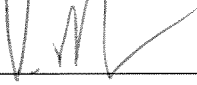


CONTRACT ROUTING SHEET

Date Prepared: 7/14/09

Need Date: ASAP

PROCESSING DEPARTMENT:

Department: District Attorney
Dept. Contact: Jodi Albin
Phone #: 530-621-6421
Department
Head Signature: 


CONTRACTOR:

Name: Department of Justice
Address: _____
Phone: _____


CONTRACTING DEPARTMENT: District Attorney

Service Requested: Equitable Sharing Agreement
Contract Term: 1 year Contract Value: \$0.00
Compliance with Human Resources requirements? Yes: N/A No: _____
Compliance verified by: _____

COUNTY COUNSEL: (Must approve all contracts and MOU's)

Approved: Disapproved: _____ Date: 7-24-09 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

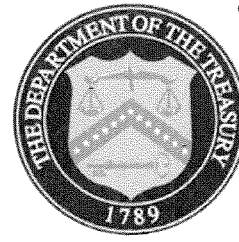
EL DORADO COUNTY COUNSEL
2009 JUL 15 PM 3:30
HUMAN RESOURCES DEPT
09 JUL 27 AM 8:35

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!
RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)
Approved: Disapproved: _____ Date: 7/16/09 By: 
Approved: _____ Disapproved: _____ Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).
Departments: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____
Approved: _____ Disapproved: _____ Date: _____ By: _____



Equitable Sharing Agreement and Certification



OMB Number 1123-0011
Expires 7-31-2011

- Police Department
 Sheriff's Office
 Task Force (Complete Table A, page2)
 Prosecutor's Office
 Other (specify) _____

Agency Name: El Dorado County District Attorney's Office

NCIC/ORI/Tracking Number: C A 0 0 9 0 1 3 A

Street Address: 1360 Johnson Blvd. Ste 105

City: South Lake Tahoe **State:** CA **Zip:** 96150

Contact: Title: Ms. First: Lisa Last: Serafini

Contact Phone: 530-573-1000 **Contact Fax:** 530-544-6413

Contact e-mail: LJS@co.el-dorado.ca.us

Last Fiscal Year End: 06/30/2009

- New Participant:** Read the Equitable Sharing Agreement (page 4) and sign the Affidavit (page 5)
 Existing Participant: Complete the Annual Certification Report, read the Equitable Sharing Agreement (page 4), and sign the Affidavit (page 5)
 Change in Administration: Select to report change to Agency or Governing Body head DURING the current fiscal year. Read the Equitable Sharing Agreement (page 4) and sign the Affidavit (page 5).
 Amended Form: Revise the Annual Certification Report, read the Equitable Sharing Agreement (page 4), and sign the Affidavit (page 5).

Annual Certification Report

Summary of Equitable Sharing Activity		Justice Funds	Treasury Funds
1	Beginning Equitable Sharing Fund Balance (must match Ending Equitable Sharing Fund Balance from prior FY)		
2	Federal Sharing Funds Received		
3	Federal Sharing Funds Received from Other Law Enforcement Agencies and Task Forces (complete Table B, page 2)		
4	Other Income		
5	Interest Income Accrued Check box if non-interest-bearing account <input checked="" type="checkbox"/>		
6	Total Equitable Sharing Funds (total of lines 1 - 5)	\$0.00	\$0.00
7	Federal Sharing Funds Spent (total of lines a - n below)	\$0.00	\$0.00
8	Ending Balance (difference between line 7 and line 6)	\$0.00	\$0.00

