

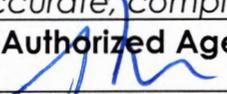
**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
SUBRECIPIENT GRANTS MANAGEMENT ASSESSMENT**

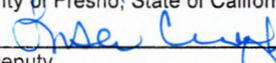
Subrecipient County of Fresno District Attorney **Duns#** 030363902 **FIPS#** 019-00000
Disaster/Program Title: Violence Against Women Vertical Prosecution Program
Performance Period: 01/01/22 to 12/31/22 **Subaward Amount Requested:** _____
Type of Non-Federal Entity (Check Box): State Gov. Local Gov. JPA Non-Profit Tribe

Per Title 2 CFR § 200.331, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of federal grant awards. This questionnaire must be completed and returned with your grant application materials.

For purposes of completing this questionnaire, grant manager is the individual who has primary responsibility for day-to-day administration of the grant, bookkeeper/accounting staff means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and organization refers to the subrecipient applying for the award, and/or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	>5 year <input checked="" type="checkbox"/>
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	>5 year <input checked="" type="checkbox"/>
3. How many grants does your organization currently receive?	>10 grant <input checked="" type="checkbox"/>
4. What is the approximate total dollar amount of all grants your organization receives?	\$ 20,800,000
5. Are individual staff members assigned to work on multiple grants?	No <input checked="" type="checkbox"/>
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	Yes <input checked="" type="checkbox"/>
7. How often does your organization have a financial audit?	Annually <input checked="" type="checkbox"/>
8. Has your organization received any audit findings in the last three years?	No <input checked="" type="checkbox"/>
9. Do you have a written plan to charge costs to grants?	Yes <input checked="" type="checkbox"/>
10. Do you have written procurement policies?	Yes <input checked="" type="checkbox"/>
11. Do you get multiple quotes or bids when buying items or services?	Always <input checked="" type="checkbox"/>
12. How many years do you maintain receipts, deposits, cancelled checks, invoices, etc.?	3-5 year <input checked="" type="checkbox"/>
13. Do you have procedures to monitor grant funds per entities?	Yes <input checked="" type="checkbox"/>
Certification: <i>This is to certify that, to the best of our knowledge, the information furnished above is accurate, complete and current.</i>	
Signature: (Authorized Agent) 	Date: <u>November 2, 2021</u>
Print Name and Title: Steve Brandau, Chairman Fresno County Board of Supervisors	Phone Number: (559) 600-2000
Cal OES Staff Only: SUBAWARD #	

ATTEST:
 BERNICE E. SEIDEL
 Clerk of the Board of Supervisors
 County of Fresno, State of California
 By: 
 Deputy

furnished