GA.43.18



City of Annapolis
Office of the Mayor
160 Duke of Gloucester Street Annapolis, MD 21401-2517

Mayor@annapolis.gov • 410-263-7997 • Fax 410-216-9284 • TDD use MD Relay or 711 • www.annapolis.gov

Grant Briefing Document

From:		
Name Captain Christopher Amoia	Phone 410-268-9000	
Department Annapolis Police Department		
This grant is New ✓ Annual/Repea	ting	
This is a request to:		
Review, approve, and/or sign a grant agreem	ient/award	
Other		
Grant title Occupant Protection		
Grantor Maryland Highway Safety Office (MHSO)	F418	Amount \$ 2,000.00
Attestation:		
✓ Match is <i>not</i> required.		
Match is required. Match will be met in the f contribution from non-City agency.	orm of e.g. cash match, e	quipment loan, staff salaries, volunteer time,
Director's signature Department Annapolis Police Department	lus	Date
Routing Initials I	Date In Date Out	
	Date In Date Out	Comments
✓ Originating Dept Director		
✓ Grants Coordinator		initials only
✓ Finance Director	(4)19	
✓ City Attorney		
✓ City Manager		
<u>√</u> Mayor		and the second s
✓ City Clerk		- Friedrich
✓ Finance Committee		
✓ Finance Dept		
Return to Originating Department		

Provide a short narrative, including program description, purpose of funds and special features, e.g., environmental impact implications, notarization required. The Occupant Protective initiative, funded by the Maryland Highway Safety Office (MHSO), provides funds for officer overtime. Funds will be used to conduct overtime assignments to target unbelted drivers at night time (2100Hrs0800Hrs 9pm-6am).
The Occupant Protective initiative, funded by the Maryland Highway Safety Office (MHSO), provides funds for officer overtime. Funds will be used to conduct overtime assignments to target upbelled drivers at pickt time.
1 overtimes a united with the deed to collected overtime assignments to target tiphelted drivers at pight time

City of Annapolis 160 Duke of Gloucester St. Annapolis, MD 21401

GRANT BUDGET FORM

Grant Title	Occupant protecti	on				
Grant Award (\$)	2,000.00		Originating Dep	partment(s):	Police Departmer	nt
	Dept Contact (Name/Phone): Officer David Higgins 410-268-9000					
ļ	Revenue Source					
Expenditure Account	Federal	State	Local (Matching)	Other	Total per Expend. Type	Comments
Salaries					0.00	
Benefits			,		0.00	
Overtime		2,000.00			2,000.00	Officer OT for varioius traffic details
Supplies					0.00	
Telephone					0.00	
Electricity					0.00	
Fuel and Oil					0.00	
Training & Education					0.00	
R & M - Equipment					0.00	
Special Programs					0.00	
Contract Services					0.00	
Capital Outlay					0.00	
Vehicle Use					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	2,000.00	0.00	0.00	2,000.00	
	l Maria de la Caract		EXPENDITURES*:	2,00	0.00	
	y be different from Grant	Award \$ if diele is a	a mater requientent.			
X Match is not required.						
Department Director S	Sionature/Date			Department		-
2 (
Match is required. M	atch will be met in th	e form of (1)				
I attest that this asset ha						
Department Director				Department		_
COMMENTS:						
			. <u>. </u>			
	<u> </u>		<u></u>			

⁽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.



Maryland Highway Safety Office

PROJECT AGREEMENT

6601 Ritchie Highway Glen Burnie, MD 21062 PHONE 410-787-4050 FAX 410-787-4020

I ha tarmal approval of this Braical Agracus and the chile-ti-m of fire-it- it	
THE IDENTIFIER ADDITIONAL OF THIS PROJECT WATERWAYS AND THE OBJUSTION OF THIRDS TO IT ARE	CONTINUED I TOOM TO A TRANSPORTED A
The formal approval of this Project Agreement and the obligation of funds to it are	
anticipated federal funds, as determined by Congress, Maryland statute, or	
AURCIDATED ROBINI TUTOS. AS DETERMINED BY LABORES MARYISHA STOTISTS AF	OTBOT TODOTAL AT STAIN ANTIAN

PROJECT TITLE: Occupant Protection	FOR MHSO USE ONLY		
	PROJECT NUMBER: LE-Annapolis PD-2018-036		
PROJECT AGENCY: Annapolis Police Department			
PROJECT AGENCY ADDRESS: 199 Taylor Avenue, Annapolis, MD-2140	1		
FUND RECIPIENT: City of Annapolis			
FUND RECIPIENT ADDRESS: 199 Taylor Avenue, Annapolis, MD-21401			
FEDERAL IDENTIFICATION NUMBER: 52-6000764			

The undersigned agree that the Project Agency will carry out the Project within the dates of the Project Period, in accord with the general programmatic and financial requirements set forth in the agreement, and in compliance with the Project Conditions. Reimbursement is limited to actual eligible expenditures, the total of which is not to exceed the amount of Funds Obligated from MHSO. Furthermore, the Project Agency certifies that it is eligible under grant guidelines to receive grant funds; can accept a reimbursable grant; can successfully implement the project at the indicated funding level; and accepts the provisions of the entire Agreement including its Project Conditions. Costs cannot be incurred prior to the Project Start Date listed below.

BUDGET CATEGORIES	MHSO FUNDS
Salary and Benefits	\$0.00
Law Enforcement Overtime	\$2,000.00
Training / Conference and Accommodations	\$0.00
Mileage	\$0.00
Contractual Services	\$0.00
Equipment	\$0.00
Other Direct Costs	\$0.00
Indirect Costs	\$0.00
Total	\$2,000.00

The Project Director and Authorizing Official signing below cannot be the same person, nor can they be the Financial Official listed in the grant.

PROJECT DIRECTOR		AUTHORIZING OFFICIAL			
NAME: David Higgins	- W	NAME: Christopher Amoia			
TITLE: Police Officer		TITLE: Captain			
AGENCY: City of Annapolis		AGENCY: City of Annapolis			
ADDRESS:	, , , , , , , , , , , , , , , , , , ,	ADDRESS:			
PHONE: (410) 268-9000	FAX:	PHONE: (410) 268-9000	FAX:		
E-MAIL: dmhiggins@annapolis.gov		E-MAIL: caamoia@annapolis.gov	E-MAIL: caamola@annapolis.gov		
SIGNATURE & DATE:	IATURE & DATE: SIGNATURE & DATE:				
David Higgins (Electronically Signed) 08/16/2017		Christopher Amoia (Electronica	ally Signed) 08/18/2017		

	EURIVIDAL	DUSEONLY	
PROJECT PERIOD START DATE: 10/01/2017	44 - 12	FUNDS OBLIGATED FROM MHSO:	
PROJECT PERIOD END DATE: 09/30/2018	•	\$2,000.00	
MHSO CHIEF APPROVAL (SIGNATURE & DATE)	D. V.	09/15/2017	