

<b>WASHINGTON STATE PATROL INTERAGENCY AGREEMENT Marijuana Eradication 2011</b>	WSP Contract No. C110858FED
	Other Contract No.

This Agreement is between the State of Washington, Washington State Patrol and the Public Agency identified below, and is issued pursuant to the Interlocal Cooperation Act, chapter 39.34 RCW.

<b>PUBLIC AGENCY NAME</b> <b>Pacific County Sheriff's Office</b>	Statewide Vendor Registration Number SWV00
Public Agency Location Address PO Box 27 South Bend WA 98586	Public Agency Mailing Address (if different from location address)
Public Agency Contact Name Sheriff Scott Johnson	Public Agency Contact Telephone (360) 875-9393
Public Agency Contact Fax	Public Agency Contact E-mail Address

**WSP Contact Information**

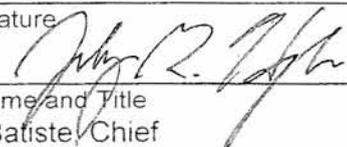
WSP Project Manager Name and Title Lieutenant Rich Wiley Narcotics Section	WSP Project Manager Address WSP Investigative Assistance Division PO Box 42634, Olympia WA 98504-2634	
Telephone (360) 507-0453	Fax (360) 704-2973	E-mail Address richard.wiley@wsp.wa.gov
WSP Administrative Contact Name and Title Ms. Cindy Haider, Contracts Specialist Budget and Fiscal Services	WSP Administrative Contact Address PO Box 42602 Olympia WA 98504-2602	
Telephone (360) 596-4071	Fax (360) 596-4077	E-mail Address cindy.haider@wsp.wa.gov

**Federal Assistance Information**

Is the Public Agency a subrecipient of federal assistance for the purposes of this agreement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CFDA Number(s) 16.000 (For State Reporting Only)
Federal Grant Award Name Domestic Cannabis Eradication/Suppression	Federal Grant Award Number 2011-120
Is this agreement funded by a federal award for research and development? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Federal Award Year 2011

<b>Agreement Start Date</b> January 1, 2011	<b>Agreement End Date</b> November 30, 2011	<b>Maximum Agreement Amount</b> \$3,000
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This Agreement, including the attached Terms and Conditions and any other documents incorporated by reference, contains all of the terms and conditions agreed upon by the parties. No other understandings or representations, oral or otherwise, regarding the subject matter of this Agreement shall be deemed to exist or bind the parties. The parties signing below warrant that they have read and understand this Agreement and have the authority to enter into this Agreement.

<b>FOR THE WASHINGTON STATE PATROL:</b>		<b>FOR THE PUBLIC AGENCY:</b>	
WSP Signature 	Date 5/24/11	Public Agency Signature 	Date 5-15-11
Printed Name and Title John R. Batista, Chief		Printed Name and Title SCOTT L. JOHNSON SHERIFF	

APPROVED AS TO FORM BY THE OFFICE OF THE ATTORNEY GENERAL 4/26/2011

## WSP INTERAGENCY AGREEMENT (Continued)

### 1. **Definitions.**

"Agreement" means this Interagency Agreement, including all documents attached or incorporated by reference.

"Public Agency" means the entity performing services to this Agreement and includes the Public Agency's officers, directors, trustees, employees and/or agents unless otherwise stated in this Agreement. For the purposes of this agreement, the Public Agency shall not be considered an employee or agent of WSP.

"WSP" means the State of Washington, Washington State Patrol, and its officers, directors, trustees, employees and/or agents.

