

**MARIJUANA SUPPRESSION PROGRAM
FISCAL YEAR 2011/12 PROGRESS REPORT**

California Emergency Management Agency (Cal EMA), Public Safety and Victim Services Programs, 3650 Schriever Avenue, Mather, CA 95655-4203

Following the instructions, please provide the information as indicated. **Do not provide any confidential information, as this is a public document.** Retain a copy for your records, email a copy of the completed report to your Program Specialist, and mail the signed original report to the above address: Attention: Drug Enforcement Unit

PROJECT TITLE	GRANT AWARD #
RECIPIENT	GRANT PERIOD
ADDRESS	REPORT PERIOD
REPORT PREPARED BY	TITLE
PHONE	EMAIL

PROGRESS REPORT:

- 1st Quarter/ 2nd Quarter/
3rd Quarter/ 4th Quarter

DUE DATE:

August 1, 2012

NARRATIVE AND STATISTICAL REPORT COVERING:

- 1st quarter of grant period (07/01/11-09/30/11) &
2nd quarter of grant period (10/01/11-12/31/11)
3rd quarter of grant period (01/01/12-03/31/12) &
4th quarter of grant period (04/01/12-06/30/12)

BUDGET

YES NO **Are grant funds being expended in accordance with the Grant Award Agreement? (If not, please explain)**

- | | | |
|---------------------------------------|----|--|
| 1. Total Grant Award: | \$ | |
| 2. Total funds expended to date: | \$ | |
| 3. Total encumbered but not paid for: | \$ | |
| 4. Total Grant balance: | \$ | |

I certify that this report is accurate and in accordance with Cal EMA policies and procedures.

SIGNATURE- PROJECT DIRECTOR

TITLE

DATE

(For Cal EMA use only)

Report accepted as submitted.
(see comments) _____

Report NOT accepted as submitted.
(see comments) _____

SIGNATURE- PROGRAM SPECIALIST

DATE

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PERSONNEL

Positions authorized in Grant Award Agreement (Name/Agency/Title/% Grant-Funded must be listed exactly as on the budget pages). Please attach additional pages as needed:

Name of Staff/Name of Agency	Title	% Grant Funded
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		

- YES NO Have all grant-funded positions been filled?
If NO, please attach additional pages as needed.
- YES NO Have any of the job duties, as detailed in the Grant Award Agreement, changed?
If YES, please attach additional pages as needed.
- YES NO Are there any personnel issues which may affect the project objectives and activities?
If YES, please attach additional pages as needed.

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EQUIPMENT

Equipment initially authorized in the Grant Award Agreement should be ordered within the first four months so that it can be placed in service during the grant period (Grant Recipient Handbook Section 2320). If your equipment purchases exceed the space below, please attach additional pages. Please detail any problems encountered in ordering/receiving grant equipment.

YES NO N/A If the Grant Award allows for equipment purchases, has any equipment been purchased? (If YES, please detail below)

Equipment	Cost	Date Ordered/Received
1.		/
2.		/
3.		/
4.		/
5.		/
6.		/
7.		/
8.		/
9.		/
10.		/
11.		/
12.		/
13.		/
14.		/

TECHNICAL ASSISTANCE

To assist the project in appropriate implementation of the grant award (programmatic and/or administrative), technical assistance can be provided by your Program Specialist. **Projects may request Technical Assistance at any time during the grant year.**

YES NO Please indicate if technical assistance is needed and why:

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NARRATIVE (Instructions)

The progress report is the tool used to communicate to Cal EMA on the status of the project during the specified timeframes. Please provide a detailed narrative covering, at a minimum, the following areas for the appropriate reporting period. The information provided on progress reports may be shared with other agencies. Please use as many pages as necessary.

Do not provide any confidential information as this is a public document.

