

**STANDARD AGREEMENT AMENDMENT**

STD 213A (Rev 6/03)

Check here if additional pages are added: 1 Page(s)

Agreement Number <b>15-10096</b>	Amendment Number <b>A03</b>
Registration Number:	

- This Agreement is entered into between the State Agency and Contractor named below:  



State Agency's Name <b>California Department of Public Health</b>	Also known as CDPH or the State
Contractor's Name <b>County of Nevada</b> <span style="float:right">(Also referred to as Contractor)</span>	
- The term of this Agreement is: **October 1, 2015** through **September 30, 2019**
- The maximum amount of this Agreement after this amendment is: **\$ 2,683,081** Two Million Six Hundred Eighty-Three Thousand Eighty One Dollars
- The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

- I. **Purpose of amendment:** *This amendment revises the Contractor's name from "Nevada County Public Health Department" to "County of Nevada." This amendment also shifts funds for fiscal years 3 and 4 of the Exhibit B, Attachment I, II, and III Budget, Detail Worksheet and Facility Costs in order to compensate the Contractor for actual expenditures invoiced.*
- II. *Certain changes made in this amendment are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).*

(Continued on next page)

All other terms and conditions shall remain the same.

**IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.**

<b>CONTRACTOR</b>		<b>CALIFORNIA</b> Department of General Services Use Only
Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.) <b>County of Nevada</b>		
By (Authorized Signature) 	Date Signed (Do not type)	
Printed Name and Title of Person Signing <b>Edward Scofield, Chair, Board of Nevada County Supervisors</b>		
Address <b>950 Maidu Avenue Nevada City, CA 95959</b>		
<b>STATE OF CALIFORNIA</b>		
Agency Name <b>California Department of Public Health</b>		<input type="checkbox"/> Exempt per:
By (Authorized Signature) 	Date Signed (Do not type)	
Printed Name and Title of Person Signing <b>Jeffrey Mapes, Chief, Contracts Management Unit</b>		
Address <b>1616 Capitol Avenue, Suite 74.262, MS 1802, P.O. Box 997377, Sacramento, CA 95899-7377</b>		

III. Exhibit A, Scope of Work, Provision 5 is revised as follows:

**5. Project Representatives**

A. The project representatives during the term of this Agreement will be:

<b>California Department of Public Health</b>	<del>Nevada County Public Health Department</del> <b>County of Nevada</b>
<del>Paul Melnikov</del> <b>Pia Boling</b> , Contract Manager Telephone: (916) 928-8616 <b>8543</b> Fax: (916) 440-8850 E-mail: <del>Paul.Melnikov@cdph.ca.gov</del> <b>Pia.Boling@cdph.ca.gov</b>	Jill Blake, Public Health Director, MPA Telephone: (530) 265-1732 Fax: (530) 271-0837 E-mail: jill.blake@co.nevada.ca.us

B. Direct all inquiries to:

<b>California Department of Public Health</b>	<del>Nevada County Public Health Department</del> <b>County of Nevada</b>
CDPH/WIC Division Attention: <del>Paul Melnikov</del> <b>Pia Boling</b> Local Operations Section I 3901 Lennane Drive Sacramento, CA 95834  Telephone: (916) 928-8616 <b>8543</b> Fax: (916) 440-8850 E-mail: <del>Paul.Melnikov@cdph.ca.gov</del> <b>Pia.Boling@cdph.ca.gov</b>	Nevada County Public Health Department Attention: Debra Wilson Senior Nutritionist, MPH, RD, CLE 988 McCourtney Road Grass Valley, CA 95949  Telephone: (530) 470-2439 Fax: (530) 273-8290 E-mail: debra.wilson@co.nevada.ca.us

**C. All payments from CDPH to the Contractor shall be sent to the following address:**

Remittance Address
<b><u>Contractor: County of Nevada</u></b>
<b><u>Attention: Agency Director</u></b>
<b><u>950 Maidu Avenue</u></b>
<b><u>Nevada City, CA 95959</u></b>
<b><u>Phone: (530) 265-1732</u></b>
<b><u>Fax:</u></b>
<b><u>E-mail: Jill.Blake@co.nevada.ca.us</u></b>

~~C.~~ **D.** Either party may change the information in paragraphs A or B **A, B or C** above by giving written notice to the other party. These changes shall not require an amendment to this Agreement.

