## CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES GRANT SUBAWARD AMENDMENT FIPS# \_\_\_\_\_ UEI# \_\_\_\_ 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 **Fund Source Labels** this Document 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