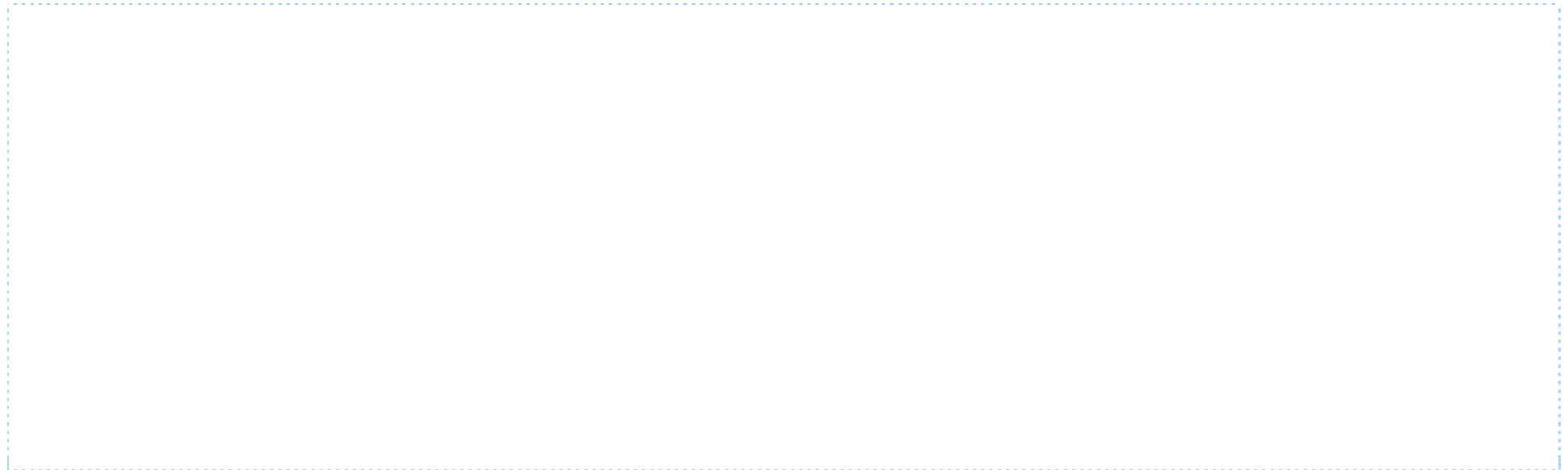
1st, 2nd, 3rd & 4th QUARTER PROGRESS REPORT (DUE: AUGUST 1, 2012)

- Discuss the impact the project has had on the marijuana problem identified in the project's problem statement according to the Grant Award Agreement.
- For each component, summarize the activities and accomplishments for the entire grant period (if available, attach press releases and news articles).
- Discuss the source documentation designed to track the project's statistical information (i.e., each components' tracking format, statistical summary forms, etc.).
- Describe the progress the project has had in meeting the expected objectives.
- **Discuss, in detail, any significant accomplishments during the 1st through 4th quarters (if available, attach pictures, press releases, and news articles showcasing your accomplishments). Please be specific, as this information may be used to compile reports to the legislature.**

STATISTICAL REPORTING FORMS

Attached are statistical reporting forms for each component of the project. Please use these forms to compile statistical data for each quarter. The data must reflect the activities of all personnel (grant funded and non-grant funded) assigned to the project. All data must be supported by source documentation which is to be retained by the grant recipient and made available to Cal EMA upon request. Each statistical report must include the data from any/all previous reports. Compile all quarterly figures in the "total to date" column. Attach additional pages to further clarify the data.

PROJECT NARRATIVE (please attach additional pages as needed):



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LAW ENFORCEMENT:

	<i>1st Quarter</i>	<i>2nd Quarter</i>	<i>3rd Quarter</i>	<i>4th Quarter</i>	<i>Total to Date</i>
1. Number of marijuana sites detected:	_____	_____	_____	_____	_____
a. indoor:	_____	_____	_____	_____	_____
b. outdoor:	_____	_____	_____	_____	_____
NOTE: a+b must equal #1 above					
2. Total number of sites eradicated:	_____	_____	_____	_____	_____
a. indoor:	_____	_____	_____	_____	_____
b. outdoor:	_____	_____	_____	_____	_____
NOTE: a+b must equal #2 above					
3. Total number of plants confiscated:	_____	_____	_____	_____	_____
a. indoor:	_____	_____	_____	_____	_____
b. outdoor:	_____	_____	_____	_____	_____
NOTE: a+b must equal #3 above					
4. Processed marijuana in lbs confiscated:	_____	_____	_____	_____	_____
5. List the quantity and type of other drugs seized during the reporting period:	_____	_____	_____	_____	_____
a. Cocaine (in kg):	_____	_____	_____	_____	_____
b. Heroin (in kg):	_____	_____	_____	_____	_____
c. Methamphetamine powder (in kg):	_____	_____	_____	_____	_____
d. Methamphetamine ice (in kg):	_____	_____	_____	_____	_____
e. Other: _____	_____	_____	_____	_____	_____
f. Other: _____	_____	_____	_____	_____	_____
g. Other: _____	_____	_____	_____	_____	_____
NOTE: a+b+c+d+e+f+g must equal #5 above					
6. Number of investigations initiated:	_____	_____	_____	_____	_____
7. Number of investigations resulting in arrest:	_____	_____	_____	_____	_____
8. Number of investigations completed:	_____	_____	_____	_____	_____
9. Number of suspects arrested:	_____	_____	_____	_____	_____
10. Total number of firearms seized:	_____	_____	_____	_____	_____
11. Total number of weapons seized (excluding firearms):	_____	_____	_____	_____	_____
12. Number of search warrants issued:	_____	_____	_____	_____	_____
13. Number of cases referred for prosecution:	_____	_____	_____	_____	_____
14. Number of investigations resulting in assets seized:	_____	_____	_____	_____	_____

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	<i>1st Quarter</i>	<i>2nd Quarter</i>	<i>3rd Quarter</i>	<i>4th Quarter</i>	<i>Total to Date</i>
15. Dollar amount of cash and property seized:	_____	_____	_____	_____	_____
a. Amount of cash seized:	_____	_____	_____	_____	_____
b. Estimated dollar value of real property seized:	_____	_____	_____	_____	_____
c. Estimated dollar value of personal property seized:	_____	_____	_____	_____	_____
NOTE: a+b+c must equal #15 above					
16. Total number of training hours received by task force:	_____	_____	_____	_____	_____
Describe the type of training received and from whom received in the project narrative section of this report.					
17. Total number of educational forums that were presented:	_____	_____	_____	_____	_____
Describe the type of educational forums presented and to whom in the project narrative section of this report.					
18. Total number of investigations initiated which resulted in finding children living in or exposed to illicit drug environments:	_____	_____	_____	_____	_____
19. Total number of children removed jointly with Child Protective Services (CPS) from illicit drug environments as a result of an investigation:	_____	_____	_____	_____	_____
20. Total number of children removed without CPS involvement from illicit drug environments as a result of an investigation:	_____	_____	_____	_____	_____
21. Total number of children who were provided services:	_____	_____	_____	_____	_____
a. Medical (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
b. Dental (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
c. Educational (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
d. Counseling (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
NOTE: a+b+c+d should <u>NOT</u> equal #21 above as one child can receive several services					
22. Total number of children drug tested for exposure to drugs/chemicals (if unknown, write "unk," not 0):	_____	_____	_____	_____	_____
a. Tested by hair (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
b. Tested by urine (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
c. Tested by both (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
23. Total number of children detained, pursuant to California Welfare and Institutions (W&I) Code, Section 300 (see Part III of RFA)	_____	_____	_____	_____	_____

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	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Total to Date
24. Total number of children testing positive for controlled substances:	_____	_____	_____	_____	_____
a. Meth	_____	_____	_____	_____	_____
b. Cocaine	_____	_____	_____	_____	_____
c. Heroin	_____	_____	_____	_____	_____
d. Marijuana	_____	_____	_____	_____	_____
e. Other	_____	_____	_____	_____	_____
f. Unknown	_____	_____	_____	_____	_____
NOTE: a+b+c+d+e may <u>NOT</u> equal #24 above as one child may test positive for more than one controlled substance					
25. Total number of defendants with arrests referred for:	_____	_____	_____	_____	_____
a. 273a PC:	_____	_____	_____	_____	_____
b. 273b PC:	_____	_____	_____	_____	_____
NOTE: a+b must equal #25 above					

