

22 P26



COLLEGE OF DUPAGE

College of DuPage Police Department

425 Fawell Blvd.
Glen Ellyn, Illinois 60137-6599
www.cod.edu

FAX [REDACTED]

Tracy Nichols

February 6, 2012

Assistant State Coordinator

LESO / Springfield

Ms. Nichols,

We have reviewed your LESO inventory listing for College of DuPage Police Department and find it complete and correct (see attachment).

Thank You,

Lt. Ray Snisko

College of DuPage Police Department
[REDACTED]

Requests ID	LEA	Item Description	NSN	DTID	Supply Doc
442910	COLLEGE OF DUPAGE POLICE DEPT	HELMET,GROUND TROOP		W37SS122400094A	H9DEB122897463
440641	COLLEGE OF DUPAGE POLICE DEPT	HELMET,GROUND TROOP		W81DBU21993032	H9DEB122601841
429972	COLLEGE OF DUPAGE POLICE DEPT	HELMET,GROUND TROOP		W45NQ720647162	H9DEB120810046

File Number	Approved Quantity	Actual Date Provided	Ship Quantity	Reconciled Quantity	Onhand	DEMIL	Cond. Code	DEMIL IC
22897463	7	10/24/2002	7		7 B	H7		3
22601841	4	9/19/2002	4		4 B	H7		3
L00208782	5	3/22/2002	5		4 B		0	3

11-19

CLEAR

LAW ENFORCEMENT AGENCY (LEA)
WEAPON REQUEST

REQUESTING AGENCY ID: [REDACTED]

REQUESTING AGENCY: College of DuPage Police Department

ADDRESS (No P.O. Box): 425 Fawell Blvd.

CITY: Glen Ellyn

STATE: IL

ZIP: 60137

EMAIL: snlsko@cod.edu

PHONE: [REDACTED]

FAX: [REDACTED]

LEA USE		FEDERAL USE ONLY				
TYPE OF WEAPON	QUANTITY REQUESTED	PREVIOUSLY ISSUED QTY	LIST NUMBER	GRILL TIMES	PART TIME	QUANTITY APPROVED
[REDACTED]	10					

JUSTIFICATION:

Ten (10) [REDACTED] to be utilized in a training capacity for new and existing officers in rapid response / active shooter scenarios for Northern Illinois region .

The Chief Executive Official or Head of Agency (Local Field Office) read and agrees to the following (INITIALS REQUIRED):

- [REDACTED] Not Applicable for Federal Agencies: Read and understands the terms and conditions applicable to weapon transfers as detailed in the Memorandum of Agreement between the Defense Logistics Agency and the Governor appointed State Coordinator and the State Plan of Action. (Contact applicable State Coordinator for copy of agreement)
- [REDACTED] Ability to maintain, operate, finance, and properly secure the requested weapons.
- [REDACTED] Familiarity with the Bureau of Alcohol, Tobacco, and Firearms (ATF) regulations governing the registration of the requested weapons. (ATF 10)
- [REDACTED] Agency is not authorized to sell, trade, cannibalize for parts, or demilitarize weapons acquired through the 1033 Program

The Chief Executive Official/Head of Agency (Local Field Office) and the State Coordinator, by signing, certifies that all information contained above is valid and accurate.

CHIEF EXECUTIVE OFFICIAL/
HEAD OF LOCAL AGENCY

Mark A. Fazzini

DATE: 02-24-2011

PRINTED NAME

STATE COORDINATOR:
(NOT REQUIRED FOR FEDERAL)

Tracy Nichols

DATE: 2/28/11

PRINTED NAME

SIGNATURE



IN REPLY
REFER TO

J-363

DLA DISPOSITION SERVICES
LAW ENFORCEMENT SUPPORT OFFICE
74 WASHINGTON AVENUE NORTH
BATTLE CREEK, MICHIGAN 49037-3084

March 14, 2011

MEMORANDUM FOR: STATE COORDINATOR
ATTN: DEPUTY CHIEF JOE MULLIN
SUBJECT: WEAPONS REQUEST RESPONSE

IL COLLEGE OF DUPAGE POLICE DEPT
425 FAWELL BLVD
GLEN ELLYN, IL 60137

Dear DEPUTY CHIEF JOE MULLIN:

This letter is to inform you that your agency has been approved by the Law Enforcement Support Office to receive 10 EA. [REDACTED] on LIST 172, pending shipment of weapons while quantities are available. The official weapons transfer agreements will be forwarded to your state coordinator.

