City and County of San Francisco Office of Contract Administration Purchasing Division

Second Amendment

THIS AMENDMENT (this "Amendment") is made as of **February 1st, 2019**, in San Francisco, California, by and between the **SAN FRANCISCO AIDS FOUNDATION** ("Contractor"), and the City and County of San Francisco, a municipal corporation ("City"), acting by and through its Director of the Office of Contract Administration.

Recitals

WHEREAS, City and Contractor have entered into the Agreement (as defined below); and

WHEREAS, City and Contractor desire to modify the Agreement on the terms and conditions set forth herein to extend contract term, increase contract amount, and update standard contractual clauses; and

WHEREAS, the Agreement was competitively procured as required by San Francisco Administrative Code Chapter 21.1 through **RFP 3-2016 issued on March 3, 2016** and this modification is consistent therewith; and

WHEREAS, approval for this Amendment was obtained when the Civil Service Commission approved Contract number 2006 – 07/08 on June 29, 2016;

NOW, THEREFORE, Contractor and the City agree as follows:

Article 1 Definitions

The following definitions shall apply to this Amendment:

1.1 Agreement. The term "Agreement" shall mean the Agreement dated July 1, 2016, (CID# 1000002634 / BPHC17000019), between Contractor and City, as amended by the:

First Amendment, dated October 1, 2017 (CID# 1000002634 / BPHC17000019).

1.2 **Other Terms.** Terms used and not defined in this Amendment shall have the meanings assigned to such terms in the Agreement.

Article 2 Modifications to the Agreement

The Agreement is hereby modified as follows:

2.1 Article 2 Term of the Agreement of the First Amendment currently reads as follows:

Article 2 Term of the Agreement

2.1 The term of this Agreement shall commence on the latter of: (i) July 1, 2016; or (ii) the Effective Date and expire on June 30, 2019, unless earlier terminated as otherwise provided herein.

2.2 The City has **eight** options to renew the Agreement for a period of **one year** each. The City may extend this Agreement beyond the expiration date by exercising an option at the City's sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, "Modification of this Agreement."

Option 1:	07/01/2018 - 06/30/2019	Exercised
Option 2:	07/01/2019 - 06/30/2020	
Option 3:	07/01/2020 - 06/30/2021	
Option 4:	07/01/2021 - 06/30/2022	
Option 5:	07/01/2022 - 06/30/2023	
Option 6:	07/01/2023 - 06/30/2024	
Option 7:	07/01/2024 - 06/30/2025	
Option 8:	07/01/2025 - 06/30/2026	

Such section is hereby amended in its entirety to read as follows:

Article 2 Term of the Agreement

2.1 The term of this Agreement shall commence on the latter of: (i) July 1, 2016; or (ii) the Effective Date and expire on June 30, 2026, unless earlier terminated as otherwise provided herein.

2.2 The City has **eight** options to renew the Agreement for a period of **one year** each. The City may extend this Agreement beyond the expiration date by exercising an option at the City's sole and absolute discretion and by modifying this Agreement as provided in Section 11.5, "Modification of this Agreement."

Option 1:	07/01/2018 - 06/30/2019	Exercised
Option 2:	07/01/2019 - 06/30/2020	Exercised
Option 3:	07/01/2020 - 06/30/2021	Exercised
Option 4:	07/01/2021 - 06/30/2022	Exercised
Option 5:	07/01/2022 - 06/30/2023	Exercised
Option 6:	07/01/2023 - 06/30/2024	Exercised
Option 7:	07/01/2024 - 06/30/2025	Exercised
Option 8:	07/01/2025 - 06/30/2026	Exercised

2.2 Article 3.3.1 Payment of the First Amendment currently reads as follows:

Article 3 Financial Matters

3.3 Compensation.

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed Nine Million Eight Hundred Thirty-Nine Thousand Four Hundred Eighty-Seven DOLLARS (\$9,839,487). The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

Such section is hereby amended in its entirety to read as follows:

Article 3 Financial Matters

3.3 Compensation.

3.3.1 Payment. Contractor shall provide an invoice to the City on a monthly basis for Services completed in the immediate preceding month, unless a different schedule is set out in Appendix B, "Calculation of Charges." Compensation shall be made for Services identified in the invoice that the Director of Health, in his or her sole discretion, concludes has been satisfactorily performed. Payment shall be made within 30 calendar days of receipt of the invoice, unless the City notifies the Contractor that a dispute as to the invoice exists. In no event shall the amount of this Agreement exceed Thirty-Five Million Six Hundred Eight Thousand One Hundred Fifty-Nine DOLLARS (\$35,608,159). The breakdown of charges associated with this Agreement appears in Appendix B, "Calculation of Charges," attached hereto and incorporated by reference as though fully set forth herein. A portion of payment may be withheld until conclusion of the Agreement if agreed to by both parties as retainage, described in Appendix B. In no event shall City be liable for interest or late charges for any late payments.

2.3 Article 3.4 Audit and Inspection Records, is hereby amended in its entirety to read as follows:

Article 3 Financial Matters

3.4 Audit and Inspection of Records. Contractor agrees to maintain and make available to the City, during regular business hours, accurate books and accounting records relating to its Services. Contractor will permit City to audit, examine and make excerpts and transcripts from such books and records, and to make audits of all invoices, materials, payrolls, records or personnel and other data related to all other matters covered by this Agreement, whether funded in whole or in part under this Agreement. Contractor shall maintain such data and records in an accessible location and condition for a period of not fewer than five years after final payment under this Agreement or until after final audit has been resolved, whichever is later. The State of California or any Federal agency having an interest in the subject matter of this Agreement shall have the same rights as conferred upon City by this Section. Contractor shall include the same audit and inspection rights and record retention requirements in all subcontracts.

3.4.1 Contractor shall annually have its books of accounts audited by a Certified Public Accountant and a copy of said audit report and the associated management letter(s) shall be transmitted to the Director of Public Health or his /her designee within one hundred eighty (180) calendar days following Contractor's fiscal year end date. If Contractor expends \$750,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. Said requirements can be found at the following website address: https://www.ecfr.gov/cgibin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl.

If Contractor expends less than \$750,000 a year in Federal awards, Contractor is exempt from the single audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal Agency, pass-through entity and General Accounting Office. Contractor agrees to reimburse the City any cost adjustments necessitated by this audit report. Any audit report which addresses all or part of the period covered by this Agreement shall treat the service components identified in the detailed descriptions attached to Appendix A and referred to in the Program Budgets of Appendix B as discrete program entities of the Contractor.

3.4.2 The Director of Public Health or his / her designee may approve a waiver of the audit requirement in Section 3.4.1 above, if the contractual Services are of a consulting or personal services nature, these Services are paid for through fee for service terms which limit the City's risk with such contracts, and it is determined that the work associated with the audit would produce undue burdens or costs and would provide minimal benefits. A written request for a waiver must be submitted to the DIRECTOR ninety (90) calendar days before the end of the Agreement term or Contractor's fiscal year, whichever comes first.

3.4.3 Any financial adjustments necessitated by this audit report shall be made by Contractor to the City. If Contractor is under contract to the City, the adjustment may be made in the next subsequent billing by Contractor to the City, or may be made by another written schedule determined solely by the City. In the event Contractor is not under contract to the City, written arrangements shall be made for audit adjustments.

2.4 Add Article 12.2 Exclusion Lists and Employee Verification, to this Agreement as Amended to reads as follows:

Article 12 Department Specific Terms

12.2 **Exclusion Lists and Employee Verification.** Upon hire and monthly thereafter, Contractor will check the exclusion lists published by the Office of the Inspector General (OIG), General Services Administration (GSA), and the California Department of Health Care Services (DHCS) to ensure that any employee, temporary employee, volunteer, consultant, or governing body member responsible for oversight, administering or delivering state or federally-funded services who is on any of these lists is excluded from (may not work in) your program or agency. Proof of checking these lists will be retained for seven years. 2.5 Article 13.3 Business Associate Agreement, is hereby amended in its entirety to read as follows:

Article 13 Data and Security

13.3 Business Associate Agreement.

The parties acknowledge that CITY is a Covered Entity as defined in the Healthcare Insurance Portability and Accountability Act of 1996 ("HIPAA") and is required to comply with the HIPAA Privacy Rule governing the access, use, disclosure, transmission, and storage of protected health information (PHI) and the Security Rule under the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act").

The parties acknowledge that CONTRACTOR will:

1.

Do at least one or more of the following: A. Create, receive, maintain, or transmit PHI for or on behalf of CITY/SFDPH (including storage of PHI, digital or hard copy, even if Contractor does not view the PHI or only does so on a random or infrequent basis); or

B. Receive PHI, or access to PHI, from CITY/SFDPH or another Business Associate of City, as part of providing a service to or for CITY/SFDPH, including legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial; or

C. Transmit PHI data for CITY/SFDPH and require access on a regular basis to such PHI. (Such as health information exchanges (HIEs), e-prescribing gateways, or electronic health record vendors)

FOR PURPOSES OF THIS AGREEMENT, CONTRACTOR IS A BUSINESS ASSOCIATE OF CITY/SFDPH, AS DEFINED UNDER HIPAA. CONTRACTOR MUST COMPLY WITH AND COMPLETE THE FOLLOWING ATTACHED DOCUMENTS, INCORPORATED TO THIS AGREEMENT AS THOUGH FULLY SET FORTH HEREIN:

a. Appendix E SFDPH Business Associate Agreement (BAA) (04-12-2018)

- 1. SFDPH Attestation 1 PRIVACY (06-07-2017)
- 2. SFDPH Attestation 2 DATA SECURITY (06-07-2017)

2. <u>NOT</u> do any of the activities listed above in subsection 1; Contractor is not a Business Associate of CITY/SFDPH. Appendix E and attestations are not required for the purposes of this Agreement.

The Appendices listed below are Amended as follows:

2.6 Delete Appendix A, and replace in its entirety with Appendix A to Agreement as amended. Dated: 02/01/2019.

2.7 Delete Appendix A-1, and replace in its entirety with Appendix A-1 to Agreement as amended. Dated: 02/01/2019.

2.8 Delete Appendix A-2, and replace in its entirety with Appendix A-2 to Agreement as amended. Dated: 02/01/2019.

2.9 Delete Appendix A-3, and replace in its entirety with Appendix A-3 to Agreement as amended. Dated: 02/01/2019.

2.10 Delete Appendix B, and replace in its entirety with Appendix B to Agreement as amended. Dated: 02/01/2019.

2.11 Delete Appendix B-1f, and replace in its entirety with Appendix B-1f to Agreement as amended. Dated: 02/01/2019.

2.12 Add Appendix B-1i to Agreement as amended. Dated: 02/01/2019.

2.13 Add Appendix B-1j to Agreement as amended. Dated: 02/01/2019.

2.14 Add Appendix B-1k to Agreement as amended. Dated: 02/01/2019.

2.15 Add Appendix B-11 to Agreement as amended. Dated: 02/01/2019.

2.16 Add Appendix B-1m to Agreement as amended. Dated: 02/01/2019.

2.17 Add Appendix B-1n to Agreement as amended. Dated: 02/01/2019.



2.20 Add Appendix B-1q to Agreement as amended. Dated: 02/01/2019.

2.21 Add Appendix B-1r to Agreement as amended. Dated: 02/01/2019.

- 2.22 Add Appendix B-1s to Agreement as amended. Dated: 02/01/2019.
- 2.23 Add Appendix B-1t to Agreement as amended. Dated: 02/01/2019.
- 2.24 Add Appendix B-1u to Agreement as amended. Dated: 02/01/2019.
- 2.25 Add Appendix B-1v to Agreement as amended. Dated: 02/01/2019.
- 2.26 Add Appendix B-2c to Agreement as amended. Dated: 02/01/2019.
- 2.27 Add Appendix B-2d to Agreement as amended. Dated: 02/01/2019.
- 2.28 Add Appendix B-2e to Agreement as amended. Dated: 02/01/2019.
- 2.29 Add Appendix B-2f to Agreement as amended. Dated: 02/01/2019.
- 2.30 Add Appendix B-2g to Agreement as amended. Dated: 02/01/2019.
- 2.31 Add Appendix B-2h to Agreement as amended. Dated: 02/01/2019.
- 2.32 Add Appendix B-2i to Agreement as amended. Dated: 02/01/2019.

2.33 Delete Appendix B-3b, and replace in its entirety with Appendix B-3b to Agreement as amended. Dated: 02/01/2019.

2.34 Add Appendix B-3c to Agreement as amended. Dated: 02/01/2019.

2.35 Add Appendix B-3d to Agreement as amended. Dated: 02/01/2019.

2.36 Add Appendix B-3e to Agreement as amended. Dated: 02/01/2019.

2.37 Add Appendix B-3f to Agreement as amended. Dated: 02/01/2019.

2.38 Add Appendix B-3g to Agreement as amended. Dated: 02/01/2019.

2.39 Add Appendix B-3h to Agreement as amended. Dated: 02/01/2019.

2.40 Add Appendix B-3i to Agreement as amended. Dated: 02/01/2019.

2.41 Delete Appendix E, and replace in its entirety with Appendix E to Agreement as amended. Dated: OCPA & CAT v4-12-18 and Attestation forms 06-07-2017.

2.42 Delete Appendix F-1f, and replace in its entirety with Appendix F-1f to Agreement as amended. Dated: 02/01/2019.

2.43 Add Appendix F-1i to Agreement as amended. Dated: 02/01/2019.

2.44 Add Appendix F-1j to Agreement as amended. Dated: 02/01/2019.

2.45 Add Appendix F-1k to Agreement as amended. Dated: 02/01/2019.





2.61 Add Appendix F-2g to Agreement as amended. Dated: 02/01/2019.

2.62 Add Appendix F-2h to Agreement as amended. Dated: 02/01/2019.

2.63 Add Appendix F-2i to Agreement as amended. Dated: 02/01/2019.

2.64 Delete Appendix F-3b, and replace in its entirety with Appendix F-3b to Agreement as amended. Dated: 02/01/2019.

2.65 Add Appendix F-3c to Agreement as amended. Dated: 02/01/2019.

2.66 Add Appendix F-3d to Agreement as amended. Dated: 02/01/2019.

2.67 Add Appendix F-3e to Agreement as amended. Dated: 02/01/2019.

2.68 Add Appendix F-3f to Agreement as amended. Dated: 02/01/2019.

2.69 Add Appendix F-3g to Agreement as amended. Dated: 02/01/2019.

2.70 Add Appendix F-3h to Agreement as amended. Dated: 02/01/2019.

2.71 Add Appendix F-3i to Agreement as amended. Dated: 02/01/2019.

Article 3 Effective Date

Each of the modifications set forth in Section 2 shall be effective on and after the date of this Amendment.

Article 4 Legal Effect

Except as expressly modified by this Amendment, all of the terms and conditions of the Agreement shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, Contractor and City have executed this Amendment as of the date first referenced above.

CITY CONTRACTOR Recommended by: SAN FRANCISCO AIDS FOUNDATION Grant Colfax, MD JOÉ HOLLENDONER Chief Executive Officer Director of Health Department of Public Health 1035 Market Street, Suite 400 San Francisco, CA 94103 Supplier ID number: 0000011638 Approved as to Form: Dennis J. Herrera City Attorney By: Deputy City Attorney AN Approved: Alaric Degrafinried City Purchaser and Director of the Office of Contract Administration



Appendix A Scope of Services

1. Terms

A. Contract Administrator:

In performing the Services hereunder, Contractor shall report to Tomas Aragon, M.D. / Tracey Packer, Contract Administrator for the City, or his / her designee.

B. <u>Reports</u>:

Contractor shall submit written reports as requested by the City. The format for the content of such reports shall be determined by the City. The timely submission of all reports is a necessary and material term and condition of this Agreement. All reports, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

For services solicited under a Group Purchasing Organization (GPO) the Contractor shall report all applicable sales under this agreement to the respective GPO.

C. Evaluation:

Contractor shall participate as requested with the City, State and/or Federal government in evaluative studies designed to show the effectiveness of Contractor's Services. Contractor agrees to meet the requirements of and participate in the evaluation program and management information systems of the City.

For contracts for the provision of services at Zuckerberg San Francisco General or Laguna Honda Hospital and Rehabilitation Center, the evaluation program shall include agreed upon performance measures as specified in the Performance Improvement Plan and Performance Measure Grid which is presented in Attachment 1 to Appendix A. Performance measures are reported annually to the Zuckerberg San Francisco General performance improvement committees (PIPS and Quality Council) or the to the Administration Office of Laguna Honda Hospital and Rehabilitation Center.

The City agrees that any final written reports generated through the evaluation program shall be made available to Contractor within thirty (30) working days. Contractor may submit a written response within thirty working days of receipt of any evaluation report and such response will become part of the official report.

D. <u>Possession of Licenses/Permits</u>:

Contractor warrants the possession of all licenses and/or permits required by the laws and regulations of the United States, the State of California, and the City to provide the Services. Failure to maintain these licenses and permits shall constitute a material breach of this Agreement.

E. Adequate Resources:

Contractor agrees that it has secured or shall secure at its own expense all persons, employees and equipment required to perform the Services required under this Agreement, and that all such Services shall be performed by Contractor, or under Contractor's supervision, by persons authorized by law to perform such Services.

F. Admission Policy:

Admission policies for the Services shall be in writing and available to the public. Except to the extent that the Services are to be rendered to a specific population as described in the programs listed in Section 2 of Appendix A, such policies must include a provision that clients are accepted for care without discrimination on the basis of race, color, creed, religion, sex, age, national origin, ancestry, sexual orientation, gender identification, disability, or AIDS/HIV status.

G. <u>Grievance Procedure</u>:

Contractor agrees to establish and maintain a written Client Grievance Procedure which shall include the following elements as well as others that may be appropriate to the Services: (1) the name or title of the person or persons authorized to make a determination regarding the grievance; (2) the opportunity for the aggrieved party to discuss the grievance with those who will be making the determination; and (3) the right of a client dissatisfied with the decision to ask for a review and recommendation from the community advisory board or planning council that has purview over the aggrieved service. Contractor shall provide a copy of this procedure, and any amendments thereto, to each client and to the Director of Public Health or his/her designated agent (hereinafter referred to as "DIRECTOR"). Those clients who do not receive direct Services will be provided a copy of this procedure upon request.

H. Infection Control, Health and Safety:

(1) Contractor must have a Bloodborne Pathogen (BBP) Exposure Control plan as defined in the California Code of Regulations, Title 8, Section 5193, Bloodborne Pathogens (http://www.dir.ca.gov/title8/5193.html), and demonstrate compliance with all requirements including, but not limited to, exposure determination, training, immunization, use of personal protective equipment and safe needle devices, maintenance of a sharps injury log, post-exposure medical evaluations, and recordkeeping.

(2) Contractor must demonstrate personnel policies/procedures for protection of staff and clients from other communicable diseases prevalent in the population served. Such policies and procedures shall include, but not be limited to, work practices, personal protective equipment, staff/client Tuberculosis (TB) surveillance, training, etc.

(3) Contractor must demonstrate personnel policies/procedures for Tuberculosis (TB) exposure control consistent with the Centers for Disease Control and Prevention (CDC) recommendations for health care facilities and based on the Francis J. Curry National Tuberculosis Center: Template for Clinic Settings, as appropriate.

(4) Contractor is responsible for site conditions, equipment, health and safety of their employees, and all other persons who work or visit the job site.

(5) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as BBP and TB and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(6) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(7) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including safe needle devices, and provides and documents all appropriate training.

(8) Contractor shall demonstrate compliance with all state and local regulations with regard to handling and disposing of medical waste.

I. Aerosol Transmissible Disease Program, Health and Safety:

(1) Contractor must have an Aerosol Transmissible Disease (ATD) Program as defined in the California Code of Regulations, Title 8, Section 5199, Aerosol Transmissible Diseases (http://www.dir.ca.gov/Title8/5199.html), and demonstrate compliance with all requirements including, but not limited to, exposure determination, screening procedures, source control measures, use of personal protective equipment, referral procedures, training, immunization, post-exposure medical evaluations/follow-up, and recordkeeping.

(2) Contractor shall assume liability for any and all work-related injuries/illnesses including infectious exposures such as Aerosol Transmissible Disease and demonstrate appropriate policies and procedures for reporting such events and providing appropriate post-exposure medical management as required by State workers' compensation laws and regulations.

(3) Contractor shall comply with all applicable Cal-OSHA standards including maintenance of the OSHA 300 Log of Work-Related Injuries and Illnesses.

(4) Contractor assumes responsibility for procuring all medical equipment and supplies for use by their staff, including Personnel Protective Equipment such as respirators, and provides and documents all appropriate training.

J. Acknowledgment of Funding:

Contractor agrees to acknowledge the San Francisco Department of Public Health in any printed material or public announcement describing the San Francisco Department of Public Health-funded Services. Such documents or announcements shall contain a credit substantially as follows: "This program/service/activity/research project was funded through the Department of Public Health, City and County of San Francisco."

K. Patients Rights:

All applicable Patients Rights laws and procedures shall be implemented.

L. <u>Under-Utilization Reports</u>:

For any quarter that Contractor maintains less than ninety percent (90%) of the total agreed upon units of service for any mode of service hereunder, Contractor shall immediately notify the Contract Administrator in writing and shall specify the number of underutilized units of service.

M. Quality Assurance:

Contractor agrees to develop and implement a Quality Assurance Plan based on internal standards established by Contractor applicable to the Services as follows:

- 1) Staff evaluations completed on an annual basis.
- 2) Personnel policies and procedures in place, reviewed and updated annually.
- 3) Board Review of Quality Assurance Plan.

N. Compliance With Grant Award Notices:

Contractor recognizes that funding for this Agreement is provided to the City through federal, state or private foundation awards. Contractor agrees to comply with the provisions of the City's agreements with said funding sources, which agreements are incorporated by reference as though fully set forth.

Contractor agrees that funds received by Contractor from a source other than the City to defray any portion of the reimbursable costs allowable under this Agreement shall be reported to the City and deducted by Contractor from its billings to the City to ensure that no portion of the City's reimbursement to Contractor is duplicated.

2. Description of Services

Contractor agrees to perform the following Services:

All written Deliverables, including any copies, shall be submitted on recycled paper and printed on double-sided pages to the maximum extent possible.

Detailed description of services are listed below and are attached hereto

Appendix A-1	HIV Syringe Access and Disposal Services
Appendix A-2	HIV Syringe Access and Disposal Services – Homeless Youth Alliance
Appendix A-3	HIV Syringe Access and Disposal Services – Harm Reduction Center

3. Services Provided by Attorneys. Any services to be provided by a law firm or attorney to the City must be reviewed and approved in writing in advance by the City Attorney. No invoices for services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

CONTRACT SUMMARY

Fiscal Agency:	San Francisco AIDS Foundation San Francisco AIDS Foundation									
Total Contract	ADD 700 070									
Amount:	\$32,762,870									
Funding Source:	HPS General Fund/CDC Syringe Access and Disposal Services									
Program Name:	HIV Prevention Services (HPS)									
System of Care:	N/A									
Program Code:									NG DI HUMAN	
Provider Address:	1035 Market Street, Suite 400 - SF CA 94103									
Provider Phone:	415-487-3000							Provid	er Fax: 415-487-	-3094
Contact Person:	Richard Hill, Director of Government Contracts Director	ct Phone Numbe	r: 415-487-8042	Email: rhill@	sfaf.org					
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RFP#:	3-2016									
Appendix A:	[A	ppendix A-1	Syringe A	ccess Services			
Appendix B:		B-1	B-1a	B-1b	B-1c	B-1d	B-1e	B-1f	B-1g	B-1h
Funding Source	1 [GF	GF	CDC	GF	GF	CDC	GF	GF	CDC
Funding Amount:	[\$1,863,232	\$196,713	\$5,000	\$1,909,813	\$201,631	\$5,000	\$1,956,679	\$206,672	\$5,000
Unspent Amount:							-\$3,036			-\$5,000
Funding Term:		7.1.16-6.30.17	7.1.16-6.30.17	7.1.16-12.31.16	7.1.17-6.30.18	7.1.17-6.30.18	1.1.17-12.31.17	7.1.18-6.30.19	7.1.18-6.30.19	1.1.18-12.31.18
		UOS	UOS	UOS	UOS	UOS	UOS	UOS	UOS	UOS
Number of UOS:	Syringe Access & Disposal Services Hrs.	3,614	N/A	N/A	3,944	N/A	N/A	4,302	N/A	N/A
	Syringe Access, Disposal Coordination & Bulk Purchasing	12	12	12	12	12	12	12	12	12
	Citywide Syringe Sweeps	2,028	N/A	N/A	2,861	N/A	N/A	3,710	N/A	N/A
	Community-Based Sweeps Events	264	N/A	N/A	40	N/A	N/A	67	N/A	N/A
Number of NOC:		NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC
	Syringe Access & Disposal Services Hrs.	44,300	N/A	N/A	56,635	N/A	N/A	54,300	N/A	N/A
	Syringe Access, Disposal Coordination & Bulk Purchasing	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Citywide Syringe Sweeps	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Community-Based Sweeps Events	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A .
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Appendix B:		B-1i	B-1j	B-1k	B-11	B-1m	B-1n	B-10	B-1p	B-1q
Funding Source		GF	GF	GF	GF	GF	GF	GF	GF	GF
Funding Amount:		\$2,006,497	\$211,838	\$2,006,497	\$211,838	\$2,006,497	\$211,838	\$2,006,497	\$211,838	\$2,006,497
Funding Term:		7.1.19 - 6.30.20	7.1.19 - 6.30.20	7.1.20 - 6.30.21	7.1.20 - 6.30.21	7.1.21 - 6.30.22	7.1.21 - 6.30.22	7.1.22 - 6.30.23	7.1.22 - 6.30.23	7.1.23 - 6.30.24
		UOS	UOS	UOS	UOS	UOS	UOS	UOS	UOS	UOS
Number of UOS:	Syringe Access & Disposal Services Hrs.	4,302	N/A	4,302	N/A	4,302	N/A	4,302	N/A	4,302
	Syringe Access, Disposal Coordination & Bulk Purchasing	12	12	12	12	12	12	12	12	12
	Citywide Syringe Sweeps	3,710	N/A	3,710	N/A	3,710	N/A	3,710	N/A	3,710
	Community-Based Sweeps Events	67	N/A	67	N/A	67	N/A	67	N/A	67

Contractor: San Francisco AIDS Foundation Program: HIV Syringe Access and Disposal Services Fiscal Year: 2016-2017 to 2025-2026 Contract ID# 1000002634 (CMS# 7774)

Number of NOC:	1 1	NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC
	Syringe Access & Disposal Services Hrs.	54,300	N/A	54,300	N/A	54,300	N/A	54,300	N/A	54,300
	Syringe Access, Disposal Coordination & Bulk Purchasing	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Citywide Syringe Sweeps	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Community-Based Sweeps Events	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
			ALL DESCRIPTION	a man sa sa di a	Contraction and a second			Stand States		Survey Starting
Appendix B:		B-1r	B-1s	B-1t	B-1u	B-1v				
Funding Source	1 1	GF	GF	GF	GF	GF				
Funding Amount:	1 1	\$211,838	\$2,006,497	\$211,838	\$2,006,497	\$211,838				
Funding Term:		7.1.23 - 6.30.24	7.1.24 - 6.30.25	7.1.24 - 6.30.25	7.1.25 - 6.30.26	7.1.25 - 6.30.26				
•		UOS	UOS	UOS	UOS	UOS				
Number of UOS:	Syringe Access & Disposal Services Hrs.	N/A	4,302	N/A	4,302	N/A				
	Syringe Access, Disposal Coordination & Bulk Purchasing	12	12	12	12	12				
	Citywide Syringe Sweeps	N/A	3,710	N/A	3,710	N/A				
	Community-Based Sweeps Events	N/A	67	N/A	67	N/A				
Number of NOC:		NOC	NOC	NOC	NOC	NOC				
Number of Noo.	Syringe Access & Disposal Services Hrs.	N/A	54,300	N/A	54,300	N/A				
	Syringe Access, Disposal Coordination & Bulk Purchasing	N/A	N/A	N/A	N/A	N/A				
	Citywide Syringe Sweeps	N/A	N/A	N/A	N/A	N/A				
	Community-Based Sweeps Events	N/A	N/A	N/A	N/A	N/A				
				SULTER STATE	Contra Contraction	The second second				COLOR LANS
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 hour of se									
		And shaded and and a day in the day is a day								
Target Population:	Intravenous drug users (IDUs) throughout San Fran	CISCO.								
Description of Services:	Provides access to sterile syringes and safer injection population. SFAF will serve as the lead agency for Union.									
Appendix A:			interior and a state of the local state of the		Appendix A-	2 Homeless Yo	uth Alliance			
Appendix B:		B-2	B-2a	B-2b	B-2c	B-2d	B-2e	B-2f	B-2g	B-2h
Funding Source		GF	GF	GF	GF	GF	GF	GF	GF	GF
Funding Amount:		\$156,854	\$160,775	\$164,794	\$168,914	\$168,914	\$168,914	\$168,914	\$168,914	\$168,914
Funding Term:		7.1.16-6.30.17	7.1.17-6.30.18	7.1.18-6.30.19	7.1.19 - 6.30.20	7.1.20 - 6.30.21	7.1.21 - 6.30.22	7.1.22 - 6.30.23	7.1.23 - 6.30.24	7.1.24 - 6.30.25
Number of UOS:		UOS	UOS	UOS	UOS	UOS	UOS	UOS	UOS	UOS
	HYA Wrap Around & Disposal Services	12	12	12	12	12	12	12	12	12
CONTRACTOR CONTRACTOR AND	an an an an ann an Administra ann an Annais an than 1679 1970 an 1979 an 1979 an 1979 an 1979 an 1979 an 1979 a		in the second second					NOC		
Number of UDC/NOC:		NOC	NOC	NOC	NOC	NOC	NOC	NUC	NOC	NOC
	HYA Wrap Around & Disposal Services	NOC N/A	NOC N/A	NOC N/A	NOC N/A	NOC N/A	N/A	N/A	N/A	NOC N/A

	1	B-2i	T	T				1		
Appendix B:		GF								
Funding Source		\$168.914								
Funding Amount:		7.1.25 - 6.30.26								
Funding Term:		UOS								
Number of UOS:	LIVA Man Around & Diseased Services	12								
Number of	HYA Wrap Around & Disposal Services	12								
Number of UDC/NOC:		NOC								
	HYA Wrap Around & Disposal Services	N/A								
			S. C. M. She Trades		三大山 不有小的			而以現的政治		
Definition and # of	A Unit of Service (UOS) is equivalent to 1 month	of activition according	ad with the admini	stration of those f	inde					
UOS:	A Unit of Service (UUS) is equivalent to 1 month	UI activities associate		suadon of these h	unus.					
	Young adults aged 13-29 living on the stress in th	he Waight and famale	identified IDI Is in	the Mission						
Torrest Descriptions	I TOURIO AUGUIS AUEU 13-23 IIVIRU OLI UNE SUESS III U	le naight and lemale	Identified IDOS III	116 101921011						
Target Population:							Press and the second second second second			
Target Population:	This appendix addresses administrative activities	s to be paid by funds	provided by the Ci						es as the fiscal	
	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t	s to be paid by funds i that all invoicing will c	provided by the Ci ome from Tides F	oundation and the					es as the fiscal	
Target Population: Target Population:	This appendix addresses administrative activities	s to be paid by funds i that all invoicing will c	provided by the Ci ome from Tides F	oundation and the					ves as the fiscal	
	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t	s to be paid by funds i that all invoicing will c	provided by the Ci ome from Tides F	oundation and the					ves as the fiscal	
Target Population:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	s to be paid by funds that all invoicing will o operating expenses a	provided by the Ci ome from Tides Found for syringe disp	oundation and the posal services.					ves as the fiscal	
Target Population:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t	s to be paid by funds that all invoicing will o operating expenses a	provided by the Ci ome from Tides Found for syringe disp	oundation and the posal services.	checks are made		s/Homeless Youth		ves as the fiscal	
Target Population:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	s to be paid by funds that all invoicing will c operating expenses a	provided by the Ci ome from Tides Fo and for syringe disp	oundation and the posal services.	Appendix A-3	e payable to Tides	Homeless Youth	n Alliance.		B.3h
Target Population: Appendix A: Appendix B:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	s to be paid by funds that all invoicing will c operating expenses a	provided by the Ci ome from Tides Fo and for syringe disp B-3a	oundation and the posal services.	Appendix A-3 B-3c	e payable to Tides 6th Street Harm B-3d	s/Homeless Youth	n Alliance.	B-3g	B-3h GF
Target Population: Appendix A: Appendix B: Funding Source	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	b to be paid by funds that all invoicing will cooperating expenses a B-3 GF	provided by the Ci ome from Tides Fo and for syringe disp B-3a GF	oundation and the posal services. B-3b GF	Appendix A-3 B-3c GF	e payable to Tides 6th Street Harm B-3d GF	Reduction Ct. B-3e GF	B-3f GF	B-3g GF	GF
Target Population: Appendix A: Appendix B: Funding Source Funding Amount:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000	provided by the Ci ome from Tides Fo and for syringe disp B-3a GF \$884,000	oundation and the posal services.	Appendix A-3 B-3c	e payable to Tides 6th Street Harm B-3d	s/Homeless Youth	n Alliance.	B-3g	
Target Population: Appendix A: Appendix B: Funding Source	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000 11.1.16-6.30.17	Provided by the Ci ome from Tides F- and for syringe disp B-3a B-3a GF \$884,000 7.1.17-6.30.18	B-3b GF \$1,000,000 7.1.18-6.30.19	Appendix A-3 B-3c GF \$1,000,000	e payable to Tides 6th Street Harm B-3d GF \$1,000,000	A/Homeless Youth Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22	B-3f GF \$1,000,000	B-3g GF \$1,000,000 7.1.23 - 6.30.24	GF \$1,000,000
Target Population: Appendix A: Appendix B: Funding Source Funding Amount: Funding Term:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000 11.1.16-6.30.17 UOS	B-3a GF \$8884,000 7.1.17-6.30.18 UOS	B-3b GF \$1,000,000	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20	e payable to Tides 6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21	Reduction Ct. B-3e GF \$1,000,000	B-3f GF \$1,000,000 7.1.22 - 6.30.23	B-3g GF \$1,000,000 7.1.23 - 6.30.24 UOS	GF \$1,000,000 7.1.24 - 6.30.25 UOS
Target Population: Appendix A: Appendix B: Funding Source Funding Amount:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8	B-3a GF \$884,000 7.1.17-6.30.18 UOS N/A	B-3b GF \$1,000,000 7.1.18-6.30.19 UOS N/A	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20 UOS N/A	e payable to Tides 6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A	Arroweless Youth Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS N/A	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS N/A	B-3g GF \$1,000,000 7.1.23 - 6.30.24 UOS N/A	GF \$1,000,000 7.1.24 - 6.30.25 UOS N/A
Target Population: Appendix A: Appendix B: Funding Source Funding Amount: Funding Term:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8 N/A	B-3a GF \$884,000 7.1.17-6.30.18 UOS N/A 1,724	B-3b GF \$1,000,000 7.1.18-6.30.19 UOS N/A 1,888	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20 UOS N/A 1,888	e payable to Tides 6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888	Arroweless Youth Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS N/A 1,888	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS N/A 1,888	B-3g GF \$1,000,000 7.1.23 - 6.30.24 UOS N/A 1,888	GF \$1,000,000 7.1.24 - 6.30.25 UOS N/A 1,888
Target Population: Appendix A: Appendix B: Funding Source Funding Amount: Funding Term: Number of UOS:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8 N/A N/A	B-3a B-3a GF \$884,000 7.1.17-6.30.18 UOS N/A 1,724 1,275	B-3b GF \$1,000,000 7.1.18-6.30.19 UOS N/A 1,888 1,924	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20 UOS N/A 1,888 2,550	e payable to Tides 6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888 2,550	Arroweless Youth Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS N/A 1,888 2,550	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS N/A 1,888 2,550	B-3g GF \$1,000,000 7.1.23 - 6.30.24 UOS N/A 1,888 2,550	GF \$1,000,000 7.1.24 - 6.30.25 UOS N/A 1,888 2,550
Target Population: Appendix A: Appendix B: Funding Source Funding Amount: Funding Term:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8 N/A N/A N/A NOC	B-3a B-3a GF \$884,000 7.1.17-6.30.18 UOS N/A 1,724 1,275 NOC	B-3b GF \$1,000,000 7.1.18-6.30.19 UOS N/A 1,888 1,924 NOC	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20 UOS N/A 1,888 2,550 NOC	e payable to Tides 6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888 2,550 NOC	Arroweless Youth Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS N/A 1,888 2,550 NOC	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS N/A 1,888 2,550 NOC	B-3g GF \$1,000,000 7.1.23 - 6.30.24 UOS N/A 1,888 2,550 NOC	GF \$1,000,000 7.1.24 - 6.30.25 UOS N/A 1,888 2,550 NOC
Target Population: Appendix A: Appendix B: Funding Source Funding Amount: Funding Term: Number of UOS:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o Harm Reduction Center Services Hrs. Syringe Access Services Lounge Services Harm Reduction Center Services Hrs.	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8 N/A N/A N/A 18,400	B-3a B-3a GF \$884,000 7.1.17-6.30.18 UOS N/A 1,724 1,275 NOC N/A	B-3b GF \$1,000,000 7.1.18-6.30.19 UOS N/A 1,888 1,924 NOC N/A	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20 UOS N/A 1,888 2,550 NOC N/A	e payable to Tides 6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888 2,550 NOC N/A	Arroweless Youth Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS N/A 1,888 2,550 N/C N/A	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS N/A 1,888 2,550 NOC N/A	B-3g GF \$1,000,000 7.1.23 - 6.30.24 UOS N/A 1,888 2,550 NOC N/A	GF \$1,000,000 7.1.24 - 6.30.25 UOS N/A 1,888 2,550 NOC N/A
Target Population: Appendix A: Appendix B: Funding Source Funding Amount: Funding Term: Number of UOS:	This appendix addresses administrative activities agent for HYA. SFAF's agreement with HYA is t Funds are to be used for various personnel and o	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8 N/A N/A N/A NOC	B-3a B-3a GF \$884,000 7.1.17-6.30.18 UOS N/A 1,724 1,275 NOC	B-3b GF \$1,000,000 7.1.18-6.30.19 UOS N/A 1,888 1,924 NOC	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20 UOS N/A 1,888 2,550 NOC	e payable to Tides 6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888 2,550 NOC	Arroweless Youth Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS N/A 1,888 2,550 NOC	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS N/A 1,888 2,550 NOC	B-3g GF \$1,000,000 7.1.23 - 6.30.24 UOS N/A 1,888 2,550 NOC	GF \$1,000,000 7.1.24 - 6.30.25 UOS N/A 1,888 2,550 NOC

Contractor: San Francisco AIDS Foundation Program: HIV Syringe Access and Disposal Services Fiscal Year: 2016-2017 to 2025-2026 Contract ID# 1000002634 (CMS# 7774)

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Appendix B:		B-3i								
Funding Source		GF								
Funding Amount:		\$1,000,000								
Funding Term:		7.1.25 - 6.30.26					_			
		UOS								
Number of UOS:	Harm Reduction Center Services Hrs.	N/A								
	Syringe Access Services	1,888								
	Lounge Services	2,550								
Number of NOC:		NOC						-		
	Harm Reduction Center Services Hrs.	N/A								
	Syringe Access Services	31,341								
	Lounge Services	15,300						-		
				and the state		IL STRATT	and the second		all a she all a l	atter and the second
UOS:	A Unit of Service (UOS) is equivalent to 1 Month		Aeriter Services.							
Target Population:	Intravenous drug users (IDUs) throughout San F	rancisco.								
Description of	Services available at the Harm Reduction Center	r include:								
Services:	· a lounge area which provides space for clients	to drop in and hang o	ut, with opportunitie	es to access a ran	ge of low-thresh	old engagemer	nt activities;			
	• engagement in and linkage to HIV and HCV te				•	0.0				
	· peer-based activities and education on topics s		vention, vein care, h	narm reduction co	unseling;					
	crisis intervention;				0,					
	· syringe access services, including access to sy	ringes and supplies a	as well as disposal f	for used syringes:						
	 food and snacks; 									
	 a breakfast club adherence program; 									
	 secure lockers for clients to store HIV and HCV 	/ medications.								
100000000000000000000000000000000000000							************		**************	

1. Identifiers:

San Francisco AIDS Foundation – HIV Syringe Access and Disposal Services 1035 Market Street, Suite 400, San Francisco, CA 94103 (415) 487-3000/ fax (415) 487-3094 www.sfaf.org

Person completing this Narrative: Richard Hill, Government Contracts Director (415) 487-8042, rhill@sfaf.org

RPB

2. Nature of Document:

Check one 🗌 New

Contract Amendment

3. Goal Statement:

To reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.

4. Target Population:

While the SFAF strives to serve all, this program's primary focus is to serve San Francisco residents who are PWIDs, homeless, active drug users, formerly incarcerated, and/or struggling with mental health challenges, ensuring that services reach and meet the specific needs of the following subpopulations: males who have sex with males, youth, females, transgender persons, and males who have sex with females.

5. Modality(s) / Intervention(s):

Year One: B-1, B-1a, July 1, 2016 - June 30, 2017 and B-1b, July 1, 2016 - December 31, 2016

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1) One UOS = one hour of Syringe Access and Disposal Services 69.5 hours of syringe access and disposal services per week * 52 weeks = 3,614 UOS 12.26 clients per hour * 3,614 hours = 44,300 NOC	3,614	44,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Citywide Syringe Sweeps (B-1) One UOS = one hour of Citywide Sweeps 39 hours of sweeps per week * 52 weeks = 2,028 UOS	2,028	N/A

Community-Based Sweeps Events (B-1) One UOS = one Community-Based Sweep Event 264 events = 264 UOS	264	N/A
Total Services Delivered	5,918	44,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1a) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing	12	N/A
12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	IN/A
Total Services Delivered	12	N/A

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1b) One UOS = one month of Syringe Access and Disposal Coordination & Bulk		
Purchasing	12	N/A
12 months of Syringe Access and Disposal Coordination & Bulk Purchasing =		
12 UOS		
Total Services Delivered	12	N/A

Year Two: B-1c, B-1d, July 1, 2017 – June 30, 2018 and B-1e, January 1, 2017 – December 31, 2017

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1c) One UOS = one hour of Syringe Access and Disposal Services 75.85 hours of syringe access and disposal services per week * 52 weeks = 3,944 UOS 14.36 clients per hour * 3,944 hours = 56,635 NOC	3,944	56,635
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1c) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Citywide Syringe Sweeps (B-1c) One UOS = one hour of Citywide Sweeps ~55 hours of sweeps per week * 52 weeks = 2,861 UOS	2,861	N/A
Community-Based Sweeps Events (B-1c) One UOS = one Community-Based Sweep Event 40 events = 40 UOS	40	N/A
Total Services Delivered	6,857	56,635

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1d) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Total Services Delivered	12	N/A

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1e) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Total Services Delivered	12	N/A

Year Three: B-1f, B-1g, July 1, 2018 – June 30, 2019 and B-1h, January 1, 2018 – Dec. 31, 2018

Units of Service (UOS) Description		Number of Contact s (NOC)
Syringe Access and Disposal Service Hours (B-1f) One UOS = one hour of Syringe Access and Disposal Services 82.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 UOS ~12.63 clients per hour * 4,302 hours = 54,300 NOC		54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1f) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Citywide Syringe Sweeps (B-1f) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS Community-Based Sweeps Events (B-1f) One UOS = one Community-Based Sweep Event 67 events = 67 UOS		N/A
		N/A
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1g) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Total Services Delivered	12	N/A

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1h) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing	12	N/A
12 months of Syringe Access and Disposal Coordination & Bulk Purchasing =		
12 UOS		
Total Services Delivered	12	N/A

Year Four: B-1i and B-1j July 1, 2019 - June 30, 2020

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1i)		
One UOS = one hour of Syringe Access and Disposal Services		
82.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 UOS	4,302	54,300
~12.63 clients per hour * 4,302 hours = 54,300 NOC		
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1i)		
One UOS = one month of Syringe Access and Disposal Coordination & Bulk		
Purchasing	12	N/A
12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	
Citywide Syringe Sweeps (B-1i)		
One UOS = one hour of Citywide Sweeps	3,710	N/A
71.35 hours of sweeps per week * 52 weeks = 3,710 UOS		
Community-Based Sweeps Events (B-1i)		
One UOS = one Community-Based Sweep Event	67	N/A
67 events = 67 UOS		
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1j) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Total Services Delivered	12	N/A

Year Five: B-1k and B-11 July 1, 2020 - June 30, 2021

Units of Service (UOS) Description		Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1k) One UOS = one hour of Syringe Access and Disposal Services 82.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 UOS ~12.63 clients per hour * 4,302 hours = 54,300 NOC		54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1k) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Citywide Syringe Sweeps (B-1k) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS		N/A
Community-Based Sweeps Events (B-1k) One UOS = one Community-Based Sweep Event 67 events = 67 UOS	67	N/A
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-11) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Total Services Delivered	12	N/A

Year Six: B-1m and B-1n July 1, 2021 – June 30, 2022

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1m) One UOS = one hour of Syringe Access and Disposal Services 82.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 UOS ~12.63 clients per hour * 4,302 hours = 54,300 NOC Syringe Access, Disposal Coordination & Bulk Purchasing (B-1m) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS		54,300
		N/A

Citywide Syringe Sweeps (B-1m)		
One UOS = one hour of Citywide Sweeps	3,710	N/A
71.35 hours of sweeps per week * 52 weeks = 3,710 UOS		
Community-Based Sweeps Events (B-1m)		
One UOS = one Community-Based Sweep Event	67	N/A
67 events = 67 UOS	10 Hot 7 *	
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1n) One UOS = one month of Syringe Access and Disposal Coordination & Bulk	12	N/A
Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing =		
12 UOS Total Services Delivered	12	N/A

Year Seven: B-10 and B-1p July 1, 2022 - June 30, 2023

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-10) One UOS = one hour of Syringe Access and Disposal Services		
82.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 UOS	4,302	54,300
~12.63 clients per hour * 4,302 hours = 54,300 NOC		
Syringe Access, Disposal Coordination & Bulk Purchasing (B-10)		
One UOS = one month of Syringe Access and Disposal Coordination & Bulk		
Purchasing	12	N/A
12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS		
Citywide Syringe Sweeps (B-10)		
One UOS = one hour of Citywide Sweeps	3,710	N/A
71.35 hours of sweeps per week * 52 weeks = 3,710 UOS		
Community-Based Sweeps Events (B-10)		
One UOS = one Community-Based Sweep Event	67	N/A
67 events = 67 UOS		
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1p) One UOS = one month of Syringe Access and Disposal Coordination & Bulk	10	21/4
Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Total Services Delivered	12	N/A

Year Eight: B-1q and B-1r July 1, 2023 - June 30, 2024

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1q) One UOS = one hour of Syringe Access and Disposal Services 82.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 UOS ~12.63 clients per hour * 4,302 hours = 54,300 NOC		54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1q) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Citywide Syringe Sweeps (B-1q) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	3,710	N/A
Community-Based Sweeps Events (B-1q) One UOS = one Community-Based Sweep Event 67 events = 67 UOS	67	N/A
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1r) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing	12	N/A
12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS		
Total Services Delivered	12	N/A

Year Nine: B-1s and B-1t July 1, 2024 – June 30, 2025

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1s) One UOS = one hour of Syringe Access and Disposal Services 82.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 UOS ~12.63 clients per hour * 4,302 hours = 54,300 NOC	4,302	54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1s) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A

Citywide Syringe Sweeps (B-1s)		
One UOS = one hour of Citywide Sweeps	3,710	N/A
71.35 hours of sweeps per week * 52 weeks = 3,710 UOS		
Community-Based Sweeps Events (B-1s)		
One UOS = one Community-Based Sweep Event	67	N/A
67 events = 67 UOS		
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1t) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing =	12	N/A
12 UOS Total Services Delivered	12	N/A

Year Ten: B-1u and B-1v July 1, 2025 - June 30, 2026

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours (B-1u)		
One UOS = one hour of Syringe Access and Disposal Services		
82.73 hours of syringe access and disposal services per week * 52 weeks =	4,302	54,300
4,302 UOS		
\sim 12.63 clients per hour * 4,302 hours = 54,300 NOC		
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1u)		
One UOS = one month of Syringe Access and Disposal Coordination & Bulk		
Purchasing	12	N/A
12 months of Syringe Access and Disposal Coordination & Bulk Purchasing =		
12 UOS		
Citywide Syringe Sweeps (B-1u)		
One UOS = one hour of Citywide Sweeps	3,710	N/A
71.35 hours of sweeps per week * 52 weeks = 3,710 UOS		CARDING TALAN
Community-Based Sweeps Events (B-1u)		
One UOS = one Community-Based Sweep Event	67	N/A
67 events = 67 UOS		an in the second second second
Total Services Delivered	8,091	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1v) One UOS = one month of Syringe Access and Disposal Coordination & Bulk		N/A
Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing =	12	
12 UOS	10	
Total Services Delivered	12	N/A

6. Methodology:

- A. Syringe Access and Disposal Services includes the following direct client services:
 - 1. Provision of sterile injection equipment to clients. SAC partners will provide sterile injection equipment at mobile van based sites, through street outreach, camp outreach, secondary exchange programming, private syringe exchange, fixed site, and multi-service drop in center sites.
 - 2. Distribution of syringe disposal supplies, (fitpacks, small bio-bins). Every participant will be offered a disposal container when picking up supplies. SAC staff members will provide encouragement and positive reinforcement to participants who bring in returns. Additionally, disposal sweep community outreach workers will make sharps containers available to people they engage during sweeps and to residents and business owners who would like to join the cause.
 - 3. Collection of disposed injection equipment, including disposal at sites and sweep programs, and in collaboration with the SFDPH Rapid Response Team as needed. SAC staff members and volunteers will sweep mapped routes (see attachments) in documented hot spot areas. SAC staff members will provide training on safe handling to all volunteers and staff assisting with sweeps. SAC staff members will properly close and lock sharps containers.
 - 4. Provision of safer sex supplies, health education on subjects such as safer injection practices, appropriate disposal procedures and overdose prevention as well as health promotion,

Safer sex supplies will be made available at all SAC sites, and SAC members will engage participants around overdose prevention and provide DOPE Trainings, safer disposal and proper use of sharps containers, and engage with participants about safer injection, vein care, and self-care.

