Drug Use Prevention Program Grant
2012-2013 Final Report

FINAL REPORT OVERVIEW

THE TIMELY SUBMISSION OF THIS REPORT IS REQUIRED IN ORDER TO FULFILL YOUR OBLIGATIONS AGREED TO IN THE GRANT RECIPIENT ORGANIZATION AGREEMENT AND ORC SECTION 4511.191(F)(4). CAREFULLY READ THE FORM AND ITS INSTRUCTIONS AND PROVIDE ALL INFORMATION REQUESTED. A COMPLETED FORM HAS BEEN INCLUDED AS AN EXAMPLE.

THE FINAL REPORT IS PRESENTED IN THREE SECTIONS. FOR PROGRAMMATIC REPORTING, INCLUDE ONLY ONE GRANT FUNDED PEACE OFFICER PER FORM AND MAKE ADDITIONAL COPIES AS NECESSARY. SCHOOL OFFICIAL (TEACHER, PRINCIPAL OR SUPERINTENDENT) AND PEACE OFFICER SIGNATURES ARE REQUIRED UPON SUBMISSION. LIST ACTIVITIES PERFORMED BETWEEN MARCH 1, 2013 AND AUGUST 31, 2013.

FOR FINANCIAL REPORTING, LIST EACH PEACE OFFICER AND THE AMOUNT THEY WERE PAID WITH DRUG USE PREVENTION GRANT FUNDS FOR THE ENTIRE GRANT YEAR (SEPTEMBER 1, 2012 TO AUGUST 31, 2013.) IF YOUR AGENCY HAS A BALANCE OF UNUSED FUNDS, SUBMIT A CHECK PAYABLE TO "TREASURER, STATE OF OHIO" BY DECEMBER 31, 2013.

FOR PRESCRIPTION DRUG ABUSE PREVENTION PROJECT REPORTING, PROVIDE A SUMMARY OF YOUR AGENCY'S IN-SCHOOL PRESCRIPTION DRUG ABUSE PREVENTION EFFORTS FOR THE ENTIRE GRANT YEAR (SEPTEMBER 1, 2012 TO AUGUST 31, 2013.)

FINAL REPORT SUBMISSION

PLEASE SUBMIT THE COMPLETED FINAL REPORT BY FAX OR E-MAIL ATTACHMENT TO:

E-MAIL: DRUGUSEPREVENTION@OHIOATTORNEYGENERAL.GOV
FAX: (866) 388-1628

ORIGINAL COPIES ARE NOT REQUIRED.

REPORTS ARE DUE BY OCTOBER 15, 2013.

FOR ANY QUESTIONS ABOUT THIS REPORTING FORM, PLEASE CONTACT DAVID HOWE, GRANTS MANAGER, AT (614) 995-0505 OR DRUGUSEPREVENTION@OHIOATTORNEYGENERAL.GOV.

Finance Section
● 30 East Broad Street, 15th Floor ● Columbus, Ohio 43215 ● PHONE: 614.995.0505 ● FAX: 866.388.1628 ●
Email: DrugUsePrevention@OhioAttorneyGeneral.gov

EXAMPLE

Drug Use Prevention Program Grant
2012-2013 Final Report

PROGRAMMATIC REPORT INSTRUCTIONS

- Please type or print all required information.
- Only one peace officer should be listed per sheet. Make additional copies of this form as needed.
- List all grant related activities performed by the peace officer from the dates of March 1, 2013 to August 31, 2013.
- Form must be signed by all relevant public school officials (teacher, principal, or superintendent) and the peace officer listed below.
- Activities performed in non-public schools are not eligible for funding under this grant. ***Do not list non-public schools on this report.***

Please fax or e-mail the completed final report to (866) 388-1628 or DrugUsePrevention@OhioAttorneyGeneral.gov

DUE: OCTOBER 15, 2013

PEACE OFFICER INFORMATION

Peace Officer Name: Officer John Doe
Law Enforcement Agency Name: Anytown Police Department
x D.A.R.E. Officer ☐ School Resource Officer

PROGRAMMATIC INFORMATION

Public School Name: Anytown Intermediate School
School District: Anytown Public Schools
Hours in Classroom/Counseling: 40
Program Date(s): March 1 – May 30
Number of Students: 72
School Official Name: Ms. Jane Smith
School Official Title: Principal
School Official E-mail: jane.smith@anytown.edu
School Official Phone: 937-555-1234
School Official Signature: Jane Smith
Topics Covered: Taught D.A.R.E. Keepin' It Real curriculum in four sixth grade classrooms.

