

REQUIRED DOCUMENT CHECKLIST

October 1, 2019 – September 30, 2022

Check the box in the “Included” column for each document that is included with your Contract Amendment package. Check the box in the “N/A” column if the document is not applicable.

Documents which do not have a box in the “N/A” column are required to be submitted with your Contract Amendment package.

Attach #	Attachment/Document Title	Included	N/A	State Use Only Rec'd By (Initials)
1	Required Documents Checklist	<input checked="" type="checkbox"/>		
2	Certification of Contract Amendment Package	<input checked="" type="checkbox"/>		
3	Agency Information <i>(applicable if information has changed)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Amendment Budget Plan	<input checked="" type="checkbox"/>		
5	Justification of Staffing Levels <i>(applicable if changing staffing)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	Certification of Indirect Cost Rate <i>(applicable if changing ICR percentage)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7	Justification of Fringe Benefit Rate of 50% or More <i>(applicable if changing FBR to 50% or more for the 1st time)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8	Justification of Bilingual Pay <i>(applicable if adding bilingual pay to current or new staff)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
9	Justification of Additional Pay <i>(applicable if adding additional pay to current or new staff)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
10	Request for Authorization to Subcontract <i>(applicable if amending current subcontracts or adding new)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Government Agency Taxpayer ID Form (Local Gov't) <u>or</u> Payee Data Record (Non-Profit) <i>(applicable every 2 years or when information has changed)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	Certificate of Insurance <i>(applicable if previous copy expired)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

CERTIFICATION OF CONTRACT AMENDMENT PACKAGE

October 1, 2019 – September 30, 2022

I, Curt Hagman, as the person who can legally bind the agency and certify the Contract Amendment package, hereby affirm the following:

- The statements contained in the Contract Amendment package, and all the supporting documents, are true and accurate to the best of my knowledge;
- The WIC local agency will comply with all applicable fiscal, administrative and operational requirements as outlined in Federal and State regulations, statutes, policies and procedures, and other communications from the California Department of Public Health, Women, Infants, and Children Division (CDPH/WIC Division);
- The Contract Amendment package and executed contract, along with all the supporting documentation submitted to the CDPH/WIC Division are public documents, open to public inspections, and any revisions must be made in writing to the CDPH/WIC Division;
- The WIC local agency will spend at least the minimum required amount of allocated funds on nutrition education activities, as described in Exhibit A, Scope of Work, Provision 7.A.14;
- The WIC local agency will spend at least the minimum required amount of allocated funds on breastfeeding promotion and support-related activities, as described in Exhibit A, Scope of Work, Provision 7.A.15;
- The WIC local agency will maintain the required current certificate of insurance, as described in Exhibit E, Provision 2 of the contract;
- If the WIC local agency is a Non-Profit organization, the Non-Profit status is current.

I certify that I have the authority to request a Contract Amendment for the following agency:

County of San Bernardino

Legal Name of Local Agency

AGENCY INFORMATION

October 1, 2019 – September 30, 2022

A	Agency's Legal Name	(Must be legal entity name; do not abbreviate) County of San Bernardino		
B	Type of Organization	<input checked="" type="checkbox"/> Local Government <input type="checkbox"/> Private Non-Profit	9 Digit Data Universal Numbering System (DUNS) #: 106376861 (must be 9 digits)	Catalog of Federal Domestic Assistance (CFDA) #: 10.557 Federal Employers' ID #:95-6002748
C	Parent Agency's Physical Street Address	Physical Street Address 351 North Mountain View Avenue <hr/> City, State, and Zip Code San Bernardino, CA 92415-0010		
D	Parent Agency's Mailing Address	Mailing Address <i>(if different than street address)</i> <hr/> City, State, and Zip Code		
E	Parent Agency's Shipping Address	Shipping Address <i>(if different than mailing address)</i> <hr/> City, State, and Zip Code		
F	Mailing Address for Executed Contract	Mailing Address <i>(address where executed contract should be sent)</i> 351 North Mountain View Avenue <hr/> City, State, and Zip Code San Bernardino, CA 92415-0010		
G	Remittance Mailing Address	Mailing Address <i>(address where payments should be sent)</i> 351 North Mountain View Avenue <hr/> City, State, and Zip Code San Bernardino, CA 92415-0010		
H	Certification of Package	Authorized Representative's Name <i>(Person who can legally bind the agency and certify the package)</i> Curt Hagman <hr/> Title and Credentials Chairman, Board of Supervisors <hr/> Physical Street Address 385 N. Arrowhead Avenue, Fifth Floor <hr/> City, State, and Zip Code San Bernardino, CA 92415		

AGENCY INFORMATION
October 1, 2019 – September 30, 2022

I	Contract Signature	Authorized Signatory's Name <i>(Person who can legally bind the agency and sign the contract)</i>	
		Curt Hagman	
		Title and Credentials	
		Chairman, Board of Supervisors	
		Physical Street Address	
		385 N. Arrowhead Avenue, Fifth Floor	
		City, State, and Zip Code	
		San Bernardino, CA 92415	
J	Agency Director (CEO or Highest Public Health Director/Officer)	Name (type or print)	
		Trudy Raymundo	
		Title and Credentials	
		Director of Public Health	
		Physical Street Address	
		351 North Mountain View Avenue	
		City, State, and Zip Code	
		San Bernardino, CA 92415-0010	
Mailing Address (if different)		Telephone #:	
		(909) 387-9146	
Email Address		Fax #:	
Trudy.Raymundo@dph.sbcounty.gov		(909) 387-6228	
K	WIC Director	Name (type or print)	
		Heather Wellons-Blum, RD	
		Title and Credentials	
		Program Manager, Registered Dietitian	
		Physical Street Address	
		1505 S. D Street, Suite 203	
		City, State, and Zip Code	
		San Bernardino, CA 92408	
Mailing Address (if different)		Telephone #:	
		(909) 388-5663	
Email Address		Fax #:	
hblum-wellons@dph.sbcounty.gov		(909) 888-8523	

AGENCY INFORMATION

October 1, 2019 – September 30, 2022

L	Breastfeeding Coordinator	Name (type or print) Kanisha Neal, RD	
		Title and Credentials Breastfeeding Coordinator/Regional Breastfeeding Liasion (interim)/Registered Dietitian	
		Physical Street Address 1505 S. D. Street, Suite 203	
		City, State, and Zip Code San Bernardino, CA 92408	
		Mailing Address (if different)	Telephone #: (909) 388-5668
		Email Address Kanisha.Neal@dph.sbcounty.gov	Fax #: (909) 381-0218
		M	Nutrition Education Coordinator
Title and Credentials Nutrition Education Coordinator/Registered Dietitian			
Physical Street Address 1505 S. D. Street, Suite 203			
City, State, and Zip Code San Bernardino, CA 92408			
Mailing Address (if different)	Telephone #: (909) 388-5687		
Email Address Angela.Bedney@dph.sbcounty.gov	Fax #: (909) 381-0218		

