

GCS Change Request- Amendment Process



Cal OES
GOVERNOR'S OFFICE
OF EMERGENCY SERVICES



GCS Change Requests

Amendment (Initiated by Cal OES)

- Amount **of** Funding
- Fund Source
- Grant Subaward Performance Period (GSPP)
- Organization/Subrecipient Name

Modification (Initiated by Subrecipient)

- Implementing Agency
- Budget
- Organizational Authorized Agent (OAA)
- Programmatic
- Grant Subaward Income
- Payment Mailing Address
- Contact Information



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GOVERNOR'S OFFICE
OF EMERGENCY SERVICES



**GRANTS
CENTRAL
SYSTEM**

Change Request (Amendment)

Document Status
Change Request – Initiate (GA or UC)
Change Request – Change In Progress (Subrecipient)
Change Request – Grants Analyst Review
Change Request – Unit Chief Review
Change Request – Subrecipient Signatures Required
Change Request – Financial Operations Review
Change Request – Fiscal Officer Review
Change Request – Director Designee Review
Change Request – Fiscal Data Entry
Grant Subaward Executed



Subrecipients



OAA - Authorized Agent



OER - Entity Representative

Cal OES



GA - Grants Analyst



UC - Unit Chief

Change Request: Amendment Process



Who can initiate an Amendment?

Cal OES



GA - Grants Analyst



UC - Unit Chief

Initiating a Change Request - Amendment

Starting Point |
Status: Grant Subaward Executed



GA - Grants Analyst



UC - Unit Chief

Initiating an Amendment



GA - Grants Analyst



UC - Unit Chief

Change Request Selection

☒ Amendment

☐ Modification

Amendments

☐ **Amount of Funding** - Increase or decrease amount of funding to an existing fund source.

☐ **Funding Source** - Add and/or remove funding source.

☐ **Subaward Performance Period/Period of Performance (GSPP/POP)** - Change the GSPP/POP start and/or end date.

☐ **Organization/Subrecipient Name** - Change Subrecipient organization name.

Justification


Explanation - Elaborate on the decision for the Amendments or Modifications that have been chosen. *

Amendment Type 1: Amount of Funding


VE24001605


▼ Forms


▼ Change Request


Change Request 


▼ Standard Forms


Application Information 

Contact Information 

Grant Subaward Assurances 


Program Narrative 


Subrecipient Risk Assessment 


Operational Agreements 


Application Information Summary [Download]


▼ Budget Forms


Funding Source Allocation 


Budget Cost Categories 

Budget Narrative 

Personnel Costs 

Contractor/Consultant Costs 

Travel Costs 

Indirect Costs 

Budget Summary [Download]

Change Request

Navigation Instructions:

- All required fields are marked with an *.
- Use the **SAVE** button at least every 30 minutes to avoid losing data.
- When done, select the **SAVE** button in the upper-right corner.

Proceeding with changes instructions:

When the **Change Request** form is complete:

- Select **Save and Proceed** at the bottom of the form. Confirm that you are ready to begin making changes. Once complete, navigate to the correct form(s) and proceed with the changes.

OR

- Navigate to the **Status Options** in the left navigation select **Save and Proceed** to proceed with changes. Confirm that you are ready to begin making changes. Once complete, navigate to the correct form(s) and proceed with the changes.

Change Request Selection

☒ Amendment

☐ Modification

Amendments

☒ Amount of Funding - Increase or decrease amount of funding to an existing fund source.

☐ Funding Source - Add and/or remove funding source.

☐ Subaward Performance Period/Period of Performance (GSPP/POP) - Change the GSPP/POP start and/or end date.

☐ Organization/Subrecipient Name - Change Subrecipient organization name.