- 5. Referral and linkage to medical care, case management, treatment services and other ancillary services. All SAC staff members will provide referrals (and when feasible) offer warm hand offs to services including medical care, the broad spectrum of substance use treatment services available in San Francisco, food, shelter, mental health counseling, and benefits.
- 6. Linkage to HIV/HCV testing. All SAC members will offer participants linkage to on-site HIV/HCV testing or referrals to HIV/HCV testing.
- B. Syringe Access and Disposal Coordination includes the following non-direct client services:
 - 1. Overall coordination and responsibility for any agencies subcontracted to perform syringe access or disposal services or to reach the target populations. SFAF, the SAC Lead Coordinating agency, will monitor subcontractor performance, supply budget, syringe returns, ensure that work is documented and reported, and in collaboration with SAC membership problem solve, innovate, and deepen our relationships and coordinate our services.

- 2. Participate in meetings of any subcontractors and SFDPH Rapid Response Clean Team engaged in disposal efforts (including sweeps) to ensure consistency of service delivery and ensure complementary and non-duplicative efforts. SFAF will participate in disposal team meetings and assess and re-assess sweep mapped routes to avoid duplicating services and adjusting service areas to heavy need areas and to respond to community concerns.
- 3. Provide leadership to and training for any subcontractors. SAC Coordinating agency will arrange for trainings on subjects of interest to subcontractors and invite SAC members to SAS upcoming staff development trainings on boundaries, HCV medical care and linkage, safer injecting/vein care harm reduction counseling, and referral resources.
- 4. In partnership with DPH, act as a "Good Neighbor"/Community Partner and actively establish and maintain positive relationships with neighbors, police, and other stakeholders in the community. In areas around syringe sites, syringe providers must respond collaboratively to residents, and adhere to all city requirements. When requested, attend community and/or police meetings with DPH to present information about the syringe access and disposal program. SAC Coordinating agency SFAF will be a good neighbor, build community ties, alliances, and respectfully engage with people opposed to harm reduction services in their neighborhoods. SAC staff will make every effort dependent on staffing schedules and availability to attend community and/or police meetings with DPH to present information about the syringe access and disposal program.
- C. Bulk Purchasing and Distribution includes the following support services for any subcontractors:
 - 1. Order, purchase, and distribute syringes and safer injection equipment for the lead agency, any subcontracted agencies.
- D. Citywide Syringe Sweeps: A coordinated effort of at least two people whose sole purpose it is to search for, collect, and report on improperly discarded syringes, particularly on the streets and sidewalk within a specific geographic area. Sweeps must be complementary to other disposal efforts provided by the applicant and in collaboration with the SFDPH Rapid Response Clean Team. Requirements include:
 - 1. Development of sweep schedules, focusing on hot spots, i.e., locations where improperly discarded syringes historically have appeared frequently. See attached maps and sweep schedule.
 - 2. Ability to respond to DPH requests to increase sweeps in specific areas as needed. Sweep schedules may be adjusted to meet the needs of the community.
 - 3. Ability to incorporate other new methods of responding to sweep requests in real-time such as cell phone, text, mobile phone application.

- 4. Providing education to community about safe disposal options. All SAC members will share in development of safe disposal materials and outreach strategies to build community support for harm reduction and syringe access and safer disposal efforts.
- E. Coordination of Community-Based Sweeps Events: SFAF will coordinate neighborhoodwide sweep events that mobilize residents and staff of agencies working in areas where sweeps are necessary to create visibility, a sense of community and common purpose while providing a service.
- F. Data Collection and Reporting: Documentation of services must include logs of distribution of sterile injection equipment and supplies, collection and disposal of discarded syringes including:
 - 1. Reporting of sterile injection equipment distribution by site, Syringes in and Syringes out will be collected by all SAC agencies. Data by site will be requested (as opposed to aggregate monthly data).
 - 2. Submission of collected needle data on a quarterly basis, Sweep and Community Cleanup Data will be collected monthly including the route swept, the needles collected.
 - 3. Reporting of sweep data monthly to DPH, Records of education and outreach efforts to community about safe disposal options. Sweep and Community Cleanup Data will be collected monthly including the route swept, the needles collected. SAC members will track: # of Syringes collected, # of sharps containers distributed, the disposal sweep route, and provide a narrative after each sweep documenting community relationship building, education and outreach efforts, and contacts for follow up.
 - 4. Distribution of syringe disposal supplies.(fitpacks, small bio-bins, tongs) SAC lead agency will track syringe disposal container and tong purchases and provide data on supplies ordered by each agency.

7. Objectives and Measurements:

A. Individualized Objectives

- 1) By the end of each contract term, Syringe Access Collaborative/San Francisco AIDS Foundation will report on the percentage of HIV tests among people who inject drugs.
- 2) By the end of each contract term, Syringe Access Collaborative/San Francisco AIDS Foundation will report on linkage to care rates among newly diagnosed people who inject drugs, as defined by attending first medical appointment within three months of diagnosis.
- 3) By the end of each contract term, Syringe Access Collaborative/San Francisco AIDS Foundation will report a 70% retention rate among HIV-positive people who inject drugs, retention defined as having had a doctor's appointment, prescription refill, and/or lab work per treatment plan within the past six months.

8. Continuous Quality Improvement (CQI):

- 1. Staff Issues: SFAF's SAS Program Manager, in collaboration with the Director or Behavioral Health Services and the Senior Director of Programs and Services, will review monthly SAC UOS, coordinate client satisfaction survey, ensure that site data and sweep data are recorded and submitted.
- 2. Data Collection Tools will include: syringe access site data log, syringe disposal sweep log, volunteer sign in sheets, condom purchase invoices
- 3. Data:
 - All SAC members will collect the following data by individual site:
 - syringes returned
 - syringes distributed
 - Number of contacts and apparent demographics
 - Syringes swept
 - Mapped route of sweeps

• Narrative of community encounters/conversations/items for follow up In addition, SFAF collects more comprehensive data on participants through an annual anonymous survey. These voluntary surveys assess demographic data, health status (such as HIV status, linkage to care, medication adherence, etc.), risk behaviors, and client satisfaction.

- 4. Frequency: Site data will be collected at every site, entered into an excel spreadsheet, and analyzed on a monthly basis. Sweep data will be collected at every sweep, entered into an excel spreadsheet, and analyzed on a monthly basis.
- 5. Data Reporting: The SAS Program Manager and the Logistics Coordinator will receive and analyze these data, in coordination with the Government Contracts Director. The evaluation data will be used to measure whether sites have adequate staffing levels, if the site is well utilized or needs outreach to make it successfully reach people, to track our disposal rate and use it to motivate staff and participants to increase returns, and to assess whether our level of service meets the needs of the community.

a) Staff assigned to program evaluation.

At SFAF, all program data are compiled and reviewed quarterly by our Senior Director of Program Development and Operations, Government Contracts Director, and Chief Program Officer. At least twice a year, each program manager sits down with their supervisor and their team to review the data and determine any program refinements that may be necessary (such as if the program is not on track to meet its objectives). At this meeting, action items are developed to make these changes. The Chief Program Officer and Senior Director of Program Development and Operations keep and review an active list of the action items. In addition to these quality assurance procedures, every six months the data are presented to SFAF's Leadership Team and Program Team, who discuss findings and brainstorm ways to improve that program or other programs within SFAF. SFAF will comply with all Health Commission, Local, State, Federal, and/or Funding Source policies and requirements, including those pertaining to Harm Reduction, the Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction. All SAC members will comply with the CHEP "Syringe Access and Disposal Program Policies and Guidelines" located here: <u>http://harmreduction.org/wp-</u>content/uploads/2012/01/SPPPGVersion2-3-1-2011.pdf.

- b) How you will review and assess the extent to which your program is meeting its objectives. Monthly review of contract UOS versus performance, reading client satisfaction surveys, conversations with participants about their experiences at our services, surveys.
- c) What you will do if you learn the program is not meeting its objectives. Meet with the Syringe Access Collaborative and strategize, seek counsel from SFDPH, identify problems and adjust services to solve them.
- d) How you will use data/evaluation findings to change the program. Looking at demographic data, attendance patterns, service utilization, and reading client satisfaction surveys can highlight areas that need adjusting to improve the program.
- 9. Required Language: None required.

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San Francisco AIDS Foundation HIV Syringe Access and Disposal Services Homeless Youth Alliance

1. Identifiers:

Program Name: San Francisco AIDS Foundation: HIV Syringe Access Services – Homeless Youth Alliance (No client services will be provided at 607-A Haight Street) Program Address: 1035 Market Street, Suite 400 City, State, Zip Code: San Francisco, CA 94103 Telephone/FAX: (415) 487-3000/(415) 487-3094 Website Address: www.sfaf.org

Contractor Address: same as above
City, State, Zip Code:
Person completing this Narrative: Richard Hill, Director of Government Contracts
Telephone: (415) 487-8042
Email Address: rhill@sfaf.org

2. Nature of Document: Check one New RPB Contract Amendment

3. Goal Statement:

To reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.

4. Target Population:

While the SFAF strives to serve all, this program's primary focus is to serve San Francisco residents who are PWIDs, homeless, active drug users, formerly incarcerated, and/or struggling with mental health challenges, ensuring that services reach and meet the specific needs of the following subpopulations: males who have sex with males, youth, females, transgender persons, and males who have sex with females. The Homeless Youth Alliance (HYA) offers services for young adults aged 13-29 living on the street in the Haight and female-identified IDUs in the Mission.

5. Modality(s) / Intervention(s):

Year One, B-2: July 1, 2016 – June 30, 2017

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts One UOS = one month of personnel/operating expenses & disposal services	12	N/A
Total Services Delivered	12	N/A
Year Two, B-2a: July 1, 2017 – June 30, 2018

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts One UOS = one month of personnel/operating expenses & disposal services	12	N/A
Total Services Delivered	12	N/A

Year Three, B-2b: July 1, 2018 – June 30, 2019

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts	12	N/A
One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses		
Fotal Services Delivered	12	N/A

Year Three, B-2c: July 1, 2019 - June 30, 2020

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses	12	N/A
Total Services Delivered	12	N/A

Year Three, B-2d: July 1, 2020 - June 30, 2021

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts	12	N/A
One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses		
Total Services Delivered	12	N/A

Year Three, B-2e: July 1, 2021 - June 30, 2022

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts	12	N/A
One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses		
Total Services Delivered	12	N/A

Year Three, B-2f: July 1, 2022 - June 30, 2023

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses	12	N/A
Total Services Delivered	12	N/A

Year Three, B-2g: July 1, 2023 - June 30, 2024

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses	12	N/A
Total Services Delivered	12	N/A

Year Three, B-2h: July 1, 2024 - June 30, 2025

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses	12	N/A
Total Services Delivered	12	N/A

Year Three, B-2i: July 1, 2025 – June 30, 2026

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
HYA Wraparound & Disposal Services a) Personnel and Operating Expenses b) HYA Disposal Efforts	12	N/A
One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses		
Total Services Delivered	12	N/A

6. Methodology

For the **Homeless Youth Alliance Wrap Around** program, the San Francisco AIDS Foundation has developed a Program Plan with the HIV Prevention Section which will reflects program requirements of RFP 3-2016 and community planning priorities. This Plan provides a justification for the UOS in the grid above.

The additional funding for Homeless Youth Alliance will be used for various personnel and operating expenses, and for syringe disposal services.

7. Objectives and Measurements:

N/A

8. Continuous Quality Improvement:

Please see Appendix A-1

1. Identifiers:

Program Name: San Francisco AIDS Foundation: HIV Syringe Access and Disposal Services – 6th Street Harm Reduction Center Program Address: 1035 Market Street, Suite 400 City, State, Zip Code: San Francisco, CA 94103 Telephone/FAX: (415) 487-3000/(415) 487-3094 Website Address: www.sfaf.org

Contractor Address: same as above City, State, Zip Code: Person completing this Narrative: Richard Hill, Director of Government Contracts Telephone: (415) 487-8042 Email Address: rhill@sfaf.org

2. Nature of Document: Check one New RPB Contract Amendment

3. Goal Statement:

To reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.

4. Target Population:

While the SFAF strives to serve all, this program's primary focus is to serve San Francisco residents who are PWIDs, homeless, active drug users, formerly incarcerated, and/or struggling with mental health challenges, ensuring that services reach and meet the specific needs of the following subpopulations: males who have sex with males, youth, females, transgender persons, and males who have sex with females.

5. Modality(s) / Intervention(s):

Year One, B-3: November 1, 2016 – June 30, 2017

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Harm Reduction Center service hours One UOS = one month of Harm Reduction Center services 2,300 clients per month * 8 months = 18,400 NOC**	8	18,400
Total Services Delivered	8	18,400

Year Two, B-3a: July 1, 2017 – June 30, 2018

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access Services		
One UOS = one hour of Syringe Access services		28,628
7/1/17-12/31/17: 30 hrs/wk * 26 wks = 780 UOS	1,724	
1/1/18-6/30/18: 36.3 hrs/wk * 26 weeks = 944 UOS		
~16.6 contacts per hour * 1,724 hours = 28,628 NOC		
Lounge Services (six months only)		7,650
One UOS = one hour of Lounge services	1.075	
1/1/18-6/30/18: ~49 hrs/wk * 26 weeks = 1,275 UOS	1,275	
6 contacts per hour * 1,275 hours = 7,650 NOC		
Total Services Delivered	2,999	36,278

Year Three, B-3b: July 1, 2018 – June 30, 2019

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contact s (NOC)
Syringe Access Services		
One UOS = one hour of Syringe Access services	1 000	31,341
36.3 hrs/wk * 52 wks = 1,888 UOS	1,888	
16.6 contacts per hour * 1,888 hours = 31,341 NOC		
Lounge Services		
One UOS = one hour of Lounge services	1,924	11,475
37 hrs/wk * 52 weeks = 1,924 UOS		
~6 contacts per hour * 1,924 hours = 11,475 NOC		
Total Services Delivered	3,812	42,816

Year Four: B-3c July 1, 2019 - June 30, 2020

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)	
Syringe Access Services			
One UOS = one hour of Syringe Access services	1,888	31,341	
36.3 hrs/wk * 52 wks = 1,888 UOS			
16.6 contacts per hour * 1,888 hours = 31,341 NOC			
Lounge Services			
One UOS = one hour of Lounge services	2 5 5 0	15,300	
49.03 hrs/wk * 52 weeks = 2,550 UOS	2,550		
6 contacts per hour * 2,550 hours = 15,300 NOC			
Total Services Delivered	4,438	46,641	

Year Five: B-3d July 1, 2020 – June 30, 2021

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access Services		
One UOS = one hour of Syringe Access services	1,888	31,341
36.3 hrs/wk * 52 wks = 1,888 UOS	1,000	
16.6 contacts per hour * 1,888 hours = 31,341 NOC		
Lounge Services		
One UOS = one hour of Lounge services	2.550	15,300
49.03 hrs/wk * 52 weeks = 2,550 UOS	2,550	
6 contacts per hour * 2,550 hours = 15,300 NOC		
Total Services Delivered	4,438	46,641

Year Six: B-3e July 1, 2021 – June 30, 2022

Units of Service (UOS) Description	Units of Service (UOS)	
Syringe Access Services		
One UOS = one hour of Syringe Access services	1 000	31,341
36.3 hrs/wk * 52 wks = 1,888 UOS	1,888	
16.6 contacts per hour * 1,888 hours = 31,341 NOC		
Lounge Services		
One UOS = one hour of Lounge services	2.550	15 200
49.03 hrs/wk * 52 weeks = 2,550 UOS	2,550	15,300
6 contacts per hour * 2,550 hours = 15,300 NOC		
Total Services Delivered	4,438	46,641

Year Seven: B-3f July 1, 2022 – June 30, 2023

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)	
Syringe Access Services			
One UOS = one hour of Syringe Access services	1,888	31,341	
36.3 hrs/wk * 52 wks = 1,888 UOS			
16.6 contacts per hour * 1,888 hours = 31,341 NOC			
Lounge Services			
One UOS = one hour of Lounge services	2.550	15,300	
49.03 hrs/wk * 52 weeks = 2,550 UOS	2,550		
6 contacts per hour * 2,550 hours = 15,300 NOC			
Total Services Delivered	4,438	46,641	

Year Eight: B-3g July 1, 2023 - June 30, 2024

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access Services		
One UOS = one hour of Syringe Access services	1,888	31,341
36.3 hrs/wk * 52 wks = 1,888 UOS	1,000	
16.6 contacts per hour * 1,888 hours = 31,341 NOC		
Lounge Services		
One UOS = one hour of Lounge services	2.550	15,300
49.03 hrs/wk * 52 weeks = 2,550 UOS	2,550	
6 contacts per hour * 2,550 hours = 15,300 NOC		
Total Services Delivered	4,438	46,641

Year Nine: B-3h July 1, 2024 – June 30, 2025

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)	
Syringe Access Services			
One UOS = one hour of Syringe Access services	1,888	31,341	
36.3 hrs/wk * 52 wks = 1,888 UOS	1,000		
16.6 contacts per hour * 1,888 hours = 31,341 NOC			
Lounge Services			
One UOS = one hour of Lounge services	2 550	15,300	
49.03 hrs/wk * 52 weeks = 2,550 UOS	2,550		
6 contacts per hour * 2,550 hours = 15,300 NOC			
Total Services Delivered	4,438	46,641	

Year Ten: B-3i July 1, 2025 - June 30, 2026

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)	
Syringe Access Services			
One UOS = one hour of Syringe Access services	1,888	31,341	
36.3 hrs/wk * 52 wks = 1,888 UOS	1,000		
16.6 contacts per hour * 1,888 hours = 31,341 NOC			
Lounge Services			
One UOS = one hour of Lounge services	2.550	15,300	
49.03 hrs/wk * 52 weeks = 2,550 UOS	2,550		
6 contacts per hour * 2,550 hours = 15,300 NOC			
Total Services Delivered	4,438	46,641	

*The Harm Reduction Center serves an estimated 4,000 clients per month. This number has been pro-rated between Appendices A-1 and A-3 based on the percentage of hours (UOS) allocated to each Appendix.

6. Methodology:

The **Harm Reduction Center** located at 117 6th Street in San Francisco's Mid-Market neighborhood is one of SFAF's storefront syringe access services sites. The service delivery continuum at this location is expanded and enhanced to provide a broad range of services to address the health and well-being needs of people who inject drugs (PWIDs).

Services available at the Harm Reduction Center include a new lounge area which provides space for clients to drop in and hang out, with opportunities to access a range of low-threshold engagement activities; engagement in and linkage to HIV and HCV testing and care; peer-based activities and education on topics such as overdose prevention, vein care, harm reduction counseling; crisis intervention; syringe access services, including access to syringes and supplies as well as disposal for used syringes; food; a breakfast club adherence program; and secure lockers for clients to store HIV and HCV medications.

During the contract period, SFAF will make space improvements for a proposed lab and clinical service expansion.

7. Objectives and Measurements:

A. Individualized Objectives

- 1) By the end of each contract term, Syringe Access Collaborative/San Francisco AIDS Foundation will report on the percentage of HIV tests among people who inject drugs.
- 2) By the end of each contract term, Syringe Access Collaborative/San Francisco AIDS Foundation will report on linkage to care rates among newly diagnosed people who inject drugs, as defined by attending first medical appointment within three months of diagnosis.
- 3) By the end of each contract term, Syringe Access Collaborative/San Francisco AIDS Foundation will report a 70% retention rate among HIV-positive people who inject drugs, retention defined as having had a doctor's appointment, prescription refill, and/or lab work per treatment plan within the past six months.

8. Continuous Quality Improvement (CQI):

See Appendix A-1.

9. Required Language:

None required.

Appendix B Calculation of Charges

1. Method of Payment

A. Contractor shall submit monthly invoices in the format attached in Appendix F, by the fifteenth (15th) working day of each month for reimbursement of the actual costs for Services of the immediately preceding month. All costs associated with the Services shall be reported on the invoice each month. All costs incurred under this Agreement shall be due and payable only after Services have been rendered and in no case in advance of such Services.

2. Program Budgets and Final Invoice

A. Program Budgets are listed below and are attached hereto.

Appendix B	Budget Summary
Appendix B-1, B-1a, B-1b, B-1c, B-1d, B-1e, B-1f, B-1g, B-1h, B-1i, B-1j, B-1k, B-1l, B-1m B-1n, B-1o, B-1p, B-1q, B-1r, B-1s, B-1t, B-1u, B-1v	HIV Syringe Access and Disposal Services
Appendix B-2, B-2a, B-2b, B-2c. B-2d. B-2e,	HIV Syringe Access and Disposal
B-2f, B-2g, B-2h, B-2i	Services – Homeless Youth Alliance
Appendix B-3, B-3a, B-3b, B-3c, B-3d, B-3e	HIV Syringe Access and Disposal
B-3f, B-3g, B-3h, B-3i	Services – Harm Reduction Center

B. Contractor understands that, of the maximum dollar obligation listed in section 3.3.1 of this Agreement, **\$2,845,289** is included as a contingency amount and is neither to be used in Program Budgets attached to this Appendix, or available to Contractor without a modification to this Agreement executed in the same manner as this Agreement or a revision to the Program Budgets of Appendix B, which has been approved by Contract Administrator. Contractor further understands that no payment of any portion of this contingency amount will be made unless and until such modification or budget revision has been fully approved and executed in accordance with applicable City and Department of Public Health laws, regulations and policies/procedures and certification as to the availability of funds by Controller. Contractor agrees to fully comply with these laws, regulations, and policies/procedures.

The maximum dollar for each term and funding source shall be as follows:

	Term	Funding Source	Amount
Original Agreement	07/01/16 - 06/30/17	General Fund	\$2,216,799
Original Agreement	07/01/16 - 12/31/16	CDC	\$5,000
Original Agreement	07/01/17 - 06/30/18	General Fund	\$2,216,799
Original Agreement	07/01/17 - 12/31/17	CDC	\$5,000

Internal Contract Revision #1	11/01/16 - 06/30/17	General Fund	\$344,000
Amendment #1	07/01/17 - 12/31/17	CDC	-\$5,000
Amendment #1	01/01/17 - 12/31/17	CDC	\$5,000
Amendment #1	07/01/17 - 06/30/18	General Fund	\$939,420
Amendment #1	01/01/18 - 12/31/18	CDC	\$5,000
Amendment #1	07/01/18 - 06/30/19	General Fund	\$3,328,145
Internal Contract Revision #2	07/01/17 - 06/30/18	General Fund	\$0
Internal Contract Revision #2	07/01/18 - 06/30/19	General Fund	\$0
Amendment #2	01/01/17 - 12/31/17	CDC - Unspent Funds	-\$3,036
Amendment #2	01/01/18 - 12/31/18	CDC – Unspent Funds	-\$5,000
Amendment #2	07/01/19 - 06/30/20	General Fund	\$2,006,497
Amendment #2	07/01/19 - 06/30/20	General Fund	\$211,838
Amendment #2	07/01/19 - 06/30/20	General Fund	\$168,914
Amendment #2	07/01/19 - 06/30/20	General Fund	\$1,000,000
Amendment #2	07/01/20 - 06/30/21	General Fund	\$2,006,497
Amendment #2	07/01/20 - 06/30/21	General Fund	\$211,838
Amendment #2	07/01/20 - 06/30/21	General Fund	\$168,914
Amendment #2	07/01/20 - 06/30/21	General Fund	\$1,000,000
Amendment #2	07/01/21 - 06/30/22	General Fund	\$2,006,497
Amendment #2	07/01/21 - 06/30/22	General Fund	\$211,838
Amendment #2	07/01/21 - 06/30/22	General Fund	\$168,914
Amendment #2	07/01/21 - 06/30/22	General Fund	\$1,000,000
Amendment #2	07/01/22 - 06/30/23	General Fund	\$2,006,497
Amendment #2	07/01/22 - 06/30/23	General Fund	\$211,838
Amendment #2	07/01/22 - 06/30/23	General Fund	\$168,914
Amendment #2	07/01/22 - 06/30/23	General Fund	\$1,000,000
Amendment #2	07/01/23 - 06/30/24	General Fund	\$2,006,497
Amendment #2	07/01/23 - 06/30/24	General Fund	\$211,838
Amendment #2	07/01/23 - 06/30/24	General Fund	\$168,914
Amendment #2	07/01/23 - 06/30/24	General Fund	\$1,000,000
Amendment #2	07/01/24 - 06/30/25	General Fund	\$2,006,497
Amendment #2	07/01/24 - 06/30/25	General Fund	\$211,838
Amendment #2	07/01/24 - 06/30/25	General Fund	\$168,914
Amendment #2	07/01/24 - 06/30/25	General Fund	\$1,000,000
Amendment #2	07/01/25 - 06/30/26	General Fund	\$2,006,497
Amendment #2	07/01/25 - 06/30/26	General Fund	\$211,838
Amendment #2	07/01/25 - 06/30/26	General Fund	\$168,914
Amendment #2	07/01/25 - 06/30/26	General Fund	\$1,000,000
		Total Award	\$32,762,870
	Contingency	(FY19/20 thru FY25/26)	\$2,845,289
	(This ed	quals the total NTE) Total	\$35,608,159

C. Contractor agrees to comply with its Program Budgets of Appendix B in the provision of Services. Changes to the budget that do not increase or reduce the maximum dollar obligation of the City are subject to the provisions of the Department of Public Health Policy/Procedure Regarding Contract Budget Changes. Contractor agrees to comply fully with that policy/procedure.

D. A final closing invoice, clearly marked "FINAL," shall be submitted no later than fortyfive (45) calendar days following the closing date of the Agreement, and shall include only those costs incurred during the referenced period of performance. If costs are not invoiced during this period, all unexpended funding set aside for this Agreement will revert to City.

3. No invoices for Services provided by law firms or attorneys, including, without limitation, as subcontractors of Contractor, will be paid unless the provider received advance written approval from the City Attorney.

CID#	1000002634						Appendix #	В	Page #	4
DPH Section	HPS									
Check one: [] Original [X] AMD [] RPB				Con	tract Term (7/	1/16-6/30/26)		Fiscal Year(s)	16-26
Agency/Organization Name	San Francisc	o AIDS Found	lation					Funding No	tification Date	12/21/2018
Contractor Name (may be same as above)	San Francisc	o AIDS Found	lation							FN#5 & #
Program/Provider Name				HIV Syringe	Access & Dispo	sal Services				TOTALS -
Appendix Number	A-1/B-1	A-1/B-1a	A-1/B-1b	A-2/B-2	A-3/B-3	A-1/B-1c	A-1/B-1d	A-1/B-1e	A-2/B-2a	Page 4
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.16-6.30.17	7.1.16-6.30.17	7.1.16-6.30.17	7.1.16-6.30.17	11.1.16-6.30.17	7.1.17-6.30-18	7.1.17-6.30-18	1.1.17-12.30-17	7.1.17-6.30-18	
EXPENSES	7544	Contraction of the	State of the state		anin Luige	And States	The second second	1	And States of the second	Escar
Salaries	\$ 271,038	\$ -	\$ -	\$ -	\$ 174,282	\$ 464,500	\$ -	\$ -	\$ -	\$ 909,820
Employee Benefits	\$ 67,760	\$ -	\$ -	\$-	\$ 43,569	\$ 116,125	\$ -	\$-	\$ -	\$ 227,454
Total Personnel Expenses	\$ 338,798	\$ -	\$ -	\$ -	\$ 217,851	\$ 580,625	\$ -	\$ -	\$ -	\$ 1,137,274
Operating Expense	\$ 1,355,049	\$ 178,830	\$ 4,545	\$ 142,595	\$ 94,876	\$ 1,155,569	\$ 183,301	\$ 4,545		\$ 3,265,470
Subtotal Direct Costs	\$ 1,693,847	\$ 178,830	\$ 4,545	\$ 142,595	\$ 312,727	\$ 1,736,194	\$ 183,301	\$ 4,545	\$ 146,160	\$ 4,402,74
Indirect Cost Amount	\$ 169,385	\$ 17,883	\$ 455	\$ 14,259	\$ 31,273	\$ 173,619	\$ 18,330	\$ 455	\$ 14,615	\$ 440,274
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	
Total Expenses	\$ 1,863,232	\$ 196,713	\$ 5,000	\$ 156,854	\$ 344,000	\$ 1,909,813	\$ 201,631	\$ 5,000	\$ 160,775	\$ 4,843,018
REVENUES & FUNDING SOURCES	The free large	- Co-Mailan		The set of the set	- Carlo Carlo	2.15.15.1			CONTRACTOR	ANT FREI OL
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF	1,863,232					1,909,813				3,773,045
HPS COUNTY GF Children's Fund		196,713					201,631			398,344
HPS FED CDC - PD90, CFDA #93.940			5,000					5,000		10,000
HPS COUNTY HPS GF				156,854					160,775	317,62
HHS COUNTY GF					344,000		(i			344,000
Unspent Funds								(3,036)		(3,03)
Total DPH Revenues	1,863,232	196,713	5,000	156,854	344,000	1,909,813	201,631	1,964	160,775	4,839,982
Total Revenues (DPH and Non-DPH)	1,863,232	196,713	5,000	156,854	344,000	1,909,813	201,631	1,964	160,775	4,839,98
Payment Method	Cost Reimbursement (CR)	Cost Reimbursemen (CR)	Cost Reimbursement (CR)							
Prepared By		1	(0.9	Phone #		415-487-3055			1 (0.0	The second second

DPH 1: Department of Public	Health Contract Budge	at Summary by Program

	1000002634					Appendix #	B Page #	5
DPH Section								
Check one: [] Original [X] AMD [] RPB			C	ontract Term (7		Fiscal Year(s)	16-26
Agency/Organization Name	and the party of the local division in the local division of the l	service of the local distance is a first of the local distance of				Fui	nding Notification Date	12/21/2018
Contractor Name (may be same as above)	San Francisco	and the second se						FN#5 & #6
Program/Provider Name				& Disposal Sen			TOTALS -	TOTALS -
Appendix Number	A-3/B-3a	A-1/B-1f	A-1/B-1g	A-1/B-1h	A-2/B-2b	A-3/B-3b	Page 5	Pages 4 & 5
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.17-6.30.18	7.1.18-6.30.19	7.1.18-6.30.19	1.1.18 - 12.31.18	7.1.18-6.30.19	7.1.18-6.30.19		
EXPENSES				La tatat a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	et Sky let	The Real Provide State	
Salaries	and the second se	\$ 488,174	\$ -	\$ -	\$ -	\$ 671,050	\$ 1,747,774	\$ 2,657,594
Employee Benefits		\$ 122,044	\$ -	\$ -	\$ -	\$ 167,763		\$ 664,399
Total Personnel Expenses		\$ 610,218	\$-	\$ -	\$ -	\$ 838,813		\$ 3,321,993
Operating Expense		\$ 1,168,581	\$ 187,884	\$ 4,545	\$ 149,814	\$ 70,278		\$ 4,914,520
Subtotal Direct Costs	\$ 803,636	\$ 1,778,799	\$ 187,884	\$ 4,545	\$ 149,814	\$ 909,091	\$ 3,833,769	\$ 8,236,513
Indirect Cost Amount	\$ 80,364	\$ 177,880	\$ 18,788	\$ 455	\$ 14,980	\$ 90,909	\$ 383,376	\$ 823,650
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%		
Total Expenses	\$ 884,000	\$ 1,956,679	\$ 206,672	\$ 5,000	\$ 164,794	\$ 1,000,000	\$ 4,217,145	\$ 9,060,163
REVENUES & FUNDING SOURCES	All and All all all	可是4月生产者126月	a tol or the start				The Control of the State	AND THE REP.
DPH Funding Sources (select from drop-down list)							and the second second	
HPS COUNTY HPS GF		1,956,679					1,956,679	5,729,724
HPS COUNTY GF Children's Fund			206,672				206,672	605,016
HPS FED CDC - PD90, CFDA #93.940				5,000			5,000	15,000
HPS COUNTY HPS GF		1			164,794		164,794	482,423
HHS COUNTY GF	884,000					1,000,000	1,884,000	2,228,000
Unspent Funds				(5,000)			(5,000)	(8,036
Total DPH Revenues	884,000	1,956,679	206,672		164,794	1,000,000	- 4,212,145	9,052,127
Total Revenues (DPH and Non-DPH)	884,000	1,956,679	206,672	0	164,794	1,000,000	- 4,212,145	9,052,127
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)		
Prepared By	Larry Zapatka			Phone #		415-487-3055		

CID#	1000002634						Appendix #	В	Page #	6
DPH Section	HPS									
Check one: [] Original [X] AMD	[]RPB				Co	ntract Term (7/	1/16-6/30/26)		Fiscal Year(s)	16-26
Agency/Organization Name	San Francisco	AIDS Founda	tion					Funding No	otification Date	12/21/2018
Contractor Name (may be same as above)	San Francisco	AIDS Founda	tion							FN#5 & #
Program/Provider Name			HIV S	yringe Access	& Disposal Se	ervices			TOTALS -	TOTALS -
Appendix Number	A-1/B-1i	A-1/B-1]	A-2/B-2c	A-3/B-3c	A-1/B-1k	A-1/B-11	A-2/B-2d	A-3/B-3d	Page 6	Pages 4 - 6
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.19-6.30.20	7.1.19-6.30.20	7.1.19-6.30.20	7.1.19-6.30.20	7.1.20-6.30.21	7.1.20-6.30.21	7.1.20-6.30.21	7.1.20-6.30.21		
EXPENSES		HANNES IN	and the second second	The second second	THE REAL		12 月 月 11月		中海洋的广东宣言	Contraction of
Salaries	\$ 496,916	s -	\$ -	\$ 680,792	\$ 496,916	\$ -	S -	\$ 680,792	\$ 2,355,416	\$ 5,013,010
Employee Benefits	\$ 124,229	\$ -	\$ -	\$ 170,198	\$ 124,229	\$ -	\$ -	\$ 170,198	\$ 588,854	\$ 1,253,253
Total Personnel Expenses	\$ 621,145	\$ -	\$ -	\$ 850,990	\$ 621,145	\$ -	\$ -	\$ 850,990	\$ 2,944,270	\$ 6,266,263
Operating Expense	\$ 1,202,943	\$ 192,580	\$ 153,559	\$ 58,101	\$ 1,202,943	\$ 192,580	\$ 153,559	\$ 58,101	\$ 3,214,366	\$ 8,128,886
Subtotal Direct Costs	\$ 1,824,088	\$ 192,580	\$ 153,559	\$ 909,091	\$ 1,824,088	\$ 192,580	\$ 153,559	\$ 909,091	\$ 6,158,636	\$ 14,395,149
Indirect Cost Amount	\$ 182,409	\$ 19,258	\$ 15,355	\$ 90,909	\$ 182,409	\$ 19,258	\$ 15,355	\$ 90,909	\$ 615,862	\$ 1,439,512
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%		
Total Expenses	\$ 2,006,497	\$ 211,838	\$ 168,914	\$1,000,000	\$ 2,006,497	\$ 211,838	\$ 168,914	\$ 1,000,000	\$ 6,774,498	\$ 15,834,661
REVENUES & FUNDING SOURCES		al stant with	四百萬 未好教育 百	CHARTER CONTRACT	Con Competition	Many Existen		CONTRACTOR	ASIA TO BUS	Caralle State
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF	2,006,497				2,006,497				4,012,994	9,742,718
HPS COUNTY GF Children's Fund		211,838				211,838			423,676	1,028,692
HPS FED CDC - PD90, CFDA #93.940									-	15,000
HPS COUNTY HPS GF			168,914				168,914		337,828	820,25
HHS COUNTY GF				1,000,000				1,000,000	2,000,000	4,228,000
Unspent Funds										(8,036
Total DPH Revenues	2,006,497	211,838	168,914	1,000,000	2,006,497	211,838	168,914	1,000,000	6,774,498	15,826,62
Total Revenues (DPH and Non-DPH)	2,006,497	211,838	168,914	1,000,000	2,006,497	211,838	168,914	1,000,000	6,774,498	15,826,62
Payment Method	Cost Reimbursement (CR)	Cost Relmbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)		
Prepared By	Larry Zapatka			Phone #		415-487-3055				No. Lake Kin

DPH 1: Department of Public Health	Contract Budget Summary	by Program
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CID# ·	1000002634						Appendix #	В	Page #	7
DPH Section	HPS									
Check one: [] Original [X] AMD	[] RPB				Cor	tract Term (7/	1/16-6/30/26)		Fiscal Year(s)	16-26
Agency/Organization Name	San Francisco	AIDS Foundat	tion					Funding No	tification Date	12/21/2018
Contractor Name (may be same as above)	San Francisco	AIDS Founda	tion							FN#5 & #6
Program/Provider Name			HIV S	yringe Access	& Disposal Se	rvices	-		TOTALS -	TOTALS -
Appendix Number	A-1/B-1m	A-1/B-1n	A-2/B-2e	A-3/B-3e	A-1/B-10	A-1/B-1p	A-2/B-2f	t. A-3/B-3f	Page 7	Pages 4 - 7
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.21-6.30.22	7.1.21-6.30.22	7.1.21-6.30.22	7.1.21-6.30.22	7.1.22-6.30.23	7.1.22-6.30.23	7.1.22-6.30.23	7.1.22-6.30.23		
EXPENSES			用物理的现在分		NO. CONTRACTOR OF	Angen Article	2 Martine Contraction	Des De la Participa	Series and the series of	
Salaries	\$ 496,916	\$ -	\$ -	\$ 680,792	\$ 496,916	\$ -	\$ -	\$ 680,792	\$ 2,355,416	\$ 7,368,426
Employee Benefits	\$ 124,229	\$ -	\$ -	\$ 170,198	\$ 124,229	\$ -	\$ -	\$ 170,198	\$ 588,854	\$ 1,842,107
Total Personnel Expenses	\$ 621,145	\$ -	\$ -	\$ 850,990	\$ 621,145	\$ -	\$-	\$ 850,990	\$ 2,944,270	\$ 9,210,533
Operating Expense	\$ 1,202,943	\$ 192,580	\$ 153,559	\$ 58,101	\$ 1,202,943	\$ 192,580	\$ 153,559	\$ 58,101	\$ 3,214,366	\$ 11,343,252
Subtotal Direct Costs	\$ 1,824,088	\$ 192,580	\$ 153,559	\$ 909,091	\$ 1,824,088	\$ 192,580	\$ 153,559	\$ 909,091	\$ 6,158,636	\$ 20,553,785
Indirect Cost Amount	\$ 182,409	\$ 19,258	\$ 15,355	\$ 90,909	\$ 182,409	\$ 19,258	\$ 15,355	\$ 90,909	\$ 615,862	\$ 2,055,374
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%		
Total Expenses	\$ 2,006,497	\$ 211,838	\$ 168,914	\$1,000,000	\$ 2,006,497	\$ 211,838	\$ 168,914	\$ 1,000,000	\$ 6,774,498	\$ 22,609,159
REVENUES & FUNDING SOURCES		The second		and the second				No. of the second	OVER HEAD	
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF	2,006,497				2,006,497				4,012,994	13,755,712
HPS COUNTY GF Children's Fund		211,838				211,838			423,676	1,452,368
HPS FED CDC - PD90, CFDA #93.940									-	15,000
HPS COUNTY HPS GF			168,914				168,914		337,828	1,158,079
HHS COUNTY GF				1,000,000			· · · · · · · · · · · · · · · · · · ·	1,000,000	2,000,000	6,228,000
Unspent Funds									-	(8,036
Total DPH Revenues	2,006,497	211,838	168,914	1,000,000	2,006,497	211,838	168,914	1,000,000	6,774,498	22,601,123
Total Revenues (DPH and Non-DPH)	2,006,497	211,838	168,914	1,000,000	2,006,497	211,838	168,914	1,000,000	6,774,498	22,601,123
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)								
Prepared By	Larry Zapatka			Phone #		415-487-3055				

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CID#	1000002634						Appendix #	В	Page #	8
DPH Section	HPS									
Check one: [] Original [X] AMD	[]RPB				Co	ntract Term (7/	1/16-6/30/26)		Fiscal Year(s)	16-26
Agency/Organization Name	the lot a lot of the l	second						Funding No	tification Date	12/21/2018
Contractor Name (may be same as above)	San Francisco	AIDS Founda	tion							FN#5 & #
Program/Provider Name			HIV S	yringe Access	& Disposal Se	ervices			TOTALS -	TOTALS -
Appendix Number	A-1/B-1q	A-1/B-1r	A-2/B-2g	A-3/B-3g	A-1/B-1s	A-1/B-1t	A-2/B-2h	A-3/B-3h	Page 8	Pages 4 - 8
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.23-6.30.24	7.1.23-6.30.24	7.1.23-6.30.24	7.1.23-6.30.24	7.1.24-6.30.25	7.1.24-6.30.25	7.1.24-6.30.25	7.1.24-6.30.25		
EXPENSES	記念にあるが、「	and participants	Constant of	and international list	1021-1121-112257	國民國 化合金 化合	18:5 The	ALC: NOT THE REAL PROPERTY OF	males e	H. The state
Salaries	\$ 496,916	\$ -	\$ -	\$ 680,792	\$ 496,916	\$ -	\$ -	\$ 680,792	\$ 2,355,416	\$ 9,723,842
Employee Benefits	\$ 124,229	\$ -	\$ -	\$ 170,198	\$ 124,229	\$ -	\$ -	\$ 170,198	\$ 588,854	\$ 2,430,961
Total Personnel Expenses	\$ 621,145	\$ -	\$ -	\$ 850,990	\$ 621,145	\$ -	\$ -	\$ 850,990	\$ 2,944,270	\$ 12,154,803
Operating Expense	\$ 1,202,943	\$ 192,580	\$ 153,559	\$ 58,101	\$ 1,202,943	\$ 192,580	\$ 153,559	\$ 58,101	\$ 3,214,366	\$ 14,557,618
Subtotal Direct Costs	\$ 1,824,088	\$ 192,580	\$ 153,559	\$ 909,091	\$ 1,824,088	\$ 192,580	\$ 153,559	\$ 909,091	\$ 6,158,636	\$ 26,712,421
Indirect Cost Amount	\$ 182,409	\$ 19,258	\$ 15,355	\$ 90,909	\$ 182,409	\$ 19,258	\$ 15,355	\$ 90,909	\$ 615,862	\$ 2,671,236
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%		
Total Expenses	\$ 2,006,497	\$ 211,838	\$ 168,914	\$1,000,000	\$ 2,006,497	\$ 211,838	\$ 168,914	\$ 1,000,000	\$ 6,774,498	\$ 29,383,657
REVENUES & FUNDING SOURCES	ALCO TRACE	The Print - 1221	CONT STATE	1-1-1-	CARD THE COL	and the second second	THE STREET	The second second		Contraction (NST)
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF	2,006,497				2,006,497				4,012,994	17,768,706
HPS COUNTY GF Children's Fund		211,838				211,838			423,676	1,876,044
HPS FED CDC - PD90, CFDA #93.940										15,000
HPS COUNTY HPS GF			168,914				168,914		337,828	1,495,907
HHS COUNTY GF				1,000,000				1,000,000	2,000,000	10,228,000
Unspent Funds					_				-	(8,036
Total DPH Revenues	2,006,497	211,838	168,914	1,000,000	2,006,497	211,838	168,914	1,000,000	6,774,498	29,375,621
Total Revenues (DPH and Non-DPH)	2,006,497	211,838	168,914	1,000,000	2,006,497	211,838	168,914	1,000,000	6,774,498	29,375,62
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)		
Prepared By	Larry Zapatka			Phone #		415-487-3055				

	1000002634					Ap	pendix #	В	Page #	9
DPH Section	and the second se									
Check one: [] Original [X] AMD [] RPB			Contr	act Term	(7/1/16-			Fiscal Year(s)	16-26
Agency/Organization Name						_	FL	Inding No	otification Date	12/21/2018
Contractor Name (may be same as above)	San Francisco	AIDS Founda	tion							FN#5 & #6
Program/Provider Name		HIV	Syringe Acc	ess & Disposa	Service	s			TOTALS -	TOTALS -
Appendix Number	A-1/B-1u	A-1/B-1v	A-2/B-21	A-3/B-3i					Page 9	Page 4 - 9
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.25-6.30.26	7.1.25-6.30.26	7.1.25-6.30.26	7.1.25-6.30.26						
EXPENSES		E Shipili S 18	Section Section	1 Stanton	1 to bot	是行手正的		NY Castan	Part and the second	The Martin State
Salaries	\$ 496,916	\$ -	\$ -	\$ 680,792					\$ 1,177,708	\$ 10,901,550
Employee Benefits	\$ 124,229	\$ -	\$ -	\$ 170,198					\$ 294,427	\$ 2,725,388
Total Personnel Expenses	\$ 621,145	\$ -	\$ -	\$ 850,990	\$ -	\$ -	\$ -	\$ -	\$ 1,472,135	\$ 13,626,938
Operating Expense	\$ 1,202,943	\$ 192,580	\$ 153,559	\$ 58,101					\$ 1,607,183	\$ 16,164,801
Subtotal Direct Costs	\$ 1,824,088	\$ 192,580	\$ 153,559	\$ 909,091	\$ -	\$ -	\$ -	\$ -	\$ 3,079,318	\$ 29,791,739
Indirect Cost Amount	\$ 182,409	\$ 19,258	\$ 15,355	\$ 90,909					\$ 307,931	\$ 2,979,167
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	0.0%	0.0%	0.0%	0.0%		
Total Expenses	\$ 2,006,497	\$ 211,838	\$ 168,914	\$ 1,000,000	\$ -	\$ -	\$ -	\$ -	\$ 3,387,249	\$ 32,770,906
REVENUES & FUNDING SOURCES	States and party in the	Lat Blighten	Park S. 2		Sal Bay	Cal-	and the second s	THE REED	THE LOAD LEARNING	Strates and
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF	2,006,497								2,006,497	19,775,203
HPS COUNTY GF Children's Fund		211,838							211,838	2,087,882
HPS FED CDC - PD90, CFDA #93.940									-	15,000
HPS COUNTY HPS GF			168,914						168,914	1,664,821
HHS COUNTY GF				1,000,000					1,000,000	11,228,000
Unspent Funds										(8,036
Total DPH Revenues	2,006,497	211,838	168,914	1,000,000	-	-	-	-	3,387,249	
Total Revenues (DPH and Non-DPH)	2,006,497	211,838	168,914	1,000,000	-	-	-	-	3,387,249	32,762,870
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)						
Prepared By	Larry Zapatka	1		Phone #	1	415-487-	3055			C. C. C.

