

BOARD OF SUPERVISORS AGENDA ITEM REPORT CONTRACTS / AWARDS / GRANTS

← Award ← Contract ● Grant

Requested Board Meeting Date: 3/5/19

* = Mandatory, information must be provided

or Procurement Director Award

*Contractor/Vendor Name/Grantor (DBA):

Executive Office of the President Office of National Drug Control Policy

*Project Title/Description:

High Intensity Drug Trafficking Areas (HIDTA) Program

*Purpose:

Funding provided to County Attorney's Office to facilitate, support and enhance collaborative drug control efforts throughout Arizona. This funding is for salary only.

*Procurement Method:

Not applicable to grant awards

*Program Goals/Predicted Outcomes:

The intent of the HIDTA program is to enhance collaborative drug control efforts among law enforcement agencies and community-based organizations with a common voice and unified strategy and thereby significantly reduce the impact of illegal trafficking and use of drugs throughout Arizona.

*Public Benefit:

Public safety and reduction of drug trafficking activities.

*Metrics Available to Measure Performance:

Grant to defray drug trafficking costs; no metrics available

*Retroactive:

Per ONDCP IGA, retroactive to 11/13/2018

Contract / Award Information				
Document Type: Department Code:	Contract Number (i.e.,15-123):			
Effective Date: Termination Date:	ctive Date: Termination Date: Prior Contract Number (Synergen/CMS):			
Expense Amount: \$* Revenue Amount: \$				
*Funding Source(s) required:				
Funding from General Fund? OYes ONo If Yes	\$%			
Contract is fully or partially funded with Federal Funds?	🗌 Yes 🔲 No			
*Is the Contract to a vendor or subrecipient?				
Were insurance or indemnity clauses modified?	🗌 Yes 🔲 No			
lf Yes, attach Risk's approval				
Vendor is using a Social Security Number?	🗌 Yes 🔲 No			
If Yes, attach the required form per Administrative Procedur	e 22-73.			
Amendment / Revised Award Information	Contract Number (i.e. 15, 132);			
	Contract Number (i.e.,15-123):			
	AMS Version No.:			
ffective Date: New Termination Date:				
Prior Contract No. (Synergen/CMS): CExpense or CRevenue CIncrease Decrease Amount This Amendment: \$				
Is there revenue included? CYes CNo If Yes \$ *Funding Source(s) required:				
• • • •	f Yes \$ %			
Funding from General Fund? CYes CNo	ad awards) C Award C Amendment			
Funding from General Fund? Yes C No Grant/Amendment Information (for grants acceptance ar Document Type: GTAM Department Code: SD	nd awards)			
Funding from General Fund? Yes C No Grant/Amendment Information (for grants acceptance ar Document Type: GTAM Department Code: SD Effective Date: 01/01/18	nd awards)			
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Revised 8/2017

E	autius Office of the Dussidant	AWARD		
Executive Office of the President Office of National Drug Control Policy		Grant	Page 1 of 1	
1.	Recipient Name and Address	4. Award Number: G18SA0002A		
	Sheriff Mark D. Napier			
	Pima County Sheriff's Department	5. Grant Period: From 01/01/2018 to 12/31/20		
	1750 East Benson Highway			
	Tucson, AZ 85714-1758			
2.	Total Amount of the Federal Funds Obligated: \$1,054,305	6. Federal Award Date: 11/13/2018	7. Action	
2A.	Budget Approved by the Federal Awarding Agency \$1,054,305	8. Supplement Number 2	2 Initial	
			XSupplemental	
3.	CFDA Name and Number:	9. Previous Award Amoun	at: \$1,038,466.00	
	High Intensity Drug Trafficking Areas Program - 95.001			
3A.	Project Description	10. Amount of Federal Funds Obligated by thisAction:\$15,839.16		
	High Intensity Drug Trafficking Areas (HIDTA) Program	11. Total Amount of Federal Award: \$1,054,305.16		
12.	The above grant is approved subject to such con Grant.	ditions or limitation as are	set forth in the original	
13.	Statutory Authority for Grant: Public Law:115-141			
	AGENCY APPROVAL	RECIPIEN	T ACCEPTANCE	
14.	Typed Name and Title of Approving Official	15. Typed Name and Title of Authorized Official		
	Michael K. Gottlieb	Mark D. Napier		
	Associate Director			
	Office of National Drug Control Policy	Pima County Sheriff's Department		
16.	Signature of Approving ONDCP Official	17. Signature of Authorized Recipient/Date		
	Michael K. Yottlie B	200	To 1	
holige:	AGENCY USE ON	LY		
18.	Accounting Classification Code	19. HIDTA AWARD		
	DUNS: 781693049	OND1070DB1819XX	OND6113	
	EIN: 1866000543B7	OND200000000	OC 410001	
		JID: 61172		

PIMA COUNTY

Chairman, Board of Supervisors

Date

Clerk of the Board

Date

APPROVED AS TO FORM AND LEGAL AUTHORITY:

Sh

2/6/19

Deputy County Attorney

Date