

## **Program Narrative**

The City of Santa Rosa's 2020 JAG grant application under CFDA 16.738 is not considered a disparate allocation; as a result, the City of Santa Rosa is submitting a single application for \$47,280.

### **Background**

The City of Santa Rosa (City) is located fifty-five miles north of San Francisco and is the largest city between San Francisco, California and Portland, Oregon. Santa Rosa is in the heart of Sonoma County and is home to several regional, state, and federal offices and the county seat for Sonoma County. Once primarily an agrarian community, Santa Rosa has evolved into a more industrial and urban community and is home to several large technology corporations and numerous smaller businesses. The daily population increases to more than 200,000 during work hours due to commuting workers on the new SMART railway, major shopping centers, hospitals, regional trauma center, a large Junior College, regional medical facilities and financial institutions, as people travel in from neighboring communities.

The Santa Rosa Police Department (Department) was formed in 1867 and incorporated in 1868. In its first one hundred years the Department grew from three town marshals to a staff of fifty-five. The next forty years produced an impressive organizational growth to the present-day staff of 260 sworn and civilian employees, who serve a population of over 175,000. The Department is overseen by the Chief of Police who is supported by two captains and two civilian managers. The balance of employees are comprised of lieutenants, sergeants, police officers and civilian supervisors and staff. The City of Santa Rosa is divided into 9 zones for patrol purposes.

### **Proposed Program Activities**

*Supplies: \$39,619*

*Training Supplies: Computer for NIBRS training, K9 bite suits and Taser training suit-\$5,419*

The purchase of these items will allow for the continued training of sworn and civilian personnel to increase officer safety and data reporting. The department is transitioning to a new records management system and the purchase of the computer will assist in the needed training of staff

on this system and will allow the department to become compliant with the National Incident-Based Reporting System (NIBRS) requirement by the deadline of 2021. The current K9 bite suits are at the end of their recommended life-cycle of five years and are in need of replacement. The department purchased new Taser equipment last year and the requested taser training suit will provide more hands-on training with this new equipment.

The purchase will be completed within 6 months of grant award using a three-quote comparison to select the lowest price option that fits the needs of the department. With the grant funds the department will purchase one laptop computer at an estimated cost of \$1,419, two K9 Bite Suits at an estimated cost of \$1,600 per unit and one Taser Training suit at an estimated cost of \$800.

*Leg Wraps \$22,800*

The purchase of these items will outfit 19 of the patrol vehicles with these leg restraints that are designed to achieve fast de-escalation and provide rapid recovery for both officers and the subject.

The purchase will be completed within 6 months of grant award using a three-quote comparison to select the lowest price option that fits the needs of the department. With the grant funds the department will purchase 19 Leg Wraps at an estimated cost of 1,200 each.

*GPS tracking device \$1,600*

The purchase of this device will assist the department to monitor and record a suspect's movements saving manpower and resources for other investigative work.

The purchase will be completed within 6 months of grant award using a three-quote comparison to select the lowest price option that fits the needs of the department. With the grant funds the department will purchase one GPS tracking device with an estimated cost of \$1,600.

*C50 gas masks for Mobile Field Force \$8,800*

The purchase of these specialized gas masks will enable the team to communicate more clearly with each other through the included voice box while maintaining safety for both the officer and the public.

The purchase will be completed within 6 months of grant award using a three-quote comparison to select the lowest price option that fits the needs of the department. With the grant funds the

department will purchase eight C50 gas masks with voice boxes with an estimated cost of \$1,100 each.

*Megaphone for crowd control communication \$1,000*

The purchase of this communication device is essential to respond safely for crowd control, event security and disaster response operations.

The purchase will be completed within 6 months of grant award using a three-quote comparison to select the lowest price option that fits the needs of the department. With the grant funds the department will purchase one device with an estimated cost of \$1,000.

*Equipment-\$7,661: Throwphones*

The purchase of this device will aid in hostage and crisis negotiation events keeping personnel and the public safe.

The purchase will be completed within 6 months of grant award using a three-quote comparison to select the lowest price option that fits the needs of the department. With the grant funds the department will purchase one device with an estimated cost of \$7,661.