Justification

Explanation - Elaborate on the decision for the Amendments or Modifications that have been chosen. *

Change Amount of Funding and test pre-executes

Amendment Type 1: Amount of Funding

- **Change to the Amount of Funding from existing Fund Source(s) allocated to Grant Subaward**
- **Forms unlocked for required or potential changes**
 - Program Narrative
 - Budget Narrative
 - Budget Forms
 - Service Area

Amendment Type 2: Funding Source

VE24001605

▼ Forms

▼ Change Request

Change Request

▼ Standard Forms

Application Information

Contact Information

Grant Subaward Assurances

Program Narrative

Subrecipient Risk Assessment

Operational Agreements

Application Information Summary [Download]

▼ Budget Forms

Funding Source Allocation

Budget Cost Categories

Budget Narrative

Personnel Costs

Contractor/Consultant Costs

Travel Costs

Indirect Costs

Budget Summary [Download]

Change Request

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Change Request Selection

☒ Amendment

☐ Modification

Amendments

☐ Amount of Funding - Increase or decrease amount of funding to an existing fund source.

☒ Funding Source - Add and/or remove funding source.

☐ Subaward Performance Period/Period of Performance (GSPP/POP) - Change the GSPP/POP start and/or end date.

☐ Organization/Subrecipient Name - Change Subrecipient organization name.

Justification

Explanation - Elaborate on the decision for the Amendments or Modifications that have been chosen. *

Test Amendment change :}

Amendment Type 2: Funding Source

- **Addition or removal of Fund Source(s) allocated to the Grant Subaward**
- **Forms unlocked for required or potential changes**
 - Grant Subaward Assurances
 - Program Narrative
 - Budget Narrative
 - Budget Forms

Amendment Type 3: Grant Subaward Performance Period/Period of Performance (GSPP/POP)

VE24001605

▼ Forms

▼ Change Request

Change Request

▼ Standard Forms

Application Information

Contact Information

Grant Subaward Assurances

Program Narrative

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Operational Agreements

Application Information Summary [Download]

▼ Budget Forms

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Budget Narrative

Personnel Costs

Contractor/Consultant Costs

Travel Costs

Indirect Costs

Budget Summary [Download]

Change Request

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Change Request Selection

☒ Amendment

☐ Modification

Amendments

☐ Amount of Funding - Increase or decrease amount of funding to an existing fund source.

☐ Funding Source - Add and/or remove funding source.

☒ Subaward Performance Period/Period of Performance (GSPP/POP) - Change the GSPP/POP start and/or end date.

☐ Organization/Subrecipient Name - Change Subrecipient organization name.

Justification

Explanation - Elaborate on the decision for the Amendments or Modifications that have been chosen. *

Test Amendment change :}

Amendment Type 3: Grant Subaward Performance Period/Period of Performance (GSPP/POP)

- Change to the **Period Dates** for GSPP
- **Forms unlocked for required or possible changes**
 - Program Narrative
 - Budget Narrative
 - Operational Agreements
 - Budget Forms

Amendment Type 4: Organization/Subrecipient Name

VE24001605

▼ Forms

▼ Change Request

Change Request

▼ Standard Forms

Application Information

Contact Information

Grant Subaward Assurances

Program Narrative

Subrecipient Risk Assessment

Operational Agreements

Application Information Summary [Download]

▼ Budget Forms

Funding Source Allocation

Budget Cost Categories

Budget Narrative

Personnel Costs

Contractor/Consultant Costs

Travel Costs

Indirect Costs

Budget Summary [Download]

Change Request

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OR

- Navigate to the **Status Options** in the left navigation select **Save and Proceed** to proceed with changes. Confirm that you are ready to begin making changes. Once complete, navigate to the correct form(s) and proceed with the changes.

Change Request Selection

☒ Amendment

☐ Modification

Amendments

☐ Amount of Funding - Increase or decrease amount of funding to an existing fund source.

☐ Funding Source - Add and/or remove funding source.

☐ Subaward Performance Period/Period of Performance (GSPP/POP) - Change the GSPP/POP start and/or end date.

