



# Yamhill County Youth Services Center Department of Community Justice

535 NE. Fifth Street, McMinnville, Oregon 97128 × Phone: 503-434-7407× Fax: 503-434-7408

## Memo

To: Board of Commissioner's

From: Yamhill County Youth Services Center

Subject: Permission to apply for the CIS Public Safety Grant for Fiscal Year 2025/2026

Date: September 4, 2025

CC: Jessica Beach, Cliff Toney, Aaron Stotler, and Laurie Lago

The purpose of this memo is to ask for permission to apply for the CIS Public Safety Grant for Fiscal year 2026/2026. The grant is a reimbursement grant that will help offset the funding for the purchase of two AED devices. One device is to replace the one currently in the facility that is over 13 years old, the second is for our Community Service Program off site location. The Youth Services Center plans on requesting the amount to purchase both machines plus shipping for \$2582.99.

Thank you for your consideration,

Cliff Toney  
Youth Services Center  
Manager

Approved by the Yamhill County Board of

Commissioners on 09/11/2025

via Board Order 25-283



## CIS Public Safety Grant Application for Fiscal Year 2025-26

### CIS PUBLIC SAFETY GRANT GUIDELINES

CIS will evaluate your grant request based on available funds and the risk reduction it provides to your agency and the CIS Pool.

### APPLICATION SUBMISSION

The application window is open from July 15 to Sept. 15, 2025. Send completed grant applications to: [Public Safety Grants](#). All applications must be submitted by the deadline to be considered for funding. Late or incomplete submissions will not be accepted.

Grant applications will be reviewed Sept. 17, 2025. If selected, applicants will be notified by Oct. 15, 2025.

### REIMBURSEMENT REQUIREMENTS

All reimbursement requests must be submitted by May 15, 2026, to Joleen Wallace at [publicsafetygrants@cisoregon.org](mailto:publicsafetygrants@cisoregon.org) in order to process payment by the end of the fiscal year, June 30, 2026.

If reimbursement information is not submitted by May 15, 2026, grant funds will be forfeited.

### To receive payment, CIS must receive the following no later than May 15, 2026:

- A copy of the grant request
- A copy of the grant approval
- A copy of the invoice(s) from the vendor to the CIS member (not a purchase order or quote)
- A copy of the member's payment to the vendor or company (*must be a signed check or credit card statement showing the charge*)

**Please note:** CIS has limited grant funds and may not be able to award the full amount requested.

Once your application is reviewed, you'll receive an email notification with either an approval or a reason for denial.

If you determine you won't be able to use the awarded funds in fiscal year 2025-26, please notify CIS as soon as possible so the funds can be awarded to the next qualifying member. Failure to notify us may affect your eligibility for future grants.

**Questions about the program?** Email the [CIS Public Safety Team](#).

Exhibit A  
B.O. 25-283

**Your Contact Information:**

Date: 09/03/2025

CIS Member Name: Yamhill County Youth Services Center

Name and Title of Person Submitting Grant: Cliff Toney

Office #: \_\_\_\_\_ Cell #: 503 434 7407

Email: toneyc@yamhillcounty.gov

Mailing Address: 535 NE Fifth ST

City: McMinnville Zip Code: 97128

By submitting this application, you agree to the following:

- If approved for the grant, you agree to submit the required documentation by May 15, 2026.
- If approved for a grant and you determine you will not be able to use the awarded grant funds in FY 2025-26, you agree to contact CIS as soon as possible so the funds can be awarded to the next qualifying member. *Failure to notify us may impact your potential for future awarded grant funds.*

**Type of Grant Requested:** (Check the appropriate box)

- Corrections
- Law Enforcement (Patrol/Law Enforcement Administration)
- Body-Worn Camera Systems
- Property and Evidence

**Total Amount of Project:** \$2582.99

**Grant Amount Requested:** \$2582.99

Are there any other grant funds being applied to this project?  Yes  No  
If yes, please explain:

---



---



---



---

Has your agency received a grant from CIS in the past?  Yes  No

If yes, please describe what the grant was for and the year it was awarded. Was the project completed?

Purchase of body scanner in October of 2024, yes project was completed.

---

---

---

---

---

Please use the space below to explain why your agency needs grant funding from CIS.

Our AED is out of date and in need of replacement and our off site program does not currently have one.

This was a budget item that was not anticipated and the machine is needed in the facility as well as at our off-site program.

