



May 9, 2022

Leslie Schlag, Sergeant
El Dorado County
200 Industrial Drive
Placerville, CA 95667-6809

Subject: **NOTIFICATION OF APPLICATION APPROVAL**
High Frequency Communications Equipment Program
Subaward #: FH21 01 0090, Cal OES ID: 017-00000

Dear Sgt. Schlag:

Congratulations! The California Governor's Office of Emergency Services (Cal OES) has approved your application in the amount of \$56,431, 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.

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



Grant Subaward Contact Information

Grant Subaward #: FH21 01 0090

Subrecipient: [REDACTED] County of El Dorado

1. **Grant Subaward Director:**

Name: Leslie Schlag Title: Sergeant

Telephone #: 530-621-5170 Email Address: schlagl@edso.org

Address/City/ Zip Code (9-digit): 200 Industrial Drive, Placerville, CA 95667-6809

2. **Financial Officer:**

Name: Jon DeVille Title: Chief Fiscal Officer

Telephone #: 530-621-5691 Email Address: devillej@edso.org

Address/City/ Zip Code (9-digit): 200 Industrial Drive, Placerville, CA 95667-6809

3. **Programmatic Point of Contact:**

Name: Leslie Schlag Title: Sergeant

Telephone #: 530-621-5170 Email Address: schlagl@edso.org

Address/City/ Zip Code (9-digit): 200 Industrial Drive, Placerville, CA 95667-6809

4. **Financial Point of Contact:**

Name: Tania Donnelly Title: Administrative Analyst

Telephone #: 530-621-6636 Email Address: donnell@edso.org

Address/City/ Zip Code (9-digit): 200 Industrial Drive, Placerville, CA 95667-6809

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: John D'Agostini Title: Sheriff

Telephone #: 530-621-6529 Email Address: dagostinij@edso.org

Address/City/ Zip Code (9-digit): 200 Industrial Drive, Placerville, CA 95667-6809

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

Name: Jon DeVille Title: Chief Fiscal Officer

Telephone #: 530-621-5691 Email Address: devillej@edso.org

Address/City/ Zip Code (9-digit): 200 Industrial Drive, Placerville, CA 95667-6809

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

Name: Lori Parlin Title: Chair, El Dorado County Board of Supervisors

Telephone #: 530-621-6513 Email Address: bosfour@edcgov.us

Address/City/ Zip Code (9-digit): 330 Fair Lane, Placerville, CA 95667-4103



Grant Subaward Signature Authorization

Grant Subaward #: FH21 01 0090

Subrecipient: County of El Dorado

County of El Dorado

Implementing Agency: ████████ Office of Emergency Services

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

Grant Subaward Director:

Printed Name: Leslie Schlag

Signature:

Date: 2/28/22

Financial Officer:

Printed Name: Jon DeVille

Signature:

Date: 2/28/22

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

Signature:

Printed Name: Troy Morton

Signature: _____

Printed Name: _____

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

Signature:

Printed Name: Monica Ferguson

Signature: _____

Printed Name: _____



Grant Subaward Certification of Assurance of Compliance

Subrecipient: El Dorado County Sheriff's Office of Emergency Services

	Cal OES Program Name	Grant Subaward #:	Grant Subaward Performance Period
1	High Frequency Communications Equipment Program	FH21 01 0090	4/1/22-10/31/23
2			
3			
4			
5			
6			

I, Jon DeVille (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:	<u></u>
Official Designee's Typed Name:	<u>John DeVille</u>
Official Designee's Title:	<u>Chief Fiscal Officer</u>
Date Executed:	<u>02/25/2022</u>
AUTHORIZED BY: PERMITS, FUNDING, APPROVAL	
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.	
<input type="checkbox"/> City Financial Officer	<input type="checkbox"/> County Financial Officer
<input type="checkbox"/> City Manager	<input type="checkbox"/> County Manager
<input type="checkbox"/> Governing Board Chair	<input checked="" type="checkbox"/> Lt., OES, authorized by Resolution #053-2020
Signature:	<u></u> 3/17/2020 by Chair of El Dorado County Board of
Typed Name:	<u>Troy Morton</u> Supervisors
Title:	<u>Lt., Sheriff's Office of Emergency Services</u>
Date Executed:	<u>4/4/22</u>



Grant Subaward Budget Pages
Single Fund Source

Subrecipient: El Dorado County	Grant Subaward #: FH21 01 0090
A. Personnel Costs - Line-item description and calculation	Total Amount Allocated
PERSONNEL COSTS CATEGOTY TOTAL	



Grant Subaward Budget Pages
Single Fund Source

Subrecipient: El Dorado County	Grant Subaward #: FH21 01 0090
B. Operating Costs - Line-item description and calculation	Total Amount Allocated
OPERATING COSTS CATEGORY TOTAL	



Grant Subaward Budget Pages
Single Fund Source

Subrecipient: El Dorado County		Grant Subaward #: FH21 01 0090	
C. Equipment Costs - Line-item description and calculation			Total Amount Allocated
NASPO ENVOY HF BASE STATION			\$13,542
NASPO 3G ENVOY FLYK-125-SMART (\$25,124)	NM	\$42,889	\$25,124
INSTALLATION(\$13,950)	NM		\$13,950
TAX (7.25%)(\$3,815)	NM		\$3,815
EQUIPMENT COSTS CATEGORY TOTAL			\$56,431
Total Project Cost (Must match the Grant Subaward Face Sheet)			\$56,431 ✓

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VSPS Budget Summary Report

FH21 High Frequency Communications Equipment Program

El Dorado County

High Frequency Communications Equipment Program

Subaward #: FH21 01 0090

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
Total A. Personal Services - Salaries/Employee Benefits:		0	0	0	0	0

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
Total B. Operating Expenses:		0	0	0	0	0

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	56,431	0	56,431	0	56,431
Total C. Equipment:		56,431	0	56,431	0	56,431

	<u>Budget Amount</u>	<u>Paid/Expended</u>	<u>Balance</u>	<u>Pending</u>	<u>Pending Balance</u>
Total Local Match:	0	0	0	0	0
Total Funded:	56,431	0	56,431	0	56,431
Total Project Cost:	56,431	0	56,431	0	56,431