

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**STATE-FUNDED GRANT  
SUPPLEMENTAL AGREEMENT**

525-010-60  
PROGRAM MANAGEMENT  
12/18  
Page 1 of 1

SUPPLEMENTAL NO.

5

CONTRACT NO.

G1703

FPN

438170-1-54-01

Recipient: Levy County

This Supplemental Agreement ("Supplemental"), dated \_\_\_\_\_ arises from the desire to supplement the State-Funded Grant Agreement ("Agreement") entered into and executed on 03/26/2019 as identified above. All provisions in the Agreement and supplements, if any, remain in effect except as expressly modified by this Supplemental.

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The parties agree that the Agreement is to be amended and supplemented as follows:

Additional funding in the amount of \$1,000,000.00. Exhibit B attached

Reason for this Supplemental and supporting engineering and/or cost analysis:

Additional funding to complete construction based on the current Engineer's Estimate received 05/02/2024.

IN WITNESS WHEREOF, the parties have caused these presents to be executed the day and year first above written.

RECIPIENT:

STATE OF FLORIDA  
DEPARTMENT OF TRANSPORTATION

By: \_\_\_\_\_

Name: Desiree Mills

Title: Chair

By: \_\_\_\_\_

Name: Greg Evans

Title: District Two Secretary

Legal Review:

\_\_\_\_\_

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**STATE-FUNDED GRANT AGREEMENT**

**EXHIBIT B**  
**SCHEDULE OF FINANCIAL ASSISTANCE**

PHASE OF WORK by Fiscal Year:		MAXIMUM PARTICIPATION			Indicate source of Local funds
		(1) TOTAL PROJECT FUNDS	(2) LOCAL FUNDS	(3) STATE FUNDS	
<b>RECIPIENT NAME &amp; BILLING ADDRESS:</b> Levy County 355 S. Court Street Bronson, FL 32621		<b>FINANCIAL PROJECT NUMBER:</b> 438170-1-54-01			
Design- Phase 34	Maximum Department Participation (Insert Program Name)	\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
FY:	Maximum Department Participation (Insert Program Name)	\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
Total Design Cost		\$ 0.00 %	\$ 0.00 %	\$ 0.00 %	
<b>Right-of-Way- Phase 44</b>		\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
FY:	Maximum Department Participation (Insert Program Name)	\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
Total Right-of-Way Cost		\$ 0.00 %	\$ 0.00 %	\$ 0.00 %	
<b>Construction- Phase 54</b>		\$3,500,000.00	\$	\$3,500,000.00	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
FY: 2019	Maximum Department Participation (SCOP)	\$1,000,000.00	\$	\$1,000,000.00	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
FY: 2024	Maximum Department Participation (SCOP)	\$4,500,000.00 %	\$ 0.00 %	\$4,500,000.00 %	
Total Construction Cost		\$ 0.00 %	\$ 0.00 %	\$ 0.00 %	
<b>Construction Engineering and Inspection - Phase 64</b>		\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
FY:	Maximum Department Participation (Insert Program Name)	\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
Total Construction Engineering and Inspection Cost		\$ 0.00 %	\$ 0.00 %	\$ 0.00 %	
(Phase : )	Maximum Department Participation (Insert Program Name)	\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
FY:	Maximum Department Participation (Insert Program Name)	\$	\$	\$	<input type="checkbox"/> In-Kind <input type="checkbox"/> Cash
Total Cost		\$ 0.00 %	\$ 0.00 %	\$ 0.00 %	
<b>TOTAL COST OF THE PROJECT</b>		\$4,500,000.00	\$ 0.00	\$4,500,000.00	

**COST ANALYSIS CERTIFICATION AS REQUIRED BY SECTION 216.3475, FLORIDA STATUTES:**  
 I certify that the cost for each line item budget category has been evaluated and determined to be allowable, reasonable, and necessary as required by Section 216.3475, F.S. Documentation is on file evidencing the methodology used and the conclusions reached.

Cassandra Lamey, FCCM, CPM  
 District Grant Manager Name

Signature \_\_\_\_\_ Date \_\_\_\_\_