Please explain how the grant funding will reduce risk for your agency and reduce claims.

The AED puts us in compliance with state guidelines to keep youth and staff safe in the event of an emergency.

Supervisor/Manager of Submitter: Jessica Beach

Title of Supervisor/Manager: Director

Supervisor/Manager Email and Phone Number: beachj@yamhillcounty.gov 503 474 4942

Approximate Completion of Project Date: 11/1/2025

---

---

**CIS Approval of Grant Request:**

Date Grant Request Received: \_\_\_\_\_

Date Grant Approved or Denied: \_\_\_\_\_

CIS Senior LE RMC Approval: \_\_\_\_\_

CIS Director of Risk Management Approval: \_\_\_\_\_

# stryker

## AEDS

	<b>YCCF</b>	<b>Maintenance</b>	<b>Juvenile</b>
Quantity	<b>4</b>	<b>3</b>	<b>2</b>
Price	<b>\$1,267.72</b>	<b>\$1,267.72</b>	<b>\$1,267.72</b>
Total	<b>\$5,070.88</b>	<b>\$3,803.16</b>	<b>\$2,535.44</b>
	<b>Shipping &amp; Handling</b>		
<b>\$142.65</b>	<b>\$47.55</b>	<b>\$47.55</b>	<b>\$47.55</b>
<hr/> <b>Grand Total</b> <hr/>			
	<b>\$5,118.43</b>	<b>\$3,850.71</b>	<b>\$2,582.99</b>



**08.11.2025-YAMHILL COUNTY SHERIFF'S OFFICE-  
Sourcewell Contract: 041823-STYCR2 AED**

Quote Number: 11148535

Remit to: Stryker Sales, LLC  
21343 NETWORK PLACE  
CHICAGO IL 60673-1213  
USA

Version: 1

Prepared For: YAMHILL COUNTY SHERIFF'S OFFICE  
Attn:

Rep: Gaby Collier  
Email: gaby.collier@stryker.com  
Phone Number: (832) 963-4832

Quote Date: 08/27/2025

Expiration Date: 11/25/2025

**Delivery Address**

Name: YAMHILL COUNTY SHERIFF'S OFFICE

Account #:

Address:

McMinnville

Oregon 97128

**Sold To - Shipping**

Name: YAMHILL COUNTY SHERIFF'S OFFICE

Account #:

Address:

McMinnville

Oregon 97128

**Bill To Account**

Name: YAMHILL COUNTY SHERIFF'S OFFICE

Account #:

Address:

**Equipment Products:**

#	Product	Description	Qty	Sell Price	Total
1.0	99512-001435	LIFEPAK CR2 Defibrillator, Semi-Automatic, USB, English, handle, 8 year warranty. Includes 1 PR QUIK-STEP electrodes and 1 battery (4 years each), operating instructions	9	\$1,267.72	\$11,409.48
Equipment Total:					\$11,409.48

**Trade In Credit:**

Product	Description	Qty	Credit Ea.	Total Credit
---------	-------------	-----	------------	--------------

**Price Totals:**

Estimated Sales Tax (0.000%):	\$0.00
Shipping and Handling:	\$142.65
<b>Grand Total:</b>	<b>\$11,552.13</b>

**Comments:**

Sourcewell Contract:  
Account # 9203 **Exhibit A**  
**B.O. 25-283**



**08.11.2025-YAMHILL COUNTY SHERIFF'S OFFICE-  
Sourcewell Contract: 041823-STYCR2 AED**

Quote Number: 11148535

Remit to:

Stryker Sales, LLC  
21343 NETWORK PLACE  
CHICAGO IL 60673-1213  
USA

Version: 1

Prepared For: YAMHILL COUNTY SHERIFF'S OFFICE

Rep:

Gaby Collier

Attn:

Email:

[gaby.collier@stryker.com](mailto:gaby.collier@stryker.com)

Phone Number:

(832) 963-4832

Quote Date: 08/27/2025

Expiration Date: 11/25/2025

**POC:Ben Henle**

[ben.henle@sourcewell-mn.gov](mailto:ben.henle@sourcewell-mn.gov)

Prices: In effect for 30 days

Terms: Net 30 Days

**Terms and Conditions:**

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule. Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency. A copy of Stryker Medical's terms and conditions can be found at [https://techweb.stryker.com/Terms\\_Conditions/index.html](https://techweb.stryker.com/Terms_Conditions/index.html).

**Exhibit A  
B.O. 25-283**