FS Agreement No.	08-LE-11051360-002
Amendment No.	002
Cooperator Tax ID No.	94-6000511 C
Cooperator DUNS No.	132428496
Cooperator Agreement No.	

EXHIBIT B

FY-2009, FINANCIAL AND OPERATING PLAN for Controlled Substance Operations
USFS, Eldorado National Forest and Lake Tahoe Basin Mangement Unit
And Sheriff, El Dorado County

FY-2009 Total Allocation $5,000.00 **El Dorado County Federal Tax ID: 94-6000511C**

This Annual Financial and Operating Plan for Controlled Substances (Operating Plan) is hereby made and entered into as of the last date signed below and is for the period beginning October 01, 2008 and ending September 30, 2009.

Pursuant to IV.I of the Cooperative Law Enforcement Agreement between El Dorado County Sheriff's Department (Cooperator) and the U.S. Department of Agriculture, Forest Service, Agreement No. 08-LE-11051360-002, the following is in support of operations to suppress manufacturing and trafficking of controlled substances on or affecting the administration of National Forest System lands, with an emphasis on identification, apprehension and prosecution of suspects engaged in these activities.

A. The *Forest Service* agrees:

1. To reimburse the Cooperator for expenditures associated with the detection of locations and activities related to illegal production and trafficking of controlled substances, including:

   a. Ground reconnaissance to identify and inventory locations and activities associated with producing or trafficking controlled substances.

   b. Aerial reconnaissance to identify and inventory locations and activities associated with producing or trafficking controlled substances. Reconnaissance shall be performed using a Forest Service approved aircraft with a minimum of one Forest Service observer on board, unless waived by the Forest Service.

2. To reimburse the Cooperator for certain expenses resulting from investigative activities associated with investigating cases involving the illegal production or trafficking of controlled substances on or affecting the administration of National Forest system lands, including:

   a. Surveillance operations to identify persons illegally producing or trafficking controlled substances.

   b. Apprehension of persons suspected of producing or trafficking controlled substances.

   c. Collection of evidence to support prosecution of persons suspected of illegally producing or trafficking controlled substances.

d. Prosecution of persons suspected of producing or trafficking controlled substances.

3. To reimburse the Cooperator for expenses resulting from the removal of cannabis plants from National Forest System lands. When circumstances indicate that removal of the cannabis plants is required before an investigation to determine the person(s) responsible can be completed, eradication operations must be approved by the Forest Service prior to taking place.

   Note: The Cooperator retains the authority to eradicate cannabis plants from National Forest System lands without reimbursement from the Forest Service at its discretion.

4. To reimburse the Cooperator for the costs of purchasing supplies and equipment used exclusively for activities described in items A.1, A.2 and A.3 of this Plan. Purchases must be agreed to and approved by the Forest Service. Purchases may not exceed 10% of the total allocation without prior approval by the Forest Service Designated Representative.

B. The *Cooperator* agrees:

1. Within its capability, to perform the following activities on National Forest System lands:

   a. Detect and inventory locations associated with illegal production or trafficking of controlled substances, and notify the Forest Service of such locations as soon as possible.

   b. Investigations to determine the person(s) responsible for manufacturing or trafficking controlled substances.

   c. Upon request and prior approval of the Forest Service, remove cannabis plants from National Forest System lands.

2. To furnish all activity reports, crime reports, investigation reports, and other reports or records, resulting from activities identified in Section A of this Operating and Financial Plan to the effected Forests for review and forwarding to the Regional Office for processing.

3. To furnish monthly itemized statements of expenses to the Forest Service for expenditures that may be reimbursed as identified in items A.1, A.2, A.3, and A.4 of this Plan.

a. Mail copies of itemized billing statements to:

Gerri Bordash, LEA
Pacific Southwest Regional Office
LEI, R-5
1323 Club Drive
Vallejo, CA 94592

Send photo copy to:
Eric Schultz, Special Agent
Eldorado National Forest
100 Forni Road
Placerville, CA 95667

b. Send hard copy invoices to:

US Forest Service
Albuquerque Service Center
Payments – Grants & Agreements
1001 B Sun Ave NE
Albuquerque, NM 87109

Or fax to:
(877) 687-4894

Or e-mail scanned invoice to:
ASC GA@fs.fed.us

c. Final billings for reimbursement must be received by the Forest Service before January 31, 2010 in order to received payment.

d. Annually update the CCR registration of the County Sheriff's DUNS# on the Central Contractors Registration (CCR) website at www.ccr.gov for the verification of the EFT (Electronic Funds Transfer) banking information.

