USDA Forest Service

OMB 0596-0217
FS-1500-19

MODIFICATION OF GRANT OR AGREEMENT

PAGE	OF PAGES
1	2

1. U.S. FOREST SERVICE GRANT/AGREEMENT NUMBER	2. RECIPIENT/COOPERATOR GRANT or AGREEMENT NUMBER, IF ANY	3. MODIFICATION NUMBER
10-FI-11050500-048		4

4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4)	5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4)
Klamath National Forest 1711 S. Main Street Yreka, CA 96097-9518	
6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county)	7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only)
Fort Jones City Fire Department P.O. Box 597 Fort Jones, CA 96032-0597	

8. PURPOSE OF MODIFICATION

CHECK ALL THAT APPLY:	This modification is issued pursuant to the modification provision in the grant/agreement referenced in item no. 1. above.
☒	CHANGE IN PERFORMANCE PERIOD: Extend Annual Operating Plan to 12/31/2015
☐	CHANGE IN FUNDING:
☒	ADMINISTRATIVE CHANGES: Add Fort Jones fax number (530) 468-2598.
☐	OTHER (Specify type of modification):

Except as provided herein, all terms and conditions of the Grant/Agreement referenced in 1, above, remain unchanged and in full force and effect.

9. ADDITIONAL SPACE FOR DESCRIPTION OF MODIFICATION (add additional pages as needed):
The Annual Operating Plan for 2015 is the same and will remain in effect through 12/31/2015; and Fort Jones fax number added.

10. ATTACHED DOCUMENTATION (Check all that apply):

☐	Revised Scope of Work
☐	Revised Financial Plan
☐	Other:

11. SIGNATURES

AUTHORIZED REPRESENTATIVE: BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF THEIR RESPECTIVE PARTIES AND AUTHORIZED TO ACT IN THEIR RESPECTIVE AREAS FOR MATTERS RELATED TO THE ABOVE-REFERENCED GRANT/AGREEMENT.

11.A. FORT JONES CITY FIRE DEPARTMENT SIGNATURE	11.B. DATE SIGNED	11.C. U.S. FOREST SERVICE SIGNATURE	11.D. DATE SIGNED
(Signature of Signatory Official)	3/23/15	(Signature of Signatory Official)	7.2.15
11.E. NAME (type or print) **CHRISTIAN SHERFY**		11.F. NAME (type or print) **PATRICIA A. GRANTHAM**	
11.G. TITLE (type or print) Chief		11.H. TITLE (type or print) Forest Supervisor	

12. G&A REVIEW

12.A. **The authority and format of this modification have been reviewed and approved for signature by:**	12.B. DATE SIGNED
Janet Boomgarden JANET BOOMGARDEN U.S. Forest Service Grants & Agreements Specialist	3/6/15

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