



June 6, 2022

Mark Annas, Emergency Services Administrator  
Riverside, City of  
3085 St. Lawrence Street  
Riverside, CA 92504-4469

Subject: **Notification of Grant Subaward Application Approval**  
Listos California CERT Support Grant Program  
Grant Subaward #: LC21 01 7850

Dear Mark Annas:

Congratulations! The California Governor's Office of Emergency Services (Cal OES) has approved your Grant Subaward application in the amount of \$15,000, subject to Budget approval. A copy of your approved Grant Subaward is enclosed for your records.

Cal OES will make every effort to process payment requests within 45 days of receipt of your Report of Expenditures & Request for Funds (Cal OES Form 2-201).

This Grant Subaward is subject to the Cal OES Subrecipient Handbook. You are encouraged to read and familiarize yourself with the Cal OES Subrecipient Handbook, which can be viewed on the Cal OES website at [www.caloes.ca.gov](http://www.caloes.ca.gov).

Any funds received in excess of current needs, approved amounts, or those funds owed as a result of a close-out or audit, must be refunded to Cal OES within 30 days upon receipt of an invoice.

Please contact your Program Specialist, Kathryn Hardoy, at (916) 328-7651 with questions about this notice.

VS Grants Processing Unit

cc: Subrecipient's file  
Program Specialist

Cal OES #	065-62000-13	FIPS #	065-62000	VS#		Subaward #	LC21 01 7850
-----------	--------------	--------	-----------	-----	--	------------	--------------

## CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES GRANT SUBAWARD FACE SHEET

The California Governor's Office of Emergency Services (Cal OES) hereby makes a Grant Subaward of funds to the following:

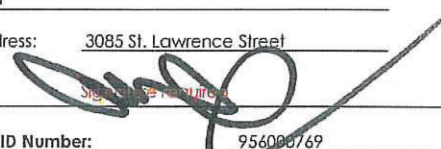
1. Subrecipient:	City of Riverside	1a. UEI#:	040502114	N/A KH
2. Implementing Agency:	Office of Emergency Management	2a. UEI#:	040502114	N/A KH
3. Implementing Agency Address:	3085 St. Lawrence Street (Street)	Riverside (City)	92504-4669 (Zip+4)	
4. Location of Project:	Riverside (City)	Riverside (County)	92504-4669 (Zip+4)	
5. Disaster/Program Title:	<del>LC - Litos California CERT Support Grant Program</del> Litos California CERT Support Grant (LC Program)			
6. Performance/ Budget Period:	6/1/2022 (Start Date)	to	12/31/2023 (End Date)	
7. Indirect Cost Rate:	Select N/A KH	Federally Approved ICR (if applicable):	N/A KH	%

Item Number	Grant Year 2021	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Cost
8.	2022	LIST	\$15,000	\$15,000					\$15,000
9.	Select	Select							
10.	Select	Select							
11.	Select	Select							
12.	Select	Select							
<b>Total</b>	<b>Project</b>	<b>Cost</b>	<b>\$15,000</b>	<b>\$15,000</b>	<b>\$15,000</b>				<b>\$15,000</b>

**13. Certification** - This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

**14. CA Public Records Act** - Grant applications are subject to the California Public Records Act, Government Code section 6250 et seq. Do not put any personally identifiable information or private information on this application. If you believe that any of the information you are putting on this application is exempt from the Public Records Act, please attach a statement that indicates what portions of the application and the basis for the exemption. Your statement that the information is not subject to the Public Records Act will not guarantee that the information will not be disclosed.

**15. Official Authorized to Sign for Subrecipient:**

Name:	Al Zelinka	Title:	City Manager
Payment Mailing Address:	3085 St. Lawrence Street	City:	Riverside
		Zip Code+4:	92504-4669
Signature:		Date:	5/11/22
16. Federal Employer ID Number:	956000769		

**(FOR Cal OES USE ONLY)**

I hereby certify by my personal knowledge that budgeted funds are available for the period of this expenditure stated above.

