



County of Los Alamos

1000 Central Avenue
Los Alamos, NM 87544

BCC Agenda - Final

LOS ALAMOS Los Alamos County DWI Planning Council

Thursday, August 11, 2022

8:30 AM

Municipal Building, Room 330 or via Zoom
https://us06web.zoom.us/webinar/register/WN_OjhkNtZ4SleMoN79DL3jCw

Members of the Public can register to join this meeting via Zoom by pasting into their browser the following :

https://us06web.zoom.us/webinar/register/WN_OjhkNtZ4SleMoN79DL3jCw

or

Dial:

US: +1 720 707 2699 or +1 253 215 8782 or +1 346 248 7799 or +1 669 444 9171 or +1 312 626 6799 or +1 386 347 5053
or +1 564 217 2000 or +1 646 558 8656 or +1 646 931 3860 or +1 301 715 8592

(Webinar ID: 890 4606 5621)

I. CALL TO ORDER

II. PUBLIC COMMENT & INTRODUCTIONS

III. BUSINESS

[16236-22](#) Approval of Minutes from the DWI Planning Council Meeting on May 19, 2022.

Presenters: George Marsden

Attachments: [Minutes May 19 2022](#)

[16238-22](#) LAC DWI Program Budget

Presenters: Kristine Coblenz

Attachments: [Los Alamos County DWI Program Final Budget Report FY22](#)
[Los Alamos County DWI Program FY23 Distribution and Grant Budgets](#)

[16239-22](#) DWI Prevention Efforts

Presenters: Kristine Coblenz

[16240-22](#) DWI Law Enforcement Numbers

Presenters: Jaime Gonzales

[16241-22](#) DWI Compliance Numbers

Presenters: Monica Schwiner

Attachments: [DWI Compliance Numbers for June 2022](#)

[16242-22](#) DWI Treatment - Jordan Redmond and Adrianna Delvo

IV. BOARD/STAFF COMMUNICATIONS

[16243-22](#) Chairman's Report

Presenters: George Marsden

Attachments: [Los Alamos County DWI Planning Council Roster](#)

[16244-22](#) Staff Report

Presenters: Kristine Coblentz

VI. PREVIEW OF NEXT MEETING

VII. ADJOURNMENT

If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing or meeting, please contact the County Human Resources Division at 662-8040 at least one week prior to the meeting or as soon as possible. Public documents, including the agenda and minutes can be provided in various accessible formats. Please contact the personnel in the Community Services Administration Office at 662-8241 if a summary or other type of accessible format is needed.



County of Los Alamos

BCC Meeting Minutes

Los Alamos County DWI Planning Council

1000 Central Avenue
Los Alamos, NM 87544

Thursday, May 19, 2022

8:30 AM

Municipal Building, Room 330 or
<https://us06web.zoom.us/j/74bzj0dUR26xvXYYrhTsuw>

I. CALL TO ORDER

Present-Councilor Marsden, Councilor Lovejoy, Councilor McNiel, Councilor Seekins, Councilor Gonzalez

Meeting was called to order at 8:41 a.m. by Chair George Marsden.

II. PUBLIC COMMENT

No Public Comment.

III. BUSINESS

[15938-22](#) Approval of Minutes from the DWI Planning Council Meeting on April 14, 2022.

Presenters: George Marsden

A motion was made by Judy Lovejoy, seconded by Juanita McNiel that the Minutes be approved as presented. The motion passed unanimously.

I move that the Board approve the Minutes for April 14, 2022.

[15945-22](#) FY22 Budget Review

Presenters: Kristine Coblenz

Kristine Coblenz reported on DWI Program Budget.

[15939-22](#) DWI Prevention Efforts

Presenters: Kristine Coblenz and Brandi Seekins

Kristine Coblenz reported: DWI Program programming, collaboration, and upcoming events/activities.

Brandi Seekins (LAPS) reported: LAPS programming, collaborations, and upcoming events/activities.

