Draft

Approval of Previous Business Meeting Minutes: June 10, 2021

BOARD OF COUNTY COMMISSIONERS BUSINESS MEETING MINUTES

A complete video copy and packet including staff reports of this meeting can be viewed at https://www.clackamas.us/meetings/bcc/business

<u>Thursday, June 10, 2021 – 6:00 PM</u> Virtual Meeting via Zoom and in Person

PRESENT: Vice Chair Commissioner Paul Savas Commissioner Sonya Fischer Commissioner Martha Schrader Commissioner Mark Shull

EXCUSED: Chair Tootie Smith

CALL TO ORDER

- Roll Call
- Pledge of Allegiance

Vice Chair Savas moved Public Communication up first:

V. <u>PUBLIC COMMUNICATION</u> (The Chair of the Board will call for statements from citizens regarding issues relating to County government. It is the intention that this portion of the agenda shall be limited to items of County business which are properly the object of Board consideration and may not be of a personal nature. Testimony is limited to three (3) minutes. Comments shall be respectful and courteous to all.)

Opened Public Hearing:

General Public Hearing In person

- 1. Jo Haverkamp Clackamas County Mark Shull
- 2. Leila Blakely Sandy We the People
- 3. Tonya Sare- Oregon City We The People
- 4. Mike Hammons-Damascus- Saying Hello from the CPO
- 5. Kevin Moss Boring NCPRD/ABC's
- 6. Gina Tallerino Happy Valley No Vaccine Passport/no segregation
- 7. Cris Waller Milwaukie Mark Shull
- 8. Mike Weber Milwaukie Good Governance
- 9. Leslie Mateus Oregon City Shot/Mask
- 10. Chris Calvert Oregon City Covid Passport/Sanctuary
- 11. Anthony Bowen Portland -
- 12. Yvonne Lazarus Milwaukie BCC
- 13. Les Poole Gladstone –
- 14. Angela Pederson Oregon City Vaccine Mandate

General Public Hearing Zoom

- 1. *Dr. Katherine Lopez Sankey Lake Oswego Requesting you enact policies that prevent discrimination based on vaccine status
- 2. Ron Vrooman Beaverton Constitutional Republican form of government
- 3. Shelley Cook Oregon City I'm in complete support of the passport vaccine ban!!!!!
- 4. *Stephanie Meyer Sandy I support having a BAN of the vaccine passport
- 5. Deedra Thompson Sandy Vaccine Passports
- 6. Christine Prudence Welches Vaccine passports/sections
- 7. Brittney Waugh Clackamas County Vaccine Passport
- 8. Tim Smith Wilsonville Commissioner marks status Liaison
- 9. Bill Wehr Clackamas County Public Policy
- 10. Jim and Christine McIntyre Oak Grove Vaccine Passport Ban

*Registered for Public Comment but did not speak

Closed Public Hearing

***Ice Storm Updates https://www.clackamas.us/meetings/bcc/business

***COVID Updates https://www.clackamas.us/meetings/bcc/business
~Board Discussion~

Vice-Chair Savas: The Board will now Recess as the Board of County Commissioners and Convene as the Housing Authority Board for the next items on the agenda.

I. *HOUSING AUTHORITY CONSENT AGENDA https://www.clackamas.us/meetings/bcc/business

- 1. Approval to execute contracts between HACC and Yardi/RentGrow to purchase a new fully integrated housing authority specific software service system. Total value for both contracts over the contract term is \$890,000.00 with funding through Housing Authority and HUD CARES Act funds. No general funds are involved. HACC
- In the Matter of Writing off Uncollectible Accounts for the Fourth Quarter of Fiscal Year 2021. The total amount to write off is \$17,731.17. No general funds are involved. -HACC

Commissioner Leenstra: I move for Approval the consent agenda Commissioner Fischer: Second Clerk called the Poll Commissioner Leenstra: Aye. Commissioner Schrader: Aye. Commissioner Shull: Aye. Commissioner Fischer: Aye. Vice Chair Savas: Aye.–the motion carries 5-0

The Board will now adjourn as the Housing Authority and reconvene as the Board of County Commissioners for the next items on the agenda.

II. <u>PUBLIC HEARINGS</u> https://www.clackamas.us/meetings/bcc/business

 First Reading of County Parks Fine and Code Changes (Tom Riggs, Business and Community Services)
 ~Board Discussion~
 Opened Public Hearing
 No Public Hearing
 Closed Public Hearing

Commissioner Fischer: I move for amendment of the code to add "where restroom facilities are provided to L4" Commissioner Schrader: Second Clerk called the Poll Commissioner Schrader: Aye. Commissioner Shull: No. Commissioner Fischer: Aye. Vice Chair Savas: Aye.–the motion carries 3-1

Commissioner Schrader: I move to read the ordinance by title only as amended Commissioner Fischer: Second Clerk called the Poll Commissioner Shull: No. Commissioner Fischer: Aye. Commissioner Schrader: Aye. Vice Chair Savas: Aye.-the motion carries 3-1

The second reading will be on Thursday, June 24, 2021 at the Board's regular scheduled Business meeting at 10 AM.

III. *CONSENT AGENDA https://www.clackamas.us/meetings/bcc/business

A. <u>Health, Housing & Human Services</u>

- 1. Approval to Accept a Grant Award with Kaiser Permanente Community Health, in partnership with Oregon Primary Care Association for support COVID-19 vaccination efforts. The maximum agreement value is \$100,000 with funding through Oregon Primary Care Association. No County General Funds are involved. Health Centers
- Approval to Accept a Grant Award with Health Resources and Services Administration (HRSA) for American Rescue Plan Act (ARPA) Funding for Health Centers. The Maximum agreement value is \$3,563,000 with funding through health resources and services administration. No county general funds are involved. – Health Centers
- Approval to Apply to Funding Opportunity with CareOregon for CareOregon Emergency Relief Funds. The Maximum agreement value is \$750,000 with funding through Care Oregon. No county general funds are involved. – Health Centers
- 4. Approval of an Intergovernmental Agreement (IGA) with Oregon Health Authority and Clackamas County Public Health Division. This is a FEMA Revenue Agreement only. No county general funds are involved Public Health
- 5. Approval of a Local Subrecipient Grant Amendment #1 with Northwest Family Services to provide Ready for Kindergarten workshops and educational supplies to families with young children. Amendment #1 adds \$7,998 for a maximum value of \$56,558.40 and extends the end date to September 30, 2021. No county general funds are involved CFCC
- 6. Approval for a Revenue Agreement with the State of Oregon, acting by and through its Oregon Health Authority for the Reproductive Health Program. This is revenue generated through fees for services. No county general funds are involved Health Centers
- Approval of a Local Subrecipient Amendment #1 with Clackamas County Children's Commission to provide Head Start/Early Head Start children access to Ready Rosie programming and Ready for Kindergarten supplies. Amendment #1 adds \$37,765 for a revised amount of \$50,685.47. No match is required. No county general funds are involved. – CFCC
- 8. Approval to Purchase one Category B Bus from Schetky Northwest Sales, Inc. For Use by Mt. Hood Express Transit Service. Total purchase cost is \$198,216 and is funded through HB 2017 Statewide Transportation Improvement Funds by contract with TriMet. No county general funds are involved. Social Services
- 9. Approval of a Local Subrecipient Grant Amendment #1 with Todos Juntos to provide Brain Box early learning materials and training to families located in Canby or Molalla. Amendment #1 adds \$17,049 for a revised amount of \$50,805 with funding through Oregon Community Foundation and Oregon State University. No county general funds are involved – CFCC
- Approval of Amendment #02 to a Contract with Northwest Family Services for Drug and Alcohol Pre-Engagement and Prevention Activities. Amendment #2 adds \$51,140.08 for a new contract maximum of \$153,420.23 with funding through the State of Oregon. No county general funds are involved – Behavioral Health
- Approval of Amendment # 1 of the Sub-recipient Professional Services Agreement with Cascade AIDS Project (CAP) for HIV Testing and Counseling Services. The maximum agreement value is \$75,244 and is funded through the State of Oregon. No county general funds are involved. – Public Health

 Approval of Amendment #01 to the Sub-recipient Professional Services Agreement with Outside In, for HIV Testing and Counseling Services. The maximum agreement value is \$22,477 and is funded through the State of Oregon. No county general funds are involved – Public Health

B. <u>Transportation & Development</u>

- 1. Approval of a Contract with T.F.T Construction, Inc., for the Kelso Road/ Richey Road Paving Package; Total Contract Value \$1,019,342.00 with funding through the County Road Fund. No general funds are involved.
- C. Elected Officials
- 1. Approval of Previous Business Meeting Minutes *BCC*

D. Disaster Management

- 1. Approval of a Subrecipient Agreement Amendment between the City of Portland and Clackamas County for purchase and reimbursement activities related to the use of the FY18 United States Department of Homeland Security's Urban Area Security Initiative (UASI) grant program. FY18 Urban Area Security Initiative funds under the Clackamas County agreement will not be amended and remain a total of \$443,381. The funding source is the United States Department of Homeland Security via the Oregon Military Department. No general funds are involved.
- 2. Approval of Amendment No. 1 to Intergovernmental Agreement between the State of Oregon (Oregon State Police) and Clackamas County for Medical Examiner's Office Building Agreement. Clackamas Medical Examiner's Office will be paying \$3,318.44 monthly for use of the Oregon State Medical Examiner's Office Facility and Log Case Management System. This is budgeted expense and will come from General Funds.
- 3. Approval to Apply for FY2021 Emergency Management Performance Grant between Clackamas County and the State of Oregon. The grant agreement total value anticipated is around \$212,000. The grant is a 50% federal share grant that will reimburse Clackamas County Disaster Management for up to fifty percent of salaries and benefits of six employees. This will include general funds and is budgeted.

E. <u>Community Corrections</u>

- 1. Approval of Amendment # 2 Grant Agreement JR-19-003 with the State of Oregon, Criminal Justice Commission, Justice Reinvestment for Clackamas County Community Corrections Programs. This is a reduced funds amendment, it will reduce funds by \$24,944.51 making the awarded balance remaining of \$2,251,703.70. Funding for this is through the Criminal Justice Commission. No general funds are involved.
- Approval of an Intergovernmental Agreement between Clackamas County Community Corrections and Oregon State Parks, Milo McIver State Park to provide Work Crew Services from July 1, 2021 through June 30, 2022. This will provide approximately \$30,000 in revenue to support the Community Service Program. No general funds are involved.
- 3. Approval of an Intergovernmental Agreement between Clackamas County Community Corrections and City of Oregon City to provide Work Crew Services from July 1, 2021 through June 30, 2022. This will provide approximately \$10,000 in revenue to support the Community Service Program. No general funds are involved.
- 4. Approval of an Intergovernmental Agreement between Clackamas County Community Corrections and City of Milwaukie to provide Work Crew Services from July 1, 2021 through June 30, 2022. This will provide approximately \$6,000 in revenue to support the Community Service Program. No general funds are involved.
- 5. Approval of an Intergovernmental Agreement between Clackamas County Community Corrections and Clackamas Community College to provide Work Crew Services from July 1, 2021 through June 30, 2022. This will provide approximately \$10,000 in revenue to support the Community Service Program. No general funds are involved.
- 6. Approval of an Intergovernmental Agreement between Clackamas County Community Corrections and Clackamas County Fair Board to provide Work Crew Services from July 1, 2021 through June 30, 2022. This will provide approximately \$6,000 in revenue to support the Community Service Program. No general funds are involved.

7. Approval of an Intergovernmental Agreement between Clackamas County Community Corrections and City of Happy Valley Park to provide Work Crew Services from July 1, 2021 through June 30, 2022. This will provide approximately \$40,000 in revenue to support the Community Service Program. No general funds are involved.

F. <u>Technology Services</u>

1. Approval for a Service Level Agreement between CBX and Allstream Business US for dark fiber connections. The monthly recurring cost for the connections will be \$1,465.00 with a nonrecurring cost of \$98,500.00. The funding source for the expansion of the CBX fiber network will be contributed from the CBX budget and then reimbursed by Allstream Business US. No general funds are involved.

Commissioner Shull: I move for Approval of the consent agenda Commissioner Fischer: Second Clerk called the Poll Commissioner Shull: Aye.. Commissioner Fischer: Aye. Commissioner Schrader: Aye. Vice Chair Savas: Aye.–the motion carries 4-0

The Board will recess as the Board of County Commissioners and convene as the Board for Water Environment Services for the next consent agenda.

IV. *WATER ENVIRONMENT SERVICES CONSENT AGENDA

https://www.clackamas.us/meetings/bcc/business

- 1. Approval of Amendment No. 2 to an Intergovernmental Agreement between Water Environment Services and the City of Happy Valley, Oregon For Street Sweeping Services. Amendment #2 is for the amount of \$83,000 with funding through WES Surface Water Operating Fund. No county general funds are involved.
- Approval of a Resolution Authorizing the Director of Water Environment Services to Release Liens in the North Clackamas Revitalization Area. Potentially foregoing an increase in SDC revenues of about \$5,800 per release. No county general funds are involved.

Commissioner Shull: I move for Approval of the consent agenda Commissioner Schrader: Second Clerk called the Poll Commissioner Shull: Aye.. Commissioner Fischer: Aye. Commissioner Schrader: Aye. Vice Chair Savas: Aye.–the motion carries 4-0

VI. COUNTY ADMINISTRATOR UPDATE

https://www.clackamas.us/meetings/bcc/business

VII. COMMISSIONERS COMMUNICATION

https://www.clackamas.us/meetings/bcc/business

Adjourned 8:08 PM



Clackamas County Sheriff's Office

ANGELA BRANDENBURG Sheriff

Board of County Commissioners Clackamas County

Members of the Board:

Approval of Purchase Five (5) vehicles from Withnell Motor Corporation, dba Withnell Dodge for use by <u>Clackamas County Sheriff's Office</u>

| Purpose/Outcome | Approval to purchase five (5) Dodge Durango's for the Sheriff's Office. |
|-------------------|---|
| Dollar Amount and | \$34,448.91 each for a total not to exceed \$172,244.55. |
| Fiscal Impact | |
| Funding Source | CCSO Fleet Budget 216-1603-06831-485510 |
| Duration | To be purchase before June 30, 2021. |
| Previous Board | None |
| Action/Review | |
| Strategic Plan | Furthers the County's focus to keeping our residents safe, healthy and |
| Alignment | secure. Replaces less reliable vehicles. |
| Procurement | Yes |
| Review | |
| Contact Person | Warren Gadberry, County Fleet Manager |
| Contract No. | N/A |

BACKGROUND:

The vehicles will be assigned to the Sheriff's Office Patrol Division and will be replacement vehicles. The outgoing vehicles have high mileage and will be relegated to spare use. These vehicles are on-lot and ready to purchase and pickup to begin outfitting for the Sheriff's Office.