C. The *Forest Service* and the *Cooperator* mutually agree to the following:

1. The following rate schedule will apply to all expenditures that may be reimbursed to the cooperator under this agreement;

Salary (base)	$ 40.00/hr. (deputy) $48.00/hr.(sgt.)
Salary (overtime)	$ 60.00/hr. (deputy) $68.00/hr.(sgt.)
Per diem costs	$34/M&IE + 55/lodging,
Travel (mileage and fares)	$.434 per mile,
Helicopter flight time	Actual documented costs,
Supplies or equipment	Actual documented costs

2. The total expenditures of the Cooperator that may be reimbursed may not exceed $5,000.00. The total expenditures for item A.4 may not exceed 10% of the total allocation.

3. The following persons are designated as representatives of each party;

Cooperator:	**Forest Service:**
Jeff Neves, Sheriff El Dorado County 300 Fair Lane Placerville, CA 95667	Eric Schultz, Special Agent Eldorado National Forest 100 Forni Road Placerville, CA 95667
Voice: 530-621-5655	**Voice:** 530-621-5294 **Fax:** 530-642-5197 **E-Mail:** eschultz@fs.fed.us

Alternate Representatives:

Sgt. Tim Becker El Dorado County Sheriff Office 300 Fair Lane Placerville, CA 95667	Bob Hernandez, USFS Assistant Special Agent in Charge Pacific Southwest Regional Office, R5 Law Enforcement and Investigations 1323 Club Drive Vallejo, CA 94592
Voice: 530-621-5580	**Voice:** 707-562-8649 **Fax:** 707-562-9031 **E-Mail:** bhernandez@fs.fed.us

FS Agreement No.	08-LE-11051360-002
Amendment No.	002
Cooperator Tax ID No.	94-6000511 C
Cooperator DUNS No.	132428496
Cooperator Agreement No.	

IN WITNESS WHEREFORE, the parties hereto have executed this Operating Plan as of the last date written below.

RUSTY DUPRAY
Chairman, Board of Supervisors,
El Dorado County

Date

JEFF NEVES, Sheriff
El Dorado County

10/6/08
Date

RON PUGH, Special Agent in Charge
USDA Forest Service, Region 5

Date

The authority and format of this instrument has been reviewed and approved for signature.

Theodoris Broussard 9/3/2008

THEODORIS BROUSSARD DATE
Grants & Agreements Specialist
R5, RO AQM Operations

Job Code: NFLE05 1360 $5,000 DRUG

FS Agreement No. 08-LE-11051360-002
Amendment No. 002
Cooperator Tax ID No. 94-6000511 C
Cooperator DUNS No. 132428496
Cooperator Agreement No.

Law Enforcement Billing Summary
Drug Enforcement

County Federal Tax ID: 94-6000511C	Agreement #: 08-LE-11051360-002

USDA Forest Service, NF: Eldorado &/or Lake Tahoe	County: EL DORADO

Law Enforcement Billing Summary	Month:	Year:

Check appropriate block: _____ CoOp Patrol _____ Controlled Substances Ops

A. Total Patrol/Labor Hours:	
B. Rate per Hour:	$
C. Total Salary Reimbursement: (subtotal 1)	$
D. Other Allowable Reimbursements: (mileage, dispatch, court, clerical, equipment, etc.)	
1. _____	$_____
2. _____	$_____
3. _____	$_____
4. _____	$_____
E. Total of D1 - D4 (subtotal 2)	$
F. Total Invoice Reimbursement:	$

Certification Statement

County Sheriff		USFS – Special Agent	
I certify the above billing/invoice is accurate and complete.		I certify services have been received as stated on this invoice.	
Sheriff	Date	US Forest Service	Date