*Grant Program Accountability Measures:*

The grantee will report on the relevant General Information, Activity-Program Selection, Program Module and semi-annual Goals and Objectives in accordance with the applicable JAG Accountability Measures in the BJA Performance Measurement Tool (PMT).

*Coordination of Related Justice Funds and JAG Funds*

The City of Santa Rosa does not anticipate any coordination of related Department of Justice funded projects and 2020 JAG funded projects.



**JAG Local: Eligible Allocation Amounts \$25,000 or More** 2020-  
H7688-CA-DJ


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|  |  |   |                                     |
|--|--|---|-------------------------------------|
| <b>APPLICATION FOR FEDERAL ASSISTANCE</b>  | <b>2. DATE SUBMITTED</b>                                     | <b>Applicant Identifier</b>   |                                     |
|  | <b>1. TYPE OF SUBMISSION</b><br>Application Non-Construction | <b>3. DATE RECEIVED BY STATE</b>  | <b>State Application Identifier</b> |
|  |  | <b>4. DATE RECEIVED BY FEDERAL AGENCY</b>   | <b>Federal Identifier</b>           |
| <b>5. APPLICANT INFORMATION</b>  |  |   |                                     |
| <b>Legal Name</b><br>City of Santa Rosa  |  | <b>Organizational Unit</b><br>Police Department   |                                     |
| <b>Address</b><br>965 Sonoma Avenue<br>Santa Rosa, California<br>95404-4803  |  | <b>Name and telephone number of the person to be contacted on matters involving this application</b><br><br>Lorence, Pam<br>(707) 543-3577  |                                     |
| <b>6. EMPLOYER IDENTIFICATION NUMBER (EIN)</b><br>94-6000428   |  | <b>7. TYPE OF APPLICANT</b><br>Municipal  |                                     |
| <b>8. TYPE OF APPLICATION</b><br>New   |  | <b>9. NAME OF FEDERAL AGENCY</b><br>Bureau of Justice Assistance  |                                     |
| <b>10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE</b><br>NUMBER: 16.738<br>CFDA Edward Byrne Memorial Justice Assistance<br>TITLE: Grant Program               |  | <b>11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT</b><br>Santa Rosa Police Department FY 2020<br>Formula Grant  |                                     |
| <b>12. AREAS AFFECTED BY PROJECT</b><br>City of Santa Rosa   |  |   |                                     |
| <b>13. PROPOSED PROJECT</b><br>Start Date: October 01, 2020<br>End Date: September 01, 2021  |  | <b>14. CONGRESSIONAL DISTRICTS OF</b><br>a. Applicant<br>b. Project CA02 CA05   |                                     |
| <b>15. ESTIMATED FUNDING</b>   |  | <b>16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</b><br><br>This preapplication/application was made available to the state executive order 12372 process for review on 07/17/2020 |                                     |
| Federal  | \$47,280   |   |                                     |
| Applicant  | \$0  |   |                                     |
| State  | \$0  |   |                                     |
| Local  | \$0  |   |                                     |
| Other  | \$0  |   |                                     |
| Program Income   | \$0  | <b>17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?</b><br>N  |                                     |
| TOTAL  | \$47,280   |   |                                     |
| <b>18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED</b> |  |   |                                     |

**BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS REQUIRED.**

Continue

## Project Identifiers

This project has several identifiers which include:

- Canines
- Conflict Resolution
- Crime Prevention
- Criminal Intelligence
- Equipment-general

## Budget Detail - Year 1

Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N  
[\(DOJ Financial Guide, Section 3.10\)](#)

### A. Personnel

| Name<br><i>List each name, if known.</i> | Position<br><i>List each position, if known.</i> | Computation<br><i>Show annual salary rate &amp; amount of time devoted to the project for each name/position.</i> |      |   |                    |            |                          |                 |
|--|--|---|------|---|--------------------|------------|--------------------------|-----------------|
|  |  | Salary  | Rate | Time Worked<br><i>(# of hours, days, months, years)</i> | Percentage of Time | Total Cost | Non-Federal Contribution | Federal Request |
|  |  |   |      |   |                    | \$0        |                          | \$0             |
| <b>Total(s)</b>                          |  |   |      |   |                    | <b>\$0</b> | <b>\$0</b>               | <b>\$0</b>      |
| <b>Narrative</b>                         |  |   |      |   |                    |            |                          |                 |

