

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

710



**FROM:** Department of Public Health

**SUBMITTAL DATE:**

**SUBJECT:** Approve Agreement #13-20527 between California Department of Public Health and the County of Riverside Department of Public Health for the period of October 1, 2013 through September 30, 2016. Districts – All [\$11,195,880 - Federal Funds]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Approve Agreement #13-20527 between California Department of Public Health and the County of Riverside Department of Public Health for an increase of \$262,525 for a total amount of \$11,195,880 for the period of October 1, 2013 through September 30, 2016;
2. Authorize the Chairman of the Board to sign six (6) originals of the Standard Agreement face sheet;
3. Authorize the Chairman of the Board to sign six (6) originals of the Certification Regarding Lobbying;
4. Authorize the Chairman of the Board to sign four (4) originals of the (3) year agreements with the City of Riverside in the amount of two million one hundred fifty one thousand three hundred ten dollars (\$2,151,310) for the period of performance of October 1, 2013 through October 31, 2016;

**RECOMMENDED MOTION's:** (Continued Page 2)

GH:cr/sm/ys

*Sarah Mack for Susan Harrington*  
Sarah Mack, Deputy Director for  
Susan D. Harrington, Director  
Department of Public Health

FORM APPROVED BY COUNTY COUNSEL  
BY: *NEAL R. KIPNIS* DATE: 12/14/13  
Departmental Concurrence

Purchasing: *Mark Seller*  
Mark Seller, Assistant Director

A-30  
 Positions Added  
 Change Order  
 4/5 Vote

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
<b>COST</b>	\$ 2,849,585	\$ 3,524,793	\$ 11,195,880	\$ 0	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
<b>NET COUNTY COST</b>	\$ 142,479	\$ 176,240	\$ 559,794	\$ 0	
<b>SOURCE OF FUNDS:</b> 100% Network for a Healthy California Federal funds				<b>Budget Adjustment:</b> No	
				<b>For Fiscal Year:</b> 13/14	

**C.E.O. RECOMMENDATION:**

APPROVE

BY: *Jennifer L. Sargent*  
Jennifer L. Sargent

**County Executive Office Signature**

**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Jeffries, seconded by Supervisor Ashley and duly carried,  
IT WAS ORDERED that the above matter is approved as recommended.

**Ayes:** Jeffries, Stone, Benoit and Ashley  
**Nays:** None  
**Absent:** Tavaglione  
**Date:** December 17, 2013  
**xc:** Public Health

Kecia Harper-Ihem  
Clerk of the Board  
By: *Kecia Harper-Ihem*  
Deputy

**Prev. Agn. Ref.:** 3.18, September 20, 2012    **Districts:** All/All    **Agenda Number:**

**3-41**

# SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

**SUBJECT:** Approve Agreement #13-20527 between California Department of Public Health and the County of Riverside Department of Public Health for the period of October 1, 2013 through September 30, 2016.  
Districts – All [\$11,195,880 - Federal Funds]

**FORM 11**

**DATE:**

**PAGE:** 2 of 4

**RECOMMENDED MOTION's (Continued):** That the Board of Supervisors:

5. Authorize the Chairman of the Board to sign four (4) originals of the three (3) year agreements with the City of Perris in the amount of nine hundred thirty four thousand two hundred twenty nine dollars (\$934,229) for the period of performance of October 1, 2013 through October 31, 2015;
6. Authorize the Chairman of the Board to sign four (4) originals of the three (3) year agreements with the City of Jurupa Valley in the amount of seven hundred twenty five thousand dollars (\$725,000) for the period of performance of October 1, 2013 through October 31, 2016; and
7. Authorize the Purchasing Agent to sign subsequent amendments not to exceed authorized amount.

## **BACKGROUND:**

### **Summary**

Agreement #12-10194 approved by the Board of Supervisors on September 20, 2012, Board Agenda Number 3.18, in the amount of \$10,933,355 for the period of October 1, 2012 through September 30, 2016 has been superseded by Agreement #13-20527.

Agreement #13-20527 increases the total award by \$262,525 for a new total of \$11,195,880. The increase of this amount is for FFY13/14 from \$3,361,906 to \$3,624,431. This increase will be applied to County FY14/15 and will not require a budget adjustment to the current County FY13/14.

The California Department of Public Health, Cancer Prevention and Nutrition Section represents a statewide movement of local, state and national partners collectively working toward improving the health status of low-income Californians through increased fruit and vegetable consumption and daily physical activity. Multiple venues are used to facilitate behavior change in the homes, schools, worksites, and communities of low-income Californians to create environments that support fruit and vegetable consumption and physical activity. Network funds must be spent on "qualifying nutrition and physical programs in Riverside County through partnerships and coalitions to promote nutrition and physical activity. The target population for this program is eligible for participation in the Supplemental Nutrition Assistance Program Education (SNAP-Ed).

The Department of Public Health, is subcontracting with four cities: City of Riverside, City of Jurupa Valley, City of Perris and a fourth city or subcontractor within the desert region still to be determined. Each subcontract is for a period of three (3) years to implement Supplemental Nutrition Assistance Program Nutrition Education (SNAP-Ed). The fourth subcontract agreement will be submitted to the Board of Supervisors at a later date upon completion of negotiations. The cities were invited and selected to participate in the *Network for a Health California* Local Health Department grant based on meeting qualifying criteria dictated by State *Network* Local Health Department agreement approved by Board of Supervisors on September 20, 2012 Agenda Item 3.18. Due to limited funding, only the top four ranking cities were selected for funding.

### **Impact on Citizens and Businesses**

Based on qualifying areas within the County of Riverside, SNAP-ED eligible population will be targeted to increase the consumption of healthy foods and beverages, reduce consumption of less healthy foods and beverages and to increase physical activity as part of the *Network for a Health California* Local Health Department (LHD) grant.

**SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

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**FORM 11**

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**SUPPLEMENTAL:**

**Additional Fiscal Information**

The Department of Public Health, *Network* program receives 100% of its funding from the State as a pass through from the Federal government. The *Network* program year is based on a federal fiscal year (October 1, 2013- September 30, 2016).

The table below outlines how the funds are distributed over the three year term of the agreement. Funding allocation for the county fiscal years is as follows:

<b>Multi-year contract: Federal and County FY Budget Comparison Table</b>						
<b>County Fiscal Year (FY)</b>	<b>07/01/12 - 06/30/13</b>	<b>07/01/13 - 06/30/14</b>	<b>07/01/14 - 06/30/15</b>	<b>07/01/15 - 06/30/16</b>	<b>07/01/16 - 06/30/17</b>	
<b>Contract Total</b>	\$ 984,466	\$ 2,849,585	\$ 3,524,793	\$ 3,079,593	\$ 757,443	<b>\$11,195,880</b>
<b>Federal Fiscal Year (FFY)</b>	<b>10/01/12 - 09/30/13</b>	<b>10/01/13 - 09/30/14</b>	<b>10/01/14 - 09/30/15</b>	<b>10/01/15 - 09/30/16</b>		
<b>Contract Total</b>	\$ 1,312,623	\$ 3,624,431	\$ 3,229,053	\$ 3,029,773		<b>\$11,195,880</b>

The table below outlines how the funds are distributed over the three year term of the agreement for the four subcontracting cities. Funding allocation for the county fiscal years is as follows:

<b>Multi-year contract: County FY Budget Table</b>						
<b>County Fiscal Year (FY)</b>	<b>07/01/13 - 06/30/14</b>	<b>07/01/14 - 06/30/15</b>	<b>07/01/15 - 06/30/16</b>	<b>06/30/16 - 09/30/16</b>	<b>Total 3 Yr Contract</b>	
<b>City of Riverside</b>	\$ 565,882	\$ 728,171	\$ 687,905	\$ 169,352	<b>\$ 2,151,310</b>	
<b>City of Perris</b>	\$ 245,741	\$ 316,216	\$ 298,730	\$ 73,542	<b>\$ 934,229</b>	
<b>City of Jurupa Valley</b>	\$ 168,750	\$ 243,750	\$ 250,000	\$ 62,500	<b>\$ 725,000</b>	
<b>City TBD</b>	\$ 132,487	\$ 170,482	\$ 161,056	\$ 39,649	<b>\$ 503,674</b>	
<b>Contract Total</b>	\$ 1,112,860	\$ 1,458,619	\$ 1,397,691	\$ 345,043	<b>\$4,314,213</b>	<b>\$4,314,213</b>

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**FORM 11**

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The Net County Cost has been calculated at 5% based on FY12/13 total revenue. The table below shows the Net County Cost over the three year term of the agreement:

<b>Multi-year contract: County FY Budget Net County Cost Table</b>						
<b>County Fiscal Year (FY)</b>	<b>07/01/12 - 06/30/13</b>	<b>07/01/13 - 06/30/14</b>	<b>07/01/14 - 06/30/15</b>	<b>07/01/15 - 06/30/16</b>	<b>07/01/16 - 06/30/17</b>	
<b>Contract Total</b>	\$ 984,466	\$ 2,849,585	\$ 3,524,793	\$ 3,079,593	\$ 757,443	<b>\$11,195,880</b>
	5%	5%	5%	5%	5%	<b>5%</b>
<b>Net County Cost</b>	\$49,223	\$142,279	\$176,240	\$153,980	\$37,872	<b>\$559,594</b>

WHEN DOCUMENT IS FULLY EXECUTED RETURN  
CLERK'S COPY  
to Riverside County Clerk of the Board, Stop 1010  
Post Office Box 1147, Riverside, Ca 92502-1147  
Thank you.

**NUTRITION EDUCATION AND OBESITY PREVENTION PROGRAM**  
**Awarded By**  
**THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter**  
**“Department”**  
**TO**  
**County of Riverside Department of Public Health, hereinafter**  
**“Grantee”**  
**Implementing the project, “Supplemental Nutrition Assistance**  
**Program-Education,” hereinafter “Project”**

**GRANT AGREEMENT NUMBER 13-20527**

The Department awards this Grant and the Grantee accepts and agrees to use the Grant funds as follows:

**AUTHORITY:** The Department has authority to grant funds for the Project under Health and Safety Code, Section 131085(a), (b).

**PURPOSE:** The Department shall provide a grant to and for the benefit of the Grantee; the Grantee agrees to create innovative partnerships that assist SNAP-Ed eligible consumers in adopting healthy eating and physical activity behaviors, as part of a healthy lifestyle. The Grantee will provide nutrition education and conduct nutrition activities to SNAP-Ed eligible families per Health and Safety Code Section 104650-104655. Grant agreement number 13-20527 supersedes contract number 12-10194.

**GRANT AMOUNT:** The maximum amount payable under this Grant shall not exceed Three Million Six Hundred Twenty-Four Thousand Four Hundred Thirty-One dollars (\$3,624,431) annually, for a total grant amount not to exceed \$11,195,880 (Year 1: 10/1/12-9/30/13 (FFY 2013) \$1,312,623; Year 2: 10/1/13-9/30/14 (FFY 2014) \$3,624,431; Year 3: 10/1/14-9/30/15 (FFY 2015), \$3,229,053; and Year 4: 10/1/15-9/30/16 (FFY 2016) \$3,029,773). No funds may be requested or invoiced for work performed or costs incurred after the end date. See Exhibit E, Additional Provisions, Additional Incorporated Documents, Network Local Projects Network for a Healthy California Guidelines Manual, Section II Fiscal, Section 500 Reimbursement Process.

**TERM OF GRANT:** The term of the Grant shall begin on October 1, 2013, and terminate on September 30, 2016.

**PROJECT REPRESENTATIVES:** The Project Representatives during the term of this Grant will be:

California Department of Public Health,  
Nutrition Education and Obesity Prevention  
Branch

**Attention:**  
Joy Fong, Program Manager

P.O. Box 997377  
Sacramento, CA 95899-7413  
Phone: (916) 650-6886  
Fax: (916) 449-5414  
E-mail: [joy.fong@cdph.ca.gov](mailto:joy.fong@cdph.ca.gov)

**Direct all inquiries to:**

California Department of Public Health,  
Nutrition Education and Obesity Prevention  
Branch

**Attention:**  
Jorge G. Leal, Grant Manager

P.O. Box 997377  
Sacramento, CA 95899-7413  
Phone: (916) 327-8018  
Fax: (916) 449-5414  
E-mail: [Jorge.leal@cdph.ca.gov](mailto:Jorge.leal@cdph.ca.gov)

Grantee: The County of Riverside  
Department of Public Health

**Attention:**  
John J. Benoit, Chairman  
Board of Supervisors

P.O. Box 7849  
Riverside, CA 92513  
Phone: (951) 358-5311  
Fax: (951) 358-5472  
E-mail: [LDelara@cbos.org](mailto:LDelara@cbos.org)

Grantee: The County of Riverside  
Department of Public Health

**Attention:**  
Nancy Allende, RD Supervising  
Nutritionist; Gayle Hoxter, MPH,  
RD Branch Chief

P.O. Box 7849  
Riverside, CA 92513  
Phone: (951) 358-5311  
Fax: (951) 358-5472  
E-mail: [nallende@rivcocha.org](mailto:nallende@rivcocha.org)  
[ghoxter@rivcocha.org](mailto:ghoxter@rivcocha.org)

Either party may change its Project Representative upon written notice to the other party.

**STANDARD PROVISIONS:** The following exhibits are attached and made a part of this Grant by the reference:

**EXHIBIT A: GRANT APPLICATION**

The Grant Application provides the scope of work, purpose, task schedule and list of deliverables.

**EXHIBIT A1: DELIVERABLES FOR LOCAL HEALTH DEPARTMENT GRANTS**

**EXHIBIT B: BUDGET DETAIL**

The approved budget supersedes the proposed budget in the Grant Application.

**EXHIBIT C: STANDARD GRANT CONDITIONS**

**EXHIBIT D: FEDERAL PROVISIONS**

**EXHIBIT E: ADDITIONAL PROVISIONS**

**GRANTEE REPRESENTATIONS:**

The Grantee(s) accept all terms, provisions, and conditions of this grant, including those stated in the Exhibits incorporated by reference above. The Grantee(s) shall fulfill all assurances and commitments made in the application, declarations, other accompanying documents, and written communications (e.g., e-mail, correspondence) filed in support of the request for grant funding. The Grantee(s) shall comply with and require its contractors and subcontractors to comply with all applicable laws, policies, and regulations.

IN WITNESS THEREOF, the parties have executed this Grant on the dates set forth below.

Executed By:

California Department of Public Health

*Yulanda Ume*  
Angela Salas, Chief  
Contracts & Purchasing Services Section

Date 1/24/14

County of Riverside

*John J. Benoit*  
John J. Benoit, Chairman  
Board of Supervisors

Date DEC 17 2013

FORM APPROVED COUNTY COUNSEL

BY *Neal R. Kipnis*  
NEAL R. KIPNIS DATE

ATTEST:

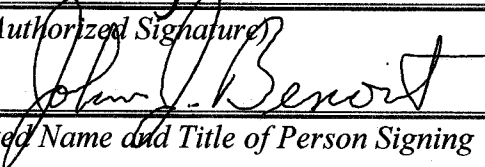
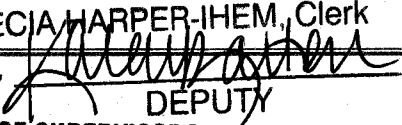
*Kecia Harper-Ihem*  
Kecia Harper-Ihem, Clerk

DEC 17 2013  
Date \_\_\_\_\_

CCC-307

**CERTIFICATION**

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY that I am duly authorized to legally bind the prospective Contractor to the clause(s) listed below. This certification is made under the laws of the State of California.

<i>Contractor/Bidder Firm Name (Printed)</i> County of Riverside		<i>Federal ID Number</i> 95-6000930
<i>By (Authorized Signature)</i> 		ATTEST: KECIA HARPER-IHEM, Clerk
<i>Printed Name and Title of Person Signing</i> <b>JOHN J. BENOIT</b> CHAIRMAN, BOARD OF SUPERVISORS		By  DEPUTY
<i>Date Executed</i> DEC 17 2013	<i>Executed in the County of</i> Riverside	

**CONTRACTOR CERTIFICATION CLAUSES**

1. **STATEMENT OF COMPLIANCE:** Contractor has, unless exempted, complied with the nondiscrimination program requirements. (Gov. Code §12990 (a-f) and CCR, Title 2, Section 8103) (Not applicable to public entities.)

2. **DRUG-FREE WORKPLACE REQUIREMENTS:** Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:

a. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.

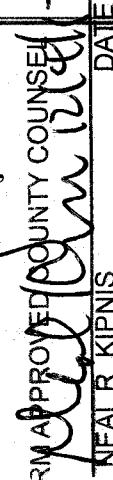
b. Establish a Drug-Free Awareness Program to inform employees about:

- 1) the dangers of drug abuse in the workplace;
- 2) the person's or organization's policy of maintaining a drug-free workplace;
- 3) any available counseling, rehabilitation and employee assistance programs; and,
- 4) penalties that may be imposed upon employees for drug abuse violations.

c. Every employee who works on the proposed Agreement will:

- 1) receive a copy of the company's drug-free workplace policy statement; and,
- 2) agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Contractor may be ineligible for award of any future State agreements if the department determines that any of the following has occurred: the Contractor has made false certification, or violated the

FORM APPROVED COUNTY COUNSEL  
 BY:   
 DATE: 12/17/13

DEC 17 2013 341



certification by failing to carry out the requirements as noted above. (Gov. Code §8350 et seq.)

3. NATIONAL LABOR RELATIONS BOARD CERTIFICATION: Contractor certifies that no more than one (1) final unappealable finding of contempt of court by a Federal court has been issued against Contractor within the immediately preceding two-year period because of Contractor's failure to comply with an order of a Federal court, which orders Contractor to comply with an order of the National Labor Relations Board. (Pub. Contract Code §10296) (Not applicable to public entities.)

4. CONTRACTS FOR LEGAL SERVICES \$50,000 OR MORE- PRO BONO REQUIREMENT: Contractor hereby certifies that contractor will comply with the requirements of Section 6072 of the Business and Professions Code, effective January 1, 2003.

Contractor agrees to make a good faith effort to provide a minimum number of hours of pro bono legal services during each year of the contract equal to the lessor of 30 multiplied by the number of full time attorneys in the firm's offices in the State, with the number of hours prorated on an actual day basis for any contract period of less than a full year or 10% of its contract with the State.

Failure to make a good faith effort may be cause for non-renewal of a state contract for legal services, and may be taken into account when determining the award of future contracts with the State for legal services.

5. EXPATRIATE CORPORATIONS: Contractor hereby declares that it is not an expatriate corporation or subsidiary of an expatriate corporation within the meaning of Public Contract Code Section 10286 and 10286.1, and is eligible to contract with the State of California.

6. SWEATFREE CODE OF CONDUCT:

a. All Contractors contracting for the procurement or laundering of apparel, garments or corresponding accessories, or the procurement of equipment, materials, or supplies, other than procurement related to a public works contract, declare under penalty of perjury that no apparel, garments or corresponding accessories, equipment, materials, or supplies furnished to the state pursuant to the contract have been laundered or produced in whole or in part by sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor, or with the benefit of sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor. The contractor further declares under penalty of perjury that they adhere to the Sweatfree Code of Conduct as set forth on the California Department of Industrial Relations website located at [www.dir.ca.gov](http://www.dir.ca.gov), and Public Contract Code Section 6108.

b. The contractor agrees to cooperate fully in providing reasonable access to the contractor's records, documents, agents or employees, or premises if reasonably required by authorized officials of the contracting agency, the Department of Industrial Relations,

or the Department of Justice to determine the contractor's compliance with the requirements under paragraph (a).

7. DOMESTIC PARTNERS: For contracts over \$100,000 executed or amended after January 1, 2007, the contractor certifies that contractor is in compliance with Public Contract Code section 10295.3.

## **DOING BUSINESS WITH THE STATE OF CALIFORNIA**

The following laws apply to persons or entities doing business with the State of California.

1. CONFLICT OF INTEREST: Contractor needs to be aware of the following provisions regarding current or former state employees. If Contractor has any questions on the status of any person rendering services or involved with the Agreement, the awarding agency must be contacted immediately for clarification.

Current State Employees (Pub. Contract Code §10410):

- 1). No officer or employee shall engage in any employment, activity or enterprise from which the officer or employee receives compensation or has a financial interest and which is sponsored or funded by any state agency, unless the employment, activity or enterprise is required as a condition of regular state employment.
- 2). No officer or employee shall contract on his or her own behalf as an independent contractor with any state agency to provide goods or services.

Former State Employees (Pub. Contract Code §10411):

- 1). For the two-year period from the date he or she left state employment, no former state officer or employee may enter into a contract in which he or she engaged in any of the negotiations, transactions, planning, arrangements or any part of the decision-making process relevant to the contract while employed in any capacity by any state agency.
- 2). For the twelve-month period from the date he or she left state employment, no former state officer or employee may enter into a contract with any state agency if he or she was employed by that state agency in a policy-making position in the same general subject area as the proposed contract within the 12-month period prior to his or her leaving state service.