AGENCY INFORMATION

October 1, 2019 – September 30, 2022

N	SERVICES PROVIDED
	<p>Check the appropriate box describing the relative availability of health and administrative services to be made available at your WIC local agency to all WIC participants:</p> <p><input type="checkbox"/> Public or private nonprofit health agency that will provide ongoing, routine pediatric and obstetric care and administrative services.</p> <p><input type="checkbox"/> Public or private nonprofit health or human service agency that will enter into a written agreement with another agency for either ongoing, routine pediatric and obstetric care or administrative services.</p> <p><input type="checkbox"/> Public or private nonprofit health agency that will enter into a written agreement with private physicians, licensed by the State, in order to provide ongoing, routine pediatric and obstetric care to a specific category of participants (women, infants or children).</p> <p><input type="checkbox"/> Public or private nonprofit human service agency that will enter into a written agreement with private physicians, licensed by the State, to provide ongoing, routine pediatric and obstetric care.</p> <p><input checked="" type="checkbox"/> Public or private nonprofit health or human service agency that will provide ongoing, routine pediatric and obstetric care through referral to a health provider.</p> <p><i>Authority: 7 CFR 246.5 (d)(1)</i></p>

AGENCY INFORMATION

October 1, 2019 – September 30, 2022

O LIST OF THE FIVE HIGHEST COMPENSATED OFFICERS

Report the Name, Title and Total Annual Compensation of the five (5) most highly compensated officers of the proposed parent agency if one or more of the following conditions apply:

1. The parent agency in the preceding fiscal year received 80 percent or more of its annual gross revenues in Federal awards.
2. The parent agency received \$25 million or more in annual gross revenue in its preceding fiscal year, from (a) Federal procurement contracts and subcontracts, and (b) Federal grants, subgrants, and cooperative agreements; and the amount so received amounted to 80 percent or more of its annual gross revenues.
3. The public does not have access to information about the grantee's executive compensation through periodic reports filed with the Securities and Exchange Commission under the Securities Exchange Act of 1934 or with the Internal Revenue Service under the Internal Revenue Code of 1986.

Check if not applicable to your organization

Authority: 2 CFR Part 170, Appendix A, Section 1.b.

Name	Title	Total Annual Compensation
		\$
		\$
		\$
		\$
		\$

**Exhibit B, Attachment I
Budget Detail Worksheet
October 1, 2019 - September 30, 2022**

								Year 1 10/1/2019 - 9/30/2020					
Personnel		Exhibit A SOW 7.A.	Exhibit A Attach I	Current Base Annual Salary Minimum	Amended Current Base Annual Salary	Current Base Annual Salary Maximum	Current Base Annual Salary Maximum	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount
WIC Position Title	Official Classification Title												
Accountant	Accountant I/II/III	3,8,13,14,15		37,648	38,584	78,332	80,288	0.50		0.50	25,709		25,709
Administrative Supervisor ②	Administrative Supervisor I	18		62,774	64,334	86,465	88,629	0.70	0.00	0.70	59,984	3,559	63,543
Information Technology Support	Automated Systems Analyst I/II/ Tech	8,18,20,21		53,019	54,350	72,800	88,629	0.90	0.00	0.90	63,196	(4,730)	58,466
Fiscal Specialist	Fiscal Specialist	8,16,17,18		33,134	34,986	46,883	48,048	1.00		1.00	51,276		51,276
Health Education Assistant/Local Vendor Liaison	Health Education Assistant	1, 5-9	1-5	41,475	42,515	57,075	58,510	2.00		2.00	110,331		110,331
Local Vendor Liaison/Outreach Coordinator	Health Education Specialist I	1,6,7,8	5,6	44,658	45,781	61,381	62,920	1.00		1.00	51,963		51,963
WIC Nutrition Assistant (WNA)	Health Services Assistant I	1,8,9	1-6	28,122	28,829	38,563	39,520	73.00	0.00	73.00	2,881,808	(215,984)	2,665,824
Site Lead	Health Services Assistant II	1,8,9	1-5	29,931	30,680	41,246	42,286	8.00		8.00	361,109		361,109
Nutritionist	Nutritionist	1, 5-9	1-5	49,192	49,192	67,600	67,600	11.00		11.00	639,758		639,758
Nutrition Education Coordinator	Nutritionist	1-3, 5-9	1-5	49,192	49,192	67,600	67,600	1.00		1.00	58,160		58,160
Training Coordinator	Nutritionist	1-3, 5-9	1-5	49,192	49,192	67,600	67,600	1.00		1.00	58,160		58,160
Regional Breastfeeding Liaison	Nutritionist	1, 5-9	1-5	49,192	49,192	67,600	67,600	1.00	(0.70)	0.30	58,160	(40,712)	17,448
Breastfeeding Coordinator	Nutritionist	1,7,8,10	1-5	49,192	49,192	67,600	67,600	1.00		1.00	58,160		58,160
Call Center Support	Office Assistant II	1,8,9	6	28,475	29,182	39,104	40,082	5.00	1.00	6.00	182,657	28,475	211,132
Office Assistant III	Office Assistant III	6,7,8,9		31,345	32,136	43,056	44,138	1.00		1.00	45,763		45,763
WIC Director	PH Program Manager	1-22	5	80,267	82,264	110,572	113,339	1.00	0.00	1.00	100,278	7,722	108,000
Program Specialist	Program Specialist I	6		53,019	54,350	72,800	74,630	1.00		1.00	61,198		61,198
Program Coordinator	Public Health Program Coordinator	1-22	5	67,579	69,264	92,976	95,306	2.00	0.00	2.00	171,279	11,095	182,374
Administrative Assistant	Administrative Assistant/Secretary I	4,8		34,134	34,986	46,883	48,048	1.00		1.00	42,662		42,662
Warehouse Support	Storekeeper/Store Specialist	8,9		27,165	28,413	44,387	45,490	0.80		0.80	29,998		29,998
Site Supervisor	Supervising Health Services Assistant	1,7,8,10,22	1-5	32,552	33,363	44,678	45,802	9.00		9.00	416,883		416,883
Supervising Nutritionist	Supervising Nutritionist	1-4,6-11,22	5	54,246	55,598	74,568	76,440	5.00	0.00	5.00	368,050	(74,568)	293,482
Call Center Supervisor	Supervising Office Assistant	1,8		35,838	36,733	49,296	50,523	1.00		1.00	49,687		49,687
Regional Breastfeeding Liaison	Health Education Specialist I/II	1,5-9	1-5		45,781		67,621		1.00	1.00		57,666	57,666
Data Analyst	Statistical Analyst I/II	1-3, 9			59,426		81,702		0.40	0.40		23,870	23,870
Media Specialist	Media Specialist I/II	6,8,9	2,4,5		51,709		74,630		0.20	0.20		11,452	11,452
Overtime											10,000	30,000	40,000
Salaries and Wages											5,956,229	(162,155)	5,794,074
Total FTE								128.90	1.90	130.80			
Fringe Benefits								Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount
								49.2800%		51.5100%	2,935,229	49,298	2,984,527
Total Personnel											8,891,458		8,778,601

