Governing Body Resolution

BE IT RE	SOLVED BY THE	County of El Dorac	do, Board of Supervisors	
05.745	El Dorado Cou		rning Body)	T T
OF THE		Inty Sheriff's Office (Name of Applic	ant)	_THAT
	Sheriff	•	•	_, OR
	(Name or Title of Authorized Agent) Chief Fiscal Officer			
	(N Sheriff's Lieuten	ame or Title of Auth ant, OES	orized Agent)	
	()	ame or Title of Auth	orized Agent)	
Applicon Califorr financion Security	ant, a public e nia, any action al assistance pr	ntity established us necessary for the ovided by the fedented through the	nd on behalf of the no nder the laws of the Sto purpose of obtaining fe eral Department of Hom State of California fo	ate of ederal eland
FY 2	2022, 2023 and 2	2024 EMPG		
	(1	ist Grant Year and	Program)	
Passed	and approved	thisday o	of, 20	
Certific	ation			
l,			_, duly appointed and	
	(Na	me)		
	Of th	ne		
	(Title) (Governing Body)			
	eby certify that and approved		e and correct copy of	a resolutior
			,20	
			(Official Positi	on)
		(Signature)	(Date)	