If Contractor violates any provisions of above paragraphs, such action by Contractor shall render this Agreement void. (Pub. Contract Code §10420)

Members of boards and commissions are exempt from this section if they do not receive payment other than payment of each meeting of the board or commission, payment for preparatory time and payment for per diem. (Pub. Contract Code §10430 (e))

2. LABOR CODE/WORKERS' COMPENSATION: Contractor needs to be aware of the provisions which require every employer to be insured against liability for Worker's Compensation or to undertake self-insurance in accordance with the provisions, and Contractor affirms to comply with such provisions before commencing the performance of the work of this Agreement. (Labor Code Section 3700)

3. AMERICANS WITH DISABILITIES ACT: Contractor assures the State that it complies with the Americans with Disabilities Act (ADA) of 1990, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA. (42 U.S.C. 12101 et seq.)

4. CONTRACTOR NAME CHANGE: An amendment is required to change the Contractor's name as listed on this Agreement. Upon receipt of legal documentation of the name change the State will process the amendment. Payment of invoices presented with a new name cannot be paid prior to approval of said amendment.

5. CORPORATE QUALIFICATIONS TO DO BUSINESS IN CALIFORNIA:

a. When agreements are to be performed in the state by corporations, the contracting agencies will be verifying that the contractor is currently qualified to do business in California in order to ensure that all obligations due to the state are fulfilled.

b. "Doing business" is defined in R&TC Section 23101 as actively engaging in any transaction for the purpose of financial or pecuniary gain or profit. Although there are some statutory exceptions to taxation, rarely will a corporate contractor performing within the state not be subject to the franchise tax.

c. Both domestic and foreign corporations (those incorporated outside of California) must be in good standing in order to be qualified to do business in California. Agencies will determine whether a corporation is in good standing by calling the Office of the Secretary of State.

6. RESOLUTION: A county, city, district, or other local public body must provide the State with a copy of a resolution, order, motion, or ordinance of the local governing body which by law has authority to enter into an agreement, authorizing execution of the agreement.

7. AIR OR WATER POLLUTION VIOLATION: Under the State laws, the Contractor shall not be: (1) in violation of any order or resolution not subject to review promulgated by the State Air Resources Board or an air pollution control district; (2) subject to cease and desist order not subject to review issued pursuant to Section 13301 of the Water Code for violation of waste discharge requirements or discharge prohibitions; or (3) finally determined to be in violation of provisions of federal law relating to air or water pollution.

8. PAYEE DATA RECORD FORM STD. 204: This form must be completed by all contractors that are not another state agency or other governmental entity.

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**EXHIBIT A**  
**GRANT APPLICATION**

LOCAL HEALTH DEPARTMENT SNAP-ED FUNDING OPPORTUNITY  
LETTER OF INTENT  
FFY 2014- 2016 (October 1, 2013 – September 30, 2016)

DUE: April 12, 2013

Send this form by fax or scan and e-mail to:

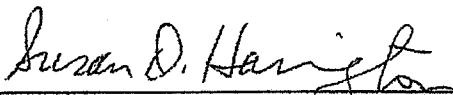
Fax: (916) 449-5414

Email: [supportstaffassignments@cdph.ca.gov](mailto:supportstaffassignments@cdph.ca.gov)

To: Melissa Meade, Chief  
Administrative Operations Section  
*Network for a Healthy California*  
Nutrition Education and Obesity Prevention Branch  
California Department of Public Health

Name:	Nora Ward
Title:	Contract Administrator
County Health Department	County of Riverside, Department of Public Health
Address:	4065 County Circle Drive, Suite 207 Riverside, CA 92503
Telephone:	(951) 358-5311
Fax:	(951) 358-5472
Email:	Nward@rivcocha.org

This serves as confirmation that our local health department intends to participate in the SNAP-Ed funding opportunity. Our department will prepare the appropriate grant documents for this funding opportunity with the California Department of Public Health, Nutrition Education and Obesity Prevention Branch, *Network for a Healthy California*.



Signature of Authorized Representative

4/10/13

Date

Susan D. Harrington, MS, RD

Printed Name

Director of Public Health

Title

Form 1

**Network for a Healthy California**

**FFY 2014**

**APPLICATION COVERSHEET/CHECKLIST**

DATE OF SUBMISSION	May 6, 2013
ORGANIZATION NAME	County of Riverside, Department of Public Health
AGREEMENT NUMBER	

Provide the name, phone number, and e-mail address of the person we can contact to confirm the date/time of the negotiation conference call.

Contact Name: Nancy Allende	Phone Number: 951-358-5889
E-mail: Nallende@rivcocha.org	

**Letter of Intent due April 12, 2013**

**APPLICATION CONTENTS:**

**Application due May 6, 2013**

**Please Check**

- |   |                                     |
|---|-------------------------------------|
| Form #1 Application Coversheet/Checklist                  | <input checked="" type="checkbox"/> |
| Form #2 Grantee Information Form                          | <input checked="" type="checkbox"/> |
| Form #3 Agency Capacity and Assurances                    | <input type="checkbox"/>            |
| Form #4 Project Synopsis                                  | <input checked="" type="checkbox"/> |
| Form #5 Scope of Work                                     | <input checked="" type="checkbox"/> |
| Form #6 FFY 2014 Budget (Excel Version 2010)              | <input type="checkbox"/>            |
| Form #7 FFY 2014 Budget (Excel Version 1997-2003)         | <input checked="" type="checkbox"/> |
| Form #8 Request for Non-Network Sponsored Travel          | <input type="checkbox"/>            |
| Form #9 Memorandum of Understanding (MOU) (if applicable) | <input type="checkbox"/>            |
| Form #10 Training Worksheet                               | <input checked="" type="checkbox"/> |

**NOTE:** The above documents must be completed and submitted with this Application Coversheet/Checklist Form. Email completed application to [supportstaffassignments@cdph.ca.gov](mailto:supportstaffassignments@cdph.ca.gov) by the submission deadline.

## Network for a Healthy California Grantee Information Form

**Date Form Completed:** 4/30/13

	This is the information that will appear on your grant agreement cover.	
Organization	Federal Tax ID #	95-6000930 Contract/Grant# _____
	Name	County of Riverside Department of Public Health (Comment: Send Contract Here) Attn: Nutrition Services branch and Health Promotion Branch
	Mailing Address	P.O. Box 7849, Riverside, CA 92513 (Comment: Send Contract Here)
	Street Address (If Different)	4065 County Circle Drive, Suite 207 Riverside, CA 92503
	County	Riverside
	Phone	951-358-5311 Fax 951-358-5472
	Website	http://www.rivco-nutrition.org/
	The <b>Grant Signatory</b> has authority to sign the grant agreement cover.	
Grant Signatory	Name	Board Chairperson (varies depending on time of year) (Comment: DO NOT Send Contract Here; SEND TO ABOVE ADDRESS)
	Title	Board of Supervisors, County of Riverside
	<i>If address(es) are the same as the organization above, just check this box and go to Phone</i> <input type="checkbox"/>	
	Mailing Address	4080 Lemon Street (Comment: DO NOT Send Contract Here; SEND TO ABOVE ADDRESS)
	Street Address (If Different)	Riverside, CA 92501
	Phone	951-955-1010 Fax 951-955-1019
Email	LDelara@cbos.org	
	The <b>Project Director</b> is responsible for all of the day-to-day activities of project implementation and for seeing that all grant requirements are met. This person will be in contact with State <i>Network</i> staff, will receive all programmatic, budgetary, and accounting mail for the project and will be responsible for the proper dissemination of program information.	
Project Director	Name	Nancy Allende, RD; Gayle Hoxter, MPH, RD
	Title	Supervising Nutritionist, Branch Chief
	<i>If address(es) are the same as the organization above, just check this box and go to Phone</i> <input checked="" type="checkbox"/>	
	Mailing Address	_____
	Street Address (If Different)	_____
	Phone	951-358-5311 Fax 951-358-5472 NAllende@rivcocha.org GHoxter@rivcocha.org
Email	_____	



## Network for a Healthy California Grantee Information Form

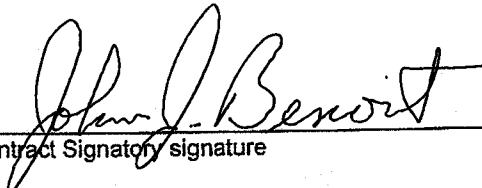
<b>Payment Receiver</b>	All payments are sent to the attention of this person at the designated address.	
	Name	<u>Claudia Rodriguez (Budget preparer). See below for payment receiver</u>
	Title	<u>Administrative Services Assistant</u>
	<i>If address(es) are the same as the organization above, just check this box and go to Phone</i> <input checked="" type="checkbox"/>	
	Mailing Address	_____
	Street Address (If Different)	_____
	Phone	<u>951-358-5881</u> Fax <u>951-358-5472</u>
Email	<u>CMRodriguez@rivcocha.org</u>	
<b>Fiscal Reporter</b>	The <b>Fiscal Reporter</b> prepares invoices, maintains fiscal documentation and serves as the primary contact for all related questions.	
	Name	<u>Criselyn Enriquez</u>
	Title	<u>Accountant II</u>
	<i>If address(es) are the same as the organization above, just check this box and go to Phone</i> <input type="checkbox"/>	
	Mailing Address	<u>P.O. Box 7849 Riverside, CA 92513</u>
	Street Address (If Different)	<u>4065 County Circle Drive, Suite 413 Riverside, CA 92503</u>
	Phone	<u>951-358-5104</u> Fax <u>951-358-5292</u>
Email	<u>CEnriquez@rivcocha.org</u>	
<b>Fiscal Signatory</b>	The <b>Fiscal Signatory</b> has signature authority for invoices and all fiscal documentation reports.	
	Name	<u>Carley Linn; Isabel Michaelis</u>
	Title	<u>Deputy Director; Fiscal Manager</u>
	<i>If address(es) are the same as the organization above, just check this box and go to Phone</i> <input checked="" type="checkbox"/>	
	Mailing Address	_____
	Street Address (If Different)	_____
	Phone	<u>951-358-7509</u> <u>951-358-5054</u> Fax <u>951-358-5120</u>
Email	<u>CLinn@rivcocha.org; IMicahel@rivcocha.org</u>	
<b>Districts</b>	List the all <b>numbers</b> that your organization is under:	
	Assembly	<u>Number 63<sup>rd</sup>, 64<sup>th</sup>, 65<sup>th</sup>, 66<sup>th</sup>, 71<sup>st</sup>, 80<sup>th</sup></u>
	Senate	<u>31<sup>st</sup>, 36<sup>th</sup>, 37<sup>th</sup>, 40<sup>th</sup></u>
	Congressional	<u>41<sup>st</sup>, 44<sup>th</sup>, 45<sup>th</sup>, 49<sup>th</sup></u>

**Local Health Department (LHD)  
Agency Capacity & Assurances**

**Agency Capability: Abilities & Assurances**


1. By checking the boxes, I am confirming the Agency's ability and willingness to engage in the below listed business practices throughout the duration of the contract/grant:

- Assume fiscal responsibility for nutrition education activities to insure all activities are reasonable and necessary to accomplish objectives and goals. This includes making records available for USDA review and audit as well as repayment of unallowable costs, if applicable.
- Target SNAP-Ed population and document income criteria of service recipients as per USDA Guidance.
- Track and report basic audience demographic information.
- Invoice for actual costs and maintain fiscal records for review and audit.
- Program activities are conducted in compliance with all applicable Federal laws, rules, regulations including Civil Rights and OMB circulars governing cost issues.
- Program activities do not supplant existing nutrition education programs, where operating in conjunction with existing programs, enhance and supplement them.
- Enter into subcontract agreements, as necessary, to ensure service delivery and scope of work completion. Utilize competitive bid procedures for subcontracts when required.
- Provide appropriate guidance and oversight to subcontractors to maximize programmatic impact and insure compliance with SNAP-Ed Guidance.
- Travel freely and unrestricted throughout the LHD jurisdiction, within the region, to State trainings, conferences and required meetings.
- Work cooperatively and in partnership with the *Network* on regional and statewide initiatives and other issues of emerging importance.
- Maintain appropriate and distinct documentation and records for activities supported by multiple funding streams.
- Comply with USDA Supplemental Nutrition Assistance Program (SNAP) Nutrition Education and Obesity Prevention (NEOP) Program regulations, NEOP Guidance or other issued guidelines, policies and assurances, and adapt any programmatic activities and practices accordingly.
- Insure that all materials developed or printed with SNAP-Ed funds include the appropriate USDA non-discrimination statement, credit to SNAP as a funding source, and a brief message about how CalFresh can help provide a healthy diet and how to apply for benefits as noted in the *Network* Branding Guidelines.
- Insure messages of nutrition education and obesity prevention are consistent with the Dietary Guidelines for Americans and stress the importance of variety, balance, and moderation.

  
Contract Signatory signature

DEC 17 2013  
Date

**JOHN J. BENOIT**  
Print Full Name

ATTEST:  
KECIA HARPER-HEM, Clerk  
By   
DEPUTY

For any exceptions to #1, describe the exception(s) to the abilities and assurances, and detail plans to address them to ensure the spirit and expectations of the Scope of Work are fulfilled.

FORM APPROVED COUNTY COUNSEL  
BY:   
NEAL R. KIPNIS DATE: 12/14/13

1. DESCRIPTION OF PROJECTS/INTERVENTIONS FOR EACH PROJECT THE FOLLOWING INFORMATION SHOULD BE PROVIDED:

**Project Title:** County of Riverside, Department of Public Health

**Grant Number:**

**Program Area:** Local Health Department

a. Related State Objectives.

See State-level objectives

b. Target Audience.

Gender: Male 30%

Female 70%

Ethnicity:

African American 15%

Latino 64%

Asian 1%

Native American 1%

Caucasian 19%

Pacific Islander \_\_\_\_\_%

Other (specify) \_\_\_\_\_: \_\_\_\_\_%

Languages:

English 75%

Korean \_\_\_\_\_%

Spanish 25%

Lao \_\_\_\_\_%

Arabic \_\_\_\_\_%

Mandarin \_\_\_\_\_%

Armenian \_\_\_\_\_%

Russian \_\_\_\_\_%

Bosnian \_\_\_\_\_%

Tagalog \_\_\_\_\_%

Cantonese \_\_\_\_\_%

Vietnamese \_\_\_\_\_%

Farsi \_\_\_\_\_%

Other (specify) \_\_\_\_\_: \_\_\_\_\_%

Hmong \_\_\_\_\_%

Other (specify) \_\_\_\_\_: \_\_\_\_\_%

Khmer (Cambodian) \_\_\_\_\_%

Ages:

Under 5 years old 5%

12 to 17 10%

5 to 8 12%

18 to 59 60%

9 to 11 12%

60 years old & over 1%

c. Focus on SNAP-Ed Eligible.

Income Targeting Data Source:

See attached Census Tract data sheet

See attached Means Tested Program data sheet

See attached Free/Reduced Price Meal Percentage data sheet

Other (Specify): \_\_\_\_\_ (\_\_\_\_\_ % equal to or less than 185% FPL)

Other (Specify): \_\_\_\_\_ (\_\_\_\_\_ % equal to or less than 185% FPL)

Means-Tested Low Income Assistance Programs (formerly known as Location Based Proxy Sites): Unless otherwise noted in the instructions, targeting data are not required for approved

LOCAL PROJECT SYNOPSIS

*mean- tested programs. Please check all that apply and indicate the percentage of your target audience(s) at these locations.*

- |   |            |   |             |
|---|------------|---|-------------|
| <input type="checkbox"/> CalFresh Offices   | _____%     | <input type="checkbox"/> Low Income Home Energy Assistance Program  | _____%      |
| <input type="checkbox"/> California Food Assistance Program (CFAP)                  | _____%     | <input type="checkbox"/> MediCal                                    | _____%      |
| <input type="checkbox"/> Commodity Foods Distribution on Indian Reservation (FDPIR) | _____%     | <input checked="" type="checkbox"/> Public Housing                  | <u>1</u> %  |
| <input type="checkbox"/> Comprehensive Perinatal ServiceProgram (CPSP)              | _____%     | <input type="checkbox"/> Section 8 Public Housing Vouchers (LiHEAP) | _____%      |
| <input checked="" type="checkbox"/> Family Resource Center                          | <u>5</u> % | <input type="checkbox"/> Shelters/Temporary Housing                 | _____%      |
| <input checked="" type="checkbox"/> Food Banks                                      | <u>1</u> % | <input type="checkbox"/> Soup Kitchens                              | _____%      |
| <input checked="" type="checkbox"/> Food Pantries                                   | <u>2</u> % | <input type="checkbox"/> SSI- Supplemental Security Income          | _____%      |
| <input type="checkbox"/> HeadStart  | _____%     | <input checked="" type="checkbox"/> TANF (CalWORKS) Job Readiness   | <u>20</u> % |
| <input type="checkbox"/> In Home Supportive Servies (IHSS)                          | _____%     | <input type="checkbox"/> Weatherization Program                     | _____%      |
| <input type="checkbox"/> Job Corps  | _____%     | <input checked="" type="checkbox"/> WIC                             | <u>10</u> % |

**d. Project Description.**

Key Methods:

Advisory Council/Task Force (specify): Eastside Community Health Partnership, County Nutrition Action Plan, Riverside County Health Coalition, California Conference of Local Health Department Nutritionists, American Cancer Society – Latino Outreach Committee, El Sol Advisory Committee, Jurupa Valley Collaborative Meeting and Perris Community Partnership meeting.

- Internet/Web Sites-website address: \_\_\_\_\_
- Print Media
- Radio: \_\_\_\_\_
- TV: \_\_\_\_\_
- Multi-level approaches that include environmental supports
- Nutrition Education Classes: (150-175 occurrences at .5-1.5 hour(s) each)
- Community Education Events: (10- 15 occurrences at 1- 4 hour(s) each)
- Training/Workshop/Conference: (16-20 occurrences at .5 - 1 hour(s) each)
- Point of Purchase: (20-60 occurrences at .5 - 4 hour(s) each)
- Other (specify): (\_\_\_\_\_ occurrences at \_\_\_\_\_ hour(s) each)

Key Educational Messages: *All messages will align with the Dietary Guidelines for Americans 2010 and MyPlate. Messages will promote Enjoy your food, but eat less; Avoid oversized portions; Make half your plate fruit and vegetables; Switch to fat-free or low-fat (1%) milk; Compare sodium in foods and Drink water instead of sugary drinks.*

Delivery Sites by Type of Setting

- 1 Adult Education & Job Training Sites
- 0 Adult Rehabilitation Center
- 0 CalFresh Offices
- 8 Churches
- 13 Community Centers
- 0 Elderly Service Centers
- 11 Emergency Food Assistance Sites  
(includes Food Banks, Food Pantries, and Soup Kitchens)
- 0 Extension Offices
- 2 Farmers Markets
- 33 Food Stores
- 0 Head Start Programs
- 0 Individual Homes
- 1 Libraries

- 11 Other Youth Education Sites (includes Parks and Recreation)
- 11 Public/Community Health Centers  
(includes Public Health Departments)
- 1 Public Housing
- 3 Schools – students (Preschool)
- 14 Schools – students (K-12)
- 3 Schools – students (Afterschool Program)
- 15 Schools - Parents
- \_\_\_\_\_ Shelters/Temporary Housing
- 8 TANF Job Readiness Program
- 20 WIC Programs
- 17 Worksites
- \_\_\_\_\_ Other (specify): \_\_\_\_\_
- \_\_\_\_\_ Other (specify): \_\_\_\_\_
- \_\_\_\_\_ Other (specify): \_\_\_\_\_

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Projected Unduplicate Number of Contacts: 36,000

Narrative

The health department (LHD) provides nutrition education and obesity prevention services to 36,000 eligible SNAP-Ed residents in Riverside county/city. The health department will promote the 2010 Dietary Guidelines to increase consumption and access to healthy foods and drinks, decrease consumption of and access of less healthy foods and drinks, and increase opportunities and activity levels of physical activity among the SNAP-Ed eligible population.

The LHD will be responsible to 1) conduct 150-175 nutrition education classes for at least 3,250 SNAP-Ed eligible individuals in the community; 2) conduct a minimum of 9 nutrition education activities, inclusive of a kick-off event, in support of local and regional healthy beverage education efforts to reach 9,650 SNAP-Ed eligible individuals in qualifying communities; 3) conduct a Communities of Excellence in Nutrition, Physical Activity and Obesity Prevention (CX3) in 7-12 SNAP-Ed eligible low-income neighborhoods and share results with various local stakeholders, community members and community organizations; and 4) coordinate a minimum of 1 local media activities to highlight 1 nutrition and physical activity events, campaigns or accomplishments.

The LHD will conduct 3-5 community engagement events in order to establish consensus on community priority issues directly related to the CX3 neighborhood assessments or reassessments in 7-12 eligible neighborhoods.

The LHD will conduct 4 community events reaching 6,650 SNAP-Ed eligible individuals, and produce \_\_\_\_\_ public messages reaching an additional \_\_\_\_\_ individuals. The LHD will conduct 2-3 training(s), reaching \_\_\_\_\_ providers, \_\_\_\_\_ eligible individuals \_\_\_\_\_ groups and \_\_\_\_\_ agencies to further SNAP-Ed strategies. The top three training topics include: Rethink Your Drink, basic nutrition (MyPlate) and Toolbox for Community Educators.

