

**ANTI-DRUG ABUSE (ADA) ENFORCEMENT PROGRAM  
FISCAL YEAR 2009/10 PROGRESS REPORT**

California Emergency Management Agency (Cal EMA), Public Safety and Victim Services Programs, 3650 Schriever Avenue, Mather, CA 95655-4203

Following the instructions, please provide the information as indicated. **Do not provide any confidential information, as this is a public document.** Retain a copy for your records, email a copy of the completed report to your Program Specialist, and mail the signed original report to the above address: Attention: Drug Enforcement Unit

PROJECT TITLE	GRANT AWARD #
RECIPIENT County of Alameda	GRANT PERIOD
ADDRESS	REPORT PERIOD 1st & 2nd Quarters (07/01/09-12/31/09)
REPORT PREPARED BY	TITLE
PHONE	EMAIL

PROGRESS REPORT:  
 1<sup>st</sup> Quarter/ 2<sup>nd</sup> Quarter

DUE DATE:  
 February 1, 2010

3<sup>rd</sup> Quarter/ 4<sup>th</sup> Quarter (FINAL)

August 1, 2010

**NARRATIVE AND STATISTICAL REPORT COVERING:**

- 1<sup>st</sup> quarter of grant period (07/01/09-09/30/09) &
- 2<sup>nd</sup> quarter of grant period (10/01/09-12/31/09)
- 3<sup>rd</sup> quarter of grant period (01/01/10-03/31/10) &
- 4<sup>th</sup> quarter of grant period (04/01/10-06/30/10)

**BUDGET**

YES  NO Are grant funds being expended in accordance with the Grant Award Agreement? (If not, please explain)

- 1. Total Grant Award: \$ \_\_\_\_\_
- 2. Total funds expended to date: \$ \_\_\_\_\_
- 3. Total encumbered but not paid for: \$ \_\_\_\_\_
- 4. Total Grant balance: \$ \_\_\_\_\_

I certify that this report is accurate and in accordance with Cal EMA policies and procedures.

SIGNATURE- PROJECT DIRECTOR \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**(For Cal EMA use only)**

- Report accepted as submitted. (see comments)
- Report NOT accepted as submitted. (see comments)

SIGNATURE- PROGRAM SPECIALIST \_\_\_\_\_ DATE \_\_\_\_\_

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**PERSONNEL**

Positions authorized in Grant Award Agreement (Name/Agency/Title/% Grant-Funded must be listed exactly as on the budget pages). Please attach additional pages as needed:

	Name of Staff/Name of Agency	Title	% Grant Funded
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			

YES  NO Have all grant-funded positions been filled?  
If NO, please attach additional pages as needed.

YES  NO Have any of the job duties, as detailed in the Grant Award Agreement, changed?  
If YES, please attach additional pages as needed.

YES  NO Are there any personnel issues which may affect the project objectives and activities?  
If YES, please attach additional pages as needed.

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**EQUIPMENT**

Equipment initially authorized in the Grant Award Agreement should be ordered within the first four months so that it can be placed in service during the grant period (Grant Recipient Handbook Section 2320). If your equipment purchases exceed the space below, please attach additional pages. Please detail any problems encountered in ordering/receiving grant equipment.

YES    NO    N/A   If the Grant Award allows for equipment purchases, has any equipment been purchased? (If YES, please detail below)

	Equipment	Cost	Date Ordered/Received
1.			/
2.			/
3.			/
4.			/
5.			/
6.			/
7.			/
8.			/
9.			/
10.			/
11.			/
12.			/
13.			/
14.			/

**TECHNICAL ASSISTANCE**

To assist the project in appropriate implementation of the grant award (programmatic and/or administrative), technical assistance can be provided by your Program Specialist. Projects may request **Technical Assistance at any time during the grant year.**

YES    NO

Please indicate if technical assistance is needed and why:

## ANTI-DRUG ABUSE (ADA) ENFORCEMENT PROGRAM FISCAL YEAR 2009/10 PROGRESS REPORT

### NARRATIVE (Instructions)

The progress report is the tool used to communicate to Cal EMA on the status of the project during the specified timeframes. Please provide a detailed narrative covering, at a minimum, the following areas for the appropriate reporting period. The information provided on progress reports may be shared with other agencies. Please use as many pages as necessary.