If you have any questions regarding this correspondence, contact your state coordinator. If they are unavailable, contact this office at 1 [REDACTED] 66100

Sincerely,

[REDACTED]

C. A. Barrett
Director
Law Enforcement Support Office

[illegible]

**DLA Disposition Services Law Enforcement Support Office
Transfer Request**

Date of the Request: 05/07/2012

Releasing Agency: WINTHROP HARBOR PD		ID:	Receiving Agency: COOK COUNTY DHS		ID:
Address: 200 SPENDAN ROAD			Address: 53 W. WASHINGTON		
City, State, Zip: WINTHROP HARBOR IL 60096			City, State, Zip: CHICAGO, IL 60602		
Phone: [REDACTED]			Phone: [REDACTED]		
Releasing Agency Signature: [REDACTED]			Receiving Agency Signature: [REDACTED]		
State Coordinator Printed Name: [REDACTED]			State Coordinator Printed Name: [REDACTED]		
Signature: [REDACTED]			Signature: [REDACTED]		
The State Coordinator must approve the transfer request. The property may not physically move until the L.E.A. receives approval from the LESO. This form must be signed by the Releasing L.E.A. and State Coordinator or Federal Chief Executive Official (only if the property is being transferred to another State or Federal Agency).			The below is NOT if the transfer is to another State or Federal Agency		
State Coordinator/Federal Approval:		YES	<input type="radio"/>	NO	<input type="radio"/>

Additional Comments:

TRANSFER REQUEST BASED UPON BETTER UTILIZATION AND REPAIR ABILITY

Item Name	NSN/Serial #	File #	DTID	Requisition Number	DEAIL CODE	QTY/TO TRANSFER
FOR LARGE QUANTITY INVENTORIES, A SPREADSHEET MAY BE CREATED AND SUBMITTED WITH THIS TEMPLATE						
1 SEE ATTACHED SPREADSHEET						
2						
3						
4						
5						

LESO USE ONLY:

Adjustment Approved: YES
LESO OFFICIAL: [REDACTED]
Reason if Disapproved:

DATE: 01/8/2012

1684

DLA DISPOSITION SERVICES LESO INVENTORY ADJUSTMENT REQUEST

TRANSFER TO COOK COUNTY DHEM113011
FROM WINTHROP HARBOR POLICE LESO ID#

Transfer Dan Bitton 6/8/2012
COOK COUNTY DHS/EM

LINE NUMBER	Item Name	NSN/Serial #	DLID	Requisition Number	DEMIL CODE	QTY TO BE REMOVED
1	LOADER SCOOP		M985431332AY074	H9DEB120053087	A	1
2	LOADER SCOOP		M985431332AY076	H9DEB120053090	A	1
3	LOADER SCOOP		M985431332AY07N	H9DEB120053091	A	1
4	LOADER SCOOP		M985431332AY078	H9DEB120053095	A	1
5	LOADER SCOOP		M985431332AY07B	H9DEB120053098	A	1
6	LOADER SCOOP		M985431332AY07T	H9DEB120053099	A	1
7	LOADER SCOOP		M985431332AY07N	H9DEB120053103	A	1
8	LOADER SCOOP		M985431332AY077	H9DEB120053105	A	1
9	BUS		FEG49311040134	H9DEB113167920	A	1
10	PRESSURE WASHER		W24PCK12230034B	H9DEB113161500	A	1
11	CASPIR ARMORED VEHICLE		H9DEB112616766	H9DEB113149922	D	1
12	DUMP TRUCK (AM GENERAL)		W421ZF1028000T	H9DEB112396880	Q	1
13	RUCK DUMP INTERNATIONAL		FEG49311300113	H9DEB113100329	A	1
14	LOADER BACK HOE		W907KE10591040A	H9DEB112675180	A	1
15	TRUCK SHOP (CONTACT)		W57KG712840011A	H9DEB113210005	Q	1

[Handwritten signature]

