



Victims of Crime Act (VOCA) Victim Assistance Formula Grant Program Match Waiver Request Form

Cal OES Subrecipients may request a partial or full match waiver for Victim of Crime Act (VOCA) Victim Assistance Formula Grant Program funds. Approval is dependent on a compelling justification. To request a partial or full match waiver, the Subrecipient must complete the following:

1. Cal OES Grant Subaward Number: VW22 37 0170
2. Subrecipient's Name: County of Lake
3. Grant Subaward Performance Period 10/01/2022 through 09/30/2023
4. VOCA Fund Source #1: 20VOCA
 VOCA Victim Assistance Formula Grant Program Funds Awarded: \$ 210,000
 Amount of Match Proposed (post approved Match Waiver): \$ 0
5. VOCA Fund Source #2 (if applicable): 22VOCA
 VOCA Victim Assistance Formula Grant Program Funds Awarded: \$ 102,105
 Amount of Match Proposed (post approved Match Waiver): \$ 0
6. Briefly summarize the services provided:
 Our Advocates are the essential link between victims/witnesses and prosecutors as well as law enforcement personnel. They provide services as mandated by Section 13835.5 of the California Evidence Code, as well as many additional services as needed or upon request.
7. Describe practical/logistical obstacles and/or local resource constraints to providing match:
 For 36 years the Victim Witness Assistance Grant has made it possible to have a Victim Witness Division of the Lake County District Attorney's Office. And for most of those years the State portion of this VW funding had completely covered the required federal match. However, in recent years, the State portion is no longer able to cover the VOCA matches. Because the County expects that the majority of the VW costs will be covered by grants, the VW Division is allocated very little general fund, and must utilize it for non-grant covered expenses.

Approved ☒

Susan Grace

Denied ☐

Unit Chief Name

Unit Chief Signature

05/10/2022

Date