***Do not provide any confidential information as this is a public document.***

### 1<sup>st</sup> & 2<sup>nd</sup> QUARTER PROGRESS REPORT (DUE: FEBRUARY 1, 2010)

- Discuss any delays and/or problems the project has experienced in meeting the terms of the Grant Award Agreement during the applicable reporting period.
- For each component, discuss those activities supporting each objective which are not currently operational.
- For each component, discuss those objectives which have not been implemented, why, and what steps will be taken to complete implementation.
- Discuss the source documentation designed to track the project's statistical information (i.e., each component's tracking format, statistical summary forms, etc.).
- **Discuss, in detail, any significant accomplishments during the 1<sup>st</sup> & 2<sup>nd</sup> quarters (if available, attach pictures, press releases, and news articles showcasing your accomplishments). Please be specific, as this information may be used to compile reports to the legislature.**

### 3<sup>rd</sup> & 4<sup>th</sup> QUARTER/FINAL PROGRESS REPORT (DUE: AUGUST 1, 2010)

- Discuss the impact the project has had on the drug problem identified in the project's problem statement according to the Grant Award Agreement.
- For each component, summarize the activities and accomplishments for the entire grant period (if available, attach press releases and news articles).
- Discuss the source documentation designed to track the project's statistical information (i.e.: each component's tracking format, statistical summary forms, etc.).
- Describe the progress the project has had in meeting the expected objectives.
- **Discuss, in detail, any significant accomplishments during the 3<sup>rd</sup> & 4<sup>th</sup> quarters (if available, attach pictures, press releases, and news articles showcasing your accomplishments). Please be specific, as this information may be used to compile reports to the legislature.**

### STATISTICAL REPORTING FORMS

Attached are statistical reporting forms for each component of the project. Please use these forms to compile statistical data for each quarter. The data must reflect the activities of all personnel (grant funded and non-grant funded) assigned to the project. All data must be supported by source documentation which is to be retained by the grant recipient and made available to Cal EMA upon request. Each statistical report must include the data from any/all previous reports. Compile all quarterly figures in the "total to date" column. Attach additional pages to further clarify the data.

**PROJECT NARRATIVE (please attach additional pages as needed):**

ANTI-DRUG ABUSE (ADA) ENFORCEMENT PROGRAM  
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**LAW ENFORCEMENT COMPONENT 1:**

**GOAL 1:** Reduce the illegal activities of targeted offenders through coordinated law enforcement, prosecution, and probation efforts.

**OBJECTIVE 1:** Conduct special investigations using multi-jurisdictional drug task forces, integrating federal/state/local drug enforcement agencies, prosecution, and probation departments

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
1. Number of investigations initiated:	_____	_____	_____	_____	_____
a. drug-related:	_____	_____	_____	_____	_____
b. meth-related:	_____	_____	_____	_____	_____
2. Number of investigations closed:	_____	_____	_____	_____	_____
a. drug-related:	_____	_____	_____	_____	_____
b. meth-related:	_____	_____	_____	_____	_____
3. Total number of cases where assistance was provided to another agency or team working a drug or meth-related investigation	_____	_____	_____	_____	_____
4. Total number of drug-related searches	_____	_____	_____	_____	_____
a. Number of search warrants issued	_____	_____	_____	_____	_____
b. Number of consent searches	_____	_____	_____	_____	_____
c. Number of probation and parole searches	_____	_____	_____	_____	_____
<b>NOTE: a+b+c must equal #4 above</b>	_____	_____	_____	_____	_____
5. Total number of meth-related searched	_____	_____	_____	_____	_____
a. Number of search warrants issued	_____	_____	_____	_____	_____
b. Number of consent searches	_____	_____	_____	_____	_____
c. Number of probation and parole searches	_____	_____	_____	_____	_____
<b>NOTE: a+b+c must equal #5 above</b>	_____	_____	_____	_____	_____
6. Total Amount of Drugs Seized by Type and Quantity: Report opiates, cocaine and methamphetamine in grams, and list other drugs in dosage units. If reporting a drug not already listed below, list each drug seizure by type and weight measurement used.	_____	_____	_____	_____	_____
a. Powder Cocaine (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
b. Rock Cocaine (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____