Purpose Area #4

| <b>B. Fringe Benefits</b>  |  |  |             |                   |                                 |                        |
|--|--|--|-------------|-------------------|---------------------------------|------------------------|
| <b>Name</b>  |  | <b>Computation</b>                     |             |                   |                                 |                        |
| <i>List each grant-supported position receiving fringe benefits.</i> |  | <i>Show the basis for computation.</i> |             |                   |                                 |                        |
|  |  | <i>Base</i>                            | <i>Rate</i> | <i>Total Cost</i> | <i>Non-Federal Contribution</i> | <i>Federal Request</i> |
|  |  |  |             | \$0               |                                 | \$0                    |
| <b>Total(s)</b>  |  |  |             | <b>\$0</b>        | <b>\$0</b>                      | <b>\$0</b>             |
| <b>Narrative</b>   |  |  |             |                   |                                 |                        |
|  |  |  |             |                   |                                 |                        |



Purpose Area #4

| <b>C. Travel</b>  |   |                             |                                  |   |                 |                   |                   |                   |                                 |                        |
|---|---|-----------------------------|----------------------------------|---|-----------------|-------------------|-------------------|-------------------|---------------------------------|------------------------|
| <b>Purpose of Travel</b>  | <b>Location</b>                         | <b>Type of Expense</b>      | <b>Basis</b>                     | <b>Computation</b>  |                 |                   |                   |                   |                                 |                        |
| <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i> | <i>Indicate the travel destination.</i> | <i>Lodging, Meals, Etc.</i> | <i>Per day, mile, trip, Etc.</i> | <i>Compute the cost of each type of expense X the number of people traveling.</i> |                 |                   |                   |                   |                                 |                        |
|   |   |                             |                                  | <b>Cost</b>   | <b>Quantity</b> | <b># of Staff</b> | <b># of Trips</b> | <b>Total Cost</b> | <b>Non-Federal Contribution</b> | <b>Federal Request</b> |
|   |   |                             | N/A                              |   |                 |                   |                   | \$0               |                                 | \$0                    |
| <b>Total(s)</b>   |   |                             |                                  |   |                 |                   |                   | <b>\$0</b>        | <b>\$0</b>                      | <b>\$0</b>             |
| <b>Narrative</b>  |   |                             |                                  |   |                 |                   |                   |                   |                                 |                        |
|   |   |                             |                                  |   |                 |                   |                   |                   |                                 |                        |

Purpose Area #4

| <b>D. Equipment</b>  |   |                  |                   |                                 |                        |
|--|---|------------------|-------------------|---------------------------------|------------------------|
| <b>Item</b>  | <b>Computation</b>  |                  |                   |                                 |                        |
| <i>List and describe each item of equipment that will be purchased</i>   | <i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i> |                  |                   |                                 |                        |
|  | <b># of Items</b>   | <b>Unit Cost</b> | <b>Total Cost</b> | <b>Non-Federal Contribution</b> | <b>Federal Request</b> |
| Throwphone   | 1   | \$7,661.00       | \$7,661           |                                 | \$7,661                |
| <b>Total(s)</b>  |   |                  | <b>\$7,661</b>    | <b>\$0</b>                      | <b>\$7,661</b>         |
| <b>Narrative</b>   |   |                  |                   |                                 |                        |
| <p>This device will aid in hostage and crisis negotiation events keeping personnel and the public safe. One unit at \$7,661 each based on prior years purchases.</p> |   |                  |                   |                                 |                        |

