Confirmation Code is AZDOHS-11426E2029

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

PLEASE FILL OUT THE APPLICANT AND PROJECT TITLE BLANKS ONLY

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

The following document(s) have been completed and submitted with the application.

Check if Completed

Grant Workbook

- [x] -Project Administrative Page (Questions 1-8)
- [x] -Project Narrative (Questions 9-11)
- [x] -Project Justification (Questions 12-14)
- [x] -Core Capabilities (Questions 15 & 16)
- [x] -Milestones (Question 17)

Please be sure to only complete the following worksheets that pertain to your project.

- [ ] -Equipment Budget Narrative
  - [ ] -Equipment Description & Utilization
- [ ] -Training Budget Narrative & Detail Worksheet
- [ ] -Exercise Budget Narrative & Detail Worksheet
- [ ] -Planning Budget Narrative & Detail Worksheet
- [ ] -Organization Budget Narrative & Detail Worksheet
- [ ] -M&A Budget Narrative & Detail Worksheet
- [ ] -Memorandum of Understanding (if applicable)

Please check the following boxes if

- [ ] -Your agency is NIMS Compliant
- [ ] -Your agency is registered with and participating in E-Verification Program

For more information on E-Verify

www.uscis.gov/E-Verify

The following tabs MUST be completed

- [x] -Standard Data Collection Form
- [x] -Financial System Survey
- [x] -Budget Summary
- [x] -Project Summary
- [ ] -FFATA Summary

The due date for this application is March 3, 2014 at 5:00PM. No late applications will be accepted. No incomplete applications will be accepted. There will be no opportunity for clarifications once the application has been submitted. To submit an application please click on the link below:

http://www.azdohs.gov/Application2014.asp

Central, East and North Regions, Phoenix UASI		West Region and State Agencies		South Region
Susan Dzbanko (602) 542-1777 sdzbanko@azdohs.gov		Lisa Hansen (602) 542-7014 lhansen@azdohs.gov		Bill Seltzer (602) 542-7044 wseltzer@azdohs.gov

Grant Timeline

March 3, 2013 no later than 5:00 PM (Arizona Time) - Application due to AZDOHS.

March 4 - March 18, 2014 AZDOHS reviews grant applications.

March 19- April 11, 2014 Applicable applications will be reviewed by Working Groups as necessary. Regional Advisory Councils will provide recommendations to the Director of AZDOHS.

TBD - AZDOHS Applications due to Federal DHS.
On or before September 2014 - Awards will be made to local jurisdictions and state agencies.

Grant Period - Start date will be determined by the date on the official award notice to Arizona. from U.S. DHS. The local jurisdictions grant award period will not exceed 12 months.

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

FOR THIS SECTION BE SURE TO CHOOSE A PROGRAM

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

Grant Program:

PROJECT ADMINISTRATIVE PAGE

1. Applicant: Gila County Sheriff's Office

Applicant Address:

Mailing Address: P.O.Box 311

City/State/Zip: Globe (City) | AZ (State) | 85501-1465 (Zip-4 Code)

https://tools.usps.com/go/ZipLookupAction!input.action

Head of Agency: Chief De (Title) | Johnny (First Name) | Sanchez (Last Name)

Phone #: 928-425-4449

E-Mail Address: jgsanchez@gilacountyaz.gov

Agency's Point of Contact Information: Lieutena (Title) | Keith (First Name) | Thompson (Last Name)

Phone #: 928-402-4213

Cell Phone #: 928-701-2541

E-Mail Address: kthompson@gilacountyaz.gov

2. Organization Type: County

3. Region or Entity: East Region

Program Initiatives

4a. Initiatives: Strengthen Interoperable Communications Capabilities

4b. Is this LETPA?: No

5. Total Dollar Amount Requested: $77,738

6. Enter the 2011 - 2014 State Homeland Security Strategy Objectives (EXAMPLE : 1.1.0) and Action Item(s) Numbers (EXAMPLE:1.1.4) that relate to this project. To learn more about the strategy visit this website:
http://www.azdohs.gov/Grants/SHSS.asp

1.1.0 Bolster Arizona's Communication Capabilities; 1.1.3

7. Is this project new or ongoing? If the project is ongoing, identify the corresponding projects and funding amounts for each year as applicable. Also, for the current grant cycle, please identify, if any, requests for funding from other funding sources i.e. EOC, EMPG etc.

This is a new project to improve communications systems. There is no other funding source for this project.

8. Please list the multiple jurisdictions and/or disciplines served by this project. Include POC information for each partnering agency.

No other jurisdiction is serving in this project.

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

PROJECT NARRATIVE

9. Provide a summary description (scope of work) for this project as well as a description of the need. Be sure to include how this project will support and enhance jurisdictional capabilities that are directly related to the Initiative identified on the previous tab under item 4. The character limit for this section is 1,000. Do not use any special characters such as a hyphen or apostrophe.

The Gila County Sheriff's Office dispatches between three agencies along with dispatching between its own different bureaus within the organizaton. Dispatch is capable to perform dispatch duites for other surounding agencies within Gila County in the event of a catastrophic failure in communications. In the event of a catastrophic failure within communications, it would take dispatch services much needed time to access the proper channeling for communications and having to monitor while swtiching back and forth between channels. This much needed, updated equipment would provide the proper channeling at the touch of the screen. This will provided dispatch not only to monitor the different frequencies but to stay in communications with the different field services out amonst the areas effected by the catastrophic incident.

10. What is the sustainability plan for this project/equipment?

These items of upgrade will replace much needed outdated equipment, plus integrate with current updated service and programming. This equipment will also make much needed changes to provide services to agencies it currently supports, along with agencies it may need communications with during a catastrophic failure.

