

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



**ITEM: 3.4**  
(ID # 24543)

**MEETING DATE:**

Tuesday, April 09, 2024

**FROM :** DISTRICT ATTORNEY:

**SUBJECT:** DISTRICT ATTORNEY: Approve and Authorize the District Attorney, or Designee, to Submit Online Grant Application and Related Documents for the U.S. Department of Justice (DOJ), Office of Justice Programs (OJP), Bureau of Justice Assistance (BJA) for the BJA FY24 Prosecuting Cold Cases Using DNA, including Application for Federal Assistance Standard Form (SF-424) OMB Form Number 4040-0004, Disclosure of Lobbying Activities (SF-LLL) OMB Form Number 4040-0013, and Web-Based Form Regarding System of Internal Controls Questionnaire (F1-36), and Authorize the Chairman of the Board to Make Certifications of Forms SF-424 and SF-LLL on Behalf of the County, and Authorize the District Attorney, or Designee, to Complete and Make the Certifications in the Web-Based Form F1-36. All Districts. [\$0].

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

1. Approve submission of the online grant application and related documents for the Bureau of Justice Assistance BJA FY24 Prosecuting Cold Cases Using DNA Program, including Application for Federal Assistance standard form (SF-424) OMB Form Number 4040-0004, Disclosure of Lobbying Activities (SF-LLL) OMB Form Number 4040-0013, and web-based forms regarding Financial Management and System of Internal Controls Questionnaire (F1-36), and authorize the District Attorney, or designee, to electronically submit the same on behalf of the County;

Continued on Page 2

**ACTION:Policy**

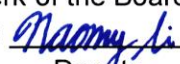
  
Jared Haringsma 3/22/2024

---

**MINUTES OF THE BOARD OF SUPERVISORS**

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

Ayes: Jeffries, Spiegel, Washington, Perez and Gutierrez  
Nays: None  
Absent: None  
Date: April 9, 2024  
xc: DA

Kimberly A. Rector  
Clerk of the Board  
By:   
Deputy

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

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

2. Authorize the Chairman of the Board to make the certifications in OMB Form Number 4040-0004 (SF-424) on behalf of the County and execute the same and authorize the Chair of the Board to sign the Disclosure of Lobbying Activities (SF-LLL) OMB Form Number 4040-0013; and
3. Authorize the District Attorney, or designee, to complete and make the certifications in OJP Financial Management and System of Internal Controls Questionnaire (F1-36).

<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>	\$ 0	\$ 0	\$ 0	\$ 0
<b>NET COUNTY COST</b>	\$ 0	\$ 0	\$ 0	\$ 0
<b>SOURCE OF FUNDS:</b> N/A			<b>Budget Adjustment:</b> No	
			<b>For Fiscal Year:</b> 24/25 – 27/28	

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

**BACKGROUND:**

**Summary**

The Bureau of Justice Assistance (BJA) provides funding to support the prosecution of violent cold case crimes where a suspect (known or unknown) has been identified through DNA evidence. Provided a DNA profile attributed to a known or unknown suspect has been developed from crime scene evidence, this funding also supports investigative activities, as well as crime and forensic analysis, that could lead to the successful prosecution of violent cold case crimes.

Approximately \$8,000,000 is available for funding, with each project being awarded up to \$500,000. The grant award performance period is 36 months, beginning October 1, 2024 and ending September 30, 2027.

Award documents will be submitted to the Board for approval once the grant funds are awarded. Upon final award, the financial data portion of this form will be completed.

County Counsel has reviewed and approved the attached Application for Federal Assistance standard form (SF-424) OMB Form Number 4040-0004, Disclosure of Lobbying Activities (SF-LLL) OMB Form Number 4040-0013, and Financial Management and System of Internal Controls web-based Questionnaire (F1-36) as to form. Prior to December 31, 2023, the Department of Justice utilized a paper format of the Financial Management and System of Internal Controls OMB Form Number 1121-0329. Effective January 01, 2024, OMB form Number 1121-0329 has been transitioned by DOJ into a web-based questionnaire (F1-36) but the content remains the same.

