

Snowmobile Safety Enforcement Grant Program Payment Request Form

Project Number: (on the contract, B#####) 72227	Local Sponsor: (This is You, the Grant recipient agency) Roseau County Sheriff	Project Name: Snowmobile Safety Enforcement Grant Program, 2014-15
Request Number <u> 2 </u> Period for which funds are being requested: From: <u> 7/ 1 / 14 </u> To: <u> 6 / 30/ 15 </u> Amount of Request \$ <u> 794.67 </u>	Address for Payment: (Where does DNR send the check?) Roseau County Sheriff 604 5th AV SW Roseau, MN 56751 I certify that I am the individual authorized to request funds and that all costs reported are in accordance with the grant agreement. <div style="text-align: center;">  _____ Signature Date </div> <div style="text-align: center;"> Steve Gust Sheriff _____ Name Title </div> Phone Number: <u> 218-463-1421 </u>	
Remarks:		

For Department Use Only

I certify that the goods and/or materials covered by this claim have been inspected and received or the services have been preformed and are in accordance with the grant agreement, and payment therefore is recommended. Payment approved in the amount of \$ _____ By _____ Date _____	FY	Vendor Number (9)		
	Dept	Invoice # (20)		
	R29	P.O. #	Line #	Object #
	Payment Amount:			Transaction Date/No.
				Dept. Auth. Signature

**SNOWMOBILE SAFETY ENFORCEMENT GRANT PROGRAM
PARTICIPANT COMPLETION REPORT**
Program Years 2014-15

Agency: Roseau County Sheriff's Office	Date: 6/24/15
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1. OPERATIONS REPORT

1. Personnel

SSE Safety Enforcement Hours Worked by Agency Officers	30
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2. Off-Highway Vehicle Enforcement

a. Public complaints (SSE Related)	0
b. Arrests/Summons (SSE Related)	0
c. Number of Alcohol Related Arrests (DWI, Reckless & Careless)	0
d. Number of Illegal Operation Arrests (Speed & Operate on Roadway)	0

3. Off-Highway Vehicle Accidents

a. Number of Non-fatal SSE Accidents Reported to Your Agency	2
b. Number of Fatal SSE Accidents Reported to Your Agency	0

4. Cooperative Activities

- a. Include a narrative on the Snowmobile Training and Education Projects/Efforts that your Agency accomplished or participated in during this fiscal year.

Roseau County Deputies worked with area conservation officers to provide training and education.

- b. Include a narrative on your agency's participation in DNR Snowmobile Safety Enforcement activities during the past fiscal year. This includes participation in training classes, and collaboration with local Conservation Officers.

Officers patrolled trails and highways throughout Roseau County this past year. We experienced less snowfall this year, making it difficult to patrol as frequently as years past. Time was spent patrolling various townships such as Stafford, Stokes, Skagen, Barnett and Hereim. Particular focus was spent on Malung Township as we had received complaints/calls regarding possible criminal activity at the Malung School, rink and warming house.

2. FISCAL REPORT
 GROUP 1 PERSONNEL

Personnel	Number of Officers	Agency Funds	State Funds	Total Cost
Full -Time				
Part -Time	2		\$740.59	\$740.59
Sub-Total				\$740.59

GROUP 2 SUPPLIES AND EXPENSES

Itemized Expenses (Itemized)	Agency Funds	State Funds	Total Cost
Oil/fuel for snowmobiles		\$54.08	\$54.08
Sub-Total			\$54.08

GROUP 3 EQUIPMENT

Equipment (Itemized)	Agency Funds	State Funds	Total Cost
Sub-Total			

GROUP 4 TOTAL GRANT FUNDS

	Agency Funds	State Funds*	Total Cost
Grant Total Costs		\$794.67	\$794.67

* Total of State Funds should equal Amount of Payment on Agreement.
 Unexpended Funds will not be reimbursed. Keep a copy of this report for your records.

This is to certify that the State Funds requested were used only for the purposes set forth in Laws of Minnesota 2013, Chapter 114, Article 3, Section 4 Subdivision 7 and the information contained in this form is correct to the best of my knowledge.

