



BJA FY 17 State Criminal Alien Assistance Program 2018-H0210-IL-AP



OMB Number: 1121-0243
Expires: 08/31/2019

[Program
Requirements
&
Instructions](#)

Grant Number: 2019-AP-BX-0128
Jurisdiction: County of Lake
Vendor Number: 366606600
Award Amount: \$62,443

[GMS Home](#)

[Log Off](#)

Fiscal Year 2017 Payment Acceptance and Electronic Transfer of Funds

FY 2017 SCAAP Use of Funds List

--- Construction --- Construction for inmate housing, inmate programs, prison industries in ADA compliance --- Training/Education for offender --- Specific trade employment skills GED testing Job Preparedness --- Training for corrections officers to help manage offender population --- Bi-lingual language skills Less than lethal technology training Diversity training	^ ▼
--	-------------------

Declaration and Certification to the U.S. Department of Justice as to this Payment/Drawdown Request

☐ I declare the following to the U.S. Department of Justice (DOJ), under penalty of perjury: (1) I am the "submitting government official" as the term is used and defined in the pertinent OJP program requirements and application instruction document and have authority to make this certification on behalf of the payee; (2) I have conducted (or had conducted for me, including by the payee's legal counsel as appropriate) a diligent review of the pertinent OJP program requirements and application instruction document, all statutory requirements, and all other requirements, certifications, assurances, and conditions that appear in the pertinent State Criminal Alien Assistance Program ("SCAAP") application associated with this payment; and (3) I also have conducted (or had conducted for me) a diligent review of all other matters encompassed by this certification.

To the best of my knowledge and belief, on behalf of myself and the payee, I certify to DOJ, under penalty of perjury, that the following are true as of the date of this request: (1) The payee is in compliance with all requirements for payments under SCAAP that appear in the certifications and assurances for the SCAAP application associated with this payment; (2) the request is accurate and complete and was provided in accordance with the requirements, definitions, and instructions set out in the pertinent OJP program requirements and application instruction document; and (3) any payment made to the payee will be used only for "correctional purposes," as required by 8 U.S.C. § 1231(i)(6).

I understand that, in making payment pursuant to this request, DOJ will rely upon this declaration and certification as a material representation. I also understand that a materially false, fictitious, or fraudulent statement in this declaration and certification or otherwise in this payment/drawdown request (or concealment or omission of a material fact as to either) may be the subject of criminal prosecution (including under 18 U.S.C. §§ 1001 and/or 1621, and/or 34 U.S.C. §§ 10271-10273), and also may subject me and the payee to civil penalties and administrative remedies under the federal False Claims Act (including under 31 U.S.C. §§ 3729-3730 and/or §§ 3801-3812) or otherwise.

Accept

Decline