

# West Texas HIDTA

## High Intensity Drug Trafficking Area

**Travis B. Kuykendall**  
Executive Director

February 8, 2021

### AGENCIES

**APD**  
Alpine Police Department

**APD**  
Anthony Police Department

**CBP**  
Customs and Border Protection

**BCSO**  
Brewster County  
Sheriff's Office

**CCSO**  
Culberson County Sheriff's Office

**DA**  
34<sup>th</sup> Judicial District  
Attorney's Office

**DEA**  
Drug Enforcement  
Administration

**DPS**  
Texas Department  
Of Public Safety

**ECISO**  
Ector County  
Sheriff's Office

**EPCSO**  
El Paso County  
Sheriff's Office

**EPPD**  
El Paso  
Police Department

**FBI**  
Federal Bureau  
of Investigation

**HCSO**  
Hudspeth County Sheriff's Office

**ICE**  
Immigration and Customs  
Enforcement

**MPD**  
Midland Police Department

**MSO**  
Midland County Sheriff's Office

**NPS**  
National Park  
Service

**PCSO**  
Pecos County Sheriff's Office

**TOAG**  
Texas Office of the  
Attorney General

**USAO**  
U.S. Attorney's  
Office

**USMS**  
U.S. Marshal  
Service

**Honorable Ricardo A. Samaniego, County Judge  
And Members of Commissioner's Court  
County Courthouse, Room 301  
El Paso, Texas 79901**

**RE: Grant Application G21SW0001A – Sheriff's Office – West Texas  
HIDTA - Multiple Initiatives - \$4,159,056**

**Dear Sir and Members of Commissioners' Court:**

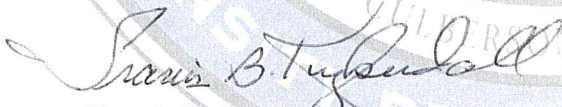
**Respectfully request that Commissioners' Court authorize the County Judge  
to accept and sign the attached FY 2021 Grant Application Documents.**

**The County Attorney has reviewed and approved the grant applications as to  
form.**

**Your favorable consideration to this request would be greatly appreciated.  
There is no cost to the County.**

**Please return the signed grant application documents copies to our office as  
soon as possible.**

**Sincerely,**



**Travis B. Kuykendall**  
Executive Director

**Attachment: 1**

5801 Acacia Circle  
El Paso, TX 79912-4859  
Office: (915) 532-9550 Fax: (915) 532-9931



# COMMISSIONERS COURT CONTRACT FORM

## CONTRACT SUMMARY

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Approve and authorize the County Judge to sign the grant application for G21SW0001A West Texas HIDTA Multiple Initiatives for the Sheriff's Office in the amount of \$4,159,056 from the Office of National Drug Control Policy. No County Match is required. (Contract No. 2021-0075)

**ADDITIONAL BACKGROUND:** The purpose of the HIDTA Program is to reduce drug trafficking by facilitating cooperation among Federal, State and Local Law Enforcement agencies, sharing Information, and implementing coordinated enforcement activities. This program is ongoing since 1995. West Texas HIDTA is administered by the West Texas HIDTA Executive Director/Staff who follow all necessary guidelines set forth in the HIDTA Program Guidance and follow other federal reporting requirements and also receive guidance from the El Paso County Auditors, Purchasing Department and the Sheriff's Office as needed.

**FISCAL IMPACT:** No Cost to the County

**PRIOR COURT ACTION:** N/A

**RECOMMENDATION:** Approval

## BASIC CONTRACT DETAILS

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**CONTRACT NO.:** 2021-0075

**CONTRACT TITLE:** HIDTA / SO / Multiple Initiatives / Grant Application No. G21SW0001A / YR 2021-2022

**SECOND PARTY:** Executive Office of the President, Office of National Drug Control Policy [ONDCP]

**CONTRACT TYPE:** Grant Application

## TERM AND BUDGET DETAILS

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**TERM:**

**EXTENSION OPTIONS:**

**EFFECTIVE DATE:**

**MOD EFFECTIVE DATE (If Applicable):**

**EXPIRATION DATE:**

**MOD EXPIRATION DATE (If Applicable):**

EXTENSION DEADLINE DATE (If Applicable):

AMOUNT:

MOD AMOUNT (If Applicable):

## **APPROVALS**

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### **COUNTY ATTORNEY APPROVAL**

The attached document has been given legal review by the El Paso County Attorney's Office on behalf of the County of El Paso, its officers, and employees. Said legal review should not be relied upon by any person or entity other than the County of El Paso, its officers, and employees.