Purpose Area #4

| <b>E. Supplies</b>  |   |                  |                   |                                 |                        |
|---|---|------------------|-------------------|---------------------------------|------------------------|
| <b>Supply Items</b>   | <b>Computation</b>  |                  |                   |                                 |                        |
| <i>Provide a list of the types of items to be purchased with grant funds.</i>   | <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i> |                  |                   |                                 |                        |
|   | <b># of Items</b>   | <b>Unit Cost</b> | <b>Total Cost</b> | <b>Non-Federal Contribution</b> | <b>Federal Request</b> |
| Computer to aid in NIBRS compliance   | 1   | \$1,419.00       | \$1,419           |                                 | \$1,419                |
| Taser training suit   | 1   | \$800.00         | \$800             |                                 | \$800                  |
| K9 Bite Suite   | 2   | \$1,600.00       | \$3,200           |                                 | \$3,200                |
| Leg wrap restraints   | 19  | \$1,200.00       | \$22,800          |                                 | \$22,800               |
| GPS tracking device   | 1   | \$1,600.00       | \$1,600           |                                 | \$1,600                |
| C50 gas masks   | 8   | \$1,100.00       | \$8,800           |                                 | \$8,800                |
| Megaphone for crowd control communication   | 1   | \$1,000.00       | \$1,000           |                                 | \$1,000                |
| <b>Total(s)</b>   |   |                  | <b>\$39,619</b>   | <b>\$0</b>                      | <b>\$39,619</b>        |
| <b>Narrative</b>  |   |                  |                   |                                 |                        |
| <p>Our department has been working towards obtaining a new records management system that will assist the agency on submitting the required reports. This additional computer will aid the staff in the ability to complete this transition. This computer will be purchased using the City-Wide contract for computers with Dell. The cost estimate of \$1,419 is based on prior purchases of computers for the department.. Taser training suit for training with the new taser units purchased last year. Purchase one suit at an estimated cost of \$800 based on online research. K-9 bite suit for training of our K9 officer. Two items at \$16500 each based on online research. Leg wrap restraints for patrol vehicles which are designed to achieve fast de-escalation and provide rapid recovery for officers and the suspect. 19 items at \$1,200 each based on prior years purchase. One GPS tracking device to assist in monitoring and recording suspects movements. One unit at \$1,600 based on prior purchases; C50 gas masks for Mobile Field Force-8 units at \$1,100 each based on online research. Megaphone for crowd control communication which is essential to respond safely for crowd control, event security and disaster response operations. One unit at \$1,00 based on prior purchases.</p> |   |                  |                   |                                 |                        |

Purpose Area #4

| <b>F. Construction</b>   |   |  |             |                   |                                 |                        |
|--|---|--|-------------|-------------------|---------------------------------|------------------------|
| <b>Purpose</b><br><i>Provide the purpose of the construction</i> | <b>Description of Work</b><br><i>Describe the construction project(s)</i> | <b>Computation</b><br><i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i> |             |                   |                                 |                        |
|  |   | <b># of Items</b>  | <b>Cost</b> | <b>Total Cost</b> | <b>Non-Federal Contribution</b> | <b>Federal Request</b> |
|  |   |  |             | \$0               |                                 | \$0                    |
| <b>Total(s)</b>  |   |  |             | <b>\$0</b>        | <b>\$0</b>                      | <b>\$0</b>             |
| <b>Narrative</b>   |   |  |             |                   |                                 |                        |
|  |   |  |             |                   |                                 |                        |

Purpose Area #4

| <b>G. Subawards (Subgrants)</b>   |  |  |   |                                 |                        |            |                          |                 |
|---|--|--|---|---------------------------------|------------------------|------------|--------------------------|-----------------|
| Description   | Purpose  | Consultant?  |   |                                 |                        |            |                          |                 |
| <i>Provide a description of the activities to be carried out by subrecipients.</i>          | <i>Describe the purpose of the subaward (subgrant)</i> | <i>Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost.</i> |   |                                 |                        |            |                          |                 |
|   |  |  | <b>Total Cost</b>   | <b>Non-Federal Contribution</b> | <b>Federal Request</b> |            |                          |                 |
|   |  |  |   |                                 | \$0                    |            |                          |                 |
|   |  |  | <b>Total(s)</b>   | <b>\$0</b>                      | <b>\$0</b>             | <b>\$0</b> |                          |                 |
| <b>Consultant Travel (if necessary)</b>   |  |  |   |                                 |                        |            |                          |                 |
| Purpose of Travel   | Location   | Type of Expense  | Computation   |                                 |                        |            |                          |                 |
| <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i> | <i>Indicate the travel destination.</i>                | <i>Hotel, airfare, per diem</i>  | <i>Compute the cost of each type of expense X the number of people traveling.</i> |                                 |                        |            |                          |                 |
|   |  |  | Cost  | Duration or Distance            | # of Staff             | Total Cost | Non-Federal Contribution | Federal Request |
|   |  |  |   |                                 |                        | \$0        |                          | \$0             |
|   |  |  | <b>Total</b>  |                                 |                        | \$0        | \$0                      | \$0             |
| <b>Narrative</b>  |  |  |   |                                 |                        |            |                          |                 |
|   |  |  |   |                                 |                        |            |                          |                 |
| <b>H. Procurement Contracts</b>   |  |  |   |                                 |                        |            |                          |                 |
| Description   | Purpose  | Consultant?  |   |                                 |                        |            |                          |                 |