[15940-22](#) DWI Law Enforcement Numbers

Presenters: Jaime Gonzales

Jaime Gonzales reported:
April- 1

15941-22

DWI Compliance Numbers

Presenters: Monica Schwiner

DWI Counsel Meeting Report-May 2022

April Pre-Trial Municipal Open Cases: 1
April Probation Municipal Open Cases: 2
April Pre-Trial Magistrate Open Cases:0
April Probation Magistrate Open Cases:0

Active DWI Probation Magistrate Open Cases: 4
Active DWI Pre-Trial Magistrate Open Cases: 3
Active DWI Probation Municipal Open Cases: 12
Active DWI Pre-Trial Municipal Open Cases: 6

Probation Magistrate DWI Active Warrants: 1
Pre-Trial Magistrate DWI Active Warrants: 0
Probation Municipal DWI Active Warrants: 4
Pre-Trial Municipal DWI Active Warrants: 0

15942-22

DWI Treatment - Jordan Redmond and Adrianna Delvo

Adrianna Devo reported on RACStop numbers.

IV. BOARD/STAFF COMMUNICATIONS

15943-22

Chairman's Report

Presenters: George Marsden

George Marsden reported on status on Board Member terms and Teen Center updates.

15944-22

Staff Report

Presenters: Kristine Coblentz

Kristine Coblentz reported on Social Services Division updates.

V. COUNCIL COMMUNICATIONS

VI. PREVIEW OF NEXT MEETING

Next meeting will be held June 9, 2022. By-Laws will be reviewed.

VII. ADJOURNMENT

Meeting adjourned at 9:41 a.m.

If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing or meeting, please contact the County Human Resources Division at 662-8040 at least one week prior to the meeting or as soon as possible. Public documents, including the agenda and minutes can be provided in various accessible formats. Please contact the personnel in the Community Services Administration Office at 662-8241 if a summary or other type of accessible format is needed.

LOCAL DWI GRANT PROGRAM
Request For Payment/Financial Status Report

Exhibit D

Payment Request No.: 4

| I. A. Grantee: Incorporated County of Los Alamos B. Address: 1000 Central Ave., Suite 130 Los Alamos, NM 87544 C. Telephone No.: 505-662-8062 D. Grant No.: 22-D-G-16 Amendment #1 | | | | | II. Payment: A. Grant Award: \$35,455.00 B. Funds Received To Date: \$19,430.67 C. Amount Requested This Payment: \$9,824.47 D. Grant Balance: \$6,199.86 III. Report Period Ending: FINAL 30-Jun-22 | | | | |
|--|------------------|---------------------------|------------------|------------------------|---|-----------------|---------------------------|------------------|------------------------|
| Budget Line Items | Grant | | | | | In-Kind Match | | | |
| | Approved Budget | Expenditures This Request | Remaining Budget | Total YTD Expenditures | | Approved Budget | Expenditures This Request | Remaining Budget | Total YTD Expenditures |
| ADMINISTRATIVE | | | | | | | | | |
| Personnel Services | | | | | | 0.00 | 0.00 | 0.00 | 0.00 |
| Employee Benefits | | | | | | 0.00 | 0.00 | 0.00 | 0.00 |
| | | | | | | | | | |
| PROGRAM | | | | | | | | | |
| Personnel Services | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 |
| Employee Benefits | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 |
| Travel (In-State) | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 |
| Travel (Out-of-State) | 16,000.00 | 3,705.96 | 4,479.37 | 11,520.63 | | 0.00 | 0.00 | 0.00 | 0.00 |
| Supplies | 2,455.00 | 0.00 | 0.00 | 2,455.00 | | 0.00 | 0.00 | 0.00 | 0.00 |
| Operating Costs | 2,000.00 | 898.51 | 1,101.49 | 898.51 | | 5,046.00 | 621.07 | 2,399.61 | 2,646.39 |
| Contractual Services | 15,000.00 | 5,220.00 | 619.00 | 14,381.00 | | 0.00 | 0.00 | 0.00 | 0.00 |
| Minor Equipment | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 |
| Capital Purchases | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 |
| TOTALS | 35,455.00 | 9,824.47 | 6,199.86 | 29,255.14 | | 5,046.00 | 621.07 | 2,399.61 | 2,646.39 |

6,199.86

Per. Serv.
Empl. Ben.