PROCUREMENT PROCESS:

Approval of the purchase is being requested under the Local Contract Review Board Rule C-046-0400, Authority of Cooperative Procurements. The purchase is made against the State of Oregon Price Agreement #1651 with Withnell Motor Corporation.

RECOMMENDATION: Sheriff's Office respectfully requests that the Board of County Commissioners approve this vehicle purchase for the Sheriff's Office.

Respectfully submitted,

angela Bendenburg_

Angela Brandenburg, Sheriff Placed on the BCC Agenda ______ by the Procurement Division

Approval of Purchase: _____

Chair

Recording Secretary

Date



20May2021

TO: Warren Gadberry, Clackamas County Fleet

FR: Angela Brandenburg, Clackamas County Sheriff

RE: Purchase of Sheriff's Office vehicle

The Clackamas County Sheriff's Office requests the Clackamas County Fleet Department obtain five (5) 2021 Dodge Durangos from Withnell Dodge equipped per attached vehicle invoice forms. Please include E-plates with purchase. The total cost of the 2021 Dodge Durango Police AWD is \$34,448.91. Setup and installation fees are \$30,552.74. The total cost of the 2021 Dodge Durango is \$65,001.65.

The vehicles will be assigned to the Sheriff's Office Patrol Division and will be replacement vehicles. The outgoing vehicles have high mileage and will be relegated to spare use.

The funds for these vehicles are available in the Sheriff's Office 2020-2021 fiscal year budgets. The purchase, title and document fees will be drawn from Clackamas County Fleet line item 216-1603-06831-485510. The setup and installations fees will be drawn from Clackamas County Fleet line item 216-1603-06831-485400.

Respectfully,

Angela Brandenburg, Sheriff

By Undersheriff Mike Copenhaver Clackamas County Sheriff's Office

State of Oregon



PRICE AGREEMENT WITH

Withnell Motor Company (dba Withnell Dodge)

FOR

Dodge and Ram Brand Vehicles Price Agreement # 1651

Price Agreement # 1651 Withnell Motor Company (dba Withnell Dodge)

| WITHNELL DODGE 2650 COMMERCIAL SE SALEM, OR 973024451 | | | Priced O | order Confirmation (POC) |) | |
|---|--|-------------------------------|---|-----------------------------|----------------------------------|--|
| Date Printed: | 2021-05-06 3:20 | РМ | VIN: | 1C4SDJFT2MC662042 | Quantity: | 01 |
| Estimated Ship Date: | 2021-02-09 2:00 | AM | VON: | 46934304 | Status: | KZ - Released by plant and involced |
| Date Ordered: | 2020-09-11 1:01 | PM | Ordered By: | S28368H | FAN 1: FAN 2: Client Code: | 48979 State of Oregon |
| Sold to: WITHNELL DODGE (56440 2650 COMMERCIAL SE SALEM, OR 973024451 |)) | | Ship to: WITHNELL DOI 2650 COMMER SALEM, OR 973 | CIAL SE | Bid Number: PO Number: | TB1086 |
| Vehicle: | | | 2021 [| DURANGO PURSUIT VEH | IICLE AWD (WDE | E75) |
| Model: Package: | Sales Code WDEE75 22Z EZH | DUR. Custo | ription ANGO PURSUIT omer Preferred Pa V8 HEMI MDS V | ackage 22Z | | MSRP(USD) 36,000 0 2,995 |
| Paint/Seat/Trim: | DFD PW7 APA *C5 -X9 | White Mono | d Auto 8HP70 Tra e Knuckle Clear C otone Paint i Bucket Seats w/ | Coat | | 0 0 0 0 |
| Options: | ADL CW6 LNF LNX NAS | Skid Dead Black LED | Yeate Group Ativate Rear Doors Cleft LED Spot L Spot Lamps Nate Emissions | | | 295 75 545 0 0 |
| | XAN XCS 3AH 4FM 4ES | 4 Ade Price Fleet | Spot and Cross I ditional Key Fobs Protection - Cod Option Editor rery Allowance Cr | e H | | 495 100 0 0 0 |
| | 2SQ YG1 4FT 5T2 5N6 4FT | 7.5 A Febu Easy | Fleet Powertrain additional Gallons ary Production Order | | | 0 0 0 0 0 |
| Non Equipment: | 4EA 4KA 4FA 4DH MAF | Sold Spec Spec Prepa | Vehicle dal Bid Handling dal Bid-Ineligible I aid Holdback Purchase Incenti | | | 0 0 0 0 0 |
| Bld Number: Special Equipment: | TB1086 99595B 99595A | Gove | imment Incentive | 5 | | 0 0 0 |
| Destination Fees: | | - | 170.06 | priv.tak CAT DMW EPla | Total Pri | 1,495 |
| Note: This is not an involc | e. The prices and | 3 eauln | 4324 ⁹ | DNW EPIA | | 0 MART MCMAN |

Note: This is not an invoice. The prices and equipment shown on this priced order confirmation are tentative and subject to change or 5/6/2 correction without prior notice. No claims against the content listed or prices quoted will be accepted. Refer to the vehicle invoice for final vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory. 34448 91 TTTKL Page 1 of 2

34448,91 TOTAL

| WITHNELL DODGE 2650 COMMERCIAL SE SALEM, OR 973024451 | | Priced (| Order Confirmation (POC) |) | |
|--|-----------------|--|--------------------------|----------------------------------|--|
| Date Printed: | 2021-05-06 3:19 | PM VIN: | 1C4SDJFT4MC662043 | Quantity: | 01 |
| Estimated Ship Date: | 2021-02-06 2:00 | AM VON: | 46934305 | Status: | KZ - Released by plant and invoiced |
| Date Ordered: | 2020-09-11 1:01 | PM Ordered By: | S28368H | FAN 1: FAN 2: Client Code: | 48979 State of Oregon |
| Sold to: WITHNELL DODGE (56440 2650 COMMERCIAL SE SALEM, OR 973024451 |)) | Ship to: WITHNELL DO 2650 COMMER SALEM, OR 97 | RCIAL SE | Bid Number: PO Number: | TB1086 |
| Vehicle: | | 2021 | DURANGO PURSUIT VEH | IICLE AWD (WDE | E75) |
| | Sales Code | Description | | | MSRP(USD) |
| Model: | WDEE75 | DURANGO PURSUIT | VEHICLE AWD | | 36,000 |
| Package: | 22Z | Customer Preferred F | ackage 22Z | | 0 |
| | EZH | 5.7L V8 HEMI MDS V | VT Engine | | 2,995 |
| | DFD | 8-Spd Auto 8HP70 Tr | ans (Buy) | | 0 |
| Paint/Seat/Trim: | PW7 | White Knuckle Clear | Coat | | 0 |
| | APA | Monotone Paint | | | 0 |
| | *C5 | Cloth Bucket Seats w | / Shift Insert | | 0 |
| | -X9 | Black | | | 0 |
| Options: | ADL | Skid Plate Group | | | 295 |
| | CW6 | Deactivate Rear Door | rs/Windows | | 75 |
| | LNF | Black Left LED Spot L | _amp | | 545 |
| | LNX | LED Spot Lamps | | | 0 |
| | NAS | 50 State Emissions | | | 0 |
| | XAN | Blind Spot and Cross | Path Detection | | 495 |
| | XCS | 4 Additional Key Fobs | 5 | | 100 |
| | 3AH | Price Protection - Coc | le H | | 0 |
| | 4FM | Fleet Option Editor | | | 0 |
| | 4ES | Delivery Allowance C | | | 0 |
| | 2SQ | FCA Fleet Powertrain | Care | | 0 |
| | YG1 | 7.5 Additional Gallons | s of Gas | | 0 |
| | 4FT | | | | 0 |
| | 5T2 | Febuary Production | | | 0 |
| | 5N6 | Easy Order | | | 0 |
| | 4FT | Fleet Sales Order | | | 0 |
| . | 4EA | Sold Vehicle | | | 0 |
| ion Equipment: | 4KA | Special Bid Handling | | | 0 |
| | 4FA | Special Bid-Ineligible | For Incentive | | 0 |
| | 4DH | Prepaid Holdback | | | 0 |
| tid Number | MAF | Fleet Purchase Incent | | | 0 |
| Bid Number: | TB1086 | Government Incentive | S | | 0 |
| Special Equipment: | 99595B | 34012. | | | 0 |
| Destination Fees: | 99595A | 21016. | | | 0 |
| Peauliation (462) | | 170.00 142.05 3624.91 | priv. tax | | 1,495 |
| | | 142 05 | CAT | Total Prie | ce: <u>42,000</u> . |
| | | 3424 91 | | | Α |

 $\frac{3434}{9} \xrightarrow{0} DMV EP |a| = 5$ Note: This is not an involce. The prices and equipment shown on this priced order confirmation are tentative and subject to change or correction without prior notice. No claims against the content listed or prices quoted will be accepted. Refer to the vehicle invoice for final $\frac{1}{6} |b| |2|$ vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory. $\frac{3434}{9} + \frac{3}{165}$

| WITHNELL DODGE 2650 COMMERCIAL SE SALEM, OR 973024451 | | | Priced C | order Confirmation (POC |) | |
|--|-----------------|---------------|-----------|-------------------------|---|--|
| Date Printed: | 2021-05-06 3:19 | PM VIN: | | 1C4SDJFT7MC659251 | Quantity: | 01 |
| Estimated Ship Date: | 2021-02-06 2:00 | AM VON: | | 46934306 | Status: | KZ - Released by plant and invoiced |
| Date Ordered: | 2020-09-11 1:01 | PM Order | d By: | S28368H | FAN 1: FAN 2: Client Code: Bid Number: | 48979 State of Oregon TB1086 |
| Sold to: WITHNELL DODGE (56440 2650 COMMERCIAL SE SALEM, OR 973024451 |) | 2650 0 | | | Bid Number: PO Number: | 181000 |
| Vehicle: | | | 2021 [| URANGO PURSUIT VEH | IICLE AWD (WDE | E75) |
| | Sales Code | Description | | | | MSRP(USD) |
| Model: | WDEE75 | • | URSUIT | VEHICLE AWD | | 36,000 |
| Package: | 22Z | Customer Pr | ferred Pa | ackage 22Z | | 0 |
| - | EZH | 5.7L V8 HEM | I MDS V | /T Engine | | 2,995 |
| | DFD | 8-Spd Auto 8 | HP70 Tra | ins (Buy) | | 0 |
| Paint/Seat/Trim: | PW7 | White Knuck | e Clear C | oat | | 0 |
| | APA | Monotone Pa | int | | | 0 |
| | *C5 | Cloth Bucket | Seats w/ | Shift Insert | | 0 |
| | -X9 | Black | | | | 0 |
| Options: | ADL | Skid Plate G | oup | | | 295 |
| | CW6 | Deactivate R | | | | 75 |
| | LNF | Black Left LE | - | amp | | 545 |
| | LNX | LED Spot La | - | | | 0 |
| | NAS | 50 State Emi | | | | 0 |
| | XAN | - | | Path Detection | | 495 |
| | XCS 3AH | 4 Additional | - | - 11 | | 100 |
| | 4FM | Price Protect | | эп | | 0 |
| | 4FM 4ES | Fleet Option | | - dit | | 0 |
| | 465 2SQ | FCA Fleet Po | | | | 0 |
| | YG1 | 7.5 Additiona | | | | 0 0 |
| | 4FT | r.o Additione | Galloris | | | 0 |
| | 5T2 | Febuary Pro | uction | | | 0 |
| | 5N6 | Easy Order | | | | 0 |
| | 4FT | Fleet Sales (| rder | | | 0 |
| | 4EA | Sold Vehicle | | | | 0 |
| Non Equipment: | 4KA | Special Bid H | andling | | | 0 |
| | 4FA | Special Bid-I | _ | or Incentive | | 0 |
| | 4DH | Prepaid Hold | - | | | 0 |
| | MAF | Fleet Purcha | e Incenti | ve | | 0 |
| 3id Number: | TB1086 | Government | ncentive | 5 | | 0 |
| Special Equipment: | 99595B | 240 | , ∞ | | | 0 |
| | 99595A | 270 | L | | | 0 |
| Destination Fees: | | 17 |). | priv. tax CAT | | 1,495 |
| | | 14 | 2.35 | CKT | Total Pri | ice: <u>42.000</u> . |
| | | 343 | 149 | L | | A |