Approved by:  Mary Rucker (Cal OES Fiscal Officer)	6/3/2022 (Date)	Approved by:  Heather Carlson (Cal OES Director of Designee)	6/3/2022 (Date)
--	--------------------	---	--------------------

ENY: 2021-22 Chapter: 21 SL: 12700  
 Item: 0690-101-0001 Pgm: 0380  
 Fund: General Fund  
 Program: Litos California CERT Support Grant Program  
 Match Req.: None  
 Project ID: OES21LISTOS0000 Amount: \$15,000.00  
 SC: 2021-12700

DS  
JH

DS  
DS

Recieved  
 03/08/2022  
 4:10PM

ML# 756130 JI





**Cal OES**  
GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES



## Grant Subaward Contact Information

Grant Subaward #: LC21 01 7850 (wn)

Subrecipient: City of Riverside

1. **Grant Subaward Director:**

Name: Mark Annas Title: Emergency Services Administrator  
Telephone #: 951-320-8103 Email Address: MAnnas@riversideca.gov  
Address/City/ Zip Code (9-digit): 3085 Saint Lawrence St., Riverside, 92504-4469

2. **Financial Officer:**

Name: Edward Enriquez Title: Chief Financial Officer/Treasurer  
Telephone #: 951-826-5972 Email Address: EEnriquez@riversideca.gov  
Address/City/ Zip Code (9-digit): 3900 Main St., Riverside, 92522-0002

3. **Programmatic Point of Contact:**

Name: Phillip Stachelski Title: Community Preparedness Coordinator  
Telephone #: 951-320-8112 Email Address: PStachelski@riversideca.gov  
Address/City/ Zip Code (9-digit): 3085 Saint Lawrence St., Riverside, 92504-4469

4. **Financial Point of Contact:**

Name: Marilene Cabanlit Title: Sr. Management Analyst  
Telephone #: 951-320-8106 Email Address: MCabanlit@riversideca.gov  
Address/City/ Zip Code (9-digit): 3085 Saint Lawrence St., Riverside, 92504-4469

5. **Executive Director** of a Non-Governmental Organization or the **Chief Executive Officer** (i.e., chief of police, superintendent of schools) of the implementing agency:

Name: ~~Michael D. Moore~~ Michael Moore KH Title: ~~Fire Chief~~ Can not be same as #2  
Telephone #: 951-826-5624 Email Address: MMoore@riversideca.gov  
Address/City/ Zip Code (9-digit): 3401 University Ave., Riverside, 92501-3326

6. **Official Designee**, as stated in Section 15 of the Grant Subaward Face Sheet: Name:

Al Zelinka Title: City Manager  
Telephone #: 951-826-5771 Email Address: AZelinka@riverisdeca.gov  
Address/City/ Zip Code (9-digit): 3900 Main St., Riverside, 92522-0002

7. **Chair** of the **Governing Body** of the Subrecipient:

Name: ~~Lock Dawson~~ Lock Dawson KH Title: Mayor ~~Can not be same as #4~~ SMC  
Telephone #: 951-826-5551 Email Address: 2Mayor@riversideca.gov  
Address/City/ Zip Code (9-digit): 3900 Main St., Riverside, 92522-0002



**Cal OES**  
GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES



### Grant Subaward Signature Authorization

Grant Subaward #: LC21 01 7850 (wn)


Subrecipient: City of Riverside

Implementing Agency: City of Riverside - Office of Emergency Management

The **Grant Subaward Director** and **Financial Officer** are **REQUIRED** to sign this form.