Purpose Area #4

|  |  |  |  |   |                    |   |                             |                                 |                        |                                 |                        |
|--|--|--|--|---|--------------------|---|-----------------------------|---------------------------------|------------------------|---------------------------------|------------------------|
| <p><i>Provide a description of the products or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source procurements in excess of the Simplified Acquisition Threshold (currently \$150,000).</i></p> |  | <p><i>Describe the purpose of the contract</i></p> |  | <p><i>Is the subaward for a consultant? If yes, use the section below to explain associated travel expenses included in the cost.</i></p> |                    |   |                             |                                 |                        |                                 |                        |
|  |  |  |  |   |                    |   | <b>Total Cost</b>           | <b>Non-Federal Contribution</b> | <b>Federal Request</b> |                                 |                        |
|  |  |  |  |   |                    |   |                             |                                 | \$0                    |                                 |                        |
| <b>Total(s)</b>  |  |  |  |   |                    |   | <b>\$0</b>                  | <b>\$0</b>                      | <b>\$0</b>             |                                 |                        |
| <b>Consultant Travel (if necessary)</b>  |  |  |  |   |                    |   |                             |                                 |                        |                                 |                        |
| <b>Purpose of Travel</b>   |  | <b>Location</b>                                    |  | <b>Type of Expense</b>  |                    | <b>Computation</b>  |                             |                                 |                        |                                 |                        |
| <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>  |  | <i>Indicate the travel destination.</i>            |  | <i>Hotel, airfare, per diem</i>   |                    | <i>Compute the cost of each type of expense X the number of people traveling.</i> |                             |                                 |                        |                                 |                        |
|  |  |  |  |   |                    | <b>Cost</b>   | <b>Duration or Distance</b> | <b># of Staff</b>               | <b>Total Cost</b>      | <b>Non-Federal Contribution</b> | <b>Federal Request</b> |
|  |  |  |  |   |                    |   |                             |                                 | \$0                    |                                 | \$0                    |
| <b>Total</b>   |  |  |  |   |                    |   | <b>\$0</b>                  | <b>\$0</b>                      | <b>\$0</b>             |                                 |                        |
| <b>Narrative</b>   |  |  |  |   |                    |   |                             |                                 |                        |                                 |                        |
|  |  |  |  |   |                    |   |                             |                                 |                        |                                 |                        |
| <b>I. Other Costs</b>  |  |  |  |   |                    |   |                             |                                 |                        |                                 |                        |
| <b>Description</b>   |  |  |  |   | <b>Computation</b> |   |                             |                                 |                        |                                 |                        |

Purpose Area #4

| List and describe items that will be paid with grants funds (e.g. rent, reproduction, telephone, janitorial, or security services, and investigative or confidential funds). | Show the basis for computation |       |      |                |            |                          |                 |
|--|--------------------------------|-------|------|----------------|------------|--------------------------|-----------------|
|  | Quantity                       | Basis | Cost | Length of Time | Total Cost | Non-Federal Contribution | Federal Request |
|  |                                |       |      |                | \$0        |                          | \$0             |
| <b>Total(s)</b>  |                                |       |      |                | <b>\$0</b> | <b>\$0</b>               | <b>\$0</b>      |
| <b>Narrative</b>   |                                |       |      |                |            |                          |                 |
|  |                                |       |      |                |            |                          |                 |