Note: This is not an involce. The prices and equipment shown on this priced order confirmation are tentative and subject to triange of correction without prior notice. No claims against the content listed or prices quoted will be accepted. Refer to the vehicle invoice for final vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory. 34448.⁹¹ TOTAL Page 5 of 10 41051vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory. 34443. TDTAL

| WITHNELL DODGE 2650 COMMERCIAL SE SALEM, OR 973024451 | | | Priced O | rder Confirmation (POC) |) | |
|---|-----------------|-------------|----------------|-------------------------|----------------------------------|--|
| Date Printed: | 2021-05-06 3:19 | PM VIN: | | 1C4SDJFT3MC642186 | Quantity: | 01 |
| Estimated Ship Date: | 2021-02-19 1:59 | AM VON | l: | 46934307 | Status: | KZ - Released by plant and invoiced |
| Date Ordered: | 2020-09-11 1:01 | PM Orde | ered By: | S28368H | FAN 1: FAN 2: Client Code: | 48979 State of Oregon |
| Sold to: WITHNELL DODGE (56440) 2650 COMMERCIAL SE SALEM, OR 973024451 |) | 2650 | | | Bid Number: PO Number: | TB1086 |
| Vehicle: | | | 2021 D | URANGO PURSUIT VEH | IICLE AWD (WDE | E75) |
| | Sales Code | Descriptio | n | | | MSRP(USD) |
| Model: | WDEE75 | DURANG | D PURSUIT | VEHICLE AWD | | 36,000 |
| Package: | 22Z | Customer | Preferred Pa | ickage 22Z | | 0 |
| | EZH | 5.7L V8 HE | EMI MDS VV | /T Engine | | 2,995 |
| | DFD | 8-Spd Auto | o 8HP70 Tra | ns (Buy) | | 0 |
| PaInt/Seat/Trim: | PW7 | White Knu | ckle Clear C | oat | | 0 |
| | APA | Monotone | Paint | | | 0 |
| | *C5 | Cloth Buck | ket Seats w/ | Shift Insert | | 0 |
| | -X9 | Black | | | | 0 |
| Options: | ADL | Skid Plate | Group | | | 295 |
| | CW6 | Deactivate | Rear Doors | Windows | | 75 |
| | LNF | Black Left | LED Spot La | amp | | 545 |
| | LNX | LED Spot | | · | | 0 |
| | NAS | 50 State E | missions | | | 0 |
| | XAN | Blind Spot | and Cross F | Path Detection | | 495 |
| | XCS | 4 Additiona | al Key Fobs | | | 100 |
| | 3AH | Price Prote | ection - Code | e H | | 0 |
| | 4FM | Fleet Optic | n Editor | | | 0 |
| | 4ES | - | llowance Cre | ədit | | 0 |
| | 2\$Q | • | Powertrain (| | | 0 |
| | YG1 | 7.5 Additio | nal Gallons | of Gas | | 0 |
| | 4FT | | | | | 0 |
| | 5T2 | Febuary P | roduction | | | 0 |
| | 5N6 | Easy Orde | | | | 0 |
| | 4FT | Fleet Sales | | | | 0 |
| | 4EA | Sold Vehic | le | | | 0 |
| Non Equipment: | 4KA | Special Bio | d Handling | | | 0 |
| | 4FA | | d-Ineligible F | or Incentive | | 0 |
| | 4DH | Prepaid Ho | | | | 0 |
| | MAF | Fleet Purch | hase Incentiv | /e | | 0 |
| Bid Number: | TB1086 | | nt Incentives | 5 | | 0 |
| Special Equipment: | 99595B | 21 | 1200 | | | 0 |
| | 99595A | 240 | リム | | | 0 |
| Destination Fees: | | 1. | 70 06 | priv. tax | | 1,495 |
| Destination Fees: Note: This is not an invoice | | 1 | 92.85 | CAT | Total Prie | ce: <u>42.000</u> . |
| | | 343 | 24.91 | | | |

| Note: This is not an invoice. The prices and equipment shown on this priced order confirmation are tentative and subject to cha | inge or | |
|---|---------------------------|-----|
| correction without prior notice. No claims against the content listed or prices quoted will be accepted. Refer to the vehicle invol | ce for final , | |
| vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory. | sl | 021 |
| 34448?' TOTAL | 5 Page 7 of #1651 | 10 |
| | 71051 | |

34448 " TOTAL

| WITHNELL DODGE 2650 COMMERCIAL SE SALEM, OR 973024451 | | | Priced O | rder Confirmation (POC |) | |
|--|-----------------------------|--------------------------|---|---------------------------------|---|--|
| Date Printed: | 2021-05-06 3:19 | РМ | VIN: | 1C4SDJFT6MC662044 | Quantity: | 01 |
| Estimated Ship Date: | 2021-02-12 1:59 | AM | VON: | 46934308 | Status: | KZ - Released by plant and involced |
| Date Ordered: | 2020-09-11 1:01 | РМ | Ordered By: | S28368H | FAN 1: FAN 2: Client Code: Bid Number: | 48979 State of Oregon |
| Sold to: WITHNELL DODGE (56440 2650 COMMERCIAL SE SALEM, OR 973024451 |) | | Ship to: WITHNELL DOD 2650 COMMERC SALEM, OR 973 | CIAL SE | PO Number: | |
| Vehicle: | | | 2021 D | URANGO PURSUIT VEH | ICLE AWD (WDEI | E75) |
| Model: Package: | Sales Code WDEE75 22Z | DURA | ription NGO PURSUIT ^v mer Preferred Pa | | | MSRP(USD) 36,000 0 |
| - | EZH DFD | 8-Spd | /8 HEMI MDS VV I Auto 8HP70 Tra | ns (Buy) | | 2, 995 0 |
| Paint/Seat/Trim: | PW7 APA *C5 -X9 | Mono | Knuckle Clear Co tone Paint Bucket Seats w/ S | | | 0 0 0 0 |
| Options: | ADL CW6 LNF LNX | Skid F Deact Black | Plate Group livate Rear Doors Left LED Spot La Spot Lamps | | | 295 75 545 0 |
| | NAS XAN XCS 3AH | Blind 4 Add | ate Emissions Spot and Cross P litional Key Fobs Protection - Code | | | 0 495 100 0 |
| | 4FM 4ES 2SQ | Fleet Delive | Option Editor Option Editor ery Allowance Cre Fleet Powertrain (| dit | | 0 0 0 |
| | YG1 4FT 5T2 | | dditional Gallons of arry Production | of Gas | | 0 0 0 |
| | 5N6 4FT 4EA | | Order Sales Order Vehicle | | | 0 0 0 |
| Non Equipment: | 4KA 4FA 4DH MAF | Speci Prepa | al Bid Handling al Bid-Ineligible F id Holdback Purchase Incentiv | | | 0 0 0 0 |
| Bid Number: Special Equipment: | TB1086 99595B 99595A | 3. | 4017. | • | | 0 0 0 |
| Destination Fees: | | _ | 17000 | priv tax | _ | 1,495 |
| | | | 124285 | privtax CAT 11 | Total Pric | e: <u>42.000</u> . |
| Note: This is not an invoice | The prices and | | 34324. |)) this priced order confirm | nation are toristic | D HAN INCLOWAR |

Note: This is not an invoice. The prices and equipment shown on this priced order confirmation are tentative and subject to change or correction without prior notice. No claims against the content listed or prices quoted will be accepted. Refer to the vehicle invoice for final vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory. 127 PTW EPALOY $34448.^{91}$ TOTAL 16121vehicle content and pricing. Orders are accepted only when the vehicle is shipped by the factory. 127 PIW EPLOY 34448.⁹¹ TOTAL



Clackamas County Sheriff's Office

ANGELA BRANDENBURG Sheriff

June 24, 2021

Board of County Commissioners Clackamas County

Members of the Board:

Approval Purchase for Body Cameras from Axon Enterprise for use by Clackamas County Sheriff's Office

| Purpose/Outcome | Approval to purchase Body Cameras, Tasers, associated accessories, |
|-------------------|--|
| i dipose/outcome | |
| | software services, and related training for the Sheriff's Office |
| Dollar Amount and | \$1,588,994.50 |
| Fiscal Impact | |
| Funding Source | Sheriff's Office Budget |
| Duration | FY2022-2026 |
| Previous Board | None |
| Action/Review | |
| Strategic Plan | Furthers the County's focus to keeping our residents safe, healthy and |
| Alignment | secure |
| Counsel Review | 6/09/21 |
| | Counsel Initials: AN |
| Procurement | Was the project processed through Procurement? Yes. |
| Review | |
| Contact Person | Jenna Morrison, Chief Deputy 503.785.5022 |

BACKGROUND:

The Clackamas County Sheriff's Office requests approval to enter into a 5-year agreement with Axon Enterprise to purchase 100 body cameras, 100 Taser 7 devices, associated accessories, software services, and related training. This technology will allow Sheriff's Office deputies to record audio and video when interacting with the public.

This five-year contract provides body worn cameras and accessories, video storage, cellular service, and all software needed to implement and maintain a body worn camera program. A comprehensive suite of Axon's software is included in this purchase to aide in the administration of the body worn camera (BWC) program including artificial intelligence-powered redaction and transcription tools. The Axon package is all-inclusive of hardware, software, and training aides and will not require additional investment from the County.

Axon is one of the largest providers of body worn cameras in the nation, making up 75% of the market share of BWCs in major US cities. Axon BWCs offer seamless integration with their Taser line of non-lethal weapons which are carried by our deputies. Axon cameras are currently used by other local and regional law enforcement partners including Tigard, Medford, Corvallis and Seattle police departments in addition to the Benton, Spokane, and LA County Sheriff's Departments. The overall cost of this contract is \$1,588,994.50.

Procurement Process:

Approval of the purchase is being requested under the Local Contact Review Board Rule C-046-0400, Authority of Cooperative Procurements. A notice was advertised for this solicitation on ORPIN from June 8, 2021 - June 15, 2021 and we received no comments. This purchase will be made using Sourcewell contract #010720-AXN with AXON.Enterprise, Inc.

RECOMMENDATION: Sheriff's Office respectfully requests that the Board of County Commissioners approves this body cameras purchase.

Respectfully submitted,

Jenna Morrison

Jenna Morrison Chief Deputy

Placed on the BCC Agenda by the Procurement Division

Approval of purchase _

Chair

Recording Secretary

Q-296151-44354.967AS

Issued: 06/07/2021

Quote Expiration: 06/30/2021

Account Number: 105226

Payment Terms: Net 30 Delivery Method: Fedex - Ground

SALES REPRESENTATIVE

Allen Sliper Phone: (858) 353-3228 Email: asliper@axon.com Fax:

PRIMARY CONTACT Tony Docekal

Phone: (503) 785-5050 Email: tdocekal@clackamas.us

Year 1 - OSP 7+

| Item | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|------------|---|------------------|----------|--------------------|----------------|-------------|
| Axon Plans | s & Packages | | | | | |
| 20248 | TASER 7 EVIDENCE.COM ACCESS LICENSE | 60 | 2 | 0.00 | 0.00 | 0.00 |
| 73746 | PROFESSIONAL EVIDENCE.COM LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73686 | EVIDENCE.COM UNLIMITED AXON DEVICE STORAGE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73683 | 10 GB EVIDENCE.COM A-LA-CART STORAGE | 60 | 3,000 | 0.00 | 0.00 | 0.00 |
| 73680 | RESPOND DEVICE PLUS LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73681 | AXON RECORDS FULL | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73739 | PERFORMANCE LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 20248 | TASER 7 EVIDENCE.COM ACCESS LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 20246 | TASER 7 DUTY CARTRIDGE REPLACEMENT ACCESS LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 85760 | AUTO-TRANSCRIBE UNLIMITED ACCESS SERVICE (LE ONLY) | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73618 | CITIZEN FOR COMMUNITIES USER ACCESS LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73478 | REDACTION ASSISTANT USER ACCESS LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 11642 | THIRD-PARTY VIDEO SUPPORT LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73687 | EVIDENCE.COM VIEWER LICENSE | 60 | 1 | 0.00 | 0.00 | 0.00 |
| 73683 | 10 GB EVIDENCE.COM A-LA-CART STORAGE | 60 | 30 | 0.00 | 0.00 | 0.00 |
| 73746 | PROFESSIONAL EVIDENCE.COM LICENSE | 60 | 10 | 0.00 | 0.00 | 0.00 |

SHIP TO

US

Tony Docekal

Clackamas County Sheriff's Office - OR

9101 SE Sunnybrook Blvd

Clackamas, OR 97015

Axon Enterprise, Inc. 17800 N 85th St. Scottsdale, Arizona 85255 United States Phone: (800) 978-2737

BILL TO

US

2223 Kaen Road

Oregon City, OR 97045

Clackamas County Sheriff's Office - OR

Year 1 - OSP 7+ (Continued)

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|------------|---|------------------|----------|--------------------|----------------|-------------|
| Axon Plans | & Packages (Continued) | | | | | |
| 73682 | AUTO TAGGING LICENSE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| Hardware | | | | | | |
| 20160 | TASER 7 HOLSTER - SAFARILAND, RH+CART CARRIER | | 100 | 0.00 | 0.00 | 0.00 |
| 75015 | SIGNAL SIDEARM KIT | | 100 | 0.00 | 0.00 | 0.00 |
| 20050 | HOOK-AND-LOOP TRAINING (HALT) SUIT | | 2 | 0.00 | 0.00 | 0.00 |
| 73202 | AXON BODY 3 - NA10 | | 100 | 699.00 | 678.03 | 67,803.00 |
| 22175 | TASER 7 LIVE CARTRIDGE, STANDOFF (3.5- DEGREE) NS | | 300 | 0.00 | 0.00 | 0.00 |
| 22176 | TASER 7 LIVE CARTRIDGE, CLOSE QUARTERS (12-DEGREE) NS | | 300 | 0.00 | 0.00 | 0.00 |
| 20008 | TASER 7 HANDLE, YLW, HIGH VISIBILITY (GREEN LASER), CLASS 3R | | 100 | 0.00 | 0.00 | 0.00 |
| 20040 | TASER 7 HANDLE WARRANTY, 4-YEAR | | 100 | 0.00 | 0.00 | 0.00 |
| 22179 | TASER 7 INERT CARTRIDGE, STANDOFF (3.5-DEGREE) NS | | 50 | 0.00 | 0.00 | 0.00 |
| 22181 | TASER 7 INERT CARTRIDGE, CLOSE QUARTERS (12-DEGREE) NS | | 50 | 0.00 | 0.00 | 0.00 |
| 71044 | BATTERY, SIGNAL SIDEARM, CR2430 SINGLE PACK | | 200 | 0.00 | 0.00 | 0.00 |
| 22175 | TASER 7 LIVE CARTRIDGE, STANDOFF (3.5- DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22176 | TASER 7 LIVE CARTRIDGE, CLOSE QUARTERS (12-DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22177 | TASER 7 HOOK-AND-LOOP TRN (HALT) CARTRIDGE, STANDOFF NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22178 | TASER 7 HOOK-AND-LOOP TRN (HALT) CARTRIDGE, CLOSE QUART NS | | 200 | 0.00 | 0.00 | 0.00 |
| 20018 | TASER 7 BATTERY PACK, TACTICAL | | 120 | 0.00 | 0.00 | 0.00 |
| 20041 | TASER 7 BATTERY PACK WARRANTY, 4- YEAR | | 120 | 0.00 | 0.00 | 0.00 |
| 20042 | TASER 7 DOCK & CORE WARRANTY, 4- YEAR | | 1 | 0.00 | 0.00 | 0.00 |
| 70033 | WALL MOUNT BRACKET, ASSY, EVIDENCE.COM DOCK | | 1 | 0.00 | 0.00 | 0.00 |
| 74200 | TASER 7 6-BAY DOCK AND CORE | | 1 | 0.00 | 0.00 | 0.00 |
| 80090 | TARGET FRAME, PROFESSIONAL, 27.5 IN. X 75 IN., TASER 7 | | 1 | 0.00 | 0.00 | 0.00 |
| 11534 | USB-C to USB-A CABLE FOR AB3 OR FLEX 2 | | 100 | 0.00 | 0.00 | 0.00 |

