140-F1311 County of El Dorado 2012-13 Agreement No. EPO 12-10

2012-13 Public Health Emergency Preparedness (PHEP), General Fund Pandemic Influenza (GF Pan Flu) and Hospital Preparedness Program (HPP) Funding

AGREEMENT

PHEP and HPP Funding Opportunity Number CDC-RFA-TP12-1201 GF Pan Flu Funding Authority – 2012 Budget Act, Chapter 21

- 1. This Agreement is entered into between the California Department of Public Health, hereinafter referred to as "CDPH" and the County of El Dorado, hereinafter referred to as "Local Health Department (LHD)" and/or "Local HPP Entity".
- **2.** The term of this Agreement is July 1, 2012 through June 30, 2013.
- **3.** The maximum amount payable under this Agreement is \$505,482, and is allocated as follows:
 - \$202,018, PHEP Base Allocation (7/1/12 6/30/13)
 - \$0, Laboratory Allocation (7/1/12 6/30/13)
 - \$46,329, Cities Readiness Initiative Allocation (7/1/12 6/30/13)
 - \$190,849, HPP Allocation (7/1/12 6/30/13)
 - \$66,286, GF Pan Flu Allocation (7/1/12 6/30/13)
- **4.** The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of this Agreement.

Exhibit A – Scope of Work	03 Pages
Exhibit B – Budget Detail and Budget Provisions	04 Pages
Exhibit B – Attachment 1, Criteria for Payments	01 Page
Exhibit C – Additional Provisions	02 Pages
Exhibit D(F) – Special Terms and Conditions (Federal)	25 Pages
Notwithstanding provisions 3, 4, 6, 12, 13, 17, 22, 23, 27, and 30 which do not apply to this Agreement.	
Exhibit E – Non-Supplantation Certification Form	01 Page

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

CONTRACTOR		
CONRACTOR'S NAME		
County of El Dorado		
BY (Authorized Signature)	DATE SIGNED (Do not type -signor must date)	
PRINTED NAME AND TITLE OF PERSON SIGNING		
John R. Knight, Chair – Board of Supervisors		
ADDRESS		
Health and Human Services Agency		
3057 Briw Road, Suite A, Placerville, CA 95667		
STATE OF CALIFORNIA		
AGENCY NAME		
California Department of Public Health		
BY (Authorized Signature)	DATE SIGNED	
ADDRESS		
1615 Capitol Avenue, MS 7002, P.O. Box 997377, Sacramento, CA 95899-7377		

Contract Administrator:

The County Officer or employee with responsibility for administering this Agreement is Chris Weston, Public Health Preparedness Manager or successor.