

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**ITEM: 3.11**  
**(ID # 20080)**

**MEETING DATE:**

Tuesday, October 04, 2022


**FROM :** EMERGENCY MANAGEMENT DEPARTMENT:

**SUBJECT:** EMERGENCY MANAGEMENT DEPARTMENT: Accept the High Frequency Communications Equipment (HF) Program grant funding from the California Governor's Office of Emergency Services (CalOES) for the performance period of April 1, 2022 through October 31, 2023, All Districts. [\$60,000 – 100% State Funds]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Accept the High Frequency Communications Equipment (HF) Program grant funding from the California Governor's Office of Emergency Services (CalOES) grant award number FH21010330 for an amount of \$60,000 for the performance period of April 1, 2022, through October 31, 2023, awarded to the Emergency Management Department (EMD) as the lead agency; and,
2. Authorize the EMD Director, or his designee, to sign any allocation documents, including agreements and amendments, that are related to the administration of the award, subject to availability of fiscal funding and as approved-as-to-form by County Counsel; and
3. Approve and direct the Auditor Controller to make the budget adjustments shown on Schedule A.

**ACTION:**

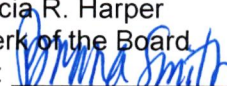
  
Bruce Barton, EMD Director 9/21/2022

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**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Perez, seconded by Supervisor Jeffries and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Spiegel, Washington, Perez and Hewitt  
Nays: None  
Absent: None  
Date: October 4, 2022  
xc: EMD

Kecia R. Harper  
Clerk of the Board  
By:   
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

<b>FINANCIAL DATA</b>	<b>Current Fiscal Year:</b>	<b>Next Fiscal Year:</b>	<b>Total Cost:</b>	<b>Ongoing Cost</b>
<b>COST</b>	\$ 60,000	\$ 0	\$ 60,000	\$ 0
<b>NET COUNTY COST</b>	\$ 0	\$ 0	\$ 0	\$ 0
<b>SOURCE OF FUNDS: 100% State Funds</b>			<b>Budget Adjustment:</b>	Yes
			<b>For Fiscal Year:</b>	22/23-23/24

**C.E.O. RECOMMENDATION:** Approve

**BACKGROUND:**

**Summary**

On February 01, 2022, Item 3.4, the Board of Supervisors approved Resolution No. 22-060 and the authorization to apply for the CalOES grant for High Frequency (HF) Communications equipment and delegated authority for the EMD director or designee to sign the application.

The purpose of the HF Program is to provide funding to Alerting Authorities and Emergency Operations Centers (EOC) for equipment that will allow local governments to be included in an integrated HF radio network service. The integrated HF radio network service utilizes frequencies authorized by the Federal Communications Commission and is intended to be capable of communications with federal, state, or local agencies. This grant is specifically for High Frequency (High Frequency is recognized as 1.5-30MHz) radio spectrum to provide reliable communications with the State of California without the need for infrastructure such as a Repeater site or microwave backbone.

CalOES uses HF radios and equipment that are outside the radio amateur bands during the California Emergency Services Net held weekly on 40-, 80-, and 160-meters amateur radio (HAM) frequencies, the SHARED RESOURCES (SHARES) HF radio program, and State of California Part 90 licensed system (STACOM). CalOES and many local governments across the state use SHARES channels, which are assigned at no cost to the agency. CalOES also has the STACOM system that operational areas are eligible to use under state-held Part 90 Licenses. Only compatible radios would be interoperable on both SHARES and STACOM, which both use Automatic Link Establish (ALE) signaling.

The grant funding will be used to purchase HF radios and equipment that will give EMD the capability to speak with CalOES in times of disaster as well as any amateur radio frequencies. The purpose of the HF Communications Equipment Program is to provide funding for equipment that will allow local governments to be included in an integrated HF radio network service that use frequencies authorized by the Federal Communications Commission.

**Impact on Residents and Businesses**

Acceptance of funding will enhance the Operational Area's ability to communicate with state, local, and federal agencies during emergencies. This funding is intended to help acquire

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

equipment that would allow local governments to be included in an integrated high frequency radio network service and be capable of communications with state, local, and federal agencies.

**SUPPLEMENTAL:**

**Additional Fiscal Information**

Funding provided under this grant is one-time funding. Any ongoing costs for services or maintenance of equipment will be covered by federal grants awarded to the Department.

