analysis, based on available information, of how the programs, placements, services, strategies or system enhancements funded by JJCPA-YOBG have, or may have, contributed to, or influenced, the juvenile justice data trends identified in this report.

In looking at the crime statistics report provided by the Department of Justice crimes committed by our youthful offenders has decreased. It is the belief of our department that providing youthful offenders with Cognitive Behavior Therapy, Mental Health Counseling and Alcohol and other Drugs Counseling has and continues to provide our youth with much needed tools to be successful on probation and in life. In addition, the department believes the youth are gaining self-esteem and job readiness skills by participating in Pro Social Skills Training and Vocational Skills Training programs offered to them.

**Del Norte** 

Use the template(s) below to report the programs, placements, services, strategies, and/or system enhancements you funded in the preceding fiscal year. Use a separate template for each program, placement, service, strategy, or system enhancement that was supported with JJCPA and/or YOBG funds. If you need more templates than provided, click on the "Add'I EXPENDITURE DETAIL Forms" tab.

Start by indicating the name of the first program, placement, service, strategy, or system enhancement that was funded with JJCPA and/or YOBG funds last year. Next indicate the expenditure category using the drop down list provided in the Expenditure Category portion on each of the templates.

|             | Code | Expenditure Category                    | Code | Expenditure Category                   |
|-------------|------|---|------|--|
| Placements  | 1    | Juvenile Hall                           | 5    | Private Residential Care               |
|             | 2    | Ranch                                   | 6    | Home on Probation                      |
|             | 3    | Camp                                    | 7    | Other Placement                        |
|             | 4    | Other Secure/Semi-Secure Rehab Facility |      |  |
|             | Code | Expenditure Category                    | Code | Expenditure Category                   |
| Direct      | 8    | Alcohol and Drug Treatment              | 26   | Life/Independent Living Skills         |
| Services    | 9    | After School Services                   |      | Training/Education                     |
|             | 10   | Aggression Replacement Therapy          | 27   | Individual Mental Health Counseling    |
|             | 11   | Anger Management Counseling/Treatment   | 28   | Mental Health Screening                |
|             | 12   | Development of Case Plan                | 29   | Mentoring                              |
|             | 13   | Community Service                       | 30   | Monetary Incentives                    |
|             | 14   | Day or Evening Treatment Program        | 31   | Parenting Education                    |
|             | 15   | Detention Assessment(s)                 | 32   | Pro-Social Skills Training             |
|             | 16   | Electronic Monitoring                   | 33   | Recreational Activities                |
|             | 17   | Family Counseling                       | 34   | Re-Entry or Aftercare Services         |
|             | 18   | Functional Family Therapy               | 35   | Restitution                            |
|             | 19   | Gang Intervention                       | 36   | Restorative Justice                    |
|             | 20   | Gender Specific Programming for Girls   | 37   | Risk and/or Needs Assessment           |
|             | 21   | Gender Specific Programming for Boys    | 38   | Special Education Services             |
|             | 22   | Group Counseling                        | 39   | Substance Abuse Screening              |
|             | 23   | Intensive Probation Supervision         | 40   | Transitional Living Services/Placement |
|             | 24   | Job Placement                           | 41   | Tutoring                               |
|             | 25   | Job Readiness Training                  | 42   | Vocational Training                    |
|             |      |   | 43   | Other Direct Service                   |
|             | Code | Expenditure Category                    | Code | Expenditure Category                   |
| Capacity    | 44   | Staff Training/Professional Development | 48   | Contract Services                      |
| Building/   | 45   | Staff Salaries/Benefits                 | 49   | Other Procurements                     |
| laintenance | 46   | Capital Improvements                    | 50   | Other                                  |
| Activities  | 47   | Equipment                               |      |  |

#### List of Expenditure Categories and Associated Numerical Codes

For each program, placement, service, strategy, or system enhancement, record actual expenditure details for the preceding fiscal year. Expenditures will be categorized as coming from one or more of three funding sources - JJCPA funds, YOBG funds, and other funding sources (local, federal, other state, private, etc.). Be sure to report all JJCPA and YOBG expenditures for the preceding fiscal year irrespective of the fiscal year during which the funds were allocated. Definitions of the budget line items are provided on the next page.

**Del Norte** 

**Salaries and Benefits** includes all expenditures related to paying the salaries and benefits of county probation (or other county department) employees who were directly involved in grant-related activities.

**Services and Supplies** includes expenditures for services and supplies necessary for the operation of the project (e.g., lease payments for vehicles and/or office space, office supplies) and/or services provided to participants and/or family members as part of the project's design (e.g., basic necessities such as food, clothing, transportation, and shelter/housing; and related costs).

**Professional Services** includes all services provided by individuals and agencies with whom the County contracts. The county is responsible for reimbursing every contracted individual/agency.

**Community-Based Organizations (CBO)** includes all expenditures for services received from CBO's. **NOTE**: If you use JJCPA and/or YOBG funds to contract with a CBO, report that expenditure on this line item rather than on the Professional Services line item.

**Fixed Assets/Equipment** includes items such as vehicles and equipment needed to implement and/or operate the program, placement, service, etc. (e.g., computer and other office equipment including furniture).

Administrative Overhead includes all costs associated with administration of the program, placement, service, strategy, and/or system enhancement being supported by JJCPA and/or YOBG funds.

Use the space below the budget detail to provide a narrative description for each program, placement, service, strategy, and/or system enhancement that was funded last year. *To do so, double click on the response box provided for this purpose.* 

Repeat this process as many times as needed to fully account for all programs, placements, services, strategies, and systems enhancements that were funded with JJCPA and/or YOBG during the last fiscal year. Keep in mind that this full report will be posted on the BSCC website in accordance with state law.

And, as previously stated, we strongly suggest you use Spell Check before returning to the BSCC.

