



LIST OF AUTHORIZED AGENTS

OES-FPD-012 (Rev. 09-2022)

List of Authorized Agents

Entity Name:

Cal OES ID:

- Enter each Authorized Agent (AA) as listed on the Designation of Applicant's Agent Resolution (Cal OES 130) for Non-State Agencies **or** as it appears on the Signature Authority (Cal OES 130SA) for California State Agencies.
- Check box to receive electronic copies of Cal OES Notification of Obligation and/or Payment packages. (Minimum 1 AA.)
- Email addresses must use an email that shares the official entity URL.

Authorized Agent Name	Authorized Agent Title	Email Address	Email Pkg?
<input type="text" value="Miguel Márquez"/>	<input type="text" value="City Manager"/>	<input type="text" value="miguelmarquez@cityofpasadena.net"/>	<input type="checkbox"/>
<input type="text" value="Matthew Hawkesworth"/>	<input type="text" value="Director of Finance"/>	<input type="text" value="mhawkesworth@cityofpasadena.net"/>	<input checked="" type="checkbox"/>
<input type="text" value="Brenda Harvey-Williams"/>	<input type="text" value="Assistant City Manager"/>	<input type="text" value="bharvey-williams@cityofpasadena.net"/>	<input type="checkbox"/>
<input type="text" value="Nicholas Rodriguez"/>	<input type="text" value="Assistant City Manager"/>	<input type="text" value="nirodriguez@cityofpasadena.net"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

• An Approved Contact may be designated by an AA to request or receive information on grant payment status. Add them by inputting their information below. (Ex. Accounting/Admin offices) Must use an official email URL.

Approved Contact Name	Approved Contact Title	Email Address	Email Pkg?
<input type="text" value="Renita Dukes"/>	<input type="text" value="Principal Accountant"/>	<input type="text" value="rdukes@cityofpasadena.net"/>	<input checked="" type="checkbox"/>
<input type="text" value="Samantha Pangan"/>	<input type="text" value="Principal Accountant"/>	<input type="text" value="spangan@cityofpasadena.net"/>	<input checked="" type="checkbox"/>
<input type="text" value="Nallely Procopio"/>	<input type="text" value="Emergency Services Manager"/>	<input type="text" value="nprocopio@cityofpasadena.net"/>	<input checked="" type="checkbox"/>

Please use a second page if more space is needed.

**DESIGNATION OF APPLICANT'S AGENT RESOLUTION
FOR NON-STATE AGENCIES**

BE IT RESOLVED BY THE City Council OF THE City of Pasadena
(Governing Body) (Name of Applicant)

THAT Miguel Márquez, OR
(Title of Authorized Agent)

Matthew Hawkesworth, OR
(Title of Authorized Agent)

Brenda Harvey-Williams
(Title of Authorized Agent)

is hereby authorized to execute for and on behalf of the City of Pasadena, a public entity
(Name of Applicant)

established under the laws of the State of California, this application and to file it with the California Governor's Office of Emergency Services for the purpose of obtaining certain federal financial assistance under Public Law 93-288 as amended by the Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988, and/or state financial assistance under the California Disaster Assistance Act.

THAT the City of Pasadena, a public entity established under the laws of the State of California,
(Name of Applicant)

hereby authorizes its agent(s) to provide to the Governor's Office of Emergency Services for all matters pertaining to such state disaster assistance the assurances and agreements required.

Please check the appropriate box below:

- This is a universal resolution and is effective for all open and future disasters up to three (3) years following the date of approval below.
- This is a disaster specific resolution and is effective for only disaster number(s) _____

Passed and approved this _____ day of _____, 20____

(Name and Title of Governing Body Representative)

(Name and Title of Governing Body Representative)

(Name and Title of Governing Body Representative)

CERTIFICATION

I, Mark Jomsky, duly appointed and City Clerk of
(Name) (Title)

City of Pasadena, do hereby certify that the above is a true and correct copy of a
(Name of Applicant)

Resolution passed and approved by the City Council of the City of Pasadena
(Governing Body) (Name of Applicant)

on the _____ day of _____, 20____.

(Signature)

City Clerk
(Title)