**Exhibit B, Attachment I
Budget Detail Worksheet
October 1, 2019 - September 30, 2022**

							Year 1 10/1/2019 - 9/30/2020					
				Exhibit A SOW 7.A.	Exhibit A Attach I		Budgeted Amount	Budget Adj.	Amended Budgeted Amount			
Operating Expenses ⁽⁵⁾												
General Expenses ⁽⁶⁾				6, 17, 18, 19	1-9		852,103	96,519	948,622			
Travel				8	1-9		109,252	2,218	111,470			
Training				4, 5, 7, 17	1-9		13,960		13,960			
Outreach/Media/Promotion ⁽⁷⁾				17	1-9		7,750		7,750			
Facility Costs (See Exhibit B, Attach II for breakdown)				11	1-9		1,466,124	60,588	1,526,712			
Total Operating Expenses ⁽⁸⁾								2,449,189	159,325	2,608,514		
Major Equipment ⁽⁹⁾ (Unit Cost of \$5,000 or More)							Exhibit A SOW 7.A.	Exhibit A Attach I	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	
Equipment ⁽¹⁰⁾				6, 17, 18, 20, 21	1-9				-			
Vehicles				8, 17, 18, 19	1-9				-			
Total Major Equipment ⁽¹¹⁾								-	-	-		
Subcontracts ⁽¹¹⁾							Exhibit A SOW 7.A.	Exhibit A Attach I	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	
										-		
										-		
Total Subcontracts										-		
Indirect Costs							Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount
Total Personnel Costs						14.9400%		14.6280%	1,328,383	(44,250)	1,284,133	
Total Indirect Costs									1,328,383	(44,250)	1,284,133	
Total Budget									\$ 12,669,030	\$ 2,218	\$ 12,671,248	

Year 1 Contract Amount	\$ 12,671,248
Year 1 Funding Changes	\$ 2,218
Year 1 Checks/Balances	\$ -

Personnel	Year 2 10/1/2020 - 9/30/2021						Year 3 10/1/2021 - 9/30/2022						Total	Total Budget Adj.	Amended Total
	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount			
WIC Position Title	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total
Accountant	0.50		0.50	26,223		26,223	0.50		0.50	26,747		26,747	78,679	-	78,679
Administrative Supervisor ②	0.70		0.70	61,183	4,266	65,449	0.70		0.70	62,407	5,005	67,412	183,574	12,830	196,404
Information Technology Support	0.90		0.90	64,460	(2,730)	61,730	0.90		0.90	65,749	(1,730)	64,019	193,405	(9,190)	184,215
Fiscal Specialist	1.00		1.00	52,302		52,302	1.00		1.00	53,348		53,348	156,926	-	156,926
Health Education Assistant/Local Vendor Liaison	2.00		2.00	112,538		112,538	2.00		2.00	114,788		114,788	337,657	-	337,657
Local Vendor Liaison/Outreach Coordinator	1.00		1.00	53,002		53,002	1.00		1.00	54,061		54,061	159,026	-	159,026
WIC Nutrition Assistant (WNA)	73.00		73.00	2,939,463	(134,431)	2,805,032	73.00		73.00	2,998,242	(212,555)	2,785,687	8,819,513	(562,970)	8,256,543
Site Lead	8.00		8.00	368,333		368,333	8.00		8.00	375,702		375,702	1,105,144	-	1,105,144
Nutritionist	11.00		11.00	652,550		652,550	11.00		11.00	665,600		665,600	1,957,908	-	1,957,908
Nutrition Education Coordinator	1.00		1.00	59,323		59,323	1.00		1.00	60,509		60,509	177,992	-	177,992
Training Coordinator	1.00		1.00	59,323		59,323	1.00		1.00	60,509		60,509	177,992	-	177,992
Regional Breastfeeding Liaison	1.00	-0.90	0.10	59,323	(53,390)	5,933	1.00	-0.90	0.10	60,509	(54,459)	6,050	177,992	(148,561)	29,431
Breastfeeding Coordinator	1.00		1.00	59,323		59,323	1.00		1.00	60,509		60,509	177,992	-	177,992
Call Center Support	5.00	1.00	6.00	186,311	28,475	214,786	5.00	1.00	6.00	190,039	29,614	219,653	559,007	86,564	645,571
Office Assistant III	1.00		1.00	46,678		46,678	1.00		1.00	47,612		47,612	140,053	-	140,053
WIC Director	1.00	0.00	1.00	102,284	4,216	106,500	1.00		1.00	104,329	4,260	108,589	306,891	16,198	323,089
Program Specialist	1.00		1.00	62,422		62,422	1.00		1.00	63,670		63,670	187,290	-	187,290
Program Coordinator	2.00	0.00	2.00	174,705	14,963	189,668	2.00		2.00	178,199	7,586	185,785	524,183	33,644	557,827
Administrative Assistant	1.00		1.00	43,516		43,516	1.00		1.00	44,386		44,386	130,564	-	130,564
Warehouse Support	0.80		0.80	30,599		30,599	0.80		0.80	31,211		31,211	91,808	-	91,808
Site Supervisor	9.00		9.00	425,221		425,221	9.00		9.00	433,728		433,728	1,275,832	-	1,275,832
Supervising Nutritionist	5.00	0.00	5.00	375,412	(74,582)	300,830	4.00		4.00	306,337		306,337	1,049,799	(149,150)	900,649
Call Center Supervisor	1.00		1.00	50,681		50,681	1.00		1.00	51,694		51,694	152,062	-	152,062
Regional Breastfeeding Liaison		1.00	1.00		59,972	59,972		1.00	1.00		62,370	62,370	-	180,008	180,008
Data Analyst		0.20	0.20		12,412	12,412		0.20	0.20		12,908	12,908	-	49,190	49,190
Media Specialist		0.20	0.20		11,910	11,910		0.20	0.20		12,386	12,386	-	35,748	35,748
Overtime				10,000	15,000	25,000				10,000	5,000	15,000	30,000	50,000	80,000
Salaries and Wages				6,075,175	(113,919)	5,961,256				6,119,885	(129,615)	5,990,270	18,151,289	(405,689)	17,745,600
Total FTE	128.90	1.50	130.40				127.90	1.50	129.40						
Fringe Benefits ④	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total
	49.2800%		51.5100%	2,993,846	76,796	3,070,642	49.2800%		51.5100%	3,015,879	69,709	3,085,588	8,944,954	195,803	9,140,757
Total Personnel				9,069,021		9,031,898				9,135,764		9,075,858	27,096,243	(209,886)	26,886,357

