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All programs you are currently participating in are listed below. To reduce the size of program listing, choose from the following criteria and press the **Refresh** button.

Year **Solicitation**

Office of Justice Programs has many other funding opportunities that you may be eligible for. To review these opportunities or to start a new application click on [Funding Opportunities](#).

2004 State Justice Statistics Program (SAC)

Year	Application No.	Status	Correspondence	Action
2008	2008-30015-ND-TL	<ul style="list-style-type: none"> Application submitted and last updated on 11/13/2007 	No Messages Compose message	View

BJA FY 08 Solicited

Year	Application No.	Status	Correspondence	Action
2008	2008-F0248-ND-DD	<ul style="list-style-type: none"> Application not yet submitted, last saved on 11/13/2007 Application Deadline expires on 05/01/2008 	No Messages Compose message	Update Withdraw

OVC FY 07 VOCA Victim Assistance Formula

Year	Application No.	Status	Correspondence	Action

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2007	2007-VA-GX-0018	<ul style="list-style-type: none"> Grantee Notified On 07/17/07 Active 	Name: Foster, DeLano Phone:(202) 616-3612 Fax: Other:	3 New Message(s) Compose message	View Award Instructions OVC Performance Report Subgrant Reporting Financial Status Reports (SF-269a) Grant Monitoring Closeout
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OVC FY 07 VOCA Victim Compensation Formula

Year	Award Number	Status	Grant Manager	Correspondence	Action
2007	2007-VC-GX-0043	<ul style="list-style-type: none"> Grantee Notified On 05/08/07 Active 	Name: Foster, DeLano Phone:(202) 616-3612 Fax: Other:	2 New Message(s) Compose message	View Award Instructions OVC Performance Report Financial Status Reports (SF-269a) Grant Monitoring Closeout



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OVC Performance Report Handbook

This handbook allows you to complete Performance Reporting for FY 07 VOCA Compensation Grant Program.

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Report Number	Reporting Period	Type	Status	Last Edited	Action
1	01-Oct-2006 - 30-Sep-2007	Final	Submitted	16-Nov-2007	View



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Note: Click on the Performance Report side link to review your performance report.

Federal Award Number	2007-VC-GX-0043
Award Amount	\$73000.00
Grantee	Dept. of Corrections State of North Dakota
Grant Manager	DeLano Foster
Project Title	FY 07 VOCA Compensation Grant Program
Reporting Period From	01-Oct-2006
Reporting Period To	30-Sep-2007

Audit Trail:

Description:	Role:	User:	Timestamp:	Note:
Submitted	PO - Grant Manager	Coughlin, Paul J.	11/16/2007 2:51 PM	View Note
Draft	EXTERNAL - External User	Coughlin, Paul J.	11/16/2007 2:50 PM	View Note



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U.S. Department of Justice
Office of Justice Programs
Office for Victims of Crime
Washington, D.C. 20531

Victims of Crime Act
Victim Compensation Grant Program
Performance Report

OMB NO.: 1121-0014
Expires: 12/31/2007

Report Timeframe

October 1, 2006 through September 30, 2007

States receiving VOCA Crime Victims Compensation grant funds are required to submit an annual performance report. The report covers the federal fiscal year ending September 30 and is due to OVC by December 30 of the same year.

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Section I:

State: ND

Contact Name: Mr. Paul J. Coughlin

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[Section II Instructions](#)

Section II:

Claims Data (See instructions for definitions):

1. Number of new claims received during reporting period

(Place total on one line only, corresponding to your program's general procedure):

a. Total claims, if only one claim is usually counted per crime:

OR

b. Total claims, if victims and indirect victims generally count as separate claims:

2. Number of claims approved as eligible:

a. Number approved claims for victims 17 and under:

b. Number approved claims for victims 18 to 64:

c. Number approved claims for victims 65 and older:

3. Number of claims denied as ineligible or closed:

4. Number of Forensic sexual assault examination claims received during the reporting period, if such claims are handled through separate claims procedure. (See instructions):

1

1

0

0

0

0

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[Section III Instructions](#)

Section III:			
Payment Statistics By Crime Category:			
Type of Crime	a. Number of Claims Paid During Reporting Period (includes column b)	b. Number of Domestic Violence Related Claims Paid During Reporting Period	c. Total Amount Paid by Category (include all supplemental payments)
1. Assault	1	1	\$1
2. Homicide	4		\$2
3. Sexual Assault			
4. Child Abuse (including sexual & physical abuse)			
5. DWI/DUI			
6. Other Vehicular Crimes			
7. Stalking			
8. Robbery			
9. Terrorism			
10. Kidnapping			
11. Arson			
12. Other (please specify other crime type)	1	1	\$1
13. Total:	6	2	\$4
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Section IV:	
Indicate Total Expenses Paid by Service	
1. Medical/Dental (Except Mental Health)	
2. Mental Health (Include Mental Health Related Medications)	
3. Economic Support (Lost Wages, Loss of Support)	
4. Funeral/Burial (Include all funeral related expenses)	
5. Crime Scene Clean-Up	
6. Forensic Sexual Assault Exams	
7. Other: (Please specify types of expenses and amount paid) economics support	\$1
8. Total	\$1

Attachments

Beethoven's Symphony No. 9 (Scherzo).wma	Delete
Add Attachment	

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Note: Click on the Certification side link to review the certification of your performance report.

[Section V Instructions](#)

Section V:

Please respond to the following questions. Additional information may be attached if necessary.

1. Describe the impact that VOCA Funds have had on your program's ability to meet the needs of crime victims.

written stuff

2. How do you measure your program's efficiency and effectiveness in reducing the financial impact of crime on victims? What are the results? For example, if your program measures average processing time, please provide that data and a brief explanation of how that average is measured, i.e., whether you use a median or an average of all claims; whether the processing time is measured through automated means or is estimated.

written stuff

3. Did your state use VOCA Administrative funds?

If your state used VOCA Administrative funds, please describe the impact these funds have had on your state's ability to provide compensation or improve victim services.

Authorized Signature	MM/DD/YYYY
Warren R Emmer	11/16/2007

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Note: Click on the Certification side link to review the certification of your performance report.

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Section V:

Please respond to the following questions. Additional information may be attached if necessary.

1. Describe the impact that VOCA Funds have had on your program's ability to meet the needs of crime victims.

written stuff

2. How do you measure your program's efficiency and effectiveness in reducing the financial impact of crime on victims? What are the results? For example, if your program measures average processing time, please provide that data and a brief explanation of how that average is measured, i.e., whether you use a median or an average of all claims; whether the processing time is measured through automated means or is estimated.

written stuff

3. Did your state use VOCA Administrative funds?

If your state used VOCA Administrative funds, please describe the impact these funds have had on your state's ability to provide compensation or improve victim services.

Authorized Signature

MM/DD/YYYY

Warren R Emmer

11/16/2007

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To the best of my knowledge and belief, all data in this performance report that I have provided is true and correct, the document has been duly authorized by the governing body of the grantee and the applicant will comply with the attached certifications.

Your typed name, in lieu of your signature represents your legal binding acceptance of the terms of your grant and your statement of the veracity of the representations made in the performance report. The document has been duly authorized by the governing body of the grantee and the grantee will comply with the following:

Prefix	Mr.
Prefix (Other)	
First Name	Paul J.
Middle Initial	
Last Name	Coughlin
Suffix	
Suffix (Other)	
Title	Administrator
Address Line 1	PO Box 5521
Address Line 2	
City	Bismarck



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You can **Submit** this report only when the following checklist is complete. Click on the "Incomplete" link to get more details for the corresponding Incomplete item.

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Incomplete	Performance Report
Complete	Certification
Complete	Submit Report

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