☒ Organization/Subrecipient Name - Change Subrecipient organization name.

Justification

Explanation - Elaborate on the decision for the Amendments or Modifications that have been chosen. *

Test Amendment change :}

Amendment Type 4:

Organization/Subrecipient Name

- Change to the **Organization/Subrecipient agency name**
- **Required name change verification documents to be provided to Grants Analyst prior to initiated the Change Request - Amendment**
 - Payee Data Record (STD 204/205)
 - Articles of Incorporation
 - DOJ verification
 - IRS verification
- **Forms unlocked for required or possible changes**
 - Program Narrative
 - Budget Narrative
 - Operational Agreements
 - Budget Forms

Change Request: Amendment Process

Change
Request
Initiate



Change
Request –
Change in
Progress



Change
Request –
Grants
Analyst
Review



Change
Request –
Unit Chief
Review

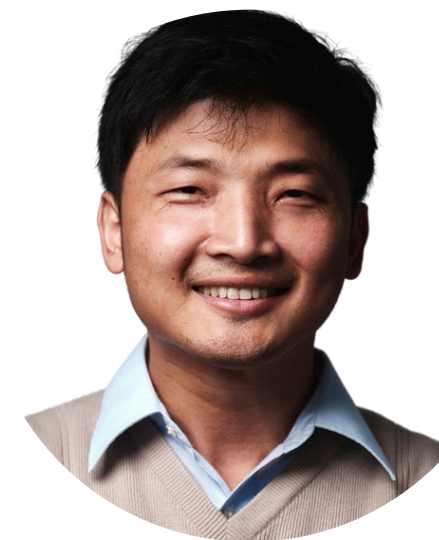


Change
Request –
Subrecipient
Signatures
Required

Change Request – Change in Progress:

Changing Forms → Submitting Changes

Subrecipients



OAA - Authorized Agent



OER - Entity Representative

Change Request (Amendment) – GCS Roles/Authority

GCS ROLE	ORGANIZATION AUTHORIZED AGENT	ORGANIZATION ENTITY REPRESENTATIVE or ORGANIZATION AUTHORIZED AGENT		
Grant Subaward Contact	Grant Subaward Authorized Agent	Governing Board Chair	Grant Subaward Director or Financial Officer	Grant Subaward Point of Contact or Grant Subaward Financial Point of Contact
Authority (Amendment Changes)	Change Forms and View Changes, and <u>Submit Changes</u>		Change Forms and View Changes	
Authority (Signature)	<u>Sign and Submit</u>			

Status: Change Request - Change in Progress



OAA - Authorized Agent

HomeSearches

LOGGED IN AS: Agent Authorized

Dashboard

Navigation Instructions:

- Subrecipients must have an **Organization Category** selection for funding opportunities to display in the **My Opportunities** panel.
- Click on an **Opportunity Name** to start applying for the funding opportunity.
- The **My Tasks** panel will show documents that are currently in process or are in need of attention.

My Opportunities

Filters

My Opportunities

Name	Provider	Availability	Type
2026 Fédération International de Football Association (FIFA) World Cup Program - FI24	Cal OES Provider Org	1/1/2025 12:00:00 AM - 1/1/2026 11:59:00 PM	Non-Competitive
Bulletproof Vest - VE24	Cal OES Provider Org	5/1/2024 12:00:00 AM - 11/1/2030 11:59:00 PM	Non-Competitive

My Tasks

Initiate Related Document

		Unlimited Inc		
VE24000709	Bulletproof Vest - VE24	Parker & Parker Services Unlimited Inc	Change Request - Change In Progress	3/13/2025 10:11:58 PM
VE24000709-REP1	Payment Report	Parker & Parker Services Unlimited Inc	Expenditure/Payment - In Progress	2/5/2025 3:29:21 PM
VI-2024-0007-01	Victim Services Information and Enhancement - VI24	Parker & Parker Services Unlimited Inc	Proposal - In Progress	6/27/2024 10:25:36 AM
VN-2024-0007-01	Victim Information and Notification	Parker & Parker Services Unlimited Inc	Application - In Progress	12/9/2024 10:32:53 AM