**Grant Subaward Director:**

Printed Name: Mark Annas

Signature: 

Date: 5/11/22

**Financial Officer:**

Printed Name: Edward Enriquez

Signature: 

Date: 5/11/2022

The following persons are authorized to sign for the **Grant Subaward Director**:

Signature: 

Printed Name: Phillip Stachelski

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

The following persons are authorized to sign for the **Financial Officer**:

Signature: 

Printed Name: Marilene Cabanlit

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_





## Grant Subaward Certification of Assurance of Compliance

Subrecipient: City of Riverside

(wn)	Cal OES Program Name	Grant Subaward #:	Grant Subaward Performance Period
	<del>Listos California CERT Support (LC) Program</del>	(wn)	
1	<del>LC - Listos California CERT Support Grant Program</del>	<b>LC21 01 7850</b>	06/01/22 - 12/31/2023
2	Listos California CERT Support Grant (LC) Program		
3			
4			
5			
6			

I, Al Zelinka

(Official Designee; same person as

Section 15 of the Grant Subaward Face Sheet) hereby certify that the above Subrecipient is responsible for reviewing the Subrecipient Handbook (SRH) and adhering to all of the Grant Subaward requirements as directed by Cal OES including, but not limited to, the following areas:

### I. Proof of Authority – SRH 1.055

The Subrecipient certifies they have written authority by the governing board (e.g., County Board of Supervisors, City Council, or Governing Board) granting authority for the Subrecipient/Official Designee (see Section 3.030) to enter into a specific Grant Subaward (indicated by the Cal OES Program name and initial Grant Subaward performance period) and applicable Grant Subaward Amendments with Cal OES. The authorization includes naming of an Official Designee (e.g., Executive Director, District Attorney, Police Chief) for the agency/organization who is granted permission to sign Grant Subaward documents on behalf of the Subrecipient. Written proof of authority includes one of the following: signed Board Resolution or approved Board Meeting minutes.

### II. Civil Rights Compliance – SRH Section 2.020

The Subrecipient acknowledges awareness of, and the responsibility to comply with all state and federal civil rights laws. The Subrecipient certifies it will not discriminate in the delivery of services or benefits based on any protected class and will comply with all requirements of this section of the SRH.

### III. Equal Employment Opportunity – SRH Section 2.025

The Subrecipient certifies it will promote Equal Employment Opportunity by prohibiting discrimination or harassment in employment because of any status protected by state or federal law and will comply with all requirements of this section of the SRH.





**Cal OES**  
GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

**IV. Drug-Free Workplace Act of 1990 – SRH Section 2.030**

The Subrecipient certifies it will comply with the Drug-Free Workplace Act of 1990 and all other requirements of this section of the SRH.


**V. California Environmental Quality Act (CEQA) – SRH Section 2.035**

The Subrecipient certifies that, if the activities of the Grant Subaward meet the definition of a "project" pursuant to the CEQA, Section 20165, it will comply with all requirements of CEQA and this section of the SRH.

**VI. Lobbying – SRH Sections 2.040 and 4.105**

The Subrecipient certifies it will not use Grant Subaward funds, property, or funded positions for any lobbying activities and will comply with all requirements of this section of the SRH.

**All appropriate documentation must be maintained on file by the Subrecipient and available for Cal OES upon request. Failure to comply with these requirements may result in suspension of payments under the Grant Subaward(s), termination of the Grant Subaward(s), and/or ineligibility for future Grant Subawards if Cal OES determines that any of the following has occurred: (1) the Subrecipient has made false certification, or (2) the Subrecipient violated the certification by failing to carry out the requirements as noted above.**