ACCOUNTING OF JJCPA-YOBG EXPENDITURES for: Del Norte

| n rogram, radement, der ride, dirate           | gy, or System Enh       | ancement               |                               |
|--|-------------------------|------------------------|-------------------------------|
| Name of program, placement, service,           |                         |                        |                               |
| strategy or system enhancement (Required):     |                         |                        |                               |
| Expenditure Category (Required):               | Substance Abuse So      | creening               |                               |
|  | JJCPA Funds             | YOBG Funds             | All Other Funds<br>(Optional) |
| Salaries & Benefits:                           |                         | \$21,553               |                               |
| Services & Supplies:                           |                         | \$14,065               |                               |
| Professional Services:                         |                         |                        |                               |
| Community Based Organizations:                 |                         |                        |                               |
| Fixed Assets/Equipment:                        |                         |                        |                               |
| Administrative Overhead:                       |                         |                        |                               |
| Other Expenditures (List Below):               |                         |                        |                               |
|  |                         |                        |                               |
|  |                         |                        |                               |
|  | . ¢                     | ¢ 05.040               | ¢                             |
| TOTAL  |                         | \$ 35,618              |                               |
| Provide a description of the program, placeme  | •••                     | •                      |                               |
| with JJCPA and/or YOBG funds in the preced     | • •                     |                        |                               |
| information on the types of youth served, prev | ention services you pro | ovided, your accomplis | hments, any                   |
| barriers encountered, and what specifically JJ | CPA and/or YOBG fur     | nds paid for.          |                               |
|  |                         |                        |                               |
|  |                         |                        |                               |

| 2. Program, Placement, Service, Strategy, or System Enhancement  |                                   |                        |             |  |
|--|-----------------------------------|------------------------|-------------|--|
| Name of program, placement, service  |                                   |                        |             |  |
| arategy or system enhancement (Required): 3rd Millennium and Alcohol and Other Drug Services   |                                   |                        |             |  |
| Expenditure Category (Required):   | Alcohol and Drug Treatment        |                        |             |  |
|  | JJCPA Funds YOBG Funds (Optional) |                        |             |  |
| Salaries & Benefits:   |                                   |                        |             |  |
| Services & Supplies:   |                                   | \$ 1,243               |             |  |
| Professional Services:   | \$60.00                           | \$19,682               |             |  |
| Community Based Organizations:   |                                   |                        |             |  |
| Fixed Assets/Equipment:  |                                   |                        |             |  |
| Administrative Overhead:   |                                   |                        |             |  |
| Other Expenditures (List Below):   |                                   |                        |             |  |
|  |                                   |                        |             |  |
|  |                                   |                        |             |  |
|  |                                   |                        |             |  |
| TOTAL:   |                                   | \$ 20,925              | \$-         |  |
| Provide a description of the program, placemer   |                                   |                        |             |  |
| with JJCPA and/or YOBG funds in the precedir   | ng fiscal year. For exa           | mple, you might want t | o include   |  |
| information on the types of youth served, preve  | ntion services you pro            | vided, your accomplish | nments, any |  |
| barriers encountered, and what specifically JJC  | PA and/or YOBG fund               | ds paid for.           |             |  |
| 3rd Millennium is an early education program that addresses marijuana, alcohol, and prescription drug use. It<br>also offers education regarding shoplifting. In addition, 3rd Millennium offers "Parentwise" which is for parents<br>who have minors that are enrolled in the marijuana and alcohol education programs. 3rd Millennium will offer<br>early intervention to minors who are in the beginning stages of substance abuse and those who are first and<br>second time offenders regarding shoplifting. In addition, this would pay for Alcohol and Other Drug Services to<br>conduct assessments for youth detained in the Juvenile Hall and provide those assessments to the Probation<br>Department and/or Court. The funding will pay for Alcohol and Other Drug Services to provide weekly groups to<br>youth who are detained in the Juvenile Hall as well as tuition costs for youth that are court ordered to complete<br>3rd Millennium. The funds will also be utilized to purchase uniforms and equipment necessary to appropriately<br>supervise the youth while they are participating in these programs. |                                   |                        |             |  |
|  |                                   |                        |             |  |

