

REVISED ATTACHMENT PAGE (S)

REVISED PAGE

DATED JULY 1, 2019

FILED WITH CONTRACT #35277

(PUBLIC HEALTH FOUNDATION ENTERPRISES, INC DBA HELUNA HEALTH)

Address:

1043 Elm Avenue, Suite 401

City/State/Zip:

Long Beach, CA 90813

Business Telephone: (562) 570-4475

Social Security or Employer Identification Number: 95-6000733

License Number and Expiration Date, if any: N/A Email Address: <u>Judy.Ogunji@longbeach.gov</u>

Name of Principal Investigator/Project Coordinator: Judy Ogunii

Phone Number of Principal Investigator/Project Coordinator: (562) 570-4475

ls Subcontractor/Subawardee required to file a Single Audit with the Federal Government? (Required for parties who receive Federal funds in the aggregate amount of \$500,000 or more):

[X] Yes [] No

If yes, has Subcontractor/Subawardee filed the required Single Audit? [X] Yes [] No (If yes, submit copy to HELUNA HEALTH prior to signing this Agreement) http://www.longbeach.gov/globalassets/finance/media-library/documents/citybudget-and-finances/accounting/single-audit/fiscal-year-2016-single-audit

HELUNA HEALTH:

Heluna Health

Address and Phone #: 13300 Crossroads Parkway North, Suite 450, City of Industry,

CA, 91746-3505; (562) 699-7320

Program Name:

Little by Little

Program/CID #:

-0166.0105 0166.0106

Project Director Name: Samar McGregor/Shannon Whaley

Project Director Phone #: (626) 856-6650

Project Director

Email Address: <u>Samar@phfewic.org/Shannon@phfewic.org</u>

Contracts Manager Name: Nicole Blum

Contracts Manager Email Address: NBlum@helunahealth.org

2. **SCOPE OF SERVICES.**

Services. Subcontractor/Subawardee shall perform the services, duties and (a) obligations set forth in the Statement of Work ("SOW") attached as Exhibit A hereto, which is made a part hereof and incorporated herein by reference (the "Services"). Subcontractor/Subawardee shall perform the Services in accordance with the specifications, timetables and requirements set forth in the SOW and this Agreement. HELUNA HEALTH may, in its discretion, provide to Subcontractor/Subawardee a copy of the Funding Award Agreement or the relevant sections thereof. If Subcontractor/Subawardee is provided with a copy of the Funding Award Agreement or the relevant sections thereof,