COUNTY ATTORNEY: Donnie McGilbra

LEGAL REVIEW: Approved as to Form as Submitted

LEGAL REVIEW NOTES (If Applicable):

DATE: 2/8/2021

### **DIRECTOR/DEPARTMENT HEAD APPROVAL**

The undersigned hereby certifies that he/she has read the contract, understands and approves the contract terms and conditions and further certifies that the contract conforms to the bid specification, if any, and acknowledges that he/she is responsible for administering all terms and conditions.

DIRECTOR/DEPARTMENT HEAD/DESIGNEE: Travis Kuykendall

DEPARTMENT CONTACT: Connie Banko

DEPARTMENT: West Texas High Intensity Drug Trafficking Areas (HIDTA)

DATE: 02/08/2021



# West Texas HIDTA

## High Intensity Drug Trafficking Area

**Travis B. Kuykendall**  
Executive Director

January 27, 2021

### AGENCIES

**APD**  
Alpine Police Department

**APD**  
Anthony Police Department

**CBP**  
Customs and Border Protection

**BCSO**  
Brewster County  
Sheriff's Office

**CCSO**  
Culberson County Sheriff's Office

**DA**  
34<sup>th</sup> Judicial District  
Attorney's Office

**DEA**  
Drug Enforcement  
Administration

**DPS**  
Texas Department  
Of Public Safety

**ECSO**  
Ector County  
Sheriff's Office

**EPCSO**  
El Paso County  
Sheriff's Office

**EPPD**  
El Paso  
Police Department

**FBI**  
Federal Bureau  
of Investigation

**HCSO**  
Hudspeth County Sheriff's Office

**ICE**  
Immigration and Customs  
Enforcement

**MPD**  
Midland Police Department

**MSO**  
Midland County Sheriff's Office

**NPS**  
National Park  
Service

**PCSO**  
Pecos County Sheriff's Office

**TOAG**  
Texas Office of the  
Attorney General

**USAO**  
U.S. Attorney's  
Office

**USMS**  
U.S. Marshal  
Service

**Christine Ford**  
**El Paso County Attorney's Office**  
**500 E. San Antonio Ave., Room 503**  
**El Paso, Texas 79901**

**Re: FY 2021 Grant Application G21SW0001A – Sheriff Office - West Texas HIDTA-Multiple Initiatives - \$4,159,056**

**Dear Ms. Ford:**

**Attached is the original FY 2021 Grant Application for the above referenced Grant for your review.**

**West Texas HIDTA would like to have the referenced Grant Application on Commissioners' Court Agenda for March 1, 2021 if at all possible.**

**Please call Connie Banko at 532-9550 as soon as this Grant Application is reviewed and approved. If you have any questions please do not hesitate to call me.**

**Sincerely,**

  
**Travis B. Kuykendall**  
**Executive Director**

**Attachments 1**

5801 Acacia Circle  
El Paso, TX 79912-4859  
Office: (915) 532-9550 Fax: (915) 532-9931





INTERNAL USE ONLY	
Date Approved:	1/26/2021

NO

**BUDGET AND FISCAL POLICY DEPARTMENT  
GRANTS ADMINISTRATION DIVISION**

**GRANT APPLICATION SUBMISSION APPROVAL FORM**

DEPARTMENT INFORMATION	
Date:	1/21/21
Requesting Department/Division:	El Paso County Sheriff's Office (HIDTA Program)
Department/Division Contact:	Travis Kuykendall, Executive Director of West Texas HIDTA (915) 532-9550 TKuykendall@westtexashidta.org
Anticipated Commissioners Court Meeting Grant Approval Date:	March 1, 2021
Who from your department/division will speak on the agenda item?	Travis Kuykendall
Please list accompanying grant documents requiring the Authorized Official's signature.	SF424 Application, SFLLL, & GG Lobbying Form
GRANT OPPORTUNITY INFORMATION	
Grant Opportunity Title (as provided by Grantor):	HIDTA (High Intensity Drug Trafficking Area)
Grantor Agency:	ONDCP
Type of Grant:	Formula
Is this a renewal grant?	No
CobbleStone Number for Most Recent Grant Award:	N/A
Grant Announcement Date:	01/01/21
Grant Due Date:	N/A
Grant Period:	01/01/21 – 12/31/22



