

Fiscal Year 2010 Assessment Report

Grant Number: 2009-SN-B9-K019

Program Manager Name: Bronson, Willie

Office: OJJDP

Grantee Information: Grantee Name: MAINE STATE POLICE

City: Augusta

State: ME

Vendor ID: 16003001

Grant Information:

Program: JJ FY09 RA ICAC TF

Award Amount: \$455,239.00

Grant Number: 2009-SN-B9-K019

Award Start Date: 4/1/2009

Grant Type: Discretionary Grant

Award End Date: 3/31/2011

Spec. Cat Grant: ARRA

Monitoring Summary:

Monitoring Priority: Medium

Monitoring Assessment Rating

26

To Be Monitored in FY 2010 ? Justification Comment:

Planned Monitoring Quarter: Q3 - Apr/May/Jun

Summary Note:

Assessment Summary:

Grantee Organization	No
Matching Funds, Program Income, or Interest	No
New Purpose Area or Program	No
Best Practice Potential or Demonstration Grant	No
External Review	No
Special Conditions Indicators	N/A
Performance Measures	N/A
Concerns from Prior Desk Reviews and/or Monitoring Visits	N/A
Non-responsive Grantee	
High Profile/ Sensitive Grants	N/A
Financial Status Report Indicators	N/A
Programmatic Report Indicators	N/A
High Risk Grantee	N/A
Implementation Issues	N/A
Complexity of Award	N/A
Grantees Requiring Training and/or Technical Assistance	N/A
Grantees with Multiple Active OJJDP Awards	Low
ARRA Only – Non-Compliant with FederalReporting.gov Reporting Requirements	No
ARRA Only – Inaccurate Job	No

Fiscal Year 2010 Assessment Report

Grant Number: 2009-SN-B9-K019

Creation/Retention Figures

Not Applicable

Fiscal Year 2012 Desk Review Report

Grant Number: 2009-SN-B9-K019

Maine State Police					
2009-SN-B9-K019		16003001	Augusta	ME	\$455,239.00
Award Number	Grantee Name	Vendor Number	City	State	Award Amount
OJJDP	JJ FY09 RA ICAC TF	4/1/2009	3/31/2013	Cooperative Agreement	ARRA
Program Office	Program	Start Date	End Date	Grant Type	Special Category
Jeffrey Gersh	No	3	9		
Program Manager	High Risk Grantee	No. of Active Awards in Program Office	No. of Active Awards in OJP	Date of Last OCFO Visit	Date of Last Programmatic Visit

Assessment Summary:

Date Completed: 5/30/2012

Award Documentation	Yes	Information is complete
FFR Compliance and Accuracy	Yes	FFRs are accurate
Progress Report Compliance and Accuracy	Yes	Progress reports are accurate
Active Withholding Conditions	No	No withholding conditions
Special Conditions	Yes	Grant has SC's that require follow-up
Subrecipient Information	Yes	Subrecipient information is complete
FFATA Reporting Compliance	N/A	Grantee is not required to comply with FFATA
Drawdown Activity	No	Rate of expenditure is proportionate to the level of program activity.
DOJ High Risk Grantee	No	Grantee is not on the high risk list
OIG Audit	No	Grantee does not have any outstanding issues from an OIG audit.
Conference Cost Review	Yes	Grant includes funds for a conference
Conference Cost Reporting	Yes	Grantee is in compliance with conference cost reporting requirements.
Issues from Past Desk Reviews and/or Site Visits	No	There are no outstanding issues from prior site visits or desk reviews.
Issues from Past Financial Monitoring	No	There are no outstanding issues from past financial monitoring visits.
Performance Measurement Reporting Compliance	Yes	Grantee is current with performance measurement data submission.
Performance Measurement Reporting Accuracy	No	Grantee has submitted complete performance measurement data.
Activities/ Deliverables	Yes	Grantee's activities and deliverables support their goals and objectives.
Implementation Issues	No	There are no implementation issues.
Deliverable Quality	No	Deliverable and work products are of a high quality.
Grant Adjustment Notices	No	Grantee has not requested frequent GANs.
Training and Technical Assistance	No	No TTA has been provided in the past.

Fiscal Year 2012 Desk Review Report

Grant Number: 2009-SN-B9-K019

1512(c) Reporting Compliance	Yes	Reporting is in compliance
1512(c) Reporting Accuracy	Yes	Reporting is accurate
Summation/Notes	-	The grantee is performing at an above average level. No action by the program manager is needed at this time.

Fiscal Year 2011 Assessment Report

Grant Number: 2009-SN-B9-K019

Program Manager Name: Bronson, Willie **Office:** OJJDP

Grantee Information: **Grantee Name:** MAINE STATE POLICE
City: Augusta **State:** ME **Vendor ID:** 16003001

Grant Information: **Program:** JJ FY09 RA ICAC TF **Award Amount:** \$455,239.00
Grant Number: 2009-SN-B9-K019 **Award Start Date:** 4/1/2009
Grant Type: Discretionary **Award End Date:** 3/31/2011
Spec. Cat Grant: ARRA

Monitoring Summary: **Monitoring Priority:** Low **Monitoring Assessment Rating** 12
To Be Monitored in FY 2011 ? **Justification Comment:**
Planned Monitoring Quarter: Not Selected
Summary Note:

Assessment Summary:

No	state agency
No	no match
No	continuation
Yes	
Yes	ICAC high profile
Yes	multiple subawards
No	compliant with closeouts
Low	compliant with special conditions
Low	compliant with performance measures
Low	none noted
Low	fully responsive
Low	compliant with financial indicators
Low	compliant with programmatic indicators
Low	
Low	none noted
Low	no TA requested or required
Medium	
No	compliant with OMB reporting
No	reported accurately
-	

American Recovery and Reinvestment Act (Recovery Act) Site Visit Checklist and Desk Review Addendum

The American Recovery and Reinvestment Act (Recovery Act) and accompanying Office of Management and Budget (OMB) guidance outlines management and reporting requirements for Recovery Act grant funds. Although many of these requirements are met through OJP's standard monitoring activities, there are some areas requiring an increased emphasis or the development of new guidance.

The following addendum applies to both desk reviews and on-site monitoring reviews, and outlines these new requirements of the Recovery Act and associated OMB guidance. Grant managers should pay particular attention to these items in addition to those required for standard desk reviews and on-site monitoring when reviewing Recovery Act grants.

Unless activities detailed in this addendum are identified as applicable only to on-site monitoring, they should be completed for both desk reviews and on-site monitoring visits. Additionally, please note that this addendum is not a substitute for the standard site visit checklist or desk review activities outlined in the Grant Manager's Manual (GMM).

The following review elements are included in the standard Site Visit Checklist, but require increased attention for Recovery Act grants:

- Commingling of Funds (Site Visit Checklist Item 4)
 - Additional items to check while on-site:
 - New codes for Recovery Act funded programs and Recovery Act transactions (e.g., ARRA-BJA; ARRA-OVW-STOP; ARRA COPS).
 - Separate tracking of hours for a position funded partially with Recovery Act dollars.
- Subgrantee Monitoring (Site Visit Checklist Items 7 and 13)
 - Additional items to check while on-site:
 - Verify that subgrantee award documents or subcontracts include Recovery Act requirements such as: CCR registration; Buy American, if applicable; and Wage Rate, if applicable.

This addendum must be completed and uploaded to GMS for site visits and desk reviews of Recovery Act grants. To upload to GMS:

1. Log onto GMS and click the "Grant Monitoring" tab.
2. Click "Grant Monitoring File" from the menu on the left side of the screen.
3. Select the grant from the list, or use the search function to locate the grant.
4. Attach the completed Addendum following the appropriate steps for a desk review or site visit.
 - For site visits:
 - Select "Attachments" from the menu to the left of the screen.
 - Upload the completed addendum to this location.
 - For desk reviews:
 - Select "Desk Reviews" from the menu to left of the screen.
 - Select the appropriate "Desk Review ID" from the menu, or create a new desk review and enter the date on which the desk review was completed.
 - Upload the completed addendum under "Supporting Documents."

Grant Information

Type of Review	<input checked="" type="checkbox"/> Desk Review <input type="checkbox"/> Site Visit
Grantee Organization(s): Maine State Police	Grant Number(s): 2009-SN-B9-K019

Date of Desk Review/ Site Visit Start and End Dates: 9/27/10	Desk Review/Site Visit ID Number: GAT
---	--

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A1.	Check that the grantee and subgrantees have complied with Recovery Act reporting requirements under Section 1512 of the Recovery Act.	x			bronson

COMMENTS AND/OR ACTION ITEMS

Grantee is in compliance with all ARRA reporting requirements.

ISSUES FOR RESOLUTION

NA

GUIDANCE

- Recovery Act section 1512(c) provides:
 - (c) Recipient Reports- Not later than 10 days after the end of each calendar quarter, each recipient that received recovery funds from a Federal agency shall submit a report at <http://federalreporting.gov> that contains the following data elements —
 - The amount of funds received
 - Amount spent on projects and activities
 - Projects and activities funded, including:
 - A description of the project or activity,
 - The completion status,
 - The number of jobs created or retained in FTE's
 - Description of Jobs created or retained

- Details about subawards and subcontracts.
- Prior to the site visit and during a desk review, determine whether the grantee has submitted quarterly reports on the use of funds (in accordance with the reporting requirements and data elements at <http://federalreporting.gov>) listed above no later than ten calendar days after each calendar quarter.
- **What to look for in a Section 1512 (c) Report:**
 - Verify that the recipient is reporting cumulative data as directed in the Recovery Act.
 - Project Status is proportionate to the number of months a project has been operating.
 - Project Name/Title matches the project name on the award document.
 - Award Description reflects the goals and objectives in the application.
 - Activity Codes accurately describe the project.
 - Infrastructure data fields accurately reflect the project, if applicable.
 - Expenditures proportionate to the number of months a project has been operating.
 - Expenditures proportionate to the total Federal funds received/invoiced.
- Are any existing inaccuracies in reported data still posted?
 - What steps (if any) have been taken to remedy the inaccurate data?
- If reports were late, what was the cause?
 - What steps (if any) have been taken to remedy the late reporting?
- If the grantee has delegated responsibility for reporting to one or more first-tier subgrantees:
 - Is the delegation documented?
 - Are subgrantees with delegated responsibility complying with the above guidance?
 - Note: Responsibility for reporting on job creation cannot be delegated.
- Is the grantee reporting jobs creation/retention data based on a sample of its subgrants, or is the grantee reporting actual numbers?
 - If reporting based on a sample does the grantee have a GAN on file from OJP allowing sampling?

In addition to the items above, the following should be addressed as part of an on-site monitoring visit:

- Identify whether an automated or manual system is used for data collection. Is the method or process for collecting data centralized, organized, and consistent?
- Did the grantee experience any difficulty in reporting actuals because of the reporting timeframe?
- Does the grantee anticipate needing to update prior reports or use estimated data (for elements other than job creation data) in the future?
- When on-site, review and verify documentation supporting all reported data. Documents reviewed should provide evidence that
 - Created/retained positions and overtime hours are funded by Recovery Act awards,
 - Personnel are directly supporting Recovery Act projects and activities, and
 - Positions meet the criteria for created/retained positions and overtime hours.
 - Recipients are reporting only the hours worked from the award date to the end date of the end of the reporting period.
- Recommended documentation to review:
 - **Created Jobs**
 - Old and new organizational charts
 - New position descriptions
 - Job postings, offer letters and acceptance forms
 - Staffing lists
 - Timecards and payroll records

- **Retained Jobs**
 - Budget comparisons and/or projections before and after the project period start of the Recovery Act awards(s)
 - Formal layoff recommendations and retractions (memos, reports)
 - Minutes of formal meetings where official budget decisions are made
 - Timecards and payroll records
 - Employee activity reports
- **Overtime**
 - Timecards and payroll records
 - Employee activity reports

*For additional guidance on recipient reporting please go to the OJP Recovery Act Website <http://www.ojp.gov/recovery/>

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A2.	Determine whether the grant program(s) being monitored prohibit supplanting.			x	bronson
COMMENTS AND/OR ACTION ITEMS					
Supplanting is not prohibited in this program.					
ISSUES FOR RESOLUTION					
NA					
GUIDANCE					
<ul style="list-style-type: none"> • Supplanting: General Definition. For a State or unit of local government to reduce State or local funds for an activity specifically because federal funds are available (or expected to be available) to fund that same activity. When supplanting is not permitted, federal funds must be used to supplement existing State or local funds for program activities and may not replace State or local funds that have been appropriated or allocated for the same purpose. Additionally, federal funding may not replace State or local funding that is required by law. In those instances where a question of supplanting arises, the applicant or grantee will be required to substantiate that the reduction in non-federal resources occurred for reasons other than the receipt or expected receipt of federal funds • The following programs prohibit supplanting: <ul style="list-style-type: none"> ○ Recovery Act: Edward Byrne Memorial Justice Assistance Grant (JAG) Formula Program: State Solicitation ○ Recovery Act: Edward Byrne Memorial Justice Assistance Grant (JAG) Formula Program: Local Solicitation ○ Recovery Act: Correctional Facilities on Tribal Lands Program ○ Recovery Act: OVC FY09 VOCA Victim Assistance Formula Grant Program ○ Recovery Act: OVC FY09 VOCA Victim Compensation Formula Grant Program ○ Recovery Act: National Field-Generated Training, Technical Assistance, and Demonstration Projects ("VOCA discretionary grants") ○ Recovery Act: Tribal Crime Data Collection, Analysis and Estimation Project • Due to the difficult nature of determining whether supplanting has taken place, the grant manager should contact the Office of the Chief Financial Officer if they suspect supplanting in any of the above programs. 					