**NOTE:** The 3<sup>rd</sup> & 4<sup>th</sup> Quarter/Final Progress Report must include the data from the 1<sup>st</sup> and 2<sup>nd</sup> Quarter Progress Report. Compile all quarterly figures in the "Total to Date" column. Attach additional sheets, if necessary, to further clarify the data.

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	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
c. Crack Cocaine (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
d. Heroin (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
e. Tar Heroin (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
f. Marijuana Plants:	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
g. Processed Marijuana (in pounds):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
h. Hashish (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
i. LSD (tabs):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
j. LSD (liquid, in milliliters):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
k. Ecstasy (pills):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
l. Methamphetamine powder (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
m. Methamphetamine "Ice" (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
n. Meth Solution (in gallons):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
o. Ephedrine (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____

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	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
p. Pseudoephedrine (in grams):	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
q. Specify Type: _____	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
f. Specify Type: _____	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
s. Specify Type: _____	_____	_____	_____	_____	_____
i. Street Value (of above reported seizure amount):	_____	_____	_____	_____	_____
7. Number of clandestine methamphetamine labs <b>discovered</b> :	_____	_____	_____	_____	_____
a. Under 2 ounces:	_____	_____	_____	_____	_____
b. 2.1 ounces – 8 ounces:	_____	_____	_____	_____	_____
c. 8.1 ounces – 1 pound:	_____	_____	_____	_____	_____
d. 1.1 pounds – 9 pounds:	_____	_____	_____	_____	_____
e. 9.1 pounds – 19 pounds:	_____	_____	_____	_____	_____
f. 19.1 pounds - Greater:	_____	_____	_____	_____	_____
<b>NOTE: a+b+c+d+e+f must equal #7 above</b>	_____	_____	_____	_____	_____
8. Total number of WSIN/EPIC/L.A. CLEAR cards submitted for clandestine meth labs <b>discovered</b> :	_____	_____	_____	_____	_____
9. Total number of clandestine meth labs <b>dismantled</b> :	_____	_____	_____	_____	_____
10. Total number of WSIN/EPIC/L.A. CLEAR cards submitted for clandestine meth labs <b>dismantled</b> :	_____	_____	_____	_____	_____
11. Number of other clandestine drug labs <b>discovered</b> :	_____	_____	_____	_____	_____
a. Specify Type: _____	_____	_____	_____	_____	_____
b. Specify Type: _____	_____	_____	_____	_____	_____
c. Specify Type: _____	_____	_____	_____	_____	_____
d. Specify Type: _____	_____	_____	_____	_____	_____
12. Total number of WSIN/EPIC/L.A. CLEAR cards submitted for other clandestine drug labs <b>discovered</b> :	_____	_____	_____	_____	_____
13. Total number of other clandestine drug labs <b>dismantled</b> :	_____	_____	_____	_____	_____

**NOTE:** The 3<sup>rd</sup> & 4<sup>th</sup> Quarter/Final Progress Report must include the data from the 1<sup>st</sup> and 2<sup>nd</sup> Quarter Progress Report. Compile all quarterly figures in the "Total to Date" column. Attach additional sheets, if necessary, to further clarify the data.