The LHD will subcontract with city government, schools and community based organizations.

The LHD will select 2 Policy, Systems, Environmental (PSE) evidence-based strategies from approved Network PSE Matrix.

**e. Summary of Research.**

*See Section A.*

**f. Modification of Project Methods/Strategies.**

Continuing, No adaptation or change in intervention

Project is new

*All future modifications will be approved by the Network.*

**g. Use of Educational Materials.**

*See attached Master Educational Materials list submitted in State plan Section F.*

**h. Development of New Nutrition Educational Materials.**

*No new nutrition educational materials will be developed with Network funds.*

**i. Key Performance Measures/Indicators. (max. 100 words)**

The County of Riverside, DOPH will incorporate both formative and summative evaluation methods in the project. Formative evaluation methods include the use of needs assessments and process evaluation, in the form of sign-in sheets and the activity tracking forms. The project also includes summative methods in the form of an Impact / Outcome evaluation in the use of pre & post-tests in objective 11. Both methods of evaluation are useful tools in strengthening the efforts and seeing the causal effects of the project's intervention.

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**2. EVALUATION PLANS**

*All grantees participate in process evaluation per their Scope of Work activities. Grantees must participate in Impact/Outcome Evaluation. Impact/Outcome Evaluation measures the effectiveness of an intervention by assessing behavior change or the factors that directly influence behavior change primarily focusing on nutrition education and obesity prevention.*

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**3. COORDINATION EFFORTS (MAX. 100 WORDS)**

LHD will establish/maintain key partnerships through County Nutrition Action Plan group that meets up to six times per year. The LHD will develop/update a CNAP to 1) enhance collaboration and communication among stakeholder agencies, 2) coordinate nutrition education messages, resources and campaign implementation across FNS programs, and 3) maintain, expand and share CNAP with FNS programs, local partners and external stakeholders in an effort to increase food security in the target population.

Census Tract Data Sheet

<i>All Race/Ethnicity Subgroup</i>											
Type*	Site Name	Address	City	Zip	11 Digit Census Tract	Ethnicity **	100% FPL	125% FPL	185% FPL	ACS Data Source	Notes
Adult Education	Corona-Norco Unified School District	300 S. Buena Vista Ave	Corona	92882	06065041704	AR		49.4%	63.4%	2006-2010	
Churches	St. Edwards	417 W. Grand Ave.	Corona	92882	06065041600	AR		35.9%	50.3%	2006-2010	
Churches	First Baptist	311 E. 5 <sup>th</sup> St.	Perris	92570	06065042800	AR		39.5%	63.2%	2006-2010	
Churches	Perris Spanish Seventh Day Adventist	22905 Alviso Dr.	Perris	92570	06065042010	H	54.8%			2006-2010	
Churches	5 <sup>th</sup> Street SDA	300 E. 5 <sup>th</sup> St	Perris	92570	06065042800	AR		39.5%	63.2%	2006-2010	
Churches	Iglesia de Cristo	277 E. 5 <sup>th</sup> St	Perris	92570	06065042800	AR		39.5%	63.2%	2006-2010	
Churches	Park Avenue Missionary Baptist	1910 Martin Luther King Blvd	Riverside	92507	06065030501	AR		48.9%	66.8%	2006-2010	
Churches	Kansas Ave. SDA	4491 Kansas Ave	Riverside	92507	06065030501	AR		48.9%	66.8%	2006-2010	

Churches	Our Lady of Guadalupe	4525 Victoria Ave.	Riverside	92507	06065030400	AR		31.2%	56.0%	2006-2010
Community Centers	Bagdouma Park & Community Center	51723 Douma St.	Coachella	92236	06065045705	AR		43.2%	66.8%	2006-2010
Community Centers	Coachella Community Center and Park	84620 Bagdad Ave	Coachella	92236	06065045705	AR		43.2%	66.8%	2006-2010
Community Centers	United Way	302 Merrill Street	Corona	92882	06065041704	AR		49.4%	63.4%	2006-2010
Community Centers	Corona /Norco Settlement House	507 S. Vicentia	Corona	92282	06065041704	AR		49.4%	63.4%	2006-2010
Community Centers	Riverside County Office of Education	47-336 Oasis St.	Indio	92201	06065045501	AR		39.5%	63.2%	2006-2010
Community Centers	Indio Civic Ctr.	100 Civic Center Mall	Indio	92201	06065049500	AR		40.8%	56.9%	2006-2010
Community Centers	Mecca Community Ctr.	65-250 Coahuilla St	Mecca	92254	06065045604	AR		58.4%	76.8%	2006-2010
Community Centers	Rob Reiner Children & Families Development Ctr	2221 South "A" Street	Perris	92570	06065042901	AR		37.3%	58.4%	2006-2010
Community Centers	Mead Valley Community Ctr	21091 Rider Street	Perris	92570	06065042904	AR		36.4%	56.0%	2006-2010



Community Centers	Mead Valley Family Services Association	19450 Clark Street	Perris	92570	06065042904	AR		36.4%	56.0%	2006-2010	
Community Centers	Moses Schaffer Community Ctr.	21565 Steele Peak Dr.	Perris	92570	06065042902	AR		43.0%	62.5%	2006-2010	
Community Centers	Eastside Community Partnership	2060 University Way	Riverside	92507	06065030501	AR		48.9%	66.8%	2006-2010	
Community Centers	Community Action Partnership	2038 Iowa Ave. Suite B-102	Riverside	92507	06065042210	AR		30.8%	52.9%	2006-2010	
Farmers' Markets	Coachella Farmers Market	1515 6 <sup>th</sup> St.	Coachella	92236	6065045707-1	AR		42.0%	66.0%	Block 2006-2010	
Farmers' Markets	Perris	301 S. D St.	Perris	92570	06065042800	AR		39.5%	63.2%	2006-2010	
Food Stores	Carniceria Rancho Grande	51508 Harrison St	Coachella	92236	06065045704	AR		47.8%	65.0%	2006-2010	
Food Stores	Super Rancho Carneceria	1632 Sixth St.	Coachella	92236	06065045707	AR					DS Retail Program list - High EBT redeeming store
Food Stores	Valley Market	51989 Grapefruit Blvd	Coachella	92236	06065045706	AR		36.0%	67.8%	2006-2010	

Food Stores	Cardenas #18	50037 Harrison St	Coachella	92236	06065040400	AR						DS Retail Program list - High EBT redeeming store
Food Stores	Food 4 Less #517	49421 Grapefruit Blvd	Coachella	92236	06065940400	AR						DS Retail Program list - High EBT redeeming store
Food Stores	Food 4 Less #304	109 McKinley St	Corona	92879	06065041411	AR		34.6%	57.4%	2006-2010		
Food Stores	Food 4 Less #308	34251 Date Palm Drive	Cathedral City	92234	06065044916	AR			37.2%	56.3%	2006-2010	
Food Stores	Stater Bros. #84	13200 Palm Drive	Desert Hot Springs	92440	06065044510	B			51.4%	2006-2010		
Food Stores	Stater Bros. #75	41849 Florida Ave	Hemet	92543	06065043310	AR		42.1%	64.4%	2006-2010		
Food Stores	Food 4 Less #765	82124 US Highway 111	Indio	92201	06065042620	AI			95.5%	2006-2010		
Food Stores	Cardenas #31	31952 Mission Trail	Lake Elsinore	92530	06065046404-2	AR		46.1%	59.0%	Block 2006-2010		
Food Stores	Food 4 Less #302	1220 Perris Blvd	Moreno Valley	92557	06065042404	AR						DS Retail Program list - High EBT redeeming

Food Stores	Food 4 Less #398	24440 Alessandro Blvd	Moreno Valley	92553	06065042516	AR			16.8%	54.4%	2006-2010	store
Food Stores	La Favorita Supermarket	546 Indian Hills Circle	Perris	92570	06065042800	AR			39.5%	63.2%	2006-2010	
Food Stores	Los Juniors' Meat Market #1	510 W. 4 <sup>th</sup> Street	Perris	92570	06065042800	AR			39.5%	63.2%	2006-2010	
Food Stores	Perris Supermarket	437 S. D Street	Perris	92570	06065042800	AR			39.5%	63.2%	2006-2010	
Food Stores	Cardenas #4	2560 N. Perris Blvd	Perris	92571	06065042618	AR						DS Retail Program list - High EBT redeeming store
Food Stores	Food 4 Less #315	1688 N. Perris Blvd	Perris	92571	06065042617	AR			29.4%	51.3%		
Food Stores	Big Saver Foods #8	3981 Chicago Ave.	Riverside	92507	06065030501	AR			48.9%	66.8%	2006-2010	
Food Stores	La Michoacana Market	411 Victoria Ave	Riverside	92507	06065030400	AR			31.2%	56.0%	2006-2010	
Food Stores	La Tapatia	2009 University Ave	Riverside	92507	06065030501	AR			48.9%	66.8%	2006-2010	
Food Stores	Stater Bros. #114	2995 Iowa	Riverside	92507	06065042209	AR			30.7%	50.7%	2006-2010	

Food Stores	Food 4 Less #343	Ave 4250 Van Buren Blvd.	Riverside	92503	06065041201	AR			28.2%	52.6%	2006-2010
Food Stores	Cardenas #11	6350 Van Buren Blvd	Riverside	92503	06065041101	AR			36.7%	65.8%	2006-2010
Food Stores	Cardenas #13	1475 S. San Jacinto Ave	San Jacinto	92583	06065043512	B	62.4%				2006-2010
Food Stores	Food 4 Less #319	26419 Ynez Rd	Temecula	92591	06065043216	AS	56.2%				
Food Stores	Rio Ranch Market #5	460 E. 4 <sup>th</sup> Street	Perris	92570	0606542719	AS	53.8%				2006-2010
Food Stores	Food 4 Less #329	3900 Chicago Ave	Riverside	92507	06065042209	AR			30.7%	50.7%	2006-2010
Food Stores	Superior Grocers #126	1130 W. 6 <sup>th</sup> Street	Corona	92882	06065041704	AR			49.4%	63.4%	2006-2010
Food Stores	Superior Grocers #127	23857 Sunnymead Blvd	Moreno Valley	92553	06065042514	AR			25.8%	51.4%	2006-2010
Food Stores	El Super	24899 Alessandro Blvd	Moreno Valley	92553	06065042509	AR			22.6%	53.3%	2006-2010
Food Stores	El Tapatio Market #107	1212 Magnolia Ave.	Corona	92879	06065041813	H	51.8%				2006-2010
Food Stores	El Tapatio Market #106	5800 Van Buren	Riverside	92503	06065041101	AR			36.7%	65.8%	2006-2010

Libraries	Home Gardens	3785 Neece Street	Corona	92879	06065041410	AR			33.3%	53.6%	2006-2010
Other Youth Education Sites	Veteran's Park	1500 4 <sup>th</sup> St	Coachella	92236	06065045707-1	AR			41.9%	65.9%	Block 2006-2010
Other Youth Education Sites	Lake Elsinore Storm Stadium	500 Diamond Dr	Lake Elsinore	92530	06065043001	AR			36.8%	57.2%	2006-2010
Other Youth Education Sites	Bobby Bonds/Caesar Chavez Park	2060 University	Riverside	92507	06065030501	AR			48.9%	66.8%	2006-2010
Other Youth Education Sites	Bordwell Park	2008 Martin Luther King	Riverside	92507	06065030501	AR			48.9%	66.8%	2006-2010
Other Youth Education Sites	Boys & Girls Club of Coachella Valley	85350 Bagdad Ave	Coachella	92236	06065045706	AR			36.0%	67.8%	2006-2010
Other Youth Education Sites	Dateland Park	85241 Bagdad Ave	Coachella	92236	06065045706	AR			36.0%	67.8%	2006-2010
Other Youth Education Sites	Boys & Girls Club of Mecca	91391 Avenue 66	Mecca	92254	06065045604	AR			58.4%	76.8%	2006-2010
Other Youth Education Sites	John Bryant Park	7950 Philbin Ave	Riverside	92503	06065041203-2	AR			1.7%	59%	Block 2006-2010

Other Youth Education Sites	Indio Fairgrounds	82-503 CA Hwy 111	Indio	92201	06065045501	AR		45.4%	63.2%	2006-2010
Other Youth Education Sites	Moreno Valley Auto Mall	12630 Motor Way	Moreno Valley	92555	06065045624	H	54.2%			2006-2010
Other Youth Education Sites	Foss Field Park	138 North Perris Blvd	Perris	92570	06065042800	AR		39.5%	63.2%	2006-2010
Public/Community Health Centers	Corona Family Care Center	505 S. Buena Vista Ave. Suite #101	Corona	92882	06065041704	AR		49.4%	63.4%	2006-2010
Public/Community Health Centers	Hemet Family Care Center	880 N. State Street	Hemet	92543	06065043507	AR		49.9%	62.5%	2006-2010
Public/Community Health Centers	Indio Family Care Center	47923 Oasis Street	Indio	92201	06065045501	AR		45.4%	63.2%	2006-2010
Public/Community Health Centers	Lake Elsinore Family Care Center	2499 E. Lakeshore Drive	Lake Elsinore	92530	06065043001	AR		36.8%	57.2%	2006-2010
Public/Community Health Centers	Perris Family Care Center (Dr. Robert Bruce Reid )	308 E. San Jacinto Ave	Perris	92570	06065042800	AR		39.5%	63.2%	2006-2010

Public/ Community Health Centers	Arlanza Family Health Center	8856 Arlington Ave	Riverside	92503	06065041001	AR		36.7%	65.8%	2006- 2010	
Public/ Community Health Centers	Don Shroeder Health Center	5256 Mission Blvd	Riverside	92509	06065040203	AR		46.8%	72.4%	2006- 2010	
Public/ Community Health Centers	Eastside Health Center	1970 University Ave	Riverside	92507	06065030501	AR		48.9%	66.8%	2006- 2010	
Public/ Community Health Centers	University Community Health Center	2933 University Ave	Riverside	92507	06065030400	AR		31.2%	56.0%	2006- 2010	
Public/ Community Health Centers	Riverside County Department of Public Health Administration	4065 County Circle Dr.	Riverside	92503	06065041201	AR		28.2%	52.6%	2006- 2010	
Public/ Community Health Centers	Coachella Valley Unified School District Offices	65250 Coahuilla St	Mecca	92254	06065045604	AR		58.4%	76.8%	2006- 2010	
Worksites	Cardenas #8	25065 Sunnymead Blvd	Moreno Valley	92553	06065042519						Used Worksite Qualification criteria

Worksites	Cardenas #14	301 S. Lincoln Ave	Corona	92882	06065041500						Used Worksite Qualification criteria
Worksites	Cardenas #17	82-229 US Highway 111	Indio	92201	06065042404						Used Worksite Qualification criteria
Worksites	Cardenas #22	14930 Perris Blvd	Moreno Valley	92553	06065042509						Used Worksite Qualification criteria
Worksites	Cardenas #25	31-655 Date Palm Drive	Cathedral City	92234	06065044926						Used Worksite Qualification criteria
Worksites	Cardenas #31	31952 Mission Trail	Lake Elsinore	92530	06065046404						Used Worksite Qualification criteria
Worksites	Desert Arc	73-255 Country Club	Palm Desert	92260	06065045124						Used Worksite Qualification criteria
Worksites	EXCEED Valley Resource	1285 N. Santa Fe	Hemet	92543	06065043507						Used Worksite Qualification criteria
Worksites	EXCEED Valley Resource	78-150 Calle Tampico	La Quinta	92253	06065045605						Used Worksite Qualification criteria



Worksites	Kerry Ingredients & Flavours	64-405 Lincoln Street	Mecca	92254	06065045604						Used Worksite Qualification criteria
Worksites	Mathis Bros. Distribution Center	81-410 California 111	Indio	92201							Used Worksite Qualification criteria
Worksites	Ruskin Air & Sound Control	3847 Wabash Drive	Mira Loma	91752	06065040503						Used Worksite Qualification criteria
Worksite	Ross Distribution Center	3404 Indian Ave	Perris	92571	06065042620						Used Worksite Qualification criteria
Worksite	Serta Distribution Center	23532 Brodiaea Ave	Moreno Valley	92553	06065042511						Used Worksite Qualification criteria
Worksite	Sketchers Distribution	29800 Eucalyptus Ave	Moreno Valley	92555	06065042624						Used Worksite Qualification criteria
Worksite	Smith & Noble	1181 California Ave	Corona	92881	06065041809						Used Worksite Qualification criteria
Worksite	WalGreens Distribution Center	17500 Perris Blvd	Moreno Valley	92551	06065048800						Used Worksite Qualification criteria

\* Refer to list from Delivery Sites by Type of Setting section on page 3.

\*\* All Races-AR, American Indian or Alaska Native-AI, Asian-AS, Black/African American-B, Native Hawaiian or Other Pacific Islander-NH, Hispanic/Latino-H, White-W, Other Races-OR.

**Means-Tested Program Data Sheet**

<i>Type *</i>	<i>Site Name</i>	<i>Address</i>	<i>City</i>	<i>Zip</i>	<i>11 Digit Census Tract</i>
Family Resource Center	Desert Hot Springs Resource Center	14-201 Palm Drive	Desert Hot Springs	92240	06065041704
Family Resource Center	Mecca Family & Farmworker Resource Center	91275 Avenue 66 Ste. 101	Mecca	92254	06065045604
Family Resource Center	Rubidoux Resource Center	5473 Mission Blvd	Riverside	92509	06065040204
Food Banks	Galilee Food Bank	1030 6 <sup>th</sup> Street #5	Coachella	92236	06065045707
Food Banks	FIND Food Bank	83775 Citrus Ave.	Indio	92201	06065045303
Food Banks	Second Harvest Food Bank	2950-B Jefferson St.	Riverside	92504	06065031300
Food Pantries	Hidden Harvest	85711 Peter Rabbit Lane	Coachella	92236	06065045706
Food Pantries	Centro Libre Cristiano	83246 Ave. 50	Coachella	92236	06065045226
Food Pantries	FISH	52525 Oasis Palms	Coachella	92236	06065045703
Food Pantries	Food Now Inc.	14080 Palm Drive Ste. E	Desert Hot Springs	92240	06065044516
Food Pantries	St. Elizabeth Church	66700 Pierson Blvd	Desert Hot Springs	92240	06065044509
Food Pantries	North Shore Yacht	99-155 Sea View	North Shore	92554	06065045604

	Club Community Ctr.	Drive			
Food Pantries	Well in the Desert	555 N. Commercial Road	Palm Springs	92262	06065941200
Food Pantries	Survival Ministries	23100 Betty Road	Perris	92570	06065042902
Public Housing	Pottery Court	300 N. Riley Street	Lake Elsinore	92530	06065043006
TANF (CalWORKS) Job Readiness	Hemet	541 N. San Jacinto	Hemet	92543	06065043508
TANF (CalWORKS) Job Readiness	Jurupa	5961 Mission Blvd. Suite 100	Riverside	92509	06065040301
TANF (CalWORKS) Job Readiness	Lake Elsinore	1400W. Minthorn St.	Lake Elsinore	92530	06065043006
TANF (CalWORKS) Job Readiness	Moreno Valley	23119 Cottonwood Ave. Bldg A & C	Moreno Valley	92553	06065042512
TANF (CalWORKS) Job Readiness	Norco	3178 Hammer Ave.	Norco	92860	06065040812
TANF (CalWORKS) Job Readiness	Perris	351 Wilkerson St. Ste. D	Perris	92571	06065042719
TANF (CalWORKS) Job Readiness	La Sierra	11060 Magnolia Ave.	Riverside	92505	06065041408
TANF (CalWORKS) Job Readiness	Temecula	43264 Business Park Dr. Ste. B1	Temecula	92590	06065051200
WIC	Arlanza WIC	7801 Gramercy Place Ste. C	Riverside	92503	06065041203
WIC	Banning WIC	3055 West Ramsey	Banning	92220	06065044101
WIC	Blythe WIC	1293 West Hobson Way	Blythe	92225	06065046102
WIC	Cathedral City WIC	68625 Perez Rd. Suite 17-B	Cathedral City	92234	06065045000
WIC	Corona West WIC	1307 West Sixth St. Suite 124	Corona	92882	06065041703

WIC	CPC WIC site	14375 Nason St. Suite 109	Moreno Valley	92555	06065048700
WIC	Desert Hot Springs WIC	14080 Palm Drive Suite s	Desert Hot Springs	92240	06065044515
WIC	Hemet WIC	1005 North State St.	Hemet	92543	06065043507
WIC	Jurupa WIC site	9415 Mission Blvd. Suite J & K	Riverside	92509	06065040502
WIC	Indio WIC	47-923 Oasis St. Rm. NT-1	Indio	92201	06065045501
WIC	Lakeshore WIC	2499 E. Lakeshore Dr. Suite B	Lake Elsinore	92530	06065043001
WIC	Mecca WIC	91275 66 <sup>th</sup> Ave.	Mecca	92254	06065045604
WIC	Moreno Valley WIC	13800 Heacock Suite 125	Moreno Valley	92553	06065042516
WIC	North Riverside WIC	1465 Spruce St. Suite. A	Riverside	92507	06065042209
WIC	Palm Springs WIC	1515 N. Sunrise Way	Palm Springs	92262	06065044602
WIC	Perris WIC	308 East San Jacinto	Perris	92570	06065042800
WIC	Riverside Neighborhood WIC	7140 Indiana Ave.	Riverside	92504	06065031300
WIC	Rubidoux WIC	5256 Mission Blvd	Riverside	92509	06065040203
WIC	Temecula WIC	41002 County Center Bldg B	Temecula	92591	06065049600
WIC	Sherman -- Administration	3900 Sherman Drive Suite I	Riverside	92503	06065031501

\*Refer to the list of Means-Tested Programs on page 2.