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

**Impact on Residents and Businesses**

None.

**ATTACHMENTS:**

- Application for Federal Assistance standard form (SF-424) OMB Form Number 4040-0004
- Disclosure of Lobbying Activities (SF-LLL) OMB Form Number 4040-0013
- Screen Images of the instructions for the web-based Financial Management and System of Internal Controls Questionnaire (F1-36)

  
Steven Atkeson 3/29/2024

  
Ryan Yabko 3/26/2024

  
Aaron Gettis, Chief of Deputy County Counsel 3/26/2024

# DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

OMB Number: 4040-0013  
Expiration Date: 02/28/2025

<b>1. * Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. * Status of Federal Action:</b> <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. * Report Type:</b> <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> SubAwardee * Name: <input type="text" value="County Of Riverside"/> * Street 1: <input type="text" value="3960 Orange Street"/> Street 2: <input type="text"/> * City: <input type="text" value="Riverside"/> State: <input type="text" value="CA: California"/> Zip: <input type="text" value="92501"/> Congressional District, if known: <input type="text"/>		
<b>5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:</b> <div style="height: 100px;"></div>		
<b>6. * Federal Department/Agency:</b> <input type="text" value="DOJ/OJP/BJA"/>	<b>7. * Federal Program Name/Description:</b> <input type="text" value="FY24 Prosecuting Cold Cases Using DNA"/> CFDA Number, if applicable: <input type="text"/>	
<b>8. Federal Action Number, if known:</b> <input type="text"/>	<b>9. Award Amount, if known:</b> \$ <input type="text"/>	
<b>10. a. Name and Address of Lobbying Registrant:</b> Prefix: <input type="text"/> * First Name: <input type="text" value="NONE"/> Middle Name: <input type="text"/> * Last Name: <input type="text" value="NONE"/> Suffix: <input type="text"/> * Street 1: <input type="text"/> Street 2: <input type="text"/> * City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/>		
<b>b. Individual Performing Services</b> (including address if different from No. 10a) Prefix: <input type="text"/> * First Name: <input type="text" value="NONE"/> Middle Name: <input type="text"/> * Last Name: <input type="text" value="NONE"/> Suffix: <input type="text"/> * Street 1: <input type="text"/> Street 2: <input type="text"/> * City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/>		
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		
* Signature: * Name: Prefix: <input type="text"/> * First Name: <input type="text" value="Chuck"/> Middle Name: <input type="text"/> * Last Name: <input type="text" value="Washington"/> Suffix: <input type="text"/> Title: <input type="text" value="Chair, Riverside County Board Of Supervisors"/> Telephone No.: <input type="text" value="951-955-1030"/> Date: <input type="text" value="4/19/24"/>		
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)

FORM APPROVED COUNTY COUNSEL  
 BY: Ryan D. Yabko  
 DATE: 3/26/24

ATTEST:  
 KIMBERLY A. RECTOR, Clerk

By: Maureen A. [Signature]  
 DEPUTY

APR 09 2024    3.4

Application for Federal Assistance SF-424								
<b>* 1. Type of Submission:</b> <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application			<b>* 2. Type of Application:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision			<b>* If Revision, select appropriate letter(s):</b> _____ <b>* Other (Specify):</b> _____		
<b>* 3. Date Received:</b> _____			<b>4. Applicant Identifier:</b> _____					
<b>5a. Federal Entity Identifier:</b> F88DAAN239B9			<b>5b. Federal Award Identifier:</b> _____					
<b>State Use Only:</b>								
<b>6. Date Received by State:</b> _____			<b>7. State Application Identifier:</b> _____					
<b>8. APPLICANT INFORMATION:</b>								
<b>* a. Legal Name:</b> County of Riverside								
<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 956000930			<b>* c. UEI:</b> F88DAAN239B9					
<b>d. Address:</b>								
<b>* Street1:</b> 3960 Orange Street								
<b>Street2:</b> _____								
<b>* City:</b> Riverside								
<b>County/Parish:</b> _____								
<b>* State:</b> CA: California								
<b>Province:</b> _____								
<b>* Country:</b> USA: UNITED STATES								
<b>* Zip / Postal Code:</b> 92501-3643								
<b>e. Organizational Unit:</b>								
<b>Department Name:</b> District Attorney's Office			<b>Division Name:</b> Public Safety					
<b>f. Name and contact information of person to be contacted on matters involving this application:</b>								
<b>Prefix:</b> Mr.		<b>* First Name:</b> Billy						
<b>Middle Name:</b> _____								
<b>* Last Name:</b> Hester								
<b>Suffix:</b> _____								
<b>Title:</b> Supervising DA Investigator								
<b>Organizational Affiliation:</b> _____								
<b>* Telephone Number:</b> 951-955-0070			<b>Fax Number:</b> _____					
<b>* Email:</b> BillyHester@rivcoda.org								

