

## BOARD OF SUPERVISORS AGENDA ITEM REPORT CONTRACTS / AWARDS / GRANTS

○ Award ○ Contract ○ Grant

Requested Board Meeting Date: 10/2/2018

\* = Mandatory, information must be provided

or Procurement Director Award [

## \*Contractor/Vendor Name/Grantor (DBA):

STATE OF ARIZONA DEPARTMENT OF HOMELAND SECURITY (AZDOHS)

## \*Project Title/Description:

IGA Amendment #2 for FFY2016 Operation Stonegarden Grant Program Award 160404-03 OPSG Overtime and Mileage

## \*Purpose:

The purpose of this Amendment is to accept additional funding of \$47,350.00 from the AZDOHS to reimburse the Sheriff's Department for law enforcement services that were previously provided in 2017. The amendment also extends the deadline to submit the reimbursement request to October 31, 2018.

### \*Procurement Method:

Not applicable

## \*Program Goals/Predicted Outcomes:

Increased capability to prevent, protect against, and respond to border security issues; enhanced State Homeland Security Strategies; increased coordination and collaboration among Federal, State, Local, Tribal, and territorial law enforcement agencies; provided intelligence-based operations; increased or augmented specialized/technical law enforcement elements operational activities; and increased operational, material and technological readiness of local and Tribal law enforcement agencies.

## \*Public Benefit:

Enhanced security of United States borders along routes of ingress from international borders to include travel corridors in Pima County.

## \*Metrics Available to Measure Performance:

Operational statistics from OPSG deployments and data provided to Federal Government.

#### \*Retroactive:

The AZDOHS has worked diligently with its Federal partners to obtain additional funding the Sheriff's Department for services completed in 2017. Amendment #1 was placed on the BOS agenda on 9/4/18 but it was not approved. Subsequently, County Administration has reviewed this matter and ascertained that this funding was for reimbursement of services already provided. As a result, the AZDOHS issued Amendment #2 for Pima County to reconsider whether to accept the the funds. The next available agenda for the BOS is October 2, 2018. If approved, it will provide sufficient time for the Sheriff's Department to submit the reimbursement request to the AZDOHS by October 31, 2018. If disapproved, the department will be unable to receive reimbursement for services that were performed last year.

Contract / Award Informa	<u>tion</u>	
Document Type:	Department Code:	Contract Number (i.e.,15-123):
Effective Date:	Termination Date:	Prior Contract Number (Synergen/CMS):
☐ Expense Amount: \$*		Revenue Amount: \$
*Funding Source(s) requi	red:	
Funding from General Fund	? CYes CNo If Yes	\$ %
Contract is fully or partially If Yes, is the Contract to a	funded with Federal Funds? a vendor or subrecipient?	☐ Yes ☐ No
Were insurance or indemnit	•	☐ Yes ☐ No
Vendor is using a Social Se	ecurity Number?	☐ Yes . ☐ No
If Yes, attach the required	form per Administrative Procedure	<del>22-73.</del>
A 4/D 1 14		
Amendment / Revised Aw		0 1 11 1 7 45 400
		Contract Number (i.e.,15-123):
		AMS Version No.:
Enective Date.		New Termination Date:  Prior Contract No. (Synargen/CMS):
← Expense or ← Revenue	CIncrease C Decrease	Prior Contract No. (Synergen/CMS):
Is there revenue included?		Von \$
*Funding Source(s) requir		165 4
· analing obtailed of require		:
Funding from General Fund	? CYes C No If	Yes\$%
Grant/Amendment Informa	ation (for grants acceptance and	d awards) C Award
	Department Code: SD	•
Effective Date: 11/1/2016	Termination Date: 12/3	1/2017 Amendment Number: 2
☐ Match Amount: \$		⊠ Revenue Amount: \$ 47,350
*All Funding Source(s) red	quired: Federal - Department of Ho	omeland Security
3	State - Arizona Department	t of Homeland Security
*Match funding from Gene	eral Fund? ○Yes ●No If	Yes \$ %
*Match funding from other	r sources? Yes No If	Yes \$ %
*Funding Source:		
	ved, is funding coming directlessed through other organization	•
Contact: Yuko Jarvis		
Department: Sheriff		Telephone: (520) 351-6958
Department Director Signa	ture/Date: Allin Carte	- 9/20/2018
Deputy County Administrat	<del>}</del>	
County Administrator Signa		Multum 9/26/18
(Required for Board Agenda/Addend		/ ///
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Revised 5/2018

