

Authority to Use Grant Funds

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development

To: (name & address of Grant Recipient & name & title of Chief Executive Officer)

Copy To: (name & address of SubRecipient)

Ms. Janice L. Wadell
Federal Programs Branch Chief
Department of Housing and Community Development
Division of Financial Assistance
2020 West El Camino Ave, Suite 670 95833
P.O. Box 952054
Sacramento, CA 94252-2054

We received your Request for Release of Funds and Certification, form HUD-7015.15 on

05/04/2021

Your Request was for HUD/State Identification Number

B-19-DV-06-0001/B-19-DV-06-0002

All objections, if received, have been considered. And the minimum waiting period has transpired.
You are hereby authorized to use funds provided to you under the above HUD/State Identification Number.
File this form for proper record keeping, audit, and inspection purposes.

Project Activity: Owner-Occupied Housing Rehabilitation and Reconstruction Program

Program Description: The proposed purpose of this project is to provide grants to approximately 1,000 owner-occupied homeowners to rehabilitate and reconstruct homes damaged or destroyed in 2018. This project will be funded by the Department of Housing and Community Development.

CDBG-DR funds: \$205,107,638.00

Project Location: Butte, Lake, Los Angeles, Shasta, and Ventura Counties

Typed Name of Authorizing Officer

Jessie Handforth Kome

Title of Authorizing Officer

Director, Office of Block Grant Assistance

Signature of Authorizing Officer

X

JESSIE KOME

Digitally signed by JESSIE KOME
Date: 2021.05.24 17:51:45
-04'00'

Date (mm/dd/yyyy)

05/24/2021