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26 Funding Source General Fund

Appendix # Page # Fiscal Year(s) Funding Notification Date

B-1f 1 18-19 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES			1
Personnel Expenses		Syringe Access (Hrs., City- Community Sweeps Ex	wide & -Based	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,709	100%		0%			5,709
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,190	100%		0%			5,190
Data Manager	0.05	4,412	100%		0%			4,412
SAS Director	0.75	36,267	89%	4,483	11%			40,750
Logistics Inventory Mgr	1.00	16,089	25%	48,267	75%			64,356
Logistics Associates	2.00	28,545	25%	85,635	75%			114,180
SSE/Vol Cordinator	0.75	54,495	100%	-	0%			54,495
Health Educator	2.75	156,998			0%			156,998
Comm. Engagement & Kit Packing Assoc	0.65	35,084	100%	-	0%			35,084
		-	0%	-	0%			-
Total FTE & Total Salaries	8.10	348,889	71%	139,285	29%			488,174
Fringe Benefits	25.00%	87,222	71%	34,822	29%			122,044
Total Personnel Expenses		436,111	71%	174,107	29%			610,218
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	Э	Contract Total
		and the second design of the			% 11%	xpenditure	9	The second se
Total Occupancy		Expenditure 85,166 160,385	<mark>%</mark> 89% 30%	Expenditure 10,500 369,728		xpenditure	9	Contract Total 95,666 530,113
Total Occupancy Total Materials and Supplies		85,166	89%	10,500	11%	xpenditure	9	95,666 530,113
Total Occupancy Total Materials and Supplies Total General Operating		85,166 160,385	89% 30%	10,500 369,728	11% 70%	xpenditure	•	95,666
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385 6,354	89% 30% 61%	10,500 369,728	11% 70% 39%	xpenditure	ə	95,666 530,113 10,416
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385 6,354 532,386 784,291	89% 30% 61% 100% 67%	10,500 369,728 4,062 	11% 70% 39% 0% 33%	xpenditure	3	95,666 530,113 10,416 532,386 1,168,581
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	85,166 160,385 6,354 532,386	89% 30% 61% 100%	10,500 369,728 4,062	11% 70% 39% 0%	xpenditure	3	95,666 530,113 10,416 532,386 1,168,581 1,778,799
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses	10.00%	85,166 160,385 6,354 532,386 784,291 1,220,402	89% 30% 61% 100% 67% 69%	10,500 369,728 4,062 	11% 70% 39% 0% 33% 31%	xpenditure	3	95,666 530,113 10,416 532,386 1,168,581
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		85,166 160,385 6,354 532,386 784,291 1,220,402 122,040	89% 30% 61% 100% 67% 69% 69%	10,500 369,728 4,062 	11% 70% 39% 0% 33% 31% 31%	xpenditure	3	95,666 530,113 10,416 532,386 1,168,581 1,778,799 177,880
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	85,166 160,385 6,354 532,386 784,291 1,220,402 122,040 1, 342,442	89% 30% 61% 100% 67% 69% 69%	10,500 369,728 4,062 	11% 70% 39% 0% 33% 31% 31%		3	95,666 530,113 10,416 532,386 1,168,581 1,778,799 177,880 1,956,679

BUDGET JUSTIFICATION

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-1f
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	18-19

1a) SALARIES

Staff Position 1: Programs & Op	erations Directo	r			
with all activities	and that all requir ptation and refiner	red data is reported; wor ment; coordinates currer	that assures monitoring too ks with partner agencies and and emerging health inform surance procedures.	d progra	am staff
Masters in Public Minimum gualifications: equivalent comb			g and public health experien	ce or a	n
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	т	otal
\$114,180.00	0.05	12	1	\$	5,709
evaluation of the	program structure	Responsible for ensuring and provision of profest	the implementation, manag sional oversight to create a -being needs, including HIV	service	delivery
Brief description of job duties: and bisexual mer	n.			neeus	of gay
Brief description of job duties: and bisexual mer Masters degree in	n psychology, soc pacity, especially i	ial sciences, business o	r related discipline; three yea monstrated program manag	ars expe	ereince
Brief description of job duties: and bisexual mer Masters degree in a supervisory car	n psychology, soc pacity, especially i	ial sciences, business o	r related discipline; three yea	ars expe ement	ereince

Staff Position 3: Dir. Gov't Grant	s			
Maintains operati	ional and statistic uirements, produ	al reporting mechanism ces routine and ad hoc	ement and contract related a s in accordance with contrac reporting as needed, and en quality assurance activities.	t and
Bachelor's degree	e and at least two	years demonstrated ex	perience in health services p	
		grant development and	writing; government contract	s manageme
planning, design, Minimum qualifications: and negotiations. Annual Salary:		x Months per Year:	Annualized (if less than 12 months):	s manageme Total

0.05

12

\$140,000.00

Staff Position 4: Data Manager					
summaries to en and public health	nsure foundation p h impact. Respon	rograms are rigorously sible for review, abstrac	on, quality assurance, report evaluated for process and he tion from client records and o meet programmatic and co	ealth outc	
Bachelor's degre Minimum qualifications: years equivalent			ensuring quality for large clie	ent data s	ets or l
	423404-505	N N 200 222	Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):	Tot	al

Staff Position 5: SAS Director				
departmental stra effective partners and training full-ti	ategic goals in alight hips with other H me and temporar	gnment with agency and IV/AIDS and Harm Red ry staff in appropriate ex	exchange sites. Develops a l city objectives. Builds and r uction agencies. Responsible change protocol. Responsib	naintains e for scheduling le for purchasir
Brief description of job duties: waste removal co Three years experience program manage	erience working w ment, supervision	reports for compliance a ith injection and drug us n experience preferred.	e from sites and coordinates and maintain safety protocols sers required. Associates De Must hold HIV test counselo	gree with
Minimum qualifications: be willing to obtain	n certification on	the job.		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$108,666.00	0.75	6	0.5	\$ 40,750

\$

1

7,000

Staff Position 6: Logistics Inver			266.07	
Responsible for coordinates rem	purchasing excha	nge supplies. Organize	orary staff in appropriate exe s removal of biohazard wast e reports for compliance and	e from sites a
Brief description of job duties: protocols.				
homeless popul interviewing and	lations required. A d strong understan n preferred. Exper	ssociates degree prefer ding of harm reduction p ience using a pallet jack	ple who use drugs, highly ma red, experience using motiva practices and principles, expe , hand truck, and carts and p	ational erience doing
winning tech	inques and injury p		Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$64,356.00	1.00	12	1	\$ 64,3
••••,•••••	1100			• • •
Staff Position 7: Logistics Asso	ciates			
		noe sites and supervises	volunteers at the sites. Trai	sports supp
		ars down sites as neede		
Brief description of job duties:				
	king as a voluntee	r or paid staff in a huma	n service organization. Biling	ual in
			od communications skills ne	
Minimum qualifications: be able to lift ma				occoury. ma
			Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$57,090.00	2.00	12	1	\$ 114,1
	2.00			•
Staff Position 8: SSE/Volunteer	Coordinator			
excitatigers with		r aducators lievelons c	urriculum for these trainings	and holne
and manages th	materials, includir		curriculum for these trainings vant to MSM-IDU speed use e sites.	
Brief description of job duties: and manages th High school dipl	materials, includir ne site volunteers a oma or equivalend	ng specific materials rele and supervises exchange	vant to MSM-IDU speed use e sites. s license and excellent drivir	rs. Schedule
Brief description of job duties: and manages th High school dipl of experience w Minimum qualifications:	materials, includir ne site volunteers a oma or equivalend	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than	rs. Schedule
Brief description of job duties: and manages th High school dipl of experience w	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE:	ng specific materials rele and supervises exchange y; valid California driver	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers.	rs. Schedule
Brief description of job duties: and manages th High school dipl of experience w Minimum qualifications:	materials, includir ne site volunteers a oma or equivalenc orking with injectio	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than	ng record. 1 y
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: \$72,660.00	materials, includir ne site volunteers a oma or equivalence orking with injectio x FTE: 0.75	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year:	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months):	ng record. 1 y Total
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: \$72,660.00 Staff Position 9: Health Educator	materials, includir ne site volunteers a oma or equivalence orking with injectio x FTE: 0.75	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1	ng record. 1 y Total \$54,4
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: \$72,660.00 Staff Position 9: Health Educato Responsibilities	materials, includir ne site volunteers a oma or equivalence orking with injectio x FTE: 0.75 or include health edu	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals	Total 5 to HIV/HCV
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: \$72,660.00 Staff Position 9: Health Educate Responsibilities testing and linka overseeing a tea	x FTE: 0.75	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme	Total Total 54,4 to HIV/HCV ent outreach;
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: Staff Position 9: Health Educate Responsibilities testing and linka overseeling a teal	materials, includir ne site volunteers a oma or equivalence orking with injection <u>x FTE:</u> 0.75 Or include health edu age to care; harm r am of street outrea	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo <u>x Months per Year:</u> 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp	Total Total 5 54,4 to HIV/HCV ent outreach; ort.
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: Staff Position 9: Health Educate Responsibilities testing and linka overseeing a tea High school dipl	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE: 0.75 or include health edu oge to care; harm r am of street outrea oma or equivalence	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo <u>x Months per Year:</u> 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers.	Total Total 5 54,4 to HIV/HCV ent outreach; ort.
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: Staff Position 9: Health Educato Responsibilities testing and linka overseeing a tea High school dipl Minimum qualifications:	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE: 0.75 or include health edu ge to care; harm r am of street outrea oma or equivalence orking with injection	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi y; valid California driver' n drug users and with vo	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers. Annualized (if less than	Total Total 5 to HIV/HCV ort. outreach; ort. Ing record. 1 y
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: Staff Position 9: Health Educato Responsibilities testing and linka overseeing a tea Brief description of job duties: High school dipl Minimum qualifications: Annual Salary:	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE: 0.75 or include health edu age to care; harm r am of street outreat oma or equivalence orking with injection x FTE:	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi y; valid California driver n drug users and with vo x Months per Year:	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers.	Total Total 5 to HIV/HCV ent outreach; ort. ing record. 1 y Total
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: Staff Position 9: Health Educato Responsibilities testing and linka overseeing a tea High school dipl Minimum qualifications:	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE: 0.75 or include health edu ge to care; harm r am of street outrea oma or equivalence orking with injection	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi y; valid California driver' n drug users and with vo	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers. Annualized (if less than 12 months):	Total Total 5 to HIV/HCV ort. outreach; ort. Ing record. 1 y
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: Staff Position 9: Health Educato Responsibilities testing and linka overseeing a tea Brief description of job duties: High school dipl Minimum qualifications: Annual Salary:	materials, includir ne site volunteers a orking with injection x FTE: 0.75 0r include health edu age to care; harm r am of street outreat orking with injection x FTE: 2.75	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi y; valid California driver' n drug users and with vo x Months per Year: 12	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers. Annualized (if less than 12 months):	Total Total 5 to HIV/HCV ent outreach; ort. ing record. 1 y Total
Brief description of job duties: and manages th High school diple of experience we Annual Salary: Staff Position 9: Health Educator Responsibilities testing and linka overseeing a tea High school diple Minimum qualifications: Annual Salary: Staff Position 10: Community En	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE: 0.75 or include health edu age to care; harm r am of street outrea oma or equivalence orking with injection x FTE: 2.75 gagement & Kit F	ng specific materials rele and supervises exchange y; valid California driver in drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi y; valid California driver in drug users and with vo x Months per Year: 12 Packing Associate	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers. Annualized (if less than 12 months):	Total Total 54,4 to HIV/HCV ent outreach; ort. ng record. 1 y Total \$ 156,9
Brief description of job duties: and manages th High school dipl of experience we Annual Salary: Annual Salary: \$72,660.00 Staff Position 9: Health Educate Responsibilities testing and linka overseeing a tea High school dipl Minimum qualifications: Annual Salary: Annual Salary: \$57,090.00 Staff Position 10: Community En The Community with people who	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE: 0.75 or include health edu ge to care; harm r am of street outreat oma or equivalence orking with injection x FTE: 2.75 gagement & Kit F Engagement and inject drugs (PWI	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi y; valid California driver n drug users and with vo x Months per Year: 12 Packing Associate Kit Packing Associate is D), organizing harm redu	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 responsible for outreach an uction kit packing events, re-	Total Total 5 54,4 5 to HIV/HCV ent outreach; ort. ag record. 1 y Total 5 156,9 d engageme cruiting and
Brief description of job duties: and manages th High school diple of experience we Annual Salary: Staff Position 9: Health Educator Responsibilities testing and linka overseeing a tea High school diple Minimum qualifications: Annual Salary: Staff Position 10: Community En The Community	materials, includir ne site volunteers a oma or equivalence orking with injection x FTE: 0.75 or include health edu ge to care; harm r am of street outreat oma or equivalence orking with injection x FTE: 2.75 gagement & Kit F Engagement and inject drugs (PWI	ng specific materials rele and supervises exchange y; valid California driver n drug users and with vo x Months per Year: 12 cation (e.g. overdose pr eduction counseling) thr ch volunteers; and provi y; valid California driver n drug users and with vo x Months per Year: 12 Packing Associate Kit Packing Associate is D), organizing harm redu	vant to MSM-IDU speed use e sites. s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 evention; vein care; referrals ough mobile and encampme ding crisis intervention supp s license and excellent drivir olunteers. Annualized (if less than 12 months): 1 responsible for outreach an uction kit packing events, re-	Total Total 5 54,4 5 to HIV/HCV ent outreach; ort. ag record. 1 y Total 5 156,9 d engageme cruiting and

High school diplo Minimum qualifications: volunteers.	ma or equivalenc	y; 1 year of experience	working with injection drug u	sers and with
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$53,976.00	0.65	12	1	\$ 35,08

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	37,345.00
Retirement	\$	9,324.00
Medical	\$	50,428.00
Dental		
Unemployment Insurance	\$	2,539.00
Disability Insurance	\$	19,869.00
Paid Time Off		
Workers comp	\$	2,539.00
	Total Fringe Benefit:	122,044

Fringe Benefit %: 25.00%

	TOTAL SALARIES	& EMPLOYEE FRINGE BENEFITS:	610,218
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2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE*12	77,760
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo*12	2,000
Utilities	Phone, PG&E & trash.	55.620/FTE*12	5,406
Rent office	Additional space for 6th Street.	875/mo*12	10,500
		Total Occupancy:	95,666

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 8.1 x 12mo.	\$51.16	4,973
Volunteer Spt	Snacks, T-shirts, etc - \$166.66/mo.	\$166.66	2,000
Syringes	Syringes \$.15/each x 1,793,333 syringes.	\$0.15	269,000
Bio Buckets	18/19 gallon buckets - 2,175 x \$24.368.	\$24.368	53,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.75	50,000
Alcohol Wipes	268 cases x \$27.985/case.	\$27.985	7,500
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Condoms & Lube	Condoms and lube.	\$833.33/mo	10,000
Sterile Water	492 Cases x \$81.301/case.	\$81.301	40,000
Bagging Supplies	100 bundles x \$7.10/bundle.	\$7.100	710
Misc Exhanges Supplies	Incl, turniguets, ensure, bandaids, etc.	\$1,000/mo	12,000
Group Food	Additional food for increased groups \$718.14/wk x 50 wks.	718.14/wk	35,907
Outreach and Program materials	Additional expense for increase outreach.	\$529.289/wk	27,523
	Total	Materials & Supplies:	530,113

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484
Travel	Vehicle Fuel.	\$62.50/mo	750
Travel	Vehicle Repairs.	\$62.50/mo	750
		Total General Operating:	10,416

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT, etc.	\$99,002yr	99,002
Saint James Infirmary	Operational expenses; staffing, office, IT, etc.	\$103,042/yr	103,042
Homeless youth Alliance	Operational expenses; staffing, office, IT, etc.	\$225,279/yr	225,279
S.F. Drug Users Union	Operational expenses; staffing, office, IT, etc.	\$105,063/yr	105,063
N.		sultants/Subcontractors:	532.386

TOTAL OPERATING EXPENSES: 1,168,581

TOTAL DIRECT COSTS: 1,778,799

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)		Amount
San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	177,880
of total direct costs.		

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 177,880

TOTAL EXPENSES: 1,956,679

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26 Funding Source General Fund

Appendix # B-1i Page # Fiscal Year(s) Funding Notification Date 1

19-20 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MC	DES]
Personnel Expenses		Syringe Acces (Hrs., City- Community Sweeps E	wide & -Based	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
Pgms & Ops Director	0.05	5,651	100%		0%			5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%			5,138
Data Manager	0.05	4,367	100%		0%			4,367
SAS Director	0.75	48,010	89%	5,934	11%			53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%			63,705
Logistics Associates	2.00	28,256	25%	84,770	75%			113,026
SSE/Vol Cordinator	0.75	53,944	100%	-	0%			53,944
Health Educator	2.75	155,411		-	0%			155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	-	0%			34,730
		-	0%	-	0%			-
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%			496,916
Fringe Benefits	25.00%	89,383	72%	34,846	28%			124,229
Total Personnel Expenses		446,916	72%	174,229	28%			621,145
		-						
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure		Contract Total
		Expenditure 85,166	% 89%	Expenditure		xpenditure		Contract Total
Total Occupancy		85,166	89%	10,500	11%	xpenditure		95,666
Total Occupancy Total Materials and Supplies		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure	·	95,666 550,665
Total Occupancy Total Materials and Supplies Total General Operating		85,166 160,385 6,659	89% 29% 61%	10,500	11% 71% 39%	xpenditure		95,666 550,665 10,916
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure		95,666 550,665
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100% 66%	10,500 390,280 4,257 - 405,037	11% 71% 39% 0% 34%	xpenditure		95,666 550,665 10,916 545,696 1,202,943
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	85,166 160,385 6,659 545,696 797,906 1,244,822	89% 29% 61% 100% 66%	10,500 390,280 4,257 - - 405,037 579,266	11% 71% 39% 0% 34% 32%	xpenditure		95,666 550,665 10,916 545,696 1,202,943 1,824,088
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses	10.00%	85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100% 66%	10,500 390,280 4,257 - 405,037	11% 71% 39% 0% 34%	xpenditure		95,666 550,665 10,916 545,696 1,202,943
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses		85,166 160,385 6,659 545,696 797,906 1,244,822 124,482	89% 29% 61% 100% 66% 68%	10,500 390,280 4,257 - 405,037 579,266 57,927	11% 71% 39% 0% 34% 32% 32%	xpenditure		95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	85,166 160,385 6,659 545,696 797,906 1,244,822 124,482 1,369,304	89% 29% 61% 100% 66% 68%	10,500 390,280 4,257 405,037 579,266 57,927 637,193	11% 71% 39% 0% 34% 32% 32%			95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409 2,006,497

BUDGET JUSTIFICATION

Contractor Name San Francisco AIDS Foundation Program Name: HIV Syringe Access & Disposal Services Appendix #: B-1i Fiscal Year: 19-20

1a) SALARIES

Staff Position 1: F						
C	Oversees creat	ion and maintenan	ce of an evaluation plan	that assures monitoring too	ls ar	e integrate
v	with all activities	s and that all requir	red data is reported; wor	ks with partner agencies an	d pro	gram staff
				t and emerging health infor	matio	on collectio
Brief description of job duties: c						
				g and public health experier	ice o	ran
Minimum qualifications: e	equivalent com	bination of education	on and experience.			
		10000	Q 25	Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):		Total
	\$113,025.00	0.05	12	1	\$	5,65
Staff Position 2: D	Director, Beha	vioral Health Ser	vices			
E	Director, Behav	ioral Health Svc - F	Responsible for ensuring	the implementation, manage	eme	ent and
				sional oversight to create a		
			e current health and well	-being needs, including HIV	nee	ds of gay
Brief description of job duties: a	and bisexual me	en.				2254.137
			cial sciences, business o	r related discipline; three ye	ars e	xpereince
a	supervisory ca	apacity, especially	in HIV prevention and de	emonstrated program manage	gem	ent and
Minimum qualifications: p	orogram develo	pment experience.				
				Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):		Total
5	\$140,000.00	0.05	12	1	\$	7,00
Staff Position 3: D	Dir Gov't Gran	nts				
	the second s		allela for all data monore	mont and contrast values d	att. I	11
				ement and contract related a		
N	Agintains opera	tional and statistica	al reporting mechanisms	in accordance with contrac	t and	1
			•	eporting as needed, and en		
Brief description of job duties: in	tearity of the e	envice detabase b	overseeing database g	uality assurance activities	Suic	5 010
bilei description of job duties.	heghly of the s	on and at least two	voors domonstrated ev	perience in health services	aroau	200
				vriting; government contract		
Minimum qualifications: a			frant development and w	ming, government contract	5 1116	nagemen
minimetri quemesterier a				Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):		Total
	\$102,750.00	0.05	12	1	\$	5,13
	0102,100.00	0.00				0,10
01 10 - 11 - 4 - 0						
Staff Position 4: D						
				n, quality assurance, reporti		
				valuated for process and he		
				ion from client records and o		
		ted from clients as	well as data analysis to	meet programmatic and co	ntrac	:t
Brief description of job duties: re	equirments.					
B	achelor's dear			ensuring quality for large clie		
	adricioi o acgit		erience managing and e		nt da	ata sets or
	ears equivalent			insuming quality for large one	nt da	ata sets or
Minimum qualifications: ye	ears equivalent				nt da	ata sets or
Minimum qualifications: ye	ears equivalent	t experience requir	ed.	Annualized (if less than	nt da	
		t experience requir x FTE:	ed. x Months per Year:	Annualized (if less than 12 months):		Total
Minimum qualifications: ye	ears equivalent \$87,338.00	t experience requir	ed.	Annualized (if less than	nt da \$	
Minimum qualifications: ye		t experience requir x FTE:	ed. x Months per Year:	Annualized (if less than 12 months):		Total
Minimum qualifications: ye Annual Salary:	\$87,338.00	t experience requir x FTE:	ed. x Months per Year:	Annualized (if less than 12 months):		Total
Minimum qualifications: ye Annual Salary: Staff Position 5: S	\$87,338.00	t experience requir x FTE: 0.05	ed. x Months per Year: 12	Annualized (if less than 12 months): 1	\$	Total 4,36
Minimum qualifications: ye Annual Salary: Staff Position 5: S	\$87,338.00 AS Director AS Director - P	x FTE: 0.05	ed. x Months per Year: 12 and management of 11 e	Annualized (if less than 12 months): 1 exchange sites. Develops an	\$ nnua	Total 4,36
Minimum qualifications: ye Annual Salary: Staff Position 5: S	\$87,338.00 AS Director AS Director - F epartmental str	x FTE: 0.05 Provides oversight a rategic goals in alig	ed. x Months per Year: 12 and management of 11 e inment with agency and	Annualized (if less than 12 months): 1 exchange sites. Develops ar city objectives. Builds and n	\$ nnua	Total 4,36
Minimum qualifications: ye Annual Salary: Staff Position 5: S S de ef	\$87,338.00 AS Director AS Director - F epartmental str ffective partner	x FTE: 0.05 Provides oversight a rategic goals in alig ships with other HI	ed. x Months per Year: 12 and management of 11 e Inment with agency and V/AIDS and Harm Redu	Annualized (if less than 12 months): 1 exchange sites. Develops ar city objectives. Builds and n ction agencies. Responsible	\$ nnua naint	Total 4,30
Minimum qualifications: ye Annual Salary: Staff Position 5: S S de ef an	\$87,338.00 AS Director AS Director - F epartmental str ffective partner nd training full-	x FTE: 0.05 Provides oversight a rategic goals in alig ships with other HI time and temporar	ed. x Months per Year: 12 and management of 11 e inment with agency and V/AIDS and Harm Redu y staff in appropriate exc	Annualized (if less than 12 months): 1 exchange sites. Develops ar city objectives. Builds and n ction agencies. Responsible hange protocol. Responsible	\$ nnua naint e for e for	Total 4,30
Minimum qualifications: ye Annual Salary: Staff Position 5: S Staff Position 5: S de ef an er	\$87,338.00 AS Director AS Director - F epartmental str ffective partner nd training full- xchange suppli	x FTE: 0.05 Provides oversight a rategic goals in alig ships with other Hi time and temporar	ed. x Months per Year: 12 and management of 11 e inment with agency and V/AIDS and Harm Redu y staff in appropriate exc noval of biohazard waste	Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n ction agencies. Responsible hange protocol. Responsible from sites and coordinates	\$ nnua naint e for rem	Total 4,36 I ains schedulin purchasi
Minimum qualifications: ye Annual Salary: Staff Position 5: S S de et an Brief description of job duties: w	\$87,338.00 AS Director AS Director - F epartmental str ffective partner nd training full- xchange suppli aste removal c	x FTE: 0.05 Provides oversight a rategic goals in alig ships with other Hi time and temporar ies. Organizes rem company, prepare r	ed. x Months per Year: 12 and management of 11 e inment with agency and V/AIDS and Harm Redu y staff in appropriate exc noval of biohazard waste eports for compliance ar	Annualized (if less than 12 months): 1 exchange sites. Develops ar city objectives. Builds and n citon agencies. Responsible hange protocol. Responsible from sites and coordinates and maintain safety protocols	\$ nnua naint e for rem	Total 4,30 I ains schedulin purchasi oval with
Minimum qualifications: ye Annual Salary: Staff Position 5: S Staff Position 5: S de ef an er Brief description of job duties: w	\$87,338.00 AS Director AS Director - F epartmental str ffective partner nd training full- xchange suppli vaste removal c hree years exp	x FTE: 0.05 Provides oversight ategic goals in alig ships with other Hi time and temporar tes. Organizes rem company, prepare r erience working wi	ed. x Months per Year: 12 and management of 11 e inment with agency and V/AIDS and Harm Redu y staff in appropriate exc noval of biohazard waste reports for compliance ar th injection and drug use	Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n ction agencies. Responsible hange protocol. Responsible from sites and coordinates and maintain safety protocols ers required. Associates Deg	\$ nnua naint e for e for rem	Total 4,30 I ains schedulin purchasii oval with with
Minimum qualifications: ye Annual Salary: Staff Position 5: S S de ef Brief description of job duties: w T	\$87,338.00 AS Director AS Director - F epartmental str ffective partner nd training full- ixchange suppli aste removal c hree years exp rogram manag	x FTE: 0.05 Provides oversight a rategic goals in alig ships with other HI time and temporar ies. Organizes rem company, prepare re erience working wi ement, supervision	ed. x Months per Year: 12 and management of 11 e inment with agency and V/AIDS and Harm Redu y staff in appropriate exc noval of biohazard waste eports for compliance ar th injection and drug use experience preferred. M	Annualized (if less than 12 months): 1 exchange sites. Develops ar city objectives. Builds and n citon agencies. Responsible hange protocol. Responsible from sites and coordinates and maintain safety protocols	\$ nnua naint e for e for rem	Total 4,36 I ains schedulin purchasi oval with with
Minimum qualifications: ye Annual Salary: Staff Position 5: S S de ef an Brief description of job duties: w	\$87,338.00 AS Director AS Director - F epartmental str ffective partner nd training full- ixchange suppli aste removal c hree years exp rogram manag	x FTE: 0.05 Provides oversight a rategic goals in alig ships with other HI time and temporar ies. Organizes rem company, prepare re erience working wi ement, supervision	ed. x Months per Year: 12 and management of 11 e inment with agency and V/AIDS and Harm Redu y staff in appropriate exc noval of biohazard waste eports for compliance ar th injection and drug use experience preferred. M	Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n ction agencies. Responsible hange protocol. Responsible from sites and coordinates and maintain safety protocols ers required. Associates Deg fust hold HIV test counselor	\$ nnua naint e for e for rem	Total 4,36 I ains schedulin purchasi oval with with
Minimum qualifications: ye Annual Salary: Staff Position 5: S S de ef Brief description of job duties: w T T	\$87,338.00 AS Director AS Director - F epartmental str ffective partner nd training full- ixchange suppli aste removal c hree years exp rogram manag	x FTE: 0.05 Provides oversight a rategic goals in alig ships with other HI time and temporar ies. Organizes rem company, prepare re erience working wi ement, supervision	ed. x Months per Year: 12 and management of 11 e inment with agency and V/AIDS and Harm Redu y staff in appropriate exc noval of biohazard waste eports for compliance ar th injection and drug use experience preferred. M	Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n ction agencies. Responsible hange protocol. Responsible from sites and coordinates and maintain safety protocols ers required. Associates Deg	\$ nnua naint e for e for rem	Total 4,30 I ains schedulin purchasi oval with with

Annual Salary:

Total

\$

53,944

12 months):

1

0.75

x FTE:

\$71,925.00

x Months per Year:

12

Staff Position 6: Logistics Inver	ntory Mrg			
Responsible for	purchasing excha	inge supplies. Organize	porary staff in appropriate ex s removal of biohazard wast re reports for compliance and	e from sites and
homeless popul interviewing and	ations required. A strong understan preferred. Exper	Associates degree prefer ding of harm reduction pr rience using a pallet jack	ple who use drugs, highly ma red, experience using motiva practices and principles, expo s, hand truck, and carts and t	ational erience doing
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Care and the
				Total

Staff Position 7: Logistics Assoc					
•		ars down sites as neede	s volunteers at the sites. Tra d.	nspo	nts supplies
	desired. Ability to	follow directions and go	n service organization. Biling od communications skills ne		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$56,513.00	2.00	12	1	\$	113,026

Staff Position 8: SSE/Volu	nteer Coordinator			
exchangers develop tra	s willing to become pee ining materials, includir	r educators. Develops of	raining, and supervising seco curriculum for these trainings evant to MSM-IDU speed use e sites.	and helps
	l diploma or equivalend ce working with injectio		's license and excellent drivi	ng record. 1 yea
Minimum qualifications:	ce working with injectio	in drug users and with v	olumeers.	
Minimum qualifications:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 9: Health Educate	or				
testing and linka	ige to care; harm r	eduction counseling) the	revention; vein care; referral rough mobile and encampmo viding crisis intervention supp	ent o	
			's license and excellent drivi	ng re	cord. 1 ye
Minimum qualifications: of experience w	orking with injectio	n drug users and with v	olunteers.		
Minimum qualifications: of experience w Annual Salary:	x FTE:	n drug users and with v x Months per Year:	Annualized (if less than 12 months):		Total

with people who i	Engagement and inject drugs (PWI	Kit Packing Associate is D), organizing harm red	s responsible for outreach an uction kit packing events, re	cruiting an	
Brief description of job duties: coordinating SAS	participant volun	teers (PWID) and other	volunteers to assist with kit	packing.	
Minimum qualifications: volunteers.	ina or equivalence	y, i year or experience	working with injection drug u	3613 allu v	nut
		y, i year or experience	Annualized (if less than		
	x FTE:	x Months per Year:		Tota	200

Total FTE:

8.10

Total Salaries: \$ 496,916

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental		
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off		
Workers comp	\$	2,584.00
	Total Fringe Benefit:	124,229

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 621,145

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost	
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE	77,760	
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo	2,000	
Utilities	Phone, PG&E & trash.	55.618/FTE	5,406	
Rent office	Additional space for 6th Street.	875/mo	10,500	
		Total Occupancy:	95,666	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost	
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 8.1 x 12mo.	\$51.16	4,973	
Volunteer Spt	eer Spt Snacks, T-shirts, etc - \$333.34/mo.		4,000	
Syringes	Syringes \$.15/each x 2,286,666 syringes.	\$0.15	343,000	
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000	
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.7500	50,000	
Alcohol Wipes	257 cases x \$38.91/case.	\$38.91	10,000	
Cotton balls and pellets	1.040bags x \$16.827bag.	\$16.827	17,500	
Sterile Water	430 Cases x \$81.396/case.	\$81.396	35,000	
Bagging Supplies	40 bundles x \$7.125/bundle.	\$7.125	285	
Group Food	Additional food for increased groups \$600.00/wk x 50 wks.	600.00/wk	30,000	
Outreach and Program materials	Additional expense for increase outreach \$118.14 x 50 wk.	\$118.14	5,907	
	Total	Materials & Supplies	550,665	

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484
Travel	Vehicle Fuel.	\$83.33/mo	1,000
Travel	Vehicle Repairs.	\$83.33/mo	1,000
		Total General Operating:	10,916

Consultants/Subcontractors:

sultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT, etc.	\$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT, etc.	\$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT, etc.	\$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT, etc.	\$107,690/yr	107,690
	Total Cons	sultants/Subcontractors:	545,696

TOTAL OPERATING EXPENSES: 1,202,943

TOTAL DIRECT COSTS: 1,824,088

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)		Amount
San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	
of total direct costs.		182,409

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 182,409

TOTAL EXPENSES: 2,006,497

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26 Funding Source General Fund

Appendix #	B-1j
Page #	1
Fiscal Year(s)	19-20
Funding Notification Date	12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

		S	ERVICE M	ODES			
Personnel Expenses	Syringe Access Coordinatior Purchas	& Bulk					Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	-	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	- 1	0%	147,580
Total General Operating	12,000	100%		0%	-	0%	12,000
Total Operating Expenses	192,580	100%	-	0%	-	0%	192,580
Total Direct Expenses	192,580	100%	-	0%	-	0%	192,580
Indirect Expenses 10.00%	19,258	100%		0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%		0%	211,838
Units of Service (UOS) per Service Mode	12		- 1		-	20.34	12
Cost Per Unit of Service by Service Mode	17,653.17	and the		- Sala S	- 1		
Unduplicated Clients (UDC) per Service Mode	N/A			EU ST			2

BUDGET JUSTIFICATION

Contractor Name	San Fancisco AIDS Foundation	Appendix #:	B-1j
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	19-20

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Rent for 6th street location, partial allocation.	25,000	25,000
Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$250/mo	3,000
Utilities	Phone, water, PG&E, allocated for 6th street.	416.67/mo	5,000
		Total Occupancy:	33,000

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	366,666 syringes @ \$.15 each.	\$0.15	55,000
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000
Sterile Water	185 Cases x \$81.081/case.	\$81.081	15,000
Misc Exchange supplies	Turniquests, bandaids, ensure.	\$215/mo	2,580
Condons & Lube	16,666 Lube packets @ \$.75 each.	\$0.750	12,500
Group food/snacks	\$192.307/week for location snack/group food x 52 weeks.	\$192.307	10,000
Incentives	1250 incentives @ \$10 each.	\$10.00	12,500
	Total	Materials & Supplies:	147,580

General Operating:

Brief Description	Rate	Cost
Auto fuel, repairs, maintenance for delivery		
vehicles.	83.33/mo	1,000
Allocated amount of liability/umbrella insurance.	83.33/mo	1,000
Prorated janitorial services for 6th street location.	\$833.33/mo	10,000
Tot	al General Operating:	12,000
	Auto fuel, repairs, maintenance for delivery vehicles. Allocated amount of liability/umbrella insurance. Prorated janitorial services for 6th street location.	Auto fuel, repairs, maintenance for delivery vehicles. 83.33/mo Allocated amount of liability/umbrella insurance. 83.33/mo Prorated janitorial services for 6th street 83.33/mo

TOTAL OPERATING EXPENSES: 192,580

TOTAL DIRECT COSTS: 192,580

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. T	his contract seeks reimbursement at a rate of 10%	
of total direct costs.		19,258

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26 Funding Source General Fund

Appendix # Page # Fiscal Year(s) B-1k Funding Notification Date

1 20-21 12/21/2018

				SERVICE MO	DES			1
Personnel Expenses		Syringe Access (Hrs., City- Community Sweeps Et	wide & -Based	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,651	100%		0%			5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%			5,138
Data Manager	0.05	4,367	100%		0%			4,367
SAS Director	0.75	48,010	89%	5,934	11%			53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%		í. – – i	63,705
Logistics Associates	2.00	28,256	25%	84,770	75%		6	113,026
SSE/Vol Cordinator	0.75	53,944	100%		0%			53,944
Health Educator	2.75	155,411		-	0%			155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	-	0%			34,730
		-	0%	-	0%			-
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%			496,916
Fringe Benefits	25.00%	89,383	72%	34,846	28%			124,229
Total Personnel Expenses		446,916	72%	174,229	28%			621,145
Total Personnel Expenses						xpenditure	9	
Total Personnel Expenses		Expenditure	%	Expenditure	%	xpenditure	e	Contract Total
Total Personnel Expenses Operating Expenses Total Occupancy		Expenditure 85,166	% 89%	Expenditure 10,500	% 11%	xpenditure	9	Contract Total 95,666
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies		Expenditure 85,166 160,385	% 89% 29%	Expenditure 10,500 390,280	% 11% 71%	xpenditure	9	Contract Total 95,666 550,665
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating		Expenditure 85,166 160,385 6,659	% 89% 29% 61%	Expenditure 10,500	% 11% 71% 39%	xpenditure	9	Contract Total 95,666 550,665 10,916
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies		Expenditure 85,166 160,385	% 89% 29%	Expenditure 10,500 390,280	% 11% 71%	xpenditure	9	Contract Total 95,666 550,665
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		Expenditure 85,166 160,385 6,659 545,696 797,906	% 89% 29% 61% 100% 66%	Expenditure 10,500 390,280 4,257 - 405,037	% 11% 71% 39% 0% 34%	xpenditure	9	Contract Total 95,666 550,665 10,916 545,696 1,202,943
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	Expenditure 85,166 160,385 6,659 545,696 797,906	% 89% 29% 61% 100%	Expenditure 10,500 390,280 4,257 - 405,037 579,266	% 11% 71% 39% 0%		9	Contract Total 95,666 550,665 10,916 545,696 1,202,943 1,824,088
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:	10.00%	Expenditure 85,166 160,385 6,659 545,696 797,906	% 89% 29% 61% 100% 66%	Expenditure 10,500 390,280 4,257 - 405,037	% 11% 71% 39% 0% 34% 32%		9	Contract Total 95,666 550,665 10,916 545,696 1,202,943
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses		Expenditure 85,166 160,385 6,659 545,696 797,906 1,244,822 124,482	% 89% 29% 61% 100% 66% 68%	Expenditure 10,500 390,280 4,257 - 405,037 579,266 57,927	% 11% 71% 39% 0% 34% 32% 32%		9	Contract Total 95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409
Total Personnel Expenses Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	Expenditure 85,166 160,385 6,659 545,696 797,906 1,244,822 124,482 1,369,304	% 89% 29% 61% 100% 66% 68%	Expenditure 10,500 390,280 4,257 - 405,037 579,266 57,927 637,193	% 11% 71% 39% 0% 34% 32% 32%		9	Contract Total 95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409 2,006,497

BUDGET JUSTIFICATION

Contractor Name	San Francisco AIDS Foundation	Appendix #:
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:

1a) SALARIES

Staff Position 1: Progr	rams & Op	erations Directo	or		
Overs	sees creatio	n and maintenar	ice of an evaluation plai	n that assures monitoring to	ols are integra
				rks with partner agencies a	
				nt and emerging health info	
Brief description of job duties: coordi					
and the second se				ng and public health experie	nce or an
Minimum qualifications: equiva				3 1 1 1 1 1 1 1 1	
				Annualized (if less than	
Annual Salary:	-	x FTE:	x Months per Year:	12 months):	Total
	3,025.00	0.05	12	1	\$ 5,0
			0.00		1.
Staff Position 2: Direct	for Bohavi	oral Health Sor	vices		
				g the implementation, mana	comont and
				ssional oversight to create a	
			e current nealth and we	Il-being needs, including HIV	/ needs of ga
Brief description of job duties: and bi	sexual men		lel estenese husbers	a solute d dissistions the	
				or related discipline; three ye	
				emonstrated program mana	igement and
Minimum qualifications: progra	im developr	nent experience.		Annualized (if less these	1
				Annualized (if less than	
Annual Salary:		x FTE:	x Months per Year:	12 months):	Total
\$140	,000.00	0.05	12	1	\$ 7,0
Staff Position 3: Dir. G	ov't Grants				
departu Brief description of job duties: integrit Bachel	mental requ ty of the ser lor's degree	onal and statistica irements, productive database by and at least two	al reporting mechanism ces routine and ad hoc overseeing database of years demonstrated ex	perience in health services	t and sures the program
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12

\$71,925.00

53,944

\$

1

B-1k 20-21

	entory Mrg			
Responsible f	or scheduling and tr	aining full-time and temp	oorary staff in appropriate ex	change protoc
			s removal of biohazard wast	
	emoval with waste re	emoval company, prepa	e reports for compliance and	d maintain saf
Brief description of job duties: protocols.				
Minimum one	to three years' expe	rience working with peo	ple who use drugs, highly m	arginalized, or
			red, experience using motiva	
			practices and principles, exp	
			, hand truck, and carts and	understanding
Minimum qualifications: safe lifting tec	hniques and injury p	revention.	Appublized (if less than	
A	ETE.		Annualized (if less than	T.4.1
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$63,705.00	1.00	12	1	\$ 63,7
Staff Position 7: Logistics Ass	aciator			
A STATE OF A		nno citos and sunonviso	s volunteers at the sites. Tra	nenorte eunoli
		ars down sites as neede		isports suppli
Brief description of job duties:				
Experience w	orking as a voluntee	r or paid staff in a huma	n service organization. Biling	ual in
			od communications skills ne	
Minimum qualifications: be able to lift				,
			Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
Annual Salary: \$56,513.00		x Months per Year: 12	12 months): 1	
\$56,513.00	2.00			
\$56,513.00 Staff Position 8: SSE/Volunte	er Coordinator	12	1	\$ 113,0
\$56,513.00 Staff Position 8: SSE/Volunte Secondary Ex	er Coordinator change coord - Resp	12 ponsible for recruiting, tr	1 aining, and supervising seco	\$ 113,02 ndary
\$56,513.00 Staff Position 8: SSE/Volunte Secondary Ex exchangers w	er Coordinator change coord - Resp illing to become pee	12 ponsible for recruiting, tr r educators. Develops of	1 aining, and supervising seco curriculum for these trainings	\$ 113,0 ndary and helps
\$56,513.00 Staff Position 8: SSE/Volunte Secondary Ex exchangers w develop trainin	er Coordinator change coord - Resp illing to become pee ng materials, includir	12 ponsible for recruiting, tr r educators. Develops on ng specific materials rele	1 aining, and supervising seco curriculum for these trainings want to MSM-IDU speed use	\$ 113,0 ndary and helps
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\$56,513.00 Staff Position 8: SSE/Volunte Secondary Ex exchangers w develop trainin and manages High school di	er Coordinator change coord - Rest illing to become pee ng materials, includir the site volunteers a iploma or equivalence	12 ponsible for recruiting, tr r educators. Develops o ng specific materials rele and supervises exchang cy; valid California driver	1 aining, and supervising seco curriculum for these trainings evant to MSM-IDU speed use e sites. 's license and excellent driving	\$ 113,02 ndary and helps rrs. Schedules
\$56,513.00 Staff Position 8: SSE/Volunte Secondary Ex exchangers w develop trainin and manages High school di of experience	er Coordinator change coord - Rest illing to become pee ng materials, includir the site volunteers a iploma or equivalence	12 ponsible for recruiting, tr r educators. Develops o ng specific materials rele and supervises exchang	1 aining, and supervising seco curriculum for these trainings evant to MSM-IDU speed use e sites. 's license and excellent driving	\$ 113,02 ndary and helps rrs. Schedules
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\$56,513.00 Staff Position 8: SSE/Volunte Secondary Ex exchangers w develop trainir and manages High school di of experience Minimum qualifications:	2.00 er Coordinator change coord - Resp illing to become pee ng materials, includir the site volunteers a ploma or equivalence working with injectio	12 ponsible for recruiting, tr r educators. Develops on ng specific materials rele and supervises exchang sy; valid California driver n drug users and with v x Months per Year:	1 aining, and supervising seco curriculum for these trainings ivant to MSM-IDU speed use e sites. 's license and excellent drivin plunteers. Annualized (if less than 12 months):	\$ 113,02 ndary and helps rrs. Schedules ng record. 1 ye Total
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\$56,513.00 Staff Position 8: SSE/Volunte Secondary Ex exchangers w develop trainir and manages High school di of experience Minimum qualifications:	2.00 er Coordinator change coord - Resp illing to become pee ng materials, includir the site volunteers a iploma or equivalence working with injectio x FTE: 0 0.75	12 ponsible for recruiting, tr r educators. Develops on ng specific materials rele and supervises exchang sy; valid California driver n drug users and with v x Months per Year:	1 aining, and supervising seco curriculum for these trainings ivant to MSM-IDU speed use e sites. 's license and excellent drivin plunteers. Annualized (if less than 12 months):	\$ 113,0 ndary and helps rs. Schedules ng record. 1 ye Total

	•		rough mobile and encampm viding crisis intervention sup		utreach;
		ency; valid California driven tion drug users and with v	's license and excellent driv olunteers.	ing re	cord. 1 year
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$56,5	513.00 2.7	5 12	1	\$	155,411

	nject drugs (PWI	D), organizing harm red	s responsible for outreach ar uction kit packing events, re	cruit	ing and
High school diplo			working with injection drug u		
Minimum qualifications: volunteers.					
Will Million Gualineadons.			and the second sec		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
	x FTE: 0.65	x Months per Year: 12		\$	Total 34,73

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental		
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off		
Workers comp	\$	2,584.00
	Total Fringe Benefit:	124,229

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 621,145

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE	77,760
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo	2,000
Utilities	Phone, PG&E & trash.	55.618/FTE	5,406
Rent office	Additional space for 6th Street.	875/mo	10,500
		Total Occupancy:	95,666

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 8.1 x 12mo.	\$51.16	4,973
Volunteer Spt	Snacks, T-shirts, etc - \$333.34/mo.	\$333.34	4,000
Syringes	Syringes \$.15/each x 2,286,666 syringes.	\$0.15	343,000
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.7500	50,000
Alcohol Wipes	257 cases x \$38.91/case.	\$38.91	10,000
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Sterile Water	430 Cases x \$81.396/case.	\$81.396	35,000
Bagging Supplies	40 bundles x \$7.125/bundle.	\$7.125	285
Group Food	Additional food for increased groups \$600.00/wk x 50 wks.	600.00/wk	30,000
Outreach and Program materials	Additional expense for increase outreach \$118.14 x 50 wk.	\$118.14	5,907
	Total I	Materials & Supplies:	550,665

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484
Travel	Vehicle Fuel.	\$83.33/mo	1,000
Travel	Vehicle Repairs.	\$83.33/mo	1,000
		Total General Operating:	10,916

Consultants/Subcontractors:

sultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT, etc	\$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$107,690/yr	107,690
	Total Co	nsultants/Subcontractors:	545,696

TOTAL DIRECT COSTS: 1,824,088

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	182,409

Indirect Rate: 10%
TOTAL INDIRECT COSTS: 182,409

TOTAL EXPENSES: 2,006,497

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26 Funding Source General Fund Appendix # B-11 Page # 1 Fiscal Year(s) 20-21 Funding Notification Date 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

		S	ERVICE M	ODES			7
Personnel Expenses	Syringe Access Coordination Purchas	& Bulk					Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	-	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	-	0%	147,580
Total General Operating	12,000	100%	-	0%	-	0%	12,000
Total Operating Expenses	192,580	100%	-	0%	-	0%	192,580
Total Direct Expenses	192,580	100%	-	0%		0%	192,580
Indirect Expenses 10.00%	19,258	100%		0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%	-	0%	211,838
Units of Service (UOS) per Service Mode	12		- [S VAL	- 0		12
Cost Per Unit of Service by Service Mode	17,653.17		-		-	1	ALL CASES OF ALL OF
Unduplicated Clients (UDC) per Service Mode		A STATE OF		1010010		AL STATI	P.

