



May 28, 2024

Michael Parigian  
Forensic Services Bureau Manager  
Ventura County - Sheriff's Department  
VCSO Crime Lab, 800 South Vidtoria Avenue  
Ventura, CA 93009-3500

Subject: **Grant Subaward Application Approval**  
Paul Coverdell Forensic Science Improvement Program  
Grant Subaward #: CQ23 19 0560

Dear Michael Parigian:

The California Governor's Office of Emergency Services (Cal OES) has approved your Grant Subaward application in the amount of \$91,930, subject to enactment of applicable State Budget Act. A copy of your approved Grant Subaward is enclosed for your records.

Cal OES will make every effort to process payment requests within 45 days of receipt of your Report of Expenditures & Request for Funds (Cal OES Form 2-201).

This Grant 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 the Cal OES website at [www.caloes.ca.gov](http://www.caloes.ca.gov).

Please contact your Program Specialist Emily Garcia, at [emily.garcia@caloes.ca.gov](mailto:emily.garcia@caloes.ca.gov) with questions.

Sincerely,

Victim Services Grants Processing Unit

cc: Subrecipient's file  
Program Specialist

Cal OES # 111-00000-04 FIPS # 111-00000 VS# \_\_\_\_\_ Subaward # CQ23 19 0560

## 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 Ventura 1a. UEI#: HG2JKZYYTUT3

2. Implementing Agency: Ventura County Sheriff's Office 2a. UEI#: HG2JKZYYTUT3 EG

3. Implementing Agency Address: 800 South Victoria Avenue Ventura 93009-3500  
(Street) (City) (Zip+4)

4. Location of Project: Ventura Ventura 93009-3500  
(City) (County) (Zip+4)

5. Disaster/Program Title: Paul Coverdell Forensic Science Improvement Program 6. Performance/Budget Period: 4/1/2024 to 06/30/2025 JG  
(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.	2023	FSIA		\$91,930					\$91,930
9.	Select	Select							
10.	Select	Select							
11.	Select	Select							
12.	Select	Select							
<b>Total</b>	<b>Project</b>	<b>Cost</b>		\$91,930	\$91,930				\$91,930

**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: James Fryhoff Title: Sheriff

Payment Mailing Address: VC&O, 800 South Victoria Avenue City: Ventura Zip Code+4: 93009-3500

Signature: \_\_\_\_\_ Date: 1-2-24

16. Federal Employer ID Number: 956000944

**(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 5/24/2024 Eric Swanson 5/24/2024  
(Cal OES Fiscal Officer) (Date) (Cal OES Director or Designee) (Date)

ENY: 2023-24 Chapter: 12 SL: 18623  
Item: 0690-102-0890 Pgm: 0385  
FAIN #: 15PBJA-23-GG-00938-COVE 10/01/23-09/30/25  
Fund: Federal Trust AL#: 16.742  
Program: Paul Coverdell Forensic Science Improvement Program  
Match Req.: None  
Project ID: OES23FSIA000012  
SC: 2023-18623 Amount: \$91,930

DS  
JH

DS  
GO

Mail Log # 234205  
Received by CalOES 01/03/2024