<b>CERTIFICATION</b>	
I, the official named below, am the same individual authorized to sign the Grant Subaward [Section 15 on Grant Subaward Face Sheet], and hereby affirm that I am duly authorized legally to bind the Subrecipient to the above-described certification. I am fully aware that this certification, executed on the date, is made under penalty of perjury under the laws of the State of California.	
Official Designee's Signature:	 <del>Signature Needed</del>
Official Designee's Typed Name:	Al Zelinka
Official Designee's Title:	City Manager
Date Executed:	<del>Date Needed</del> 5/11/22
<b>AUTHORIZED BY:</b>	
I grant authority for the Subrecipient/Official Designee to enter into the specific Grant Subaward(s) (indicated by the Cal OES Program name and initial Grant Subaward performance period identified above) and applicable Grant Subaward Amendments with Cal OES.	
<input checked="" type="checkbox"/> City Financial Officer	<input type="checkbox"/> County Financial Officer
<input type="checkbox"/> City Manager	<input type="checkbox"/> County Manager
<input type="checkbox"/> Governing Board Chair	
Signature:	 <del>Signature Needed</del>
Typed Name:	Edward Enriquez
Title:	Chief Financial Officer
Date Executed:	<del>Date needed</del> 5/11/2022



**Cal OES**

GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

**Grant Subaward Budget Pages**  
Single Fund Source

(wn)

Subrecipient: City of Riverside		Grant Subaward #: LC21 01 7850	
A. Personnel Costs - Line-item description and calculation		Total Amount Allocated	
CERT Instructor Overtime @ \$77.35/hour x 1.5 overtime rate x 13 hours per course x 3 courses		\$4,525	
<del>Total does not add up. Only have \$3120.00</del> <del>Alternative: list 3 courses</del>			
PERSONNEL COSTS CATEGORY TOTAL		\$4,525	





**Cal OES**  
GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

**Grant Subaward Budget Pages**  
Single Fund Source

(wn)

<b>Subrecipient:</b> City of Riverside	<b>Grant Subaward #:</b> LC21 01 7850
<b>B. Operating Costs</b> - Line-item description and calculation	<b>Total Amount Allocated</b>
ASL Interpretation @ 2 interpreters x \$85.00/hour x 20 hours x 1 class	\$3,400
Spanish-speaking CERT instructor @ \$64.52/hour x 31 hours per class x 2 classes	\$4,000
CERT Marketing Material Printing - \$1,200 total budget	\$1,200
CERT Backpacks @ \$75 each x 25 backpacks	\$1,875
<del>Give 5 x hours break down</del> <del>Costs all Negative</del>	
<b>OPERATING COSTS CATEGORY TOTAL</b>	<b>\$10,475</b>



**Cal OES**  
GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

**Grant Subaward Budget Pages**  
Single Fund Source

(wn)

<b>Subrecipient:</b> City of Riverside	<b>Grant Subaward #:</b> LC21 01 7850
<b>C. Equipment Costs</b> - Line-item description and calculation	<b>Total Amount Allocated</b>
N/A	
<b>EQUIPMENT COSTS CATEGORY TOTAL</b>	
<b>Total Project Cost</b> (Must match the Grant Subaward Face Sheet)	\$15,000

✓  
JI

## VSPS Budget Summary Report

**LC21 Listos California CERT Support Grant Program**

Riverside, City of

Listos California CERT Support Grant Program

**Subaward #: LC21 01 7850**

**Performance Period: 06/01/22 - 12/31/23**

**Latest Request: , Not Final 201**

### **A. Personal Services - Salaries/Employee Benefits**

<u>F/S/L</u>	<u>Funding Source</u>	<u>Budget Amount</u>	<u>Paid/Expended</u>	<u>Balance</u>	<u>Pending</u>	<u>Pending Balance</u>
S	21LIST	4,525	0	4,525	0	4,525
<b>Total A. Personal Services - Salaries/Employee Benefits:</b>		<b>4,525</b>	<b>0</b>	<b>4,525</b>	<b>0</b>	<b>4,525</b>

### **B. Operating Expenses**

<u>F/S/L</u>	<u>Funding Source</u>	<u>Budget Amount</u>	<u>Paid/Expended</u>	<u>Balance</u>	<u>Pending</u>	<u>Pending Balance</u>
S	21LIST	10,475	0	10,475	0	10,475
<b>Total B. Operating Expenses:</b>		<b>10,475</b>	<b>0</b>	<b>10,475</b>	<b>0</b>	<b>10,475</b>

