

NF
Dick Mirgon
Emergency Mgmt

FILED
NO. 95.052

'95 MAR 17 A8:46

STATE OF NEVADA
NEVADA DIVISION OF EMERGENCY MANAGEMENT
CAPITOL COMPLEX, CARSON CITY, NEVADA, 89710

BARBARA REED
CLERK

NOTICE OF GRANT AWARD

BY [Signature] DEPUTY

PROJECT NUMBER: EMA959005
SUBRECIPIENT NUMBER: 9005
FUNDING SOURCE:
CFDA NUMBER: 83503
SUBRECIPIENT NAME & ADDRESS
DOUGLAS CO EMERGENCY MGMT
P.O. BOX 218
MINDEN, NV 89423

TYPE OF ACTION:
X INITIAL _____ REVISION NUMBER
____ OTHER

AMOUNT OF THIS ACTION: \$ 29,128.00
GRANT PERIOD: 10/01/94 TO 09/30/95

MATCH AMOUNT OR % REQUIRED 50%

PROJECT NAME:
1995 EMA AWARD

PROJECT ADDRESS:
P.O. BOX 218

PROJECT MANAGER AND TELEPHONE:
RICHARD MIRGON
782-9977

FISCAL MANAGER AND TELEPHONE:
SANDIE DRAPER
782-9977

NDEM PROGRAM MANAGER:
DAVID CROCKETT

NDEM TELEPHONE
687-7378

IN ACCEPTING THESE FUNDS, IT IS UNDERSTOOD THAT:

1. EXPENDITURES ARE TO BE IN COMPLIANCE WITH THE STATE AND FEDERAL REGULATIONS WHICH ARE FURTHER EXPLAINED IN THE NDEM SUBRECIPIENT FINANCIAL MANUAL.
2. A CERTIFICATION LETTER MUST BE ON FILE WITH NDEM BEFORE ANY FUNDS ARE RELEASED.
3. THIS AWARD IS SUBJECT TO THE AVAILABILITY OF APPROPRIATE FUNDS.
4. RECIPIENT OF THESE FUNDS AGREES TO ANY ADDITIONAL REQUIREMENTS ATTACHED TO THE NDEM NOTICE OF GRANT AWARD, INCLUDING:
A) FINANCIAL AND B) PROGRAM ASSURANCES

TYPED NAME OF NDEM CHIEF: JAMES P. HAWKE

SIGNATURE: [Signature]

DATE: 1/11/95

TYPED NAME & TITLE OF SUBRECIPIENT OFFICIAL: ROBERT ALLGEIER, CHAIRMAN

SIGNATURE: [Signature]

DATE: MARCH 16, 1995

358126

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NEVADA OFFICE OF COMMUNITY SERVICES
BUDGET REPORT
01/10/95

PROJECT NUMBER	EMA959005
PROJECT NAME	1995 EMA AWARD
SUBRECIPIENT NUMBER	9005
SUBRECIPIENT NAME	DOUGLAS CO EMERGENCY MGMT
PROJECT PERIOD BEGINNING	10/01/94
PROJECT PERIOD ENDING	09/30/95
PERCENTAGE OF PROJECT COMPLETED	

	ACTUAL CURRENT MONTH EXPENSE	PROJECT ACTUAL EXPENSE TO DATE	TOTAL PROJECT BUDGET	% EXPENDED
ADMINISTRATION	0.00	0.00	0.00	
INDIRECT RATE	0.00	0.00	0.00	
PERSONNEL	0.00	0.00	26652.00	0.00
FRINGE	0.00	0.00	2476.00	0.00
PROJECT LABOR	0.00	0.00	0.00	
FRINGE	0.00	0.00	0.00	
TRAVEL	0.00	0.00	0.00	
OPERATING	0.00	0.00	0.00	
LIABILITY INSURANCE	0.00	0.00	0.00	
PROGRAM SUPP	0.00	0.00	0.00	
MATERIALS	0.00	0.00	0.00	
CONTRACTS	0.00	0.00	0.00	
EQUIPMENT	0.00	0.00	0.00	
MISCELLANEOUS	0.00	0.00	0.00	
TOTAL	0.00	0.00	29128.00	0.00
ENDING CASH	0.00			
FEDERAL FUNDS	0.00	0.00	14564.00	
MATCH	0.00	0.00	14564.00	

REQUESTED BY
DOUGLAS COUNTY
IN OFFICIAL RECORDS OF
DOUGLAS CO. NEVADA.

95 MAR 17 AM 11:12

LINDA SLATER
RECORDER

\$ 0 PAID ko DEPUTY

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SEAD

CERTIFIED COPY

The document to which this certificate is attached is a full, true and correct copy of the original on file and on record in my office.

DATE: March 17, 1995
B. KEO Clerk of the 9th Judicial District Court
of the State of Nevada, in and for the County of Douglas.

By Carol Mullock Deputy