

DEP Contract Review Form																																																							
DEP Contract No.: SP639		Original Contract:		Amendment No.:		Funding Increment Increase No.:		1																																															
Prog Reference:		Change Order No.:																																																					
<table border="1"> <tr> <td>Type:</td> <td>Services</td> <td>X</td> <td>Grant</td> <td></td> <td>Commodities</td> <td></td> <td>Concession</td> <td></td> <td>Other</td> <td></td> </tr> </table>										Type:	Services	X	Grant		Commodities		Concession		Other																																				
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DMS Class/Group:		973-360		Procurement Method:		Single Source #- DEP 04/05 SSA004																																																	
Are Federal Funds Supporting this Contract?		No		If yes, specify federal grant and CFDA No. below.																																																			
If the answer to the above was "No", are the State funds supporting this Contract being used as match to a federal grant?				If yes, specify the federal grant and CFDA below.																																																			
Federal Grant:				CFDA:																																																			
Are equipment purchases authorized under this Contract?		No		Will DEP retain ownership?																																																			
Are land purchases authorized under this Contract?		No		Will DEP/BOT retain ownership?																																																			
Minority Business Utilization Information for the Contractor:		Certified Minority Business?		No		Category:																																																	
		Registered Minority Business?		No		Category:																																																	
Contract Period:		Begin Date:		Execution		End Date:		JUNE 30, 2006																																															
Subject/ Brief Description of Contract:		RESEARCH ON AQUATIC CYCLING OF MERCURY IN THE EVERGLADES																																																					
<table border="1"> <tr> <td colspan="4">Funding Information:</td> <td colspan="6">Specify County where work is being performed:</td> </tr> <tr> <td>Ceiling Amount:</td> <td>\$274,974.74</td> <td>Current Funding Amt:</td> <td>\$274,974.74 (\$126,123.90 increase)</td> <td colspan="6">Journal Transfer Information (29 digit account code, if applicable):</td> </tr> <tr> <td>Org Code</td> <td>EO</td> <td>Fund/FID</td> <td>Category</td> <td>YR</td> <td>Obj Code</td> <td>CSFA No.</td> <td>Rec Type</td> <td>Active Code</td> <td>Grant No.</td> <td>Module</td> <td>Project No.</td> <td>Amount</td> </tr> <tr> <td>3725-0201-002</td> <td>L2</td> <td>050001</td> <td>030000</td> <td>05/06</td> <td>132600</td> <td>N/A</td> <td></td> <td>3200</td> <td></td> <td></td> <td>8567</td> <td>\$126,123.90</td> </tr> </table>										Funding Information:				Specify County where work is being performed:						Ceiling Amount:	\$274,974.74	Current Funding Amt:	\$274,974.74 (\$126,123.90 increase)	Journal Transfer Information (29 digit account code, if applicable):						Org Code	EO	Fund/FID	Category	YR	Obj Code	CSFA No.	Rec Type	Active Code	Grant No.	Module	Project No.	Amount	3725-0201-002	L2	050001	030000	05/06	132600	N/A		3200			8567	\$126,123.90
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Contract Management Information:		Division/District:		Resource Assessment & Management		Bureau/Office:		MERCURY AND APPLIED SCIENCES																																															
		Contract/Project Manager:		DON AXELRAD		Telephone No. of Manager:		(950) 245-3007 MS#: 200																																															
Contract Review		Approved By - Signature		Date Approved		Identify Delegation of Authority for Person Executing Contract:		DEP 125																																															
Contract Manager:		<i>[Signature]</i>		12/17/05		Reviewer Comments:																																																	
Budget Representative:		<i>[Signature]</i>		10/19/05		Vendor Relationship - checklist in file.																																																	
Bureau Chief:		<i>[Signature]</i>		11-9-06		MFMP Registered																																																	
Div/District Director:		<i>[Signature]</i>		11/7/05		MFMP Fee Exempt																																																	
Quality Assurance:		<i>[Signature]</i>																																																					
Contracts Administrator:		<i>[Signature]</i>																																																					
General Counsel:		<i>[Signature]</i>																																																					
Division/District IRM:		N/A		N/A																																																			
Department CIO:		N/A		N/A																																																			

*Review/approval by the Office of General Counsel not required for state funded activities which utilize DEP 55-205 and are not in excess of Purchasing Category Three.



Department of Environmental Protection

Jeb Bush
Governor

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000

Colleen M. Castille
Secretary

CERTIFIED MAIL, RETURN RECEIPT REQUESTED

November 9, 2005

Meiva Caswell
Smithsonian Institution
750 9th Street NW, Suite 9200
Washington, D.C. 20560-0903

Subject: DEP Contract No. SP639
Funding Increment Letter No. 1

Dear Ms. Caswell:

Due to the need for funding to continue the research on aquatic cycling of mercury in the Everglades, additional funds are being provided for DEP Contract No. SP639. Pursuant to paragraph no. 5.A., which provides for additional increments of funding on an "as needed" basis, please be advised that the funding increment amount of the Contract is hereby increased from \$148,850.84 to \$274,974.74 (an increase of \$126,123.90).

All other terms and conditions shall remain unchanged.

Sincerely,

Edwin J. Conklin, Director
Division of Resource Assessment and Management

EJC/swk

cc: Donald Axelrad, Mercury & Applied Science (MS#6540)
Contracts Disbursements Section (MS#78) (2 copies)
Gwenn Godfrey, Bureau of General Services (MS#93)

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Restricted Delivery (Endorsement Required)		
Total Postage & Fees		
Sent To Melva Caswell Smithsonian Institution 750 9 th Street NW, Suite 9200 Washington, D.C. 20560-0903		
Street, Apt. No., or PO Box No.		
City, State, ZIP+4		

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Melva Caswell
 Smithsonian Institution
 750 9th Street NW, Suite 9200
 Washington, D.C. 20560-0903

SPU39 FILE#1

2. Article Number

(Transfer from service label)

7004 2510 0006 2439 2858

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes