



DOMESTIC CANNABIS ERADICATION SUPPRESSION PROGRAM

RETURN OF UNOBLIGATED FEDERAL FUNDS

(THIS FORM MUST ACCOMPANY THE FINAL DECEMBER ACCOUNTING FORM & SF-425)

STATE OF:

California

LOA AGENCY:

County of Lake

LOA NUMBER:

2018-21

CALENDAR YEAR:

FY 2018

TOTAL AMOUNT OF FEDERAL FUNDS RECEIVED:

\$ 210,000.00

TOTAL AMOUNT OF FEDERAL FUNDS OBLIGATED:

\$ 125,179.82

TOTAL AMOUNT OF UNOBLIGATED FEDERAL FUNDS:

\$ 84,820.18

BRIEF JUSTIFICATION FOR UNOBLIGATED BALANCE:

Due to the Sulpher, Pawnee, Spring, Ranch and River (Mendocino Complex) Fires, Lake County was unable to utilize all of its marijuana funding for the period 10/1/17-9/30/18.

SIGNATURE OF AGENCY OFFICIAL: _____

Brian L. Martin, Sheriff/Coroner

PRINTED AGENCY NAME AND TITLE:

11/05/2018

DATE:

FEDERAL FINANCIAL REPORT

(Follow form instructions)

1. Federal Agency and Organizational Element to Which Report is Submitted DRUG ENFORCEMENT ADMINISTRATION	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) DCE/SP: 2018-21	Page 1 of pages
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3. Recipient Organization (Name and complete address including Zip code) County of Lake, Lake County Sheriff's Department P.O. Box 489, Lakeport, CA 95453
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4a. DUNS Number 113350339	4b. EIN 94-6000825	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Final	7. Basis of Accounting <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual
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8. Project/Grant Period (Month, Day, Year) From: 10/01/2017 To: 09/30/2018	9. Reporting Period End Date (Month, Day, Year) 09/30/2018
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10. Transactions	Cumulative
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(Use lines a-c for single or combined multiple grant reporting)

Federal Cash (To report multiple grants separately, also use FFR Attachment):	
a. Cash Receipts	\$ 210,000.00
b. Cash Disbursements	\$ 125,179.82
c. Cash on Hand (line a minus b)	\$ 84,820.18

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:	
d. Total Federal funds authorized	\$ 210,000.00
e. Federal share of expenditures	\$ 125,179.82
f. Federal share of unliquidated obligations	\$ 0
g. Total Federal share (sum of lines e and f)	\$ 125,179.82
h. Unobligated balance of Federal funds (line d minus g)	\$ 84,820.18

Recipient Share:	
i. Total recipient share required	\$ 0
j. Recipient share of expenditures	\$ 0
k. Remaining recipient share to be provided (line i minus j)	\$ 0

Program Income:	
l. Total Federal share of program income earned	\$ 0
m. Program income expended in accordance with the deduction alternative	\$ 0
n. Program income expended in accordance with the addition alternative	\$ 0
o. Unexpended program income (line l minus line m or line n)	\$ 0

11.	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
Indirect Expense							
g. Totals:							

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:
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13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and intent set forth in the award documents. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official Brian L. Martin, Sheriff/Coroner	c. Telephone (Area code, number, and extension) 707 262 4200
	d. Email Address brian.martin@lakecountycal.gov
b. Signature of Authorized Certifying Official	e. Date Report Submitted (Month, Day, Year) 11/5/2018

14. Agency use only:

Standard Form 425 - Revised 10/11/2011
 OMB Approval Number: 0348-0061
 Expiration Date: 2/28/2015

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are 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 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0061), Washington, DC 20503.

