



FS Agreement No. 21-LE-11051360-011  
Cooperator Agreement No. \_\_\_\_\_  
Modification No. 02

**EXHIBIT B**

**COOPERATIVE LAW ENFORCEMENT ANNUAL DRUG OPERATIONS PLAN &  
FINANCIAL PLAN**

**Between The  
LAKE, COUNTY OF  
(Sheriff's Office)**

**And the  
USDA, FOREST SERVICE  
MENDOCINO NATIONAL FOREST**

**2021 CONTROLLED SUBSTANCE ANNUAL OPERATING AND FINANCIAL PLAN**

This Annual Financial and Operating Plan (Annual Operating Plan), is hereby made and entered into by and between the Lake, County Of, (Sheriff's Office), hereinafter referred to as "LCSO," and the USDA, Forest Service, Mendocino National Forest, hereinafter referred to as the "U.S. Forest Service," under the provisions of Cooperative Law Enforcement Agreement #21-LE-11051360-011 executed on . This Annual Operating Plan is made and agreed to as of the last date signed below and is for the estimated period beginning October 01, 2020 and ending September 30, 2021.

Previous Year Carryover: \$0.00  
FY-2021 Obligation: \$19,000  
**FY-2021 Total Annual Operating Plan: \$19,000**

**I. GENERAL:**

A. The following individuals shall be the designated and alternate representative(s) of each party, so designated to make or receive requests for special enforcement activities.

**Principal Cooperator Contacts:**

<b>Cooperator Program Contact</b>	<b>Cooperator Administrative Contact</b>
Brian Martin, Sheriff Lake County Sheriff's Office 1220 Martin Street Lakeport, CA 95453-9708 Phone: 707-262-4098 FAX: 707-263-4220 E-Mail: <a href="mailto:brian.martin@lakecountyca.gov">brian.martin@lakecountyca.gov</a>	Mary Beth Strong Lake County Sheriff Office 1220 Martin Street Lakeport, CA 95453 Phone: 707-262-4218 FAX: 707-262-4225 E-Mail: <a href="mailto:mbs@co.lake.ca.us">mbs@co.lake.ca.us</a>



<b>Cooperator Alternate Contact</b>
<p>Chris Macedo, Undersheriff Lake County Sheriff Office 1220 Martin Street Lakeport, CA 95453 Phone: 707-262-4200 FAX: 707-263-4220 E-Mail: <a href="mailto:cjm@co.lake.ca.us">cjm@co.lake.ca.us</a></p>

**Principal U.S. Forest Service Contacts:**

<b>U.S. Forest Service Program Manager Contact</b>	<b>U.S. Forest Service Administrative Contact</b>
<p>Roger Mayo, Special Agent Mendocino National Forest Upper Lake Ranger District 10025 Elk Mountain Road Upper Lake, CA 95485-9500 Phone: 707-275-1404 FAX: 707-275-0676 E-Mail: <a href="mailto:roger.mayo@usda.gov">roger.mayo@usda.gov</a></p>	<p>Heather Rivera, Administrative Specialist Pacific Southwest Regional Office – LEI 1323 Club Drive Vallejo, CA 94592 Phone: 707-562-8646 FAX: 707-562-9031 E-Mail: <a href="mailto:heather.rivera@usda.gov">heather.rivera@usda.gov</a></p>
<b>U.S. Forest Service Program Coordinator Contact</b>	<b>U.S. Forest Service Grants and Agreement Contact</b>
<p>Tony Magarrell Assistant Special Agent in Charge Pacific Southwest Regional Office – LEI 1323 Club Drive Vallejo, CA 94592 phone: 707-562-8662 (office) FAX: 707-562-9031 E-Mail: <a href="mailto:tony.magarrell@usda.gov">tony.magarrell@usda.gov</a></p>	<p>Geraldine C. Bordash (Gerri) Grants Management Specialist Pacific Southwest Region 1323 Club Drive Vallejo, CA 94592-1110 Phone: 707-562-8782 FAX: 707-562-9144 E-Mail: <a href="mailto:gerri.bordash@usda.gov">gerri.bordash@usda.gov</a></p>

**II. CONTROLLED SUBSTANCE OPERATIONS**

Pursuant to IV- J of Agreement No. 21-LE-11051360-011, the following is in support of operations to suppress manufacturing and trafficking of controlled substances on or affecting the administration of National Forest System lands, with an emphasis on identification, apprehension and prosecution of suspects engaged in these activities:

A. The *U.S. Forest Service* agrees:

1. To reimburse **LCSO** for expenditures associated with the detection of locations and activities related to illegal production and trafficking of controlled substances, including:



- a. Ground reconnaissance to identify and inventory locations and activities associated with producing or trafficking controlled substances.
  - b. Aerial reconnaissance to identify and inventory locations and activities associated with producing or trafficking controlled substances.
2. To reimburse **LCSO** for certain expenses resulting from investigative activities associated with investigating cases involving the illegal production or trafficking of controlled substances on or affecting the administration of National Forest System lands, including:
- a. Surveillance operations to identify persons illegally producing or trafficking controlled substances.
  - b. Apprehension of persons suspected of producing or trafficking controlled substances.
  - c. Collection of evidence to support prosecution of persons suspected of illegally producing or trafficking controlled substances.
  - d. Prosecution of persons suspected of producing or trafficking controlled substances.
3. To reimburse **LCSO** for expenses resulting from the removal of cannabis plants from National Forest System lands. When circumstances indicate that removal of the cannabis plants is required before an investigation to determine the person(s) responsible can be completed, eradication operations must be approved by the U.S. Forest Service prior to taking place.

**Note:** **LCSO** retains the authority to eradicate cannabis plants from National Forest System lands without reimbursement from the U.S. Forest Service at its discretion.

4. To reimburse **LCSO** for the costs of purchasing supplies and equipment used exclusively for activities described in items A.1, A.2 and A.3 of this Plan. Purchases must be agreed to and approved by the U.S. Forest Service.

Purchases may **not exceed 10% of the total allocation** without prior approval by the U.S. Forest Service Designated Representative.

B. **LCSO** agrees:

1. Within its capability, to perform the following activities on National Forest System lands:



- a. Detect and inventory locations associated with illegal production or trafficking of controlled substances, and notify the U.S. Forest Service of such locations as soon as possible.
  - b. Investigations to determine the person(s) responsible for manufacturing or trafficking controlled substances.
  - c. Upon request and prior approval of the U.S. Forest Service, remove cannabis plants from National Forest System lands.
2. To furnish all activity reports, crime reports, investigation reports, and other reports or records, resulting from activities identified in **Section II, A** of this Operating and Financial Plan to the affected Forests for review and forwarding to the Regional Office for processing.

C. The *U.S. Forest Service* and **LCSO** mutually agree to the following:

- 1. The following rate schedule will apply to all expenditures that may be reimbursed to **LCSO** under this agreement:

Salary (base)	<b>\$52.00</b> per hour,
Salary (overtime)	<b>\$62.50</b> per hour,
Per diem costs	<b>\$39/M&amp;IE + \$60/Lodging,</b>
Travel (mileage and fares)	<b>\$0.41</b> per mile,
Helicopter flight time	<b>Actual documented costs,</b>
Supplies or equipment	<b>Actual documented costs</b>

- 2. The total expenditures of **LCSO** that may be reimbursed may not exceed.... **\$19,000**  
The total expenditures for item **A.4** may not exceed..... **10%** of the total allocation.

D. **Any remaining funding in this Annual Operating Plan may be carried forward to the next fiscal year and will be available to spend through the term of the Cooperative Law Enforcement Agreement, or de-obligated at the request of the U.S. Forest Service.**

**III. BILLING FREQUENCY:**

*See Cooperative Law Enforcement Agreement Provisions II-H and III-B for additional information.*

**LCSO** will furnish *monthly itemized statements* of expenses to the U.S. Forest Service for expenditures that may be reimbursed as identified in items II A.1, A.2, A.3, and A.4 of this Plan. Attachment A, Law Enforcement Billing Summary, Drug Enforcement, must be completed and submitted to the contacts in (a) below for each billing statement.