### **C. Equipment**

<u>F/S/L</u>	<u>Funding Source</u>	<u>Budget Amount</u>	<u>Paid/Expended</u>	<u>Balance</u>	<u>Pending</u>	<u>Pending Balance</u>
S	21LIST	0	0	0	0	0
<b>Total C. Equipment:</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	<u>Budget Amount</u>	<u>Paid/Expended</u>	<u>Balance</u>	<u>Pending</u>	<u>Pending Balance</u>
<b>Total Local Match:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total Funded:</b>	<b>15,000</b>	<b>0</b>	<b>15,000</b>	<b>0</b>	<b>15,000</b>
<b>Total Project Cost:</b>	<b>15,000</b>	<b>0</b>	<b>15,000</b>	<b>0</b>	<b>15,000</b>

F/S/L (Funding Types): F=Federal, S=State, L=Local Match

Paid/Expended=posted in ledger w/Claim Schedule, Pending=Processed, but not yet in Claim Schedule

06/06/22





## Grant Subaward Programmatic Narrative

Grant Subaward #: LC21 01 7850 (wn)

Subrecipient: City of Riverside

The City of Riverside CERT program is overseen by a full-time CERT Coordinator who focuses on community outreach and preparedness and coordinating and scheduling CERT training and community preparedness events. This person is actively engaged in seeking out new contacts in the business community, and at local schools and universities. Over the past two years, despite the challenge of the pandemic, we have delivered at least two classes each year (training at least 30 people per year) and maintain a cadre of approximately 25 active volunteers who participate in a wide variety of events each year, including staffing outreach community booths and events, assisting with city emergency preparedness projects, and assisting OEM with incident support throughout the city. We have trained over 2,000 residents since the inception of the program and are excited to continue to expand and improve the program. We are working on increasing CERT courses for underserved populations within the city, including hearing-impaired and Spanish-speaking residents.

A few challenges our program faces currently include:

- The retirement of our lead instructor, and soon to be retirement of another longtime instructor. This will create a challenge with scheduling classes around these instructor's primary duties.



## Grant Subaward Programmatic Narrative

Grant Subaward #: LC21 01 7850 (wn)

Subrecipient: City of Riverside

- Lack of ASL- and Spanish-proficient instructors. Our program seeks to reach into the non-English-speaking parts of our community but needs the assistance of ASL Interpreters and Spanish translation services. We currently provide information via our ReadyRiverside.org website that can be translated via the Google Translate feature, but live interpretation would bring our outreach to underserved communities to the next level.
- We are seeking to expand out CERT Volunteer Cadre, which we call locally our CERT Support & Outreach Team, who we provide with upgraded and locally branded equipment in exchange for assistance with scheduled events, preparedness projects, and incident support.

With these funds, our program plans to:

- Hold 1-2 CERT classes in Spanish.
- Have ASL Interpretation available for CERT classes conducted during the performance period.
- Hold at least 5 preparedness events in underserved neighborhoods using the printed marketing material.
- Supply 25 CERT Support and Outreach Team members with the CERT backpacks.