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	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
14. Total number of WSIN/EPIC/L.A. CLEAR cards submitted for other clandestine drug labs dismantled:	_____	_____	_____	_____	_____
15. Total number of clandestine lab dump sites discovered:	_____	_____	_____	_____	_____
16. Total pounds of waste discovered at lab dump sites:	_____	_____	_____	_____	_____
17. Total number of WSIN/EPIC/L.A. CLEAR cards submitted for lab dump sites discovered:	_____	_____	_____	_____	_____
18. Total number of referrals to the Dept. of Toxic Substances Control for lab dump site clean up:	_____	_____	_____	_____	_____

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**LAW ENFORCEMENT COMPONENT 2:**

**OBJECTIVE 2:** Arrest and incarcerate those responsible and use state and/or federal law to identify and seize assets related to the manufacture and distribution of methamphetamine.

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
1. Number of investigations resulting in arrest	_____	_____	_____	_____	_____
a. drug-related	_____	_____	_____	_____	_____
b. meth-related	_____	_____	_____	_____	_____
<b>NOTE: a+b must equal #1 above</b>	_____	_____	_____	_____	_____
2. Number of suspects arrested	_____	_____	_____	_____	_____
a. drug-related	_____	_____	_____	_____	_____
b. meth-related	_____	_____	_____	_____	_____
<b>NOTE: a+b must equal #2 above</b>	_____	_____	_____	_____	_____
3. Total number of firearms seized	_____	_____	_____	_____	_____
4. Total number of weapons seized (excluding firearms)	_____	_____	_____	_____	_____
5. Number of search warrants issued	_____	_____	_____	_____	_____
6. Number of cases referred for prosecution	_____	_____	_____	_____	_____
a. drug-related	_____	_____	_____	_____	_____
b. meth-related	_____	_____	_____	_____	_____
<b>NOTE: a+b must equal #6 above</b>	_____	_____	_____	_____	_____
7. Number of investigations resulting in assets seized	_____	_____	_____	_____	_____
8. Dollar amount of cash and property seized	_____	_____	_____	_____	_____
a. Amount of cash seized	_____	_____	_____	_____	_____
b. Estimated dollar value of real property seized	_____	_____	_____	_____	_____
c. Estimated dollar value of personal property seized	_____	_____	_____	_____	_____
<b>NOTE: a+b+c must equal #8 above</b>	_____	_____	_____	_____	_____

Describe the type and quantity of property seized in the project narrative section of this report.

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**LAW ENFORCEMENT COMPONENT 3:**

**GOAL 2:** Focus on the safety and well being of children by coordinating activities to ensure that the child's needs are not overlooked; assist children who have been endangered by exposure to *any* illicit drug environments and its associated hazardous lifestyle, including but not limited to: methamphetamine, its precursors or toxic byproducts; and remove children from these toxic environments.

**OBJECTIVE 1:** Remove children who are found in the presence of a methamphetamine lab, and/or who are found in settings involving the use, possession, sale or transportation of illicit drugs, pursuant to California Penal Code (PC), Sections 13879.80 and 13879.81 (see Part III of RFA).

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
1. Total number of investigation initiated which resulted in finding children living in or exposed to illicit drug environments	_____	_____	_____	_____	_____
a. Number of drug-related investigations initiated	_____	_____	_____	_____	_____
b. Number of meth-related investigations initiated <b>NOTE: a+b must equal #1 above</b>	_____	_____	_____	_____	_____
2. Total number of children removed jointly with Child Protective Services (CPS) from illicit drug environments as a result of an investigation	_____	_____	_____	_____	_____
a. Number of children removed due to drug investigations	_____	_____	_____	_____	_____
b. Number of children removed due to meth investigations <b>NOTE: a+b must equal #2 above</b>	_____	_____	_____	_____	_____
3. Total number of children removed <b>without CPS involvement</b> from illicit drug environments as a result of an investigation	_____	_____	_____	_____	_____
a. Number of children removed due to drug investigations	_____	_____	_____	_____	_____
b. Number of children removed due to meth investigations <b>NOTE: a+b must equal #3 above</b>	_____	_____	_____	_____	_____
4. Total number of children who were provided services:	_____	_____	_____	_____	_____
a. Medical (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
b. Dental (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
c. Educational (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
d. Counseling (if unknown, write "unk," not 0) <b>NOTE: a+b+c+d should NOT equal #4 above as one child can receive several services</b>	_____	_____	_____	_____	_____

**NOTE:** The 3<sup>rd</sup> & 4<sup>th</sup> Quarter/Final Progress Report must include the data from the 1<sup>st</sup> and 2<sup>nd</sup> Quarter Progress Report. Compile all quarterly figures in the "Total to Date" column. Attach additional sheets, if necessary, to further clarify the data.