Public School Name: Apple Elementary, Smalltown Middle School
School District: Smalltown Local Schools
Hours in Classroom/Counseling: 30
Program Date(s): March 1 – May 30
Number of Students: 68
School Official Name: Mr. Eric Wilson
School Official Title: Superintendent
School Official E-mail: eric.wilson@anytown.edu
School Official Phone: 937-555-2345
School Official Signature: Eric Wilson
Topics Covered: Taught D.A.R.E. Keepin' It Real curriculum in two seventh grade classrooms and one fifth grade classroom.

Public School Name: George Washington Elementary
School District: King County School District
Hours in Classroom/Counseling: 10
Program Date(s): March 15 – June 2
Number of Students: 28
School Official Name: Ms. Sally Winters
School Official Title: Sixth grade teacher
School Official E-mail: swinters@kingcoschools.edu
School Official Phone: 937-555-3456
School Official Signature: Sally Winters
Topics Covered: Taught D.A.R.E. Elementary curriculum in one sixth grade classroom.

Public School Name: Buckeye High School
School District: Anytown Public Schools
Hours in Classroom/Counseling: 3
Program Date(s): May 22
Number of Students: 500
School Official Name: Mr. John Simpson
School Official Title: Principal
School Official E-mail: john.simpson@anytown.edu
School Official Phone: 937-555-1111
School Official Signature: John Simpson
Topics Covered: Gave presentation to entire student body for Prom Promise program. Discussed dangers of drinking and driving with students.

Public School Name: Green Valley Elementary
School District: King County School District
Hours in Classroom/Counseling: 1
Program Date(s): April 15-16
Number of Students: 29
School Official Name: Ms. Mary Stewart
School Official Title: Principal
School Official E-mail: mstewart@kingcoschools.edu
School Official Phone: 937-555-4567
School Official Signature: Mary Stewart
Topics Covered: Spoke to fourth grade classroom about saying no to drugs and alcohol.

CERTIFICATION

I certify that the information included on the above form is true and correct with appropriate signatures.

John Doe
Peace Officer Signature

03 October 2013
Date

Officer John Doe
Peace Officer Printed Name

For any questions about this reporting form, please contact David Howe, Grants Manager, at (614) 995-0505 or DrugUsePrevention@OhioAttorneyGeneral.gov.

DG 3002
Effective 10/11/2012

EXAMPLE

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2012-2013 Final Report

FINANCIAL REPORT INSTRUCTIONS

- Complete all sections, including agency information and financial expenditures.
- The award period for the financial section of the final report began September 1, 2012 and ends August 31, 2013.
- Reminder: Up to 50 percent of a peace officer's salary (before benefits and overtime) may be paid with grant funds. *Non-salary expenses are not allowable.*

Please fax or e-mail the completed final report to (866) 388-1628 or DrugUsePrevention@OhioAttorneyGeneral.gov

DUE: OCTOBER 15, 2013

AGENCY INFORMATION	
AGENCY NAME	Anytown Police Department
GRANT NUMBER	**2012DUP** 00 **-** 0000
AGENCY ADDRESS	123 Main Street, Anytown, OH 41234
COUNTY	King County
CONTACT PERSON	Officer John Doe
CONTACT E-MAIL	john.doe@anytownpolice.com
CONTACT PHONE	937-555-0911

FINANCIAL EXPENDITURES	
PEACE OFFICER NAME	**AMOUNT PAID WITH GRANT FUNDS**
1. Officer John Doe	$ 7,314.00
2.	$
3.	$
4.	$
5.	$
6.	$
7.	$
8.	$
9.	$
10.	$
11.	$
12.	$
13.	$
14.	$
15.	$
16.	$
17.	$
18.	$
19.	$
20.	$
TOTAL **(A)**	**$ 7,314.00**