DLA Disposition Services Law Enforcement Support Office

CLEAR

Transfer Request

Date of the Request: 06/07/2012

Releasing Agency: WINTHROP HARBOR PD		ID: [REDACTED]	Receiving Agency: COOK COUNTY DHS	ID: [REDACTED]
Address: 830 SHERIDAN ROAD			Address: 69 W. WASHINGTON	
City, State, Zip: WINTHROP HARBOR IL 60090			City, State, Zip: CHICAGO, IL 60602	
Phone: [REDACTED]			Phone: [REDACTED]	
Releasing Agency Signature: [REDACTED]			Receiving Agency Signature: [REDACTED]	
			<i>The below is N/A if the transfer is within the same State or Federal Agency</i>	
State Coordinator/Federal Approval: [REDACTED]		<input type="radio"/>	State Coordinator/Federal Approval: YES <input type="radio"/> NO <input type="radio"/>	
Printed Name: [REDACTED]			Printed Name: [REDACTED]	
Signature: [REDACTED]			Signature: [REDACTED]	

The State Coordinator must approve the transfer request. The property may not physically move until the LEA receives approval from the LESO. This form must be signed by the Releasing LEA and State Coordinator or Federal Chief Executive Official as well as the Receiving LEA and State Coordinator or Federal Chief Executive Official (only if the property is being transferred to another State or Federal Agency).

Additional Comments:

TRANSFER REQUEST BASED UPON BETTER UTILIZATION AND REPAIR ABILITY

Item Name	NSN/Serial #	File #	DTID	Requisition Number	DEMAIL CODE	QTY TO TRANSFER
FOR LARGE QUANTITY INVENTORIES, A SPREADSHEET MAY BE CREATED AND SUBMITTED WITH THIS TEMPLATE						
1 SEE ATTACHED SPREADSHEET						
2						
3						
4						
5						

LESO USE ONLY:

Adjustment Approved: YES ☐ NO ☐ Completed in LEEDS: YES ☐ NO ☐

LESO OFFICIAL: _____ DATE: _____

Reason if Disapproved: _____

DATE 04/03/2017

PHONE	
FAX	

- ✓ OK = Process within 14 days *(be cancelled thereafter)*
- NOR = Not on record or inventory
- ⊗ NA = Zero'd out or frozen to prior customer

NA = Past screening / Cannot be screened after blue-light/
Columns with an asterisk (*) to be filled by DRMO personnel only

Approved:	[Redacted]
Date:	12/2/13

Qualification - Capt. W. Howard Security

- 3 DUMP TRUCK requested for emergency preparedness primarily in sandbag preparedness and equipment relocation.
- 2 SEMI TRACTORS requested to move LESO equipment across CCDHSEM on lowboy trailers
- 3 SHOP EQUIPMENT CONTACT requested to support 5 CCDHSEM districts by affording filed maintenance on LESO equipment
- 1 POWER PLAN, ELECTRICAL requested to provide emergency power during NATO and beyond

Justification - Cook Co. Homeland Security

3 DUMP TRUCK requested for emergency preparedness primarily in sandbag preparedness and equipment relocation.

2 SEMI TRACTORS requested to move LESO equipment across CCDHSEM on lowboy trailers

3 SHOP EQUIPMENT CONTACT requested to support 5 CCDHSEM districts by affording filed maintenance on LESO equipment

1 POWER PLAN, ELECTRICAL requested to provide emergency power during NATO and beyond

1033 Program Inventory Adjustment

CLEAR

Date of the Request: 10 Feb 2012

Requesting Agency: Coastal Community Services ID: [REDACTED]

Address: 1 Maple Drive

City, State, Zip: Harrodsburg IL 60543

Phone: [REDACTED]

Requesting Agency Signature: [REDACTED]

State Coordinator or Federal Approval: (YES) NO

Printed Name: [REDACTED]

Signature: [REDACTED]

Comments:

Destroyed due to AGE or USE.

A Memorandum for Record (MFR) must accompany this template for controlled property only. The MFR must include details concerning what happened to the property and actions the agency took to recover it. It must be printed on official agency letterhead and must be signed by the Chief Executive Official (State Agency) or the Head of Local Agency (Federal).

