AMENDMENT TO
FINANCIAL ASSISTANCE AWARD

RECIPIENT NAME
Georgia Emergency Management Agency

STREET ADDRESS
935 East Confederate Avenue, SE

CITY, STATE ZIP
Atlanta, GA 30316

CFDA NO. AND PROJECT TITLE:
11.549 The State of Georgia will coordinate a two phase program (planning phase and implementation phase) which will allow us to implement a nationwide, interoperable, public safety broadband network

COSTS ARE REVISED AS
FOLLOWS:

<table>
<thead>
<tr>
<th></th>
<th>PREVIOUS ESTIMATED COST</th>
<th>ADD</th>
<th>DEDUCT</th>
<th>TOTAL ESTIMATED COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>FEDERAL SHARE OF COST</td>
<td>$3,306,657.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$3,306,657.00</td>
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<tr>
<td>RECIPIENT SHARE OF COST</td>
<td>$826,664.00</td>
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<td>$826,664.00</td>
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<tr>
<td>TOTAL ESTIMATED COST</td>
<td>$4,133,321.00</td>
<td>$0.00</td>
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<td>$4,133,321.00</td>
</tr>
</tbody>
</table>

REASON(S) FOR AMENDMENT
This grant is hereby amended to approve the Match Proportionality Waiver requested by the recipient in the letter dated April 18, 2014.

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.

X Special Award Conditions

Line Item Budget

Other:

SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER

Calvin Mitchell

TYPED NAME, TYPED TITLE, AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL
Ceporia McMillian, Finance Director