11. Can partial funding be accepted for this project? If so, at what specific dollar amount(s), items, and quantities? Be sure to list the order of priority.

Yes, quote is for outfitting communications with 6 (six) dispatching stations. Communications services consists of 3 (three) stations in Globe and 3 (three) stations in Payson. Partial funding could be excepted for one area dispatching center to include; 3 (three) Desktop with Windows 7 (CPU) with specified C-Soft installed and Mouse & Keyboard at $6,639.00, 3 (three) C-Soft 24-line Softwares,USB's at $15,473.70, 3 (three) 19" LCD monitors at $1,474.20, 3 (three) ADHB-4 Headsets at $6,477.30, 3 (three) RHB-1, Remote Headset boxes at $812.70, 3 (three) Desk Top Gooseneck Microphone Kits at $1,233.90, 3 (three) DPDT FS-1, Foot Switches at $396.90, 3 (three) Dispatch Speakers at $174.15, 3 (three) Dispatcher Headsets at $2,592.00. These items will outfit one dispatching center.

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

PROJECT JUSTIFICATION

12. Explain how this project supports the State Homeland Security Strategy.
To learn more about the State Homeland Security Strategy, refer to the following website:
http://www.azdohs.gov/Grants/SHSS.asp

The Gila County Sheriff's Office project is to increase efforts to support communications within Gila County with local law enforcement agencies, fire support, medical support for public health, all for the health and welfare of the citizens. The Gila County Sheriff's Office Communications can also serve as support to surrounding counties for Communitactions and Public Safety in the event of a catastrophic communications failure or incident.

13. Include how this project fits into one (or more) of the State Initiatives. Please refer to the "PROJECT ADMIN TAB" under Item 4. Provide any additional justification that supports this project. The character limit for this section is 1,000. Do not use any special characters such as a hyphen or apostrophe.

This project supports the states initiatives to Strengthen Inoperable Communications by ebeling communication between local regions and surrounding regions. To implement NIMS and NRP by offering abilities to communicate and offer support to all agencies in the event of catastrophic incident. Strengthen planning and offer capabilities to Expand Regional Collaboration to offer a Citizen Preparediness an support.

14. Describe in detail the goals and objectives of the proposed project. Be sure to address what your organization's current capabilities are, and how the current capabilities of your organization will be impacted or enhanced as a result of this grant. The character limit for this section is 1,000. Do not use any special characters such as a hyphen or apostrophe.

The goal is to replace much need communications equipment by updating outdated software and replace equipment currently in place to better, eaiser, faster equiment. Communications is currently having to use multifuntions by manually switching for communication needs. This upgrade in equipment and software will impact communications and improve them to the capabilities and offer assistance in communications throughout the region and surrounding counties during a catastrophic incident where support in communitcatons is vital for the protection and welfar of impacted communities.

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

CORE CAPABILITIES

15. From the 31 Core Capabilities please identify, from the drop down menu, no more than three Core Capabilities supported by this project in priority order. Then enter the proposed amount of funding to be obligated for each Core Capability from this project. To access the Core Capabilities List click on the link below.

http://www.fema.gov/pdf/prepared/npg.pdf

http://www.fema.gov/pdf/prepared/crosswalk.pdf

Operational Communications	Enter Amount:	$77,748
Choose Core Capabilities	Enter Amount:	$0
Choose Core Capabilities	Enter Amount:	$0

This amount should equal the total amount being requested for this project. $77,748

16. For each Core Capability selected, list the gap number as identified in the State Preparedness Report (SPR) that this project will address (Example gap number: Operational Communications, Equipment, 1- Acquire, maintain and sustain equipment). For each gap listed, provide a description of HOW this project will addresses that gap within your jurisdiction and/or region.

Gap Number: Operation Communications, Equipment, 1- Aquire, maintain and sustain equipment for much needed communications within our own Organizational Infrastructure and to support surrounding organizations during a catastrophic communications failure. Support NIMS and NRP for communications to other surrounding counties during a communications failure in their region.

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

MILESTONES

16. Provide specific milestones for the project during the course of the performance period. Each milestone (up to 4) should provide a clear description of the projected outcome. Note: If this grant is awarded, the milestones, as identified below, are required to be fulfilled as part of the grant requirement. The grant performance period is 12 months and the projected funding cycle is October 2014 - September 2015. Extensions will only be considered under extenuating circumstances, and additional supporting documentation will be required. Do not use any special characters such as a hyphen or apostrophe.

Milestone 1

Description:	Start Date	End Date
Purchase and recieve Desktops with Windows 7, specified C-Software installed, mouse, Keyboard, 19" LCD Monitors, ADHB-4 Advanced Headsets, RHB-1 Remote Headset Boxs, Desk Top Gooseneck Microphone Kits, DPDT FS-1 Foot Switch, Dispatch Speakers, Dispatcher Headsets.	10/01/2014	12/31/2014

Milestone 2

Description:	Start Date	End Date
Install Desk Tops PC's with Windows 7, specified C-Software installed, Mouse, Keyboard, 19" LCD Monitors, ADHB-4 Advanced Headsets, RHB-1 Remote Headsets, Desk Top Gooseneck Microphone Kits, DPDT FS-1 Foot Switch, Dispatch speakers, Dispatcher Headsets.	01/01/2015	03/31/2015

Milestone 3

Description:	Start Date	End Date
Place into service/use Desk top PC's with Windows 7, specified C-Software installed, Mouse, Keyboard, 19" LCD Monitors, ADHB-4 Advance Headsets, RHB-1 Remote Headsets, Desk Top Gooseneck Microphone Kits, DPDT FS-1 Foot Switch, Dispatch Speakers, Dispatcher Headsets.	04/01/2015	06/30/2015