Year 1 - OSP 7+ (Continued)

| Item | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|---|---|------------------|----------|--------------------|----------------|-------------|
| Hardware (Co | ontinued) | | | | | |
| 74020 | MAGNET MOUNT, FLEXIBLE, AXON RAPIDLOCK | | 110 | 0.00 | 0.00 | 0.00 |
| 74211 | AXON BODY 3 - 1 BAY DOCK | | 100 | 200.00 | 194.00 | 19,400.00 |
| 87060 | TECH ASSURANCE PLAN 1-BAY BODY 3 DOCK WARRANTY | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 70033 | WALL MOUNT BRACKET, ASSY, EVIDENCE.COM DOCK | | 5 | 43.90 | 42.58 | 212.90 |
| 74210 | AXON BODY 3 - 8 BAY DOCK | | 5 | 1,495.00 | 1,450.15 | 7,250.75 |
| 74200 | TASER 7 6-BAY DOCK AND CORE | | 2 | 1,500.00 | 0.00 | 0.00 |
| 20042 | TASER 7 DOCK & CORE WARRANTY, 4- YEAR | | 2 | 300.00 | 0.00 | 0.00 |
| Other | | | | | ľ | |
| 73940 | OFFICER SAFETY PLAN 7+ PREMIUM BUNDLE | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 73941 | OFFICER SAFETY PLAN 7+ PREMIUM PAYMENT | 12 | 100 | 2,868.00 | 2,868.00 | 286,800.00 |
| Not Eligible/Cust omer Declined Channel Services | Not Eligible/Customer Declined Channel Services | | 100 | 0.00 | 0.00 | 0.00 |
| 20378 | HTC FOCUS 3 VR HEADSET | | 4 | 0.00 | 0.00 | 0.00 |
| 20271 | AXON VR CONTROLLER KIT | | 1 | 0.00 | 0.00 | 0.00 |
| 73837 | EVIDENCE.COM PROFESSIONAL LICENSE PAYMENT | 12 | 10 | 468.00 | 468.00 | 4,680.00 |
| 73827 | AB3 CAMERA TAP WARRANTY | 60 | 100 | 0.00 | 0.00 | 0.00 |
| 20120 | TASER 7 INSTRUCTOR COURSE VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 20119 | TASER 7 MASTER INSTRUCTOR SCHOOL VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 80087 | TASER 7 TARGET, CONDUCTIVE, PROFESSIONAL (RUGGEDIZED) | | 1 | 0.00 | 0.00 | 0.00 |
| 71104 | NORTH AMER POWER CORD FOR AB3 1- BAY DOCK | | 100 | 0.00 | 0.00 | 0.00 |
| 73828 | AB3 8 BAY DOCK TAP WARRANTY | 60 | 5 | 0.00 | 0.00 | 0.00 |
| 71019 | NORTH AMER POWER CORD FOR AB3 8- BAY, AB2 1-BAY / 6-BAY DOCK | | 5 | 0.00 | 0.00 | 0.00 |

Year 1 - OSP 7+ (Continued)

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|----------|--|------------------|----------|--------------------|-----------------------|-------------|
| Services | | | | | | |
| 85055 | AXON FULL SERVICE | | 1 | 17,000.00 | 17,000.00 | 17,000.00 |
| 85168 | CEW FULL SERVICE WITH INSTRUCTOR TRAINING | | 1 | 17,000.00 | 17,000.00 | 17,000.00 |
| 20384 | FULL VR TRAINING ENTERPRISE (51 - 100) LICENSE | 60 | 1 | 0.00 | 0.00 | 0.00 |
| 79999 | AUTO TAGGING / PERFORMANCE IMPLEMENTATION SERVICE | | 1 | 0.00 | 0.00 | 0.00 |
| | | | | | Subtotal | 420,146.65 |
| | | | | | Estimated Shipping | 0.00 |
| | | | | | Estimated Tax | 0.00 |
| | | | | | Total | 420,146.65 |

Year 1 - Interview Room

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|------------|---|------------------|----------|--------------------|----------------|-------------|
| Axon Plans | & Packages | | | | | |
| 50071 | AXON STREAMING SERVER LICENSE (PER SERVER) | | 2 | 1,750.00 | 0.00 | 0.00 |
| 50070 | AXON CLIENT SOFTWARE (EACH CLIENT AND TOUCH PANEL) | | 4 | 1,500.00 | 0.00 | 0.00 |
| 50055 | INTERVIEW ROOM UNLIMITED EVIDENCE.COM LICENSE YEAR 1 PAYMENT | 12 | 4 | 1,188.00 | 0.00 | 0.00 |
| Hardware | | | | | | |
| 50298 | AXIS P3245-LV NETWORK CAMERA | | 4 | 796.00 | 0.00 | 0.00 |
| 50118 | LOUROE MICROPHONE | | 7 | 196.50 | 0.00 | 0.00 |
| 50294 | LITE SERVER | | 2 | 1,950.00 | 0.00 | 0.00 |
| 50268 | TOUCH PANEL | | 4 | 1,600.00 | 0.00 | 0.00 |
| 74056 | WALL MOUNT | | 1 | 64.00 | 0.00 | 0.00 |
| 50218 | AXIS F41 COVERT MAIN UNIT - NON SER | | 3 | 595.00 | 0.00 | 0.00 |
| 74116 | INTERVIEW COVERT ENCLOSURE - AV WALL PLATE, FLUSH MOUNTED | | 3 | 121.00 | 0.00 | 0.00 |
| 50114 | COVERT CAMERA, SENSOR UNIT | | 3 | 370.00 | 0.00 | 0.00 |

Year 1 - Interview Room (Continued)

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|----------|---|------------------|----------|--------------------|----------------|-------------|
| Services | | | | | | |
| 85170 | 85170 INTERVIEW ROOM, INSTALL AND SETUP | | 4 | 2,500.00 | 0.00 | 0.00 |
| | | | | | Subtotal | 0.00 |
| | | | | | Estimated Tax | 0.00 |
| | | | | | Total | 0.00 |

Spares

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|----------|---|------------------|----------|--------------------|----------------|-------------|
| Hardware | | | | | | |
| 73202 | AXON BODY 3 - NA10 | | 3 | 0.00 | 0.00 | 0.00 |
| 20008 | TASER 7 HANDLE, YLW, HIGH VISIBILITY (GREEN LASER), CLASS 3R | | 3 | 0.00 | 0.00 | 0.00 |
| 20040 | TASER 7 HANDLE WARRANTY, 4-YEAR | | 3 | 0.00 | 0.00 | 0.00 |
| 74020 | MAGNET MOUNT, FLEXIBLE, AXON RAPIDLOCK | | 3 | 0.00 | 0.00 | 0.00 |
| 11534 | USB-C to USB-A CABLE FOR AB3 OR FLEX 2 | | 3 | 0.00 | 0.00 | 0.00 |
| Other | | | | | | |
| 73827 | AB3 CAMERA TAP WARRANTY | 12 | 3 | 0.00 | 0.00 | 0.00 |
| | | | | | Subtotal | 0.00 |
| | | | | | Estimated Tax | 0.00 |
| | | | | | Total | 0.00 |

Year 2

| Item | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|------------|---|------------------|----------|--------------------|----------------|-------------|
| Axon Plans | s & Packages | | | | | |
| 50072 | AXON STREAMING SERVER SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 2 | 350.00 | 0.00 | 0.00 |
| 50074 | AXON CLIENT SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 4 | 300.00 | 0.00 | 0.00 |
| 50056 | INTERVIEW ROOM UNLIMITED EVIDENCE.COM LICENSE YEAR 2 PAYMENT | 12 | 4 | 1,188.00 | 0.00 | 0.00 |
| Hardware | | | | | | |
| 22175 | TASER 7 LIVE CARTRIDGE, STANDOFF (3.5- DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22176 | TASER 7 LIVE CARTRIDGE, CLOSE QUARTERS (12-DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |

Year 2 (Continued)

| Item | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|-------|--|------------------|----------|--------------------|----------------|-------------|
| Other | | | | | | |
| 73941 | OFFICER SAFETY PLAN 7+ PREMIUM PAYMENT | 12 | 100 | 2,868.00 | 2,868.00 | 286,800.00 |
| 73837 | EVIDENCE.COM PROFESSIONAL LICENSE PAYMENT | 12 | 10 | 468.00 | 468.00 | 4,680.00 |
| 20120 | TASER 7 INSTRUCTOR COURSE VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 20119 | TASER 7 MASTER INSTRUCTOR SCHOOL VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| | | | | | Subtotal | 291,480.00 |
| | | | | | Estimated Tax | 0.00 |
| | | | | | Total | 291,480.00 |

Year 3

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|------------|---|------------------|----------|--------------------|----------------|-------------|
| Axon Plans | s & Packages | | | | | |
| 50072 | AXON STREAMING SERVER SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 2 | 350.00 | 0.00 | 0.00 |
| 50074 | AXON CLIENT SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 4 | 300.00 | 0.00 | 0.00 |
| 50057 | INTERVIEW ROOM UNLIMITED EVIDENCE.COM LICENSE YEAR 3 PAYMENT | 12 | 4 | 1,188.00 | 0.00 | 0.00 |
| Hardware | | | | | | |
| 22175 | TASER 7 LIVE CARTRIDGE, STANDOFF (3.5- DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22176 | TASER 7 LIVE CARTRIDGE, CLOSE QUARTERS (12-DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22177 | TASER 7 HOOK-AND-LOOP TRN (HALT) CARTRIDGE, STANDOFF NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22178 | TASER 7 HOOK-AND-LOOP TRN (HALT) CARTRIDGE, CLOSE QUART NS | | 200 | 0.00 | 0.00 | 0.00 |
| Other | | | | | | |
| 73309 | AXON CAMERA REFRESH ONE | | 100 | 0.00 | 0.00 | 0.00 |
| 73941 | OFFICER SAFETY PLAN 7+ PREMIUM PAYMENT | 12 | 100 | 2,868.00 | 2,868.00 | 286,800.00 |
| 73837 | EVIDENCE.COM PROFESSIONAL LICENSE PAYMENT | 12 | 10 | 468.00 | 468.00 | 4,680.00 |
| 73309 | AXON CAMERA REFRESH ONE | | 3 | 0.00 | 0.00 | 0.00 |

Year 3 (Continued)

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|-------------|---|------------------|----------|--------------------|----------------|-------------|
| Other (Cont | inued) | | | | | |
| 20120 | TASER 7 INSTRUCTOR COURSE VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 20119 | TASER 7 MASTER INSTRUCTOR SCHOOL VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 73313 | 1-BAY DOCK AXON CAMERA REFRESH ONE | | 100 | 0.00 | 0.00 | 0.00 |
| 73689 | MULTI-BAY BWC DOCK 1ST REFRESH | | 5 | 0.00 | 0.00 | 0.00 |
| | | | | | Subtotal | 291,480.00 |
| | | | | | Estimated Tax | 0.00 |
| | | | | | Total | 291,480.00 |

Year 4

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|------------|---|------------------|----------|--------------------|----------------|-------------|
| Axon Plans | s & Packages | | | | | |
| 50072 | AXON STREAMING SERVER SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 2 | 350.00 | 0.00 | 0.00 |
| 50074 | AXON CLIENT SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 4 | 300.00 | 0.00 | 0.00 |
| 50058 | INTERVIEW ROOM UNLIMITED EVIDENCE.COM LICENSE YEAR 4 PAYMENT | 12 | 4 | 1,188.00 | 0.00 | 0.00 |
| Hardware | | | | | | |
| 22175 | TASER 7 LIVE CARTRIDGE, STANDOFF (3.5- DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22176 | TASER 7 LIVE CARTRIDGE, CLOSE QUARTERS (12-DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| Other | | | | | | |
| 73941 | OFFICER SAFETY PLAN 7+ PREMIUM PAYMENT | 12 | 100 | 2,868.00 | 2,868.00 | 286,800.00 |
| 73837 | EVIDENCE.COM PROFESSIONAL LICENSE PAYMENT | 12 | 10 | 468.00 | 468.00 | 4,680.00 |
| 20120 | TASER 7 INSTRUCTOR COURSE VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 20119 | TASER 7 MASTER INSTRUCTOR SCHOOL VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| | | | | | Subtotal | 291,480.00 |
| | | | | | Estimated Tax | 0.00 |
| | | | | | Total | 291,480.00 |

Year 5

| ltem | Description | Term (Months) | Quantity | List Unit Price | Net Unit Price | Total (USD) |
|------------|---|------------------|----------|--------------------|----------------|-------------|
| Axon Plans | s & Packages | | | | | |
| 50072 | AXON STREAMING SERVER SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 2 | 350.00 | 0.00 | 0.00 |
| 50074 | AXON CLIENT SOFTWARE MAINTENANCE ANNUAL PAYMENT | 12 | 4 | 300.00 | 0.00 | 0.00 |
| 50059 | INTERVIEW ROOM UNLIMITED EVIDENCE.COM LICENSE YEAR 5 PAYMENT | 12 | 4 | 1,188.00 | 0.00 | 0.00 |
| Hardware | | | | | | |
| 22175 | TASER 7 LIVE CARTRIDGE, STANDOFF (3.5- DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| 22176 | TASER 7 LIVE CARTRIDGE, CLOSE QUARTERS (12-DEGREE) NS | | 200 | 0.00 | 0.00 | 0.00 |
| Other | | | | | | |
| 73941 | OFFICER SAFETY PLAN 7+ PREMIUM PAYMENT | 12 | 100 | 2,868.00 | 2,868.00 | 286,800.00 |
| 73310 | AXON CAMERA REFRESH TWO | | 100 | 0.00 | 0.00 | 0.00 |
| 73837 | EVIDENCE.COM PROFESSIONAL LICENSE PAYMENT | 12 | 10 | 468.00 | 468.00 | 4,680.00 |
| 73310 | AXON CAMERA REFRESH TWO | | 3 | 0.00 | 0.00 | 0.00 |
| 20120 | TASER 7 INSTRUCTOR COURSE VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 20119 | TASER 7 MASTER INSTRUCTOR SCHOOL VOUCHER | | 1 | 0.00 | 0.00 | 0.00 |
| 73314 | 1-BAY DOCK AXON CAMERA REFRESH TWO | | 100 | 0.00 | 0.00 | 0.00 |
| 73688 | MULTI-BAY BWC DOCK 2ND REFRESH | | 5 | 0.00 | 0.00 | 0.00 |
| | | | | | Subtotal | 291,480.00 |
| | | | | | Estimated Tax | 0.00 |
| | | | | | Total | 291,480.00 |

Grand Total 1,586,066.65



Discounts (USD)

Quote Expiration: 06/30/2021

| Total | 1,586,066.65 |
|-------------|--------------|
| Discounts | 75,569.35 |
| List Amount | 1,661,636.00 |

*Total excludes applicable taxes

Summary of Payments

| Payment | Amount (USD) |
|-------------------------|--------------|
| Year 1 - OSP 7+ | 420,146.65 |
| Year 1 - Interview Room | 0.00 |
| Spares | 0.00 |
| Year 2 | 291,480.00 |
| Year 3 | 291,480.00 |
| Year 4 | 291,480.00 |
| Year 5 | 291,480.00 |
| Grand Total | 1,586,066.65 |

STATEMENT OF WORK & CONFIGURATION DOCUMENT

Axon Interview Recording Platform

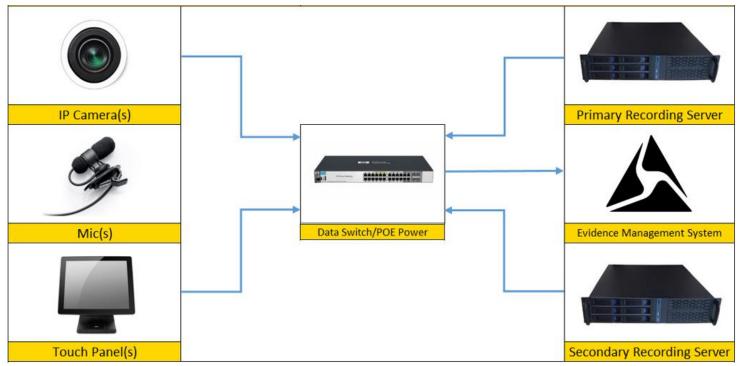
This document details a proposed system design

| Agency Created For: 0 | Clackamas County | / Sheriff's Office · | - OR |
|-----------------------|------------------|----------------------|------|
|-----------------------|------------------|----------------------|------|

| - | |
|----------------------|----------------------------|
| Sold By: | Allen Sliper |
| Designed By: | Jason South |
| Installed By: | Axon Professional Services |
| Customer Contact: | |
| Target Install Date: | |

AXON INTERVIEW RECORDING PLATFORM

This image is intended to be a general visual of how Interview Room is configured. Please read through the SOW for configuration specific to this deal.



