	ecutive Office of the President	AWARD	Page 1 of 1	
Office of National Drug Control Policy		Grant		
1.	Recipient Name and Address	4. Award Number: G18ML0028A		
	Assistant Chief Robert Thomasser			
City of Saint Paul 5. Grant Period:		5. Grant Period: From (	01/01/2018 to 12/31/2019	
	367 Grove Street			
	Saint Paul, MN 55101-2416			
2.	Total Amount of the Federal Funds Obligated: \$92,269	6. Federal Award Date: 2/25/2019	7. Action	
2A.	Budget Approved by the Federal Awarding Agency \$92,269	8. Supplement Number	3 Initial	
			X Supplemental	
3.	CFDA Name and Number:	9. Previous Award Amou	int: \$84,428.33	
	High Intensity Drug Trafficking Areas Program - 95.001			
3A.	Project Description	10. Amount of Federal Fraction:	unds Obligated by this	
		\$7,841.00		
	High Intensity Drug Trafficking Areas (HIDTA) Program	\$7,841.00 11. Total Amount of Fede \$92,269.33	eral Award:	
12.		11. Total Amount of Fede \$92,269.33		
	Program  The above grant is approved subject to such con-	11. Total Amount of Feder \$92,269.33 additions or limitation as are		
12.	Program  The above grant is approved subject to such congrant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL	11. Total Amount of Fede \$92,269.33 aditions or limitation as are		
13.	Program  The above grant is approved subject to such congrant.  Statutory Authority for Grant: Public Law:115-	11. Total Amount of Feders \$92,269.33 additions or limitation as are secured as a secure of the secu	e set forth in the original	
13.	The above grant is approved subject to such cordinant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly	11. Total Amount of Feders \$92,269.33 additions or limitation as are received as a second sec	e set forth in the original  NT ACCEPTANCE  itle of Authorized Official	
13.	Program  The above grant is approved subject to such congrant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official	11. Total Amount of Feders \$92,269.33 additions or limitation as are selected as a sel	e set forth in the original  NT ACCEPTANCE  itle of Authorized Official	
	The above grant is approved subject to such cordinant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly	11. Total Amount of Feders \$92,269.33  Iditions or limitation as are selected as a sel	NT ACCEPTANCE itle of Authorized Official	
13.	The above grant is approved subject to such configrant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director	11. Total Amount of Feder \$92,269.33 additions or limitation as are received as a second seco	NT ACCEPTANCE itle of Authorized Official ce	
13.	The above grant is approved subject to such cordinant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy	11. Total Amount of Feders \$92,269.33  Iditions or limitation as are selected as a sel	NT ACCEPTANCE itle of Authorized Official	
13.	The above grant is approved subject to such cordinant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy	11. Total Amount of Feder \$92,269.33 additions or limitation as are responsible and Table 15. Typed Name and Table 16. Ty	NT ACCEPTANCE itle of Authorized Official ce	
13.	The above grant is approved subject to such conformt.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Manne J. Kelly	11. Total Amount of Feder \$92,269.33 additions or limitation as are responsible and Table 15. Typed Name and Table 16. Ty	NT ACCEPTANCE itle of Authorized Official ce	
13. 14.	The above grant is approved subject to such cordinant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Mann J. Kelly  AGENCY USE ON	11. Total Amount of Feder \$92,269.33  Iditions or limitation as are selected as a sele	NT ACCEPTANCE itle of Authorized Official ce rized Recipient/Date	
13. 14.	The above grant is approved subject to such conforms.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Mann J. Kelly  AGENCY USE ON  Accounting Classification Code	11. Total Amount of Feder \$92,269.33 additions or limitation as are responsible to the second state of the	NT ACCEPTANCE itle of Authorized Official ce rized Recipient/Date	