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GRANTS
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SYSTEM

Status: Change Request - Change in Progress



OAA - Authorized Agent

Home

Searches ▾

LOGGED IN AS: Agent Authorized ▾

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VE24000709

Forms

Change Request

Change Request ✓

Standard Forms

Application Information ✓

Contact Information ✓

Grant Subaward Assurances ✓

Program Narrative ✓

Subrecipient Risk Assessment ✓

Operational Agreements ✓

Application Information Summary [Download]

Budget Forms

Funding Source Allocation ✓

Budget Cost Categories ✓

Budget Narrative ✓

Document Landing Page

New Note

Instructions:

- The table below represents high-level data points about the current document.
- The **bold** fields are labels that describe the specific data point.
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- Document Status:** The process flow status step name of the current document.
- Organization:** The organization name of the current document.
- Your Role:** The name of the current document role of the person navigating; if the person is not added to the document, no role will display.
- Period Date:** The period dates of the current document. For example, if an Application, the Grant Subaward Performance Period begin date and end dates will display here.
- Due Date:** The due date set for the current document.

Template Applications	Instance Bulletproof vest - VE24	Process Applications	
Document Name VE24000709	Document Status Change Request - Change In Progress		
Organization Parker & Parker Services Unlimited Inc	Your Role Organization Authorized Agent	Period Date 4/30/2024 12:00:00 AM 5/23/2025 12:00:00 AM	Due Date 3/13/2040 11:59:00 PM

Program Supplemental

🗨️



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OAA - Authorized Agent

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Funding Source Allocation

Budget Cost Categories

Budget Narrative

Grant Subaward Assurances Form

Navigation Instructions:

- All required fields are marked with an *
- Use the **SAVE** button at least every 30 minutes to avoid losing data.
- When done, click the **SAVE** button.

Form Specific Instructions:

- Read all Grant Subaward Assurance and indicate compliance by checking acknowledgement box.

Applicable Grant Subaward Assurances

This document is a binding affirmation that the Subrecipient will comply with the assurances required by the federal program/fund source.

Assurance	Acknowledgement
CA OES System Administrator Manual Updated.pdf	<input checked="" type="checkbox"/> *
Test.txt	<input checked="" type="checkbox"/> *
Program Standard Assurance Addendum	<input checked="" type="checkbox"/> *
Standard Certification of Compliance	<input checked="" type="checkbox"/> *

< Previous Form

Next Form >

LOGGED IN AS: Agent Authorized

New Note

Print

Save

Last Saved 3/13/2025 10:22 PM



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GRANTS
CENTRAL
SYSTEM

Status:

Change Request - Change in Progress



OAA - Authorized Agent

▼ Change Request
Change Request <input checked="" type="checkbox"/>
▼ Standard Forms
Application Information <input checked="" type="checkbox"/>
Contact Information <input checked="" type="checkbox"/>
Grant Subaward Assurances <input checked="" type="checkbox"/>
Program Narrative <input checked="" type="checkbox"/>
Subrecipient Risk Assessment <input checked="" type="checkbox"/>
Operational Agreements <input checked="" type="checkbox"/>
Application Information Summary [Download]
▼ Budget Forms
Funding Source Allocation <input checked="" type="checkbox"/>
Budget Cost Categories <input checked="" type="checkbox"/>
Audit Costs <input checked="" type="checkbox"/>
Other Operating Costs
Budget Summary [Download]
▼ Service Area Forms