BUDGET JUSTIFICATION

Contractor Name	San Fancisco AIDS Foundation	Appendix #:	B-11
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	20-21

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Rent for 6th street location, partial allocation.	25,000	25,000
Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$250/mo	3,000
Utilities	Phone, water, PG&E, allocated for 6th street.	416.67/mo	5,000
		Total Occupancy	33,000
		Total Occup	pancy:

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	366,666 syringes @ \$.15 each.	\$0.15	55,000
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000
Sterile Water	185 Cases x \$81.081/case.	\$81.081	15,000
Misc Exchange supplies	Turniquests, bandaids, ensure.	\$215/mo	2,580
Condons & Lube	16,666 Lube packets @ \$.75 each.	\$0.750	12,500
	\$192.307/week for location snack/group food x		
Group food/snacks	52 weeks.	\$192.307	10,000
Incentives	1250 incentives @ \$10 each.	\$10.00	12,500
	Total	Aterials & Supplies:	147,580

General Operating:

Expense Item	Brief Description	Rate	Cost
	Auto fuel, repairs, maintenance for delivery		
Repairs and maintenance	vehicles.	83.33/mo	1,000
Insurance	Allocated amount of liability/umbrella insurance.	83.33/mo	1,000
	Prorated janitorial services for 6th street		
Janitorial	location.	\$833.33/mo	10,000
	Tot	tal General Operating:	12,000

TOTAL OPERATING EXPENSES: 192,580

TOTAL DIRECT COSTS: 192,580

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	
of total direct costs.		19,258

Indirect Rate: 10%
TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838
Appendix # B-1m Funding Notification Date

1 21-22 12/21/2018

				SERVICE MC	DES			1
Personnel Expenses		Syringe Acces (Hrs., City- Community Sweeps E	wide & -Based	Syringe Access Coordination Purchas	& Bulk	ſ		
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,651	100%		0%			5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%			5,138
Data Manager	0.05	4,367	100%		0%			4,367
SAS Director	0.75	48,010	89%	5,934	11%			53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%			63,705
Logistics Associates	2.00	28,256	25%	84,770	75%			113,026
SSE/Vol Cordinator	0.75	53,944	100%	-	0%			53,944
Health Educator	2.75	155,411			0%			155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	-	0%			34,730
	Ū.	-	0%		0%			-
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%			496,916
Fringe Benefits	25.00%	89,383	72%	34,846	28%			124,229
Total Personnel Expenses		446,916	72%	174,229	28%			621,145
					%	xpenditure		Contract Total
Operating Expenses		Expenditure	%	Expenditure	70	INDELIGITURE		
		Expenditure 85,166	% 89%	Expenditure 10.500		Apenditure	,	
Total Occupancy		85,166	89%	10,500	11%	Apenditure	,	95,666
Total Occupancy Total Materials and Supplies		85,166 160,385	89% 29%	10,500 390,280	11% 71%		;	95,666 550,665
Total Occupancy Total Materials and Supplies Total General Operating		85,166 160,385 6,659	89% 29% 61%	10,500	11% 71% 39%		3	95,666 550,665 10,916
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385	89% 29%	10,500 390,280	11% 71%			95,666 550,665
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100% 66%	10,500 390,280 4,257 - 405,037	11% 71% 39% 0% 34%			95,666 550,665 10,916 545,696 1,202,943
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100%	10,500 390,280 4,257 -	11% 71% 39% 0%			95,666 550,665 10,916 545,696 1,202,943 1,824,088
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:	10.00%	85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100% 66%	10,500 390,280 4,257 - - 405,037 579,266	11% 71% 39% 0% 34% 32%			95,666 550,665 10,916 545,696 1,202,943
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		85,166 160,385 6,659 545,696 797,906 1,244,822 124,482	89% 29% 61% 100% 66% 68% 68%	10,500 390,280 4,257 	11% 71% 39% 0% 34% 32% 32%	-		95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	85,166 160,385 6,659 545,696 797,906 1,244,822 124,482 1,369,304	89% 29% 61% 100% 66% 68% 68%	10,500 390,280 4,257 	11% 71% 39% 0% 34% 32% 32%			95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409 2,006,497

Contractor Name San Francisco AIDS Foundation Program Name: HIV Syringe Access & Disposal Services

Appendix #: B-1m Fiscal Year: 21-22

1a) SALARIES

	perations Directo			
with all activities	and that all requir ptation and refiner	ed data is reported; wor nent; coordinates currer	that assures monitoring too ks with partner agencies and and emerging health inforr surance procedures.	d program staff
Masters in Publi Minimum qualifications: equivalent comb			g and public health experien	ice or an
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$113,025.00	0.05	12	1	\$ 5,65
	vioral Health Sen		4	
Director, Behavi evaluation of the continuum that is Brief description of job duties: and bisexual me	oral Health Svc - F e program structure s responsive to the	Responsible for ensuring e and provision of profe e current health and wel	the implementation, managessional oversight to create a I-being needs, including HIV	service deliver needs of gay
Director, Behavi evaluation of the continuum that is Brief description of job duties: and bisexual me Masters degree	oral Health Svc - F e program structure s responsive to the n. in psychology, soc pacity, especially i	Responsible for ensuring a and provision of profe a current health and wel cial sciences, business o	ssional oversight to create a	service deliver needs of gay ars expereince
Director, Behavie evaluation of the continuum that is Brief description of job duties: and bisexual me Masters degree a supervisory ca	oral Health Svc - F e program structure s responsive to the n. in psychology, soc pacity, especially i	Responsible for ensuring a and provision of profe a current health and wel cial sciences, business o	ssional oversight to create a I-being needs, including HIV or related discipline; three yea	service deliver needs of gay ars expereince

Staff Position 3: Dir. Gov't Grants	and the second se			
Maintains operati	onal and statistic uirements, produ	al reporting mechanisms ces routine and ad hoc	ement and contract related a s in accordance with contrac reporting as needed, and en- quality assurance activities.	t and
Bachelor's degree	e and at least two	years demonstrated ex	perience in health services p writing; government contract	
Minimum qualificational and possibiliana	690	60 (A		
Minimum qualifications: and negotiations.				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 4: Data Manager				
summaries to en and public health	sure foundation p impact. Respon	rograms are rigorously of sible for review, abstract	on, quality assurance, report evaluated for process and he tion from client records and o meet programmatic and co	ealth outcomes database entry
			ensuring quality for large clie	nt data sets o
within dualitications, years equivalent		eu.		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 5: SAS Director					
departmental stra effective partners and training full-t exchange supplie Brief description of job duties: waste removal co Three years expe	ategic goals in alig ships with other H ime and temporar es. Organizes ren ompany, prepare erience working w ement, supervision	gnment with agency and IV/AIDS and Harm Redu ry staff in appropriate ex noval of biohazard wast reports for compliance a ith injection and drug us n experience preferred.	exchange sites. Develops a l city objectives. Builds and r uction agencies. Responsible change protocol. Responsible e from sites and coordinates and maintain safety protocols sers required. Associates De Must hold HIV test counselor	naintair e for scl le for pu remov s. gree wi	heduling urchasing al with th
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	т	otal
\$71,925.00	0.75	12	1	\$	53,944

Responsible for	scheduling and tra purchasing excha	nge supplies. Organize	porary staff in appropriate ex s removal of biohazard wasi re reports for compliance and	e from sites and
homeless popul interviewing and	ations required. A strong understan preferred. Exper	associates degree prefer ding of harm reduction p ience using a pallet jack	ple who use drugs, highly m red, experience using motive practices and principles, exp c, hand truck, and carts and	ational erience doing
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$63,705.00	1.00	12	1	\$ 63,705

Staff Position 7: Logistics Asso					
		nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nspor	ts supplies
	h desired. Ability to	follow directions and go	n service organization. Biling od communications skills ne		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$56,513.00	2.00	12	1	\$	113.026

Staff Position 8: SSE/Volunteer	and the second			
exchangers willi develop training	ng to become pee materials, includir	r educators. Develops	aining, and supervising secc curriculum for these trainings evant to MSM-IDU speed use e sites.	and helps
High school diple	oma or equivalend	v; valid California driver	's license and excellent driving	na record 1
of experience we Minimum qualifications:	orking with injectio	n drug users and with v		ng record. Ty
of experience was Minimum qualifications:	orking with injectio			Total

Staff Position 9: Health Educate	or				
testing and linka	ge to care; harm r	eduction counseling) th	revention; vein care; referral rough mobile and encampmo riding crisis intervention supp	ent o	
High school dipl Minimum qualifications: of experience we			's license and excellent drivin olunteers.	ng re	cord. 1 ye
within dualitied to 13. or experience in					
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total

			s responsible for outreach ar uction kit packing events, re		
Brief description of job duties: coordinating SAS	participant volun	teers (PWID) and other	volunteers to assist with kit	packin	ia.
	and a many second and the second party second second second	service operations of a service operation of the service operation oper			
High school diplo	ma or equivalenc	v: 1 year of experience	working with injection drug u	sers a	nd with
	ma or equivalenc	y; 1 year of experience	working with injection drug u	isers a	nd with
High school diplo Minimum qualifications: volunteers.	ma or equivalenc	y; 1 year of experience	working with injection drug u	isers a	ind with
	ma or equivalenc	y; 1 year of experience x Months per Year:	-		Total

Total FTE:

8.10

Total Salaries: \$ 496,916

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental		
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off		
Workers comp	\$	2,584.00
	Total Fringe Benefit:	124 229

I otal Fringe Benefit: 124,229

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 621,145

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE	77,760
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo	2,000
Utilities	Phone, PG&E & trash.	55.618/FTE	5,406
Rent office	Additional space for 6th Street.	875/mo	10,500
		Total Occupancy:	95,666

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 8.1 x 12mo	\$51.16	4,973
Volunteer Spt	Snacks, T-shirts, etc - \$333.34/mo	\$333.34	4,000
Syringes	Syringes \$.15/each x 2,286,666 syringes	\$0.15	343,000
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75	\$2.7500	50,000
Alcohol Wipes	257 cases x \$38.91/case.	\$38.91	10,000
Cotton balls and pellets	1,040bags x \$16.827bag	\$16.827	17,500
Sterile Water	430 Cases x \$81.396/case	\$81.396	35,000
Bagging Supplies	40 bundles x \$7.125/bundle	\$7.125	285
Group Food	Additional food for increased groups \$600.00/wk x 50 wks	600.00/wk	30,000
Outreach and Program materials	Additional expense for increase outreach \$118.14 x 50 wk	\$118.14	5,907
	Total I	Materials & Supplies:	550,665

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484
Travel	Vehicle Fuel.	\$83.33/mo	1,000
Travel	Vehicle Repairs.	\$83.33/mo	1,000
		Total General Operating:	10,916

Consultants/Subcontractors:

consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,etc	\$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT, etc	\$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$107,690/yr	107,690
	Total C	Consultants/Subcontractors:	545,696
	тот	AL OPERATING EXPENSES:	1,202,943

TOTAL DIRECT COSTS: 1,824,088

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	182,409

4

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 182,409

TOTAL EXPENSES: 2,006,497

Appendix # B-1n Page # 1 Fiscal Year(s) 21-22 Funding Notification Date 12/21/2018

		S	ERVICE M	ODES			
Personnel Expenses	Syringe Access Coordinatior Purchas	a & Bulk					Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	-	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	-	0%	147,580
Total General Operating	12,000	100%	-	0%	-	0%	12,000
Total Operating Expenses	192,580	100%	-	0%	-	0%	192,580
Total Direct Expenses	192,580	100%	-	0%	-	0%	192,580
Indirect Expenses 10.00%	19,258	100%	· ·	0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%		0%	211,838
Units of Service (UOS) per Service Mode	12		-		-		12
Cost Per Unit of Service by Service Mode		Care alle	-		- 1	2-sta	
Unduplicated Clients (UDC) per Service Mode	N/A	State Harris		100	1	The Party of	

Contractor Name	San Fancisco AIDS Foundation	Appendix #:	B-1n
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	21-22

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Rent for 6th street location, partial allocation.	25,000	25,000
Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$250/mo	3,000
Utilities	Phone, water, PG&E, allocated for 6th street.	416.67/mo	5,000
		Total Occupancy:	33,000

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost	
Syringes	366,666 syringes @ \$.15 each.	\$0.15	55,000	
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000	
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000	
Sterile Water	185 Cases x \$81.081/case.	\$81.081	15,000	
Misc Exchange supplies	Turniquests, bandaids, ensure.	\$215/mo	2,580	
Condons & Lube	16,666 Lube packets @ \$.75 each.	\$0.750	12,500	
Group food/snacks	\$192.307/week for location snack/group food x 52 weeks.	\$192.307	10,000	
Incentives	1250 incentives @ \$10 each.	\$10.00	12,500	
	Total	Materials & Supplies:	147,580	

General Operating:

Expense Item	Brief Description	Rate	Cost
	Auto fuel, repairs, maintenance for delivery		
Repairs and maintenance	vehicles.	83.33/mo	1,000
Insurance	Allocated amount of liability/umbrella insurance.	83.33/mo	1,000
Janitorial	Prorated janitorial services for 6th street location.	\$833.33/mo	10,000
	T	otal General Operating:	12,000

TOTAL OPERATING EXPENSES: 192,580

TOTAL DIRECT COSTS: 192,580

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate	e of 10%
of total direct costs.	19,258

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838

Appendix # B Page # Fiscal Year(s) 22 Funding Notification Date 12/2

B-1o 1 22-23 12/21/2018

				SERVICE MO	DES]
Personnel Expenses		Syringe Acces (Hrs., City- Community Sweeps E	wide & -Based	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,651	100%		0%			5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%			5,138
Data Manager	0.05	4,367	100%		0%			4,367
SAS Director	0.75	48,010	89%	5,934	11%			53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%			63,705
Logistics Associates	2.00	28,256	25%	84,770	75%			113,026
SSE/Vol Cordinator	0.75	53,944	100%	-	0%			53,944
Health Educator	2.75	155,411		-	0%			155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%		0%			34,730
		-	0%	-	0%			-
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%			496,916
Fringe Benefits	25.00%	89,383	72%	34,846	28%		1	124,229
Total Personnel Expenses		446,916	72%	174,229	28%			621,145
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	3	Contract Total
Operating Expenses		Expenditure 85 166	% 89%	Expenditure	% 11%	xpenditure	Э	
Total Occupancy		85,166	89%	10,500	11%	xpenditure	9	95,666
Total Occupancy Total Materials and Supplies		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure	9	95,666 550,665
Total Occupancy Total Materials and Supplies Total General Operating		85,166 160,385 6,659	89% 29% 61%	10,500	11% 71% 39%	xpenditure	9	95,666 550,665 10,916
Total Occupancy Total Materials and Supplies		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure	9	550,665
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100% 66%	10,500 390,280 4,257 - - 405,037	11% 71% 39% 0% 34%	xpenditure	9	95,666 550,665 10,916 545,696 1,202,943
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	85,166 160,385 6,659 545,696	89% 29% 61% 100%	10,500 390,280 4,257	11% 71% 39% 0%		9	95,666 550,665 10,916 545,696
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:	10.00%	85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100% 66%	10,500 390,280 4,257 - - 405,037 579,266	11% 71% 39% 0% 34% 32%		9	95,666 550,665 10,916 545,696 1,202,943 1,824,088
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses		85,166 160,385 6,659 545,696 797,906 1,244,822 124,482	89% 29% 61% 100% 66% 68% 68%	10,500 390,280 4,257 - - 405,037 579,266 57,927	11% 71% 39% 0% 34% 32% 32%		9	95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	85,166 160,385 6,659 545,696 797,906 1,244,822 124,482 1,369,304	89% 29% 61% 100% 66% 68% 68%	10,500 390,280 4,257 - - 405,037 579,266 57,927 637,193	11% 71% 39% 0% 34% 32% 32%		3	95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409 2,006,497

Contractor Name San Francisco AIDS Foundation Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-10
Fiscal Year:	22-23

1a) SALARIES

Staff Position 1: Program	ns & Operatio	ns Direct	or			
				that assures monitoring to	ols are	e integrat
				ks with partner agencies a		
on progra	am adaptation	and refine	ment; coordinates curren	nt and emerging health info		
Brief description of job duties: coordinat	tes program m	onitoring.	evaluation and quality as	surance procedures.		
				g and public health experie	ence or	r an
Minimum qualifications: equivaler				•		
				Annualized (if less than	1	
Annual Salary:	XI	FTE:	x Months per Year:	12 months):		Total
\$113,02	25.00	0.05	12	1	\$	5,6
Staff Position 2: Director,	Behavioral H	lealth Ser	vices			-
				the implementation, mana	aemer	nt and
				sional oversight to create a		
				-being needs, including HI		
Brief description of job duties: and bises						
		hology, so	cial sciences, business o	r related discipline; three ye	ears ex	pereinc
				emonstrated program mana		
Minimum qualifications: program	development e	xperience				
			· /	Annualized (if less than		
Annual Salary:	X F	TE:	x Months per Year:	12 months):		Total
\$140,00	0.00	0.05	12	1	\$	7,0
Staff Position 3: Dir. Gov	Cranta					_
	nual requireme	nts, produ	ces routine and ad hoc r	eporting as needed, and er	sures	the
Brief description of job duties: integrity o	f the service da	atabase b	ces routine and ad hoc r v overseeing database q	eporting as needed, and er uality assurance activities.	nsures	the
Brief description of job duties: integrity o	f the service da	atabase b	y overseeing database q	uality assurance activities.	_	_
Brief description of job duties: integrity o Bachelor's	f the service da s degree and a	atabase b at least two	y overseeing database q o years demonstrated ex	uality assurance activities. perience in health services	progra	ım
Brief description of job duties: integrity o Bachelor's planning,	f the service da s degree and a design, and ev	atabase b at least two	y overseeing database q o years demonstrated ex	uality assurance activities.	progra	ım
Brief description of job duties: integrity o Bachelor's	f the service da s degree and a design, and ev	atabase b at least two	y overseeing database q o years demonstrated ex	uality assurance activities. perience in health services writing; government contract	progra	ım
Brief description of job duties; integrity o Bachelor's planning, Minimum qualifications: and negot	f the service da s degree and a design, and ev tiations.	atabase b at least two	y overseeing database q y years demonstrated ex grant development and v	uality assurance activities. perience in health services writing; government contrac Annualized (if less than	progra ts man	ım
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary:	f the service da s degree and a design, and ev tiations.	atabase by it least two valuation; y TE:	y overseeing database q o years demonstrated ex	uality assurance activities. perience in health services writing; government contract	progra ts man	ım nagemen Total
Brief description of job duties; integrity o Bachelor's planning, Minimum qualifications: and negot	f the service da s degree and a design, and ev tiations.	atabase by at least two valuation; g	y overseeing database q o years demonstrated ex grant development and v x Months per Year:	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months):	progra ts man	im nagemen Total
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,75	f the service da s degree and a design, and ev tiations. x F 0.00	atabase by it least two valuation; y TE:	y overseeing database q o years demonstrated ex grant development and v x Months per Year:	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months):	progra ts man	im nagemen Total
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,75 Staff Position 4: Data Mar	f the service da s degree and a design, and ev tiations. x F 0.00	atabase by at least two valuation; g TE: 0.05	y overseeing database q o years demonstrated ex grant development and w x Months per Year: 12	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months): 1	progra ts man	im nageme Total 5,1
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,750 Staff Position 4: Data Mar Data Mar	f the service da s degree and a design, and ev tiations. x F 0.00 mager ager - Response	atabase by at least two valuation; g TE: 0.05	y overseeing database q o years demonstrated ex grant development and w x Months per Year: 12 pordinating data collectio	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months): 1 n, quality assurance, report	progra ts man \$	im nageme Total 5,1
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,750 Staff Position 4: Data Mari Data Mari summarie	f the service da s degree and a design, and ev tiations. x F 0.00 mager ager - Respons s to ensure fou	atabase b at least two raluation; g TE: 0.05 sible for co undation p	y overseeing database q o years demonstrated ex grant development and w x Months per Year: 12 pordinating data collectio rograms are rigorously e	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months): 1 n, quality assurance, report valuated for process and he	progra ts man \$ ing an ealth o	im nagemen Total 5,1 d utcome
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,750 Staff Position 4: Data Mar Data Mari summarie and public	f the service da s degree and a design, and ev tiations. x F 0.00 hager ager - Respons s to ensure fou c health impact	atabase by at least two raluation; g TE: 0.05 sible for co undation p . Respons	y overseeing database q o years demonstrated ex- grant development and w x Months per Year: 12 pordinating data collectio rograms are rigorously e sible for review, abstracti	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months): 1 n, quality assurance, report valuated for process and he on from client records and	progra ts man \$ ing an ealth o databa	Total 5,1: d utcome: ase entry
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,75 Staff Position 4: Data Mar Data Mar summarie and public of all data	f the service da s degree and a design, and ev tiations. x F 0.00 hager ager - Respons s to ensure fou chealth impact collected from	atabase by at least two raluation; g TE: 0.05 sible for co undation p . Respons	y overseeing database q o years demonstrated ex- grant development and w x Months per Year: 12 pordinating data collectio rograms are rigorously e sible for review, abstracti	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months): 1 n, quality assurance, report valuated for process and he	progra ts man \$ ing an ealth o databa	Total 5,1: d utcome: ase entry
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,750 Staff Position 4: Data Mar Data Mari summarie and public of all data Brief description of job duties: requirmen	f the service da s degree and a design, and ev tiations. x F 0.00 nager ager - Respons s to ensure fou collected from ts.	TE: 0.05 sible for coundation p . Respons clients as	y overseeing database q o years demonstrated ex grant development and v x Months per Year: 12 bordinating data collectio rograms are rigorously e- sible for review, abstracti well as data analysis to	uality assurance activities. perience in health services writing; government contract Annualized (if less than 12 months): 1 n, quality assurance, report valuated for process and he on from client records and meet programmatic and co	progra ts man \$ ing an ealth o databa intract	m Total 5,1: d utcomes ase entry
Brief description of job duties: integrity o Bachelor's planning, Minimum qualifications: and negot Annual Salary: \$102,750 Staff Position 4: Data Mar Summarie and public of all data Brief description of job duties: requirmen Bachelor's	f the service da s degree and a design, and ev tiations. x F 0.00 hager ager - Respons s to ensure fou collected from ts. a degree and 2	TE: 0.05 sible for co ndation p . Respons clients as years exp	y overseeing database q y years demonstrated exp grant development and w x Months per Year: 12 pordinating data collection rograms are rigorously en- sible for review, abstractivel as data analysis to perience managing and en-	uality assurance activities. perience in health services writing; government contrac Annualized (if less than 12 months): 1 n, quality assurance, report valuated for process and he on from client records and	progra ts man \$ ing an ealth o databa intract	m Total 5,1: d utcomes ase entry
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Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$71,925.00	0.75	12	1	\$ 53,944

Staff Position 6: Logistics Inven				
Responsible for	purchasing excha	nge supplies. Organize	porary staff in appropriate ex s removal of biohazard wast re reports for compliance and	e from sites and
homeless popula interviewing and	ations required. A strong understan preferred. Exper	ssociates degree prefer ding of harm reduction p ience using a pallet jack	ple who use drugs, highly mared, experience using motiva practices and principles, experience, hand truck, and carts and p	ational erience doing
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$63,705.00	1.00	12	1	\$ 63,705

Staff Position 7: Logistics Assoc	iates			
		nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nsports supplies
	desired. Ability to	follow directions and go	n service organization. Biling od communications skills ne	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 8: SSE/Volunt	teer Coordinator			
exchangers develop train	willing to become pee ning materials, includir	r educators. Develops of	aining, and supervising seco curriculum for these trainings want to MSM-IDU speed use e sites.	and helps
High school		y; valid California driver n drug users and with ve	's license and excellent drivi olunteers.	ng record. 1 ye
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 9: Health Educate	or				
testing and linka	ge to care; harm r	eduction counseling) the	revention; vein care; referral rough mobile and encampmo riding crisis intervention supp	ent ou	
High school diple Minimum qualifications: of experience we	oma or equivalenc orking with injectio	y; valid California driver n drug users and with v	's license and excellent drivit olunteers.	ng re	cord. 1 ye
			Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):		Total

	nject drugs (PWI	D), organizing harm red	s responsible for outreach ar uction kit packing events, re volunteers to assist with kit	cruit	ing and
			working with injection drug u		
			Appubliced /if less than	_	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
Annual Salary: \$53,430.00	x FTE: 0.65	x Months per Year: 12		\$	Total 34,73

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental		
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off		
Workers comp	\$	2,584.00
	Total Fringe Benefit:	124,229

Total Fringe Benefit: 124,229

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 621,145

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE	77,760
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo	2,000
Utilities	Phone, PG&E & trash.	55.618/FTE	5,406
Rent office	Additional space for 6th Street.	875/mo	10,500
		Total Occupancy:	95,666

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 8.1 x 12mo.	\$51.16	4,973
Volunteer Spt	Snacks, T-shirts, etc - \$333.34/mo.	\$333.34	4,000
Syringes	Syringes \$.15/each x 2,286,666 syringes.	\$0.15	343,000
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.7500	50,000
Alcohol Wipes	257 cases x \$38.91/case.	\$38.91	10,000
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Sterile Water	430 Cases x \$81.396/case.	\$81.396	35,000
Bagging Supplies	40 bundles x \$7.125/bundle.	\$7.125	285
Group Food	Additional food for increased groups \$600.00/wk x 50 wks.	600.00/wk	30,000
Outreach and Program materials	Additional expense for increase outreach \$118.14 x 50 wk.	\$118.14	5,907
	Total I	Materials & Supplies:	550,665

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484
Travel	Vehicle Fuel.	\$83.33/mo	1,000
Travel	Vehicle Repairs.	\$83.33/mo	1,000
		Total General Operating:	10,916

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT, etc.	\$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT, etc.	\$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc.	\$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc.	\$107,690/yr	107,690
	Total Co	nsultants/Subcontractors:	545,696
	TOTAL	OPERATING EXPENSES:	1,202,943
		TOTAL DIRECT COSTS:	1,824,088

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	182,409

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	182,409

TOTAL EXPENSES: 2,006,497

Appendix # B-1p Page # 1 Fiscal Year(s) 22-23 Funding Notification Date 12/21/2018

		S	ERVICE M	ODES			7
Personnel Expenses	Syringe Access Coordination Purchas	& Bulk					Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	-	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	-	0%	147,580
Total General Operating	12,000	100%		0%	-	0%	12,000
Total Operating Expenses	192,580	100%	-	0%	-	0%	192,580
Total Direct Expenses	192,580	100%	-	0%	-	0%	192,580
Indirect Expenses 10.00%	19,258	100%		0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%		0%	211,838
Units of Service (UOS) per Service Mode	12		- 1	No.	- 1	Te dial and	12
Cost Per Unit of Service by Service Mode	17,653.17	The state	-	-	-		A STATE OF THE OWNER
Unduplicated Clients (UDC) per Service Mode	N/A	120	1	A Lines			

Contractor Name	San Fancisco AIDS Foundation	Appendix #:	B-1p
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	22-23

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Rent for 6th street location, partial allocation.	25,000	25,000
Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$250/mo	3,000
Utilities	Phone, water, PG&E, allocated for 6th street.	416.67/mo	5,000
		Total Occupancy:	33,000

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost	
Syringes	366,666 syringes @ \$.15 each.	\$0.15	55,000	
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000	
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000	
Sterile Water	185 Cases x \$81.081/case.	\$81.081	15,000	
Misc Exchange supplies	Turniquests, bandaids, ensure.	\$215/mo	2,580	
Condons & Lube	16,666 Lube packets @ \$.75 each.	\$0.750	12,500	
	\$192.307/week for location snack/group food x			
Group food/snacks	52 weeks.	\$192.307	10,000	
Incentives	1250 incentives @ \$10 each.	\$10.00	12,500	
	Total	Materials & Supplies:	147,580	

General Operating:

Expense Item	Brief Description	Rate	Cost
Repairs and maintenance	Auto fuel, repairs, maintenance for delivery vehicles.	83.33/mo	1,000
Insurance	Allocated amount of liability/umbrella insurance.	83.33/mo	1,000
Janitorial	Prorated janitorial services for 6th street location.	\$833.33/mo	10,000
	Tota	al General Operating:	12,000
	TOTAL OPE	RATING EXPENSES:	192,580

TOTAL DIRECT COSTS: 192,580

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	
of total direct costs.		19,258
total direct costs.		19,2

	Indirect Rate:	10.00%
TOTAL IN	DIRECT COSTS:	19.258

TOTAL EXPENSES: 211,838

Appendix # B-1q Page # 1 Fiscal Year(s) 23-24 Funding Notification Date 12/21/2018

UOS COST	ALLOCATION	BY SERVICE MODE
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				SERVICE MO	DES			1
Personnel Expenses		Syringe Acces (Hrs., City- Community Sweeps E	wide & -Based	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,651	100%		0%			5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%			5,138
Data Manager	0.05	4,367	100%		0%			4,367
SAS Director	0.75	48,010	89%	5,934	11%			53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%			63,705
Logistics Associates	2.00	28,256	25%	84,770	75%			113,026
SSE/Vol Cordinator	0.75	53,944	100%	-	0%			53.944
Health Educator	2.75	155,411		-	0%			155.411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	-	0%			34,730
		-	0%	-	0%			-
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%			496,916
Fringe Benefits	25.00%	89,383	72%	34,846	28%			124,229
Total Personnel Expenses		446,916	72%	174,229	28%			621,145
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure		Contract Total
		85,166	89%	10,500	11%			95.666
Total Occupancy								
				390,280	71%			550.665
Total Materials and Supplies		160,385	29%		71% 39%			550,665
Total Materials and Supplies Total General Operating		160,385 6,659	29% 61%	390,280 4,257	39%			10,916
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		160,385	29%					
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		160,385 6,659 545,696 797,906	29% 61% 100% 66%	4,257 - 405,037	39% 0% 34%			10,916 545,696 1,202,943
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses	10.00%	160,385 6,659 545,696 797,906 1,244,822	29% 61% 100% 66%	4,257 - - 405,037 579,266	39% 0% 34%			10,916 545,696 1,202,943 1,824,088
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses	10.00%	160,385 6,659 545,696 797,906	29% 61% 100% 66%	4,257 - 405,037	39% 0% 34%			10,916 545,696 1,202,943
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		160,385 6,659 545,696 797,906 1,244,822 124,482 1,369,304	29% 61% 100% 66% 68% 68%	4,257 	39% 0% 34% 32% 32%			10,916 545,696 1,202,943 1,824,088 182,409 2,006,497
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	160,385 6,659 545,696 797,906 1,244,822 124,482	29% 61% 100% 66% 68% 68%	4,257 	39% 0% 34% 32% 32%	-		10,916 545,696 1,202,943 1,824,088 182,409

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-1q
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	23-24

1a) SALARIES

Staff Position 1		Operations Directo				
	Oversees crea	tion and maintenan	ce of an evaluation plan	that assures monitoring too	ls are	integrate
	with all activitie	es and that all requi	red data is reported; wor	ks with partner agencies an	d prog	ram staf
	on program ad	aptation and refine	ment; coordinates currer	t and emerging health infor	mation	n collecti
Brief description of job duties	: coordinates pro	ogram monitoring, e	evaluation and quality as	surance procedures.		
a de la construcción de la constru				g and public health experies	nce or	an
Minimum qualifications				g and passes reader or porter		
the and the additional of the	. oquiraioni oon			Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):		Total
Annual Galary.	£112 025 00	0.05	12	1	\$	5,6
	\$113,025.00	0.05	12		\$	5,0
					_	
Staff Position 2		avioral Health Ser				
				the implementation, managed		
				sional oversight to create a		
			e current health and wel	-being needs, including HIV	need	s of gay
Brief description of job duties						
				r related discipline; three ye		
1993 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 -				emonstrated program mana	gemer	nt and
Minimum qualifications	: program develo	opment experience				
			0. 2. 07	Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):	C	Total
	\$140,000.00	0.05	12	1	\$	7,0
			L			
Staff Position 3	Dir Coult Cro	oto			_	_
Stall Position 5			sible for all date manage	ement and contract related	a ati utti	
				in accordance with contract		65.
				eporting as needed, and en		the
	departmental n	equirements, produ	ces louulle and ad noc i	epoliting as needed, and en	sules	uie
Brief description of job duties	 Integrity of the s 					
				uality assurance activities.	_	
	Bachelor's deg	ree and at least two	years demonstrated ex	perience in health services		
	Bachelor's deg planning, desig	ree and at least two n, and evaluation;	years demonstrated ex			
Minimum qualifications	Bachelor's deg planning, desig	ree and at least two n, and evaluation;	years demonstrated ex	perience in health services vriting; government contract		
Minimum qualifications	Bachelor's deg planning, desig	ree and at least two in, and evaluation; g is.	o years demonstrated ex grant development and v	perience in health services writing; government contract Annualized (if less than	s man	agemer
	Bachelor's deg planning, desig	ree and at least two n, and evaluation;	years demonstrated ex	perience in health services vriting; government contract	s man	
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Minimum qualifications	Bachelor's deg planning, desig	ree and at least two n, and evaluation; s s. x FTE:	years demonstrated ex grant development and v x Months per Year:	perience in health services writing; government contract Annualized (if less than 12 months):	s man	agemer Total
Minimum qualifications Annual Salary:	Bachelor's deg planning, desig : and negotiation \$102,750.00	ree and at least two n, and evaluation; s s. <u>x FTE:</u> 0.05	years demonstrated ex grant development and v x Months per Year:	perience in health services writing; government contract Annualized (if less than 12 months):	s man	agemer Total
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Minimum qualifications Annual Salary: Staff Position 4 Brief description of job duties Minimum qualifications Annual Salary: Staff Position 5	Bachelor's deg planning, desig : and negotiation \$102,750.00 : Data Manager Data Manager summaries to e and public heal of all data colle : requirments. Bachelor's degr years equivaler \$87,338.00 : SAS Director - departmental si effective partne and training full exchange supp waste removal Three years ex	ree and at least two in, and evaluation; ins. x FTE: 0.05 r - Responsible for co ensure foundation p th impact. Respon cted from clients as ree and 2 years exp nt experience requir x FTE: 0.05 Provides oversight trategic goals in alig erships with other H -time and temporar lies. Organizes ren company, prepare perience working w	x Months per Year: 12 bordinating data collection rograms are rigorously estible for review, abstract swell as data analysis to berience managing and estimation well as data analysis to berience managing and estimation tered. X Months per Year: 12 and management of 11 gament with agency and IV/AIDS and Harm Redu y staff in appropriate eaxy noval of biohazard waster reports for compliance a ith injection and drug us	perience in health services vriting; government contract Annualized (if less than 12 months): 1 an, quality assurance, report evaluated for process and he ion from client records and meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops a city objectives. Builds and r citon agencies. Responsible change protocol. Responsible a from sites and coordinates nd maintain safety protocols ers required. Associates De	s man s man s ing an ealth o databa ntract ent dat ent dat s for s le for p s remo s	Total 5,1 d utcome ase entr a sets o Total 4,3 ins chedulir purchas val with
Minimum qualifications Annual Salary: Staff Position 4 Brief description of job duties Minimum qualifications Annual Salary: Staff Position 5	Bachelor's deg planning, desig : and negotiation \$102,750.00 : Data Manager Data Manager summaries to e and public heal of all data colle ; requirments. Bachelor's degi ; years equivaler \$87,338.00 : SAS Director - departmental si effective partne and training full exchange supp waste removal Three years ex program manag	ree and at least two in, and evaluation; ins. x FTE: 0.05 r - Responsible for compute r foundation p th impact. Respondent th impact. Respondent cted from clients as ree and 2 years expendent trategic goals in aligned respire and temporar lies. Organizes rem company, prepare perience working w gement, supervisior	x Months per Year: 12 bordinating data collection rograms are rigorously estible for review, abstract sible for review, abstract well as data analysis to berience managing and estimation red. x Months per Year: 12 and management of 11 mment with agency and IV/AIDS and Harm Redu y staff in appropriate exotor noval of biohazard waster th injection and drug us the experience preferred. N	perience in health services writing; government contract Annualized (if less than 12 months): 1 an, quality assurance, report evaluated for process and he ion from client records and meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops a city objectives. Builds and r ction agencies. Responsible change protocol. Responsible a from sites and coordinates and maintain safety protocols	s man s man s ing an ealth o databa ntract ent dat ent dat s for s le for p s remo s	Total 5,11 d utcome ase entry a sets o Total 4,30 ins chedulir burchasi val with

Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	То	otal
\$71,925.00	0.75	12	1	\$	53,944

Responsible for	scheduling and tra purchasing excha	nge supplies. Organize	oorary staff in appropriate ex s removal of biohazard wast e reports for compliance and	e from sites and
homeless popula interviewing and	ations required. A strong understan preferred. Exper	ssociates degree prefer ding of harm reduction p ience using a pallet jack	ple who use drugs, highly m red, experience using motive ractices and principles, exp , hand truck, and carts and	ational erience doing
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$63,705.00	1.00	12	1	\$ 63,705

	to exchanges sit	ate - Staffs exchar	nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nspo	rts supplies
	Brief description of job duties:					
		desired. Ability to	follow directions and go	n service organization. Biling od communications skills ne		
	Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
1	Annual Salary.	ATTE.	A MONUTS per Tear.		1	Total

Staff Position 8: SSE/Volunteer	Coordinator			
exchangers willir develop training	ng to become pee materials, includir	r educators. Develops of	aining, and supervising seco curriculum for these trainings evant to MSM-IDU speed use e sites.	and helps
High school diplo of experience wo		y; valid California driver n drug users and with v	's license and excellent drivin olunteers.	ng record. 1 yea
Minimum gualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 9: Health Educato	vr				
testing and linka	ge to care; harm r	eduction counseling) the	revention; vein care; referral rough mobile and encampm iding crisis intervention supp	ent o	
High school diplo	oma or equivalenc	y; valid California driver	's license and excellent drivi olunteers.	ng re	cord. 1 ye
Minimum qualifications: of experience we		in anag acoro ana man m			
Minimum qualifications: of experience wo	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total

with people who i	Engagement and inject drugs (PWI	Kit Packing Associate is D), organizing harm red	s responsible for outreach ar uction kit packing events, re	cruit	ting and
			volunteers to assist with kit		
	ma or equivalenc	y; 1 year of experience	working with injection drug u	sers	and with
	ma or equivalenc	y; 1 year of experience	working with injection drug u	isers	and with
High school diplo Minimum qualifications: volunteers.	ma or equivalenc	y; 1 year of experience	working with injection drug u	isers	and with
	ma or equivalenc	y; 1 year of experience x Months per Year:		isers	and with

Total FTE:

8.10

Total Salaries: \$ 496,916

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental		
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off		
Workers comp	\$	2,584.00
	Total Fringe Benefit:	124,229

Total Fringe Benefit: 124,229

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 621,145

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE	77,760
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo	2,000
Utilities	Phone, PG&E & trash.	55.618/FTE	5,406
Rent office	Additional space for 6th Street.	875/mo	10,500
		Total Occupancy:	95,666

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 8.1 x 12mo.	\$51.16	4,973
Volunteer Spt	Snacks, T-shirts, etc - \$333.34/mo.	\$333.34	4,000
Syringes	Syringes \$.15/each x 2,286,666 syringes.	\$0.15	343,000
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.7500	50,000
Alcohol Wipes	257 cases x \$38.91/case.	\$38.91	10,000
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Sterile Water	430 Cases x \$81.396/case.	\$81.396	35,000
Bagging Supplies	40 bundles x \$7.125/bundle.	\$7.125	285
Group Food	Additional food for increased groups \$600.00/wk x 50 wks.	600.00/wk	30,000
Outreach and Program materials	Additional expense for increase outreach \$118.14 x 50 wk.	\$118.14	5,907
	Total I	Materials & Supplies:	550,665

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484
Travel	Vehicle Fuel.	\$83.33/mo	1,000
Travel	Vehicle Repairs.	\$83.33/mo	1,000
	1	Total General Operating:	10,916

Consultants/Subcontractors:

onsultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT, etc	\$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT, etc	\$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT, etc	\$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT, etc	\$107,690/yr	107,690
	Total Con	sultants/Subcontractors:	545,696
	TOTAL	OPERATING EXPENSES:	1,202,943
		TOTAL DIRECT COSTS:	1,824,088

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%
of total direct costs. 182

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	182,409

TOTAL EXPENSES: 2,006,497

Appendix # B-1r Page # Fiscal Year(s) 1 23-24 Funding Notification Date 12/21/2018

		S	SERVICE M	ODES		_	
Personnel Expenses	Syringe Access Coordinatior Purchas	a & Bulk					Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	-	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	-	0%	147,580
Total General Operating	12,000	100%	-	0%	-	0%	12,000
Total Operating Expenses	192,580	100%	•	0%	-	0%	192,580
Total Direct Expenses	192,580	100%		0%	-	0%	192,580
Indirect Expenses 10.00%	19,258	100%		0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%	-	0%	211,838
Units of Service (UOS) per Service Mode	12	ENAR	- 1		- 1		12
Cost Per Unit of Service by Service Mode	CONTRACTOR OF STREET, STRE	Sole yet	-		-		States and a second
Unduplicated Clients (UDC) per Service Mode	N/A					Sec. 5	

Contractor Name San Fancisco AIDS Foundation	Appendix #:	B-1r
Program Name: HIV Syringe Access & Disposal Services	Fiscal Year:	23-24

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Rent for 6th street location, partial allocation.	25,000	25,000
Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$250/mo	3,000
Utilities	Phone, water, PG&E, allocated for 6th street.	416.67/mo	5,000
		7.410	
	-	Total Occupancy:	33,000

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	366,666 syringes @ \$.15 each.	\$0.15	55,000
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000
Sterile Water	185 Cases x \$81.081/case.	\$81.081	15,000
Misc Exchange supplies	Turniquests, bandaids, ensure.	\$215/mo	2,580
Condons & Lube	16,666 Lube packets @ \$.75 each.	\$0.750	12,500
	\$192.307/week for location snack/group food x		
Group food/snacks	52 weeks.	\$192.307	10,000
Incentives	1250 incentives @ \$10 each.	\$10.00	12,500
	Total M	laterials & Supplies:	147,580

General Operating:

Expense Item	Brief Description	Rate	Cost
Repairs and maintenance	Auto fuel, repairs, maintenance for delivery vehicles.	83.33/mo	1,000
Insurance	Allocated amount of liability/umbrella insurance.	83.33/mo	1,000
Janitorial	Prorated janitorial services for 6th street location.	\$833.33/mo	10,000
	Tet		12,000
	Tot	al General Operating:	1

TOTAL OPERATING EXPENSES: 192,580

TOTAL DIRECT COSTS: 192,580

4) INDIRECT COSTS

an Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	
f total direct costs.		19,258