AXON-PROVIDED HARDWARE SUMMARY

The following section offers a broad summary of the Axon-provided hardware needed to configure this order. With the exception of server quantities, QUANTITIES DO NOT REFLECT CUSTOMER-PROVIDED ITEMS.

| Total Camera Co | nfigurations | | |
|-----------------|--|--------------|----------------|
| 7 | Camera(s) | Locations | <u># Rooms</u> |
| 3 | Covert Enclosure(s) | Headquarters | 4 |
| 7 | Microphone(s) | | |
| | Injector(s) | | |
| Total Switches | | | |
| 0 | POE Switch(es) | | |
| Total Servers | | | |
| 2 | Server(s) (customer-provided included) | | |
| Total Touch Pan | els | | |
| 4 | Touch Panel(s) (virtual not included) | | |
| 0 | Wall Mount(s) | | |
| Total Camera Co | nfigurations | | |
| 0 | I/O Box(es) | | |
| | | | |
| | | | |
| | | | |
| | | | |

INTERVIEW ROOM OVERVIEW

The following sections detail the configuration of the Axon Interview recording system at all locations.

Network Considerations

| | Each IP Camera will be connected to a POE switch that provides the device with power and network connectivity. | | | |
|--------------------------|--|-----------------------|------------------------|--|
| Network Requirements | Each Recording Server must be given a static IPv4 network address that is routable across the network. | | | |
| | Each IP Camera must be given a static IPv4 network address that is routable across the network. | | | |
| | Each touch panel/kiosk must be given a static IPv4 network address that is routable across the network. | | | |
| | Network Device Static IPs Total IPs | | Total IPs | |
| Notwork Addressing | Qty of IP Cameras | 7 | | |
| Network Addressing | Qty of Touch Panels | 4 | 13 | |
| | Qty of Recording Servers | 2 | | |
| Data Switch Provisioning | This install will require POE data switches at each location. | | | |
| Virtual Kiosks | 4 workstations will require virtual kiosk software to be installed. | | | |
| Customer Provided Items | Customer to provide all device IP addresses Customer to also provide: • Subnet Mask • Gateway IP • DNS/WINS IP • Time Server IP | | | |
| | Customer IT staff will configure all s | witches with proper i | network configuration. | |

Metadata Tags

| Metadata Tagging | The system will collect metadata information prior to, and after, the interview recording process (i.e. Interviewer Name, Interviewee Name, Case Number). | |
|-------------------------|--|--|
| Metadata Tags | Information collected prior to recording: • Interviewee first and last name • Case number • Case type • Interviewee type Information collected post recording: • Interviewer name(s) | |
| Customer Provided Items | Customer to provide preferred metadata fields. | |
| Axon Provided Items | Axon to facilitate the creation of metadata fields. | |

NETWORK CONFIGURATION DETAILS

The following section offers a broad summary of the Axon-provided hardware needed to configure this order.

Network Configuration Details

| Evidence Management System | Evidence.com |
|----------------------------|---|
| Application Features | Network Applications: • Remote monitoring application Evidence.com Application Features: • Secure Cloud Storage • Redaction • Download/Sharing • Audit Trail • Reporting |

Training

| Application Package | This solution will include on-site application training covering: Touch panel overview Initiating interview wizard Entering metadata Controlling the interview process Closing an interview Evidence.com functionality |
|---------------------|--|
|---------------------|--|

Additional General Deal Notes

| Notes | |
|-------|--|
| | |

LOCATION DETAILS: Headquarters The following sections detail the configuration of the Axon Interview recording system at HEADQUARTERS

| Location Name Headquarters | Location Name | Headquarters |
|----------------------------|---------------|--------------|
|----------------------------|---------------|--------------|

Cable Considerations

| | Customer will install the networking cables using a Cat5e Cable. | | |
|-------------------------|--|---|--|
| Cabling Runs | 13 | cable runs are required for this installation. | |
| | 8 | 8 110v power outlets are required for this installation (Customer Responsibility). | |
| Cabling Requirements | • Axis IP Ca • Server • Touch Pa | All Devices: Network cabling must be provided for the following devices: • Axis IP Camera | |

Servers, Switches, Touch Panels

| Servers | Axon Interview Lite Server | Quantitur | 1 |
|------------------------------|---|-----------|---|
| Servers | Axon Interview Lite Server | Quantity: | 1 |
| Redundancy | This system includes recording redundancy | | |
| | Customer will provide data switch | | 0 |
| Data Switch/POE Power | N/A | Quantity: | |
| Touch Panels | POS-X Touch Panel | | |
| Touch Panel Location | Desktop | | |
| Number of I/O Boxes Required | 0 | | |

| Notes | 1 Touch Panel will be wall mounted outside PSU room. 3 additional Touch Panels will be on desktop stands in control rooms. |
|-------|--|
|-------|--|

ROOM DETAILS: PSU

The following sections detail the configurations specific to PSU

| Location Name | Headquarters |
|---------------|--------------|
| Room Name | PSU |

Camera Configuration

| | Camera 1 will be a(n) : Axis P3245-LV Overt Dome Camera |
|---|---|
| Camera 1 | Mic: Louroe Tamper Proof Mic |
| Recording Activation | Recording will be triggered via IR Client |
| External Recording-In- Progress Visual | N/A |
| Wall Configuration | Drywall |
| Ceiling Configuration | Standard Tile |

| Notes | |
|-------|--|
| | |

ROOM DETAILS: Room 1

The following sections detail the configurations specific to ROOM 1

| Location Name | Headquarters |
|---------------|--------------|
| Room Name | Room 1 |

Camera Configuration

| Camera 1 | Camera 1 will be a(n) : Axis P3245-LV Overt Dome Camera Mic: Louroe Tamper Proof Mic |
|---|---|
| | Camera 2 will be a(n) : AXIS F41/F1025 Covert IP Camera Covert Enclosure : Flush Mount Enclosure |
| Camera 2 | Mic: Louroe Tamper Proof Mic |
| Recording Activation | Recording will be triggered via IR Client |
| External Recording-In- Progress Visual | N/A |
| Wall Configuration | Drywall |
| Ceiling Configuration | Standard Tile |

| Notes | | |
|-------|--|--|
| | | |

ROOM DETAILS: Room 2

The following sections detail the configurations specific to ROOM 2

| Location Name | Headquarters |
|---------------|--------------|
| Room Name | Room 2 |

Camera Configuration

| Camera 1 | Camera 1 will be a(n) : Axis P3245-LV Overt Dome Camera Mic: Louroe Tamper Proof Mic |
|---|---|
| Camera 2 | Camera 2 will be a(n) : AXIS F41/F1025 Covert IP Camera Covert Enclosure : Flush Mount Enclosure Mic: Louroe Tamper Proof Mic |
| Recording Activation | Recording will be triggered via IR Client |
| External Recording-In- Progress Visual | N/A |
| Wall Configuration | Drywall |
| Ceiling Configuration | Standard Tile |

| Notes | |
|-------|--|
| | |

ROOM DETAILS: Room 3

The following sections detail the configurations specific to ROOM 3

| Location Name | Headquarters |
|---------------|--------------|
| Room Name | Room 3 |

Camera Configuration

| Camera 1 | Camera 1 will be a(n) : Axis P3245-LV Overt Dome Camera Mic: Louroe Tamper Proof Mic |
|---|---|
| Camera 2 | Camera 2 will be a(n) : AXIS F41/F1025 Covert IP Camera Covert Enclosure : Flush Mount Enclosure Mic: Louroe Tamper Proof Mic |
| Recording Activation | Recording will be triggered via IR Client |
| External Recording-In- Progress Visual | N/A |
| Wall Configuration | Drywall |
| Ceiling Configuration | Standard Tile |

| Notes | |
|-------|--|
| | |

Axon International, Inc's Sales Terms and Conditions for Direct Sales to End User Purchasers

This Statement of Work is bound to the applicable signed quote. Upon confirmation of the installation dates, to be confirmed in writing, the agency will give no less than a 2-week advanced notice of cancellation or change from the date of the scheduled installation. In the event the Agency cancels 2 weeks or less from the date of the scheduled installation, the agency will be responsible for all travel booked, and resource costs associated with the cancelled installation. Rescheduling of the installation will be at the discretion of Axon Professional Services based on available dates within the installation schedule calendar.

Changes to the scope of this SOW must be documented and agreed upon by the Parties in a change order. If the changes cause an increase or decrease in any charges or cause a scheduling change from that originally agreed upon, an equitable adjustment in the charges or schedule will be agreed upon by the Parties and included in the change order, signed by both Parties.

| Notes | |
|--|--|
| Sourcewell Contract #010720-AXN used for pricing and purchasing justification. | |

Purchase of TASER 7 are governed by the TASER 7 Agreement located at https://www.axon.com/legal/sales-terms-and-conditions and not the Master Services and Purchasing Agreement referenced below.

Tax is subject to change at order processing with valid exemption.

Axon's Sales Terms and Conditions

This Quote is limited to and conditional upon your acceptance of the provisions set forth herein and Axon's Master Services and Purchasing Agreement (posted at <u>www.axon.com/legal/sales-terms-and-conditions</u>) and the Axon Customer Experience Improvement Program Appendix, which includes the sharing of de-identified segments of Agency Content with Axon to develop new products and improve your product experience (posted at <u>www.axon.com/legal/sales-terms-and-conditions</u>), as well as the attached Statement of Work (SOW) for Axon Fleet and/or Axon Interview Room purchase, if applicable. The Axon Customer Experience Improvement Program Appendix ONLY applies to Customers in the USA. In the event you and Axon have entered into a prior agreement to govern all future purchases, that agreement shall govern to the extent it contemplates the products and services being purchased and does not conflict with the Axon Customer Experience Improvement Program Appendix. Any purchase order issued in response to this Quote is subject solely to the above referenced terms and conditions. By signing below, you represent that you are lawfully able to enter into contracts. If you are signing on behalf of an entity (including but not limited to the company, municipality, or government agency for whom you work), you represent to Axon that you have legal authority to bind that entity. If you do not have this authority, please do not sign this Quote.

| Signature: | Date: | |
|------------------------|--------|--|
| Name (Print): | Title: | |
| PO# (Or write N/A): | | |

Please sign and email to Allen Sliper at asliper@axon.com or fax to

Thank you for being a valued Axon customer. For your convenience on your next order, please check out our online store buy.axon.com

The trademarks referenced above are the property of their respective owners.

| ***Axon Internal Use Only*** | | | |
|------------------------------|----------|--|--|
| | | SFDC Contract #: | |
| | | Order Type: RMA #: Address Used: | |
| Review 1 | Review 2 | SO#: | |
| Comments: | | | |



ATTENTION

This order may qualify for freight shipping, please fill out the following information.

| What is the contact name and phone number for this shipment? | |
|--|--|
| What are your receiving hours? (Monday-Friday) | |
| Is a dock available for this incoming shipment? | |
| Are there any delivery restrictions? (no box trucks, etc.) | |



Clackamas County Sheriff's Office

ANGELA BRANDENBURG Sheriff

June 24, 2021

Board of County Commissioners Clackamas County

Members of the Board:

Approval to Apply for Grant Funding through

United States Department of Justice; Office of Community Policing Development for the Community Policing (CDP) Development Crisis Intervention Teams

| | Clackamas County Sheriff's Office (CCSO) requests approval to apply for |
|------------------------------------|--|
| Purpose/Outcome | grant funding through the U.S. Department of Justice (DOJ) |
| Dollar Amount and Fiscal Impact | Max Award Value \$250,000.00 |
| Funding Source | Federal DOJ |
| | Furthers the Board of County Commissioners' strategic priority of ensuring |
| Safety Impact | safe, healthy, and secure communities |
| Duration | 36 Months |
| Previous Board | None |
| Action/Review | |
| | Not Applicable |
| Counsel Review | |
| | Not Applicable |
| Procurement Review | |
| Contact Person | Nancy Artmann (503)785-5012 |
| Solicitation No. | O-CÓPS-2021-75007 |

BACKGROUND:

The CDP grant will enhance the use of crisis intervention teams to embed mental and behavioral health services with law enforcement to better respond to individuals in crisis in the community. Our objective is to create staffing positions within our agency to co-respond with law enforcement personnel to mental health crises.

RECOMMENDATION:

Staff recommends that the Board approve the attached Financial Assistance Application Lifecycle Form authorizing CCSO to apply for the Community Policing Development Crisis Intervention grant opportunity.