Summary of Shared Monies Spent

Justice Funds

Treasury Funds

a	Total spent on salaries for new, temporary, not-to-exceed one year employees (See Guide to Equitable Sharing)	\$0.00	\$0.00
b	Total spent on overtime	\$0.00	\$0.00
c	Total spent on informant and "buy money"	\$0.00	\$0.00
d	Total spent on travel and training	\$0.00	\$0.00
e	Total spent on communications and computers	\$0.00	\$0.00
f	Total spent on firearms and weapons	\$0.00	\$0.00
g	Total spent on body armor and protective gear	\$0.00	\$0.00
h	Total spent on electronic surveillance equipment	\$0.00	\$0.00
i	Total spent on building and improvements	\$0.00	\$0.00
j	Total spent on other law enforcement expenses (complete Table C, page 3)		
k	Total transfers to other state and local law enforcement agencies (complete Table D, page 3)		
l	Total 15% Expenditures in Support of Community-based Programs (complete Table E, page 3)		
m	Total 25% Windfall Transfers to Other Government Agencies (complete Table F, page 3)		
n	Total spent on matching grants (complete Table G, page 3)		
Total		\$0.00	\$0.00

Miscellaneous Data

o	Agency's budget for current fiscal year	\$7,887,465.00
p	Jurisdiction's budget for current fiscal year	\$468,299,135.00
q	Appraised Value of Other Assets Received	\$0.00

Table A: Members of Task Force

Agency Name

Address

--	--

Table B: Equitable Sharing Funds Received from other Agencies

Transferring Agency Name, City, and State

Justice Funds

Treasury Funds

Date	Agency Name <input style="width: 90%;" type="text"/>		
<input style="width: 80%;" type="text"/>	NCIC/ORI/Tracking Number <input style="width: 100%;" type="text"/>		

Table C: Other Law Enforcement Expenses

Description of Expense	Justice Funds	Treasury Funds

Table D: Equitable Sharing Funds Transferred to Other Agencies

Receiving Agency Name, City, and State		Justice Funds	Treasury Funds
Date	Agency Name		
	NCIC/ORI/Tracking Number		

Table E: 15% Expenditures in Support of Community-based Programs

Recipient	Justice Funds	

Table F: 25% Windfall Transfers to Other Government Agencies

Recipient	Justice Funds	Treasury Funds

Table G: Matching Grants

Matching Grant Name	Justice Funds	Treasury Funds

Table H: Civil Rights Cases

Name of Case	Type of Discrimination Alleged				Status
	<input type="checkbox"/> Race	<input type="checkbox"/> Color	<input type="checkbox"/> National Origin	<input type="checkbox"/> Gender	<input type="radio"/> Settled <input type="radio"/> Pending
	<input type="checkbox"/> Disability	<input type="checkbox"/> Age	<input type="checkbox"/> Other		

Paperwork Reduction Act Notice

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create accurate and easily understood forms that impose the least possible burden on you to complete. The estimated average time to complete this form is 30 minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, please write to the Asset Forfeiture and Money Laundering Section, Program Management and Strategic Planning Unit, 1400 New York Avenue, N.W., Second Floor, Washington, DC 20005.

Equitable Sharing Agreement

This Federal Equitable Sharing Agreement, entered into among (1) the Federal Government, (2) the above-stated law enforcement agency ("Agency"), and (3) the governing body, sets forth the requirements for participation in the federal equitable sharing program and the restrictions upon the use of federally forfeited cash, property, proceeds, and any interest earned thereon, which are equitably shared with participating law enforcement agencies. By its signatures, the Agency agrees that it will be bound by the statutes and guidelines that regulate shared assets and the following requirements for participation in the federal equitable sharing program. Receipt of the signed Equitable Sharing Agreement and Certification (this "Document") is a prerequisite to receiving any equitably shared cash, property, or proceeds.

1. **Submission.** This Document must be submitted to aca.submit@usdoj.gov within 60 days of the end of the Agency's fiscal year. This Document must be submitted electronically with the Affidavit/Signature page (page 5) submitted by fax. This will constitute submission to the Department of Justice and the Department of Treasury.

2. **Signatories.** This agreement must be signed by the head of the Agency and the head of the governing body. Examples of Agency heads include police chief, sheriff, director, commissioner, superintendent, administrator, chairperson, secretary, city attorney, county attorney, district attorney, prosecuting attorney, state attorney, commonwealth attorney, and attorney general. The governing body's head is the person who allocates funds or approves the budget for the Agency. Examples of governing body heads include city manager, mayor, city council chairperson, county executive, county council chairperson, director, secretary, administrator, commissioner, and governor.