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838

Appendix # B-1s Page # Fiscal Year(s) Funding Notification Date

1 24-25 12/21/2018

				SERVICE MO	DES			1
Personnel Expenses		Syringe Acces (Hrs., City- Community Sweeps E	wide & -Based	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,651	100%		0%			5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%			5,138
Data Manager	0.05	4,367	100%		0%			4,367
SAS Director	0.75	48,010	89%	5,934	11%			53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%			63,705
Logistics Associates	2.00	28,256	25%	84,770	75%			113,026
SSE/Vol Cordinator	0.75	53,944	100%	-	0%			53,944
Health Educator	2.75	155,411		-	0%			155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	-	0%			34,730
		-	0%	-	0%			-
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%			496,916
Fringe Benefits	25.00%	89,383	72%	34,846	28%			124,229
Total Personnel Expenses		446,916	72%	174,229	28%			621,145
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	9	Contract Total
Operating Expenses Total Occupancy		Expenditure 85,166		Expenditure 10.500		xpenditure	9	Contract Total
Total Occupancy		85,166	89%	10,500	11%	xpenditure	9	95,666
Total Occupancy Total Materials and Supplies		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure	9	95,666 550,665
Total Occupancy Total Materials and Supplies Total General Operating		85,166 160,385 6,659	89% 29% 61%	10,500	11% 71% 39%	xpenditure)	95,666 550,665 10,916
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure)	95,666 550,665
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100%	10,500 390,280 4,257 - 405,037	11% 71% 39% 0% 34%	xpenditure	•	95,666 550,665 10,916 545,696 1,202,943
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	85,166 160,385 6,659 545,696	89% 29% 61% 100% 66%	10,500 390,280 4,257	11% 71% 39% 0%	xpenditure)	95,666 550,665 10,916 545,696 1,202,943 1,824,088
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:	10.00%	85,166 160,385 6,659 545,696 797,906	89% 29% 61% 100% 66%	10,500 390,280 4,257 - 405,037 579,266	11% 71% 39% 0% 34% 32%	xpenditure	•	95,666 550,665 10,916 545,696 1,202,943
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses		85,166 160,385 6,659 545,696 797,906 1,244,822 124,482	89% 29% 61% 100% 66% 68% 68%	10,500 390,280 4,257 - 405,037 579,266 57,927	11% 71% 39% 0% 34% 32% 32%	xpenditure	9	95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	85,166 160,385 6,659 545,696 797,906 1,244,822 124,482 1,369,304	89% 29% 61% 100% 66% 68% 68%	10,500 390,280 4,257 - - 405,037 579,266 57,927 637,193	11% 71% 39% 0% 34% 32% 32%		9	95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409 2,006,497

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-1s
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	24-25

1a) SALARIES

Oversees	& Operations Direct				
			that assures monitoring to	ols are i	ntegrate
with all ac			rks with partner agencies a		
on program	n adaptation and refine	ement; coordinates curre	nt and emerging health info	rmation	collecti
Brief description of job duties: coordinate	s program monitoring,	evaluation and quality as	ssurance procedures.		
Masters in	Public Health and 3 ye	ears community organizir	ng and public health experie	nce or a	an
Minimum qualifications: equivalent					
			Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):	1	otal
\$113,02	5.00 0.05		1	\$	5,65
Staff Position 2: Director,	Sebavioral Health Se	nvices		_	
			the implementation, mana	aement	and
			ssional oversight to create a		
			I-being needs, including HIV		
Brief description of job duties: and bisexu			soling needs, moldaling the	necus	orgay
		cial sciences, business of	or related discipline; three ye	ars exp	ereince
			emonstrated program mana		
Minimum qualifications: program d					
			Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):	Г	otal
\$140,000	.00 0.05	12	1	\$	7,00
4110,000				•	1,00
Staff Position 3: Dir. Gov't	Cranta				
		allela for all data monor			
			ement and contract related		s.
			s in accordance with contract		
departmen	tal requirements, produ	ices routine and ad hoc i	reporting as needed, and en	sures th	ne
Brief description of job duties: integrity of	the service database by	y overseeing database o	uality assurance activities.		
Bachelor's	degree and at least two	o years demonstrated ex	perience in health services	program	1
planning, d	esign, and evaluation;	grant development and v	writing; government contract	s mana	gement
Minimum qualifications: and negotia	ations.		a territoria.		
		1999 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997	Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):	T	otal
\$102,750	.00 0.05	12	1	\$	5,13
Staff Position 4: Data Mana	oer			-	
		ordinating data collection	n, quality assurance, report	ing and	
			valuated for process and he		
				aith out	comes
		sidie for review, adstract	ion from client records and		
			ion from client records and on meet programmatic and co	databas	
of all data of	ollected from clients as		ion from client records and on meet programmatic and co	databas	
of all data of Brief description of job duties: requirments	ollected from clients as	s well as datà analysis to	meet programmatic and co	databas ntract	e entry
of all data of Brief description of job duties: requirments Bachelor's	collected from clients as a. degree and 2 years exp	s well as data analysis to perience managing and e		databas ntract	e entry
of all data of Brief description of job duties: requirments	collected from clients as a. degree and 2 years exp	well as data analysis to perience managing and e red.	meet programmatic and co	databas ntract	e entry
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv	ollected from clients as begree and 2 years exp alent experience requir	well as datà analysis to perience managing and e ed.	meet programmatic and co ensuring quality for large clie Annualized (if less than	databas ntract int data	e entry sets or
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv Annual Salary:	biliceted from clients as biliceted from clients as degree and 2 years exp alent experience requir x FTE:	well as data analysis to perience managing and e red.	meet programmatic and co	databas ntract int data	e entry
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv	biliceted from clients as biliceted from clients as degree and 2 years exp alent experience requir x FTE:	well as datà analysis to perience managing and e ed.	meet programmatic and co ensuring quality for large clie Annualized (if less than	databas ntract int data	e entry sets or
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv Annual Salary:	biliceted from clients as biliceted from clients as degree and 2 years exp alent experience requir x FTE:	well as datà analysis to perience managing and e red. x Months per Year:	meet programmatic and co ensuring quality for large clie Annualized (if less than	databas ntract Int data	e entry sets or otal
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv Annual Salary: \$87,338.	ollected from clients as degree and 2 years exp alent experience requir x FTE: 00 0.05	well as datà analysis to perience managing and e red. x Months per Year:	meet programmatic and co ensuring quality for large clie Annualized (if less than	databas ntract Int data	e entry sets or otal
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv Annual Salary: \$87,338. Staff Position 5: SAS Direc	ollected from clients as degree and 2 years exp alent experience requir x FTE: 00 0.05 tor	well as datà analysis to perience managing and e red. x Months per Year: 12	meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1	databas ntract Int data Tc \$	e entry sets or otal
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv Annual Salary: \$87,338 Staff Position 5: SAS Director SAS Director	ollected from clients as degree and 2 years exp alent experience requir x FTE: 00 0.05 tor	e well as data analysis to perience managing and e red. x Months per Year: 12 and management of 11 o	meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops ar	databasa ntract Int data To \$	e entry sets or otal 4,36
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv Annual Salary: \$87,338 Staff Position 5: SAS Direct SAS Directed department	ollected from clients as degree and 2 years exp alent experience requir x FTE: 00 0.05 tor or - Provides oversight a al strategic goals in alig	e well as data analysis to perience managing and e red. x Months per Year: 12 and management of 11 o prment with agency and	meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops ar city objectives. Builds and n	databasi ntract int data To \$ nnual naintainta	e entry sets or otal 4,36
of all data of Brief description of job duties: requirments Bachelor's Minimum qualifications: years equiv Annual Salary: \$87,338 Staff Position 5: SAS Direct Gepartment effective pa	tollected from clients as degree and 2 years exp alent experience requir x FTE: 00 0.05 tor or - Provides oversight a al strategic goals in alig rtnerships with other HI	well as data analysis to perience managing and e ed. x Months per Year: 12 and management of 11 onment with agency and IV/AIDS and Harm Redu	meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops ar city objectives. Builds and n ction agencies. Responsible	databas ntract int data To \$ nnual naintainta for sch	e entry sets or otal 4,36
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\$

53,944

1

0.75

12

\$71,925.00

Staff Position 6: Logistics Inven	tory Mrg				
Responsible for	purchasing excha	nge supplies. Organizes	porary staff in appropriate exits s removal of biohazard wast e reports for compliance and	e froi	n sites and
homeless popula interviewing and	ations required. A strong understand preferred. Exper	ssociates degree prefer ding of harm reduction p ience using a pallet jack	ple who use drugs, highly ma red, experience using motiva practices and principles, expe , hand truck, and carts and u	ationa	al ce doing
			Annualized (if less than	1	NAMES OF STREET
Annual Salary:	x FTE:	x Months per Year:	12 months):		Total

	te - Staffs exchar	nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nsports supplie
	desired. Ability to	follow directions and go	n service organization. Biling od communications skills ne	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	2.00	12	1	\$ 113,02

Staff Position 8: SSE/Volunteer	Coordinator			
exchangers willin develop training	ng to become pee materials, includir	r educators. Develops	aining, and supervising seco curriculum for these trainings avant to MSM-IDU speed use e sites.	and helps
	ma or equivalenc	v: valid California driver	's license and excellent drivi	na record 1 ve
High school diplo of experience wo		y; valid California driver n drug users and with v	's license and excellent drivi olunteers.	ng record. 1 yea
High school diplo				ng record. 1 yea Total

Staff Position 9: Health Educato	r				
testing and linka	ge to care; harm r	eduction counseling) the	revention; vein care; referrals rough mobile and encampme iding crisis intervention supp	ent ou	
High school diplo	ma or equivalence	y; valid California driver	's license and excellent driving	ng rec	ord. 1 yea
Minimum qualifications: of experience wo	rking with injectio	n drug users and with v	olunteers.		
Minimum qualifications: of experience wo	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total

with people who i	Engagement and nject drugs (PWI	Kit Packing Associate is D), organizing harm red	s responsible for outreach ar uction kit packing events, re volunteers to assist with kit	cruit	ing and
High school diplo Minimum qualifications: volunteers.	ma or equivalenc	y; 1 year of experience	working with injection drug u	isers	and with
			Annualized (if less than	-	
Annual Salary:	x FTE:	x Months per Year:	12 months):		Total

Total FTE:

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental		
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off		
Workers comp	\$	2,584.00
	Total Fringe Benefit:	124,229

4,2

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 621,145

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE	77,760
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo	2,000
Utilities	Phone, PG&E & trash.	55.618/FTE	5,406
Rent office	Additional space for 6th Street.	875/mo	10,500
		Total Occupancy:	95,666

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 8.1 x 12mo.	\$51.16	4,973
Volunteer Spt	Snacks, T-shirts, etc - \$333.34/mo.	\$333.34	4,000
Syringes	Syringes \$.15/each x 2,286,666 syringes.	\$0.15	343,000
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.7500	50,000
Alcohol Wipes	257 cases x \$38.91/case.	\$38.91	10,000
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Sterile Water	430 Cases x \$81.396/case.	\$81.396	35,000
Bagging Supplies	40 bundles x \$7.125/bundle.	\$7.125	285
Group Food	Additional food for increased groups \$600.00/wk x 50 wks.	600.00/wk	30,000
Outreach and Program materials	Additional expense for increase outreach \$118.14 x 50 wk.	\$118.14	5,907
	Total I	Materials & Supplies:	550,665

General Operating:

Expense Item	Brief Description	Rate	Cost	
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432	
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484	
Travel	Vehicle Fuel.	\$83.33/mo	1,000	
Travel	Vehicle Repairs.	\$83.33/mo	1,000	
		Total General Operating:	10,916	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,	etc \$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT,	etc \$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT,	etc \$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT,	etc \$107,690/yr	107,690
		Total Consultants/Subcontractors:	545,696
		TOTAL OPERATING EXPENSES:	1,202,943

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	182,409

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 182,409

TOTAL EXPENSES: 2,006,497

Appendix # B-1t Page # 1 Fiscal Year(s) 24-25 Funding Notification Date 12/21/2018

		S	ERVICE M	ODES			
Personnel Expenses	es Syringe Access, Coordination Purchasi						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	-	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	-	0%	147,580
Total General Operating	12,000	100%	-	0%		0%	12,000
Total Operating Expenses	192,580	100%	-	0%	-	0%	192,580
Total Direct Expenses	192,580	100%	-	0%	-	0%	192,580
Indirect Expenses 10.00%	19,258	100%		0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%	<u> </u>	0%	211,838
Units of Service (UOS) per Service Mode	12		-		-	12-3	12
Cost Per Unit of Service by Service Mode			-	S BIT	-	-	STREET, STREET
Unduplicated Clients (UDC) per Service Mode	N/A	12 21 2		The state		Carlos Ta	

Contractor Name	San Fancisco AIDS Foundation	Appendix #:	B-1t
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	24-25

2) OPERATING EXPENSES:

Occupancy:

E	xpense Item	Brief Description	Rate	Cost
	Rent	Rent for 6th street location, partial allocation.	25,000	25,000
	Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$250/mo	3,000
	Utilities	Phone, water, PG&E, allocated for 6th street.	416.67/mo	5,000
			Total Occupancy:	33,000

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	366,666 syringes @ \$.15 each.	\$0.15	55,000
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000
Sterile Water	185 Cases x \$81.081/case.	\$81.081	15,000
Misc Exchange supplies	Turniquests, bandaids, ensure.	\$215/mo	2,580
Condons & Lube	16,666 Lube packets @ \$.75 each.	\$0.750	12,500
	\$192.307/week for location snack/group food x		
Group food/snacks	52 weeks.	\$192.307	10,000
Incentives	1250 incentives @ \$10 each.	\$10.00	12,500
	Total	Materials & Supplies:	147,580

General Operating:

Brief Description	Rate	Cost
Auto fuel, repairs, maintenance for delivery		
vehicles.	83.33/mo	1,000
Allocated amount of liability/umbrella insurance.	83.33/mo	1,000
Prorated janitorial services for 6th street location.	\$833.33/mo	10,000
Tot		12,000
	Auto fuel, repairs, maintenance for delivery vehicles. Allocated amount of liability/umbrella insurance. Prorated janitorial services for 6th street location.	Auto fuel, repairs, maintenance for delivery vehicles. 83.33/mo Allocated amount of liability/umbrella insurance. 83.33/mo Prorated janitorial services for 6th street 83.33/mo

TOTAL OPERATING EXPENSES: 192,580

TOTAL DIRECT COSTS: 192,580

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
San Flandsco AIDS Foundation has a negotiated rate of 27%. This contract seeks reinbursement at a rate of 10%	
of total direct costs.	19,258
	and the second second

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838

Appendix # B Page # Fiscal Year(s) 25 Funding Notification Date 12/2

B-1u 1 25-26 12/21/2018

				SERVICE MO	DES			1
Personnel Expenses		Syringe Acces (Hrs., City- Community Sweeps E	wide & -Based	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
Pgms & Ops Director	0.05	5,651	100%		0%			5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%			5,138
Data Manager	0.05	4,367	100%		0%			4,367
SAS Director	0.75	48,010	89%	5,934	11%			53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%			63,705
Logistics Associates	2.00	28,256	25%	84,770	75%			113,026
SSE/Vol Cordinator	0.75	53,944	100%	-	0%			53,944
Health Educator	2.75	155,411		-	0%			155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	-	0%			34,730
		-	0%	-	0%			
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%			496,916
Fringe Benefits	25.00%	89,383	72%	34,846	28%			124,229
Total Personnel Expenses		446,916	72%	174,229	28%			621,145
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure		Contract Tota
Total Occupancy		85,166	89%	10,500	11%			95,666
Total Materials and Supplies		160,385	29%	390,280	71%			550,665
				330,200 1				
					39%			10,916
Total General Operating		6,659	61%	4,257	39% 0%			
Fotal General Operating Consultants/Subcontractor:					39% 0% 34%			545,696
Total General Operating Consultants/Subcontractor: Total Operating Expenses		6,659 545,696	61% 100%	4,257	0% 34% 32%			545,696 1,202,943
	10.00%	6,659 545,696 797,906	61% 100% 66%	4,257 - 405,037	0% 34%			545,696 1,202,943 1,824,088
Total General Operating Consultants/Subcontractor: Total Operating Expenses	10.00%	6,659 545,696 797,906 1,244,822	61% 100% 66%	4,257 	0% 34% 32%			10,916 545,696 1,202,943 1,824,088 182,409 2,006,497
Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses		6,659 545,696 797,906 1,244,822 124,482	61% 100% 66% 68% 68%	4,257 	0% 34% 32% 32%			545,696 1,202,943 1,824,088 182,409
Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	6,659 545,696 797,906 1,244,822 124,482 1,369,304	61% 100% 66% 68% 68%	4,257 	0% 34% 32% 32%			545,696 1,202,943 1,824,088 182,409 2,006,497

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-1u
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	25-26

1a) SALARIES

		perations Directo				
Ove	ersees creati	on and maintenan	ce of an evaluation plan	that assures monitoring too	ls an	e integra
with	h all activities	and that all requir	red data is reported; wor	ks with partner agencies an	d pro	gram sta
ong	program ada	ptation and refiner	ment; coordinates currer	it and emerging health infor	matic	on collect
Brief description of job duties: cool	rdinates prov	gram monitoring, e	valuation and quality as	surance procedures.		
				g and public health experier	ice o	ran
Minimum qualifications: equ				a b undater exherter		
tillining gaamoatorio. oga				Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):		Total
	10.005.00	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		12 11011013).		
\$1	13,025.00	0.05	12		\$	5,6
Staff Position 2: Dire					_	_
				the implementation, manage		
eval	luation of the	e program structure	e and provision of profes	sional oversight to create a	serv	ice delive
cont	tinuum that i	s responsive to the	e current health and well	-being needs, including HIV	nee	ds of gay
Brief description of job duties: and	bisexual me	en.				
Mas	sters degree	in psychology, soo	cial sciences, business o	r related discipline; three ye	ars e	expereinc
a su	upervisory ca	pacity, especially	in HIV prevention and de	emonstrated program manage	geme	ent and
Minimum qualifications: prog	gram develop	pment experience.				
	1			Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):		Total
	40,000.00	0.05	12	1	\$	7,0
\$1-	40,000.00	0.00	14		Ψ	7,0
					_	
Staff Position 3: Dir.						
Dire	ector, Gov't C	contracts - Respon	sible for all data manage	ement and contract related a	ctivi	ties.
				in accordance with contrac		
				eporting as needed, and en		
Brief description of job duties: integ					Suica	Suic
					_	
				perience in health services		
			grant development and v	vriting; government contract	s ma	nageme
Minimum qualifications: and	negotiations	3				
		177-1212/07		Annualized (if less than		
Annual Salary:		x FTE:	x Months per Year:	12 months):		Total
\$10	02,750.00	0.05	12	1	\$	5,1
					•	
					·	
Staff Position 4: Date	a Manager				_	
Staff Position 4: Data		Responsible for or	ordinating data collectio	n quality assurance reporti	_	
Data	a Manager -			n, quality assurance, report	ng a	nd
Data sum	a Manager - Imaries to en	sure foundation p	rograms are rigorously e	valuated for process and he	ng a	nd
Data sum and	a Manager - maries to en public health	sure foundation p impact. Respons	rograms are rigorously e sible for review, abstract	valuated for process and he ion from client records and o	ng a alth Jatak	nd outcome base ent
Data sum and of al	a Manager - maries to en public health Il data collect	sure foundation p impact. Respons	rograms are rigorously e sible for review, abstract	valuated for process and he	ng a alth Jatak	nd outcome base ent
Data sum and	a Manager - maries to en public health Il data collect	sure foundation p impact. Respons	rograms are rigorously e sible for review, abstract	valuated for process and he ion from client records and o	ng a alth Jatak	nd outcome base ent
Data sum and of al Brief description of job duties: requ	a Manager - maries to en public health Il data collect uirments.	sure foundation p impact. Respons ted from clients as	rograms are rigorously e sible for review, abstract well as data analysis to	valuated for process and he ion from client records and o meet programmatic and co	ng a alth latak ntrac	nd outcome base ent
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Data sum and of al Brief description of job duties: requ	a Manager - maries to en public health Il data collect uirments. helor's degre	sure foundation p n impact. Respon- ted from clients as ee and 2 years exp	rograms are rigorously e sible for review, abstract well as data analysis to erience managing and e	valuated for process and he ion from client records and o meet programmatic and co ensuring quality for large clie	ng a alth latak ntrac	nd outcome base entr
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\$

53,944

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0.75

12

\$71,925.00

Staff Position 6: Logistics Invent				
Responsible for p	ourchasing excha	nge supplies. Organize	orary staff in appropriate exo s removal of biohazard wast e reports for compliance and	e from sites and
homeless popula interviewing and	tions required. A strong understan preferred. Exper	ssociates degree prefer ding of harm reduction p ience using a pallet jack	ole who use drugs, highly ma red, experience using motive ractices and principles, expe , hand truck, and carts and u	ational erience doing
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$63,705.00	1.00	12	1	\$ 63,705

Staff Position 7: Logistics Assoc	ciates			
		nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nsports supplies
	desired. Ability to	follow directions and go	n service organization. Biling od communications skills ne	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	2.00	12	1	\$ 113,026

Staff Position 8: SSE/Voluntee				
exchangers wi develop trainin	illing to become pee ng materials, includir	r educators. Develops of	aining, and supervising seco curriculum for these trainings want to MSM-IDU speed use e sites.	and helps
		cy; valid California driver on drug users and with v	's license and excellent drivio plunteers.	ng record. 1 ye
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 9: Health Educat	or				
testing and links	age to care; harm r	eduction counseling) thr	revention; vein care; referral ough mobile and encampm iding crisis intervention supp	ent o	
	oma or equivalenc	y; valid California driver	s license and excellent drivi	na re	cord. 1 ve
Minimum qualifications: of experience w	orking with injectio	n drug users and with ve	olunteers.		
			Annualized (if less than	1	
Annual Salary:	x FTE:	x Months per Year:			Total

with people who	inject drugs (PWI	D), organizing harm red	s responsible for outreach ar uction kit packing events, re volunteers to assist with kit	ecruit	ing and
High school diplo Minimum qualifications: volunteers.	ma or equivalenc	y; 1 year of experience	working with injection drug u	isers	and with
in the second se			A	-	
Annual Salary:	x FTE:	x Months per Year.	Annualized (if less than 12 months):		Total
Annual Salary: \$53,430.00	x FTE: 0.65	x Months per Year: 12	A REPORT OF A R	\$	Total 34,7

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental		
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off		
Workers comp	\$	2,584.00
	Total Fringe Benefit:	124.229

Total Fringe Benefit: 124,229

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Fringe Benefit %: 25.00%
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TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 621,145

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 8.1 FTE x 12 mo.	\$800/FTE	77,760
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66/mo	2,000
Utilities	Phone, PG&E & trash.	55.618/FTE	5,406
Rent office	Additional space for 6th Street.	875/mo	10,500
		Total Occupancy:	95,666

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	ffice Supplies & Postage Office supply & Postage \$51.16/FTE x 8.1 x 12mo.		4,973
Volunteer Spt	Snacks, T-shirts, etc - \$333.34/mo.	\$333.34	4,000
Syringes	Syringes \$.15/each x 2,286,666 syringes.	\$0.15	343,000
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.7500	50,000
Alcohol Wipes	257 cases x \$38.91/case.	\$38.91	10,000
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Sterile Water	430 Cases x \$81.396/case.	\$81.396	35,000
Bagging Supplies	40 bundles x \$7.125/bundle.	\$7.125	285
Group Food	Additional food for increased groups \$600.00/wk x 50 wks.	600.00/wk	30,000
Outreach and Program materials	Additional expense for increase outreach \$118.14 x 50 wk.	\$118.14	5,907
	Total	Materials & Supplies:	550,665

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 8.1FTE.	\$86.75/ FTE	8,432
Offsite storage	Records storage \$4.98/FTE x 8.1 x 12 mo.	\$4.98/FTE	484
Travel	Vehicle Fuel.	\$83.33/mo	1,000
Travel	Vehicle Repairs.	\$83.33/mo	1,000
		Total General Operating:	10.916

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,etc	\$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$107,690/yr	107,690
	Total Cons	sultants/Subcontractors:	545,696
	TOTAL C	PERATING EXPENSES:	1,202,943

TOTAL DIRECT COSTS: 1,824,088

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: 182,409

TOTAL EXPENSES: 2,006,497

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Appendix # B-1v Page # 1 Fiscal Year(s) 25-26 Funding Notification Date 12/21/2018

		S	ERVICE M	ODES			
Personnel Expenses	Syringe Access Coordination Purchas	& Bulk					Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	-	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	-	0%	147,580
Total General Operating	12,000	100%	-	0%	-	0%	12,000
Total Operating Expenses	192,580	100%	-	0%	-	0%	192,580
Total Direct Expenses	192,580	100%	-	0%	-	0%	192,580
Indirect Expenses 10.00%	19,258	100%		0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%	-	0%	211,838
Units of Service (UOS) per Service Mode	12			-		(reduin	12
Cost Per Unit of Service by Service Mode		EXE	-				L. H. B. Star
Unduplicated Clients (UDC) per Service Mode	N/A	ELX 2		11.72			

Contractor Name San Fancisco AIDS Foundation	Appendix #:	B-1v
Program Name: HIV Syringe Access & Disposal Services	Fiscal Year:	25-26

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Rent for 6th street location, partial allocation.	25,000	25,000
Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$250/mo	3,000
Utilities	Phone, water, PG&E, allocated for 6th street.	416.67/mo	5,000
		Total Occupancy:	33,000

Materials & Supplies:

Expense item	Brief Description	Rate	Cost	
Syringes	366,666 syringes @ \$.15 each.	\$0.15	55,000	
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000	
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000	
Sterile Water	185 Cases x \$81.081/case.	\$81.081	15,000	
Misc Exchange supplies	Turniquests, bandaids, ensure.	\$215/mo	2,580	
Condons & Lube	16,666 Lube packets @ \$.75 each.	\$0.750	12,500	
	\$192.307/week for location snack/group food x			
Group food/snacks	52 weeks.	\$192.307	10,000	
Incentives	1250 incentives @ \$10 each.	\$10.00	12,500	
	Total M	Aterials & Supplies:	147.580	

General Operating:

Expense Item	Brief Description	Rate	Cost
	Auto fuel, repairs, maintenance for delivery		
Repairs and maintenance	vehicles.	83.33/mo	1,000
Insurance	Allocated amount of liability/umbrella insurance.	83.33/mo	1,000
	Prorated janitorial services for 6th street		
Janitorial	location.	\$833.33/mo	10,000
	T	otal General Operating:	12,000

TOTAL OPERATING EXPENSES: 192,580

TOTAL DIRECT COSTS: 192,580

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 109	6
of total direct costs.	19,258

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838

Appendix # B-2c Page # 1 Fiscal Year(s) 19-20 Funding Notification Date 12/21/2018

	SERVICE MODES						1
Personnel Expenses	HYA Wrap Around & Disposal Services						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	153,559	100%	-	0%	-	0%	153,559
Total Operating Expenses	153,559	100%] -	0%	-	0%	153,559
Total Direct Expenses	153,559	100%	-	0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%		0%		0%	15,355
TOTAL EXPENSES	168,914	100%	<u> </u>	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	1	-	Party and	- 1	8 10	12
Cost Per Unit of Service by Service Mode	14,076.17	2	-	1	- 1		Jac 19 1 1 1
Unduplicated Clients (UDC) per Service Mode	N/A	The second				The second	
Contractor Name	San Francisco AIDS Foundaiton	Appendix #:	B-2c				
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Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	19-20				

Consultants/Subcontractors:

onsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
	Total Con	sultants/Subcontractors:	153,559
	TOTAL	OPERATING EXPENSES:	153,559
		TOTAL DIRECT COSTS:	153,559

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	15,355

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,355

TOTAL EXPENSES: 168,914

Appendix # B-2d Page # 1 Fiscal Year(s) 20-21 12/21/2018

Funding Notification Date

		5	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal S						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	153,559	100%	-	0%	-	0%	153,559
Total Operating Expenses	153,559	100%	-	0%	-	0%	153,559
Total Direct Expenses	153,559	100%	- 1	0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%		0%		0%	15,355
TOTAL EXPENSES	168,914	100%	-	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	and the set	-				12
Cost Per Unit of Service by Service Mode	14,076.17		-		-	RAL R	Thore will be at
Unduplicated Clients (UDC) per Service Mode	N/A	The state				A STATE	

Contractor Name San Francisco AIDS F	oundaiton	Appendix #:	B-2d
Program Name: HIV Syringe Access &	Disposal Services	Fiscal Year:	20-21

Consultants/Subcontractors:

sultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
	Total Consu	Itants/Subcontractors:	153,559
	TOTAL OF	PERATING EXPENSES:	153,559

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	l.
of total direct costs.	15,355

Indirect Rate:	10%
TOTAL INDIRECT COSTS:	15,355

TOTAL EXPENSES: 168,914

Appendix # B-2e Page # 1 Fiscal Year(s) 21-22 Funding Notification Date 12/21/2018

		5	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	153,559	100%	-	0%	-	0%	153,559
Total Operating Expenses	153,559	100%	-	0%	-	0%	153,559
Total Direct Expenses	153,559	100%		0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%		0%		0%	15,355
TOTAL EXPENSES	168,914	100%	<u> </u>	0%		0%	168,914
Units of Service (UOS) per Service Mode	12	1200	-	1271	-1	SAL I	12
Cost Per Unit of Service by Service Mode	14,076.17	The second	-	and the second	-		
		and the second second		and the second		State of the local division in the local div	

Contractor Name	San Francisco AIDS Foundaiton	Appendix #:	B-2e
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	21-22

Consultants/Subcontractors:

sultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
	Total Con	sultants/Subcontractors:	153,559
	TOTAL	OPERATING EXPENSES:	153,559

4) INDIRECT COSTS

an Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	
total direct costs.		15,355
l direct costs.		15,3

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,355

TOTAL EXPENSES: 168,914

Appendix # B-2f Page # 1 Fiscal Year(s) 22-23 12/21/2018

Funding Notification Date

UOS COST ALLOCATION BY SERVICE MODE

		5	SERVICE M	ODES			7
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	153,559	100%	-	0%	-	0%	153,559
Total Operating Expenses	153,559	100%	-	0%	-	0%	153,559
Total Direct Expenses	153,559	100%	-	0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%		0%		0%	15,355
TOTAL EXPENSES	168,914	100%	<u> </u>	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	12 12 1	-	ALC: N	- 1		12
Cost Per Unit of Service by Service Mode		A LEAST	-		-		TONI REPRESE
	N/A	and the second sec		and the second second			

Contractor Name	San Francisco AIDS Foundaiton	Appendix #:	B-2f
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	22-23

Consultants/Subcontractors:

nsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
	Total Con	sultants/Subcontractors:	153,559
	TOTAL	OPERATING EXPENSES:	153,559
		TOTAL DIRECT COSTS:	153,559

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
an Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
f total direct costs.	15,355
	_

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,355

TOTAL EXPENSES: 168,914

Appendix # B-2g Page # 1 Fiscal Year(s) 23-24 Funding Notification Date 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

		5	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal S						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	153,559	100%	-	0%	-	0%	153,559
Total Operating Expenses	153,559	100%	-	0%	-	0%	153,559
Total Direct Expenses	153,559	100%	-	0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%		0%		0%	15,355
TOTAL EXPENSES	168,914	100%	-	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	ALC: N		and have	-	and the	12
Cost Per Unit of Service by Service Mode	14,076.17	1			-		
Unduplicated Clients (UDC) per Service Mode	N/A					The second	

Contractor Name	San Francisco AIDS Foundaiton	Appendix #:	B-2g
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	23-24

Consultants/Subcontractors:

nsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
	Total Con	sultants/Subcontractors:	153,555
	TOTAL	OPERATING EXPENSES:	153,559
		TOTAL DIRECT COSTS:	153,559

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	15,355

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,355

TOTAL EXPENSES: 168,914

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26

Funding Source General Fund

Appendix # B-2h Page # 1 Fiscal Year(s) 24-25 Funding Notification Date 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

		5	SERVICE M	ODES			7
Personnel Expenses	HYA Wrap A Disposal S						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	153,559	100%	-	0%	-	0%	153,559
Total Operating Expenses	153,559	100%	-	0%	-	0%	153,559
Total Direct Expenses	153,559	100%	-	0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%		0%		0%	15,355
TOTAL EXPENSES	168,914	100%	-	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	200	-	and a	- 1	12	12
Cost Per Unit of Service by Service Mode	14,076.17		-	Sector and	-		
Unduplicated Clients (UDC) per Service Mode	N/A			a Rand Par		al mar and	

Contractor Name	San Francisco AIDS Foundaiton	Appendix #:	B-2h
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	24-25

Consultants/Subcontractors:

nsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
			_
	Total Con	sultants/Subcontractors:	153,559
	TOTAL	OPERATING EXPENSES:	153,559
		TOTAL DIRECT COSTS:	153,559

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract	seeks reimbursement at a rate of 10%
of total direct costs.	15,35

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,355

TOTAL EXPENSES: 168,914

Appendix # Page # Fiscal Year(s) Funding Notification Date

B-2i 1 25-26 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

		5	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal S						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	153,559	100%	-	0%		0%	153,559
Total Operating Expenses	153,559	100%	-	0%	-	0%	153,559
Total Direct Expenses	153,559	100%	-	0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%		0%		0%	15,355
TOTAL EXPENSES	168,914	100%	-	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	al person	- 1	- Aller	-	1000	12
Cost Per Unit of Service by Service Mode			-		- 1	A NAME	P State No. 1 M
Unduplicated Clients (UDC) per Service Mode		CHOICE OF		452.6			

14

Contractor Name	San Francisco AIDS Foundaiton	Appendix #:	B-2i
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	25-26

Consultants/Subcontractors:

nsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
	Total Consu	ultants/Subcontractors:	153,55
	TOTAL O	PERATING EXPENSES:	153,55

TOTAL OPERATING EXPENSES:	153,559
TOTAL DIRECT COSTS:	153,559

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	15,355
· · · · · · · · · · · · · · · · · · ·	

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,355

TOTAL EXPENSES: 168,914

Appendix # Page # Fiscal Year(s) Funding Notification Date

B-3b 1 18-19 12/21/2018

	UOS COST	ALLOCATION	BY SERVICE MODE
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				SERVICE MO	DES			1
Personnel Expenses		Syringe A Servic		Lounge Se	rvices			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,00
Director, SAS	0.20	9,000	50%	9,000	50%	-	0%	18,000
Associate Director, 6th Street HRC	1.00	31,500	50%	31,500	50%	-	0%	63,00
Mobile Health Educator	7.75	213,125	50%	213,125	50%	-	0%	426,25
Mobile Health Educator	0.50	13,750	50%	13,750	50%	-	0%	27,500
Health Educator/Inventory Team Lead	1.00	27,500	50%	27,500	50%	-	0%	55,000
Inventory Associate/Health Educator	1.00	27,500	50%	27,500	50%	-	0%	55,000
Total FTE & Total Salaries	11.60	335,525	50%	335,525	50%	-	0%	671,050
Fringe Benefits	25.00%	83,881	50%	83,882	50%		0%	167,763
Total Personnel Expenses		419,406	50%	419,407	50%	-	0%	838,813
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
Total Occupancy		16.607	50%	16.607	50%	-	0%	33,214
Total Materials and Supplies		12,282	50%	12.282	50%	-	0%	24,564
Total General Operating		6,250	50%	6,250	50%	-	0%	12,500
Total Operating Expenses		35,139	50%	35,139	50%		0%	70,278
Total Direct Expenses		454,545	50%	454,546	50%	-	0%	909.091
Indirect Expenses	10.00%	45,454	50%	45,455	50%		0%	90,909
TOTAL EXPENSES		499,999	50%	500,001	50%	-	0%	1,000,000
Units of Service (UOS) per Sen	vice Mode	1,888	GINE 1	1,924	12=20 ¹²	-	-	3,812
Cost Per Unit of Service by Ser		264.83	Contraction of the	259.88		-	-	5,011
	NOC	31,341	100	11,475			AC ALCON	42,810
	and a second							Kev. 07/1

Contractor Name San Francisco AIDS Foundaiton Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-3b
Fiscal Year:	18-19

1a) SALARIES

Staff Position	1: V.P Programs	s & Services				
				gement and evaluation of the		
				reate a service delivery cont		
		he current health ar	nd well-being need	s, including HIV needs of ga	y&b	isexual
Brief description of job duties						30
				ness or related disciplines. F		
				apacity, especially in HIV pre	eventi	on and
	demonstrated p	orogram manageme	ent and program de	evelopment experience.		
Minimum qualifications	S:					
					1	
			x Months per	Annualized (if less than		
Annual Salary:		x FTE:	Year:	12 months):		Total
, and a contrary.	\$203,000.00	0.10	12	1	\$	20,30

Staff Position 2	2: Director, Beha	avorial Health Ser	vices		-	
				ement and evaluation of the	prog	ram
				eate a service delivery conti		
				s, including HIV needs of ga		
Brief description of job duties		io cuitont noului un	ia non bonig nood	-,	, and	biobridai
		in psychology, soc	ial sciences, busin	ess or related discipline; thre	e ve	ars
				V prevention and demonstra		
Minimum qualifications	· management a	nd program develor	ment experience.	Protoniuon and comonolid	ted pi	ogium
Minimum quaincations	, management a		x Months per	Annualized (if less than	-	
Assuel Colory		x FTE:				Tetal
Annual Salary:	¢100.000.00		Year: 12	12 months):		Total
	\$120,000.00	0.05	12	1	\$	6,00
					_	
Staff Position 3	· Director SAS					
	Provides oversi strategic goals i partnerships wit	ght and manageme in alignment with ag th other HIV/AIDS a	ency and city obje nd Harm Reductio	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for	effect sche	tive duling and
	Provides oversigned as the strategic goals is partnerships with training full-time exchange supple with waste remote as the strategic supple with waste remote as the strategic supple with waste remote the strategic supple as the strategic supple the strategic supple training full-time training full-time trainin	ght and manageme in alignment with ag th other HIV/AIDS a and temporary sta lies. Organizes rem	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard	ctives. Builds and maintains	effect schee le for nates	tive duling and purchasin removal
Brief description of job duties	Provides oversi strategic goals i partnerships wit training full-time exchange suppl with waste remo	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety	effect scheo le for nates proto	tive duling and purchasir removal cols.
	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo- : Three years exp	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- perience working wi	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates	effect scheo le for nates proto	tive duling and purchasir removal cols.
	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- portience working with the ment, supervision	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun	effect scheo le for nates proto	tive duling and purchasir removal cols.
	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo- : Three years exp program manag certification or b	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- perience working wi	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer ertification on the j	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordir upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob.	effect scheo le for nates proto	tive duling and purchasir removal cols.
Brief description of job duties	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo- : Three years exp program manag certification or b	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- perience working with the ment, supervision the willing to obtain c	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer ertification on the j x Months per	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob.	effect scheo le for nates proto	tive duling and purchasir removal cols.
Brief description of job duties	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo- training full-time program manage certification or b	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- perience working with rement, supervision re willing to obtain c x FTE:	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer ertification on the j x Months per Year:	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordir upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob.	effect sched le for nates proto s Deg selor	tive duling and purchasir removal cols.
Brief description of job duties Minimum qualifications	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo- : Three years exp program manag certification or b	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- perience working with the ment, supervision the willing to obtain c	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer ertification on the j x Months per	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob.	effect sched le for nates proto s Deg selor	tive duling and purchasir removal cols. ree with Total
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa perience working with tement, supervision re willing to obtain c x FTE: 0.20	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer ertification on the j x Months per Year: 12	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months):	effect sched le for nates proto s Deg selor	tive duling and purchasir removal cols. ree with Total
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa perience working with tement, supervision the willing to obtain of x FTE: 0.20	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer ertification on the j x Months per Year: 12 RC	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months): 1	effect scher le for nates proto s Deg selor	tive duling and purchasir removal cols. ree with Total 18,000
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa perience working with tement, supervision the willing to obtain of x FTE: 0.20	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard are reports for com th injection and dru experience prefer ertification on the j x Months per Year: 12 RC	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months):	effect scher le for nates proto s Deg selor	tive duling and purchasir removal cols. ree with Total 18,000
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00 Associate Dire Responsibilities	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa perience working with mement, supervision re willing to obtain of x FTE: 0.20	ency and city obje nd Harm Reductio ff in appropriate ex- noval of biohazard are reports for com th injection and dru- experience prefere ertification on the j x Months per Year: 12 RC ons (schedules, lo	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months): 1	effect sched le for nates proto s Deg selor \$ 6th \$	tive duling and purchasir removal cols. ree with Total 18,000
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00 Associate Dire Responsibilities Harm Reduction	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa perience working with tement, supervision the willing to obtain of x FTE: 0.20 ector, 6th Street H include site operation of center; supervision	ency and city obje nd Harm Reductio ff in appropriate ex- noval of biohazard are reports for com th injection and dru- experience prefere ertification on the j x Months per Year: 12 RC ons (schedules, lo g health educators	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months): 1	effect sched le for nates proto s Deg selor \$ 6th \$	tive duling and purchasir removal cols. ree with Total 18,000 Street ing health
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00 Associate Dire Responsibilities Harm Reduction education (e.g. o	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- berience working with ement, supervision re willing to obtain or x FTE: 0.20 ector, 6th Street H include site operation overdose prevention	ency and city obje nd Harm Reductio ff in appropriate ex- noval of biohazard are reports for com th injection and dru- experience prefere ertification on the j x Months per Year: 12 RC ons (schedules, lo g health educators n, vein care) and re	ctives. Builds and maintains in agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months): 1 gistics, QA, programming) of s, volunteers, and interns; cou	effect scheide for aates proto s Deg selor \$ 6th \$	tive duling and purchasir removal cols. ree with Total 18,000 Street ing health
Brief description of job duties Minimum qualifications Annual Salary: Staff Position 4:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00 \$90,000.00 \$90,000.00 \$90,000.00	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- perience working with ement, supervision we willing to obtain of x FTE: 0.20 ector, 6th Street H include site operation overdose prevention lopment; managing	ency and city obje nd Harm Reductio ff in appropriate ex- noval of biohazard are reports for com- th injection and dru- experience prefer ertification on the j x Months per Year: 12 RC ons (schedules, lo g health educators n, vein care) and re syringe access, di	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsible waste from sites and coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months): 1 gistics, QA, programming) of , volunteers, and interns; con eferrals; program design, fac sposal, and lounge space; lii	effect scheide for nates proto s Deg selor \$ 6th \$ nducti ilitation	tive duling and purchasir removal cols. ree with Total 18,000 Street ing health m, and
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo- Three years exp program manag certification or b \$90,000.00 Associate Dire Responsibilities Harm Reduction education (e.g. o curriculum devel participants to H	ght and manageme in alignment with ag th other HIV/AIDS a a and temporary sta lies. Organizes rem oval company, prepa- perience working wi ement, supervision re willing to obtain c x FTE: 0.20 ector, 6th Street H include site operation overdose prevention lopment; managing IIV/HCV testing and	ency and city obje nd Harm Reductio ff in appropriate ex- noval of biohazard are reports for com- th injection and dru- experience prefer ertification on the j <u>x Months per</u> Year: 12 <u>RC</u> ons (schedules, lo g health educators n, vein care) and re syringe access, di linkage to care; and	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months): 1 gistics, QA, programming) of volunteers, and interns; con eferrals; program design, fac sposal, and lounge space; lin and providing crisis interventio	effect schee le for nates proto s Deg selor \$ f 6th \$ f 6th \$ f 6th \$ f 6th \$ f 6th \$ f f f f f f f f f f f f f f f f f f f	tive duling and purchasir removal cols. ree with Total 18,000 Street ing health m, and pport.
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Brief description of job duties Minimum qualifications Annual Salary: Staff Position 4: Brief description of job duties:	Provides oversis strategic goals i partnerships wit training full-time exchange suppl with waste remo: Three years exp program manag certification or b \$90,000.00 \$90,000 \$90,000.00 \$90,0	ght and manageme in alignment with ag th other HIV/AIDS a e and temporary sta lies. Organizes rem oval company, prepa- berience working with ement, supervision re willing to obtain of x FTE: 0.20 ector, 6th Street H include site operation overdose prevention lopment; managing IIV/HCV testing and erience working with ates Degree prefer f harm reduction pro- of HIV/HCV disease	ency and city obje nd Harm Reductio ff in appropriate ex- noval of biohazard are reports for com- th injection and dru- experience prefer ertification on the j <u>x Months per Year:</u> 12 <u>RC</u> ons (schedules, lo g health educators n, vein care) and re syringe access, di linkage to care; an drug users, highly red, experience us actices and princip prevention and tre gement experience	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsible waste from sites and coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months): 1 gistics, QA, programming) of volunteers, and interns; con aferrals; program design, fac sposal, and lounge space; lin ind providing crisis intervention marginalized, or homeless p ing motivational interviewing les, experience doing health eatment. Supervisory experience e required.	effect schee le for nates proto s Deg selor \$ 6th \$ f 6th \$ f f f f f f f f f f f f f f f f f f f	tive duling and purchasir removal cols. ree with Total 18,000 Street ing health m, and oport. ations strong cation.