Respectfully submitted,

Angela Brandenburg, Sheriff

| Financial Assistance Application Lifecycle Form | | | |
|--|---|---|---|
| Use this form to track your potential grant from conception to submission. | | | |
| Sections of this form are designed to be completed in collaboration between department program and fiscal staff. | | | |
| | Note: T | ** CONCEPTION ** The processes outlined in this form are not applicable to disaster recovery grants. | |
| Section I: Funding Opport | | completed by Requester | |
| occurring opport | | | Subrecipient Assistance 🗹 Direct Assistance |
| Lead Department & Fund: | Clackamas County Sheriff's Office - 216 | Application for: Grant Renewal? | |
| | | If renewal, comp | lete sections 1, 2, & 4 only |
| | | If Disaster or Emergency Relief Funding, EC | OC will need to approve prior to being sent to the BCC |
| Name of Funding Opportunity: | Community P | olicing Development (CPD) Crisis Intervention Teams Solicitation | |
| | | | |
| Funding Source: Federal 🗸 | State 🔲 🛛 Local 🗖 | | |
| Requestor Information (Name of | f staff person initiating form): | ` | |
| Requestor Contact Information: | 503-785 | -5007 | |
| Department Fiscal Representativ | ve: Nancy A | vrtmann | |
| Program Name or Number (please | se specify): (503)78 | 5-5012 | |
| Brief Description of Project: | | | |
| | | | <i></i> |
| I his grant fundin | g opportunity will | be used to enhance a crisis int | ervention team. This grant |
| | | avioral health service providers | ũ là chiến the second se |
| | | • | |
| individuals in cris | sis to serve our co | ommunity better. | |
| | | | |
| | | | |
| | | | |
| Name of Funding Agency: | U.S. Dep | arment of Justice - Office of Community Oriented Policing | bervices |
| Aganay's Mah Address for fundi | ng agonay Guidalinas and Cantas | t Information: | |
| Agency's Web Address for fundir | ng agency Guidelines and Contac | נ וווטווומנוטוו: | |
| https://cons.usdo | oi.gov/pdf/2021Aw | vardDocs/cpd_cit/solicitation.pd | f |
| | | | · |
| OR | | | |
| | Yes No | | |
| Application Packet Attached: | Yes No | | |
| Completed By: | | | |
| completed by: | | | Date |
| | ** NOW READ | Y FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTA | |
| | | | |
| Section II: Funding Opportunity Information - To be completed by Department Fiscal Rep | | | |
| Compatitive Application | Non-Competing Application | | |
| Competitive Application CFDA(s), if applicable: | - | Other Funding Agency Award Notification Date: | 10/1/2021 (Anticipated) |
| | 16.710 | Announcement/Opportunity #: | 10/1/2021 (Anticipated) O-COPS-2021-75007 |
| Announcement Date: Grant Category/Title: | 5/20/2021 COPS Grant | Max Award Value: | \$250,000.00 |
| Allows Indirect/Rate: | | Max Award Value: Match Requirement: | |
| Application Deadline: | Yes 7/8/2021 | Other Deadlines: | None 7/7/2021 |
| Award Start Date: | 10/1/2021 | Other Deadline Description: | Grants.gov deadline |
| Award Start Date: Award End Date: | 9/30/2023 | other beaume beschption. | |
| Completed By: | 9/30/2023 Michael Morasko | Program Income Requirement: | N/A |
| Pre-Application Meeting Schedule: | | riogram income kequitement. | |
| rie-Application meeting schedule. | | | |

Section III: Funding Opportunity Information - To be completed at Pre-Application Meeting by Dept Program and Fiscal Staff

Mission/Purpose:

1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?

The grant funding will help us continue to provide public safety services to the people of Clackamas County to experience a safe and secure community. The funding would directly impact the level of service we can provide to citizens experiencing mental health crises as it would enhance partnerships and improve outcomes for those in crisis.

2. What, if any, are the community partners who might be better suited to perform this work?

Clackamas County Health, Housing, and Human Services' (H3S) Behavioral Health Unit.

3. What are the objectives of this funding opportunity? How will we meet these objectives?

Our objective is to create staffing positions embedded within our agency to co-respond with law enforcement personnel to mental health crises. Additionally, the Sheriff's Office would like to continue improving community relations by building upon existing County mental health support services and increasing access to services. We **+** 4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?

No, the grant does not fund an existing program.

Organizational Capacity:

1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?

The Sheriff's Office does not directly employ mental health professionals. If funding is obtained, the Sheriff's Office would contract for services.

2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?

Mental health partnership efforts are required. The Sheriff's Office would like to do a Request for Proposal (RFP) for a partnership.

3. If this is a pilot project, what is the plan for sunsetting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?

This would not be pilot project. The Sheriff's Office intention is to contract with an outside agency to avoid hiring temporary or limited duration staff.

4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

The funding from this grant would enhance program within the Patrol Division for embedded mental health clinicians to provide 24 hour coverage. CCSO will develop a sustainable program plan prior to the grant expiration date

Collaboration

1. List County departments that will collaborate on this award, if any.

None.

Reporting Requirements

1. What are the program reporting requirements for this grant/funding opportunity?

Implementing evidence based practices through systematic reviews at timed intervals (ex: monthly, quarterly, yearly).

2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? If not, is it feasible to develop a data source within the grant timeframe?

Performance will be evaluated through data generated from calls for service; i.e. case referrals and outcomes, law enforcement time spent, repeat calls, surveys, etc. Data sources are already existing; however, data collection related to these measures will need to be enhanced.

3. What are the fiscal reporting requirements for this funding?

Recipients of this funding will be required to submit quarterly Federal Financial Reports throughout the life of the award.

Fiscal

1. Will we realize more benefit than this financial assistance will cost to administer?

CCSO anticipates the benefits received from this grant funding opportunity will outweigh the costs of administration.

2. Are other revenue sources required? Have they already been secured?

None

3. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, Local Grant, etc.)?

No general fund support is required for this award.

4. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are

The grant allows indirect cost recovery, but the application does not list an indirect cap in the solicitation.

Program Approval:

Mike Morasko

| Mul | Mund |
|-----|------|
|-----|------|

 Name (Typed/Printed)
 Date
 Signature

 ** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIRECTOR**

 ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN.

06-16-2021

Section IV: Approvals

| DIVISION DIRECTOR (or designee, if applicable) | | |
|---|--|--|
| | | Angela Brandenburg_ |
| Sheriff Angela Brandenburg | 6/16/2021 | |
| Name (Typed/Printed) | Date | Signature |
| DEPARTMENT DIRECTOR (or designee, if applicable) | | |
| ber Artiviert Director (of designee, if applicable) | | 1 A A A |
| Nancy Artmann | 6/16/2021 | Proper to |
| Name (Typed/Printed) | Date | / Signature |
| | | |
| FINANCE ADMINISTRATION | | St. I.I.D. I.I. |
| Elizabeth Comfort | 6.16.2021 | Elizabeth Comfort |
| Name (Typed/Printed) | Date | Signature |
| EOC COMMAND APPROVAL (DISASTER OR EMERGE | ΝCY RELIEF ΔΡΡΙΙCΑΤΙΩΝS ΩΝΙΥ) | |
| | | |
| | | |
| Name (Typed/Printed) | Date | Signature |
| Section V: Board of County Commissione | rs/County Administration | |
| Section v. Board of County commissione | rs/county Administration | |
| | grant <u>awards</u> must be approved by the Board | on their weekly consent agenda regardless of amount per local budget law 294.338.) |
| For applications less than \$150,000: | | |
| COUNTY ADMINISTRATOR | Approved: | Denied: |
| | | |
| | | |
| | <u> </u> | |
| Name (Typed/Printed) | Date | Signature |
| | | |
| For applications greater than \$150,000 o | r which otherwise require BC | annroval: |
| | which otherwise require bee | |
| BCC Agenda item #: | | Date: |
| OR | | |
| Policy Session Date: | | |
| | | |
| | | |
| | | |
| | | |

County Administration Attestation

County Administration: re-route to department contact when fully approved. Department: keep original with your grant file.



Clackamas County Sheriff's Office

ANGELA BRANDENBURG Sheriff

June 24, 2021

Board of County Commissioners Clackamas County

Members of the Board:

Approval to Apply for Grant Funding through

United States Department of Justice; Office of Justice Programs for the Connect and Protect: Law Enforcement Behavioral Health Responses Grant Solicitation

| | Clackamas County Sheriff's Office (CCSO) requests approval to apply for | | |
|--------------------------|--|--|--|
| Purpose/Outcome | grant funding through the U.S. Department of Justice (DOJ) | | |
| Dollar Amount and Fiscal | Max Award Value \$550,000 | | |
| Impact | Match Amount: 20% for years 1 and 2; 40% for year 3 | | |
| Funding Source | Federal DOJ | | |
| | Furthers the Board of County Commissioners' strategic priority of ensuring | | |
| Safety Impact | safe, healthy, and secure communities | | |
| Duration | 36 Months | | |
| Previous Board | None | | |
| Action/Review | | | |
| | Not Applicable | | |
| Counsel Review | | | |
| | Not Applicable | | |
| Procurement Review | | | |
| Contact Person | Nancy Artmann (503)785-5012 | | |
| Solicitation No. | O-BJA-2021-21001 | | |

BACKGROUND:

The Connect and Protect: Law Enforcement Behavioral Health Response Program will assist CCSO with planning and enhancing a comprehensive response program that target preliminary qualified offenders and promote public safety and mental health.

RECOMMENDATION:

Staff recommends that the Board approve the attached Financial Assistance Application Lifecycle Form authorizing CCSO to apply for the Connect and protect: Law Enforcement Behavioral Health Response grant opportunity.

Respectfully submitted,

Angela Brandenburg, Sheriff

| Financial Assistance Application Lifecycle Form | | | |
|--|---|--|---|
| Use this form to track your potential grant from conception to submission. | | | |
| Sections of this form are designed to be completed in collaboration between department program and fiscal staff. | | | |
| | 1 T. | ** CONCEPTION ** | |
| Section Is Euroding Opport | unity Information - To be comple | utlined in this form are not applicable to disaster recovery grants. | |
| Section I: Funding Opport | unity information - To be comple | , , | |
| | | Application for: | Subrecipient Assistance 🗹 Direct Assistance |
| Lead Department & Fund: | Clackamas County Sheriff's Office - 216 | Grant Renewal? | Yes 🗸 No |
| | | | ete sections 1, 2, & 4 only |
| | | | will need to approve prior to being sent to the BCC |
| Name of Funding Opportunity: | Connect and Protect: Law Er | nforcement Behavioral Health Responses | |
| | | | |
| Funding Source: Federal 🗸 | State 🔲 Local 🗖 | | |
| Requestor Information (Name of | staff person initiating form): | Chief Deputy Jesse Ashby | |
| Requestor Contact Information: | 503-785-5007 | | |
| Department Fiscal Representative | Nancy Artmann | | |
| Program Name or Number (pleas | e specify): (503)785-5012 | | |
| Brief Description of Project: | | | |
| | | | |
| I he Connect and | Protect: Law Enforcer | ment and Behavioral Healt | h Response Program will |
| assist CCSO in e | nhancing comprehens | ive response programs that | at target preliminarily qualified |
| | 0 1 | 1 1 0 | a target premimanly quanned |
| offenders and pro | pmote public safety and | d mental health. | |
| | | | |
| | | | |
| | | | |
| Name of Funding Agency: | U.S. Department of | Justice - Office of Justice Programs | |
| | | | |
| Agency's Web Address for fundin | g agency Guidelines and Contact Informati | on: | |
| https://bia.oip.gov | //funding/opportunities | /o-bia-2021-121001 | |
| Intips.//bja.ojp.gov | //unung/opportunities | 70-bja-2021-121001 | |
| | | | |
| OR | | | |
| Application Packet Attached: | Yes No | | |
| | | | |
| Completed By: | | | |
| | ** NOW DEADY FOD CUD | | Date |
| ** NOW READY FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTATIVE ** | | | |
| Section II: Funding Opport | tunity Information - To be complete | ed by Department Fiscal Rep | |
| | | | |
| Competitive Application 🗹 | Non-Competing Application | Other 🔲 | |
| CFDA(s), if applicable: | 16.745 | Funding Agency Award Notification Date: | 10/1/2021 (Anticipated) |
| Announcement Date: | 5/19/2021 | Announcement/Opportunity #: | D-BJA-2021-21001 |
| Grant Category/Title: | BJA Connect and Protect | Max Award Value: | \$550,000.00 |
| Allows Indirect/Rate: | Yes | Match Requirement: | 20% Years 1 and 2; 40% Year 3 |
| Application Deadline: | 7/20/2021 | Other Deadlines: | 7/6/2020 |
| Award Start Date: | 10/1/2021 | Other Deadline Description: | grant.gov deadline |
| Award End Date: | 9/30/2024 | - | |
| Completed By: | Michael Morasko | Program Income Requirement: | N/A |
| Pre-Application Meeting Schedule: | | | |

Section III: Funding Opportunity Information - To be completed at Pre-Application Meeting by Dept Program and Fiscal Staff

Mission/Purpose:

1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?

The grant funding will help us continue to provide public safety services to the people of Clackamas County to experience a safe and secure community. The funding would directly impact the level of service we can provide to citizens experiencing mental health crises as it would enhance partnerships and improve outcomes for those in crisis.

2. What, if any, are the community partners who might be better suited to perform this work?

Clackamas County Health, Housing, and Human Services' (H3S) Behavioral Health Unit.

3. What are the objectives of this funding opportunity? How will we meet these objectives?

Our objective is to create staffing positions embedded within our agency to co-respond with law enforcement personnel to mental health crises. Additionally, the Sheriff's Office would like to continue improving community relations by building upon existing County mental health support services and increasing access to services. We **+** 4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?

No, the grant does not fund an existing program.

Organizational Capacity:

1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?

The Sheriff's Office does not directly employ mental health professionals. If funding is obtained, the Sheriff's Office would contract for services.

2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?

Mental health partnership efforts are required. The Sheriff's Office would like to do a Request for Proposal (RFP) for a partnership.

3. If this is a pilot project, what is the plan for sunsetting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?

This would not be pilot project. The Sheriff's Office intention is to contract with an outside agency to avoid hiring temporary or limited duration staff.

4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

The funding from this grant would enhance program within the Patrol Division for embedded mental health clinicians to provide 24 hour coverage. CCSO will develop a sustainable program plan prior to the grant expiration date. CCSO will continue to monitor for grant funding opportunities to continue operations of this

Collaboration

1. List County departments that will collaborate on this award, if any.

None.

Reporting Requirements

1. What are the program reporting requirements for this grant/funding opportunity?

Implementing evidence based practices through systematic reviews at timed intervals (ex: monthly, quarterly, yearly). Submit performance data at timed intervals.

2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? If not, is it feasible to develop a data source within the grant timeframe?

Performance will be evaluated through data generated from calls for service; i.e. case referrals and outcomes, law enforcement time spent, repeat calls, surveys, etc. Some data sources already exist; however, some data measurements will have to be created and assigned.

3. What are the fiscal reporting requirements for this funding?

CCSO will be required to submit quarterly financial reports throughout the award.