Per. Serv.
Empl. Ben.
Travel In
Travel Out
Supplies
Operating
Contractual
Minor Equip.
Capital Purch

CERTIFICATION: Under penalty of law, I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached, or on file for review. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

David Griego, Senior Management Analyst - Finance Office
Grantee Fiscal Officer (Printed Name and Title)

Kristine Coblenz, DWI Program Coordinator
Grantee Representative (Printed Name and Title)

Grantee Fiscal Officer (Signature) _____ Date _____

Grantee Representative (Signature) _____ Date _____

(DFA/Local Government Division Use Only)

Local Government Division Fiscal Officer _____ Date _____

Local Government Division Program Manager _____ Date _____

LOCAL DWI GRANT PROGRAM
Request for Payment/Financial Status Report
Breakdown By Component

Exhibit D (1)
0

| | | |
|---|--|--|
| Grantee: <u>Incorporated County of Los Alamos</u> | Total Grant Funds Requested This Request: <u>9,824.47</u> | |
| Grant No.: <u>22-D-G-16 Amendment #1</u> | Total In-Kind Match This Request: <u>621.07</u> | |
| Request No. 4 | Total Expenditures Reported This Request: <u>10,445.54</u> | |

Grant:

| | <u>Budget</u> | <u>This Request</u> | <u>Remaining Budget</u> | <u>Expenditures YTD</u> |
|-------------------------------------|-------------------------|------------------------|-------------------------|-------------------------|
| Prevention | 20,455.00 | 4,604.47 | 5,580.86 | 14,874.14 |
| Enforcement | 0.00 | 0.00 | 0.00 | 0.00 |
| Screening | 0.00 | 0.00 | 0.00 | 0.00 |
| Treatment: Outpatient/Jailbased | 15,000.00 | 5,220.00 | 619.00 | 14,381.00 |
| Compliance Monitoring/Tracking | 0.00 | 0.00 | 0.00 | 0.00 |
| Coordination, Planning & Evaluation | 0.00 | 0.00 | 0.00 | 0.00 |
| Alternative Sentencing | 0.00 | 0.00 | 0.00 | 0.00 |
| Totals: | <u>35,455.00</u> | <u>9,824.47</u> | <u>6,199.86</u> | <u>29,255.14</u> |

In-Kind Match:

| | <u>Budget</u> | <u>This Request</u> | <u>Remaining Budget</u> | <u>Expenditures YTD</u> | <u>Additional In-Kind Match</u> |
|-------------------------------------|------------------------|----------------------|-------------------------|-------------------------|---------------------------------|
| Prevention | 5,046.00 | 621.07 | 2,399.61 | 2,646.39 | |
| Enforcement | 0.00 | 0.00 | 0.00 | 0.00 | |
| Screening | 0.00 | 0.00 | 0.00 | 0.00 | |
| Treatment: Outpatient/Jailbased | 0.00 | 0.00 | 0.00 | 0.00 | |
| Compliance Monitoring/Tracking | 0.00 | 0.00 | 0.00 | 0.00 | |
| Coordination, Planning & Evaluation | 0.00 | 0.00 | 0.00 | 0.00 | |
| Alternative Sentencing | 0.00 | 0.00 | 0.00 | 0.00 | |
| Totals: | <u>5,046.00</u> | <u>621.07</u> | <u>2,399.61</u> | <u>2,646.39</u> | <u>0.00</u> |

| | | | |
|---|-------------------------|---|-------------------------|
| Total Expenditures This Reimbursement: | <u>10,445.54</u> | ↔ | <u>10,445.54</u> |
| Total Expenditures Year to Date: | <u>31,901.53</u> | ↔ | <u>31,901.53</u> |
| Total Additional In-Kind Match Year to Date: | <u>0.00</u> | | |

I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

| | | |
|------------------------------------|---------------------------------|-------|
| <hr/> | DWI Coordinator <hr/> | <hr/> |
| Grantee Representative (Signature) | Title | Date |

