



INVESTIGATIVE / CONFIDENTIAL FUNDS REQUEST FORM

Agency Name		RMIN ID #	Request Date
Agency Street Address			
City		State	ZIP
Requesting/Fund Control Officer			
Phone #	Fax #	Email Address	
List all other criminal justice/law enforcement agencies involved in the investigation:			
List targeted individuals and attach RMIN Intelligence Database Submission Cards for each suspect that meets RMIN input criteria			
<u>Funding Requested</u>			
Purchase of Evidence \$		_____	
Purchase of Information \$		_____	
Purchase of Service \$		_____	
Total Request \$			
Internal requesting agency case number or investigation name:			
Estimated length of investigation: _____ months			
RMIN Case # (if funding supports active and existing RMIN Investigative Funds. Analytical, Equipment Loan, Computer Forensics, or Audio/Visual Enhancement case)			

Application for funds requested and authorized by:

	Typed or Printed Name	Signature	Date
Requesting/Fund Control Officer			
Supervising Officer (cannot be Fund Control Officer)			
Member Agency RMIN Representative			
Sheriff/Police Chief/Agency Head			

Agency Head: Please initial each item acknowledging understanding of and agreement to the following statements:

	Agency Head Initial
Investigative/Confidential Funds requests will be used in support of RMIN goals and objectives.	S
On the sources of Investigative/Confidential funds were not available or have been fully exhausted prior to this request.	
RMIN Investigative/Confidential Funds Policy and Procedures will be followed.	
All receipts and support documents will be completed and provided to RMIN with the monthly Investigative/Confidential Funds Status Report in a timely manner. All reports are due on or before the 5th day of the month following the report period.	
Adequate security of funds and records maintenance will be provided, using internal guidelines established by member agency.	
Information obtained in the investigation which conforms to 28 CFR Part 23 will be furnished to RMIN for entry into the intelligence database through the use of RMIN's Intelligence Submission Form or other RMIN approved means.	
RMIN staff are available to provide on-site financial staff assistance and may conduct audits of the records pertaining to this Investigative/Confidential Funds Request at any time.	
Investigative/Confidential Funds cases showing no financial activity for 30 days or more must return funds to RMIN unless the fund control officer has RMIN approved waiver. Agency can reapply for funds at a later date should investigation become active again.	
A signature card must be on file with RMIN for each officer or informant used to expend funds. For example: 3x5 index card showing the typed or printed name and signature. Assumed names and signatures are acceptable to protect sources and operations.	

RMIN USE ONLY

	FUNDING REQUESTED	RMIN Budget Office Recommendation	Funding Approved (RMIN Director Only)
Purchase of Evidence			
Purchase of Information			
Purchase of Service			
TOTAL			

	Approval Recommendations	Yes / No	Signature	Date
FSU Manager	Approval Recommendations	Yes / No		
Deputy Director	Approval Recommendation	Yes / No		
Director	Approved / Not Approved			

Executive Policy Board Approval (if request is greater than \$5,000)			
Number of votes	Approved	Not Approved	Date