| other than themselves. The funding will cover the costs of supplies for the garden and cul<br>addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.<br>The funding will be used to purchase Food Handler's course as well as staff salaries, unifo   | All Other Funds<br>(Optional)   |  |  |  |
|--|---|--|--|--|
| strategy of system ennancement (Required):       Pro-Social Skills Training         JJCPA Funds       YOBG Funds         Salaries & Benefits:       \$5,314.00         Services & Supplies:       \$2,698.00         Professional Services:       \$2,698.00         Community Based Organizations:       \$2,698.00         Fixed Assets/Equipment:       \$2,698.00         Administrative Overhead:       \$2,698.00         Other Expenditures (List Below):       \$2,698.00         TOTAL:       \$         Services a description of the program, placement, service, strategy or system enhancemer         with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan         information on the types of youth served, prevention services you provided, your accompli         barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.         The garden program will include upkeep of a greenhouse and teach the youth to be respo         other than themselves. The funding will cover the costs of supplies for the garden and cul         addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.         The funding will be used to purchase Food Handler's course as well as staff salaries, uniference of the service of the partiers and the purchase food Handler's course as well as staff salaries, uniference of the service of the partiers and the purchase food Handler's course as well as staff salaries, uniference of the service   | All Other Funds<br>(Optional)   |  |  |  |
| JJCPA Funds       YOBG Funds         Salaries & Benefits:       \$5,314.00         Services & Supplies:       \$2,698.00         Professional Services:       \$2,698.00         Community Based Organizations:       \$2,698.00         Fixed Assets/Equipment:       \$2,698.00         Administrative Overhead:       \$2,698.00         Other Expenditures (List Below):       \$2,698.00         TOTAL:       \$         Provide a description of the program, placement, service, strategy or system enhancemer         with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan         information on the types of youth served, prevention services you provided, your accompli         barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.         The garden program will include upkeep of a greenhouse and teach the youth to be respo         other than themselves. The funding will cover the costs of supplies for the garden and cul         addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.         The funding will be used to purchase Food Handler's course as well as staff salaries, uniference of the second teach the youth to be respond the funding will be used to purchase Food Handler's course as well as staff salaries, uniference of the second teach the youth to be respond to the funding will be used to purchase Food Handler's course as well as staff salaries, uniference of the secourse as well as staff salaries, uniference of teacher t   | (Optional) O O O O O O O O O O O O O O O O O O O  |  |  |  |
| Salaries & Benefits:       \$5,314.00         Services & Supplies:       \$2,698.00         Professional Services:       \$2,698.00         Community Based Organizations:       \$2,698.00         Fixed Assets/Equipment:       \$4,012         Administrative Overhead:       \$6,012         Other Expenditures (List Below):       \$6,012         Provide a description of the program, placement, service, strategy or system enhancemer         with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan         information on the types of youth served, prevention services you provided, your accompli         barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.         The garden program will include upkeep of a greenhouse and teach the youth to be respo         other than themselves. The funding will cover the costs of supplies for the garden and cul         addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.         The funding will be used to purchase Food Handler's course as well as staff salaries, uniference of the staff s  | (Optional) O O O O O O O O O O O O O O O O O O O  |  |  |  |
| Services & Supplies:       \$2,698.00         Professional Services:   |   |  |  |  |
| Professional Services:       Community Based Organizations:         Fixed Assets/Equipment:       Administrative Overhead:         Other Expenditures (List Below):       Community Based Organizations:         Other Expenditures (List Below):       Environment         Provide a description of the program, placement, service, strategy or system enhancemer with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan information on the types of youth served, prevention services you provided, your accomplibrariers encountered, and what specifically JJCPA and/or YOBG funds paid for.         The garden program will include upkeep of a greenhouse and teach the youth to be respondent than themselves. The funding will cover the costs of supplies for the garden and cultaddition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.         The funding will be used to purchase Food Handler's course as well as staff salaries, uniferent service as well as staff salaries, uniferent service as well as staff salaries.  |   |  |  |  |
| Community Based Organizations:<br>Fixed Assets/Equipment:<br>Administrative Overhead:<br>Other Expenditures (List Below):<br>TOTAL: \$ - \$ 8,012<br>Provide a description of the program, placement, service, strategy or system enhancemer<br>with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan<br>nformation on the types of youth served, prevention services you provided, your accompli<br>parriers encountered, and what specifically JJCPA and/or YOBG funds paid for.<br>The garden program will include upkeep of a greenhouse and teach the youth to be respond<br>the than themselves. The funding will cover the costs of supplies for the garden and cul-<br>addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.<br>The funding will be used to purchase Food Handler's course as well as staff salaries, uniformation of the purchase Food Handler's course as well as staff salaries, uniformation of the used to purchase Food Handler's course as well as staff salaries, uniformation of the used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation and the provide of the p | 2 \$  |  |  |  |
| Fixed Assets/Equipment:         Administrative Overhead:         Other Expenditures (List Below):         TOTAL:         \$         8,012         Provide a description of the program, placement, service, strategy or system enhancemer         with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan         nformation on the types of youth served, prevention services you provided, your accompli         parriers encountered, and what specifically JJCPA and/or YOBG funds paid for.         The garden program will include upkeep of a greenhouse and teach the youth to be respondent than themselves. The funding will cover the costs of supplies for the garden and cultaddition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.         The funding will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well a   | 2 \$  |  |  |  |
| Administrative Överhead:<br>Other Expenditures (List Below):<br>TOTAL: \$ - \$ 8,012<br>Provide a description of the program, placement, service, strategy or system enhancemer<br>with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan<br>nformation on the types of youth served, prevention services you provided, your accompli-<br>parriers encountered, and what specifically JJCPA and/or YOBG funds paid for.<br>The garden program will include upkeep of a greenhouse and teach the youth to be respo-<br>other than themselves. The funding will cover the costs of supplies for the garden and cul-<br>addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.<br>The funding will be used to purchase Food Handler's course as well as staff salaries, unifor-   | 2 \$  |  |  |  |
| Total:       -       \$       8,012         Provide a description of the program, placement, service, strategy or system enhancemer with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan nformation on the types of youth served, prevention services you provided, your accomplication program will include upkeep of a greenhouse and teach the youth to be respondent than themselves. The funding will cover the costs of supplies for the garden and cultaddition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.         The funding will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries.  | 2 \$  |  |  |  |
| TOTAL:       -       \$ 8,012         Provide a description of the program, placement, service, strategy or system enhancemer with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan nformation on the types of youth served, prevention services you provided, your accomplibrarriers encountered, and what specifically JJCPA and/or YOBG funds paid for.         The garden program will include upkeep of a greenhouse and teach the youth to be responded to the server the costs of supplies for the garden and cultaddition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.         The funding will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries, uniformation will be used to purchase Food Handler's course as well as staff salaries.   | 2 <b>\$</b>   |  |  |  |
| Provide a description of the program, placement, service, strategy or system enhancemer<br>with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan<br>nformation on the types of youth served, prevention services you provided, your accompli-<br>parriers encountered, and what specifically JJCPA and/or YOBG funds paid for.<br>The garden program will include upkeep of a greenhouse and teach the youth to be respo-<br>other than themselves. The funding will cover the costs of supplies for the garden and cul-<br>addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.<br>The funding will be used to purchase Food Handler's course as well as staff salaries, unifor  | 2 \$  |  |  |  |
| Provide a description of the program, placement, service, strategy or system enhancemer<br>with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan<br>information on the types of youth served, prevention services you provided, your accompli-<br>parriers encountered, and what specifically JJCPA and/or YOBG funds paid for.<br>The garden program will include upkeep of a greenhouse and teach the youth to be respo-<br>other than themselves. The funding will cover the costs of supplies for the garden and cul-<br>addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.<br>The funding will be used to purchase Food Handler's course as well as staff salaries, unifor   | 2 \$  |  |  |  |
| Provide a description of the program, placement, service, strategy or system enhancemer<br>with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan<br>information on the types of youth served, prevention services you provided, your accompli-<br>parriers encountered, and what specifically JJCPA and/or YOBG funds paid for.<br>The garden program will include upkeep of a greenhouse and teach the youth to be respo-<br>other than themselves. The funding will cover the costs of supplies for the garden and cul-<br>addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.<br>The funding will be used to purchase Food Handler's course as well as staff salaries, unifor   | 2 \$  |  |  |  |
| Provide a description of the program, placement, service, strategy or system enhancemer<br>with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might wan<br>information on the types of youth served, prevention services you provided, your accompli-<br>parriers encountered, and what specifically JJCPA and/or YOBG funds paid for.<br>The garden program will include upkeep of a greenhouse and teach the youth to be respo-<br>other than themselves. The funding will cover the costs of supplies for the garden and cul-<br>addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables.<br>The funding will be used to purchase Food Handler's course as well as staff salaries, unifor   | <u>د ک</u>  |  |  |  |
| will usable job and pro-social skills, enhancing youth's ability to compete in the work force  | The garden program will include upkeep of a greenhouse and teach the youth to be responsible for something other than themselves. The funding will cover the costs of supplies for the garden and culinary programs. In addition, the garden will supplement the Juvenile Hall with fresh fruit and vegetables. The funding will be used to purchase Food Handler's course as well as staff salaries, uniforms, and equipment to monitor the youth participating in these programs. Participants are taught how to prepare a menu, basic kitchen math, table setting, design recipes, and prepare and serve meals and desserts for special events. The program will usable job and pro-social skills, enhancing youth's ability to compete in the work force and learn how to positively interact with vocational teachers and employers. |  |  |  |

