

Application for Federal Assistance SF-424Version 02
OMB Number: 4040-0004
Expiration Date: 03/31/2012

1. Type of Submission: 2. Type of Application: If Revision, select appropriate letter(s)

- Preapplication New Other (Specify)
- Application Continuation
- Changed/Corrected Application Revision

3. Date Received : 4. Applicant Identifier:

6/16/2010 IADCI00

5a. Federal Entity Identifier: 5a. Federal Award Identifier:

State Use Only:

6. Date Received by State: 7. State Application Identifier:

8. APPLICANT INFORMATION:

a. Legal Name: Iowa Division of Criminal Investigation

c. Organizational DUNS:

808349021

d. Address:

Street 1: 215 East 7th Street

Street 2: 2nd Floor

City: Des Moines

County:

State: IA

Province:

Country:

Zip / Postal Code: 50319

e. Organizational Unit:

Department Name: Iowa Department of Public Safety Division Name: Division of Criminal Investigation

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: Mr. First Name: Gerard

Middle Name: Frederick Last Name: Meyers

Suffix:

Title: Special Agent in Charge Organizational Affiliation: Division of Criminal Investigation

Telephone Number: 5159657402 Fax Number: 5159657401

9. Type of Applicant 1: Select Applicant Type:

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

Other (Specify):

10 Name of Federal Agency:

**Office of Community Oriented Policing
Services**

11. Catalog of Federal Domestic Assistance Number:

CFDA # = 16.710

CFDA Title: Public Safety Partnership And Community Policing Grants

12 Funding Opportunity Number:

13. Competition Identification Number:

14. Areas Affected by Project (Cities, Counties, States, etc.):

State of Iowa

15. Descriptive Title of Applicant's Project:

Child Sexual Predator Program

16. Congressional Districts

Of:

a. Applicant: All

b. Program/Project: IA01

17. Proposed Project:

a. Start Date: 9/1/2010

b. End Date: 8/31/2012

18. Estimated Funding (\$):

a. Federal 499973

b. Applicant

c. State

d. Local

e. Other

f. Program Income

g. TOTAL 499973

19. Is Application Subject to Review By State Under Executive Order 12372 Process?

a. This application was made available to the State under the Executive Order 12372 Process for review on

b. Program is subject to E.O. 12372 but has not been selected by the State for review.

c. Program is not covered by E.O. 12372

20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)

Yes No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001)

By clicking this box and typing my name below, I also certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

I AGREE

** The certifications and assurances as well as grant terms and conditions can be reviewed at www.cops.usdoj/????.

Authorized Representative:

Prefix: Mr.

Title: Commissioner of the Iowa DPS

Middle Name: T

First Name: Eugene

Last Name: Meyer

Suffix:

Telephone Number: 5157256180

Fax Number: 5157256195

Signature (Typed Name) of Authorized Representative: Eugene T. Meyer Date Signed: 6/25/2010

Applicant Federal Debt Delinquency Explanation

The following should contain an explanation if the Applicant organization is delinquent of any Federal Debt.

COPS Application Attachment to SF-424

SECTION 1: COPS PROGRAM REQUEST

Federal assistance is being requested under the following COPS program:

Select the COPS grant program for which you are requesting federal assistance. A separate application must be completed for each COPS program for which you are applying. Please ensure that you read, understand, and agree to comply with the applicable grant terms and conditions as outlined in the COPS Application Guide before finalizing your selection.

CHECK ONE PROGRAM OPTION ONLY

Child Sexual Predator Program

SECTION 2: Agency Eligibility Information

A. Type of Agency (select one)

Law Enforcement Non-Law Enforcement

From the list below, please select the type of agency which best describes the applicant.

Law Enforcement Entities State Police Agency

Section 3: GENERAL AGENCY INFORMATION

A. Applicant ORI Number: IADCI00

The ORI number is assigned by the FBI and is your agency's unique identifier. The COPS Office uses the first seven characters of this number. The first two letters are your state abbreviation, the next three numbers are your county's code, and the next two numbers identify your jurisdiction within your county. If you do not currently have an ORI number, the COPS Office will assign one to your agency for the purpose of tracking your grant. ORI numbers assigned to agencies by the COPS Office may end in "ZZ."

B. Applicant Data Universal Numbering System (DUNS) Number: 808349021

A Data Universal Numbering System (DUNS) Number is required. A DUNS number is a unique nine or thirteen digit sequence recognized as the universal standard for identifying and keeping track of entities receiving federal funds. For more information about how to obtain a DUNS number, please refer to the "How to Apply" section of the COPS Application Guide.

C. Central Contractor Registration (CCR)

All applicants (other than individuals) are required to maintain current registrations in the Central Contractor Registration (CCR) database. The CCR database is the repository for standard information about federal financial assistance applicants, recipients, and sub-recipients. For more information about how to register with the CCR, please refer to the "How to Apply" section of the COPS Application Guide. Please note that applicants must update or renew their CCR at least once per year to maintain an active status.

Does your agency have an active registration with the Central Contractor Registration database?

Note: Your Agency must have an active registration with the CCR. If your agency is not registered, please register now by going to the following web address: <https://www.bpn.gov/ccr/default.aspx>

Yes No

D. Geographic Names Information System (GNIS) ID: 1779785

Please enter your Geographic Names Information System (GNIS) Identification Number. This is a unique ID assigned to all geographic entities by the U.S. Geological Survey. To look up your GNIS Feature ID, please go to the website: <http://geonames.usgs.gov/domestic/index.html>. For more information about how to obtain a GNIS number, please refer to the "How to Apply" section of the COPS Application Guide.

E. Cognizant Federal Agency: Department of Transportation

Select the legal applicant's Cognizant Federal Agency. A Cognizant Federal Agency, generally, is the federal agency from which your jurisdiction receives the most federal funding. Your Cognizant Federal Agency also may have been previously designated by the Office of Management and Budget. Applicants that have never received federal funding should select the "Department of Justice" as the Cognizant Federal Agency.

Section 3: GENERAL AGENCY INFORMATION

F. Fiscal Year: 7/1/2010 To: 6/30/2011

Enter the date of the legal applicant's fiscal year.

G. Service Population

1. Enter the total population of the government entity applying for this grant using the latest census estimate available in the American FactFinder at <http://FactFinder.census.gov>.

2984391

2. Check here if the population of the entity applying for this grant is not represented by U.S. Census figures (e.g., colleges, special agencies, school police departments, etc.).

(If checked, complete 2a – 2b.)

2a. If the population of the entity applying for this grant is not represented by U.S. Census figures, please indicate the size of the population as of the latest available estimate:

0

2b. Please indicate the source of this population estimate: _____
(e.g., website address)

3. What is the actual population your department serves as the primary law enforcement entity?

This may or may not be the same as the population specified above. For example, a service population may be the census population minus incorporated towns and cities that have their own police department within your geographic boundaries or estimates of ridership (e.g., transit police) or visitors (e.g., park police).