**Exhibit B, Attachment I A2-A3  
Budget**

	Year 1	Year 2			Year 3			Year 4			Totals	Total Adj.	Totals Amendment A02
	10/1/2015 - 9/30/2016	10/1/2016 - 9/30/2017			10/1/2017 - 9/30/2018			10/1/2018 - 9/30/2019					
	Budget Amendment-A02	Budget	Budget Adj.	Budget Amendment-A02	Budget	Budget Adj.	Budget Amendment-A02	Budget	Budget Adj.	Budget Amendment A02			
<b>Personnel</b>													
Total Salaries and Wages	304,288	316,207	-	316,207	319,491	23,324	342,815	327,237	22,854	350,091	1,267,223	46,178	1,313,401
Fringe Benefits	202,321	203,921	-	203,921	207,637	(2,291)	205,346	207,959	1,745	209,704	821,838	(546)	821,292
<b>Personnel</b>	<b>506,609</b>	<b>520,128</b>	<b>-</b>	<b>520,128</b>	<b>527,128</b>	<b>21,033</b>	<b>548,161</b>	<b>535,196</b>	<b>24,599</b>	<b>559,795</b>	<b>2,089,061</b>	<b>45,632</b>	<b>2,134,693</b>
<b>Operating Expenses</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Totals</b>	<b>Adj.</b>	<b>Total Amendment A02</b>
Minor Equipment	7,200	-	-	-	-	-	-	-	-	-	7,200	-	7,200
General Office Expenses	15,070	24,251	-	24,251	19,943	(11,817)	8,126	15,832	(13,911)	1,921	75,096	(25,728)	49,368
Training	3,000	3,600	-	3,600	3,275	-	3,275	2,375	675	3,050	12,250	675	12,925
Travel	4,860	5,290	-	5,290	3,835	(3,165)	670	3,315	(3,315)	-	17,300	(6,480)	10,820
Professional Certifications	-	-	-	-	-	-	-	-	-	-	-	-	-
Outreach	1,000	500	-	500	500	(500)	-	500	(500)	-	2,500	(1,000)	1,500
Media/Promotion	-	-	-	-	-	-	-	-	-	-	-	-	-
Program Materials	-	-	-	-	-	-	-	-	-	-	-	-	-
Vehicle Maintenance	-	-	-	-	-	-	-	-	-	-	-	-	-
Audit	-	-	-	-	-	-	-	-	-	-	-	-	-
Facility Costs (See Exhibit B Attachment III for breakdown)	38,772	38,772	-	38,772	38,772	-	38,772	38,772	-	38,772	155,088	-	155,088
<b>Operating Expenses</b>	<b>69,902</b>	<b>72,413</b>	<b>-</b>	<b>72,413</b>	<b>66,325</b>	<b>(15,482)</b>	<b>50,843</b>	<b>60,794</b>	<b>(17,051)</b>	<b>43,743</b>	<b>269,434</b>	<b>(32,533)</b>	<b>236,901</b>
<b>Major Equipment</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Totals</b>	<b>Adj.</b>	<b>Total Amendment A02</b>
Telephone System	-	-	-	-	-	-	-	-	-	-	-	-	-
Information Technology Equipment	-	-	-	-	-	-	-	-	-	-	-	-	-
Vehicle (s)	-	-	-	-	-	-	-	-	-	-	-	-	-
Photocopy Equipment	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Major Equipment</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Subcontracts</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Totals</b>	<b>Adj.</b>	<b>Total Amendment A02</b>
<b>Subcontracts</b>	<b>20,800</b>	<b>17,700</b>	<b>-</b>	<b>17,700</b>	<b>17,700</b>	<b>(8,075)</b>	<b>9,625</b>	<b>17,700</b>	<b>(10,500)</b>	<b>7,200</b>	<b>73,900</b>	<b>(18,575)</b>	<b>55,325</b>
<b>Indirect Costs</b>	<b>Budget Amendment-A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment A02</b>	<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amendment-A02</b>	<b>Totals</b>	<b>Adj.</b>	<b>Total Amendment A02</b>
<b>Indirect Costs</b>	<b>60,793</b>	<b>62,415</b>	<b>-</b>	<b>62,415</b>	<b>63,255</b>	<b>2,524</b>	<b>65,779</b>	<b>64,223</b>	<b>2,952</b>	<b>67,175</b>	<b>250,686</b>	<b>5,476</b>	<b>256,162</b>
<b>TOTAL COSTS</b>	<b>658,104</b>	<b>672,656</b>	<b>-</b>	<b>672,656</b>	<b>674,408</b>	<b>-</b>	<b>674,408</b>	<b>677,913</b>	<b>-</b>	<b>677,913</b>	<b>2,683,081</b>	<b>-</b>	<b>2,683,081</b>