- a. Mail copies of itemized billing statements (Attachment A) to:



Heather Rivera, Administrative Specialist  
Pacific Southwest Regional Office - LEI  
1323 Club Drive  
Vallejo, CA 94592

Send photo copy to:  
Roger Mayo, Special Agent  
Upper Lake Ranger District  
10025 Elk Mountain Road  
Upper Lake, CA 95485-9500

**b. Send hard copy invoices to:**

U.S. Forest Service  
Albuquerque Service Center  
Payments – Grants & Agreements  
101 B Sun Ave NE  
Albuquerque, NM 87109

Or fax to: (877) 687-4894

Or e-mail scanned invoice to: [sm.fs.asc\\_ga@usda.gov](mailto:sm.fs.asc_ga@usda.gov)

- c. Final billings for reimbursement on this Annual Operating Plan (AOP) must be received by the U.S. Forest Service before October 30, 2021 in order to receive payment.
- d. Annually update the registration of the County Sheriff's DUNS# on the System for Award Management (SAM) website at [www.sam.gov](http://www.sam.gov) for the verification of the EFT (Electronic Funds Transfer) banking information.**



In witness whereof, the parties hereto have executed this Annual Operating Plan as of the last date written below.

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BRIAN MARTIN, Sheriff  
Lake County

Date

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Chairperson, Board of Supervisors  
Lake County

Date

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DON HOANG, Special Agent in Charge  
U.S. Forest Service, Pacific Southwest Region

Date

The authority and format of this agreement has been reviewed and approved for signature.

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GERALDINE C. BORDASH

U.S. Forest Service, Grants Management Specialist

Date

Burden Statement

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0217. The time required to complete this information collection is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice). USDA is an equal opportunity provider and employer.

Law Enforcement Billing Summary  
Drug

USDA Forest Service, Mendocino NF	County: LAKE
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Law Enforcement Billing Summary	Month:	Year:
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Check appropriate block:      _____ Coop Patrol <input checked="" type="checkbox"/> Controlled Substance Operations
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A. Total Patrol/Labor Hours:	
B. Rate per Hour:	\$ _____
C. Total Salary Reimbursement: (subtotal 1)	\$ _____
D. Other Allowable Reimbursements: (mileage, dispatch, court, clerical, equipment, etc.)	
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
E. Total of D1 - D4 (subtotal 2)	\$ _____
F. Total Invoice Reimbursement:	\$ _____
G. Total Reimbursement for Maximum Op Plan Amt:	\$ _____

Certification Statement

County Sheriff		USFS Special Agent	
I certify the above billing/invoice is accurate and complete.		I certify services have been received as stated.	
Sheriff	Date	USFS Special Agent	Date



**USDA**  
**Forest Service**

**LAW ENFORCEMENT ACTIVITY**  
**REPORT**  
*(Ref. FSM 5300)*

**Agreement Number**  
21-LE-11051360-011

**Initial**  **Follow Up**

1. Cooperator (Department Name): <b>Lake County Sheriff's Department</b>			2. National Forest: <b>Mendocino</b>			
3. Record (1)	4. Action Code (2) (FS Use Only) U-Update	5. Unit Identification (3-11)			6. Date (12-5)	
		Region	Forest	State	County	Month
		05	08	CA	Mendo	
7. Patrol Units (16-18)		8. Search and Rescue Missions Hours (19-22)		No. (23-24)	9. Property Stolen (25-30) Dollars	
10. Property Recovered (31-36) Dollars			11. Controlled Substances Seized (37-45) Dollars (Street Value)			
12. Record (1)		13. Number of Crimes Occurring on National Forest System Lands				

13a. Item # (16-17)	13b. Type of Crime	13c. Coop Agreement Reimbursed Activity (18-20)	13d. Non-Coop Agreement Activities (21-23)
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**PART I - FBI UNIFORM CRIME REPORTING**

01	Criminal Homicide		
02	Forcible Rape		
03	Robbery		
04	Aggravated Assault		
05	Burglary - Breaking or Entering		
06	Larceny - Theft (Except Motor Vehicle)		
07	Motor Vehicle - Theft		
08	Arson		

**PART II - FBI UNIFORM CRIME REPORTING**

09	Other Assaults (simple)		
10	Stolen Property by Buying, Receiving, Possessing		
11	Vandalism		
12	Weapons - Carry, Possessing		
13	Narcotic Drug Law		
14	Driving Under the Influence		
15	Liquor Laws		
16	Drunkenness		
17	Disorderly Conduct		
18	All Other Offenses		

**PART III - COOPERATOR ASSISTS**

19	Assists to Forest Service Officers		
20	Assists to Public		

Remarks:

**NOTE:** This document is for OFFICIAL USE ONLY. It and its contents are not to be distributed outside your agency, nor duplicated, without prior approval of the USDA, Forest Service, Law Enforcement and Investigations.