**ATTACHMENTS:**

Award Letter for the CalOES High Frequency Communications (FH) Program

**SCHEDULE A**

**Emergency Management Department**

**Budget Adjustment**

**Fiscal Year 2022/2023**

**INCREASE IN ESTIMATED REVENUE:**

10000	-	2000100000	-	750340	CA-State Revenue	\$60,000
<b>TOTAL INCREASE ESTIMATED REVENUE:</b>						<b>\$60,000</b>

**INCREASE IN APPROPRIATIONS:**

10000	-	2000100000	-	546060	Equipment-Communications	\$60,000
<b>TOTAL INCREASE APPROPRIATIONS:</b>						<b>\$60,000</b>

  
Heydee Koury, Sr Accountant - Auditor 9/23/2022

  
Rebecca S Cortez, Principal Management Analyst 9/27/2022

  
Kelly Moran, Deputy County Counsel 9/23/2022





May 9, 2022

Bruce Barton, Emergency Management Department Director  
Riverside County  
450 East Alessandro Boulevard  
Riverside, CA 92508-2449

Subject: **NOTIFICATION OF APPLICATION APPROVAL**  
High Frequency Communications Equipment Program  
Subaward #: FH21 01 0330, Cal OES ID: 065-00000

Dear Mr. Barton:

Congratulations! The California Governor's Office of Emergency Services (Cal OES) has approved your application in the amount of \$60,000, subject to Budget approval. A copy of your approved subaward is enclosed for your records.

Cal OES will make every effort to process payment requests within 45 days of receipt.

This 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 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 found owed as a result of a close-out or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal OES.

Should you have questions on your subaward please contact your Program Specialist.

VSPS Grants Processing

Enclosure

c: Subrecipient's file



Cal OES #	065-00000- <del>00</del> KC	FIPS #	065-00000	VS#		Subaward #	FH21 01 0330
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## 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:** County of Riverside 1a. DUNS#: 000010077 KC

2. **Implementing Agency:** KC County of Riverside - Emergency Management Department 2a. DUNS#: 000010077 KC

3. **Implementing Agency Address:** 450 East Alessandro Blvd Riverside 92508-2449  
(Street) (City) (Zip+4)

4. **Location of Project:** Riverside NM Riverside 92503-2449  
(City) (County) (Zip+4)

5. **Disaster/Program Title:** High Frequency Communications Equipment Program 6. **Performance/Budget Period:** 4/1/2022 to 10/31/2023  
(Start Date) (End Date)

7. **Indirect Cost Rate:** N/A **Federally Approved ICR (if applicable):** \_\_\_\_\_ %

Item Number	Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Cost
8.	2021	PSC I	\$60,000						\$60,000
NM 9.	<del>2020</del>	Select							
10.	Select	Select							
11.	Select	Select							
12.	Select	Select							
<b>Total Project Cost</b>			<b>\$60,000</b>		<b>\$60,000</b>				<b>\$60,000</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: Bruce Barton Title: EMD Director

Payment Mailing Address: 450 East Alessandro Blvd City: Riverside Zip Code+4: 92508-2449

Signature: \_\_\_\_\_ Date: 02/04/2022

16. **Federal Employer ID Number:** 956000930

**(FOR Cal OES USE ONLY)**

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

Mary Rucker 5/5/2022  
(Cal OES Fiscal Officer) (Date)

Heather Carlson 5/5/2022  
(Cal OES Director or Designee) (Date)

DS

JH

**RECEIVED**

By AI Hardoy at 9:31 am, Apr 07, 2022

ENY: 2021-22 Chapter: 21 SL: 01765  
Item: 0690-001-0001 Pgm: 0395  
Fund: General Fund  
Program: High Frequency Communications Equipment Program  
Match Req.: None  
Project ID: OES21PSC100000 Amount: \$60,000.00  
SC: 2021-01765

mail log: 753758

DS

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## Grant Subaward Contact Information

Grant Subaward #: FH21 01 0330

Subrecipient: County of Riverside [REDACTED]

1. **Grant Subaward Director:**

Name: Bruce Barton Title: Emergency Management Department Director

Telephone #: (951) 358-7110 Email Address: bbarton@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

2. **Financial Officer:**

Name: Hilda Leyva Title: Administrative Services Manager I

Telephone #: (951) 955-4730 Email Address: Hleyva@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

3. **Programmatic Point of Contact:**

Name: Branden Boyd Title: Senior EMS Specialist

Telephone #: (951) 470-5392 Email Address: BBoyd@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

4. **Financial Point of Contact:**

Name: Hilda Leyva Title: Administrative Services Manager I

Telephone #: (951) 955-4730 Email Address: Hleyva@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

