

GEORGIA EMERGENCY MANAGEMENT AGENCY  
GEORGIA OFFICE OF HOMELAND SECURITY

NATHAN DEAL  
GOVERNOR



CHARLEY ENGLISH  
DIRECTOR

June 20, 2012

RE: 2009-SS-T9-0047  
ID # 081-00000-05  
CRISP COUNTY SHERIFF'S  
OFFICE

Honorable Donnie Haralson  
Crisp County Sheriff's Office  
196 Georgia Highway 300 South  
Cordele, Georgia 31015

Dear Sheriff Haralson:

Enclosed is check #0344700. This check represents a final payment of the budget worksheet listed on the check stub.

Please be reminded that payment is made pursuant to the terms and conditions established in the Grantee-Subgrantee Agreement. You, the subgrantee, are responsible for assuring adherence to all terms in the agreement.

Georgia Emergency Management Agency is pleased to assist with the Domestic Preparedness State Homeland Grant Program. If you have questions pertaining to this payment or any disaster recovery issue, please call Ms. Tara Diaz, Grants Manager at 404-635-7066 or 1-800-TRY-GEMA.

Sincerely,

Angi Whalley  
Director of Public Assistance

/lm  
Enclosure



Post Office Box 18055 • Atlanta, Georgia • 30316-0055  
(404) 635-7000 • Toll-free in Georgia 1-800-TRY-GEMA • [www.gema.ga.gov](http://www.gema.ga.gov)

Page 001 OF 001  
 Vendor No: 0000014588  
 Vendor Name: CRISP COUNTY SHERIFF'S OF

STATE OF GEORGIA  
 OFFICE OF PLANNING AND BUDGET  
 ATLANTA, GA

Check No. 0000344700  
 Check Date: 06/18/2012  
 Check Total: \$24,941.08

BANK 1300-1000

| INVOICE<br>NUMBER                                  | INVOICE<br>DATE | VOUCHER<br>ID | GROSS<br>AMOUNT | DISCOUNT<br>TAKEN | AMOUNT<br>PAID |
|--|-----------------|---------------|-----------------|-------------------|----------------|
| TER2715, 1-1<br>TERRORISM PAYMENT BUD. SHY. # 2715 | 06/18/2012      | 000216450     | 24,941.08       | 0.00              | 24,941.08      |

*Final*  
*2009-2047*



STATE OF GEORGIA  
 OFFICE OF PLANNING AND BUDGET  
 270 WASHINGTON STREET, ROOM 8087  
 ATLANTA, GA 30334

64-5/610

06/18/2012  
 Check Date

19  
 Seq. No

0000344700  
 Check No.

Vendor No: 0000014588

Pay to the Order of CRISP COUNTY SHERIFF'S OFFICE  
 196 SOUTH HWY 300

\$24,941.08

Pay Exactly TWENTY-FOUR THOUSAND NINE HUNDRED FORTY-ONE AND 08/100 S \*\*\*

Void after 60 days

NON-NEGOTIABLE

BANK OF AMERICA, ATLANTA, GA

⑈0000344700⑈ ⑆061000052⑆ 000103534260⑈

# Terrorism Progress Payments

Monday, June 18, 2012

| Ref No | Budget Sht No | Item No | Date | Payment No | Quantity | Cost Each | Pay. Amt. |
|--------|---------------|---------|------|------------|----------|-----------|-----------|
|--------|---------------|---------|------|------------|----------|-----------|-----------|

CRISP CO. SHERIFF'S DEPT.

FY 2009-SHSG

196 HWY. 300 South

FINAL: YES

Cordele GA

Vendor#: 0000014588

THIRD PARTY PAYEE:

|         |      |     |           |    |   |           |           |
|---------|------|-----|-----------|----|---|-----------|-----------|
| TER2715 | 2715 | 001 | 6/18/2012 | 01 | 1 | 24,856.08 | 24,856.08 |
|---------|------|-----|-----------|----|---|-----------|-----------|

|         |      |     |           |    |   |       |       |
|---------|------|-----|-----------|----|---|-------|-------|
| TER2715 | 2715 | 002 | 6/18/2012 | 01 | 1 | 85.00 | 85.00 |
|---------|------|-----|-----------|----|---|-------|-------|

|      |       |           |         |               |           |
|------|-------|-----------|---------|---------------|-----------|
| PO#: | 43172 | Receipt # | Voucher | Total Payment | 24,941.08 |
|------|-------|-----------|---------|---------------|-----------|

