# **Gun Violence Reduction Program Grant**DOJ-GVRP-2021-22-1

### PROPOSAL COVER SHEET

Santa Barbara County Sheriff's Office

Criminal Investigation Bureau

Lieutenant Juan Camarena

4434 Calle Real

Santa Barbara, CA 93160

805-319-8911

jmc2819@sbsheriff.org

Lieutenant Juan Camarena

4434 Calle Real

Santa Barbara, cA 93160

805-319-8911

jmc2819@sbsheriff.org

Authorized Signatures:	
5:W D	
Name: Bill Brown	Name:
Title: Sheriff/ Coroner	Title:
Date: 11/12/21	Date:
Name:	Name:
Title:	Title:
Date:	Date:

SUMMARY - DESCRIPTION OF REQUEST   REQUIRED					
Funding Requested:	The SBSO is requesting a total of \$685,986 in funding for (1) detective and overtime for effective enforcement of firearm laws prohibiting certain individuals from possessing firearms and ammunition.				
Geographic Area to be Served:	Santa Barbara County is located approximately 100 miles north of Los Angeles and 300 miles south of San Francisco. Santa Barbara County is approximately 2,744 square land miles with 118 coastline. Eight incorporated cities are located within the County: Santa Barbara, Santa Maria, Lompoc, Goleta, Carpinteria, Guadalupe, Solvang & Buellton.				
County Population:	The total population is approximately 446,000 people.				
APPS Entries:	The total number of prohibited persons in Santa Barbara County is 158.				
APPS per Capita:	39.5 APPS entries per 100,000.				

#### PROJECT DESCRIPTION

#### Measurable Outcomes:

The Armed Prohibited Persons System (APPS) was established in 2006 to monitor registered firearm owners who might fall into a prohibited status. APPS is a law enforcement database maintained and run by the California Department of Justice that tracks individuals who are prohibited from possessing firearms due to a felony warrant, restraining order, admission to a mental health facility, conviction of a felony, condition of probation, or certain misdemeanor convictions such as domestic violence.

The desired outcome of this proposed project is to ensure prohibited individuals in the County of Santa Barbara are complying with the prohibition against owning, accessing, or possessing firearms and ammunition. The Santa Barbara County Sheriff's Office (SBSO) will investigate, seize firearms, arrest, and assist in the prosecution of individuals who violate armed and prohibited laws and regulations. SBSO will collect data to determine if the proactive law enforcement procedures utilized within this project are effective in reducing violent crime firearm-related crimes within Santa Barbara County.

SBSO will implement an Armed Prohibited Persons team and will assign one dedicated full-time detective, along with the support of additional detectives during weapon confiscation operations. The detective will investigate potential violations by analyzing the APPS list, comparing the data to the list of gun owners registered through the CA DOJ and Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) and reviewing applicable court records. The detective will work diligently combing through the APPS list to identify persons living within the cities and unincorporated areas of the County of Santa Barbara, who were prohibited from owning firearms and who are still documented as being in possession of firearms. The detective will work closely with the California DOJ, ATF, Santa Barbara County Probation Department, and local police departments in a collaborative effort to locate and remove firearms from potentially dangerous individuals and will seek criminal prosecution when appropriate.

Accurate tracking of prohibited individuals is the foundation of the APPS enforcement process. The SBSO detective will submit APPS data to the California DOJ so APPS will be able to record if firearms were confiscated or if the prohibited individual has moved out of the County of Santa Barbara. SBSO will report to DOJ, for the immediate preceding year, the total number of individuals in the APPS within the County of Santa Barbara, and the number of cases that are active and pending.

The detective will ensure the coordination of cases where the offender has moved out of Santa Barbara County and will make the proper notification to the new county of residence of record.

ROJECT DESCRIPTION	ON					
Goals for Existing Act	vities:	4,				
At present there are zero CA DOJ-Firearms or local law enforcement resources currently within Santa Barbara County who actively investigate suspected violations stemming from the Armed Prohibited Persons System (APPS). The APPS list within Santa Barbara County continues to grow, and with the lack of dedicated resources it will continue to grow unabated. The number of GVRO's issued per year has increased rapidly, with GVRO's recorded in 2020 (851) being 9-times greater than those recorded in 2017 (88).						

