

**ARIZONA DEPARTMENT OF AGRICULTURE
SPECIALTY CROP BLOCK GRANT PROGRAM
GRANT AWARD AGREEMENT
AMENDMENT**



Arizona Department of Agriculture
Specialty Crop Block Grant Program
1110 W. Washington St., Suite 450
Phoenix, AZ 85007

SCBGP Grant No. _____

AMENDMENT NO. _____

Grantee Name: _____

Project Title:

Identify the applicable section(s) of the contract that needs to be amended. Describe, in detail, the proposed changes to the contract and provide an explanation for the need for the requested amendment. (Additional pages may be attached if needed).

| GRANTEE | DEPARTMENT |
|---|---|
| | |
| Signature of Authorized Individual Date | Signature of Authorized Individual Date |
| | Paul E. Brierley |
| Typed Name | Typed Name |
| | Director |
| Typed Title | Typed Title |