APR 09 2024 3.4

**Application for Federal Assistance SF-424**

**\* 9. Type of Applicant 1: Select Applicant Type:**

B: County Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

\* Other (specify):

**\* 10. Name of Federal Agency:**

Department of Justice (DOJ), Bureau of Justice Assistance (BJA)

**11. Catalog of Federal Domestic Assistance Number:**

CFDA Title:

**\* 12. Funding Opportunity Number:**

O-BJA-2024-172005

\* Title:

BJA FY24 Prosecuting Cold Cases Using DNA

**13. Competition Identification Number:**

Title:

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

Add Attachment

Delete Attachment

View Attachment

**\* 15. Descriptive Title of Applicant's Project:**

Prosecuting Cold Cases Using DNA

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

**Application for Federal Assistance SF-424**

**16. Congressional Districts Of:**

\* a. Applicant

\* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

**17. Proposed Project:**

\* a. Start Date:

\* b. End Date:

**18. Estimated Funding (\$):**

* a. Federal	500,000.00
* b. Applicant	0.00
* c. State	0.00
* d. Local	0.00
* e. Other	0.00
* f. Program Income	0.00
* g. TOTAL	500,000.00

**\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

**\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

- Yes
- No

If "Yes", provide explanation and attach

Add Attachment

Delete Attachment

View Attachment

**21. \*By signing this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)**

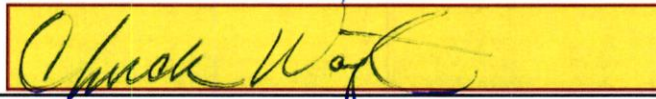
\*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

**Authorized Representative:**

Prefix:  \* First Name:   
Middle Name:   
\* Last Name:   
Suffix:   
\* Title:   
\* Telephone Number:  Fax Number:   
\* Email:

\* Signature of Authorized Representative:



\* Date Signed:

ATTEST:  
KIMBERLY A. RECTOR, Clerk

By  DEPUTY

FORM APPROVED COUNTY COUNSEL

BY:   
RYAN D. YABKO

3/26/24  
DATE

APR 09 2024

3.4

## Financial Management and System of Internal Controls Questionnaire (including Applicant Disclosure of High Risk Status)

Beginning in FY 2024, every OJP applicant (other than an individual applying in his or her personal capacity) is required to complete the web-based OJP Financial Management and System of Internal Controls Questionnaire form in JustGrants<sup>1</sup>. Following are screen images of the JustGrants instructions and questions to familiarize users with the web-based form.

### 1. Background

**Financial Management and System of Internal Controls (FI-36) NEW**

1. Background   2. Audit Information   3. Auditor's Opinion   4. Accounting System   5. Property Standards and Procurement   6. Travel Policy   7. Subrecipient Management and Monitoring   8. Designation as High Risk by Other Federal Agencies   9. Certification on Behalf of the Applicant Entity

**Background**

**Financial Capability Questionnaire**

Recipients' financial management systems and internal controls must meet certain requirements, including those set out in the "Part 200 Uniform Requirements" (2 C.F.R. Part 2800).