### Free/Reduced Price Meal Percentage Data Sheet

<i>School Name*</i>	<i>District Name</i>	<i>14 Digit CDS Code</i>	<i>Free Meal %</i>	<i>Reduced Meal %</i>	<i>Free and Reduced Meal %</i>
Coachella Valley High S, P	Coachella Valley Unified	33736763330990	81.50%	13.65%	95.15%
Desert Mirage High S, P	Coachella Valley Unified	33736760100255	75.41%	5.78%	81.19%
La Familia Continuation High S	Coachella Valley Unified	33736763330032	89.21%	7.19%	96.40%
Bobby Duke Middle School P	Coachella Valley Unified	3373676 0113753	68.52%	10.19%	78.70%
Toro Canyon Middle School S, P	Coachella Valley Unified	33736760100263	91.06%	7.45%	98.51%
Corona High School P	Corona-Norco Unified	33670333331600	46.19%	11.68%	57.87%
Troth Elementary S, P	Jurupa Unified	33670906032221	69.04%	12.85%	81.89%
Rubidoux High School S,P	Jurupa Unified	33670903337136	59.34%	13.38%	72.72%
Sky Country Elementary S,PS,A,P	Jurupa Unified	33670906104491	43.28%	18.97%	62.24%
Glen Avon Elementary S,PS,A,P	Jurupa Unified	33670906032163	64.41%	12.63%	77.04%
Mission Middle School S,P	Jurupa Unified	33670906061774	71.10%	11.95%	83.06%
Nuview Elementary S,PS,A,P	Nuview Union	33671576032353	65.94%	13.86%	79.80%
Valley View Elementary S, P	Nuview Union	33671576111488	60.12%	14.01%	74.12%
Perris Lake High Continuation S,P	Perris Union High	33672073330172	70.51%	7.69%	78.21%
Perris High School S,P	Perris Union High	3367207 335973	68.34%	7.23%	75.57%
Abraham Lincoln Continuation S,P	Riverside Unified	33672153336955	55.94%	5.59%	61.54%

\*After each school name indicate all that apply with the following abbreviations: K-12 School (S), Preschool (PS), After School (A) & Parents (P)

## Budget Coversheet

Prime Grantee Name:

Riverside FFY14 Budget

Grant Number:

Budget Categories	FFY 13 Total	FFY 14 Total	Difference	% Difference
1 Salaries	\$540,283.00	\$989,847.00	\$449,564.00	45.42%
2 Benefits	\$253,933.00	\$475,126.56	\$221,193.56	46.55%
3 Operating	\$51,186.00	\$93,675.63	\$42,489.63	45.36%
4 Equipment	\$2,000.00	\$27,200.20	\$25,200.20	92.65%
5 Travel & Per Diem	\$25,468.00	\$44,570.95	\$19,102.95	42.86%
6 Subcontractors	\$217,820.00	\$1,581,617.00	\$1,363,797.00	86.23%
7 Other Costs	\$23,379.00	\$46,150.26	\$22,771.26	49.34%
8 Indirect Costs	\$198,554.00	\$366,243.39	\$167,689.39	45.79%
<b>Totals:</b>	<b>\$1,312,623.00</b>	<b>\$3,624,431.00</b>	<b>\$2,311,808.00</b>	<b>454.19%</b>

Budget Categories	Reason for difference greater than 5%
1 Salaries	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13
2 Benefits	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13
3 Operating	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13
4 Equipment	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13
5 Travel & Per Diem	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13
6 Subcontractors	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13
7 Other Costs	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13
8 Indirect Costs	Difference of 5% greater in FFY14 is due to award funding to be greater than FFY 13

## Budget Coversheet

Prime Grantee Name: Riverside FFY14 Budget  
 Grant Number: 0

Position Title * Job Descriptions for each position can be found on the Job Descriptions tab.	Position Names	Description of Job Duties % of SNAP-Ed Time spent on Mgmt/Admin Duties	% of SNAP-Ed Time spent on Direct SNAP-Ed Delivery	FTEs charged to SNAP-Ed	Total Annual Salary	Total SNAP-Ed Salary	Benefit Rate	*Total SNAP-Ed Salary X Benefit Rate	SNAP-Ed Salary, Benefits, and Wages, Federal Dollars only
1 Accountant/Finance Analyst	Criselyn Enriquez	30.00%		0.3	\$55,800.00	\$16,740.00	48.000%	\$8,035.20	\$24,775.20
2 Accountant/Finance Analyst	Sheryl Salgado	15.00%		0.15	\$51,476.00	\$7,721.40	48.000%	\$3,706.27	\$11,427.67
3 Administrator (e.g., Director of Programs)	Nancy Allende	100.00%		1	\$75,599.00	\$75,599.00	48.000%	\$36,287.52	\$111,886.52
5 Chief Executive Officer	Gayle Hoxter	25.00%		0.25	\$112,803.00	\$28,200.75	48.000%	\$13,536.36	\$41,737.11
6 Community Liaison	Victoria Wynn	100.00%	100.00%	1	\$38,288.16	\$38,288.16	48.000%	\$18,378.32	\$56,666.48
6 Community Liaison	Anna Rubio	100.00%	100.00%	1	\$38,288.16	\$38,288.16	48.000%	\$18,378.32	\$56,666.48
6 Community Liaison	Linda Quintero	50.00%	50.00%	0.5	\$38,288.16	\$19,144.08	48.000%	\$9,189.16	\$28,333.24
6 Community Liaison	Maria Lua Ceja	50.00%	50.00%	0.5	\$38,288.16	\$19,144.08	48.000%	\$9,189.16	\$28,333.24
6 Community Liaison	Jose Arballo	10.00%	10.00%	0.1	\$60,471.00	\$6,047.10	48.000%	\$2,902.61	\$8,949.71
10 Computer Specialist	Various	10.00%		0.1	\$53,726.88	\$5,372.69	48.000%	\$2,578.89	\$7,951.58
8 Contract Manager	Claudia Rodriguez/Jon Vermilya	100.00%		1	\$51,610.75	\$51,610.75	48.000%	\$24,773.16	\$76,383.91
12 Contract Manager	Yolie Smith	25.00%		0.25	\$64,258.00	\$16,064.50	48.000%	\$7,710.96	\$23,775.46
13 Project Coordinator	Sophie Tan Hung		100.00%	1	\$65,413.00	\$65,413.00	48.000%	\$31,398.24	\$96,811.24
17 Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Valerie Comeaux		100.00%	1	\$48,794.19	\$48,794.19	48.000%	\$23,421.21	\$72,215.40
15 Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Elida Drachenberg		100.00%	1	\$48,794.19	\$48,794.19	48.000%	\$23,421.21	\$72,215.40

**Budget Coversheet**

16	17	Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Hosea Jones		50.00%	0.5	\$48,794.19	\$24,397.09	48.000%	\$11,710.61	\$36,107.70
17	17	Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Eldaa Rivera		100.00%	1	\$48,794.19	\$48,794.19	48.000%	\$23,421.21	\$72,215.40
18	17	Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Jennifer Garcia		50.00%	0.5	\$48,794.19	\$24,397.09	48.000%	\$11,710.61	\$36,107.70
19	17	Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Claudia Pelayo		100.00%	1	\$48,794.19	\$48,794.19	48.000%	\$23,421.21	\$72,215.40
20	17	Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Vacant		100.00%	1	\$44,736.00	\$44,736.00	48.000%	\$21,473.28	\$66,209.28
21	17	Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Gabriela Nunez		100.00%	1	\$44,736.00	\$44,736.00	48.000%	\$21,473.28	\$66,209.28
22	17	Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Andrea Morey		60.00%	0.6	\$44,736.00	\$26,841.60	48.000%	\$12,883.97	\$39,725.57
23	13	Dietician	Shelly Nail		25.00%	0.25	\$58,194.00	\$14,548.50	48.000%	\$6,983.28	\$21,531.78
24	13	Dietician	Cheri Blucher		25.00%	0.25	\$65,143.00	\$16,285.75	48.000%	\$7,817.16	\$24,102.91
25	22	Office Manager/Secretary/Ad min Assistant	Mandy Adkins	25.00%		0.25	\$46,435.00	\$11,608.75	48.000%	\$5,572.20	\$17,180.95
26	22	Office Manager/Secretary/Ad min Assistant	Tanya Lee	100.00%		1	\$36,214.00	\$36,214.00	48.000%	\$17,382.72	\$53,596.72
27	22	Office Manager/Secretary/Ad min Assistant	Claire Bostick/S. Suchey	100.00%		1	\$36,214.00	\$36,214.00	48.000%	\$17,382.72	\$53,596.72



**Budget Coversheet**

28	26	Program Assistant	Miguel Vasquez		10.00%	0.1	\$81,392.00	\$8,139.20	48.000%	\$3,906.82	\$12,046.02
29	30	Research Specialist	Wayne Harris	25.00%		0.25	\$70,806.72	\$17,701.68	48.000%	\$8,496.81	\$26,198.49
30		22 Office Manager/Secretary/Ad min Assistant	Vacant	100.00%		1	\$36,214.00	\$36,214.00	48.000%	\$17,382.72	\$53,596.72
31	30	Research Specialist	Kevin Meconis	10.00%		0.1	\$81,449.00	\$8,144.90	48.000%	\$3,909.55	\$12,054.45
32	27	Project Coordinator	Vacant	100.00%		1	\$56,858.00	\$56,858.00	48.000%	\$27,291.84	\$84,149.84
		<b>Totals:</b>		<b>765.00%</b>	<b>1230.00%</b>	<b>19.95</b>	<b>\$1,740,203.14</b>	<b>\$989,847.00</b>		<b>\$475,126.56</b>	<b>\$1,464,973.57</b>

**Definition and basis for calculations of benefit rate(s):** Includes payroll taxes and medical/dental benefits at 48% of salaries.

## Budget Coversheet

Prime Grantee Name: Riverside FFY14 Budget  
 Grant Number: 0

### Operating Expenses

Budget Item	Description/Justification	Unit Cost	Quantity	Months	Total
Communication	Phones, computer lines, email (approx. \$80/month for 12 months per FTE (19.90 FTEs)	\$80.00	19.90	12.00	\$19,104.00
Cell Phones	Unit Cost = monthly rate for non-smart cell phones used by allowable county staff member. County will use a total of 7 cell phones. Cell Phones for Field staff 7 FTEs for 12 months @ \$30/phone 1. Elida Drachenber (#15 Health Educator) 2. Eldaa Rivera (#17 Health Educator) 3. Sophie Tan Hung (#13 Project Coordinator) 4. Claudia Pelayo (#19 Health Educator) 5. Victoria Wynn (#5 Community Liaison) 6. Anna Rubio (#6 Community Liaison) 7. Gabriela Nunez (#17 Health Educator)	\$30.00	7.00	12.00	\$2,520.00
One time purchase - cell phones	Unit Cost = Purchase price for non-smart cell phones used by allowable county staff member. County will use a total of 7 cell phones. Cell Phones	\$20.00	7.00	1.00	\$140.00
Insurance	Liability and property	\$485.00	1.00	12.00	\$5,820.00
Office Supplies	sample, pens, paper, folders, staples, note pads, cartridges, etc.	\$415.66	19.90	1.00	\$8,271.53
Maintenance	Copier, printer, fax machines, software	\$560.00	1.00	12.00	\$6,720.00
Laundry Service	Laundry Service for fruit/veggie costumes	\$30.00	1.00	12.00	\$360.00
Membership Fees	CAN ACT	\$2,500.00	1.00	1.00	\$2,500.00
Postage	State contracts/MOUs/reports/correspondences, etc.	\$40.00	1.00	12.00	\$480.00
Space	(Includes rent, utilities, janitorial, security, blog maintenance, RMAP): Network staff = 5.5% of staffing. Space cost prorated by 5.5% of FTEs	\$3,980.00	1.00	12.00	\$47,760.00
<b>Total Operating Expenses:</b>					<b>\$93,675.63</b>

### Equipment Expenses

Budget Item	Description/Justification	Unit Cost	Quantity	FTE	Total
Desktop Computers	PC with monitor : 1. Victoria Wynn (#5 Community Liaison) 2. Claudia Pelayo (#19 Health Educator) 3. Valerie Comeaux (#14 Health Educator) 4. Elida Drachenbert (#15 Health Educator) 5. Gabriela Nunez (#21 Health Educator)	\$2,000.00	5.00	5.00	\$10,000.00

**Budget Coversheet**

Desktop Computers	PC s with monitor replacements : 1. TBD (#32 Program Coordinator) 2. Tanya Lee (#26 Office Manager/Secretary /Admin Assistant) 3. Vacant (#30 Office Manager/Secretary/Admin Assistant) 4. Andrea Morey (#22 Health Educator at 60% FTE = \$1,200)				\$2,000.00	4.00	3.60	\$7,200.00
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### Budget Coversheet

Additional Equipment TBD	Additional Equipment TBD-As needed and with Network approval; purchase equipment for nutrition education at classes, such as a projector, scanners, cameras, etc.	\$2,000.04	5.00	5.00	\$10,000.20
<b>Total Equipment Expenses: \$27,200.20</b>					

### Travel and Per Diem

Travel/Position Title	Location	Trips	FTE	Days	Nights	Per Diem	Lodging *	Air	Miles	Reg. Fee	Other	Total
Mileage/Carpool for SOW meetings, site visits, events, conferences, airport travel, ect.	Various	205							246.00			\$28,492.95
CCLHDN/Administrator 1. Administrator (#3 Nancy Allende) - Under "OTHER" includes Parking \$11/day for 1 staff 2 times = \$22 and transportation at \$40 r/t for 1 staff 2 times = \$80.	Sacramento	1	1	2	2	\$40.00	\$110.00	\$415.00		\$440.00	\$51.00	\$1,206.00
NEOP Statewide Collaborative- 1. Administrator (#3 Nancy Allende) -- Under "OTHER" includes Parking \$11/day for 1 staff 2 times = \$22 and transportation at \$40 r/t for 1 staff 2 times = \$80.	Sacramento	1	1	1		\$40.00		\$415.00			\$51.00	\$506.00
Network Statewide Conference 1. Nancy Allende ( #3 Administrator) 2. Sophie Tan Hung (#13 Project Coordinator) 3. Claudia Pelayo (#19 Health Educator). Under "OTHER" includes parking at \$11 per day for 3 FTE's = \$33 and transportation r/t \$40 per 3 FTE = \$120.	Sacramento				2	\$40.00	\$110.00	\$415.00			\$51.00	\$2,298.00

Budget Coversheet

Media Training- 1. Claudia Pelayo (#19 Health Educator) 2. Elida Drachenberg (#15 Health Educator)-Under "OTHER" includes Parking \$11/day for 2 staff 3 times=\$66 and transportation at \$40 r/t for 2 staff 3 times=\$240.	3	2	1						\$415.00		\$51.00	\$2,796.00
Community of Excellence - 1. Sophie Tan Hung (#13 Project Coordinator) 2. Andrea Morey (#17 Health Educator) - Under "OTHER" includes Parking \$11/day for 2 staff 2 times=\$22 and transportation at \$40 r/t for 2 staff 2 times=\$80.	1	2	1					\$415.00		\$51.00	\$932.00	
Re Think Your Drink training - 1. Sophie Tan Hung (#13 Project Coordinator) 2. Jennifer Garcia (#18 Health Educator) - Under "OTHER" includes Parking \$11/day for 2 staff 2 times=\$22 and transportation at \$40 r/t for 2 staff 2 times=\$80.	1	2	1					\$415.00		\$51.00	\$932.00	
FANOUT Meetings (Quarterly)- 1. Nancy Allende (#3 Administrator) - Under "OTHER" includes Parking \$11/day for 1 staff 4 times=\$44 and transportation at \$40 r/t for 1 staff 4 times=\$160.	4	1	4	4	\$40.00	\$110.00	\$415.00			\$51.00	\$4,264.00	
LHD Project Coordinator meetings - 1. Nancy Allende (#3 Administrator) 2. Project Coordinator (#32 Vacant position to be filled) -Under "OTHER" includes Parking \$11/day for 2 staff 2 times=\$22 and transportation at \$40 r/t for 2 staff 2 times=\$80.	2	2	2.5	2	\$40.00	\$110.00	\$415.00			\$51.00	\$3,144.00	
<b>Total Travel and Per Diem:</b>											<b>\$44,570.95</b>	

## Budget Coversheet

\* Lodging cost includes taxes. Reimbursement at CalHR rates.

### Sub Grant(s)

Name	Description/Justification	Total
A Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$754,509.00
B Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$322,805.00
C Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$327,654.00
D Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$176,649.00
<b>Total Sub Grant(s):</b>		<b>\$1,581,617.00</b>

### Other Costs

Budget Item	Description/Justification	Unit Cost	Quantity	Misc.	Total
Printing	Business cards (Approx. 15-staff x \$20 /box-250 ea cards)	\$20.00	15.00	1.00	\$300.00
Printing	Participant data card (Approx. 9,000 X \$0.05/card)	\$0.05	9000.00	1.00	\$450.00
Printing	Flyers (color) (Approx. 11,143 ea X \$0.35)	\$0.35	11143.00	1.00	\$3,900.05
Printing	Surveys B&W copies (Approx. 1000 ea x \$0.05)	\$0.05	1000.00	1.00	\$50.00
Food Demos/Taste testing food/supplies	Taste testing food/supplies (35,000 Taste Tests x .60/test)	\$0.60	35000.00	1.00	\$21,000.00
Food Demos Supplies	Luggage carts, cooking utensils, canopies, serving bowls, ice chests, etc.	\$2,000.00	1.00	1.00	\$2,000.00
Educational materials required for delivery of critical program svcs used in events/education	Brochures (Approx. 10,000 ea. X \$0.14 )				
Educational materials required for delivery of critical program svcs used in events/education	Handouts (Approx. 1,000 ea x \$0.20)	\$0.14	10000.00	1.00	\$1,400.00
Educational materials required for delivery of critical program svcs used in events/education	Visual Aids which promote eating healthful foods, etc. (Approx. 30 ea x \$120)	\$0.20	10000.00	1.00	\$2,000.00
Educational materials required for delivery of critical program svcs used in events/education	Brochure/Hand-outs , MyPlate, etc. (Approx. 6,000 x \$0.35)	120.00	30.00	1.00	\$3,600.00
Educational materials required for delivery of critical program svcs used in events/education	Posters	\$0.35	6000.00	1.00	\$2,100.00
Educational materials required for delivery of critical program svcs used in events/education		\$15.00	20.00	1.00	\$300.00

**Budget Coversheet**

Educational materials required for delivery of critical program svcs used in events/education	Props such as MyPlate Visual Aids	\$50.00	8.00	1.00	\$400.00
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### Budget Coversheet

Laminating film	Approx 7-10 rolls X \$175-180 per roll	\$175.00	10.00	1.00	\$1,750.00
Rental Space	Rental space for community meetings, events (10-15 events) @ \$75-\$300 each	\$300.00	10.00	1.00	\$3,000.00
Special Events	Special Event Expenses TBD-required for the delivery of critical program services used to complete SOW Activities , such as Fruit and Veggie Fest, Food Day, Juneteenth (Targeting African American Community), Latino Health awareness month.	\$3,900.21	1.00	1.00	\$3,900.21
<b>Total Other Costs:</b>					<b>\$46,150.26</b>

### Indirect Costs

Calculation Method	%	\$ of Method	Total
25% of Total Salaries and Fringe Benefits	25.00%	\$1,464,973.57	\$366,243.39
		<b>Total Indirect Costs:</b>	<b>\$366,243.39</b>
			<b>Total Budget: \$3,624,431.00</b>



