

RENEWAL #:

1

DCF Program may request a Renewal if they would like to **renew a grant for an additional grant year**. This form must be submitted to your DCF OGC Grant & Contract Specialist for submission through concurrence.

Between **Kansas Department for Children and Families &**

Grantee Agency:	Cornerstones of Care		
Street Address*	300 E 36th St	Grant Number	PPS-2021-FCPS-01
City, State, Zip*	Kansas City, MO 64111-1410	Grant Year (from/to)	
E-Mail	ette.madison@cornerstonesofcare.	7/1/2022	6/30/2023
Phone Number	816-508-1705	Fiscal Year	FY23
Fax Number		CFDA # (if applicable)	93.603

****A copy of any previously approved Renewal(s) and/or Amendment(s), as well as a NEW FFATA form, NEW Debarment Memorandum and NEW Tax Clearance Certificate must be included with this request****

Line Item	New Budget
Personnel	74,742.70
Fringe Benefits	9,826.98
Travel	5,340.00
Equipment	
Supplies	1,000.00
Contractual	
Building	
Training	
Other (specify)	
Other (specify)	
Other (specify)	
Indirect Costs**	9,090.32
Total Grant Budget:	\$100,000.00

Speed Chart	Fund	Budget Unit	Account	New Budget Amount
ISD27416	3343	0426	555900	100,000.00
Total				\$100,000.00

Additional Information:

Grantee will continue providing services as outlined in their NOGA.

*physical address required, including 9-digit zip code

**Indirect Costs may not exceed 10% of the Grant Budget.

This grant shall remain in effect, subject to the terms and conditions stated in the original Notification of Grant

**RENEWAL #:** 2

DCF Program may request a Renewal if they would like to **renew a grant for an additional grant year**. This form must be submitted to your DCF OGC Grant & Contract Specialist for submission through concurrence.

Between **Kansas Department for Children and Families** &

Grantee Agency:	Cornerstones of Care		
Street Address*	300 E 36th St	Grant Number	PPS-2021-FCPS-01
City, State, Zip*	Kansas City, MO 64111-1410	Grant Year (from/to)	
E-Mail	cole.newton@cornerstonesofcare.d	7/1/2023	6/30/2024
Phone Number	816-508-1705	Fiscal Year	FY24
Fax Number		CFDA # (if applicable)	93.603

****A copy of any previously approved Renewal(s) and/or Amendment(s), as well as a NEW FFATA form, NEW Debarment Memorandum and NEW Tax Clearance Certificate must be included with this request****

Line Item	New Budget
Personnel	68,330.46
Fringe Benefits	14,092.62
Travel	7,229.64
Equipment	
Supplies	1,255.47
Contractual	
Building	
Training	
Other (specify)	
Other (specify)	
Other (specify)	
Indirect Costs**	9,091.81
Total Grant Budget:	\$100,000.00

Speed Chart	Fund	Budget Unit	Account	New Budget Amount
ISD27416	3343	426	555900	
Total				\$100,000.00

Additional Information:

*physical address required, including 9-digit zip code

**Indirect Costs may not exceed 10% of the Grant Budget.

This grant shall remain in effect, subject to the terms and conditions stated in the original Notification of Grant