STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES
STANDARD AGREEMENT - AMENDMENT

35 4 0 4 sco ID: 4265-1910156-A2

TTD 213A (Rev, 4/2020)	AGREEMENT NUMBER	AMENDMENT NUMBER	Purchasing Authority Number
CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED 2 PAGES	19-10156	A02	
1. This Agreement is entered Into between the Contracting Ag	ency and the Contractor named b	elow:	
CONTRACTING AGENCY NAME California Department of Public Health			
CONTRACTOR NAME City of Long Beach			**************************************
2. The term of this Agreement is:			
START DATE			
October 1, 2019			
THROUGH END DATE September 30, 2022		The second secon	
3. The maximum amount of this Agreement after this Amenda \$14,753,727.00 Fourteen Million Seven Hundred Fifty-		ed Twenty-Seven Dollars	
4. The parties mutually agree to this amendment as follows incorporated herein:			
i. This amendment increases the contract by \$315,307.00, cha and is shifting funds in fiscal years 2 and 3 in order to accomm All other terms and conditions shall remain the same.	nging the total amount to read \$ nodate anticipated expenses for t	14,753,727.00, to better sup he H.R. 6201 - Families First	port the Contractor's needs, Coronavirus Response Act,
IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUT.			
	CONTRACTOR		
CONTRACTOR NAME (If other than an Individual, state whether a comp City of Long Beach	oration, partnership, etc.)		
CONTRACTOR BUSINESS ADDRESS		cny	STATE ZIP
411 W. Ocean Blvd.		Long Beach	CA 90802
PRINTED NAME OF PERSON SIGNING Tom Modica		TITLE City Manager	
CONTRACTOR AUTHORIZED SIGNATURE		DATE SIGNED	1
	STATE OF CALIFORNIA		
CONTRACTING AGENCY NAME California Department of Public Health			
CONTRACTING AGENCY ADDRESS		crry	STATE ZIP
1616 Capitol Avenue, Sulte 74.262, MS 1802, PO Box 99	7377	Sacramento	CA 95899
PRINTED NAME OF PERSON SIGNING Joseph Torrez		TITLE Chief, Contracts Manag	jement Unit
CONTRACTING AGENCY ALPHORIZED SIGNATURE		DATE SIGNED	/21
CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVA		EXEMPTION (If Applicable)	
A	PPROVED  APR 30 2021  EE:skb  CE OF LEGAL SERVICES		
DEPI	OF GENERAL SERVICES	APPROVED AS TO FOR A OF I I I CHARLES PARKIN) City Alter	20 <u>21</u>

- II. Certain changes made in this amendment are displayed as follows: Text additions are displayed in **bold and underline**. Text deletions are displayed with a strike through the text (i.e., Strike).
- III. Revised Exhibit A, Scope of Work, Provision 4. as follows:

## 4. Project Representatives

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

California Department of Public Health	City of Long Beach
<del>Vicki Ortega</del> <b>John Romeo</b> , Contract Manager	Kelly Colopy, Director Telephone: (562) 570-4016
Telephone: <del>(916) 928-8506</del> <b>(916) 928-8862</b> Fax: (916) 263-3314	Fax: (562) 570-4049 E-mail: Kelly.Colopy@LongBeach.gov
E-mail: <del>Vicki.Ortega@cdph.ca.gov</del>	
John.Romeo@cdph.ca.gov	

## B. Direct all inquiries to:

California Department of Public Health	City of Long Beach
CDPH/WIC Division Attention: Vicki Ortega John Romeo, Contract Manager Local Services Branch 3901 Lennane Drive Sacramento, CA 95834	Attention: Judy A. Ogunji, MS RD Nutrition Services Officer, WIC Director 2525 Grand Avenue Long Beach, CA 90815
Telephone: (916) 928-8506 (916) 928-8862 Fax: (916) 263-3314 E-mail: Vlcki.Ortega@cdph.ca.gov John.Romeo@cdph.ca.gov	Telephone: (562) 570-4475 Fax: (562) 570-4032 E-mail: Judy.Ogunji@LongBeach.gov

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

Remittance Address
Federal ID#: 95-6000733
FI\$CAL ID#:
Contractor:
City of Long Beach
Attention: "Cashier"
Address:
Nerissa Mojica, Financial Services Officer
Contract Number: 19-10156 A02
Email: Nerissa.Mojica@LongBeach.gov

- D. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.
- IV. Revised Exhibit B, Budget Detail and Payment Provisions, Provision 1.E. as follows:
  - E. Amounts Payable

The amounts payable under this agreement shall not exceed: \$14,438,420.00 \$14,753,727.00.