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A3.	Check Special Condition – Limit on Funds (Section 1604)			x	bronson
COMMENTS AND/OR ACTION ITEMS					
No comments or action items					
ISSUES FOR RESOLUTION					
NA					
GUIDANCE					
<ul style="list-style-type: none"> • Section 1604 of the Recovery Act provides: None of the funds appropriated or otherwise made available in this Act may be used by any State or local government, or any private entity, for any casino or other gambling establishment, aquarium, zoo, golf course, or swimming pool. • Prior to a site visit and during a desk review, examine progress reports, financial reports, etc, for any indication that funds have not been directly used for construction costs or support of the establishments listed above. <ul style="list-style-type: none"> ○ Below are scenarios involving "support" of these establishments: <ul style="list-style-type: none"> ▪ A mentoring program plans to take a group of youths to spend the day at a community pool. The program may pay for transportation to and from the pool using Recovery Act funding, but may not pay any pool entrance fees. ▪ A conference is being held at a hotel containing a casino. Each guest receives \$10 in complementary gaming chips for staying at the hotel. In this scenario the value of the chips must be deducted from any reimbursement for the room using Recovery Act funding (ex: if the room cost was \$200 for the length of the conference, \$190 could be paid for using Recovery Act funding). ▪ A conference is being held at a hotel containing a pool. Use of the pool is included in the room rate for the hotel. In this case there is no restriction on the use of Recovery Act funds, since there is not a separate usage fee for the pool. ▪ A state has been awarded Recovery Act funds through the Byrne Justice Assistance Grant (JAG) Program, and wants to use a portion of the funds to install surveillance cameras at a local golf course to discourage and prevent vandalism. This equipment would aid in providing security for the golf course, and as such is prohibited under the Recovery Act. ▪ A state has been awarded Recovery Act funds through the Byrne JAG Program that has been used to supplement overtime pay for police officers. On the night of a large boxing match at a casino, additional 					

officers are requested to provide security. The overtime paid to any officers working this event must not be paid using Recovery Act funds since it is being held at a casino.

In addition to the items above, the following should be addressed as part of an on-site monitoring visit:

- If there are any concerns that arise while on-site based on initial questions, the grant manager should request lists of expenditures for the project in question and/or contact his or her supervisor.
- Recommended documentation to review:
 - Progress reports,
 - Financial reports
 - Receipts
 - Project summaries
 - Conference agendas and/or brochures

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A4.	Check Special Condition - Infrastructure Investment (Section 1511)Special Condition - Preference for Quick Start Activities (Section 1602)			x	bronson
COMMENTS AND/OR ACTION ITEMS					
Non-construction					
ISSUES FOR RESOLUTION					
NA					
GUIDANCE					
<ul style="list-style-type: none"> • Section 1511 of the Recovery Act provides: With respect to covered funds made available to State or local governments for infrastructure investments, the Governor, mayor, or other chief executive, as appropriate, shall certify that the infrastructure investment has received the full review and vetting required by law and that the chief executive accepts responsibility that the infrastructure investment is an appropriate use of taxpayer dollars. Such certification shall include a description of the investment, the estimated total cost, and the amount of covered funds to be used, and shall be posted on a website and linked to the website established by section 1526. A State or local agency may not receive infrastructure investment funding from funds made available in this Act unless this certification is made and posted. • Section 1602 of the Recovery Act provides: In using funds made available in this Act for infrastructure investment, recipients shall give preference to activities that can be started and completed expeditiously, including a goal of using at least 50 percent of the funds for activities that can be initiated not later than 120 days after the date of the enactment of this Act. Recipients shall also use grant funds in a manner that maximizes job creation and economic benefit. • As a general guideline, DOJ defines infrastructure as project requiring "bricks and mortar," that is, projects resulting in, or directly and substantially affecting, a tangible physical structure; or other similar construction, repair, or major renovation projects. <ul style="list-style-type: none"> ○ Projects that require review under applicable environmental laws (e.g., NEPA) are likely to be considered infrastructure. ○ Infrastructure examples include: <ul style="list-style-type: none"> ▪ building or renovating a correctional facility, ▪ building a road, ▪ modifying the exterior of a building, and 					

- modifying the purpose of a building through major renovation.

- Has the grantee submitted a certification for any infrastructure investments?
- Did the grantee use 50% of the funds for activities that were initiated for infrastructure no later than 120 days after the date of the enactment of the Recovery Act (June 13, 2009)?

In addition to the items above, the following should be addressed as part of an on-site monitoring visit:

- Can the grantee certify that preference for infrastructure investment projects has been given to activities that can be started and completed expeditiously, and have used award funds in a manner that maximizes job creation and economic benefits?
- Recommended documentation to review:
 - Infrastructure certification
 - Project schedules for infrastructure projects

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A5.	Check Special Condition - Buy American Act (Section 1605)			x	bronson
COMMENTS AND/OR ACTION ITEMS					
Funds used for personnel costs					
ISSUES FOR RESOLUTION					
NA					
GUIDANCE					
<p>Activities associated with this guidance apply only to on-site monitoring visits.</p> <ul style="list-style-type: none"> • Section 1605 of the Recovery Act provides: Use of American Iron, Steel, and Manufactured Goods. (a) None of the funds appropriated or otherwise made available by this Act may be used for a project for the construction, alteration, maintenance, or repair of a public building or public work unless all of the iron, steel, and manufactured goods used in the project are produced in the United States. <ul style="list-style-type: none"> ○ Public work is defined in 2 CFR 176.140 • DOJ may approve a waiver to the Buy American provision for the following reasons: <ul style="list-style-type: none"> ○ Non-availability <ul style="list-style-type: none"> ▪ Iron, steel, or relevant manufactured goods not produced or manufactured in the United States in sufficient and reasonably available commercial quantities of a satisfactory quality; or ○ Unreasonable cost <ul style="list-style-type: none"> ▪ Cost of domestic iron, steel, or relevant manufactured goods will increase the cost of the overall project by more than 25 percent. ○ Inconsistent with public interest <ul style="list-style-type: none"> ▪ Application of the restrictions of Section 1605 of the Recovery Act would be inconsistent with public interest. • When a waiver is submitted, the Office of General Counsel (OGC) will make determinations for Buy American. <ul style="list-style-type: none"> ○ Forward all waiver requests to OGC as soon as the request is submitted. ○ If a waiver request is approved, DOJ will publish a detailed, written justification as to why the provision is being waived in the Federal Register. • Any questions related to the Buy American Act should be forwarded to OGC. 					

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A6.	Check Special Condition - Wage Requirements (Section 1606)			x	bronson
COMMENTS AND/OR ACTION ITEMS					
Non-construction					
ISSUES FOR RESOLUTION					
NA					
GUIDANCE					
<ul style="list-style-type: none"> • Section 1606 of the Recovery Act provides: Notwithstanding any other provision of law and in a manner consistent with other provisions in this Act, all laborers and mechanics employed by contractors and subcontractors on projects funded directly by or assisted in whole or in part by and through the Federal Government pursuant to this Act shall be paid wages at rates not less than those prevailing on projects of a character similar in the locality as determined by the Secretary of Labor in accordance with subchapter IV of chapter 31 of title 40, United States Code. With respect to the labor standards specified in this section, the Secretary of Labor shall have the authority and functions set forth in Reorganization Plan Numbered 14 of 1950 (64 Stat. 1267; 5 U.S.C. App.) and section 3145 of title 40, United States Code. • Has the grantee included the standard Davis-Bacon contract clauses (found in 29 CFR 5.5(a)) in any covered contracts made under this award that are in excess of \$2,000 for construction, alteration or repair (including painting and decorating)? <ul style="list-style-type: none"> ○ If the grantee has not included these clauses and this is an on-site monitoring visit, the grant manager should examine: <ul style="list-style-type: none"> ▪ if the grantee aware of the requirements under Section 1606. ▪ if the grantee can certify that it has reviewed its contracts to ensure that all laborers and mechanics employed by contractors and subcontractors on projects funded fully or partially by Recovery Act funds paid wages at rates not less than those prevailing on projects of a character similar in the locality. <p>In addition to the items above, the following should be addressed as part of an on-site monitoring visit:</p> <ul style="list-style-type: none"> • Recommended documentation to review <ul style="list-style-type: none"> ○ Job postings ○ Offer letters ○ Timecards ○ Payroll records ○ Local prevailing wages at Wage Determinations Online (http://www.wdol.gov/) 					

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A7.	Check Special Condition - National Environmental Policy Act (Section 1609)			x	bronson
COMMENTS AND/OR ACTION ITEMS					
Non-construction					
ISSUES FOR RESOLUTION					
NA					
GUIDANCE					
<p>Activities associated with this guidance apply only to on-site monitoring visits.</p> <ul style="list-style-type: none"> • Section 1609 of the Recovery Act provides: <ul style="list-style-type: none"> ○ The National Environmental Policy Act (NEPA) protects public health, safety, and environmental quality by ensuring the transparency, accountability, and public involvement in federal actions and in the use of public funds; ○ The NEPA helps to provide an orderly process for considering federal action and funding decisions, and prevents litigation and delay that would otherwise be inevitable and existed prior to the establishment of the NEPA; ○ Adequate resources within this bill must be devoted to ensuring that applicable environmental reviews under the NEPA are completed on an expeditious basis, and that the shortest existing applicable process under NEPA shall be utilized. • If OJP funds will be used for major renovation projects or any new construction, or programs involving the use of chemicals or any other activity, including research and technology development, that may have an effect on the environment, grant managers should ensure: <ul style="list-style-type: none"> ○ that the funding recipient provides a full description of proposed project activities to OJP, and an Environmental Assessment (EA) is prepared, and ○ prior to allowing a recipient to spend OJP funds for such a project, OJP must make a finding that the project does not significantly affect the environment, and that further environmental analysis is not necessary. • Recommended documentation to review <ul style="list-style-type: none"> ○ Proposed project description in the grant application, ○ Environmental Assessment, and/or ○ Additional documentation on environmental assessments, impact analyses, etc. 					

	ITEM	COMPLETED			COMPLETED BY
		YES	NO	N/A	
A8.	Justice Assistance Grant (JAG) Special Condition - Trust Fund			x	bronson
COMMENTS AND/OR ACTION ITEMS					
This special condition does not apply to this program.					
ISSUES FOR RESOLUTION					
NA					
GUIDANCE					
<ul style="list-style-type: none"> • Did the grantee establish a trust fund account? • Is the principle of funds being maintained, i.e. are JAG funds only being applied towards prior approved costs and/or activities? 					



U.S. Department of Justice
Office of Justice Programs

07/19/2012 01:04:45 PM

Grant Report Narratives

Award Number: 2009-SN-B9-K019

Report Number: 5

The primary purpose of the FY09 Recovery Act ICAC Task Force Program Grant was the recruitment and training of 2 detectives (Special Agents) to perform field investigation of child exploitation cases and the retention of a Computer Forensic Analyst.

Detective [REDACTED] (Belfast PD) and Detective [REDACTED] (South Portland PD) were selected from a field of 5 applicants in November 2009. MOUs with their respective agencies were drafted (and executed at the beginning of 2010). b6, b7(c)

A contract extension was drafted with consultant [REDACTED] at the end of 2009.

Jan 1, 2010 thru June 30, 2010:

The two detectives and the consultant have been extremely successful. The consultant reviews referrals of child pornography being downloaded in Maine. He applies criteria to confirm that a case is warranted. He then secures subpoenas to identify the subscriber that has downloaded the child porn and the two detectives do the investigations.

The two detectives have done 36 cases, made 4 arrests, obtained numerous more confessions and have submitted many other cases to grand jury for indictments. Of the arrests, there have been day care providers and a doctor. Significant media attention may be responsible for a significant drop in child pornography being shared in Maine. Nearly 5000 pieces of child pornography were being shared in Maine per month in 2009. That number is down to below 2500 per month so far in 2010. See attached for more details on stats.

July 1 - Dec 31, 2010:

The Maine State Police Computer Crimes Unit opened 113 new Peer-to-Peer cases, 22 new NCMEC Cybertip cases, and 6 "other" ICAC-related cases. Of these cases, Special Agents [REDACTED] and [REDACTED] have been assigned 54 Peer-to-Peer cases, 3 NCMEC Cybertips, and 2 "other" investigations, doing a combined total of 36 knock and talks. Out of these knock and talks, 33 resulted in consent "preview" searches of computers. 3 knock and talk investigations led to search warrants being obtained to go back for evidence. 7 cases were closed due to no child pornography being found during a consent preview combined with either an open-wireless situation or the suspect moving to an unknown location. 1 open wireless case was marked inactive in hopes that a lead would develop.

Special Agents [REDACTED] and [REDACTED] executed a combined total of 11 search warrants.

Four arrests were made by MSPCCU during this time period. One arrest involved a suspect that worked in close proximity to children at an elementary school.

Jan. 1 - June 30, 2011

The Maine State Police Computer Crimes Unit opened 75 new peer-to-peer child pornography cases, and received 50 new NCMEC Cybertip referrals.

Special Agents [REDACTED] and [REDACTED] closed out a number of the unit's stale peer-to-peer cases by performing background investigations and finding that the target had moved. They did a combined total 30 knock and talk investigations. Twenty-four of these investigations led to the identification of a suspect, as well as a consent search of household computers and/or confession. One suspect declined consent, but investigators already had probable cause for a search warrant which was later drafted and executed. Five cases were closed following a knock and talk: two due to the suspect being a juvenile—no charges will follow; two were unfounded complaints; and one suspect committed suicide.

Special Agents [REDACTED] and [REDACTED] also executed a combined total of 4 search warrants. Four arrests were made by the two detectives during this time period. Two arrests involved suspects with access to children, one of which was a scouting leader. Another suspect had stated intent to leave the state

necessitating immediate arrest. The final arrested suspect is being charged with dissemination of sexually explicit materials.



*Maine State Police Computer Crimes Unit
July 1 – December 31, 2011*

Submitted to the Department of Justice

Office of Juvenile Justice and Delinquency Prevention

Grant Number 2009-SN-B9-K019

**ICAC Task Force Members Hired Under
Recovery Grant**

Special Agent [REDACTED]
Special Agent [REDACTED]
Computer Forensic Analyst [REDACTED]

b6, b7(c)
/

Semi annual report: July 1st through December 31, 2011

Created Employment

During the past six months of this funding cycle, the Maine State Police Computer Crimes Unit has continued to work cases involving the exploitation of children on-line and continues towards its goal involving the Recovery Grant awarded by The Department of Justice. This Grant created employment positions for three full-time employees that are supported by Recovery Act funds for a three-year period. All three employees continue to actively work investigations into the online sexual exploitation of children and continue to achieve their objectives as outlined in the grant proposal. As you can see from the reported stats there continues to be an increase in the amount of work each employee has been doing over this reporting period. The successes of these individuals are outlined below.

