

Notice of Grant Award Adjustment

Georgia Workforce Innovation and Opportunity Act

RECIPIENT: City of Savannah			
LOCAL WORKFORCE AREA: 20	REGION: 12		
GRANT NO: 11-17-17-12-020			
FAIN: AA307431755A13			
GRANT PERIOD:			
FROM: 7/1/2017	THRU:	6/30/2019	
GRANT YEAR: PY 2017			
PROGAM TITLE/TYPE:	Adult	CFDA NO:	17.258

Nature of Adjustment: Reallocation of additional Adult Funds.

	Prior Grant Award		Change	Amended Grant Award
Administration	\$ 18,618	ration	\$ 1,077	\$ 19,695
Program	\$ 167,565		\$ 9,692	\$ 177,257
Total	\$ 186,183		\$ 10,769	\$ 196,952

The above Grant Award Adjustment is subject to all legal provisions and duties outlined in the original Grant Award.

Joe Dan Banker, Deputy Commissioner

Date

TCSG, Office of Workforce Development



I, ______ acting under my authority to contract on behalf of the recipient of the above described grant on the terms and conditions stated above or incorporated by reference therein, do hereby accept this Grant Award.

Authorized Signature

Date of Acceptance

Chairperson

Title