

**AMENDED COOPERATIVE AGREEMENT
SIGNATURE PAGE**

AGREEMENT NUMBER 23-0529-007-SF
AMENDMENT NUMBER 2

1. This Agreement is entered into between the State Agency and the Recipient named below:

STATE AGENCY'S NAME

DEPARTMENT OF FOOD AND AGRICULTURE (CDFA)

RECIPIENT'S NAME

COUNTY OF EL DORADO

2. The term of this Agreement is: July 1, 2024 through June 30, 2025

3. The maximum amount of this Agreement is: \$967,234.00

4. The parties agree to comply with the terms and conditions of the following exhibits which are by this reference made a part of the Agreement:

Paragraph three (3) of the Agreement is hereby amended to increase the Agreement by \$400,000.00 for a new total not to exceed \$967,234.00.

A Budget for the increased amount is attached (1 Page) and is hereby incorporated into the Agreement.

The increase in funds is necessary due to Pierce's Disease Control Program establishing a Proclamation of an Emergency Program for the Serrano area to address the need for GWSS eradication and allow El Dorado County to conduct chemical control measures based on GWSS detections.

All other terms and conditions of this Agreement shall remain the same.

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

RECIPIENT

RECIPIENT'S NAME (*Organization's Name*)

COUNTY OF EL DORADO

BY (*Authorized Signature*)



DATE SIGNED

PRINTED NAME AND TITLE OF PERSON SIGNING

George Turnboo, El Dorado County Board of Supervisor Chair

ADDRESS

311 Fair Lane, Placerville, CA 95667

STATE OF CALIFORNIA

AGENCY NAME

DEPARTMENT OF FOOD AND AGRICULTURE (CDFA)

BY (*Authorized Signature*)



DATE SIGNED

PRINTED NAME AND TITLE OF PERSON SIGNING

ANDREA PERKINS, STAFF SERVICES MANAGER I, OFFICE OF GRANTS ADMINISTRATION

ADDRESS

1220 N STREET, ROOM 120
SACRAMENTO, CA 95814

PIERCE'S DISEASE CONTROL PROGRAM
PROPOSED FY 2024-25 DELIMITATION BUDGET (Revision 2)
County: EL DORADO

DELIMITATION REGULATORY/TREATMENT ACTIVITIES

***PERSONNEL SERVICES**

	Hourly	Number of	Salary	Benefit	Benefit	Total
Permanent Staff						
Ag Biologist III			-	35%	-	-
Assistant Ag Commissioner			-	35%	-	-
Classification C			-		-	-
Classification D			-		-	-
Classification E	-	0	-		-	-
Total Permanent		0	-		-	-
Temporary Staff						
Classification D	-	0	-	10%	-	-
Classification E	-	0	-	14%	-	-
Total Temporary		0	-		-	-
Overtime						
Classification D	-	0	-	10%	-	-
Classification E	-	0	-	14%	-	-
Total Overtime		0	-		-	-
Total Personnel Services		0	-		-	-

OPERATING EXPENSES

General Expense/Supplies

Post Cards						-
Mailing Services						-
Item C						-
Postage						-
Communication						
**Vehicle Expense	Rate	Miles				
County	0.700	0				-
State						
	Monthly	Total	Months			
Lease vehicles						-
Gasoline for leased vehicle						
Travel	Airfare	Rental Car	Per Diem	Other		
Event A (Date(s))				-		-
Pest Control Operator	Rate	Hours				
Location A (Date(s))	550.00	727.272720				400,000.00
Indirect Cost	25%					-
Total Operating Expenses						400,000.00
Total Regulatory/Treatment Activities						\$ 400,000.00

*Subject to change due to salary increases, available work force, labor contract changes, program modifications, etc.

**Subject to change due to federal mileage rate changes.