Belfast Police Department
Special Agent [REDACTED] b6, b7(c)

Semi annual report: July 1st through December 31st 2011

From July 2011 through December 2011, Special Agent [REDACTED] has investigated fourteen cases: ten (10) peer-to-peer generated child pornography possession cases; one (1) child pornography manufacturing case; two (2) child pornography possession (non-P2P) cases; and one (1) probation violation case. Special Agent [REDACTED] executed nine (9) search warrants, including one (1) child pornography manufacturing case. b6, b7(c)

Below are the highlighted cases Special Agent [REDACTED] investigated:



deer-isle-stonington-schools-employee-arrested-on-child-porn-charges.htm



ellsworth-man-pleads-not-guilty-to-filming-child-in-bathroom.htm

Additionally, on September 22, 2012, MSP CCU Detective [REDACTED] and Special Agent [REDACTED], were guests on Maine Senator William Diamond's monthly cable talk show "Speak Out." It was a live call in show and the functions of the unit were discussed.

In December 2011, Special Agent [REDACTED] was promoted to Chief of the Belfast Police Department. He is no longer actively involved with the Maine State Police Computer Crimes Unit.

South Portland Police Department
Special Agent [REDACTED]

Semiannual report: July 1st through December 31st 2011

From July 2011 through December 2011, Special Agent [REDACTED] has investigated fourteen cases: nine (9) peer-to-peer generated child pornography possession cases; one (1) solicitation

case; two (2) child pornography possession (non-P2P) cases; one (1) gross sexual assault case; and one (1) visual sexual aggression case. Special Agent [REDACTED] executed seven (4) search warrants, four (4) "knock and talks", and one (1) Cybertip. Among those cases was one incident of a teacher having sexual relationship with a student and one Craigslist predator case. b6, b7(c)

Lewiston Police Department
Forensic Computer Analyst [REDACTED]

Semiannual report: July 1st through December 31st 2011

Forensic Computer Analyst [REDACTED] was hired in mid-October, 2011. Upon completion of EnCase training, FCA [REDACTED] examined three (3) cases: two (2) peer-to-peer generated child pornography possession cases; and one (1) visual sexual aggression case.

Forensic Computer Analyst Jerry [REDACTED] assisted in one (1) field investigation during this period.

Training:

EnCase 7 Volume 2. November 7 – 10, 2011



*Maine State Police Computer Crimes Unit
January 1 – June 30, 2012*

Submitted to the Department of Justice

Office of Juvenile Justice and Delinquency Prevention

Grant Number 2009-SN-B9-K019

ICAC Task Force Members Hired Under Recovery Grant

Special Agent [REDACTED] b6, b7(c)

Semi annual report: January 1st through June 30, 2012

Created Employment

During the past six months of this funding cycle, the Maine State Police Computer Crimes Unit has continued to work cases involving the exploitation of children on-line and continues towards its goal involving the Recovery Grant awarded by The Department of Justice. This Grant created employment positions for three full-time employees that are supported by Recovery Act funds for a three-year period. Only one employee continues to actively work investigations into the online sexual exploitation of children and continue to achieve their objectives as outlined in the grant proposal (one was promoted to Chief of Belfast PD; the other passed away). As you can see from the reported stats there continues to be an increase in the amount of work the remaining employee has been doing over this reporting period. The successes of this individual is outlined below.

South Portland Police Department
Special Agent [REDACTED]

b6, b7(c)

Semiannual report: July 1st through December 31st 2011

From January 2012 through June 2012, Special Agent [REDACTED] has investigated sixteen (16) cases: ten (10) peer-to-peer generated child pornography possession cases; one (1) solicitation case; four (4) child pornography possession (non-P2P) cases; and two (2) unlawful sexual contact cases (see descriptions below). Special Agent [REDACTED] executed seven (7) search warrants, and six (6) "knock and talks".

Case 11-257- Conducted a Knock N talk at the subscriber's residence in Limington for P2P CP. Investigation revealed that the subscriber moved to the Kennebunk area.

Case 11-082 - Executed a Search Warrant at as residence in Waterboro, ME for P2P CP. CP was found and the suspect admitted to downloading and possession of the CP.

Case 11-441- Executed a Search Warrant at as residence in Casco for P2P CP. CP was found and the suspect admitted to downloading and possession of the CP.

Case 11-362 - Conducted a Knock N talk at the subscriber's residence in Livermore Falls for Gigatribe CP. Investigation revealed that the subscriber has not been viewing and or downloading CP via Gigatribe. Knock n talk conducted at the subscriber's neighbor. CP found and the suspect admitted to viewing and downloading CP. Suspect was arrested and charged with the Possession of CP. Suspect has a prior 1998 Federal Conviction for Possession of CP. Federal Government has an interest in adopting the case against Suspect (pending the forensic examination of Suspect's computer).

Case 11-416 - Executed a Search Warrant at as residence in Raymond, ME for P2P CP. CP was found. Case is pending the forensic examination for follow up interviews.

Case 11-438 - Conducted a Knock N talk at the subscriber's residence in Biddeford for P2P CP. Suspect admitted to viewing CP during his download of incest videos in the P2P network; but denied intentionally viewing CP for his pleasure. Secret Service conducted a consensual polygraph of the suspect. During the polygraph examination Suspect admitted to the intentional downloads of CP.

Case 11-457- Executed a Search Warrant at as residence in Arundel for P2P CP. CP was found and the suspected admitted to downloading and possession of the CP.

Case 12-075 - Suspect (a Middle School Teacher in South Portland) turned in his computer to the department's IT for routine maintenance. IT located images of young teenaged males in sexual acts. Consent obtained from Suspect to preview his computer. Suspect was interviewed

and admitted to finding the young teenaged pictures sexually gratifying for him. All images found in Suspect's computer appear to be from the internet and not from any local children.

Case 12-134 - Assisted Secret Service agent with a FBI referral regarding a Buxton resident downloading CP. CP found and suspect admitted to intentionally downloading CP.

Case 12-164 - This case has been investigated for the last two years. MSPCCU have been getting several hits regarding downloading of CP via the P2P network in this area of Old Orchard Beach. Over the course of those two years several residences have been searched for CP. In May 2012 CCU responded with a search warrant in the area of OOB where we have searched previously. No CP was found, but a knock n talk was conducted at one of the neighbors and consent was given to search the computer. CP found and the suspect admitted to intentionally downloading and viewing the CP. Case may be taken federally.

Case 12-188- Conducted a Knock N talk at the subscriber's residence in Kennebunkport for P2P CP. Suspect gave consent to search his computer and admitted to intentionally downloading and viewing CP.

Case 12-253- Conducted a Knock N talk at the subscriber's residence in Yarmouth for P2P CP. Suspect gave consent to search his computer and admitted to intentionally downloading and viewing CP.

June 13, 2012 executed a Search Warrant at a Portland residence. Suspect admitted to viewing and downloading CP. Suspect was arrested a few days later for the possession of CP because the investigation revealed that he was taking pictures of neighborhood girls. Suspect admitted to taking the pictures of the teenagers in his neighborhood.

Assisted South Portland PD with an investigation. A teenager reported to the PD that the Suspect had unlawful sexual contact with her. The suspect is married to the victim's Grandmother. PD executed a Search Warrant at the Suspect's residence in South Portland. Suspect admitted to the unlawful sexual contact her and was charged accordingly.

A Suspect (case #10-080) who is on bail for pending unlawful sexual contact violated his condition of release by living with his girlfriend and her infant child. The Suspect is a hand-on offender and his bail conditions prohibit him with having contact with anybody under the age of 16. Affidavit for arrest being submitted to the court.

Conducted a Knock N talk at the subscriber's residence in Oxford for P2P CP. Suspect gave consent to search his computer and admitted to intentionally downloading and viewing CP.



Livermore Falls man faces child pornography charge.htm

**U. S. Department of Justice
Office of Juvenile Justice and Delinquency Prevention
FY 09 Recovery Act Internet Crimes Against Children Task Force Program Grant
Maine Department of Public Safety**

Progress Report – 1 July 2009

Project Abstract

The Computer Crimes Unit of the Maine State Police Crime Laboratory proposed to enhance our internet crimes against children capacity by funding additional field forensic investigators (detectives) and extending the contract of a forensic computer consultant (examiner) to allow for additional, proactive Peer to Peer investigations and investigations initiated by referral from NCMEC.

The field investigators would be recruited from local law enforcement agencies within regions of high child exploitation occurrences determined by Peer to Peer “hits”, NCMEC referrals, and other Intelligence gathering tools.

Performance metrics will include number of cases investigated, number of forensic examinations performed, and number of prosecutions.

Grant Awarded

In May 2009, the Maine Department of Public Safety received a letter dated May 21, 2009 announcing that the Office of Juvenile Justice and Delinquency Prevention had granted the

**U. S. Department of Justice
Office of Juvenile Justice and Delinquency Prevention
FY 09 Recovery Act Internet Crimes Against Children Task Force Program Grant
Maine Department of Public Safety**

Department an award to carry out the proposed program. The accepted program timeline is illustrated below:

Month	Project Goal	Related Objective	Activity	Expected Completion Date
1	Recruit 2 Law Enforcement Detectives based on regional needs for task force	Using State-wide data collected by the Computer Crimes Unit, areas of greatest technology-assisted child exploitation will be determined.	Reach out to local Law Enforcement Agencies in targeted areas. Expectation is that the larger agency would contribute a fulltime detective to the taskforce. The smaller agency would contribute a part-time (60%) detective.	End of month 3.
3	Train 2 regional Detectives in on-site forensic examination of computers	Provide the following training: <ol style="list-style-type: none"> 1. Case law specific to computer crimes 2. Interviewing the computer crime suspect. 3. Computer Hardware essentials. 4. Seizing computer related evidence. 5. Peer to Peer investigations. 6. Previewing computers in the Field 	In-house training with field accompaniment with current detective/forensic specialists	End of month 4.
5	Evaluation	Track referrals acted upon, subpoenas generated, cases submitted to Computer Crimes Unit of Maine State Police Crime Laboratory	Assign NCMEC referrals and Peer-to-peer "hits" to detective/forensic specialists. Begin assessments, progress reports.	Ongoing after month four with quarterly updates
1	Re-establish (extend) contract with current Forensic Examiner	Track forensic computer casework performed by Forensic Examiner	Assign computer forensic cases to Forensic Examiner. Begin assessments, progress reports.	Ongoing after month one with quarterly updates
2	Purchase cameras, computers, and software			End of Month 3
2	Lease vehicles			End of Month 3

**U. S. Department of Justice
Office of Juvenile Justice and Delinquency Prevention
FY 09 Recovery Act Internet Crimes Against Children Task Force Program Grant
Maine Department of Public Safety**

Progress as of July 1, 2009

No funds have been accessed as of July 1, 2009. Contract extension paperwork for the current Forensic Examiner had been submitted.

The initial meeting to establish recruitment for the two regional law enforcement detectives is scheduled for August 4, 2009.



U.S. Department of Justice
Office of Justice Programs

07/19/2012 01:00:52 PM

Grant Report Narratives

Award Number: 2009-SN-B9-K019

Report Number: 2

The primary purpose of the FY09 Recovery Act ICAC Task Force Program Grant was the recruitment and training of 2 detectives (Special Agents) to perform field investigation of child exploitation cases and the retention of a Computer Forensic Analyst.

Detective [REDACTED] (Belfast PD) and detective [REDACTED] (South Portland PD) were selected from a field of 5 applicants in November 2009. MOUs with their respective agencies were drafted (and executed at the beginning of 2010).

Contract extension was drafted with [REDACTED] at the end of 2009.

b6, b7c
|



U.S. Department of Justice
Office of Justice Programs

07/19/2012 01:04:00 PM

Grant Report Narratives

Award Number: 2009-SN-B9-K019

Report Number: 4

The primary purpose of the FY09 Recovery Act ICAC Task Force Program Grant was the recruitment and training of 2 detectives (Special Agents) to perform field investigation of child exploitation cases and the retention of a Computer Forensic Analyst.

Detective [REDACTED] (Belfast PD) and Detective [REDACTED] (South Portland PD) were selected from a field of 5 applicants in November 2009. MOUs with their respective agencies were drafted (and executed at the beginning of 2010). b6, b7(c)

A contract extension was drafted with consultant [REDACTED] at the end of 2009.

Jan 1, 2010 thru June 30, 2010:

The two detectives and the consultant have been extremely successful. The consultant reviews referrals of child pornography being downloaded in Maine. He applies criteria to confirm that a case is warranted. He then secures subpoenas to identify the subscriber that has downloaded the child porn and the two detectives do the investigations.

The two detectives have done 36 cases, made 4 arrests, obtained numerous more confessions and have submitted many other cases to grand jury for indictments. Of the arrests, there have been day care providers and a doctor. Significant media attention may be responsible for a significant drop in child pornography being shared in Maine. Nearly 5000 pieces of child pornography were being shared in Maine per month in 2009. That number is down to below 2500 per month so far in 2010. See attached for more details on stats.

July 1 - Dec 31, 2010:

The Maine State Police Computer Crimes Unit opened 113 new Peer-to-Peer cases, 22 new NCMEC Cybertip cases, and 6 "other" ICAC-related cases. Of these cases, Special Agents [REDACTED] and [REDACTED] have been assigned 54 Peer-to-Peer cases, 3 NCMEC Cybertips, and 2 "other" investigations, doing a combined total of 36 knock and talks. Out of these knock and talks, 33 resulted in consent "preview" searches of computers. 3 knock and talk investigations led to search warrants being obtained to go back for evidence. 7 cases were closed due to no child pornography being found during a consent preview combined with either an open-wireless situation or the suspect moving to an unknown location. 1 open wireless case was marked inactive in hopes that a lead would develop.

