

# GRANT ANALYSIS FORM OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

**Department/Division:** Milwaukee Police Department

**Contact Person & Phone No:** Vicki Johnson, Accountant III, ext. 7125

**Category of Request**

- New Grant**
- Grant Continuation**
- Change in Previously Approved Grant**

**Previous Council File No.** 111309

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**Project/Program Title:** Milwaukee Metropolitan Drug Enforcement Grant

**Grantor Agency:** U.S. Department of Justice- Bureau of Justice Assistance

**Grant Application Date:** N/A

**Anticipated Award Date:** 01/01/13

**Please provide the following information:**

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

This resolution authorizes the Milwaukee Police Department (MPD) to apply for, accept and fund the Milwaukee Metropolitan Drug Enforcement Grant to reduce the volume of controlled substances in the Milwaukee area.

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

This resolution will allow the Police Department to reduce crime in the city of Milwaukee, thereby enhancing the quality of life for its citizens.

**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:**

1/1/2013 to 12/31/2013

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

N/A

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