



North Carolina Department of Public Safety

Juvenile Justice and Delinquency Prevention

JCPC Program Agreement Revision

SECTION I A	SPONSORING AGENCY AND PROGRAM INFORMATION		
FUNDING PERIOD:	FY 25-26	DPS/JCPC FUNDING # (cont only)	1741-24155
COUNTY:	Guilford	AREA:	Piedmont Area
NAME OF PROGRAM:	McCormick Cares Clinical Assessments		
SPONSORING AGENCY:	McCormick Cares Incorporated		

Name:	Gabrielle Galbrieth		Title:	Program Manager	
Mailing Address:	5601 Executive Center Drive Suite 106		City:	Charlotte	Zip: 28212
Phone:	(336) 517-4702	Fax:		E-mail:	GGalbrieth@nchealthpartners.com

Program Manager Name & Address (same person on signature page)

THE REASONS FOR THIS BUDGET REVISION ARE AS FOLLOWS:

- | | |
|--|--|
| <input type="checkbox"/> INCREASE IN DPS/JCPC REVENUES | <input type="checkbox"/> DECREASE IN DPS/JCPC REVENUES |
| <input type="checkbox"/> INCREASE IN OTHER REVENUES | <input type="checkbox"/> DECREASE IN OTHER REVENUES |
| <input type="checkbox"/> CAPITAL EXPENDITURE ADJUSTMENT | <input type="checkbox"/> CONTRACTED SERVICE ADJUSTMENT |
| <input type="checkbox"/> LAPSED SALARY ADJUSTMENT | <input type="checkbox"/> LINE ITEM ADJUSTMENT |
| <input checked="" type="checkbox"/> CHANGE IN COMPONENT (attach revised Component Narrative) | |

COMMENTS: Update location

LINE ITEMS IN THE CURRENT DPS/JCPC APPROVED BUDGET ARE BEING ADJUSTED AS FOLLOWS:

Item #	Increase	Decrease	Explanation
Total			Difference

COMPONENT NARRATIVE

Identify below the program section of the program agreement this revision will impact and the changes being requested.

McCormick Cares Clinical Assessments is requesting an update to reflect our address at the Greensboro and High Point Court Offices. This change will allow us to provide assessments for youth within the community at locations that are more feasible and accessible.

(Greensboro Office)

2301 West Meadowview Road, 2nd floor
Greensboro, North Carolina 27407

336-889-7623 (High Point Office)

505 East Green Drive, Suite 203
High Point, North Carolina 27260

BUDGET NARRATIVE			
McCormick Cares Clinical Assessments		Fiscal Year	FY 25-26
Item #	Justification	Expense	In Kind Expense
120	Program Manager		\$15,000
120	Licensed Therapist	\$50,000	
180	Social Security: $\$50,000 \times 6.2\% = \$3,100$ Medicare: $\$50,000 \times 1.45\% = \725 Total FICA (employee portion) = \$3,825		\$3,825
TOTAL		\$50,000	\$18,825

Job Title	Annual Expense Wages	Annual In Kind Wages
Program Manager: Oversee the day-to-day operations of the assessment program. -Ensure compliance with JCPC guidelines and referral protocols. Supervise assessment staff and provide case consultation as needed.		\$15,000
Licensed Therapist: Conduct structured risk and needs assessments, substance use screenings, and behavioral assessments. Develop detailed reports with recommendations for intervention and service linkage.	\$50,000	
TOTAL	\$50,000	\$15,000

Budget Information Page**Program:** McCormick Cares Clinical Assessments**Fiscal Year:** FY 25-26**Number of Months:** 1

	Cash	In Kind	Total
I. Personnel Services	\$50,000	\$18,825	\$68,825
120 Salaries & Wages	\$50,000	\$15,000	\$65,000
180 Fringe Benefits		\$3,825	\$3,825
190 Professional Services*			\$0
*Contracts MUST be attached			
II. Supplies & Materials			\$0
210 Household & Cleaning			\$0
220 Food & Provisions			\$0
230 Education & Medical			\$0
240 Construction & Repair			\$0
250 Vehicle Supplies & Materials			\$0
260 Office Supplies and Materials			\$0
280 Heating & Utility Supplies			\$0
290 Other Supplies and Materials			\$0
III. Current Obligations & Services			\$0
310 Travel & Transportation			\$0
320 Communications			\$0
330 Utilities			\$0
340 Printing & Binding			\$0
350 Repairs & Maintenance			\$0
370 Advertising			\$0
380 Data Processing			\$0
390 Other Services			\$0
IV. Fixed Charges & Other Expenses			\$0
410 Rental or Real Property			\$0
430 Equipment Rental			\$0
440 Service and Maint. Contracts			\$0
450 Insurance & Bonding			\$0
490 Other Fixed Charges			\$0
V. Capital Outlay			\$0
[This Section Requires Cash Match]			
510 Office Furniture & Equipment			\$0
530 Educational Equipment			\$0
540 Motor Vehicle			\$0
550 Other Equipment			\$0
580 Buildings, Structure & Improv.			\$0
Total	\$50,000	\$18,825	\$68,825

SOURCES OF PROGRAM REVENUE (ALL SOURCES)

CURRENT BUDGET REVENUE			NEW BUDGET REVENUE		
\$50,000			\$50,000		
DPS/JCPC Funds			DPS/JCPC Funds		
County Cash	<i>Source of County Cash</i>		County Cash	<i>Source of County Cash</i>	
Local Cash 1	<i>Source of Local Cash 1</i>		Local Cash 1	<i>Source of Local Cash 1</i>	
Local Cash 2	<i>Source of Local Cash 2</i>		Local Cash 2	<i>Source of Local Cash 2</i>	
\$18,825	In-Kind		\$18,825	In-Kind	
Local In-Kind	<i>Source of Local In-Kind</i>		Local In-Kind	<i>Source of Local In-Kind</i>	
Local In-Kind 1	<i>Source of Local In-Kind 1</i>		Local In-Kind 1	<i>Source of Local In-Kind 1</i>	
Local In-Kind 2	<i>Source of Local In-Kind 2</i>		Local In-Kind 2	<i>Source of Local In-Kind 2</i>	
Local In-Kind 3	<i>Source of Local In-Kind 3</i>		Local In-Kind 3	<i>Source of Local In-Kind 3</i>	
Local In-Kind 4	<i>Source of Local In-Kind 4</i>		Local In-Kind 4	<i>Source of Local In-Kind 4</i>	
Local In-Kind 5	<i>Source of Local In-Kind 5</i>		Local In-Kind 5	<i>Source of Local In-Kind 5</i>	
Other 1	<i>Source of Other 1</i>		Other 1	<i>Source of Other 1</i>	
Other 2	<i>Source of Other 2</i>		Other 2	<i>Source of Other 2</i>	
Other 3	<i>Source of Other 3</i>		Other 3	<i>Source of Other 3</i>	
Other 4	<i>Source of Other 4</i>		Other 4	<i>Source of Other 4</i>	
\$68,825			\$68,825		
TOTAL			TOTAL	DIFFERENCE	\$0
\$15,000	30%	\$18,825	\$15,000	30%	\$18,825
Required Local Match	Local Match Rate	Local Match Provided	Required Local Match	Local Match Rate	Local Match Provided

Authorizing Official, Department of Public Safety

Date

Chair, County Board of Commissioners or County Finance Director

Date

Chair, Juvenile Crime Prevention Council

Date

Program Manager

Date