

STATE OF CALIFORNIA  
DEPARTMENT OF FINANCE  
OFFICE OF STATE AUDITS AND EVALUATIONS  
CERTIFICATION OF NON-FEDERAL AWARD RECEIPT

### Certification of Non-Federal Award Receipt

Department Name: \_\_\_\_\_

Business Unit: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Fiscal Year: \_\_\_\_\_

I certify (or declare) under penalty of perjury that the above stated department neither received nor expended Federal Awards during the Fiscal Year stated above.

\_\_\_\_\_  
Signature (Department Head or Designee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name, Title

\_\_\_\_\_  
Phone Number