<b>Grant Proposal Summary (one paragraph or less):</b>	The purpose of the HIDTA program is to reduce drug trafficking by facilitating cooperation among federal, state and Local Law Enforcement agencies, sharing of information, and implementing coordinated enforcement activities.
<b>GRANT FINANCES</b>	
<b>A. Grant Funding to be Requested:</b>	\$4,159,056
<b>B. Total Match Contribution (if applicable):</b>	\$0
<b>I. Cash Match Amount and Description (i.e. County employee salaries, anticipated operating expenses, third-party monetary donations, etc.):</b>	\$0
<b>a. Match Source Account(s) (if applicable):</b>	\$0
<b>b. What fiscal year(s) will County match funding be needed?</b>	N/A
<b>II. In-kind Match Amount and Description (i.e. donated supplies/equipment, volunteer hours, donated professional services, etc.):</b>	\$0
<b>C. Anticipated Program Income (if applicable):</b>	\$0
<b>D. Total Project Amount (A + B + C):</b>	\$4,159,056
<b>FINANCIAL ASSESSMENT</b>	
<b>1) What are the staffing requirements or needs for this grant? Please include salary and benefit amounts and anticipated salary and benefit increases for multi-year grants.</b>	
1 Lieutenant - \$145,196 12 Detectives - \$1,545,094 2 Sergeants - \$265,611 1 Admin Asst - \$63,000	
<b>2) What are the operational needs that will be requested through the grant (i.e. supplies, equipment, office space, travel, etc.)?</b>	
None required, all operational needs already established	



<p><b>3) Has this grant has been awarded in the past? If so, please provide the financial results of the most recently completed grant award cycle to include the award amount and the balance at the closing of the grant.</b></p>
<p>Yes. Two most recent years: FY 2019 award amount \$4,073,134, balance \$1,242,884 FY 2020 award amount \$4,138,413, balance \$4,134,471</p>
<p><b>4) What is the sustainability plan for this grant and the services being provided if this funding is significantly reduced or is not awarded in future?</b></p>
<p>If HIDTA funding were reduced there would be budget cuts in every initiative under the WTX HIDTA program that would affect possibly funded positions and program components. There is no plan to continue the program if HIDTA funds were to be terminated. Without funding the program would cease to exist.</p>
<p style="text-align: center;"><b>PROGRAMMATIC ASSESSMENT</b></p>
<p><b>1) Is this grant and its purpose(s) aligned with the County strategic plan? How will this grant benefit your department/division and communities in El Paso County?</b></p>
<p>The purpose of the HIDTA program is to reduce drug trafficking by facilitating cooperation among Federal, State and Local Law Enforcement Agencies, sharing of information, and implementing coordinated enforcement activities.</p>
<p><b>2) Please explain the capacity of your department/division to administer this grant and complete all programmatic reporting requirements during the grant period.</b></p>
<p>This program is ongoing since 1995. West Texas HIDTA is administered by the WTX HIDTA Director/staff who follow other federal reporting requirements and also receive guidance from the El Paso County Auditors, Purchasing Department and Sheriff's Office as needed.</p>
<p><b>3) Will this grant require the use of contractual services? <i>If so, please contact the Purchasing Department, upon award acceptance to ensure your department is in compliance with applicable procurement policies and procedures.</i></b></p>
<p>Yes, this grant will require the use of contractual services to reduce the supply of illegal drugs in designated areas.</p>

# West Texas HIDTA

## High Intensity Drug Trafficking Area

**Travis B. Kuykendall**  
Director

January 27, 2021

### AGENCIES

**APD**  
Alpine Police Department

**APD**  
Anthony Police Department

**BCBP**  
Bureau of Customs and Border Protection

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Brewster County Sheriff's Office

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34<sup>th</sup> Judicial District Attorney's Office

**DEA**  
Drug Enforcement Administration

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Texas Department Of Public Safety