My AGENCY

County of Riverside, Department of Public Health

My POSITION

Supervising Nutritionist II

# LHD FFY 2014 Training-Based Travel Worksheet

Based on Proposed FFY 2014 'IN PERSON' Trainings & Locations

Proposed 'In Person' TRAININGS/MEETINGS	NEED or WANT for SNAP-Ed	BASIC or ADVANCED	Preferred LOCATION	# DAYS	# STAFF	Lodging estimate	Airfare estimate	Mileage estimate
<b>Administrative Operations</b>								
<b>Fiscal and Administrative Orientation</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	At LHD Site	1	8	n/a	n/a	165
<b>Leadership &amp; Partnership</b>								
<b>LHD Peer Exchange Mentor Program</b>	<input type="checkbox"/> NEED <input type="checkbox"/> Want	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input type="checkbox"/> So. CA	1	n/a			
<b>Other</b>	<input type="checkbox"/> NEED <input type="checkbox"/> Want	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input type="checkbox"/> So. CA	1				
<b>Media &amp; Communications</b>								
<b>Media Spokesperson SNAP-Ed NEOP</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	7	n/a	n/a	515
<b>Media Spokesperson Champions for Change</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	7	n/a	n/a	515
<b>Media Spokesperson Rethink Your Drink</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	7	n/a	n/a	515
<b>Media Spokesperson CX<sup>3</sup></b>	<input checked="" type="checkbox"/> NEED <input checked="" type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	6	n/a	n/a	445
<b>Community Based Initiatives</b>								
<b>Community Engagement Engaging Low Income Residents as Leaders</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	7	n/a	n/a	515
<b>Retail &amp; Corner Stores</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	6	n/a	n/a	445
<b>Youth Engagement</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	5	n/a	n/a	370
<b>Cultural Proficiency In Low income &amp; Ethnic Communities</b>	<input checked="" type="checkbox"/> NEED <input type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	7	n/a	n/a	515
<b>Other</b>	<input type="checkbox"/> NEED <input type="checkbox"/> Want	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input type="checkbox"/> So. CA	1				
<b>Other</b>	<input type="checkbox"/> NEED <input type="checkbox"/> Want	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input type="checkbox"/> So. CA					
<b>Research &amp; Evaluation</b>								
<b>Impact and Outcome Evaluation</b>			<i>Network Sponsored</i>					
			<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	6	n/a	n/a	445
<b>CX<sup>3</sup> Tier 1: On-line Mapping</b>	<input type="checkbox"/> NEED <input checked="" type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	6	n/a	n/a	445
<b>CX<sup>3</sup> Tier 2: On the Ground Survey</b>	<input type="checkbox"/> NEED <input checked="" type="checkbox"/> Want	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input checked="" type="checkbox"/> So. CA	1	6	n/a	n/a	445
<b>Meetings &amp; Conferences</b>								
<b>Network Statewide Conference</b>			<i>Network Sponsored</i>					
* Includes 1 day for pre/post training								
* Consider adding for youth track attendees								
			Sacramento Feb 2014	2+1	15	1800	6225	1350
<b>NEOP Statewide Collaborative</b>			<i>Network Sponsored</i>					
* Includes 1 day for pre or post training								
			Sacramento Nov 2014	2+1	6	660	2490	445

My AGENCY

County of Riverside, Department of Public Health

My POSITION

Supervising Nutritionist II

## LHD FFY 2014 Training-Based Travel Worksheet

Based on Proposed FFY 2014 'IN PERSON' Trainings & Locations

Proposed 'In Person' TRAININGS/MEETINGS	NEED or WANT for SNAP-Ed	BASIC or ADVANCED	Preferred LOCATION	# DAYS	# STAFF	Lodging estimate	Airfare estimate	Mileage estimate
<b>NEOP Statewide Collaborative</b> <i>* Includes pre or post training</i>	<i>Network Sponsored</i>		Sacramento May 2014	2+1	6	660	2490	445
<b>CCLHDN Membership Mtg. &amp; Leadership Forum</b>	<input type="checkbox"/> NEED <input checked="" type="checkbox"/> Want	N/A	<input checked="" type="checkbox"/> No. CA <input type="checkbox"/> So. CA	2	1	220	415	45
<b>FANOUT Meetings (Quarterly)</b>	<input type="checkbox"/> NEED <input checked="" type="checkbox"/> Want	N/A	Sacramento	4	1	440	1660	45
<b>Other</b>	<input type="checkbox"/> NEED <input type="checkbox"/> Want	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<input type="checkbox"/> No. CA <input type="checkbox"/> So. CA					

My AGENCY

County of Riverside, Department of Public Health

My POSITION

Supervising Nutritionist II

# Proposed LHD Webinar Training Topics for FFY 2014

Please check boxes and fill in the blanks to show your needs and preferences

NEED	Want	Don't Want	Basic or Advanced	TRAINING TOPICS	NEED	Want	Don't Want	Basic or Advanced	TRAINING TOPICS
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Administrative &amp; Fiscal</b> <b>Subcontracting SNAP-Ed for LHDs</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Communications &amp; Media</b> <b>Network Branding &amp; Writing for Low Literacy</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>CDPH Contract Amendments for LHDs</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Framing a Systems Approach to NEOP</b>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>LHD Progress Report Training</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Evaluation</b> <b>Geographic Information System (GIS)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Communities of Excellence - CX3</b> <b>CX<sup>3</sup> Outdoor, Mobile Vending, Food Banks, Emergency Outlets</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Impact and Outcome Training (IOE)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>CX<sup>3</sup> - How To Read Your Data</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Activity Tracking Form Training (ATF)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>CX<sup>3</sup> - How to Use Communications Tools</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Measuring PSE Changes</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>CX<sup>3</sup> - Implementation Plan Strategies</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Integrated Initiatives</b> <b>Community Engagement</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Key Channels</b> <b>Ethnic Communities</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Peer to Peer (promotora)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Faith Organizations</b>
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Physical Activity</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Health Care Providers</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Policy Systems &amp; Environmental Change</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Quick Service Restaurants</b>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Rethink Your Drink</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Retail &amp; Corner Stores</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Youth Engagement</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Worksite</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Leadership &amp; Partnership</b> <b>Community Nutrition Action Plans</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Schools &amp; Youth Serving Organizations</b> <b>Early Childhood Care &amp; Education Sites</b>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Facilitating Collaborative Partnerships</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>School/Afterschool Initiatives</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Partnering to Advance Policy</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Safe Routes to School</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Joint Use Agreements</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Youth Engagement</b>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Strengthening Food Policy Councils</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Power Play!</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	<b>Other  </b>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Skills &amp; Tools</b> <b>Community Toolbox</b>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	<b>Other</b> <b>LHD Programmatic Orientation</b>

My AGENCY

County of Riverside, Department of Public Health

My POSITION

Supervising Nutritionist II

## Proposed LHD Webinar Training Topics for FFY 2014

Please check boxes and fill in the blanks to show your needs and preferences

NEED	Want	Don't Want	Basic or Advanced	TRAINING TOPICS <small>(Proposed Webinars for FFY 2014)</small>	NEED	Want	Don't Want	Basic or Advanced	TRAINING TOPICS <small>(Proposed Webinars for FFY 2014)</small>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	Food Safety Demonstration	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	Network for a Healthy California Orientation
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Basic <input checked="" type="checkbox"/> Advanced	Harvest of the Month (HOTM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Basic <input type="checkbox"/> Advanced	Other

**EXHIBIT A1**

**DELIVERABLES FOR LOCAL  
HEALTH DEPARTMENT GRANTS**

**CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
NUTRITION EDUCATION AND OBESITY PREVENTION (NEOP) BRANCH  
Deliverables for Local Health Department Grants  
FFY 2014-2016**

**GRANT AGREEMENT NUMBER 13-20527**

**GOAL:** Supplemental Nutrition Assistance Program Nutrition Education (SNAP-Ed) participants and those eligible up to 185 percent Federal Poverty Level (FPL) are educated and receive support to consume healthy foods and beverages, reduce consumption of less healthy foods and beverages and to increase physical activity. These are the behavioral outcomes that the United States Department of Agriculture (USDA) expects and have the potential to reduce the prevalence of obesity and the onset of related chronic diseases in the SNAP-Ed population.

**Objective 1: Consumption and Access to Healthy Foods - Fruit and Vegetables**

Annually, as measured by statewide surveys and other surveillance systems, the percent of eligible Californian adults, teens, and children consuming fruits and vegetables will increase (measured as at least five servings of fruit and vegetables a day, two servings of fruit/day, and three servings of vegetables/day).

**Objective 2: Consumption and Access to Healthy Beverages and Reduced Consumption of Unhealthy Beverages**

Annually, as measured by statewide surveys and other surveillance systems, the percent of eligible Californian adults, teens, and children consuming low fat/nonfat milk and water will increase and consuming sugary beverages will decrease

**Objective 3: Physical Activity and Sedentary Behavior**

Annually, as measured by statewide surveys and other surveillance systems, the percent of eligible California adults, teens, and children who meet their respective age-level goals for physical activity will increase and the percent of youth who report watching two or fewer hours of television a day will increase

**Objective 4 - Environmental Supports for Nutrition Education**

Annually, as measured by policy/systems/environmental change reports, at least 50 percent of local health departments will report successful implementation of one (or more place-based nutrition and physical activity standard(s) or environmental support(s) to nutrition education.

**DELIVERABLES/OUTCOME MEASURES:** Local Health Departments (LHDs) are required to deliver SNAP-Ed services that use nutrition education, health promotion, and intervention strategies; comprehensive, multi-level interventions at multiple complementary organizational and institutional levels; and community and public health approaches to improve nutrition. To insure that the California Department of Public Health (CDPH) meets its statewide SNAP-Ed objectives, the Local Health Department (LHD) are responsible for meeting USDA assurances and the following checked



	C) "Communities of Excellence in Nutrition, Physical Activity and Obesity Prevention" (CX <sup>3</sup> ) or other evidence-based community assessment, including a plan for achieving identified changes, and resulting changes produced.	<input checked="" type="checkbox"/>
	D) Any presentation to decision makers of CX <sup>3</sup> or other community assessment findings along with (a) proposal(s) for action and an implemented action plan(s) for achieving the identified changes developed through full or modified consensus by community members and partners.	<input checked="" type="checkbox"/>
<b>Deliverable 4</b>	As applicable, report on successful implementation of Policy/ Systems/ Environmental Change (PSE) processes, including reach, effectiveness (outcomes), adoption, implementation, maintenance, and challenges faced, means used to overcome them, and next steps. Include copy/description of policy change enacted, system altered and/or photographs of environmental change made to improve access to healthy foods and beverages and to improve opportunities for physical activity.	<input checked="" type="checkbox"/>
<b>Deliverable 5</b>	Quarterly Expense documenting all expenses incurred during the quarter with the ability to provide back-up documentation for one quarter's expenses in sufficient detail to allow CDPH to ascertain compliance with USDA grant rules for allowable expenses. Likewise, provide Quarterly Progress Reports describing in detail the program activities conducted during the quarter, and the ability to provide source documentation in sufficient detail to support the reported activities.	<input checked="" type="checkbox"/>
<b>Deliverable 6</b>	Evaluation of a minimum series of five nutrition education classes using practice or evidence-based lessons using the <i>Network's</i> standard pre/post-test Impact/Outcome evaluation design focused on behaviorally focused outcomes for a specified number of individuals. (Note: Required only for LHDs receiving $\geq$ \$350,000 in the base grant)	<input checked="" type="checkbox"/>



**EXHIBIT B**  
**BUDGET DETAIL**

## Budget Coversheet

Prime Grantee Name: Riverside FFY14 Budget  
 Grant Number: 13-20527

Position Title * Job Descriptions for each position can be found on the Job Descriptions tab.	Position Names	Description of Job Duties % of SNAP-Ed Time spent on Mgmt/Admin Duties	% of SNAP-Ed Time spent on Direct SNAP-Ed Delivery	FTEs charged to SNAP-Ed	Total Annual Salary	Total SNAP-Ed Salary	Benefit Rate	*Total SNAP-Ed Salary X Benefit Rate	SNAP-Ed Salary, Benefits and Wages, Federal Dollars only
1 Accountant/Finance Analyst	Criselyn Enriquez	100.00%	0.00%	0.3	\$55,800.00	\$16,740.00	48.000%	\$8,035.20	\$24,775.20
1 Accountant/Finance Analyst	Sheryl Salgado	100.00%	0.00%	0.15	\$51,476.00	\$7,721.40	48.000%	\$3,706.27	\$11,427.67
3 Administrator (e.g., Director of Programs)	Nancy Allende	100.00%	0.00%	1	\$75,599.00	\$75,599.00	48.000%	\$36,287.52	\$111,886.52
5 Chief Executive Officer	Gayle Hoxter	100.00%	0.00%	0.25	\$112,803.00	\$28,200.75	48.000%	\$13,536.36	\$41,737.11
6 Community Liaison	Victoria Wynn	0.00%	100.00%	1	\$38,288.16	\$38,288.16	48.000%	\$18,378.32	\$56,666.48
6 Community Liaison	Anna Rubio	0.00%	100.00%	1	\$38,288.16	\$38,288.16	48.000%	\$18,378.32	\$56,666.48
6 Community Liaison	Linda Quintero	0.00%	100.00%	0.5	\$38,288.16	\$19,144.08	48.000%	\$9,189.16	\$28,333.24
6 Community Liaison	Maria Lua Ceja	0.00%	100.00%	0.5	\$38,288.16	\$19,144.08	48.000%	\$9,189.16	\$28,333.24
6 Community Liaison	Jose Arballo	0.00%	100.00%	0.1	\$60,471.00	\$6,047.10	48.000%	\$2,902.61	\$8,949.71
7 Computer Specialist	Various	100.00%	0.00%	0.1	\$53,726.88	\$5,372.69	48.000%	\$2,578.89	\$7,951.58
8 Contract Manager	Claudia Rodriguez/Jon Vermilya	100.00%	0.00%	1	\$51,610.75	\$51,610.75	48.000%	\$24,773.16	\$76,383.91
8 Contract Manager	Yolie Smith	100.00%	0.00%	0.25	\$64,258.00	\$16,064.50	48.000%	\$7,710.96	\$23,775.46
13 Project Coordinator	Sophie Tan Hung	0.00%	100.00%	1	\$65,413.00	\$65,413.00	48.000%	\$31,398.24	\$96,811.24
17 Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Valerie Comeaux	0.00%	100.00%	1	\$48,794.19	\$48,794.19	48.000%	\$23,421.21	\$72,215.40
17 Health Educator (Including Health Aide, Health Promotion Instructor, etc.)	Elida Drachenberg	0.00%	100.00%	1	\$48,794.19	\$48,794.19	48.000%	\$23,421.21	\$72,215.40

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**Budget Coversheet**

16	17	Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Hosea Jones		0.00%	100.00%	0.5	\$48,794.19	\$24,397.09	48.0000%	\$11,710.61	\$36,107.70
17	17	Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Eldaa Rivera		0.00%	100.00%	1	\$48,794.19	\$48,794.19	48.0000%	\$23,421.21	\$72,215.40
18	17	Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Jennifer Garcia		0.00%	100.00%	0.5	\$48,794.19	\$24,397.09	48.0000%	\$11,710.61	\$36,107.70
19	17	Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Claudia Pelayo		0.00%	100.00%	1	\$48,794.19	\$48,794.19	48.0000%	\$23,421.21	\$72,215.40
20	17	Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Vacant		0.00%	100.00%	1	\$44,736.00	\$44,736.00	48.0000%	\$21,473.28	\$66,209.28
21	17	Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Gabriela Nunez		0.00%	100.00%	1	\$44,736.00	\$44,736.00	48.0000%	\$21,473.28	\$66,209.28
22	17	Health Educator (including Health Aide, Health Promotion Instructor, etc.)	Andrea Morey		0.00%	100.00%	0.6	\$44,736.00	\$26,841.60	48.0000%	\$12,883.97	\$39,725.57
23	13	Dietician	Shelly Nail		0.00%	100.00%	0.25	\$58,194.00	\$14,548.50	48.0000%	\$6,983.28	\$21,531.78
24	13	Dietician	Cheri Blucher		0.00%	100.00%	0.25	\$65,143.00	\$16,285.75	48.0000%	\$7,817.16	\$24,102.91
25	22	Office Manager/Secretary/Ad min Assistant	Mandy Adkins		100.00%	0.00%	0.25	\$46,435.00	\$11,608.75	48.0000%	\$5,572.20	\$17,180.95
26	22	Office Manager/Secretary/Ad min Assistant	Tanya Lee		100.00%	0.00%	1	\$36,214.00	\$36,214.00	48.0000%	\$17,382.72	\$53,596.72
27	22	Office Manager/Secretary/Ad min Assistant	Claire Bostick/S. Suchey		100.00%	0.00%	1	\$36,214.00	\$36,214.00	48.0000%	\$17,382.72	\$53,596.72

**Budget Coversheet**

28	26	Program Assistant	Miguel Vasquez	0.00%	100.00%	0.1	\$81,392.00	\$8,139.20	48.0000%	\$3,906.82	\$12,046.02
29	30	Research Specialist	Wayne Harris	100.00%	0.00%	0.25	\$70,806.72	\$17,701.68	48.0000%	\$8,496.81	\$26,198.49
30		22 Office Manager/Secretary/Ad min Assistant	Vacant	100.00%	0.00%	1	\$36,214.00	\$36,214.00	48.0000%	\$17,382.72	\$33,596.72
31	30	Research Specialist	Kevin Meconis	100.00%	0.00%	0.1	\$81,449.00	\$8,144.90	48.0000%	\$3,909.55	\$12,054.45
32	27	Project Coordinator	Vacant	100.00%	0.00%	1	\$56,858.00	\$56,858.00	48.0000%	\$27,291.84	\$84,149.84
		<b>Totals:</b>		<b>1400.00%</b>	<b>1800.00%</b>	<b>19.95</b>	<b>\$1,740,203.14</b>	<b>\$989,847.00</b>		<b>\$475,126.56</b>	<b>\$1,464,973.57</b>

**Definition and basis for calculations of benefit rate(s):** Includes payroll taxes and medical/dental benefits at 48% of salaries.

## Budget Coversheet

Prime Grantee Name: Riverside FFY14 Budget  
 Grant Number: 13-20527

### Operating Expenses

Budget Item	Description/Justification	Unit Cost	Quantity	Months	Total
Communication	Phones, computer lines, email (approx. \$80/month for 12 months per FTE (19.90 FTEs)	\$80.00	19.90	12.00	\$19,104.00
Cell Phones	Unit Cost = monthly rate for non-smart cell phones used by allowable county staff member. County will use a total of 7 cell phones. Cell Phones for Field staff 7 FTEs for 12 months @ \$30/phone 1. Elida Drachenber (#15 Health Educator) 2. Eldaa Rivera (#17 Health Educator) 3. Sophie Tan Hung (#13 Project Coordinator) 4. Claudia Pelayo (#19 Health Educator) 5. Victoria Wynn (#5 Community Liaison) 6. Anna Rubio (#6 Community Liaison) 7. Gabriela Nunez (#17 Health Educator)	\$30.00	7.00	12.00	\$2,520.00
One time purchase - cell phones	Unit Cost = Purchase price for non-smart cell phones used by allowable county staff member. County will use a total of 7 cell phones. Cell Phones Purchase price @ \$20 each = \$140. 1. Elida Drachenber (#15 Health Educator) 2. Eldaa Rivera (#17 Health Educator) 3. Sophie Tan Hung (#13 Project Coordinator) 4. Claudia Pelayo (#19 Health Educator) 5. Victoria Wynn (#5 Community Liaison) 6. Anna Rubio (#6 Community Liaison) 7. Gabriela Nunez (#17 Health Educator)	\$20.00	7.00	1.00	\$140.00
Insurance	Liability and property	\$485.00	1.00	12.00	\$5,820.00
Office Supplies	sample, pens, paper, folders, staples, note pads, cartridges, etc.	\$415.66	19.90	1.00	\$8,271.63
Maintenance	Copier, printer, fax machines, software	\$560.00	1.00	12.00	\$6,720.00
Laundry Service	Laundry Service for fruit/veggie costumes	\$30.00	1.00	12.00	\$360.00
Membership Fees	CAN ACT	\$2,500.00	1.00	1.00	\$2,500.00
Postage	State contracts/MOUs/reports/correspondences, etc.	\$40.00	1.00	12.00	\$480.00
Space	(includes rent, utilities, janitorial, security, bldg maintenance, RMAP); Network staff = 5.5% of staffing. Space cost prorated by 5.5% of FTEs	\$3,980.00	1.00	12.00	\$47,760.00
<b>Total Operating Expenses:</b>					<b>\$93,675.63</b>

## Budget Coversheet

### Equipment Expenses

Budget Item	Description/Justification	Unit Cost	Quantity	FTE	Total
Desktop Computers	PC with monitor : 1. Victoria Wynn (#5 Community Liaison) 2. Claudia Pelayo (#19 Health Educator) 3. Valerie Comeaux (#14 Health Educator) 4. Elida Drachenbert (#15 Health Educator) 5. Gabriela Nunez (#21 Health Educator)	\$2,000.00	5.00	5.00	\$10,000.00
Desktop Computers	PC s with monitor replacements : 1. TBD (#32 Program Coordinator) 2. Tanya Lee (#26 Office Manager/Secretary /Admin Assistant) 3. Vacant (#30 Office Manager/Secretary/Admin Assistant) 4. Andrea Morey (#22 Health Educator at 60% FTE = \$1,200)	\$2,000.00	4.00	3.60	\$7,200.00
Additional Equipment TBD	Additional Equipment TBD-As needed and with Network approval; purchase equipment for nutrition education at classes, such as a projector, scanners, cameras, etc.	\$2,000.04	5.00	5.00	\$10,000.20
Total Equipment Expenses:					\$27,200.20

