

II. Exhibit A, Scope of Work, Provision 8.1.a has been revised as follows:

a) The Contractor's participant monthly caseload is listed below. The Contractor shall meet the performance standard by serving one hundred percent (100%) of the authorized caseload.

1. Year 1 participant monthly caseload: 1,020
2. Year 2 participant monthly caseload: 1,130
3. Year 3 participant monthly caseload: ~~1,130~~ **1,170**

III. Exhibit B, Budget Detail and Payment Provisions, Provision 1.F has been revised as follows:

F. Amounts Payable

The amounts payable under this Agreement shall not exceed:

~~\$ 2,896,535.00~~ **\$ 2,935,063.00** for the budget period of 10/01/2022 through 09/30/2025.

IV. Exhibit B, Attachment I, Budget Detail has been replaced in its entirety.

Exhibit B, Attachment I  
Budget Detail  
October 1, 2022 - September 30, 2025

PERSONNEL	Exhibit A, SOW 8	Exhibit A, Attach I	Minimum Base Annual Salary	Amended Minimum Base Annual Salary	Maximum Base Annual Salary	Amended Maximum Base Annual Salary	Year 1 10/1/2022 - 9/30/2023		Year 2 10/1/2023 - 9/30/2024		Year 3 10/1/2024 - 9/30/2025					Total	Total Budget Adj.	Amended Total	
							FTE	Budgeted Amount	FTE	Budgeted Amount	FTE	FTE Adj.	Amended FTE	Budgeted Amount	Budget Adj.				Amended Budgeted Amount
Senior Nutritionit	1-22	1-9	85,867	93,600	104,606	114,275	0.90	94,145	1.00	111,972	0.90		0.90	94,145		94,145	300,262	-	300,262
Nutritionist	1-10, 12, 14, 15	1-9	77,552	84,718	94,676	103,418	0.90	85,208	1.00	101,341	0.90		0.90	85,208		85,208	271,757	-	271,757
Senior Health Technician-Grass Valley	5-9, 12	1-8	45,708		55,800		0.90	50,220	0.36	20,088	0.00		0.00	-		-	70,308	-	70,308
Senior Health Technician-Truckee ① ②	5-9, 12	1-5, 8-9	45,708	49,941	55,800	60,965	0.36	23,101	0.65	36,270	0.36		0.36	23,101		23,101	82,472	-	82,472
Health Technician II ①	5-9, 12	1-5, 8-9	41,368	45,198	50,503	55,162	0.90	47,725	1.00	55,170	0.90		0.90	47,725		47,725	150,620	-	150,620
Health Technician II	5-9, 12	1-5, 8-9	41,368	45,198	50,503	55,162	0.90	45,452	1.00	45,452	0.90		0.90	45,452		45,452	136,356	-	136,356
Health Technicain I	6-9, 12	4-5, 9	37,441	40,893	45,708	49,941	1.45	66,276	1.45	66,276	1.45	(0.45)	1.00	66,276	(20,568)	45,708	198,828	(20,568)	178,260
Health Education Specialist	5-9, 12	1-8	54,955	57,699	57,766	70,450			0.58	33,327	0.90		0.90	51,989		51,989	85,316	-	85,316
Health and Wellness Program Manager	12	5,7	117,403		143,325				0.04	4,950	0.00		0.00	-		-	4,950	-	4,950
Health Technician II	5-9, 12	1-5, 8-9		40,893		49,941						0.85	0.85		40,381	40,381	-	40,381	40,381
													0.00		-	-	-	-	-
													0.00			-	-	-	-
Overtime ③																-	-	-	-
Salaries and Wages								412,127		474,846				413,896	19,813	433,709	1,300,869	19,813	1,320,682
Total FTE							6.31		7.08		6.31	0.40	6.71						
Fringe Benefits ④							Percent	Budgeted Amount	Percent	Budgeted Amount	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total
							50.00000%	206,063	57.00000%	270,662	52.59380%			217,683	10,421	228,104	694,408	10,421	704,829
TOTAL PERSONNEL (paid by State WIC contract)									618,190		745,508			631,579	30,234	661,813	1,995,277	30,234	2,025,511
Total In-Kind for Personnel ⑫									141,009		-			141,009	93,611	234,620	282,018	93,611	375,629
OPERATING	Exhibit A, SOW 8	Exhibit A, Attach I						Budgeted Amount		Budgeted Amount				Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total
General Expenses ⑤	5-7, 17-21, 23	1-10						16		136,872				42	377	419	136,930	377	137,307
Travel ⑥	8	1-10								5,000						-	5,000	-	5,000
Training	4,5,7,17,21,23	1-10								20,000						-	20,000	-	20,000
Outreach/Media/Promotion	17	1-10								100,000						-	100,000	-	100,000
Facility Costs (see Exhibit B, Attach II for breakdown) ⑦	11,23	1-10						74,544		74,544				74,544	-	74,544	223,632	-	223,632
TOTAL OPERATING (paid by State WIC contract)									74,560		336,416			74,586	377	74,963	485,562	377	485,939
Total In-Kind for Operating ⑫									41,580		-			41,580		41,580	83,160	-	83,160
CAPITAL EXPENDITURES ⑧ (Unit Cost of \$5,000 or More)	Exhibit A, SOW 8	Exhibit A, Attach I						Budgeted Amount		Budgeted Amount				Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total
Equipment ⑨	6,17,18,20,21	1-10														-	-	-	-
Vehicles ⑩	8,17-19	1-10														-	-	-	-
TOTAL CAPITAL EXPENDITURES (paid by State WIC contract)									-		-			-	-	-	-	-	-
Total In-Kind for Capital Expenditures ⑫														-	-	-	-	-	-
OTHER COSTS ⑪	Exhibit A, SOW 8	Exhibit A, Attach I						Budgeted Amount		Budgeted Amount				Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total
																-	-	-	-
																-	-	-	-
																-	-	-	-
TOTAL OTHER COSTS (paid by State WIC contract)									-		-			-	-	-	-	-	-
Total In-Kind for Other Costs ⑫														-	-	-	-	-	-
INDIRECT							Percent	Budgeted Amount	Percent	Budgeted Amount	Percent		Amended Percent	Budgeted Amount	Budget Adj.	Amended Budgeted Amount	Total	Total Budget Adj.	Amended Total
Total Personnel Costs							17.50000%	108,183	25.00000%	186,377	19.18000%		19.50000%	121,136	7,917	129,053	415,696	7,917	423,613
TOTAL INDIRECT (paid by State WIC contract)									108,183		186,377			121,136	7,917	129,053	415,696	7,917	423,613
Total In-Kind for Indirect ⑫									110,347		71,942			111,476	113,177	224,653	293,765	113,177	406,942
TOTAL BUDGET (paid by State WIC contract)									\$ 800,933		\$ 1,268,301			\$ 827,301	\$ 38,528	\$ 865,829	\$ 2,896,535	\$ 38,528	\$ 2,935,063
Total In-Kind for All Budget Line-Items ⑫									\$ 292,936		\$ 71,942			\$ 294,065	\$ 206,788	\$ 500,853	658,943	206,788	865,730