2984391

3a. If applicable, please explain why the service population differs from the census population:

State of Iowa

H. Law Enforcement Agency Sworn Force Information

1. Enter the Fiscal Year Budgeted Sworn Force Strength for each year below. The budgeted number of sworn officer positions is the number of sworn positions funded in your agency's budget, including funded but frozen positions, as well as state, Bureau of Indian Affairs, and/or locally funded vacancies. Do not include unfunded vacancies or unpaid/reserve officers.

a. Number of officers funded in agency's current fiscal year budget:

Full-Time: 679 Part-Time: 0

2. Enter the Fiscal Year Actual Sworn Force Strength as of the date of this application: *The actual number of sworn officer positions is the actual number of sworn positions employed by your agency as of the date of this application. Do not include funded but currently vacant positions or unpaid positions.*

a. Number of officers employed by your agency as of the date of this application:

Full-Time: 649 Part-Time: 0

SECTION 4: EXECUTIVE INFORMATION

Note: Listing individuals without ultimate programmatic and financial authority for the grant could delay the review of your application, or remove your application from consideration.

A. Law Enforcement Executive/Agency Executive Information:

For Law Enforcement Agencies: Enter the law enforcement executive's name and contact information. This is the highest ranking law enforcement official within your jurisdiction (e.g., Chief of Police, Sheriff, or equivalent). **For Non-Law Enforcement Agencies:** Enter the highest ranking individual in the applicant agency (e.g., CEO, President, Chairperson, Director) who has the authority to apply for this grant on behalf of the applicant agency. If the grant is awarded, this position would ultimately be responsible for the programmatic implementation of the award.

Title: Director Interim:

First Name: John MI: F Last Name: Quinn Suffix: _____

Agency Name: Iowa Division of Criminal Investigation

Street Address1: 215 East 7th Street

Street Address2: 2nd Floor

City: Des Moines State: IA Zipcode: 50319

Telephone: 5157256017 Fax: 5157256020

B. Government Executive/Financial Official Information:

For Government Agencies: Enter the government executive's name and contact information. This is the highest ranking official within your jurisdiction (e.g., Mayor, City Administrator, Tribal Chairman, or equivalent). **For Non-Government Agencies:** Enter the name and contact information of the financial official who has the authority to apply for this grant on behalf of the applicant agency (e.g., Treasurer). If the grant is awarded, this position would ultimately be responsible for the financial management of the award. Please note that information for non-executive positions (e.g., clerks, trustees, etc.) is not acceptable.

Title: Finance Director Interim:

First Name: David MI: Last Name: Heuton Suffix: _____

Agency Name: Iowa Department of Public Safety

Street Address1: 215 East 7th Street

Street Address2: 4th Floor

City: Des Moines State: IA Zipcode: 50319

Telephone: 5157256251 Fax: 5157256264

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

COPS Office grants must be used to reorient the mission and activities of law enforcement agencies toward the community policing philosophy or enhance their involvement in community policing. The following is the COPS Office definition of community policing that emphasizes the primary components of community partnerships, organizational transformation, and problem solving.

Community policing is a philosophy that promotes organizational strategies, which support the systematic use of partnerships and problemsolving techniques, to proactively address the immediate conditions that give rise to public safety issues, such as crime, social disorder, and fear of crime.

The COPS Office has completed the development of a comprehensive community policing self-assessment tool for use by law enforcement agencies. Based on this work, we have developed the following list of primary sub-elements of community policing. Please refer to the COPS Office web site (www.cops.usdoj.gov) for further information regarding these sub-elements.

Community Partnerships:

Collaborative partnerships between the law enforcement agency and the individuals and organizations they serve to both develop solutions to problems and increase trust in police.

Organizational Transformation:

The alignment of organizational management, structure, personnel and information systems to support community partnerships and proactive problem-solving efforts.

Problem Solving:

The process of engaging in the proactive and systematic examination of identified problems to develop effective responses that are rigorously evaluated.

Other Government Agencies
Community Members/Groups
Non-Profits/Service Providers
Private Businesses
Media

Agency Management

Climate and culture
Leadership
Labor relations
Decision-making
Strategic planning
Policies
Organizational evaluations
Transparency

Organizational Structure

Geographic assignment of officers
Despecialization
Resources and finances
Personnel
Recruitment, hiring and selection
Personnel supervision/evaluations
Training

Information Systems (Technology)

Communication/access to data
Quality and accuracy of data

Scanning: Identifying and prioritizing problems
Analysis: Analyzing problems
Response: Responding to problems
Assessment: Assessing problem-solving initiatives
Using the Crime Triangle to focus on immediate conditions (Victim/Offender/Location)

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

Proposed Community Policing Plan

COPS grants must be used to initiate or enhance community policing activities, either directly by your law enforcement agency, or (for non-law enforcement applicants) in collaboration with law enforcement. Please complete the following questions to describe the types of community policing activities that will result from COPS funding. For each question, answer on behalf of the applicant law enforcement agency, or for non-law enforcement applicants the law enforcement agency(s) with whom you will collaborate. You may find more detailed information about community policing at the COPS Office website <http://www.cops.usdoj.gov/Default.asp?Item=36>.

Community Partnerships

Community partnerships are ongoing collaborative relationships between law enforcement and the individuals and organizations they serve to both develop solutions to problems and increase trust in the police.

My Agency:

P1) Regularly distributes relevant crime and disorder information to community members.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

P2) Routinely seeks input from the community to identify and prioritize neighborhood problems (e.g., through regularly scheduled community meetings, annual community surveys, etc.).

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

P3) Regularly collaborates with local government agencies that deliver public services.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do not you plan to use grant funding to initiate or implement this activity?

YES NO

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

P4) Regularly collaborates with non-profit organizations and/or community groups.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

P5) Regularly collaborates with local businesses.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

P6) Regularly collaborates with informal neighborhood groups and resident associations.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

If no, do you plan to use grant funding to initiate or implement this activity?

b) NO

YES NO

P7) Regularly collaborates with federal government agencies through formal partnerships (e.g., task forces, working groups, etc.)

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

Proposed Community Policing Plan

ProblemSolving

Problemsolving is an analytical process for systematically (1) identifying and prioritizing problems, (2) analyzing problems, (3) responding to problems, and (4) evaluating problem-solving initiatives. Problemsolving involves an agency-wide commitment to go beyond traditional police responses to crime to proactively address a multitude of problems that adversely affect quality of life.

My Agency:

PS1) Routinely incorporates problem-solving principles into patrol work.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES

NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES

NO

PS2) Identifies and prioritizes crime and disorder problems through the routine examination of patterns and trends involving repeat victims, offenders, and locations.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES

NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES

NO

PS3) Routinely explores the underlying factors and conditions that contribute to crime and disorder problems.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES

NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES

NO

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

PS4) Systematically tailors responses to crime and disorder problems to address their underlying conditions.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES

NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES

NO

PS5) Regularly conducts assessments to determine the effectiveness of responses to crime and disorder problems.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES

NO

If no, do you plan to use grant funding to initiate or implement this activity?

b) NO

YES

NO

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

Organizational Transformation

Organizational transformation is the alignment of organizational management, structure, personnel and information systems to support community partnerships and proactive problem-solving efforts.

My Agency:

OT1) Incorporates community policing principles into the agency's mission statement and strategic plan.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

OT2) Practices community policing as an agency-wide effort involving all staff (i.e., not solely housed in a specialized unit).

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

OT3) Incorporates problem-solving and partnership activities into personnel performance evaluations.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

Technology

Technology provides agencies with the tools to communicate more effectively externally with the public and internally with their own staff, and the ability to understand and analyze community problems.

