

CITY OF MENIFEE
GRANT SUMMARY REPORT
FINANCE DEPARTMENT

FISCAL YEAR OF GRANT AWARD: 2024/2025 **DATE CITY COUNCIL APPROVED:** 9/18/24
Grant Name: Clean Air Day Microgrant **Granting Agency:** Coalition for Clea Air
City Department: Community Services **City Grant Administrator:** Kori Jones
Grant performance period: October 2024 **Type of Grant:** ☐ State ☐ Federal ☒ Local ☐ Other: _____

Grant Purpose/City Program:

This is a one-time award to support the City of Meniffee Clean Air Week events happening September 29, 2024-October 5, 2024.

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: October 2024

Amended Through: -

Amount from Granting Agency: \$500.00

Method of Funding: Reimbursement

City Matching Funds: -

Frequency of Funding: -

Total Grant Amount: \$500.00

If other, please describe: N/A

City Expenditure Account No: 2301-53-CSD-SWES-000-00000-652844

City Revenue Account No: 2301-28-XNC-XNCL-000-00000-441004

Reporting Requirements:

End of month report will be required with recap of attendance.

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