

**STATE SUBAWARD**  
**Certified Local Emergency Manager Salary Supplement Subaward**

<b>1. Grantee:</b> Baldwin County EMA	<b>2. Effective Dates:</b> 10/01/2023-09/30/2024
<b>3. Issuing Agency:</b> Alabama Emergency Management Agency (AEMA) 5898 County Road 41 P.O. Drawer 2160 Clanton, AL 35046-2160	<b>4. FAIN:</b> N.A.
<b>5. CA Number:</b> 24CLEM	
<b>6. Allocation Amount:</b>	<b>\$17,000.00</b>
<b>7. CFDA #:</b> N.A.	<b>8. State Award Date:</b> 10/01/2023

This funding is awarded for the purpose of reimbursement of a portion of the Certified Local Emergency Manager's (CLEM) salary. Once the CLEM salary supplement request has been received by AEMA, then AEMA can reimburse CLEM funding.

The subgrantee agrees: (1) to provide any information requested by AEMA regarding salary payment documentation in a timely manner; (2) requests for reimbursement of expenses relative to this grant will be submitted through the Emergency Management Performance Grant (EMPG) claim forms provided or approved by the AEMA Fiscal Division. AEMA will use EMPG claims for validation of salary expense, and separate claims for CLEM will not be required; (3) claims will be presented with clear and adequate supporting documentation as instructed by the AEMA Fiscal Division; (4) claims will be submitted in a timely manner, on a monthly basis. Failure to submit claims in a timely manner may result in a reduction of the amount reimbursed; (5) all claims relating to this grant must be submitted by October 16, 2024; (6) information requested by AEMA concerning salary expenses will be provided immediately by the subgrantee to avoid delays in reimbursements; (7) all documents related to reimbursements will be made available to AEMA personnel for monitoring and review.

**The subgrantee agrees that the AEMA Director or his designated agent may elect to withhold or, with a ten day notice, withdraw all or part of this funding from the grantee for non-compliance with any portion of the terms stated in this document.**

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Certified Local EMA Director/Coordinator (please print and sign) / Date

**Certification By County Official Authorized to Sign:**

I certify that I understand and agree: to comply with the general and fiscal provisions of this grant subaward to include the terms and conditions; that I am duly authorized to sign as the County Chief Elected Official; to comply with provisions of the regulations governing these funds and all other federal and state laws; that all information presented is correct; that costs incurred prior to this subaward approval may result in those expenses being absorbed by the subgrantee; and, that these grant funds will not supplant state or local funds.

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Chief Elected Official (please print and sign) / Date



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Jeff Smitherman, Director  
Alabama Emergency Management Agency