	Year 2 10/1/2020 - 9/30/2021						Year 3 10/1/2021 - 9/30/2022						Total	Total Budget Adj.	Amended Total
	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total			
Operating Expenses ⁽⁵⁾															
General Expenses	620,062		620,062	506,890		506,890	1,979,055		96,519		2,075,574				
Travel	110,674		110,674	112,615		112,615	332,541		2,218		334,759				
Training	13,260		13,260	13,960		13,960	41,180		-		41,180				
Outreach/Media/Promotion	7,750		7,750	7,750		7,750	23,250		-		23,250				
Facility Costs (See Exhibit B, Attach II for breakdown)	1,493,352	70,848	1,564,200	1,527,168	68,856	1,596,024	4,486,644		200,292		4,686,936				
Total Operating Expenses	2,245,098	70,848	2,315,946	2,168,383	68,856	2,237,239	6,862,670		299,029		7,161,699				
Major Equipment ⁽⁸⁾ (Unit Cost of \$5,000 or More)															
Equipment	-		-	-		-	-		-		-				
Vehicles	-		-	-		-	-		-		-				
Total Major Equipment	-	-	-	-	-	-	-	-	-	-	-				
Subcontracts ⁽¹¹⁾															
Total Subcontracts	-	-	-	-	-	-	-	-	-	-	-				
Indirect Costs	Percent	Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Percent	Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total		
Total Personnel Costs	14.9400%	14.6280%	1,354,911	(33,725)	1,321,186	14.9400%		1,364,883	(8,950)	1,355,933	4,048,177	(86,925)	3,961,252		
Total Indirect Costs			1,354,911	(33,725)	1,321,186			1,364,883	(8,950)	1,355,933	4,048,177	(86,925)	3,961,252		
Total Budget			\$ 12,669,030	\$ -	\$ 12,669,030			\$ 12,669,030	\$ -	\$ 12,669,030	\$ 38,007,090	\$ 2,218	\$ 38,009,308		

Year 2 Contract Amount \$ 12,669,030
Year 2 Funding Changes \$ -
Year 2 Checks/Balances \$ -

Year 3 Contract Amount \$ 12,669,030
Year 3 Funding Changes \$ -
Year 3 Checks/Balances \$ -

**Exhibit B, Attachment II
Facility Cost Worksheet
YEAR 1
OCTOBER 1, 2019 - SEPTEMBER 30, 2020**

																Total	Amended Total	
																\$ 1,466,124	\$ 1,526,712	
Site # or N/A	Site Name	Site Street Address, City, State & Zip Code	Type of Space (i.e., Clinic Site, Admin, Training Center, Warehouse, Storage Area, Satellite site)	Total Square Footage	Monthly Rent/Lease Amount	Monthly Rent/Lease Adj.	Amended Monthly Rent/Lease Amount	Utility Costs Per Month	Utility Costs Per Month Adj.	Amended Utility Costs Per Month	Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance)	Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance) Adj.	Amended Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance)	Total Cost of Site Per Month	Total Cost of Site Per Month Adj.	Amended Total Cost of Site Per Month	Total Site Cost Per Year	Amended Total Site Costs Per Year
Site # 029	San Bernardino WIC	2035 N 'D' Street, San Bernardino, CA 92405	Clinic Site	4000	8,238		8,238			-	70		70	8,308	-	8,308	99,696	99,696
Site # 032	Rancho Cucamonga WIC	9507 Arrow Rte Bdg 7 Ste A. Rancho Cucamonga, 91730	Clinic Site	3700	7,773		7,773			-	70		70	7,843	-	7,843	94,116	94,116
Site # 003	Foothill WIC	850 E. Foothill Blvd. Rialto, 92376	Clinic Site	3614	5,644		5,644			-	35		35	5,679	-	5,679	68,148	68,148
Site # 012	Hesperia WIC	16453 Bear Valley Road, Hesperia, 92345	Clinic Site	3214	1,489	744	2,233			-			-	1,489	744	2,233	17,868	26,796
Site # 010	Twentynine Palms WIC	6527 Desert Queen Ave., Twentynine Palms, 92277	Clinic Site	1800	2,300		2,300	280		280	1,000		1,000	3,580	-	3,580	42,960	42,960
Site # 002	WIC Administration	1505 South D Street, San Bernardino, 92415	Administrative Site	9374	17,557		17,557			-			-	17,557	-	17,557	210,684	210,684
Site # 017	Rialto WIC	1515 S. Riverside Ave, Rialto, 92376	Clinic Site	2769	5,274		5,274			-	570		570	5,844	-	5,844	70,128	70,128
Site # 028	Mill Street WIC	606 E. Mill St. San Bernardino, 92408	Clinic Site	4173	8,848		8,848			-	760		760	9,608	-	9,608	115,296	115,296
Site # 035	Victorville WIC	15247 11th St., Ste. 700, Victorville, 92395	Clinic Site	3903	8,242		8,242			-	85		85	8,327	-	8,327	99,924	99,924
NA	Public Health Record Warehouse	1140 E. Cooley Drive, Colton, 92324	Storage	825	167		167			-			-	167	-	167	2,004	2,004
Site # 006	Redlands WIC	800 E. Lugonia Ave., Suite K, Redlands, 92374	Clinic Site	3000	4,371		4,371	450		450	620		620	5,441	-	5,441	65,292	65,292
NA	WIC Storage (Lock N Leave)	322 S. Waterman Ave., San Bernardino, 92408	Storage	1910	1,567		1,567			-		15	15	1,567	15	1,582	18,804	18,984
Site # 036	Highland WIC	1535 E. Highland Ave., San Bernardino, 92404	Clinic Site	3313	7,559		7,559	600		600	1,350		1,350	9,509	-	9,509	114,108	114,108
Site # 025	Fontana WIC	9161 Sierra Ave., Suite 104, Fontana, 92335	Clinic Site	5793	10,531	3,697	14,228			-	80		80	10,611	3,697	14,308	127,332	171,696
Site # 009	Yucca Valley WIC	56357 Pima Trail, Yucca Valley, 92284	Clinic Site	776	1,718		1,718			-	15		15	1,733	-	1,733	20,796	20,796
Site # 005	Ontario WIC	150 E. Holt Blvd., Ontario, 91761	Clinic Site	4828	9,000		9,000	1,600		1,600	1,045		1,045	11,645	-	11,645	139,740	139,740
Site # 001	Barstow WIC	301 East Mountain View Ave., Suite A, Barstow, 92311	Clinic Site	1493			-			-	1,075		1,075	1,075	-	1,075	12,900	12,900
Site # 013	Colton WIC	290 E. 'O' Street, Colton, 92324	Clinic Site	2000			-			-	1,845		1,845	1,845	-	1,845	22,140	22,140
Site # 021	Ft. Irwin WIC	Bldg. 1317, Inner Loop & Goldstone, Room 9, Ft. Irwin, 92310	Clinic Site	1225			-			-			-	-	-	-	-	-
Site # 012	Hesperia WIC	14135 Main Street, Hesperia, 92345	Clinic Site	4646	9,029	293	9,322	300	300	600	1,020		1,020	10,349	593	10,942	124,188	131,304
							-			-			-	-	-	-	-	-