Special Agents [REDACTED] and [REDACTED] executed a combined total of 11 search warrants.

Four arrests were made by MSPCCU during this time period. One arrest involved a suspect that worked in close proximity to children at an elementary school.

Fiscal Year 2010 Assessment Report

Grant Number: 2007-DD-BX-K007

Program Manager Name: Bronson, Willie Office: OJJDP

Grantee Information: Grantee Name: MAINE STATE POLICE
City: Augusta State: ME Vendor ID: 16003001

Grant Information: Program: JJ FY09 ICAC Cont Award Amount: \$454,986.00
Grant Number: 2007-DD-BX-K007 Award Start Date: 9/1/2007
Grant Type: Discretionary Grant Award End Date: 2/28/2010
Spec. Cat Grant: Non-Special Cat. Grant

Monitoring Summary: Monitoring Priority: High Monitoring Assessment Rating 35
To Be Monitored in FY 2010 ? Justification Comment:
Planned Monitoring Quarter: Q3 - Apr/May/Jun
Summary Note:

Assessment Summary:

Grantee Organization	Yes
Matching Funds, Program Income, or Interest	No
New Purpose Area or Program	No
Best Practice Potential or Demonstration Grant	No
External Review	No
Special Conditions Indicators	Low
Performance Measures	Low
Concerns from Prior Desk Reviews and/or Monitoring Visits	Low
Non-responsive Grantee	
High Profile/ Sensitive Grants	High
Financial Status Report Indicators	Low
Programmatic Report Indicators	Low
High Risk Grantee	N/A
Implementation Issues	N/A
Complexity of Award	High
Grantees Requiring Training and/or Technical Assistance	Low
Grantees with Multiple Active OJJDP Awards	High
Not Applicable	-
Not Applicable	-
Not Applicable	-

Fiscal Year 2012 Desk Review Report

Grant Number: 2007-DD-BX-K007

2007-DD-BX-K007	Maine State Police	16003001	Augusta	ME	\$454,986.00
-----------------	--------------------	----------	---------	----	--------------

Award Number	Grantee Name	Vendor Number	City	State	Award Amount
OJJDP	JJ FY09 ICAC Cont	9/1/2007	6/30/2012	Cooperative Agreement	N/A

Program Office	Program	Start Date	End Date	Grant Type	Special Category
Jeffrey Gersh	No	3	9		

Program Manager	High Risk Grantee	No. of Active Awards in Program Office	No. of Active Awards in OJP	Date of Last OCFO Visit	Date of Last Programmatic Visit
-----------------	-------------------	--	-----------------------------	-------------------------	---------------------------------

Assessment Summary:

Date Completed: 5/30/2012

Award Documentation	Yes	Information is complete
FFR Compliance and Accuracy	Yes	FFRs are accurate
Progress Report Compliance and Accuracy	Yes	Progress reports are accurate
Active Withholding Conditions	No	No withholding conditions
Special Conditions	Yes	Grant has SC's that require follow-up
Subrecipient Information	Yes	Subrecipient information is complete
FFATA Reporting Compliance	N/A	Grantee is not required to comply with FFATA
Drawdown Activity	No	Rate of expenditure is proportionate to the level of program activity.
DOJ High Risk Grantee	No	Grantee is not on the high risk list
OIG Audit	No	Grantee does not have any outstanding issues from an OIG audit.
Conference Cost Review	Yes	Grant includes funds for a conference
Conference Cost Reporting	Yes	Grantee is in compliance with conference cost reporting requirements.
Issues from Past Desk Reviews and/or Site Visits	No	There are no outstanding issues from prior site visits or desk reviews.
Issues from Past Financial Monitoring	No	There are no outstanding issues from past financial monitoring visits.
Performance Measurement Reporting Compliance	Yes	Grantee is current with performance measurement data submission.
Performance Measurement Reporting Accuracy	No	Grantee has submitted complete performance measurement data.
Activities/ Deliverables	Yes	Grantee's activities and deliverables support their goals and objectives.
Implementation Issues	No	There are no implementation issues.
Deliverable Quality	No	Deliverable and work products are of a high quality.
Grant Adjustment Notices	No	Grantee has not requested frequent GANs.
Training and Technical Assistance	No	No TTA has been provided in the past.

Fiscal Year 2012 Desk Review Report

Grant Number: 2007-DD-BX-K007

1512(c) Reporting Compliance -

1512(c) Reporting Accuracy -

Summation/Notes -

The grantee is performing at an above average level. No action by the program manager is needed at this time.

**U. S. Department of Justice
Office of Juvenile Justice and Delinquency Prevention
Maine State Police Crime Laboratory
“OJJDP FY 2007 Internet Crimes Against Children Expansion (Phase II)” Proposal**

Progress Report – 1 July 2009

Project Abstract

The Computer Crimes Unit of the Maine State Police Crime Laboratory proposed to enhance our internet crimes against children capacity by funding an additional analyst position within the Lewiston Police Department [Note: in 2008 Forensic Computer Analyst Jim Rioux passed away and remaining funds were reallocated for additional training of a new Lewiston PD detective, ██████████], a field forensic investigator, mobile computer crime lab, providing additional ongoing training in computer forensic applications, and providing overtime funding to allow for additional, proactive Peer to Peer investigations. Performance metrics will include number of cases investigated, number of forensic examinations, number of prosecutions, and hours of community outreach.

b6, b7(c)

Progress from January 1, 2009 to June 30, 2009

Performance metrics related to number of cases investigated, number of forensic examinations, number of prosecutions, and hours of community outreach are found in the monthly report attachments.

Travel/training

ICAC funding during this reporting period was used to provide Encase level II training for Lewiston PD detective ██████████. Detective ██████████ is scheduled for Encase III training in September 2009.

Three staff members attended ICAC Commanders meetings during this period. ICAC Commander Sgt. Glenn Lang and Detective ██████████ attended the meeting in Mobile, AL. Detective ██████████ also attended the meeting in San Jose, CA.

**U. S. Department of Justice
Office of Juvenile Justice and Delinquency Prevention
FY 09 Recovery Act Internet Crimes Against Children Task Force Program Grant
Maine Department of Public Safety**

Community Outreach

During this rating period, the staff of the MSP Computer Crimes Unit conducted two school presentations on the dangers of internet predators. They took place on February 5th and April 9th.

Forwarding Investigations

The Computer Crimes Unit van has become an invaluable part of our field investigation efforts. It is used on a weekly basis. An April 2009 article even made mention of its effective use. The text of the article follows:

Law officers arrest child porn suspect State, Rumford police work with Montana computer crimes task force to confirm evidence, find subject

BY BETTY ADAMS

Staff Writer **KENNEBEC JOURNAL Morning Sentinel** 04/02/2009

Rumford police, the U.S. Secret Service and a computer crimes task force in Montana cooperated on a child pornography investigation that led to the arrest of a Rumford man Tuesday.

When authorities went to pick up Anthony Richards, 33, they brought along a van outfitted with computer equipment to match the evidence to the suspect. Then they seized a number of computers and CDs and charged Richards with possession of sexually explicit materials. They took a sampling of the materials to the van where they were previewed by a certified forensic examiner, in this instance a Secret Service agent, said Sgt. Glenn Lang, who heads Maine's Internet Crimes Against Children task force.

The task force, an arm of the Maine State Police, is based at the Maine Criminal Justice Academy in Vassalboro. "The reason we do that is because there can be a problem with open wireless networks," Lang said. "Just because the (Internet address) comes back to that house, we're not always at the right house."

**U. S. Department of Justice
Office of Juvenile Justice and Delinquency Prevention
FY 09 Recovery Act Internet Crimes Against Children Task Force Program Grant
Maine Department of Public Safety**

The van, which the task force purchased last year with \$17,000 in federal grant money, has been used in a few dozen cases this year, Lang said. "When we were on site, he admitted he was the person," Lang said. "We do a preview in the field to make sure what they say is accurate."

Lang said a certified examiner previews the material to see if they can determine whether it's a local child depicted and whether anything else needs to be addressed immediately.

Lang said the Richards investigation began when the state police computer crimes group was contacted by counterparts in Montana.

"The Montana ICAC unit had been working in an undercover capacity for some time when Richards, using a screen name and Yahoo messenger service, contacted these people in Montana and transmitted quite a number of images of child pornography," Lang said.

The investigation took several months, Lang said, because authorities had to subpoena records from Yahoo and from GWI, an internet and phone service provider, to identify the person behind the screen name and the location of the person.

Lang said Richards is charged with a felony because the seized materials appear to depict children younger than 12.

"The Rumford Police Department has been doing background work with us," Lang said. Rumford Police Capt. Daniel Garbarini said Wednesday he was continuing to work on the Richards case and anticipates filing additional charges against him. Richards was bailed from Oxford County jail after posting \$50,000 surety bail. Garbarini said he was grateful for the aid of the Internet crimes task force.

"It's a specialty service small community police departments like Rumford don't get to have," he said. "They recognized a problem in our community because of the Internet investigation, and that will make an impact in our community and make citizens in our community aware of the dangers present with Internet use."

"There are predators among us in the privacy of their own home."

The primary focus of the FY07 ICAC Continuation grant was the hiring and training of a Computer Forensic Analyst, as well as the continued funding of a Computer Forensic Analyst at our Lewiston PD satellite laboratory. Additionally, we sought funding to improve our "harvesting" software program that was developed earlier in a partnership between Bowdoin College (Maine) and the Computer Crimes Unit of the Maine State Police Crime Laboratory.

All equipment was ordered including a van that was outfitted for the use by our computer crimes unit for on-site previewing of suspected contraband computers.

In July 2008, Lewiston PD Computer Forensic Analyst James Rioux passed away. Statistics (below) for Mr. Rioux reflect the time period January 2008 through July 2008.

In August 2009, a hiring freeze exemption was granted allowing for the recruitment of a Computer Forensic Analyst. [REDACTED] was hired in October 2009 and began his EnCase training (funded by this grant). Statistics (below) reflect the time period November 2009 through February 2011 at which time [REDACTED] funding moved to the next ICAC Continuation grant.

A contract was established with Bitsec Global Forensics to modify/improve our harvesting software package in December 2009. The modifications and subsequent training took place during this reporting period. Since its development and modification, this software has been utilized by Computer Forensic Units throughout the United States and, to date, more than seventeen countries around the world. Below is a map of some of the locations.



A GAN was obtained to allow the purchase of a tool (Cardinal/Shadow) that can be used in the field to locate the source and users of a wireless network. The tool has already been purchased, training was obtained, and it has been successfully deployed in the field.

Computer Forensic Analyst	# of Cases	# of HDD	# of Floppy Disks	# of CD/DVDs	# of Other Removable media	# of Cellular Phones
James Rioux	9	15	53	65	101	0
Ave per month	1.3	2.1	7.6	9.3	14.4	0
Chris Hull	34	61	1	31	8	3
Ave per month	2.1	3.8	<1	1.9	<1	<1

It was anticipated the Mr. Rioux, as an experienced Computer Forensic Analyst would examine on average 3 to 4 cases per month. Unfortunately, his health did not allow for such productivity before he passed away.

It was anticipated the [REDACTED], once trained, would average 2 cases per month. He met that target and began assisting field investigators with on-site previews as he developed his expertise.

bb

ICAC Statistics

In the time period from January 1, 2011 to Jun 30, 2011 the Maine State Police Computer Crimes Unit received the following ICAC related complaints:

1. Child Pornography Possession – 113
2. Child Pornography Manufacture – 4
3. Child Pornography Distribution - 47
4. Child Sexual Abuse – 14
5. Solicitation of a Child 13

6. Subpoenas issued – 121
7. Arrest – 7 (Note: Most of our cases go to Grand Jury)

Challenges

While the Unit has increased the number of knock and talks and search warrants we are still only hitting the worst offenders. Every two weeks the Unit examines the Maine targets seen on Operation Roundup and we only issue subpoenas on cases where there is a significant volume of traded contraband. Even with this process we are still not getting to all of the targets we identify. The additional field work has also significantly increased our forensic backlog which as of today stands at 447 pieces of evidence waiting for examination.

Accomplishments

In addition to conducting many knock and talks and search warrants these are a few of the cases of note:

- b6
1. ██████████ – This man was a teacher in the Jackman School system. ██████████ was actually creating child pornography in his classroom with his kindergarten students. ██████████ was arrested and has pleaded guilty to production of child pornography.
 2. ██████████ – a Boy Scout leader we charged with possession of child pornography.

b6

3. ██████ – Monmouth School teacher we charged with theft of a school laptop and possession of child pornography.
4. ██████ – NCMEC referral we arrested for distributing a lot of child pornography.

Grant Goals

1. The goal is to increase public safety by increasing the number of technologically-assisted child exploitation investigations and related prosecutions. By recruiting and training an additional Computer Forensic Analyst we should be able to meet the goal:

To this end we hired ██████. ██████ has been trained on the job and though Guidance software in Computer Forensics. In this time period ██████ completed an estimated 20 previews and forensically processed cases that involved 70+ HDDs, two dozen USB thumb drives, cameras, phones, etc. ██████ currently has 6 cases in processing now and a large backlog. The majority of the cases have been child exploitation cases.

2. Additionally, by training all MCCTF technical staff members in Macintosh-based forensic examinations, we will be prepared for an anticipated increase in cases arising from the State's expansion of the Macintosh-based laptop computer program into the State's high schools:

We have trained most of our examiners in Mac Marshall. Some examiners have also taken webinars on the subject. Most of the examiners have at least one Mac computer to allow them to become familiar with the operating systems. All of the examiners have conducted numerous Mac examinations.