Funding Source Allocation

Funding Source Name	Fiscal Year	Type	Amount Available	Total Match Amount Required	Available Funding Total	Funding Requested	Cash Match Amount	In Kind Match Amount	Total Project Costs
2021 VOCA	2021	Federal	\$707,448	\$0	\$707,448	\$0	\$0	\$0	\$0
2024 VCGF	2024	State	\$3,437,211	\$0	\$3,437,211	\$3,002,600	\$0	\$0	\$3,002,600
2024 VOCA	2024	Federal	\$3,703,024	\$0	\$3,703,024	\$4,845,083	\$0	\$0	\$4,845,083
2024 VWA0	2024	State	\$866,657	\$0	\$866,657	\$866,657	\$0	\$0	\$866,657
			\$8,714,340	\$0	\$8,714,340	\$8,714,340	\$0	\$0	\$8,714,340

Status: Change Request - Change in Progress



OAA - Authorized Official

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VE24000709

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[Submit Changes](#)

[Revise Change Request Type](#)

[Related Documents](#)

[Initiate Related Doc](#)

[Payment Report](#)

Document Landing Page

Instructions:

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- Due Date:** The due date set for the current document.

Template Applications	Instance Bulletproof vest - VE24	Process Applications
Document Name VE24000709	Document Status Change Request - Change In Progress	
Organization Parker & Parker Services Unlimited Inc	Your Role Organization Authorized Agent	Period Date 4/30/2024 12:00:00 AM 5/23/2025 12:00:00 AM
		Due Date 3/13/2040 11:59:00 PM

Program Supplemental



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Submitting Changes

Status: Change Request - Change in Process → Grants Analyst Review



OAA - Authorized Agent

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VE24000709

State Assembly Districts

State Senate Districts

Service Area [Download]

Signatures

Application Signatures

Rating Team

Rating Scoresheet

Tools

Status Options

Submit Changes

Revise Change Request Type

Related Documents

Initiate Related Doc

Payment Report

Are you sure that you want to change the status from

Change Request - Change In Progress to Change Request - Change Submitted?

Cancel

OK

Funding

Instructions:

Please be sure to review page for accuracy.

Funding Source Allocation

Funding Source Name	Fiscal Year	Type	Amount Available	Total Match Amount Required	Available Funding Total	Funding Requested	Cash Match Amount	In Kind Match Amount	Total Project Costs
2024 PDIS	2024	Federal	\$14,000	\$0	\$14,000	\$0	\$0	\$0	\$0
2027 UASI	2027	Federal	\$15,000	\$10,000	\$25,000	\$3,061	\$829	\$485	\$4,375
			\$29,000	\$10,000	\$39,000	\$3,061	\$829	\$485	\$4,375

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Status: Change Request - Grants Analyst Review



OAA - Authorized Agent

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LOGGED IN AS: Agent Authorized ▾

VE24000709

Tools

Landing Page

Add/Edit People

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Attachment Repository

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Print Document

Document Messages

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Related Documents

Initiate Related Doc

Payment Report

Document Landing Page

Instructions:

Template

Applications

Instance

Bulletproof vest - VE24

Process

Applications

Document Name

VE24000709

Document Status

Change Request - Grants Analyst Review

Organization

Parker & Parker Services Unlimited Inc

Your Role

Organization Authorized Agent

Period Date

4/30/2024 12:00:00 AM
5/23/2025 12:00:00 AM

Due Date

3/13/2040 11:59:00 PM

Program Supplemental



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*Video: Change Request – Amendment

Status: Change Request–Initiate → Change In Progress → Grants Analyst Review



OAA – Authorized Agent

Home Searches +

Dashboard

Navigation Instructions:

- Subrecipients must have an Organization Category selection for funding opportunities to display in the My Opportunities panel.
- Click on an Opportunity Name to view details for the funding opportunity.