**Exhibit B, Attachment II
Facility Cost Worksheet
YEAR 2
OCTOBER 1, 2020 - SEPTEMBER 30, 2021**

																	Total	Amended Total
																	\$ 1,493,352	\$ 1,564,200
Site # or N/A	Site Name	Site Street Address, City, State & Zip Code	Type of Space (i.e., Clinic Site, Admin, Training Center, Warehouse, Storage Area, Satellite site)	Total Square Footage	Monthly Rent/Lease Amount	Monthly Rent/Lease Adj.	Amended Monthly Rent/Lease Amount	Utility Costs Per Month	Utility Costs Per Month Adj.	Amended Utility Costs Per Month	Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance)	Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance) Adj.	Amended Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance)	Total Cost of Site Per Month	Total Cost of Site Per Month Adj.	Amended Total Cost of Site Per Month	Total Site Cost Per Year	Amended Total Site Costs Per Year
Site # 029	San Bernardino WIC	2035 N 'D' Street, San Bernardino, CA 92405	Clinic Site	4000	8,485		8,485			-	70		70	8,555	-	8,555	102,660	102,660
Site # 032	Rancho Cucamonga WIC	9507 Arrow Rte Bdg 7 Ste A. Rancho Cucamonga, 91730	Clinic Site	3700	8,007		8,007			-	70		70	8,077	-	8,077	96,924	96,924
Site # 003	Foothill WIC	850 E. Foothill Blvd. Rialto, 92376	Clinic Site	3614	5,785		5,785			-	35		35	5,820	-	5,820	69,840	69,840
Site # 012	Hesperia WIC	16453 Bear Valley Road, Hesperia, 92345	Clinic Site	3214			-			-			-	-	-	-	-	-
Site # 010	Twentynine Palms WIC	6527 Desert Queen Ave., Twentynine Palms, 92277	Clinic Site	1800	2,355		2,355	280		280	1,000		1,000	3,635		3,635	43,620	43,620
Site # 002	WIC Administration	1505 South D Street, San Bernardino, 92415	Administrative Site	9374	18,084		18,084			-		70	70	18,084	70	18,154	217,008	217,848
Site # 017	Rialto WIC	1515 S. Riverside Ave, Rialto, 92376	Clinic Site	2769	5,393		5,393			-	570		570	5,963	-	5,963	71,556	71,556
Site # 028	Mill Street WIC	606 E. Mill St. San Bernardino, 92408	Clinic Site	4173	9,025		9,025			-	760		760	9,785	-	9,785	117,420	117,420
Site # 035	Victorville WIC	15247 11th St., Ste. 700, Victorville, 92395	Clinic Site	3903	8,490		8,490			-	85		85	8,575	-	8,575	102,900	102,900
NA	Public Health Record Warehouse	1140 E. Cooley Drive, Colton, 92324	Storage	825	172		172			-			-	172	-	172	2,064	2,064
Site # 006	Redlands WIC	800 E. Lugonia Ave., Suite K, Redlands, 92374	Clinic Site	3000	4,502		4,502	450		450	620		620	5,572	-	5,572	66,864	66,864
NA	WIC Storage (Lock N Leave)	322 S. Waterman Ave., San Bernardino, 92408	Storage	1910	1,614		1,614			-		17	17	1,614	17	1,631	19,368	19,572
Site # 036	Highland WIC	1535 E. Highland Ave., San Bernardino, 92404	Clinic Site	3313	7,769		7,769	600		600	1,350		1,350	9,719	-	9,719	116,628	116,628
Site # 025	Fontana WIC	9161 Sierra Ave., Suite 104, Fontana, 92335	Clinic Site	5793	10,847	4,774	15,621			-	80		80	10,927	4,774	15,701	131,124	188,412
Site # 009	Yucca Valley WIC	56357 Pima Trail, Yucca Valley, 92284	Clinic Site	776	1,769		1,769			-	15		15	1,784	-	1,784	21,408	21,408
Site # 005	Ontario WIC	150 E. Holt Blvd., Ontario, 91761	Clinic Site	4828	9,249		9,249	1,600		1,600	1,045		1,045	11,894	-	11,894	142,728	142,728
Site # 001	Barstow WIC	301 East Mountain View Ave., Suite A, Barstow, 92311	Clinic Site	1493			-			-	1,075		1,075	1,075	-	1,075	12,900	12,900
Site # 013	Colton WIC	290 E. "O" Street, Colton, 92324	Clinic Site	2000			-			-	1,845		1,845	1,845	-	1,845	22,140	22,140
Site # 021	Ft. Irwin WIC	Bldg. 1317, Inner Loop & Goldstone, Room 9, Ft. Irwin, 92310	Clinic Site	1225			-			-			-	-	-	-	-	-
Site # 012	Hesperia WIC	14135 Main Street, Hesperia, 92345	Clinic Site	4646	10,030	343	10,373	300	300	600	1,020	400	1,420	11,350	1,043	12,393	136,200	148,716
0	0	0	0	0			-			-			-	-	-	-	-	-