ICAC Reporting System

Enter Data

Print

Run Report

Run Task Force Edit Report

Year: 2010

Save Datasheet

Monthly Measures			Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec		
Documented Complaints	Traveler	Proactive					0	0								
		Reactive					0	0								
	Enticement	Proactive					0	0								
		Reactive	1	1	1		4	0								
	Obscenity Directed to Minors	Proactive					0	0								
		Reactive					0	0								
	Child Prostitution	Proactive					0	0								
		Reactive					0	0								
	Child Pornography	Manufacture	Proactive					0	0							
			Reactive			1	1	0	0							
		Distribution	Proactive					0	0							
			Reactive				1	1	1							
		Possession	Proactive		6	12	11	8	22							
			Reactive	9	4	8	5	8	11							
Case Information	# of Investigations						14	22								
	Arrests						3	1								
	Case Dispositions	Unfounded		3												
		Suspended						2								
		Plea		1	1											
		Trial			1											
	Case Referrals	Federal														
		State														
		Local		3												
	Submitted for Federal Prosecution						1	1								
Accepted for Federal Prosecution						1	0									
Goals	Cybertips Received*		8	14	10	8	10	1								
	CVIP Submissions (Cases)*		4	2	2	4	2	2								
	Affiliated Agencies Added*						0	0								
	Child Victims Identified	CVIP					0	0								
Cases*						0	1									
Court Actions	Subpoenas or Court Orders	Federal			36	32	0	0								
		State/Local	126	56	42	29	46	21								
	Search Warrants	Federal					0	0								
		State/Local	4	4	10	3	5	3								
Technical Assists	Technical Support		9	9	9	3	8	11								
	Forensic Exams		20	25	62	47	19	7								

Training	Training Sessions Provided	3	1	5	0	1							
	Law Enforcement Trained	8	12	58	0	20							
	Prosecutors Trained				0	0							
	Other Professions Trained			86	0	0							
	# Sent to ICAC T&TA Training	1		2	0	0							
	# Sent to Other Training		2		1	0	0						
Community Outreach	Presentations			1	3	0	0						
	Number of Attendees (Presentations)	80	12		72	0	0						
	Public Events					0	0						
	Number of Attendees (Public Events)			25		0	0						
	Public Awareness	1	1			0	0						

Save Datasheet



Department of Justice
Office of Justice Programs
Grants Accounting Module

Grants Reporting Facility

Wednesday, January 9, 2013

Payment History Report by Grant #

08:14:33 AM

Grant Number: 2009SNB9K019

Grantee: MAINE STATE POLICE

Grantee ID: 016003001

State Grant Awarded: ME

Last Financial Status Report: 09/30/2012

<u>Last Trn</u>	<u>Doc Type</u>	<u>Obligation Amount</u>	<u>Payment Amount</u>	<u>Balance</u>
05/08/2009	CM	\$.00	\$.00	\$.00
05/20/2009	OB	\$455,239.00	\$.00	\$455,239.00
03/10/2010	EX	\$.00	\$471.47	\$454,767.53
03/16/2010	EX	\$.00	\$980.80	\$453,786.73
03/19/2010	EX	\$.00	\$1,316.75	\$452,469.98
04/01/2010	EX	\$.00	\$139.64	\$452,330.34
04/22/2010	EX	\$.00	\$2,628.92	\$449,701.42
05/05/2010	EX	\$.00	\$210.46	\$449,490.96
05/19/2010	EX	\$.00	\$2,280.67	\$447,210.29
06/04/2010	EX	\$.00	\$13,030.83	\$434,179.46
06/18/2010	EX	\$.00	\$18,054.09	\$416,125.37
07/09/2010	EX	\$.00	\$3,391.28	\$412,734.09
07/14/2010	EX	\$.00	\$22,498.00	\$390,236.09
07/19/2010	EX	\$.00	\$217.82	\$390,018.27
07/22/2010	EX	\$.00	\$326.06	\$389,692.21
08/12/2010	EX	\$.00	\$292.73	\$389,399.48
08/17/2010	EX	\$.00	\$4,120.00	\$385,279.48
08/19/2010	EX	\$.00	\$2,187.41	\$383,092.07
09/01/2010	EX	\$.00	\$47.02	\$383,045.05
09/13/2010	EX	\$.00	\$2,028.30	\$381,016.75
09/20/2010	EX	\$.00	\$1,961.60	\$379,055.15
09/24/2010	EX	\$.00	\$879.82	\$378,175.33
10/05/2010	EX	\$.00	\$20,816.52	\$357,358.81
10/14/2010	EX	\$.00	\$3,000.00	\$354,358.81
11/12/2010	EX	\$.00	\$11,000.00	\$343,358.81
12/22/2010	EX	\$.00	\$21,000.00	\$322,358.81
01/12/2011	EX	\$.00	\$2,000.00	\$320,358.81
02/17/2011	EX	\$.00	\$40,555.00	\$279,803.81
03/07/2011	EX	\$.00	\$13,000.00	\$266,803.81
04/05/2011	EX	\$.00	\$6,400.00	\$260,403.81
04/13/2011	EX	\$.00	\$13,000.00	\$247,403.81
05/04/2011	EX	\$.00	\$13,200.00	\$234,203.81
06/14/2011	EX	\$.00	\$10,000.00	\$224,203.81
07/13/2011	EX	\$.00	\$15,000.00	\$209,203.81
08/17/2011	EX	\$.00	\$13,000.00	\$196,203.81
09/16/2011	EX	\$.00	\$13,000.00	\$183,203.81
10/12/2011	EX	\$.00	\$14,000.00	\$169,203.81
12/01/2011	EX	\$.00	\$20,000.00	\$149,203.81
12/15/2011	EX	\$.00	\$17,000.00	\$132,203.81



Department of Justice
Office of Justice Programs
Grants Accounting Module

Grants Reporting Facility

Wednesday, January 9, 2013

Payment History Report by Grant #

08:14:33 AM

Grant Number: 2009SNB9K019

Grantee: MAINE STATE POLICE

Grantee ID: 016003001

State Grant Awarded: ME

Last Financial Status Report: 09/30/2012

<u>Last Trn</u>	<u>Doc Type</u>	<u>Obligation Amount</u>	<u>Payment Amount</u>	<u>Balance</u>
01/25/2012	EX	\$.00	\$9,565.00	\$122,638.81
02/21/2012	EX	\$.00	\$10,000.00	\$112,638.81
05/09/2012	EX	\$.00	\$22,000.00	\$90,638.81
06/20/2012	EX	\$.00	\$21,000.00	\$69,638.81
10/09/2012	EX	\$.00	\$20,000.00	\$49,638.81
Totals:		\$455,239.00	\$405,600.19	\$49,638.81

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019		Page 1 of 1			
3. Recipient Organization (Name and complete address including Zip code) Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042							
4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual			
8. Project/Grant Period From: (Month, Day, Year) 04/01/2009		To: (Month, Day, Year) 03/31/2013		9. Reporting Period End Date 09/30/2012			
10. Transactions			Cumulative				
(Use lines a-c for single or multiple grant reporting)							
Federal Cash (To report multiple grants also use FFR Attachment):							
a. Cash Receipts							
b. Cash Disbursements							
c. Cash on Hand (line a minus b)							
(Use lines d-o for single grant reporting)							
Federal Expenditures and Unobligated Balance:							
d. Total Federal funds authorized			\$ 455,239.00				
e. Federal share of expenditures			\$ 371,137.73				
f. Federal share of unliquidated obligations			\$ 0.00				
g. Total Federal share (sum of lines e and f)			\$ 371,137.73				
h. Unobligated balance of Federal funds (line d minus g)			\$ 84,101.27				
Recipient Share:							
i. Total recipient share required			\$ 0.00				
j. Recipient share of expenditures			\$ 0.00				
k. Remaining recipient share to be provided (line i minus j)			\$ 0.00				
Program Income:							
l. Total Federal program income earned			\$ 0.00				
m. Program income expended in accordance with the deduction alternative							
n. Program income expended in accordance with the addition alternative			\$ 0.00				
o. Unexpended program income (line l minus line m or line n)			\$ 0.00				
11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Not Applicable						
					g. Totals:		
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:							
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)							
a. Typed or Printed Name and Title of Authorized Certifying Official ██████████, Staff Accountant <i>bb</i>					c. Telephone (Area code, number and extension) ██████████ <i>bb</i>		
					d. Email address ██████████@maine.gov <i>i</i>		
b. Signature of Authorized Certifying Official					e. Date Report Submitted (Month, Day, Year) 10/05/2012		
14. Agency use only: OJP Vendor Number: 016003001 Standard Form 425 OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011							
Paperwork Burden Statement According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimates or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (0348-0060), Washington, DC 20503							

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019	Page of 1 1
---	--	----------------

3. Recipient Organization (Name and complete address including Zip code)
 Maine State Police
 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042

4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
------------------------------	-----------------------	---	--	---

8. Project/Grant Period From: (Month, Day, Year) 04/01/2009	To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 06/30/2012
---	--------------------------------------	--

10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants also use FFR Attachment):

a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$ 455,239.00
e. Federal share of expenditures	\$ 363,783.76
f. Federal share of unliquidated obligations	\$ 0.00
g. Total Federal share (sum of lines e and f)	\$ 363,783.76
h. Unobligated balance of Federal funds (line d minus g)	\$ 91,455.24

Recipient Share:

i. Total recipient share required	\$ 0.00
j. Recipient share of expenditures	\$ 0.00
k. Remaining recipient share to be provided (line i minus j)	\$ 0.00

Program Income:

l. Total Federal program income earned	\$ 0.00
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	\$ 0.00
o. Unexpended program income (line l minus line m or line n)	\$ 0.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Not Applicable						
g. Totals:							

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official [Redacted] Staff Accountant <i>bb</i>	c. Telephone (Area code, number and extension) [Redacted] <i>bb</i>
b. Signature of Authorized Certifying Official	d. Email address [Redacted]@maine.gov
	e. Date Report Submitted (Month, Day, Year) 07/30/2012

14. Agency use only:
 OJP Vendor Number: 016003001

Standard Form 425 OMB
 Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019	Page of 1 1
--	--	----------------

3. Recipient Organization (Name and complete address including Zip code)
 Maine State Police
 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042

4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
-------------------------------------	------------------------------	---	---	--

8. Project/Grant Period From: (Month, Day, Year) 04/01/2009	To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 03/31/2012
--	--------------------------------------	---

10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants also use FFR Attachment):

a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$ 455,239.00
e. Federal share of expenditures	\$ 335,140.62
f. Federal share of unliquidated obligations	\$ 0.00
g. Total Federal share (sum of lines e and f)	\$ 335,140.62
h. Unobligated balance of Federal funds (line d minus g)	\$ 120,098.38

Recipient Share:

i. Total recipient share required	\$ 0.00
j. Recipient share of expenditures	\$ 0.00
k. Remaining recipient share to be provided (line i minus j)	\$ 0.00

Program Income:

l. Total Federal program income earned	\$ 0.00
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	\$ 0.00
o. Unexpended program income (line l minus line m or line n)	\$ 0.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Not Applicable						
g. Totals:							

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official [Redacted] Staff Accountant <i>lbp</i>	c. Telephone (Area code, number and extension) [Redacted] <i>lbp</i>
b. Signature of Authorized Certifying Official	d. Email address [Redacted]@maine.gov
e. Date Report Submitted (Month, Day, Year) 04/23/2012	

14. Agency use only:
 OJP Vendor Number: 016003001

Standard Form 425 OMB
 Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019	Page <u>1</u> of <u>1</u>
--	--	---------------------------

3. Recipient Organization (Name and complete address including Zip code)
 Maine State Police
 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042

4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
-------------------------------------	------------------------------	---	---	--

8. Project/Grant Period From: (Month, Day, Year) 04/01/2009	To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 12/31/2011
--	---	---

10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants also use FFR Attachment):

a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$ 455,239.00
e. Federal share of expenditures	\$ 311,923.26
f. Federal share of unliquidated obligations	\$ 0.00
g. Total Federal share (sum of lines e and f)	\$ 311,923.26
h. Unobligated balance of Federal funds (line d minus g)	\$ 143,315.74

Recipient Share:

i. Total recipient share required	\$ 0.00
j. Recipient share of expenditures	\$ 0.00
k. Remaining recipient share to be provided (line i minus j)	\$ 0.00

Program Income:

l. Total Federal program income earned	\$ 0.00
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	\$ 0.00
o. Unexpended program income (line l minus line m or line n)	\$ 0.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Not Applicable						
g. Totals:							

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official [Redacted] Staff Accountant <i>bp</i>	c. Telephone (Area code, number and extension) [Redacted] <i>bp</i>
b. Signature of Authorized Certifying Official	d. Email address [Redacted]@maine.gov
e. Date Report Submitted (Month, Day, Year) 01/10/2012	

14. Agency use only:
 OJP Vendor Number: 016003001

Standard Form 425 OMB
 Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (0348-0060). Washington, DC 20503

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019	Page of 1 1
--	--	----------------

3. Recipient Organization (Name and complete address including Zip code)
 Maine State Police
 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042

4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
-------------------------------------	------------------------------	---	---	--

8. Project/Grant Period From: (Month, Day, Year) 04/01/2009	To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 09/30/2011
--	--------------------------------------	---

10. Transactions	Cumulative
(Use lines a-o for single or multiple grant reporting)	
Federal Cash (To report multiple grants also use FFR Attachment):	
a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	
(Use lines d-o for single grant reporting)	
Federal Expenditures and Unobligated Balance:	
d. Total Federal funds authorized	\$ 455,239.00
e. Federal share of expenditures	\$ 263,351.16
f. Federal share of unliquidated obligations	\$ 0.00
g. Total Federal share (sum of lines e and f)	\$ 263,351.16
h. Unobligated balance of Federal funds (line d minus g)	\$ 191,887.84
Recipient Share:	
i. Total recipient share required	\$ 0.00
j. Recipient share of expenditures	\$ 0.00
k. Remaining recipient share to be provided (line i minus j)	\$ 0.00
Program Income:	
l. Total Federal program income earned	\$ 0.00
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	\$ 0.00
o. Unexpended program income (line l minus line m or line n)	\$ 0.00
11. Indirect Expense	
a. Type	b. Rate
c. Period From	d. Base
e. Amount Charged	f. Federal Share
Not Applicable	
g. Totals:	