#### PROJECT DESCRIPTION

#### Goals for New Activities:

Persons subject to specific domestic violence restraining orders in California are required to surrender any firearms in their possession. The assigned APPS Detectives will review DVROs and other restraining orders and conduct follow-up visits after private parties have served orders or when respondents bring guns voluntarily to the Sheriff's Office. Detectives will review copies of restraining orders from SBSO records to screen respondents for any links to firearms, review petitioners' restraining orders and verify if the check box indicates guns were involved.

The SBSO Detective will collaborate with the Superior Court to effectively ensure Gun Violence Restraining Orders remove firearms from the hands of individuals who pose a severe threat to themselves or others. SBSO will also collaborate with the Superior Court to confiscate or enforce the transfer or legal storage of known firearms from individuals at the time of conviction when an individual is prohibited due to a felony or qualifying misdemeanor.

The SBSO Detective will conduct background checks on everyone listed on the APPS list. The SBSO Detective will determine the prohibiting offense, temporary or lifetime ban, and confirm prohibited status. The SBSO Detective will utilize investigative resources to determine the best known address for the subject. The SBSO Detective will also utilize the Western States Information Network (WSIN) to deconflict.

The SBSO Detective will review the data to identify and track prohibited persons. Detectives will utilize "knock and talk" operations to explain the prohibition and compliance options. Detectives will complete the detailed recording when the SBSO recovers firearms.

SBSO will review the DOJ monthly updated armed prohibited person report. Detectives will routinely contact CA State Parole and query prohibited individuals based on location, criminal charges, and identifying information. The information obtained will be used to monitor gun offenders. SBSO will work with the Santa Barbara County Probation Department to monitor high-risk probationers' compliance with firearm prohibitions. The Santa Barbara County Probation Department database has individuals who are on active probation for firearm violations. SBSO will routinely contact probation and request a check of probation's database to verify whether an individual is on probation for a firearm offense. SBSO will collaborate with Santa Barbara County District Attorney's Office to promptly remove the guns of the newly prohibited individuals.

In 2010, legislation authorized the issuance of a search warrant to law enforcement when the property to be seized includes a firearm. This legislative change will help SBSO's efforts to remove guns from individuals arrested for domestic violence.

The SBSO Detective will educate SBSO and law enforcement patrol personnel regarding the potential prohibiting offense: 5150 W&I, felony arrests, prohibiting misdemeanor arrests, and restrained persons. Patrol deputies will check the Automated Firearm System (AFS) to determine if firearms are registered to a subject. SBSO Detective will coordinate the contact and seizure of the prohibited weapons and ammunition through a consent search and/or a search warrant. The SBSO Detective will engage in community outreach to educate the public about California armed and prohibited laws and the availability of gun violence restraining orders.

The SBSO Detective will account for all firearms listed in the AFS and write a report indicating how the guns have been accounted for, such as seized, out of state verification, or lost or stolen reports taken. If all leads have been exhausted and the firearms cannot be located, a report will be generated documenting the effort and the results of those investigations. All reports will be sent to the Department of Justice Bureau of Firearms. The Detective will complete CA Department of Justice Forms, such as Notice of No Longer in Possession, General Notice of Firearm Prohibition and Power of Attorney for Firearm Transaction, Prohibited Persons Relinquishment Form, and the Automated Firearms System (AFS) Request for Firearms Records.