**Exhibit B, Attachment II A2-A3**  
**Detail Worksheet**

Personnel	Exhibit A SOW 6.A	Exhibit A Attach I	Current Base Annual Salary Minimum	Current Base Annual Salary Maximum	Current Base Annual Salary Amend A02	Current Base Annual Salary Maximum Amend A02	Year 1		Year 2		Year 3				Year 4				Totals	Totals Adj.	Totals Amend A02		
							10/1/2015 - 9/30/2016	10/1/2016 - 9/30/2017	FTE	Budget Amend A02	FTE	Budget Amend A02	FTE	FTE Amend A02	Budget	Budget Adj.	Budget Amend A02	FTE				FTE Amend A02	Budget
WIC Director	1-18, 20-22	1-8	74,581	75,327	91,048	91,959	1.00	78,365	1.00	86,663	1.00		86,663	698	87,361	1.00		86,663	698	87,361	338,354	1,396	339,750
WIC Nutritionist	1-9, 12, 15	1-4, 7	67,501	68,176	82,404	83,229	0.75	50,678	0.75	55,484	0.75		57,443	1,857	59,300	0.75		57,443	1,857	59,300	221,048	3,714	224,762
Senior WIC Nutrition Assistant	1-9, 12, 18	1-4, 5-7	40,585	40,992	49,546	50,042	1.00	39,824	1.00	42,248	1.00		44,389	1,900	46,289	1.00		44,389	1,900	46,289	170,850	3,800	174,650
WIC Nutrition Assistant	1, 9, 12	1-4, 7	40,585	40,992	49,546	50,042	0.40	18,320	0.40	18,320	0.40		18,320	2,973	21,293	0.40		18,320	2,973	21,293	73,280	5,946	79,226
WIC Nutrition Assistant (Peer Counselor)	1, 9, 12	1-4, 7-8	36,732	37,100	44,843	45,291	1.00	32,621	1.00	35,319	1.00		35,319	5,443	40,762	1.00		40,638	4,443	45,081	143,897	9,886	153,783
WIC Nutrition Assistant	1, 9, 12	1-4, 7-8	33,245	37,100	40,585	45,291	1.00	31,001	1.00	33,528	1.00		33,528	7,234	40,762	1.00		37,021	6,531	43,552	135,078	13,765	148,843
Peer Counselor	9, 12	8	33,245	33,577	40,585	40,991	1.45	45,164	1.40	42,566	1.40	1.30	42,596	3,275	45,871	1.40		42,763	3,275	46,038	173,089	6,550	179,639
Program Manager	4-5, 8, 11, 16-17, 19-20	5	96,477		117,779		0.08	8,315	0.02	2,079	0.01		1,233	(56)	1,177	0.00	0.01	-	1,177	1,177	11,627	1,121	12,748
Overtime																							
<b>Total Salaries and Wages</b>								<b>304,288</b>		<b>316,207</b>			<b>319,491</b>	<b>23,324</b>	<b>342,815</b>			<b>327,237</b>	<b>22,854</b>	<b>350,091</b>	<b>1,267,223</b>	<b>46,178</b>	<b>1,313,401</b>
<b>Fringe Benefits</b>								<b>Percent</b>	<b>Budget Amend A02</b>	<b>Percent</b>	<b>Budget Amend A02</b>	<b>Percent</b>	<b>Budget</b>	<b>Percent Amend A02</b>	<b>Budget Amend A02</b>	<b>Percent</b>	<b>Budget</b>	<b>Percent Amend A02</b>	<b>Budget Amend A02</b>		<b>Budget Adj.</b>	<b>Budget Amend A02</b>	
							66.49%	202,321	64.49%	203,921	64.99%		207,637	59.9000%	205,346	63.55%	207,959	59.9000%	209,704		821,838	(546)	821,292
<b>Total Personnel</b>								<b>506,609</b>		<b>520,128</b>			<b>527,128</b>		<b>548,161</b>			<b>535,196</b>		<b>559,795</b>	<b>2,089,061</b>	<b>45,632</b>	<b>2,134,693</b>
<b>Operating Expenses</b>	<b>Exhibit A SOW</b>	<b>Exhibit A Attach I</b>						<b>Budget Amend A02</b>		<b>Budget Amend A02</b>			<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amend A02</b>			<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amend A02</b>		<b>Budget Adj.</b>	<b>Budget Amend A02</b>
Minor Equipment	17, 18	1-9						7,200													7,200		7,200
General Office Expenses	EXA1.C, 17, 18	1-9						15,070		24,251			19,943	(11,817)	8,126			15,832	(13,911)	1,921	75,096	(25,728)	49,368