Milestone 4

Description:	Start Date	End Date
Maintain and trouble shoot any equipment and programming problems in Desk Top PC's with Windows 7, specified C-Software installed, Mouse, Keyboard, 19 LCD Monitors, ADHB-4 Advanced Headsets, RHB-1 Remote Headsets, Desk Top Gooseneck Microphone Kits, DPDT FS-1 Foot Switch, Dispatch Speakers, Dispatcher Headsets.	07/01/2015	09/30/2015

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

EQUIPMENT - BUDGET NARRATIVE

Include any and all items that can be found on the AEL. Equipment cost estimates must be listed, installation, shipping and taxes should be included in the per item cost. For each item of equipment, list the Authorized Equipment List (AEL) Item Number. If "Other Authorized Equipment" was annotated, specify the equipment here. All equipment associated with this grant must be listed on this page only. If you have any questions regarding the AEL, contact Michael Stidham at mstidham@azdohs.gov or (602) 542-7041.

The AEL can be found at the following link:

https://www.llis.dhs.gov/sites/default/files/AEL_PDF_Complete.pdf

What is the detailed description and utilization of the equipment?

Desktop Pc's w/Windows 7, C-Software Installed, Mouse, Keyboard, ADHB-4 Advanced Headsets, RHB-1 Remote Headset Boxs, Desktop Gooseneck Microphone Kits, DPDT FS-1 Foot Switch, Dispatch Speakers, Dispatcher headsets, 19" LCD Monitor, C-Soft 24 Line USB Software. The above listed equipment is to update much needed dispatch equipment.

AEL #	Unique Equipment Description- DO NOT copy and paste AEL description	Quantity Requested	Cost	Total Cost
04HW-01-INHW	Desk Top PC's w/Windows 7, C-Software Installed, Mouse and Keyboard	6	$2,213	$13,278
04HW-01-INHW	ADHB-4 Advanced Headset	6	$2,159	$12,954
04HW-01-INHW	RHB-1 Remote Headset Box	6	$271	$1,626
04HW-01-INHW	Desktop Gooseneck Microphone Kits	6	$411	$2,466
04HW-01-INHW	DPDT FS-1 Foot Switch	6	$132	$792
04HW-01-INHW	Dispatch Speakers	6	$58	$348
04HW-01-INHW	Dispatcher Headset	10	$518	$5,180
04HW-02-RFID	19" LCD Monitor	6	$491	$2,946
04SW-04-NETW	C-Soft 24 Line, USB Software	6	$5,158	$30,948
04HW-01-INHW	Stage Globe/Payson	2	$1,200	$2,400
04HW-01-INHW	Install Globe/Payson Consoles	2	$2,400	$4,800
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
1 - Select AEL #		0	$0	$0
			Total	$77,938

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #: Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

TRAINING - BUDGET NARRATIVE AND BUDGET DETAIL WORKSHEET

All training must be in accordance with and approved by the State Training POC, prior to any contracted services with training provider. Any grant funds used for Communications Unit Training must be in compliance with the Arizona Communications Unit Training Coordination Procedure.
More information can be found at:
http://azpsic.gov/library/standards/default.htm

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants from your jurisdiction.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

	Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
	0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries		$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

	Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
	0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries		$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries	$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries	$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries	$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries	$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries	$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

FEMA approved training class, course number, title and/or conference/training event, include specific conference event:
https://www.firstrespondertraining.gov

Enter a brief course description. MUST include: 1) proposed location, 2) training provider, 3) provider address, 4) provider point of contact, phone number and website, 5) estimated number of participants.

How does the requested training support FEMA mission scope to prepare personnel to prevent, protect, respond to and recover from all critical hazards?

How does the requested training address a gap identified in the SPR? List the gap number from the SPR and a description of how the training addresses that gap.

Mission Area: Choose Mission Area

Training Level: Choose Training Level

Projected Number of Deliveries (1 or Greater)	Backfill Overtime	Workshops Conferences	Trainers Contractors Consultants	Supplies	Travel	Total
0	$0	$0	$0	$0	$0	
Total Cost for All Deliveries	$0	$0	$0	$0	$0	$0

If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500

TOTAL TRAINING COSTS	$0	$0	$0	$0	$0	$0

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM PROJECT APPLICATION

Grant #: Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

EXERCISE - BUDGET NARRATIVE & BUDGET DETAIL WORKSHEET

Must be conducted in accordance with the Homeland Security Exercise and Evaluation Program (HSEEP).
https://www.llis.dhs.gov/hseep
Each Exercise event must be explained in detail. Personnel dollar amounts must list out fringe benefits and costs. Fringe benefits on overtime hours are limited to FICA, Workers' Compensation, and Unemployment Compensation. **(Medicare is NOT a reimbursable cost for personnel Backfill/Overtime).** All Equipment associated with Exercise must be listed on the "Equipment Budget Narrative" page only.
Travel, Lodging and Per Diem rates based on the Arizona Accounting Manual, that can be found at the following website:
http://www.gao.az.gov/publications/SAAM/SAAM-2d-022008.pdf

EXERCISE LEVEL: (Table Top, Functional, Full Scale)

EXERCISE DESCRIPTION: Provide a description of this exercise event. Each allowable exercise expense category must be listed and a brief description provided of each item and how it will be utilized. Estimated costs must be listed: Personnel, Travel, and Supplies, etc. If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500)

Backfill Overtime	Contractors/ Consultants	Design Develop	Exercise Planning	Travel	Supplies	Total
$0	$0	$0	$0	$0	$0	$0

EXERCISE LEVEL: (Table Top, Functional, Full Scale)

EXERCISE DESCRIPTION: Provide a description of this exercise event. Each allowable exercise expense category must be listed and a brief description provided of each item and how it will be utilized. Estimated costs must be listed: Personnel, Travel, and Supplies, etc. If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500)