# City of Riverside Organizational Chart

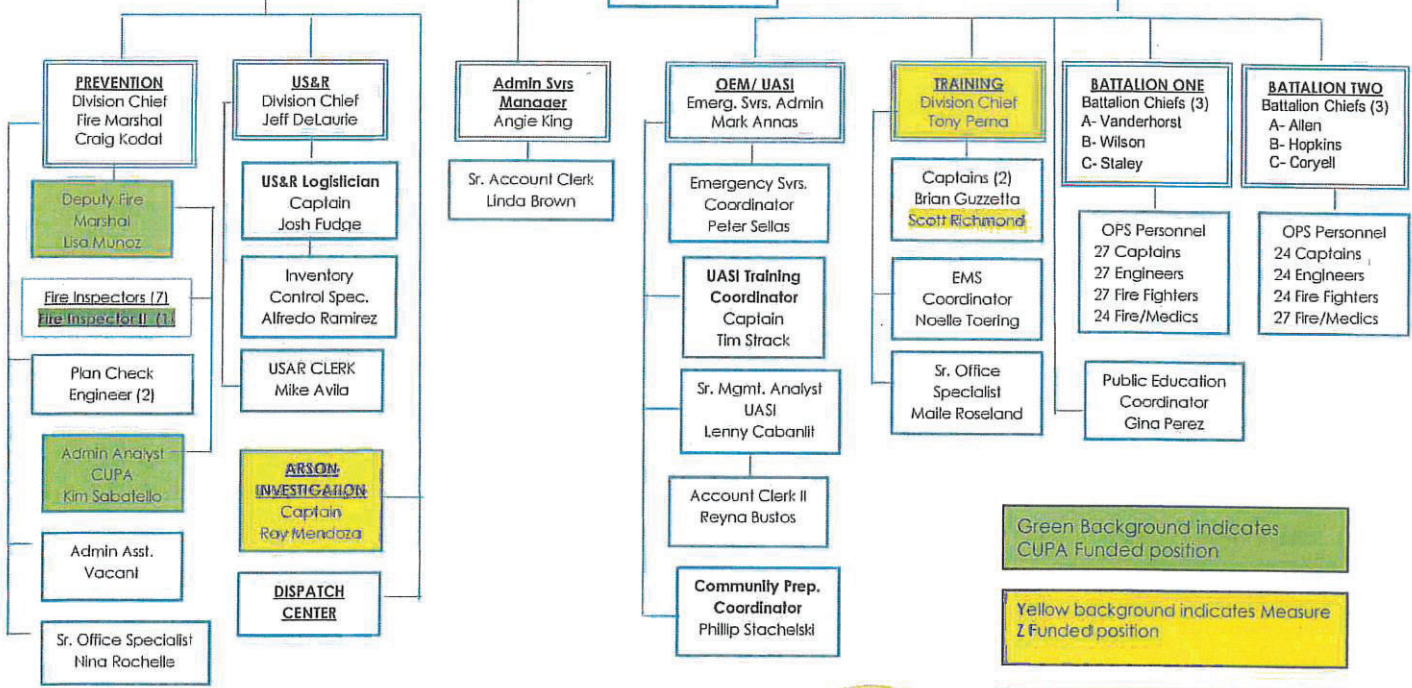
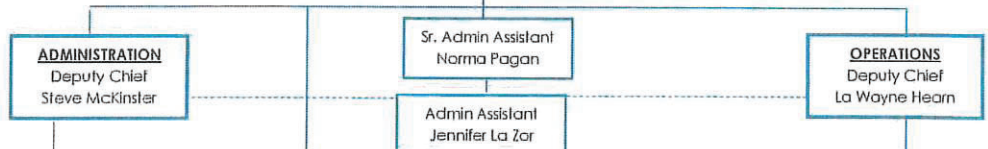


Updated  
January 2022





**FIRE CHIEF**  
Michael Moore



Green Background indicates CUPA Funded position

Yellow background indicates Measure Z Funded position

Blue background Indicates full or partially grant funded position



Updated: 2/2022



**LISTOS CALIFORNIA CERT SUPPORT GRANT PROGRAM  
CERT Training Certification**

**Name of Agency:** City of Riverside

I, Al Zelinka (Official Designee; same person as Section 15 of the Grant Subaward Face Sheet) hereby certify that the above Subrecipient is responsible for adhering to all of the Grant Subaward requirements as directed by Cal OES including, but not limited to, the following area:

- The Subrecipient certifies they are conducting classroom-based, instructor-led, CERT training based on the 20-hour FEMA curriculum, incorporating all nine module and all hands-on exercises (e.g., fire suppression, medical triage, cribbing), including a disaster simulation drill, or utilizing the approved CERT Training curriculum.

