



Contract Number _____

SAP Number _____

Department of Public Health

Department Contract Representative	Shannon Swims
Telephone Number	(909-387-6492)
Contractor	United States Department of Health and Human Services, Health Resources and Services Administration
Contractor Representative	India Smith
Telephone Number	301-443-2096
Contract Term	March 1, 2020 through February 28, 2021
Original Contract Amount	\$1,000,000
Amendment Amount	
Total Contract Amount	\$1,000,000
Cost Center	9300371000

Briefly describe the general nature of the contract: Grant award (Award No. 1 UT8HA33958-01-00), from the United States Department of Health and Human Services, Health Resources and Services Administration for the Ryan White HIV/AIDS Program Parts A and B - Ending the HIV Epidemic: A Plan for America, to expand access to care and treatment to persons living with HIV in San Bernardino and Riverside counties, in the amount of \$1,000,000, for the period of March 1, 2020 through February 28, 2021.

FOR COUNTY USE ONLY

Approved as to Legal Form

►
Adam Ebright, Deputy County Counsel

Date _____

Reviewed for Contract Compliance

►

Date _____

Reviewed/Approved by Department

►
Trudy Raymundo, Director

Date _____