

FORM CD-451  
(REV 10/98)

U.S. DEPARTMENT OF COMMERCE

X GRANT COOPERATIVE AGREEMENT

## AMENDMENT TO FINANCIAL ASSISTANCE AWARD

ACCOUNTING CODE

\*\*See Attached\*\*

AWARD NUMBER

12-10-S13012

RECIPIENT NAME

Florida Division of Emergency Management

AMENDMENT NUMBER

1

STREET ADDRESS

2555 Shumard Oak Blvd.

EFFECTIVE DATE

**OCT 30 2013**

CITY, STATE ZIP

Tallahassee, FL 32399

EXTEND WORK COMPLETION TO

August 31, 2016

CFDA NO. AND PROJECT TITLE:

11.549 FloridaNet

COSTS ARE REVISED AS FOLLOWS:	PREVIOUS ESTIMATED COST	ADD	DEDUCT	TOTAL ESTIMATED COST
FEDERAL SHARE OF COST	\$4,916,040.00	\$0.00	\$0.00	\$4,916,040.00
RECIPIENT SHARE OF COST	\$1,229,010.00	\$0.00	\$0.00	\$1,229,010.00
TOTAL ESTIMATED COST	\$6,145,050.00	\$0.00	\$0.00	\$6,145,050.00

REASON(S) FOR AMENDMENT

This grant is hereby amended to acknowledge the receipt and approval of the Baseline/Expenditure Plan to comply with SAC #7.

ALL PREVIOUS TERMS AND CONDITIONS REMAIN IN EFFECT.

**This Amendment approved by the Grants Officer is issued in triplicate and constitutes an obligation of Federal funding. By signing the three documents, the Recipient agrees to comply with the Amendment provisions checked below and attached, as well as previous provisions incorporated into the Award. Upon acceptance by the Recipient, two signed Amendment documents shall be returned to the Grants Officer and the third document shall be retained by the Recipient. If not signed and returned without modification by the Recipient within 30 days of receipt, the Grants Officer may unilaterally terminate this Amendment.**

Special Award Conditions

Line Item Budget

Other:

SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER

DATE

Jannet Cancino



10/30/2013

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

DATE

BRYAN KOON, ADR



22 Nov 13

For

Award Number: 12-10-S13012, Amendment Number 1  
 Federal Program Officer: Michael Dame  
 Requisition Number: S13012  
 Employer Identification Number: 800749868  
 Dun & Bradstreet No: 930172528  
 Recipient ID: 1220140  
 Requestor ID: 1220140

**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**

Contact Name	Contact Type	Email	Phone
Mr. Bryan Koon	Administrative	bryan.koon@em.myflorida.com	850-413-9969
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**NIST Grants Officer:**

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