2. **Statement of Work.** The Public Agency shall perform the services as set forth in Exhibit A, Statement of Work, which is attached hereto and incorporated herein.
3. **Payment.** WSP shall pay the Public Agency an amount not to exceed the Maximum Agreement Amount specified on Page 1 of this Agreement, minus any matching requirements held by the Public Agency as specified in this Agreement.
4. **Billing Procedure.** WSP shall reimburse the Public Agency according to Exhibit A, Statement of Work, for work performed to the satisfaction of the WSP Project Manager. Compensation for services rendered shall be payable upon receipt of properly completed invoices, which shall be submitted not more often than monthly to the WSP Project Manager. The invoices shall describe and document to WSP's satisfaction a description of the work performed, activities accomplished, the progress of the project, and fees and expenses. All invoices submitted for payment by the Public Agency shall reference WSP's agreement number and the Public Agency's Statewide Vendor registration number. The Public Agency shall submit the final invoice not later than 60 days from the Agreement End Date.
5. **Agreement Alterations and Amendments.** WSP and the Public Agency may mutually amend this Agreement. Such amendments shall not be binding unless they are in writing and signed by personnel authorized to bind WSP and the Public Agency.
6. **Assignment.** The work to be provided under this Agreement, and any claim arising thereunder, is not assignable or delegable by either party in whole or in part, without the express written consent of the other party.
7. **Compliance with Civil Rights Laws.** During the period of performance for this Agreement, both parties shall comply with all federal and state nondiscrimination laws.
8. **Disputes.** In the event that a dispute arises under this Agreement, it shall be determined by a Dispute Board in the following manner: The Chief of WSP shall appoint a member to the Dispute Board. The Public Agency shall appoint a member to the Dispute Board. The Chief of WSP and the Public Agency shall jointly appoint a member to the Dispute Board. The Dispute Board shall evaluate the dispute and make a determination of the dispute. The determination of the Dispute Board shall be final and binding to all parties to this Agreement. As an alternative to this process and if applicable, either of the parties may request intervention by the Governor, as provided by RCW 43.17.330, in which event the Governor's process will control.

## WSP INTERAGENCY AGREEMENT (Continued)

9. **Indemnification.** The Public Agency shall be responsible for and shall indemnify and hold WSP harmless for all claims resulting from the acts or omissions of the Public Agency and its subcontractors. WSP shall be responsible for and shall indemnify and hold the Public Agency harmless for all claims resulting from the acts or omissions of WSP and its subcontractors.
10. **Independent Capacity.** The employees or agents of each party who are engaged in the performance of this Agreement shall continue to be employees or agents of that party and shall not be considered for any purpose to be employees or agents of the other party.
11. **Inspection; Maintenance of Records.** During the term of this Agreement and for one year following termination or expiration of this Agreement, the Public Agency shall give reasonable access to the Public Agency's place of business and records to WSP and any other employee or agent of the State of Washington or the United States of America for the purpose of inspecting the Public Agency's place of business and its records, and monitoring, auditing and evaluating the Public Agency's performance and compliance with applicable laws, regulations, rules and this Agreement.

During the term of this Agreement and for six years following termination or expiration of this Agreement, the Public Agency shall maintain records sufficient to document (i) performance of all acts required by statute, regulation, rule, or this Agreement; (ii) substantiate the Public Agency's statement of its organization's structure, tax status, capabilities and performance; and (iii) demonstrate accounting procedures, practices and records which sufficiently and properly document the Public Agency's invoices to WSP and all expenditures made by the Public Agency to perform as required by this Agreement.

12. **Order of Precedence.** In the event of any inconsistency in the terms of this Agreement, or between its terms and any applicable statute or rule the inconsistency shall be resolved by giving precedence in the following order to:

Applicable federal and state law, regulations and rules;  
Exhibit A, Statement of Work;  
Any other provision of this Agreement; and  
Any document incorporated by reference.

