

FORM CD-451  
(REV. 12-14)

U.S. DEPARTMENT OF COMMERCE

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**

4

**STREET ADDRESS**

Building #9501 Camp Joseph T. Robinson

**EFFECTIVE DATE**

**SEP 24 2015**

**CITY, STATE ZIP**

North Little Rock, AR 72199

**EXTEND PERIOD OF PERFORMANCE TO  
(IF APPLICABLE)**

COSTS ARE REVISED AS FOLLOWS:	PREVIOUS ESTIMATED COST	ADD	DEDUCT	TOTAL ESTIMATED COST
<b>FEDERAL SHARE OF COST</b>	\$1,595,711.00	\$0.00	\$0.00	\$1,595,711.00
<b>RECIPIENT SHARE OF COST</b>	\$506,763.00	\$36,940.00	\$0.00	\$543,703.00
<b>TOTAL ESTIMATED COST</b>	\$2,102,474.00	\$36,940.00	\$0.00	\$2,139,414.00

**REASON(S) FOR AMENDMENT**

This grant is hereby amended to: (1) acknowledge the receipt and approval of the Phase 2 budget modification submitted August 21, 2015 and (2) release the Phase 2 reserve of \$797,856 (50% of the federal funds), which was previously established in Special Award Condition #6. (3) The recipient's cost share is decreased by \$36,940.

All previous terms and conditions remain the same.

**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.**

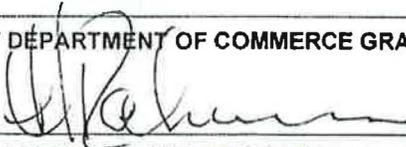
SPECIAL AWARD CONDITIONS

LINE ITEM BUDGET

OTHER(S)

**SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER**

Husai Rahman



**DATE**

9/23/2015

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

David Maxwell

Arkansas Department of Emergency Management, Director



**DATE**

9/23/2015

Award Number: 05-10-S13005, Amendment Number 4

Federal Program Officer: Natalie Romanoff

Requisition Number: S13005

Employer Identification Number: 716043948

Dun & Bradstreet No: 096794412

Recipient ID: 0553878

Requestor ID: 0553878

**Award ACCS Information**

Bureau Code	FCFY	Project-Task	Org Code	Obj Class	Obligation Amount
61	2013	8150000-000	11-00-0000-00-00-00-00	41-19-00-00	\$0.00

**Award Contact Information**

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