  
Requested: Grants Manager

  
Approved: Director, Public Assistance

Check #/Date

Processed: OPB Representative

[illegible]

| <b>GEORGIA EMERGENCY MANAGEMENT AGENCY</b><br><b>FY 2009 DHS HSCP, State Homeland Security Grant Program (SHSP) (SHADED AREAS ARE FOR GEMA USE ONLY)</b>   |          |   |                             |              |             |  |         |   |  |
|--|----------|---|-----------------------------|--------------|-------------|--|---------|---|--|
| State on behalf of   |          | RIPS NO. 081-00000-05   |                             | SHEET# 2715  |             | DATE SUBMITTED or REVISED                              |         | For SHSP and UASI program awards only:<br>Law Enforcement Terrorism Prevention award? (Mark one) Yes X No |  |
| Federal ID No. 58-6000811  |          | SUBGRANTEE (Agency/ Department) Crisp County Sheriff's Department |                             | COUNTY Crisp |             | GEMA AREA 2  |         | GAN NO. 2009-SS-19-0047   |  |
| STREET ADDRESS<br>196 Hwy 300 South  |          | Send Contract To (Name/Title):<br>Donnie Haralson                 |                             | Sheriff      |             | Program Contact (Name/Title):<br>Colonel Billy Hancock |         | Program Contact Phone and Email:<br>(229) 276-2600; bhancock@crispcounty.com                              |  |
| City, State, ZIP Code<br>Cordell, Ga. 31015  |          | Contract Recipient Phone and Email:<br>229-276-2600               |                             |              |             |  |         |   |  |
| Category - Indicate below, must be one of the following: 1. Personal Protective Equipment (PPE), 2. EOD, 3. Citizens Corps Programs, 4. Information Technology (IT), 5. Cyber Security (CS), 6. Interoperable Communications (Inter. Op), 7. Detection Equipment (DET), 8. Decon (DECON), 9. Medical (MED), 10. Power (POW), 11. CBRNE Reference Materials (REF), 12. CBRNE Response Vehicles (VEH), 13. Terrorism Prevention (TP), 14. Physical Security (PS), 15. Inspection and Screening (IS), 16. Agricultural (Ag), 17. Watercraft (WC), 18. Aviation (AIR), 19. CBRNE Logistical Support (LS), 20. Intervention (INT), 21. Other Authorized (O), 22. Training (TRG), 23. Exercise (EX), 24. Planning (PLG)                              |          |   |                             |              |             |  |         |   |  |
| Investment Justification = 10 Specify on this line the Investment justification associated with the project to be funded. One per application.<br>Choose one: 1. National Incident Management System and National Response Plan, 2. Strengthen Planning Capabilities Through Regional Collaboration, 3. Infrastructure Protection Program (C/IKR), 4. CBRNE Detection, Response and Decontamination, 5. Improvised Explosives Device (IED) Detection, Detection and Response, 6. Georgia's Search and Rescue (GSAR) Program, 7. Congregate Shelter Training and Equipping Program, 8. Medical Surge/Mass Prophylaxis, 9. Agro-Terrorism Defense, 10. Law Enforcement Operations and Investigations, 11. Information Sharing, Dissemination and |          |   |                             |              |             |  |         |   |  |
| Strategic Goal No. = For each requested item, list below the number of the specific State Strategic Plan Goal, Objective and Steps the requested item will further, for example 4.1.1-5.<br>Discipline = LE Specify discipline on this line: Fire, Law Enforcement (LE), EMS, EMA, 911, Other NOTE: Only ONE discipline per application  |          |   |                             |              |             |  |         |   |  |
| <b>COST ESTIMATE</b>   |          |   |                             |              |             |  |         |   |  |
| ITEM NO  | CATEGORY | ITEM  | STATE GOAL, OBJECTIVE, STEP | QUANTITY     | COST EACH   | TOTAL COST   |         |   |  |
| 001  | 13       | Automated License Plate Recognition System                        |                             | 1            | \$25,000.00 | \$25,000.00  |         |   |  |
| 002  |          |   |                             |              |             |  |         |   |  |
|  |          |   |                             |              |             | TOTAL  | \$      | 25,000.00   |  |
|  |          |   |                             |              |             | TITLE:   |         |   |  |
|  |          |   |                             |              |             | PREPARED BY:   | Hamrick |   |  |