13. **Personnel.** WSP officers performing work under the terms of this Agreement shall be under the direct command and control of the Chief of WSP or designee, and shall perform duties required under this Agreement in a manner consistent with WSP policy and regulations, and applicable federal, state and local laws. The assignment of WSP personnel under this Agreement shall be at the discretion of the Chief of WSP or designee.
14. **Rights in Data.** Unless otherwise provided, data which originates from this Agreement shall be "works for hire" as defined by the U.S. Copyright Act of 1976 and shall be owned by WSP. Data shall include, but not be limited to, reports, documents, pamphlets, advertisements, books, magazines, surveys, studies, computer programs, films, tapes, and/or sound reproductions. Ownership includes the right to copyrights, patent, register, and the ability to transfer these rights.

## WSP INTERAGENCY AGREEMENT (Continued)

15. **Savings.** In the event that funds WSP relied upon to establish this Agreement are withdrawn, reduced or limited, or if additional or modified conditions are placed on such funding, WSP may immediately terminate this Agreement by providing written notice to the Public Agency. This termination shall be effective on the date specified in the notice of termination.
16. **Severability.** If any provision of this Agreement or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Agreement which can be given effect without the invalid provision, if such remainder conforms to the requirements of applicable law and the fundamental purpose of this Agreement, and to this end the provisions of this Agreement are declared to be severable.
17. **Single Audit Act Compliance.** If the Public Agency is a subrecipient of a federal award as identified on Page 1 of this Agreement, the Public Agency shall comply with Office of Management and Budget (OMB) Circular A-133, Audits of States, Local Governments and Non-Profit Organizations.
18. **Statewide Vendor Payment Registration.** The Public Agency is required to be registered in the Statewide Vendor Payment System prior to submitting a request for payment under this Agreement. The Washington State Office of Financial Management (OFM) maintains the Statewide Vendor Payment System; to obtain registration materials go to <http://www.ofm.wa.gov/isd/vendors.asp>.
19. **Subcontracting.** Except as otherwise provided in this Agreement, the Public Agency may subcontract for any of the services provided under this Agreement with the prior, written approval of WSP. The Public Agency shall be responsible for the acts and omissions of any subcontractor.
20. **Termination.** Except as otherwise provided in this Agreement, either party may terminate this Agreement upon thirty (30) calendar days written notification. If this Agreement is so terminated, the terminating party shall be liable only for performance in accordance with the terms of this Agreement for performance rendered prior to the effective date of termination.
21. **Waiver.** A failure by either party to exercise its rights under this Agreement shall not preclude that party from subsequent exercise of such rights and shall not constitute a waiver of any other rights under this Agreement unless stated to be such in writing and signed by an authorized representative of the party and attached to the original Agreement.

## STATEMENT OF WORK

1. **Purpose.** There is evidence that trafficking in controlled substances exists and that such illegal activity has a substantial and detrimental effect on the health and general welfare of the people of the State of Washington. The purpose of this Agreement is to provide funding to local law enforcement agencies to support the locating and eradication of illicit cannabis plants, and the investigation and prosecution of cases involving controlled substances before state and federal courts in the State of Washington.
2. **Statement of Work.** The Public Agency, with its own law enforcement personnel and employees, shall perform activities supporting the locating and eradication of illicit cannabis plants, such as:
  - a. Gathering and reporting intelligence data relating to the illicit possession and distribution of marijuana, including information on individuals arrested, weapons seized, plants removed, location of gardens, and techniques used.
  - b. Investigating and charging individuals involved in the domestic production of marijuana. Investigations should seek to identify and charge criminal organizations involved in the illicit production of marijuana.
  - c. Providing, upon request, case-specific information to the Pacific Northwest High-Intensity Drug Trafficking Area (HIDTA) analyst designated by HIDTA to support marijuana investigations statewide. Case-specific information provided to this analyst will be handled in accordance with Western Information System Network (WSIN) policy. Whenever appropriate, the Public Agency will utilize HIDTA intelligence analysts; these analysts support the criminal investigation process by providing direct support as an investigation unfolds, conducting data analysis and research. The value of these services is also found in the technology HIDTA uses to produce analytical charts and graphs depicting all aspects of an investigation.
  - d. Providing law enforcement personnel staffing for illicit marijuana eradication within the State of Washington.
  - e. Arresting and bringing to prosecution defendants charged with the violation of controlled substances laws.
  - f. Submitting cultivation forms for each grow operation seized to the WSP research analyst.
  - g. Sending required samples of eradicated marijuana to the National Institute on Drug Abuse (NIDA) Marijuana Potency Monitoring Program, at the University of Mississippi.
3. **Reporting Requirements.**
  - a. **Financial.** The Public Agency shall submit monthly billing and reports to the WSP Project Manager identified on Page 1 of this Agreement. All billings incurred prior to the end of each quarter will be submitted by the 7<sup>th</sup> of the following month. July 7<sup>th</sup> and October 7<sup>th</sup> and the Agreement end date are the key reporting due dates during the contract period. An example of the designated format for reporting is attached as Exhibit D to this Agreement. An electronic copy of the reporting forms will be provided by the WSP Project Manager; the forms include an excel workbook that has been designed to assist Public Agencies with reporting.