### GUN VIOLENCE REDUCTION PROGRAM GRANT BUDGET DETAIL Grant # DOJ-GVRP-2021-22-1-X

Costs Per Fiscal Year (July 1 - June 30) A. Personal Services Salaries Classification/Positions Computation FY 2021-22 FY 2022-23 FY 2023-24 Sheriff's Deputy Special Duty Detective \$52.07 x 1040 hours ; 3.5% annual increase \$ 54,153 58,010 Sheriff's Deputy Special Deputy Detective \$52.07 x 2080 hours; 3.5% annual increase 112,096 \$ \$ \$ \$ \$ \$ \$ **SUBTOTAL** 54,153 \$ 112,096 58,010 Overtime Classification/Positions Computation FY 2021-22 FY 2022-23 FY 2023-24 Sheriff's Deputy Special Duty Detective \$78.11 x 100 OT Hours; 3.5% annual increase 3,906 8,084 4,184 Sheriff's Service Technician \$49.71 x 100 OT Hours ; 3.5% annual increase \$ 2,486 \$ 5,145 \$ 2,663 Sheriff's Sergeant \$ 9,148 \$88.39 x 100 OT Hours; 3.5% annual increase 4,420 \$ 4,734 Sheriff's Deputy Special Duty Detective (OT Help) \$78.11 x 100 OT Hours ; 3.5% annual increase \$ 3,906 8,084 \$ 4,148 Sheriff's Deputy Special Duty Detective (OT Help) \$78.11 x 100 OT Hours ; 3.5% annual increase \$ 3,906 8,084 \$ 4,148 Sheriff's Deputy Special Duty Detective (OT Help) \$78.11 x 100 OT Hours ; 3.5% annual increase \$ 3,906 8,084 \$ 4,148 SUBTOTAL \$ 22,530 \$ 46,629 \$ 24,025 Benefits Classification/Positions Computation FY 2021-22 FY 2022-23 FY 2023-24 Sheriff's Deputy Special Duty Detective \$54.18 x 1040 hours ; 3.5% annual increase 56.347 60,361 Sheriff's Deputy Special Duty Detective \$54.18 x 2080 hours; 3.5% annual increase 116,639 \$ \$ \$ \$ \$ \$

**SUBTOTAL** 

**TOTAL PERSONAL SERVICES** 

56,347

133,030 \$

\$

116,639

275,364

60,361

142,396

Page	1	of	3

### GUN VIOLENCE REDUCTION PROGRAM GRANT BUDGET DETAIL Grant # DOJ-GVRP-2021-22-1-X

Description		ost of \$5,000 or more)						
	Computation	Computation FY 2021-22						
Laptops and Body Cameras	Laptop and Body Camera package at \$6,300 each	\$ 6	300 \$ -	\$ -				
Mobile and Portable Radios	1 Mobile at \$7,600 each ; 1 Portable at \$10,500 each	\$ 18	100 \$ -	\$ -				
	SUBTOTAL	\$ 24,	400 \$ -	\$ -				
Other Expenses								
Description	Computation	FY 2021	22 FY 2022-23	FY 2023-24				
/ehicle Lease	1 Vehicles at \$1000 monthly ; 5% annual increase	\$ 12,	000 \$ 12,060	\$ 13,230				
Analytical Software subscription	\$5000 annual; 5% annual increase	\$ 2,	500 \$ 5,250	\$ 2,756				
Equipment Maintenance	Radios (\$45/mo) ; 5% annual increase	\$	270 \$ 567	\$ 298				
quipment Maintenance	Body Cameras (\$50/mo) ; 5% annual increase	\$	150 \$ 315	\$ 166				
		\$	- \$ -	\$ -				
		\$	- \$ -	\$ -				
		\$	- \$ -	\$ -				
Fravel Expenses/Registration Fees*	SUBTOTAL		920 \$ 18,192	\$ 16,450				
	SUBTOTAL		920 \$ 18,192					
escription and Destination		\$ 14,	920 \$ 18,192 22 FY 2022-23	\$ 16,450 FY 2023-24				
Description and Destination		\$ 14,	920 \$ 18,192 22 FY 2022-23	\$ 16,450 FY 2023-24				
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Description and Destination		\$ 14, FY 2021- \$ 11,	22 FY 2022-23 500 \$ 12,100	\$ 16,450 FY 2023-24 \$ 12,700 \$ -				
Description and Destination	Computation	\$ 14, FY 2021- \$ 11, \$	920 \$ 18,192 22 FY 2022-23 500 \$ 12,100 - \$ -	\$ 16,450 FY 2023-24 \$ 12,700 \$ -				
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raining	Computation	\$ 14, FY 2021- \$ 11, \$ \$ \$ \$	920 \$ 18,192  22 FY 2022-23  500 \$ 12,100  - \$ -  - \$ -  00 \$ 12,100	\$ 16,450  FY 2023-24  \$ 12,700  \$ -  \$ 12,700				
Pescription and Destination  raining  approved tobacco related training only. Trave	Computation	\$ 14, FY 2021- \$ 11, \$ \$ \$ \$	920 \$ 18,192  22 FY 2022-23  500 \$ 12,100  - \$ -  - \$ -  00 \$ 12,100	\$ 16,450  FY 2023-24  \$ 12,700  \$ -  \$ 12,700				
Travel Expenses/Registration Fees* Description and Destination  Training  approved tobacco related training only. Travel  Administrative Costs*	Computation	\$ 14, FY 2021- \$ 11, \$ \$ \$ \$	920 \$ 18,192  22 FY 2022-23  500 \$ 12,100  - \$ -  - \$ -  00 \$ 12,100  20 \$ 30,292	\$ 16,450  FY 2023-24  \$ 12,700  \$ -  \$ 12,700				