Fiscal

1. Will we realize more benefit than this financial assistance will cost to administer?

CCSO anticipates the benefits received from this grant funding opportunity will outweigh the costs of administration.

2. Are other revenue sources required? Have they already been secured?

The Sheriff's Operations, ELED and Levy funds will share in meeting the matching obligation.

3. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, Local Grant, etc.)?

This solicitation requires a 20 percent cash and/or in-kind match in years 1 and 2 and a 40 percent cash and in-kind match in year 3. CCSO estimates the matching funds for year 1 will total \$20,000.00, \$45,000.00 for year 2 and \$90,000.00 for year 3. The Sheriff's Operations, ELED and Levy funds will share in meeting the matching obligation.

4. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are

The grant allows indirect cost recovery, but the application does not list an indirect cap in the solicitation.

Program Approval:

| Mike Morasko | 06-16-2021 | Mul Marsh |
|--|------------|-----------|
| Name (Typed/Printed) | Date | Signature |
| ** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIRECTOR** | | |
| **ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN.** | | |

Section IV: Approvals

| DIVISION DIRECTOR (or designee, if applicable) | | |
|---|--------------------------------------|--|
| | | angela Beendenburg_ |
| Sheriff Angela Brandenburg Name (Typed/Printed) | 6-16-2021 Date | Signature |
| Name (Typed/Printed) | Dale | Signature |
| DEPARTMENT DIRECTOR (or designee, if applicable) | | Munda |
| Nancy Artmann - Finance Manager | 6-16-2021 | |
| Name (Typed/Printed) | Date | /Signature |
| FINANCE ADMINISTRATION | | |
| Elizabeth Comfort | 6.16.2021 | Elizabeth Comfort |
| Name (Typed/Printed) | Date | Signature |
| EOC COMMAND APPROVAL (DISASTER OR EMERGENCY F | RELIEF APPLICATIONS ONLY) | |
| | | |
| Name (Typed/Printed) | Date | Signature |
| | | |
| Section V: Board of County Commissioners/C | County Administration | |
| (Required for all grant applications. If your grant is awarded, all grant | awards must be approved by the Board | on their weekly consent agenda regardless of amount per local budget law 294.338.) |
| For applications less than \$150,000: | | |
| COUNTY ADMINISTRATOR | Approved: | Denied: |
| | | |
| | | |
| | | |
| Name (Typed/Printed) | Date | Signature |
| | | |
| | | |
| For applications greater than \$150,000 or wh | nich otherwise require BCC | approval: |
| BCC Agenda item #: | | Date: |
| OR | | |
| | | |
| Policy Session Date: | | |
| | | |
| | | |
| | | |

County Administration Attestation

County Administration: re-route to department contact when fully approved. Department: keep original with your grant file.



Clackamas County Sheriff's Office

ANGELA BRANDENBURG Sheriff

June 24, 2021

Board of County Commissioners Clackamas County

Members of the Board:

Request by the Clackamas County Sheriff's Office (CCSO) to enter into the Annual Operating and Financial Plan with the USDA Forest Service for Cooperative Law Enforcement Services in the Mt. Hood National Forest

| | CCSO will provide patrol services in the Mt. Hood National Forest from May through | | | | | |
|--------------------|--|--|--|--|--|--|
| Purpose/Outcome | September and at other times as funding permits | | | | | |
| Dollar Amount and | The 2021 annual operating plan totals \$71,467.66. | | | | | |
| Fiscal Impact | | | | | | |
| Funding Source | USDA, Forest Service is the funding source for this agreement | | | | | |
| | Furthers the Board of County Commissioners' strategic priority of ensuring safe, | | | | | |
| Safety Impact | healthy, and secure communities | | | | | |
| Duration | Effective upon signature and terminates on December 31, 2021 | | | | | |
| Previous Board | The Board of County Commissioners has approved this cooperative agreement | | | | | |
| Action/Review | since Fiscal Year 2013 | | | | | |
| | 1. Date of Counsel review: 6/1/2021 | | | | | |
| Counsel Review | 2. Initials of County Counsel performing review: AN | | | | | |
| Procurement Review | Not Applicable | | | | | |
| Contact Person | Brad O'Neil bradleyone@clackamas.us 503-785-5137 | | | | | |
| Contract No. | FS Agreement No. 18-LE-11060600-007 | | | | | |

BACKGROUND:

The Sheriff's Office provides patrol coverage annually to the U.S. Forest Service for patrols on Forest Service land. One deputy is assigned to the National Forest System lands within the Zigzag Ranger District and within the Clackamas River Ranger District and includes patrols in campgrounds, developed sites, and dispersed areas.

RECOMMENDATION:

Staff recommends that the Board of County Commissioners approves and signs this Cooperative Agreement between the Clackamas County Sheriff's Office and the USDA, Forest Service.

Respectfully submitted,

Angela Brandenburg, Sheriff

| MODIFICATION OF CDANT OD ACDEEMENT | | | | PAGE | OF PAGES | |
|--|---|--|---|---------------|-------------|----------------------|
| MODIFICATION OF GRANT OR AGREEMENT | | | 1 | 2 | | |
| | | | 3. MODIFICA | FION NUM | IBER: | |
| 18-LE-110606 | | AGREEMENT N | UMBER, IF ANY: | 003 | | |
| | w Enforcement Agreement | | | | | |
| | OF U.S. FOREST SERVICE UNIT ADMIN VT (unit name, street, city, state, and zip + 4) | | 5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4): | | | STERING |
| Mt. Hood Nati | | | Mt. Hood National Forest, | | 21p - 1). | |
| 16400 Champi | | | 16400 Champion Way | | | |
| Sandy, OR 970 | • | | Sandy, OR 97055 | | | |
| 6. NAME/ADDRESS | OF RECIPIENT/COOPERATOR (street, cit | ty, state, and zip + | 7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS | | | |
| 4, county): | | | payment use only): | | | |
| Clackamas, Co | • | | | | | |
| 9101 SE Sunny | | | | | | |
| Clackamas, OF | | | | | | |
| | 8. PU | RPOSE OF | MODIFICATION | | | |
| CHECK ALL | This modification is issued p | | e modification provision in t | he grant/ag | reement | |
| THAT APPLY: | referenced in item no. 1, abo | | | | | |
| | CHANGE IN PERFORMANCE I | PERIOD: | | | | |
| \boxtimes | CHANGE IN FUNDING: This m | odification adds | \$69,212.00 | | | |
| | ADMINISTRATIVE CHANGES | : | | | | |
| \boxtimes | OTHER (Specify type of modifica | ation): This mod | ification adds the CY 2021 Annua | l Operating a | nd Financ | cial Plan. |
| | ed herein, all terms and condition | s of the Grant/ | Agreement referenced in 1, abov | ve, remain un | changed | and in full |
| force and effect. | | | | 1\ | | |
| | L SPACE FOR DESCRIPTION OF aiton adds \$69,212.00; see Annual O | | | d): | | |
| | | | TATION (Check all that ap | oply): | | |
| | Revised Scope of Work | | | | | |
| | Revised Financial Plan | | | | | |
| \square | Other: 2021 Annual Operating Pla | an and Financial | Plan (Exhibit A) | | | |
| | | 11. SIGN | ATURES | | | |
| AUTHORIZED REPRESENTATIVE: BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF | | | | | JTATIVES OF | |
| | PARTIES AND AUTHORIZED TO ACT | | | | | |
| GRANT/AGREEMEN | | | | | T | |
| | nty Sheriff SIGNATURE | 11.B. DATE SIGNED | 11.C. U.S. FOREST SERVICE SIGNAT | | | 11.D. DATE SIGNED |
| _ | nnual Operating Plan for | SIGNED | See attached Annual Opera | iting Plan fo | or | SIGNED |
| signatures. | | | signatures. | | | |
| (Signature of Signatory Official) 11.E. NAME (type or print): | | (Signature of Signatory Official) 11.F. NAME (type or print): | | | | |
| TT.E. WAIME (type of | princ). | | 11.1 ^o . NAME (type of print). | | | |
| 11.G. TITLE (type or | 11.G. TITLE (type or print): 11.H. TITLE (type or print): | | | | | |
| 12. G&A REVIEW | | | | | | |
| 12.A. The authorithm | ority and format of this modificati | ion have been r | eviewed and approved for signat | ture by: | | .B. DATE GNED |
| _See AOP for Signature | | | | | | |
| KRISTEN BOWLES (18-LE-11060600-007 M3) | | | | | | |
| | vice Grants & Agreements Specialist | | | | | |
| | | | | | | |



Burden Statement

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0217. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice). USDA is an equal opportunity provider and employer.

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FS Agreement No. 18-LE-11060600-007 Cooperator Agreement No.

EXHIBIT A

COOPERATIVE LAW ENFORCEMENT ANNUAL OPERATING PLAN & FINANCIAL PLAN Between Clackamas, County of and the USDA, FOREST SERVICE Mt. Hood National Forest

2021 ANNUAL OPERATING AND FINANCIAL PLAN

This Annual Financial and Operating Plan (Annual Operating Plan), is hereby made and entered into by and between Clackamas, County of, hereinafter referred to as "Cooperator," and the USDA, Forest Service, Mt. Hood National Forest, hereinafter referred to as the "U.S. Forest Service," under the provisions of Cooperative Law Enforcement Agreement #18-LE-11060600-007 executed on date of last signature. This Annual Operating Plan is made and agreed to as of the last date signed below and is for the estimated period beginning January 1, 2021 and ending December 31, 2021

Previous Year Carry-over as of 3/3/2021: \$2,255.66 Current Calendar Year Obligation: \$69,212.00 **Total Annual Operating Plan: \$71,467.66**

I. GENERAL:

A. The following individuals shall be the designated and alternate representative(s) of each party, so designated to make or receive requests for special enforcement activities.

Principal Cooperator Contacts:

| Cooperator Program Contact | Cooperator Administrative Contact |
|---------------------------------------|---|
| Capt. Brad O'Neil | Nancy Artmann |
| 2223 Kaen Road | 9101 SE Sunnybrook Blvd |
| Oregon City, OR 97045 | Clackamas, OR 97015 |
| Telephone: 503.785.5071 | Telephone: 503.785.5012 |
| FAX: 503.785.5027 | FAX: 503.785.5027 |
| Email: <u>bradleyone@clackamas.us</u> | Email: <u>nartmann@co.clackamas.or.us</u> |

ULS

Principal U.S. Forest Service Contacts:

| U.S. Forest Service Program Manager | U.S. Forest Service Administrative |
|---|------------------------------------|
| Contact | Contact |
| Ross Gamboa | Rachele Avery |
| 16400 Champion Way | 16400 Champion Way |
| Sandy, Or 97055 | Sandy, Or 97055 |
| Telephone: 503.668.1789 | Telephone: 503.668.1625 |
| FAX: 503.668.1738 | FAX: 503.668.1771 |
| Email: ross.gamboa@usda.gov | Email: rachele.avery@usda.gov |
| U.S. Forest Service Agreement | |
| Contact | |
| Jessica Clark | |
| 987 McClellan Rd. (physical) | |
| 501 E 5 th St. Bldg. 404 (mailing) | |
| Vancouver, WA 98661 | |
| Telephone: 360-891-5168 | |
| FAX: 360-891-5081 | |
| Email: jessica.clark@usda.gov | |

B. Reimbursement for all types of enforcement activities shall be at the following rates unless specifically stated otherwise:

Wages at the prevailing rate of \$79.62 per hour and overtime at the rate of \$97.45 per hour.

II. PATROL ACTIVITIES:

A. Time schedules for patrols will be flexible to allow for emergencies, other priorities, and day-to-day needs of both the Cooperator and the U.S. Forest Service. Ample time will be spent in each area to make residents and visitors aware that law enforcement officers are in the vicinity.

Timely reports and/or information relating to incidents or crimes that have occurred on National Forest System lands should be provided to the U.S. Forest Service as soon as possible.

The primary patrol activities will be during the summer months of May through September; the tour of duty will be ten hours per day on Friday, Saturday, and Sunday, and include the national holidays of May 31, 2021, July 4, 2021 and September 6, 2021. Patrol activities may also occur during other months, as funding permits and as agreed to between the Cooperator and U.S. Forest Service. Patrol dates may be varied to address operational needs after mutual agreement between the Cooperator's and the U.S. Forest Service's representatives. ULS

Each tour of duty should begin between 10:00 AM and 4:00 PM and remaining work hours may be varied as agreed to between the Cooperator and U.S. Forest Service.

The assigned Deputies will check in, as practical with the Ranger District Office or U.S. Forest Service Law Enforcement Officer when they begin their tour of duty, in person, by radio or telephone.

During scheduled vacations the cooperator, when possible, provide fill in Deputies for patrol.

The assigned Deputies would be available for other support and assistance as requested by the U.S. Forest Service.

There are patrol related activities, which will impact the Cooperating Deputy's time and will cause them to be away from the patrol route (court, reports, or responding to incidents off National Forest). No adjustment to this plan will be required so long as the activities are held to, not more than 5 percent of the Deputy's scheduled time.

1. Patrol on following U.S. Forest Service roads:

National Forest System lands within the Zigzag Ranger District. The patrol will begin near Zigzag, Oregon and will include National Forest lands north and south of State Hwy. 26 and east of the Forest boundary to Timothy Lake.

National Forest System lands within the Clackamas River Ranger District. The patrol will begin near Estacada, Oregon and will include National Forest lands north and south of Hwy. 224 and east of the Forest boundary, and lands adjacent to U.S. Forest Service Roads 46, 63 and 70.

2. Patrol in the following campgrounds, developed sites, or dispersed areas:

Zigzag Ranger District:

Burnt Lake and Ramona Falls Trailheads, and all dispersed campsites. Timothy Lake, and all lands and roads adjacent to Timothy Lake. Trillium Lake, and all lands and roads adjacent to Trillium Lake. Dispersed recreation along U.S. Forest Service Road 5750 and 5750-220 south of Gone Creek Campground.

Clackamas River Ranger District:

Timber Lake Job Corps Center Dispersed recreation areas east of Promontory Park on Hwy. 224 Dispersed recreation areas east of Hwy. 224 via U.S. Forest Service Road 57 and 4630.

Dispersed recreation areas via U.S. Forest Service Roads 46, 63 and 70. (Bagby Hot Springs Recreational Area)

Patrol routes may be varied at the discretion of the assigned Deputy in order to effectively deal with incidents at other locations as they occur.

Search and rescue within the Mt Hood National Forest, within Clackamas County, is the responsibility of the Clackamas County Sheriff. The role of the assigned Deputies to this agreement is to take initial action on search and rescue incidents and to coordinate subsequent (short term) activities.