**Terrorism Report**

| Agency                  | County | Applicant                | Project No  | Part          | Budget Sheet No | Category | Discipline | Total Estimated Cost | Item No | Quantity | QUAN PURCHASED | Total Paid | Accounts Payable |
|-------------------------|--------|--------------------------|-------------|---------------|-----------------|----------|------------|----------------------|---------|----------|----------------|------------|------------------|
| GAN NO: 2009-SS-T9-0047 |        |                          |             |               |                 |          |            |                      |         |          |                |            |                  |
| 2                       | CRISP  | CRISP CO. SHERIFFS DEPT. | 27030A08101 | FY 2009-SHSGP | 2715            | 13       | 24915.00   | 25,000.00            | 001     | 1        |                | 0.00       | 25,000.00        |
| Budget Sheet Total      |        |                          |             |               |                 |          |            | 25,000.00            |         |          |                | 0.00       | 25,000.00        |
| Grand Total             |        |                          |             |               |                 |          |            | 25,000.00            |         |          |                | 0.00       | 25,000.00        |

Date: 6/12/12

**Instructions:** All requests for payments must be supported by documentation supporting actual expenditures. Itemize each expenditure below to the fullest detail possible. Attach documentation that supports this payment request, such as copies of bills of sale, invoices, receipts, and canceled checks evidencing payment. Do not send originals. Attach a continuation sheet if necessary.

Budget Worksheet Number: 2915 GAN Number: 2009-SS-79-0047 FIPs Number: 081-00000-05

Applicant: Crisp Co. Shainblum

Area: 2

Under penalty of perjury, I certify that to the best of my knowledge and belief the data above are correct and that all outlays were made in accordance with the grant conditions or other agreements, comply with procurement regulations contained within the Financial Guide, and that payment is due and has not been previously requested. I understand that any part of this payment request that is not supported by cost documents and/or expended within the scope of the approved project will be refunded to the State of Georgia within 30 days of receiving the deobligation notice.

by: Shawn D. F. Jim  
Signature of Subgrantee's Authorized Representative

Sherric Leverett FND in  
Printed Name

279-276-2600  
Contact Phone Number

Board of Commissioners of Crisp County

Accounts Payable

210 South 7th Street, Room 308  
Cordele, Georgia 31015  
Ph (229) 276-2673 • Fax (229) 276-2639

DATE  
5/29/2012

CHECK  
NUMBER

028139

PLANTERS FIRST  
P.O. BOX 879 • CORDELE, GA 31015

64-1036  
612

\*\*TWENTY FOUR THOUSAND NINE HUNDRED FORTY ONE\*\*  
\*\*DOLLARS AND 08 CENTS\*\*

\$24,941.08

PAY  
TO THE  
ORDER  
OF

THOMAS J. MADDEN & ASSOC. INC  
935 HWY 124  
BLDG 400 SUITE 401  
BRASELTON, GA 30517

ACCOUNTS PAYABLE

⑈028139⑈ ⑆061210965⑆ 5006 620 7⑈

VENDOR# 1201 THOMAS J. MADDEN & ASSOC. INC  
CHECK# 28139 CHECK DATE 5/29/2012

CHECK AMOUNT \$24,941.08

| INVOICE# | INV. DATE | VOUCH# | PO NUM | LINE ITEM DESC            | AMOUNT    | G/L | ACCOUNT #             |
|----------|-----------|--------|--------|---------------------------|-----------|-----|-----------------------|
| 15619    | 4/30/2012 | 4119   |        | LICENSE PLATE REC. SYSTEM | 24,941.08 |     | 100-2050-3310-54.2500 |

BOARD OF COMMISSIONERS OF CRISP COUNTY — CORDELE, GA  
Ph (229) 276-2673 • Fax (229) 276-2639

028139



ATTN: Jammers

## View Images

The image of the item you selected is displayed below. To return to the previous page, select 'Back'. To make the image larger or smaller select 'Enlarged View' or 'Normal View'.

