

**Department New Request Form  
Fiscal Year 2024**

|                         |   |
|-------------------------|---|
| <b>Program</b>          | Public Safety   |
| <b>Department</b>       | Attorney  |
| <b>Request Category</b> | Baseline Adjustment                                   |
| <b>Request Rating</b>   | Maintain Level of Service                             |
| <b>Department Goal</b>  | Provide victim advocacy services for victims of crime |

**Title of New Request:**

**Rank:** 4

Missoula County Community Justice Department (crime victim advocate program)

**1. How will request assist in achieving Department Goal and benefit the customer?**

Salary and fringe increase for Missoula County Community Justice Dept (MCCJD).

**2. What specifically is needed to achieve this goal?**

Continuation of advocacy and prevention program services for the City of Missoula.

**3. Cost Impact of New Program:**

| Account #                | Item            | Qty | Unit Cost | Requested One-Time | Requested Ongoing | FY 2024 Unfunded | FY 2024 Funded | Proposed FY 2025 Ongoing |
|--------------------------|-----------------|-----|-----------|--------------------|-------------------|------------------|----------------|--------------------------|
| <b>Ongoing Expenses</b>  |                 |     |           |                    |                   |                  |                |                          |
| 1000.270.410371.700      | Salary & Fringe | 1   | 21786     |                    | 21,786            | 21,786           | —              | —                        |
|                          |                 |     |           |                    | —                 | —                | —              | —                        |
|                          |                 |     |           |                    | —                 | —                | —              | —                        |
|                          |                 |     |           |                    | —                 | —                | —              | —                        |
|                          |                 |     |           |                    | —                 | —                | —              | —                        |
|                          |                 |     |           |                    | —                 | —                | —              | —                        |
|                          |                 |     |           |                    | —                 | —                | —              | —                        |
|                          |                 |     |           |                    | —                 | —                | —              | —                        |
| <b>One-time Expenses</b> |                 |     |           |                    |                   |                  |                |                          |
|                          |                 |     |           | —                  |                   | —                | —              | —                        |
|                          |                 |     |           | —                  |                   | —                | —              | —                        |
|                          |                 |     |           | —                  |                   | —                | —              | —                        |
|                          |                 |     |           | —                  |                   | —                | —              | —                        |
|                          |                 |     |           | —                  |                   | —                | —              | —                        |
|                          |                 |     |           | —                  |                   | —                | —              | —                        |
| <b>Expense Sub-Total</b> |                 |     |           | —                  | 21,786            | 21,786           | —              | —                        |

**Revenue Offset:**

| Account #                | Revenue Description |            |  |  | Proposed Onetime Revenue | Proposed Ongoing Revenue |
|--------------------------|---------------------|------------|--|--|--------------------------|--------------------------|
| 1000                     | T                   | Tax Funded |  |  |                          | 21,786                   |
|                          |                     |            |  |  |                          |                          |
|                          |                     |            |  |  |                          |                          |
|                          |                     |            |  |  |                          |                          |
| <b>Revenue Sub-Total</b> |                     |            |  |  | —                        | 21,786                   |

**4. What sort of data will be used to report results and outcomes of request?**

MCCJD submits semi-annual service reports to the City of Missoula.

**Requested/Proposed Funding Source**

|                          | One-time | Ongoing |
|--------------------------|----------|---------|
| <b>Tax or Assessment</b> | —        | 21,786  |
| <b>Non-tax</b>           | —        | —       |
| <b>Fund Balance</b>      | —        | —       |
| <b>Total</b>             | —        | 21,786  |