Item Name	NSN/Serial #	File #	DTD	Requisition Number	QTY	DEMIL Code
1 <u>Box of 1000 Envelopes</u>	<u>[REDACTED]</u>	<u>409400470</u>	<u>409400470</u>	<u>372009</u>	<u>130</u>	<u>1</u> ✓
2 <u>Box of 1000 Envelopes</u>	<u>[REDACTED]</u>	<u>409400470</u>	<u>409400470</u>	<u>371791</u>	<u>130</u>	<u>3</u> ✓
3						
4						
5						
6						

LESO Use Only

Inventory Adjustment approved by LESO: YES ☒ NO ☐ Inventory Adjustment complete in LEEDS: YES ☒ NO ☐

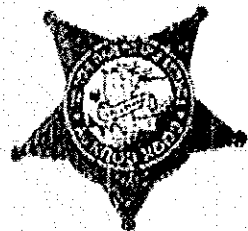
This Inventory Adjustment was not approved by LESO: YES ☐ NO ☒

LESO Coordinator: [REDACTED]

Date: 3/5/12

FOREST PRESERVE DISTRICT OF COOK COUNTY
DEPARTMENT OF LAW ENFORCEMENT

Richard W. Waszak - Chief of Police



Illinois Department of Central Management Services
Chief Richard W. Waszak
10 February 2012
Program Inventory Adjustment

TO:
FROM:
DATE:
SUBJECT:

On the above date, our Department is submitting a Memorandum for Record to adjust inventory on the following LESCO inventory.

- Body Armor, Fragment 130 approved quantity Current inventory > 0
- Helmet, Ground Troop 150 approved quantity Current inventory > 0

Our inventory has been destroyed due to age or usage.

Thank You,



Richard W. Waszak
Chief of Police

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1033 Program Inventory Adjustment

CLEAR

Date of the Request: 10 Feb 2012

Requesting Agency: Clark County Sheriff's Office

Address: 1 Apple Drive

City, State, Zip: Las Vegas, NV 89103

Phone: [REDACTED]

Requesting Agency Signature: [REDACTED]

State Coordinator or Federal Approval: YES NO

Printed Name: [REDACTED]

Signature: [REDACTED]

Comments:

Destroyed due to age or use.

A Memorandum for Record (MER) must accompany this template for controlled property only. The MER must include details concerning what happened to the property and actions the agency took to recover it. It must be printed on official agency letterhead and must be signed by the Chief Executive Official (State Agency) or the Head of Local Agency (Federal).

Item Name	NSN/Serial #	File #	DTID	Requisition Number	QTY	DEMIL Code
1. 201 Apple Reserve	[REDACTED]	4640210	4426142220187	312000	125	1
2. Heisterford Troop	[REDACTED]	4790225	4426140710012	371791	150	3
3						
4						
5						
6						

LESO Use Only

Inventory Adjustment approved by LESO: YES ☐ NO ☐ Inventory Adjustment complete in LEEDS: YES ☐ NO ☐

This Inventory Adjustment was not approved due to the following:

LESO Coordinator:

Date:

DLA Disposition Services Law Enforcement Support Office
Inventory Adjustment Request

Date of the Request: 26, April 2012

Requesting Agency: Cook County Sheriff's Department

Address: 10351 S. Woodman

City, State, Zip: Chicago, IL 60628

Phone: [REDACTED]

Requesting Agency Signature: [REDACTED]

State Coordinator or Federal Representative Signature: [REDACTED]

Printed Name: [REDACTED]

Signature: [REDACTED]

Select reason from the following options (must choose one):

An extensive search was conducted. This property cannot be located.

Additional Comments:

This APC was removed from the Cook County Sheriff's Department inventory shortly after the September 11, 2001 attack. This was done under the previous administration. I have been informed that the APC was picked up by the State of Illinois and no paperwork can be located.

Item Name	NSN/Serial #	File #	DTID	Requisition Number	DEMIL CODE	QTY TO BE REMOVED
FOR LARGE QUANTITY INVENTORIES, A SPREADSHEET MAY BE CREATED AND SUBMITTED WITH THIS TEMPLATE						
1 Carrier, Personnel, F	[REDACTED]	109209534	W80Y7720180001	AG DEB 121340230	D	0
2	[REDACTED]					0
3	[REDACTED]					0
4						0
5						0

LESO USE ONLY:

Adjustment Approved: YES ☐ NO ☐ Completed in LEEDS: YES ☐ NO ☐

LESO OFFICIAL: _____ DATE: _____

Reason if Disapproved: _____

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