

CITY OF MENIFEE  
**GRANT SUMMARY REPORT**  
FINANCE DEPARTMENT

FISCAL YEAR OF GRANT AWARD: 2022 DATE CITY COUNCIL APPROVED: 3/15/23  
Grant Name: SHSP- State Homeland Security Program Grant Granting Agency: County of Riverside-EMD  
City Department: Emergency Management City Grant Administrator: Vanessa Barrera  
Grant performance period: 1/25/23-5/31/24 Type of Grant: ☐ State ☒ Federal ☐ Local ☐ Other: \_\_\_\_\_

**Grant Purpose/City Program:**

Funding from the FY21 SHSP Grant will support the City's emergency preparedness efforts, including the implementation of the CERT program.

<b>If Federal Grant:</b>	<u>FEMA</u>	<b>Federal CFDA Number:</b>	<u>97.067</u>
<b>Federal Awarding Agency:</b>			
<b>If Pass-through Grant:</b>	<u>County of Riverside</u>	<b>Pass-through Number:</b>	<u>N/A</u>
<b>Pass-through Agency:</b>			
<b>Grant ID Number:</b>	<u>2022-0043</u>		
<b>Grant Funding Period:</b>	<u>1/25/23-5/31/24</u>	<b>Amended Through:</b>	<u></u>
<b>Amount from Granting Agency:</b>	<u>12,390</u>	<b>Method of Funding:</b>	<u>Reimbursement</u>
<b>City Matching Funds:</b>	<u></u>	<b>Frequency of Funding:</b>	<u>Every 6 months</u>
<b>Total Grant Amount:</b>	<u>12,390</u>	<b>If other, please describe:</b>	<u>-</u>
<b>City Expenditure Account No:</b>	<u>301-4114-52421</u>	<b>City Revenue Account No:</b>	<u>301-3833</u>

**Reporting Requirements:**

Quarterly reports, Reimbursement requests must be submitted every 6 months. Funding Risk Assessment and EHP must be approved prior to beginning activities.

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)? Yes

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

If yes, which years? N/a

Is allocated interest a grant requirement? No