WSP shall not reimburse the Public Agency for any activity or associated cost that has not been identified in a Public Agency's monthly report. All reports and billings must be received by WSP no later than **November 30, 2011**, for all reimbursable activities during the period of performance for this Agreement.

- b. Marijuana Cultivation Seizure Reports. The Public Agency shall report to the WSP research analyst, Paige Groner-Himes (360-704-2397) at [Paige.Groner-Himes@wsp.wa.gov](mailto:Paige.Groner-Himes@wsp.wa.gov), all seizures utilizing the Marijuana Cultivation Seizure Report form (Exhibit B to this Agreement) for each garden seized within 48 hours of the seizure. GPS coordinates are desired for all grow locations and are required for outdoor grow locations. Indoor grow locations require physical addresses and, if available, GPS coordinates.
- c. Cannabis Potency Monitoring Program Reports. The Public Agency shall send required samples of eradicated marijuana to the National Institute on Drug Abuse (NIDA) Marijuana Potency Monitoring Program at the University of Mississippi. Each recipient agency will submit a minimum of four samples utilizing the form and instructions attached as Exhibit C to this Agreement. Potency monitoring is critical for monitoring the increasing potency of marijuana produced in the United States.

#### 4. Allowable Costs.

- a. Agreement funds may be used to reimburse the Public Agency for the following without prior approval by WSP:
  - 1) Law enforcement officer(s) overtime salaries and benefits during the time they are engaged in activities directly supporting the program.
  - 2) Mileage, subsistence and lodging costs for law enforcement officers during the time they are engaged in the eradication process or attending associated training and planning meetings. All mileage, subsistence and lodging costs shall be reimbursed at current State of Washington travel reimbursement rates.
- b. Agreement funds may be used to reimburse the Public Agency for the following if approved in advance by the WSP Project Manager:
  - 1) Rental, leasing, maintenance and operation costs for equipment used directly for marijuana eradication. All aircraft used pursuant to this Agreement shall meet all applicable Federal Aviation Administration rules and regulations.
  - 2) Purchases of equipment used directly for marijuana eradication. The Public Agency shall request approval of the purchase in advance by WSP in a detailed letter or email to the WSP Project Manager identified on Page 1 of this Agreement. Details shall include type and quantity of equipment, the cost of equipment, requested reimbursement amount and how this equipment supports your marijuana eradication efforts. The authorization request letter or email to the Project Manager must be received by the WSP no later than **August 31, 2011**. The WSP shall return a letter or email to the Public Agency granting or denying authorization. The Public Agency must attach a copy of the equipment vendor's invoice and/or packing slip to its billing submitted to WSP for reimbursement of equipment costs.
- c. The Public Agency shall expend all Agreement funds no later than **October 31, 2011**.