**Local DWI Distribution Program
Financial Status Report**

Enter the distribution amounts received:

| Amount | For |
|---------------|------------|
|---------------|------------|

| | |
|-----------|--------------------|
| 22,375.99 | September 10, 2021 |
|-----------|--------------------|

| | |
|-----------|-------------------|
| 22,085.12 | December 10, 2021 |
|-----------|-------------------|

| | |
|-----------|----------------|
| 23,231.98 | March 10, 2022 |
|-----------|----------------|

| | |
|-----------|---------------|
| 18,680.85 | June 10, 2022 |
|-----------|---------------|

| | |
|------------------|------------------|
| Total YTD | 86,373.94 |
|------------------|------------------|

| | |
|--|-----------|
| Total Distribution Expenditures | 44,107.05 |
|--|-----------|

| |
|-----------|
| 42,266.89 |
|-----------|

**Local DWI Distribution Program
Financial Status Report**

Exhibit F

Financial Status Report No.: 4

| I. A. Program Name Los Alamos County | | II. Distribution Received: | | | | III. Distribution Balance: | | | | |
|--|------------------|-----------------------------------|------------------|----------------------------------|-----------|--------------------------------------|--------------------------|--------------------------------------|------------------|--------------|
| B. Address: 1000 Central Avenue, Suite 300 Los Alamos, NM, 87545 | | A. September: | 22,375.99 | B. December: | 22,085.12 | A. Distribution Year To Date: | \$86,373.94 | B. Expenditures Year To Date: | \$44,107.05 | |
| C. Telephone No.: 505-662-8062 | | C. March: | 23,231.98 | D. June: | 18,680.85 | C. Expenditures This Quarter: | \$13,099.64 | D. Distribution Balance: | \$42,266.89 | 42266.89 |
| D. Distribution No.: 22-D-D-16 | | E. Total Year To Date: | 86,373.94 | IV. Report Period Ending: | | 30-Jun-22 | | | | |
| Budget Line Items | Distribution | | | | | In-Kind Match | | | | |
| | Approved Budget | Expenditures This Report | Remaining Budget | Expenditures YTD | | Approved Budget | Expenditures This Report | Remaining Budget | Expenditures YTD | |
| ADMINISTRATIVE* | | | | | | | | | | |
| Personnel Services | | | | | | 0.00 | 0.00 | 0.00 | 0.00 | Per. Serv. |
| Employee Benefits | | | | | | 0.00 | 0.00 | 0.00 | 0.00 | Empl. Ben. |
| | | | | | | | | | | |
| PROGRAM | | | | | | | | | | |
| Personnel Services | 36,040.00 | 6,319.78 | 18,315.93 | 17,724.07 | | 0.00 | 0.00 | 0.00 | 0.00 | Per. Serv. |
| Employee Benefits | 10,500.00 | 1,281.85 | 5,954.11 | 4,545.89 | | 0.00 | 0.00 | 0.00 | 0.00 | Empl. Ben. |
| Travel (In-State) | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Travel In |
| Travel (Out-of-State) | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Travel Out |
| Supplies | 3,815.00 | 0.00 | 2,822.04 | 992.96 | | 1,000.00 | 0.00 | 917.49 | 82.51 | Supplies |
| Operating Costs | 11,797.00 | 238.65 | 8,979.87 | 2,817.13 | | 7,950.00 | 0.00 | 7,950.00 | 0.00 | Operating |
| Contractual Services | 18,348.00 | 5,259.36 | 321.00 | 18,027.00 | | 129,000.00 | 36,026.70 | 41,568.69 | 87,431.31 | Contractual |
| Minor Equipment | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Minor Equip. |
| Capital Purchases | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Cap Purch |
| TOTALS | 80,500.00 | 13,099.64 | 36,392.95 | 44,107.05 | | 137,950.00 | 36,026.70 | 50,436.18 | 87,513.82 | |

CERTIFICATION: Under penalty of law, I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached, or on file for review. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

David Griego, Senior Management Analyst - Finance Office
Program Fiscal Officer (Printed Name and Title)

Kristine Coblentz, DWI Program Coordinator
Program Representative (Printed Name and Title)

Program Fiscal Officer (Signature) Date

Program Representative (Signature) Date

(DFA/Local Government Division Use Only)

Local Government Division Fiscal Officer Date

Local Government Division Program Manager Date

LOCAL DWI DISTRIBUTION PROGRAM
Distribution Program Financial Status Report
Breakdown By Component