*To view this video demonstration, click onto this webinar recording link:
<https://youtu.be/TaDrYghMDfc>
then go to “44:20”

Cap Program - HQ4

Bulletproof Vest - M24	Cal OES Provider Org	5/1/2024 12:00:00 AM - 11/1/2024 11:59:00 PM	Non-Competitive
------------------------	----------------------	--	-----------------

BN 2024-0007-01 State Coalition Parker & Parker Change Request - 2/21/2025
Technical Services Change In
Assistance & Unlimited Wt Progress
Training - WAT4

Go to the top
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00:00.00



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Change Request: Amendment Process

Change
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Initiate



Change
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Change
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Grants
Analyst
Review



Change
Request –
Unit Chief
Review




Change
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Signatures
Required

Change Request - Grants Analyst Review



GA - Grants Analyst

 Status Options

Send Back for Revisions

Cancel Change Request

Send to Unit Chief for Review

Change Request: Amendment Process

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Change
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Change
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Unit Chief
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Change
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Required

Change Request – Unit Chief Review



UC - Unit Chief

 Status Options

Submit Review

Deny Change Request

Send to Back to Grants Analyst for Review

Change Request: Amendment Process

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Unit Chief
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Change
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Required

Change Request – Subrecipient Signatures Required

Subrecipient



OAA - Authorized Agent

Status: Change Request - Subrecipient Signatures Required



OAA - Authorized Agent

Home

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LOGGED IN AS: Agent Authorized ▾

Dashboard

Navigation Instructions:

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My Opportunities

▸ Filters

▾ My Opportunities

Name	Provider	Availability	Type
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Bulletproof Vest - VE24	Cal OES Provider Org	5/1/2024 12:00:00 AM - 11/1/2030 11:59:00 PM	Non-Competitive
Campus Sexual Assault - CT24	Cal OES Provider Org	6/25/2024 12:00:00 AM - 6/25/2025	Competitive

My Tasks

Initiate Related Document

VE24000708	Bulletproof Vest - VE24	Parker & Parker Services Unlimited Inc	Application - In Progress	8/21/2024 1:38:04 PM
VE24000709	Bulletproof Vest - VE24	Parker & Parker Services Unlimited Inc	Change Request - Subrecipient Signatures Required	3/13/2025 11:00:49 PM
VE24000709-REP1	Payment Report	Parker & Parker Services Unlimited Inc	Expenditure/Payment - In Progress	2/5/2025 3:29:21 PM
VI-2024-0007-01	Victim Services Information and Enhancement - VI24	Parker & Parker Services Unlimited Inc	Proposal - In Progress	6/27/2024 10:25:36 AM
VN-2024-0007-01	Victim Information and Notification Everyday - VN24	Parker & Parker Services Unlimited Inc	Application - In Progress	12/9/2024 10:32:53 AM



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GRANTS
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SYSTEM

Status: Change Request - Subrecipient Signatures Required



OAA - Authorized Agent

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Budget Narrative ✓

Personnel Costs ✓

Volunteer Costs ✓

Contractor/Consultant Costs ✓

Rent Costs ✓

Equipment Costs ✓

Financial Assistance For Clients Costs ✓

Document Landing Page

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- Organization:** The organization name of the current document.
- Your Role:** The name of the current document role of the person navigating; if the person is not added to the document, no role will display.
- Period Date:** The period dates of the current document. For example, if an Application, the Grant Subaward Performance Period begin date and end dates will display here.
- Due Date:** The due date set for the current document.

Template Applications	Instance Bulletproof Vest - VE24	Process Applications
Document Name VE24000709	Document Status Change Request - Subrecipient Signatures Required	
Organization Parker & Parker Services Unlimited Inc	Your Role Organization Authorized Agent	Period Date 4/30/2024 12:00:00 AM 5/23/2025 12:00:00 AM
		Due Date 3/13/2040 11:59:00 PM

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[pineapple.docx](#)

Face Sheet

Historic Face Sheets

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Program Narrative

Subrecipient Risk Assessment

Operational Agreements

Application Information Summary [Download]

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Funding Source Allocation

Budget Cost Categories

Budget Narrative

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Volunteer Costs

Contractor/Consultant Costs

Rent Costs

Equipment Costs

Financial Assistance For Clients Costs

Audit Costs

LOGGED IN AS: Agent Authorized

New Note | Print | Save

Change Request Selection

☒ Amendment

☐ Modification

Amendments

☐ Amount of Funding - Increase or decrease amount of funding to an existing fund source.