Page 2 of 2

## SUBGRANTEE AGREEMENT Amendment #2 16-AZDOHS-OPSG-160404-03

## Between

# The Arizona Department of Homeland Security And

## Pima County Sheriff's Department

WHEREAS, A.R.S. § 41-4254 charges the Arizona Department of Homeland Security (AZDOHS) with the responsibility of administering funds.

Pursuant to Section XII of the subgrantee Agreement between the Arizona Department of Homeland Security and the subgrantee the following section of the above referenced Subgrantee Agreement is hereby amended as follows:

## III. DESCRIPTION OF SERVICES:

The subrecipient shall provide the services for the State of Arizona, Arizona Department of Homeland Security as approved in the grant application titled "OPSG Overtime and Mileage" and funded at \$1,176,208 (as may have been modified by the award letter).

## SHALL BE CHANGED TO READ:

The subrecipient shall provide the services for the State of Arizona, Arizona Department of Homeland Security as approved in the grant application titled "OPSG Overtime and Mileage" and funded at \$1,223,558 (as may have been modified by the award letter).

## IV. MANNER OF FINANCING:

The AZDOHS shall:

Provide up to \$1,176,208 to the subrecipient for services provided under Paragraph III.

## SHALL BE CHANGED TO READ:

Provide up to \$1,223,558 to the subrecipient for services provided under Paragraph III.

## X. REPORTING REQUIREMENTS

Regular reports by the Subrecipient shall include:

## f) Financial Reimbursements

The Subrecipient shall provide AZDOHS request for reimbursement as frequently as monthly but not less than quarterly. Reimbursement requests are only required when expenses have been incurred. Reimbursement requests shall be submitted with the Reimbursement Form provided by the AZDOHS staff. The Subrecipient shall submit a final reimbursement request for expenses received and invoiced prior to the end of the termination of this Agreement no more than forty-five (45) calendar days after the end of the Agreement. Requests for reimbursement received by AZDOHS later than forty-five (45) calendar days after the Agreement termination will not be paid. The final reimbursement request as submitted shall be marked as final.

#### SHALL BE CHANGED TO READ:

## f) Financial Reimbursements

The Subrecipient shall provide AZDOHS request for reimbursement as frequently as monthly but not less than quarterly. Reimbursement requests are only required when expenses have

been incurred. Reimbursement requests shall be submitted with the Reimbursement Form provided by the AZDOHS staff. The Subrecipient shall submit a final reimbursement request for expenses received and invoiced prior to the end of the termination of this Agreement no more than **Three Hundred and Four (304) calendar days** after the end of the Agreement. Requests for reimbursement received by AZDOHS later than **Three Hundred and Four (304) calendar days** after the Agreement termination will not be paid. The final reimbursement request as submitted shall be marked as final.

All other terms of the original Subgrantee Agreement remain effective.

In Witness Whereof, the parties have set their hands to this AMENDMENT as of the day and year herein indicated and agree that all parties are obligated to follow all terms and conditions of the original subgrantee agreement and are liable for all funds received by the AZDOHS.

## **IN WITNESS WHEREOF**

The parties hereto agree to execute this Amendment.

FOR AND BEHALF OF THE	FOR AND BEHALF OF THE	
Pima County Sheriff's Department	Arizona Department of Homeland Security	
Authorized Signature	Gilbert M. Orrantia	
9/25/13	Director	
Date	Date	

(Please be sure to complete and mall two original documents to the Arizona Department of Homeland Security.)

Any unauthorized changes to this document will result in termination of this award.

## **PIMA COUNTY**

Richard Elias, Chairman, Board of Supervisors	Date
Attest:	
luli <b>e</b> Castaneda, Clerk of the Board	Date
APPROVED AS TO FORM AND LEGAL AUTHORITY:	
Sulari	9/20/18
Conuty County Attornoy	Dato