

1. Assistance Instrument <input checked="" type="checkbox"/> Cooperative Agreement <input type="checkbox"/> Grant		2. Type of Action Award <input checked="" type="checkbox"/> Amendment <input type="checkbox"/>	
3. Instrument Number FF206K206002	4. Amendment Number	5. Effective Date of this Action	6. Control Number EIN #75-6000528
7. Name and Address of Recipient Fort Worth Human Relations Commission Hazel Harvey Peace Center of Neighborhoods 818 Missouri Avenue Fort Worth, TX 76104 DUNS #824614754		8. HUD Administering Office Region VI FHEO 801 Cherry St, Unit #45, Suite 2500 Fort Worth, TX 76102	
Angela Rush, Administrator/Director		8a. Name of Administrator Christina Lewis, Acting RD/GAO	8b. Telephone Number 713-718-3189
11. Assistance Arrangement <input type="checkbox"/> Cost Reimbursement <input type="checkbox"/> Cost Sharing <input checked="" type="checkbox"/> Fixed Price		9. HUD Government Technical Representative Bonita Howard, 817-978-5890	
12. Payment Method <input type="checkbox"/> Treasury Check Reimbursement <input type="checkbox"/> Advance Check <input checked="" type="checkbox"/> Automated Clearinghouse		13. HUD Payment Office Fort Worth Field Accounting P.O. Box 2905 Fort Worth, TX 76113-2905	
14. Assistance Amount		15. HUD Accounting and Appropriation Data	
Previous HUD Amount	\$ 00.00	15a. Appropriation Number 8620/210144 (1, 20)	15b. Reservation number FHEO-06-20-01
HUD Amount this action	\$ 17,500.00	Amount Previously Obligated \$ 00.00	
Total HUD Amount	\$ 17,500.00	Obligation by this action \$ 17,500.00	
Recipient Amount	\$ 00.00	Total Obligation \$ 17,500.00	
Total Instrument Amount	\$ 17,500.00		


16. Description:

This instrument authorizes the following funds to be obligated to the Agency. Funds granted by HUD for FWHRC to complete a FHAP partnership project.

This agreement consists of the following attachments:

1. FY20 Partnership Award Guidance
2. Statement of Work
3. Payment Schedule (if applicable)

Performance Period: April 3, 2020 – April 3, 2023

17. <input checked="" type="checkbox"/> Recipient is required to sign and return three (3) copies of this document to the HUD Administering Office		18. <input type="checkbox"/> Recipient is not required to sign this document.	
19. Recipient (By Name) Fernando Costa		20. HUD (By Name) Christina Lewis	
Signature & Title  Assistant City Manager	Date (mm/dd/yyyy) 04/06/2020	Signature & Title Acting Regional Director/GAO	Date (mm/dd/yyyy)