## E X CE

## **Texas Department of Public Safety**

## 2012 Sub-Recipient Award for

## City of Corpus Christi

1. General Award Information	Reference/End	cumbrance No:	· :		
Date of Award: October 2, 2012	Prepared By: Saba, Sherry		3. SAA Award Number: 12-SR 17000-01		
4. Sub-Recipient Name and Address	5. Federal Gran				
	, • • · · · · · · · · · · · · · · · · ·	Federal Grant Title: Homeland Security Grant Program (HSGP) State Homeland Security Program(SHSP)  Federal Grant Award Number: EMW-2012-SS-00018-S01  Federal Granting Agency: Department of Homeland Security FEMA Grant Programs Directorate  Date Federal Grant Awarded to TxDPS: September 6, 2012			
Mayor Joe Adame City of Corpus Christi 1201 Leopord Street Corpus Christi, TX 78401					
		<b>CFDA:</b> 97.073			
6. Award Amount and Grant Breakdowns					
			Grant Period:		
SHSP LETPA			From:	To:	1
		1	Sep 1, 2012	Jan 31, 2014	
<i>\$57,254.20</i>		(The S/	AA must receive all in	I voices by the end of grant period)	<u> </u>
ţ					<b>-</b> !.
7. Statutory Authority for Grant: The Con Security Act of 2002 (Public Law 107-296), a Act of 2007 (Public Law 110-53).	solidated Approp is amended by se	priations Act 2012, I ection 101 of the In	Division D (Public nplementing Reco	Law 112-74), and the Home mmendations of the 9/11 Co	eland ommission
8. Method of Payment: Primary method is	reimbursement.				
9. Debarment/Suspension Certification: debarred, suspended, proposed for debarmer not have active Exclusions listed at https://w	it, declared inelig	jible or voluntarily o	sub-recipient and excluded by any f	d its contractors/vendors are ederal department or agency	e not y and do
10. Agency Approvals		-			
Approving TxDPS Official:		Signature of Tx	DPS Official:		
Machelle Pharr Deputy Assistant Director Texas Homeland Security State Administrative Agency Texas Department of Public Safet			7.1	162	
11. Sub-Recipient Acceptance					
I have read, understood and agree to th Conditions.	is Sub-Recipien	t Agreement con	sisting of this A	ward and the attached Te	rms and
Print name and title of Authorized Sub-Recipient Official:		Signature of Sub-	Recipient Official:		
		·			
Enter Employer Identification Number (EIN) or Federal Tax Identification Number:		DUNS Number:		Date \$	Signed :
OUE DATE: November 15, 2012 Signed Av	vard with Terms a	and Conditions mus	t be returned to S	AA_SRA@dps.texas.gov on or	before the