STATE/LOCAL AGENCY 2018 DCEP QUARTERLY ACCOUNTING FORM

THIS FORM IS FOR REPORTING DEA FUNDS ONLY
TO BE COMPLETED BY THE STATE/LOCAL AGENCY AND SUBMITTED TO THE DEA DCEP CONTRACTOR
ALL OTHER FORMS ARE OBSOLETE

State of **California**
LOA Number **2018-21**
LOA Agency **LAKE COUNTY SHERIFF'S OFFICE**
Quarter **October thru December (1st Quarter)**

Initial DEA Funds Allocated: **\$210,000.00**

DEA Enhancement(s):
Amendment No. 1: **\$0.00** Amendment No. 2: **\$0.00** Amendment No. 3: **\$0.00**

Total Amount Received: **\$210,000.00**

Reporting Period	Previous Cumulative	Current Quarter	Current Cumulative
Aircraft Expenses		\$0.00	\$0.00
Clothing/ Protective Gear		\$0.00	\$0.00
Container/ Space Rental		\$0.00	\$0.00
Equipment** (Not to exceed 10% of Allocation)		\$0.00	\$0.00
Miscellaneous Commercial Contracts		\$1,975.32	\$1,975.32
Overtime		\$2,883.84	\$2,883.84
Supplies/ Materials		\$164.58	\$164.58
Training		\$0.00	\$0.00
Travel/ Per Diem		\$661.25	\$661.25
Vehicle Rental		\$0.00	\$0.00
TOTAL		\$5,684.99	\$5,684.99

Total Expenditures to Date: **\$5,684.99**

Balance of Funds Allocated - Not Expended:
(Total Funds Allocated - Total Expenditures) **\$204,315.01**

Balance Cannot Exceed Total Amount Received

BLUE INK ONLY

Signature of Agency Official/Title/Date:

Mail ORIGINAL Form to DCEP Contractor

Signature of DEA DCEP Contractor/Date:

Walter McDonell

San Francisco Division, 450 Golden Gate Avenue, San Francisco, CA 94102

* Copy of receipts or supporting documents are REQUIRED for all expenses being claimed.

** Equipment expenditures should not exceed 10% of the allocated funds. All purchases must be related to eradication or investigative efforts. Purchases of durable items require DEA Coordinator's approval and expenditures more than \$2,500.00 (singly or aggregate) require DEA/HQ approval.

STATE/LOCAL AGENCY 2018 DCESP QUARTERLY ACCOUNTING FORM

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State of **California**
LOA Number **2018-21**
LOA Agency **LAKE COUNTY SHERIFF'S OFFICE**
Quarter **January thru March (2nd Quarter)**

Initial DEA Funds Allocated: **\$210,000.00**

DEA Enhancement(s):
Amendment No. 1 **\$0.00** Amendment No. 2 **\$0.00** Amendment No. 3 **\$0.00**

Total Amount Received: **\$210,000.00**

Reporting Period	Previous Cumulative	Current Quarter	Current Cumulative
Aircraft Expenses	\$0.00	\$2,700.00	\$2,700.00
Clothing/ Protective Gear	\$0.00	\$0.00	\$0.00
Container/ Space Rental	\$0.00	\$0.00	\$0.00
Equipment** (Not to exceed 10% of Allocation)	\$0.00	\$0.00	\$0.00
Miscellaneous Commercial Contracts	\$1,975.32	\$219.68	\$2,195.00
Overtime	\$2,883.84	\$4,311.68	\$7,195.52
Supplies/ Materials	\$164.58	\$700.13	\$864.71
Training	\$0.00	\$0.00	\$0.00
Travel/ Per Diem	\$661.25	\$840.23	\$1,501.48
Vehicle Rental	\$0.00	\$0.00	\$0.00
TOTAL	\$5,684.99	\$8,771.72	\$14,456.71

Total Expenditures to Date: **\$14,456.71**

Balance of Funds Allocated - Not Expended:
(Total Funds Allocated - Total Expenditures) **\$195,543.29**

Balance Cannot Exceed Total Amount Received

BLUE INK ONLY

Signature of Agency Official/Title/Date:

Mail ORIGINAL Form to DCESP Contractor

Signature of-DEA DCESP Contractor/Date:

Walter McDonell
San Francisco Division, 450 Golden Gate Avenue, San Francisco, CA 94102

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STATE/LOCAL AGENCY 2018 DCESP QUARTERLY ACCOUNTING FORM

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State of **California**
LOA Number **2018-21**
LOA Agency **LAKE COUNTY SHERIFF'S OFFICE**
Quarter **April thru June (3rd Quarter)**

Initial DEA Funds Allocated: **\$210,000.00**

DEA Enhancement(s):
Amendment No. 1 **\$0.00** Amendment No. 2 **\$0.00** Amendment No. 3 **\$0.00**

Total Amount Received: **\$210,000.00**

Reporting Period	Previous Cumulative	Current Quarter	Current Cumulative
Aircraft Expenses	\$2,700.00	\$49,282.00	\$51,982.00
Clothing/ Protective Gear	\$0.00	\$1,094.15	\$1,094.15
Container/ Space Rental	\$0.00	\$0.00	\$0.00
Equipment** (Not to exceed 10% of Allocation)	\$0.00	\$10,080.09	\$10,080.09
Miscellaneous Commercial Contracts	\$2,195.00	\$323.81	\$2,518.81
Overtime	\$7,195.52	\$10,444.49	\$17,640.01
Supplies/ Materials	\$864.71	\$462.73	\$1,327.44
Training	\$0.00	\$697.90	\$697.90
Travel/ Per Diem	\$1,501.48	\$1,231.49	\$2,732.97
Vehicle Rental	\$0.00	\$0.00	\$0.00
TOTAL	\$14,456.71	\$73,616.66	\$88,073.37

Total Expenditures to Date: **\$88,073.37**

Balance of Funds Allocated - Not Expended:
(Total Funds Allocated - Total Expenditures) **\$121,926.63**

Balance Cannot Exceed Total Amount Received

BLUE INK ONLY

Signature of Agency Official/Title/Date:

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San Francisco Division, 450 Golden Gate Avenue, San Francisco, CA 94102

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State of **California**
LOA Number **2018-21**
LOA Agency **LAKE COUNTY SHERIFF'S OFFICE**
Quarter **July thru September (FINAL)**

This final accounting form, the SF425, and refund check (if applicable) are due by October 31st. Next year's funding will not be distributed until DEA/HQ has received all documents and the refund check (if applicable).

Initial DEA Funds Allocated: **\$210,000.00**
Amendment No. 1 Amendment No. 2 Amendment No. 3
DEA Enhancement(s): **\$0.00** **\$0.00** **\$0.00**
Total Amount Received: **\$210,000.00**

Reporting Period	Previous Cumulative	Current Quarter	Current Cumulative
Aircraft Expenses	\$51,982.00	\$21,850.00	\$73,832.00
Clothing/ Protective Gear	\$1,094.15	\$0.00	\$1,094.15
Container/ Space Rental	\$0.00	\$0.00	\$0.00
Equipment** (Not to exceed 10% of Allocation)	\$10,080.09	\$0.00	\$10,080.09
Miscellaneous Commercial Contracts	\$2,518.81	\$330.64	\$2,849.45
Overtime	\$17,640.01	\$13,769.28	\$31,409.29
Supplies/ Materials	\$1,327.44	\$0.00	\$1,327.44
Training	\$697.90	\$0.00	\$697.90
Travel/ Per Diem	\$2,732.97	\$1,156.53	\$3,889.50
Vehicle Rental	\$0.00	\$0.00	\$0.00
TOTAL	\$88,073.37	\$37,106.45	\$125,179.82

Total Expenditures to Date: **\$125,179.82**

Balance of Funds Allocated - Not Expended:
(Total Funds Allocated - Total Expenditures) **\$84,820.18**

Balance Cannot Exceed Total Amount Received

BLUE INK ONLY

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