USDA Forest Service

OMB 0596-0217
FS-1500-19

MODIFICATION OF GRANT OR AGREEMENT

PAGE	OF PAGES
1	1

1. U.S. FOREST SERVICE GRANT/AGREEMENT NUMBER:	2. RECIPIENT/COOPERATOR GRANT or AGREEMENT NUMBER, IF ANY:	3. MODIFICATION NUMBER:
09-FI-11050950-037		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):
Northern California AQM Service Area 800 West 12th Street Alturas, CA 96101-3132	Modoc National Forest 800 West 12th Street Alturas, CA 96101-3132
6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county): Adin Fire Protection District P.O. Box 16 Adin, CA 96006-0016	7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only):

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: Extends AOP to 04/30/2014
☐	CHANGE IN FUNDING:
☒	ADMINISTRATIVE CHANGES: Updates Department Fire Chief Contact telephone number
☒	OTHER (Specify type of modification): Renewal of Annual Operating Plan

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):
Except for updating the Department Fire Chief Paul Lemke's Contact telephone number to 530-708-0847 the Annual Operating Plan for 2013 is the same and will reamin in effect through 4/30/2014.

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. ADIN FIRE PROTECTION DISTRICT SIGNATURE	11.B. DATE SIGNED	11.C. U.S. FOREST SERVICE SIGNATURE	11.D. DATE SIGNED
Paul Lemke (Signature of Signatory Official)	4/3/13	Kimberly H. Anderson (Signature of Signatory Official)	4/3/13
11.E. NAME (type or print): **PAUL LEMKE**		11.F. NAME (type or print): **KIMBERLY H. ANDERSON**	
11.G. TITLE (type or print): Fire 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 Management Specialist	3/29/13