Exhibit F (1)

0

Program: #REF!
 Dist No.: Los Alamos County
 Report No. 4

| | |
|--|-------------------------|
| Total Distribution Reported This Quarter | <u>13,099.64</u> |
| Total In-Kind Match This Quarter | <u>36,026.70</u> |
| Total Expenditures Reported This Quarter | <u>49,126.34</u> |

Distribution:

| | <u>Budget</u> | <u>This Report</u> | <u>Remaining Budget</u> | <u>Expenditures YTD</u> |
|---------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Prevention | 29,832.00 | 5,498.01 | 9,121.59 | 20,710.41 |
| Enforcement | 3,840.00 | 1,305.46 | 1,364.13 | 2,475.87 |
| Screening | 0.00 | | 0.00 | 0.00 |
| Treatment: Outpatient/Jailbased | 0.00 | | 0.00 | 0.00 |
| Compliance Monitoring/Tracking | 16,500.00 | 1,708.91 | 9,673.31 | 6,826.69 |
| Coor, Plan & Eval | 30,328.00 | 4,587.26 | 16,233.92 | 14,094.08 |
| Alternative Sentencing | 0.00 | | 0.00 | 0.00 |
| Totals: | <u>80,500.00</u> | <u>13,099.64</u> | <u>36,392.95</u> | <u>44,107.05</u> |

In-Kind Match:

| | <u>Budget</u> | <u>This Report</u> | <u>Remaining Budget</u> | <u>Expenditures YTD</u> | <u>Additional In-Kind/Match</u> |
|---------------------------------|--------------------------|-------------------------|-------------------------|-------------------------|---------------------------------|
| Prevention | 136,950.00 | 36,026.70 | 49,518.69 | 87,431.31 | |
| Enforcement | 0.00 | | 0.00 | 0.00 | |
| Screening | 0.00 | | 0.00 | 0.00 | |
| Treatment: Outpatient/Jailbased | 0.00 | | 0.00 | 0.00 | |
| Compliance Monitoring/Tracking | 1,000.00 | | 917.49 | 82.51 | |
| Coor, Plan & Eval | 0.00 | | 0.00 | 0.00 | |
| Alternative Sentencing | 0.00 | | 0.00 | 0.00 | |
| Totals: | <u>137,950.00</u> | <u>36,026.70</u> | <u>50,436.18</u> | <u>87,513.82</u> | <u>0.00</u> |

| | | |
|---|---|--------------------------|
| Total Expenditures This Period: | ↔ | <u>49,126.34</u> |
| Total Expenditures Year to Date: | ↔ | <u>131,620.87</u> |
| Total Additional In-Kind Match Year to Date: | | <u>0.00</u> |

Checks:

49,126.34

131,620.87

I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

 Program Representative (Signature)

 DWI Coordinator

Title

 Date

| |
|---|
| Local DWI Distribution Program Revenue/Expenditure Summary |
|---|

Program Name
Incorporated County of Los Alamos
Distribution No.: 23-D-D-16

Total Distribution
\$81,500.00

| REVENUES BY SOURCE | | EXPENDITURES BY LINE ITEM | Distribution | In-Kind Match*** | TOTAL |
|--------------------------------|-------------------|---------------------------|------------------|-------------------|-------------------|
| | | ADMINISTRATIVE* | | | |
| Local DWI Program Distribution | 81,500.00 | Personnel Services | | 0.00 | 0.00 |
| | | Employee Benefits | | 0.00 | 0.00 |
| In-Kind Match: | | | | | |
| Program Generated Fees | 1,000.00 | | | | |
| County | 138,320.00 | | | | |
| City | | PROGRAM | | | |
| Judicial/Courts | | Personnel Services | 37,220.00 | 0.00 | 37,220.00 |
| Other (list): | | Employee Benefits | 32,500.00 | 0.00 | 32,500.00 |
| | | Travel (In-State) | 1,350.00 | 0.00 | 1,350.00 |
| | | Travel (Out-of-State) | 0.00 | 0.00 | 0.00 |
| | | Supplies | 3,530.00 | 1,000.00 | 4,530.00 |
| | | Operating Costs | 1,550.00 | 8,000.00 | 9,550.00 |
| | | Contractual Services | 5,350.00 | 129,000.00 | 134,350.00 |
| | | Minor Equipment | 0.00 | 1,320.00 | 1,320.00 |
| | | Capital Purchases** | 0.00 | 0.00 | 0.00 |
| TOTAL REVENUES | 220,820.00 | TOTAL EXPENDITURES | 81,500.00 | 139,320.00 | 220,820.00 |

