

1. DATE ISSUED MM/DD/YYYY 02/14/2020
 1a. SUPERSEDES AWARD NOTICE dated
 except that any additions or restrictions previously imposed
 remain in effect unless specifically rescinded

THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

2. CFDA NO. 14.896 - Family Self-Sufficiency Program

451 7th Street S.W.,
 Washington, DC, DC 20410

3. ASSISTANCE TYPE Project Grant

4. GRANT NO. FSS20AZ3239-01-00 Formerly
 5. TYPE OF AWARD Other

NOTICE OF AWARD

4a. FAIN FSS20AZ3239
 5a. ACTION TYPE New

6. PROJECT PERIOD MM/DD/YYYY
 From 01/01/2020 Through 12/31/2020

7. BUDGET PERIOD MM/DD/YYYY
 From 01/01/2020 Through 12/31/2020

8. TITLE OF PROJECT (OR PROGRAM)
 Cochise County Family Self-Sufficiency Program

9a. GRANTEE NAME AND ADDRESS
 COCHISE, COUNTY OF
 1415 Melody Ln Bldg A
 Bisbee, AZ 85603-3039

9b. GRANTEE PROJECT DIRECTOR
 Mrs. Anita Baca
 1415 Melody Ln, Bldg A
 Bisbee, AZ 85603-0000
 Phone: 520-432-8883

10a. GRANTEE AUTHORIZING OFFICIAL
 Mrs. Anita Baca
 1415 Melody Lane, Bldg A
 Bisbee, AZ 85603-0000
 Phone: 520-432-8883

10b. FEDERAL PROJECT OFFICER
 Mr. Jogchum Poodt
 451 7th St SW
 Washington, DC 20410-0001
 Phone: (202) 402-2953

ALL AMOUNTS ARE SHOWN IN USD

11. AWARD COMPUTATION FOR GRANT	
a. Amount of HUD Financial Assistance	58,420.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	0.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	58,420.00
12. Total Federal Funds Awarded to Date for Project Period	58,420.00

14. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, HUD ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

- a. The grant program legislation cited in remarks or attachment below.
- b. The grant program regulations cited in remarks or attachment below.
- c. This award notice including terms and conditions, if any, noted below under REMARKS.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of this award by the grantee acknowledges acceptance of these terms and conditions.

13. RECOMMENDED FUTURE SUPPORT
 (Subject to the availability of funds and satisfactory progress of the project):

YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a.		d.	
b.		e.	
c.		f.	

REMARKS (Other Terms and Conditions Attached - Yes No)

GRANTS MANAGEMENT OFFICER:
 Mr. Robert Mulderig
 451 7th Street S W
 Washington, DC 20410-0001
 Phone: 2024024708

ISSUE DATE:
 02/14/2020

GRANTEE ACCEPTANCE:
 Mrs. Anita Baca

ACCEPTANCE DATE:
 03/04/2020

15. OBJ CLASS 4120	16a. VENDOR CODE 421541685	16b. EIN 421541685	17. DUNS 135910581	18. CONG. DIST. 02
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
19. a. 0-19SFSC01_FY20	b. FSS20AZ3239	c. FSS	d. \$58,420.00	e. 19/20 0350
20. a.	b.	c.	d.	e.
21. a.	b.	c.	d.	e.