Backfill Overtime	Contractors/ Consultants	Design Develop	Exercise Planning	Travel	Supplies	Total
$0	$0	$0	$0	$0	$0	$0

EXERCISE LEVEL: (Table Top, Functional, Full Scale)

EXERCISE DESCRIPTION: Provide a description of this exercise event. Each allowable exercise expense category must be listed and a brief description provided of each item and how it will be utilized. Estimated costs must be listed: Personnel, Travel, and Supplies, etc. If requesting supplies, you must provide a list and corresponding dollar amount for all consummable supplies requested. (Example: Wood for technical rescue $500 and 100 exercise manuals $20/each = $2,000 Total Supplies = $2,500)

Backfill Overtime	Contractors/ Consultants	Design Develop	Exercise Planning	Travel	Supplies	Total
$0	$0	$0	$0	$0	$0	$0

Backfill Overtime	Contractors/ Consultants	Design Develop	Exercise Planning	Travel	Supplies	Total
$0	$0	$0	$0	$0	$0	$0

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM PROJECT APPLICATION

Grant #: **Applicant:** Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

PLANNING - BUDGET NARRATIVE & BUDGET DETAIL WORKSHEET

Each Planning activity must be explained in detail. **Refer to the link below for additional guidance and detailed information on allowable planning expenses/activities.** Personnel dollar amounts must list fringe benefits and costs. Fringe benefits on overtime hours are limited to FICA, Workers' Compensation, and Unemployment Compensation. **(Medicare is NOT a reimbursable cost for personnel Backfill/Overtime)**. All Equipment associated with Planning must be listed on the "Equipment Budget Narrative" page only. ***The character limit for this section is 1,000***
Management & Administration and Planning Information:
http://www.azdohs.gov/Documents/Grants/HSGP_MAandPlanning1210.pdf
Travel, Lodging and Per Diem rates based on the Arizona Accounting Manual, that can be found at the following website:
http://www.gao.az.gov/publications/SAAM/SAAM-2d-022008.pdf

Provide a description of this planning activity. Each allowable planning expense category must be listed and a brief description provided of each item and how it will be utilized. Estimated costs must be listed: Personnel (# of employees, estimated hours of work, etc), Travel, and Materials, etc. If requesting conferences and workshops, provide the name and description of the conference(s) or workshop(s) requested. If requesting materials, you must provide a list and corresponding dollar amount for all materials requested.

Backfill and Overtime	Staff, Contractors, Consultants	Conferences and Workshops	Travel / Per Diem	Materials	Total
$0	$0	$0	$0	$0	$0

Select Associated Staff, Contractor, or Consultant Costs: Choose Planning Cost For Staff, Contractors, Consultants

Provide a description of this planning activity. Each allowable planning expense category must be listed and a brief description provided of each item and how it will be utilized. Estimated costs must be listed: Personnel, Travel, and Materials, etc. If requesting materials, you must provide a list and corresponding dollar amount for all materials requested.

Backfill and Overtime	Staff, Contractors, Consultants	Conferences and Workshops	Travel / Per Diem	Materials	Total
$0	$0	$0	$0	$0	$0

Select Associated Staff, Contractor, or Consultant Costs: Choose Planning Cost For Staff, Contractors, Consultants

Provide a description of this planning activity. Each allowable planning expense category must be listed and a brief description provided of each item and how it will be utilized. Estimated costs must be listed: Personnel, Travel, and Materials, etc. If requesting materials, you must provide a list and corresponding dollar amount for all materials requested.

Backfill and Overtime	Staff, Contractors, Consultants	Conferences and Workshops	Travel / Per Diem	Materials	Total
$0	$0	$0	$0	$0	$0

Select Associated Staff, Contractor, or Consultant Costs: Choose Planning Cost For Staff, Contractors, Consultants

Provide a description of this planning activity. Each allowable planning expense category must be listed and a brief description provided of each item and how it will be utilized. Estimated costs must be listed: Personnel, Travel, and Materials, etc. If requesting materials, you must provide a list and corresponding dollar amount for all materials requested.

Backfill and Overtime	Staff, Contractors, Consultants	Conferences and Workshops	Travel / Per Diem	Materials	Total
$0	$0	$0	$0	$0	$0

Select Associated Staff, Contractor, or Consultant Costs: Choose Planning Cost For Staff, Contractors, Consultants

PLANNING SUBTOTALS

					Total
$0	$0	$0	$0	$0	$0

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM PROJECT APPLICATION

Grant #: | Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

ORGANIZATION - BUDGET NARRATIVE & BUDGET DETAIL WORKSHEET

Each Organization activity must be explained in detail. Personnel dollar amounts must list fringe benefits and costs. Fringe benefits on overtime hours are limited to FICA, Workers' Compensation, and Unemployment Compensation. **(Medicare is NOT a reimbursable cost for personnel Backfill/Overtime)**. All Equipment assosciated with Organization must be listed on the "Equipment Budget Narrative" page only. ***The character limit for this section is 1,000***.

Travel, Lodging and Per Diem rates based on the Arizona Accounting Manual, that can be found at the following website:
http://www.gao.az.gov/publications/SAAM/SAAM-2d-022008.pdf

Provide a description of this Organization activity. Each allowable organization expense category must be listed and how it will be utilized.

Overtime for Information, Investigative and Intelligence Sharing Activities	Select Operational Expenses Associated with Increased Security Measures at CI Sites as Declared by Federal DHS.	New Staff Positions, Contractors, or Consultants for Participation in Information, Intelligence Analysis and Sharing Groups or Fusion Center Activities
$0	$0	$0

Provide a description of this Organization activity. Each allowable organization expense category must be listed and how it will be utilized.