5. **Unallowable Costs.** Reimbursement to the Public Agency under this Agreement is limited to those cost items identified in Section 4, Allowable Costs. Additionally, the use of Agreement funds is expressly prohibited for defraying the costs related to herbicidal eradication of marijuana without the written consent of WSP in advance.

6. **Use of Funds by Other Law Enforcement Agencies.** The Public Agency may elect to use Agreement funds to reimburse other law enforcement agencies for their marijuana eradication efforts. If Agreement funds are used in this fashion, the Public Agency remains responsible for ensuring all costs submitted for payment by other law enforcement agencies are allowable under this Agreement. The Public Agency must also report the activities of other law enforcement agencies reimbursed under this Agreement in the Public Agency's monthly report to WSP.

7. **Reallocation of Funds.** As expeditiously as possible, the Public Agency shall notify the WSP Project Manager if the Public Agency shall not be able to expend any portion of funds provided under this Agreement. Subject to the Agreement Alterations and Amendments section of this Agreement, WSP shall reallocate unexpended funds to other law enforcement agencies that have demonstrated a need for additional funding.
8. **Hold Harmless.** In addition to the Indemnification section of this Agreement, the Public Agency shall hold the U. S. Drug Enforcement Administration, its agents and employees, and the United States Government harmless from any and all claims, demands, suits, liabilities and cases of action, or whatever kind and designation, and where-ever located in the State of Washington, resulting from activities funded through this Agreement.
9. **Certifications.** The Public Agency shall execute and return to WSP OJP Form 4061/6, *Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace Requirements*. The Public Agency acknowledges that this Agreement shall not take effect and that no funds shall be reimbursed until the completed OJP Form 4061/6 is received by WSP.
10. **Equipment Management.** The Public Agency shall comply with the property management requirements contained in the Financial Guide published by the Office of Justice Programs, U.S. Department of Justice, concerning the use, tracking/inventory, and disposition of any equipment purchased with Agreement funds.

## MARIJUANA CULTIVATION SEIZURE REPORT

DCE/SP (Domestic Cannabis Eradication Suppression Program)

PO BOX 2347 OLYMPIA, WA 98507-2347

EMAIL COMPLETED FORMS TO: [DCESP.MJ.seizures@wsp.wa.gov](mailto:DCESP.MJ.seizures@wsp.wa.gov)

FAX: (360) 704-2973

PLEASE SUBMIT WITHIN 48 HOURS OF SEIZURE (EMAIL BEST METHOD & PREFERRED)