**Exhibit B, Attachment II
Facility Cost Worksheet
YEAR 3
OCTOBER 1, 2021 - SEPTEMBER 30, 2022**

																Total	Amended Total	
																\$ 1,527,168	\$ 1,596,024	
Site # or N/A	Site Name	Site Street Address, City, State & Zip Code	Type of Space (i.e., Clinic Site, Admin, Training Center, Warehouse, Storage Area, Satellite site)	Total Square Footage	Monthly Rent/Lease Amount	Monthly Rent/Lease Adj.	Amended Monthly Rent/Lease Amount	Utility Costs Per Month	Utility Costs Per Month Adj.	Amended Utility Costs Per Month	Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance)	Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance) Adj.	Amended Misc. Facility Costs Per Month (i.e., Janitorial, Security, Maintenance)	Total Cost of Site Per Month	Total Cost of Site Per Month Adj.	Amended Total Cost of Site Per Month	Total Site Cost Per Year	Amended Total Site Costs Per Year
Site # 029	San Bernardino WIC	2035 N 'D' Street, San Bernardino, CA 92405	Clinic Site	4000	8,740		8,740				70		70	8,810	-	8,810	105,720	105,720
Site # 032	Rancho Cucamonga WIC	9507 Arrow Rte Bdg 7 Ste A, Rancho Cucamonga, 91730	Clinic Site	3700	8,247		8,247				70		70	8,317	-	8,317	99,804	99,804
Site # 003	Foothill WIC	850 E. Foothill Blvd. Rialto, 92376	Clinic Site	3614	5,929		5,929				35		35	5,964	-	5,964	71,568	71,568
Site # 012	Hesperia WIC	16453 Bear Valley Road, Hesperia, 92345	Clinic Site	3214			-						-	-	-	-	-	-
Site # 010	Twentynine Palms WIC	6527 Desert Queen Ave., Twentynine Palms, 92277	Clinic Site	1800	2,411		2,411	280		280	1,000		1,000	3,691	-	3,691	44,292	44,292
Site # 002	WIC Administration	1505 South D Street, San Bernardino, 92415	Administrative Site	9374	18,626		18,626					70	70	18,626	70	18,696	223,512	224,352
Site # 017	Rialto WIC	1515 S. Riverside Ave, Rialto, 92376	Clinic Site	2769	5,555		5,555				570		570	6,125	-	6,125	73,500	73,500
Site # 028	Mill Street WIC	606 E. Mill St. San Bernardino, 92408	Clinic Site	4173	9,206		9,206				760		760	9,966	-	9,966	119,592	119,592
Site # 035	Victorville WIC	15247 11th St., Ste. 700, Victorville, 92395	Clinic Site	3903	8,744		8,744				85		85	8,829	-	8,829	105,948	105,948
NA	Public Health Record Warehouse	1140 E. Cooley Drive, Colton, 92324	Storage	825	177		177						-	177	-	177	2,124	2,124
Site # 006	Redlands WIC	800 E. Lugonia Ave., Suite K, Redlands, 92374	Clinic Site	3000	4,637		4,637	450		450	620		620	5,707	-	5,707	68,484	68,484
NA	WIC Storage (Lock N Leave)	322 S. Waterman Ave., San Bernardino, 92408	Storage	1910	1,662		1,662					15	15	1,662	15	1,677	19,944	20,124
Site # 036	Highland WIC	1535 E. Highland Ave., San Bernardino, 92404	Clinic Site	3313	7,985		7,985	600		600	1,350		1,350	9,935	-	9,935	119,220	119,220
Site # 025	Fontana WIC	9161 Sierra Ave., Suite 104, Fontana, 92335	Clinic Site	5793	11,173	5,161	16,334				80		80	11,253	5,161	16,414	135,036	196,968
Site # 009	Yucca Valley WIC	56357 Pima Trail, Yucca Valley, 92284	Clinic Site	776	1,822		1,822				15		15	1,837	-	1,837	22,044	22,044
Site # 005	Ontario WIC	150 E. Holt Blvd., Ontario, 91761	Clinic Site	4828	9,249	94	9,343	1,600		1,600	1,045		1,045	11,894	94	11,988	142,728	143,856
Site # 001	Barstow WIC	301 East Mountain View Ave., Suite A, Barstow, 92311	Clinic Site	1493			-				1,075		1,075	1,075	-	1,075	12,900	12,900
Site # 013	Colton WIC	290 E. "O" Street, Colton, 92324	Clinic Site	2000			-				1,845		1,845	1,845	-	1,845	22,140	22,140
Site # 021	Ft. Irwin WIC	Bldg. 1317, Inner Loop & Goldstone, Room 9, Ft. Irwin, 92310	Clinic Site	1225			-						-	-	-	-	-	-
Site # 012	Hesperia WIC	14135 Main Street, Hesperia, 92345	Clinic Site	4646	10,231	349	10,580	300		300	1,020	49	1,069	11,551	398	11,949	138,612	143,388
0	0	0	0	0			-						-	-	-	-	-	-
0	0	0	0	0			-						-	-	-	-	-	-

JUSTIFICATION OF STAFFING LEVELS

October 1, 2019 – September 30, 2022

WIC local agencies shall ensure sufficient and qualified staff is available to administer an efficient and effective WIC Program including, but not limited to, the functions of nutrition education, breastfeeding promotion and support, certification, food delivery, fiscal reporting, monitoring and training.

The WIC local agency shall employ at least one (1) Registered Dietitian (RD) and shall designate a WIC Director, Breastfeeding Coordinator, Nutrition Education Coordinator, Local Vendor Liaison, National Voter Registration Act (NVRA) Coordinator, and Farmer's Market Nutrition Program (FMNP) Coordinator (if applicable) for the agency.

Provide a written justification below explaining how your staffing levels will meet the WIC Program requirements as detailed in Exhibit A, Scope of Work, and Exhibit A, Attachment I, Statement of Work. Include how the number of RDs and other staff is sufficient to provide client and nutrition services, including the development and the implementation of the Nutrition Services Plan.

For Years 1-3, our agency is adding the following classifications to the budget:

Statistical Analyst I/II will be employed at .40 FTE for Year 1 and .20 FTE for Years 2 and 3 to utilize the new WIC WISE reporting system to run, develop, and analyze reports to help WIC leadership with quality improvement, strategic planning, and operations. This person will also review/identify locations within our County boundaries to ensure maximum participation and accessibility to WIC services.

Due to the scope of work of the Regional Breastfeeding Liaison (RBL), the proposed minimum requirements for this position, and the difficulty in recruiting/retaining the Nutritionist classification for this role, the Health Education Specialist I/II classification will be used moving forward to fill this position at 1.0 FTE.

Media Specialist I/II will be employed at .20 FTE to assist with the scheduling and maintenance of Social Media pages and local agency website. The Media Specialist will also work towards establishing and maintaining effective working relationships with media representatives and the various social/community influencers to identify appropriate media outlets to market and promote WIC services. This position will prepare radio/television/video messaging, brochures, paid social media, and various print media for public dissemination.

CERTIFICATION OF INDIRECT COST RATE

October 1, 2019 – September 30, 2022

List the Indirect Cost Rate (ICR) percentage(s) that you will be using for the contract with the California Department of Public Health, Women, Infants and Children Division (CDPH/WIC Division).

Legal Name of Local Agency:

San Bernardino County Department of Public Health

Private Non-Profit Agencies with an Approved Rate:

Private Non-Profit Agencies that have an approved ICR percentage from their Federal cognizant agency may charge their approved ICR percentage or may elect to charge less than the approved ICR percentage. A copy of the ICR approval letter from the Federal cognizant agency is required with the Contract Amendment package.

Complete the following with the percentage and methodology listed in the ICR approval letter:

_____ Percent of Total Personnel Costs Total Direct Costs

The ICR percentage(s) listed below must match the percentage(s) listed in Attachment 4, "Amendment Budget Plan".

Year 1: _____ Year 2: _____ Year 3: _____

Private Non-Profit Agencies without an Approved Rate:

Private Non-Profit Agencies that have **never** received a negotiated ICR from their Federal cognizant agency may elect to charge the de minimis rate of 10% of modified total direct costs (MTDC), which may be used indefinitely. However, this rate must be used consistently for all Federal awards until such time they choose to negotiate a rate.

Check the box below to confirm your agency is eligible and is electing to charge the 10% (or less) de minimis rate based on MTDC (Total Personnel Costs + Total Operating Expenses + Subcontracts up to \$25,000).

10% (or less) de minimis rate of MTDC (option 3 on the dropdown list on Attachment 4)

The ICR percentage(s) listed below must be 10% or less and match the percentage(s) listed in Attachment 4, "Amendment Budget Plan". Please note,

Year 1: _____ Year 2: _____ Year 3: _____

Local Government Agencies:

Local Government Agencies may charge their ICR percentage approved by CDPH or may elect to charge less than its approved ICR percentage. A copy of the ICR approval letter from CDPH is required with the Contract Amendment package.

