

**MEMORANDUM OF UNDERSTANDING (MOU) BETWEEN
IMMIGRATION AND CUSTOMS ENFORCEMENT AND THE CITY
OF HAMMOND FOR THE REIMBURSEMENT OF JOINT
OPERATIONS EXPENSES FROM THE
TREASURY FORFEITURE FUND**

This Agreement is entered into by the City of Hammond, Louisiana, (NCIC CODE #LA0530100), and Immigration and Customs Enforcement (ICE), SAC New Orleans, Louisiana, for the purpose of the reimbursement of costs incurred by the Hammond Police Department in providing resources to joint operations/task forces.

Payments may be made to the extent they are included in the ICE Fiscal Year Plan, and the money is available within the Treasury Forfeiture Fund to satisfy the request(s) for the reimbursement of overtime expenses and other law enforcement expenses related to joint operations.

I. LIFE OF THIS AGREEMENT

This Agreement becomes effective on the date it is signed by both parties. It remains in force unless explicitly terminated, in writing, by either party.

II. AUTHORITY

This Agreement is established pursuant to the provisions of 31 USC 9703, the Treasury Forfeiture Fund Act of 1992, which provides for the reimbursement of certain expenses incurred by local, county, and state law enforcement agencies as participants of joint operations/task forces with a federal agency participating in the Treasury Forfeiture Fund.

III. PURPOSE OF THIS AGREEMENT

This Agreement establishes the responsibilities of both parties and the procedures for the reimbursement of certain overtime expenses and other law enforcement expenses pursuant to 31 USC 9703.

IV. APPLICABILITY OF THIS AGREEMENT

This agreement is valid for all joint investigations led by ICE SAC New Orleans, with the participation of the City of Hammond, and until terminated, in writing, by either party.

V. TERMS, CONDITIONS, AND PROCEDURES

A. Assignment of Officer(s)

To the maximum extent possible, the City of Hammond shall assign dedicated police officer(s) to any investigation or joint operation.

Included as part of this Agreement, the City of Hammond shall provide the ICE SAC New Orleans with the names, titles, four last digits of SSNs, badge or ID numbers, and hourly overtime wages of the police officer(s) assigned to the joint operation. This information must be updated as necessary.

B. Submission of Requests for Reimbursement (Invoices) and Supporting Documentation

1. The City of Hammond may request the reimbursement of overtime salary expenses directly related to work on a joint operation with ICE SAC New Orleans, performed by its police officer(s) assigned to this joint operation. In addition, the City of Hammond may request reimbursement of other investigative expenses, such as travel, fuel, training, equipment and other similar costs, incurred by police officer(s) assigned as members of the designated joint operations with the ICE SAC New Orleans.

The City of Hammond **may not** request the reimbursement of the same expenses from any other federal law enforcement agencies that may also be participating in the investigation.

2. **Reimbursement payments will not be made by check.** To receive reimbursement payments, the City of Hammond must ensure that Customs and Border Protection, National Finance Center (CBP/NFC) has a current ACH Form on file with the agency's bank account information, for the purposes of Electronic Funds Transfer. The ACH Form must be sent to the following address:

CBP National Finance Center
Attn: Forfeiture Fund
6650 Telecom Dr.
INDIANAPOLIS, IN 46278

If any changes occur in the City of Hammond's bank account information, a new ACH Form must be filled out and sent to the CBP/NFC as soon as possible.

3. In order to receive the reimbursement of police officers' overtime and other expenses related to joint operations, the City of Hammond must submit to ICE SAC New Orleans the TEOAF Form "Local, County, and State Law Enforcement Agency Request for Reimbursement of Joint Operations Expenses (Invoice)", signed by an authorized representative of that entity and accompanied by supporting documents such as copies of time sheets and receipts.
4. The City of Hammond remains fully responsible, as the employer of the police officer(s) assigned to the investigation, for the payment of overtime salaries and related benefits such as tax withholdings, insurance coverage, and all other requirements under the law, regulation, ordinance, or contract, regardless of the reimbursable overtime charges incurred. Treasury Forfeiture Fund reimburses overtime salaries. Benefits are not reimbursable.
5. The maximum reimbursement entitlement for overtime worked on behalf of the joint investigation is set at \$15,000.00 per police officer, per year.
6. The City of Hammond will submit all requests for the reimbursement of joint operations' expenses to ICE SAC New Orleans, at the following address: 1250 Poydras Street, Suite 2200, New Orleans, LA 70113, Attn. Frances Washington, Ph. (504) 310-8899.

VI. PROGRAM AUDIT

This Agreement and its provisions are subject to audit by ICE, the Department of the Treasury Office of Inspector General, the General Accounting Office, and other government designated auditors. The City of Hammond agrees to permit such audits and agrees to maintain all records relating to these transactions for a period not less than three years; and in the event of an on-going audit, until the audit is completed.

These audits may include reviews of any and all records, documents, reports, accounts, invoices, receipts of expenditures related to this agreement, as well as interviews of any and all personnel involved in these transactions.

VII. REVISIONS

The terms of this Agreement may be amended upon the written approval by both parties. The revision becomes effective on the date of approval.

VIII. NO PRIVATE RIGHT CREATED

This is an internal government agreement between the ICE SAC New Orleans and the City of Hammond and is not intended to confer any right or benefit to any private person or party.

Signatures:

Raymond R. Parmer, Jr.
Special Agent in Charge
U.S. Immigration and Customs
Enforcement
SAC New Orleans, LA

Pete Panepinto
Mayor
City of Hammond
Hammond, LA

Date: _____

Date: _____