TOTAL

\$

8,027 \$

8,308 \$

8,599

\*Administrative costs may not exceed 5% of the total budget.

## GUN VIOLENCE REDUCTION PROGRAM GRANT BUDGET DETAIL Grant # DOJ-GVRP-2021-22-1-X

SUMMARY								
Budget Category	FY	2021-22	F۱	2022-23	F۱	2023-24	Tota	al Request
A. Personal Services	\$	133,030	\$	275,364	\$	142,396	\$	550,790
B. Operating Expenses and Equipment	\$	50,820	\$	30,292	_\$_	29,150	_\$_	110,262
C. Administrative Costs	\$	8,027	\$	8,308	\$	8,599	\$	24,934
TOTAL PROJECT COSTS	_\$_	191,877	\$	313,964	\$	180,145	\$	685,986

Print Form Reset Form

STATE OF CALIFORNIA – DEPARTMENT OF FINANCE

PAYEE DATA RECORD

(Required when receiving payment from the State of California in lieu of IRS W-9 or W-7)

STD 204 (Rev. 03/2021)

		Section 1 –					
NAME (This is required. Do not leave		Must match the p	ayee's federal	tax return)		*	
Santa Barbara County Sheriff's (		ED CINCLE M	EMPERILO	NABAT (1)			
BUSINESS NAME, DBA NAME	or DISKEGARD	ED SINGLE IV	IEWIBER LLC	NAIVIE (II	different fro	om above)	
MAILING ADDRESS (number, stre	et ant or suite no	) (See instructi	ions on Page 2				
PO Box 6427	cet, apt. or suite in	o.) (Occ manden	ions on rage z	,			
CITY, STATE, ZIP CODE				EMAIL	ADDRESS		
Santa Barbara CA 93160-6427				The state of the s	@sbsherif		
		Section	2 – Entity T				
Check one (1) box only that ma	tches the entity		ayee listed i	n Section			
☐ SOLE PROPRIETOR / INDIVID			CORPORA	TION (see	instructions	s on page 2)	
☐ SINGLE MEMBER LLC Disrega	□ SINGLE MEMBER LLC Disregarded Entity owned by an individual □ MEDICAL (e.g., or						
☐ PARTNERSHIP			☐ LEGAL		157	)	
☐ ESTATE OR TRUST			⊠ EXEMP		nprofit)		
PROPERTY AND ALL AND ANALYSIS OF THE PROPERTY AND ANALYSIS OF THE ANALYSIS OF			□ ALL 01				
Enter your Tay Identification Num		ction 3 – Tax			ber		
Enter your Tax Identification Num match the name given in Section The TIN is a 9-digit number. <b>Note</b>	1 of this form. [	Do not provide	more than on	e (1) TIN.	Social S	Security Number (SSN) or al Tax Identification Number (ITIN)	
<ul> <li>For Individuals, enter SSN.</li> </ul>						an run iuonimounon rumbor (rint)	
<ul> <li>If you are a Resident Alien, a SSN, enter your ITIN.</li> </ul>	and you do not h	ave and are n	ot eligible to g	et an			
<ul> <li>Grantor Trusts (such as a Renot have a separate FEIN. The such as a separate of the</li></ul>					OR		
<ul> <li>For Sole Proprietor or Single sole member is an individual prefers SSN).</li> </ul>					Federal (FEIN)	Employer Identification Number	
<ul> <li>For Single Member LLC (dis business entity, enter the ow</li> </ul>					9 5	-6 0 0 2 8 3 3	
<ul><li>entity's FEIN.</li><li>For all other entities including</li></ul>			ition or partne	rship,		*	
estates/trusts (with FEINs), er							
	Section 4 –	Payee Resi	dency Statu	ı <b>s</b> (See ir	nstruction	s)	
☑ CALIFORNIA RESIDENT – Qui	alified to do busin	ess in Californi	a or maintains	a perman	ent place o	f business in California.	
☐ CALIFORNIA NONRESIDENT	<ul> <li>Payments to no</li> </ul>	onresidents for	services may l	oe subject	to state inc	come tax withholding.	
☐No services performed in C	alifornia						
☐Copy of Franchise Tax Boa		withholding is at	tached.				
		Section 5	- Certifica	tion			
I hereby certify under penalty of Should my residency status cha						true and correct.	
NAME OF AUTHORIZED PAYEE		A T A DE LA COMPANIE	TITLE	-,		E-MAIL ADDRESS	
Hope Vasquez			Chief Finan	cial Office	er	hmv3606@sbsheriff.org	
SIGNATURE Hope Vasquez	itally signed by Hope Vasquez te: 2021.11.04 15:43:40 -07'00'		<b>DATE</b> 11/4/2021		TELEPHONE (include area code) 805-681-4299		
La		Section 6 – P					
Please return completed form to			uyg otate	, .gooj			
STATE AGENCY/DEPARTMENT	OFFICE		UNIT/SECT	ION			
MAILING ADDRESS			FAX	<del>,</del>		TELEPHONE (include area code)	
CITY	CTATE	7ID 0005		E 344"	ADDDEC	<u> </u>	
CITY	STATE	ZIP CODE		E-MAIL	ADDRESS		

