CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES (Cal OES)

AUTHORIZED AGENT Alterations to this document may result in delayed application approval, modification requests, or reimburse Subrecipients may be asked to revise and/or re-submit any altered Financial Management Forms Workbook. EMPG 97.042 CFDA #: City of Riverside 065-00000 2020-0006 Supporting Information for Reimbursement/Advance of State and Federal Funds **Initial Application** This request is for an/a: July 1, 2020 This claim is for costs incurred within the grant expenditure period from through December 31, 2021 and does not cross fiscal years. (Beginning Expenditure Period Date) (Ending Expenditure Period Date) (REIMB or MOD Request #) (Amount This Request) Under Penalty of Perjury I certify that: I am the duly authorized officer of the claimant herein. This claim is true, correct, and all expenditures were made in accordance with applicable laws, rules, regulations and grant conditions and assurances. Statement of Certification - Authorized Agent By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729–3730 and 3801–3812) 6-1-21 Michael D. Moore Printed Name and Title

Approved as to Form

Deputy City Attorney

Please reference the Instructions Page under the "Authorized Agent" section for instructions/address on where to mail workbook

FMFW v1.18 - 2018

(Cal OES Use Only)										
Cal OES#	FIPS#	065-00000	VS#	Subaward #	2020-0006					

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

The California Governor's Of								
The Gamornia Governor's Or	fice of Emergency Se	ervices (Cal OES) h	nereby makes a Gr	ant Subaward of fun	ds to the follow	ng:		
1. Subrecipient: City of Riverside						_ 1a. DUNS#	: _	40-502114
2. Implementing Agency:	2a. DUNS#		:	40-502114				
3. Implementing Agency A	Riverside				92	92504-4469 Zip+4		
Street			*	City				
4. Location of Project:	Riverside			Riverside			92504	-4469
City				County			,	Zip+4
5. Disaster/Program Title:	Emergency Manage	ement Performance	Grant	6. Performance I	Period:	07/01/20	to	12/31/21
7. Indirect Cost Rate:	□ N/A; □ 10% de N	linimis; 🗆 Fede	erally Approved ICR	;	%			
Grant Year Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G.	Total Project Cost
2018 8. EMPG		\$63,238		\$63,238		\$63,238		\$126,476
Select 9. Select								
Select 10. Select							100	
Select 11. Select				97				
12. TOTALS				70000 0000				Total Project Cost:
				\$63,238		\$63,23	8	\$126,476
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