

**Individual Application**

**A. Application Details:**

**Application ID:** IA-0000002160

**Application Reference Number:** 2025-DL-LEF-38815

**Program:** DLEF

**Program Area:** LEF - Law Enforcement

**Project Title:** Cartel Gang Narcotics & Laundering Task Force

**Project Start and End Period:** 2026-07-01 To 2027-06-30

**Focus of Application:** County

**B. Project Director**

**Prefix:** Ms.

**First Name:** Rachael

**Last Name:** Murphy

**Title:** Grants Administrator

**Agency:** City of Cleveland, Department of Public Safety

**Email:** rmurphy3@clevelandohio.gov

**Address:** 601 Lakeside Ave, #230

**Phone:** 216-664-7333

**City:** Cleveland

**County:** Cuyahoga

**Zip:** 44114

**C. Implementing:**

**Prefix:** Mr.

**First Name:** Dornat

**Last Name:** Drummond

**Title:** Safety Director

**Agency:** Department of Public Safety

**Email:** ddrummond@clevelandohio.gov

**Address:** 601 Lakeside, #230

**Phone:** 216-623-5126

**City:** Cleveland

**County:** Cuyahoga

**Zip:** 44114-1015

**D. Subgrantee:**

**Prefix:** Mr.

**First Name:** Justin

**Last Name:** Bibb

**Title:** Mayor

**Agency:** City of Cleveland

**Email:** rpunte@clevelandohio.gov

**Address:** 601 Lakeside AVE RM 227

**Phone:** 216-623-5126

**City:** Cleveland

**County:** Cuyahoga

**Zip:** 44114

**Tax Id:** 346000646

**E. Budget Summary:**

**OCJS Funds:** \$249,567.92

**Cash Match:** \$83,189.33

**Inkind Match:** \$0.00

**Total Budget:** \$332,757.25

**Vendor ID and Address code to be completed by OCJS:**

**Non-State Agency OAKS Vendor ID:**

**OAKS Address Code:**

0000100896

052

**State Agency OAKS Vendor ID:**

**Vendor Location:**

EFT-52

**Primary Place of Performance:**

**City:** Cleveland

**State:** Ohio

**Zip:** 44114-1039

**Overage**

**Split Funding**

Organization: Cleveland Police

**Budget Request By Resource & Cost Category**

	1. Matching Funds		2. OCJS Funds	3. Total
	Cash	Inkind		
1. Personnel	\$19,952.81	\$0.00	\$59,858.34	\$79,811.15
2. Consultant/Contracts	\$19,578.52	\$0.00	\$58,735.58	\$78,314.10
3. Travel	\$2,520.50	\$0.00	\$7,561.50	\$10,082.00
4. Equipment	\$14,000.00	\$0.00	\$42,000.00	\$56,000.00
5. Supplies	\$250.00	\$0.00	\$750.00	\$1,000.00
6. Other Costs	\$2,137.50	\$0.00	\$6,412.50	\$8,550.00
7. Confidential Funds	\$24,750.00	\$0.00	\$74,250.00	\$99,000.00
8. Indirect Cost	\$0.00	\$0.00	\$0.00	\$0.00
9. Total Project Budget OCJS decision	<b>\$83,189.33</b>	<b>\$0.00</b>	<b>\$249,567.92</b>	<b>\$332,757.25</b>

Please list other Federal, State and Local funding sources received or projected to be received by your Agency in support of the proposed project. If funding is pending please state the projected award date.

What other funding sources are received by your agency in support of your overall program?

	Amount	Percentage %
OCJS Funds Requested:	\$249,567.92	75%
Cash Match:	\$83,189.33	25%
In-Kind Match:	\$0.00	0%
<b>Total Project Budget:</b>	<b>\$332,757.25</b>	<b>100%</b>