



# COMMONWEALTH of VIRGINIA

## *Department of Criminal Justice Services*

Shannon Dion  
Director

Megan Peterson  
Chief Deputy Director

Washington Building  
1100 Bank Street  
Richmond, Virginia 23219  
(804) 786-4000  
[www.dcjs.virginia.gov](http://www.dcjs.virginia.gov)

September 8, 2020

Ms. Trudy M. Riley  
Associate Vice President for Research & Innovation  
Office of Sponsored Programs, North End Ctr  
300 Turner Street, NW, Suite 4200  
Blacksburg, VA 24061

RE: CESF Law Enforcement Agencies

Dear Ms. Riley:

Congratulations on being a recipient of the above referenced grant program! Your DCJS grant award number is **20-A5125CE20** and was approved for a total award of **\$31,685**, funded through Federal Grant **2020-VD-BX-0141**. The project period is **01/20/2020** through **09/30/2021**.

Included with this letter is a Statement of Grant Award/Acceptance (SOGA). Please note your General Special Conditions, Reporting Requirements and Projected Due Dates have been combined and are now referred to as **Conditions and Requirements**. All are posted online at <https://www.dcjs.virginia.gov/grants/grant-requirements> for your review. In addition to the General Special Conditions, there may be Specific Special Conditions related to your Grant Award. You are required to view these conditions online via the Grants Management Information System (GMIS) at <https://grants.dcjs.virginia.gov/> under menu item View Status -> Special Conditions. You must obtain a user name and password set up by your Finance Officer in order to use this system.

To indicate your acceptance of this award and conditions, please sign the included SOGA and complete both the Sub-Grantee Questionnaire and the Certifications Regarding Lobbying forms posted at <https://dcjs.virginia.gov/grants/forms>. **Return all three documents within the next 60 days to [grantsmgmt@dcjs.virginia.gov](mailto:grantsmgmt@dcjs.virginia.gov) and reference your DCJS grant number in the subject line of your email.**

We will be happy to assist you in any way we can to assure your project's success. If you have questions, contact Lacey Payne at (804) 786-8003 or via email at [CESF@dcjs.virginia.gov](mailto:CESF@dcjs.virginia.gov).

Sincerely,

A handwritten signature in blue ink that reads "Shannon Dion".

Shannon Dion

## STATEMENT OF GRANT AWARD (SOGA)

Virginia Department of Criminal Justice Services  
1100 Bank Street, 12<sup>th</sup> Floor  
Richmond, Virginia

<b>CESF Law Enforcement Agencies</b>		
Subgrantee: VPI and State Univ (Grnts Admin)		
DUNS Number: 003137015                      DCJS Grant Number: 20-A5125CE20		
Grant Start Date: 01/20/2020                      Grant End Date: 09/30/2021		
Federal Grant Number: 2020-VD-BX-0141		
Federal Awardee: OJP		
Federal Catalog Number: 16.034		
Project Description: To support a broad range of activities to prevent, prepare for, and respond to the coronavirus.		
Federal Start Date: 1/20/2020		
Federal Funds: <b>\$31,685</b>		
State General Funds: \$		
State Special Funds: \$		
Agency Match: \$ <u>          </u>		
Total Budget: <b>\$31,685</b>		
Project Director	Project Administrator	Finance Officer
Chief William M. Babb Chief of Police VPI & SU Campus Police Public Safety Bldg. (0523), Ste. 280 Blacksburg, VA 24061 (540) 231-5123 wmb@vt.edu	Ms. Trudy M. Riley Associate Vice President for Research & Innovation Office of Sponsored Programs, North End Ctr 300 Turner Street, NW, Suite 4200 Blacksburg, VA 24061 (540) 231-5281 ospdirector@vt.edu	Ms. Trudy M. Riley Associate Vice President for Research & Innovation Office of Sponsored Programs, North End Ctr 300 Turner Street, NW, Ste 4200 Blacksburg, VA 24061 (540) 231-5281 Ospdirector@vt.edu

**\*Please indicate your ICR in the space provided, if applicable.** As the duly authorized representative, the undersigned, having received the Statement of Grant Awards (SOGA) and Special Conditions, hereby accepts this grant and agree to the conditions and provisions of all other Federal and State laws and rules and regulations that apply to this award.

Signature: \_\_\_\_\_

Authorized Official (Project Administrator)

Title: \_\_\_\_\_

Date:

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