* Administrative is allowed only as In-Kind Match

**Capital purchases must have prior approval from DFA/LDWI.

*** In-Kind Match must be at least 10% of total expended Distribution

10%= 8,150.00

Distribution Revenue/Expenditure Summary by Component C(1)

Distribution:

| | <u>Budget</u> |
|---------------------------------|------------------|
| Prevention | 7,030.00 |
| Enforcement | 4,320.00 |
| Screening | 0.00 |
| Treatment: Outpatient/Jailbased | 0.00 |
| Compliance Monitoring/Tracking | 15,500.00 |
| Coor, Plan & Eval | 54,650.00 |
| Alternative Sentencing | 0.00 |
| Totals: | 81,500.00 |
| ck | 81,500.00 |

Incorporated County of Los Alamos
1000 Central Avenue, Suite 300
Los Alamos, NM, 87545

505-662-8062
23-D-D-16

In-Kind Match:

| | <u>Budget</u> | |
|---------------------------------|-------------------|---------------|
| Prevention | 137,000.00 | |
| Enforcement | 1,320.00 | |
| Screening | 0.00 | |
| Treatment: Outpatient/Jailbased | 0.00 | |
| Compliance Monitoring/Tracking | 1,000.00 | |
| Coor, Plan & Eval | 0.00 | |
| Alternative Sentencing | 0.00 | |
| Totals: | 139,320.00 | ck 139,320.00 |

Tot. Bud. Exp.: 220,820.00 ck 220,820.00

Local DWI Distribution Program Financial Status Report

Exhibit F

Financial Status Report No.: 1

| | | | | | | | | | | |
|---|------------------|---|------------------|--|--|-------------------|--------------------------|-------------------|------------------|--------------|
| I. A. Program Name Incorporated County of Los Alamos B. Address: 1000 Central Avenue, Suite 300 Los Alamos, NM, 87545 C. Telephone No.: 505-662-8062 D. Distribution No.: 23-D-D-16 | | II. Distribution Received: A. September: 0.00 B. December: 0.00 C. March: 0.00 D. June: 0.00 E. Total Year To Date: 0.00 | | III. Distribution Balance: A. Distribution Year To Date: \$0.00 B. Expenditures Year To Date: \$0.00 C. Expenditures This Quarter: \$0.00 D. Distribution Balance: \$0.00 IV. Report Period Ending: 30-Sep-22 | | | | | | |
| Budget Line Items | Distribution | | | | | In-Kind Match | | | | |
| | Approved Budget | Expenditures This Report | Remaining Budget | Expenditures YTD | | Approved Budget | Expenditures This Report | Remaining Budget | Expenditures YTD | |
| ADMINISTRATIVE | | | | | | | | | | |
| Personnel Services | | | | | | 0.00 | 0.00 | 0.00 | 0.00 | Per. Serv. |
| Employee Benefits | | | | | | 0.00 | 0.00 | 0.00 | 0.00 | Empl. Ben. |
| | | | | | | | | | | |
| PROGRAM | | | | | | | | | | |
| Personnel Services | 37,220.00 | 0.00 | 37,220.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Per. Serv. |
| Employee Benefits | 32,500.00 | 0.00 | 32,500.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Empl. Ben. |
| Travel (In-State) | 1,350.00 | 0.00 | 1,350.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Travel In |
| Travel (Out-of-State) | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Travel Out |
| Supplies | 3,530.00 | 0.00 | 3,530.00 | 0.00 | | 1,000.00 | 0.00 | 1,000.00 | 0.00 | Supplies |
| Operating Costs | 1,550.00 | 0.00 | 1,550.00 | 0.00 | | 8,000.00 | 0.00 | 8,000.00 | 0.00 | Operating |
| Contractual Services | 5,350.00 | 0.00 | 5,350.00 | 0.00 | | 129,000.00 | 0.00 | 129,000.00 | 0.00 | Contractual |
| Minor Equipment | 0.00 | 0.00 | 0.00 | 0.00 | | 1,320.00 | 0.00 | 1,320.00 | 0.00 | Minor Equip. |
| Capital Purchases | 0.00 | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | Cap Purch |
| TOTALS | 81,500.00 | 0.00 | 81,500.00 | 0.00 | | 139,320.00 | 0.00 | 139,320.00 | 0.00 | |