Seizure Date:		Case: #		County:		Phone:	
Seizing Agency:			Case Officer:			Email:	
Report Prepared By:					Deconfliction with NW HIDTA: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Marijuana Hotline Tip: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown				Sample Sent to University of Mississippi: <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>ADDRESS OF SEIZURE (GPS Coordinates required for indoor &amp; outdoor grows)</b>							
Address:						City:	
Grown By: CHOOSE ONE				Number of Grow Rooms:			
Indoor: <input type="checkbox"/>		<input type="checkbox"/> Residence <input type="checkbox"/> Business		Other: CHOOSE ONE		Description: <input type="checkbox"/> Occupied <input type="checkbox"/> Unoccupied	
Outdoor: <input type="checkbox"/>		Land Type: CHOOSE ONE		Required GPS format – WSG 84 "Deg-Min-Min"		Latitude: _____ Longitude: _____	
<b>SITE SECURITY (Indicate Number of Each. Place description in the Comment Section)</b>							
<input type="checkbox"/> Booby Traps : #		<input type="checkbox"/> Electronic Sensors: #		<input type="checkbox"/> Watch Dogs: #		<input type="checkbox"/> Cameras: # <input type="checkbox"/> Trip Wires: #	
Number of Firearms:		Type: <input type="checkbox"/> Revolver # <input type="checkbox"/> Semi Automatic #		<input type="checkbox"/> Shotguns #		<input type="checkbox"/> Rifles #	
<input type="checkbox"/> Other Weapons: #		(please describe: knives, clubs, arrows, etc)					
<b>GROW CHARACTERISTICS</b>							
Discovered by: CHOOSE ONE		Indoor Gardens #		Plants #		Outdoor Gardens #	
Estimated Age of Plants:		Starts:		1 Mo:		2 Mo:	
				3 Mo:		4 Mo:	
Mature:							
Medical MJ: <input type="checkbox"/> Yes <input type="checkbox"/> NO		Growing Method: <input type="checkbox"/> Drip Irrigation <input type="checkbox"/> Individual Pots <input type="checkbox"/> In-Trays <input type="checkbox"/> Gravity Trays		<input type="checkbox"/> Multi-Plant Pots <input type="checkbox"/> Hydroponics (Without Soil) <input type="checkbox"/> In-Ground			
Plants Seized: _____		Left on Scene: _____					
Ventilation: CHOOSE ONE		Describe:					
Electrical: CHOOSE ONE		Generator Brand:		Output:			
Types of Irrigation Systems: CHOOSE ONE							
Age of Site:		Evidence of Prior Years Cultivation: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Access: <input type="checkbox"/> Maintained Trail <input type="checkbox"/> Tunnel <input type="checkbox"/> Road <input type="checkbox"/> Restricted Access Road <input type="checkbox"/> Varied Routes <input type="checkbox"/> Vehicle		<input type="checkbox"/> Locked Gate <input type="checkbox"/> Walking/Packing <input type="checkbox"/> Other:					
<b>NUMBER &amp; VALUE OF ASSETS SEIZED (Indicate estimated cash value)</b>							
Currency: \$		Real Estate Value: \$			Vehicle Value: \$		
Other (Weapons, Grow Equipment, etc.): \$		Bulk/Processed Marijuana (lbs.):			Other Drugs (Type & Amount):		
<b>ARRESTS/CHARGING INFORMATION</b>							
DTO: <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes: CHOOSE ONE		DTO Type: CHOOSE ONE		Citizen Status: CHOOSE ONE	
No. Persons Arrested:		No. Weapons Seized:		Search Warrants Served: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Arrested: <input type="checkbox"/> State <input type="checkbox"/> Federal		Armed at Arrest					
<input type="checkbox"/> Yes <input type="checkbox"/> No		Name:		DOB:		DL# <input type="checkbox"/> /SID# <input type="checkbox"/>	
<input type="checkbox"/> Yes <input type="checkbox"/> No		Name:		DOB:		DL# <input type="checkbox"/> /SID# <input type="checkbox"/>	
<input type="checkbox"/> Yes <input type="checkbox"/> No		Name:		DOB:		DL# <input type="checkbox"/> /SID# <input type="checkbox"/>	
<input type="checkbox"/> Yes <input type="checkbox"/> No		Name:		DOB:		DL# <input type="checkbox"/> /SID# <input type="checkbox"/>	
Medical Marijuana Card: <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Caregiver: <input type="checkbox"/> Patient					
Children Present: <input type="checkbox"/> Yes <input type="checkbox"/> No		Number: _____		Ages: _____			
Number of Injuries: _____		Civilian <input type="checkbox"/> Law Enforcement <input type="checkbox"/>		Officer involved Shooting <input type="checkbox"/>		Degree of Injury: CHOOSE ONE	
<b>Comments:</b>							

*Last Revision 4/29/11 - All other forms are Obsolete*

NATIONAL INSTITUTE ON DRUG ABUSE  
THE UNIVERSITY OF MISSISSIPPI  
CANNABIS POTENCY MONITORING PROJECT

Mail samples to:  
Mahmoud A. ElSohly, Ph.D.  
National Center for Natural  
Products Research - RIPS  
The University of MS  
135 Coy Waller Lab Complex  
University, MS 38677

Mail analysis results to:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone #: \_\_\_\_\_

The \_\_\_\_\_ in accordance with the terms of the Domestic Cannabis Eradication and Suppression Program grant agreement with the Drug Enforcement Administration, has acquired the following sample of domestically grown cannabis which is being forwarded for analysis.