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: Jeffrey Van Wagenen Title: Chief Executive Officer

Telephone #: (951) 955-1110 Email Address: JWagenen@rivco.org

Address/City/ Zip Code (9-digit): 4080 Lemon Street 4th Floor Riverside, CA 92501-3609

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

Name: Bruce Barton Title: Emergency Management Department Director

Telephone #: (951) 358-7110 Email Address: bbarton@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

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

Name: Jeff Hewitt Title: Chair County of Riverside Board of Supervisors

Telephone #: (951) 955-1054 Email Address: jhewitt@rivco.org

Address/City/ Zip Code (9-digit): 4080 Lemon Street 4th Floor Riverside, CA 92501-3609





## Grant Subaward Signature Authorization

Grant Subaward #: FH21 01 0330

Subrecipient: County of Riverside

Implementing Agency: EMD County of Riverside - Emergency Management Department

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

### Grant Subaward Director:

Printed Name: Bruce Barton

Signature: [Signature]

Date: 02/03/2022

### Financial Officer:

Printed Name: Hilda Leyva

Signature: [Signature]

Date: 02/03/2022

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

Signature: [Signature]

Printed Name: Ramon Leon

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

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

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

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

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

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

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

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

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

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

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

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





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



## Grant Subaward Certification of Assurance of Compliance

Subrecipient: County of Riverside ~~Emergency Management Department~~

	Cal OES Program Name	Grant Subaward #:	Grant Subaward Performance Period
1	High Frequency Communications Equipment Program	FH21 01 0330	4/1/22 to 10/31/23
2			
3			
4			
5			
6			

I, Bruce Barton

(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.**

**CERTIFICATION**

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: \_\_\_\_\_

Official Designee's Typed Name: Bruce Barton

Official Designee's Title: County of Riverside Emergency Management Director

Date Executed: 02/03/2022

**AUTHORIZED BY:**

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.

☐ City Financial Officer

☐ County Financial Officer

☐ City Manager

☒ County Manager

☐ Governing Board Chair

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

Typed Name: Jeffrey Van Wageningen

Title: County of Riverside Chief Executive Officer

Date Executed: 2.3.22



**Cal OES**

GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

**Grant Subaward Budget Pages**  
Single Fund Source

<b>Subrecipient:</b> County of Riverside [REDACTED]		<b>Grant Subaward #:</b> FH21 01 0330
<b>A. Personnel Costs</b> - Line-Item description and calculation		<b>Total Amount Allocated</b>
<b>PERSONNEL COSTS CATEGORY TOTAL</b>		





**Cal OES**

GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

**Grant Subaward Budget Pages**  
Single Fund Source

<b>Subrecipient: County of Riverside</b> [REDACTED]		<b>Grant Subaward #:</b> FH21 01 0330
<b>B. Operating Costs</b> - Line-Item description and calculation		<b>Total Amount Allocated</b>
HF Installation, Site Visit, and Training NM		<del>\$1,890</del>
<b>OPERATING COSTS CATEGORY TOTAL</b>		NM \$0 <del>\$1,890</del>



**Cal OES**

GOVERNOR'S OFFICE  
OF EMERGENCY SERVICES

**Grant Subaward Budget Pages**

Single Fund Source

Grant Sub

**Subrecipient: County of Riverside**

**award #: FH21 01 0330**

**C. Equipment Costs - Line-Item description and calculation**

**Total Amount Allocated**

NASPO 3G ENVOY HF BASE STATION 1 EA

\$15,047

NASPO 3G ENVOY HF BASE STATION 1 EA

\$15,047

FLYK-125-Smart Transportable 1 EA (\$27,916)

\$29,906 ~~\$27,916~~

NM

Training HF Installation Site Visit and Training (\$1,990)

NM

**EQUIPMENT COSTS CATEGORY TOTAL**

NM \$60,000 ~~\$58,010~~

**Total Project Cost** (Must match the Grant Subaward Face Sheet)

**\$60,000** ✓  
JI

## VSPS Budget Summary Report

**FH21 High Frequency Communications Equipment Program**

**Subaward #: FH21 01 0330**

**Riverside County**

**Performance Period: 04/01/22 - 10/31/23**

**High Frequency Communications Equipment Program**

**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	21PSC1	0	0	0	0	0
<b>Total A. Personal Services - Salaries/Employee Benefits:</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</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	21PSC1	0	0	0	0	0
<b>Total B. Operating Expenses:</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</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	21PSC1	60,000	0	60,000	0	60,000
<b>Total C. Equipment:</b>		<b>60,000</b>	<b>0</b>	<b>60,000</b>	<b>0</b>	<b>60,000</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>60,000</b>	<b>0</b>	<b>60,000</b>	<b>0</b>	<b>60,000</b>
<b>Total Project Cost:</b>	<b>60,000</b>	<b>0</b>	<b>60,000</b>	<b>0</b>	<b>60,000</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