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official [Redacted] Staff Accountant <i>kb</i>	c. Telephone (Area code, number and extension) [Redacted] <i>kb</i> d. Email address [Redacted]@maine.gov
b. Signature of Authorized Certifying Official	e. Date Report Submitted (Month, Day, Year) 10/26/2011
14. Agency use only: OJP Vendor Number: 016003001	

Standard Form 425 OMB
 Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019	Page <u>1</u> of <u>1</u>
--	--	---------------------------

3. Recipient Organization (Name and complete address including Zip code)
 Maine State Police
 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042

4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
-------------------------------------	------------------------------	---	---	--

8. Project/Grant Period From: (Month, Day, Year) 04/01/2009	To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 06/30/2011
--	--------------------------------------	---

10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants also use FFR Attachment):

a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$ 455,239.00
e. Federal share of expenditures	\$ 229,131.21
f. Federal share of unliquidated obligations	\$ 0.00
g. Total Federal share (sum of lines e and f)	\$ 229,131.21
h. Unobligated balance of Federal funds (line d minus g)	\$ 226,107.79

Recipient Share:

i. Total recipient share required	\$ 0.00
j. Recipient share of expenditures	\$ 0.00
k. Remaining recipient share to be provided (line i minus j)	\$ 0.00

Program Income:

l. Total Federal program income earned	\$ 0.00
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	\$ 0.00
o. Unexpended program income (line l minus line m or line n)	\$ 0.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Not Applicable						
g. Totals:							

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official [Redacted], Staff Accountant: <i>bb</i>	c. Telephone (Area code, number and extension) [Redacted] <i>bb</i> d. Email address [Redacted]@maine.gov
b. Signature of Authorized Certifying Official	e. Date Report Submitted (Month, Day, Year) 07/08/2011

14. Agency use only:
 OJP Vendor Number: 016003001
 Standard Form 425 OMB
 Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019	Page of 1 1
--	--	----------------

3. Recipient Organization (Name and complete address including Zip code)
 Maine State Police
 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042

4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
-------------------------------------	------------------------------	---	---	--

8. Project/Grant Period From: (Month, Day, Year) 04/01/2009	To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 03/31/2011
--	--------------------------------------	---

10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants also use FFR Attachment):

a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$ 455,239.00
e. Federal share of expenditures	\$ 188,583.97
f. Federal share of unliquidated obligations	\$ 0.00
g. Total Federal share (sum of lines e and f)	\$ 188,583.97
h. Unobligated balance of Federal funds (line d minus g)	\$ 266,655.03

Recipient Share:

i. Total recipient share required	\$ 0.00
j. Recipient share of expenditures	\$ 0.00
k. Remaining recipient share to be provided (line i minus j)	\$ 0.00

Program Income:

l. Total Federal program income earned	\$ 0.00
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	\$ 0.00
o. Unexpended program income (line l minus line m or line n)	\$ 0.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Not Applicable						
g. Totals:							

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official [Redacted], Staff Accountant <i>lab</i>	c. Telephone (Area code, number and extension) [Redacted] <i>666</i> d. Email address [Redacted]@maine.gov <i>1</i>
b. Signature of Authorized Certifying Official	e. Date Report Submitted (Month, Day, Year) 04/13/2011

14. Agency use only:
 OJP Vendor Number: 016003001

Standard Form 425 OMB
 Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019		Page of 1 1			
3. Recipient Organization (Name and complete address including Zip code) Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042							
4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual			
8. Project/Grant Period From: (Month, Day, Year) 04/01/2009		To: (Month, Day, Year) 03/31/2013		9. Reporting Period End Date 12/31/2010			
10. Transactions			Cumulative				
(Use lines a-c for single or multiple grant reporting)							
Federal Cash (To report multiple grants also use FFR Attachment):							
a. Cash Receipts							
b. Cash Disbursements							
c. Cash on Hand (line a minus b)							
(Use lines d-o for single grant reporting)							
Federal Expenditures and Unobligated Balance:							
d. Total Federal funds authorized			\$ 455,239.00				
e. Federal share of expenditures			\$ 110,652.04				
f. Federal share of unliquidated obligations			\$ 0.00				
g. Total Federal share (sum of lines e and f)			\$ 110,652.04				
h. Unobligated balance of Federal funds (line d minus g)			\$ 344,586.96				
Recipient Share:							
i. Total recipient share required			\$ 0.00				
j. Recipient share of expenditures			\$ 0.00				
k. Remaining recipient share to be provided (line i minus j)			\$ 0.00				
Program Income:							
l. Total Federal program income earned			\$ 0.00				
m. Program income expended in accordance with the deduction alternative							
n. Program income expended in accordance with the addition alternative			\$ 0.00				
o. Unexpended program income (line l minus line m or line n)			\$ 0.00				
11. Indirect Expense	a. Type Not Applicable	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
g. Totals:							
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:							
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)							
a. Typed or Printed Name and Title of Authorized Certifying Official Staff Accountant bb					c. Telephone (Area code, number and extension) bb		
					d. Email address @maine.gov		
b. Signature of Authorized Certifying Official					e. Date Report Submitted (Month, Day, Year) 01/27/2011		
					14. Agency use only: DJP Vendor Number: 016003001		
Standard Form 425 OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011							
Paperwork Burden Statement According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503							

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019		Page 1 of 1			
3. Recipient Organization (Name and complete address including Zip code) Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042							
4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual			
8. Project/Grant Period From: (Month, Day, Year) 04/01/2009		To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 09/30/2010				
10. Transactions			Cumulative				
(Use lines a-c for single or multiple grant reporting)							
Federal Cash (To report multiple grants also use FFR Attachment):							
a. Cash Receipts							
b. Cash Disbursements							
c. Cash on Hand (line a minus b)							
(Use lines d-o for single grant reporting)							
Federal Expenditures and Unobligated Balance:							
d. Total Federal funds authorized			\$ 455,239.00				
e. Federal share of expenditures			\$ 74,880.18				
f. Federal share of unliquidated obligations			\$ 0.00				
g. Total Federal share (sum of lines e and f)			\$ 74,880.18				
h. Unobligated balance of Federal funds (line d minus g)			\$ 380,358.82				
Recipient Share:							
i. Total recipient share required			\$ 0.00				
j. Recipient share of expenditures			\$ 0.00				
k. Remaining recipient share to be provided (line i minus j)			\$ 0.00				
Program Income:							
l. Total Federal program income earned			\$ 0.00				
m. Program income expended in accordance with the deduction alternative							
n. Program income expended in accordance with the addition alternative			\$ 0.00				
o. Unexpended program income (line l minus line m or line n)			\$ 0.00				
11. Indirect Expense	a. Type Not Applicable	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
			g. Totals:				
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:							
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)							
a. Typed or Printed Name and Title of Authorized Certifying Official Staff Accountant bb					c. Telephone (Area code, number and extension) bb		
					d. Email address @maine.gov		
b. Signature of Authorized Certifying Official					e. Date Report Submitted (Month, Day, Year) 10/25/2010		
					14. Agency use only: OJP Vendor Number: 016003001		
Standard Form 425 OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011							
Paperwork Burden Statement According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503							

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice			2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019			Page of 1 1	
3. Recipient Organization (Name and complete address including Zip code) Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042							
4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)			6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual	
8. Project/Grant Period From: (Month, Day, Year) 04/01/2009			To: (Month, Day, Year) 03/31/2013			9. Reporting Period End Date 06/30/2010	
10. Transactions					Cumulative		
(Use lines a-c for single or multiple grant reporting)							
Federal Cash (To report multiple grants also use FFR Attachment):							
a. Cash Receipts							
b. Cash Disbursements							
c. Cash on Hand (line a minus b)							
(Use lines d-o for single grant reporting)							
Federal Expenditures and Unobligated Balance:							
d. Total Federal funds authorized					\$ 455,239.00		
e. Federal share of expenditures					\$ 37,369.85		
f. Federal share of unliquidated obligations					\$ 17,654.40		
g. Total Federal share (sum of lines e and f)					\$ 55,024.25		
h. Unobligated balance of Federal funds (line d minus g)					\$ 400,214.75		
Recipient Share:							
i. Total recipient share required					\$ 0.00		
j. Recipient share of expenditures					\$ 0.00		
k. Remaining recipient share to be provided (line i minus j)					\$ 0.00		
Program Income:							
l. Total Federal program income earned					\$ 0.00		
m. Program income expended in accordance with the deduction alternative							
n. Program income expended in accordance with the addition alternative					\$ 0.00		
o. Unexpended program income (line l minus line m or line n)					\$ 0.00		
11. Indirect Expense	a. Type Not Applicable	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
g. Totals:							
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:							
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)							
a. Typed or Printed Name and Title of Authorized Certifying Official Staff Accountant <i>bb</i>					c. Telephone (Area code, number and extension) bb		
					d. Email address @maine.gov 1		
b. Signature of Authorized Certifying Official					e. Date Report Submitted (Month, Day, Year) 07/23/2010		
					14. Agency use only: OJP Vendor Number: 016003001		
Standard Form 425 OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011							
Paperwork Burden Statement According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503							

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019	Page of 1 1
--	--	----------------

3. Recipient Organization (Name and complete address including Zip code)
 Maine State Police
 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042

4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
-------------------------------------	------------------------------	---	---	--

8. Project/Grant Period From: (Month, Day, Year) 04/01/2009	To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date 03/31/2010
--	--------------------------------------	---

10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants also use FFR Attachment):

a. Cash Receipts	
b. Cash Disbursements	
c. Cash on Hand (line a minus b)	

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$ 455,239.00
e. Federal share of expenditures	\$ 521.92
f. Federal share of unliquidated obligations	\$ 0.00
g. Total Federal share (sum of lines e and f)	\$ 521.92
h. Unobligated balance of Federal funds (line d minus g)	\$ 454,717.08

Recipient Share:

i. Total recipient share required	\$ 0.00
j. Recipient share of expenditures	\$ 0.00
k. Remaining recipient share to be provided (line i minus j)	\$ 0.00

Program Income:

l. Total Federal program income earned	\$ 0.00
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	\$ 0.00
o. Unexpended program income (line l minus line m or line n)	\$ 0.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
		Not Applicable					
g. Totals:							

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official [Redacted] Staff Accountant <i>bb</i>	c. Telephone (Area code, number and extension) [Redacted] <i>bb</i>
b. Signature of Authorized Certifying Official	d. Email address [Redacted]@maine.gov <i>1</i>
e. Date Report Submitted (Month, Day, Year) 04/12/2010	

14. Agency use only:
 OJP Vendor Number: 016003001

Standard Form 425 OMB
 Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503

FEDERAL FINANCIAL REPORT
(Follow form instruction)

1. Federal Agency and Organizational Element to Which Report is Submitted U.S. Department of Justice		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 2009-SN-B9-K019		Page 1 of 1			
3. Recipient Organization (Name and complete address including Zip code) Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042							
4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual			
8. Project/Grant Period From: (Month, Day, Year) 04/01/2009		To: (Month, Day, Year) 03/31/2013		8. Reporting Period End Date 12/31/2009			
10. Transactions			Cumulative				
(Use lines a-c for single or multiple grant reporting)							
Federal Cash (To report multiple grants also use FFR Attachment):							
a. Cash Receipts							
b. Cash Disbursements							
c. Cash on Hand (line a minus b)							
(Use lines d-o for single grant reporting)							
Federal Expenditures and Unobligated Balance:							
d. Total Federal funds authorized			\$ 455,239.00				
e. Federal share of expenditures			\$ 0.00				
f. Federal share of unliquidated obligations			\$ 0.00				
g. Total Federal share (sum of lines e and f)			\$ 0.00				
h. Unobligated balance of Federal funds (line d minus g)			\$ 455,239.00				
Recipient Share:							
i. Total recipient share required			\$ 0.00				
j. Recipient share of expenditures			\$ 0.00				
k. Remaining recipient share to be provided (line i minus j)			\$ 0.00				
Program Income:							
l. Total Federal program income earned			\$ 0.00				
m. Program income expended in accordance with the deduction alternative							
n. Program income expended in accordance with the addition alternative			\$ 0.00				
o. Unexpended program income (line l minus line m or line n)			\$ 0.00				
11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
	Not Applicable						
					g. Totals:		
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:							
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code Title 18, Section 1001)							
a. Typed or Printed Name and Title of Authorized Certifying Official Staff Accountant bb					c. Telephone (Area code, number and extension) bb		
					d. Email address @maine.gov		
b. Signature of Authorized Certifying Official					e. Date Report Submitted (Month, Day, Year) 03/02/2010		
					14. Agency use only: OJP Vendor Number: 016003001		
Standard Form 425 OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011							
Paperwork Burden Statement According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the office of Management and Budget, Paperwork Reduction Project (03448-0060), Washington, DC 20503							

FINANCIAL STATUS REPORT

(Short Form)

1. Federal Agency and Organizational Element to which Report is Submitted U.S Dept. of Justice Office of Justice Programs (OJP)	2. Grant or Award Number Assigned by OJP 2009-SN-B9-K019	OMB Approval No. 1121-0264 Expires: 01/3/2006	Page 1	of 1 pages		
3. Recipient Organization (Name and complete address, including ZIP code) Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042						
4. Vendor Number 016003001	5. Recipient Internal code or Identifying Number (if any)	6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual			
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) To: (Month, Day, Year) 04/01/2009 03/31/2013		9. Period Covered by this Report From: (Month, Day, Year) To: (Month, Day, Year) 07/01/2009 09/30/2009				
10. Transactions:				I Previously Reported	II This Period	III Cumulative
a. Total outlays				\$0.00	\$0.00	\$0.00
b. Recipient Share of outlays				\$0.00	\$0.00	\$0.00
c. Federal share of outlays				\$0.00	\$0.00	\$0.00
d. Total unliquidated obligations						\$0.00
e. Recipient share of unliquidated obligations						\$0.00
f. Federal share of unliquidated obligations						\$0.00
g. Total Federal share (Sum of Lines c and f)						\$0.00
h. Total Federal funds authorized for this funding period						\$455,239.00
i. Unobligated balance of Federal funds (Line h minus Line g)						\$455,239.00
11. Indirect Expense	a. Type of Rate (place "x" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
	b. Rate 0.00%	c. Base \$0.00	d. Total Amount \$0.00	e. Federal Share \$0.00		
12. Remarks: attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> A. Block/Formula passthrough \$0.00 B. Federal Funds Subgranted \$0.00 </div> <div style="width: 45%;"> PROGRAM INCOME: C. Forfeited \$0.00 D. Other \$0.00 E. Expended \$0.00 F. Unexpended \$0.00 </div> </div>						
13. Certification I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.						
Typed or Printed Name and Title [Redacted] Staff Accountant <i>bb</i>			Telephone (Area code, number and extension) [Redacted] <i>bb</i>			
Signature of Authorized Certifying Official			Date Report Submitted 11/03/2009			

DOJ Standard Form 269a (REV 2002)

Paperwork Reduction Act Notice. Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. You can write to the Office of Justice Programs, US Department of Justice, 810 Seventh Street, NW, Washington, DC 20531.