	ecutive Office of the President ice of National Drug Control Policy	AWARD Grant	Page 1 of 1
1.	Recipient Name and Address Assistant Chief Robert Thomasser	4. Award Number: G18	BML0028A
	City of Saint Paul 367 Grove Street	5. Grant Period: From 0	01/01/2018 to 12/31/2019
	Saint Paul, MN 55101-2416		
2.	Total Amount of the Federal Funds Obligated: \$92,269	6. Federal Award Date: 2/25/2019	7. Action
2A.	Budget Approved by the Federal Awarding Agency \$92,269	8. Supplement Number	Initial
			X Supplemental
3.	CFDA Name and Number: High Intensity Drug Trafficking Areas Program - 95.001	9. Previous Award Amou	ant: \$84,428.33
3A.	Project Description	10. Amount of Federal For Action: \$7,841.00	unds Obligated by this
	High Intensity Drug Trafficking Areas (HIDTA)	11. Total Amount of Fede	eral Award:
	Program	\$92,269.33	
12.	Program  The above grant is approved subject to such con Grant.		
12.	The above grant is approved subject to such con	ditions or limitation as are	
	The above grant is approved subject to such con Grant.	l ditions or limitation as are	
	The above grant is approved subject to such con Grant.  Statutory Authority for Grant: Public Law:115-	ditions or limitation as are	e set forth in the original
13.	The above grant is approved subject to such con Grant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL	ditions or limitation as are	e set forth in the original
13.	The above grant is approved subject to such con Grant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official	ditions or limitation as are  141  RECIPIE  15. Typed Name and T	e set forth in the original  ENT ACCEPTANCE  Title of Authorized Official
13.	The above grant is approved subject to such con Grant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly	ditions or limitation as are  141  RECIPIE  15. Typed Name and T  Robert Thomasser	e set forth in the original  ENT ACCEPTANCE  Title of Authorized Official
13.	The above grant is approved subject to such conformat.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director	ditions or limitation as are  RECIPIE  15. Typed Name and T  Robert Thomasser  Assistant Chief of Police	e set forth in the original  ENT ACCEPTANCE  Title of Authorized Official  ce
13.	The above grant is approved subject to such conformat.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy	ditions or limitation as are  RECIPIE  15. Typed Name and T  Robert Thomasser  Assistant Chief of Polic  City of Saint Paul	e set forth in the original  ENT ACCEPTANCE  Title of Authorized Official  ce
13.	The above grant is approved subject to such conformat.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy  Signature of Approving ONDCP Official	RECIPIE  15. Typed Name and T  Robert Thomasser  Assistant Chief of Polic  City of Saint Paul  17. Signature of Author	e set forth in the original  ENT ACCEPTANCE  Title of Authorized Official  ce
13.	The above grant is approved subject to such conformat.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Maxim J. Kelly	RECIPIE  15. Typed Name and T  Robert Thomasser  Assistant Chief of Polic  City of Saint Paul  17. Signature of Author	e set forth in the original  ENT ACCEPTANCE  Title of Authorized Official  ce
13. 14.	The above grant is approved subject to such conformat.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Manne J. Kelly  AGENCY USE ON	ditions or limitation as are  RECIPIE  15. Typed Name and T  Robert Thomasser  Assistant Chief of Police  City of Saint Paul  17. Signature of Author	ENT ACCEPTANCE Citle of Authorized Official ce crized Recipient/Date
13. 14.	The above grant is approved subject to such conforant.  Statutory Authority for Grant: Public Law:115-  AGENCY APPROVAL  Typed Name and Title of Approving Official Shannon Kelly National HIDTA Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Maxim J. Kelly  AGENCY USE ON Accounting Classification Code	ditions or limitation as are  RECIPIE  15. Typed Name and T  Robert Thomasser  Assistant Chief of Polic  City of Saint Paul  17. Signature of Author  LY  19. HIDTA AWARD	ENT ACCEPTANCE Citle of Authorized Official ce crized Recipient/Date

# **Initiative Cash by HIDTA**

FY 2018

		North Central	HIDTA
Agency Total : City of Saint Paul		City of Saint Paul	Agency Name
aul	Management and Coordination	Greater St. Paul Violent Crime Initiative (GSPVCI)	Initiative
92,269.33	71,436.00 Administration G18ML0028/	20,833.33 Investigation G18ML0028A	Cash Type
	G18ML0028A	G18ML0028A	Grant

