



Office of Criminal Justice Grants THIRD PARTY CERTIFICATE OF SUBAWARD

Email completed form to: criminaljustice@fdle.state.fl.us

FDLE Recipient Name: Pinellas County Board of Commissioners **FDLE App/Award #:** 68225

Federal Program: Edward Byrne Memorial Justice Assistance Grant **Federal Agency:** USDOJ

Federal Award Number: 15PBJA-23-GG-02972 MUMU **CFDA #:** 16.738

This form must be completed for all third-party agreements determined to be **SUBRECIPIENTS** by OCJG's Third-Party Determination Checklist. The FDLE Recipient must complete Parts I through IV and forward a copy to the tiered subrecipient for their signature in Part V. A copy of the fully executed Certificate of Subaward must be maintained on file by both parties and provided to FDLE.

Entities passing funds through to a "tiered subrecipient" must ensure their compliance with 2 CFR §200.332 – *Passthrough entity requirements*. Failure to address, or provide documentation of, compliance with these requirements will result in a withholding of funds condition on the FDLE Recipient's award. Withholding of funds conditions prevent the review and approval of payment requests, ultimately delaying reimbursement.

Part I: Certificate of Subaward

MORE Health, Inc.	GNNLLKHAXX98
Tiered Subrecipient's Name	Tiered Subrecipient's UEI
Firearm Safety and Gun Violence Prevention Program	
Tiered Subrecipient's Award/Contract Title	Tiered Subrecipient's Award/Contract #
Grant Project Period: <u>10/1/2024</u> to <u>9/30/2024</u> <u>10/1/2024</u>	Indirect Costs: <u>No</u> <input type="checkbox"/>
<i>Start Date End Date Effective Date</i>	Indirect Cost Rate: <u>0.00%</u>
Project Cost: \$ 26,064 \$ 0 \$ 26,064	Research and Development: <u>No</u> <input type="checkbox"/>
<i>Grant Funds Other Funds Total Cost</i>	

Project Description:

MORE HEALTH proposes to continue the Firearm Safety/Violence Prevention Project in Pinellas County's public, charter, and private schools. MH instructors will teach the Firearm Safety 1 Lesson, You Can Be a Hero and the middle school lesson, Responsibility, Respect and Reason to Pinellas County students. Applying kinesthetic style teaching methods, the interactive lessons are taught using hands-on visuals and role play to help students develop the skills to help them stay safe in potentially dangerous situations.

Part II: Third-Party Compliance Review

- | | |
|--|---|
| 1. Does the tiered subrecipient have a UEI number? If no, a withholding of funds condition will be placed on the award until a UEI number is obtained. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Does the tiered subrecipient have an active SAM.gov registration? If no, a withholding of funds condition will be placed on the award until an active SAM.gov registration is provided to FDLE. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Does the tiered subrecipient have a current EEO Certification? If no, the contract is not eligible for reimbursement with federal funds. Documentation must be provided to FDLE at monitoring. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |



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4. Will the tiered subrecipient be interacting with minors under this award? Yes No

If yes, the tiered subrecipient must comply with all requirements for Suitability to Work with Minors. Documentation must be provided to FDLE upon request.

5. Does the third-party agreement contain provisions requiring the tiered subrecipient be registered in and utilize the E-Verify System in accordance with Section 448.095(5), Florida Statutes? If yes, provide the page #. Yes No

If no, a withholding of funds condition will be placed on the award until an amended agreement including these provisions is provided to FDLE.

Page #: _____

Part III: Pass-through Entity Requirements

1. Does the FDLE Recipient understand they will be required to complete a Third-Party Subaward Risk Assessment and provide a copy at monitoring? Yes No

2. Does the FDLE Recipient understand they will be required to complete a Third-Party Subaward Monitoring Tool and provide a completed copy (including supporting documentation) at monitoring? Yes No

Part IV: FDLE Recipient Certification - Pinellas County Board of Commissioners

As the duly authorized representative, I acknowledge, understand and agree to abide by all applicable federal subaward and pass-through entity provisions established in 2 C.F.R. 200.332. I understand the failure to comply with all provisions and conditions regarding subawards under federal awards may result in the withholding of funds, disallowance of project costs, and/or classification of questioned costs. Additionally, I understand documentation to verify compliance with the provisions above must be maintained and provided at the time of monitoring.

Signature:  Date: January 24, 2025
Name: Barry Burton Title: County Administrator

Part V: Tiered Subrecipient Certification - MORE Health, Inc.

As the duly authorized representative, I acknowledge, understand and agree to abide by all applicable federal subaward and pass-through entity provisions established in 2 C.F.R. 200. I understand the failure to comply with all applicable provisions and conditions regarding subawards under federal awards may result in the withholding of funds, disallowance of project costs, and/or classification of questioned costs. Additionally, I understand documentation to verify compliance with the provisions above must be maintained and provided at the time of monitoring.

Signature:  Date: 12-10-2024
Name: Karen Buckenheimer Title: Executive Director

APPROVED AS TO FORM

By: 
Office of the County Attorney