

GA-24-15

GRANT BRIEFING DOCUMENT

rev. 2/13/13

From:

Name: Jeanne Coughlin Dept: FIRE Phone: 410-263-7975

This is a request to

- review, approve, and/or sign a grant agreement/award
- other: Add funds to our Training Account

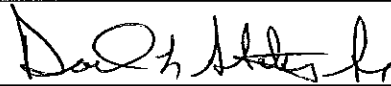
Grant title: MIEMSS ALS Grant FY2015

Grantor: MIEMSS - State of Maryland Amount: \$ 7211.00

Attestation:

- Match is *not* required.
- Match is required. Match will be met in the form of ¹ _____

I attest that this asset has been approved/appropriated in ² _____



Department Director signature

FIRE

Dept

01/21/15

Date

Routing	Initials	Date		Comments
		In	Out	
<input checked="" type="checkbox"/> originating Dept Director	<u>DIS</u>	<u>1/21/15</u>	<u>1/21/15</u>	
<input checked="" type="checkbox"/> Grants Coordinator	<u>NJP</u>	<u>1/30</u>	<u>1/30</u>	<i>*No Signatures Required*</i>
<input checked="" type="checkbox"/> Finance Director		<u>1/30</u>	<u>1/30</u>	<i>*Initial Approval Only*</i>
<input checked="" type="checkbox"/> City Attorney				
<input checked="" type="checkbox"/> City Manager				
<input checked="" type="checkbox"/> Mayor				
<input type="checkbox"/> City Clerk				
<input checked="" type="checkbox"/> Finance Committee				
<input checked="" type="checkbox"/> Finance Dept				

Return to Originating Department

For Finance Committee 2/3/15

GRANT Briefing Document, continued

Provide a short narrative. Include:

-program description	- purpose of funds	- due dates
-grant period	-amount of request or award	
-special features, e.g., environmental impact implications, notarization required		

Each year the City of Annapolis Fire Department requests their share of the funds allocated to Region III from MIEMSS (Maryland Institute of Emergency Medical Services Systems) for ALS Continuing Education Training Reimbursement.

These funds are used to reimburse ALS Continuing Education Training required for the Annapolis Fire Department. There is no match required.

This FY2015, the Annapolis Fire Department was advised that their share is \$7211.00. This request is to add these funds to our training account for expenditure and reimbursement.

This training and all invoices for reimbursement are due to MIEMSS from the Annapolis Fire Department by June 15, 2015. By September 1, 2015, the Annapolis Fire Department will provide MIEMSS with an itemized list of expenditures purchased with these funds. Since there is no real property purchased with these funds there is no requirement for insurance.

¹ Examples: cash match, equipment loan, staff salaries, volunteer time, contribution from non-City agency.

² Examples: FY__ Operating Budget, a memorandum of understanding, City Council resolution/ordinance.



Grant Title MIEMSS FY2015 ALS Grant Funding

Grant Award (\$) 7,211.00

Originating Department(s): FIRE Department

Dept Contact (Name/Phone): Jeanne Coughlin 410-263-7975

Expenditure Account	Revenue Source				Total per Expend. Type	Comments
	Federal	State	Local (Matching)	Other		
Salaries					0.00	
Benefits					0.00	
Overtime					0.00	
Supplies					0.00	
Telephone					0.00	
Electricity					0.00	
Fuel and Oil					0.00	
Training & Education		7,211.00			7,211.00	
R & M - Equipment					0.00	
Special Programs					0.00	
Contract Services					0.00	
Capital Outlay					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
other (fill-in)					0.00	
Total	0.00	7,211.00	0.00	0.00	7,211.00	

TOTAL EXPENDITURES: 7,211.00

* May be different from Grant Award \$ if there is a match requirement.

Match is not required.

David L. [Signature] 1/21/15
Department Director Signature/Date

FIRE
Department

Match is required. Match will be met in the form of ⁽¹⁾ _____

I attest that this asset has been approved/appropriated in ⁽²⁾ _____

Department Director Signature/Date

Department

COMMENTS:

This is to add the Annapolis Fire Department share of MIEMSS funding to our account in MUNIS for reimbursement of required ALS Continuing Education Training

⁽¹⁾ Examples (include dollar amounts if applicable): Cash match, equipment loan, staff salaries, volunteer time, contribution from non-City agency.

⁽²⁾ Examples: FY__ operating budget, a memorandum of understanding, City Council resolution/ordinance.



State of Maryland
**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

Martin O'Malley
Governor

Donald L. DeVries, Jr., Esq.
Chairman
Emergency Medical
Services Board

Robert R. Bass, MD
Executive Director
410-706-5074
FAX 410-706-4768

January 13, 2015

Chief David Stokes, Sr.
Annapolis Fire Department
1790 Forest Drive
Annapolis, MD 21401

Dear Chief Stokes,

Enclosed, please find the executed agreement for your MIEMSS FY 2015 ALS Grant.

Additionally, I have enclosed a Purchase Order for the funds. After you complete your Program, please submit copies of your invoices along with a request for reimbursement on your Company's letterhead to MIEMSS. Please include the Purchase Order number. Reimbursement to you will be processed directly.

Should you have any questions, or need further information, please contact me at 410-706-3666 or Sherry Alban at 410-706-3145.

Very truly yours,

Rae Oliveira, BS, NREMT-P, RN
Director
Licensure and Certification

PURCHASE ORDER

STATE OF MARYLAND

PURCHASE ORDER NO: D53P5400274

PRINT DATE: 12/30/14

PAGE: 01

DELIVER TO: CHUCK ROLLMAN MIEMSS 653 WEST PRATT ST.: RM. 114 BALTIMORE MD 21201	BILL TO: MAXINE DOUGHERTY MIEMSS 653 WEST PRATT ST.: RM. 114 BALTIMORE MD 21201	
VENDOR ID: 1526000764 ANNAPOLIS FIRE DEPARTMENT 1790 FOREST DR ANNAPOLIS MD 21401	REFER QUESTIONS TO: SHERYL A ALBAN (410) 706-3145 SALBAN@MIEMSS.ORG	
DELIVER BY: 01/05/15		
ITB: BPO:	EXPR DATE: POST DATE: 12/30/14	DISC TERMS: . NET 30 F.O.B. POINT: DESTINATION

TERMS:

ARTICLES HEREIN ARE EXEMPT FROM MARYLAND SALES AND USE TAXES BY EXEMPTION CERTIFICATE NUMBER 3000256-3 AND FROM FEDERAL EXCISE TAXES BY EXEMPTION NUMBER 52-73-0358K. IT IS THE VENDOR'S RESPONSIBILITY TO ADVISE COMMON CARRIERS THAT AGENCIES OF THE STATE OF MARYLAND ARE EXEMPT FROM TRANSPORTATION TAX.

PLEASE FURNISH THE STATE OF MARYLAND WITH THE FOLLOWING:

LINE #	STATE ITEM ID	QUANTITY	U/M	UNIT COST	TOTAL
0001	94631	1.00	EA	7,211.0000	7,211.00

GRANT PAYMENTS

REIMBURSEMENT FROM THE FY 2015 MIEMSS-ALS TRAINING GRANT PROGRAM
 ACCORDING TO THE TERMS AND CONDITIONS OF THE ATTACHED AGREEMENT

REQUISITION	LINE	SHIP/BILL CODE	SHIPPING CONTACT
D53P5400274	001	D532300	CHUCK ROLLMAN

DOCUMENT TOTAL: 7,211.00

***** LAST PAGE *****

AUTHORIZED BY: *Sheryl Alban* **DATE:** 12-30-2014
 BUYER AUTHORIZED DESIGNEE

INSTRUCTIONS TO VENDOR

EACH SHIPPING CONTAINER OR PACKAGE SHALL HAVE CLEARLY MARKED A COMPLETE DESCRIPTION AS TO CONTENTS AND QUANTITY CONTAINED THEREIN, THE PURCHASE ORDER NUMBER AND THE STOCK NUMBER, IF LISTED IN DESCRIPTION ABOVE. EACH SHIPMENT SHALL HAVE ATTACHED TO THE CONTAINER OR PACKAGE A PACKAGING SLIP AND SAID CONTAINER OR PACKAGE MUST BE READILY MARKED FOR IDENTIFICATION.

EACH INVOICE MUST BE SUBMITTED IN DUPLICATE AND INCLUDE THE FOLLOWING INFORMATION: 1) DATE AND METHOD OF SHIPMENT, 2) PURCHASE ORDER NUMBER, 3) DESCRIPTION AS IT APPEARS ON PURCHASE ORDER, 4) QUANTITY SHIPPED, 5) UNIT PRICE AND EXTENSIONS, 6) DATE OF INVOICE, 7) VENDOR'S FEDERAL TAX IDENTIFICATION OR SOCIAL SECURITY NUMBER. NOTE: INVOICE INFORMATION MUST BE IN ACCORDANCE WITH THAT CONTAINED ON PURCHASE ORDER. FAILURE TO COMPLY WITH THE FOREGOING WILL RESULT IN THE INVOICE BEING REJECTED FOR PAYMENT.

**PURCHASE ORDER
STATE OF MARYLAND**

PURCHASE ORDER NO: D53P5400274

PRINT DATE: 12/30/14

PAGE: 02

SUMMARY ACCOUNTING INFORMATION (STATE OF MARYLAND USE ONLY)

<u>SF</u>	<u>AGY</u>	<u>YR</u>	<u>INDEX</u>	<u>PCA</u>	<u>OBJECT</u>	<u>AOBJ</u>	<u>GRANT/PH</u>	<u>PROJ/PH</u>	<u>AG1</u>	<u>AG2</u>	<u>AMOUNT / %</u>
01	D53	15		22303		1204					7,211.00

TOTAL ENCUMBRANCE:											7,211.00

Advanced Life Support Education Grant Agreement

This Agreement, entered into as of the date of the last signature, between the Maryland Institute for Emergency Medical Services Systems ("MIEMSS") located at The Murphy Building, 653 West Pratt Street, Baltimore, Maryland 21201 and the City of Annapolis, Maryland, municipality of State of Maryland, on behalf of Annapolis Fire Department (the "Association") located at 1790 Forest Drive, Annapolis, Maryland 21401 is subject to the following terms and conditions:

1. MIEMSS is extending to the Association a grant in the amount of \$7,211.00 (the "Grant") which shall be used by the Association for ALS Continuing Education
2. The Grant may only be used for initial Advanced Life Support training and relicensure which meets the course requirement Standards of the National Department of Transportation as approved by the Regional EMS Advisory Council. Grant funds may not be used for prerequisite courses. Any expenditure of Grant funds that is not consistent with the purposes stated in paragraph 1 may, in the unfettered judgment of MIEMSS, be disqualified. Should any expenditure be disqualified or should the Association violate any of the terms of this Agreement, MIEMSS may require repayment to the Maryland Emergency Medical System Operations Fund (the "EMS Fund"), an offset from any State grant to the Association in the current or succeeding fiscal year, and/or take other appropriate action. The Association shall repay to the EMS Fund any part of the Grant which is not used for the purposes stated in paragraph 1 within 2 years after the date of this Agreement.
3. The Association may not sell, lease, exchange give away or otherwise transfer or dispose of real or personal property or any part of or interest in real or personal property acquired with Grant funds without the prior written consent of MIEMSS. The Association shall give MIEMSS written notice at least 30 days before any such proposed transfer or disposition. Any proceeds from a permitted transfer or disposition shall be applied to repay to the EMS Fund a percentage of that portion of the Grant attributable to the particular real or personal property transferred or disposed of, unless MIEMSS and the Association agree to other terms and conditions. The percentage shall be equal to the percentage of the unadjusted basis of the property that would remain if the property had been recovery property and if all allowable deductions had been taken up to the time of disposition under the Accelerated Cost Recovery System

(ACRS) specified in the United States Internal Revenue Code, Section 168(b)(1). MIEMSS shall have the right to make any elections available in connection with that computation.

4. For any item of real or personal property that is acquired with Grant funds and has an original fair market value of Five Thousand Dollars or more, the Association shall, at its own expense, and for the reasonable useful life of that item or for 5 years, which ever is less, obtain and maintain insurance. The insurance shall provide full protection for the Association and the EMS Fund and the State against loss, damage, or destruction of or to the real or personal property. The Association shall, on request, provide MIEMSS with satisfactory evidence of its compliance with this requirement. Proceeds of insurance required by this paragraph shall be applied toward replacement of the real or personal property or toward the partial or total repayment to the EMS Fund of the Grant, in the sole discretion of MIEMSS.
5. The Association may not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin or any other characteristic forbidden as a basis for discrimination by applicable laws. The Association shall certify that its Constitution or By-Laws contains a non-discrimination clause consistent with the Governor's Code of Fair Practices.
6. The person executing this Agreement on behalf of the Association certifies, to the best of that person's knowledge and belief, that:
 - A. Neither the Association, nor any of its officers or directors, nor any employee of the Association involved in obtaining contracts with or grants from the State or any subdivision of the State, has engaged in collusion with respect to the Association's application for the Grant or this Agreement or has been convicted of bribery, attempted bribery, or conspiracy under the laws of the United States or any state;
 - B. The Association has not employed or retained any person, partnership, corporation, or other entity, other than a bona fide employee or agent working for the Association, to solicit or secure this Grant or this Agreement, and the Association has not paid or agreed to pay any such entity any fee or other consideration contingent on the making of the Grant or this Agreement;
 - C. The Association, if incorporated, is registered or qualified in accordance with the Corporations and Associations Article, Annotated Code of Maryland is in good standing, has filed all

11. The Association may not sell, transfer, or otherwise assign any of its obligations under this Agreement, or its rights, title, or interest in this Agreement, without the prior written consent of MIEMSS.
12. No amendment to the agreement is binding unless it is in writing and signed by the parties.
13. The individual executing this agreement on behalf of the Association represents that he or she is authorized by the Association to do so.

(the remainder of this page is intentionally blank)

IN TESTIMONY WHEREOF, the parties have executed this agreement effective the date first above written:

Witness or Attest:

City of Annapolis

David L. Stokes
Signature

By: [Signature]
Signature

Date Signed: 12/12/14

David L. Stokes
Printed Name

Thomas Andrews
Printed Name

Title: Fire Chief

Title: City Manager

The Maryland Institute for
Emergency Medical Service
Systems

By: [Signature]

Date Signed: 1/05/15

Title: Executive Director

Approved as to form and legal sufficiency this 29th day of Dec, 2014.

[Signature]
Assistant Attorney General