***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** |  | **Meeting Date:** | **12/12/23** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Courtney Greenley / Sheriff** | **Phone:** | **530-842-8326** |
| **Address:** | **305 Butte St, Yreka CA 96097** |
| **Person Appearing/Title:** | **Jeremiah LaRue / Sheriff-Coroner** |
| **Subject/Summary of Issue:** |
| The Sheriff's Office has worked with the Drug Enforcement Administration (DEA) for many years in a mutual agreement to locate and eradicate illicit cannabis plants as well as the investigation and prosecution of cases involving controlled substances. This agreement will cover the period of October 1st, 2023 through September 30th, 2024. The request in our application is for $348,300.00 to be reimbursed to the Sheriff's office for aerial reconissance, environmental and sample testing, supplies, protective gear and overtime.  |
| **Financial Impact:** |
| **NO** | [ ]  | *Describe why no financial impact:*       |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | 348300.00 |  |  |  |  |
| Fund:  | 1019 |  | Description: | DEA ERAD | Org.: | 202010 | Description: | SHERIFF |
| Account: | 542700 |  | Description: | FEDERAL |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| Ratify the Sheriffs application in the amount of $348,3000.00 to the Drug Enforcement Administration covering the period of October 1st, 2023 through September 30th, 2024. Authorize the Sheriff to accept the pending award, sign additional documents and participate in the program. Allow the Auditor to establish budget appropriations. |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |  |  |
|  |  |  | *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |  |  |  |  |  |
|  |  |  |  |  |  |
| Personnel |       |  | *Other:* |       |
| CAO |       |  |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021