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El Paso Police Department

**FBI**  
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**NPS**  
National Park Service

**PCSO**  
Pecos County Sheriff's Office

**TOAG**  
Texas Office of the Attorney General

**USAO**  
U.S. Attorney's Office

**USMS**  
U.S. Marshal

**County Judge Ricardo Samaniego**  
**El Paso County**  
**500 E. San Antonio, Room 301**  
**El Paso, TX 79901**


**Dear County Judge Ricardo Samaniego,**

**We are waiting for the FY 2021 grant award (G21SW0001) to be released for the El Paso County Sheriff's Office in support of West Texas HIDTA Multiple initiatives.**

**The Application is enclosed for this award. If you accept this application, sign all necessary documents and return a copy to our office. Keep the original in your files. We will forward your acceptance documents to the HIDTA Assistance Center in Miami.**

**If you have any questions pertaining to this agreement, please feel free to contact Rosa Marquez at (915) 532-9567.**

**Sincerely,**

  
**Travis B. Kuykendall**  
**Executive Director**

5801 Acacia Circle  
El Paso, TX 79912-4859  
Office: (915) 532-9550 Fax: (915) 532-9931



### Application for Federal Assistance SF-424

**\* 1. Type of Submission:**

- ☐ Preapplication  
☒ Application  
☐ Changed/Corrected Application

**\* 2. Type of Application:**

- ☒ New  
☐ Continuation  
☐ Revision

**\* If Revision, select appropriate letter(s):**

**\* Other (Specify):**

**\* 3. Date Received:**

01/10/2021

**4. Applicant Identifier:**

**5a. Federal Entity Identifier:**

**5b. Federal Award Identifier:**

**State Use Only:**

**6. Date Received by State:**

**7. State Application Identifier:**

**8. APPLICANT INFORMATION:**

**\* a. Legal Name:** County of El Paso, TX

**\* b. Employer/Taxpayer Identification Number (EIN/TIN):**

746000762

**\* c. Organizational DUNS:**

0989704030000

**d. Address:**

**\* Street1:** 500 East San Antonio Street, Room 301

**Street2:**

**\* City:** El Paso

**County/Parish:**

**\* State:** TX: Texas

**Province:**

**\* Country:** USA: UNITED STATES

**\* Zip / Postal Code:** 79901-2424

**e. Organizational Unit:**

**Department Name:**

El Paso County Sheriff's Office

**Division Name:**

**f. Name and contact information of person to be contacted on matters involving this application:**

**Prefix:**

Mr.

**\* First Name:**

Richard

**Middle Name:**

**\* Last Name:**

Wiles

**Suffix:**

**Title:** Sheriff

**Organizational Affiliation:**

**\* Telephone Number:** (915) 538-2006

**Fax Number:**

**\* Email:** rwiles@epcounty.com

## Application for Federal Assistance SF-424

### \* 9. Type of Applicant 1: Select Applicant Type:

B: County Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

\* Other (specify):

### \* 10. Name of Federal Agency:

ONDCE

### 11. Catalog of Federal Domestic Assistance Number:

95.001

CFDA Title:

### \* 12. Funding Opportunity Number:

HIDTA

\* Title:

HIDTA

### 13. Competition Identification Number:

n/a

Title:

### 14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

### \* 15. Descriptive Title of Applicant's Project:

High Intensity Drug Traffic Area

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments



**Application for Federal Assistance SF-424****16. Congressional Districts Of:**

\* a. Applicant

16

\* b. Program/Project

TX-016

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

**17. Proposed Project:**

\* a. Start Date:

01/01/2021

\* b. End Date:

12/31/2022

**18. Estimated Funding (\$):**

\* a. Federal

4,159,056.00

\* b. Applicant

\* c. State

\* d. Local

\* e. Other

\* f. Program Income

\* g. TOTAL

4,159,056.00

**\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**☐ a. This application was made available to the State under the Executive Order 12372 Process for review on☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.☒ c. Program is not covered by E.O. 12372.**\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**☐ Yes☒ No

If "Yes", provide explanation and attach

Add Attachment

Delete Attachment

View Attachment

21. \*By signing this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

☒ \*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

**Authorized Representative:**

Prefix:

\* First Name:

Ricardo

Middle Name:

A.

