



Grant Subaward Service Area Information

Information and Instructions

This form identifies the areas served by the Grant Subaward. Complete all sections of the form using the directions below. This form must be submitted as part of the Grant Subaward Application.

1. **County or Counties Served:** Enter the name or names of the counties served by the Grant Subaward and the county where the principal office for the Grant Subaward is located.
2. **U.S Congressional District(s) Served:** Enter the number(s) of the U.S. Congressional District(s) served by the Grant Subaward and the U.S. Congressional District number for where the principal office for the Grant Subaward is located.
3. **State Assembly District(s) Served:** Enter the number(s) of the State Assembly District(s) served by the Grant Subaward and the number for where the principal office for the Grant Subaward is located.
4. **State Senate District(s) Served:** Enter the number(s) of the State Senate District(s) served by the Grant Subaward and the number for where the principal office for the Grant Subaward is located.
5. **Population of Service Area:** Enter the total population of the area served by the Grant Subaward.



Grant Subaward Service Area Information

Grant Subaward #: _____

Subrecipient: _____

1. County or Counties Served:

County where principal office is located: _____

2. U.S. Congressional District(s) Served:

U.S. Congressional District where principal office is located: _____

3. State Assembly District(s) Served:

State Assembly District where principal office is located: _____

4. State Senate District(s) Served:

State Senate District where principal office is located: _____

5. Population of Service Area: _____