



<b>Minnesota Department of Public Safety ("State")</b> Homeland Security and Emergency Management Division 444 Cedar Street, Suite 223 St Paul, Minnesota 55101-6233	<b>Grant Program:</b> HSEM Homeland Security Grant Program 2008  <b>Grant Agreement No.:</b> 2009-HSGP-00350 <b>Grant Amendment No.:</b> 3																
<b>Grantee:</b> City of St. Paul City Hall Annex 15 W Kellogg Boulevard St. Paul, MN 55102	<b>Grant Agreement Term:</b> <b>Effective Date:</b> 9/1/2008 <b>Expiration Date:</b> <del>2/29/2012</del> <u>8/31/2012</u>																
<b>Grant Matching Requirement:</b> <table border="0"> <tr><td>Original Agreement Amount</td><td>\$0.00</td></tr> <tr><td>Previous Amendment(s) Total</td><td>\$0.00</td></tr> <tr><td>Current Amendment Amount</td><td>\$0.00</td></tr> <tr><td>Total Agreement Amount</td><td>\$0.00</td></tr> </table>	Original Agreement Amount	\$0.00	Previous Amendment(s) Total	\$0.00	Current Amendment Amount	\$0.00	Total Agreement Amount	\$0.00	<b>Grantee Agreement Amount:</b> <table border="0"> <tr><td>Original Agreement Amount</td><td>\$1,563,780.00</td></tr> <tr><td>Previous Amendment(s) Total</td><td>\$0.00</td></tr> <tr><td>Current Amendment Amount</td><td><u>\$0.00</u></td></tr> <tr><td>Total Agreement Amount</td><td>\$1,563,780.00</td></tr> </table>	Original Agreement Amount	\$1,563,780.00	Previous Amendment(s) Total	\$0.00	Current Amendment Amount	<u>\$0.00</u>	Total Agreement Amount	\$1,563,780.00
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*In this Amendment deleted agreement terms will be struck out and added agreement terms will be underlined.*

The Original Grant Agreement and all previous amendments are incorporated into this amendment by reference.

**1. ENCUMBRANCE VERIFICATION**

*Individual certifies that funds have been encumbered as required by Minn. Stat. §§ 16A.15 and 16C.05.*

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Grant Agreement No. 2009-HSGP-00350 / 3-9450 / 43150

**3. STATE AGENCY**

By: \_\_\_\_\_  
(with delegated authority)

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**2. GRANTEE**

*The Grantee certifies that the appropriate person(s) have executed the grant agreement on behalf of the Grantee as required by applicable articles, bylaws, resolutions, or ordinances.*

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Distribution: DPS/FAS  
Grantee  
State's Authorized Representative

# MINNESOTA DEPARTMENT OF PUBLIC SAFETY



Alcohol  
and Gambling  
Enforcement

Bureau of Criminal  
Apprehension

Driver  
and Vehicle  
Services

Emergency  
Communication  
Networks

Homeland  
Security and  
Emergency  
Management

Minnesota  
State Patrol

Office of  
Communications

Office of  
Justice Programs

Office of  
Pipeline Safety

Office of  
Traffic Safety

State Fire  
Marshal

## Homeland Security and Emergency Management

444 Cedar Street Suite 223 • Saint Paul, Minnesota 55101-6223  
Phone: 651.201.7400 • Fax: 651.296.0459 • TTY: 651.282.6555  
<http://hsem.dps.mn.gov>

March 22, 2012

Rick Larkin Director  
City of St. Paul, Emergency Preparedness  
367 Grove Street, Fifth Floor  
St. Paul, MN 55101

Re: Grant # 2009-HSGP-00350

Dear Mr. Larkin:

I am pleased to announce that the City of St. Paul, Emergency Management has been granted Amendment #3 on your 2008 Urban Area Security Initiative (UASI) Grant for an extension of time. Your new expiration date is August 31, 2012.

Enclosed are three copies of the grant agreement for your signature. Please have the same individuals who signed the original grant or their successors sign each of the three copies. Please return all three copies to:

Kammy Huneke  
Homeland Security and Emergency Management  
445 Cedar Street, Suite 223  
St. Paul, Minnesota 55101

If you have any questions, please contact me by phone at 651-201-7420, or by e-mail at [kammy.huneke@state.mn.us](mailto:kammy.huneke@state.mn.us).

Sincerely,

A handwritten signature in cursive script that reads "Kammy Huneke".

Kammy Huneke  
Grants Specialist

EQUAL OPPORTUNITY EMPLOYER