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	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
5. Total number of children drug tested for exposure to drugs/chemicals (if unknown, write "unk," not 0):	_____	_____	_____	_____	_____
a. Tested by hair (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
b. Tested by urine (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
c. Tested by both (if unknown, write "unk," not 0)	_____	_____	_____	_____	_____
6. Total number of children detained, pursuant to California Welfare and Institutions (W&I) Code, Section 300 (see Part III of RFA)	_____	_____	_____	_____	_____
7. Total number of children testing positive for controlled substances:	_____	_____	_____	_____	_____
a. Meth	_____	_____	_____	_____	_____
b. Cocaine	_____	_____	_____	_____	_____
c. Heroin	_____	_____	_____	_____	_____
d. Marijuana	_____	_____	_____	_____	_____
e. Other	_____	_____	_____	_____	_____
f. Unknown	_____	_____	_____	_____	_____

**NOTE: a+b+c+d+e may NOT equal #7 above as one child may test positive for more than one controlled substance**

**LAW ENFORCEMENT COMPONENT 4:**

**OBJECTIVE 2: Hold accountable by arresting those individuals who willfully create a situation and/or environment where the life or limb of a child may be endangered or his/her health injured, pursuant to California Penal Code (PC), Sections 273a and 273b.**

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
1. Total number of defendants with arrests referred for:	_____	_____	_____	_____	_____
a. 273a PC	_____	_____	_____	_____	_____
b. 273b PC	_____	_____	_____	_____	_____
<b>NOTE: a+b must equal #1 above</b>					

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**PROSECUTION COMPONENT 1:**

(TO BE ANSWERED BY THE DISTRICT ATTORNEY'S OFFICE, IF A POSITION IS FUNDED BY THE GRANT. THE DATA MUST REFLECT THE CASES REFERRED BY THE ADA FUNDED TASK FORCE ONLY. IF YOUR ADA TEAM DOES NOT FUND A PROSECUTOR, THE ADA TEAM MUST DOCUMENT ITS ATTEMPTS TO OBTAIN THIS INFORMATION FROM THE DA'S OFFICE. DOCUMENTED ATTEMPTS SHOULD BE ATTACHED TO THE BACK OF THIS PROGRESS REPORT.)

**GOAL 1:** Reduce the illegal activities of targeted offenders through coordinated law enforcement, prosecution, and probation efforts.

**OBJECTIVE 1:** Prosecute and convict those identified by special investigations using multi-jurisdictional drug task forces, integrating federal/state/local drug enforcement agencies, prosecution, and probation departments.

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
1. Number of cases referred from task force for prosecution	_____	_____	_____	_____	_____
a. Number of cases filed	_____	_____	_____	_____	_____
b. Number of cases rejected	_____	_____	_____	_____	_____
<b>NOTE: a+b must equal #1 above</b>					
2. Number of defendants convicted of any charge	_____	_____	_____	_____	_____
a. Number of felonies	_____	_____	_____	_____	_____
b. Number of misdemeanors	_____	_____	_____	_____	_____
<b>NOTE: a+b must equal #2 above</b>					
3. Method of conviction	_____	_____	_____	_____	_____
a. Number of convictions by trial	_____	_____	_____	_____	_____
b. Number of convictions by plea	_____	_____	_____	_____	_____
<b>NOTE: a+b must equal #3 above</b>					
4. Number of defendants NOT convicted of any charge	_____	_____	_____	_____	_____
a. By acquittal	_____	_____	_____	_____	_____
b. By dismissed charges/charges dropped	_____	_____	_____	_____	_____
c. By referral to another jurisdiction	_____	_____	_____	_____	_____
<b>NOTE: a+b+c must equal #4 above</b>					