My Agency:

TEC01) Ensures that agency staff have appropriate access to relevant data (e.g., calls for service, incident and arrest data, etc.).

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

TEC02) Uses technology (e.g., crime mapping or statistical software) to analyze and understand problems in the community.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

TEC03) Uses technology (e.g., GIS/GPS for deployment or laptops for field reporting) to improve the agency's overall efficiency and effectiveness.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

TEC04) Provides officers with necessary equipment to better prevent and/or respond to crime and disorder problems.

a) YES

If yes, do you plan to use grant funding to enhance or expand this activity?

YES NO

b) NO

If no, do you plan to use grant funding to initiate or implement this activity?

YES NO

SECTION 6: LAW ENFORCEMENT & COMMUNITY POLICING STRATEGY

Community Policing Plan Narrative

Please describe your agency's implementation plan for this program (if awarded), with specific reference to each of the following elements of community policing: (a) community partnerships and support, including consultation with community groups, private agencies, and/or other public agencies; (b) related governmental and community initiatives that complement your agency's proposed use of COPS funding; and (c) organizational transformation – how your agency will use these funds, if awarded, to reorient its mission to community policing or enhance its involvement in and commitment to community policing. Your organization may be audited or monitored to ensure that it is initiating or enhancing community policing in accordance with this plan. The COPS Office may also use this information to understand the needs of the field, and potentially provide for training, technical assistance, problem solving and community policing implementation tools.

If your organization receives this grant funding, these responses, along with the previous questions, will be considered as your organization's community policing plan. We understand that your community policing needs may change during the life of your grant (if awarded), and minor changes to this plan may be made without prior approval from the COPS Office. We also recognize that this plan may incorporate a broad range of possible community policing strategies and activities, and that your agency may implement particular community policing strategies from the plan on an as-needed basis throughout the life of the grant. If your agency's community policing plan changes significantly, however, you must submit those changes in writing to the COPS Office for approval. Changes are "significant" if they deviate from the range of possible community policing activities identified and approved in this original community policing plan submitted with your application.

In the space provided, please address your agency's implementation plan for this program with specific reference to each of the following elements of community policing:

CP1) To what extent is there community support in your jurisdiction for implementing the proposed grant activities?

- High level of support Moderate support Minimal support

CP2) If awarded, to what extent will the grant activities impact the other components of the criminal justice system in your jurisdiction?

- Potentially decreased burden No change in burden Potentially increased burden

SECTION 7: NEED FOR FEDERAL ASSISTANCE

A. Waivers of the Local Match

Section Not Applicable to 2010 COPS Application Attachment

B. Explanation of Need for Federal Assistance

All applicants are required to address the need for federal assistance. In the space below, please provide a brief explanation of your agency's inability to address your public safety needs and implement this project without federal assistance.

[Please limit your response to a maximum of 3,000 characters.]

The Iowa Department of Public Safety, here forward referred to as DPS, is currently limited in overall resources and applicable funding to achieve a greater degree of successful identification, response, investigation, analysis and prosecution of child sexual predators throughout the State of Iowa.

The DPS currently has an operational Division of Criminal Investigation (DCI) Sex Offender Registry Unit and a DCI Cyber-Crime Unit, both of which are closely affiliated with the Iowa Internet Crimes Against Children Task Force (Iowa ICAC) and the Iowa Fugitive Task Force.

We would prefer to expand and enhance our efforts with local law enforcement agencies and our existing Iowa ICAC affiliate partner agencies to work more with established investigative tools that will result in an increase in arrests and prosecutions. In order to achieve this critical objective, we are in need of federal assistance.

Without the grant funding, we will not be able to provide overtime pay to sworn personnel who would be able to achieve a greater degree of result if overtime was so afforded. Our objective of building on our existing partnerships and expanding partnerships will not be achievable, as it requires funds to provide investigators, examiners and prosecutors with the necessary training and equipment. In addition, we would face potentially insurmountable challenges if we were unable to purchase the proper equipment to conduct successful investigations. This grant is essential for us to purchase the necessary forensic and proactive equipment required to stay current with the evolving technologies and maintain existing capacity.

The federal assistance would certainly allow for the development, enhancement and collaboration of investigative activity to better respond to child sexual predators throughout the State of Iowa in a more efficient and effective manner. As a result, additional investigations could be referred for prosecutorial action.

Based upon the fact that we have a proven and successful model in place, we would like to expand and continue to increase our arrests and prosecutions of sex offenders who prey upon our children in our communities.

SECTION8: CONTINUATION OF PROJECT AFTER FEDERAL FUNDING ENDS

If you are applying for a COPS grant with a post-grant retention plan requirement, please complete A. If you are applying for a COPS grant without a post-grant retention plan requirement, please complete B.

B. Continuation of Project after Federal Funding Ends (for other COPS grants with no retention plan requirement)

Please complete these questions to indicate any plans you may have to continue this program, project, or activity after the conclusion of federal funding

1. Will your agency plan to retain any additional positions awarded under this grant for a minimum of 12 months at the conclusion of federal funding for each position?

YES NO

2. Please identify the source(s) of funding that your agency plans to utilize to cover the costs of retention from the drop-down box listed below: (check all that apply)

- General funds
- Raise bond/tax issue
- Private sources/donations
- Non-federal asset forfeiture funds (subject to approval from the state or local oversight agency)
- Fundraising efforts
- Other (Please provide a brief description of the source(s) of funding not to exceed 350 characters.)

SECTION 10: EXECUTIVE SUMMARY

Please provide a brief summary of how your agency will use this federal funding. Refer to the COPS Application Guide for clarification on specific information to include in your summary, and be sure to provide a description of how you expect this grant to impact public safety and/or crime prevention in your community. The Executive Summary may be used to keep Congress or other executive branch agencies informed on law enforcement strategies to deter crime in your community.

[Please limit your responses to a maximum of 3,000 characters.]

Under this proposal for funding, the DPS / DCI in collaboration with the Iowa Internet Crimes Against Children Task Force (Iowa ICAC) intends to utilize the COPS Child Sexual Predator Program federal funding to expand and enhance the existing efforts in the identification and apprehension of child sexual predators throughout the State of Iowa.

Investigation / Enforcement – The DCI and the Iowa ICAC will incorporate established investigative tools and establish additional partnerships to increase the number of arrests of child sexual predators by providing overtime to ICAC affiliate agencies and DCI assigned personnel. We intend to further existing partnerships with parole and probation offices that specialize in the supervision of child sexual predators. We intend to incorporate our Child Abduction Response initiative to increase the efficiency in efforts to locate children who have been abducted. With this funding, the DCI will provide training and equipment to ICAC affiliates, Sex Offender Unit personnel and parole / probation officers in an attempt to identify and arrest offenders who violate the conditions of their release. Further develop and enhance the collaborative association with our Iowa Internet Crimes Against Children Task Force as it relates to identifying / responding to child sexual predators both reactively and proactively.

Partnership Development - The Iowa ICAC Task Force currently has eighty-seven (87) affiliate agencies who have demonstrated a willingness to assist in ICAC related investigations. The DCI and the Iowa ICAC have an established relationship with the United States Attorney's Offices, through the Project Safe Childhood initiative. The DCI has an established relationship with the United States Marshal's Service (USMS) in the State of Iowa. The DCI Sex Offender Unit has worked with the United States Marshal's Service in the investigation and apprehension of non-compliant predatory offenders.

