

CITY OF MENIFEE
GRANT SUMMARY REPORT
FINANCE DEPARTMENT

FISCAL YEAR OF GRANT AWARD: 2024/2025 **DATE CITY COUNCIL APPROVED:** 11/6/24
Grant Name: Selective Traffic Enforcement Grant **Granting Agency:** Office of Traffic Safety
City Department: Meniffee Police Department **City Grant Administrator:** Christine Booker
Grant performance period: 10/1/24-9/30/25 **Type of Grant:** ☒ **State** ☐ **Federal** ☐ **Local** ☐ **Other:** _____

Grant Purpose/City Program:

Traffic programs including DUI checkpoints, saturations, motorcycle enforcement, pedestrian and bike enforcements events and supplies.

If Federal Grant:

Federal Awarding Agency: - **Federal CFDA Number:** -

If Pass-through Grant:

Pass-through Agency: - **Pass-through Number:** -

Grant ID Number: -

Grant Funding Period: 10/1/24-9/30/25 **Amended Through:** -

Amount from Granting Agency: \$216,000 **Method of Funding:** Reimbursement

City Matching Funds: _____ **Frequency of Funding:** -

Total Grant Amount: \$216,000 **If other, please describe:** N/A

City Expenditure Account No: 2301-51-MPD-PDAM-000-00000-652426 **City Revenue Account No:** 2301-28-XNC-XNCL-000-00000-441002

Reporting Requirements:

Quarterly reporting will be required.

Does the funding agency require a compliance audit? No

If yes, what kind of report? N/A

Additional reporting required: N/A

Does the funding agency require a copy of the Single Audit report? No

Is this a federal grant (subject to Single Audit)? No

Can grant funds be carried over to other fiscal years? No

If yes, which years? _____

Is allocated interest a grant requirement? No