Total

92,269.33

## **Budget Detail**

### 2018 - North Central

**Initiative - Management and Coordination** 

Award Recipient - City of Saint Paul (G18ML0028A)

**Resource Recipient - City of Saint Paul** 

Indirect Cost: 0.0%

Current Budget (net of reprogrammed funds)		\$7,841.00
Services	Quantity	Amount
Services		\$7,841.00
Total Services		\$7,841.00
Total Budget		\$7,841.00

Page 1 of 1

Administration



February 25, 2019

Chief Kathleen Wuorinen City of Saint Paul 367 Grove Street Saint Paul, MN 55101-2416

Dear Chief Wuorinen:

Grant number G18ML0028A has been increased and now totals \$92,269.33.

The original of Modification 3 is enclosed. If you accept this Modification, sign the Modification and return a copy to the Assistance Center in Miami. Keep the original Modification for your file.

All terms and conditions of the original award apply to the Modification. If you have any questions pertaining to this grant award, please contact Shannon Kelly at (202) 395-5872.

Sincerely,

Shannon Kelly

National HIDTA Director

**Enclosures** 

Executive Office of the President Office of National Drug Control Policy		AWARD Grant	Page 1 of 1
1.	Recipient Name and Address  Assistant Chief Robert Thomasser	4. Award Number: G18ML0028A	
	City of Saint Paul 367 Grove Street	5. Grant Period: From (	01/01/2018 to 12/31/2019
	Saint Paul, MN 55101-2416		
2.	Total Amount of the Federal Funds Obligated: \$84,428	6. Federal Award Date: 1/28/2019	7. Action
2A.	Budget Approved by the Federal Awarding Agency \$84,428	8. Supplement Number	Initial
			X   Supplemental
3.	CFDA Name and Number: High Intensity Drug Trafficking Areas Program - 95.001	9. Previous Award Amou	int: \$75,883.33
3A.	Project Description	10. Amount of Federal F Action: \$8,545.00	unds Obligated by this
	High Intensity Drug Trafficking Areas (HIDTA) Program	11. Total Amount of Fed \$84,428.33	eral Award:
12.	The above grant is approved subject to such con Grant.	ditions or limitation as ar	e set forth in the original
13.	Statutory Authority for Grant: Public Law:115-	141	
	AGENCY APPROVAL	RECIPIE	NT ACCEPTANCE
14.	Typed Name and Title of Approving Official	15. Typed Name and T	itle of Authorized Official
	Michael K. Gottlieb	Robert Thomasser	
	Associate Director	Assistant Chief of Po	blice
***************************************	Office of National Drug Control Policy	City of Saint Paul	
16.	Signature of Approving ONDCP Official	17. Signature of Author	
	Michael K. YothlieB	7	3/28/20
	AGENCY USE ON		
18.	Accounting Classification Code	19. HIDTA AWARD	
	DUNS: 848898433	OND1070DB1819XX	
	EIN: 1416005521A4	OND200000000	OC 410001

	ecutive Office of the President ice of National Drug Control Policy	AWARD Grant	Page 1 of 1
1.	Recipient Name and Address	4. Award Number: G18	ML0028A
	Assistant Chief Robert Thomasser City of Saint Paul 367 Grove Street	5. Grant Period: From 0	1/01/2018 to 12/31/2019
	Saint Paul, MN 55101-2416		
2.	Total Amount of the Federal Funds Obligated: \$84,428	6. Federal Award Date: 1/28/2019	7. Action
2A.	Budget Approved by the Federal Awarding Agency \$84,428	8. Supplement Number 2	Initial  X Supplemental
3.	CFDA Name and Number: High Intensity Drug Trafficking Areas Program - 95.001	9. Previous Award Amour	nt: \$75,883.33
3A.	Project Description	10. Amount of Federal Fu Action: \$8,545.00	nds Obligated by this
	High Intensity Drug Trafficking Areas (HIDTA) Program	11. Total Amount of Fede. \$84,428.33	ral Award:
12.	The above grant is approved subject to such con Grant.	ditions or limitation as are	set forth in the original
13.	Statutory Authority for Grant: Public Law:115-141		
	AGENCY APPROVAL	RECIPIEN	T ACCEPTANCE
14.	Typed Name and Title of Approving Official Michael K. Gottlieb Associate Director Office of National Drug Control Policy	15. Typed Name and Ti Robert Thomasser Assistant Chief of Poli City of Saint Paul	tle of Authorized Official
16.	Signature of Approving ONDCP Official  Michael K. Yorlieb	17. Signature of Author	ized Recipient/Date
	AGENCY USE ON		
18.	Accounting Classification Code DUNS: 848898433 EIN: 1416005521A4	19. HIDTA AWARD OND1070DB1819XX OND2000000000 JID: 61898	OND6113 OC 410001