STATE OF CALIFORNIA - DEPARTMENT OF FINANCE

#### PAYEE DATA RECORD

(Required when receiving payment from the State of California in lieu of IRS W-9 or W-7) STD 204 (Rev. 03/2021)

#### **GENERAL INSTRUCTIONS**

Type or print the information on the Payee Data Record, STD 204 form. Sign, date, and return to the state agency/department office address shown in Section 6. Prompt return of this fully completed form will prevent delays when processing payments.

Information provided in this form will be used by California state agencies/departments to prepare Information Returns (Form1099).

NOTE: Completion of this form is optional for Government entities, i.e. federal, state, local, and special districts.

A completed Payee Data Record, STD 204 form, is required for all payees (non-governmental entities or individuals) entering into a transaction that may lead to a payment from the state. Each state agency requires a completed, signed, and dated STD 204 on file; therefore, it is possible for you to receive this form from multiple state agencies with which you do business.

Payees who do not wish to complete the STD 204 may elect not to do business with the state. If the payee does not complete the STD 204 and the required payee data is not otherwise provided, payment may be reduced for federal and state backup withholding. Amounts reported on Information Returns (Form 1099) are in accordance with the Internal Revenue Code (IRC) and the California Revenue and Taxation Code (R&TC).

### Section 1 - Payee Information

Name – Enter the name that appears on the payee's federal tax return. The name provided shall be the tax liable party and is subject to IRS TIN matching (when applicable).

- Sole Proprietor/Individual/Revocable Trusts enter the name shown on your federal tax return.
- Single Member Limited Liability Companies (LLCs) that is disregarded as an entity separate from its owner for federal tax purposes enter the name of the individual or business entity that is tax liable for the business in section 1. Enter the DBA, LLC name, trade, or fictitious name under Business Name.
- Note: for the State of California tax purposes, a Single Member LLC is not disregarded from its owner, even if they may be disregarded at the Federal level.
- Partnerships, Estates/Trusts, or Corporations enter the entity name as shown on the entity's federal tax return. The name provided in Section 1 must match
  to the TIN provided in section 3. Enter any DBA, trade, or fictitious business names under Business Name.

