

Grant Award Number: 23-10-S13023N
Recipient Organization: State of Maine- ConnectME Authority
Amendment No. 03

**National Institute of Standards and Technology
State and Local Implementation Grant Program
Special Award Conditions**

5. The Grant Specialist's name, address, telephone number and email address are:

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6. Revised - Award Payments Conditions

This award has the following control or withdrawal limits set in the Automated Standard Application for Payments (ASAP):

None

Agency Review required for all withdrawals (see explanation below)

Agency Review required for all withdrawal requests over \$ _____

Maximum Draw Amount controls (see explanation below):

\$ _____ each month

\$ _____ each quarter

\$ _____ each year

15. This grant is hereby amended to approve the Match Proportionality Waiver requested by the recipient in the letter dated October 5, 2015. The recipient must meet its cost share commitment over the life of the award.