Contract Year:

Contract Amount:

Funding Changes:

Checks/Balances:

Year 1
\$ 800,933
\$ -
\$ -

Year 2
\$ 1,268,301
\$ -
\$ -

Year 3
\$ 865,829
\$ 38,528
\$ -

\*All costs will be reviewed by CDPH for approval

① Bilingual - Positions that receive Bilingual pay may show a higher budgeted amount. Justification and back-up documentation will be kept on file.

② Additional Pay (i.e., Longevity, Retention, Differential, COLA) - Positions that receive one or more of these additional compensations may show a higher budgeted amount. Justification and back-up documentation will be kept on file.

③ Overtime - Requires justification if amount does not seem reasonable. Justification will be kept on file.

④ Fringe Benefits - Justification and back-up documentation will be kept on file for any fringe benefit rate that exceeds 50%.

⑤ General Expenses - Includes minor equipment (i.e., office furniture, IT equipment, anthropometric items), professional certifications, audit costs, vehicle maintenance, IT maintenance, program materials, office expenses, etc.

⑥ Travel - All costs reimbursed shall be in accordance with CalHR rates.

⑦ Facility Costs - Includes rent, utilities, janitorial, security, and maintenance.

⑧ Capital Expenditures - Unit cost must be \$5,000 or more. Refer to Exhibit D, Provision 1 for procurement rules.

⑨ Equipment - Include telephone systems, information technology equipment, photocopy machines, etc.

⑩ Vehicles - Will be used for facility site visits, conferences, trainings, and outreach.

⑪ Other Costs - List the subcontractor's name and brief description of services provided.

⑫ In-Kind - Funds provided by the Parent Agency to cover WIC Program costs not included in the WIC Budget.