

FEDERAL EMERGENCY MANAGEMENT AGENCY

ASSISTANCE AWARD/AMENDMENT

1 ASSISTANCE INSTRUMENT <input checked="" type="checkbox"/> COOPERATIVE AGREEMENT <input type="checkbox"/> GRANT		2 TYPE OF ACTION <input type="checkbox"/> AWARD <input checked="" type="checkbox"/> AMENDMENT	
3 INSTRUMENT NUMBER EMW-2003-CA-0104	4 AMENDMENT NUMBER M040	5 EFFECTIVE DATE See Block 21	6 CONTROL NUMBER NN00201Y2007T
7 RECIPIENT NAME AND ADDRESS Sacramento Fire Department Chief Julius J. Cherry 5770 Freeport Boulevard Suite 200 Sacramento CA 95822		8 ISSUING/ADMINISTRATION OFFICE Federal Emergency Management Agency Office of the Chief Procurement Officer 500 C Street, S.W., PP 5th Floor Washington DC 20472 Specialist: Sylvia A. Carroll 202-646-3503	
9 RECIPIENT PROJECT MANAGER Julius Cherry 916-808-1011		10 FEMA PROJECT OFFICER Wanda Casey, 202-646-4013	
11 ASSISTANCE ARRANGEMENT <input checked="" type="checkbox"/> COST REIMBURSEMENT <input type="checkbox"/> COST SHARING <input type="checkbox"/> FIXED PRICE <input type="checkbox"/> OTHER	12 PAYMENT METHOD <input checked="" type="checkbox"/> TREASURY CHECK REIMBURSEMENT <input type="checkbox"/> ADVANCE CHECK <input type="checkbox"/> LETTER OF CREDIT	13 PAYMENT OFFICE Federal Emergency Management Agency Office of the Chief Financial Officer Finance Services Branch 500 C Street, S.W., Patriot Plaza Washington DC 20472	
14. ASSISTANCE AMOUNT PREVIOUS AMOUNT \$3,176,815.00 AMOUNT THIS ACTION \$36,000.00 TOTAL AMOUNT \$3,212,815.20		15 ACCOUNTING & APPROPRIATION DATA See Continuation Page	

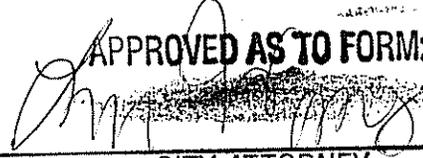
16. DESCRIPTION OF PROJECT

This amendment, M040, provides funding for White IST support to the Kansas Tornadoes.

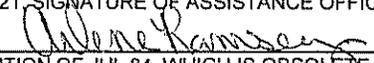
The total amount obligated under this agreement is hereby increased by \$36,000.00 from \$3,176,815.20 to \$3,212,815.20.

All other terms and conditions remain unchanged and in full force and effect. CFDA # 97.025 applies.

END OF AMENDMENT M040

APPROVED AS TO FORM:


CITY ATTORNEY

17 RECIPIENT REQUIREMENT <input checked="" type="checkbox"/> RECIPIENT IS REQUIRED TO SIGN AND RETURN THREE (3) COPIES OF THIS DOCUMENT TO THE ISSUING/ADMIN OFFICE IN BLOCK 8 <input type="checkbox"/> RECIPIENT IS NOT REQUIRED TO SIGN THIS DOCUMENT.			
18 RECIPIENT (Type name and title)		19 ASSISTANCE OFFICER (Type name and title) Arlene M. Ramsey Assistance Officer	
20 SIGNATURE OF RECIPIENT	DATE	21 SIGNATURE OF ASSISTANCE OFFICER 	DATE JUL 27 2007

CONTINUATION PAGE

A.1 PRICE/COST SCHEDULE

ITEM NO.	DESCRIPTION OF SUPPLIES/SERVICES	QTY	UNIT	UNIT PRICE	AMOUNT
1	To Reimburse CA-TF7(EMW-2003-CA-0104)	1.00		\$36,000.0000	\$36,000.00
	FUNDING/REQ NO: 1:			\$36,000.00 NN00201Y2007T	
				GRAND TOTAL ---	<u>\$36,000.00</u>
					=====

ACCOUNTING AND APPROPRIATION DATA:

ACRN APPROPRIATION	REQUISITION NUMBER	AMOUNT
1 2007-06-1699DR-9074--4103-D	NN00201Y2007T P	\$36,000.00