

Appendix A – Exhibit IIIa

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|--|--|------------|---------------------------------------|--------------------------------------|---|---|------------|----------------------------------|---------|---|---------|
| <p>U.S. DEPARTMENT OF LABOR Occupational Safety and Health Administration</p> <p>COOPERATIVE AGREEMENT</p> <p>OSHA 21(d) CONSULTATION PROGRAM</p> | <p style="text-align: right;">(1) Page 1 of 1</p> <p>Region: _____</p> <p>State: _____</p> <p>Grantee: _____</p> <p>Grant Number: <u>E9F5-</u>_____</p> <p>Starting Date: October 1, 2004 Ending Date: September 30, 2005</p> | | | | | | | | | | |
| <p>(2) Recipient</p> <p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>Recipient Liaison Representative</p> <p>_____</p> <p>Area Code and Telephone Number</p> | <p>(3) U.S. Department of Labor</p> <p>_____</p> <p>OSHA Liaison Representative</p> <p>_____</p> <p>Area Code and Telephone Number</p> | | | | | | | | | | |
| <p>(4) Authorized under P.L. 105-197, under Section 21(d)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 80%;"></td> <td style="text-align: right; vertical-align: bottom;">Percent Total Funds (Nearest 0.1%)</td> </tr> <tr> <td>1. Federal Base Award Amount:</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>2. 100% Federal Funds for Travel and Training: (Please include in line 1)</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>3. Total Recipient Share:</td> <td style="text-align: right;">_____ %</td> </tr> <tr> <td>4. Recipient 100% Funding: (Please include in line 3)</td> <td style="text-align: right;">_____ %</td> </tr> </table> <div style="background-color: #f0f0f0; padding: 5px; margin-top: 10px;"> <p>Terms and Conditions of the Cooperative Agreement This COOPERATIVE AGREEMENT consists of the entire application, including all attachments, exhibits, enclosures, etc.</p> </div> | | | Percent Total Funds (Nearest 0.1%) | 1. Federal Base Award Amount: | _____ % | 2. 100% Federal Funds for Travel and Training: (Please include in line 1) | _____ % | 3. Total Recipient Share: | _____ % | 4. Recipient 100% Funding: (Please include in line 3) | _____ % |
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| 4. Recipient 100% Funding: (Please include in line 3) | _____ % | | | | | | | | | | |
| <p>(5) Recipient Approval</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Signature _____</td> <td style="width: 50%;">Date _____</td> </tr> <tr> <td colspan="2">Type Name and Title _____</td> </tr> </table> | Signature _____ | Date _____ | Type Name and Title _____ | | <p>(6) Federal Approval</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Signature _____</td> <td style="width: 50%;">Date _____</td> </tr> <tr> <td colspan="2">Type Name and Title _____</td> </tr> </table> | Signature _____ | Date _____ | Type Name and Title _____ | | | |
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