Purpose Area #4

| <b>J. Indirect Costs</b>   |   |                           |                   |                                 |                        |
|--|---|---------------------------|-------------------|---------------------------------|------------------------|
| <b>Description</b><br><i>Describe what the approved rate is and how it is applied.</i> | <b>Computation</b><br><i>Compute the indirect costs for those portions of the program which allow such costs.</i> |                           |                   |                                 |                        |
|  | <i>Base</i>   | <i>Indirect Cost Rate</i> | <i>Total Cost</i> | <i>Non-Federal Contribution</i> | <i>Federal Request</i> |
|  |   |                           | \$0               |                                 | \$0                    |
| <i>Total(s)</i>  |   |                           | <b>\$0</b>        | <b>\$0</b>                      | <b>\$0</b>             |
| <b>Narrative</b>   |   |                           |                   |                                 |                        |
|  |   |                           |                   |                                 |                        |



Budget Summary

| <b>Budget Summary</b>  |                 |                     |                       |                     |                       |                     |                       |                     |                       |                     |          |
|--|-----------------|---------------------|-----------------------|---------------------|-----------------------|---------------------|-----------------------|---------------------|-----------------------|---------------------|----------|
| <i>Note: Any errors detected on this page should be fixed on the corresponding Budget Detail tab.</i>  |                 |                     |                       |                     |                       |                     |                       |                     |                       |                     |          |
| Budget Category  | Year 1          |                     | Year 2<br>(if needed) |                     | Year 3<br>(if needed) |                     | Year 4<br>(if needed) |                     | Year 5<br>(if needed) |                     | Total(s) |
|  | Federal Request | Non-Federal Request | Federal Request       | Non-Federal Request | Federal Request       | Non-Federal Request | Federal Request       | Non-Federal Request | Federal Request       | Non-Federal Request |          |
| A. Personnel   | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| B. Fringe Benefits   | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| C. Travel  | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| D. Equipment   | \$7,661         | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$7,661  |
| E. Supplies  | \$39,619        | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$39,619 |
| F. Construction  | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| G. Subawards (Subgrants)   | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| H. Procurement Contracts   | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| I. Other   | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| <b>Total Direct Costs</b>  | \$47,280        | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$47,280 |
| J. Indirect Costs  | \$0             | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0      |
| <b>Total Project Costs</b>   | \$47,280        | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$0                   | \$0                 | \$47,280 |
| Does this budget contain conference costs which is defined broadly to include meetings, retreats, seminars, symposia, and training activities? - Y/N |                 |                     |                       |                     |                       |                     |                       |                     |                       | No                  |          |

# DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

0348-0046

(See reverse for public burden disclosure.)

|   |   |  |
|---|---|--|
| <b>1. Type of Federal Action:</b><br><input type="checkbox"/> a. contract<br><input type="checkbox"/> b. grant<br><input type="checkbox"/> c. cooperative agreement<br><input type="checkbox"/> d. loan<br><input type="checkbox"/> e. loan guarantee<br><input type="checkbox"/> f. loan insurance   | <b>2. Status of Federal Action:</b><br><input type="checkbox"/> a. bid/offer/application<br><input type="checkbox"/> b. initial award<br><input type="checkbox"/> c. post-award | <b>3. Report Type:</b><br><input type="checkbox"/> a. initial filing<br><input type="checkbox"/> b. material change<br><b>For Material Change Only:</b><br>year _____ quarter _____<br>date of last report _____ |
| <b>4. Name and Address of Reporting Entity:</b><br><input type="checkbox"/> Prime <input type="checkbox"/> Subawardee<br>Tier _____, <i>if known</i> :<br><br><b>Congressional District, if known:</b>  | <b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b><br><br><br><b>Congressional District, if known:</b>                                    |  |
| <b>6. Federal Department/Agency:</b>  | <b>7. Federal Program Name/Description:</b><br><br>CFDA Number, <i>if applicable</i> : _____  |  |
| <b>8. Federal Action Number, if known:</b>  | <b>9. Award Amount, if known:</b><br>\$ _____   |  |
| <b>10. a. Name and Address of Lobbying Registrant</b><br><i>(if individual, last name, first name, MI):</i>   | <b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i><br><i>(last name, first name, MI):</i>   |  |
| <b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. | Signature: _____<br>Print Name: _____<br>Title: _____<br>Telephone No.: _____ Date: _____   |  |
| <b>Federal Use Only:</b>  |   | Authorized for Local Reproduction<br>Standard Form LLL (Rev. 7-97)   |

## INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.  
  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

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 OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes 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 (0348-0046), Washington, DC 20503.

