

## **Grant Contract Agreement**

Page 1 of 2

Minnesota Department of Public Safety ("State")	Grant Program:	
Office of Justice Programs	National Forensic Sciences Improvement 2023	
445 Minnesota Street, Suite 2300	<b>Grant Contract Agreement No.:</b>	
St. Paul, MN 55101-2139	A-NFSIA-2024-SPPD-004	
Grantee:	Grant Contract Agreement Term:	
City of St Paul, Police Department	Effective Date: 7/1/2023	
367 Grove Street	Expiration Date: 9/30/2024	
St Paul, Minnesota 55101-2416		
Grantee's Authorized Representative:	Grant Contract Agreement Amount:	
Scott Hvizdos, Grants Specialist	Original Agreement \$52,798.0	0
City of St. Paul, Police Department	Matching Requirement \$0.0	0
367 Grove Street		
St Paul, Minnesota 55106-2416		
(651) 266-5414		
sppd-grants@ci.stpaul.mn.us		
State's Authorized Representative:	Federal Funding: CFDA 16.742	
Kristin Lail, Grants Specialist Coordinator	FAIN: 15PBJA-21-GG-02911-COVE	
Office of Justice Programs	State Funding: None	
445 Minnesota Street, Suite 2300	Special Conditions: None	
St. Paul, MN 55101-2139		
(651) 230-3358		
Kristin.lail@state.mn.us		

Under Minn. Stat. § 299A.01, Subd 2 (4) the State is empowered to enter into this grant contract agreement.

*Term:* The creation and validity of this grant contract agreement conforms with Minn. Stat. § 16B.98 Subdivision 5. Effective date is the date shown above or the date the State obtains all required signatures under Minn. Stat. § 16B.98, Subdivision 7, whichever is later. Once this grant contract agreement is fully executed, the Grantee may claim reimbursement for expenditures incurred pursuant to the Payment clause of this grant contract agreement. Reimbursements will only be made for those expenditures made according to the terms of this grant contract agreement. Expiration date is the date shown above or until all obligations have been satisfactorily fulfilled, whichever occurs first.

The Grantee, who is not a state employee, will:

Perform and accomplish such purposes and activities as specified herein and in the Grantee's approved National Forensic Sciences Improvement 2023 Application ("Application") which is incorporated by reference into this grant contract agreement and on file with the State at 445 Minnesota Street, Suite 2300, St. Paul, Minnesota, 55101-2139. The Grantee shall also comply with all requirements referenced in the National Forensic Sciences Improvement 2023 Guidelines and Application which includes the Terms and Conditions and Grant Program Guidelines (<a href="https://app.dps.mn.gov/EGrants">https://app.dps.mn.gov/EGrants</a>), which are incorporated by reference into this grant contract agreement.

**Budget Revisions:** The breakdown of costs of the Grantee's Budget is contained in Exhibit A, which is attached and incorporated into this grant contract agreement. As stated in the Grantee's Application and Grant Program Guidelines, the Grantee will submit a written change request for any substitution of budget items or any deviation and in accordance with the Grant Program Guidelines. Requests must be approved prior to any expenditure by the Grantee.

*Matching Requirements:* (If applicable.) As stated in the Grantee's Application, the Grantee certifies that the matching requirement will be met by the Grantee.



## Grant Contract Agreement

Page 2 of 2

**Payment:** As stated in the Grantee's Application and Grant Program Guidance, the State will promptly pay the Grantee after the Grantee presents an invoice for the services actually performed and the State's Authorized Representative accepts the invoiced services and in accordance with the Grant Program Guidelines. Payment will not be made if the Grantee has not satisfied reporting requirements.

*Certification Regarding Lobbying:* (If applicable.) Grantees receiving federal funds over \$100,000.00 must complete and return the Certification Regarding Lobbying form provided by the State to the Grantee.

1. ENCUMBRANCE VERIFICATION Individual certifies that funds have been encumbered as	3. STATE AGENCY	
required by Minn. Stat. § 16A.15.	Signed:	
	(wit	th delegated authority)
Signed:	Title:	
Date:	Date:	
Grant Contract Agreement No./ P.O. No. <u>A-NFSIA-2024-SPPD</u>	<u>-004 / 3-88452</u>	
Project No.(indicate N/A if not applicable): N/A		
2. GRANTEE		
The Grantee certifies that the appropriate person(s) have executed the grant contract agreement on behalf of the Grantee as required by applicable articles, bylaws, resolutions, or ordinances.		
Signed:		
Print Name:		
Title:		
Date:		
Signed:	-	
Print Name:		
Title:	_	
Date:	_	
Cionada		
Signed:		
Print Name:	- Distribution:	DPS/FAS
Title:		Grantee State's Authorized Representative

## Organization: St Paul Police Department

## **Budget Summary**

Forensic Laboratory Improvement: SPPD Forensic Improvements	
for 2023	
Budget Category	Award
Equipment over \$5,000	
improved Full Spectrum Imaging System (FSIS)	\$52,798.00
Total	\$52,798.00
Total	\$52,798.00

Page 1 of 1