|   | OBG EXPENDITU                | RES fo         | or:            | Del Norte                     |
|---|------------------------------|----------------|----------------|-------------------------------|
| 4. Program, Placement, Service, Strate  | egy, or Sy <u>stem Enh</u> a | ancem <u>e</u> | nt             |                               |
| Name of program, placement, service,  | Paxton Patterson             |                |                |                               |
| strategy or system enhancement:   |                              | Faxio          | on Fallerson   |                               |
| Expenditure Category:   | Vocational Training          |                |                |                               |
|   | JJCPA Funds                  | YO             | BG Funds       | All Other Funds<br>(Optional) |
| Salaries & Benefits:  |                              | \$             | 49,387         |                               |
| Services & Supplies:  |                              | \$             | 11,429         |                               |
| Professional Services:  |                              |                |                |                               |
| Community Based Organizations:  |                              |                |                |                               |
| Fixed Assets/Equipment:   |                              |                |                |                               |
| Administrative Overhead:  |                              |                |                |                               |
| Other Expenditures (List Below):  |                              |                |                |                               |
|   |                              |                |                |                               |
|   |                              |                |                |                               |
|   |                              |                |                |                               |
| TOTAL<br>Provide a description of the program, placement  |                              | \$             | 60,816         | \$                            |
| program, a Juvenile Technician, supplies for t<br>used to maintain vehicle maintenance and fue<br>program will teach youth work skills so they ca | el necessary to transpo      | rt the you     | th to and from | the program. This             |
|   |                              |                |                |                               |
|   |                              |                |                |                               |
|   |                              |                |                |                               |
|   |                              |                |                |                               |
|   |                              |                |                |                               |
|   |                              |                |                |                               |
|   |                              |                |                |                               |

| 5. Program, Placement, Service, Strateg          | gy, or System Enna                  |              |                               |
|--|-------------------------------------|--------------|-------------------------------|
| Name of program, placement, service,             |                                     |              |                               |
| strategy or system enhancement:                  |                                     |              |                               |
| Expenditure Category:                            | Individual Mental Health Counseling |              |                               |
|  | JJCPA Funds                         | YOBG Funds   | All Other Funds<br>(Optional) |
| Salaries & Benefits:                             |                                     |              |                               |
| Services & Supplies:                             |                                     |              |                               |
| Professional Services:                           |                                     | \$ 3,887     |                               |
| Community Based Organizations:                   |                                     |              |                               |
| Fixed Assets/Equipment:                          |                                     |              |                               |
| Administrative Overhead:                         |                                     |              |                               |
| Other Expenditures (List Below):                 |                                     |              |                               |
|  |                                     |              |                               |
|  |                                     |              |                               |
|  |                                     |              |                               |
| TOTAL:   | \$-                                 | \$ 3,887     | \$-                           |
| identify mental health symptoms in the at risk y | routh they come into c              | ontact with. |                               |
|  |                                     |              |                               |

Del Norte

| 6. Program, Placement, Service, Strateg   | y, or Syste                    | em Enha | ancement   |                               |
|---|--------------------------------|---------|------------|-------------------------------|
| Name of program, placement, service, strategy or system enhancement:                            | MRT (Moral Reconation Therapy) |         |            |                               |
| Expenditure Category:   | Pro-Social Skills Training     |         |            |                               |
|   | JJCPA F                        | unds    | YOBG Funds | All Other Funds<br>(Optional) |
| Salaries & Benefits:  | \$                             | 6,572   |            |                               |
| Services & Supplies:  | \$                             | 4,135   |            |                               |
| Professional Services:  |                                |         |            |                               |
| Community Based Organizations:  |                                |         |            |                               |
| Fixed Assets/Equipment:   |                                |         |            |                               |
| Administrative Overhead:  |                                |         |            |                               |
| Other Expenditures (List Below):  |                                |         |            |                               |
|   |                                |         |            |                               |
|   |                                |         |            |                               |
|   |                                |         |            |                               |
| TOTAL:  | \$                             | 10,707  | \$-        | \$-                           |
| Provide a description of the program, placemer<br>with JJCPA and/or YOBG funds in the preceding |                                |         | -          |                               |

with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include information on the types of youth served, prevention services you provided, your accomplishments, any barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.

This program is a Cognitive Behavior Therapy group which combines education, group, and individual counseling. Through structured exercises the minor's will begin to develop morally. MRT gives our at risk youth tools on how to accept rules and why they are important. The funds will be used to purchase program supplies and incentives for youth who complete the program successfully. The funds will also be used to pay for facilitator salaries and vehicle maintenance and gasoline to transport the youth to and from the program.

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| 7. Program, Placement, Service, Strateg       | y, or S  | System Enha    | ancement          |                               |
|---|----------|----------------|-------------------|-------------------------------|
| Name of program, placement, service,          |          |                |                   |                               |
| strategy or system enhancement:               |          |                |                   |                               |
| Expenditure Category:                         | Electro  | nic Monitoring |                   |                               |
|   | JJC      | PA Funds       | YOBG Funds        | All Other Funds<br>(Optional) |
| Salaries & Benefits:                          |          |                |                   |                               |
| Services & Supplies:                          | \$       | 321            |                   |                               |
| Professional Services:                        |          |                |                   |                               |
| Community Based Organizations:                |          |                |                   |                               |
| Fixed Assets/Equipment:                       |          |                |                   |                               |
| Administrative Overhead:                      |          |                |                   |                               |
| Other Expenditures (List Below):              |          |                |                   |                               |
|   |          |                |                   |                               |
|   |          |                |                   |                               |
|   |          |                |                   |                               |
| TOTAL:  | \$       | 321            | \$                | - \$ -                        |
| Provide a description of the program placemer | t convir | o stratogy or  | system onhancomon | t that was funded             |

Provide a description of the program, placement, service, strategy or system enhancement that was funded with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include information on the types of youth served, prevention services you provided, your accomplishments, any barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.

Electronic monitoring is a program developed for our youthful offenders. Electronic Monitors allow the Probation Department to supervise a juvenile in his own residence as ordered by the Court. Electronic Monitoring closely monitors the youth's activities and alerts the Probation Officer if the youth is in an area he is not authorized to be. A juvenile is placed on this program under strict guidelines to help him become more accountable for his decisions and attitude. Electronic Monitoring also assists the parent and probation in closely supervising a youth who has demonstrated problems in school, home, and/or with the law. Electronic Monitoring is used as a less restrictive alternative to secure detention. The funds will be used to pay for the monitoring of these youth. The funding will also be used to purchase uniforms and equipment for officers who will be going out in the field to ensure the youth's compliance.