FINANCIAL STATUS REPORT

(Short Form)

1. Federal Agency and Organizational Element to which Report is Submitted U.S Dept. of Justice Office of Justice Programs (OJP)		2. Grant or Award Number Assigned by OJP 2009-SN-B9-K019		OMB Approval No. 1121-0264 Expires: 01/3/2006	Page 1	of 1 pages
3. Recipient Organization (Name and complete address, including ZIP code) Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042						
4. Vendor Number 016003001		5. Recipient internal code or Identifying Number (if any)		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) 04/01/2009 To: (Month, Day, Year) 03/31/2013			9. Period Covered by this Report From: (Month, Day, Year) 04/01/2009 To: (Month, Day, Year) 06/30/2009			
10. Transactions:		I Previously Reported	II This Period	III Cumulative		
a. Total outlays		\$0.00	\$0.00	\$0.00		
b. Recipient Share of outlays		\$0.00	\$0.00	\$0.00		
c. Federal share of outlays		\$0.00	\$0.00	\$0.00		
d. Total unliquidated obligations				\$0.00		
e. Recipient share of unliquidated obligations				\$0.00		
f. Federal share of unliquidated obligations				\$0.00		
g. Total Federal share (Sum of Lines c and f)				\$0.00		
h. Total Federal funds authorized for this funding period				\$455,239.00		
i. Unobligated balance of Federal funds (Line h minus Line g)				\$455,239.00		
11. Indirect Expense		a. Type of Rate (place "x" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed				
b. Rate 0.00%		c. Base \$0.00	d. Total Amount \$0.00		e. Federal Share \$0.00	
12. Remarks: attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.						
			PROGRAM INCOME:			
A. Block/Formula passthrough		\$0.00	C. Forfeit		\$0.00	D. Other
B. Federal Funds Subgranted		\$0.00	E. Expended		\$0.00	F. Unexpended
					\$0.00	\$0.00
13. Certification I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.						
Typed or Printed Name and Title STAFF ACCOUNTANT bb					Telephone (Area code, number and extension) bb	
Signature of Authorized Certifying Official					Date Report Submitted 08/04/2009	

DOJ Standard Form 269a (REV 2002)

Paperwork Reduction Act Notice. Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. You can write to the Office of Justice Programs, US Department of Justice, 810 Seventh Street, NW, Washington, DC 20531.



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 3

Details				
*Required				
1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>				
4a. DUNS Number <i>809045958</i>	4b. EIN <i>01-6000001</i>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report <i>No</i>	*7. Basis of Accounting <i>Accrual</i>
8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i>		To: (Month, Day, Year) <i>03/31/2013</i>	9. Reporting Period End Date (Month, Day, Year) <i>12/31/2009</i>	
10. Transactions				
	Previously Reported	This Period	Cumulative	
(Use lines a-c for single or multiple grant reporting)				
Federal Cash (To report multiple grants, also use FFR Attachment):				
a. Cash Receipts				
b. Cash Disbursements				
c. Cash on Hand (line a minus b)				
(Use lines d-o for single grant reporting)				
Federal Expenditures and Unobligated Balance:				
d. Total Federal funds authorized				\$455239.00
*e. Federal share of expenditures	\$0.00	\$0.00		\$0.00
*f. Federal share of unliquidated obligations				\$0.00
g. Total Federal share (sum of lines e and f)				\$0.00
h. Unobligated balance of Federal funds (line d minus g)				\$455239.00
Recipient Share:				
*i. Total recipient share required				\$0.00
j. Recipient share of expenditures	\$0.00	\$0.00		\$0.00
k. Remaining recipient share to be provided (line i minus j)				\$0.00
Program Income:				
l. Total Federal program income earned				\$0.00

m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
*12. Remarks:						
*13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)						
*Prefix		Mrs.				
Prefix (Other)						
*First Name		[REDACTED] <i>bp</i>				
Middle Initial		[REDACTED]				
*Last Name		[REDACTED]				
Suffix						
Suffix (Other)						
*Title		Staff Accountant				
*Telephone (Area code, number and extension)		[REDACTED]				
*E-mail Address		[REDACTED]@maine.gov				
Date Report Last Submitted		03/02/2010				
14. Agency use only						
OJP Vendor Number		016003001				
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	03/02/2010 1:46 PM	View Note	<i>bp</i>	
Submitted	Financial Point of Contact External Role	[REDACTED]	01/29/2010 3:02 PM	View Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	01/29/2010 2:57 PM	View Note		
Draft	Financial Point of Contact External Role	[REDACTED]	01/29/2010 2:57 PM	View Note		
On 01.06.2010 the Office of Justice Programs became aware of a system issue with the Financial Status Reporting module within its Grant Management System. The SF-425 module, deployed in November 2009, included code that allowed SF-425 forms to be misdirected when two users were performing concurrent executions in the FFR module. The misdirected form was forwarded to a user's GMS file that was not associated with the award.						



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

Home Process Reports Search Options

Go to Default Home

Home > Financial Status Report Search > FSR Search Results > Details

Go to Dashboard

Logout

Reports

Read Only

Back to Search Results

Award Number: 2009-SN-B9-K019

Report Number: 4

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Details				
*Required				
1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>				
4a. DUNS Number	4b. EIN	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report	*7. Basis of Accounting
<i>809045958</i>	<i>01-6000001</i>		<i>No</i>	<i>Accrual</i>
8. Project/Grant Period From: (Month, Day, Year)		To: (Month, Day, Year)	9. Reporting Period End Date (Month, Day, Year)	
<i>04/01/2009</i>		<i>03/31/2013</i>	<i>03/31/2010</i>	
10. Transactions				
		Previously Reported	This Period	Cumulative
(Use lines a-c for single or multiple grant reporting)				
Federal Cash (To report multiple grants, also use FFR Attachment):				
a. Cash Receipts				
b. Cash Disbursements				
c. Cash on Hand (line a minus b)				
(Use lines d-o for single grant reporting)				
Federal Expenditures and Unobligated Balance:				
d. Total Federal funds authorized				\$455239.00
*e. Federal share of expenditures		\$0.00	\$521.92	\$521.92
*f. Federal share of unliquidated obligations				\$0.00
g. Total Federal share (sum of lines e and f)				\$521.92
h. Unobligated balance of Federal funds (line d minus g)				\$454717.08
Recipient Share:				
*i. Total recipient share required				\$0.00
j. Recipient share of expenditures		\$0.00	\$0.00	\$0.00
k. Remaining recipient share to be provided (line i minus j)				\$0.00
Program Income:				
l. Total Federal program income earned				\$0.00

m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
12. Remarks:						
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)						
*Prefix	Mr.					
Prefix (Other)						
*First Name	[REDACTED] <i>bb</i>					
Middle Initial	[REDACTED]					
*Last Name	[REDACTED]					
Suffix						
Suffix (Other)						
*Title	Staff Accountant					
*Telephone (Area code, number and extension)	[REDACTED]					
*E-mail Address	[REDACTED]@maine.gov					
Date Report Last Submitted	04/12/2010					
14. Agency use only						
OJP Vendor Number	016003001					
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	04/12/2010 1:22 PM	View Note		
Draft	Financial Point of Contact External Role	[REDACTED]	04/12/2010 1:22 PM	View Note		

bb



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 5

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Details				
*Required				
<div style="display: flex; justify-content: space-between;"> ? </div>				
1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>				
4a. DUNS Number <i>809045958</i>	4b. EIN <i>01-6000001</i>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report <i>No</i>	*7. Basis of Accounting <i>Accrual</i>
8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i>		To: (Month, Day, Year) <i>03/31/2013</i>	9. Reporting Period End Date (Month, Day, Year) <i>06/30/2010</i>	
10. Transactions				
	Previously Reported	This Period	Cumulative	
(Use lines a-c for single or multiple grant reporting)				
Federal Cash (To report multiple grants, also use FFR Attachment):				
a. Cash Receipts				
b. Cash Disbursements				
c. Cash on Hand (line a minus b)				
(Use lines d-o for single grant reporting)				
Federal Expenditures and Unobligated Balance:				
d. Total Federal funds authorized			\$455239.00	
*e. Federal share of expenditures	\$521.92	\$36847.93	\$37369.85	
*f. Federal share of unliquidated obligations			\$17654.40	
g. Total Federal share (sum of lines e and f)			\$55024.25	
h. Unobligated balance of Federal funds (line d minus g)			\$400214.75	
Recipient Share:				
*i. Total recipient share required			\$0.00	
j. Recipient share of expenditures	\$0.00	\$	\$0.00	
k. Remaining recipient share to be provided (line i minus j)			\$0.00	
Program Income:				
l. Total Federal program income earned			\$0.00	

m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
12. Remarks:						
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)						
*Prefix	Mr.					
Prefix (Other)						
*First Name	[REDACTED]					
Middle Initial	[REDACTED]					
*Last Name	[REDACTED]					
Suffix						
Suffix (Other)						
*Title	Staff Accountant					
*Telephone (Area code, number and extension)	[REDACTED]					
*E-mail Address	[REDACTED]@maine.gov					
Date Report Last Submitted	10/25/2010					
14. Agency use only						
OJP Vendor Number	016003001					
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	10/25/2010 1:29 PM	View Note		
Draft	Financial Point of Contact External Role	[REDACTED]	10/25/2010 1:29 PM	View Note		

df



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 6

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Details

*Required



1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>				
4a. DUNS Number <i>809045958</i>	4b. EIN <i>01-6000001</i>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report <i>No</i>	*7. Basis of Accounting <i>Accrual</i>
8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i>		To: (Month, Day, Year) <i>03/31/2013</i>	9. Reporting Period End Date (Month, Day, Year) <i>09/30/2010</i>	

10. Transactions

	Previously Reported	This Period	Cumulative
--	---------------------	-------------	------------

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants, also use FFR Attachment):

a. Cash Receipts			
b. Cash Disbursements			
c. Cash on Hand (line a minus b)			

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized			\$455239.00
*e. Federal share of expenditures	\$37369.85	\$37510.33	\$74880.18
*f. Federal share of unliquidated obligations			\$0.00
g. Total Federal share (sum of lines e and f)			\$74880.18
h. Unobligated balance of Federal funds (line d minus g)			\$380358.82

Recipient Share:

*i. Total recipient share required			\$0.00
j. Recipient share of expenditures	\$0.00	\$0.00	\$0.00
k. Remaining recipient share to be provided (line l minus j)			\$0.00

Program Income:

l. Total Federal program income earned			\$0.00
--	--	--	--------

m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
12. Remarks:						
<p>13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)</p>						
*Prefix	Mr.					
Prefix (Other)						
*First Name	[REDACTED] <i>bb</i>					
Middle Initial	[REDACTED]					
*Last Name	[REDACTED]					
Suffix						
Suffix (Other)						
*Title	Staff Accountant					
*Telephone (Area code, number and extension)	[REDACTED]					
*E-mail Address	[REDACTED]@maine.gov					
Date Report Last Submitted	07/23/2010					
14. Agency use only						
OJP Vendor Number	016003001					
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	07/23/2010 2:06 PM	View Note	<i>bb</i>	
Draft	Financial Point of Contact External Role	[REDACTED]	07/23/2010 2:05 PM	View Note		