Training	7	1-9						3,000		3,600			3,275		3,275			2,375	675	3,050	12,250	675	12,925
Travel	8							4,860		5,290			3,835	(3,165)	670			3,315	(3,315)	-	17,300	(6,480)	10,820
Professional Certifications	4, 5							-		-			-		-			-		-	-	-	-
Outreach		5						1,000		500			500	(500)	-			500	(500)	-	2,500	(1,000)	1,500
Media/Promotion		5						-		-			-		-			-		-	-	-	-
Program Materials	6	1-9						-		-			-		-			-		-	-	-	-
Vehicle Maintenance	8, 19							-		-			-		-			-		-	-	-	-
Audit	9, 10, 12-14							-		-			-		-			-		-	-	-	-
Facility Costs (See Exhibit B Attachment III for breakdown)	11							38,772		38,772			38,772	-	38,772			38,772	-	38,772	155,088	-	155,088
<b>Total Operating Expenses</b>								<b>69,902</b>		<b>72,413</b>			<b>66,325</b>	<b>(15,482)</b>	<b>50,843</b>			<b>60,794</b>	<b>(17,051)</b>	<b>43,743</b>	<b>269,434</b>	<b>(32,533)</b>	<b>236,901</b>
<b>Major Equipment</b> <sup>⑧</sup> unit cost must be \$5,000 or more	<b>Exhibit A SOW</b>	<b>Exhibit A Attach I</b>						<b>Budget Amend A02</b>		<b>Budget Amend A02</b>			<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amend A02</b>			<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amend A02</b>		<b>Budget Adj.</b>	<b>Budget Amend A02</b>
Telephone System	17	1-9						-		-			-		-			-		-	-	-	-
Information Technology Equipment	17, 18, 20, 21	1-9						-		-			-		-			-		-	-	-	-
Vehicle (s)	8, 17, 18, 19							-		-			-		-			-		-	-	-	-
Photocopy Equipment	6, 17, 18							-		-			-		-			-		-	-	-	-
<b>Total Major Equipment</b>								<b>-</b>		<b>-</b>			<b>-</b>	<b>-</b>	<b>-</b>			<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Subcontracts</b> <sup>⑨</sup>	<b>Exhibit A SOW</b>	<b>Exhibit A Attach I</b>						<b>Budget Amend A02</b>		<b>Budget Amend A02</b>			<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amend A02</b>			<b>Budget</b>	<b>Budget Adj.</b>	<b>Budget Amend A02</b>		<b>Budget Adj.</b>	<b>Budget Amend A02</b>
Lisa Robinson - IBCLC support (Provide Breastfeeding/Lactation support services to participants)								13,000		10,500			10,500	(8,075)	2,425			10,500	(10,500)	-	44,500	(18,575)	25,925
Kristine Jessen-Mather - IBCLC support (Provide Breastfeeding/Lactation support services to participants)								7,800		7,200			7,200	-	7,200			7,200		7,200	29,400	-	29,400
<b>Total Subcontracts</b>								<b>20,800</b>		<b>17,700</b>			<b>17,700</b>	<b>(8,075)</b>	<b>9,625</b>			<b>17,700</b>	<b>(10,500)</b>	<b>7,200</b>	<b>73,900</b>	<b>(18,575)</b>	<b>55,325</b>
<b>Total Indirect Costs</b>								<b>Percent</b>	<b>Budget Amend A02</b>	<b>Percent</b>	<b>Budget Amend A02</b>	<b>Percent</b>	<b>Budget</b>	<b>Percent Amend A02</b>	<b>Budget Amend A02</b>	<b>Percent</b>	<b>Budget</b>	<b>Percent Amend A02</b>	<b>Budget Amend A02</b>		<b>Budget Adj.</b>	<b>Budget Amend A02</b>	
							% of Total Personnel Costs	12.0000%	60,793	12.0000%	62,415	12.0000%	63,255		65,779	12.0000%	64,223		67,175		250,686	5,476	256,162
<b>Total Costs</b>								<b>658,104</b>		<b>672,656</b>			<b>674,408</b>	<b>-</b>	<b>674,408</b>			<b>677,913</b>	<b>-</b>	<b>677,913</b>	<b>2,683,081</b>	<b>-</b>	<b>2,683,081</b>