Total reimbursement for this category shall not exceed the amount of: **<u>\$71,467.66</u>**

III. TRAINING:

See Cooperative Law Enforcement Agreement Provision IV-K for additional information.

N/A

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Total reimbursement for this category shall not exceed the amount of: \$0.00

IV. EQUIPMENT:

See Cooperative Law Enforcement Agreement Provisions IV-K, IV-L, and IV-M for additional information.

- A. The Forest Service agrees to reimburse Clackamas County for equipment and supplies necessary in remote wilderness on forest service lands, in an amount not to exceed \$1,000. All purchases must be approved by the Forest Service prior to purchase. Documentation of such purchases shall become part of the Cooperative Agreements' official file.
- **B.** The Forest Service may loan Clackamas County equipment as needed, when mutually agreed. While in possession of Clackamas County, maintenance of this equipment shall be the responsibility of the Cooperator and shall be returned in same condition as time of transfer.

FOREST SERVICE SHALL:

- 1. Grant permission through a Radio Frequency MOU, subject to Forest Service limitations and regulations, and those included herein, to the Clackamas County Sheriff's Office for law enforcement purposes, for use of the Mt Hood National Forest radio frequencies. Various channel guard tones are also authorized for use as required.
- 2. Restrict the use of radio frequency to official business.
- 3. Retain control of the use of these radio frequencies.
- 4. Not charge for the use of the radio frequencies.

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CLACKAMAS COUNTY SO SHALL:

- 1. Grant permission, subject to State limitations and regulations, and those included herein, to the US Forest Service for law enforcement purposes, for use of the Clackamas County radio frequencies. Various channel guard tones are also authorized for use as required.
- 2. Restrict use of the radio frequency to official business.
- 3. Retain control of the use of these radio frequencies.
- 4. Recognize that fire traffic may have priority use of the frequency and that any transmissions during the time of a fire shall be coordinated with the on-scene Incident Commander and/or Columbia River Interagency Dispatch Center.
- 5. Ensure any radio transmissions in the 162-174 VHF Band are operating in the narrowband mode.

Total reimbursement for this category will be paid out of the Patrol Activity funds in Section II.

Total reimbursement for this category shall not exceed the amount of: <u>\$1,000.00</u>

V. SPECIAL ENFORCEMENT SITUATIONS:

- A. Special Enforcement Situations include but are not limited to: Fire Emergencies, Drug Enforcement, and certain Group Gatherings.
- B. Funds available for special enforcement situations vary greatly from year to year and must be specifically requested and approved prior to any reimbursement being authorized. Requests for funds should be made to the U.S. Forest Service designated representative listed in Item I-A of this Annual Operating Plan. The designated representative will then notify, whether funds will be authorized for reimbursement. If funds are authorized, the parties will then jointly prepare a revised Annual Operating Plan.
 - 1. Drug Enforcement: This will be handled on a case by case basis. The request will normally come from the patrol Captain; however, it may come from the Special Agent in Charge or their designated representative. Reimbursement shall be made at the rates specified in Section I-B. Deputies assigned to the incident will coordinate all of their activities with the designated officer in charge of the incident.
 - 2. Fire Emergency: During emergency fire suppression situations and upon request by the Forest Service pursuant to an incident resource order, the Cooperator agrees to provide special services beyond those provided under Section II-A, within the

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Cooperator's resource capabilities, for the enforcement of State and local laws related to the protection of persons and their property. The Cooperator will be compensated at the rate specified in Section I-B; the Forest Service will specify times and schedules. Upon concurrence of the local patrol Captain or their designated representative, an official from the Incident Management Team managing the incident, Cooperator personnel assigned to an incident where meals are provided will be entitled to such meals.

3. Group Gatherings: This includes but is not limited to situations which are normally unanticipated, or which typically include very short notices, large group gatherings such as rock concerts, demonstrations, and organization rendezvous. Upon authorization by a Forest Service representative listed in Section I-A for requested services of this nature, reimbursement shall be made at the rates specified in Section I-B. Deputies assigned to this type of incident will normally coordinate their activities with the designated officer in charge of the incident.

VI. BILLING FREQUENCY:

See Cooperative Law Enforcement Agreement Provisions II-H and III-B for additional information.

A. The Cooperator will submit invoices for reimbursement of services provided under Section II of this agreement monthly or quarterly, at the discretion of the Cooperator.

USDA Forest Service Albuquerque Service Center Payments-Grants and Agreements 101B Sun Ave NE Albuquerque, NM 87109

FAX: (877) 687-4894

E-Mail: <u>SM.FS.asc_ga@usda.gov</u>

The Cooperator will prepare an itemized statement for each invoice submitted to the Albuquerque Service Center. The statement will be in sufficient detail to allow the Forest Service to verify expenditures authorized. The itemized statement for reimbursement will also include the following information:

- 1. Areas patrolled and miles traveled on NFS lands.
- 2. Person-hours worked in NFS patrol areas.
- 3. Copies of completed Daily Activity Reports.
- 4. Copies of invoice submitted.

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The statement should be sent to the following address:

USDA Forest Service, Law Enforcement & Investigations Northern Oregon Zone ATTN: Ross Gamboa, Captain 16400 Champion Way Sandy, OR 97055

Or to the following e-mail address Rachele.avery@usda.gov

B. The following is a breakdown of the total estimated costs associated with this Annual Operating Plan.

| Category | Estimated Costs | Not to Exceed by % |
|--------------------------------|-----------------|--------------------|
| Patrol Activities | \$70,467.66 | N/A |
| Training | \$0 | N/A |
| Equipment | \$1,000.00 | N/A |
| Special Enforcement Situations | | N/A |
| Total | \$71,467.66 | N/A |

- C. Any remaining funding in this Annual Operating Plan may be carried forward to the next calendar year and will be available to spend through the term of the Cooperative Law Enforcement Agreement, or deobligated at the request of the U.S. Forest Service. *See Cooperative Law Enforcement Agreement Provision IV-D.*
- D. By signature below, each party certifies that the individuals listed in this document as representatives of the individual parties are authorized to act in their respective areas for matters related to this agreement.

In witness whereof, the parties hereto have executed this Annual Operating Plan as of the last date written below.

ANGELA BRANDENBURG, Sheriff County of Clackamas Date

Commissioner Chair Date County of Clackamas **DUANE BISHOP**, Acting Forest Supervisor Date U.S. Forest Service, Mt. Hood National Forest JOHN BYAS, Special Agent in Charge, Date U.S. Forest Service, Pacific Northwest Region The authority and format of this agreement (18-LE-11060600-007, MOD 3) have been reviewed and approved for signature. **KRISTEN BOWLES** Date U.S. Forest Service Grants Management Specialist Burden Statement According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0217. The time required to complete this information collection is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice). USDA is an equal opportunity provider and employer.



Clackamas County Sheriff's Office

ANGELA BRANDENBURG Sheriff

June 24, 2021

Board of County Commissioners Clackamas County

Members of the Board:

Request by the Clackamas County Sheriff's Office (CCSO) to approve modification 004, adding \$10,000.00 in COVID-19 funding to the Cooperative Law Enforcement Services in the Mt. Hood National Forest

| | This modification provides CCSO an additional \$10,000.00 in COVID-19 funding to | | | | | |
|--------------------|---|--|--|--|--|--|
| Purpose/Outcome | continue patrol services in the Mt. Hood National Forest from May through | | | | | |
| r alpeee, eateenie | | | | | | |
| | September and other times as funding permits | | | | | |
| Dollar Amount and | This modification increases funding to \$81,467.66 for the 2021 annual operating plan | | | | | |
| Fiscal Impact | | | | | | |
| Funding Source | USDA, Forest Service is the funding source for this agreement | | | | | |
| | Furthers the Board of County Commissioners' strategic priority of ensuring safe, | | | | | |
| Safety Impact | healthy, and secure communities | | | | | |
| Duration | Effective upon signature and terminates on December 31, 2021 | | | | | |
| Previous Board | The Board of County Commissioners has approved this cooperative agreement | | | | | |
| Action/Review | since Fiscal Year 2013 | | | | | |
| | 1. Date of Counsel review: 6/1/2021 | | | | | |
| Counsel Review | 2. Initials of County Counsel performing review: AN | | | | | |
| Procurement Review | Not Applicable | | | | | |
| Contact Person | Brad O'Neil bradleyone@clackamas.us 503-785-5137 | | | | | |
| Contract No. | FS Agreement No. 18-LE-11060600-007 | | | | | |

BACKGROUND:

This amendment adds \$10,000.00 in COVID-19 funding for the continuation of the cooperative agreement. The Sheriff's Office provides patrol coverage annually to the U.S. Forest Service for patrols on Forest Service land. One deputy is assigned to the National Forest System lands within the Zigzag Ranger District and within the Clackamas River Ranger District and includes patrols in campgrounds, developed sites, and dispersed areas.

RECOMMENDATION:

Staff recommends that the Board of County Commissioners approves and signs this modification, adding \$10,000.00 in COVID-19 funding to the Cooperative Agreement between the Clackamas County Sheriff's Office and the USDA, Forest Service.

Respectfully submitted,

Angela Brandenburg, Sheriff

| MODIFICATION OF CDANT OD A ODFEMENT | | | | PAGE | OF PAGES | |
|---|--|---|--|------------------------------|---------------|----------------------|
| MODIFICATION OF GRANT OR AGREEMENT | | | | 1 | 2 | |
| | VICE GRANT/AGREEMENT NUMBER: | 2. RECIPIENT/COOPERATOR GRANT or AGREEMENT NUMBER, IF ANY: | | 3. MODIFICATION NUMBER: | | IBER: |
| | 00-007 Cooperative Law | AUKEEMIENTIN | UMBER, IF AN I: | 4 | | |
| Enforcement A | Agreement OF U.S. FOREST SERVICE UNIT ADMIN | UCTEDING | 5. NAME/ADDRESS OF U.S. FOREST | CEDVICE INI | | TEDING |
| 4. NAME/ADDRESS GRANT/AGREEMEN | OF U.S. FOREST SERVICE UNIT ADMIN NT (unit name, street, city, state, and zip + 4): | ISTERING : | 5. NAME/ADDRESS OF U.S. FOREST PROJECT/ACTIVITY (unit name, stree | | | STEKING |
| Mt. Hood Nati | | I | | Mt. Hood National Forest LEI | | |
| 16000 Champi | on Way | | 16000 Champion Way | | | |
| Sandy, OR 970 |)55 | I | Sandy, OR 97055 | | | |
| 6. NAME/ADDRESS 4, county): | OF RECIPIENT/COOPERATOR (street, cit | y, state, and zip + | 7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only): | | | |
| Clackamas, Co | • | I | | | | |
| 2051 Kaen Rd | | | | | | |
| Oregon City, C | DR 97045-1819 | | | | | |
| | 8. PU | RPOSE OF ! | MODIFICATION | | | |
| CHECK ALL | This modification is issued p | oursuant to the | e modification provision in t | he grant/ag | reement | ; |
| THAT APPLY: | referenced in item no. 1, abo | | | - | | |
| | CHANGE IN PERFORMANCE P | 'ERIOD: | | | | |
| | CHANGE IN FUNDING: Adding \$10,000.00 in Covid funding for continuation of the project. All previously obligated | | | | sly obligated | |
| funds remain available for use. | | | | | | |
| | ADMINISTRATIVE CHANGES: | | | | | |
| | OTHER (Specify type of modification): | | | | | |
| Except as provid force and effect. | led herein, all terms and condition | s of the Grant/A | Agreement referenced in 1, abov | ve, remain ur | ıchanged | and in full |
| 9. ADDITIONAL | L SPACE FOR DESCRIPTION OF | MODIFICATIO | ON (add additional pages as neede | :d): | | |
| | | | | | | |
| | 10. ATTACHED I | OCUMENT | FATION (Check all that ap | oply): | | |
| | Revised Scope of Work | | | | | |
| | Revised Financial Plan | | | | | |
| | Other: | | | | | |
| | | 11. SIGN | ATURES | | | |
| AUTHORIZED REP | RESENTATIVE: BY SIGNATURE BELO' | | | THE OFFICIAL | REPRESEN | JTATIVES OF |
| <u>AUTHORIZED REPRESENTATIVE</u> : BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF THEIR RESPECTIVE PARTIES AND AUTHORIZED TO ACT IN THEIR RESPECTIVE AREAS FOR MATTERS RELATED TO THE ABOVE-REFERENCED | | | | | | |
| | GRANT/AGREEMENT. | | | | | |
| 11.A. Clackamas Cour | nty Sheriff SIGNATURE | 11.B. DATE SIGNED | 11.C. U.S. FOREST SERVICE SIGNA | ΓURE | | 11.D. DATE SIGNED |
| (Cianatana af Cianatan | | | | | | |

| (Signature of Signatory Official) | | (Signature of Signatory Official) | |
|---|-----|---|------|
| 11.E. NAME (type or print): ANGELA BRANDENB | URG | 11.F. NAME (type or print): JOHN BYAS | |
| 11.G. TITLE (type or print): Sheriff, Clackamas Co. | | 11.H. TITLE (type or print): Special Agent in Charge, Forest Service, Pacific Northwest Region | U.S. |



| 11. SIGNATURES | | | | | | |
|--|---|---|----------------------|--|--|--|
| <u>AUTHORIZED REPRESENTATIVE</u> : BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF THEIR RESPECTIVE PARTIES AND AUTHORIZED TO ACT IN THEIR RESPECTIVE AREAS FOR MATTERS RELATED TO THE ABOVE-REFERENCED GRANT/AGREEMENT. | | | | | | |
| 11.I. Clackamas County Sheriff SIGNATURE | 11.J. DATE SIGNED | 11.K. U.S. FOREST SERVICE SIGNATURE | 11.L. DATE SIGNED | | | |
| (Signature of Signatory Official) | | (Signature of Signatory Official) | | | | |
| 11.M. NAME (type or print): 11.N. NAME (type or print): DUANE BISHOP | | | | | | |
| 11.O. TITLE (type or print): | 11.0. TITLE (type or print): 11.P. TITLE (type or print): | | | | | |
| Commissioner Chair Acting Forest Supervisor | | | | | | |
| County of Clackamas | | U.S. Forest Service, Mt. Hood National Forest | | | | |
| 12. G&A REVIEW | | | | | | |
| 12.A. The authority and format of this modification have been reviewed and approved for signature by: | | | | | | |
| ANNE DOOLIN (18-LE-11060600-007 Mod 4) | | | | | | |
| U.S. Forest Service Grants & Agreements Specialist | | | | | | |
| | | | | | | |

CICNIA TUDEC

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