Staff Position 5: Health E		- h White - duranting	/		
referrals;	program design, facilitati	on, and curriculum	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	nge ad	cess,
Minimum,	1-3 years experiencing	working with drug u	users. Associates Degree pre adge of HIV/HCV prevention/		
		x Months per	Annualized (if less than		
Annual Salary:	x FTE:	Year:	12 months):		Total
\$55,000	0.00 7.75	12	1	\$	426,25

Staff Position 6: Mobile	e Health Educator			
HIV/H(encam	CV testing and linkage to ca pment outreach; overseein	are; harm reduction	ose prevention; vein care; ref counseling) through mobile a utreach volunteers; and prov	and
Brief description of job duties: interve	ntion support.			
Minimum qualifications: reduct			sers. Associates Degree pre dge of HIV/HCV prevention/	
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$55,	000.00 0.50	12	1	\$ 27,500

referrals; suppo	s include conductin orts syringe access, age to care; and pro	g health education disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v age space; linking participants vention support. Supports mo supply inventory. 	s to HIV/	HCV
Minimum, 1-3 y Minimum qualifications: reduction, motiv			sers. Associates Degree pre edge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		otal
\$55,000.00	1.00	12	1	\$	55,00

referrals; support testing and linkag Street sites; support Brief description of job duties: maintenance and Minimum, 1-3 ye	include conductin ts syringe access, ge to care; and pro ervises volunteers d transport. ars experiencing v	g health education disposal, and lour oviding crisis interv ; and assists Inven vorking with drug u	(e.g. overdose prevention, v ige space; linking participant: rention support. Supports mo itory Team Lead with supply i users. Associates Degree pre	s to HIV/HCV bile and 6th nventory ferred. Harm
Minimum qualifications: reduction, motiva	tional interviewing	skills, and knowle	edge of HIV/HCV prevention/	x preferred.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$55,000.00	1.00	12	1	\$ 55,0

Total FTE: 11.60

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	<i></i>
Social Security	\$	51,335.00
Retirement	\$	12,817.00
Medical	\$	69,321.00
Dental		
Unemployment Insurance	\$	3,489.00
Disability Insurance	\$	27,312.00
Paid Time Off		
Other (Workers Comp):	\$	3,489.00
	Total Eringo Ronofity	467 762

Total Fringe Benefit: 167,763

Total Salaries: \$

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 838,813

671,050

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Parking	Monthly parking for vans, \$1,000/mo x 8 mo.	1000	8,000
Utilities	\$1,000/mo x 8 mo.	1000	8,000
		Total Occupancy:	33,214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	547	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5each = \$6,000.		6,000
Volunteer support	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total M	aterials & Supplies:	24.564

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Monthly janitorioal svc \$750/mo.	750	9,000
Insurance	Prorated gen liability, hazzard and auto insurance.	291.67	3,500
		Tatal Canada Canada	40 500
		Total General Operating:	12,500

TOTAL OPERATING EXPENSES: 70,278

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%	
of total direct costs.	90,909

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000

Appendix # Page # B-3c 1 Fiscal Year(s) Funding Notification Date

19-20 12/21/2018

UOS COST	ALLOCATION BY	SERVICE MODE

				SERVICE MO	DES]
Personnel Expenses		Syringe A Servic		Lounge Se	rvices			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	5,250	50%	5,250	50%	-	0%	10,500
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%	-	0%	64,733
Mobile Health Educator	7.75	218,988	50%	218,988	50%	-	0%	437,976
Health Educator/Inventory Team Lead	0.50	14,129	50%	14,128	50%	-	0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	-	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	-	0%	56,513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	-	0%	680,792
Fringe Benefits	25.00%	85,099	50%	85,099	50%	-	0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%		0%	850,990
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
Total Occupancy		12,607	50%	12,607	50%	-	0%	25,214
Total Occupancy			the second s		50%		0%	24,564
		12,282	50%	12,282	5070	-	0 /0	
Total Materials and Supplies			Contraction of the local division of the loc	12,282	50%	-		
		12,282 4,161 29,050	50% 50% 50%				0% 0%	8,323 58,101
Total Materials and Supplies Total General Operating Total Operating Expenses		4,161 29,050	50% 50%	4,162 29,051	50%	-	0% 0%	8,323 58,101
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses	10.00%	4,161	50%	4,162	50% 50%	-	0%	8,323 58,101 909,091
Total Materials and Supplies Total General Operating Total Operating Expenses	10.00%	4,161 29,050 454,545	50% 50%	4,162 29,051 454,546	50% 50%	-	0% 0%	8,323 58,101
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		4,161 29,050 454,545 45,454 499,999	50% 50% 50%	4,162 29,051 454,546 45,455 500,001	50% 50% 50%	-	0% 0% 0%	8,323 58,101 909,091 90,909 1,000,000
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	ice Mode	4,161 29,050 454,545 45,454 499,999	50% 50% 50%	4,162 29,051 454,546 45,455	50% 50% 50%	-	0% 0% 0% 0%	8,323 58,101 909,091 90,909

Contractor Name San Francisco AIDS Foundaiton Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-3c	
Fiscal Year:	19-20	

1a) SALARIES

Staff Position 1						
	Responsible for	or ensuring the impl		ement and evaluation of the		
				reate a service delivery cont		
		the current health a	nd well-being need	s, including HIV needs of ga	y & b	sexual
Brief description of job duties				and the second sec		
				less or related disciplines. F		
				apacity, especially in HIV pre	eventi	on and
	demonstrated	program managem	ent and program de	evelopment experience.		
Minimum qualifications						
			x Months per	Annualized (if less than	1	
Annual Salary:		x FTE:	Year:	12 months):		Total
	\$203,000.00	0.10	12	1	\$	20,300
				A		
Staff Position 2	: Director, Beh	avorial Health Se	rvices		-	
				ement and evaluation of the	prog	am
				eate a service delivery conti		
				s, including HIV needs of gay		
Brief description of job duties			•			
		e in psychology sou	cial sciences busin	ess or related discipline; thre	e ve	ars
				V prevention and demonstra		
Minimum qualifications				· protoniusit und domonolia	too pi	ogram
initial quantum	managomenta	l program dereie	x Months per	Annualized (if less than		
Annual Salary:		x FTE:	Year:	12 months):	1.1	Total
Annual Salary.	\$120,000.00	0.05	12	1	\$	6,000
	\$120,000.00	0.05	12		φ	0,000
Staff Position 3	Provides overs	ight and manageme		sites. Develops annual depa ctives. Builds and maintains		
Staff Position 3	Provides overs strategic goals partnerships wi training full-time	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta	gency and city object and Harm Reduction aff in appropriate ex	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib	effect scheo le for	ive duling and purchasing
Staff Position 3	Provides overs strategic goals partnerships wi training full-time exchange supp	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta plies. Organizes ren	gency and city object and Harm Reduction aff in appropriate ex noval of biohazard	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir	effect schee le for nates	ive duling and purchasin removal
	Provides overs strategic goals partnerships wi training full-time exchange supp with waste remo	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta plies. Organizes ren	gency and city object and Harm Reduction aff in appropriate ex noval of biohazard	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib	effect schee le for nates	ive duling and purchasin removal
Staff Position 3: Brief description of job duties:	Provides overs strategic goals partnerships wi training full-time exchange supp with waste remo	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta olies. Organizes ren oval company, prep	gency and city obje and Harm Reduction aff in appropriate ex noval of biohazard pare reports for com	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordin pliance and maintain safety	effect scheo le for nates proto	ive duling and purchasin removal cols.
	Provides overs strategic goals partnerships wi training full-time exchange supp with waste remo	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta olies. Organizes ren oval company, prep perience working wi	gency and city object and Harm Reduction aff in appropriate ex noval of biohazard pare reports for com ith injection and dru	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir pliance and maintain safety ug users required. Associates	effect scheo le for nates proto	ive duling and purchasin removal cols.
Brief description of job duties:	Provides overs strategic goals partnerships wi training full-time exchange supp with waste reme Three years exp program manage certification or t	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta olies. Organizes ren oval company, prep perience working wi	gency and city object and Harm Reduction aff in appropriate ex noval of biohazard pare reports for com ith injection and dru n experience prefere	ctives. Builds and maintains in agencies. Responsible for ichange protocol. Responsible waste from sites and coordin upliance and maintain safety ing users required. Associates red. Must hold HIV test coun	effect scheo le for nates proto	ive duling and purchasin removal cols.
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Brief description of job duties:	Provides overs strategic goals partnerships wi training full-time exchange supp with waste remu Three years exp program manage certification or t	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta olies. Organizes rem oval company, prep perience working wi gement, supervision be willing to obtain of x FTE:	gency and city obje and Harm Reduction aff in appropriate ex noval of biohazard bare reports for com ith injection and dru n experience prefer certification on the junc x Months per Year:	ctives. Builds and maintains in agencies. Responsible for ichange protocol. Responsible waste from sites and coordin upliance and maintain safety ing users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months):	effect sched le for nates proto s Deg selor	tive duling and purchasin removal cols. ree with Total
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Brief description of job duties: Minimum qualifications:	Provides overs strategic goals partnerships wi training full-time exchange supp with waste remu Three years exp program manage certification or t	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta olies. Organizes rem oval company, prep perience working wi gement, supervision be willing to obtain of x FTE:	gency and city obje and Harm Reduction aff in appropriate ex noval of biohazard bare reports for com ith injection and dru n experience prefer certification on the junc x Months per Year:	ctives. Builds and maintains in agencies. Responsible for ichange protocol. Responsible waste from sites and coordin upliance and maintain safety ing users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months):	effect sched le for nates proto s Deg selor	tive duling and purchasin removal cols. ree with Total
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides overs strategic goals partnerships wi training full-time exchange supp with waste remu Three years exp program manage certification or to \$70,000.00	ight and manageme in alignment with ag ith other HIV/AIDS a e and temporary sta olies. Organizes rem oval company, prep perience working wi gement, supervision be willing to obtain of x FTE:	gency and city object and Harm Reduction aff in appropriate ex- noval of biohazard to bare reports for com- ith injection and dru- n experience prefer certification on the ju- x Months per Year: 12	ctives. Builds and maintains in agencies. Responsible for ichange protocol. Responsible waste from sites and coordin upliance and maintain safety ing users required. Associates red. Must hold HIV test coun ob. Annualized (if less than 12 months):	effect sched le for nates proto s Deg selor	tive duling and purchasin removal cols. ree with Total
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referra disposi	nsibilities include conducting s; program design, facilitational, and lounge space: linking	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ige access,
Brief description of job duties: providi	m 1.2 years experiencing u	L.	isers. Associates Degree pre	forrad Harm
			adge of HIV/HCV prevention/	
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$56,	513.00 7.75	12	1	\$ 437,97

Staff Position 6: Mobile Healt	h Educator			
HIV/HCV testi	ng and linkage to car outreach; overseeing	e; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and
Minimum, 1-3 Minimum qualifications: reduction, mot			sers. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	0.50	12	1	\$ 28,25

	s include conductin	g health education	(e.g. overdose prevention, v	
	age to care; and pro	oviding crisis interv	nge space; linking participants vention support. Supports mo supply inventory.	
Minimum, 1-3 y Minimum qualifications: reduction, motiv			users. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	
\$56,513.00	1.00	12	1	\$ 56,51

Staff Position 8: Inventory Asso	ciate/Health Edu	icator			
referrals; suppor testing and linka	ts syringe access, ge to care; and pro ervises volunteers	disposal, and lour	n (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo ntory Team Lead with supply	s to HIV/H bile and 6	HCV 6th
Minimum, 1-3 ye Minimum qualifications: reduction, motiva			users. Associates Degree pre edge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		
\$56,513.00	1.00	12	1	\$ 5	56,513

Total FTE: 11.55

Total Salaries: \$ 680,792

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	1.1.1.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	\$	70,326.00
Dental		
Unemployment Insurance	\$	3,540.00
Disability Insurance	\$	27,708.00
Paid Time Off		
Other (Workers Comp):	\$	3,540.00
	Total Eringo Bonofit	170 109

Total Fringe Benefit: 170,198

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	25,214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5each =\$6,000.		6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total M	Aterials & Supplies:	24,564

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorioal svc \$485.25/mo.	485.25/mo	5,823
Insurance	Prorated gen liability, hazzard and auto insurance.	208.34	2,500
	Т	otal General Operating:	8,323

TOTAL OPERATING EXPENSES: 58,101

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate	te of 10%	
of total direct costs.		90,909

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000

Appendix # B-3d Page # 1 Fiscal Year(s) 20-21 Funding Notification Date

12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES			1
Personnel Expenses		Syringe Access Services			Lounge Services			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries		Contract Total
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	5,250	50%	5,250	50%		0%	10,500
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%	-	0%	64,733
Health Educator	7.75	218,988	50%	218,988	50%	-	0%	437,976
Mobile Health Educator	0.50	14,129	50%	14,128	50%	-	0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	-	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	-	0%	56,513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	-	0%	680,792
Fringe Benefits	25.00%	85,099	50%	85,099	50%	-	0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%	-	0%	850,990
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
Total Occupancy		12,607	50%	12,607	50%	-	0%	25,214
Total Materials and Supplies		12,282	50%	12,282	50%	-	0%	24,564
Total General Operating		4,161	50%	4,162	50%	-	0%	8,323
Total Operating Expenses		29,050	50%	29,051	50%	-	0%	58,101
Total Direct Expenses		454,545	50%	454,546	50%	- 1	0%	909,091
	10.00%	45,454	50%	45,455	50%		0%	90,909
TOTAL EXPENSES		499,999	50%	500,001	50%	-	0%	1,000,000
	. Deda	1.888		2,550	and the second	- 1	Statistics.	4,438
Units of Service (UOS) per Servi					the second second second			
Units of Service (UOS) per Servi Cost Per Unit of Service by Servi		264.83	CHE MAN	196.08		-		THE REAL PROPERTY.

Contractor Name San Francisco AIDS Foundaiton Appendix # Program Name: HIV Syringe Access & Disposal Services Fiscal Year

Appendix #:	B-3d	
Fiscal Year:	20-21	

1a) SALARIES

Staff Position	1: V.P Program	s & Services			-	
	Responsible for	or ensuring the impl		ement and evaluation of the		
				reate a service delivery cont		
		the current health a	nd well-being need	s, including HIV needs of ga	y&b	isexual
Brief description of job duties						
				ess or related disciplines. F		
				apacity, especially in HIV pre	eventi	on and
		program managem	ent and program de	evelopment experience.		
Minimum qualifications	:			-		
			and the second second			
			x Months per	Annualized (if less than		
Annual Salary:		x FTE:	Year:	12 months):		Total
	\$203,000.00	0.10	12	1	\$	20,30
	Distant Date					
Staff Position 2		avorial Health Se		amont and avaluation of the		
				ement and evaluation of the		
				eate a service delivery conti s, including HIV needs of ga		
Brief description of job duties		ne current ricaltir a	id weil-beilig fields	s, meloding hiv needs of ga	y anu	DISEXUAI
		e in nevehology, sou	vial eciences huein	ess or related discipline; thre	00.00	200
				/ prevention and demonstra		
Minimum gualifications				provention and demonotid	lou p	ogram
			x Months per	Annualized (if less than		
Annual Salary:		x FTE:	Year:	12 months):		Total
,	\$120,000.00	0.05	12	1	\$	6,000
					-	-,
	partnerships wi training full-time exchange supp	th other HIV/AIDS a e and temporary sta blies. Organizes ren	and Harm Reduction off in appropriate ex noval of biohazard	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir	sche le for nates	duling and purchasin removal
Dulof dependence of ich dution		oval company, prep	are reports for com	pliance and maintain safety	proto	cols.
Brief description of job duties	Three years ex	perience working wi	ith injection and dru	g users required. Associate	Doc	roo with
				ed. Must hold HIV test coun		ree with
		be willing to obtain o			50101	
Minimum qualifications:						
			x Months per	Annualized (if less than		
Annual Salary:		x FTE:	Year:	12 months):		Total
	\$70,000.00	0.15	12	1	\$	10,500
Staff Position 4:	the second s	and a second			-	
	Associate Dire	ector, 6th Street H	RC			
	Responsibilities	s include site operat	ions (schedules, log	gistics, QA, programming) of		
	Responsibilities Harm Reduction	s include site operat n Center; supervisin	ions (schedules, log ng health educators	volunteers, and interns; con	nduct	ing health
	Responsibilities Harm Reduction education (e.g.	s include site operat n Center; supervisin overdose preventio	ions (schedules, log ng health educators n, vein care) and re	, volunteers, and interns; con ferrals; program design, fac	nduct	ing health
	Responsibilities Harm Reduction education (e.g. curriculum deve	s include site operat n Center; supervisin overdose preventio elopment; managing	ions (schedules, log ng health educators n, vein care) and re g syringe access, di	, volunteers, and interns; con ferrals; program design, fac sposal, and lounge space; li	nduct ilitatic nking	ing health n, and
Brief description of job duties:	Responsibilities Harm Reduction education (e.g. curriculum deve participants to b	s include site operat n Center; supervisin overdose preventio elopment; managing	ions (schedules, log ng health educators n, vein care) and re g syringe access, di	, volunteers, and interns; con ferrals; program design, fac	nduct ilitatic nking	ing health n, and
Brief description of job duties:	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H	s include site operat n Center; supervisin overdose preventio elopment; managing HIV/HCV testing and	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar	, volunteers, and interns; con ferrals; program design, fac sposal, and lounge space; li	nduct ilitatio nking on su	ing health n, and oport.
Brief description of job duties:	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H Five years' expo	s include site operat n Center; supervisin overdose preventio elopment; managing HIV/HCV testing and erience working with	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar n drug users, highly	, volunteers, and interns; co ferrals; program design, fac sposal, and lounge space; li nd providing crisis interventio	nduct ilitationking on sup	ing health n, and oport. ations
Brief description of job duties:	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H Five years' expo required. Associ understanding of	s include site operat n Center; supervisin overdose preventio elopment; managing HIV/HCV testing and erience working with ciates Degree prefer of harm reduction pr	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar n drug users, highly red, experience usi ractices and princip	, volunteers, and interns; co ferrals; program design, fac sposal, and lounge space; li ad providing crisis intervention marginalized, or homeless ing motivational interviewing les, experience doing health	nduct ilitationking on sup oopul and educ	ing health on, and oport. ations strong ation.
	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H Five years' expo required. Associ understanding of Understanding of	s include site operat n Center; supervisin overdose preventio elopment; managing HIV/HCV testing and erience working with states Degree prefer of harm reduction pr of HIV/HCV disease	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar n drug users, highly red, experience usi ractices and princip e prevention and tre	, volunteers, and interns; co ferrals; program design, fac sposal, and lounge space; li ad providing crisis intervention marginalized, or homeless ing motivational interviewing les, experience doing health atment. Supervisory experie	nduct ilitationking on sup oopul and educ	ing health on, and oport. ations strong ation.
Brief description of job duties: Minimum qualifications:	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H Five years' expo required. Associ understanding of Understanding of	s include site operat n Center; supervisin overdose preventio elopment; managing HIV/HCV testing and erience working with states Degree prefer of harm reduction pr of HIV/HCV disease	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar n drug users, highly red, experience us ractices and princip e prevention and tre agement experience	, volunteers, and interns; co aferrals; program design, fac sposal, and lounge space; li ad providing crisis intervention marginalized, or homeless ing motivational interviewing les, experience doing health atment. Supervisory experience a required.	nduct ilitationking on sup oopul and educ	ing health on, and oport. ations strong ation.
Minimum qualifications:	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H Five years' expo required. Associ understanding of Understanding of	s include site operat in Center; supervisin overdose preventio elopment; managing HIV/HCV testing and erience working with itates Degree prefer of harm reduction pr of HIV/HCV disease udgeting, and mana	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar n drug users, highly red, experience us ractices and princip p prevention and tre agement experience x Months per	, volunteers, and interns; co aferrals; program design, fac sposal, and lounge space; li ad providing crisis intervention marginalized, or homeless ing motivational interviewing les, experience doing health atment. Supervisory experience a required. Annualized (if less than	nduct ilitationking on sup oopul and educe ence,	ing health in, and oport. ations strong ation. program
	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H Five years' expo required. Associ understanding development, b	s include site operat in Center; supervisin overdose preventio elopment; managing HIV/HCV testing and erience working with dates Degree prefer of harm reduction pr of HIV/HCV disease udgeting, and mana x FTE:	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar n drug users, highly red, experience us ractices and princip e prevention and tre agement experience x Months per Year:	volunteers, and interns; co ferrals; program design, fac sposal, and lounge space; li ad providing crisis intervention marginalized, or homeless ing motivational interviewing les, experience doing health atment. Supervisory experies a required. Annualized (if less than 12 months):	nduct ilitationking on sup oopul and educe ence,	ing health in, and oport. ations strong ation. program Fotal
Minimum qualifications:	Responsibilities Harm Reduction education (e.g. curriculum deve participants to H Five years' expo required. Associ understanding of Understanding of	s include site operat in Center; supervisin overdose preventio elopment; managing HIV/HCV testing and erience working with itates Degree prefer of harm reduction pr of HIV/HCV disease udgeting, and mana	ions (schedules, log ng health educators n, vein care) and re g syringe access, di d linkage to care; ar n drug users, highly red, experience us ractices and princip e prevention and tre agement experience x Months per	, volunteers, and interns; co aferrals; program design, fac sposal, and lounge space; li ad providing crisis intervention marginalized, or homeless ing motivational interviewing les, experience doing health atment. Supervisory experience a required. Annualized (if less than	nduct ilitationking on sup oopul and educe ence,	ing health in, and oport. ations strong ation. program

Staff Position 5: Health Educate	or				
		health education	(e.g. overdose prevention, ve	ein c	are) and
referrals; program	n design, facilitation	on, and curriculum	development; supports syrin	gea	ccess,
			V/HCV testing and linkage to	care	; and
Brief description of job duties: providing crisis in	ntervention suppor	t.			
Bher description of job duties.		x Months per	Annualized (if less than		
Annual Salary:	x FTE:	Year:	12 months):		Total
\$56,513.00	7.75	12	1	\$	437,9
Staff Position 6: Mobile Health E					
			se prevention; vein care; ref		s to
			counseling) through mobile a		
		a team of street of	utreach volunteers; and prov	iding	crisis
Brief description of job duties: intervention supp	and the first firs				
			sers. Associates Degree pre		
Minimum qualifications: reduction, motiva	tional interviewing			tx pre	eferred.
	400 Lander 170	x Months per	Annualized (if less than		
Annual Salary:	x FTE:	Year:	12 months):		Total
\$56,513.00	0.50	12	1	\$	28,2
Staff Position 7: Health Educato	r/Inventory Tear	n Lead			
			(e.g. overdose prevention, v	ein c	are) and
referrals; support	s syringe access,	disposal, and loun	ge space; linking participants	to H	IV/HCV
testing and linkag	ge to care; and pro	viding crisis interv	ention support. Supports mo	bile a	and 6th
Brief description of job duties: Street sites; supe	rvises volunteers;	and coordinates s	upply inventory.		
			sers. Associates Degree pre	ferre	d. Harm
Minimum gualifications: reduction, motiva					
		x Months per	Annualized (if less than		
Annual Salary:	x FTE:	Year:	12 months):		Total
				-	1.0.4441
	1.00	12	1	\$	56.5
\$56,513.00	1.00	12	1	\$	56,5
\$56,513.00			1	\$	56,5
\$56,513.00 Staff Position 8: Inventory Assoc	ciate/Health Edu	cator	,	-	
\$56,513.00 Staff Position 8: Inventory Assoc Responsibilities	ciate/Health Edu include conducting	cator g health education	(e.g. overdose prevention, v	ein c	are) and
\$56,513.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support	ciate/Health Edu include conducting s syringe access,	cator health education disposal, and loun	(e.g. overdose prevention, voge space; linking participants	ein c	are) and
\$56,513.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support testing and linkag	ciate/Health Edu include conducting is syringe access, ge to care; and pro	cator health education disposal, and loun viding crisis intervo	(e.g. overdose prevention, vo ge space; linking participants ention support. Supports mol	ein c to H	are) and IIV/HCV and 6th
\$56,513.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support testing and linkag Street sites; supp	ciate/Health Edu include conducting is syringe access, ge to care; and pro ervises volunteers;	cator health education disposal, and loun viding crisis intervo	(e.g. overdose prevention, voge space; linking participants	ein c to H	are) and IIV/HCV and 6th
\$56,513.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support testing and linkag Street sites; supe Brief description of job duties: maintenance and	ciate/Health Edu include conducting is syringe access, ge to care; and pro ervises volunteers; I transport.	cator g health education disposal, and loun viding crisis interve and assists Invent	(e.g. overdose prevention, vo ge space; linking participants ention support. Supports mol ory Team Lead with supply in	ein c s to H bile a nven	are) and IIV/HCV and 6th tory
\$56,513.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support testing and linkag Street sites; supe Brief description of job duties: maintenance and	ciate/Health Edu include conducting s syringe access, ge to care; and pro ervises volunteers; I transport. ars experiencing w	cator g health education disposal, and loun viding crisis interve and assists Invent orking with drug us	(e.g. overdose prevention, v ge space; linking participants ention support. Supports mol ory Team Lead with supply in sers. Associates Degree pref	ein c s to H bile a nven	are) and IIV/HCV Ind 6th tory d. Harm

x Months per Annualized (if less than Annual Salary: x FTE: Year: 12 months): Total \$56,513.00 1.00 12 1 \$ 56,513

> 11.55 Total FTE:

Total Salaries: \$ 680,792

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.) Cost Component

a a mponioni		
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	\$	70,326.00
Dental		
Unemployment Insurance	\$	3,540.00
Disability Insurance	\$	27,708.00
Paid Time Off		
Other (Workers Comp):	\$	3,540.00
	Total Fringe Benefit	170 198

Total Fringe Benefit: 170,198

> Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	25,214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5each = \$6,000.		6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total M	Materials & Supplies:	24.564

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorioal svc \$485.25/mo.	485.25/mo	5,823
Insurance	Prorated gen liability, hazzard and auto insurance.	208.34	2,500
	To	otal General Operating:	8,323

TOTAL OPERATING EXPENSES: 58,101

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

		Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10%
of total direct costs.	90,90	al direct costs.

Indirect Rate: 10%
TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000

Appendix # B-3e Page # 1 Fiscal Year(s) 21-22 Funding Notification Date 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES			1
Personnel Expenses		Syringe A Servic		Lounge Se	rvices			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	5,250	50%	5,250	50%	-	0%	10,500
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%	-	0%	64,733
Health Educator	7.75	218,988	50%	218,988	50%	-	0%	437,976
Mobile Health Educator	0.50	14,129	50%	14,128	50%	-	0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	-	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	-	0%	56,513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	-	0%	680,792
Fringe Benefits	25.00%	85,099	50%	85,099	50%	-	0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%	-	0%	850,990
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
Operating Expenses Total Occupancy		Expenditure 12,607	% 50%	Expenditure 12,607	% 50%	xpenditur -	% 0%	Contract Total 25,214
Operating Expenses Total Occupancy Total Materials and Supplies					the second s			25,214
Total Occupancy Total Materials and Supplies		12,607	50%	12,607	50%	-	0%	25,214 24,564
Total Occupancy		12,607 12,282	50% 50%	12,607 12,282	50% 50%	-	0% 0%	()
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses		12,607 12,282 4,161	50% 50% 50%	12,607 12,282 4,162	50% 50% 50%	-	0% 0% 0%	25,214 24,564 8,323 58,101
Total Occupancy Total Materials and Supplies Total General Operating	10.00%	12,607 12,282 4,161 29,050	50% 50% 50% 50%	12,607 12,282 4,162 29,051	50% 50% 50% 50%	- - -	0% 0% 0%	25,214 24,564 8,323 58,101 909,091
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses	10.00%	12,607 12,282 4,161 29,050 454,545	50% 50% 50% 50%	12,607 12,282 4,162 29,051 454,546	50% 50% 50% 50%	- - -	0% 0% 0% 0%	25,214 24,564 8,323 58,101
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses		12,607 12,282 4,161 29,050 454,545 45,454 499,999	50% 50% 50% 50% 50%	12,607 12,282 4,162 29,051 454,546 45,455	50% 50% 50% 50% 50%	-	0% 0% 0% 0%	25,214 24,564 8,323 58,101 909,091 90,909 1,000,000
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	rice Mode	12,607 12,282 4,161 29,050 454,545 45,454 499,999	50% 50% 50% 50% 50%	12,607 12,282 4,162 29,051 454,546 45,455 500,001	50% 50% 50% 50% 50%		0% 0% 0% 0%	25,214 24,564 8,323 58,101 909,091 90,909

Contractor Name San Francisco AIDS Foundaiton Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-3e
Fiscal Year:	21-22

1a) SALARIES

st	ructure and provis	sion of professio	nal oversight to c	ement and evaluation of the reate a service delivery conti s, including HIV needs of gay	nuum that is
M	aster's degree in i	psychology, soc	ial services, busin	ess or related disciplines. R	equirements
al: de	so include three y	ears' experience	e in supervisory ca	apacity, especially in HIV pre evelopment experience.	
al	so include three y	ears' experience	e in supervisory ca	apacity, especially in HIV pre evelopment experience.	vention and
al: de	so include three y	ears' experience	e in supervisory ca nt and program de	apacity, especially in HIV pre	vention and

structure and pro	ovision of profession	onal oversight to ci	ement and evaluation of the reate a service delivery contri s, including HIV needs of gay	nuum that is
	supervisory capaci	ty, especially in HI	ess or related discipline; thre V prevention and demonstra	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$120,000.00	0.05	12	1	\$ 6,000

Staff Position 3: Director, SAS				
strategic goals in partnerships with training full-time a exchange supplie	alignment with ag other HIV/AIDS a and temporary sta as. Organizes ren	gency and city obje and Harm Reduction iff in appropriate en noval of biohazard	e sites. Develops annual depa actives. Builds and maintains on agencies. Responsible for xchange protocol. Responsib waste from sites and coordir npliance and maintain safety	effective scheduling and le for purchasin nates removal
			ug users required. Associate rred. Must hold HIV test coun	
	willing to obtain o	certification on the		selor
certification or be	willing to obtain o	x Months per		selor
certification or be	x FTE:		job.	Total

	: Associate Director, 6th Street HRC				
Harm Reducti education (e.g curriculum de	on Center; supervisi a. overdose preventio velopment; managing	ng health educator on, vein care) and g syringe access, o	ogistics, QA, programming) o s, volunteers, and interns; co referrals; program design, fa disposal, and lounge space; l and providing crisis interventi	onducting heal cilitation, and linking	
required. Asso understanding	ociates Degree prefe of harm reduction p of HIV/HCV diseas	rred, experience u ractices and princi e prevention and to	y marginalized, or homeless sing motivational interviewing ples, experience doing healt reatment. Supervisory experi ce required.	g and strong h education.	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total	
\$64,733.00	1.00	12	1	\$ 64,73	

refe	sponsibilities in errals; program posal, and lour	nclude conducting n design, facilitation nge space: linking	on, and curriculum participants to HI	(e.g. overdose prevention, vo development; supports syrin V/HCV testing and linkage to	ge a	ccess,
Mir	nimum, 1-3 yea	ars experiencing w	orking with drug u	sers. Associates Degree pre dge of HIV/HCV prevention/		
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$	56,513.00	7.75	12	1	\$	437,976

Staff Position 6: Mobile Healt				
HIV/HCV testi	ng and linkage to car outreach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and
Minimum, 1-3 Minimum qualifications: reduction, mo			sers. Associates Degree preedge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	0.50	12	1	\$ 28,257

referrals; suppo	s include conductin rts syringe access, age to care; and pro	g health education disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v age space; linking participants vention support. Supports mo supply inventory. 	s to HIV/HCV
Minimum, 1-3 ye Minimum qualifications: reduction, motiv			sers. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,51

referrals; suppor testing and linkag Street sites; support Brief description of job duties: maintenance and	include conductin ts syringe access, ge to care; and pro ervises volunteers t transport.	g health education disposal, and lour oviding crisis interv ; and assists Inver	 (e.g. overdose prevention, v ge space; linking participants rention support. Supports mo itory Team Lead with supply in users. Associates Degree pre- 	s to HIV/HCV bile and 6th nventory
Minimum qualifications: reduction, motiva				
Annual Salary:	x FTE:		Annualized (if less than 12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,5

Total FTE: 11.55 Total Salaries: \$

1b) EMPLOYEE FRINGE BENEFITS:

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(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)
Component
Cost

component	COSL	
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	\$	70,326.00
Dental		
Unemployment Insurance	\$	3,540.00
Disability Insurance	s	27,708.00
Paid Time Off		
Other (Workers Comp):	\$	3,540.00
	Total Fringe Benefit:	170,198

Fringe Benefit %: 25.00%

-			the second s	and the second se	the second s
Γ	TOTAL S	SALARIES	& EMPLOYEE	FRINGE BENEFITS:	850,990

680,792

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	25.214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5each =\$6,000.		6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total I	Materials & Supplies:	24.564

General Operating:

Expense Item					Cost	
Janitorial	Prorated Monthly janitorioal svc \$485.25/mo.	485.25/mo	5,823			
Insurance	Prorated gen liability, hazzard and auto insurance.	208.34	2,500			
	Tot	al General Operating:	8,323			

TOTAL OPERATING EXPENSES: 58,101

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimburseme	ent at a rate of 10%
of total direct costs.	90,909

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000

Appendix # B-3f Page # Fiscal Year(s) 1 22-23 Funding Notification Date

12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES]
Personnel Expenses		Syringe Access Services		Lounge Se	Lounge Services			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	5,250	50%	5,250	50%	-	0%	10,500
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%	-	0%	64,733
Health Educator	7.75	218,988	50%	218,988	50%	-	0%	437,976
Mobile Health Educator	0.50	14,129	50%	14,128	50%	-	0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	-	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	-	0%	56,513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	-	0%	680,792
Fringe Benefits	25.00%	85,099	50%	85,099	50%	-	0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%	-	0%	850,990
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
Total Occupancy		12,607	50%	12,607	50%	-	0%	25,214
Total Materials and Supplies		12,282	50%	12,282	50%	-	0%	24,564
			the second s			0	Color States	
		4,161	50%	4,162	50%	-	0%	8.323
Total General Operating Total Operating Expenses		4,161 29,050	50% 50%	4,162 29,051	50% 50%	-	0% 0%	8,323 58,101
Total General Operating Total Operating Expenses								58,101
Total General Operating	10.00%	29,050	50%	29,051	50%		0%	
Total General Operating Total Operating Expenses Total Direct Expenses	10.00%	29,050	50%	29,051 454,546	50%		0%	58,101 909,091
Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses		29,050 454,545 45,454	50% 50% 50%	29,051 454,546 45,455	50% 50% 50%	-	0% 0% 0%	58,101 909,091 90,909
Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	29,050 454,545 45,454 499,999	50% 50% 50%	29,051 454,546 45,455 500,001	50% 50% 50%	-	0% 0% 0%	58,101 909,091 90,909 1,000,000

Contractor Name San Francisco AIDS Foundaiton Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-3f	
Fiscal Year:	22-23	

1a) SALARIES

	structure and responsive to	or ensuring the imple provision of profession	onal oversight to c	gement and evaluation of the reate a service delivery conti- is, including HIV needs of gay	nuum that is
Bri	ief description of job duties: men.				
	Master's degr	ee in psychology, so	cial services, dusir	ness or related disciplines. R	equirements
	also include th	ree years' experience		apacity, especially in HIV pre-	
	also include th	ree years' experience		apacity, especially in HIV pre-	
	also include the demonstrated	ree years' experience		apacity, especially in HIV pre-	

structure and pro	ensuring the imple ovision of profession	mentation, managonal oversight to c	rement and evaluation of the reate a service delivery conti s, including HIV needs of ga	nuum that is
Masters degree	supervisory capaci	ty, especially in HI	ess or related discipline; thre V prevention and demonstra	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$120,000.00	0.05	12	1	\$ 6.000

Staff Position 3: Directo	r, SAS			
strategio partners training exchang	c goals in alignment with a ships with other HIV/AIDS a full-time and temporary sta ge supplies. Organizes rer	gency and city obje and Harm Reduction aff in appropriate e moval of biohazard	e sites. Develops annual depa ectives. Builds and maintains on agencies. Responsible for exchange protocol. Responsib I waste from sites and coordir mpliance and maintain safety	effective scheduling and le for purchasin nates removal
Three yes		n experience prefe	ug users required. Associate rred. Must hold HIV test coun job.	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70.0	00.00 0.15	12	1	\$ 10,500

Staff Position 4: Associate Dir	ector, 6th Street H	IRC		
Harm Reductio education (e.g. curriculum dev	overdose preventio elopment; managing	ng health educator on, vein care) and g syringe access, o	ogistics, QA, programming) of s, volunteers, and interns; co referrals; program design, fa disposal, and lounge space; l and providing crisis intervention	onducting health cilitation, and inking
required. Asso understanding	ciates Degree prefe of harm reduction p of HIV/HCV diseas	rred, experience u ractices and princi e prevention and to	y marginalized, or homeless sing motivational interviewing ples, experience doing healt reatment. Supervisory experi ce required.	and strong education.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$64,733.00	1.00	12	1	\$ 64,733

Staff Position 5: Health E	ducator			
referrals;	program design, facilitation	on, and curriculum	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ige access,
Minimum,	1-3 years experiencing v	working with drug u	users. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513	3.00 7.75	12	1	\$ 437,97

Staff Position 6: Mobile He	alth Educator			_	
HIV/HCV te	sting and linkage to can t outreach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and	
Minimum, 1 Minimum gualifications: reduction, r			users. Associates Degree pre edge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$56,513.	00 0.50	12	1	\$	28,257

Staff Position 7: Health Educa				
Responsibiliti	es include conductin	g health education	(e.g. overdose prevention, v	ein care) and
			ge space; linking participant	
			ention support. Supports mo	bile and 6th
Brief description of job duties: Street sites; su	pervises volunteers	; and coordinates s	supply inventory.	
Minimum, 1-3	years experiencing v	working with drug u	sers. Associates Degree pre	ferred. Harm
Minimum qualifications: reduction, mot	ivational interviewing			
·		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,513

Staff Position 8: Inventory Asso	ciate/Health Edu	icator			
referrals; suppor testing and linka	ts syringe access, ge to care; and pro ervises volunteers	disposal, and lour	n (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo ntory Team Lead with supply i	s to HI bile ar	V/HCV nd 6th
	ars experiencing v		users. Associates Degree pre edge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Fotal
\$56,513.00	1.00	12	1	\$	56,513

Total FTE: 11.55 To

Total Salaries: \$ 680,792

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	\$	70,326.00
Dental		
Unemployment Insurance	\$	3,540.00
Disability Insurance	\$	27,708.00
Paid Time Off		
Other (Workers Comp):	\$	3,540.00
	Total Frings Depatity	470 400

Total Fringe Benefit: 170,198

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	2,000 6,000
		Total Occupancy:	25,214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5eac = \$6,000.	h	6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	То	tal Materials & Supplies:	24,564

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorioal svc \$485.25/mo.	485.25/mo	5,823
Insurance	Prorated gen liability, hazzard and auto insurance.	208.34	2,500
	To	tal General Operating:	8.323

Total General Operating: 8,323

TOTAL OPERATING EXPENSES: 58,101

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

rancisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement	t at a rate of 10%
al direct costs.	90,90
al direct costs.	90

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000

Appendix # B-3g Page # 1 Fiscal Year(s) 23-24 Funding Notification Date 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

	SERVICE MODES							
Personnel Expenses		Syringe A Servic		Lounge Se	rvices			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%		0%	6,000
Director, SAS	0.15	5,250	50%	5,250	50%	-	0%	10,500
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%	-	0%	64,733
Health Educator	7.75	218,988	50%	218,988	50%	-	0%	437,976
Mobile Health Educator	0.50	14,129	50%	14,128	50%	-	0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	-	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	-	0%	56,513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	-	0%	680,792
Fringe Benefits	25.00%	85,099	50%	85,099	50%	-	0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%	- 1	0%	850,990
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
Operating Expenses Total Occupancy		Expenditure 12,607	% 50%	Expenditure 12,607	% 50%	xpenditur -	% 0%	
Total Occupancy		and the second design of the s	the second se	A Real Property and in case of the local division of the local div				25,214
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating		12,607	50%	12,607	50%	-	0%	
Total Occupancy Total Materials and Supplies		12,607 12,282	50% 50%	12,607 12,282	50% 50%	-	0% 0%	24,564
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses		12,607 12,282 4,161 29,050	50% 50% 50% 50%	12,607 12,282 4,162 29,051	50% 50% 50%	-	0% 0% 0%	25,214 24,564 8,323 58,101
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses	10.00%	12,607 12,282 4,161	50% 50% 50%	12,607 12,282 4,162	50% 50% 50% 50%		0% 0% 0%	25,214 24,564 8,323
Total Occupancy Total Materials and Supplies Total General Operating	10.00%	12,607 12,282 4,161 29,050 454,545	50% 50% 50% 50%	12,607 12,282 4,162 29,051 454,546	50% 50% 50% 50%		0% 0% 0% 0%	25,214 24,564 8,323 58,101 909,091
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		12,607 12,282 4,161 29,050 454,545 45,454	50% 50% 50% 50% 50%	12,607 12,282 4,162 29,051 454,546 45,455	50% 50% 50% 50% 50%		0% 0% 0% 0%	25,214 24,564 8,323 58,101 909,091 90,909 1,000,000
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	12,607 12,282 4,161 29,050 454,545 45,454 499,999	50% 50% 50% 50% 50%	12,607 12,282 4,162 29,051 454,546 45,455 500,001	50% 50% 50% 50% 50%		0% 0% 0% 0%	25,214 24,564 8,323 58,101 909,091 90,909

Contractor Name San Francisco AIDS Foundaiton Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-3g	
Fiscal Year:	23-24	

1a) SALARIES

Staff Position 1: V.P Pro				
structure	e and provision of professi	onal oversight to c	pement and evaluation of the reate a service delivery conting s, including HIV needs of gay	nuum that is
Brief description of job duties: men.				
also incl	• • • • • • • •	e in supervisory ca	ness or related disciplines. R apacity, especially in HIV pre- avelopment experience.	
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
Annual Salary.				Iotai

	ctor, Behavorial Health S			
			ement and evaluation of the	
			reate a service delivery contin	
		and well-being need	s, including HIV needs of gay	and bisexual
Brief description of job duties: men.				
			ess or related discipline; thre V prevention and demonstrat	
Minimum qualifications: mana	agement and program devel	opment experience.		160 5
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$12	0,000.00 0.05	12	1	\$ 6,000

Staff Position 3: Director, SA	AS			
strategic goa partnerships training full-ti exchange su	Is in alignment with a with other HIV/AIDS a me and temporary sta pplies. Organizes rer	gency and city obje and Harm Reductio aff in appropriate e noval of biohazard	e sites. Develops annual dep ectives. Builds and maintains on agencies. Responsible for xchange protocol. Responsit waste from sites and coordin npliance and maintain safety	effective scheduling and ble for purchasing nates removal
Three years of program mar		n experience prefe	ug users required. Associate rred. Must hold HIV test cour job.	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.0	0 0.15	12	1	\$ 10,500

Staff Position 4: Associate Dire	ctor, 6th Street H	IRC			
Harm Reduction education (e.g. o curriculum devel	Center; supervisit overdose preventic opment; managing	ng health educator n, vein care) and i g syringe access, c	ogistics, QA, programming) of s, volunteers, and interns; co referrals; program design, fa disposal, and lounge space; i and providing crisis interventi	onducti cilitatio linking	ng health n, and
required. Associa understanding of	ates Degree prefe f harm reduction p f HIV/HCV disease	red, experience us ractices and princi e prevention and tr	y marginalized, or homeless sing motivational interviewing ples, experience doing healt reatment. Supervisory experi ce required.	g and s h educ	strong ation.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	1 22	Total
\$64,733.00	1.00	12	1	\$	64,733

referral dispose	sibilities include conducting s; program design, facilitation	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ige access,
Minimu		•	users. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,5	513.00 7.75	12	1	\$ 437,97

Staff Position 6: Mobile Health	Educator				
HIV/HCV testing	and linkage to cat treach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and	
Minimum, 1-3 ye Minimum qualifications: reduction, motiva			users. Associates Degree pre adge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$56,513.00	0.50	12	1	\$	28,257

Staff Position 7: Health Educato	or/Inventory Tear	n Lead		
referrals; support	ts syringe access, ge to care; and pro	disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v age space; linking participant vention support. Supports mo supply inventory. 	s to HIV/HCV
	ars experiencing v	vorking with drug u	isers. Associates Degree pre	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,513

Staff Position 8: Inventory Asso				
referrals; suppor testing and linka	ts syringe access, ge to care; and pro ervises volunteers	disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v age space; linking participant vention support. Supports mo tory Team Lead with supply i 	s to HIV/HCV bile and 6th
		vorking with drug i	sers. Associates Degree pre	ferred Harm
Minimum qualifications: reduction, motiva				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,513

Total FTE: 11.55

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	COSL		
Social Security	\$	52,081.00	
Retirement	\$	13,003.00	
Medical	\$	70,326.00	
Dental			
Unemployment Insurance	\$	3,540.00	
Disability Insurance	\$	27,708.00	
Paid Time Off			
Other (Workers Comp):	\$	3,540.00	
	Total Eringe Deposity	470 400	

Total Fringe Benefit: 170,198

Total Salaries: \$

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

680,792
2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	25,214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5each =\$6,000.		6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total I	Aterials & Supplies:	24,564

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorioal svc \$485.25/mo.	485.25/mo	5,823
Insurance	Prorated gen liability, hazzard and auto insurance.	208.34	2,500
	Tc	otal General Operating:	8,323

TOTAL OPERATING EXPENSES: 58,101

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

an Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursem	nent at a rate of 10%
f total direct costs.	90,909
f total direct costs.	90

Indirect Rate: 10.00%
TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26 Funding Source General Fund

Appendix # Page # Fiscal Year(s) Funding Notification Date

B-3h 1 24-25 12/21/2018

UOS COST ALLOCATION BY	SERVICE MODE
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				SERVICE MO	DES]
Personnel Expenses		Syringe A Servic		Lounge Se	rvices			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	5,250	50%	5,250	50%	-	0%	10,500
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%	-	0%	64,733
Health Educator	7.75	218,988	50%	218,988	50%	-	0%	437,976
Mobile Health Educator	0.50	14,129	50%	14,128	50%	-	0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	-	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	-	0%	56,513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	-	0%	680,792
Fringe Benefits	25.00%	85,099	50%	85,099	50%	-	0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%	- 1	0%	850,990
Operating Expenses	_	Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
Total Occupancy		12,607	50%	12,607	50%	-	0%	25,214
Total Materials and Supplies		12,282	50%	12,282	50%	-	0%	24,564
Total General Operating		4,161	50%	4,162	50%	-	0%	8,323
Total Operating Expenses		29,050	50%	29,051	50%	-	0%	58,101
Total Operating Expenses		20,000			and the second			
				454,546	50%	- 1	0%	909.091
	10.00%	454,545	50% 50%	A	50% 50%		0% 0%	909,091
Total Direct Expenses	10.00%	454,545	50%	454,546		-		
Total Direct Expenses Indirect Expenses		454,545	50% 50%	454,546 45,455	50%		0%	90,909
Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	454,545 45,454 499,999	50% 50%	454,546 45,455 500,001	50%		0%	90,909 1,000,000

BUDGET JUSTIFICATION

Contractor Name San Francisco AIDS Foundaiton Appendix #: B-3h Program Name: HIV Syringe Access & Disposal Services Fiscal Year: 24-25

1a) SALARIES

	Staff Position 1: V.						
	str	ructure and pro	vision of profession	onal oversight to c	pement and evaluation of the reate a service delivery contin	nuum	that is
			e current health an	d well-being need	s, including HIV needs of gay	/ & bi	sexual
Brief	f description of job duties: me						
					ess or related disciplines. R apacity, especially in HIV pre-		
	de	emonstrated pro	ogram manageme		evelopment experience.		on and
	de Minimum qualifications:	emonstrated pro	ogram manageme		evelopment experience.		and
		emonstrated pro	x FTE:				Total

structure and	for ensuring the imple provision of profession	ementation, managonal oversight to c	gement and evaluation of the reate a service delivery conti ls, including HIV needs of gay	nuum that is
	a supervisory capac	ity, especially in HI	ness or related discipline; thre IV prevention and demonstra	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$120,000.0	0.05	12	1	\$ 6,000

Staff Position 3: Director, SAS				
strategic goals in partnerships with training full-time exchange supplie	alignment with ag other HIV/AIDS a and temporary sta es. Organizes ren	gency and city obje and Harm Reduction aff in appropriate en noval of biohazard	sites. Develops annual dep actives. Builds and maintains on agencies. Responsible for kchange protocol. Responsib waste from sites and coordin npliance and maintain safety	effective scheduling and ble for purchasin nates removal
Three years expe program manage	ment, supervision		ug users required. Associate red. Must hold HIV test cour job.	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.00	0.15	12	1	\$ 10,500

