

## Criminal Justice Grants THIRD PARTY CERTIFICATE OF SUBAWARD

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

| FDLE Re   | ecipient Name: Pinellas County Board of Commissioners   | FDLE App/Award #:  |  |
|---|---|--|--|
| Federal I   | Program: Edward Byme Memorial Justice Assistance Grant  | Federal Agency: USDOJ  |  |
| Federal /   | Award Number: 15PBJA-24-GG-04224-MUMU   | CFDA#: 16.738  |  |
| Third-Partiered su  | m must be completed for all third-party agreements de<br>ty Determination Checklist. The FDLE Recipient must comple<br>brecipient for their signature in Part V. A copy of the full<br>ed on file by both parties and provided to FDLE.   | ete Parts I through IV and forward a copy to the   |  |
| <ul> <li>Passth</li> <li>these req</li> </ul>   | passing funds through to a "tiered subrecipient" must ensurough entity requirements. Failure to address, or properties will result in a withholding of funds condition or additions prevent the review and approval of payment requests,  | rovide documentation of, compliance with the FDLE Recipient's award. Withholding   |  |
| Part I: C   | Certificate of Subaward   |  |  |
| MORE H  | Health, Inc   | GNNLLKHAXX98   |  |
|   | subrecipient's Name   | Tiered Subrecipient's UEI  |  |
| Firearm   | Safety and Violence Prevention Program  |  |  |
| Tiered S  | Subrecipient's Award/Contract Title   | Tiered Subreciplent's Award/Contract #   |  |
| Grant Pr  | roject Period: 10/1/2025 to 9/30/2026 10/1/2025   | Indirect Costs: No   |  |
|   | Start Date End Date Effective Date  | Indirect Cost Rate: 0.00%  |  |
| Project Cost: \$30,000 \$0 \$30,000  Grant Funds Other Funds Total Cost  Project Description: |   | Research and Development: No   |  |
| charter,<br>middle s<br>teaching<br>the skill   | HEALTH proposes to continue the Firearm Safety/Violence Proposed and private schools. MH instructors will teach the Firearm Safeschool lesson, Responsibility, Respect and Reason to Pinellas g methods, the interactive lessons are taught using hands-on versions to help them stay safe in potentially dangerous situations. | ety 1 Lesson, You Can Be a Hero and the<br>County students. Applying kinesthetic style   |  |
| 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 uUEI number is obtained.  | ✓ Yes No until a   |  |
| 2.  | Does the tiered subrecipient have an active SAM.gov registration? If no, a withholding of funds condition will be pla on the award until an active SAM.gov registration is provided FDLE.   |  |  |
| 3.  | Does the tiered subrecipient have a current EEO Certification   | n?   |  |
|   | If no, the contract is not eligible for reimbursement with fede funds. Documentation must be provided to FDLE at monitori   |  |  |
| Barbara .   |   | the first of the second of the |  |



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| 4.   | Will the tiered subrecipient be interacting with minors under this award?  | Yes   | <b>₽</b> 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.   |  | Yes   | □No  |
|  | 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 #.  | Page #: 12  |  |
|  | If no, a withholding of funds condition will be placed on the award  |   |  |
|  | until an amended agreement including these provisions is provided to FDLE.   |   |  |
| Part III:  | : Pass-through Entity Requirements   | # (B/ LS)   |  |
| 1.   | Does the FDLE Recipient understand they will be required to complete a   | Yes   | □No  |
|  | Third-Party Subaward Risk Assessment and provide a copy at monitoring?   |   |  |
| 2.   | and the complete and th | Yes   | □No  |
|  | Third-Party Subaward Monitoring Tool and provide a completed copy  |   |  |
| H.   | (including supporting documentation) at monitoring?  |   |  |
| Part IV  |  | ers   | WW.  |
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| As the subawa with all disallow verify of the subawa was allow the subaw | (including supporting documentation) at monitoring?  FDLE Recipient Certification - Pinellas County Board of Commissione duly authorized representative, I acknowledge, understand and agree to ard and pass-through entity provisions established in 2 C.F.R. 200.332. I understand and conditions regarding subawards under federal awards may rewance of project costs, and/or classification of questioned costs. Additionally, compliance with the provisions above must be maintained and provided at the  | abide by all anderstand the esult in the with a understand time of monit  | e failure to comply<br>thholding of funds,<br>documentation to<br>toring.  |
| As the subawa with all disallow verify of Signate  | (including supporting documentation) at monitoring?  7: FDLE Recipient Certification - Pinellas County Board of Commissione  2: duly authorized representative, I acknowledge, understand and agree to ard and pass-through entity provisions established in 2 C.F.R. 200.332. I understand and conditions regarding subawards under federal awards may rewance of project costs, and/or classification of questioned costs. Additionally, compliance with the provisions above must be maintained and provided at the ure:    Date:   Name   Date:   Name   Date:   Date:   Date:   Name   Date:   Da | abide by all anderstand the esult in the with a lunderstand etime of monitored  | e failure to comply<br>thholding of funds,<br>documentation to<br>toring.  |
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Third-Party Certificate of Subaward