<b>658,104.00</b>	<b>672,656.00</b>	Revised Yr. 3 Budget	<b>674,408.00</b>	Revised Yr. 4 Budget	<b>677,913.00</b>
<b>-</b>	<b>-</b>	Yr. 3 - Budget Increase	<b>-</b>	Yr. 4 - Budget Increase	<b>-</b>
<b>0</b>	<b>0</b>	Yr. 3 - Checks/Balances	<b>0</b>	Yr. 4 - Checks/Balances	<b>0</b>

- ① Bilingual - Positions that receive Bilingual pay will show a higher salary. Justification will be kept on file with the original contract.
- ② Longevity, Retention, Differential and COLA - Positions that receive these compensations will show a higher salary. Justification and Union Contract will be kept on file with the original contract.
- ③ Overtime - Is budgeted for up to a 3% increase for each year.
- ④ Fringe Benefits - Any fringe benefit Years 1-4 that exceeds 50% will need a written justification.
- ⑤ General Office Expenses -Effective this year, pursuant to new OMB rules, Minor Equipment, and General Office Expenses, will include Desks, Computers, Chairs, Tables, Modular furniture, Monitors and printers.
- ⑥ Vehicle Maintenance - maintenance over \$500 will need CDPH/WIC Division approval.
- ⑦ Facility Costs - Includes Rent, Janitorial, Security, Maintenance and Utilities
- ⑧ Major Equipment - Refer to Exhibit D(F) page 3, Paragraph 3 for instructions; Vehicle(S)-Will be used for Facility Site Visits, Conferences, Trainings, and Outreach. **Unit cost must be \$5,000 or more.**
- ⑨ Subcontractors - List the subcontractor's name and short list of services provided. If the subcontractor has not been selected, enter TBD and list of services to be provided.

**Exhibit B, Attachment III A2 A3  
Facility Costs**

**Total Facility Costs: 155,088**

Street Address, City, Zip Code	WIC MIS Clinic Site # or N/A	Type of Space (Clinic Site, Administrative Site, Training Center, Warehouse, Storage Area, satellite clinic site)	Total Square Feet	Year 1 Total Costs			Year 2 Total Costs			Year 3 Total Costs						Year 4 Total Costs							
				Total Cost of Site Per Month Amendment A02	New Total Amendment A02	Amended Cost of Space Per Year	Total Cost of Site Per Month Amendment A02	New Total Amendment A02	Amended Cost of Space Per Year	Total Cost of Site Per Month	Total Cost of Site Per Month Adj.	Total Cost of Site Per Month Amendment A02	Price Per Square Foot	Price Per Square Foot Adj.	New Total Amendment A02	Amended Cost of Space Per Year	Total Cost of Site Per Month	Total Cost of Site Per Month Adj.	Total Cost of Site Per Month Amendment A02	Price Per Square Foot	Price Per Square Foot Adj.	New Total Amendment A02	Amended Cost of Space Per Year
471 SuttonWay #204, GrassValley 95945	1	Clinic Site	2,293	3,111	1.36	12,444	-	1.36	-	-	-	-	1.36	-	1.36	-	-	-	-	1.36	-	1.36	-
175 Spring Hill Dr Grass Valley 95945	N/A	Storage Area	100	120	1.20	1,440	120	1.20	1,440	120	-	120	1.20	-	1.20	1,440	120	-	120	1.20	-	1.20	1,440
10075 Levon Ave. #207 Truckee, 96161	4	Clinic Site	144	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
988 McCourtney Road, Grass Valley, 95949	1	Clinic Site	2,156	3,111	1.03	24,888	3,111	1.06	37,332	3,111	-	3,111	1.09	-	1.09	37,332	3,111	-	3,111	1.12	-	1.12	37,332