



## CSA-74 Funding Request, FY23-24

### MOU Participant Agency Information

Please submit this form no later than Thursday, August 31, 2023.

#### MOU PARTICIPANT AGENCY INFORMATION

Agency Name		Contact	
Main Address		Tel.	Fax
City		Email	
State	Zip Code		

#### FUNDING REQUEST | FY23-24

Place an **X** next to the appropriate choice.

- Requesting FY CSA-74 Fund EMS Communications, Equipment, and Training Support
- NOT** Requesting FY CSA-74 Fund EMS Communications, Equipment, and Training Support

- I have completed and submitted the CSA-74 Expenditure Report for 22-23.

I hereby certify under penalty of perjury that all information in this report is true and documented to the best of my knowledge and belief. I understand that any falsification or omission of facts may result in forfeiture of funds and/or not allowing receipt of CSA-74 EMS Communications, Equipment, and Training support in the future. In addition, I shall comply with all accepted financial management requirements, procedures, and audits.

Signature

Date

Printed Name

Title

#### For questions, please contact:

**Carolina Coyt**

Accountant I

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