\* Last Name:

Samaniego

Suffix:

\* Title:

County Judge

\* Telephone Number:

(915) 546-2098

Fax Number:

\* Email:

cjdjudge@epcounty.com

\* Signature of Authorized Representative:

\* Date Signed:

# BUDGET INFORMATION - Non-Construction Programs

## SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. 95.001	95.001	\$	\$	\$ 4,159,056.00	\$	\$ 4,159,056.00
2.						
3.						
4.						
5. Totals		\$	\$	\$ 4,159,056.00	\$	\$ 4,159,056.00



# SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	95.001				
a. Personnel	\$ 1,513,277.00	\$	\$	\$	1,513,277.00
b. Fringe Benefits	533,069.00				533,069.00
c. Travel	6,000.00				6,000.00
d. Equipment					
e. Supplies	39,979.00				39,979.00
f. Contractual	1,980,460.00				1,980,460.00
g. Construction					
h. Other	86,271.00				86,271.00
i. Total Direct Charges (sum of 6a-6h)	4,159,056.00			\$	4,159,056.00
j. Indirect Charges				\$	
k. TOTALS (sum of 6i and 6j)	\$ 4,159,056.00	\$	\$	\$	4,159,056.00
7. Program Income	\$	\$	\$	\$	

SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. 95.001	\$	\$	\$	\$	
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)	\$	\$	\$	\$	
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 4,159,056.00	\$ 1,039,764.00	\$ 1,039,764.00	\$ 1,039,764.00	\$ 1,039,764.00
14. Non-Federal	\$				
15. TOTAL (sum of lines 13 and 14)	\$ 4,159,056.00	\$ 1,039,764.00	\$ 1,039,764.00	\$ 1,039,764.00	\$ 1,039,764.00
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program					
FUTURE FUNDING PERIODS (YEARS)					
	(b) First	(c) Second	(d) Third	(e) Fourth	
16. 95.001	\$	\$	\$	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16 - 19)	\$	\$	\$	\$	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:		22. Indirect Charges:			
23. Remarks:					



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## CERTIFICATION REGARDING LOBBYING

### Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

#### \* APPLICANT'S ORGANIZATION

County of El Paso, Texas

#### \* PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

Prefix:  \* First Name:  Middle Name:   
\* Last Name:  Suffix:   
\* Title:

\* SIGNATURE:



\* DATE:



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# DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

OMB Number: 4040-0013  
Expiration Date: 02/28/2022

<b>1. * Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. * Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. * Report Type:</b> <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> SubAwardee * Name <input type="text" value="County of El Paso, TX"/> * Street 1 <input type="text" value="500 E. San Antonio"/> Street 2 <input type="text"/> * City <input type="text" value="El Paso"/> State <input type="text" value="TX: Texas"/> Zip <input type="text" value="79901"/> Congressional District, if known: <input type="text" value="16/23"/>		
<b>5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:</b>   		
<b>6. * Federal Department/Agency:</b> <input type="text" value="EOP - ONDCP"/>	<b>7. * Federal Program Name/Description:</b> <input type="text"/> CFDA Number, if applicable: <input type="text"/>	
<b>8. Federal Action Number, if known:</b> <input type="text"/>	<b>9. Award Amount, if known:</b> \$ <input type="text"/>	
<b>10. a. Name and Address of Lobbying Registrant:</b> Prefix <input type="text"/> * First Name <input type="text" value="N/A"/> Middle Name <input type="text"/> * Last Name <input type="text" value="N/A"/> Suffix <input type="text"/> * Street 1 <input type="text"/> Street 2 <input type="text"/> * City <input type="text"/> State <input type="text"/> Zip <input type="text"/>		
<b>b. Individual Performing Services</b> (including address if different from No. 10a) Prefix <input type="text"/> * First Name <input type="text" value="N/A"/> Middle Name <input type="text"/> * Last Name <input type="text" value="N/A"/> Suffix <input type="text"/> * Street 1 <input type="text"/> Street 2 <input type="text"/> * City <input type="text"/> State <input type="text"/> Zip <input type="text"/>		
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.  * Signature: <input style="background-color: yellow;" type="text"/> * Name: Prefix <input type="text"/> * First Name <input type="text" value="Ricardo"/> Middle Name <input type="text" value="A."/> * Last Name <input type="text" value="Samaniego"/> Suffix <input type="text"/> Title: <input type="text" value="County Judge"/> Telephone No.: <input type="text"/> Date: <input style="background-color: yellow;" type="text"/>		
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)