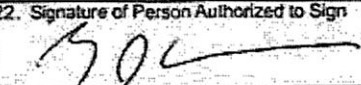


# ASSISTANCE AGREEMENT

|                                                                                                                                                       |  |                                                          |  |                                                                                                                                                |  |                                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------|--|
| 1. Award No.<br>DTPHS614CPT09                                                                                                                         |  | 2. Modification No.                                      |  | 3. Effective Date<br>09/30/2014                                                                                                                |  | 4. CFDA No.<br>20.710                                                      |  |
| 5. Awarded To<br>City of Hallock<br>Attn: Ryan Evenson<br>163 S 3rd Street<br>Hallock MN 56728-0000                                                   |  |                                                          |  | 6. Sponsoring Office<br>Program Development<br>1200 New Jersey Avenue, SE<br>E21-321<br>Washington DC 20590                                    |  | 7. Period of Performance<br>09/30/2014<br>through<br>09/29/2015            |  |
| 8. Type of Agreement<br><input checked="" type="checkbox"/> Grant<br><input type="checkbox"/> Cooperative Agreement<br><input type="checkbox"/> Other |  | 9. Authority<br>49 U.S.C. 50130                          |  | 10. Purchase Request or Funding Document No.<br>956-14-0046                                                                                    |  |                                                                            |  |
| 11. Remittance Address<br>City of Hallock<br>Attn: Ryan Evenson<br>163 S 3rd Street<br>Hallock MN 56728-0000                                          |  |                                                          |  | 12. Total Amount<br>Govt. Share: \$10,495.00<br><br>Cost Share : \$0.00<br><br>Total : \$10,495.00                                             |  | 13. Funds Obligated<br>This action: \$10,495.00<br><br>Total : \$10,495.00 |  |
| 14. Principal Investigator<br>Ryan Evenson                                                                                                            |  | 15. Program Manager<br>Sam Hall<br>Phone: (804) 556-4678 |  | 16. Administrator<br>Acquisition Services Division<br>US DOT/PHMSA/PHA-30<br>1200 New Jersey Avenue, SE<br>E22-317<br>Washington DC 20590-0001 |  |                                                                            |  |
| 17. Submit Payment Requests To<br>US DOT/PHMSA/Financial Operations,<br>AMK-316<br>P.O. Box 269039 (MMAC)<br>Oklahoma City OK 73126-9039              |  |                                                          |  | 18. Paying Office<br>US DOT/PHMSA/Financial Operations,<br>AMK-316<br>P.O. Box 269039 (MMAC)<br>Oklahoma City OK 73126-9039                    |  | 19. Submit Reports To<br>see Article X. Reports<br>of Grant Agreement      |  |
| 20. Accounting and Appropriation Data<br>5172A14DA1.2014.PSGRT04020.50D0204000.41050                                                                  |  |                                                          |  |                                                                                                                                                |  |                                                                            |  |
| 21. Research Title and/or Description of Project<br>2014 TECHNICAL ASSISTANCE GRANT FOR CITY OF HALLOCK                                               |  |                                                          |  |                                                                                                                                                |  |                                                                            |  |
| For the Recipient                                                                                                                                     |  |                                                          |  | For the United States of America                                                                                                               |  |                                                                            |  |
| 22. Signature of Person Authorized to Sign<br>                     |  |                                                          |  | 25. Signature of Grants/Agreements Officer<br>             |  |                                                                            |  |
| 23. Name and Title<br>City Clerk/Adm. h                                                                                                               |  | 24. Date Signed<br>9/18/14                               |  | 26. Name of Officer<br>WARREN OSTERBERG                                                                                                        |  | 27. Date Signed<br>9/25/14                                                 |  |

**CONTINUATION SHEET**

REFERENCE NO. OF DOCUMENT BEING CONTINUED

DTPH5614GPPT09

PAGE OF

2 | 2

NAME OF OFFEROR OR CONTRACTOR

City of Hallock

| ITEM NO.<br>(A) | SUPPLIES/SERVICES<br>(B)                                                                                                                                           | QUANTITY<br>(C) | UNIT<br>(D) | UNIT PRICE<br>(E) | AMOUNT<br>(F) |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------|-------------------|---------------|
| 0001            | Total Amount Obligated<br>Fully Funded Obligation Amount\$10,495.00<br><br>The obligated amount of award: \$10,495.00. The<br>total for this award is \$10,495.00. |                 |             |                   | 10,495.00     |