Including at a minimum, the financial management system of each OJP award recipient must provide for the following:

- (1) Identification, in its accounts, of all Federal awards received and expended and the Federal programs under which they were received. Federal program and Federal award identification must include, as applicable, the CFDA title and number, Federal award identification number and year, and the name of the Federal agency.
- (2) Accurate, current, and complete disclosure of the financial results of each Federal award or program.
- (3) Records that identify adequately the source and application of funds for Federally funded activities. These records must contain information pertaining to Federal awards, authorizations, obligations, unobligated balances, assets, expenditures, income, and interest, and be supported by source documentation.
- (4) Effective control over, and accountability for, all funds, property, and other assets. The recipient must adequately safeguard all assets and assure that they are used solely for authorized purposes.
- (5) Comparison of expenditures with budget amounts for each Federal award.
- (6) Written procedures to document the receipt and disbursement of Federal funds including procedures to minimize the time elapsing between the transfer of funds from the United States Treasury and the disbursement by the OJP recipient.
- (7) Written procedures for determining the allowability of costs in accordance with both the terms and conditions of the Federal award and the cost principles to apply to the Federal award.
- (8) Other important requirements related to retention requirements for records, use of open and machine-readable formats in records, and certain Federal rights of access to award-related records and recipient personnel.

Unique Entity Identifier (UEI) Number \*

Value cannot be blank

Is the applicant entity a nonprofit organization (including a nonprofit institution of higher education) as described in 26 U.S.C. 501(c)(3) and exempt from taxation under 26 U.S.C. 501(a)?\*

Select

Select

Yes

No

<sup>1</sup> For a limited number of solicitations, applicants will be instructed in the solicitation to attach a completed PDF form for the Financial Management and System of Internal Controls Questionnaire, instead of completing the web-based form. Those applicants should download, complete, and submit the **OJP Financial Management and System of Internal Controls Questionnaire—ARCHIVED**, located at <https://www.ojp.gov/funding/apply/forms>.





# Financial Management and System of Internal Controls Questionnaire (including Applicant Disclosure of High Risk Status)

If **No** to nonprofit question, then:

## Audit Information

### Financial Management and System of Internal Controls (FI-36) NEW

- ✓ 1. Background
- 2. Audit Information**
- 3. Auditor's Opinion
- 4. Accounting System
- 5. Property Standards and Procurement Standards
- 6. Travel Policy
- 7. Subrecipient Management and Monitoring
- 8. Designation as High Risk by Other Federal Agencies

#### Audit Information

For purposes of this questionnaire, an "audit" is conducted by an independent, external auditor using generally accepted auditing standards (GAAS) or Generally Governmental Auditing Standards (GAGAS), and results in an audit report with an opinion.

Has the applicant entity undergone any of the following types of audit(s)? Please check all that apply

- Select All

---

- "Single Audit" under OMB A-133 or Subpart F of 2 C.F.R. Part 200
- Financial Statement Audit
- Defense Contract Agency Audit (DCAA)
- Other Audit and Agency
- None

Most Recent Audit Report Issued: \*

Select... ▼

- Select...
- Select
- Within the last 12 months
- Within the last 2 years
- Over 2 years ago
- N/A

Name of Audit Agency/Firm: \*

\_\_\_\_\_

### 3. Auditor's Opinion

#### Financial Management and System of Internal Controls (FI-36) NEW

- ✓ 1 Background
- ✓ 2. Audit Information
- 3. Auditor's Opinion**
- 4 Accounting System
- 5 Property Standards and Procurement Standards
- 6. Travel Policy
- 7. Subrecipient Management and Monitoring

#### Auditor's Opinion

On the most recent audit, what was the auditor's opinion? \*

Enter the number of findings (if none, enter "0"): \*

Enter the dollar amount of questioned costs (if none, enter "0"): \*

Were material weaknesses noted in the report or opinion? \*

Select... ▼

- Select
- Unqualified Opinion
- Qualified Opinion
- Disclaimer, Going Concern, or Adverse Opinions
- N/A: No audits as described above

Select... ▼

- Select
- Yes
- No

# Financial Management and System of Internal Controls Questionnaire (including Applicant Disclosure of High Risk Status)