The University of Mississippi requests that samples have the following specifications:

- Must be dried
- Sample should weigh approximately twenty-five (25) grams {one handful}
- Packaged in a "breathable" bag {i.e. paper bag or plastic bag with holes}
- This form completed for EACH sample submitted, however samples can be sent in a batch
- Samples can be sent via registered mail, Federal Express, UPS, etc., however do not mark as restricted delivery

Questions regarding sample handling or analysis should be directed to The University of Mississippi at (662) 915-5928.

Date of Seizure \_\_\_\_\_  
Your Case Number \_\_\_\_\_  
Seizure Location: City \_\_\_\_\_  
State \_\_\_\_\_ County \_\_\_\_\_

GPS Location  
Reference System \_\_\_\_\_  
Latitude \_\_\_\_\_  
Longitude \_\_\_\_\_

Check ONE BOX as Appropriate for Each Category:

**Cannabis Type**

Cultivated Sinsemilla \_\_\_\_\_  
 Cultivated Non-Sinsemilla \_\_\_\_\_  
 Cultivated Ditchweed \_\_\_\_\_  
 Hashish \_\_\_\_\_  
 Ditchweed \_\_\_\_\_  
 Unknown \_\_\_\_\_

**Plant Maturity**

Mature \_\_\_\_\_  
 Immature \_\_\_\_\_  
 Unknown \_\_\_\_\_

**Morphology**

Bud \_\_\_\_\_  
 Leaf \_\_\_\_\_  
 Mixed \_\_\_\_\_  
 Unknown \_\_\_\_\_  
 Other (describe) \_\_\_\_\_

**Grow Location**

Outdoor \_\_\_\_\_  
 Indoor \_\_\_\_\_  
 Unknown \_\_\_\_\_

Number of Plants in Seizure \_\_\_\_\_ plants  
Weight of Seizure (if known) \_\_\_\_\_ Lbs./kg.  
Average Mature Plant Canopy Diameter \_\_\_\_\_  
Average Mature Plant Height \_\_\_\_\_

Live Harvest: Check one: \_\_\_\_\_ Yes \_\_\_\_\_ No  
Is Seizure Weight from a Fresh Green Plant?  
Check one \_\_\_\_\_ Yes \_\_\_\_\_ No  
Seizure Weight from: \_\_\_\_\_ Dry \_\_\_\_\_ Fresh \_\_\_\_\_ Mixed

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Submitter: \_\_\_\_\_

Title: \_\_\_\_\_

## CANNABIS POTENCY MONITORING PROGRAM REPORT DEFINITIONS

**Already Harvested:** Cannabis plant material recently dried or packaged. May be either bud or leaf.

**Average Plant Canopy Diameter:** Record the diameter of a typical mature cannabis plant at its broadest point through the center. Diameter data can be used to predict usable yield with good accuracy.

**Cannabis Bud:** Flowering top of a female cannabis plant. The bud may contain seeds. Most valuable portion of a cannabis plant to the illicit grower. Bud formation occurs late in plant development.

**Cultivated Ditchweed:** Male or female cannabis plant which grows wild in many states that has in some way been tended by man. Examples of tending are: weeding, watering, topping, fertilizing, and harvesting.

**Cultivated Non Sinsemilla:** Male or female cannabis plants commonly grown for illicit drug use.

**Cultivated Sinsemilla:** Female cannabis plant which has not been pollinated. May grow from cutting or from seed. May contain some seed (if unpollinated the seed will be sterile). Common illicit indoor grow technique.