Complete the following with the percentage and methodology listed in the ICR approval letter:

14.628% Percent of Total Personnel Costs Total Direct Costs

The ICR percentage(s) listed below must match the percentage(s) listed in Attachment 4, "Amendment Budget Plan".

Year 1: 14.628% Year 2: 14.628% Year 3: 14.94%

JUSTIFICATION OF FRINGE BENEFIT RATE OF 50% OR MORE

October 1, 2019 – September 30, 2022

Provide justification if the Fringe Benefit Rate is 50% or more for any of the contract years. Attach a copy of the union contract, or other official documentation (i.e., board approval, HR documentation, etc.) from your organization, and a spreadsheet (example below) that justifies the Fringe Benefit Rate.

Spreadsheet Example:

WIC		Official Classification Title	Retirement Salaries	Retirement FICA/M-C	OPEB	Health	Dental	Vision	UI	Total Benefits	Benefit %	Total Personnel
Position Title	FTE											
PROGRAM MANAGER	1.00	PROGRAM MANAGER	98,245.34	34,722.85	8,547.34	8,250.24	460.95	98.16	464.00	52,543.54	53.48%	\$ 150,788.88
WIC NUTRITION ASSISTANT	1.00	HEALTH TECHNICIAN I	31,001.17	11,535.34	2,730.82	8,926.10	460.95	98.16	117.71	23,869.08	76.99%	\$ 54,870.25
WIC NUTRITION ASSISTANT/PEER COUNSELOR	1.00	HEALTH TECHNICIAN II/GV	39,663.17	14,576.21	3,450.70	8,254.80	460.95	98.16	150.72	26,991.54	68.05%	\$ 66,654.71
SENIOR WIC NUTRITION ASSISTANT	1.00	HEALTH TECHNICIAN SR	43,110.06	14,730.71	3,750.58	17,940.79	1,295.51	243.36	163.82	38,124.76	88.44%	\$ 81,234.82
WIC NUTRITIONIST	1.00	NUTRITIONIST	67,022.16	24,630.64	5,830.93	17,940.79	1,295.51	243.36	254.68	50,195.91	74.89%	\$ 117,218.06
WIC DIRECTOR	1.00	NUTRITIONIST SR	82,489.14	28,186.54	7,176.56	17,940.79	1,295.51	243.36	313.46	55,156.21	66.86%	\$ 137,645.35
WIC NUTRITION ASSISTANT	1.00	HEALTH TECHNICIAN II/Trk	45,798.32	15,649.29	3,984.45	17,940.79	1,295.51	243.36	174.03	39,287.43	85.78%	\$ 85,085.76
Totals			407,329.36							286,168.47	70.25%	

Enter Justification Below:

The Benefit Rate for the Public Health Department is 51.51% These benefits are detailed in the Consolidated Memorandum of Understanding 2019-2023.

Benefits Include:

Retirement Contributions with the San Bernardino County Employee's Retirement Association and employer contributions to 401 and 457 deferred compensation plans average approximately 31% of Salary cost. MOU Pages 15, 113, 315

Short Term Disability, Medicare, Worker's Compensation Insurance, Survivors Benefits and Life Insurance average approximately 6%. MOU Pages 122, 77, 143, 75

Health and Dental cost average approximately 14%. MOU Pages 77-83

All bargaining unit Memorandas of Understanding can be viewed at <http://cms.sbcounty.gov/hr/EmployeeRelations/MemorandasofUnderstanding.aspx>

