**AMENDMENT TO FINANCIAL ASSISTANCE AWARD**

**AWARD NUMBER**
36-10-S13036

**RECIPIENT NAME**
NY State Division of Homeland Security and Emergency Services

**STREET ADDRESS**
1220 Washington Avenue State Campus Building 7A, Suite 610

**CITY, STATE ZIP**
Albany, NY 12226-1800

**PROJECT TITLE**
FY 2013 State and Local Implementation Grant Program (SLIGP)

**RECIPIENT NAME**
NY State Division of Homeland Security and Emergency Services

**AMENDMENT NUMBER**
7

**EFFECTIVE DATE**
05/22/2018

**COSTS ARE REVISED AS FOLLOWS:**

<table>
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<tr>
<th></th>
<th>PREVIOUS ESTIMATED COST</th>
<th>ADD</th>
<th>DEDUCT</th>
<th>TOTAL ESTIMATED COST</th>
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<td><strong>FEDERAL SHARE OF COST</strong></td>
<td>$1,806,531.00</td>
<td>$0.00</td>
<td>$526,888.81</td>
<td>$1,279,642.19</td>
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<td><strong>RECIPIENT SHARE OF COST</strong></td>
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<td><strong>TOTAL ESTIMATED COST</strong></td>
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<td>$526,888.81</td>
<td>$1,731,325.19</td>
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**REASON(S) FOR AMENDMENT**
This grant is hereby amended to de-obligate the remaining Federal funds in the amount of $-526,888.81 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.

**SPECIAL AWARD CONDITIONS**
LINE ITEM BUDGET
OTHER(S)

**SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER**
Nuria Martinez

**DATE**
5/22/2018

**TYPED NAME, TYPED TITLE, AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL**
Award Number: 36-10-S13036, Amendment Number 7
Federal Program Officer: Yuki Miyamoto-Mendez
Requisition Number: CS13036
Employer Identification Number: 146013200
Dun & Bradstreet No: 616804055
Recipient ID: 1106990
Requestor ID: 1106990

Award ACCS Information

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<th>Org Code</th>
<th>Obj Class</th>
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<td>$-526,888.81</td>
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Award Contact Information

<table>
<thead>
<tr>
<th>Contact Name</th>
<th>Contact Type</th>
<th>Email</th>
<th>Phone</th>
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</thead>
<tbody>
<tr>
<td>Ms. Shelley Wahrlich</td>
<td>Administrative</td>
<td><a href="mailto:shelley.wahrlich@dhses.ny.gov">shelley.wahrlich@dhses.ny.gov</a></td>
<td>5182425108</td>
</tr>
<tr>
<td>Mr. Matthew Delaney</td>
<td>Technical</td>
<td><a href="mailto:Matthew.Delaney@dhses.ny.gov">Matthew.Delaney@dhses.ny.gov</a></td>
<td>(518) 322-4910</td>
</tr>
</tbody>
</table>

NIST Grants Officer:
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NIST Grants Specialist:
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