Training and Education – We will provide funding for investigative techniques and forensic training that will allow our forensic examiners and our Iowa ICAC investigators to perform additional investigations / examinations.

Further develop and expand the proactive community / public outreach initiatives to provide citizens of the State with timely and factual information concerning sex offenders, Internet child sexual predators and recommended safety techniques relative to child sexual predators in the State.

Equipment / Technology – The DCI and the Iowa ICAC will provide equipment to Iowa ICAC affiliate agencies and the DCI Sex Offender Unit to conduct proactive investigations, as well as to probation officials to assist in the monitoring of sexual offenders on the condition of their release.

Adequately equip existing personnel with equipment and technology that will support a more efficient and multidisciplinary operational response to cases involving child sexual predators in all geographic /

SECTION 12: OFFICIAL PARTNER(S) CONTACT INFORMATION

An official "partner" under the grant may be a governmental, private, school district, or other applicable entity that has established a legal, contractual, or other agreement with the applicant for the purpose of supporting and working together for mutual benefits of the grant. Please see the COPS Application Guide for more information on official partners that may be required.

Title:	United States Attorney						
First Name:	Nicholas	MI:	_____	Last Name:	Klinefeldt	Suffix:	_____
Name of Partner Agency (e.g., Smithville High School):	United States Attorney - SDIA						
Type of Partner Agency (e.g., School District):	US Attorney						
Street Address 1:	US Courthouse Annex, Suite 286						
Street Address 2:	110 East Court Avenue						
City:	Des Moines	State:	IA	Zip Code:	50309		
Telephone:	5154739300	Fax:	5152846288				

Title:	United States Attorney						
First Name:	Stephanie	MI:	_____	Last Name:	Rose	Suffix:	_____
Name of Partner Agency (e.g., Smithville High School):	United States Attorney - NDIA						
Type of Partner Agency (e.g., School District):	US Attorney						
Street Address 1:	Hach Building, Suite 400						
Street Address 2:	401 1st Street, SE						
City:	Cedar Rapids	State:	IA	Zip Code:	52401		
Telephone:	3193636333	Fax:	3193631980				

Person Submitting this Application:

By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to identify the partner(s) listed above and act on behalf of the grant applicant entity. I also certify that the above agency (or agencies) is a partner (or are partners) to the grant project as required by the grant and that our agencies mutually agreed to this partnership as related to this grant project prior to submission of this grant application. In addition, I certify that the information provided above regarding the partner(s) is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Please type your name here in place of your signature:

Gerard F. Meyers

SECTION 13: APPLICATION ATTACHMENTS

This section should be used to attach any required or applicable attachments to your grant application (e.g., a Memorandum of Understanding). If the program for which you are applying requires a Memorandum of Understanding (MOU), this document should define the roles and responsibilities of the individuals and partner(s) involved in your proposed project. Please refer to the program-specific Application Guide to determine if an MOU or other application attachments are required. The Guide will also specify if optional attachments are permitted for submission.

File Name	Attachement
Section 13 Project Narrative 2010.doc	CSPPPProjectDescription
USMS SDIA Signed MOU.pdf	MemorandumOfUnderstanding
USMS NDIA Signed MOU.pdf	MemorandumOfUnderstanding
IowaICACTaskForceAffiliateAgencyDirectory 061010.pdf	MemorandumOfUnderstanding
CSPP Program Timeline Goal #1 - Iowa 2010.doc	Other
CSPP Program Timeline Goal #2 - Iowa 2010.doc	Other
CSPP Program Timeline Goal #3 - Iowa 2010.doc	Other
CSPP Program Timeline Goal #4 - Iowa 2010.doc	Other
Section 13 Budget Narrative 2010.doc	BudgetNarrative

SECTION 14: BUDGET DETAIL WORKSHEETS

Instructions for Completing the Budget Detail Worksheets

The following Budget Detail Worksheets are designed to allow all COPS grant and cooperative agreement applicants to use the same budget forms to request funding. Allowable and unallowable costs vary widely and depend upon the type of COPS program. The maximum federal funds that can be requested and the federal/local share breakdown requirements also vary.

Please refer to the program-specific Application Guide to determine the allowable/unallowable costs, the maximum amount of federal funds that can be requested, and the federal/local share requirements for the COPS program for which your agency is applying. To assist you, sample Budget Detail Worksheets are included in each Application Guide.

Please complete each section of the Budget Detail Worksheets applicable to the program for which you are applying (see the program-specific Application Guide for requirements). If you are not requesting anything under a particular budget category, please check the appropriate box in that category indicating that no positions or items are requested.

All calculations should be rounded to the nearest whole dollar. Once the budget for your proposal has been completed, a budget summary page will reflect the total amounts requested in each category, the total project costs, and the total federal and local shares.

If you need assistance in completing the Budget Detail Worksheets, please call the COPS Office Response Center at 800.421.6770.

A. SWORN OFFICER POSITIONS

Instructions: This worksheet will assist your agency in reporting your agency's current entry-level salary and benefits and identifying the total salary and benefits request per officer position for the length of the grant term. Please list the current entry-level base salary and fringe benefits rounded to the nearest whole dollar for one full-time sworn officer position within your agency. Do not include employee contributions. (Please refer to the program-specific Application Guide for information on the length of the grant term for the program under which you are applying.)

Special note regarding sworn officer fringe benefits: For agencies that do not include fringe benefits as part of the base salary costs and typically calculate these separately, the allowable expenditures may be included under Part 1, Section B. Any fringe benefits that are already included as part of the agency's base salary (Part 1, Section A of the Sworn Officer Budget Worksheet) should not also be included in the separate fringe listing (Part 1, Section B).

Please refer to the program-specific Application Guide for information about allowable and unallowable fringe benefits for sworn officer positions requested under the program to which your agency is applying.

B. Base Salary and Fringe Benefits for Civilian/Non-Sworn Personnel

Part 1: Instructions: Please complete the questions below for one non-sworn position salary and benefits package. As applicable per the program -specific Application Guide, you may also be required to project Year 2 and Year 3 salaries.

