

Request for Amendment

April, 2015

Recipient:	Amendment Request Number:	Date:
Contract Number:	Rule in Effect for This Grant:	
Local Government Authorization:		Date Signed:
	(Authorized Signature)	
DEO Authorization:		Date Approved:

	Bu	Activity Accomplishments					
Activity Code	etivity Name Original		Current Budget (before this amendment) Proposed Budget		Original Contract	Current Contract (before this amendment)	Proposed Contract
1	2	3	4	5	6	7	8
\$ \$		\$					
	\$		\$ \$				
		\$	\$	\$			
	\$ \$		\$	\$			
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		\$	\$	\$			
		\$	\$	\$			
		\$	\$	\$			
	Totals	\$	\$	\$			



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			Beneficiaries									
		Tota	Total Beneficiaries			Low & Moderate Income			Very Low Income			
Activity	Activity	Original	ginal Current Proposed	Proposed	Original		Proposed		Original		Proposed	
Code	Name	#		#	#	%	#	0/0	#	%	#	%

		<u>Original</u>	<u>Proposed</u>		
20.	Total # Unduplicated Beneficiaries:				
21.	Total # Unduplicated LMI Beneficiaries:				
22.	Total # Unduplicated VLI Beneficiaries:				
23.	Total # Unduplicated LMI Households:				
24.	Does this amendment reduce any other project	funds previously	committed as leverage from local or other sources?	Yes	☐ No
	(If yes, you must complete and attach the Source	ces and Uses of	Frunds form, SC-36.)		

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