| 8. Program, Placement, Service, Strateg          | ly, or System Enha                  | ancement                   |                               |  |
|--|-------------------------------------|----------------------------|-------------------------------|--|
| Name of program, placement, service,             | Remi Vista                          |                            |                               |  |
| strategy or system enhancement:                  | Reilli Vista                        |                            |                               |  |
| Expenditure Category:                            | Individual Mental Health Counseling |                            |                               |  |
|  | JJCPA Funds                         | YOBG Funds                 | All Other Funds<br>(Optional) |  |
| Salaries & Benefits:                             |                                     |                            |                               |  |
| Services & Supplies:                             |                                     |                            |                               |  |
| Professional Services:                           | \$ 49,974                           |                            |                               |  |
| Community Based Organizations:                   |                                     |                            |                               |  |
| Fixed Assets/Equipment:                          |                                     |                            |                               |  |
| Administrative Overhead:                         |                                     |                            |                               |  |
| Other Expenditures (List Below):                 |                                     |                            |                               |  |
|  |                                     |                            |                               |  |
|  |                                     |                            |                               |  |
|  |                                     |                            |                               |  |
| TOTAL:   |                                     | · · · ·                    | \$-                           |  |
| Provide a description of the program, placemer   | nt, service, strategy or            | system enhancement         | that was funded               |  |
| with JJCPA and/or YOBG funds in the precedin     | g fiscal year. For exa              | ample, you might want t    | o include                     |  |
| information on the types of youth served, preve  | ntion services you pro              | ovided, your accomplish    | iments, any                   |  |
| barriers encountered, and what specifically JJC  | PA and/or YOBG fund                 | ds paid for.               |                               |  |
| Remi Vista provides individual counseling that f | ocuses on improving                 | self esteem and self de    | etermination. The             |  |
| counselor helps youth gain the needed tools to   | be successful on prot               | pation and in life. The fu | unds will be used to          |  |
| pay for the counselor to provide weekly counse   | ling sessions with our              | youth who are detained     | d in the Juvenile Hall.       |  |
|  |                                     |                            |                               |  |
|  |                                     |                            |                               |  |
|  |                                     |                            |                               |  |

Del Norte

| 9. Program, Placement, Service, Strategy, or System Enhancement   |                              |                         |                               |  |
|---|------------------------------|-------------------------|-------------------------------|--|
| Name of program, placement, service, strategy or system enhancement:                                      | Automon-JAIS                 |                         |                               |  |
| Expenditure Category:   | Risk and/or Needs Assessment |                         |                               |  |
|   | JJCPA Funds                  | YOBG Funds              | All Other Funds<br>(Optional) |  |
| Salaries & Benefits:  | \$ 9,261                     |                         |                               |  |
| Services & Supplies:  | \$ 16,590                    |                         |                               |  |
| Professional Services:  |                              |                         |                               |  |
| Community Based Organizations:  |                              |                         |                               |  |
| Fixed Assets/Equipment:   |                              |                         |                               |  |
| Administrative Overhead:  |                              |                         |                               |  |
| Other Expenditures (List Below):  |                              |                         |                               |  |
|   |                              |                         |                               |  |
|   |                              |                         |                               |  |
|   |                              |                         |                               |  |
| TOTAL:  | \$ 25,851                    | \$-                     | \$-                           |  |
| Provide a description of the program, placemer  |                              | •                       |                               |  |
| with JJCPA and/or YOBG funds in the precedin  |                              |                         |                               |  |
| information on the types of youth served, preve   |                              |                         | nments, any                   |  |
| barriers encountered, and what specifically JJC   | PA and/or YOBG fu            | nds paid for.           |                               |  |
| The Juvenile Assessment and Intervention Sys  | · · · ·                      | •                       | •                             |  |
| strategy model that weaves together a risk asse   |                              | -                       | -                             |  |
| a one-on-one interview with the youth, much of  | which focuses on th          | e underlying motivation | for illegal behavior.         |  |
| This process puts the Probation Officer in a mo   |                              |                         |                               |  |
| rapport between the youth and the Probation Officer, and better equips the agency to leverage the limited |                              |                         |                               |  |

resources of staff time and treatment programs. The funding will be used to pay for the Automon-JAIS system. In addition, the funding will be used to pay for staff salaries while conducting JAIS interviews/assessments.

| 10. Program, Placement, Service, Strate  | egy, or System Eni                 | nancement  |                               |  |  |
|--|------------------------------------|------------|-------------------------------|--|--|
| Name of program, placement, service, strategy or system enhancement:   | Deputy Probation Officer (Truancy) |            |                               |  |  |
| Expenditure Category:  | Other Direct Service               |            |                               |  |  |
| ,  | JJCPA Funds                        | YOBG Funds | All Other Funds<br>(Optional) |  |  |
| Salaries & Benefits:   |                                    | \$ 59,940  |                               |  |  |
| Services & Supplies:   | \$ 308                             | \$ 4,967   |                               |  |  |
| Professional Services:   |                                    |            |                               |  |  |
| Community Based Organizations:   |                                    |            |                               |  |  |
| Fixed Assets/Equipment:  |                                    |            |                               |  |  |
| Administrative Overhead:   |                                    |            |                               |  |  |
| Other Expenditures (List Below):   |                                    |            |                               |  |  |
|  |                                    |            |                               |  |  |
|  |                                    |            |                               |  |  |
|  |                                    |            |                               |  |  |
| TOTAL: \$ 308 \$ 64,907 \$   |                                    |            |                               |  |  |
| Provide a description of the program, placement, service, strategy or system enhancement that was funded with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include information on the types of youth served, prevention services you provided, your accomplishments, any barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.   |                                    |            |                               |  |  |
| barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.<br>Funding will be utilized to fund a Juvenile Deputy Probation Officer which ensures supervision of juveniles who<br>are identified as at-risk youth, truants. Funding will be used to provide direct supervision services to all juveniles<br>coming to the attention of the Probation Department as truant. Juveniles serviced are identified at-risk youth who<br>are identified as being truant or are identified as being at risk for truancy or whom are already truant. In addition,<br>the funding will be used to purchase uniforms and necessary equipment to allow the Deputy Probation Officer to<br>effectively perform his job duties. The funds will also be used to complete vehicle maintenance and fuel for the<br>officer to transport youth to and from school. |                                    |            |                               |  |  |

| 11. Program, Placement, Service, Strate  | gy, or System Enh | nancement  |                               |
|--|-------------------|------------|-------------------------------|
| Name of program, placement, service,   |                   |            |                               |
| strategy or system enhancement:  |                   |            |                               |
| Expenditure Category:  |                   |            |                               |
|  | JJCPA Funds       | YOBG Funds | All Other Funds<br>(Optional) |
| Salaries & Benefits:   |                   |            |                               |
| Services & Supplies:   |                   |            |                               |
| Professional Services:   |                   |            |                               |
| Community Based Organizations:   |                   |            |                               |
| Fixed Assets/Equipment:  |                   |            |                               |
| Administrative Overhead:   |                   |            |                               |
| Other Expenditures (List Below):   |                   |            |                               |
|  |                   |            |                               |
|  |                   |            |                               |
|  |                   |            |                               |
| TOTAL:   | \$-               | \$-        | \$-                           |
| Provide a description of the program, placement, service, strategy or system enhancement that was funded with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include information on the types of youth served, prevention services you provided, your accomplishments, any barriers encountered, and what specifically JJCPA and/or YOBG funds paid for. |                   |            |                               |
|  |                   |            |                               |

