

**MODIFICATION #1 TO SUBGRANT AGREEMENT BETWEEN
THE DIVISION OF EMERGENCY MANAGEMENT AND ALACHUA COUNTY
BOARD OF COUNTY COMMISSIONERS**

This Modification is made and entered into by and between the State of Florida, Division of Emergency Management ("the Division"), and Alachua County Board of County Commissioners ("Recipient"), to modify Contract Number R0027, which began on September 1, 2019 ("the Agreement").

WHEREAS, the Division and the Recipient have entered into the Agreement, pursuant to which the Division has provided a subgrant to Recipient under the State Homeland Security Grant program of **\$101,500.00**.

WHEREAS, the Agreement will expire on March 31, 2021; and,

WHEREAS, the Division and the Recipient desire to extend the terms of the Agreement; and

WHEREAS, the Division and the Recipient desire to modify the Agreement; and,

WHEREFORE, in consideration of the mutual promises of the parties contained herein, the parties agree as follows:

1. Paragraph 8 of the Agreement is hereby amended to read as follows:

This Agreement shall begin upon execution by both parties and shall end on July 31, 2021, unless terminated earlier in accordance with the provisions of Paragraph (17) of this Agreement. Consistent with the definition of "period of performance" contained in 2 C.F.R. §200.77, the term "period of agreement" refers to the time during which the Sub-Recipient "may incur new obligations to carry out the work authorized under" this Agreement. In accordance with 2 C.F.R. §200.309, the Sub-Recipient may receive reimbursement under this Agreement only for "allowable costs incurred during the period of performance." In accordance with section 215.971(1)(d), Florida Statutes, the Sub-Recipient may expend funds authorized by this Agreement "only for allowable costs resulting from obligations incurred during" the period of agreement.

2. All provisions not in conflict with this Modification remain in full force and effect, and are to be performed at the level specified in the Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Modification as of the dates set out below.

RECIPIENT: ALACHUA COUNTY BOARD OF COUNTY COMMISSIONERS

By: _____

Name and Title: **Ken Cornell, Chair**

Date: _____

Approved as to Form

DocuSigned by:

Robert C Swain

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Alachua County
Attorney

DIVISION OF EMERGENCY MANAGEMENT

By: _____

Name and Title: **Jared Moskowitz, Director**

Date: _____