Position Title	Year 1 Salary		Year 2 Salary		Year 3 Salary	
Program Planner III	<u>\$55,006.00</u>		<u>\$82,508.00</u>		<u>\$0.00</u>	
Description	<u>100 % of time on project</u>		<u>100 % of time on project</u>		<u>100 % of time on project</u>	
Project Coordinator	<u>\$55,006.00</u>		<u>\$82,508.00</u>		<u>\$0.00</u>	
FRINGE BENEFITS	Year 1 Fringe Benefits COST BASE: % OF		Year 2 Fringe Benefits COST BASE: % OF		Year 3 Fringe Benefits COST BASE: % OF	
Social Security Exempt Fixed Rate	<u>\$3,410.00</u>	<u>6.00 %</u>	<u>\$5,115.00</u>	<u>6.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Medicare Exempt Fixed Rate	<u>\$798.00</u>	<u>1.50 %</u>	<u>\$1,196.00</u>	<u>1.40 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Health Insurance	<u>\$7,719.00</u>	<u>14.00 %</u>	<u>\$11,578.00</u>	<u>14.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Life Insurance	<u>\$14.00</u>	<u>0.00 %</u>	<u>\$20.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Vacation Annual Hours <u>80</u>	<u>\$1,706.00</u>	<u>3.10 %</u>	<u>\$1,706.00</u>	<u>2.10 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Sick Leave Annual Hours <u>144</u>	<u>\$3,072.00</u>	<u>5.60 %</u>	<u>\$3,072.00</u>	<u>3.70 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Retirement	<u>\$3,658.00</u>	<u>6.70 %</u>	<u>\$5,487.00</u>	<u>6.70 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Worker's Compensation	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Unemployment Insurance	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Disability Insurance	<u>\$143.00</u>	<u>0.30 %</u>	<u>\$215.00</u>	<u>0.30 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Dental Insurance	<u>\$314.00</u>	<u>0.60 %</u>	<u>\$471.00</u>	<u>0.60 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Benefits Sub-Total Per Year	<u>\$20,834.00</u>		<u>\$28,860.00</u>		<u>\$0.00</u>	
Total (A + B)	<u>\$75,840.00</u>		<u>\$111,368.00</u>		<u>\$0.00</u>	
Total Salary and Benefits for Years 1, 2, and 3	<u>\$187,208.00</u>		X	<u>1</u>	Positions	<u>\$187,208.00</u>

Part 2: Sworn Officer Salary Information

If your agency's second and/or third-year costs for salaries and/or fringe benefits increase after the first year, check the reason(s) why in the space below:

Cost of living adjustment (COLA)

Step raises

Change in benefit costs

Other - please explain briefly:

Part 3: Federal/Local Share Costs (for Hiring Grants) Section Not Applicable to 2010 COPS Application Attachment

B. Base Salary and Fringe Benefits for Civilian/Non-Sworn Personnel

Part 1: Instructions: Please complete the questions below for one non-sworn position salary and benefits package. As applicable per the program -specific Application Guide, you may also be required to project Year 2 and Year 3 salaries.

Position Title	Year 1 Salary		Year 2 Salary		Year 3 Salary	
Forensic Specialist - Criminalist	<u>\$77,884.00</u>		<u>\$0.00</u>		<u>\$0.00</u>	
Description	<u>50 % of time on project</u>		<u>100 % of time on project</u>		<u>100 % of time on project</u>	
Forensic Specialist / Forensic Examiner	<u>\$38,942.00</u>		<u>\$0.00</u>		<u>\$0.00</u>	
FRINGE BENEFITS	Year 1 Fringe Benefits COST BASE: % OF		Year 2 Fringe Benefits COST BASE: % OF		Year 3 Fringe Benefits COST BASE: % OF	
Social Security	<u>\$4,829.00</u>	<u>12.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Exempt Fixed Rate						
Medicare	<u>\$1,129.00</u>	<u>2.90 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Exempt Fixed Rate						
Health Insurance	<u>\$16,933.00</u>	<u>43.50 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Life Insurance	<u>\$16.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Vacation	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Annual Hours	<u>0</u>					
Sick Leave	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Annual Hours	<u>0</u>					
Retirement	<u>\$5,179.00</u>	<u>13.30 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Worker's Compensation	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Unemployment Insurance	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Dental Insurance	<u>\$323.00</u>	<u>0.80 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Disability Insurance	<u>\$186.00</u>	<u>0.50 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>	<u>\$0.00</u>	<u>0.00 %</u>
Benefits Sub-Total Per Year	<u>\$28,595.00</u>		<u>\$0.00</u>		<u>\$0.00</u>	
Total (A + B)	<u>\$67,537.00</u>		<u>\$0.00</u>		<u>\$0.00</u>	
Total Salary and Benefits for Years 1, 2, and 3		<u>\$67,537.00</u>	X	<u>1</u>	Positions	<u>\$67,537.00</u>

Part 2: Sworn Officer Salary Information

If your agency's second and/or third-year costs for salaries and/or fringe benefits increase after the first year, check the reason(s) why in the space below:

Cost of living adjustment (COLA)

Step raises

Change in benefit costs

Other - please explain briefly:

Part 3: Federal/Local Share Costs (for Hiring Grants) Section Not Applicable to 2010 COPS Application Attachment

C. EQUIPMENT/TECHNOLOGY

Instructions:List non-expendable items that are to be purchased. **Provide a specific description for each item and explain how the item supports the project goals and objectives as outlined in your application.** Non-expendable equipment is tangible property (e.g., technology) having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit. Expendable items should be included either in the “**SUPPLIES**” or “**OTHER**” categories. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially for high-price items and those subject to rapid technical advances. Rented or leased equipment costs should be listed in the “**CONTRACTS / CONSULTANTS**” category.

Please be advised that, to the greatest extent practical, all equipment and products purchased with these funds must be American-made.

For agencies purchasing items related to enhanced communications systems, the COPS Office expects and encourages that, wherever feasible, such voice or data communications equipment should be incorporated into an intra- or interjurisdictional strategy for communications interoperability among federal, state, and local law enforcement agencies.

See the program-specific Application Guide for a list of allowable/unallowable costs for this program. Agencies are encouraged to limit their requests to the lines shown below and group similar items together so that all items are accounted for on the budget worksheet for each category. However, if your agency requires more lines please check the available box.

Item Name	Computation (# of Items/Units X Unit Cost)	Per Item SubTotal
HP Undercover Laptop Computers w/software	(20 X 3000)	\$60,000.00
EnCase v.6 Software Licenses	(3 X 2850)	\$8,550.00
FRED Forensic Computer Workstations	(2 X 12000)	\$24,000.00
Cellebrite Licensing Service Package	(2 X 999)	\$1,998.00
Triage / Preview Kits	(30 X 500)	\$15,000.00
		\$109,548.00

D. SUPPLIES

Instructions: List items by type (office supplies; postage; training materials; copying paper; books; hand-held tape recorders; etc). **Provide a specific description for each item and explain how it supports the project goals and objectives outlined in your application.** Generally, supplies include any materials that are expendable or consumed during the course of the project. See the program-specific Application Guide for a list of allowable/unallowable costs for this program. Agencies are encouraged to limit their requests to the lines shown below and group similar items together so that all items are accounted for on the budget worksheet for each category. However, if your agency requires more than lines please check the available box.

Item Name	Computation (# of Items/Units X Unit Cost)	Per Item SubTotal
Handout Brochures (Child Sexual Predator Community Outreach)	(6000 X 1)	\$6,000.00
		\$6,000.00

E. TRAVEL/TRAINING

Instructions: Itemize grant-related travel expenses of grantee personnel (excluding consultants, whose expenses are listed in Section F) by event (e.g., mandatory training, staff to training, field interviews, advisory group meetings). Identify the location of travel whenever possible, and show the number of staff expected to attend each event. Training fees, transportation, lodging and per diem rates for trainees should be listed as separate travel items. Grantee travel costs specific to the grant project may be based on the grantee's written travel policy, assuming the costs are reasonable. Grantees without a written travel policy must follow the established federal rates (found at www.gsa.gov) for lodging, meals, and per diem. For all grantees (with or without a written travel policy), airfare travel costs must be one of the following: the lowest discount commercial airfare, standard coach airfare, or the federal government contract airfare (if authorized and available). Note: Any local training costs (within a 50-mile radius) should be listed under Section G ("Other Costs").