CERTIFICATION: Under penalty of law, I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached, or on file for review. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

Program Fiscal Officer (Printed Name and Title)

Program Representative (Printed Name and Title)

Program Fiscal Officer (Signature) Date

Program Representative (Signature) Date

(DFA/Local Government Division Use Only)

Local Government Division Fiscal Officer Date

Local Government Division Program Manager Date

LOCAL DWI DISTRIBUTION PROGRAM
Distribution Program Financial Status Report
Breakdown By Component

Exhibit F (1)
0

Program: Incorporated County of Los Alamos
Dist. No.: 23-D-D-16
Report No. 1

| | |
|--|-------------|
| Total Distribution Reported This Quarter | 0.00 |
| Total In-Kind Match This Quarter | 0.00 |
| Total Expenditures Reported This Quarter | 0.00 |

Distribution:

| | <u>Budget</u> | <u>This Report</u> | <u>Remaining Budget</u> | <u>Expenditures YTD</u> |
|---------------------------------|------------------|--------------------|-------------------------|-------------------------|
| Prevention | 7,030.00 | | 7,030.00 | 0.00 |
| Enforcement | 4,320.00 | | 4,320.00 | 0.00 |
| Screening | 0.00 | | 0.00 | 0.00 |
| Treatment: Outpatient/Jailbased | 0.00 | | 0.00 | 0.00 |
| Compliance Monitoring/Tracking | 15,500.00 | | 15,500.00 | 0.00 |
| Coor, Plan & Eval | 54,650.00 | | 54,650.00 | 0.00 |
| Alternative Sentencing | 0.00 | | 0.00 | 0.00 |
| Totals: | 81,500.00 | 0.00 | 81,500.00 | 0.00 |

In-Kind Match:

| | <u>Budget</u> | <u>This Report</u> | <u>Remaining Budget</u> | <u>Expenditures YTD</u> |
|---------------------------------|-------------------|--------------------|-------------------------|-------------------------|
| Prevention | 137,000.00 | | 137,000.00 | 0.00 |
| Enforcement | 1,320.00 | | 1,320.00 | 0.00 |
| Screening | 0.00 | | 0.00 | 0.00 |
| Treatment: Outpatient/Jailbased | 0.00 | | 0.00 | 0.00 |
| Compliance Monitoring/Tracking | 1,000.00 | | 1,000.00 | 0.00 |
| Coor, Plan & Eval | 0.00 | | 0.00 | 0.00 |
| Alternative Sentencing | 0.00 | | 0.00 | 0.00 |
| Totals: | 139,320.00 | 0.00 | 139,320.00 | 0.00 |

| | | | |
|---|-------------|---|------------------------|
| Total Expenditures This Period | 0.00 | ↔ | Checks: <u>0.00</u> |
| Total Expenditures Year to Date: | 0.00 | ↔ | <u>0.00</u> |

I hereby certify to the best of my knowledge and belief, the above information is correct, expenditures are properly documented, required matching funds have been spent/obligated in the reported amount, and the copies of all required documentation are attached. The documentation for this payment is true and reflects correct copies of the originals. All payment requests listed are not funded by any other funding source. The service provider shall not bill the grantee and another funding source for the same client at the same time.