☒ Funding Source - Add and/or remove funding source.

☐ Subaward Performance Period/Period of Performance (GSPP/POP) - Change the GSPP/POP start and/or end date.

☐ Organization/Subrecipient Name - Change Subrecipient organization name.

Justification

Explanation - Elaborate on the decision for the Amendments or Modifications that have been chosen. *

Nulla sapien orci, facilisis bibendum magna eu, accumsan fringilla nibh. Donec ornare magna non mi luctus euismod. Nulla ornare tortor eu turpis ultricies tincidunt. Ut leo odio, euismod et tellus ut, consectetur congue enim. Suspendisse quis sapien cursus erat scelerisque mollis eget vitae tortor. Curabitur sodales, ipsum eu consectetur pellentesque, sem nisi ornare felis, ac iaculis massa mi ac libero. Nulla tempus dignissim mauris,

Amendment Signatures

☐ Authorized Agent: I have reviewed and approved the above information

Name

Date



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GRANTS
CENTRAL
SYSTEM

Status: Change Request - Subrecipient Signatures Required



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LOGGED IN AS: Agent Authorized

New Note | Print | Save

Change Request Selection

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☐ Modification

Amendments

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Nulla sapien orci, facilisis bibendum magna eu, accumsan fringilla nibh. Donec ornare magna non mi luctus euismod. Nulla ornare tortor eu turpis ultricies tincidunt. Ut leo odio, euismod et tellus ut, consectetur congue enim. Suspendisse quis sapien cursus erat scelerisque mollis eget vitae tortor. Curabitur sodales, ipsum eu consectetur pellentesque, sem nisi ornare felis, ac iaculis massa mi ac libero. Nulla tempus dignissim mauris,

Amendment Signatures

☒ Authorized Agent: I have reviewed and approved the above information

Name

Agent Authorized

Date

03/14/2025



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Status: Change Request - Subrecipient Signatures Required



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Change Request Selection

Amendment

Modification

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Organization/Subrecipient Name - Change Subrecipient organization name.

Justification

Explanation - Elaborate on the decision for the Amendments or Modifications that have been chosen.

Amendment Signatures

Authorized Agent: I have reviewed and approved the above information

Name

Date

Agent Authorized

03/14/2025

Are you sure that you want to change the status from

Change Request - Subrecipient Signatures Required to Change Request - Financial Operations Review?

Cancel

OK



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GRANTS
CENTRAL
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Status: Change Request - Subrecipient Signatures Required



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➤ Signatures

➤ Rating Team

➤ Tools

▼ Status Options

➤ Related Documents

Document Landing Page

New Note

Instructions:

- The table below represents high-level data points about the current document.
- The **bold** fields are labels that describe the specific data point.
- Template:** The type of template of the current document.
- Instance:** The type of instance of the current document. For example, if an Application, the instance is the Program name.
- Process:** The process flow the current document follows.
- Document Name:** The unique document identifier of the current document. This is also found in the upper left navigation ("Forms Menu") as a hyperlink, which will bring the person navigating back to this "Document Landing" page.
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- Due Date:** The due date set for the current document.

