

Texas Traffic Safety eGrants

Fiscal Year 2026

Organization Name: City of Mission Police Department

Legal Name: City of Mission

Payee Identification Number: 17460017381012

Project Title: Mission Police Phlebotomy Program

ID: 2026-Mission-G-1YG-0163

Period: 10/01/2025 to 09/30/2026

FOR REVIEW ONLY - NOT A LEGAL DOCUMENT

BUDGET SUMMARY

| Budget Category | | TxDOT | Match | Program Income | Total |
|---|----------------------------------|---------------------|--------------------|----------------|---------------------|
| Category I - Labor Costs | | | | | |
| (100) | Salaries: | \$0 | \$4,080.00 | \$0 | \$4,080.00 |
| (200) | Fringe Benefits: | \$0 | \$862.10 | \$0 | \$862.10 |
| | Sub-Total: | \$0 | \$4,942.10 | \$0 | \$4,942.10 |
| Category II - Other Direct Costs | | | | | |
| (300) | Travel: | \$0 | \$0 | \$0 | \$0 |
| (400) | Equipment: | \$0 | \$0 | \$0 | \$0 |
| (500) | Supplies: | \$0 | \$1,580.00 | \$0 | \$1,580.00 |
| (600) | Contractual Services: | \$141,000.00 | \$0 | \$0 | \$141,000.00 |
| (700) | Other Miscellaneous: | \$4,964.00 | \$31,036.00 | \$0 | \$36,000.00 |
| | Sub-Total: | \$145,964.00 | \$32,616.00 | \$0 | \$178,580.00 |
| Total Direct Costs: | | \$145,964.00 | \$37,558.10 | \$0 | \$183,522.10 |
| Category III - Indirect Costs | | | | | |
| (800) | Indirect Cost Rate: | \$0 | \$0 | \$0 | \$0 |
| Summary | | | | | |
| | Total Labor Costs: | \$0 | \$4,942.10 | \$0 | \$4,942.10 |
| | Total Direct Costs: | \$145,964.00 | \$32,616.00 | \$0 | \$178,580.00 |
| | Total Indirect Costs: | \$0 | \$0 | \$0 | \$0 |
| Grand Total: | | \$145,964.00 | \$37,558.10 | \$0 | \$183,522.10 |
| | Fund Sources: (Percent Share) | 79.53% | 20.47% | 0.00% | |

Salary and cost rates will be based on the rates submitted by the Subgrantee in its grant application in eGrants.

**Texas Department Of Transportation - Traffic Safety
Electronic Signature Authorization Form**

This form identifies the person(s) who have the authority to sign grant agreements and amendments for the Grant ID listed at the bottom of the page.

Name Of Organization: City of Mission

Project Title: Mission Police Phlebotomy Program

Authorizing Authority

The signatory of the Subgrantee hereby represents and warrants that she/he is an officer of the organization for which she/he has executed this agreement and that she/he has full and complete authority to enter into the agreement on behalf of the organization. I authorize the person(s) listed under the section "Authorized to Electronically Sign Grant Agreements and Amendments" to enter into an agreement on behalf of the organization.

| | |
|---|--|
| Name: | |
| Title: | |
| Signature: | |
| Date: | |
| Under the authority of Ordinance or Resolution Number (if applicable) | |

Authorized to Electronically Sign Grant Agreements and Amendments

List Subgrantee Administrators who have complete authority to enter into an agreement on behalf of the organization.

| | Print Name of Subgrantee Administrator in TxDOT Traffic Safety eGrants | Title |
|----|---|-------|
| 1. | | |
| 2. | | |
| 3. | | |