

**GRANT ANALYSIS FORM  
OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS**

**Department/Division:** *Milwaukee Police Department*

**Contact Person & Phone No:** *Sergeant Kerry Namin, 935-7219*

<b>Category of Request</b>	
<input checked="" type="checkbox"/> <b>New Grant</b>	
<input type="checkbox"/> <b>Grant Continuation</b>	<b>Previous Council File No.</b>
<input type="checkbox"/> <b>Change in Previously Approved Grant</b>	<b>Previous Council File No.</b>

**Project/Program Title:** *Clickit or Ticket Enforcement 2010*

**Grantor Agency:** *Wisconsin Department of Transportation, Bureau of Transportation Safety*

**Grant Application Date:** *N/A*

**Anticipated Award Date:** *4/12/10*

**Please provide the following information:**

**1. Description of Grant Project/Program (Include Target Locations and Populations):**

*The purpose of this grant is to encourage extraordinary seat-belt enforcement thru the use of unconventional belt enforcement efforts*

**2. Relationship to City-wide Strategic Goals and Departmental Objectives:**

*Public safety*

**3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):**

*N/A*

**4. Results Measurement/Progress Report (Applies only to Programs):**

*N/A*

**5. Grant Period, Timetable and Program Phase-out Plan:**

*4/12/10 to 9/30/10*

**6. Provide a List of Subgrantees:**

*N/A*

**7. If Possible, Complete Grant Budget Form and Attach.**