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# **Initiative Cash by HIDTA**

FY 2018

		North Central	HIDTA
Agency Total : City of Saint Paul		City of Saint Paul	Agency Name
aul .	Management and Coordination	Greater St. Paul Violent Crime Initiative (GSPVCI)	Initiative
84,428.33	63,595.00	20,833.33	Cash
	63,595.00 Administration G18ML0028/	20,833.33 Investigation G18ML0028/	Туре
	G18ML0028A	G18ML0028A	Grant

Total

84,428.33

1/28/2019 10:12:09 AM

# **Budget Detail**

### 2018 - North Central

**Initiative - Management and Coordination** 

Award Recipient - City of Saint Paul (G18ML0028A)

**Resource Recipient - City of Saint Paul** 

Indirect Cost: 0.0%

Current Budget (net of reprogrammed funds)		\$8,545.00
Services	Quantity	Amount
Services		\$8,545.00
Total Services		\$8,545.00
Total Budget		\$8,545.00

Page 1 of 1

**Administration** 



January 28, 2019

Chief Kathleen Wuorinen City of Saint Paul 367 Grove Street Saint Paul, MN 55101-2416

Dear Chief Wuorinen:

Grant number G18ML0028A has been increased and now totals \$84,428.33.

The original of Modification 2 is enclosed. If you accept this Modification, sign the Modification and return a copy to the Assistance Center in Miami. Keep the original Modification for your file.

All terms and conditions of the original award apply to the Modification. If you have any questions pertaining to this grant award, please contact Shannon Kelly at (202) 395-5872.

