

GRANT AWARD DOCUMENT

<p>1. GRANTOR AGENCY: USDA - Food and Nutrition Service</p>	<p>2. APPROPRIATION: See below under Appropriation column.</p>																					
<p>3. NEVADA DEPT OF EDUC-FISCA Child Nutrition and School Health 1749 Moody Street, Suite 40 Attn: Donnell Barton CARSON CITY NV 89706 VENDOR NO: S3291501</p>	<p>4. TITLE OF GRANT: Child Nutrition Recovery Act</p>																					
<p>5. PROGRAM YEAR: 2009 GRANT AWARD REF NO: 7NV340NV3 Amendment: 0</p>	<p>6. ESTIMATED ANNUAL GRANT AWARD:</p>																					
<p>7. GRANT PERIOD : FROM 10/01/2008 TO 09/30/2009</p>																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">APPROPRIATION</th> <th style="text-align: left;">ACCOUNT CODE</th> <th style="text-align: left;">PCA TITLE</th> <th style="text-align: left;">CFDA NO</th> <th style="text-align: left;">PREVIOUS LEVEL</th> <th style="text-align: left;">INCREASE/DECREASE</th> <th style="text-align: left;">CURRENT LEVEL</th> </tr> </thead> <tbody> <tr> <td>12 9/0 3540</td> <td>2009IA200347</td> <td>CNP RA - NSLP EQUIPMENT (O)</td> <td>10.579</td> <td>\$.00</td> <td>\$679,103.00</td> <td>\$679,103.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL:</td> <td>\$.00</td> <td>\$679,103.00</td> <td>\$679,103.00</td> </tr> </tbody> </table>		APPROPRIATION	ACCOUNT CODE	PCA TITLE	CFDA NO	PREVIOUS LEVEL	INCREASE/DECREASE	CURRENT LEVEL	12 9/0 3540	2009IA200347	CNP RA - NSLP EQUIPMENT (O)	10.579	\$.00	\$679,103.00	\$679,103.00	TOTAL:				\$.00	\$679,103.00	\$679,103.00
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<p>9. SPECIAL INSTRUCTIONS/COMMENTS</p> <p>Please note that the Financial Official (FO) assigned by the above grantee organization is responsible for maintaining valid banking information for this grant. This includes certifying that correct routing and transit numbers (ABA/RTN) and bank account numbers have been entered into the ASAP.gov payment system. The Food and Nutrition Service and the United States Treasury are not responsible for a misdirected payment in the event that the FO entered incorrect ABA/RTN or bank account number information.</p> <p>CNP - NSLP EQUIPMENT - ARRA</p>																						
<p>10. AUTHORIZATION</p> <p>ALLOWANCE HOLDER (DESIGNEE)</p> <p>FNS Western Regional Office Food and Nutrition Service 90 Seventh Street Suite 10-100 San Francisco CA 94103 Telephone: (415) 705-1330</p>	<p>SIGNATURE: Electronically signed by - Emerick Konno</p> <hr/> <p>Date : 3/23/2009</p> <p style="text-align: right;">TELEPHONE NO: (415) 705-1332</p>																					