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 7

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Details				
*Required				
<div style="display: flex; justify-content: space-between;"> 1. Federal Agency and Organizational Element to Which Report is Submitted 2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) </div>				
U.S. Department of Justice		2009-SN-B9-K019		
3. Recipient Organization (Name and complete address including Zip code)				
Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042				
4a. DUNS Number	4b. EIN	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report	*7. Basis of Accounting
809045958	01-6000001		No	Accrual
8. Project/Grant Period From: (Month, Day, Year)		To: (Month, Day, Year)	9. Reporting Period End Date (Month, Day, Year)	
04/01/2009		03/31/2013	12/31/2010	
10. Transactions				
	Previously Reported	This Period	Cumulative	
(Use lines a-c for single or multiple grant reporting)				
Federal Cash (To report multiple grants, also use FFR Attachment):				
a. Cash Receipts				
b. Cash Disbursements				
c. Cash on Hand (line a minus b)				
(Use lines d-o for single grant reporting)				
Federal Expenditures and Unobligated Balance:				
d. Total Federal funds authorized			\$455239.00	
*e. Federal share of expenditures	\$74880.18	\$35771.86	\$110652.04	
*f. Federal share of unliquidated obligations			\$0.00	
g. Total Federal share (sum of lines e and f)			\$110652.04	
h. Unobligated balance of Federal funds (line d minus g)			\$344586.96	
Recipient Share:				
*i. Total recipient share required			\$0.00	
j. Recipient share of expenditures	\$0.00	\$0.00	\$0.00	
k. Remaining recipient share to be provided (line i minus j)			\$0.00	
Program Income:				
l. Total Federal program income earned			\$0.00	

m. Program income expended in accordance with the deduction alternative						
n. Program Income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
*12. Remarks:						
<p>*13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)</p>						
*Prefix	Mr.					
Prefix (Other)						
*First Name	[REDACTED]					
Middle Initial	[REDACTED]					
*Last Name	[REDACTED]					
Suffix						
Suffix (Other)						
*Title	Staff Accountant					
*Telephone (Area code, number and extension)	[REDACTED]					
*E-mail Address	[REDACTED]@maine.gov					
Date Report Last Submitted	01/27/2011					
14. Agency use only						
OJP Vendor Number	016003001					
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	01/27/2011 1:41 PM	View Note		
Draft	Financial Point of Contact External Role	[REDACTED]	01/27/2011 1:41 PM	View Note		

bl



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 8

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Details																		
*Required																		
<div style="border: 1px solid black; padding: 5px;"> ? <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"> 1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i> </td> <td style="width: 50%; padding: 5px;"> 2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i> </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> 3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i> </td> </tr> <tr> <td style="width: 15%; padding: 5px;"> 4a. DUNS Number <i>809045958</i> </td> <td style="width: 15%; padding: 5px;"> 4b. EIN <i>01-6000001</i> </td> <td style="width: 30%; padding: 5px;"> 5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment) </td> <td style="width: 10%; padding: 5px;"> *6. Final Report <i>No</i> </td> <td style="width: 25%; padding: 5px;"> *7. Basis of Accounting <i>Accrual</i> </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> 8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i> </td> <td style="padding: 5px;"> To: (Month, Day, Year) <i>03/31/2013</i> </td> <td colspan="2" style="padding: 5px;"> 9. Reporting Period End Date (Month, Day, Year) <i>03/31/2011</i> </td> </tr> </table> </div>					1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>	3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>		4a. DUNS Number <i>809045958</i>	4b. EIN <i>01-6000001</i>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report <i>No</i>	*7. Basis of Accounting <i>Accrual</i>	8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i>		To: (Month, Day, Year) <i>03/31/2013</i>	9. Reporting Period End Date (Month, Day, Year) <i>03/31/2011</i>	
1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>																	
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>																		
4a. DUNS Number <i>809045958</i>	4b. EIN <i>01-6000001</i>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report <i>No</i>	*7. Basis of Accounting <i>Accrual</i>														
8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i>		To: (Month, Day, Year) <i>03/31/2013</i>	9. Reporting Period End Date (Month, Day, Year) <i>03/31/2011</i>															
? 10. Transactions																		
	Previously Reported	This Period	Cumulative															
(Use lines a-c for single or multiple grant reporting)																		
Federal Cash (To report multiple grants, also use FFR Attachment):																		
a. Cash Receipts																		
b. Cash Disbursements																		
c. Cash on Hand (line a minus b)																		
(Use lines d-o for single grant reporting)																		
Federal Expenditures and Unobligated Balance:																		
d. Total Federal funds authorized			\$455239.00															
*e. Federal share of expenditures	\$110652.04	\$77931.93	\$188583.97															
*f. Federal share of unliquidated obligations			\$0.00															
g. Total Federal share (sum of lines e and f)			\$188583.97															
h. Unobligated balance of Federal funds (line d minus g)			\$266655.03															
Recipient Share:																		
*i. Total recipient share required			\$0.00															
j. Recipient share of expenditures	\$0.00	\$0.00	\$0.00															
k. Remaining recipient share to be provided (line i minus j)			\$0.00															
Program Income:																		
l. Total Federal program income earned			\$0.00															

m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
*12. Remarks:						
*13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)						
*Prefix	Mr.					
Prefix (Other)						
*First Name	[REDACTED]					
Middle Initial	[REDACTED]					
*Last Name	[REDACTED]					
Suffix						
Suffix (Other)						
*Title	Staff Accountant					
*Telephone (Area code, number and extension)	[REDACTED]					
*E-mail Address	[REDACTED]@maine.gov					
Date Report Last Submitted	04/13/2011					
14. Agency use only						
OJP Vendor Number	016003001					
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	04/13/2011 8:41 AM	View Note		
Draft	Financial Point of Contact External Role	[REDACTED]	04/13/2011 8:41 AM	View Note		

b6



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) . [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 9

Details				
*Required				
1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>				
4a. DUNS Number <i>809045958</i>	4b. EIN <i>01-6000001</i>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report <i>No</i>	*7. Basis of Accounting <i>Accrual</i>
8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i>		To: (Month, Day, Year) <i>03/31/2013</i>	9. Reporting Period End Date (Month, Day, Year) <i>06/30/2011</i>	
10. Transactions				
		Previously Reported	This Period	Cumulative
(Use lines a-c for single or multiple grant reporting)				
Federal Cash (To report multiple grants, also use FFR Attachment):				
a. Cash Receipts				
b. Cash Disbursements				
c. Cash on Hand (line a minus b)				
(Use lines d-o for single grant reporting)				
Federal Expenditures and Unobligated Balance:				
d. Total Federal funds authorized				\$455239.00
*e. Federal share of expenditures	\$188583.97	\$40547.24		\$229131.21
*f. Federal share of unliquidated obligations				\$0.00
g. Total Federal share (sum of lines e and f)				\$229131.21
h. Unobligated balance of Federal funds (line d minus g)				\$226107.79
Recipient Share:				
*i. Total recipient share required				\$0.00
j. Recipient share of expenditures	\$0.00	\$0.00		\$0.00
k. Remaining recipient share to be provided (line i minus j)				\$0.00
Program Income:				
l. Total Federal program income earned				\$0.00

m. Program income expended in accordance with the deduction alternative			
n. Program income expended in accordance with the addition alternative			\$0.00
o. Unexpended program income (line l minus line m or line n)			\$0.00

***11. Indirect Expense**

a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00

12. Remarks:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

*Prefix	Mr.
Prefix (Other)	
*First Name	[REDACTED]
Middle Initial	[REDACTED]
*Last Name	[REDACTED]
Suffix	
Suffix (Other)	
*Title	Staff Accountant
*Telephone (Area code, number and extension)	[REDACTED]
*E-mail Address	[REDACTED]@maine.gov
Date Report Last Submitted	07/08/2011
14. Agency use only	
OJP Vendor Number	016003001

Attachments:

None

Review Audit Trail:

Description	Role	User	Timestamp	Note
Submitted	Financial Point of Contact External Role	[REDACTED]	07/08/2011 8:03 AM	View Note
Draft	Financial Point of Contact External Role	[REDACTED]	07/08/2011 8:03 AM	View Note

bb



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 10

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Details

*Required



1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) <i>2009-SN-B9-K019</i>		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>				
4a. DUNS Number <i>809045958</i>	4b. EIN <i>01-6000001</i>	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report <i>No</i>	*7. Basis of Accounting <i>Accrual</i>
8. Project/Grant Period From: (Month, Day, Year) <i>04/01/2009</i>		To: (Month, Day, Year) <i>03/31/2013</i>	9. Reporting Period End Date (Month, Day, Year) <i>09/30/2011</i>	

10. Transactions

	Previously Reported	This Period	Cumulative
(Use lines a-c for single or multiple grant reporting)			
Federal Cash (To report multiple grants, also use FFR Attachment):			
a. Cash Receipts			
b. Cash Disbursements			
c. Cash on Hand (line a minus b)			
(Use lines d-o for single grant reporting)			
Federal Expenditures and Unobligated Balance:			
d. Total Federal funds authorized			\$455239.00
*e. Federal share of expenditures	\$229131.21	\$34219.95	\$263351.16
*f. Federal share of unliquidated obligations			\$0.00
g. Total Federal share (sum of lines e and f)			\$263351.16
h. Unobligated balance of Federal funds (line d minus g)			\$191887.84
Recipient Share:			
*i. Total recipient share required			\$0.00
j. Recipient share of expenditures	\$0.00	\$0.00	\$0.00
k. Remaining recipient share to be provided (line i minus j)			\$0.00
Program Income:			
l. Total Federal program income earned			\$0.00

m. Program income expended in accordance with the deduction alternative			
n. Program income expended in accordance with the addition alternative			\$0.00
o. Unexpended program income (line l minus line m or line n)			\$0.00

***11. Indirect Expense**

a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00

12. Remarks:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

*Prefix	Mr.
Prefix (Other)	
*First Name	[REDACTED]
Middle Initial	[REDACTED]
*Last Name	[REDACTED]
Suffix	
Suffix (Other)	
*Title	Staff Accountant
*Telephone (Area code, number and extension)	[REDACTED]
*E-mail Address	[REDACTED]@maine.gov
Date Report Last Submitted	10/26/2011
14. Agency use only	
OJP Vendor Number	016003001

Attachments:

None

Review Audit Trail:

Description	Role	User	Timestamp	Note
Submitted	Financial Point of Contact External Role	[REDACTED]	10/26/2011 1:52 PM	View Note
Draft	Financial Point of Contact External Role	[REDACTED]	10/26/2011 1:51 PM	View Note

bb



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > [Details](#)

Financial Status Reports

[Back to Search Results](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 11

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Details				
*Required				
1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) 2009-SN-B9-K019		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333-0042</i>				
4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report No	*7. Basis of Accounting Accrual
8. Project/Grant Period From: (Month, Day, Year) 04/01/2009		To: (Month, Day, Year) 03/31/2013		9. Reporting Period End Date (Month, Day, Year) 12/31/2011
10. Transactions				
		Previously Reported	This Period	Cumulative
(Use lines a-c for single or multiple grant reporting)				
Federal Cash (To report multiple grants, also use FFR Attachment):				
a. Cash Receipts				
b. Cash Disbursements				
c. Cash on Hand (line a minus b)				
(Use lines d-o for single grant reporting)				
Federal Expenditures and Unobligated Balance:				
d. Total Federal funds authorized				\$455239.00
*e. Federal share of expenditures		\$263351.16	\$48572.10	\$311923.26
*f. Federal share of unliquidated obligations				\$0.00
g. Total Federal share (sum of lines e and f)				\$311923.26
h. Unobligated balance of Federal funds (line d minus g)				\$143315.74
Recipient Share:				
*i. Total recipient share required				\$0.00
j. Recipient share of expenditures		\$0.00	\$0.00	\$0.00
k. Remaining recipient share to be provided (line i minus j)				\$0.00
Program Income:				
l. Total Federal program income earned				\$0.00

m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
12. Remarks:						
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)						
*Prefix	Mr.					
Prefix (Other)						
*First Name	[REDACTED]					
Middle Initial	[REDACTED]					
*Last Name	[REDACTED]					
Suffix						
Suffix (Other)						
*Title	Staff Accountant					
*Telephone (Area code, number and extension)	[REDACTED]					
*E-mail Address	[REDACTED]@maine.gov					
Date Report Last Submitted	01/10/2012					
14. Agency use only						
OJP Vendor Number	016003001					
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	01/10/2012 10:55 AM	View Note		
Draft	Financial Point of Contact External Role	[REDACTED]	01/10/2012 10:55 AM	View Note		

66



U.S. Department of Justice
Office of Justice Programs



Welcome, Jeffrey Gersh

Role: GMS Read-Only

[Home](#) [Process](#) [Reports](#) [Search](#) [Options](#)

[Home](#) > [Financial Status Report Search](#) > [FSR Search Results](#) > **Details**

Financial Status Reports

[Back to Search Results](#)

FSR Details

[View Notes](#)

[View Contacts](#)

[Previously Submitted Reports](#)

Read Only

Award Number: 2009-SN-B9-K019

Report Number: 12

Details				
*Required				
1. Federal Agency and Organizational Element to Which Report is Submitted <i>U.S. Department of Justice</i>		2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR attachment) 2009-SN-B9-K019		
3. Recipient Organization (Name and complete address including Zip code) <i>Maine State Police 45 Commerce Drive State House Station 42 Augusta, ME 04333 -0042</i>				
4a. DUNS Number 809045958	4b. EIN 01-6000001	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR attachment)	*6. Final Report No	*7. Basis of Accounting Accrual
8. Project/Grant Period From: (Month, Day, Year) 04/01/2009		To: (Month, Day, Year) 03/31/2013	9. Reporting Period End Date (Month, Day, Year) 03/31/2012	
10. Transactions				
		Previously Reported	This Period	Cumulative
(Use lines a-c for single or multiple grant reporting)				
Federal Cash (To report multiple grants, also use FFR Attachment):				
a. Cash Receipts				
b. Cash Disbursements				
c. Cash on Hand (line a minus b)				
(Use lines d-o for single grant reporting)				
Federal Expenditures and Unobligated Balance:				
d. Total Federal funds authorized				\$455239.00
*e. Federal share of expenditures	\$311923.26	\$23217.36		\$335140.62
*f. Federal share of unliquidated obligations				\$0.00
g. Total Federal share (sum of lines e and f)				\$335140.62
h. Unobligated balance of Federal funds (line d minus g)				\$120098.38
Recipient Share:				
*i. Total recipient share required				\$0.00
j. Recipient share of expenditures	\$0.00	\$0.00		\$0.00
k. Remaining recipient share to be provided (line i minus j)				\$0.00
Program Income:				
l. Total Federal program income earned				\$0.00

m. Program income expended in accordance with the deduction alternative						
n. Program income expended in accordance with the addition alternative				\$0.00		
o. Unexpended program income (line l minus line m or line n)				\$0.00		
*11. Indirect Expense						
a. Type of Rate	b. Rate	c. Period		d. Base	e. Amount Charged	f. Federal Share
		From	To			
	%			\$	\$	\$
	%			\$	\$	\$
g. Totals					\$0.00	\$0.00
12. Remarks:						
13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)						
*Prefix	Mr.					
Prefix (Other)						
*First Name	[REDACTED]					
Middle Initial	[REDACTED]					
*Last Name	[REDACTED]					
Suffix						
Suffix (Other)						
*Title	Staff Accountant					
*Telephone (Area code, number and extension)	[REDACTED]					
*E-mail Address	[REDACTED]@maine.gov					
Date Report Last Submitted	04/23/2012					
14. Agency use only						
OJP Vendor Number	016003001					
Attachments:						
None						
Review Audit Trail:						
Description	Role	User	Timestamp	Note		
Submitted	Financial Point of Contact External Role	[REDACTED]	04/23/2012 1:26 PM	View Note		
Draft	Financial Point of Contact External Role	[REDACTED]	04/23/2012 1:26 PM	View Note		

b6