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PROSECUTION COMPONENT:

	<i>1st Quarter</i>	<i>2nd Quarter</i>	<i>3rd Quarter</i>	<i>4th Quarter</i>	<i>Total to Date</i>
1. Number of cases referred from task force for prosecution:	_____	_____	_____	_____	_____
2. Number of defendants convicted of any charge:	_____	_____	_____	_____	_____
3. Method of conviction:	_____	_____	_____	_____	_____
a. Number of convictions by trial:	_____	_____	_____	_____	_____
b. Number of convictions by plea:	_____	_____	_____	_____	_____
NOTE: a+b must equal #3 above					
4. Number of defendants NOT convicted of any charge:	_____	_____	_____	_____	_____
a. By acquittal:	_____	_____	_____	_____	_____
b. By dismissed charges/charges dropped:	_____	_____	_____	_____	_____
c. By referral to another jurisdiction:	_____	_____	_____	_____	_____
NOTE: a+b+c must equal #4 above					
5. Disposition:	_____	_____	_____	_____	_____
a. Number of probation revocations:	_____	_____	_____	_____	_____
b. Number of parole revocations:	_____	_____	_____	_____	_____
c. Number of defendants sentenced to jail:	_____	_____	_____	_____	_____
i. Average length of jail stay (in days):	_____	_____	_____	_____	_____
d. Number of defendants sentenced to prison:	_____	_____	_____	_____	_____
i. Average length of prison stay (in days):	_____	_____	_____	_____	_____
e. Number of defendants sentenced to probation (with custody stayed):	_____	_____	_____	_____	_____
f. Number of defendants sentenced to diversion (with custody stayed):	_____	_____	_____	_____	_____
g. Number of cases where restitution was ordered:	_____	_____	_____	_____	_____
6. Number of forfeiture proceedings initiated:	_____	_____	_____	_____	_____
7. Number of forfeiture proceedings completed:	_____	_____	_____	_____	_____
8. Dollar amount ordered:	_____	_____	_____	_____	_____
9. Dollar amount forfeited:	_____	_____	_____	_____	_____
NOTE: If the grant prosecutor does not handle forfeiture, report the asset forfeiture prosecutors' forfeitures.					
10. Total number of training hours received by DA's office:	_____	_____	_____	_____	_____
Describe the type of training received and from whom received in the project narrative section of this report.					
11. Total number of defendants with criminal charges filed	_____	_____	_____	_____	_____
a. 273a PC	_____	_____	_____	_____	_____
b. 273b PC	_____	_____	_____	_____	_____
NOTE: a+b must equal #11 above					

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	<i>1st Quarter</i>	<i>2nd Quarter</i>	<i>3rd Quarter</i>	<i>4th Quarter</i>	<i>Total to Date</i>
12. Total number of defendants convicted of child endangerment	_____	_____	_____	_____	_____
a. 273a PC	_____	_____	_____	_____	_____
b. 273b PC	_____	_____	_____	_____	_____
NOTE: a+b must equal #12 above					
13. Total number of defendants who were not convicted of any child endangerment charge because of an acquittal	_____	_____	_____	_____	_____
14. Total number of defendants who were not convicted of any child endangerment charge because the charges were dropped	_____	_____	_____	_____	_____
15. Total number of defendants who were not convicted of any child endangerment charge because the case was referred to another jurisdiction	_____	_____	_____	_____	_____
16. Disposition of case:					
a. Total number of defendants sentenced to jail	_____	_____	_____	_____	_____
i. Average jail sentence (in days)	_____	_____	_____	_____	_____
b. Total number of defendants sentenced to prison	_____	_____	_____	_____	_____
i. Average prison sentence (in days)	_____	_____	_____	_____	_____
c. Total number of probation/custody stayed (includes the number of defendants who plead guilty but had sentence stayed while cooperating with the police as informants)	_____	_____	_____	_____	_____
d. Total number of cases where restitution was ordered	_____	_____	_____	_____	_____

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