### Travel and Per Diem

Travel/Position Title	Location	Trips	FTE	Days	Nights	Per Diem	Lodging *	Air	Miles	Reg. Fee	Other	Total
Mileage/Carpool for SOW meetings, site visits, events, conferences, airport travel, ect.	Various	205	21.2	192					246.00			\$28,492.95
CCLHDN/Administrator 1. Administrator (#3 Nancy Allende) - Under "OTHER" includes Parking \$11/day for 1 staff 2 times=\$22 and transportation at \$40 r/t for 1 staff 2 times=\$80.	Sacramento	1	1	2	2	\$40.00	\$110.00	\$415.00		\$440.00	\$51.00	\$1,206.00
NEOP Statewide Collaborative- 1. Administrator (#3 Nancy Allende) - Under "OTHER" includes Parking \$11/day for 1 staff 2 times=\$22 and transportation at \$40 r/t for 1 staff 2 times=\$80.	Sacramento	1	1	1	1	\$40.00	\$415.00				\$51.00	\$506.00

**Budget Coversheet**

Network Statewide Conference 1. Nancy Allende ( #3 Administrator) 2. Sophie Tan Hung (#13 Project Coordinator) 3. Claudia Pelayo (#19 Health Educator). Under "OTHER" includes parking at \$11 per day for 3 FTE's = \$33 and transportation r/t \$40 per 3 FTE = \$120.	Sacramento	1	3	2	2	\$40.00	\$110.00	\$415.00	\$51.00	\$2,298.00
Media Training- 1. Claudia Pelayo (#19 Health Educator) 2. Elida Drachenberg (#15 Health Educator)-Under "OTHER" includes Parking \$11/day for 2 staff 3 times =\$66 and transportation at \$40 r/t for 2 staff 3 times =\$240.	Sacramento	3	2	1				\$415.00	\$51.00	\$2,796.00
Community of Excellence - 1. Sophie Tan Hung (#13 Project Coordinator) 2. Andrea Morey (#17 Health Educator) - Under "OTHER" includes Parking \$11/day for 2 staff 2 times =\$22 and transportation at \$40 r/t for 2 staff 2 times =\$80.	Sacramento	1	2	1				\$415.00	\$51.00	\$932.00
Re Think Your Drink training - 1. Sophie Tan Hung (#13 Project Coordinator) 2. Jennifer Garcia (#18 Health Educator) - Under "OTHER" includes Parking \$11/day for 2 staff 2 times =\$22 and transportation at \$40 r/t for 2 staff 2 times =\$80.	Sacramento	1	2	1				\$415.00	\$51.00	\$932.00

**Budget Coversheet**

FANOUT Meetings (Quarterly)- 1. Nancy Allende (#3 Administrator) - Under "OTHER" includes Parking \$11/day for 1 staff 4 times =\$44 and transportation at \$40 r/t for 1 staff 4 times =\$160.		Sacramento													
4	1	4	4	\$40.00	\$110.00	\$415.00								\$51.00	\$4,264.00
LHD Project Coordinator meetings - 1. Nancy Allende (#3 Administrator) 2. Project Coordinator (#32 Vacant position to be filled) -Under "OTHER" includes Parking \$11/day for 2 staff 2 times =\$22 and transportation at \$40 r/t for 2 staff 2 times =\$80.		Sacramento													
2	2	2.5	2	\$40.00	\$110.00	\$415.00								\$51.00	\$3,144.00
<b>Total Travel and Per Diem: \$44,570.95</b>															

\* Lodging cost includes taxes. Reimbursement at CalHR rates.

**Sub Grant(s)**

Name	Description/Justification	Total
A Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$754,509.00
B Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$322,805.00
C Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$327,654.00
D Subcontractor - City - TBD	To promote Nutrition Services & Obesity prevention education to low income neighborhoods.	\$176,649.00
<b>Total Sub Grant(s):</b>		<b>\$1,581,617.00</b>

**Other Costs**

Budget Item	Description/Justification	Unit Cost	Quantity	Misc.	Total
Printing	Business cards (Approx. 15-staff x \$20 /box-250 ea cards)	\$20.00	15.00	1.00	\$300.00
Printing	Participant data card (Approx. 9,000 X \$0.05/card)	\$0.05	9000.00	1.00	\$450.00
Printing	Flyers (color) (Approx. 11,143 ea X \$0.35)	\$0.35	11143.00	1.00	\$3,900.05
Printing	Surveys B&W copies (Approx. 1000 ea x \$0.05)	\$0.05	1000.00	1.00	\$50.00
Food Demos/Taste testing food/supplies	Taste testing food/supplies (35,000 Taste Tests x .60/test)	\$0.60	35000.00	1.00	\$21,000.00
Food Demos Supplies	Luggage carts, cooking utensils, canopies, serving bowls, ice chests, etc.	\$2,000.00	1.00	1.00	\$2,000.00



**Budget Coversheet**

Educational materials required for delivery of critical program svcs used in events/education	Brochures (Approx. 10,000 ea. X \$0.14 )	\$0.14	10000.00	1.00	\$1,400.00
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**Budget Coversheet**

Educational materials required for delivery of critical program svcs used in events/education	Handouts (Approx. 1,000 ea x \$0.20)	\$0.20	10000.00	1.00	\$2,000.00
Educational materials required for delivery of critical program svcs used in events/education	Visual Aids which promote eating healthful foods, etc. (Approx. 30 ea x \$120)	120.00	30.00	1.00	\$3,600.00
Educational materials required for delivery of critical program svcs used in events/education	Brochure/Hand-outs, MyPlate, etc. (Approx. 6,000 x \$0.35)	\$0.35	6000.00	1.00	\$2,100.00
Educational materials required for delivery of critical program svcs used in events/education	Posters	\$15.00	20.00	1.00	\$300.00
Educational materials required for delivery of critical program svcs used in events/education	Props such as MyPlate Visual Aids	\$50.00	8.00	1.00	\$400.00
Laminating film	Approx 7-10 rolls X \$175-180 per roll	\$175.00	10.00	1.00	\$1,750.00
Rental Space	Rental space for community meetings, events (10-15 events) @ \$75-\$300 each	\$300.00	10.00	1.00	\$3,000.00
Special Events	Special Event Expenses TBD-required for the delivery of critical program services used to complete SOW Activities , such as Fruit and Veggie Fest, Food Day, Juneteenth (Targeting African American Community), Latino Health awareness month.	\$3,900.21	1.00	1.00	\$3,900.21
<b>Total Other Costs:</b>					<b>\$46,150.26</b>

**Indirect Costs**

Calculation Method	%	\$ of Method	Total
25% of Total Salaries and Fringe Benefits	25.00%	\$1,464,973.57	\$366,243.39
		<b>Total Indirect Costs:</b>	<b>\$366,243.39</b>

<b>Total Budget:</b>	<b>\$9,624,431.00</b>
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**EXHIBIT C**  
**STANDARD GRANT CONDITIONS**

**EXHIBIT C**  
**STANDARD GRANT CONDITIONS**

1. **APPROVAL:** This Grant is of no force or effect until signed by both parties and approved by the Department of General Services, if required. The Grantee may not commence performance until such approval has been obtained
2. **AMENDMENT:** No amendment or variation of the terms of this Grant shall be valid unless made in writing, signed by the parties, and approved as required. No oral understanding or Agreement not incorporated in the Grant is binding on any of the parties. In no case shall the Department materially alter the scope of the Project set forth in Exhibit A.
3. **ASSIGNMENT:** This Grant is not assignable by the Grantee, either in whole or in part, without the written consent of the Grant Manager in the form of a written amendment to the Grant.
4. **AUDIT:** Grantee agrees that the Department, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to this Grant. Grantee agrees to maintain such records for a possible audit for a minimum of three (3) years after final payment or completion of the project funded with this Grant, unless a longer period of records retention is stipulated. Grantee agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, Grantee agrees to include a similar right of the State to audit records and interview staff in any subcontract related to the project.
5. **CONFLICT OF INTEREST:** Grantee certifies that it is in compliance with all applicable state and/or federal conflict of interest laws.
6. **INDEMNIFICATION:** Grantee agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the project, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Grantee in the performance of any activities related to the Project.
7. **FISCAL MANAGEMENT SYSTEMS AND ACCOUNTING STANDARDS:** Grantee agrees that, at a minimum, its fiscal control and accounting procedures will be sufficient to permit tracing of all grant funds to a level of expenditure adequate to establish that such funds have not been used in violation of any applicable state or federal law, or the

provisions of this Grant. Grantee further agrees that it will maintain separate Project accounts in accordance with generally accepted accounting principles.

8. **GOVERNING LAW:** This Grant is governed by and shall be interpreted in accordance with the laws of the State of California.
9. **INCOME RESTRICTIONS:** Grantee agrees that any refunds, rebates, credits, or other amounts (including any interest thereon) accruing to or received by the Grantee under this Grant shall be paid by the Grantee to the Department, to the extent that they are properly allocable to costs for which the Grantee has been reimbursed by the Department under this Grant.
10. **INDEPENDENT ACTOR:** Grantee, and its agents and employees of Grantee, in the performance of the Project, shall act in an independent capacity and not as officers, employees or agents of the Department.
11. **MEDIA EVENTS:** Grantee shall notify the Department's Grant Manager in writing at least twenty (20) working days before any public or media event publicizing the accomplishments and/or results of the Project and provide the opportunity for attendance and participation by Department's representatives.
12. **NO THIRD-PARTY RIGHTS:** The Department and Grantee do not intend to create any rights or remedies for any third-party as a beneficiary of this Grant or the project.
13. **NOTICE:** Grantee shall promptly notify the Department's Grant Manager in writing of any events, developments or changes that could affect the completion of the project or the budget approved for this Grant.
14. **PROFESSIONALS:** Grantee agrees that only licensed professionals will be used to perform services under this Grant where such services are called for.
15. **RECORDS:** Grantee certifies that it will maintain Project accounts in accordance with generally accepted accounting principles. Grantee further certifies that it will comply with the following conditions for a grant award as set forth in the Request for Applications (Exhibit D) and the Grant Application (Exhibit A).
  - Establish an official file for the Project which shall adequately document all significant actions relative to the Project;
  - Establish separate accounts which will adequately and accurately depict all

amounts received and expended on this Project, including all grant funds received under this Grant;

- Establish separate accounts which will adequately depict all income received which is attributable to the Project, especially including any income attributable to grant funds disbursed under this Grant;
- Establish an accounting system which will adequately depict final total costs of the Project, including both direct and indirect costs; and,
- Establish such accounts and maintain such records as may be necessary for the state to fulfill federal reporting requirements, including any and all reporting requirements under federal tax statutes or regulations.

**16. RELATED LITIGATION:** Under no circumstances may Grantee use funds from any disbursement under this Grant to pay for costs associated with any litigation between the Grantee and the Department.

**17. RIGHTS IN DATA:** Grantee and the Department agree that all data, plans, drawings, specifications, reports, computer programs, operating manuals, notes, and other written or graphic work submitted under Exhibit A in the performance of the Project funded by this Grant shall be in the public domain. Grantee may disclose, disseminate and use in whole or in part, any final form data and information received, collected, and developed under this Project, subject to appropriate acknowledgment of credit to the Department for financial support. Grantee shall not utilize the materials submitted to the Department (except data) for any profit making venture or sell or grant rights to a third-party who intends to do so. The Department has the right to use submitted data for all governmental purposes.

**18. VENUE:** The Department and Grantee agree that any action arising out of this Grant shall be filed and maintained in the Superior Court, County of Sacramento, California. Grantee waives any existing sovereign immunity for the purposes of this Grant, if applicable.

**EXHIBIT D**  
**FEDERAL PROVISIONS**

**Special Terms and Conditions**

*(For federally funded Grant agreements)*

The use of headings or titles throughout this exhibit is for convenience only and shall not be used to interpret or to govern the meaning of any specific term or condition.

The terms "Grantee" and "SubGrantee" shall also mean, "agreement", "grant", "grant agreement", "Grantee" and "Subgrantee" respectively.

The terms "California Department of Public Health" and "CDPH" shall have the same meaning and refer to the California State agency that is a party to this Agreement.

This exhibit contains provisions that require strict adherence to various contracting laws and policies.

**Index of Special Terms and Conditions**

1. Federal Contract Funds
2. Federal Equal Employment Opportunity Requirements
3. Debarment and Suspension Certification
4. Covenant Against Contingent Fees
5. Air or Water Pollution Requirements
6. Lobbying Restrictions and Disclosure Certification
7. Additional Restrictions



**1. Federal Contract Funds**

(Applicable only to that portion of an agreement funded in part or whole with federal funds.)

- a. It is mutually understood between the parties that this Agreement may have been written before ascertaining the availability of congressional appropriation of funds, for the mutual benefit of both parties, in order to avoid program and fiscal delays which would occur if the Agreement were executed after that determination was made.
- b. This agreement is valid and enforceable only if sufficient funds are made available to the State by the United States Government for the fiscal years covered by the term of this Agreement. In addition, this Agreement is subject to any additional restrictions, limitations, or conditions enacted by the Congress or any statute enacted by the Congress which may affect the provisions, terms or funding of this Agreement in any manner.
- c. It is mutually agreed that if the Congress does not appropriate sufficient funds for the program, this Agreement shall be amended to reflect any reduction in funds.
- d. CDPH has the option to invalidate or cancel the Agreement with 30-days advance written notice or to amend the Agreement to reflect any reduction in funds.

**2. Federal Equal Opportunity Requirements**

(Applicable to all federally funded agreements entered into by the California Department of Public Health (CDPH) formerly known as California Department of Health Services (CDHS).)

- a. The Grantee will not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, physical or mental handicap, disability, age or status as a disabled veteran or veteran of the Vietnam era. The Grantee will take affirmative action to ensure that qualified applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, sex, national origin, physical or mental handicap, disability, age or status as a disabled veteran or veteran of the Vietnam era. Such action shall include, but not be limited to the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and career development opportunities and selection for training, including apprenticeship. The Grantee agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Federal Government or CDPH, setting forth the provisions of the Equal Opportunity clause, Section 503 of the Rehabilitation Act of 1973 and the affirmative action clause required by the Vietnam Era Veterans' Readjustment Assistance Act of 1974 (38 U.S.C. 4212). Such notices shall state the Grantee's obligation under the law to take affirmative action to employ and advance in employment qualified applicants without discrimination based on their race, color, religion, sex, national origin physical or mental handicap, disability, age or status as a disabled veteran or veteran of the Vietnam era and the rights of applicants and employees.
- b. The Grantee will, in all solicitations or advancements for employees placed by or on behalf of the Grantee, state that all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin physical or mental handicap, disability, age or status as a disabled veteran or veteran of the Vietnam era.
- c. The Grantee will send to each labor union or representative of workers with which it has a collective bargaining agreement or other contract or understanding a notice, to be provided by the Federal Government or the State, advising the labor union or workers' representative of the Grantee's commitments under the provisions herein and shall post copies of the notice in conspicuous places available to employees and applicants for employment.
- d. The Grantee will comply with all provisions of and furnish all information and reports required by Section 503 of the Rehabilitation Act of 1973, as amended, the Vietnam Era Veterans' Readjustment Assistance Act of 1974 (38 U.S.C. 4212) and of the Federal Executive Order No. 11246 as amended, including by Executive Order 11375, 'Amending Executive Order 11246 Relating to Equal Employment Opportunity,' and as supplemented by regulation at 41 CFR part 60, "Office of the Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor," and of the rules, regulations, and relevant orders of the Secretary of Labor.

- e. The Grantee will furnish all information and reports required by Federal Executive Order No. 11246 as amended, including by Executive Order 11375, 'Amending Executive Order 11246 Relating to Equal Employment Opportunity,' and as supplemented by regulation at 41 CFR part 60, "Office of the Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor," and the Rehabilitation Act of 1973, and by the rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to its books, records, and accounts by the State and its designated representatives and the Secretary of Labor for purposes of investigation to ascertain compliance with such rules, regulations, and orders.
- f. In the event of the Grantee's noncompliance with the requirements of the provisions herein or with any federal rules, regulations, or orders which are referenced herein, this Agreement may be cancelled, terminated, or suspended in whole or in part and the Grantee may be declared ineligible for further federal and state contracts in accordance with procedures authorized in Federal Executive Order No. 11246 as amended and such other sanctions may be imposed and remedies invoked as provided in Federal Executive Order No. 11246 as amended, including by Executive Order 11375, 'Amending Executive Order 11246 Relating to Equal Employment Opportunity,' and as supplemented by regulation at 41 CFR part 60, "Office of the Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor," or by rule, regulation, or order of the Secretary of Labor, or as otherwise provided by law.
- g. The Grantee will include the provisions of Paragraphs a through g in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to Federal Executive Order No. 11246 as amended, including by Executive Order 11375, 'Amending Executive Order 11246 Relating to Equal Employment Opportunity,' and as supplemented by regulation at 41 CFR part 60, "Office of the Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor," or Section 503 of the Rehabilitation Act of 1973 or (38 U.S.C. 4212) of the Vietnam Era Veteran's Readjustment Assistance Act, so that such provisions will be binding upon each subGrantee or vendor. The Grantee will take such action with respect to any subcontract or purchase order as the Director of the Office of Federal Contract Compliance Programs or CDPH may direct as a means of enforcing such provisions including sanctions for noncompliance provided, however, that in the event the Grantee becomes involved in, or is threatened with litigation by a subGrantee or vendor as a result of such direction by CDPH, the Grantee may request in writing to CDPH, who, in turn, may request the United States to enter into such litigation to protect the interests of the State and of the United States.

### 3. Debarment and Suspension Certification

(Applicable to all agreements funded in part or whole with federal funds.)

- a. By signing this Agreement, the Grantee/Grantee agrees to comply with applicable federal suspension and debarment regulations including, but not limited to 7 CFR Part 3017, 45 CFR 76, 40 CFR 32 or 34 CFR 85.
- b. By signing this Agreement, the Grantee certifies to the best of its knowledge and belief, that it and its principals:
  - (1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any federal department or agency;
  - (2) Have not within a three-year period preceding this application/proposal/agreement been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - (3) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in Paragraph b(2) herein; and
  - (4) Have not within a three-year period preceding this application/proposal/agreement had one or more public transactions (Federal, State or local) terminated for cause or default.

- (5) Shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under federal regulations (i.e., 48 CFR part 9, subpart 9.4), debarred, suspended, declared ineligible, or voluntarily excluded from participation in such transaction, unless authorized by the State.
  - (6) Will include a clause entitled, "Debarment and Suspension Certification" that essentially sets forth the provisions herein, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- c. If the Grantee is unable to certify to any of the statements in this certification, the Grantee shall submit an explanation to the CDPH Program Contract Manager.
  - d. The terms and definitions herein have the meanings set out in the Definitions and Coverage sections of the rules implementing Federal Executive Order 12549.
  - e. If the Grantee knowingly violates this certification, in addition to other remedies available to the Federal Government, the CDPH may terminate this Agreement for cause or default.

#### 4. Covenant Against Contingent Fees

(Applicable only to federally funded agreements.)

The Grantee warrants that no person or selling agency has been employed or retained to solicit/secure this Agreement upon an agreement of understanding for a commission, percentage, brokerage, or contingent fee, except *bona fide* employees or *bona fide* established commercial or selling agencies retained by the Grantee for the purpose of securing business. For breach or violation of this warranty, CDPH shall have the right to annul this Agreement without liability or in its discretion to deduct from the Agreement price or consideration, or otherwise recover, the full amount of such commission, percentage, and brokerage or contingent fee.

#### 5. Air or Water Pollution Requirements

Any federally funded agreement and/or subcontract in excess of \$100,000 must comply with the following provisions unless said agreement is exempt under 40 CFR 15.5.

- a. Government Grantees agree to comply with all applicable standards, orders, or requirements issued under section 306 of the Clean Air Act [42 U.S.C. 1857(h)], section 508 of the Clean Water Act (33 U.S.C. 1368), Executive Order 11738, and Environmental Protection Agency regulations (40 CFR part 15).
- b. Institutions of higher education, hospitals, nonprofit organizations and commercial businesses agree to comply with all applicable standards, orders, or requirements issued under the Clean Air Act (42 U.S.C. 7401 et seq.), as amended, and the Federal Water Pollution Control Act (33 U.S.C. 1251 et seq.), as amended.

#### 6. Lobbying Restrictions and Disclosure Certification

(Applicable to federally funded agreements in excess of \$100,000 per Section 1352 of the 31, U.S.C.)

##### a. Certification and Disclosure Requirements

- (1) Each person (or recipient) who requests or receives a contract or agreement, subcontract, grant, or subgrant, which is subject to Section 1352 of the 31, U.S.C., and which exceeds \$100,000 at any tier, shall file a certification (in the form set forth in Attachment 1, consisting of one page, entitled "Certification Regarding Lobbying") that the recipient has not made, and will not make, any payment prohibited by Paragraph b of this provision.
- (2) Each recipient shall file a disclosure (in the form set forth in Attachment 2, entitled "Standard Form-LLL 'disclosure of Lobbying Activities'") if such recipient has made or has agreed to make any payment using nonappropriated funds (to include profits from any covered federal action) in connection with a contract, or grant or any extension or amendment of that contract, or grant, which would be prohibited under Paragraph b of this provision if paid for with appropriated funds.