## 4. Accounting System

**Financial Management and System of Internal Controls (FI-36) NEW**

✓ 1. Background    ✓ 2. Audit Information    ✓ 3. Auditor's Opinion    **4. Accounting System**    5. Property Standards and Procurement Standards    6. Travel Policy    7. Subrecipient Management and Monitoring    8. Designation as High Risk by Other Federal Agencies    9. Certification on Behalf of the Applicant Entity

**Accounting System**

Which of the following best describes the applicant entity's accounting system? ▾

Manual

Does the applicant entity's accounting system have the capability to identify the receipt and expenditure of award funds separately for each Federal award? ▾

No

Does the applicant entity's accounting system have the capability to record expenditures for each Federal award by the budget cost categories shown in the approved budget? ▾

Yes

Does the applicant entity's accounting system have the capability to record cost sharing ("match") separately for each Federal award, and maintain documentation to support recorded match or cost share? ▾

No

Does the applicant entity's accounting system have the capability to accurately track employees actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award, and maintain records to support the actual time spent and specific allocation of charges associated with each applicant employee? ▾

No

Does the applicant entity's accounting system include budgetary controls to preclude the applicant entity from incurring obligations or costs that exceed the amount of funds available under a federal award (the total amount of the award, as well as the amount available in each budget cost category)? ▾

Yes

Is applicant entity familiar with the "cost principles" that apply to recent and future federal awards, including the general and specific principles set out in 2 C.F.R. Part 200? ▾

Yes

Select...  
Select  
Manual  
Automated  
Combination of manual and automated

Select...  
Select  
Yes  
No  
Not Sure

### 5. Property Standards and Procurement Standards

**Financial Management and System of Internal Controls (FI-36) NEW**

---

✓ 1 Background    ✓ 2 Audit Information    ✓ 3 Auditor's Opinion    ✓ 4 Accounting System    **5. Property Standards and Procurement Standards**    6 Travel Policy    7 Subsequent Management and Monitoring    8 Designation as High Risk by Other Federal Agencies    9 Certification on Behalf of the Applicant Entity

---

**Property Standards and Procurement Standards**

Does the applicant entity's property management system(s) maintain the following information on property purchased with federal award fund: (1) a description of the property; (2) an identification number; (3) the source of funding for the property, including the award number; (4) who holds title; (5) acquisition date; (6) acquisition cost; (7) federal share of the acquisition cost; (8) location and condition of the property; (9) ultimate disposition information?\*

Select

Does the applicant entity maintain written policies and procedures for procurement transactions that -- (1) are designed to avoid unnecessary or duplicative purchases; (2) provide for analysis of lease versus purchase alternatives; (3) set out a process for soliciting goods and services, and (4) include standards of conduct that address conflicts of interest?\*

Select

Are the applicant entity's procurement policies and procedures designed to ensure that procurements are conducted in a manner that provides full and open competition to the extent practicable, and to avoid practices that restrict competition?\*

Select

Do the applicant entity's procurement policies and procedures require documentation of the history of a procurement, including the rationale for the method procurement, selection of contract type, selection or rejection of contractors, and basis for the contract price?\*

Select

Does the applicant entity have written policies and procedures designed to prevent the applicant entity from entering into a procurement contract under a federal award with any entity/individual that is suspended/debarred from such contracts, including provisions for checking the "Excluded Parties List" system (www.sam.gov) for suspended/debarred sub-grantees and contractors, prior to award?\*

Select

Select

Select

Yes

No

Not Sure

6. Travel Policy

**Financial Management and System of Internal Controls (FI-36) NEW**

- ✓ 1. Background
- ✓ 2. Audit Information
- ✓ 3. Auditor's Opinion
- ✓ 4. Accounting System
- ✓ 5. Property Standards and Procurement Standards

**Travel Policy**

Does the applicant entity maintain a standard travel policy?\*

Select  
Select  
Yes  
No

Select... ▾

Does the applicant entity adhere to the Federal Travel Regulation (FTR)?\*

Select... ▾

# Financial Management and System of Internal Controls Questionnaire (including Applicant Disclosure of High Risk Status)