| ACCOUNTING OF JJCPA-YOBG EXPEN | DITURES for: |
|--------------------------------|--------------|

| 12. Program, Placement, Service, Strategy, or System Enhancement   |                     |              |                               |  |
|--|---------------------|--------------|-------------------------------|--|
| Name of program, placement, service,   |                     |              |                               |  |
| strategy or system enhancement:  |                     |              |                               |  |
| Expenditure Category:  |                     |              |                               |  |
|  | JJCPA Funds         | YOBG Funds   | All Other Funds<br>(Optional) |  |
| Salaries & Benefits:   |                     |              |                               |  |
| Services & Supplies:   |                     |              |                               |  |
| Professional Services:   |                     |              |                               |  |
| Community Based Organizations:   |                     |              |                               |  |
| Fixed Assets/Equipment:  |                     |              |                               |  |
| Administrative Overhead:   |                     |              |                               |  |
| Other Expenditures (List Below):   |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
| TOTAL:   | •                   | \$-          | \$-                           |  |
| Provide a description of the program, placement, service, strategy or system enhancement that was funded with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include |                     |              |                               |  |
| information on the types of youth served, preve  |                     |              |                               |  |
|  | , i                 |              | intents, any                  |  |
| barriers encountered, and what specifically JJC  | PA and/or YOBG lune | us paid for. |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |
|  |                     |              |                               |  |

# Del Norte

| 13. Program, Placement, Service, Strategy, or System Enhancement   |                    |              |                               |  |
|--|--------------------|--------------|-------------------------------|--|
| Name of program, placement, service,   |                    |              |                               |  |
| strategy or system enhancement:  |                    |              |                               |  |
| Expenditure Category:  |                    |              |                               |  |
|  | JJCPA Funds        | YOBG Funds   | All Other Funds<br>(Optional) |  |
| Salaries & Benefits:   |                    |              |                               |  |
| Services & Supplies:   |                    |              |                               |  |
| Professional Services:   |                    |              |                               |  |
| Community Based Organizations:   |                    |              |                               |  |
| Fixed Assets/Equipment:  |                    |              |                               |  |
| Administrative Overhead:   |                    |              |                               |  |
| Other Expenditures (List Below):   |                    |              |                               |  |
|  |                    |              |                               |  |
|  |                    |              |                               |  |
|  |                    |              |                               |  |
| TOTAL:   |                    | \$-          | \$-                           |  |
| Provide a description of the program, placement, service, strategy or system enhancement that was funded |                    |              |                               |  |
| with JJCPA and/or YOBG funds in the preceding  |                    |              |                               |  |
| information on the types of youth served, preve  |                    |              | iments, any                   |  |
| barriers encountered, and what specifically JJC  | PA and/or YOBG fun | ds paid for. |                               |  |
|  |                    |              |                               |  |
|  |                    |              |                               |  |
|  |                    |              |                               |  |
|  |                    |              |                               |  |
|  |                    |              |                               |  |

| 14. Program, Placement, Service, Strate  | gy, or System Enh      | nancement               |                               |  |
|--|------------------------|-------------------------|-------------------------------|--|
| Name of program, placement, service,   |                        |                         |                               |  |
| strategy or system enhancement:  |                        |                         |                               |  |
| Expenditure Category:  |                        |                         |                               |  |
|  | JJCPA Funds            | YOBG Funds              | All Other Funds<br>(Optional) |  |
| Salaries & Benefits:   |                        |                         |                               |  |
| Services & Supplies:   |                        |                         |                               |  |
| Professional Services:   |                        |                         |                               |  |
| Community Based Organizations:   |                        |                         |                               |  |
| Fixed Assets/Equipment:  |                        |                         |                               |  |
| Administrative Overhead:   |                        |                         |                               |  |
| Other Expenditures (List Below):   |                        |                         |                               |  |
|  |                        |                         |                               |  |
|  |                        |                         |                               |  |
|  |                        |                         |                               |  |
| TOTAL:   | \$-                    | \$-                     | \$-                           |  |
| Provide a description of the program, placement, service, strategy or system enhancement that was funded |                        |                         |                               |  |
| with JJCPA and/or YOBG funds in the precedin   | g fiscal year. For exa | ample, you might want t | o include                     |  |
| information on the types of youth served, preve  | ntion services you pro | ovided, your accomplish | iments, any                   |  |
| barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.                            |                        |                         |                               |  |
|  |                        |                         |                               |  |
|  |                        |                         |                               |  |
|  |                        |                         |                               |  |
|  |                        |                         |                               |  |

# ACCOUNTING OF JJCPA-YOBG EXPENDITURES for: Del Norte

| 15. Program, Placement, Service, Strate  | gy, or System Enh | nancement  |                               |
|--|-------------------|------------|-------------------------------|
| Name of program, placement, service,   |                   |            |                               |
| strategy or system enhancement:  |                   |            |                               |
| Expenditure Category:  |                   |            |                               |
|  | JJCPA Funds       | YOBG Funds | All Other Funds<br>(Optional) |
| Salaries & Benefits:   |                   |            |                               |
| Services & Supplies:   |                   |            |                               |
| Professional Services:   |                   |            |                               |
| Community Based Organizations:   |                   |            |                               |
| Fixed Assets/Equipment:  |                   |            |                               |
| Administrative Overhead:   |                   |            |                               |
| Other Expenditures (List Below):   |                   |            |                               |
|  |                   |            |                               |
|  |                   |            |                               |
|  |                   |            |                               |
| TOTAL:   | \$-               | \$-        | \$-                           |
| Provide a description of the program, placement, service, strategy or system enhancement that was funded with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include information on the types of youth served, prevention services you provided, your accomplishments, any barriers encountered, and what specifically JJCPA and/or YOBG funds paid for. |                   |            |                               |

**Del Norte** 

| 16. Program, Placement, Service, Strategy, or System Enhancement   |             |            |                 |
|--|-------------|------------|-----------------|
| Name of program, placement, service,   |             |            |                 |
| strategy or system enhancement:  |             |            |                 |
| Expenditure Category:  |             |            |                 |
|  | JJCPA Funds | YOBG Funds | All Other Funds |
| Salaries & Benefits:   |             |            |                 |
| Services & Supplies:   |             |            |                 |
| Professional Services:   |             |            |                 |
| Community Based Organizations:   |             |            |                 |
| Fixed Assets/Equipment:  |             |            |                 |
| Administrative Overhead:   |             |            |                 |
| Other Expenditures (List Below):   |             |            |                 |
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|  |             |            |                 |
| TOTAL:   | \$-         | \$-        | \$-             |
| Provide a description of the program, placement, service, strategy or system enhancement that was funded |             |            |                 |