05/09/22





May 9, 2022

Bruce Barton, Emergency Management Department Director  
Riverside County  
450 East Alessandro Boulevard  
Riverside, CA 92508-2449

Subject: **NOTIFICATION OF APPLICATION APPROVAL**  
High Frequency Communications Equipment Program  
Subaward #: FH21 01 0330, Cal OES ID: 065-00000

Dear Mr. Barton:

Congratulations! The California Governor's Office of Emergency Services (Cal OES) has approved your application in the amount of \$60,000, subject to Budget approval. A copy of your approved subaward is enclosed for your records.

Cal OES will make every effort to process payment requests within 45 days of receipt.

This 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 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 found owed as a result of a close-out or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal OES.

Should you have questions on your subaward please contact your Program Specialist.

VSPS Grants Processing

Enclosure

c: Subrecipient's file

Cal OES #	065-00000- <del>00</del> KC	FIPS #	065-00000	VS#		Subaward #	FH21 01 0330
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## 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: County of Riverside ~~\_\_\_\_\_~~ KC 1a. DUNS#: 000010077 KC

2. Implementing Agency: KC ~~\_\_\_\_\_~~ County of Riverside - Emergency Management Department 2a. DUNS#: 000010077 KC

3. Implementing Agency Address: 450 East Alessandro Blvd Riverside 92508-2449  
(Street) (City) (Zip+4)

4. Location of Project: 450 East Alessandro Blvd Riverside NM 92503-2449  
(City) (County) (Zip+4)

5. Disaster/Program Title: High Frequency Communications Equipment Program 6. Performance/Budget Period: 4/1/2022 to 10/31/2023  
(Start Date) (End Date)

7. Indirect Cost Rate: N/A Federally Approved ICR (if applicable): \_\_\_\_\_ %

Item Number	Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Cost
8.	2021	PSC I	\$60,000						\$60,000
NM 9.	<del>2020</del>	Select							
10.	Select	Select							
11.	Select	Select							
12.	Select	Select							
Total	Project	Cost	\$60,000		\$60,000				\$60,000

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: Bruce Barton Title: EMD Director

Payment Mailing Address: 450 East Alessandro Blvd City: Riverside Zip Code+4: 92508-2449

Signature: [Signature] Date: 02/04/2022

16. Federal Employer ID Number: 956000930

## (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.

Mary Rucker 5/5/2022  
(Cal OES Fiscal Officer) (Date)

Heather Carlson 5/5/2022  
(Cal OES Director or Designee) (Date)

DS

JH

RECEIVED

By Al Hardoy at 9:31 am, Apr 07, 2022

ENY: 2021-22 Chapter: 21 SL: 01765  
Item: 0690-001-0001 Pgm: 0395  
Fund: General Fund  
Program: High Frequency Communications Equipment Program  
Match Req.: None  
Project ID: OES21PSC100000 Amount: \$60,000.00  
SC: 2021-01765

mail log: 753758

DS

DS





## Grant Subaward Contact Information

Grant Subaward #: FH21 01 0330

Subrecipient: County of Riverside [REDACTED]

1. **Grant Subaward Director:**

Name: Bruce Barton Title: Emergency Management Department Director

Telephone #: (951) 358-7110 Email Address: bbarton@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

2. **Financial Officer:**

Name: Hilda Leyva Title: Administrative Services Manager I

Telephone #: (951) 955-4730 Email Address: Hleyva@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

3. **Programmatic Point of Contact:**

Name: Branden Boyd Title: Senior EMS Specialist

Telephone #: (951) 470-5392 Email Address: BBoyd@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

4. **Financial Point of Contact:**

Name: Hilda Leyva Title: Administrative Services Manager I

Telephone #: (951) 955-4730 Email Address: Hleyva@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

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: Jeffrey Van Wagenen Title: Chief Executive Officer

Telephone #: (951) 955-1110 Email Address: JWagenen@rivco.org

Address/City/ Zip Code (9-digit): 4080 Lemon Street 4th Floor Riverside, CA 92501-3609

