



### MODIFICATION OF GRANT OR AGREEMENT

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1. U.S. FOREST SERVICE GRANT/AGREEMENT NUMBER: <b>11-FI-11050464-016</b>	2. RECIPIENT/COOPERATOR GRANT or AGREEMENT NUMBER, IF ANY:	3. MODIFICATION NUMBER: <b>002</b>
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4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4): <b>INYO NATIONAL FOREST 351 Pacu Lane, Ste 200, Bishop, CA 93514</b>	5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4): <b>INYO NATIONAL FOREST 351 Pacu Lane, Ste 200, Bishop, CA 93514</b>
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6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county): <b>Antelope Valley Fire Protection District 1166 Larson Lane, Coleville, CA 96107 BLM Bishop Field Office 351 Pacu Lane, Ste 100, Bishop, CA 93514</b>	7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only):
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#### 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.
<input checked="" type="checkbox"/>	CHANGE IN PERFORMANCE PERIOD: 05/13/2013-05/12/2014
<input type="checkbox"/>	CHANGE IN FUNDING:
<input type="checkbox"/>	ADMINISTRATIVE CHANGES:
<input type="checkbox"/>	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):

Annual Operating Plan for 2013 is the same and will remain in effect through May 12, 2014

#### 10. ATTACHED DOCUMENTATION (Check all that apply):

<input type="checkbox"/>	Revised Scope of Work
<input type="checkbox"/>	Revised Financial Plan
<input type="checkbox"/>	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. SIGNATURE 	11.B. DATE SIGNED <b>5/2/13</b>	11.C. U.S. FOREST SERVICE SIGNATURE 	11.D. DATE SIGNED <b>5/9/13</b>
(Signature of Signatory Official)		(Signature of Signatory Official)	
11.E. NAME (type or print): <b>MIKE CURTI</b>		11.F. NAME (type or print): <b>EDWARD E. ARMENTA</b>	
11.G. TITLE (type or print): <b>Fire Chief</b>		11.H. TITLE (type or print): <b>Forest Supervisor</b>	
11.I. BUREAU OF LAND MANAGEMENT SIGNATURE 	11.J. DATE SIGNED <b>5/7/13</b>		
(Signature of Signatory Official)			
11.K. NAME (type or print): <b>BERNADETTE LOVATO STEVEN NELSON</b>			

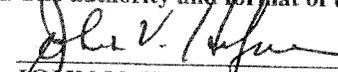


USDA Forest Service

OMB 0596-0217  
FS-1500-19

### 12. G&A REVIEW

12.A. The authority and format of this modification have been reviewed and approved for signature by:

  
\_\_\_\_\_  
JOHN V. HEFNER  
U.S. Forest Service Grants Management Specialist

12.B. DATE  
SIGNED

05/01/2013

#### Burden Statement

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