**Del Norte** 

| 17. Program, Placement, Service, Strategy, or System Enhancement |             |            |                 |
|--|-------------|------------|-----------------|
| Name of program, placement, service,                             |             |            |                 |
| strategy or system enhancement:                                  |             |            |                 |
| Expenditure Category:  |             |            |                 |
|  | JJCPA Funds | YOBG Funds | All Other Funds |
| Salaries & Benefits:   |             |            |                 |
| Services & Supplies:   |             |            |                 |
| Professional Services:   |             |            |                 |
| Community Based Organizations:                                   |             |            |                 |
| Fixed Assets/Equipment:  |             |            |                 |
| Administrative Overhead:   |             |            |                 |
| Other Expenditures (List Below):                                 |             |            |                 |
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| TOTAL:   | \$-         | \$-        | \$-             |

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| 18. Program, Placement, Service, Strategy, or System Enhancement |  |  |  |
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| 19. Program, Placement, Service, Strategy, or System Enhancement |  |  |  |
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| 20. Program, Placement, Service, Strategy, or System Enhancement |             |            |                 |
|--|-------------|------------|-----------------|
| Name of program, placement, service,                             |             |            |                 |
| strategy or system enhancement:                                  |             |            |                 |
| Expenditure Category:  |             |            |                 |
|  | JJCPA Funds | YOBG Funds | All Other Funds |
| Salaries & Benefits:   |             |            |                 |
| Services & Supplies:   |             |            |                 |
| Professional Services:   |             |            |                 |
| Community Based Organizations:                                   |             |            |                 |
| Fixed Assets/Equipment:  |             |            |                 |
| Administrative Overhead:   |             |            |                 |
| Other Expenditures (List Below):                                 |             |            |                 |
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| TOTAL:   | \$-         | \$-        | \$-             |
| TOTAL:   | ▼           | Ψ          | Ψ               |

# ACCOUNTING OF JJCPA-YOBG EXPENDITURES for: Del Norte

| 21. Program, Placement, Service, Sti  | ategy, or System I   | Enhancement     |                  |
|---|----------------------|-----------------|------------------|
| Name of program, placement, service,  |                      |                 |                  |
| strategy or system enhancement:   |                      |                 |                  |
| Expenditure Category:   |                      |                 |                  |
|   | JJCPA Funds          | YOBG Funds      | All Other Funds  |
| Salaries & Benefits:  |                      |                 |                  |
| Services & Supplies:  |                      |                 |                  |
| Professional Services:  |                      |                 |                  |
| Community Based Organizations:  |                      |                 |                  |
| Fixed Assets/Equipment:   |                      |                 |                  |
| Administrative Overhead:  |                      |                 |                  |
| Other Expenditures (List Below):  |                      |                 |                  |
|   |                      |                 |                  |
|   |                      |                 |                  |
| TOTAL   | ¢                    | ¢               | ¢                |
| TOTAL:  | -                    | \$ -            | \$ -             |
| Provide a description of the program, place with JJCPA and/or YOBG funds in the prec        |                      |                 |                  |
|   |                      |                 |                  |
| information on the types of youth served, pr<br>barriers encountered, and what specifically |                      |                 | plishinents, any |
| barners encountered, and what specifically  | JJCPA and/or YOBG    | iunus paid ior. |                  |
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| ACCOUNTING OF JJCPA-YC  | <b>DBG EXPENDITU</b> | RES for:        | Del Norte        |

| 22. Program, Placement, Service, Str         | ategy or System   | Inhancement     |                  |
|--|-------------------|-----------------|------------------|
| Name of program, placement, service,         |                   |                 |                  |
| strategy or system enhancement:              |                   |                 |                  |
| Expenditure Category:                        |                   |                 |                  |
| Experiditure Category.                       | JJCPA Funds       | YOBG Funds      | All Other Funds  |
| Salaries & Benefits:                         |                   |                 |                  |
| Services & Supplies:                         |                   |                 |                  |
| Professional Services:                       |                   |                 |                  |
| Community Based Organizations:               |                   |                 |                  |
| Fixed Assets/Equipment:                      |                   |                 |                  |
| Administrative Overhead:                     |                   |                 |                  |
| Other Expenditures (List Below):             |                   |                 |                  |
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| TOTAL:                                       | ¢ _               | \$-             | \$-              |
| Provide a description of the program, place  |                   |                 |                  |
|  |                   |                 |                  |
| with JJCPA and/or YOBG funds in the prec     |                   |                 |                  |
| information on the types of youth served, pr |                   |                 | iplishments, any |
| barriers encountered, and what specifically  | JJCPA and/or YOBG | funds paid for. |                  |
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# ACCOUNTING OF JJCPA-YOBG EXPENDITURES for: Del Norte

| 23. Program, Placement, Service, Strategy, or System Enhancement |             |            |                 |
|--|-------------|------------|-----------------|
| Name of program, placement, service,                             |             |            |                 |
| strategy or system enhancement:                                  |             |            |                 |
| Expenditure Category:  |             |            |                 |
|  | JJCPA Funds | YOBG Funds | All Other Funds |
| Salaries & Benefits:   |             |            |                 |
| Services & Supplies:   |             |            |                 |
| Professional Services:   |             |            |                 |
| Community Based Organizations:                                   |             |            |                 |
| Fixed Assets/Equipment:  |             |            |                 |
| Administrative Overhead:   |             |            |                 |
| Other Expenditures (List Below):                                 |             |            |                 |
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|  |             |            |                 |
| TOTAL:   | \$-         | \$-        | \$-             |
| Provide a description of the program, place                      |             | -          | -               |
| with JJCPA and/or YOBG funds in the prec                         |             |            |                 |
| information on the types of youth served, pr                     |             |            |                 |
| barriers encountered, and what specifically                      | •           |            | .p,,            |
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**Del Norte** 

24. Program, Placement, Service, Strategy, or System Enhancement

| Name of program placement, convice                  |                   |                 |                 |
|---|-------------------|-----------------|-----------------|
| Name of program, placement, service,                |                   |                 |                 |
| strategy or system enhancement:                     |                   |                 |                 |
| Expenditure Category:                               | JJCPA Funds       | YOBG Funds      | All Other Funds |
| Salaries & Benefits:                                | JJCFA Fullus      |                 |                 |
| Services & Supplies:                                |                   |                 |                 |
| Professional Services:                              |                   |                 |                 |
|   |                   |                 |                 |
| Community Based Organizations:                      |                   |                 |                 |
| Fixed Assets/Equipment:<br>Administrative Overhead: |                   |                 |                 |
|   |                   |                 |                 |
| Other Expenditures (List Below):                    |                   |                 |                 |
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|   |                   |                 |                 |
| TOTAL   | ¢                 | <b>*</b>        | <b></b>         |
| TOTAL:  |                   | \$ -            | <b>\$</b> -     |
| Provide a description of the program, place         |                   |                 |                 |
| with JJCPA and/or YOBG funds in the prec            |                   |                 |                 |
| information on the types of youth served, pr        |                   |                 | plishments, any |
| barriers encountered, and what specifically         | JJCPA and/or YOBG | funds paid for. |                 |
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**Del Norte** 