**All appropriate documentation must be maintained on file by the Subrecipient and available for Cal OES upon request. Failure to comply with this requirement may result in suspension of payments under the Grant Subaward(s), termination of the Grant Subaward(s), and/or ineligibility for future Grant Subawards if Cal OES determines that any of the following has occurred: (1) the Subrecipient has made false certification, or (2) the Subrecipient violated the certification by failing to carry out the requirements as noted above.**

**CERTIFICATION**

I, the official named above, am the same individual authorized to sign the Grant Subaward [Section 15 on Grant Subaward Face Sheet], and hereby affirm that I am duly authorized legally to bind the Subrecipient to the above-described certification. I am fully aware that this certification, executed on this date, is made under penalty of perjury under the laws of the State of California.

Official Designee Signature: \_\_\_\_\_

Official Designee Typed Name: Al Zelinka

Official Designee's Title: City Manager

Date Executed: 9/11/22





**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES  
SUBRECIPIENT GRANTS MANAGEMENT ASSESSMENT**



<b>Subrecipient</b> <u>City of Riverside</u>	<b>Duns#</b> <u>040502111</u> <u>JI</u>	<b>FIPS#</b> <u>065-62000</u>	(wn)
<b>Disaster/Program Title:</b> <u>LC - Litos California CERT Support Grant Program</u>		<u>Listos California CERT Support (LC) Program</u>	
<b>Performance Period:</b> <u>06/01/22</u> to <u>12/31/23</u>		<b>Subaward Amount Requested:</b> <u>\$ 15,000</u>	
<b>Type of Non-Federal Entity (Check Box):</b> <input type="checkbox"/> State Gov. <input checked="" type="checkbox"/> Local Gov. <input type="checkbox"/> JPA <input type="checkbox"/> Non-Profit <input type="checkbox"/> Tribe			

Per Title 2 CFR § 200.332, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of federal grant awards. This questionnaire must be completed and returned with your grant application materials.

For purposes of completing this questionnaire, grant manager is the individual who has primary responsibility for day-to-day administration of the grant, bookkeeper/accounting staff means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and organization refers to the subrecipient applying for the award, and/or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	>5 years
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	>5 years
3. How many grants does your organization currently receive?	>10 grants
4. What is the approximate total dollar amount of all grants your organization receives?	\$ 180,390,449
5. Are individual staff members assigned to work on multiple grants?	Yes
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	Yes
7. How often does your organization have a financial audit?	Annually
8. Has your organization received any audit findings in the last three years?	Yes
9. Do you have a written plan to charge costs to grants?	Yes
10. Do you have written procurement policies?	Yes
11. Do you get multiple quotes or bids when buying items or services?	Sometimes
12. How many years do you maintain receipts, deposits, cancelled checks, invoices, etc.?	>5 years
13. Do you have procedures to monitor grant funds passed through to other entities?	Yes

<b>Certification:</b> <i>This is to certify that, to the best of our knowledge and belief, the data furnished above is accurate, complete and current.</i>	
<b>Signature:</b> (Authorized Agent) 	<b>Date:</b> <u>5/12/22</u>
<b>Print Name and Title:</b> <u>Al Zoligala/City Manager</u>	<b>Phone Number:</b> <u>951-826-5771</u>
<b>Cal OES Staff Only: SUBAWARD #</b> <u>LC21 01 7850</u> (wn)	





**Cal OES**  
GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES



### Grant Subaward Service Area Information

Grant Subaward #: LC21 01-7850 (wn)

Subrecipient: City of Riverside

1. County or Counties Served:  
Riverside

County where principal office is located: Riverside

2. U.S. Congressional District(s) Served:  
2

U.S. Congressional District where principal office is located: CA 41

3. State Assembly District(s) Served:  
2

State Assembly District where principal office is located: 61

4. State Senate District(s) Served:  
1

State Senate District where principal office is located: 31st Senate District

5. Population of Service Area: 314,998