

GRANT ANALYSIS FORM

OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS

Department/Division: Milwaukee Police Department

Contact Person & Phone No: Budget Manager, Barb Butler, ext. 7452

Category of Request

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

Previous Council File No.

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Project/Program Title: Organized Crime Drug Enforcement Task Force (OCDETF)

Grantor Agency: U.S. Department of Justice, Federal Bureau of Investigation

Grant Application Date:

Anticipated Award Date:

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 for assistance in specified OCDETF investigations and prosecutions.

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

Reduce crime and enhance the quality of life in the City of Milwaukee.

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:

10/01/09 – 09/30/10

6. Provide a List of Subgrantees:

N/A

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