



**Recipient Information**

**1. Recipient Name**

San Francisco Department of Public Health  
101 GROVE ST  
SAN FRANCISCO, CA 94102-4505  
[NO DATA]

**2. Congressional District of Recipient**

12

**3. Payment System Identifier (ID)**

1946000417A8

**4. Employer Identification Number (EIN)**

946000417

**5. Data Universal Numbering System (DUNS)**

103717336

**6. Recipient's Unique Entity Identifier**

**7. Project Director or Principal Investigator**

Dr. Alison Hughes  
Program Director/Principal Investigator  
alison.hughes@sfdph.org  
415-437-6269

**8. Authorized Official**

Dr. Susan Philip  
Acting Health Officer, City and County of San Francisco  
susan.philip@sfdph.org  
6282067638

**Federal Agency Information**

CDC Office of Financial Resources

**9. Awarding Agency Contact Information**

Rhonda Burton  
bgr2@cdc.gov  
770-488-2757

**10. Program Official Contact Information**

Dr. Rodel DESAMU-THORPE  
Epidemiologist  
Ksz2@cdc.gov  
404.718.1397

**Federal Award Information**

**11. Award Number**

6 NU62PS924599-02-03

**12. Unique Federal Award Identification Number (FAIN)**

NU62PS924599

**13. Statutory Authority**

This Program is authorized under section 318 of the Public Health Service Act (42 U.S.C. Section 247c, as amended)

**14. Federal Award Project Title**

Medical Monitoring Project (MMP)

**15. Assistance Listing Number**

93.944

**16. Assistance Listing Program Title**

Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Virus Syndrome (AIDS) Surveillance

**17. Award Action Type**

Supplement

**18. Is the Award R&D?**

No

**Summary Federal Award Financial Information**

<b>19. Budget Period Start Date</b>	06/01/2021	<b>- End Date</b>	05/31/2022
<b>20. Total Amount of Federal Funds Obligated by this Action</b>			\$45,739.00
20a. Direct Cost Amount			\$36,850.00
20b. Indirect Cost Amount			\$8,889.00
<b>21. Authorized Carryover</b>			\$0.00
<b>22. Offset</b>			\$0.00
<b>23. Total Amount of Federal Funds Obligated this budget period</b>			\$536,568.00
<b>24. Total Approved Cost Sharing or Matching, where applicable</b>			\$0.00
<b>25. Total Federal and Non-Federal Approved this Budget Period</b>			\$582,307.00
<b>26. Project Period Start Date</b>	06/01/2020	<b>- End Date</b>	05/31/2025
<b>27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period</b>			Not Available

**28. Authorized Treatment of Program Income**

ADDITIONAL COSTS

**29. Grants Management Officer - Signature**

Ms. Portia Brewer  
Grants Management Officer

**30. Remarks**

Supplemental funding awarded in the amount of 45,739.



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<b>Recipient Name</b>	
San Francisco Department of Public Health 101 GROVE ST SAN FRANCISCO, CA 94102-4505 [NO DATA]	
<b>Congressional District of Recipient</b>	
12	
<b>Payment Account Number and Type</b>	
1946000417A8	
<b>Employer Identification Number (EIN) Data</b>	
946000417	
<b>Universal Numbering System (DUNS)</b>	
103717336	
<b>Recipient's Unique Entity Identifier</b>	
Not Available	
<b>31. Assistance Type</b>	
Cooperative Agreement	
<b>32. Type of Award</b>	
Other	

<b>33. Approved Budget</b> (Excludes Direct Assistance)	
I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
<b>a. Salaries and Wages</b>	\$41,017.00
<b>b. Fringe Benefits</b>	\$18,457.00
<b>c. Total Personnel Costs</b>	\$59,474.00
<b>d. Equipment</b>	\$0.00
<b>e. Supplies</b>	\$0.00
<b>f. Travel</b>	\$2,600.00
<b>g. Construction</b>	\$0.00
<b>h. Other</b>	\$0.00
<b>i. Contractual</b>	\$509,979.00
<b>j. TOTAL DIRECT COSTS</b>	<b>\$572,053.00</b>
<b>k. INDIRECT COSTS</b>	<b>\$10,254.00</b>
<b>l. TOTAL APPROVED BUDGET</b>	<b>\$582,307.00</b>
<b>m. Federal Share</b>	<b>\$582,307.00</b>
<b>n. Non-Federal Share</b>	<b>\$0.00</b>

<b>34. Accounting Classification Codes</b>					
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9391195	20NU62PS924599	PS	41.51	\$0.00	75-20-0950
1-9391195	20NU62PS924599	PS	41.51	\$45,739.00	75-21-0950



**DEPARTMENT OF HEALTH AND HUMAN SERVICES** Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU62PS924599-02-03

FAIN# NU62PS924599

Federal Award Date: 08/25/2021

**Direct Assistance**

<b>BUDGET CATEGORIES</b>	<b>PREVIOUS AMOUNT (A)</b>	<b>AMOUNT THIS ACTION (B)</b>	<b>TOTAL (A + B)</b>
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

# AWARD ATTACHMENTS

San Francisco Department of Public Health

6 NU62PS924599-02-03

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1. Terms and Conditions

**Notice of Funding Opportunity (NOFO): PS20-2005**  
**Award Number: NU62PS924599-02-03**  
**Award Type: Cooperative Agreement**

**ADDITIONAL TERMS AND CONDITIONS**

**PURPOSE:** This revised Notice of Award is to provide Supplemental Funding for the Medical Monitoring Projects (MMP) in the amount of \$45,739. Previously, \$536,568 had been awarded, making the current total available award amount \$582,307 for the budget period which is 06/30/2021 through 05/31/2022.

The activities have been reviewed and found to be appropriate and consistent with program objectives.

Please be advised that grantee must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, and reasonable.

All the other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

**GMS Contact:**

**Rhonda Burton**, Grants Management Specialist  
Centers for Disease Control and Prevention  
Branch 1-Office of Infectious Disease  
2939 Flowers Road MSTV-2  
Atlanta, GA 30341  
Telephone: 770-488-1381  
Email: [RBurton@cdc.gov](mailto:RBurton@cdc.gov)

**PLEASE REFERENCE AWARD NUMBER ON ALL CORRESPONDENCE**