WIC Local Agency Contract Totals

Agency #	Contract #	Local Agency Legal Contract Name	FFY 2020 Contract Funding	FFY 2021 Contract Funding	FFY 2022 Contract Funding	Total Contract Amount
		All Agency Totals	\$280,728,623	\$280,601,165	\$280,601,165	\$841,930,953
102	19-10128	Alliance Medical Center, Inc.	\$647,776	\$647,776	\$647,776	\$1,943,328
302	19-10129	American National Red Cross	\$5,828,314	\$5,828,314	\$5,828,314	\$17,484,942
232	19-10130	Ampla Health	\$1,400,237	\$1,398,475	\$1,398,475	\$4,197,187
323	19-10131	Antelope Valley Healthcare District	\$3,601,374	\$3,601,374	\$3,601,374	\$10,804,122
110	19-10132	Axis Community Health, Inc.	\$763,962	\$763,962	\$763,962	\$2,291,886
324	19-10135	Camino Health Center	\$1,518,583	\$1,518,583	\$1,518,583	\$4,555,749
319	19-10136	Centro De Salud De La Comunidad De San Ysidro, Inc., dba San Ysidro Health	\$3,211,435	\$3,211,435	\$3,211,435	\$9,634,305
121	19-10182	City and County of San Francisco	\$2,874,898	\$2,861,565	\$2,861,565	\$8,598,028
103	19-10133	City of Berkeley, Department of Health, Housing and Community Services	\$525,547	\$525,547	\$525,547	\$1,576,641
308	19-10156	City of Long Beach	\$4,747,440	\$4,747,440	\$4,747,440	\$14,242,320
312	19-10171	City of Pasadena	\$1,144,071	\$1,144,071	\$1,144,071	\$3,432,213
203	19-10137	Clinica Sierra Vista	\$7,703,945	\$7,703,945	\$7,703,945	\$23,111,835
304	19-10138	Clinicas de Salud del Pueblo, Inc.	\$1,855,251	\$1,855,251	\$1,855,251	\$5,565,753
206	19-10139	Community Action Partnership of Kern	\$4,001,061	\$4,001,061	\$4,001,061	\$12,003,183
108	19-10140	Community Bridges	\$2,332,839	\$2,332,839	\$2,332,839	\$6,998,517
235	19-10141	Community Medical Centers, Inc.	\$1,704,681	\$1,704,681	\$1,704,681	\$5,114,043
234	19-10142	Community Resource Project, Inc.	\$4,567,203	\$4,567,203	\$4,567,203	\$13,701,609
101	19-10127	County of Alameda	\$4,440,841	\$4,440,841	\$4,440,841	\$13,322,523
201	19-10134	County of Butte	\$1,544,713	\$1,543,019	\$1,543,019	\$4,630,751
105	19-10143	County of Contra Costa	\$4,313,783	\$4,313,783	\$4,313,783	\$12,941,349
233	19-10146	County of El Dorado	\$793,359	\$793,359	\$793,359	\$2,380,077
111	19-10150	County of Humboldt	\$1,101,464	\$1,101,464	\$1,101,464	\$3,304,392
307	19-10153	County of Inyo	\$369,974	\$369,974	\$369,974	\$1,109,922
207	19-10154	County of Kings	\$1,729,617	\$1,729,617	\$1,729,617	\$5,188,851
202	19-10158	County of Madera	\$2,114,708	\$2,114,708	\$2,114,708	\$6,344,124
114	19-10159	County of Marin	\$1,062,384	\$1,062,384	\$1,062,384	\$3,187,152
115	19-10160	County of Mendocino	\$953,868	\$953,868	\$953,868	\$2,861,604
116	19-10163	County of Monterey	\$4,286,938	\$4,286,938	\$4,286,938	\$12,860,814
226	19-10166	County of Nevada	\$671,933	\$671,933	\$671,933	\$2,015,799
311	19-10170	County of Orange	\$4,791,410	\$4,791,410	\$4,791,410	\$14,374,230
212	19-10172	County of Placer	\$1,145,247	\$1,143,259	\$1,143,259	\$3,431,765
315	19-10176	County of Riverside	\$17,271,865	\$17,271,865	\$17,271,865	\$51,815,595
213	19-10178	County of Sacramento	\$5,084,569	\$5,084,569	\$5,084,569	\$15,253,707
317	19-10180	County of San Bernardino	\$12,671,248	\$12,669,030	\$12,669,030	\$38,009,308
214	19-10183	County of San Joaquin	\$2,301,020	\$2,301,020	\$2,301,020	\$6,903,060
122	19-10184	County of San Luis Obispo	\$1,259,903	\$1,259,903	\$1,259,903	\$3,779,709
123	19-10185	County of San Mateo	\$2,978,547	\$2,975,547	\$2,975,547	\$8,929,550
320	19-10186	County of Santa Barbara	\$3,861,087	\$3,858,711	\$3,858,711	\$11,578,509
124	19-10187	County of Santa Clara	\$4,167,108	\$4,167,108	\$4,167,108	\$12,501,324
215	19-10189	County of Shasta through its Health and Human Services Agency	\$1,804,022	\$1,804,022	\$1,804,022	\$5,412,066
228	19-10190	County of Sierra	\$155,411	\$155,411	\$155,411	\$466,233
126	19-10194	County of Sonoma Department of Health Services	\$2,305,070	\$2,305,070	\$2,305,070	\$6,915,210
229	19-10195	County of Stanislaus	\$3,741,310	\$3,741,310	\$3,741,310	\$11,223,930
236	19-10202	County of Trinity through its Health and Human Services Department	\$350,658	\$350,658	\$350,658	\$1,051,974
218	19-10203	County of Tulare	\$5,051,973	\$5,051,973	\$5,051,973	\$15,155,919
223	19-10204	County of Tuolumne	\$635,769	\$635,769	\$635,769	\$1,907,307
321	19-10207	County of Ventura	\$4,547,565	\$4,547,565	\$4,547,565	\$13,642,895
220	19-10209	County of Yolo	\$1,325,521	\$1,325,521	\$1,325,521	\$3,979,821
204	19-10144	Delta Health Care and Management Services Corporation	\$2,807,242	\$2,807,242	\$2,807,242	\$8,421,726
209	19-10145	E Center	\$824,855	\$824,855	\$824,855	\$2,474,565
205	19-10147	Fresno County Economic Opportunities Commission	\$5,769,643	\$5,769,643	\$5,769,643	\$17,308,929
107	19-10148	Gardner Family Health Network, Inc.	\$2,218,118	\$2,218,118	\$2,218,118	\$6,654,354
237	19-10149	Glenn County Health and Human Services Agency	\$676,851	\$676,851	\$676,851	\$2,030,553
112	19-10151	Indian Health Center of Santa Clara Valley	\$859,849	\$855,412	\$855,412	\$2,570,673
303	19-10152	Inland Behavioral and Health Services, Inc.	\$870,490	\$870,490	\$870,490	\$2,611,470
113	19-10155	La Clinica de la Raza, Inc.	\$1,256,234	\$1,254,595	\$1,254,595	\$3,765,424
313	19-10157	Los Angeles Biomedical Research Institute at Harbor-UCLA Medical Center	\$15,582,671	\$15,582,671	\$15,582,671	\$46,748,013
208	19-10161	Merced County Community Action Board	\$3,760,794	\$3,760,794	\$3,760,794	\$11,282,382
306	19-10162	Mono County	\$275,726	\$275,726	\$275,726	\$827,178
117	19-10164	Napa County	\$935,041	\$935,041	\$935,041	\$2,805,123
130	19-10165	Native American Health Center, Inc.	\$899,400	\$899,400	\$899,400	\$2,698,200
310	19-10167	North County Health Project, Inc. dba North County Health Services	\$2,605,067	\$2,605,067	\$2,605,067	\$7,815,201
305	19-10168	Northeast Valley Health Corporation	\$11,491,736	\$11,486,428	\$11,486,428	\$34,464,592
210	19-10169	Northeastern Rural Health Clinics	\$500,763	\$500,763	\$500,763	\$1,502,289
325	19-10173	Planned Parenthood/Orange and San Bernardino Counties, Inc.	\$3,198,650	\$3,198,650	\$3,198,650	\$9,595,950
231	19-10174	Plumas Rural Services, Inc.	\$348,722	\$348,722	\$348,722	\$1,046,166
314	19-10175	Public Health Foundation Enterprises, Inc.	\$50,872,482	\$50,791,482	\$50,791,482	\$152,455,446
316	19-10177	Riverside-San Bernardino County Indian Health, Inc.	\$426,921	\$426,921	\$426,921	\$1,280,763
120	19-10179	San Benito Health Foundation	\$697,153	\$697,153	\$697,153	\$2,091,459
318	19-10181	San Diego State University Foundation dba San Diego University Research Foundation	\$6,989,018	\$6,989,018	\$6,989,018	\$20,967,054
309	19-10188	Scripps Health	\$1,682,467	\$1,682,467	\$1,682,467	\$5,047,401
224	19-10191	Siskiyou County Health and Human Services Public Health Division	\$559,666	\$557,118	\$557,118	\$1,673,902
125	19-10192	Solano County	\$2,530,793	\$2,530,793	\$2,530,793	\$7,592,379
127	19-10193	Sonoma County Indian Health Project, Inc.	\$375,618	\$372,630	\$372,630	\$1,120,878
217	19-10196	Sutter County Health and Human Services Department-Public Health Branch	\$1,099,683	\$1,099,683	\$1,099,683	\$3,299,049
238	19-10197	Tehama County Health Services Agency	\$780,719	\$780,719	\$780,719	\$2,342,157
225	19-10198	The Resource Connection of Amador and Calaveras Counties, Inc.	\$659,240	\$659,240	\$659,240	\$1,977,720
132	19-10199	The West Oakland Health Council	\$532,850	\$532,850	\$532,850	\$1,598,550
128	19-10200	Tiburcio Vasquez Health Center, Inc.	\$1,571,495	\$1,571,495	\$1,571,495	\$4,714,485
327	19-10201	Toiyabe Indian Health Project, Inc.	\$271,931	\$271,931	\$271,931	\$815,793
219	19-10205	United Health Centers of the San Joaquin Valley	\$5,215,114	\$5,215,114	\$5,215,114	\$15,645,342
129	19-10206	United Indian Health Services, Inc.	\$498,062	\$498,062	\$498,062	\$1,494,186
322	19-10208	Watts Healthcare Corporation	\$3,818,890	\$3,818,890	\$3,818,890	\$11,456,670