Signature:

AGENCY ADMINISTRATOR: 	TELEPHONE NUMBER 218-463-1421
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ROSEAU COUNTY

ACCOUNT ACTIVITY REPORT

From: 07/01/2014 Thru: 06/30/2015

JOHN
6/24/2015 3:32:59PM
Fund 01 - Revenue
DEPT 211 - Snowmobile Safety Enforcement

SC Type	Vendor	Month	G/L	Receipt/Warrant Number	Date	Seq #	Amount	Description	Invoice Number	Accr Cd	R1R2 Basis
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PROGRAM 000

RE	RE	STATE OF MINNESOTA	07/2014	13400	07/28/2014	222	817.07	SNOWMOBILE GRANT CONTRACT 7222			1
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01-211-000-0000-5361	- State-Grants			Total			817.07-				YTD:
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01-211-000-0000-6101	- Salaries & Wages										
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PA JE		01/2015	9082	01/23/2015	111		217.88	PRCOD-C,PERIOD-2,FUND-1			1
PA JE		02/2015	9124	02/06/2015	111		217.88	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9248	03/06/2015	111		93.38	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9315	03/20/2015	111		93.38	PRCOD-C,PERIOD-2,FUND-1			1
			Total				622.52				YTD:

01-211-000-0000-6163	- Pera County Share										
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PA JE		01/2015	9082	01/23/2015	111		29.88	PRCOD-C,PERIOD-2,FUND-1			1
PA JE		02/2015	9124	02/06/2015	111		26.27	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9248	03/06/2015	111		7.00	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9315	03/20/2015	111		7.00	PRCOD-C,PERIOD-2,FUND-1			1
			Total				70.15				YTD:

01-211-000-0000-6175	- FICA County Share										
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PA JE		01/2015	9082	01/23/2015	111		13.51	PRCOD-C,PERIOD-2,FUND-1			1
PA JE		02/2015	9124	02/06/2015	111		13.76	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9248	03/06/2015	111		5.79	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9315	03/20/2015	111		5.79	PRCOD-C,PERIOD-2,FUND-1			1
			Total				38.85				YTD:

01-211-000-0000-6176	- Medicare Co Share										
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PA JE		01/2015	9082	01/23/2015	111		3.16	PRCOD-C,PERIOD-2,FUND-1			1
PA JE		02/2015	9124	02/06/2015	111		3.21	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9248	03/06/2015	111		1.35	PRCOD-C,PERIOD-1,FUND-1			1
PA JE		03/2015	9315	03/20/2015	111		1.35	PRCOD-C,PERIOD-2,FUND-1			1
			Total				9.07				YTD:

01-211-000-0000-6801	- Misc Expense										
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JE JE		06/2015	9679	06/30/2015	900		5.03	MOVE SNOWMOBILE GAS FROM 201			1
JE JE		06/2015	9679	06/30/2015	900		8.58	MOVE SNOWMOBILE GAS FROM 201			1
JE JE		06/2015	9679	06/30/2015	900		13.85	MOVE SNOWMOBILE GAS FROM 201			1
JE JE		06/2015	9679	06/30/2015	900		11.37	MOVE SNOWMOBILE GAS FROM 201			1
JE JE		06/2015	9679	06/30/2015	900		15.25	MOVE SNOWMOBILE GAS FROM 201			1
			Total				54.08				YTD:

01-211-000-0000-6801	- Misc Expense										
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PROGRAM 000 Total							22.40-					
DEPT 211 - Snowmobile Safety Enforcement Total							22.40-					
Fund 1 - Revenue Total							22.40-					

JOHN

6/24/2015 3:32:59PM

Fund 01 - Revenue

DEPT 211 - Snowmobile Safety Enforcement

Tran G/L

SC Type Vendor Month

22 Transactions 6 Accounts

ROSEAU COUNTY

ACCOUNT ACTIVITY REPORT

From: 07/01/2014 Thru: 06/30/2015
Report Basis: 1



Receipt/Warrant Number	Date	Seq #	Amount	Description	Invoice Number	Accr Cd	Basis
Final Total				22.40-			R1R2



ROSEAU COUNTY SHERIFF'S OFFICE
OFFICER DAILY REPORT
SNOWMOBILE

First Officer: Allen Mekash # 1979 Date: 03/02 20 15

Second Officer: _____ # _____

On Duty From: 11:55 to _____ Total Hours: _____

~~Vehicle~~ Odometer Reading Start: 955 Finish: 1011 Total Miles: 56

Gas: \$ 15.25 Gallons: 5.367 Oil: _____ Supplies: _____

Snowmobile Odometer Reading Start: 955 Finish: 1011 Total Miles: 56

Gas: \$ 15.25 Gallons: 5.367 Oil: _____ Supplies: _____

LOG OF ACTIVITIES

START TIME	STOP TIME	Activity, Location and Action Taken
		Highways ridden
		Highway 89
		Highway 11
		Co RD 2
		Co RD 3
		Co RD 4
		Townships
		- Jadis
		- Stafford
		- Stokes
		- Skagen
		- Barnett
		- Hereim