- (3) Each recipient shall file a disclosure form at the end of each calendar quarter in which there occurs any event that requires disclosure or that materially affect the accuracy of the information contained in any disclosure form previously filed by such person under Paragraph a(2) herein. An event that materially affects the accuracy of the information reported includes:
  - (a) A cumulative increase of \$25,000 or more in the amount paid or expected to be paid for influencing or attempting to influence a covered federal action;
  - (b) A change in the person(s) or individuals(s) influencing or attempting to influence a covered federal action; or
  - (c) A change in the officer(s), employee(s), or member(s) contacted for the purpose of influencing or attempting to influence a covered federal action.
- (4) Each person (or recipient) who requests or receives from a person referred to in Paragraph a(1) of this provision a contract or agreement, subcontract, grant or subgrant exceeding \$100,000 at any tier under a contract or agreement, or grant shall file a certification, and a disclosure form, if required, to the next tier above.
- (5) All disclosure forms (but not certifications) shall be forwarded from tier to tier until received by the person referred to in Paragraph a(1) of this provision. That person shall forward all disclosure forms to CDPH Program Contract Manager.

b. Prohibition

Section 1352 of Title 31, U.S.C., provides in part that no appropriated funds may be expended by the recipient of a federal contract or agreement, grant, loan, or cooperative agreement to pay any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with any of the following covered federal actions: the awarding of any federal contract or agreement, the making of any federal grant, the making of any federal loan, entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract or agreement, grant, loan, or cooperative agreement.

7. Additional Restrictions

(Applicable to all contracts funded in whole or in part with funding from the federal Departments of Labor, Health and Human Services (including CDC funding), or Education.)

Grantee shall comply with the restrictions under Division F, Title V, Section 503 of the Consolidated Appropriations Act, 2012 (H.R. 2055), which provides that:

"SEC. 503.(a) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

(b) No part of any appropriation contained in this Act or transferred pursuant to section 4002 of Public Law 111-148 shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or

tribal government in policymaking and administrative processes within the executive branch of that government.

(c) The prohibitions in subsections (a) and (b) shall include any activity to advocate or promote any proposed, pending or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control."

STATE OF CALIFORNIA  
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
CERTIFICATION REGARDING LOBBYING

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making, awarding or entering into of this Federal contract, Federal grant, or cooperative agreement, and the extension, continuation, renewal, amendment, or modification of this Federal contract, grant, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency of the United States Government, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities" in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subGrantees, subgrants, and contracts under grants and cooperative agreements) of \$100,000 or more, and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S.C., any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

County of Riverside Department of Public Health  
Name of Grantee

13-20527  
Contract / Grant Number

DEC 17 2013  
Date

JOHN J. BENOIT  
Printed Name of Person Signing for Grantee

*John J. Benoit*  
Signature of Person Signing for Grantee

CHAIRMAN, BOARD OF SUPERVISORS  
Title

After execution by or on behalf of Grantee, please return to:

California Department of Public Health  
P.O. Box 997377, MS 7204  
Sacramento, CA 95899-7377

FORM APPROVED COUNTY COUNSEL  
BY: *Neal R. Kipnis* DATE: *12/13*  
NEAL R. KIPNIS


ATTEST:  
KECIA HARRER-IHEM, Clerk  
DEPUTY


CDPH reserves the right to notify the Grantee in writing of an alternate submission address.


**CERTIFICATION REGARDING LOBBYING**

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure)

Approved by OMB  
0348-0046

<p>1. Type of Federal Action:</p> <p><input type="checkbox"/> a. contract</p> <p><input type="checkbox"/> b. grant</p> <p><input type="checkbox"/> c. cooperative agreement</p> <p><input type="checkbox"/> d. loan</p> <p><input type="checkbox"/> e. loan guarantee</p> <p><input type="checkbox"/> f. loan insurance</p>	<p>2. Status of Federal Action:</p> <p><input type="checkbox"/> a. bid/offer/application</p> <p><input type="checkbox"/> b. initial award</p> <p><input type="checkbox"/> c. post-award</p>	<p>3. Report Type:</p> <p><input type="checkbox"/> a. initial filing</p> <p><input type="checkbox"/> b. material change</p> <p>For Material Change Only:</p> <p>Year ____ quarter ____</p> <p>date of last report ____.</p>
<p>4. Name and Address of Reporting Entity:</p> <p><input type="checkbox"/> Prime <input type="checkbox"/> Subawardee</p> <p>Tier ____, if known:</p> <p>Congressional District, if known:</p>	<p>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</p> <p>Congressional District, if known:</p>	
<p>6. Federal Department/Agency</p>	<p>7. Federal Program Name/Description:</p> <p>CDFA Number, if applicable: ____</p>	
<p>8. Federal Action Number, if known:</p>	<p>9. Award Amount, if known:</p> <p>\$</p>	
<p>10.a. Name and Address of Lobbying Registrant (If individual, last name, first name, MI):</p>	<p>b. Individuals Performing Services (including address if different from 10a. (Last name, First name, MI):</p>	
<p>11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. required disclosure shall be subject to a not more than \$100,000 for each such failure.</p>	<p>Signature: <u></u></p> <p>Print Name: <b>JOHN J. BENOIT</b></p> <p>Title: <b>CHAIRMAN, BOARD OF SUPERVISORS</b></p> <p>Telephone No.: _____ Date: _____</p>	
<p><b>Federal Use Only</b></p>		<p>Authorized for Local Reproduction Standard Form-LLL (Rev. 7-97)</p>

FORM APPROVED COUNTY COUNSEL  
BY:   
NEAL R. KIPNIS DATE

ATTEST:  
KECIA HARPER-JHEM, Clerk  
By:   
DEPUTY

**INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES**

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.  
  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.



WHEN DOCUMENT IS FULLY EXECUTED RETURN  
**CLERK'S COPY**

to Riverside County Clerk of the Board, Stop 1010  
Post Office Box 1147, Riverside, Ca 92502-1147  
Thank you.

**EXHIBIT E**  
**ADDITIONAL PROVISIONS**

DEC 17 2013 341

**Exhibit E**  
**Additional Provisions**

**1. Additional Incorporated Documents**

- A. The following documents and any subsequent updates are not attached, but are incorporated herein and made a part hereof by this reference. These documents may be updated periodically by CDPH, as required by program directives. CDPH shall provide the Grantee with copies of said documents and any periodic updates thereto, under separate cover. CDPH will maintain on file, all documents referenced herein and any subsequent updates.
1. Network Local Projects *Network for a Healthy California* Guidelines Manual and any revisions thereto. (Revision October 2011)  
<http://www.cdph.ca.gov/programs/cpns/Pages/GuidelinesManual.aspx>
  2. *Network for a Healthy California* Program Letters and any revisions thereto.  
<http://www.cdph.ca.gov/programs/cpns/Pages/ProgramLetters.aspx>
  3. United States Department of Agriculture, Supplemental Nutrition Assistance Program Education (SNAP-Ed) Plan Guidance. (Revision Date FFY 2014)  
<http://snap.nal.usda.gov/snap/Guidance/FY2014SNAP-EdGuidance.pdf>
  4. *Network for a Healthy California* Local Health Department Funding Application Packet FFY 2014 – Including all the requirements and Attachments contained therein  
<http://www.cdph.ca.gov/programs/cpns/Pages/Network-LHDFAP2014.aspx>

**2. Cancellation / Termination**

- A. This agreement may be cancelled by CDPH without cause upon 30 calendar days advance written notice to the Grantee.
- B. CDPH reserves the right to cancel or terminate this agreement immediately for cause. The Grantee may submit a written request to terminate this agreement only if CDPH substantially fails to perform its responsibilities as provided herein.
- C. The term "for cause" shall mean that the Grantee fails to meet the terms, conditions, and/or responsibilities of this agreement. Causes for termination include, but are not limited to the following occurrences:
- 1) If the Grantee knowingly furnishes any statement, representation, warranty, or certification in connection with the agreement, which representation is materially false, deceptive, incorrect, or incomplete.
  - 2) If the Grantee fails to perform any material requirement of this agreement or defaults in performance of this agreement.
  - 3) If the Grantee files for bankruptcy, or if CDPH determines that the Grantee becomes financially incapable of completing this agreement.
- D. Agreement termination or cancellation shall be effective as of the date indicated in CDPH's notification to the Grantee. The notice shall stipulate any final performance, invoicing or payment requirements.
- E. In the event of early termination or cancellation, the Grantee shall be entitled to compensation for services performed satisfactorily under this agreement and expenses

**Exhibit E**  
**Additional Provisions**

incurred up to the date of cancellation and any non-cancelable obligations incurred in support of this agreement.

- F. In the event of termination, and at the request of CDPH, the Grantee shall furnish copies of all proposals, specifications, designs, procedures, layouts, copy, and other materials related to the services or deliverables provided under this agreement, whether finished or in progress on the termination date.
- G. The Grantee will not be entitled to reimbursement for any expenses incurred for services and deliverables pursuant to this agreement after the effective date of termination.
- H. Upon receipt of notification of termination of this agreement, and except as otherwise specified by CDPH, the Grantee shall:
  - 1) Place no further order or subgrants for materials, services, or facilities.
  - 2) Settle all outstanding liabilities and all claims arising out of such termination of orders and subgrants.
  - 3) Upon the effective date of termination of the agreement Grantee shall transfer, assign and make available to CDPH all property and materials belonging to CDPH, all rights and claims to any and all reservations, grants, and arrangements with owners of media/PR materials, or others, and shall make available to CDPH all written information regarding CDPH's media/PR materials, and no extra compensation is to be paid to Grantee for its services.
  - 4) Take such action as may be necessary, or as CDPH may specify, to protect and preserve any property related to this agreement which is in the possession of the Grantee and in which CDPH has or may acquire an interest.
- I. CDPH may, at its discretion, require the Grantee to cease performance of certain components of the Scope of Work as designated by CDPH and complete performance of other components prior to the termination date of the agreement.

**3. Travel and Per Diem Reimbursement**

Any reimbursement for necessary travel and per diem shall be at the rates currently in effect as established by the California Department of Human Resources (CalHR).

**4. Avoidance of Conflicts of Interest by Grantee**

- A. CDPH intends to avoid any real or apparent conflict of interest on the part of the Grantee, subgrants, or employees, officers and directors of the Grantee or subgrants. Thus, CDPH reserves the right to determine, at its sole discretion, whether any information, assertion or claim received from any source indicates the existence of a real or apparent conflict of interest; and, if a conflict is found to exist, to require the Grantee to submit additional information or a plan for resolving the conflict, subject to CDPH review and prior approval.

**Exhibit E**  
**Additional Provisions**

**B. Conflicts of interest include, but are not limited to:**

- 1) An instance where the Grantee or any of its subgrants, or any employee, officer, or director of the Grantee or any subgrant or has an interest, financial or otherwise, whereby the use or disclosure of information obtained while performing services under the grant would allow for private or personal benefit or for any purpose that is contrary to the goals and objectives of the grant.
- 2) An instance where the Grantee's or any subgrant's employees, officers, or directors use their positions for purposes that are, or give the appearance of being, motivated by a desire for private gain for themselves or others, such as those with whom they have family, business or other ties.

C. If CDPH is or becomes aware of a known or suspected conflict of interest, the Grantee will be given an opportunity to submit additional information or to resolve the conflict. A Grantee with a suspected conflict of interest will have five (5) working days from the date of notification of the conflict by CDPH to provide complete information regarding the suspected conflict. If a conflict of interest is determined to exist by CDPH and cannot be resolved to the satisfaction of CDPH, the conflict will be grounds for terminating the grant. CDPH may, at its discretion upon receipt of a written request from the Grantee, authorize an extension of the timeline indicated herein.

**5. Dispute Resolution Process**

A. A Grantee grievance exists whenever there is a dispute arising from CDPH's action in the administration of an agreement. If there is a dispute or grievance between the Grantee and CDPH, the Grantee must seek resolution using the procedure outlined below.

- 1) The Grantee should first informally discuss the problem with the CDPH Program Grant Manager. If the problem cannot be resolved informally, the Grantee shall direct its grievance together with any evidence, in writing, to the program Branch Chief. The grievance shall state the issues in dispute, the legal authority or other basis for the Grantee's position and the remedy sought. The Branch Chief shall render a decision within ten (10) working days after receipt of the written grievance from the Grantee. The Branch Chief shall respond in writing to the Grantee indicating the decision and reasons therefore. If the Grantee disagrees with the Branch Chief's decision, the Grantee may appeal to the second level.
- 2) When appealing to the second level, the Grantee must prepare an appeal indicating the reasons for disagreement with Branch Chief's decision. The Grantee shall include with the appeal a copy of the Grantee's original statement of dispute along with any supporting evidence and a copy of the Branch Chief's decision. The appeal shall be addressed to the Deputy Director of the division in which the branch is organized within ten (10) working days from receipt of the Branch Chief's decision. The Deputy Director of the division in which the branch is organized or his/her designee shall meet with the Grantee to review the issues raised. A written decision signed by the Deputy Director of the division in which the branch is organized or his/her designee shall be directed to the Grantee within twenty (20) working days of receipt of the Grantee's second level appeal.

B. If the Grantee wishes to appeal the decision of the Deputy Director of the division in which the branch is organized or his/her designee, the Grantee shall follow the procedures set

**Exhibit E**  
**Additional Provisions**

forth in Division 25.1 (commencing with Section 38050) of the Health and Safety Code and the regulations adopted thereunder. (Title 1, Division 2, Chapter 2, Article 3 (commencing with Section 1140) of the California Code of Regulations).

- C. Disputes arising out of an audit, examination of an agreement or other action not covered by subdivision (a) of Section 20204, of Chapter 2.1, Title 22, of the California Code of Regulations, and for which no procedures for appeal are provided in statute, regulation or the Agreement, shall be handled in accordance with the procedures identified in Sections 51016 through 51047, Title 22, California Code of Regulations.
- D. Unless otherwise stipulated in writing by CDPH, all dispute, grievance and/or appeal correspondence shall be directed to the CDPH Program Grant Manager.
- E. There are organizational differences within CDPH's funding programs and the management levels identified in this dispute resolution provision may not apply in every contractual situation. When a grievance is received and organizational differences exist, the Grantee shall be notified in writing by the CDPH Program Grant Manager of the level, name, and/or title of the appropriate management official that is responsible for issuing a decision at a given level.

**NUTRITION EDUCATION AND OBESITY PREVENTION PROGRAM**

**Awarded By**

**THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter "Department"**

**TO**

**County of Riverside Department of Public Health, hereinafter "Grantee"**

**Implementing the project, "Supplemental Nutrition Assistance Program-Education," hereinafter "Project"**

**GRANT AGREEMENT NUMBER 13-20527**

The Department awards this Grant and the Grantee accepts and agrees to use the Grant funds as follows:

**AUTHORITY:** The Department has authority to grant funds for the Project under Health and Safety Code, Section 131085(a)(b).

**PURPOSE:** The Department shall provide a grant to and for the benefit of the Grantee; the Grantee agrees to create innovative partnerships that assist SNAP-Ed eligible consumers in adopting healthy eating and physical activity behaviors, as part of a healthy lifestyle. The Grantee will provide nutrition education and conduct nutrition activities to SNAP-Ed eligible families per Health and Safety Code Section 104650-104655.

**GRANT AMOUNT:** The maximum amount payable under this Grant shall not exceed Three Million Six Hundred Twenty-Four Thousand Four Hundred Thirty-One dollars (\$3,624,431) annually. No funds may be requested or invoiced for work performed or costs incurred after the end date. See Exhibit E, Additional Provisions, Additional Incorporated Documents, Network Local Projects Network for a Healthy California Guidelines Manual, Section II Fiscal, Section 500 Reimbursement Process.

**TERM OF GRANT:** The term of the Grant shall begin on October 1, 2013, or upon approval of this agreement, and terminates on September 30, 2016.

**PROJECT REPRESENTATIVES.** The Project Representatives during the term of this Grant will be:

<b>California Department of Public Health, Nutrition Education and Obesity Prevention Branch</b>	<b>Grantee: County of Riverside Department of Public Health</b>
Attention: Joy Fong, Program Manager	Attention: Board of Supervisors, County of Riverside
Address: P.O. Box 997377	Address: P.O. Box 7849
City, Zip: Sacramento, CA 95899-7413	City, Zip: Riverside, CA 92513

Phone: (916) 650-6886	Phone: 951-358-5311
Fax: (916) 449 - 5414	Fax: 951-358-5472
E-mail: joy.fong@cdph.ca.gov	E-mail: LDelara@cbos.org

Direct all inquiries to:

<b>California Department of Public Health, Nutrition Education and Obesity Prevention Branch</b>	<b>Grantee: County of Riverside Department of Public Health</b>
Attention: Jorge G. Leal, Grant Manager	Attention: Nancy Allende, RD Supervising Nutritionist; Gayle Hoxter, MPH, RD Branch Chief
Address: P.O. Box 997377	Address: P.O. Box 7849
City, Zip: Sacramento, CA 95899-7413	City, Zip: Riverside, CA 92513
Phone: (916) 327-8018	Phone: 951-358-5311
Fax: (916) 449 - 5414	Fax: 951-358-5472
E-mail: jorge.leal@cdph.ca.gov	E-mail: nallende@rivcocha.org, ghoxter@rivcocha.org

Either party may change its Project Representative upon written notice to the other party.

**STANDARD PROVISIONS.** The following exhibits are attached and made a part of this Grant by this reference:

**Exhibit A GRANT APPLICATION**

The Grant Application provides the scope of work, purpose, task schedule and list of deliverables.

**Exhibit A1 DELIVERABLES FOR LOCAL HEALTH DEPARTMENT GRANTS**

**Exhibit B BUDGET DETAIL**

The approved budget supersedes the proposed budget in the Grant Application.

**Exhibit C STANDARD GRANT CONDITIONS**

**Exhibit D FEDERAL PROVISIONS**

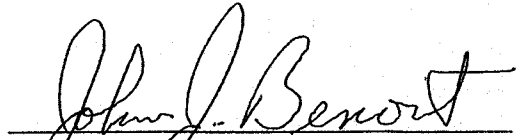
**Exhibit E ADDITIONAL PROVISIONS**

**GRANTEE REPRESENTATIONS:** The Grantee(s) accept all terms, provisions, and conditions of this grant, including those stated in the Exhibits incorporated by reference above. The Grantee(s) shall fulfill all assurances and commitments made in the application, declarations, other accompanying documents, and written communications (e.g., e-mail, correspondence) filed in support of the request for grant funding. The Grantee(s) shall comply with and require its contractors and subcontractors to comply with all applicable laws, policies, and regulations.

IN WITNESS THEREOF, the parties have executed this Grant on the dates set forth below.


