

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES**GRANT SUBAWARD AMENDMENT****SUBAWARD #:** _____FIPS# _____ DUNS# _____ Amendment# _____
Project # _____ Performance Period _____ to _____

This amendment is between the California Governor's Office of Emergency Services, hereafter called Cal OES, and the Subrecipient: _____

Subrecipient (Certification and Signature of Authorized Agent)	
By (Authorized Signature)	Date
Printed Name	Title
Address	
Governor's Office of Emergency Services (For Cal OES use only)	
By Director or Designee	Date
Printed Name	Title
Amount Encumbered by this Document	Fund Source Labels
Prior Amount Encumbered	
Total Amount Encumbered to Date	
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.	
Signature of Cal OES Fiscal Officer	Date