**25. Program, Placement, Service, Strategy, or System Enhancement** Name of program, placement, service,

| strategy or system enhancement:              |             |                      |                      |
|--|-------------|----------------------|----------------------|
| Expenditure Category:                        |             |                      |                      |
|  | JJCPA Funds | YOBG Funds           | All Other Funds      |
| Salaries & Benefits:                         |             |                      |                      |
| Services & Supplies:                         |             |                      |                      |
| Professional Services:                       |             |                      |                      |
| Community Based Organizations:               |             |                      |                      |
| Fixed Assets/Equipment:                      |             |                      |                      |
| Administrative Overhead:                     |             |                      |                      |
| Other Expenditures (List Below):             |             |                      |                      |
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| TOTAL:                                       | \$-         | \$-                  | \$-                  |
| Provide a description of the program, place  |             | y or system enhancem | nent that was funded |
| with JJCPA and/or YOBG funds in the prec     |             |                      |                      |
| information on the types of youth served, pr |             |                      |                      |
| barriers encountered, and what specifically  |             |                      |                      |
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**Del Norte** 

# 26. Program, Placement, Service, Strategy, or System Enhancement

Name of program, placement, service, strategy or system enhancement:

| Expenditure Category:                        |                   |                  |                   |
|--|-------------------|------------------|-------------------|
|  | JJCPA Funds       | YOBG Funds       | All Other Funds   |
| Salaries & Benefits:                         |                   |                  |                   |
| Services & Supplies:                         |                   |                  |                   |
| Professional Services:                       |                   |                  |                   |
| Community Based Organizations:               |                   |                  |                   |
| Fixed Assets/Equipment:                      |                   |                  |                   |
| Administrative Overhead:                     |                   |                  |                   |
| Other Expenditures (List Below):             |                   |                  |                   |
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| TOTAL:                                       | \$-               | \$-              | \$-               |
| Provide a description of the program, place  |                   |                  | •                 |
| with JJCPA and/or YOBG funds in the preci    |                   |                  |                   |
| information on the types of youth served, pr |                   |                  |                   |
| barriers encountered, and what specifically  |                   |                  | iplishinents, any |
| barners encountered, and what specifically   | JJCFA anu/or TODG | Turius paiu tor. |                   |
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**Del Norte** 

# 27. Program, Placement, Service, Strategy, or System Enhancement Name of program, placement, service,

Name of program, placement, service, strategy or system enhancement: Expenditure Category:

|   | JJCPA Funds           | YOBG Funds           | All Other Funds |
|---|-----------------------|----------------------|-----------------|
| Salaries & Benefits:  |                       |                      |                 |
| Services & Supplies:  |                       |                      |                 |
| Professional Services:  |                       |                      |                 |
| Community Based Organizations:  |                       |                      |                 |
| Fixed Assets/Equipment:   |                       |                      |                 |
| Administrative Overhead:  |                       |                      |                 |
| Other Expenditures (List Below):  |                       |                      |                 |
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|   |                       |                      |                 |
|   |                       |                      |                 |
| TOTAL:  | \$-                   | \$-                  | \$-             |
| with JJCPA and/or YOBG funds in the prec<br>information on the types of youth served, pr<br>barriers encountered, and what specifically | evention services you | provided, your accom |                 |
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| 28. Program, Placement, Service, Strategy, or System Enhancement |             |            |                 |
|--|-------------|------------|-----------------|
| Name of program, placement, service,                             |             |            |                 |
| strategy or system enhancement:                                  |             |            |                 |
| Expenditure Category:  |             |            |                 |
|  | JJCPA Funds | YOBG Funds | All Other Funds |

| Salaries & Benefits:             |     |     |     |
|----------------------------------|-----|-----|-----|
| Services & Supplies:             |     |     |     |
| Professional Services:           |     |     |     |
| Community Based Organizations:   |     |     |     |
| Fixed Assets/Equipment:          |     |     |     |
| Administrative Overhead:         |     |     |     |
| Other Expenditures (List Below): |     |     |     |
|                                  |     |     |     |
|                                  |     |     |     |
|                                  |     |     |     |
| TOTAL:                           | \$- | \$- | \$- |

Provide a description of the program, placement, service, strategy or system enhancement that was funded with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include information on the types of youth served, prevention services you provided, your accomplishments, any barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.

### ACCOUNTING OF JJCPA-YOBG EXPENDITURES for:

| 29. Program, Placement, Service, Strategy, or System Enhancement |             |            |                 |  |
|--|-------------|------------|-----------------|--|
| Name of program, placement, service,                             |             |            |                 |  |
| strategy or system enhancement:                                  |             |            |                 |  |
| Expenditure Category:  |             |            |                 |  |
|  | JJCPA Funds | YOBG Funds | All Other Funds |  |
| Salaries & Benefits:   |             |            |                 |  |

| Services & Supplies:             |     |     |     |
|----------------------------------|-----|-----|-----|
| Professional Services:           |     |     |     |
| Community Based Organizations:   |     |     |     |
| Fixed Assets/Equipment:          |     |     |     |
| Administrative Overhead:         |     |     |     |
| Other Expenditures (List Below): |     |     |     |
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|                                  |     |     |     |
| TOTAL:                           | \$- | \$- | \$- |

Provide a description of the program, placement, service, strategy or system enhancement that was funded with JJCPA and/or YOBG funds in the preceding fiscal year. For example, you might want to include information on the types of youth served, prevention services you provided, your accomplishments, any barriers encountered, and what specifically JJCPA and/or YOBG funds paid for.

### ACCOUNTING OF JJCPA-YOBG EXPENDITURES for:

| 30. Program, Placement, Service, Strategy, or System Enhancement |             |            |                 |  |
|--|-------------|------------|-----------------|--|
| Name of program, placement, service,                             |             |            |                 |  |
| strategy or system enhancement:                                  |             |            |                 |  |
| Expenditure Category:  |             |            |                 |  |
|  | JJCPA Funds | YOBG Funds | All Other Funds |  |
| Salaries & Benefits:   |             |            |                 |  |
| Services & Supplies:   |             |            |                 |  |

| Professional Services:           |     |     |     |
|----------------------------------|-----|-----|-----|
| Community Based Organizations:   |     |     |     |
| Fixed Assets/Equipment:          |     |     |     |
| Administrative Overhead:         |     |     |     |
| Other Expenditures (List Below): |     |     |     |
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| TOTAL:                           | \$- | \$- | \$- |