Staff Position 4: Associate Dire	ctor, 6th Street H	IRC		
Harm Reduction education (e.g. c curriculum devel	Center; supervisit overdose preventio lopment; managing	ng health educator on, vein care) and r g syringe access, c	ogistics, QA, programming) c s, volunteers, and interns; cc eferrals; program design, fac lisposal, and lounge space; l and providing crisis interventi	onducting health cilitation, and inking
required. Associ understanding o	ates Degree prefe f harm reduction p if HIV/HCV disease	rred, experience us ractices and princi e prevention and tr	y marginalized, or homeless sing motivational interviewing ples, experience doing healt eatment. Supervisory experi ce required.	and strong n education.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$64,733.00	1.00	12	1	\$ 64,733

Staff Position 5: Health Educate	or			
referrals; progra	m design, facilitation	on, and curriculum	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ge access,
Minimum, 1-3 ye	ears experiencing v	vorking with drug u	isers. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	7.75	12	1	\$ 437,97

Staff Position 6: Mobile Health	Educator			
HIV/HCV testing	g and linkage to cal utreach; overseeing	e; harm reduction	ose prevention; vein care; ref counseling) through mobile a utreach volunteers; and prov	and
	ears experiencing v		isers. Associates Degree pre adge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	0.50	12	1	\$ 28,257

Staff Position 7: Health Educa				
referrals; supp	orts syringe access, age to care; and pro	disposal, and lour	 (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo supply inventory. 	s to HIV/HCV
Minimum, 1-3) Minimum qualifications: reduction, moti			sers. Associates Degree preedge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	
\$56,513.00	1.00	12	1	\$ 56,51

Staff Position 8: Inventory Ass	ociate/Health Edu	ucator		
referrals; support testing and link	orts syringe access, age to care; and propervises volunteers	disposal, and lour	(e.g. overdose prevention, vonge space; linking participant: vention support. Supports mo nory Team Lead with supply it	s to HIV/HCV bile and 6th
Minimum, 1-3 y	ears experiencing v		users. Associates Degree pre	
Minimum qualifications: reduction, moti	vational interviewing	skills, and knowle	edge of HIV/HCV prevention/	tx preferred.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,

Total FTE: 11.55 Total Sa

Total Salaries: \$ 680,792

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	\$	70,326.00
Dental		
Unemployment Insurance	\$	3,540.00
Disability Insurance	\$	27,708.00
Paid Time Off		
Other (Workers Comp):	\$	3,540.00
	Total Fringe Benefit:	170 198

Total Fringe Benefit: 170,198

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	5,214 2,000 6,000
		Total Occupancy:	25.214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5each = \$6,000.		6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total M	laterials & Supplies:	24.564

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorioal svc \$485.25/mo.	485.25/mo	5,823
Insurance	Prorated gen liability, hazzard and auto insurance.	208.34	2,500
	То	tal General Operating:	8,323

TOTAL OPERATING EXPENSES: 58,101

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	
of total direct costs.		90,909
		90,9

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/26 Funding Source General Fund

Appendix # B-3i Page # 1 Fiscal Year(s) Funding Notification Date

25-26 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES			
Personnel Expenses		Syringe A Servic		Lounge Se	rvices			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
V.P Programs & Services	0.10	10,150	50%	10,150	50%		0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	5,250	50%	5,250	50%	-	0%	10,500
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%	-	0%	64,733
Health Educator	7.75	218,988	50%	218,988	50%		0%	437,976
Mobile Health Educator	0.50	14,129	50%	14,128	50%	-	0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	-	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	-	0%	56.513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	- 1	0%	680,792
Fringe Benefits	25.00%	85,099	50%	85,099	50%	-	0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%	- 1	0%	850,990
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
Total Occupancy		12,607	50%	12,607	50%	-	0%	25.214
Total Materials and Supplies		12,282	50%	12,282	50%	-	0%	24,564
Total General Operating		4,161	50%	4,162	50%	-	0%	8,323
Total Operating Expenses		29,050	50%	29,051	50%	-	0%	58,101
Total Operating Expenses								
		454.545	50%	454.546	50%	- 1	0%	909.091
Total Direct Expenses	10.00%	454,545	50% 50%	454,546	50% 50%	-	0% 0%	909,091
Total Direct Expenses Indirect Expenses	10.00%					-		909,091 90,909 1,000,000
Total Direct Expenses Indirect Expenses TOTAL EXPENSES		45,454 499,999	50%	45,455 500,001	50%		0%	90,909 1,000,000
Total Direct Expenses Indirect Expenses	vice Mode	45,454 499,999	50%	45,455	50%	-	0%	90,909

BUDGET JUSTIFICATION

Contractor Name San Francisco AIDS Foundaiton Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-3i	
Fiscal Year:	25-26	

1a) SALARIES

str	esponsible for ensuring the implementation, management and evaluation of ructure and provision of professional oversight to create a service delivery co sponsive to the current health and well-being needs, including HIV needs of en.	vice delivery continue	im that is
Ma	aster's degree in psychology, social services, business or related disciplines.	ted disciplines. Req	uirements
als de	so include three years' experience in supervisory capacity, especially in HIV emonstrated program management and program development experience.		ntion and
als		experience.	ntion and
als de	emonstrated program management and program development experience.	experience.	ntion and Total

structure and	provision of professi	onal oversight to c	gement and evaluation of the reate a service delivery contri s, including HIV needs of gay	nuum that is
	a supervisory capac	ity, especially in HI	ness or related discipline; three V prevention and demonstration	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$120,000.00	0.05	12	1	\$ 6,000

Staff Position 3: Directo	or, SAS			
strategi partner training exchan	ic goals in alignment with a ships with other HIV/AIDS full-time and temporary so ge supplies. Organizes re	agency and city obje and Harm Reduction aff in appropriate e moval of biohazard	e sites. Develops annual depa ectives. Builds and maintains on agencies. Responsible for xchange protocol. Responsib waste from sites and coordin npliance and maintain safety	effective scheduling and ole for purchasir nates removal
progran		n experience prefe	ug users required. Associate rred. Must hold HIV test coun job.	.
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total

Harm Reduction education (e.g. curriculum dev	s include site opera on Center; supervision overdose prevention elopment; managing	tions (schedules, I ng health educator on, vein care) and g syringe access, o	ogistics, QA, programming) o s, volunteers, and interns; co referrals; program design, fa disposal, and lounge space;	onducting health cilitation, and linking
Brief description of job duties:	HIV/HCV testing an	d linkage to care, a	and providing crisis intervent	ion support.
required. Asso understanding	ciates Degree prefe of harm reduction p of HIV/HCV diseas	rred, experience u ractices and princi e prevention and t	ly marginalized, or homeless sing motivational interviewing ples, experience doing healt reatment. Supervisory experi ce required.	g and strong h education.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$64,733.00	1.00	12	1	\$ 64,73

referrals; p	ilities include conducting rogram design, facilitation nd lounge space: linking	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ge access,
Minimum, 1	1-3 years experiencing was a second secon	vorking with drug u	users. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.	.00 7.75	12	1	\$ 437,97

Staff Position 6: Mobile Health E					
HIV/HCV testing encampment out	and linkage to cal treach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and	
Brief description of job duties: intervention supp	ort.				
Minimum, 1-3 ye Minimum qualifications: reduction, motiva			users. Associates Degree pre edge of HIV/HCV prevention/		
		x Months per	Annualized (if less than		
Annual Salary:	x FTE:	Year:	12 months):		Total
\$56,513.00	0.50	12	1	\$	28,257

referrals; suppor	include conducting ts syringe access,	health education disposal, and loun	(e.g. overdose prevention, vo oge space; linking participant rention support. Supports mo	s to HIV/HCV
Brief description of job duties: Street sites; sup	ervises volunteers	and coordinates s	supply inventory.	
Minimum, 1-3 ye Minimum qualifications: reduction, motive			sers. Associates Degree pre edge of HIV/HCV prevention/	
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,51

referrals; support	include conductin s syringe access,	g health education disposal, and lour	e (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo	s to H	HIV/HCV
	ervises volunteers		atory Team Lead with supply i		
Minimum, 1-3 year Minimum qualifications: reduction, motiva			users. Associates Degree pre edge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$56,513.00	1.00	12	1	\$	56,51

Total FTE: 11.55

1b) EMPLOYEE FRINGE BENEFITS:

(Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	\$	70,326.00
Dental		
Unemployment Insurance	\$	3,540.00
Disability Insurance	\$	27,708.00
Paid Time Off		
Other (Workers Comp):	\$	3,540.00
	Total Fringe Benefit:	170,198

Fringe Benefit %: 25.00%

Total Salaries: \$

- 1	TOTAL OAL ADICO	PSEDI OV/PP PDIMO	an and the V I find the I who by	850,990
	IDIAL SALARIES	EMPLOYEE FRINGE	- RENEFILS	250 990
	I WITTE WITTE VIA	Deligit be of I permit I that a state of the	a holdest the to the	000,000

680,792

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$1,000/mo x 12 mo.	1000	12,000
Rent-6th Street	Prorated rent @ \$434.50/mo x 12 mo.	434.5	5,214
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	25,214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exhange incentives, 1,200 incentives @ \$5eac =\$6,000.	h	6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	То	tal Materials & Supplies:	24,564

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorioal svc \$485.25/mo.	485.25/mo	5,823
Insurance	Prorated gen liability, hazzard and auto insurance.	208.34	2,500
		Total General Operating:	8,323

TOTAL OPERATING EXPENSES: 58,101

TOTAL DIRECT COSTS: 909,091

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This	s contract seeks reimbursement at a rate of 10%	and the second
of total direct costs.		90,909

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 90,909

TOTAL EXPENSES: 1,000,000



San Francisco Department of Public Health Business Associate Agreement

This Business Associate Agreement ("BAA") supplements and is made a part of the contract by and between the City and County of San Francisco, the Covered Entity ("CE"), and Contractor, the Business Associate ("BA") (the "Agreement"). To the extent that the terms of the Agreement are inconsistent with the terms of this BAA, the terms of this BAA shall control.

RECITALS

A. CE, by and through the San Francisco Department of Public Health ("SFDPH"), wishes to disclose certain information to BA pursuant to the terms of the Agreement, some of which may constitute Protected Health Information ("PHI") (defined below).

B. For purposes of the Agreement, CE requires Contractor, even if Contractor is also a covered entity under HIPAA, to comply with the terms and conditions of this BAA as a BA of CE.

C. CE and BA intend to protect the privacy and provide for the security of PHI disclosed to BA pursuant to the Agreement in compliance with the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 ("HIPAA"), the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act"), and regulations promulgated there under by the U.S. Department of Health and Human Services (the "HIPAA Regulations") and other applicable laws, including, but not limited to, California Civil Code §§ 56, et seq., California Health and Safety Code § 1280.15, California Civil Code §§ 1798, et seq., California Welfare & Institutions Code §§5328, et seq., and the regulations promulgated there under (the "California Regulations").

D. As part of the HIPAA Regulations, the Privacy Rule and the Security Rule (defined below) require CE to enter into a contract containing specific requirements with BA prior to the disclosure of PHI, as set forth in, but not limited to, Title 45, Sections 164.314(a), 164.502(a) and (e) and 164.504(e) of the Code of Federal Regulations ("C.F.R.") and contained in this BAA.

E. BA enters into agreements with CE that require the CE to disclose certain identifiable health information to BA. The parties desire to enter into this BAA to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the corresponding Regulations.

In consideration of the mutual promises below and the exchange of information pursuant to this BAA, the parties agree as follows:



Business Associate Agreement

1. Definitions.

a. Breach means the unauthorized acquisition, access, use, or disclosure of PHI that compromises the security or privacy of such information, except where an unauthorized person to whom such information is disclosed would not reasonably have been able to retain such information, and shall have the meaning given to such term under the HITECH Act and HIPAA Regulations [42 U.S.C. Section 17921 and 45 C.F.R. Section 164.402], as well as California Civil Code Sections 1798.29 and 1798.82.

b. Breach Notification Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and D.

c. Business Associate is a person or entity that performs certain functions or activities that involve the use or disclosure of protected health information received from a covered entity, but other than in the capacity of a member of the workforce of such covered entity or arrangement, and shall have the meaning given to such term under the Privacy Rule, the Security Rule, and the HITECH Act, including, but not limited to, 42 U.S.C. Section 17938 and 45 C.F.R. Section 160.103.

d. Covered Entity means a health plan, a health care clearinghouse, or a health care provider who transmits any information in electronic form in connection with a transaction covered under HIPAA Regulations, and shall have the meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. Section 160.103.

e. Data Aggregation means the combining of Protected Information by the BA with the Protected Information received by the BA in its capacity as a BA of another CE, to permit data analyses that relate to the health care operations of the respective covered entities, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

f. Designated Record Set means a group of records maintained by or for a CE, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

g. Electronic Protected Health Information means Protected Health Information that is maintained in or transmitted by electronic media and shall have the meaning given to such term under HIPAA and the HIPAA Regulations, including, but not limited to, 45 C.F.R. Section 160.103. For the purposes of this BAA, Electronic PHI includes all computerized data, as defined in California Civil Code Sections 1798.29 and 1798.82.

h. Electronic Health Record means an electronic record of health-related information on an individual that is created, gathered, managed, and consulted by authorized



Business Associate Agreement

health care clinicians and staff, and shall have the meaning given to such term under the HITECH Act, including, but not limited to, 42 U.S.C. Section 17921.

i. Health Care Operations shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

j. Privacy Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and E.

k. Protected Health Information or PHI means any information, including electronic PHI, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Sections 160.103 and 164.501. For the purposes of this BAA, PHI includes all medical information and health insurance information as defined in California Civil Code Sections 56.05 and 1798.82.

I. Protected Information shall mean PHI provided by CE to BA or created, maintained, received or transmitted by BA on CE's behalf.

m. Security Incident means the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system, and shall have the meaning given to such term under the Security Rule, including, but not limited to, 45 C.F.R. Section 164.304.

n. Security Rule shall mean the HIPAA Regulation that is codified at 45 C.F.R. Parts 160 and 164, Subparts A and C.

o. Unsecured PHI means PHI that is not secured by a technology standard that renders PHI unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute, and shall have the meaning given to such term under the HITECH Act and any guidance issued pursuant to such Act including, but not limited to, 42 U.S.C. Section 17932(h) and 45 C.F.R. Section 164.402.

2. Obligations of Business Associate.

a. Attestations. Except when CE's data privacy officer exempts BA in writing, the BA shall complete the following forms, attached and incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1) and Data Security (Attachment 2) within sixty (60) calendar days from the execution of the Agreement. If CE makes substantial changes



Business Associate Agreement

to any of these forms during the term of the Agreement, the BA will be required to complete CE's updated forms within sixty (60) calendar days from the date that CE provides BA with written notice of such changes. BA shall retain such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

b. User Training. The BA shall provide, and shall ensure that BA subcontractors, provide, training on PHI privacy and security, including HIPAA and HITECH and its regulations, to each employee or agent that will access, use or disclose Protected Information, upon hire and/or prior to accessing, using or disclosing Protected Information for the first time, and at least annually thereafter during the term of the Agreement. BA shall maintain, and shall ensure that BA subcontractors maintain, records indicating the name of each employee or agent and date on which the PHI privacy and security trainings were completed. BA shall retain, and ensure that BA subcontractors retain, such records for a period of seven years after the Agreement terminates and shall make all such records available to CE within 15 calendar days of a written request by CE.

c. Permitted Uses. BA may use, access, and/or disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. Further, BA shall not use Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so used by CE. However, BA may use Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE [45 C.F.R. Sections 164.502, 164.504(e)(2). and 164.504(e)(4)(i)].

d. Permitted Disclosures. BA shall disclose Protected Information only for the purpose of performing BA's obligations for, or on behalf of, the City and as permitted or required under the Agreement and BAA, or as required by law. BA shall not disclose Protected Information in any manner that would constitute a violation of the Privacy Rule or the HITECH Act if so disclosed by CE. However, BA may disclose Protected Information as necessary (i) for the proper management and administration of BA; (ii) to carry out the legal responsibilities of BA; (iii) as required by law; or (iv) for Data Aggregation purposes relating to the Health Care Operations of CE. If BA discloses Protected Information to a third party, BA must obtain, prior to making any such disclosure, (i) reasonable written assurances from such third party that such Protected Information will be held confidential as provided pursuant to this BAA and used or disclosed only as required by law or for the purposes for which it was disclosed to such third party, and (ii) a written agreement from such third party to immediately notify BA of any breaches, security incidents, or unauthorized uses or disclosures of the Protected Information in accordance with paragraph 2 (n) of this BAA, to the extent it has obtained knowledge of such



Business Associate Agreement

occurrences [42 U.S.C. Section 17932; 45 C.F.R. Section 164.504(e)]. BA may disclose PHI to a BA that is a subcontractor and may allow the subcontractor to create, receive, maintain, or transmit Protected Information on its behalf, if the BA obtains satisfactory assurances, in accordance with 45 C.F.R. Section 164.504(e)(1), that the subcontractor will appropriately safeguard the information [45 C.F.R. Section 164.502(e)(1)(ii)].

e. Prohibited Uses and Disclosures. BA shall not use or disclose Protected Information other than as permitted or required by the Agreement and BAA, or as required by law. BA shall not use or disclose Protected Information for fundraising or marketing purposes. BA shall not disclose Protected Information to a health plan for payment or health care operations purposes if the patient has requested this special restriction, and has paid out of pocket in full for the health care item or service to which the Protected Information solely relates [42 U.S.C. Section 17935(a) and 45 C.F.R. Section 164.522(a)(1)(vi)]. BA shall not directly or indirectly receive remuneration in exchange for Protected Information, except with the prior written consent of CE and as permitted by the HITECH Act, 42 U.S.C. Section 17935(d)(2), and the HIPAA regulations, 45 C.F.R. Section 164.502(a)(5)(ii); however, this prohibition shall not affect payment by CE to BA for services provided pursuant to the Agreement.

f. Appropriate Safeguards. BA shall take the appropriate security measures to protect the confidentiality, integrity and availability of PHI that it creates, receives, maintains, or transmits on behalf of the CE, and shall prevent any use or disclosure of PHI other than as permitted by the Agreement or this BAA, including, but not limited to, administrative, physical and technical safeguards in accordance with the Security Rule, including, but not limited to, 45 C.F.R. Sections 164.306, 164.308, 164.310, 164.312, 164.314 164.316, and 164.504(e)(2)(ii)(B). BA shall comply with the policies and procedures and documentation requirements of the Security Rule, including, but not limited to, 45 C.F.R. Section 164.316, and 42 U.S.C. Section 17931. BA is responsible for any civil penalties assessed due to an audit or investigation of BA, in accordance with 42 U.S.C. Section 17934(c).

g. Business Associate's Subcontractors and Agents. BA shall ensure that any agents and subcontractors that create, receive, maintain or transmit Protected Information on behalf of BA, agree in writing to the same restrictions and conditions that apply to BA with respect to such PHI and implement the safeguards required by paragraph 2.f. above with respect to Electronic PHI [45 C.F.R. Section 164.504(e)(2) through (e)(5); 45 C.F.R. Section 164.308(b)]. BA shall mitigate the effects of any such violation.

h. Accounting of Disclosures. Within ten (10) calendar days of a request by CE for an accounting of disclosures of Protected Information or upon any disclosure of Protected Information for which CE is required to account to an individual, BA and its agents and subcontractors shall make available to CE the information required to provide an accounting of



Business Associate Agreement

disclosures to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.528, and the HITECH Act, including but not limited to 42 U.S.C. Section 17935 (c), as determined by CE. BA agrees to implement a process that allows for an accounting to be collected and maintained by BA and its agents and subcontractors for at least seven (7) years prior to the request. However, accounting of disclosures from an Electronic Health Record for treatment, payment or health care operations purposes are required to be collected and maintained for only three (3) years prior to the request, and only to the extent that BA maintains an Electronic Health Record. At a minimum, the information collected and maintained shall include: (i) the date of disclosure; (ii) the name of the entity or person who received Protected Information and, if known, the address of the entity or person; (iii) a brief description of Protected Information disclosed; and (iv) a brief statement of purpose of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure [45 C.F.R. 164.528(b)(2)]. If an individual or an individual's representative submits a request for an accounting directly to BA or its agents or subcontractors, BA shall forward the request to CE in writing within five (5) calendar days.

i. Access to Protected Information. BA shall make Protected Information maintained by BA or its agents or subcontractors in Designated Record Sets available to CE for inspection and copying within (5) days of request by CE to enable CE to fulfill its obligations under state law [Health and Safety Code Section 123110] and the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.524 [45 C.F.R. Section 164.504(e)(2)(ii)(E)]. If BA maintains Protected Information in electronic format, BA shall provide such information in electronic format as necessary to enable CE to fulfill its obligations under the HITECH Act and HIPAA Regulations, including, but not limited to, 42 U.S.C. Section 17935(e) and 45 C.F.R. 164.524.

j. Amendment of Protected Information. Within ten (10) days of a request by CE for an amendment of Protected Information or a record about an individual contained in a Designated Record Set, BA and its agents and subcontractors shall make such Protected Information available to CE for amendment and incorporate any such amendment or other documentation to enable CE to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 C.F.R Section 164.526. If an individual requests an amendment of Protected Information directly from BA or its agents or subcontractors, BA must notify CE in writing within five (5) days of the request and of any approval or denial of amendment of Protected Information maintained by BA or its agents or subcontractors [45 C.F.R. Section 164.504(e)(2)(ii)(F)].

k. Governmental Access to Records. BA shall make its internal practices, books and records relating to the use and disclosure of Protected Information available to CE and to the



Business Associate Agreement

Secretary of the U.S. Department of Health and Human Services (the "Secretary") for purposes of determining BA's compliance with HIPAA [45 C.F.R. Section 164.504(e)(2)(ii)(I)]. BA shall provide CE a copy of any Protected Information and other documents and records that BA provides to the Secretary concurrently with providing such Protected Information to the Secretary.

I. Minimum Necessary. BA, its agents and subcontractors shall request, use and disclose only the minimum amount of Protected Information necessary to accomplish the intended purpose of such use, disclosure, or request. [42 U.S.C. Section 17935(b); 45 C.F.R. Section 164.514(d)]. BA understands and agrees that the definition of "minimum necessary" is in flux and shall keep itself informed of guidance issued by the Secretary with respect to what constitutes "minimum necessary" to accomplish the intended purpose in accordance with HIPAA and HIPAA Regulations.

m. Data Ownership. BA acknowledges that BA has no ownership rights with respect to the Protected Information.

n. Notification of Breach. BA shall notify CE within 5 calendar days of any breach of Protected Information; any use or disclosure of Protected Information not permitted by the BAA; any Security Incident (except as otherwise provided below) related to Protected Information, and any use or disclosure of data in violation of any applicable federal or state laws by BA or its agents or subcontractors. The notification shall include, to the extent possible, the identification of each individual whose unsecured Protected Information has been, or is reasonably believed by the BA to have been, accessed, acquired, used, or disclosed, as well as any other available information that CE is required to include in notification to the individual, the media, the Secretary, and any other entity under the Breach Notification Rule and any other applicable state or federal laws, including, but not limited, to 45 C.F.R. Section 164.404 through 45 C.F.R. Section 164.408, at the time of the notification required by this paragraph or promptly thereafter as information becomes available. BA shall take (i) prompt corrective action to cure any deficiencies and (ii) any action pertaining to unauthorized uses or disclosures required by applicable federal and state laws. [42 U.S.C. Section 17921; 42 U.S.C. Section 17932; 45 C.F.R. 164.410; 45 C.F.R. Section 164.504(e)(2)(ii)(C); 45 C.F.R. Section 164.308(b)]

o. Breach Pattern or Practice by Business Associate's Subcontractors and Agents. Pursuant to 42 U.S.C. Section 17934(b) and 45 C.F.R. Section 164.504(e)(1)(iii), if the BA knows of a pattern of activity or practice of a subcontractor or agent that constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA, the BA must take reasonable steps to cure the breach or end the violation. If the steps are unsuccessful, the BA must terminate the contractual arrangement with its subcontractor or agent, if feasible. BA shall provide written notice to CE of any pattern of activity or practice of a



Business Associate Agreement

subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent's obligations under the Contract or this BAA within five (5) calendar days of discovery and shall meet with CE to discuss and attempt to resolve the problem as one of the reasonable steps to cure the breach or end the violation.

3. Termination.

a. Material Breach. A breach by BA of any provision of this BAA, as determined by CE, shall constitute a material breach of the Agreement and this BAA and shall provide grounds for immediate termination of the Agreement and this BAA, any provision in the AGREEMENT to the contrary notwithstanding. [45 C.F.R. Section 164.504(e)(2)(iii).]

b. Judicial or Administrative Proceedings. CE may terminate the Agreement and this BAA, effective immediately, if (i) BA is named as defendant in a criminal proceeding for a violation of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws or (ii) a finding or stipulation that the BA has violated any standard or requirement of HIPAA, the HITECH Act, the HIPAA Regulations or other security or privacy laws is made in any administrative or civil proceeding in which the party has been joined.

c. Effect of Termination. Upon termination of the Agreement and this BAA for any reason, BA shall, at the option of CE, return or destroy all Protected Information that BA and its agents and subcontractors still maintain in any form, and shall retain no copies of such Protected Information. If return or destruction is not feasible, as determined by CE, BA shall continue to extend the protections and satisfy the obligations of Section 2 of this BAA to such information, and limit further use and disclosure of such PHI to those purposes that make the return or destruction of the information infeasible [45 C.F.R. Section 164.504(e)(2)(ii)(J)]. If CE elects destruction of the PHI, BA shall certify in writing to CE that such PHI has been destroyed in accordance with the Secretary's guidance regarding proper destruction of PHI.

d. Civil and Criminal Penalties. BA understands and agrees that it is subject to civil or criminal penalties applicable to BA for unauthorized use, access or disclosure or Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c).

e. Disclaimer. CE makes no warranty or representation that compliance by BA with this BAA, HIPAA, the HITECH Act, or the HIPAA Regulations or corresponding California law provisions will be adequate or satisfactory for BA's own purposes. BA is solely responsible for all decisions made by BA regarding the safeguarding of PHI.

4. Amendment to Comply with Law.

The parties acknowledge that state and federal laws relating to data security and privacy are rapidly evolving and that amendment of the Agreement or this BAA may be required to



Business Associate Agreement

provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to implement the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations and other applicable state or federal laws relating to the security or confidentiality of PHI. The parties understand and agree that CE must receive satisfactory written assurance from BA that BA will adequately safeguard all Protected Information. Upon the request of either party, the other party agrees to promptly enter into negotiations concerning the terms of an amendment to this BAA embodying written assurances consistent with the updated standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Agreement upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amend the Agreement or this BAA when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Agreement or this BAA providing assurances regarding the safeguarding of PHI that CE, in its sole discretion, deems sufficient to satisfy the standards and requirements of applicable laws.

5. Reimbursement for Fines or Penalties.

In the event that CE pays a fine to a state or federal regulatory agency, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible access, use or disclosure of PHI by BA or its subcontractors or agents, then BA shall reimburse CE in the amount of such fine or penalties or damages within thirty (30) calendar days from City's written notice to BA of such fines, penalties or damages.

Attachment 1 – SFDPH Privacy Attestation, version 06-07-2017 Attachment 2 – SFDPH Data Security Attestation, version 06-07-2017

Office of Compliance and Privacy Affairs San Francisco Department of Public Health 101 Grove Street, Room 330, San Francisco, CA 94102 Email: <u>compliance.privacy@sfdph.org</u> Hotline (Toll-Free): 1-855-729-6040

San Francisco Department of Public Health (SFDPH) Office of Compliance and Privacy Affairs (OCPA)

ATTACHMENT 1

Contractor Name:	Contractor
	City Vendor ID

PRIVACY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFDPH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFDPH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions below in Section IV on how to request clarification or obtain an exception.

I. All Contractors.

DO	ES YOU	R ORGANIZA	ATION				Yes	No*
A	Have fo	ormal Privac	y Policies that comply with the H	lealth Insurance Portability and Accountability	ty Act (HIPAA)?		P	
В	Have a	Privacy Offi	cer or other individual designate	ed as the person in charge of investigating pr	ivacy breaches or related	incidents?		
	lf yes:	Name & Title:		Phone #	Email:			
С				nire and annually thereafter for all employee] [SFDPH privacy training materials are availa				
D				on hire and annually thereafter, with their na nentation of acknowledgement of trainings f		ledging that they have received		
E	12000000000	or will have informatior	a de la calencia de l	sociate Agreements with subcontractors who	o create, receive, maintair	, transmit, or access SFDPH's		
F				ormation (via laptop, USB/thumb-drive, han created on encrypted devices approved by				

II. Contractors who serve patients/clients and have access to SFDPH PHI, must also complete this section.

If /	Applicable: DOES YOUR ORGANIZATION	Yes	No*
G	Have (or will have if/when applicable) evidence that SFDPH Service Desk (628-206-SERV) was notified to de-provision employees who have access to	2	
	SFDPH health information record systems within 2 business days for regular terminations and within 24 hours for terminations due to cause?		
Н	Have evidence in each patient's / client's chart or electronic file that a <u>Privacy Notice</u> that meets HIPAA regulations was provided in the patient's / client's preferred language? (English, Cantonese, Vietnamese, Tagalog, Spanish, Russian forms may be required and are available from SFDPH.)		
1	Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?	4	
J	Document each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations?	-	
К	When required by law, have proof that signed authorization for disclosure forms (that meet the requirements of the HIPAA Privacy Rule) are obtained PRIOR to releasing a patient's/client's health information?	1	

III. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Privacy Officer	Name:		
	(print)		
or designated person		Signature	Date

IV. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at 1-855-729-6040 or

compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED	Name	Construction of the second		1
by OCPA	(print)	Signature	Date	

Contractor Name:	Contractor	
	City Vendor ID	

DATA SECURITY ATTESTATION

INSTRUCTIONS: Contractors and Partners who receive or have access to health or medical information or electronic health record systems maintained by SFDPH must complete this form. Retain completed Attestations in your files for a period of 7 years. Be prepared to submit completed attestations, along with evidence related to the following items, if requested to do so by SFDPH.

Exceptions: If you believe that a requirement is Not Applicable to you, see instructions in Section III below on how to request clarification or obtain an exception.

I. All Contractors.

DC	DES YOUR ORGANIZATION	Yes	No*
A	Conduct assessments/audits of your data security safeguards to demonstrate and document compliance with your security policies and the		
	requirements of HIPAA/HITECH at least every two years? [Retain documentation for a period of 7 years]	1.	
B	Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?	1	
	Date of last Data Security Risk Assessment/Audit:	1 - 3	
	Name of firm or person(s) who performed the		
	Assessment/Audit and/or authored the final report:		
С	Have a formal Data Security Awareness Program?		
D	Have formal Data Security Policies and Procedures to detect, contain, and correct security violations that comply with the Health Insurance Portability		
	and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH)?		
E	Have a Data Security Officer or other individual designated as the person in charge of ensuring the security of confidential information?		
	If Name & Phone # Email:		
	yes: Title:	12	1
F	Require Data Security Training upon hire and annually thereafter for all employees who have access to health information? [Retain documentation of		
	trainings for a period of 7 years.] [SFDPH data security training materials are available for use; contact OCPA at 1-855-729-6040.]		
G	Have proof that employees have signed a form upon hire and annually, or regularly, thereafter, with their name and the date, acknowledging that they		
	have received data security training? [Retain documentation of acknowledgement of trainings for a period of 7 years.]		
H	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFDPH's	1	
	health information?		
T	Have (or will have if/when applicable) a diagram of how SFDPH data flows between your organization and subcontractors or vendors (including named		
	users, access methods, on-premise data hosts, processing systems, etc.)?		

II. ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct and that I have authority to sign on behalf of and bind Contractor listed above.

ATTESTED by Data Security	Name:			
Officer or designated person	(print)	Signature	Date	

III. *EXCEPTIONS: If you have answered "NO" to any question or believe a question is Not Applicable, please contact OCPA at 1-855-729-6040 or

compliance.privacy@sfdph.org for a consultation. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

EXCEPTION(S) APPROVED by	Name	LSO			
OCPA	(print)				
OCFA			Signature	Date	

FORM REVISED 06072017 SFDPH Office of Compliance and Privacy Affairs (OCPA)

APPENDIX F-1f
07/01/18 - 06/30/19
DACE A

										PAGE
					Contr	act ID #	_		nvoice Nur	nber
Contractor: San Francisco AIDS Found	dation				10000	02634			A-1JUL	18
Address: 1035 Market Street, Suite 4	100									
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000				Í		Funding	Source:		General F	und
Fax: 415-487-3009		CH	EP							
Program Name: HIV Syringe Access and Di	isnosal S	ervices			G	rant Co	de/Detail:			
	isposul o	01 11003			Pro	ject Cod	de/Detail:		_	-
ACE Control #:	l					Investo	o Dorio di	07/	1/18 - 07/	04/40
						INVOIC	e Period:	077	1/18 - 0//	31/18
						FINA	L Invoice		(check i	(Yes)
		TAL	DELIVI			ERED		OF		AINING
DELIVERABLES	CONTR UOS	NOC	THIS PE	RIOD	TOL	NOC	UOS	TAL NOC	UOS	RABLES
Syringe Access Services (hrs., City-Wide &	8,079	54,300	100						8,079	54,300
Syringe Access, Disposal Coordinatoin & Bu	12	N/A							12	N/A
Crimige Addess, Disposar Coordinatour & De										1.00
				10000-04		272-02				10021103
		NOC		NOC		NOC		NOC	11	NOC
Number of Clients for Appendix	_	54300								54,300
EXPENDITURES	BUD	CET	EXPEN THIS PE		EXPE TO D		% C BUDO			
Total Salaries (See Page B)	\$488.		THO I L				000	GLI	\$488,1	and the second se
Fringe Benefits	\$122								\$122,0	
Total Personnel Expenses	\$610,								\$610,2	
Operating Expenses:			_	_					010,2	10.00
Occupancy-(e.g., Rental of Property, Utilities,	\$95,0	366		_					\$95,6	36.00
Building Maintenance Supplies and Repairs)									400,0	00.00
									1	_
Materials and Supplies-(e.g., Office,	\$530,	113							\$530,1	13.00
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff	\$10,4	116							\$10,4	6 00
Training, Equipment Rental/Maintenance)	φ10,-	10							\$10,4	10.00
Training, Equipment Rentalimiantenance)										
Staff Travel - (e.g., Local & Out of Town)										
	0500								0.500.0	
Consultant/Subcontractor	\$532,	386		_					\$532,3	86.00
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses	\$1,168	.581							\$1,168,5	581.00
Capital Expenditures				i i						
OTAL DIRECT EXPENSES	\$1,778	,799	and the second		1000				\$1,778,7	99.00
Indirect Expenses	\$177,								\$177,8	80.00
OTAL EXPENSES	\$1,956	679							\$1,956,6	\$79.00
LESS: Initial Payment Recovery				1	NOTES:					
Other Adjustments (Enter as negative, if appropr	iate)									
REIMBURSEMENT										

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-1f 07/01/18 - 06/30/19 PAGE B

07/1/18 - 07/31/18

(check if Yes)

Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400 San Francisco, CA 94103

Telephone: 415-487-3000 Fax: 415-487-3009

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

	Invoice Number
	A-1JUL18
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	

Invoice Period:

FINAL Invoice

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,709				\$5,709.00
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,190				\$5,190.00
Data Manager	0.05	\$4,412				\$4,412.00
SAS Director	0.75	\$40,750				\$40,750.00
Logistics Inventory Mgr	1.00	\$64,356				\$64,356.00
Logistics Associates	2.00	\$114,180				\$114,180.00
SSE/Vol Coordinator	0.75	\$54,495				\$54,495.00
Health Educator	2.75	\$156,998				\$156,998.00
Comm. Engagement & Kit Packing A	0.65	\$35,084				\$35,084.00
	_					
TOTAL SALARIES	8.10	\$488,174				\$488,174.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

Title:

Appendix F-1f Contract ID# 1000002634

APPEN	DIX F-1i
07/01/19 - 1	06/30/20

										PAGE
					Contr	act ID #			Invoice Nur	nber
Contractor: San Francisco AIDS Foun	dation				10000	02634			A-1JUL	
Address: 1035 Market Street, Suite	400				-		-			
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000				1		Funding	Source:		General F	hund
Fax: 415-487-3009		CH	EP			r anang	, oouree.	· · · ·	Seneral	unu
				J	G	rant Co	de/Detail:			
Program Name: HIV Syringe Access and D	isposal 5	ervices			Pro	ject Cod	de/Detail:			
ACE Control #:]								_	
						Invoic	e Period:	07/	1/19 - 07/	31/19
						FINA	L Invoice		(check it	f Yes)
	то	TAL	DELIV	ERED	DELIV	ERED	%	OF		AINING
DELIVERABLES	CONTR	NOC	THIS P	ERIOD NOC	TO E UOS	ATE NOC	TO UOS	NOC	DELIVE	RABLES
Syringe Access Services (hrs., City-Wide &	8,079	54,300		1100	1				8,079	54,300
Syringe Access, Disposal Coordinatoin & Bu		N/A			1				12	N/A
				_				_		
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		54300							T	54,300
EXPENDITURES	BUD	CET	EXPER THIS PE	100 C	EXPE TO D		% (BUD			
Total Salaries (See Page B)	\$496	CONTRACTOR OF STREET	111011	1000	100		BOD	501	\$496,9	
Fringe Benefits	\$124							_	\$124,2	
Total Personnel Expenses	\$621	and the second se						_	\$621,1	
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$95,0	666							\$95.60	66.00
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,	\$550,	665							\$550,6	65.00
Postage, Printing and Repro., Program Supplies)				-				_		
General Operating-(e.g., Insurance, Staff	\$10,9	16		-					\$10,91	16.00
Training, Equipment Rental/Maintenance)	\$10 ,0		_	-					\$10,0	10.00
3, 1, , , , , , , , , , , , , , , , , ,				_						
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$545,	696							\$545,6	96.00
Other - (Meals, Audit, Transportation Reimb,				-					l	
Stipends, Facilitators)										
Total Operating Expenses	\$1,202	,943							\$1,202,9	43.00
Capital Expenditures										
OTAL DIRECT EXPENSES	\$1,824								\$1,824,0	
Indirect Expenses	\$182,4								\$182,40	
OTAL EXPENSES	\$2,006	,497]	\$2,006,4	197.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if approp	riate)									
REIMBURSEMENT										

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1i 07/01/19 - 06/30/20 PAGE B

	Invoic	e Number
Contractor: San Francisco AIDS Foundation	A-1	JUL19
Address: 1035 Market Street, Suite 400		_
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source: Gene	ral Fund
Fax: 415-487-3009		
	Grant Code/Detail:	
rogram Name: HIV Syringe Access and Disposal	Services	
	Project Code/Detall:	
ACE Control #:		
	invoice Period: 07/1/19	- 07/31/19
	FINAL Invoice	check if Yes)

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,651				\$5,651.00
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,138				\$5,138.00
Data Manager	0.05	\$4,367				\$4,367.00
SAS Director	0.75	\$53,944				\$53,944.00
Logistics Inventory Mgr	1.00	\$63,705				\$63,705.00
Logistics Associates	2.00	\$113,026				\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944				\$53,944.00
Health Educator	2.75	\$155,411				\$155,411.00
ogistics Inventory Mgr ogistics Associates SE/Vol Coordinator	0.65	\$34,730				\$34,730.00
	-					
	-					
						_
	-					
	-					
TOTAL SALARIES	8.10	\$496,916				\$496,916.00

DETAIL PERSONNEL EXPENDITURES

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

-

Date:

Title:

APPENDIX F-1	
07/01/19 - 06/30/20	

DACEA

Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400					and the second s	act ID # 002634	٦	<u> </u>	A-1JUL	
								ATOOL	10	
San Francisco, CA 94103				Co	ontract Pu	rchase (Order No:			
Telephone: 415-487-3000			1	Funding Source:				General F	und	
Fax: 415-487-3009	CHEP				G	rant Co	de/Detail:		_	
Program Name: HIV Syringe Access and Dis	sposal S	ervices		1						
ACE Control #:					Pro	ject Co	le/Detall:		_	
						Invoic	e Period:	07/	1/19 - 07/	31/19
						FINA	L Invoice		(check if	Yes)
	CONTR		DELIV THIS P			ERED	% TO		REM/ DELIVE	AINING RABLE
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A	<u> </u>					_	12	N/A
	_		<u> </u>							-
									1	
				_					1	
		NOC		NOC		NOC		NOC		NOC
lumber of Clients for Appendix		N/A		NOC	I	NOC		NUC	1	NOC N/A
		INIPA		_				_		IN/A
EXPENDITURES	BUDO	GET	EXPEN THIS PI		EXPE TO D		% (BUD(100 C 100 C 100 C	REMA BALA	INING
otal Salaries (See Page B)										
ringe Benefits	_									
Total Personnel Expenses										_
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000			<u> </u>				\$33,00	00.00
Building Maintenance Supplies and Repairs)	φ00,0					_		_	\$35,00	0.00
Materials and Supplies-(e.g., Office,	\$147,	580		-					\$147,5	80.00
Postage, Printing and Repro, Program Supplies)	•••••								•,•	00.00
General Operating-(e.g., Insurance, Staff	\$12,0	00							\$12,00	00.00
Training, Equipment Rental/Maintenance)								i ii		
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor				_						
Other - (Meals, Audit, Transportation Reimb,										_
Stipends, Facilitators)	-									
Total Operating Expenses	\$192,5	580							\$192.5	30.00
Capital Expenditures										
OTAL DIRECT EXPENSES	\$192,5					j			\$192,58	
Indirect Expenses	\$19,2		_	_					\$19,25	
OTAL EXPENSES	\$211,8	338							\$211,83	38.00
LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if appropri EIMBURSEMENT	ate)				NOTES:					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount reque sted for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:	
	_

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-1j 07/01/19 - 06/30/20 PAGE B

		1	Invoice Number
Contractor:	San Francisco AIDS Foundation		A-1JUL19
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
rogram Name:	HIV Syringe Access and Disposal Services		
		Project Code/Detail:	
ACE Control #:			
		Involce Period:	07/1/19 - 07/31/19
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES TO DATE BUDGET Remaining PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE Image: Construction of the second of the second

T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date:

Title: _____

APPENDIX F-1k 07/01/20 - 06/30/21 DACE A

										PAGE
					-	act ID #	-		nvoice Nur	nber
Contractor: San Francisco AIDS Found	lation				10000	02634			A-1JUL	20
Address: 1035 Market Street, Suite 4	00									
San Francisco, CA 94103				Cor	ntract Pur	chase (Order No:			
Telephone: 415-487-3000					3	Funding	Source:	-	Seneral F	und
Fax: 415-487-3009		CH	EP			, and na	,	-	Jeneral I	
Program Name: HIV Syringe Access and Di	enocal S				Gi	ant Co	de/Detail:			
Program Name: HIV Synnge Access and Di	sposal o	ervices			Pro	ect Cod	de/Detail:			-
ACE Control #:								07/	()00 07	
						INVOIC	e Period:	077	1/20 - 07/	31/20
						FINA	L Invoice		(check if	fYes)
		TAL	DELIV		DELIV		%			AINING
DELIVERABLES	LONTR	NOC	THIS PI UOS	NOC	TO D UOS	NOC	UOS	NOC	UOS	RABLES
Syringe Access Services (hrs., City-Wide &	8,079	54,300							8,079	54,300
Syringe Access, Disposal Coordinatoin & Bu	12	N/A							12	N/A
								_		
									-	
								_		
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		54300								54,300
EXPENDITURES	BUD	GET	EXPEN THIS PE		EXPEN TO D		% C BUDO			
Total Salaries (See Page B)	\$496,	916				1			\$496,9	the second s
Fringe Benefits	\$124,	229							\$124,2	29.00
Total Personnel Expenses	\$621,	145	_						\$621,1	45.00
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$95,6	666							\$95,66	36.00
Building Maintenance Supplies and Repairs)	_									
Materials and Supplies-(e.g., Office,	\$550,	665							\$550,6	65.00
Postage, Printing and Repro., Program Supplies)	4000,								\$000,0	00.00
								_		-
General Operating-(e.g., Insurance, Staff	\$10,9	916							\$10,91	6.00
Training, Equipment Rental/Maintenance)										
Chaff Travel	_		_							
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$545,	696						-	\$545,6	96.00
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)	_			_			_			
Total Operating Expenses	\$1,202	043	_						\$1.202.9	12 00
Capital Expenditures	\$1,202	,040			-				\$1,202,5	45.00
OTAL DIRECT EXPENSES	\$1.824	.088							\$1,824,0	00.880
Indirect Expenses	\$182,4	409							\$182,40	
OTAL EXPENSES	\$2,006								\$2,006,4	
LESS: Initial Payment Recovery					NOTES:				and the second se	
Other Adjustments (Enter as negative, if appropr	iate)									
REIMBURSEMENT										

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments	(DPH Authorized Signatory)		

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APPENDIX F-1k 07/01/20 - 06/30/21 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-1JUL20
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detall:	
Program Name:	HIV Syringe Access and Disposal Services		
		Project Code/Detall:	
ACE Control #:			
		Invoice Period:	07/1/20 - 07/31/20

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

DEBSONNEL	FTF	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,651				\$5,651.00
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,138				\$5,138.00
Data Manager	0.05	\$4,367				\$4,367.00
SAS Director	0.75	\$53,944				\$53,944.00
Logistics Inventory Mgr	1.00	\$63,705				\$63,705.00
Logistics Associates	2.00	\$113,026				\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944				\$53,944.00
Health Educator	2.75	\$155,411				\$155,411.00
Comm. Engagement & Kit Packing A	0.65	\$34,730				\$34,730.00
	-					
TOTAL SALARIES	8.10	\$496,916				\$496,916.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Date:

Certified By:

Title:

Appendix F-1k Contract ID# 1000002634

Amendment: 02/01/2019

APPENDIX F-11 07/01/20 - 06/30/21 PAGE A

					-	act ID #	-		nvoice Nur	nber
Contractor: San Francisco AIDS Found					1000	002634		A-1JUL20		
Address: 1035 Market Street, Suite 4	00									
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:		_	_
		r		1						
Telephone: 415-487-3000		CH				Funding	g Source:		General F	und
Fax: 415-487-3009	CHEP					de (Detette	r			
Program Name: HIV Syringe Access and Dis	noral P			J	G	rant Co	de/Detail:		_	
Flogram Name. Hiv Synnge Access and Dis	sposal a	ervices			Pro	lect Cor	de/Detail:			
ACE Control #:					115		acib ctail.			
						Invoic	e Period:	07/	1/20 - 07/	31/20
						FINA	L Invoice		(check it	Yes)
									-	1.2000 A.
	TO	ACTED	DELIV THIS P			ERED	% TO	OF		AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A				-			12	N/A
	_			_				_		-
				-	-					
				_						
			l							
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A						_		N/A
EXPENDITURES			EXPE	ISES	EXPE	NSES	% (DF	REMA	INING
	BUD	GET	THIS PE	RIOD	TOD	ATE	BUD	GET		NCE
Total Salaries (See Page B)						_				
Fringe Benefits					<u> </u>					
Total Personnel Expenses Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000						-	\$33,00	00.00
Building Maintenance Supplies and Repairs)	400,0		-						400,00	
										_
Materials and Supplies-(e.g., Office,	\$147,	580							\$147,5	80.00
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff	\$12,0	00							\$12,00	0.00
Training, Equipment Rental/Maintenance)	φ12,0	00							\$12,00	0.00
Training adoption for the maintenance/									-	
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	_									
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
										-
Total Operating Expenses	\$192,5	580						-	\$192,5	30.00
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$192,5						_		\$192,5	
Indirect Expenses	\$19,2 \$211,8								\$19,25	
LESS: Initial Payment Recovery	φ211,0	50			NOTES:				\$211,83	00.00
Other Adjustments (Enter as negative, if appropri	ate)		_	-						
REIMBURSEMENT		1		1						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1I
07/01/20 - 06/30/21
PAGE B