Business Name - Enter the business name, DBA name, trade or fictitious name, or disregarded LLC name.

Mailing Address – The mailing address is the address where the payee will receive information returns. Use form STD 205, Payee Data Record Supplement to provide a remittance address if different from the mailing address for information returns, or make subsequent changes to the remittance address.

Section 2 – Entity Type

If the Payee in Section 1 is a(n)	THEN Select the Box for
Individual ● Sole Proprietorship ● Grantor (Revocable Living) Trust disregarded for federal tax purposes	Sole Proprietor/Individual
Limited Liability Company (LLC) owned by an individual and is disregarded for federal tax purposes	Single Member LLC-owned by an individual
Partnerships ● Limited Liability Partnerships (LLP) ● and, LLC treated as a Partnership	Partnerships
Estate ● Trust (other than disregarded Grantor Trust)	Estate or Trust
Corporation that is medical in nature (e.g., medical and healthcare services, physician care, nursery care, dentistry, etc. • LLC that is to be taxed like a Corporation and is medical in nature	Corporation-Medical
Corporation that is legal in nature (e.g., services of attorneys, arbitrators, notary publics involving legal or law related matters, etc.) • LLC that is to be taxed like a Corporation and is legal in nature	Corporation-Legal
Corporation that qualifies for an Exempt status, including 501(c) 3 and domestic non-profit corporations.	Corporation-Exempt
Corporation that does not meet the qualifications of any of the other corporation types listed above • LLC	Corporation-All Other
that is to be taxed as a Corporation and does not meet any of the other corporation types listed above	

#### Section 3 - Tax Identification Number

The State of California requires that all parties entering into business transactions that may lead to payment(s) from the state provide their Taxpayer Identification Number (TIN). The TIN is required by R&TC sections 18646 and 18661 to facilitate tax compliance enforcement activities and preparation of Form 1099 and other information returns as required by the IRC section 6109(a) and R&TC section 18662 and its regulations.

#### Section 4 - Payee Residency Status

#### Are you a California resident or nonresident?

- A corporation will be defined as a "resident" if it has a permanent place of business in California or is qualified through the Secretary of State to do business in California
- · A partnership is considered a resident partnership if it has a permanent place of business in California.
- · An estate is a resident if the decedent was a California resident at time of death.
- · A trust is a resident if at least one trustee is a California resident.
  - o For individuals and sole proprietors, the term "resident" includes every individual who is in California for other than a temporary or transitory purpose and any individual domiciled in California who is absent for a temporary or transitory purpose. Generally, an individual who comes to California for a purpose that will extend over a long or indefinite period will be considered a resident. However, an individual who comes to perform a particular contract of short duration will be considered a nonresident.

For information on Nonresident Withholding, contact the Franchise Tax Board at the numbers listed below:

Withholding Services and Compliance Section: 1-888-792-4900 E-mail address: wscs.gen@ftb.ca.gov

For hearing impaired with TDD, call: 1-800-822-6268 Website: www.ftb.ca.gov

#### Section 5 - Certification

Provide the name, title, email address, signature, and telephone number of individual completing this form and date completed. In the event that a SSN or ITIN is provided, the individual identified as the tax liable party must certify the form. Note: the signee may differ from the tax liable party in this situation if the signee can provide a power of attorney documented for the individual.

#### Section 6 - Paying State Agency

This section must be completed by the state agency/department requesting the STD 204.

#### **Privacy Statement**

Section 7(b) of the Privacy Act of 1974 (Public Law 93-579) requires that any federal, state, or local governmental agency, which requests an individual to disclose their social security account number, shall inform that individual whether that disclosure is mandatory or voluntary, by which statutory or other authority such number is solicited, and what uses will be made of it. It is mandatory to furnish the information requested. Federal law requires that payment for which the requested information is not provided is subject to federal backup withholding and state law imposes noncompliance penalties of up to \$20,000. You have the right to access records containing your personal information, such as your SSN. To exercise that right, please contact the business services unit or the accounts payable unit of the state agency(ies) with which you transact that business.

All questions should be referred to the requesting state agency listed on the bottom front of this form.