USDA Forest Service

OMB 0596-0217 FS-1500-19

					PAGE	OF PAGE
MODIFICATION OF GRANT OR AGREEMENT					1	3
			OOPERATOR GRANT or UMBER, IF ANY:	3. MODIFICA 3	TION NUM	BER:
4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4): Eldorado National Forest			5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4): Eldorado National Forest			
<ul> <li>100 Forni Road, Placerville, CA 95667</li> <li>6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county):</li> <li>Georgetown Fire Protection District</li> </ul>			100 Forni Road, Placerville, CA 95667 7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only):			
	et, Georgetown, CA 95634-9	902				- 18 <sup>00</sup> - 1
		and the second s	MODIFICATION			
CHECK ALL THAT APPLY:	This modification is issued p referenced in item no. 1, abo	ve.	e modification provision	in the grant/ag	reement	
	CHANGE IN PERFORMANCE PERIOD:					
	CHANGE IN FUNDING: Add funding in the amount of \$1,500 for FY2015					
	ADMINISTRATIVE CHANGES:					
	OTHER (Specify type of modification):					
9. ADDITIONAL	L SPACE FOR DESCRIPTION OF 10. ATTACHED I		TATION (Check all the		<u>и</u> н. н. 2	
Revised Scope of Work						
	Revised Financial Plan					
	Other:					
		11. SIGN	ATURES			
	<u>RESENTATIVE</u> : BY SIGNATURE BELO E PARTIES AND AUTHORIZED TO ACT NT.		TIVE AREAS FOR MATTERS RE	LATED TO THE AB	OVE-REFEF	ENCED
11.A. CEOFGETOWN FPD SIGNATURE Signature designatory Official) 11.B. DATE SIGNED 01-08-15		11.C. U.S. FOREST SERVICE SI aurenu (Signature of Signatory Official)	IGNATURE		11.D. DATE SIGNED 2/16/2019	
11.E. NAME: GREG SCHWAB			11.F. NAME: LAURENCE CRABTREE			
11.G. TITLE: Chief			11.H. TITLE: Forest Supervisor			
		12. G&A	REVIEW	-		
12.A. The authority and format of this modification have been re			eviewed and approved for s	signature by:		B. DATE SNED
12.A. The authority						1 1



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