Template Applications	Instance Bulletproof Vest - VE24	Process Applications
Document Name VE24000709	Document Status Change Request - Financial Operations Review	
Organization Parker & Parker Services Unlimited Inc	Your Role Organization Authorized Agent	Period Date 4/30/2024 12:00:00 AM 5/23/2025 12:00:00 AM
		Due Date 3/13/2040 11:59:00 PM

Program Supplemental

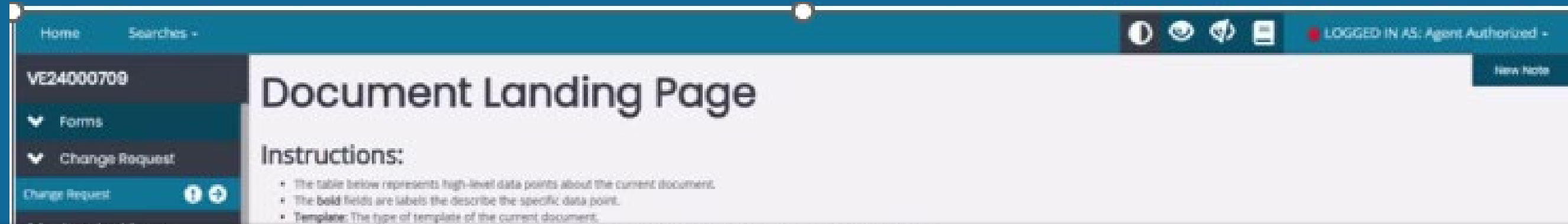
[Configuration Quiz Answers.docx](#)
[pineapple.docx](#)

*Video: Change Request – Amendment

Status: From Change Request–Subrecipient Signatures Required →
(Cal OES) Financial Operations Review



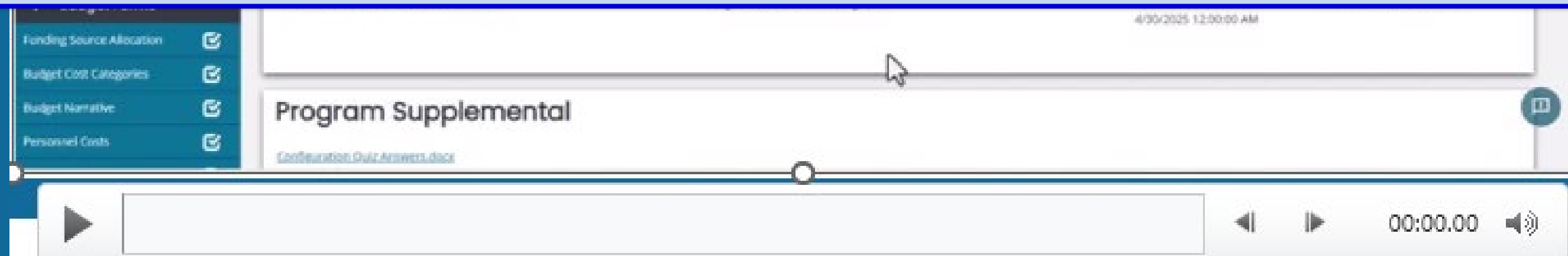
OAA - Authorized Agent



***To view this video demonstration, click onto this webinar recording link:**

<https://youtu.be/TaDrYghMDfc>

then go to “**1:02:35**”



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Cal OES Tasks: Finalizing the Change Request - Amendment

From “Change Request...” to → **Grant Subaward Executed**



Cal OES – Financial
Operations Review



Cal OES –
Fiscal Officer Approval



Cal OES – Director/
Designee Signature



Cal OES Accounting
- FiScal Data Entry



REMINDERS

- Modification(s) can be included with the Change Request – Amendment
- Check status on Document Landing Page
- A Payment Request can be initiated while a Change Request (Amendment) is in progress



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GCS Webinar Recordings & Training Material:

- **GCS Change Request-Amendment webinar and training material** posted on the Victim Services Training webpage:
<https://www.caloes.ca.gov/office-of-the-director/policy-administration/finance-administration/grants-management/victim-services/victim-services-trainings/>
- **Other GCS webinar training recordings and materials posted on this webpage:**
 - GCS Report of Expenditures and Request for Payment
 - GCS Change Request - Modification
- Web search: “Cal OES Victim Services Trainings”



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THANK YOU!

**For GCS questions,
contact your assigned
Cal OES Grants Analyst**