## 7. Subrecipient Management and Monitoring

**Financial Management and System of Internal Controls (FI-36)** NEW

✓ 1. Background    ✓ 2. Audit Information    ✓ 3. Auditor's Opinion    ✓ 4. Accounting System    ✓ 5. Property Standards and Procurement Standards    ✓ 6. Travel Policy    **7. Subrecipient Management and Monitoring**    8. Designation as High Risk by Other Federal Agencies    9. Certification on Behalf of the Applicant Entity

**Subrecipient Management and Monitoring**

Does the applicant entity have written policies, procedures, and/or guidance designed to ensure that any subawards made by the applicant entity under a federal award -- (1) clearly document applicable federal requirements, (2) are appropriately monitored by the applicant, and (3) comply with the requirements in 2 CFR Part 200 (see 2 CFR 200.331)?\*

Select.

Is the applicant entity aware of the differences between subawards under federal awards and procurement contracts under federal awards, including the different roles and responsibilities associated with each?\*

Select.

Does the applicant entity have written policies and procedures designed to prevent the applicant entity from making a subaward under a federal award to any entity or individual is suspended or debarred from such subawards?\*

Select.

Select..

Select

Yes

No

Not Sure

N/A - Applicant does not make subawards under any OJP awards

### 8. Designation as High Risk by Other Federal Agencies

**Financial Management and System of Internal Controls (FI-36) NEW**

---

✓ 1 Background    ✓ 2 Audit Information    ✓ 3 Auditor's Opinion    ✓ 4 Accounting System    ✓ 5 Property Standards and Procurement Standards    ✓ 6 Travel Policy    ✓ 7 Subrecipient Management and Monitoring    **8. Designation as High Risk by Other Federal Agencies**

---

**Designation as High Risk by Other Federal Agencies**  
Is the applicant entity designated "high risk" by a federal grant-making agency outside of DOJ?\*

Select..

- Select..
- Yes
- No
- Not Sure



Financial Management and System of Internal Controls Questionnaire (including Applicant Disclosure of High Risk Status)

If yes to "high risk" designation, then:

8. Designation as High Risk by Other Federal Agencies

**Financial Management and System of Internal Controls (FI-36) NEW**

---

✓ 1 Background
✓ 2 Audit Information
✓ 3 Auditor's Opinion
✓ 4 Accounting System
✓ 5 Property Standards and Procurement Standards
✓ 6 Travel Policy
✓ 7 Subrecipient Management and Monitoring
**8. Designation as High Risk by Other Federal Agencies**

---

**Designation as High Risk by Other Federal Agencies**

Is the applicant entity designated "high risk" by a federal grant-making agency outside of DOJ? \*

Name(s) of the federal awarding agency: \*

Date(s) the agency notified the applicant entity of the "high risk" designation: \*

Name: \*

Phone: \*

Email: \*

Reason for "high risk" status as set out by the federal agency: \*

Financial Management and System of Internal Controls Questionnaire (including Applicant Disclosure of High Risk Status)

9. Certification on Behalf of the Applicant Entity

Financial Management and System of Internal Controls (FI-36) **NEW**

- ✓ 1 Background
- ✓ 2 Audit Information
- ✓ 3 Auditor's Opinion
- ✓ 4 Accounting System
- ✓ 5 Property Standards and Procurement Standards
- ✓ 6 Travel Policy
- ✓ 7 Subrecipient Management and Monitoring
- ✓ 8 Designation Agencies

Certification on Behalf of the Applicant Entity

This certification must be made by the chief executive, executive director, chief financial officer, designated authorized representative ("AOR"), or other official with the requisite knowledge and authority.

On behalf of the applicant entity, I certify to the U.S. Department of Justice that the information provided above is complete and correct to the best of my knowledge. I have the requisite authority to make this certification on behalf of the applicant entity.

Name \*

Date \*

Title \*

Phone \*

The Name and Title fields should reflect the person who provided the data to complete this form electronically.

Select...  
Select  
Executive Director  
Chief Financial Officer  
Chairman  
Other

FORM APPROVED COUNTY COUNSEL

BY *Ryan D Yabko* 3/26/24  
RYAN D YABKO DATE