

ORGANIZED CRIME DRUG ENFORCEMENT TASK FORCES
FY 2017 Agreement
FOR THE USE OF THE STATE OR LOCAL
OVERTIME AND AUTHORIZED EXPENSE/STRATEGIC INITIATIVE PROGRAM

Federal Tax Identification #: _____ DC#: S-32-

Amount Requested: <u>\$ 17,753.00</u>
Number of Officers Listed: <u>1</u>

From: <u>October 1, 2016</u> <small>Beginning Date of Agreement</small>
To: <u>September 30, 2017</u> <small>Ending Date of Agreement</small>

State or Local Organization	
Narcotics Supervisor:	<u>Captain J. Dale</u>
Telephone Number:	<u>(281) 633-7780</u>
E-mail Address:	<u>josh.dale@fortbendcountytx.gov</u>
Fax # (if applicable):	_____

Sponsoring Federal Agency(ies): <u>DEA</u>

OCDETF Investigation / Strategic Initiative Number: <u>sw-TXS-1040</u>
Operation Name: _____

Federal Agency Investigations: Number: <u>M3-15-0255</u>

State or Local Organization Name and Address: <u>Fort Bend County Sheriff's Office</u> <u>1410 Williams Way Boulevard</u> <u>Richmond, Texas 77469</u>

Sponsoring Federal Agency Group/Squad Supervisor: <u>A/GS S. Higgins</u>
Telephone Number: <u>(713) 693-3000</u>
E-mail Address: <u>jeff.s.higgins@usdoj.gov</u>

Please provide the name, telephone number, e-mail address, and fax number for the administrative or financial staff person at the State or Local Organization, who is directly responsible for the billing on the Reimbursement Request:

Name: Linda Rosenberg - Senior Accountant / Fort Bend County Auditor's Office

Telephone Number: (281) 633-7680

E-mail Address: _____

Fax # (if applicable): _____