Executed By:


Date: DEC 17 2013

  
**JOHN J. BENOIT**  
Board of Supervisors, County of  
Riverside

Date: \_\_\_\_\_

\_\_\_\_\_  
Angela Salas, Chief  
Contracts and Purchasing Services  
Section  
California Department of Public Health

FOR APPROVED COUNTY COUNSEL  
BY:  12/17/13  
NEAL R. KIPNIS DATE

ATTEST:  
KECIA HARPER-IHEM, Clerk  
By:   
DEPUTY



## Budget Coversheet

**Prime Grantee Name:**

City of Riverside

**Grant Number:**

12-10194

Budget Categories	FFY 13 Total	FFY 14 Total	Difference	% Difference
1 Salaries	\$0.00	\$147,018.22	\$147,018.22	100.00%
2 Benefits	\$0.00	\$77,724.36	\$77,724.36	100.00%
3 Operating	\$0.00	\$1,650.00	\$1,650.00	100.00%
4 Equipment	\$0.00	\$0.00	\$0.00	0.00%
5 Travel & Per Diem	\$0.00	\$2,255.85	\$2,255.85	100.00%
6 Subcontractors	\$0.00	\$492,537.13	\$492,537.13	100.00%
7 Other Costs	\$0.00	\$33,323.44	\$33,323.44	100.00%
8 Indirect Costs	\$0.00	\$0.00	\$0.00	0.00%
<b>Totals:</b>	<b>\$0.00</b>	<b>\$754,509.00</b>	<b>\$754,509.00</b>	<b>600.00%</b>

Budget Categories	Reason for difference greater than 5%
1 Salaries	N/A
2 Benefits	N/A
3 Operating	N/A
4 Equipment	N/A
5 Travel & Per Diem	N/A
6 Subcontractors	N/A
7 Other Costs	N/A
8 Indirect Costs	N/A

# Prime Staffing

Prime Grantee Name: City of Riverside  
 Grant Number: 12-10194

Position Title <small>* Job Descriptions for each position can be found on the Job Descriptions tab.</small>	Position Names	Description of Job Duties <small>% of SNAP-Ed Time spent on Mgmt/Admin Duties</small>	% of SNAP-Ed Time spent on Direct SNAP-Ed Delivery	FTEs charged to SNAP-Ed	Total Annual Salary	Total SNAP-Ed Salary	Benefit Rate	Benefits <small>*Total SNAP-Ed Salary X Benefit Rate</small>	SNAP-Ed Salary, Benefits and Wages, Federal
1	Project Coordinator	Wellness Coordinator - Vacant	20.00%	80.00%	1	\$73,712.00	53.0000%	\$39,067.36	\$112,779.36
2	Contract Manager	Grant Manager - Vacant	100.00%	0.00%	1	\$50,088.00	53.0000%	\$26,546.64	\$76,634.64
3	Program Assistant	Project Assistant - Vacant	20.00%	20.00%	0.4	\$50,088.00	53.0000%	\$10,618.66	\$30,653.86
4	Accountant/Finance Analyst	Fiscal Manager - Vanessa Kirks	1.00%	0.00%	0.01	\$120,470.00	45.0000%	\$542.12	\$1,746.82
5	Administrator (e.g., Director of Programs)	Director - Erin Gettis	1.00%	1.00%	0.02	\$98,916.00	48.0000%	\$949.59	\$2,927.91
6				0		\$0.00		\$0.00	\$0.00
7				0		\$0.00		\$0.00	\$0.00
8				0		\$0.00		\$0.00	\$0.00
9				0		\$0.00		\$0.00	\$0.00
10				0		\$0.00		\$0.00	\$0.00
11				0		\$0.00		\$0.00	\$0.00
12				0		\$0.00		\$0.00	\$0.00
13				0		\$0.00		\$0.00	\$0.00
14				0		\$0.00		\$0.00	\$0.00
15				0		\$0.00		\$0.00	\$0.00
16				0		\$0.00		\$0.00	\$0.00
17				0		\$0.00		\$0.00	\$0.00
18				0		\$0.00		\$0.00	\$0.00
19				0		\$0.00		\$0.00	\$0.00
20				0		\$0.00		\$0.00	\$0.00
21				0		\$0.00		\$0.00	\$0.00
24				0		\$0.00		\$0.00	\$0.00
<b>Totals:</b>					<b>2.43</b>	<b>\$393,274.00</b>	<b>\$147,018.22</b>	<b>\$77,724.36</b>	<b>\$224,742.58</b>

Definition and basis for calculations of benefit rate(s): Includes payroll taxes and medical/dental benefits

**Prime Budget Justification**

Prime Grantee Name:  
Grant Number:

City of Riverside  
12-10194

**Operating Expenses**

Budget Item	Description/Justification	Unit Cost	Quantity	Months	Total
Office Supplies	Pens, notepads, paper clips, staples, tape, markers, etc... (general supplies @ \$50/month = \$600.00)	\$50.00	1.00	12.00	\$600.00
Office Supplies	Paper for printing worksheets, surveys, reports, various documents (5 boxes of 5,000 sheets x 50\$ per box = \$250)				
Office Supplies	Ink Cartridges: Black and Color Cartridges (\$200 x 4 cartridges = \$800)	\$50.00	5.00	1.00	\$250.00
		\$200.00	4.00	1.00	\$800.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
<b>Total Operating Expenses:</b>					<b>\$1,650.00</b>

**Equipment Expenses**

Budget Item	Description/Justification	Unit Cost	Quantity	FTE	Total
N/A	N/A				
N/A	N/A				\$0.00
N/A	N/A				\$0.00
<b>Total Equipment Expenses:</b>					<b>\$0.00</b>

Prime Budget Justification

Travel and Per Diem

Travel/Position Title	Location	Trips	FTE	Days	Nights	Per Diem	Lodging	Air	Miles	Reg. Fee	Other	Total
CX3/#3 - TBD (6 CX3 related trainings and meetings * 1 FTE * 75 miles = \$254.25)	Various	6	1						75.00	\$0.00		\$254.25
Network Meetings - General/#1 - TBD (3 General Network connected meetings * 1 FTE * 75 miles = \$225.00)	Various	3	1						75.00	\$0.00		\$127.13
Peer to peer training/#1 - TBD (2 Peer to Peer Educator(s) (2 Peer to peer training meetings * 1 FTE * 75 miles = \$84.75)	Various	2	1						75.00	\$0.00		\$84.75
Retail related trainings/#1 - TBD (3 Retail related trainings * 1 FTE * 75 miles = \$127.13)	Various	3	1						75.00	\$0.00		\$127.13
Faith-Based Related Trainings/#1 - TBD (2 Faith-Based related Site Visits/#1 - TBD, #3 - TBD (10 SOW Site Visits * 2 FTE * 20 miles = \$400.00)	Various	10	2						20.00	\$0.00		\$113.00
SOW General Meetings/#1 - TBD, #3 - TBD (10 SOW General Network Statewide Mileage pre approved by Mileage pre approved by Mileage pre approved by network for Non-network related trainings and meetings/#3 - TBD)	Sacramento	1	1	2	2	\$40.00	\$110.00	\$415.00	0.00	\$0.00	\$100.00	\$815.00
Attendance at Local related meetings and events/functio	Various	3	1						75.00	\$35.00		\$232.13
	Various	3	0.4						75.00	\$35.00		\$169.13
	Various	12	2.43						20.00			\$135.60
												\$0.00
<b>Total Travel and Per Diem:</b>											<b>\$2,255.85</b>	

**Prime Budget Justification**

**Sub Grant(s)**

Name	Description/Justification	Total
A Riverside Unified School	To carry out Objective 12 and assist with various objectives at 2 selected school sites & 2 after-school	\$132,000.00
B Alford Unified School District	To carry out Objective 12 and assist with various objectives at 2 selected school sites & 2 after-school programs	\$132,000.00
C City of Riverside: Parks &	To carry out Objectives 7, 8, and 13	\$165,463.68
D Nutrition Educator	Contract to teach 60 Nutrition Classes required by SOW Objective 6 (120 hours for classes/set-up and 296	\$15,302.45
E Fit, Fresh, Fun Forum	Sub-grant to assist with assessments and evaluations and to manage public relations and integration of grant	\$7,771.00
Community Garden Support	Subgrant for a person or group to establish and maintain community gardens in low income areas and to	\$40,000.00
<b>Total Sub Grant(s):</b>		<b>\$492,537.13</b>

**Other Costs**

Budget Item	Description/Justification	Unit Cost	Quantity	Misc.	Total
Printing	survey forms (600 B&W copies * .20/copy = \$120.00)	\$0.20	600.00	1.00	\$120.00
Printing	Class worksheets (2200 copies * .1351/copy = \$297.00)	\$0.14	2200.00	1.00	\$297.22
Printing	class participant data card (2200 pages * .1351/copy = \$297.00)	\$0.14	2200.00	1.00	\$297.22
Printing	flyers advertising nutrition classes and peer ed classes (15000 color pages on	\$0.05	15000.00	1.00	\$684.00
Printing	flyers advertising CX3 forums, public meetings (2500 color pages on gloss				
Printing	80lb @ .07/copy * 2500 = \$184.94)	\$0.08	2500.00	1.00	\$200.00
Printing	Agenda sheets, reports, sign in sheets (300 B&W pages * .20/print = \$60.00)	\$0.20	300.00	1.00	\$60.00
Food for class taste testing and retail store demos	\$2.50 per sample * 2150 samples for class attendees + 400 samples for 4 retail store demos = \$6,375.00				
Food Demonstration Supplies (for classes and retail)	ice chests, plates, forks, napkins, serving bowls, serving spoons etc... (\$30 supplies set * 64 [66 classes + 4 retail store demos] = \$2,100.00)	\$2.50	2550.00	1.00	\$6,375.00
Food Demonstration Supplies (for retail)	3 EZ-Up Canopies (\$100 * 3 = \$300), 3 tables (\$50.00 * 3 = \$150), 6 chairs (\$25 * 6 = \$150) [\$300+\$150+\$150 = \$600]	\$30.00	70.00	1.00	\$2,100.00
Food Demonstration Supplies (for classes and retail)	luggage carts for supplies (2 carts * \$50 = \$100.00)	600.00	1.00	1.00	\$600.00
Educational Materials	Posters, Banners for Classes, Events, and Placement in various neighborhood settings (USDA SNAP-Ed and other approved non-Network provided materials @ \$5 each * 500 = \$2500)	\$50.00	2.00	1.00	\$100.00
		\$5.00	500.00	1.00	\$2,500.00

**Prime Budget Justification**

Educational Materials	Small physical activity items (jump ropes, balls, etc...) for promotion of PA during Nutrition Classes (\$5 * 35 students/class = \$175.00)	\$5.00	35.00	1.00	\$175.00
Educational Materials	Small anthropometric measuring devices for use during Nutrition classes for Pre-approved supplemental materials to incorporate food systems, gardening, and physical activity concepts as part of nutrition education	\$40.00	1.00	1.00	\$40.00
Educational Materials	Servsafe Training and Food Handler Cards for 3 staff for food demos (3 staff * \$25/card = \$75.00)	\$1.00	2150.00	1.00	\$2,150.00
Educational Materials	Props, Easels, and Visual aids in support of promoting consumption of healthy foods for use in Nutrition Classes and events (\$10 unit cost * 25)	\$25.00	3.00	1.00	\$75.00
Rental Space	Room rental for CX3 related and various public meetings (10 * 150 rental cost = \$1500)	\$10.00	25.00	1.00	\$250.00
Rental Space	Classroom rental for survey and assessment administration (6 * 150 rental cost = \$900)	\$150.00	10.00	1.00	\$1,500.00
Rental Space	Classroom rental for 60 Nutrition Classes + 6 Peer Ed. Nutrition Classes (66 * \$150 rental cost = \$9900)	\$150.00	6.00	1.00	\$900.00
Community Garden Supplies	Seeds, small gardening tools and supplies for 3 Community Gardens to be used during City provided NEOP classes (\$500 for seeds, tools, supplies * 3)	\$150.00	66.00	1.00	\$9,900.00
Postage	Mailing out flyers for Nutrition class promotion (see attached quote gotprint.net] 10000 flyers * .24-.29 metered postage per envelope =	\$500.00	3.00	1.00	\$1,500.00
Shipping	Misc. shipping charges for print products, educational materials and props, other items in line item budget (\$50 charge * estimated 10 online purchase orders = \$500)	\$0.30	10000.00	1.00	\$3,000.00
		\$50.00	10.00	1.00	\$500.00
<b>Total Other Costs:</b>					<b>\$33,323.44</b>

**Indirect Costs**

Calculation Method	%	\$ of Method	Total
No indirect costs	0.00%	\$0.00	\$0.00
<b>Total Indirect Costs:</b>			<b>\$0.00</b>

<b>Total Budget:</b>	<b>\$754,509.00</b>
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CLERK'S COPY

to Riverside County Clerk of the Board, Stop 1010  
Post Office Box 1147, Riverside, Ca 92502-1147  
Thank you.

## Agreement

Contract Number: 14-042

This is a Subcontracting Agreement of the California Supplemental Nutrition Assistance Program Education (SNAP-Ed) Plan of the California Department of Public Health, the California Department of Social Services and the United States Department of Agriculture

Between

County of Riverside, Department of Public Health

and

City of Jurupa Valley

---

### I. Purpose and Scope

The purpose of this agreement is to clearly identify the roles and responsibilities of each party as they relate to providing nutrition education to Californians participating or eligible to participate in the CalFresh, previously known as the Food Stamp Program in California.<sup>1</sup> California's Supplemental Nutrition Assistance Program Education (SNAP-Ed) is funded federally by the United States Department of Agriculture (USDA) and administered at the state level by the California Department of Social Services (CDSS) and the California Department of Public Health's (CDPH's) *Network for a Healthy California (Network)*.

The SNAP-Ed program is intended to provide nutrition education to low-income households. To support this goal, County of Riverside, Department of Public Health and City of Jurupa Valley will conduct nutrition education interventions to eligible families as described in their respective Scopes of Work. Allowable services are outlined in the USDA SNAP-Ed Plan Guidance located at the following link:

<http://www.cnpp.usda.gov/DGAs2010-PolicyDocument.htm>

Both, County of Riverside, Department of Public Health and City of Jurupa Valley should ensure that program activities are conducted in compliance with all applicable Federal laws, rules, and regulations including Civil Rights and Office of Management and Budget (OMB) circulars governing cost issues.

## **II. Agreement Term**

The term of this agreement is the period within which the project responsibilities of this agreement shall be performed. The term commences October 1, 2013 and terminates September 30, 2016 in the amount of seven hundred, twenty five thousand dollars (\$725,000) for this period.

## **III. County of Riverside, Department of Public Health Responsibilities**

County of Riverside, Department of Public Health shall undertake the following activities during the duration of the agreement term:

1. Ensure adherence of City of Jurupa Valley to applicable federal and state laws and regulations and program guidelines.
2. Review and approve all documentation evidencing City of Jurupa Valley's performance of services as set forth in the Scope of Work and monitor City of Jurupa Valley's compliance with the agreement.
3. Provide training and technical assistance to City of Jurupa Valley on promising practices and fiscal and programmatic rules and regulations.
4. Promptly reimburse allowable expenses according to the terms and conditions set forth in this agreement according to the following:
  - a. The County standard payment default terms are 30 days after the submission of the monthly Federal Share invoices to County of Riverside, Department of Public Health.
5. Ensure that City of Jurupa Valley's Scope of Work activities do not supplant existing SNAP-Ed efforts or funding.
6. Review City of Jurupa Valley's audit report and, within six months of receipt, issue a management decision on any audit findings. County of Riverside, Department of Public Health will also ensure that City of Jurupa Valley takes appropriate and timely corrective action to remain in compliance with federal regulations.



#### **IV. City of Jurupa Valley Responsibilities**

City of Jurupa Valley shall undertake the following activities during the duration of the agreement term:

1. Provide nutrition education services as outlined in the approved Scope of Work and Budget Justification (attached). Services shall be provided to SNAP eligible participants and potential SNAP eligible participants who have incomes at or below 185% of the federal poverty level (FPL). City of Jurupa Valley will be required to designate the sites where services will be provided to ensure the target population is being reached. The methods used to qualify the proposed sites include:
  - a. Sites located in a census tract where at least 50% of the target audience is at or below 185% of the FPL. Sites may be qualified based on all races in the census tract or by racial/ethnic specific data.
  - b. Sites considered as means tested programs that are eligible for SNAP-Ed services.
  - c. School sites with at least 50% of the students receiving free or reduced price meals.
2. Ensure that Federal Share is not used to supplant existing SNAP-Ed funds or activities.
3. Follow all relevant laws and regulations regarding documentation, reporting, use, etc. of these federal funds in accordance with OMB circulars A-122 and A-133 (for non-profits) or OMB circulars A-87 and A-133 (for State, Local, and Indian Tribal Governments) or OMB circulars A-21 (for Educational Institutions). <http://www.whitehouse.gov/omb/circulars/>
4. Furnish project management, contract administration and fiscal control services, including but not limited to:
  - a) Adherence to the approved Scope of Work and Budget Justification (attached).
  - b) Return of this agreement, with the required signatures, within 30 days of its receipt.
  - c) Preparation and submission of approved weekly time tracking forms for each employee charging personnel costs to the program.

d) Preparation and submission of monthly Federal Share invoices to County of Riverside, Department of Public Health according to the following :

a. Monthly Invoices Due Dates:

City of Jurupa Valley shall submit monthly invoices by the 25<sup>th</sup> of the following month to pay prior monthly expenditures.

e) Preparation and submission of Activity Logs and Progress Reports as follows:

a. See attached Scope of Work Exhibit A (1-12)

f) Participation in trainings and meetings as requested by County of Riverside, Department of Public Health.

g) Retention of all records supporting the contract for three (3) years after the end of the contract term. This requirement applies to fiscal records, reports and client information. Additionally, City of Jurupa Valley agrees to make all records relating to the contract available upon request by County of Riverside, Department of Public Health, the *Network*, CDSS and/or USDA. Any costs that cannot be substantiated by source documentation may be disallowed.

h) Return any funds necessary to repay USDA for any federal audit exceptions in which City of Jurupa Valley has not complied with the requirements of this agreement and applicable state and federal regulations.

i) Submission of a copy of audited financial statements to County of Riverside, Department of Public Health nine months after the year end. City of Jurupa Valley agrees to provide access to auditors to determine compliance with federal regulations.

**V. County of Riverside, Department of Public Health and City of Jurupa Valley Agree to the Following Provisions:**

**1. Documentation Approval and Acknowledgements**

Documents prepared by organizations using CDPH funding for external release, in print or other media, or via the Internet, must undergo appropriate review and approval prior to release. Documents prepared by CDPH contractors and subcontractors and intended for publication and distribution by an entity outside of CDPH must receive the necessary departmental approvals prior to publishing or distribution. Concurrent submission to the

internal and external review processes is not permitted. Reviews may take up to thirty (30) working days. CDPH has identified the following category of documents intended for external release applicable to nutrition education:

#### Health Education/Communication

- One time, periodic, or occasional
- Provides factual information to the public or target audience to prevent disease or improve health status
- Conveys a specific public health message to a select target audience about a specific public health problem or program

#### Examples:

- Brochure
- Fact sheet
- Media campaigns and advertisements
- Newsletter
- Fotonovela
- Press release or other press materials
- Public Service Announcement
- Social Networking – Facebook, Twitter, etc.

Materials, whether newly developed or reprinted, must include an appropriate acknowledgement/funding statement. See the *Network Branding Guidelines Manual* at

<http://networkforahealthycalifornia.net/Library/docs/BrandingGuidelinesManual.pdf> for information on approved acknowledgement/funding statements and which types of materials should carry which version of the statement. For materials not listed, contact County of Riverside, Department of Public Health for guidance on which statement is appropriate.

Whenever possible, the *Network* logo should be displayed prominently on all materials produced with *Network* funds. This includes flyers, Web pages, PowerPoint presentations, printed publications, or any other documents. *Network* logos are available in English, Spanish, black and white, color, and in different electronic file formats online in the *Resource Library* ([www.networkforahealthycalifornia.net/Library](http://www.networkforahealthycalifornia.net/Library)).

## **2. Special Terms and Conditions**

County of Riverside, Department of Public Health and City of Jurupa Valley shall follow all relevant and applicable regulations as specified in the CDPH “Special Terms and Conditions”, also known as Exhibit D (F). These may include, but are not limited to:

- Travel and Per Diem Reimbursement – unless otherwise specified, Party A and Party B will be reimbursed for travel and

per diem expenses at rates established by the California Department of Personnel Administration.

- Subcontract Requirements – as it relates to securing bids for subcontractor services and subcontractor selection approval.
- Lobbying Restrictions – for contracts and subcontracts that equal or exceed \$100,000 in Federal Share.
- Intellectual Property Rights – except where CDPH has agreed in a signed writing to accept a license, CDPH shall be and remain without additional compensation, the sole owner of any and all rights, title and interest in all Intellectual Property which result directly or indirectly from this Agreement.

## **VI. Funding**

1. Federal Share SNAP-Ed funding shall not be used to supplant existing nutrition education funds or activities during the term of the contract.
2. City of Jurupa Valley shall provide Federal Share budget documentation as requested by USDA, CDSS, CDPH or County of Riverside, Department of Public Health.
3. Program activities shall not supplant existing nutrition education programs, and where operating in conjunction with existing programs, enhance and supplement them.
4. Funding for each federal fiscal year is subject to approval by USDA. If full funding does not become available, CDPH will amend, reduce or cancel the resulting agreement. Continuation of services beyond the first fiscal year is subject to County of Riverside, Department of Public Health and Jurupa Valley's continued successful performance.

## **VII. Modification and Termination**

1. This agreement may be cancelled or terminated without cause by either party by giving (30) calendar days advance written notice to the other party. Such notification shall state the effective date of termination or cancellation and include any final performance and/or payment invoicing instructions/requirements.
2. Any and all amendments must be made in writing and must be agreed to and executed by the parties before becoming effective.
3. It is mutually agreed that if the Federal Budget of the current year and/or any subsequent years covered under this Agreement does not appropriate sufficient funds for the program, this Agreement shall be of no further force


and effect. In this event, the State and County of Riverside, Department of Public Health shall have no liability to pay any funds whatsoever to City of Jurupa Valley and City of Jurupa Valley shall not be obligated to perform any provisions of this Agreement for which they are not reimbursed.

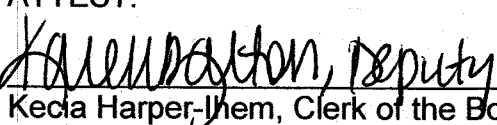
4. If funding for any fiscal year is reduced or deleted by the Federal Budget for purposes of this program, the State and County of Riverside, Department of Public Health shall have the option to either cancel this Agreement with no liability occurring to the State or County of Riverside, Department of Public Health, or offer an agreement amendment to City of Jurupa Valley to reflect the reduced agreement.

### VIII. Effective Date and Signature

This agreement shall be effective upon the signature of County of Riverside, Department of Public Health and City of Jurupa Valley authorized officials. It shall be in force from October 1, 2013 to September 30, 2016. County of Riverside, Department of Public Health and City of Jurupa Valley indicate agreement with their signatures.

Signatures and dates

 _____ John J. Benoit, Chairman Board of Supervisors	 _____ Steve Harding, City Manager
DEC 17 2013 _____ Date	 _____ Date

ATTEST:  
  
\_\_\_\_\_  
Kedia Harper-Jhem, Clerk of the Board

DEC 17 2013  
\_\_\_\_\_  
Date

FORM APPROVED COUNTY COUNSEL  
BY:   
NEAL R. KIPNIS DATE