

FORM CD-451  
(REV. 12-14)

U.S. DEPARTMENT OF COMMERCE

X GRANT COOPERATIVE AGREEMENT

### AMENDMENT TO FINANCIAL ASSISTANCE AWARD

AWARD NUMBER  
05-10-S13005

**CFDA NO. AND NAME**

11.549 - State and Local Implementation Grant Program

**PROJECT TITLE**

Public Safety Broadband enhancements to Arkansas

**RECIPIENT NAME**

Arkansas Department of Emergency Management

**AMENDMENT NUMBER**

2

**STREET ADDRESS**

Building #9501 Camp Joseph T. Robinson

**EFFECTIVE DATE**

**MAR 25 2015**

**CITY, STATE ZIP**

North Little Rock, AR 72199

**EXTEND PERIOD OF PERFORMANCE TO**  
01/31/2018

COSTS ARE REVISED AS FOLLOWS:	PREVIOUS ESTIMATED COST	ADD	DEDUCT	TOTAL ESTIMATED COST
FEDERAL SHARE OF COST	\$1,595,711.00	\$0.00	\$0.00	\$1,595,711.00
RECIPIENT SHARE OF COST	\$506,763.00	\$0.00	\$0.00	\$506,763.00
<b>TOTAL ESTIMATED COST</b>	<b>\$2,102,474.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$2,102,474.00</b>

**REASON(S) FOR AMENDMENT**

This grant is hereby amended to: 1) Incorporate Special Award Conditions (SAC) #21, providing a Programmatic Waiver of Phase I funding limitations on data collection activities and SAC #22, providing a waiver for mandatory Memorandum of Agreement (MOA) template; 2) Extend the Project End date from 7/31/2016 to 1/31/2018; 3) Change the Program Officer from Carolyn Dunn to Natalie Romanoff and 4) Change the Grants Specialist from Husai Rahman to Ebony Simmons.

ALL PREVIOUS TERMS AND CONDITIONS REMAIN IN EFFECT.

This Amendment Document (Form CD-451) signed by the Grants Officer constitutes an Amendment of the above-referenced Award, which may include an obligation of Federal funding. By signing this Form CD-451, the Recipient agrees to comply with the Amendment provisions checked below and attached, as well as previous provisions incorporated into the Award. If not signed and returned without modification by the Recipient within 30 days of receipt, the Grants Officer may unilaterally withdraw this Amendment offer and de-obligate any associated funds.

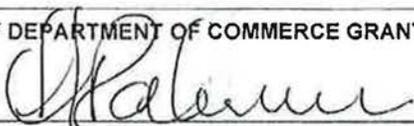
SPECIAL AWARD CONDITIONS

LINE ITEM BUDGET

OTHER(S)

**SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER**

Robin Bunch



**DATE**

3/19/2015

**TYPED NAME, TYPED TITLE, AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL**

Bobbie Ann Merkel

Administration Division Director



**DATE**

4/1/15

For