## Exhibit B, Attachment i Budget Detail Worksheet October 1, 2019 - September 30, 2022

*All costs will be reviewed by CDPH for approval	Total Budget	Total Indirect Coats	Total Personnel Costs	and rect Costs	Total Subcontracts			Subcontracts (1)		Total Major Equipment	Equipment (9)	Major Equipment (8) (Unit Cost of \$5,000 or More)	Total Operating Expenses	Facility Costs (See Exhibit B, Attach II for breakdown) (2)	Outreach/Mediu/Promotion	Training	Travel (6)	Operating Expenses		Total Personnel		Fringe Benefits (4)	Total FTE	Splanes and Wages			WIC Administrative Assistant	MIC Program inventory Controller(1)(2)	MC Nutritionist Assessment (3)			MC National Assessment (1)	WIC Administrative Assistant (2)	WIC Nutritories Assistant (1) (2)	WIC Program Supervisor (3) (3)	WiC Nutrition of (2)	WIC Program Supervisor(2)	(MIC Program Operation Coordinator(2)	MIC Program Operation Coordinator(3)	MIC Program Operation Coordinator(3)	MAC Strander (5)	NAC Position Titis	Personnel	
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		-						Attach :		-	ī	Exhibit A Attach I	***************************************	4	4	ŧ,	6	, American	Exhibit A								1.6	5	5 7	7.8	Ä	16.7	\$	15.7	16.7		1-5.7	1-5.7	16.76 16	75.75 76.		Echibit A		
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Year16 Year1F Year10		***************************************	-					***************************************										-							-		П	12,837	12,825	42,925	81,247	B1 247	82,697	51,548	78,779	99,502	69,502	318,616	20,516	86,360	-	Base Base Annual Armual Salary Salary	Amended	
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Year 3 Contract Amount \$ Year 3 Funding Changes \$ Year 3 Checks/Balances \$	107,421	(31,696)	(31,805)	Budges				Adj				Budget Adj.	107,514	22,200	(2,000)	4,000	(4,000)	Of the Control of the	Budget		13,256	Adj.		18,337		***************************************	70,082	55,953	(1.236)	1,182	(54.785)	128,848	(3,480)	(53,011)	2,727		(68,605)	100	0.497	3,025	30.	Budget		
\$ 4,864,861 \$ 107,421	\$ 4,854,881	699,694		Budgeted	Amenda			Panedang	Amended			Budgeted Amount					214,030		Budgebad	3,496,37	957,760	Antender Budgeted Amount		2,633,605			70,082	I		41,130		254.304			139,727		142,740			92.532		Amended Budgehod		
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All costs will be reviewed by CDPH for approval

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## Exhibit B, Attachment II Facility Cost Worksheet OCTOBER 1, 2019 - SEPTEMBER 30, 2022

Total Facility Costs:				Year 1 Amended Total				Year 2 Total	Year 2 Amended Total				Year 3 Total	Year 3 Amended Total
\$ 1,150,440				\$ 347,220				\$ 368,820	\$ 402,120				\$ 378,900	\$ 401,100
Site Street Address, City, State & Zjp Code	Type of Space (i.e., Glinic Site, Admin, Training Center, Warehouse, Storage Area, Satellite site)	Total Square Footage	Amended Total Cost of Site Per Month	Amended Total Site Costs Per Year	Total Cost of Total Cost of Site Per Ship Per Month Month Adj.	Total Cost of Site Per Month Adj.	Amended Total Cost of Site Per Month	Total Site Cost Per Year	Amended Total Total Cost of Total Cost of Site Costs Site Per Site Per Per Year Month Month Adj.	Total Cost of Site Per Month	myselection	Amended Total Cost of Site Per Month	Total Site Cost Per Year	Amended Total Site Costs Per Year
2125 Santa Fe Avenus / Long Beach, CA 90810	Ofinic Site	4395											110	50.50
2525 Grand Avenue #108 / Long Beach, CA 90815	Clinic Site	4650												
5186 Atlantic Avenue / Long Beach, CA 90805	Clinic Site	5500	12.610	151,320	12,925	2,750	15,675	155,100	188,100	13,250	1,700	14,950	159,000	179,400
1043 Elm Avenue #401 / Long Beach, CA 908†3	Clinic Site	5375	13,650	163,800	14,875		14,875	178,500	178,500	15,300	100	15,400	183,600	184,800
1133 Rhea Street / Long Beach, CA 90808	Clinic Site	4125	50	600	60	•	8	720	720	75	*	75	900	
2101 E. Carson Street / Long Beach, CA 90807	Offsite Storage	0	1,375	16,500	1,600		1,600	19,200	19,200	1,650	•	1,650	19,800	19,800
	Files Storage and Shredding	0	750	9,000	1,275	(475)	800	15,300	9,600	800	8	850	9,600	10,200
1651 San Francisco Avenue / Long Beach, CA 90813	Facilites Maintenance	0	500	6,000		500	500		6,000	500		500	6,000	