Overtime for Information, Investigative and Intelligence Sharing Activities	Select Operational Expenses Associated with Increased Security Measures at CI Sites as Declared by Federal DHS.	New Staff Positions, Contractors, or Consultants for Participation in Information, Intelligence Analysis and Sharing Groups or Fusion Center Activities
$0	$0	$0

Provide a description of this Organization activity. Each allowable organization expense category must be listed and how it will be utilized.

Overtime for Information, Investigative and Intelligence Sharing Activities	Select Operational Expenses Associated with Increased Security Measures at CI Sites as Declared by Federal DHS.	New Staff Positions, Contractors, or Consultants for Participation in Information, Intelligence Analysis and Sharing Groups or Fusion Center Activities
$0	$0	$0

TOTAL ORGANIZATION COSTS	$0	$0	$0
TOTAL COSTS			$0

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM PROJECT APPLICATION

Grant #: Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

MANAGEMENT AND ADMINISTRATION - BUDGET NARRATIVE & BUDGET DETAIL WORKSHEET

M&A COSTS ARE LIMITED TO 5% OF THE TOTAL AMOUNT OF THE PROJECT AWARD.
M&A COSTS ARE NOT APPLICABLE FOR STATE AGENCIES.

Each M&A activity must be explained in detail. **Refer to the link below for additional guidance and detailed information on allowable M&A expenses/activities.** Personnel dollar amounts must list fringe benefits and costs. Fringe benefits on overtime hours are limited to FICA, Workers' Compensation, and Unemployment Compensation. **(Medicare is NOT a reimbursable cost for personnel Backfill/Overtime). M&A must be reasonable and prudent.** All Equipment assosciated with Organization must be listed on the "Equipment Budget Narrative" page only. ***The character limit for this section is 1,000***.
Management & Administration and Planning Information:

http://www.azdohs.gov/Documents/Grants/FundingRestrictionsMA.pdf

Travel, Lodging and Per Diem rates based on the Arizona Accounting Manual, that can be found at the following website:
http://www.gao.az.gov/publications/SAAM/SAAM-2d-022008.pdf

Provide a description of each M&A expense activity. Each allowable M&A expense category must be listed and provide a brief descirption of each category. Estimated costs must be listed: Personnel, Travel, etc. If requesting materials, you must provide a list of all consummable materials requested.

Backfill Overtime	Personnel Contractors Consultants	Collection Plan Development for DHS Data Calls	Travel Lodging Per Diem	Meeting Expenses	Materials	Recurring Equipment Fees	Total
$0	$0	$0	$0	$0	$0	$0	$0

Provide a description of each M&A expense activity. Each allowable M&A expense category must be listed and provide a brief descirption of each category. Estimated costs must be listed: Personnel, Travel, etc. If requesting materials, you must provide a list of all consummable materials requested.

Backfill Overtime	Personnel Contractors Consultants	Collection Plan Development for DHS Data Calls	Travel Lodging Per Diem	Meeting Expenses	Materials	Recurring Equipment Fees	Total
$0	$0	$0	$0	$0	$0	$0	$0

								Total
M & A SUBTOTALS:	$0	$0	$0	$0	$0	$0	$0	**$0**

STATE OF ARIZONA
Department of Homeland Security

2014 STATE HOMELAND SECURITY GRANT PROGRAM APPLICATION

Grant #:

Applicant: Gila County Sheriff's Office

Project Title: COMMUNICATIONS UPGRADE

APPLICATION - SUMMARY

FUNDING CATEGORIES	TOTAL
EQUIPMENT	$77,738
TRAINING	$0
EXERCISE	$0
PLANNING	$0
ORGANIZATION	$0
M & A	$0
APPLICATION TOTAL	$77,738

Grant Number:

Application Number:

Arizona Department of Homeland Security
1700 West Washington Street, Suite 210
Phoenix, AZ 85007

Project Summary

Local Unit of Government:	Gila County Sheriff's Office
Award Amount:	$77,738
Project Title:	COMMUNICATIONS UPGRADE
Project Description:	The Gila County Sheriff's Office dispatches between three agencies along with dispatching between its own different bureaus within the organization. Dispatch is capable to perform dispatch duties for other surrounding agencies within Gila County in the event of a catastrophic failure in communications. In the event of a catastrophic failure within communications, it would take dispatch services much needed time to access the proper channeling for communications and having to monitor while switching back and forth between channels. This much needed, updated equipment would provide the proper channeling at the touch of the screen. This will provided dispatch not only to monitor the different frequencies but to stay in communications with the different field services out amonst the areas effected by the catastrophic incident.
Project Type:	**Develop/enhance interoperable communication systems**
Primary Core Capability:	**Operational Communications**
HSGP Investment Supported:	**Strengthen Communications Collaboration**
HSGP Primary Goal:	**Goal 4 - Protect Arizona's Critical Infrastructure and Key Resources**
HSGP Objective:	**Choose an HSGP Objective**
Phoenix UASI Investment Supported:	Choose Primary Investment Supported
Phoenix UASI Primary Goal:	Choose a Phoenix UASI Goal
Phoenix UASI Objective:	Choose a Phoenix UASI Objective
Funding Source:	SHSGP - STATE HOMELAND SECURITY GRANT PROGRAM

2014 Budget Summary

Grant Number:

Is this LETPA? No

Application Number:

Allowable Planning Costs	SHSGP	UASI	Choose Primary Discipline
Developing hazard/threat-specific annexes that incorporate the range of prevention, protection, response, and recovery activities	$0	$0	Click Discipline
Developing and implementing homeland security support programs and adopting ongoing DHS National Initiatives	$0	$0	Click Discipline
Developing related terrorism prevention activities	$0	$0	Click Discipline
Developing and enhancing plans and protocols	$0	$0	Click Discipline
Developing or conducting assessments	$0	$0	Click Discipline
Hiring of full- or part-time staff or contract/consultants to assist with planning activities (not for the purpose of hiring public safety personnel fulfilling traditional public safety duties)	$0	$0	Click Discipline
Conferences to facilitate planning activities	$0	$0	Click Discipline
Materials required to conduct planning activities	$0	$0	Click Discipline
Travel/per diem related to planning activities	$0	$0	Click Discipline
Overtime and backfill costs (IAW operational Cost Guidance)	$0	$0	Click Discipline
Planning Totals	$0	$0	$0
Allowable Organizational Activities	**SHSGP**	**UASI**	**Choose Primary Discipline**
Overtime for information, investigative, and intelligence sharing activities (up to 50 percent of the allocation)	$0	$0	Click Discipline
Reimbursement for select operational expenses associated with increased security measures at critical infrastructure sites incurred during periods of DHS declared alert (up to 50 percent of the allocation)	$0	$0	Click Discipline
Hiring of new staff positions/contractors/consultants for participation in information/intelligence analysis and sharing groups or fusion center activities (up to 50 percent of the allocation)	$0	$0	Click Discipline
Organizational Totals	**$0**	**$0**	**$0**
Allowable Equipment Categories	**SHSGP**	**UASI**	**Choose Primary Discipline**
01- Personal Protective Equipment	$0	$0	Click Discipline
02- Explosive Device Mitigation and Remediation Equipment	$0	$0	Click Discipline
03- CBRNE Operational Search and Rescue Equipment	$0	$0	Click Discipline
04- Information Technology	$0	$0	Click Discipline
05- Cyber Security Enhancement Equipment	$0	$0	Click Discipline
06- Interoperable Communications Equipment	$77,748	$0	Public Safety Communications
07- Detection	$0	$0	Click Discipline
08- Decontamination	$0	$0	Click Discipline
09- Medical	$0	$0	Click Discipline
10- Power	$0	$0	Click Discipline
11- CBRNE Reference Materials	$0	$0	Click Discipline
12- CBRNE Incident Response Vehicles	$0	$0	Click Discipline
13- Terrorism Incident Prevention Equipment	$0	$0	Click Discipline
14- Physical Security Enhancement Equipment	$0	$0	Click Discipline
15- Inspection and Screening Systems	$0	$0	Click Discipline
16- Agriculture Terrorism Prevention, Response, and Mitigation Equipment	$0	$0	Click Discipline
17- CBRNE Prevention and Response Watercraft	$0	$0	Click Discipline
18- CBRNE Aviation Equipment	$0	$0	Click Discipline
19- CBRNE Logistical Support Equipment	$0	$0	Click Discipline
20- Intervention Equipment	$0	$0	Click Discipline
21- Other Authorized Equipment	$0	$0	Click Discipline
Equipment Totals	**$77,748**	**$0**	**$77,748**
Allowable Training Costs	**SHSGP**	**UASI**	**Choose Primary Discipline**
Overtime and backfill for emergency preparedness	$0	$0	Click Discipline
Training workshops and conferences	$0	$0	Click Discipline
Full- or part-time staff or contractors/consultants	$0	$0	Click Discipline
Travel	$0	$0	Click Discipline
Supplies	$0	$0	Click Discipline
Training Totals	**$0**	**$0**	**$0**
Allowable Exercise Related Costs	**SHSGP**	**UASI**	**Choose Primary Discipline**
Design, Develop, Conduct and Evaluate an Exercise	$0	$0	Click Discipline
Exercise planning workshop	$0	$0	Click Discipline
Full- or part-time staff or contractors/consultants	$0	$0	Click Discipline
Overtime and backfill costs, including expenses for part-time and volunteer emergency response personnel participating in FEMA exercises	$0	$0	Click Discipline
Implementation of HSEEP	$0	$0	Click Discipline
Travel	$0	$0	Click Discipline
Supplies	$0	$0	Click Discipline
Exercise Totals	**$0**	**$0**	**$0**
Allowable Management & Administrative Costs	**SHSGP**	**UASI**	**Choose Primary Discipline**
Hiring of full- or part-time staff or contractors/consultants to assist with the management of the respective grant program, application requirements, compliance with reporting and data collection requirements	$0	$0	Click Discipline
Development of operating plans for information collection and processing necessary to respond to FEMA data calls	$0	$0	Click Discipline
Overtime and backfill costs	$0	$0	Click Discipline
Travel	$0	$0	Click Discipline
Meeting related expenses	$0	$0	Click Discipline
Authorized office materials	$0	$0	Click Discipline
Recurring expenses such as those associated with cell phones and faxes during the period of performance of the grant program	$0	$0	Click Discipline
Management & Administrative Totals	**$0**	**$0**	**$0**
Grand Totals	$77,748	$0	$77,748

Arizona Department of Homeland Security
Financial Systems Survey

Name of Organization: Gila County Sheriff's Office

Person completing survey: Keith Thompspon

Date: 3/2/2014 Email: kthomnpson@gilacountyaz.gov

PLEASE ANSWER EVERY QUESTION BY CHECKING THE APPROPRIATE BOX. ATTACH MATERIALS AND DOCUMENT Comments AS REQUIRED.

As stewards of federal and state funds, the Arizona Department of Homeland Security (AZDOHS) prefers to award funds to organizations (regardless of how small or large) that are both capable of achieving project goals/objectives and upholding their responsibility for properly managing funds as they achieve those objectives.

This survey will be used primarily for initial monitoring of the organization. This survey may also be used in evaluating the financial capability of the organization in the award process. Deficiencies should be addressed for corrective action and the organization should consider procuring technical assistance in correcting identified problems.

