

# GRANT ANALYSIS FORM

## OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

**Department/Division:** Milwaukee Police Department

**Contact Person & Phone No:** Barb Butler, 935-7452

**Category of Request**

New Grant

Grant Continuation

Change in Previously Approved Grant

**Previous Council File No. 070838**

**Previous Council File No.**

**Project/Program Title:** DEA Task Force

**Grantor Agency:** United States Department of Justice, Drug Enforcement Administration

**Grant Application Date:** N/A

**Anticipated Award Date:** Grant Starts 09/30/08

**Please provide the following information:**

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

The purpose of this grant is to fund overtime expenses for two officers assigned to the DEA Task Force whose purpose is to disrupt the trafficking of illicit drugs in the Milwaukee metropolitan area, gather and report intelligence data relating to this trafficking and to conduct undercover operations and other methods of investigation in order that the Task Force's activities will result in effective prosecution before the courts of the United States and the State of Wisconsin. This grant previously funded overtime for one officer.

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

Public safety, reduce crime.

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

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

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

09/30/08 – 09/30/09

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

N/A

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