Partnership for Success Law Enforcement Overtime Reimbursement Calculation Form

Office of Drug Policy

1) Agency Name	2) Federal CFDA #
Moscow Police Department	**82-6000227**

3) Date			4) Officer	5) Grant Activity	6) Overtime Hours Worked	7) Total OT Hours	8) OT Hourly Rate	9) Approved Benefit Percentage	TOTAL
Month	Day	Year		(i.e, Party Patrols, Interdiction, etc)	(start-end time, use 24 hr. clock)				
4	28	2023	Jacob Tesdahl	Party Patrols	2030-0230	6	$ 49.80	24.00%	$ 370.51
5	5	2023	Aaron Morris	Party Patrols	2000-0000	4	$ 53.30	24.00%	$ 264.37
5	5	2023	Jon Rosinsky	Party Patrols	2000-0000	4	$ 53.30	24.00%	$ 264.37
5	6	2023	Joseph Sieverding	Party Patrols	2000-0230	6.5	$ 66.11	24.00%	$ 532.85
5	6	2023	Jacob Tesdahl	Party Patrols	2000-0230	6.5	$ 49.80	24.00%	$ 401.39
						0	$ -	0.00%	$ -
						0	$ -	0.00%	$ -
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						0	$ -	0.00%	$ -
						0	$ -	0.00%	$ -
0								**$ TOTAL**	$ 1,833.48

1) Fill in agency legal name
2) Federal CFDA # can be located on the Authorization Funding Letter from ODP
3) Enter Date (e.g. 05 | 31 | 11) for each shift that a dedicated officer or dispatcher works overtime during the mobilization
4) Enter the name of the officer or dispatcher who worked OT during the mobilization
5) Enter what grant activity the officer did (i.e. Party patrols, complience checks, interdiction, etc.)
6) Enter the start and end time for each shift, use the 24 hr. clock
7) Add total OT hours worked during the shift (balance from OT hrs #5)
8) OT hourly rate (regular hourly wage x 1.5)
9) Approved benefit percentage is submitted by the agency on the funding request (this rate is derived from the FICA, workers compensation, retirement costs and unemployment)
10) Print name of agency personnel completing the form
11) Agency's grant manager, unless he/she worked OT hours in the mobilization, then it must be signed by the supervisor
12) Date the claim is approved by agency authorized personnel
13) Mileage total accrued by officers working mobilization

I certify the above hours worked and rate calculations are true and correct statements of costs incurred for this grant. Documentation of completed timesheets signed by a supervisor or automated time verification payroll records and pay reports are available for review for this claim requesting federal grant funds. Supporting time verification signed by a supervisor may be required to be submitted.

Eric Warner M146
9) Print name

7/31/2023
11) Date

10) Signature