

EXHIBIT 4-D SAMPLE- PROGRAM SUPPLEMENT AGREEMENT

PROGRAM SUPPLEMENT NO. _____
To
ADMINISTERING AGENCY-STATE AGREEMENT
FOR FEDERAL-AID PROJECTS No _____

Date: _____
Location: _____
Project Number: _____
EA Number: _____
Locode: _____

This Program Supplement hereby adopts and incorporates the _____-State Agreement for Federal Aid which was entered into between the _____ and the State on _____ and is subject to all the terms and conditions thereof. This Program Supplement is executed in accordance with Article I of the aforementioned Master Agreement under authority of Resolution No. _____ approved by the _____ on _____.

The _____ further stipulates that as a condition to the payment by the State of any funds derived from sources noted below obligated to this PROJECT, the _____ accepts and will comply with the special covenants or remarks set forth on the following pages.

PROJECT LOCATION:

TYPE OF WORK: _____ LENGTH: _____

Estimated Cost	Federal Funds	Matching Funds	
		LOCAL	OTHER

By: _____
Title: _____
Date: _____
Attest: _____
Attest: _____

STATE OF CALIFORNIA
Department of Transportation
By _____
Chief, Office of Project Implementation
Division of Local Assistance
Date: _____

I hereby certify upon my personal knowledge that budgeted funds are available for this encumbrance:

Accounting Officer _____ Date _____

Chapter	Statutes	Item	Year	Program	BC	Category	Fund Source	Amount