See the program-specific Application Guide for a list of allowable/unallowable costs for this program. Agencies are encouraged to limit their requests to the lines shown below and group similar items together so that all items are accounted for on the budget worksheet for each category. However, if your agency requires more lines please check the available box.

Event Title and Location	Event Costs	Number of Staff	Per Event Subtotal
CSPP "Kickoff" Conference	1900	10	\$19,000.00
Regional Sex Offender Registry Annual Conference	1900	6	\$11,400.00
Annual Crimes Against Children Conference	1900	20	\$38,000.00
SMART / SORNA Conference	1900	6	\$11,400.00
National SOR Training Conference	1900	6	\$11,400.00
			\$91,200.00

F. CONTRACTS/CONSULTANTS

Instructions: See the program-specific Application Guide for a list of allowable/unallowable costs for the particular program to which you are applying.

1. Contracts: Provide a cost estimate for the product or service to be procured by contract. Applicants are encouraged to promote free and open competition in awarding contracts. If awarded, requests for sole source procurements of equipment, technology, or services in excess of \$100,000 must be submitted to the COPS Office for prior approval.

(See Application Guide for more information on the required submission.)

Contract Name	Per Contract Subtotal

2. Consultant Fees: For each consultant enter the name (if known), service to be provided, hourly or daily fee (based upon an 8-hour day), and estimated length of time on the project. Unless otherwise approved by the COPS Office, approved consultant rates will be based on the salary a consultant receives from his or her primary employer. Consultant fees in excess of \$550 per day require additional written justification and must be pre-approved in writing by the COPS Office if the consultant is hired via a noncompetitive bidding process.

Consultant Name/Title	Service Provided	Computation (Cost X # Days or # Hours)	Per Consultant Fee Subtotal

3. Consultant Travel: List all travel-related expenses to be paid from the grant to the individual consultants (e.g., transportation, meals, lodging) separate from their consultant fees.

Consultant Name/ Event Title	Event Costs	Number of Staff	Per Consultant Travel Subtotal

4. Consultant Expenses: List all travel-related expenses to be paid from the grant to the individual consultants separate from their consultant fees and travel expenses (e.g., computer equipment and office supplies).

Event Title and Location	Event Costs	Number of Staff	Per Event Subtotal

G. OTHER COSTS

Instructions: List other requested items that will support the project goals and objectives as outlined in your application. **Provide a specific description for each item and explain how the item supports the project goals and objectives as outlined in your application.** Please be advised that, to the greatest extent practical, all equipment and products purchased with these funds must be American-made. See the program-specific Application Guide for a list of allowable/unallowable costs for this program. Agencies are encouraged to limit their requests to the lines shown below and group similar items together so that all items are accounted for on the budget worksheet for each category. However, if your agency requires more lines please check the available box.

Item Name	Computation (# of Items/Units X Unit Cost)	Per Item SubTotal
CSPP Personnel Overtime	(642 X 49)	\$31,458.00
Undercover Internet Air Card Subscriptions	(5 X 1084)	\$5,420.00
CSPP Community Outreach Pens	(300 X 1)	\$300.00
CSPP Community Outreach Challenge Coins	(1800 X 2)	\$3,600.00
CSPP Community Outreach Jr. Portfolios	(200 X 7)	\$1,400.00
CSPP Community Outreach Mugs	(200 X 5)	\$1,000.00
Annual Crimes Against Children Conference Registration	(10 X 600)	\$6,000.00
Annual Sex Offender Registry Regional Conference Registration	(6 X 500)	\$3,000.00
National SOR Conference Registration	(3 X 200)	\$600.00
		\$52,778.00

H. INDIRECT COSTS

Instructions: Indirect costs are allowed under a **very limited** number of specialized COPS programs. Please see the program-specific Application Guide for a list of allowable/unallowable costs for the particular program to which you are applying.

If indirect costs are requested, a copy of the agency's fully-executed, negotiated Federal Rate Approval Agreement must be attached to this application.

Indirect Cost Description	Approved Indirect Cost Rate	Per Indirect Cost Subtotal

BUDGET SUMMARY

Instructions: Please review the category totals and the total project costs below. If the category totals and project amounts shown are correct, please continue with the submission of your application. Should you need to make revisions to a budget category, click the "Edit" button for that category. Note: Agencies applying for Secure Our Schools (SOS) must enter a "Total Local Share Amount" percentage of 50% in the designated area below. Applicants for all other Fiscal Year 2010 COPS Grants are not required to provide a local match.

Budget Category	Category Total
A Sworn Officer Positions	\$0.00
B Civilian/Non-Sworn Personnel	\$240,447.00
C Equipment/Technology	\$109,548.00
D Supplies	\$6,000.00
E Travel/Training	\$91,200.00
F Contracts/Consultants	\$0.00
G Other Costs	\$52,778.00
H Indirect Costs	\$0.00
Total Project Amount	\$499,973.00
Total Federal Share Amount	\$499,973.00
Total Local Share Amount	\$0.00

Contact Information for Budget Questions

Please provide contact information of the financial official that the COPS Office may contact with questions related to your budget submission.

Authorized Official's Typed Name: Gerard Meyers

Title: Special Agent in Charge

Phone: 5159657402

Fax: 5159657401

SECTION 15A: ASSURANCES

Several provisions of federal law and policy apply to all grant programs. The Office of Community Oriented Policing Services needs to secure your assurance that the applicant will comply with these provisions. If you would like further information about any of these assurances, please contact your state's COPS Grant Program Specialist at 800.421.6770.

By the applicant's authorized representative's signature, the applicant assures that it will comply with all legal and administrative requirements that govern the applicant for acceptance and use of federal grant funds. In particular, the applicant assures us that:

1. It has been legally and officially authorized by the appropriate governing body (for example, mayor or city council) to apply for this grant and that the persons signing the application and these assurances on its behalf are authorized to do so and to act on its behalf with respect to any issues that may arise during processing of this application.

2. It will comply with the provisions of federal law, which limit certain political activities of grantee employees whose principal employment is in connection with an activity financed in whole or in part with this grant. These restrictions are set forth in 5 U.S.C. §1501, et seq.

3. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act, if applicable.

4. It will establish safeguards, if it has not done so already, to prohibit employees from using their positions for a purpose that is, or gives the appearance of being, motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business or other ties.

5. It will give the Department of Justice or the Comptroller General access to and the right to examine records and documents related to the grant.

6. It will comply with all requirements imposed by the Department of Justice as a condition or administrative requirement of the grant, including but not limited to: the requirements of 28 CFR Part 66 and 28 CFR Part 70 (governing administrative requirements for grants and cooperative agreements); 2 CFR Part 225 (OMB Circular A-87),

2 CFR 220 (OMB Circular A-21), 2 CFR Part 230 (OMB Circular A-122) and 48 CFR Part 31.000, et seq. (FAR 31) (governing cost principles); OMB Circular A-133 (governing audits) and other applicable OMB circulars; the applicable provisions of the Omnibus Crime Control and Safe Streets Act of 1968, as amended; 28 CFR Part 38.1; the current edition of the COPS Grant Monitoring Standards and Guidelines; the applicable COPS Grant Owner's Manuals; and with all other applicable program requirements, laws, orders, regulations, or circulars. 7. If applicable, it will, to the extent practicable and consistent with applicable law, seek, recruit and hire qualified members of racial and ethnic minority groups and qualified women in order to further effective law enforcement by increasing their ranks within the sworn positions in the agency.

8. It will not, on the ground of race, color, religion, national origin, gender, disability or age, unlawfully exclude any person from participation in, deny the benefits of or employment to any person, or subject any person to discrimination in connection with any programs or activities funded in whole or in part with federal funds. These civil rights requirements are found in the non-discrimination provisions of the Omnibus Crime Control and Safe Streets Act of 1968, as amended (42 U.S.C. § 3789d); Title VI of the Civil Rights Act of 1964, as amended (42 U.S.C. § 2000d); the Indian Civil Rights Act (25 U.S.C. §§ 1301-1303); Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794); Title II, Subtitle A of the Americans with Disabilities Act (ADA) (42 U.S.C. § 12101, et seq.); the Age Discrimination Act of 1975 (42 U.S.C. § 6101, et seq.); and Department of Justice Non-Discrimination Regulations contained in Title 28, Parts 35 and 42 (subparts C, D, E, G and I) of the Code of Federal Regulations.

A. In the event that any court or administrative agency makes a finding of discrimination on grounds of race, color, religion, national origin, gender, disability or age against the applicant after a due process hearing, it agrees to forward a copy of the finding to the Office for Civil Rights, Office of Justice Programs, 810 7th Street, NW, Washington, D.C. 20531.

B. If your organization has received an award for \$500,000 or more and has 50 or more employees, then it has to prepare an Equal Employment Opportunity Plan (EEOP) and submit it to the Office for Civil Rights ("OCR"), Office of Justice Programs, 810 7th Street, N.W., Washington, DC 20531, for review within 60 days of the notification of the award. If your organization received an award between \$25,000 and \$500,000 and has 50 or more employees, your organization still has to prepare an EEOP, but it does not have to submit the EEOP to OCR for review. Instead, your organization has to maintain the EEOP on file and make it available for review on request. In addition, your organization has to complete Section B of the Certification Form and return it to OCR. If your organization received an award for less than \$25,000; or if your organization has less than 50 employees, regardless of the amount of the award; or if your organization is a medical institution, educational institution, nonprofit organization or Indian tribe, then your organization is exempt from the EEOP requirement. However, your organization must complete Section A of the Certification Form and return it to OCR.

SECTION 15A: ASSURANCES

9. Pursuant to Department of Justice guidelines (June 18, 2002 Federal Register (Volume 67, Number 117, pages 41455-41472)), under Title VI of the Civil Rights Act of 1964, it will ensure meaningful access to its programs and activities by persons with limited English proficiency.

10. It will ensure that any facilities under its ownership, lease or supervision which shall be utilized in the accomplishment of the project are not listed on the Environmental Protection Agency's (EPA) list of Violating Facilities and that it will notify us if advised by the EPA that a facility to be used in this grant is under consideration for such listing by the EPA.

11. If the applicant's state has established a review and comment procedure under Executive Order 12372 and has selected this program for review, it has made this application available for review by the state Single Point of Contact.

12. It will submit all surveys, interview protocols, and other information collections to the COPS Office for submission to the Office of Management and Budget for clearance under the Paperwork Reduction Act of 1995 if required.

13. It will comply with the Human Subjects Research Risk Protections requirements of 28 CFR Part 46 if any part of the funded project contains non-exempt research or statistical activities which involve human subjects and also with 28 CFR Part 22, requiring the safeguarding of individually identifiable information collected from research participants.

14. Pursuant to Executive Order 13043, it will enforce on-the-job seat belt policies and programs for employees when operating agency-owned, rented or personally-owned vehicles.

15. It will not use COPS funds to supplant (replace) state, local, or Bureau of Indian Affairs funds that otherwise would be made available for the purposes of this grant, as applicable.

16. If the awarded grant contains a retention requirement, it will retain the increased officer staffing level and/or the increased officer redeployment level, as applicable, with state or local funds for a minimum of 12 months following expiration of the grant period.

17. It will not use any federal funding directly or indirectly to influence in any manner a Member of Congress, a jurisdiction, or an official of any government, to favor, adopt, or oppose, by vote or otherwise, any legislation, law ratification, policy or appropriation whether before or after the introduction of any bill, measure, or resolution proposing such legislation, law, ratification, policy or appropriation as set forth in the Anti-Lobby Act, 18 U.S.C. 1913.

18. In the event that a portion of grant reimbursements are seized to pay off delinquent federal debts through the Treasury Offset Program or other debt collection process, it agrees to increase the non-federal share (or, if the awarded grant does not contain a cost sharing requirement, contribute a non-federal share) equal to the amount seized in order to fully implement the grant project.

False statements or claims made in connection with COPS grants (including cooperative agreements) may result in fines, imprisonment, disbarment from participating in federal grants or contracts, and/or any other remedy available by law.

I certify that the assurances provided are true and accurate to the best of my knowledge.

Elections or other selections of new officials will not relieve the grantee entity of its obligations under this grant.

Gerard F. Meyers

6/29/2010

Signature of Law Enforcement Executive/Agency Executive

Date

Eugene T. Meyer

6/29/2010

Signature of Government Executive/Financial Official

Date

SECTION 15B: CERTIFICATIONS

Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; Drug-Free Workplace Requirements; Coordination with Affected Agencies.

Although the Department of Justice has made every effort to simplify the application process, other provisions of federal law require us to seek your agency's certification regarding certain matters. Applicants should read the regulations cited below and the instructions for certification included in the regulations to understand the requirements and whether they apply to a particular applicant. Signing this form complies with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying," 2 CFR Part 2867, "Nonprocurement Debarment and Suspension" 28 CFR Part 83 Government-Wide Requirements for Drug-Free Workplace (Grants)," and the coordination requirements of the Public Safety Partnership and Community Policing Act of 1994. The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered grant.

1. Lobbying

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

A. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the making of any federal grant; the entering into of any cooperative agreement; and the extension, continuation, renewal, amendment or modification of any federal grant or cooperative agreement;

B. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions; and

C. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

2. Debarment, Suspension and Other Responsibility Matters (DirectRecipient)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 2 CFR Part 2867, for prospective participants in primary covered transactions, as defined at 2 CFR Part 2867.20(a)-

A. The applicant certifies that it and its principals:

- (i) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department or agency;
- (ii) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) or private agreement or transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion or receiving stolen property, making false claims, or obstruction of justice, or commission of

any offense indicating a lack of business integrity or business honesty that seriously and directly affects your present responsibility;

(iii) Are not presently indicted for or otherwise criminally or civilly

charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (A)

(ii)

of this certification; and

(iv) Have not within a three-year period preceding this application had one or more public transactions (federal, state or local) terminated for cause or default.

B. Where the applicant is unable to certify to any of the statements in this Certifications form, he or she shall attach an explanation to this application regarding the particular statement that cannot be certified. Please check here ___ if an explanation is attached to this application. Please note that the applicant is still required to sign the Certifications form to certify to all the other applicable statements.