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

Name: Bruce Barton Title: Emergency Management Department Director

Telephone #: (951) 358-7110 Email Address: bbarton@rivco.org

Address/City/ Zip Code (9-digit): 450 East Alessandro Blvd Riverside, CA 92508-2449

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

Name: Jeff Hewitt Title: Chair County of Riverside Board of Supervisors

Telephone #: (951) 955-1054 Email Address: jhe Witt@rivco.org

Address/City/ Zip Code (9-digit): 4080 Lemon Street 4th Floor Riverside, CA 92501-3609



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## Grant Subaward Signature Authorization

Grant Subaward #: FH21 01 0330

Subrecipient: County of Riverside [REDACTED]

Implementing Agency: EMD County of Riverside - Emergency Management Department

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

### Grant Subaward Director:

Printed Name: Bruce Barton

Signature: [Signature]

Date: 02/03/2022

### Financial Officer:

Printed Name: Hilda Leyva

Signature: [Signature]

Date: 02/03/2022

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

Signature: [Signature]

Printed Name: Ramon Leon

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: \_\_\_\_\_

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

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

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

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

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

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

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

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





## Grant Subaward Certification of Assurance of Compliance

Subrecipient: County of Riverside ~~Emergency Management Department~~

	Cal OES Program Name	Grant Subaward #:	Grant Subaward Performance Period
1	High Frequency Communications Equipment Program	FH21 01 0330	4/1/22 to 10/31/23
2			
3			
4			
5			
6			

I, Bruce Barton

(Official Designee; same person as Section 1.5 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.





**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.**

**CERTIFICATION**

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: \_\_\_\_\_

Official Designee's Typed Name: Bruce Barton

Official Designee's Title: County of Riverside Emergency Management Director

Date Executed: 02/03/2022

**AUTHORIZED BY:**

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.

☐ City Financial Officer

☐ County Financial Officer

☐ City Manager

☒ County Manager

☐ Governing Board Chair

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

Typed Name: Jeffrey Van Wagenen

Title: County of Riverside Chief Executive Officer

Date Executed: 2.3.22



### Single Fund Source

Subrecipient: County of Riverside		Grant Subaward #: FH21 01 0330
A. Personnel Costs - Line-item description and calculation		Total Amount Allocated
PERSONNEL COSTS CATEGORY TOTAL		



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**Grant Subaward Budget Pages**  
Single Fund Source

Subrecipient: County of Riverside		Grant Subaward #: FH21 01 0330
B. Operating Costs - Line-item description and calculation		Total Amount Allocated
<del>HF Installation, Site Visit, and Training</del>		<del>\$1,990</del>
NM		
OPERATING COSTS CATEGORY TOTAL		NM \$0 <del>\$1,990</del>





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**Grant Subaward Budget Pages**

Single Fund Source

Subrecipient: County of Riverside		Grant Sub	award #: FH21 01 0330
C. Equipment Costs - Line-item description and calculation		Total Amount Allocated	
NASPO 3G ENVOY HF BASE STATION 1 EA			\$15,047
NASPO 3G ENVOY HF BASE STATION 1 EA			\$15,047
FLYK-125-Smart Transportable 1 EA (\$27,916)		NM	\$29,906 <del>\$27,916</del>
Training HF Installation Site Visit and Training (\$1,990)		NM	
EQUIPMENT COSTS CATEGORY TOTAL		NM	\$60,000 <del>\$58,010</del>
Total Project Cost (Must match the Grant Subaward Face Sheet)			\$60,000

## VSPS Budget Summary Report

**FH21 High Frequency Communications Equipment Program**  
**Riverside County**  
 High Frequency Communications Equipment Program

**Subaward #: FH21 01 0330**  
**Performance Period: 04/01/22 - 10/31/23**  
**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	21PSC1	0	0	0	0	0
<b>Total A. Personal Services - Salaries/Employee Benefits:</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</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	21PSC1	0	0	0	0	0
<b>Total B. Operating Expenses:</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</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	21PSC1	60,000	0	60,000	0	60,000
<b>Total C. Equipment:</b>		<b>60,000</b>	<b>0</b>	<b>60,000</b>	<b>0</b>	<b>60,000</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>60,000</b>	<b>0</b>	<b>60,000</b>	<b>0</b>	<b>60,000</b>
<b>Total Project Cost:</b>	<b>60,000</b>	<b>0</b>	<b>60,000</b>	<b>0</b>	<b>60,000</b>