### **Applicant Disclosure of Pending Applications**

The City of Santa Rosa Police Department does not have any pending applications submitted within the last 12 months for federally funded grants or sub-grants (including cooperative agreements) that include requests for funding to support the same project being proposed under this solicitation and will cover the identical cost items outlined in the budget narrative and worksheet in the application under this solicitation.

## **Information regarding Communication with the Department of Homeland Security (DHS) and/or Immigration and Customs Enforcement (ICE)**

### **1. Does your jurisdiction have any laws, policies, or practices related to whether, when or how employees may communicate with DHS or ICE?**

- i. The Santa Rosa City Council declared Santa Rosa an Indivisible City which states that the police “shall not enforce federal civil immigration laws and shall not use city monies, resources or personnel to investigate, question, detect, detain or apprehend persons solely on the basis of a possible violation of immigration law.
- ii. The Police Department has a policy, #428 regarding immigration laws which states in part, “to preserve public safety it may be necessary for this department to coordinate with, share, or gather intelligence from federal agencies in order to apprehend a violent offender...Nothing in this policy is intended to prevent police officers from responding to requests for assistance in connection with officer safety, traffic control, or peacekeeping efforts.”

### **2. Is your jurisdiction subject to any laws from a superior political entity that meets the description in question 1?**

- i. Police Department operates under California Senate Bill 54 which has guidelines for the reporting of undocumented citizens. SB54 states “A law enforcement official shall have discretion to cooperate with immigration authorities only if doing so would not violate any federal state or local law or local policy.”

### **3. If yes to either:**

- a. Provide copy of each law or policy
  - i. See attached Policy 428
- b. Describe each practice
- c. Explain how the law, policy or practice complies with section 1373.
  - i. Section 1373 states that an official may not prohibit or in any way restrict any government entity or official from sending or receiving the Immigration and Naturalization Service information regarding citizenship or immigration status. The Santa Rosa Police policy, #428 and Senate Bill 54 both state that a law enforcement official shall have the discretion to cooperate with immigration authorities, which is what the Santa Rosa Police Department is currently doing.

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## Immigration Violations

### 428.1 PURPOSE AND SCOPE

The purpose of this policy is to provide guidelines to members of the Santa Rosa Police Department for investigating and enforcing immigration laws.

*Adopted 5-22-13 by Chief Thomas E. Schwedhelm.*

*Revised 6-30-17 by Chief Robert L. Schreeder.*

### 428.2 POLICY

It is the policy of the Santa Rosa Police Department that all members make professional commitments to equal enforcement of the law and equal service to the public. Confidence in this commitment will increase the effectiveness of this department in protecting and serving the entire community and recognizing the dignity of all persons, regardless of their immigration status.

Officers will not contact, detain, question or arrest an individual solely based on a suspected undocumented immigration status or seek to discover the immigration status of an individual. Pursuant to Government Code §§ 7282 and 7282.5, no individual who is otherwise ready to be released from custody by this department should continue to be detained for the sole purpose of notifying immigration authorities.

In some circumstances, to preserve public safety it may be necessary for this department to coordinate with, share, or gather intelligence from federal agencies in order to apprehend a violent offender. This coordination will occur only for the purpose of furthering the underlying criminal investigation.

### 428.3 DETERMINATION OF IMMIGRANT STATUS

Determination of immigration status is primarily the jurisdiction of the U.S. Immigration and Customs Enforcement (I.C.E.); United States Code Title 8 § 1304(e).

### 428.4 REQUESTS FOR ASSISTANCE BY FEDERAL AGENCIES

The Santa Rosa Police Department shall not undertake joint efforts with federal, state or local law enforcement agencies to investigate, detain or arrest individuals solely for violation of federal immigration law.

Nothing in this policy is intended to prevent police officers from responding to requests for assistance in connection with officer safety, traffic control, or peacekeeping efforts to maintain the overall health and safety of the public.

Requests by I.C.E. for assistance from this department shall be directed to a Watch Commander for approval. The department may provide available services where necessary to maintain the overall health and safety of the public.