3. If applicable, an applicant who receives an award in excess of \$5,000,000 certifies that, to the best of its knowledge and belief, the applicant has filed all Federal tax returns required during the three years preceding the certification, has not been convicted of a criminal offense under the Internal Revenue Code of 1986, and has not, more than 90 days prior to certification, been notified of any unpaid Federal tax assessment for which the liability remains unsatisfied, unless the assessment is the subject of an installment agreement or offer in compromise that has been approved by the Internal Revenue Service and is not in default, or the assessment is the subject of a non-frivolous administrative or judicial proceeding .

4. Drug-Free Workplace (Grantees Other Than Individuals)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 83, for grantees/recipients, as defined at 28 CFR Part 83.660 -

A. The applicant certifies that it will, or will continue to, provide a drug- free workplace by:

(i) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(ii) Establishing an on-going drug-free awareness program to inform employees about -

(a) The dangers of drug abuse in the workplace;

(b) The grantee's policy of maintaining a drug-free workplace;

(c) Any available drug counseling, rehabilitation and employee assistance programs; and

(d) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

SECTION 15B: CERTIFICATIONS

(iii) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (i);
(iv) Notifying the employee in the statement required by paragraph (i) that, as a condition of employment under the grant, the employee will -

(a) Abide by the terms of the statement; and
(b) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(v) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (iv)(b) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: COPS Office, 1100 Vermont Ave., NW, Washington, D.C. 20530. Notice shall include the identification number(s) of each affected grant;

(vi) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (iv)(b), with respect to any employee who is so convicted -

(a) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
(b) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such

purposes by a federal, state or local health, law enforcement or other appropriate agency;
(vii) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (i), (ii), (iii), (iv), (v), and (vi).

Grantee Agency Name and Address:

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of performance (street address, city, county, state, zip code)

215 East 7th Street
Des Moines, Iowa
50319

Check if there are workplaces on file that are not identified here

5. Coordination

The Public Safety Partnership and Community Policing Act of 1994

requires applicants to certify that there has been appropriate coordination with all agencies that may be affected by the applicant's grant proposal if approved. Affected agencies may include, among others, the Office of the United States Attorney, state or local prosecutors, or correctional agencies. The applicant certifies that there has been appropriate coordination with all affected agencies.

Grantee Agency Name and Address:

Iowa Division of Criminal Investigation 215 East 7th Street 2nd Floor Des Moines, IA 50319

False statements or claims made in connection with COPS grants (including cooperative agreements) may result in fines, imprisonment, disbarment from participating in federal grants or contracts, and/or any other remedy available by law. I certify that the assurances provided are true and accurate to the best of my knowledge. Elections or other selections of new officials will not relieve the grantee entity of its obligations under this grant.

By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Gerard F. Meyers

6/29/2010

Typed Name of Law Enforcement Executive
(or Official with Programmatic Authority, as applicable)

Date

By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Eugene T. Meyer

6/29/2010

Typed Name of Government Executive
(or Official with Programmatic Authority, as applicable)

Date

SECTION 16: Disclosure of Lobbying Activities

Instructions for Completion of SF-LLL, Disclosure of Lobbying Activities

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District number, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans and loan commitment.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFPD E-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting registrant identified in item 4 to influence the covered Federal action.
(b) Enter the full name(s) of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title and telephone number.
Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352.

Not Applicable

If not applicable, then entire form, including signature area is grayed-out

1. Type of Federal Action:

2. Status of Federal Action: 3. Report Type

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> contract | <input type="checkbox"/> loan | <input checked="" type="checkbox"/> bid/offer/application | <input checked="" type="checkbox"/> initial filing |
| <input checked="" type="checkbox"/> grant | <input type="checkbox"/> loan guarantee | <input type="checkbox"/> initial award | <input type="checkbox"/> material change |
| <input type="checkbox"/> cooperative agreement | <input type="checkbox"/> loan insurance | <input type="checkbox"/> post-award | |
- For Material Change Only:*
Year: Quarter:
Date of Report:

4. Name and Address of Reporting

Entity: Prime

Congressional District (number), if known:

5. If Reporting Entity in No. 4 is Subawardee, Enter

Name and Address of Prime:

Congressional District (number), if known:

6. Federal Department/Agency:

USDOJCOPS

7. Federal Program Name/Description:

CFDA Number, if applicable: 16.710

8. Federal Action Number, if known:

9. Award Amount, if known:

\$0.00

10. a. Name and Address of Lobbying

(if individual, last name, first name, MI):

10. b. Individuals Performing Services

(including address if different from No.1 0a) (last name, first name, MI):

Registrant

11. Information requested through this form is authorized by Title 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Typed Name: Gerard F. Meyers

Title: Special Agent in Charge

Phone: 5159657402

Date: 6/29/2010

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SECTION 17: CERTIFICATION OF REVIEW AND REPRESENTATION OF COMPLIANCE WITH REQUIREMENTS

Certification of Review of 28 C.F.R. Part 23/Criminal Intelligence Systems

Please review the COPS Application Guide: Legal Requirements Section for additional information.

Please check one of the following, as applicable to your agency's intended use of this grant:

- No, my agency will not use these COPS grant funds (if awarded) to operate an interjurisdictional criminal intelligence system.
- Yes, my agency will use these COPS grant funds (if awarded) to operate an interjurisdictional criminal intelligence system. By signing below, we assure that our agency will comply with the requirements of 28 C.F.R. Part 23.

The signatures of the Law Enforcement Executive/Program Official and Government Executive/Financial Official, and any applicable program partners on the Certification of Review and Representation of Compliance with Requirements:

- 1) Assures the COPS Office that the applicant will comply with all legal, administrative, and programmatic applicant for acceptance and use of federal funds as outlined in the applicable COPS Application Guide; AND
- 2) Attests to the accuracy of the information submitted with this application (including the Budget Detail Worksheets).

The signatures on this application must be made by the actual executives named on this application unless there is an officially documented authorization for a delegated signature. If your jurisdiction has such an official document, it must be attached to this application. Applications with missing, incomplete, or inaccurate signatories or responses may not be considered for funding.

Signatures shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered grant.

Please be advised that a hold may be placed on this application if it is deemed that the applicant agency is not in compliance with federal civil rights laws, and/or is not cooperating with an ongoing federal civil rights investigation, and/or is not cooperating with a COPS Office compliance investigation concerning a current grant award.

Person Submitting this Application

- By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government.

Please type your name here in place of your signature: Gerard F. Meyers

SECTION 17: CERTIFICATION OF REVIEW AND REPRESENTATION OF COMPLIANCE WITH REQUIREMENTS

Law Enforcement Executive/Agency Executive

By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government

Please type your name here in place of your signature:

Eugene T. Meyer

Government Executive/Financial Official

By clicking this box and typing my name below, I certify that I have been legally and officially authorized by the appropriate governing body to submit this application and act on behalf of the grant applicant entity. I certify that I have read, understand, and agree, if awarded, to abide by all of the applicable grant compliance terms and conditions as outlined in the COPS Application Guide, the COPS Grant Owner's Manual, assurances, certifications and all other applicable program regulations, laws, orders, or circulars. In addition, I certify that the information provided on this form and any attached forms is true and accurate to the best of my knowledge. I understand that false statements or claims made in connection with COPS programs may result in fines, imprisonment, debarment from participating in federal grants, cooperative agreements, or contracts, and/or any other remedy available by law to the federal government

Please type your name here in place of your signature:

Gerard F. Meyers