3. **Uses.** Any shared asset shall be used for law enforcement purposes in accordance with the statutes and guidelines that govern the federal equitable sharing program as set forth in the current edition of the Department of Justice's *Guide to Equitable Sharing (Justice Guide)*, and the Department of the Treasury's *Guide to Equitable Sharing for Foreign Countries and Federal, State, and Local Law Enforcement Agencies (Treasury Guide)*.

4. **Transfers.** Before the Agency transfers cash, property, or proceeds to other state or local law enforcement agencies, it must first verify with the Department of Justice or the Department of Treasury, depending on the source of the funds, that the receiving agency is a federal equitable sharing program participant and has a current Equitable Sharing Agreement and Certification on file.

5. **Internal Controls.** The Agency agrees to account separately for federal equitable sharing funds received from the Department of Justice and the Department of the Treasury. Funds from state and local forfeitures and other sources must not be commingled with federal equitable sharing funds. The Agency shall establish a separate revenue account or accounting code for state, local, Department of Justice, and Department of the Treasury forfeiture funds. Interest income generated must be accounted for in the appropriate federal forfeiture fund account.

The Agency agrees that such accounting will be subject to the standard accounting requirements and practices employed for other public monies as supplemented by requirements set forth in the current edition of the *Justice Guide* and the *Treasury Guide*.

The misuse or misapplication of shared resources or the supplantation of existing resources with shared assets is prohibited. Failure to comply with any provision of this agreement shall subject the recipient agency to the sanctions stipulated in the current edition of the *Justice* or *Treasury Guides*, depending on the source of the funds/property.

6. **Audit Report.** Audits will be conducted as provided by the Single Audit Act Amendments of 1996 and OMB Circular A-133. The Department of Justice and Department of the Treasury reserve the right to conduct periodic random audits.

Affidavit

Under penalty of perjury, the undersigned officials certify that **they have read and understand their obligations under the Equitable Sharing Agreement** and that the information submitted in conjunction with this Document is an accurate accounting of funds received and spent by the Agency under the *Justice and/or Treasury Guides* during the reporting period and that the recipient Agency is in compliance with the National Code of Professional Conduct for Asset Forfeiture.

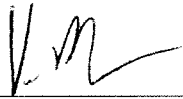
The undersigned certify that the recipient agency is in compliance with the nondiscrimination requirements of the following laws and their Department of Justice implementing regulations: Title VI of the Civil Rights Act of 1964 (42 U.S.C. § 2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794), and the Age Discrimination Act of 1975 (42 U.S.C. § 6101 et seq.), which prohibit discrimination on the basis of race, color, national origin, disability, or age in any federally assisted program or activity, or on the basis of sex in any federally assisted education program or activity.

During the past fiscal year, has the Agency been part of any proceedings alleging discrimination by the Agency? Yes No

If you answered yes, complete Table H. Please disclose (1) all proceedings pending before any court or administrative agency, (2) any nondiscrimination laws the Agency has been found in violation of, and (3) any settlement agreements the Agency has entered into during the last fiscal year.

Agency Head

Signature: _____



Name: Vern Pierson

Title: District Attorney

Date: 07/17/2009

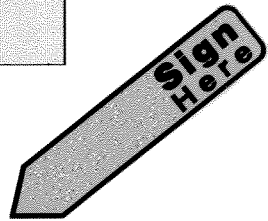
Governing Body Head

Signature: _____

Name: Ron Briggs

Title: Chair, Board of Supervisors

Date: _____



Final Instructions:

Step 1: Click button to save in PDF format for your records

Step 2: Click button to save in XML format

Step 3: E-mail the XML file as attachment to aca.submit@usdoj.gov

Step 4: Fax a signed copy of THIS PAGE ONLY to (202) 616-1344

Note: The Agency will not be in compliance until the e-mail and the fax of this page are received.

FOR AGENCY USE ONLY

Entered by _____

Entered on _____

FY End: 06/30/2009

NCIC: CA009013A Agency: El Dorado County District Attorney's Office

Phone: 530-573-1000

State: CA Contact: Lisa Serafini

E-mail: LJS@co.el-dorado.ca.us