**Ditchweed:** Unattended, wild male or female cannabis that is native to many states.

**Leaf:** Cannabis leaf potency tends to correlate to position on the plant. The most potent part of the plant is the new leaves at the top of the plant. As you move downward on the plant potency decreases. The least potent leaves on the plant are the large leaves at the bottom of the plant.

**Mature Cannabis:** Mature cannabis plants have a higher potency than immature plants. Determination of plant maturity should be made using all available contextual factors. For example, if the plant is outdoors and it's only June or July then the plant is likely immature. However, if the growing season is near an end, such as September or October, then the plant is probably mature. Note: male cannabis plants are mature as early as August when grown outdoors. It is more difficult to generalize regarding maturity of indoor grows. "Spike" cannabis plants can mature in as little as 6-8 weeks whereas an indoor grow with plants 3-4 feet in height may take 8-16 weeks to mature.

**Sample Selection:** Choose mature over immature plants. Choose female over male plants. Choose buds over upper plant leaves. Choose upper plant leaves over lower plant leaves, if no bud is available. Submit more than one sample per seizure if there are observably different groups of mature plants.

STATE: WASHINGTON      DEA OFFICE: SEATTLE  
 REPORTING PERIOD: \_\_\_\_\_  
 1. AGENCY: \_\_\_\_\_      2. WSP CONTRACT NUMBER: \_\_\_\_\_  
 3. TOTAL FUNDS ALLOCATED: \_\_\_\_\_      4. RECEIVED: \_\_\_\_\_

5. FUNDS EXPENDED:

a. CURRENT REPORTING PERIOD

Aircraft Rental (23336/26033)	Building & Space Rental (23201)	Equipment (31045)	Commercial Contracts (25218)	Overtime (25205)		
PE/PI (25203/25204)	Training / Supplies / Materials (25104/26000)	Travel/ Per Diem (21016)	Clothing & Protective Gear (26043)	Vehicle Rental (23337)	Total	

b. PREVIOUS REPORTING PERIOD

Aircraft Rental (23336/26033)	Building & Space Rental (23201)	Equipment (31045)	Commercial Contracts (25218)	Overtime (25205)		
PE/PI (25203/25204)	Training / Supplies / Materials (25104/26000)	Travel/ Per Diem (21016)	Clothing & Protective Gear (26043)	Vehicle Rental (23337)	Previous	Total

TOTAL EXPENDITURES TO DATE:

FUNDS NOT EXPENDED:

DOCUMENT PREPARED BY: \_\_\_\_\_  
 TITLE: \_\_\_\_\_  
 PHONE NO: \_\_\_\_\_  
 SIGNATURE OF AGENCY OFFICIAL: \_\_\_\_\_  
 TITLE / DATE: \_\_\_\_\_      DATE: \_\_\_\_\_

Please submit forms to:

Washington State Patrol  
 Investigative Assistance Division  
 ATTN: DCE/SP  
 PO Box 2347  
 Olympia, WA 98507-2347



CHRISTINE O. GREGOIRE  
Governor



JOHN R. BATISTE  
Chief

STATE OF WASHINGTON  
WASHINGTON STATE PATROL

General Administration Building • PO Box 42600 • Olympia, WA 98504-2600 • (360) 596-4000 • [www.wsp.wa.gov](http://www.wsp.wa.gov)

May 25, 2011

Sheriff Scott Johnson  
Pacific County Sheriff's Office  
PO Box 27  
South Bend WA 98586

Subject: WSP Agreement No. C110858FED, Marijuana Eradication

Enclosed with this letter is one fully executed original of the referenced agreement between the Washington State Patrol and your agency. Please keep this original for your records.

The Washington State Patrol contract tracking number is the agreement number referenced above; please use this number on all correspondence regarding this agreement. If you need further assistance, please contact me at Budget and Fiscal Services, (360) 596-4071.

Sincerely,

A handwritten signature in cursive script that reads "Cindy L. Haider".

Ms. Cindy L. Haider  
Budget and Fiscal Services

clh  
Enclosure