### Transaction Detail

| Date     | Transaction Type/<br>Description    | Number | Amount      | Debits | Credits |
|----------|-------------------------------------|--------|-------------|--------|---------|
| 6/1/2012 | Check<br>Check number 0000000028139 | 28139  | \$24,941.08 |        |         |

THIS DOCUMENT HAS A COLORED BACKGROUND, MICROPRINTING AND CONTAINS A WATERMARK—VERIFY FOR AUTHENTICITY

Board of Commissioners of Crisp County  
Accounts Payable  
216 South 7th Street, Room 306  
Cordelia, Georgia 31015  
Ph (229) 278-2873 • Fax (229) 278-2539

DATE 5/29/2012 CHECK NUMBER 028139

PLANTERS FIRST  
P.O. BOX 676 • CORDELE, GA 31013

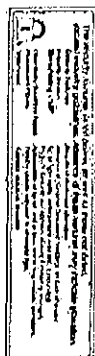
\*\*TWENTY FOUR THOUSAND NINE HUNDRED FORTY ONE\*\*  
\*\*DOLLARS AND 08 CENTS\*\*

THOMAS J. MADDEN & ASSOC. INC.  
935 HWY 124  
BLDG 400 SUITE 401  
BRASELTON, GA 30517

ACCOUNT'S PAYABLE

PAV  
TELE  
DATE  
OF

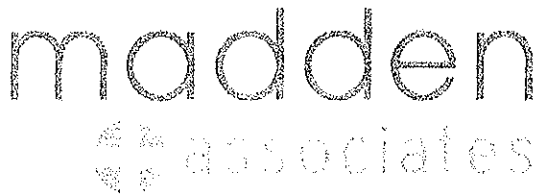
0028139 0061210965 5006 820 76



Seq: 5  
Dep: 000452  
R/T: 011000138  
Date: 05/31/12

For Deposit only to  
ENDORSE HERE  
CUST: THOMAS J MADDEN & ASSOCIATES INC  
Act: Master  
DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE  
RESERVED FOR FINANCIAL INSTITUTION USE

[Back](#) [Normal View](#) [Email this Image](#)



# INVOICE

Invoice Number: 15619  
Invoice Date: Apr 30, 2012

## Bill To:

Crisp County  
190 Hwy 300 South  
Cordele, GA 31015  
United States

## Ship to:

Crisp County Sheriff's Office  
190 Hwy 300 South  
Cordele, GA 31015  
United States

| Customer ID  | Customer PO     | Payment Terms |          |
|--------------|-----------------|---------------|----------|
| CRISPCOUNTY  |                 | Net 30 Days   |          |
| Sales Rep ID | Shipping Method | Ship Date     | Due Date |
| LUKENDAKEVIN | UPS Ground      |               | 5/30/12  |

| Qty. | Item               | Description  | B/O Qty. | Unit Price | Amount    |
|------|--------------------|--|----------|------------|-----------|
| 1.00 | 110115             | MPH-900 ADM3 SP2 35/35 25ft 90 Push Bumper                             |          | 21,350.00  | 21,350.00 |
| 1.00 | 410322             | ELSAG Operations Center (EOC)  |          | 1,906.08   | 1,906.08  |
| 1.00 | ELSAGREMOTEINSTALL | Hardware Install for ELSAG System (2 or 3 Camera) at Customer Facility |          | 800.00     | 800.00    |
| 1.00 | ELSAGREMOTEINSTALL | Hardware Install for ELSAG System (2 or 3 Camera) at Customer Facility |          | 800.00     | 800.00    |
| 1.00 | 520095             | 1st Year ELSAG Warranty (Free) Each<br>Additional Year is \$1,600/yr   |          |            |           |
| 1.00 | FREIGHT            | Freight Charges  |          | 85.00      | 85.00     |

Please make the check payable to:

Thomas J Madden and Assoc. Inc.

Thank you for your business.

|                        |                  |
|------------------------|------------------|
| Subtotal               | 24,941.08        |
| Sales Tax              |                  |
| Freight                |                  |
| Total Invoice Amount   | 24,941.08        |
| Payment/Credit Applied |                  |
| <b>TOTAL</b>           | <b>24,941.08</b> |

Office of  
Sheriff  
Crisp County



Donnie Haralson

196 Hwy 300 South  
Cordele, Ga. 31015

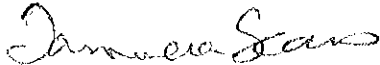
Phone: 229-276-2600  
Fax: 229-276-2648

June 12, 2012,

Georgia Emergency Management Agency  
Attention: Public Assistance  
PO Box 18055  
Atlanta, GA 30316

Please find enclosed Exhibit E and justification documents for reimbursement under GAN Number: 2009-SS-T9-0047. If you have any questions, please call 229-276-2600.

Sincerely,

  
Tammera Sears, SFC