Sincerely,

Michael K. YottlieB

Michael K. Gottlieb Associate Director

**Enclosures** 

Executive Office of the President Office of National Drug Control Policy		AWARD Grant	Page 1 of 1
1.	Recipient Name and Address	ent Name and Address 4. Award Number: G18ML	
	Chief Kathleen Wuorinen		
	City of Saint Paul	5. Grant Period: From 01/01/2018 to 12/31/2019	
	367 Grove Street		
	Saint Paul, MN 55101-2416		
2.	Total Amount of the Federal Funds Obligated: \$75,883	6. Federal Award Date: 11/21/2018	7. Action
2A.	Budget Approved by the Federal Awarding Agency \$75,883	8. Supplement Number	1 Initial
			X Supplemental
3.	CFDA Name and Number:	9. Previous Award Amoun	nt: \$55,050.00
	High Intensity Drug Trafficking Areas Program - 95.001	\$ \$\pi_{\text{0.5}}\$	
3A.	Project Description	10. Amount of Federal Funds Obligated by this Action: \$20,833.33	
	High Intensity Drug Trafficking Areas (HIDTA) Program	11. Total Amount of Fede \$75,883.33	ral Award:
12.	The above grant is approved subject to such cor Grant.	ditions or limitation as are	set forth in the original
13.	Statutory Authority for Grant: Public Law:115-	141	
13.	Statutory Authority for Grant: Public Law:115- AGENCY APPROVAL		NT ACCEPTANCE
	AGENCY APPROVAL  Typed Name and Title of Approving Official	RECIPIES 15. Typed Name and Ti	tle of Authorized Official
	AGENCY APPROVAL	RECIPIEN	tle of Authorized Official
	AGENCY APPROVAL  Typed Name and Title of Approving Official	RECIPIES 15. Typed Name and Ti	tle of Authorized Official
	AGENCY APPROVAL  Typed Name and Title of Approving Official Michael K. Gottlieb	RECIPIENT 15. Typed Name and Ti Kathleen Wuorinen City of Saint Paul	tle of Authorized Official
14.	AGENCY APPROVAL  Typed Name and Title of Approving Official Michael K. Gottlieb Associate Director	15. Typed Name and Ti Kathleen Wuorinen City of Saint Paul	tle of Authorized Official
14.	AGENCY APPROVAL  Typed Name and Title of Approving Official Michael K. Gottlieb Associate Director Office of National Drug Control Policy	15. Typed Name and Ti Kathleen Wuorinen City of Saint Paul	tle of Authorized Official
14.	AGENCY APPROVAL  Typed Name and Title of Approving Official Michael K. Gottlieb Associate Director Office of National Drug Control Policy Signature of Approving ONDCP Official	RECIPIENT  15. Typed Name and Ti  Kathleen Wuorinent  City of Saint Paul  17. Signature of Author	tle of Authorized Official
114.	AGENCY APPROVAL  Typed Name and Title of Approving Official Michael K. Gottlieb Associate Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Michael K. Hottlieb	RECIPIENT  15. Typed Name and Ti  Kathleen Wuorinent  City of Saint Paul  17. Signature of Author	tle of Authorized Official
13. 14.	AGENCY APPROVAL  Typed Name and Title of Approving Official Michael K. Gottlieb Associate Director Office of National Drug Control Policy  Signature of Approving ONDCP Official  Michael K. Hottlieb  AGENCY USE ON	RECIPIENT  15. Typed Name and Ti  Kathleen Wuorinen  City of Saint Paul  17. Signature of Author  LY	tle of Authorized Official

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### For the City of Saint Paul:

For City Attorney

Date: //3/2019

For Director of Financial Services

Date: 1/8/2019

Date: 1/9/2019

# Initiative Cash by HIDTA

FY 2018

75,883.33	Saint Paul	Agency Total : City of Saint Paul	
55,050.00 Administration G18ML0028/	Management and Coordination		
20,833.33 Investigation G18ML0028	Greater St. Paul Violent Crime Initiative (GSPVCI)	City of Saint Paul	North Central
Calsi	HILLIAUVE	Agency Name	MICHA
	Talkinding.	Accord Name	LIDIA

75,883.33

Total

## **Budget Detail**

### 2018 - North Central

Initiative - Greater St. Paul Violent Crime Initiative (GSPVCI)

Investigation

Award Recipient - City of Saint Paul (G18ML0028A)

Resource Recipient - City of Saint Paul

Indirect Cost: 0.0%

Current Budget (net of reprogrammed funds)		\$20,833.33
Overtime	Quantity	Amount
Overtime		\$15,000.00
Total Overtime		\$15,000.00
Services	Quantity	Amount
Services		\$3,333.33
Total Services		\$3,333.33
Other	Quantity	Amount
Other		\$2,500.00
Total Other		\$2,500.00
Total Budget	BLAT SELECTION OF THE SERVICE OF THE CONTRACT	\$20,833.33



November 21, 2018

Chief Kathleen Wuorinen City of Saint Paul 367 Grove Street Saint Paul, MN 55101-2416

Dear Chief Wuorinen:

Grant number G18ML0028A has been increased and now totals \$75,883.33.

The original of Modification 1 is enclosed. If you accept this Modification, sign the Modification and return a copy to the Assistance Center in Miami. Keep the original Modification for your file.

All terms and conditions of the original award apply to the Modification. If you have any questions pertaining to this grant award, please contact Shannon Kelly at (202) 395-5872.

Sincerely,

Michael K. Gottlieb

Michael K. YothlieB

**Associate Director** 

**Enclosures**