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**ANTI-DRUG ABUSE (ADA) ENFORCEMENT PROGRAM  
FISCAL YEAR 2009/10 PROGRESS REPORT**

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
5. Disposition:					
a. Number of probation revocations					
b. Number of parole revocations					
c. Number of defendants sentenced to jail					
i. Average length of jail stay (in days)					
d. Number of defendants sentenced to prison					
i. Average length of prison stay (in days)					
e. Number of defendants sentenced to probation (with custody stayed)					
f. Number of defendants sentenced to diversion (with custody stayed)					
g. Number of cases where restitution was ordered					

**OBJECTIVE 2: Forfeit the assets of sellers, suppliers, and distributors of illegal drugs.**

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
1. Number of forfeiture proceedings initiated					
2. Number of forfeiture proceedings completed					
3. Dollar amount ordered					
4. Dollar amount forfeited					

*NOTE: If the grant prosecutor does not handle forfeiture, report the asset forfeiture prosecutors' forfeitures.*

**NOTE:** The 3<sup>rd</sup> & 4<sup>th</sup> Quarter/Final Progress Report must include the data from the 1<sup>st</sup> and 2<sup>nd</sup> Quarter Progress Report. Compile all quarterly figures in the "Total to Date" column. Attach additional sheets, if necessary, to further clarify the data.

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**PROSECUTION COMPONENT:**

(TO BE ANSWERED BY THE DISTRICT ATTORNEY'S OFFICE, IF A POSITION IS FUNDED BY THE GRANT. THE DATA MUST REFLECT THE CASES REFERRED BY THE ADA FUNDED TASK FORCE ONLY. IF YOUR ADA TEAM DOES NOT FUND A PROSECUTOR, THE ADA TEAM MUST DOCUMENT ITS ATTEMPTS TO OBTAIN THIS INFORMATION FROM THE DA'S OFFICE. DOCUMENTED ATTEMPTS SHOULD BE ATTACHED TO THE BACK OF THIS PROGRESS REPORT.)

**GOAL 2:** Focus on the safety and well being of children by coordinating activities to ensure that the child's needs are not overlooked; assist children who have been endangered by exposure to any illicit drug environments and its associated hazardous lifestyle, including but not limited to, methamphetamine, its precursors or toxic byproducts; and remove children from these toxic environments.

**OBJECTIVE 1:** Hold accountable by prosecuting and convicting those individuals who willfully create a situation and/or environment where the life or limb of a child may be endangered or his/her health injured, pursuant to California Penal Code (PC) Sections 273a and 273b.

	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	Total to Date
1. Total number of defendants with criminal charges filed					
a. 273a PC					
b. 273b PC					
<b>NOTE: a+b must equal #1 above</b>					
2. Total number of defendants convicted of child endangerment					
a. 273a PC					
b. 273b PC					
<b>NOTE: a+b must equal #2 above</b>					
3. Total number of defendants who were not convicted of any charge because of an acquittal					
4. Total number of defendants who were not convicted of any charge because the charges were dropped					
5. Total number of defendants who were not convicted of any charge because the case was referred to another jurisdiction					
6. Disposition of case:					
a. Total number of defendants sentenced to jail					
i. Average jail sentence (in days)					
b. Total number of defendants sentenced to prison					
i. Average prison sentence (in days)					
c. Total number of probation/custody stayed (includes the number of defendants who plead guilty but had sentence stayed while cooperating with the police as informants)					
d. Total number of cases where restitution was ordered					

**NOTE:** The 3<sup>rd</sup> & 4<sup>th</sup> Quarter/Final Progress Report must include the data from the 1<sup>st</sup> and 2<sup>nd</sup> Quarter Progress Report. Compile all quarterly figures in the "Total to Date" column. Attach additional sheets, if necessary, to further clarify the data.