A. GENERAL INFORMATION

1. Has your organization received a Federal or State Grant within the last two years?
☑ Yes ☐ No

2. Has your organization received funding from the Arizona Department of Homeland Security within the past two years? If yes, specify the grant contract numbers (for OSGP awards prior to FFY08 simply state "Stonegarden" in the blank provided): SHSGP 444403-03
☑ Yes ☐ No

3. Has your organization been audited by an independent Certified Public Accountant within the past two years?
☐ Yes ☑ No

4. Has your organization completed an A-133 Single Audit within the past two years?
☐ Yes ☐ No

5. Has your organization been granted tax-exempt status by the Internal Revenue Service?
☑ Yes ☐ No

6. If you answered YES to question #5 under what section of the IRS code?
☐ 501 C (3) ☐ 501 C (4) ☐ 501 C (5) ☐ 501 C (6) ☐ Other

7. Does your organization have established policies related to salary scales, fringe benefits, travel reimbursement and personnel policies?
☑ Yes ☐ No

B. FUNDS MANAGEMENT

8. Which of the following describes your organization's accounting system?
☐ Manual ☐ Automated ☐ Combination

9. How frequently do you post to the General Ledger?
☐ Daily ☐ Weekly ☐ Monthly ☐ Other

10. Does the accounting system completely and accurately track the receipt and disbursements of funds by each
☐ No

☐ Yes ☐ No

11. Does the accounting system provide for the recording of actual costs compared to budgeted costs for each budget line item?

☑ Yes ☐ No

12. Are time and effort distribution reports maintained for employees working fully or partially on state or federal grant programs which account for 100% of each employee's time?

☐ Yes ☐ No

13. Is your organization familiar with Federal Cost Principles (i.e. OMB Circular A-87, A-122 or A-21)?

☐ Yes ☐ No

C. INTERNAL CONTROLS

14. Are duties of the bookkeeper/accountant segregated from the duties of cash receipt or cash disbursement?

☐ Yes ☐ No

15. Are checks signed by individuals whose duties exclude recording cash received, approving vouchers for payment and the preparation of payroll?

☐ Yes ☐ No

16. Are all accounting entries and payments supported by source documentation?

☐ Yes ☐ No

17. Are cash or in-kind matching funds supported by source documentation?

☐ Yes ☐ No

18. Are employee time sheets supported by appropriately approved/signed documents?

☐ Yes ☐ No

19. Does the organization maintain policies which include procedures for assuring compliance with applicable Code of Federal Regulations and terms of each grant award?

☐ Yes ☐ No

D. PROCUREMENT

20. Does the organization maintain written codes of conduct for employees involved in awarding or administering procurement contracts?

☐ Yes ☐ No

21. Does the organization conduct purchases in a manner that encourages open and free competition among vendors?

☐ Yes ☐ No

22. Does the organization complete some level of cost or price analysis for every purchase?

☐ Yes ☐ No

23. Does the organization maintain files and other source documentation sufficient to detail the history of each purchase?

☐ Yes ☐ No

24. Does the organization maintain a system of contract administration to ensure contractor conformance with the terms and conditions of each contract?

☐ Yes ☐ No

25. Does the organization maintain written procurement policies and procedures?

☐ Yes ☐ No

Grant Number:

Application Number:

Arizona Department of Homeland Security

Standard Data Collection Form

A. Agency Information

Project Title *(if applicable)*: COMMUNICATIONS UPGRADE

Agency: Gila County Sheriff's Office

Amount Requested: $77,738

Project Description: The Gila County Sheriff's Office dispatches between three agencies along with dispatching between its own different bureaus within the organizaton. Dispatch is capable to perform dispatch duites for other surounding agencies within Gila County in the event of a catastrophic failure in communications. In the event of a catastrophic failure within communications, it would take dispatch services much needed time to access the proper channeling for communications and having to monitor while swtiching back and forth between channels. This much needed, updated equipment would provide the proper channeling at the touch of the screen. This will provided dispatch not only to monitor the different frequencies but to stay in communications with the different field services out amonst the areas

Address: P.O.Box 311

Globe *(City)* AZ *(State)* 85501-1465 *(Zip code)*

County: Gila

Authorized Individual:

Name: Johnny *(First Name)* Sanchez *(Last Name)*

Position / Title: Chief Deputy

Email: jgsanchez@gilacountyaz.gov

Phone: 928-425-4449 Ext.

Fax:

Employer Identification Number: DUNS Number:

Agency Classification *(This is based on your selection on the Project Administrative Page)*: County

Have you previously conducted business with the State using this Employer Identification Number? Select Yes/No

If No, Please go to the following website to download and complete the State of Arizona Substitute W-9 form. Please be sure to submit this form with y application.

http://gao.az.gov/onlineforms/forms/AZ_subw-9_010713-S&S.pdf

In which Congressional (Federal) District is your agency headquartered? Enter District #: 1

http://www.azredistricting.org

In which Legislative (State) District is your agency headquartered? Enter District # : 5

http://www.azredistricting.org

Approximately how much FEDERAL funding will your organization expend in your current fiscal year?

What is your organization's fiscal year-end date? MM 06 DD 30

Does your organization undergo an annual independent audit in accordance with OMB Circular A-133? Select Yes/No

Please provide contact information of the audit firm conducting your audit:

Agency:

Address: *(Address Line 1)*

(Address Line 2) *(City)* AZ *(State)* *(Zip code)*

Phone Number:

:

Arizona Department of Homeland Security

Standard Data Collection Form

B. Contact Information (Please copy this portion as many times as needed.)

Program Agency - Indicates person with primary contact with the Arizona Department of Homeland Security and is directly responsible for ensuring tha program plan is implemented. All future program correspondence will be sent to this person.
Fiscal Agency - Indicates person responsible for financial matters pertaining to this grant.
Collaborator - Indicates all persons/agencies that have been identified as a collaborator, partner, or host site as a requirement of this grant.

