FORM CD-451 (REV. 11/18) U.S. DEPARTMENT OF COMMERCE

X GRANT

69-10-S18069

COOPERATIVE AGREEMENT

# AMENDMENT TO FINANCIAL ASSISTANCE AWARD

AWARD NUMBER

CFDA NO. AND NAME

11.549 - State and Local Implementation Grant Program

**PROJECT TITLE** 

**CNMI FY 2018 SLIGP 2.0** 

RECIPIENT NAME

CNMI Homeland Security and Emergency Management

3

STREET ADDRESS EFFECTIVE DATE

1313 Anatahan Drive

CITY, STATE ZIP

EXTEND PERIOD OF PERFORMANCE TO

(IF APPLICABLE)

Saipan, MP 96950-0000

Salpan, IVIE 90930-0000				
COSTS ARE REVISED AS FOLLOWS:	PREVIOUS ESTIMATED COST	ADD	DEDUCT	TOTAL ESTIMATED COST
FEDERAL SHARE OF COST	\$535,000.00	\$0.00	\$346,576.00	\$188,424.00
RECIPIENT SHARE OF COST	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL ESTIMATED COST	\$535,000.00	\$0.00	\$346,576.00	\$188,424.00

#### **REASON(S) FOR AMENDMENT**

This grant is hereby amended to de-obligate the remaining Federal funds in the amount of \$-346,576.00 to close the ASAP account and closeout the award.

ALL TERMS AND CONDITIONS REMAIN IN EFFECT

THIS IS A UNILATERAL AMENDMENT; NO SIGNATURE FROM THE RECIPIENT IS REQUIRED

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.

SPECIFIC AWARD CONDITION(S)

LINE ITEM BUDGET

OTHER(S)

SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER	DATE
TYPED NAME, TYPED TITLE, AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL	DATE

Award Number: 69-10-S18069, Amendment Number 3

Federal Program Officer: Natalie Romanoff

Requisition Number: CS18069

Employer Identification Number: 986019463

Dun & Bradstreet No: 8548561970000

Recipient ID: 1122630 Requestor ID: 1122630

## **Award ACCS Information**

Bureau Code	FCFY	Project-Task	Org Code	Obj Class	Obligation Amount
61	2018	8150000-000	11-00-0000-00-00-00	41-19-00-00	\$-16,791.00
61	2019	8150000-000	11-00-0000-00-00-00	41-19-00-00	\$-329,785.00

### **Award Contact Information**

Contact Name	Contact Type	Email	Phone
Ms. Naomi S Ada	Administrative	naomi.ada@cnmihsem.gov.mp	(670) 664-2216

#### **NIST Grants Officer:**

Nuria Martinez 100 Bureau Drive, MS 1650 Gaithersburg, MD 20899-1650 (301) 975-6215

## **NIST Grants Specialist:**

Shiou Liu 100 Bureau Drive, MS 1650 Gaithersburg, MD 20899-1650 (301) 975-8245