ANNUAL GRANT AMOUNT AWARDED TO AGENCY IN 2012-2013	**(B)**	**$ 10,000.00**
GRANT FUNDS EXPENDED (AMOUNT FROM LINE A ABOVE)	**(C)**	**$ 7,314.00**
REMAINING BALANCE (SUBTRACT LINE C FROM LINE B)	**(D)**	**$ 2,686.00**

IF A BALANCE IS LISTED ON LINE (D), PLEASE RETURN A CHECK FOR THAT AMOUNT TO:

OHIO ATTORNEY GENERAL'S OFFICE
FINANCE SECTION
ATTN: DAVID HOWE, GRANTS MANAGER
30 E. BROAD ST., 15TH FLOOR
COLUMBUS, OHIO 43215

CHECKS MUST BE MADE PAYABLE TO "TREASURER, STATE OF OHIO"

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DUE: OCTOBER 15, 2013

PEACE OFFICER INFORMATION

Peace Officer Name:
Law Enforcement Agency Name:
□ D.A.R.E. Officer □ School Resource Officer

PROGRAMMATIC INFORMATION

Public School Name: School District: Hours in Classroom/Counseling: Program Date(s): Number of Students: Topics Covered:	School Official Name: School Official Title: School Official E-mail: School Official Phone: School Official Signature:
Public School Name: School District: Hours in Classroom/Counseling: Program Date(s): Number of Students: Topics Covered:	School Official Name: School Official Title: School Official E-mail: School Official Phone: School Official Signature:
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Public School Name: School District: Hours in Classroom/Counseling: Program Date(s): Number of Students: Topics Covered:	School Official Name: School Official Title: School Official E-mail: School Official Phone: School Official Signature:

CERTIFICATION

I certify that the information included on the above form is true and correct with appropriate signatures.

_____ _____
Peace Officer Signature Date

_____
Peace Officer Printed Name

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DUE: OCTOBER 15, 2013

AGENCY INFORMATION	
AGENCY NAME	
GRANT NUMBER	**2012DUP -**
AGENCY ADDRESS	
COUNTY	
CONTACT PERSON	
CONTACT E-MAIL	
CONTACT PHONE	

FINANCIAL EXPENDITURES	
PEACE OFFICER NAME	**AMOUNT PAID WITH GRANT FUNDS**
1.	$
2.	$
3.	$
4.	$
5.	$
6.	$
7.	$
8.	$
9.	$
10.	$
11.	$
12.	$
13.	$
14.	$
15.	$
16.	$
17.	$
18.	$
19.	$
20.	$
TOTAL (A)	**$**

ANNUAL GRANT AMOUNT AWARDED TO AGENCY IN 2012-2013	**(B)**	**$**
GRANT FUNDS EXPENDED (AMOUNT FROM LINE A ABOVE)	**(C)**	**$**
REMAINING BALANCE (SUBTRACT LINE C FROM LINE B)	**(D)**	**$**

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FINANCE SECTION
ATTN: DAVID HOWE, GRANTS MANAGER
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Drug Use Prevention Program Grant
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PRESCRIPTION DRUG ABUSE PREVENTION PROJECT REPORT INSTRUCTIONS

- Complete all sections, including agency information and project description.
- The award period for the financial section of the final report began September 1, 2012 and ends August 31, 2013.

Please fax or e-mail the completed final report to (866) 388-1628 or DrugUsePrevention@OhioAttorneyGeneral.gov

DUE: OCTOBER 15, 2013

AGENCY INFORMATION	
AGENCY NAME	
CONTACT PERSON	
CONTACT E-MAIL	
CONTACT PHONE	

PRESCRIPTION DRUG ABUSE PREVENTION PROJECT DESCRIPTION
In the space below, please provide a brief description of your agency's in-school prescription drug abuse prevention efforts. Include any anecdotal information illustrating ways in which Drug Use Prevention Grant funding has been used to prevent prescription drug abuse in your local schools.

For any questions about this reporting form, please contact David Howe, Grants Manager, at (614) 995-0505 or DrugUsePrevention@OhioAttorneyGeneral.gov.

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