Program Representative (Signature)

Title

Date

**Local DWI Grant Program
Revenue/Expenditure Summary**

Grantee
Incorporated County of Los Alamos

Grant No.: 23-D-G-16

Total Grant

\$25,000.00

| REVENUES BY SOURCE | | EXPENDITURES BY LINE ITEM | Grant | In-Kind Match*** | TOTAL |
|-------------------------|------------------|------------------------------|------------------|------------------|------------------|
| | | ADMINISTRATIVE* | | | |
| Local DWI Program Grant | 25,000.00 | Personnel Services | | 0.00 | 0.00 |
| | | Employee Benefits | | 0.00 | 0.00 |
| | | | | | |
| In-Kind Match: | | | | | |
| Program Generated Fees | | | | | |
| County | 3,550.00 | | | | |
| City | | PROGRAM | | | |
| Judicial/Courts | | Personnel Services | 0.00 | 0.00 | 0.00 |
| Other (list): | | Employee Benefits | 0.00 | 0.00 | 0.00 |
| | | Travel (In-State) | 0.00 | 0.00 | 0.00 |
| | | Travel (Out-of-State) | 7,000.00 | 0.00 | 7,000.00 |
| | | Supplies | 2,500.00 | 0.00 | 2,500.00 |
| | | Operating Costs | 500.00 | 3,550.00 | 4,050.00 |
| | | Contractual Services | 15,000.00 | 0.00 | 15,000.00 |
| | | Minor Equipment | 0.00 | 0.00 | 0.00 |
| | | Capital Purchases** | 0.00 | 0.00 | 0.00 |
| | | | | | |
| TOTAL REVENUES | 28,550.00 | TOTAL EXPENDITURES | 25,000.00 | 3,550.00 | 28,550.00 |

* Administrative is allowed only as In-Kind Match

**Capital purchases must have prior approval from DFA/LDWI.

*** In-Kind Match must be at least 10% of Grant Expenditure total

10%= 2,500.00

LOCAL DWI GRANT PROGRAM
Request For Payment/Financial Status Report
by Component

Grant:

| | <u>Budget</u> |
|-------------------------------------|----------------------|
| Prevention | 10,000.00 |
| Enforcement | 0.00 |
| Screening | 0.00 |
| Treatment: Outpatient/Jailbased | 15,000.00 |
| Compliance Monitoring/Tracking | 0.00 |
| Coordination, Planning & Evaluation | 0.00 |
| Alternative Sentencing | 0.00 |
| Totals: | 25,000.00 |

ck 25,000.00

In-Kind Match:

| | <u>Budget</u> |
|-------------------------------------|----------------------|
| Prevention | 3,550.00 |
| Enforcement | 0.00 |
| Screening | 0.00 |
| Treatment: Outpatient/Jailbased | 0.00 |
| Compliance Monitoring/Tracking | 0.00 |
| Coordination, Planning & Evaluation | 0.00 |
| Alternative Sentencing | 0.00 |
| Totals: | 3,550.00 |

ck 3,550.00

Incorporated County of Los Alamos
 1000 Central Ave., Suite 130
 Los Alamos, NM 87544

505-662-8062
 23-D-G-16

Tot. Bud. Expd: 28,550.00 ck

28,550.00

DWI Counsel Meeting Report-June 2022

Monica Schwiner-Compliance Officer

June Pre-Trial Municipal Open Cases: 1

June Probation Municipal Open Cases: 0

June Pre-Trial Magistrate Open Cases: 0

June Probation Magistrate Open Cases: 0

Active DWI Probation Magistrate Open Cases: 8

Active DWI Pre-Trial Magistrate Open Cases: 3

Active DWI Probation Municipal Open Cases: 17

Active DWI Pre-Trial Municipal Open Cases: 9

Probation Magistrate DWI Active Warrants: 0

Pre-Trial Magistrate DWI Active Warrants: 1

Probation Municipal DWI Active Warrants: 3

Pre-Trial Municipal DWI Active Warrants: 0

Los Alamos County DWI Planning Council

Membership Roster

Term 8/1/2022 - 4/30/2023

Adrianna Delvo, RAC Stop

Judy Lovejoy, Citizen Member

Juanita McNiel, Municipal Court

Term 8/1/2022 - 4/30/2024

Jaime Gonzales, Los Alamos Police Department

George Marsden, Los Alamos Teen Center

Jordan Redmond, Los Alamos Family Council

Lauren Smith, Los Alamos National Labs