Agency Contact Type : **Program Agency**

Agency: **Gila County Sheriff's Office**
Address: **P.O.Box 311**
(Address Line 1)
1100 South St. **Globe** **AZ** **85501**
(Address Line 2) (City) (State) (Zip code)
County: **Select County**
Contact Person:
(First Name) (Last Name)
Position/Title:
Email:
Phone Number: Ext.
Fax:

Agency Contact Type : **Select Contact Type**

Agency:
Address:
(Address Line 1)
(Address Line 2) (City) (State) (Zip code)
County: **Select County**
Contact Person:
(First Name) (Last Name)
Position/Title:
Email:
Phone Number: Ext.
Fax:

Agency Contact Type : **Select Contact Type**

Agency:
Address:
(Address Line 1)
(Address Line 2) (City) (State) (Zip code)
County: **Select County**
Contact Person:
(First Name) (Last Name)
Position/Title:
Email:
Phone Number: Ext.
Fax:

Grant Number:

Application Number:

Arizona Department of Homeland Security

FFATA (Federal Funding Accountability and Transparency Act) Reporting Requirements

Name of Entity Receiving Award: Gila County Sheriff's Office

Requested Amount: $77,738 Awarded Amount: (AZDOHS use only)

Funding Agency: Arizona Department of Homeland Security

CFDA Number: 97.067

Project Title: COMMUNICATIONS UPGRADE

Location: City: Globe State: AZ Congressional District 1

http://www.azredistricting.org

10-digit Zip+4 (99999-9999): 85501-1465

DUNS Number:

1) Is 80% or more of your annual gross revenues from Federal Awards? No

2) Do you receive $25 Million or more annually from Federal Awards? No

If you answered YES to BOTH questions, you MUST provide the following:

Names and Total Compensation of Top Five paid executives:

1: Name Total Compensation

2: Name Total Compensation

3: Name Total Compensation

4: Name Total Compensation

5: Name Total Compensation

STATE OF ARIZONA
Department of Homeland Security
2014 STATE HOMELAND SECURITY GRANT PROGRAM PROJECT APPLICATION

Points of Contact

Address Your State Homeland Security Grant Program Management Questions to the Individuals Listed Below

AZDOHS

Assistant Director of Planning and Preparedness
Lisa Hansen
(602) 542-7014
Lhansen@azdohs.gov

Assistant Director of Finance and Administration
Terry Riordan
(602) 542-7056
Triordan@azdohs.gov

Assistant Director of Community Preparedness
Cheryl Bowen Kennedy
(602) 542-7077
Cbowen@azdohs.gov

Equipment Specialist
Michael Stidham
(602) 542-7041
Mstidham@azdohs.gov

NIMCAST COMPLIANCE (ADEM)
Mariano Gonzalez
(602) 464-6327
Mariano.gonzalez@azdema.gov

REGIONAL STRATEGIC PLANNERS AND FINANCE SPECIALISTS

Central, East, North Regions & Phoenix UASI
Susan Dzbanko
Senior Strategic Planner
Office: (602) 542-1777
Cell: (602) 319-8837
Sdzbanko@azdohs.gov

West Region & State Agencies
Lisa Hansen
Asst. Director
Office: (602) 542-7012
Cell: (602) 568-2973
lhansen@azdohs.gov

South Region & OPSG
Bill Seltzer
Strategic Planner
Office: (602) 542-7044
Cell: (602) 568-5806
wseltzer@azdohs.gov

Central Region & Phoenix UASI
Lois George
Grant & Finance Specialist II
(602) 542-7047
Lgeorge@azdohs.gov

State Agencies
Kevin Mancino
Budget Manager
(602) 542-1716
Kmancino@azdohs.gov

East, West & North Regions
Nicole Elmer
Project Specialist
(602) 542-7036
nelmer@azdohs.gov

South Region
Simone Courter
Grant & Finance Specialist I
(602) 542-7037
Scourter@azdohs.gov

ADEM (Training & Exercise)

Homeland Security Training Coordinator
Kathy Hassett
Office: (602) 464-6264
katherine.hassett@azdema.gov

Director of Exercise
Jan Lindner
Office: (602) 464-6218
jan.lindner@azdema.gov

Exercise Coordinator
Dan Varner
Office: (602) 464-6444
dan.varner@azdema.gov

Exercise Coordinator
Nichole Fortson
Office: (602) 464-6514
Nichole.fortson@azdema.gov

Arizona Departme.. of Homeland Security
FFY 2013
State Homeland Security Grant Program (SHSGP)
Regional Advisory Council (RAC) Scoring Tool*

Region _____
Reviewer _____

Score All projects using the following scale	
2	Project Fully Meets Criterion
1	Project Partially Meets Criterion
0	Project Does Not Meet Criterion

Project #	The overall application is complete	Project is multi-discipline (1) or multi-jurisdictional (2)	Project Narrative is fully described and sustainability (if applicable) is outlined	Provides linkage between project and State Homeland Security Strategy and objective identified	Project describes current capabilities, how this project will enhance capabilities, and provides method of how to determine success.	Supports SPR gaps. (value double weighted)	Milestones are achievable and provide clear description of the activities from start to finish and are presented in a clear sequence	Budget Narratives are descriptive of all project requirements (includes FEMA Course #s, AEL #s, etc.)	Funding Plan is appropriate for activities or services	
										0
										0
										0
										0
										0
										0
										0
										0
										0
										0
										0

*This is tool is to assist the RACs in their review and recommendation process.