Invoice Number

Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400 San Francisco, CA 94103

A-1JUL20 Con

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

ntract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	
Invoice Period:	07/1/20 - 07/31/20
FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

Telephone: 415-487-3000 Fax: 415-487-3009

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
	TT				1 1	
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					+	
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					+	
					+	
OTAL SALARIES						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

Title:

APPENDIX F-1m	
07/01/21 - 06/30/22	

PAGE A

dation					act ID # 002634	1		Invoice Nu	
				1000	002004			A-1JUL	21
400						-		71 1002	
			Cor	ntract Pu	rchase C	order No:			
			1		Funding	Source:		General F	und
		e/Detail:							
isposal S	ervices		-						
1				Pro	oject Cod	e/Detail:	L	_	
10					Invoice	Period:	07	/1/21 - 07	/31/21
					FINAL	. Invoice		(check i	f Yes)
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and the second se				1	1				54,300
	N/A						1		N/A
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\$550	665			-				\$550 6	65 00
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\$10.9	16							\$10.9	16.00
		_					-		
\$545,6	596							\$545,6	96.00
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\$1 000	0/3	_		_		_		61 000 /	12 00
\$1,202	943							\$1,202,9	943.00
C1 904	088							C1 0077	100 00
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\$2,006				-				\$182,4	
				_				PZ,000,4	00.16+
ψ2,000			10	OTEC.					
riate)			P	NOTES:					
	isposal S	CH isposal Services TOTAL CONTRACTED UOS NOC 8,079 54,300 12 N/A 12 N/A 12 N/A NOC 54300 BUDGET \$496,916 \$124,229 \$621,145 \$95,666 \$10,916 \$124,229 \$621,145 \$95,666 \$11,916 \$11,916 \$11,916 \$11,916 \$11,824,088 \$182,409	CHEP bisposal Services Disposal Services Budget Disposal Services NOC Service Subject Thisposal Services NOC Service Subject Thisposal Services Subject Subject Subject Subject Subject Subject Subject Subject Subject Subject Subject Subject	Contracted UOS NOC DELIVERED THIS PERIOD UOS NOC DUOS NOC 8,079 54,300 12 N/A 12 N/A NOC NOC 54300 S110,916 \$545,696 \$11,022,943 \$11,824,088 \$11,824,088	Contract Put CHEP G isposal Services Pro CONTRACTED DELIVERED DELN UOS NOC DELN DELN NOC NOC NOC DELN NOC NOC NOC NOC Status Expenses Expenses Expenses Status Expenses Expenses Expenses \$12,22,916 Image: Colspan="2">Image: Colspan="2"Image: Colspa="2"Image: Colspan="2"Image: Colspan="2"Im	Contract Purchase O Funding Grant Cod Isposal Services Project Cod Invoice Invoice CONTRACTED DELIVERED DELIVERED UOS NOC UOS NOC 8,079 54,300 Invoice Invoice NOC NOC NOC NOC NOC NOC NOC NOC S4300 Invoice Invoice Invoice S54300 Invoice Invoice Invoice S550,665 Invoice Invoice Invoice S10,916 Invoice Invoice Invoice S10,916 Invoice Invoice Invoice S11,202,943 Invoice Invoice Invoice S11,202,943 Invoice Invoice Invoice	Contract Purchase Order No: Funding Sources Grant Code/Detail: Invoice Period: TOTAL DELIVERED Moc NOC DELIVERED % OUDS NOC DOATE % NOC NOC NOC 12 N/A	Contract Purchase Order No: Funding Source: Grant Code/Detail: isposal Services Project Code/Detail: Invoice Period: 07. FINAL Invoice 07. CONTRACTED DELIVERED MOC UOS NOC UOS NOC UOS NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC Station Invoice Station Invoice NOC NOC NOC NOC NOC NOC NOC NOC Station Invoice Station Invoice Station Invoice Invoice Inv	Contract Purchase Order No: Funding Source: General F Isposal Services Grant Code/Detail:

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _____ Date: _____

Title:

Send to:	SFDPH Fiscal / Invoice Processing		
	1380 Howard Street, 4th Floor, Suite 423		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	-

APPENDIX F-1m 07/01/21 - 06/30/22 PAGE B

Invoice Number

Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400 San Francisco, CA 94103

Telephone: 415-487-3000 Fax: 415-487-3009

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

	A-1JUL21
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	
Invoice Period:	07/1/21 - 07/31/21

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,651				\$5,651.00
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,138				\$5,138.00
Data Manager	0.05	\$4,367				\$4,367.00
SAS Director	0.75	\$53,944				\$53,944.00
Logistics Inventory Mgr	1.00	\$63,705				\$63,705.00
Logistics Associates	2.00	\$113,026				\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944				\$53,944.00
Health Educator	2.75	\$155,411				\$155,411.00
Comm. Engagement & Kit Packing A	0.65	\$34,730				\$34,730.00
						-
	_					
TOTAL SALARIES	8.10	\$496,916				\$496.916.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Title:

Appendix F-1m Contract ID# 1000002634

Date:

APPENDIX F-1n	
07/01/21 - 06/30/22	

1/21	- 00/30/22
	PAGE A

					-	act ID #		l	nvoice Nun	nber	
Contractor: San Francisco AIDS Found			100002634						A-1JUL21		
Address: 1035 Market Street, Suite 4	100			7225-1					_	_	
San Francisco, CA 94103				Cor	ntract Pu	rchase (order No:				
Telephone: 415-487-3000				1		Funding	Source:	6	eneral Fi	und	
Fax: 415-487-3009		CH	IEP			runung	Source.		ellelal Pi	unu	
	OHEP				G	rant Coc	le/Detail:	-		-	
Program Name: HIV Syringe Access and Di	isposal S	ervices		1				_			
					Pro	ject Cod	le/Detail:				
ACE Control #:							li I				
						Invoice	Period:	07/1	1/21 - 07/	31/21	
									1		
						FINAL	Invoice		(check if	Yes)	
	TO	TAL	DELIV	ERED	DELIV	ERED	%	OF	REMA	AINING	
		ACTED	THIS P			DATE	TO	TAL		RABLES	
DELIVERABLES Syringe Access, Disposal Coord. & Bulk Pur	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	
Synnge Access, Disposal Coord. & Bulk Pul	12	N/A		-	-				12	N/A	
		-						_			
		NOC		NOC		NOC		NOC		NOC	
Number of Clients for Appendix		N/A				1				N/A	
										and the second second	
EXPENDITURES			EXPE		EXPE		% (REMA		
Total Salaries (See Page B)	BUD	GET	THIS PI	RIOD	TOD	ATE	BUD	JET	BALA	NCE	
Fringe Benefits											
Total Personnel Expenses						_				_	
Operating Expenses:											
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000							\$33,00	00.00	
Building Maintenance Supplies and Repairs)							_				
Materials and Supplies-(e.g., Office,	\$147,	580							\$147,5	80.00	
Postage, Printing and Repro., Program Supplies)	v 1-11,	000			-		_		\$141,0	00.00	
					ò						
General Operating-(e.g., Insurance, Staff	\$12,0	000							\$12,00	0.00	
Training, Equipment Rental/Maintenance)	_						_		1		
Staff Travel - (e.g., Local & Out of Town)											
otali mavai - (e.g., Locard Caro Tomi)								-	-		
Consultant/Subcontractor											
	_								1		
Other - (Meals, Audit, Transportation Reimb,					-						
Stipends, Facilitators)											
Total Operating Expenses	\$192.	580							\$192,58	30.00	
Capital Expenditures											
TOTAL DIRECT EXPENSES	\$192,				-				\$192,58		
Indirect Expenses	\$19,2		-	_					\$19,25		
LESS: Initial Payment Recovery	\$211,	030			NOTES:	ا	_		\$211,83	00.00	
Other Adjustments (Enter as negative, if appropri	iate)		1		TES.						
REIMBURSEMENT	10107	Ť									

accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: ______ Date: _____

Signature: ______

Date:

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments	([OPH Authorized Signatory)		

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APPENDIX F-1n 07/01/21 - 06/30/22 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-1JUL21
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
Program Name:	HIV Syringe Access and Disposal Services		
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/21 - 07/31/21
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES TO DATE NUDGET REMAINING PERSONNEL FTE SALARY THIS PERIOD EXPENSES TO DATE NUDGET Remaining Image: Construction of the second o

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

Title:

APPENDIX F-10 07/01/22 - 06/30/23

7/01/22 -	06/30/23
	PAGE A

					Contr	act ID #			Invoice Nu	nber	
Contractor: San Francisco AIDS Foun	dation			100002634					A-1JUL22		
Address: 1035 Market Street, Suite	400						-				
San Francisco, CA 94103		Contract Purchase Order No:									
Telephone: 415-487-3000				1	Funding Source:				General F	und	
Fax: 415-487-3009		CH	FP								
0.000 0.000 0.000		0.1			G	rant Cod	le/Detail:	<u></u>			
Program Name: HIV Syringe Access and D	isposal S	ervices		1							
					Pro	ject Cod	e/Detail:				
ACE Control #:]										
						Invoice	Period:	07/	1/22 - 07/	31/22	
						FINAL	. Invoice		(check i	f Yes)	
	то	TAL	DELIV	ERED	DELIN	ERED	%	OF	REM	AINING	
		ACTED		ERIOD		ATE	TOT			RABLES	
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	
Syringe Access Services (hrs., City-Wide &	8,079	54,300							8,079	54,300	
Syringe Access, Disposal Coordinatoin & Bu	12	N/A							12	N/A	
										-	
									11		
		NOC		NOC		NOC		NOC		NOC	
Number of Clients for Appendix		54300								54,300	
EXPENDITURES	BUD	GET	EXPEI THIS P		EXPEI TO D		% C BUDO				
Total Salaries (See Page B)	\$496.		111011	LINOD			0000	561	\$496,9	and the second se	
Fringe Benefits	\$124								\$124,2		
Total Personnel Expenses	\$621								\$621,1	and the second se	
Operating Expenses:									1		
Occupancy-(e.g., Rental of Property, Utilities,	\$95,6	666							\$95,6	66.00	
Building Maintenance Supplies and Repairs)											
M ()	0000	005					_			05.00	
Materials and Supplies-(e.g., Office,	\$550,	665	_						\$550,6	65.00	
Postage, Printing and Repro., Program Supplies)					-						
General Operating-(e.g., Insurance, Staff	\$10,9	16							\$10,9	16.00	
Training, Equipment Rental/Maintenance)									\$10,0	0.00	
									-	_	
Staff Travel - (e.g., Local & Out of Town)											
Consultant/Subcontractor	\$545,	696					-		\$545,6	96.00	
Other states to the Townships Balance				-							
Other - (Meals, Audit, Transportation Reimb,											
Stipends, Facilitators)											
Total Operating Expenses	\$1,202	943			-				\$1,202.9	43.00	
Capital Expenditures										10.00	
TOTAL DIRECT EXPENSES	\$1,824	,088						-	\$1,824,0	88.00	
Indirect Expenses	\$182,4								\$182,4		
TOTAL EXPENSES	\$2,006								\$2,006,4		
LESS: Initial Payment Recovery					NOTES:						
Other Adjustments (Enter as negative, if approp	riate)										
REIMBURSEMENT											

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.
Signature: Date:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments	202	(DPH Authorized Signatory)		1

APPENDIX F-10 07/01/22 - 06/30/23 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-1JUL22
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
rogram Name:	HIV Syringe Access and Disposal Services		
		Project Code/Detail:	
ACE Control #:			
	N	Invoice Period:	07/1/22 - 07/31/22
		FINAL Invoice	(check if Yes)

DETAIL TEROORALE EXTERD		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,651				\$5,651.0
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,138				\$5,138.00
Data Manager	0.05	\$4,367				\$4,367.00
SAS Director	0.75	\$53,944				\$53,944.00
Logistics Inventory Mgr	1.00	\$63,705				\$63,705.00
Logistics Associates	2.00	\$113,026				\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944				\$53,944.00
Health Educator	2.75	\$155,411				\$155,411.00
Comm. Engagement & Kit Packing A	0.65	\$34,730				\$34,730.00
					-	
	-				+	
	-					
					+	
					+	
					-	
					+	
					1 1	
					1	
TOTAL SALARIES	8.10	\$496,916				
IOTAL SALARIES						\$496,916.00

DETAIL PERSONNEL EXPENDITURES

T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Date:

Certified By:

Title:

Appendix F-10 Contract ID# 1000002634
APPENDIX F-1p 07/01/22 - 06/30/23

122	- 00/30/23
	PAGE A

					Contra	ict ID #		Ir	wolce Nur	nhor
Contractor: San Francisco AIDS Found	ation				general second s	02634	1		A-1JUL	
Address: 1035 Market Street, Suite 4							1		A-IUUL	
San Francisco, CA 94103				Cor	ntract Pur	chase C	order No:			
				-						
Telephone: 415-487-3000		CU	EP			Funding	Source:	G	eneral F	und
Fax: 415-487-3009			EP		G	ant Cod	e/Detail:		_	
Program Name: HIV Syringe Access and Dis	sposal S	ervices		-			1	_		
ACE Control #:					Pro	ect Cod	e/Detail:			
						Invoice	Period:	07/1	/22 - 07/	31/22
						FINAL	. Invoice		(check ii	f Yes)
	TOT	ΓΔΙ	DELIV	ERED	DELIV	FRED	% ()E	REM	AINING
	CONTR	ACTED	THIS P	ERIOD	TOD	ATE	TOT	AL	DELIVE	RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A							12	N/A
						-				
			-			_				-
										<u> </u>
									-	-
I.					<u> </u>					
		NOC		NOC		NOC		NOC		NOC
umber of Clients for Appendix		N/A								N/A
XPENDITURES	BUDO	GET	EXPEI THIS PI		EXPENTO D		% C BUDO			
otal Salaries (See Page B)			1				-			
ringe Benefits										
Total Personnel Expenses										_
perating Expenses:			-		_					
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000							\$33,0	00.00
Building Maintenance Supplies and Repairs)									_	_
Materials and Supplies-(e.g., Office,	\$147,	580	-						\$147,5	80.00
Postage, Printing and Repro., Program Supplies)	v 111,								<i>ψ</i>11110	00.00
· · · · · · · · · · · · · · · · · · ·										_
General Operating-(e.g., Insurance, Staff	\$12,0	000							\$12,00	00.00
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)									-	
Total Operating Expenses	\$192,5	580					-	-	\$192,5	80.00
Capital Expenditures	\$1021s			<u> </u>					0102,0	00.00
DTAL DIRECT EXPENSES	\$192,5	580							\$192,5	80.00
Indirect Expenses	\$19,2								\$19,25	
DTAL EXPENSES	\$211,8								\$211,8	
LESS: Initial Payment Recovery	- and - in the second			in	NOTES:	/L				
Other Adjustments (Enter as negative, if appropri	ate)									
EIMBURSEMENT		1		1						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: _

Date:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1p 07/01/22 - 06/30/23 PAGE B

Contractor:	San Francisco AIDS Foundation
Address:	1035 Market Street, Suite 400
	San Francisco, CA 94103

San Francisco, CA 94103

Telephone: 415-487-3000 Fax: 415-487-3009

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

	Invoice Number
	A-1JUL22
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	
Invoice Period:	07/1/22 - 07/31/22
FINAL Invoice	(check if Yes)

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
	1 1	C/CB II ()		TODAL		DITENTOL
		-				
OTAL SALARIES						

DETAIL PERSONNEL EXPENDITURES

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Title:

Date:

APPENDIX F-1q 07/01/23 - 06/30/24 PAGE A

										PAGE
					Contra	act ID #	2		Invoice Nun	nber
Contractor: San Francisco AIDS Found	dation				10000	02634]		A-1JUL2	23
Address: 1035 Market Street, Suite	400						-			
San Francisco, CA 94103				Co	ntract Pu	chase (Order No:			_
T.I				1						
Telephone: 415-487-3000 Fax: 415-487-3009		CH	EP			Funding	Source:		Seneral F	und
101 115 107 0005		UII			G	rant Coo	e/Detail:			
Program Name: HIV Syringe Access and D	isposal S	ervices								_
ACE Control #:	1				PIO	Ject Cot	le/Detail:			
						Invoic	e Period:	07/	1/23 - 07/	31/23
						FINA	l Invoice		(check if	Yes)
		TAL	DELIV		DELIV			OF		
DELIVERABLES	LOS	NOC	THIS P	NOC	UOS	NOC	UOS	TAL NOC		
Syringe Access Services (hrs., City-Wide &	8,079	54,300	000	NOC	1	noo	005	NOC	Involce Number A-1JUL23 General Fund 07/1/23 - 07/31/23 (check if Yes) REMAINING DELIVERABLES OC UOS NOC 8,079 54,300 12 N/A	Concession of the local division of
Syringe Access, Disposal Coordinatoin & Bu		N/A								
Synnge Access, Disposal Coordinatorit & De	12	110						_	12	IN/A
				-				_		
		NOC		NOC		NOC		NOC		
Number of Clients for Appendix		54300		NOC		NUC		NOC	1	
		04000								54,500
EXPENDITURES	BUD	GET	EXPEN THIS PE		EXPERTO D		% (BUD			
Total Salaries (See Page B)	\$496,	916	(-		\$496,9	16.00
Fringe Benefits	\$124,	229							\$124,2	29.00
Total Personnel Expenses	\$621,	145							\$621,1	45.00
Operating Expenses:	1									
Occupancy-(e.g., Rental of Property, Utilities,	\$95,6	666							\$95,66	6.00
Building Maintenance Supplies and Repairs)										
Madardala and Quardian in orr	6 550	005							AFFO O	05.00
Materials and Supplies-(e.g., Office,	\$550,	600							\$05U,0	05.00
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff	\$10,9	16			-				\$10,91	6.00
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$545,	396						-	\$545 6	96.00
oonsatanooasoonaasoo	4010,				-				\$0.10,00	00.00
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)	-		_		-					
Total Operating Expenses	\$1,202	943							\$1,202 9	43.00
Capital Expenditures			*****							
OTAL DIRECT EXPENSES	\$1,824	088					_		\$1,824 (88.00
Indirect Expenses	\$182,4			_						
OTAL EXPENSES	\$2,006									
LESS: Initial Payment Recovery	w2,000				NOTES:				φ <u>2</u> ,000,4	01.00
Other Adjustments (Enter as negative, if appropri-	datal									
REIMBURSEMENT	idle/									
								_	_	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature:

Date:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments	_	(DPH Authorized Signatory)	

APPENDIX F-1q 07/01/23 - 06/30/24 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-1JUL23
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
rogram Name:	HIV Syringe Access and Disposal Services		
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/23 - 07/31/23
		FINAL Invoice	(check if Yes)

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,651				\$5,651.00
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,138				\$5,138.00
Data Manager	0.05	\$4,367				\$4,367.00
SAS Director	0.75	\$53,944				\$53,944.00
Logistics Inventory Mgr	1.00	\$63,705				\$63,705.00
Logistics Associates	2.00	\$113,026				\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944				\$53,944.00
Health Educator	2.75	\$155,411				\$155,411.00
Comm. Engagement & Kit Packing A	0.65	\$34,730				\$34,730.00
	_					
	-					
	_					
TOTAL SALARIES	8,10	\$496,916				\$496.916.00

DETAIL PERSONNEL EXPENDITURES

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date:

APPENDIX F-1r 07/01/23 - 06/30/24 A

01/23 -	00/30/2
	PAGE

					Contr	act ID #	_	-	voice Nun	nber
Contractor: San Francisco AIDS Found	lation				1000	002634			A-1JUL2	23
Address: 1035 Market Street, Suite 4	00									_
San Francisco, CA 94103				Co	ntract Pu	rchase C	order No:			
Telephone: 415-487-3000		[1		Funding	Source:	G	eneral F	und
Fax: 415-487-3009		CH	IEP						onorun	anta
		C ©			G	irant Coo	le/Detail:			
Program Name: HIV Syringe Access and Di	sposal S	ervices			Pro	ject Cod	e/Detail:			
ACE Control #:										
						Invoice	Period:	07/*	/23 - 07/	31/23
						FINAL	. Invoice		(check if	Yes)
	TOT	TAL	DELIN	ERED	DELN	/ERED	%	OF		INING
DELIVERABLES	CONTR	ACTED NOC	THIS F	NOC	UOS	NOC	UOS	NOC	DELIVE	RABLES
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A	000	I III	1	100	000	noc	12	N/A
Syninge Access, Disposal Coold. & Doix 1 di	12	19/13			1				12	IN/A
		-								
			4							
umber of Oliente for Annoully		NOC		NOC		NOC		NOC		NOC
umber of Clients for Appendix		N/A								N/A
XPENDITURES	BUDO	GET	EXPE THIS P		EXPE TO D	NSES	% C BUDO	Millione	REMA BALA	
otal Salaries (See Page B)									[_
ringe Benefits										
Total Personnel Expenses				1.0						
perating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000							\$33,00	00.00
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,	\$147,	580							\$147,5	80.00
Postage, Printing and Repro., Program Supplies)										
0	640.0	00							640.00	0.00
General Operating-(e.g., Insurance, Staff	\$12,0	00							\$12,00	0.00
Training, Equipment Rental/Maintenance)	_		_							
Staff Travel - (e.g., Local & Out of Town)			V							
Consultant/Subcontractor							_			
Other - (Meals, Audit, Transportation Reimb,			-							
Stipends, Facilitators)									_	-
					1					
Total Operating Expenses	\$192,5	580							\$192,58	30.00
Capital Expenditures										Contrast of Contrast of
DTAL DIRECT EXPENSES	\$192,5								\$192,58	30.00
Indirect Expenses	\$19,2								\$19,25	8.00
DTAL EXPENSES	\$211,8	338						_	\$211,83	
LESS: Initial Payment Recovery					NOTES:	1				-
Other Adjustments (Enter as negative, if appropr	iate)]						
EIMBURSEMENT		T								

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Date: _____

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				- 1
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments	8	(DPH Authorized Signatory)		

APPENDIX F-1r 07/01/23 - 06/30/24 PAGE B

Contractor: Sa			Invoice Number
	an Francisco AIDS Foundation		A-1JUL23
Address: 10	035 Market Street, Suite 400		
Sa	an Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 41	15-487-3000	Fund Source:	General Fund
Fax: 41	15-487-3009		
		Grant Code/Detail:	
Program Name: HI	V Syringe Access and Disposal Services		
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/23 - 07/31/23
		FINAL Invoice	(check if Yes)

DEFINIC TERCONNEL EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date:

APPENDIX F-1s 07/01/24 - 06/30/25 PAGEA

					12 14142					
			act ID #	1	Invoice Number					
Contractor: San Francisco AIDS Found	dation				10000	02634	A-1JUL24			
Address: 1035 Market Street, Suite 4	100									
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000		Funding Source:					(General F	und	
Fax: 415-487-3009		CH	EP							
Program Name: HIV Syringe Access and Di	sposal S	ervices	_]	G	rant Coo	le/Detail:			
	opeca. e				Pro	ject Coo	le/Detail:			
ACE Control #:						Involo	e Period:	07/	1/24 - 07/	24/24
						mvoice	e Period:	0//	1/24 - 0//	31/24
						FINAL	Invoice		(check if	Yes)
		TAL		ERED		ERED	% (
DELIVERABLES	LOS	NOC	UOS	ERIOD	UOS	NOC	UOS	NOC	UOS	RABLES
			003	NOC	1	NOC	005	NOC	11	
Syringe Access Services (hrs., City-Wide &	8,079	54,300							8,079	54,300
Syringe Access, Disposal Coordinatoin & Bu	12	N/A				-			12	N/A
				-		-		_	-	
					н	NOO		NOC		
Number of Clients for Appendix		NOC 54300	_	NOC	B	NOC		NOC	11	NOC 54,300
		34300			0				-	54,500
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D		% C BUDO			
Total Salaries (See Page B)	\$496	916			1	1			\$496.9	Contraction of the local division of the loc
Fringe Benefits	\$124		-				-		\$124,2	
Total Personnel Expenses	\$621								\$621,1	Contraction of the local division of the loc
Operating Expenses:	40.01		_							10.00
Occupancy-(e.g., Rental of Property, Utilities,	\$95,6	366						-	\$95,66	36.00
Building Maintenance Supplies and Repairs)	400,0							-	\$00,00	0.00
					-					
Materials and Supplies-(e.g., Office,	\$550,	665							\$550,6	65.00
Postage, Printing and Repro., Program Supplies)										
Conoral Operating (a a lawrence Staff	\$10,9	16	_		-				\$10,91	6.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	φ10,0				-				\$10,5	0.00
Harming, Equipment Nontainmontonetro)	_			-			_			
Staff Travel - (e.g., Local & Out of Town)							_			
Consultant/Subcontractor	\$545,	696	_						\$545,6	96.00
Other - (Meais, Audit, Transportation Reimb,	_									
Stipends, Facilitators)								-	-	
	-									
Total Operating Expenses	\$1,202	,943							\$1,202,9	943.00
Capital Expenditures									1	
OTAL DIRECT EXPENSES	\$1,824								\$1,824,0	
Indirect Expenses	\$182,4								\$182,40	
TOTAL EXPENSES	\$2,006	,497	_						\$2,006,4	97.00
LESS: Initial Payment Recovery	_				NOTES:					
Other Adjustments (Enter as negative, if appropriate	riate)									
REIMBURSEMENT	_								_	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments	357	(DPH Authorized Signatory)	

APPENDIX F-1s 07/01/24 - 06/30/25 PAGE B

REMAINING

BALANCE

\$5,651.00

\$7,000.00

\$5,138.00

\$4,367.00

\$53,944.00

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-1JUL24
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009	2. 	
		Grant Code/Detail:	
rogram Name:	HIV Syringe Access and Disposal Service	'S	
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/24 - 07/31/24
		FINAL Invoice	(check if Yes)

EXPENSES

EXPENSES

TO DATE

% OF

BUDGET

PERSONNEL FTE SALARY THIS PERIOD Pgms & Ops Director 0.05 \$5,651 Dir. Behavioral Health Svc 0.05 \$7,000 Dir. Gov't Contracts \$5,138 0.05 \$4,367 \$53,944 Data Manager 0.05 SAS Director 0.75 Logistics Inventory Mgr 1.00 \$63,705

BUDGETED

DETAIL PERSONNEL EXPENDITURES

	0.10	****	00.011.00
Logistics Inventory Mgr	1.00	\$63,705	\$63,705.00
Logistics Associates	2.00	\$113,026	\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944	\$53,944.00
Health Educator	2.75	\$155,411	\$155,411.00
Comm. Engagement & Kit Packing A	0.65	\$34,730	 \$34,730.00
TOTAL SALARIES	8.10	\$496,916	\$496.916.00

accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date: _____

APPENDIX F-1t 07/01/24 - 06/30/25

PAGE	
FAGE	-

					Contra	ct ID #		Ir	voice Nur	nher
Contractor: San Francisco AIDS Found			02634	1		The second se				
Address: 1035 Market Street, Suite 4		10000	02004	A-1JUL24						
	00			0	dame of Dece		and on Mary			
San Francisco, CA 94103				Cor	ntract Pur	cnase C	raer No:			_
Telephone: 445 497 2000			_	1			Courses	-	an and P	
Telephone: 415-487-3000 Fax: 415-487-3009		CU	IEP			runding	Source:	G	eneral F	una
Pax: 415-487-3009			ICF							
	10	L		J	G	ant Coo	le/Detail:			
Program Name: HIV Syringe Access and Dis	sposal 5	ervices			-			_	_	_
					Proj	ect Cod	le/Detail:			
ACE Control #:										
						Invoice	Period:	07/1	/24 - 07/	31/24
						FINAL	. Invoice		(check if	Yes)
	TO	TAL	DELIN	ERED	DELIVI	ERED	%()F	REMA	INING
	CONTR			ERIOD	TOD		TOT			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS NO	
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A							12	N/A
	_									
	_		-							
	_									-
		NOC		NOC		NOC		NOC		NOC
umber of Clients for Appendix		N/A								N/A
XPENDITURES	BUD	GET	EXPE THIS P		EXPEN TO D/		% C BUDO		REMA	
otal Salaries (See Page B)										
ringe Benefits										
Total Personnel Expenses										
perating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000							\$33,00	00.00
Building Maintenance Supplies and Repairs)	_		_							
Materials and Supplies (a.s. Office	\$147,	590		-		-	_		C447 E	00.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	φ14/,	500							\$147,5	60.00
Postage, Printing and Repro., Program Supplies)					1					
General Operating-(e.g., Insurance, Staff	\$12,0	000			C	-			\$12,00	0.00
Training, Equipment Rental/Maintenance)					1					
Staff Travel - (e.g., Local & Out of Town)										
0										
Consultant/Subcontractor	_					-				
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
								_	-	-
Total Operating Expenses	\$192,5	580							\$192,58	30.00
Capital Expenditures								- i		
DTAL DIRECT EXPENSES	\$192,5								\$192,58	
Indirect Expenses	\$19,2								\$19,25	
DTAL EXPENSES	\$211,8	338							\$211,83	38.00
LESS: Initial Payment Recovery				P	NOTES:					
Other Adjustments (Enter as negative, if appropria	ate)		-							
EIMBURSEMENT										

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing		
	1380 Howard Street, 4th Floor, Suite 423		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-1t 07/01/24 - 06/30/25 PAGE B

			Invoice Number
Contractor	San Francisco AIDS Foundation		A-1JUL24
Address	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
Program Name:	HIV Syringe Access and Disposal Services		
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/24 - 07/31/24
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES PERSONNEL BUDGETED EXPENSES EXPENSES TO DATE BUDGET Budares Image: solar so

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

APPENDIX F-1u
07/01/25 - 06/30/26
PAGEA

										PAGE	
				Contr	act ID #			Invoice Nun	nber		
Contractor: San Francisco AIDS Found			10000	02634		A-1JUL25					
Address: 1035 Market Street, Suite 4	400						-				
San Francisco, CA 94103				Con	tract Pu	chase (Order No:				
Telephone: 415-487-3000					Funding	Source:		General F	und		
Fax: 415-487-3009		CH	EP			- ununis	oource.	L	Selleral F	unu	
Descrem Name, HIV Surlage Assess and Di	innerel S				G	rant Co	le/Detail:			_	
Program Name: HIV Syringe Access and Di	isposal a	ervices			Pro	ject Cod	le/Detail:		-		
ACE Control #:						Imurala	. Darladı	07	1/25 - 07/	04/05	
						Invoic	e Period:	077	1/25 - 0//	31/25	
						FINA	Invoice		(check if	Yes)	
		TAL	DELIVE		DELIN		%				
DELIVERABLES	UOS	NOC	THIS PE	NOC	UOS	NOC	UOS	NOC	UOS	RABLES	
Syringe Access Services (hrs., City-Wide &	8,079	54,300	000	1100	000			noo	8,079	54,300	
Syringe Access, Disposal Coordinatoin & Bu	12	N/A			-	1			12	N/A	
Syninge Access, Disposar Coordinatoin & Bu	16						-	-	16	INA	
				_		1				-	
				_				_			
								_			
		NOC		NOC		NOC		NOC		NOC	
Number of Clients for Appendix		54300		100	-	nee	1	NOU	T	54,300	
EXPENDITURES			EXPEN		EXPE		% (Part and a		INING	
	BUD		THIS PE	RIOD	TOD	ATE	BUD	GET	A DESCRIPTION OF A DESC	NCE	
Total Salaries (See Page B)	\$496								\$496,9		
Fringe Benefits	\$124	or other Designation of the local division o							\$124,2		
Total Personnel Expenses	\$621	145							\$621,1	45.00	
Operating Expenses:					_						
Occupancy-(e.g., Rental of Property, Utilities,	\$95,0	666						_	\$95,66	6.00	
Building Maintenance Supplies and Repairs)								-			
					_						
Materials and Supplies-(e.g., Office,	\$550,	665						_	\$550,6	65.00	
Postage, Printing and Repro., Program Supplies)											
General Operating-(e.g., Insurance, Staff	\$10,9	916							\$10,91	6.00	
Training, Equipment Rental/Maintenance)								_			
Staff Travel - (e.g., Local & Out of Town)			_		_						
Start Travel - (e.g., Local & Out of Town)				-			-				
Consultant/Subcontractor	\$545,	696					-		\$545,6	96.00	
Other dealers and the					_			_			
Other - (Meals, Audit, Transportation Reimb,											
Stipends, Facilitators)											
Total Operating Expenses	\$1,202	9/3	_	-	_				\$1,202,9	00 510	
Capital Expenditures	W1,202			-					01,202,3	45.00	
	\$1,824	088			_				\$1,824,0	00 00	
OTAL DIRECT EXPENSES	\$1,024		_				_				
Indirect Expenses								-	\$182,40		
OTAL EXPENSES	\$2,006	491			INTER				\$2,006,4	97.00	
LESS: Initial Payment Recovery					NOTES:						
Other Adjustments (Enter as negative, if appropr	riate)		_								
REIMBURSEMENT				1							

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

 Date:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1u 07/01/25 - 06/30/26 PAGE B

		Invoice Number
Contractor: San Francisco AIDS Foundation		A-1JUL25
Address: 1035 Market Street, Suite 400		
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	General Fund
Fax: 415-487-3009		
	Grant Code/Detail:	
rogram Name: HIV Syringe Access and Disposal Ser	vices	
	Project Code/Detail:	
ACE Control #:	-	
	Invoice Period:	07/1/25 - 07/31/25
	FINAL Invoice	(check if Yes)

DEBRONNEL		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,651				\$5,651.00
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,138				\$5,138.00
Data Manager	0.05	\$4,367				\$4,367.00
SAS Director	0.75	\$53,944				\$53,944.00
Logistics Inventory Mgr	1.00	\$63,705				\$63,705.00
Logistics Associates	2.00	\$113,026				\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944				\$53,944.00
Health Educator	2.75	\$155,411				\$155,411.00
Comm. Engagement & Kit Packing A	0.65	\$34,730				\$34,730.00
TOTAL SALARIES	8.10	\$496,916				\$496.916.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in

accordance with the budget approved for the contract ciled for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

Title:

DETAIL DEDRONNEL EVDENDITUDER

APPENDIX F-1v 07/01/25 - 06/30/26

01/25 -	06/30/26
	PAGE A

					Contr	act ID #			nvoice Nur	nber
Contractor: San Francisco AIDS Found	ation				10000	02634]		A-1JUL	25
Address: 1035 Market Street, Suite 4	00									
San Francisco, CA 94103				Co	ntract Pu	rchase C	order No:			
Telephone: 415-487-3000			Sec. 24-25	1		Funding	Source:	G	eneral F	und
Fax: 415-487-3009		CH	IEP	1						
]	G	rant Coo	le/Detail:			
Program Name: HIV Syringe Access and Dis	sposal S	ervices			Bro	lact Con	e/Detall:		_	-
ACE Control #:					FIG	Ject COU	erbetan.		_	_
						Invoice	Period:	07/1	/25 - 07/	31/25
	3					FINAL	. Invoice		(check i	f Yes)
	то	TAL	DELIN	/ERED	DELIN	ERED	%	DE	REM	AINING
	CONTR	ACTED	THIS F	PERIOD	TO	ATE	TO	TAL		RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A		-					12	N/A
			-							-
										-
										-
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A			1		1			N/A
			EVOE	1050	EVDE	1050			DEL	
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D		% C BUD			ANCE
Total Salaries (See Page B)						1	-			
ringe Benefits										
Total Personnel Expenses										_
Operating Expenses:	600 /	100							600.0	
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000					_		\$33,0	00.00
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,	\$147,	580						_	\$147,5	80.00
Postage, Printing and Repro., Program Supplies)		-								
General Operating-(e.g., Insurance, Staff	\$12,0	000							\$12,00	00.00
Training, Equipment Rental/Maintenance)										_
Staff Travel - (e.g., Local & Out of Town)					-					
Consultant/Subcontractor					-					-
Other - (Meals, Audit, Transportation Reimb,	_									_
Stipends, Facilitators)										
Total Operating Expenses	\$192,5	580							\$192,5	80.00
Capital Expenditures										
OTAL DIRECT EXPENSES	\$192,5		_				-		\$192,5	
Indirect Expenses OTAL EXPENSES	\$19,2 \$211,8								\$19,25 \$211,8	
LESS: Initial Payment Recovery	Ψ <u>2</u>],C				NOTES:				φ211,0	00.00
Other Adjustments (Enter as negative, if appropri-	ate)									
REIMBURSEMENT	Mool A	Ť		1						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1v 07/01/25 - 06/30/26 PAGE B

ice Number
1JUL25
eral Fund
5 - 07/31/25
(check if Yes)
-

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES TO DATE BUDGET BALANCE PERSONNEL FITE SALARY THIS PERIOD TO DATE BUDGET BALANCE

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

Title:

Contract ID# 1000002634

Appendix F-1v

									07/01/19	- 06/30/2 PAGE
	20.22					act ID #	-		nvoice Nur	
Contractor: San Francisco AIDS Found				10000	02634			A-2JUL	19	
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Cor	ntract Pur	chase ()rder No:		_	
					iciaec i ui	011000	1001 100.			
Telephone: 415-487-3000 Fax: 415-487-3009		СН	EP		1	Funding	Source:	0	Seneral F	und
					G	ant Cod	le/Detail:			
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Homele	ss You	th Allian	ce				
					Proj	ect Cod	le/Detail:			_
ACE Control #:						Invoice	e Period:	07/	1/19 - 07/	31/19
						FINAL	. Invoice		(check if	(Yes)
	TOT		DELIV		DELIVI TO D	ERED		OF	REM	
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
HYA Wrap Around & Disposal Services	12	N/A							12	N/A
				-						
	-									
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A		1.00		1100				N/A
EXPENDITURES	BUDO	SET	EXPEN THIS PE		EXPEN TO D	0.000.000	% (BUD			
Total Salaries (See Page B)		1		1		1				ator.
Fringe Benefits										
Total Personnel Expenses										_
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,										
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)			[
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)					_				_	
Staff Travel - (e.g., Local & Out of Town)					_		_			
Consultant/Subcontractor	\$153,5	559							\$153,5	59.00
Other - (Meals, Audit, Transportation Reimb,			_							
Stipends, Facilitators)							_			
Total Operating Expenses	\$153,5	59							\$153,55	59.00
Capital Expenditures										
OTAL DIRECT EXPENSES	\$153,5		_						\$153,55	
Indirect Expenses									\$15,35	5.00
	\$15,3									
OTAL EXPENSES	\$15,3				IOTEC.				\$168,91	
	\$168,9				NOTES:					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.
Signature: Date:

Title:

Date:

APPENDIX F-2c

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-2c 07/01/19 - 06/30/20 PAGE B

Invoice Num			
A-2JUL1		San Francisco AIDS Foundation	Contractor:
		1035 Market Street, Suite 400	Address:
	Contract Purchase Order No:	San Francisco, CA 94103	
General Fu	Fund Source:	415-487-3000	Telephone:
		415-487-3009	Fax:
	Grant Code/Detail:		
	ervices - Homeless Youth Alliance	HIV Syringe Access and Disposal S	ogram Name:
	Project Code/Detail:		
]		CE Control #:
07/1/19 - 07/	Invoice Period:		-
(check	FINAL Invoice		

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES THIS PERIOD TO DATE BUDGET REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BLARCE Image: Contract of the second s

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date:

Title: ______

									PAGE
				Contra	ct ID #		t	nvoice Nun	nber
Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400				100000	02634]		A-2JUL2	20
Address: 1035 Market Street, Suite 400 San Francisco, CA 94103 Telephone: 415-487-3000			Contract Purchase Order No:						
			1	F	unding	Source:	G	eneral F	und
	CH	IEP							
sposal S	ervices -	Homele	ss You	th Alliand	e	11 1			
				Proje	ect Coo	le/Detail:	_		
					Invoic	e Period:	07/*	1/20 - 07/	31/20
					FINA	Invoice		(check if	Yes)
CONTR	ACTED	THIS P	ERIOD	TO DA	TE	TOT	AL	DELIVE	AINING RABLES
		UOS	NOC	UOS	NOC	UOS	NOC	17-0000000	NOC
12	N/A							12	N/A
	-		_		_				
		I	NOC	Ll	NOC		NOC		
			NUC		NUC		NOC		NOC N/A
BUD									INING
500						5050			NOE
									_
-									
_									_
				h					
\$153,	559							\$153,5	59.00
							-		
\$153,	559							\$153,55	59.00
\$153,	559							\$153,55	59.00
								\$15,35	5.00
							1		
				NOTES:					
iate)									
	\$153, \$153, \$168,	EUDGET	CHEP sposal Services - Homele Sposal Services - Homele UOS NOC 12 N/A NOC N/A NOC N/A BUDGET THIS P S153,559 S153,559 \$153,559 S168,914	TOTAL Sposal Services - Homeless You TOTAL CONTRACTED UOS DELIVERED THIS PERIOD UOS NOC 12 N/A	Interview Interview Interview Interview	NO Funding CHEP Grant Correct Purchase C sposal Services - Homeless Youth Alliance Project Correct Correct Sposal Services - Homeless Youth Alliance Project Correct TOTAL DELIVERED DELIVERED CONTRACTED THIS PERIOD DELIVERED UOS NOC NOC 12 N/A	Interference Interference Interference Interference	Interference Interference Interference Interference Interference I	iation 1000002634 A-2.JUL2 Image: sposal Services - Homeless Youth Alliance Funding Source: General Fill sposal Services - Homeless Youth Alliance Project Code/Detail: Image: sposal Services - Homeless Youth Alliance rotat DELIVERED % OF REMA uos NOC NOC NOC NOC NOC NOC NOC NOC NOC S153,559 S153,559 S153,55 S153,55 S168,914 NOTES: S153,55 S168,914

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

APPENDIX F-2d 07/01/20 - 06/30/21

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-2d 07/01/20 - 06/30/21 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-2JUL20
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
ogram Name:	HIV Syringe Access and Disposal Serv	vices - Homeless Youth Alllance	
		Project Code/Detail:	
CE Control #:			
		Invoice Period:	07/1/20 - 07/31/20
		FINAL Invoice	(check if Yes

PETAIL PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
					+	
					1 1	
						_
					<u> </u>	
TAL SALARIES						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date: _____

APPE	NDIX F-2e
07/01/21	- 06/30/22

PAGE A

					Contr	act ID #		1	nvoice Nun	nber
Contractor: San Francisco AIDS Foundation					10000	002634			A-2JUL2	21
Address: 1035 Market Street, Suite 400										
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:			_
Telephone: 415-487-3000				1		Funding	Source:	0	Seneral F	und
Fax: 415-487-3009		CH	IEP				,	L	veneral i	unu
				1	G	rant Cod	de/Detail:			
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Homele	ss You	th Allian	ce				
					Pro	ject Coo	de/Detail:			
ACE Control #:										
						Invoic	e Period:	07/	1/21 - 07/	31/21
						FINA	L Invoice](check if	Yes)
	TO	TAL	DELIV	FRED	DELIN	ERED	%	OF	REMA	AINING
	CONTR	ACTED	THIS P	ERIOD	TO	DATE	то	TAL	DELIVE	RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
HYA Wrap Around & Disposal Services	12	N/A				-			12	N/A
						-				
	_									
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A		nou						N/A
									H	
EXPENDITURES	BUD	GET	EXPER THIS PL	100 E 9 C 6 C 6 M	EXPE TO D	0070050E	% BUD	T	REMA BALA	
Total Salaries (See Page B)										
Fringe Benefits Total Personnel Expenses									<u> </u>	
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,			-						-	
Building Maintenance Supplies and Repairs)										
			1							_
Materials and Supplies-(e.g., Office,								_		
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)								-		
Staff Travel - (e.g., Local & Out of Town)								-		
Consultant/Subcontractor	\$153.	559							\$153,5	59.00
	¢100,								\$100,00	
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)					-				1	
Total Operating Expenses	\$153,	550							\$153.5	50.00
Total Operating Expenses Capital Expenditures	\$153,	339						_	\$100,00	59.00
TOTAL DIRECT EXPENSES	\$153,	559							\$153,55	59.00
Indirect Expenses	\$15,3								\$15,35	5.00
TOTAL EXPENSES	\$168,	914							\$168,91	14.00
I ESS In High Deserve at Deserves				1	NOTES:					
LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if appropri					NUTES.					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date: ____

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:	· · · · · · · · · · · · · · · · · · ·	Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-2e
07/01/21 - 06/30/22
PAGE B

.

		_	Invoice Number
Contractor:	San Francisco AIDS Foundation		A-2JUL21
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
ogram Name:	HIV Syringe Access and Disposal Se	rvices - Homeless Youth Alliance	
		Project Code/Detail:	
ACE Control #:		<u> </u>	
		Invoice Period:	07/1/21 - 07/31/21
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
ERSONNEL		SALANT	THISPERIOD	TODATE	DODOLI	DADANCE
					<u> </u>	
					+	
					+	
					+	
					+	
					+	
OTAL SALARIES					+	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date: _____

									07/01/22	- 06/30/2 PAGE
					in the second se	act ID #	-		nvoice Nur	nber
Contractor: San Francisco AIDS Found					1000	002634			A-2JUL	22
Address: 1035 Market Street, Suite San Francisco, CA 94103	400			Co	entract Pu	rchaeo (Order No:			
Sall Plancisco, CA 34103				00	nitiact Fu	rchasev	Jidei No.	L		
Telephone: 415-487-3000 Fax: 415-487-3009		CL	IEP]		Funding	g Source:	(Seneral F	und
Pax. 415-407-5009		CF			G	rant Co	de/Detail:			
Program Name: HIV Syringe Access and D	isposal S	ervices -	- Homele	ss You				L		
	1				Pro	ject Coo	de/Detail:			
ACE Control #:						Invoic	e Period:	07/	1/22 - 07/	31/22
									_	
						FINA	L Invoice	_	(check if	(Yes)
		TAL	DELIV			ERED		OF		AINING
DELIVERABLES	LONTR	ACTED NOC	THIS P UOS	NOC	UOS	NOC	UOS	NOC	UOS	RABLES
HYA Wrap Around & Disposal Services	12	N/A							12	N/A
		()								
				_						
		100		200		100				
Number of Clients for Appendix		NOC N/A	I	NOC	1	NOC		NOC	1	NOC N/A
EXPENDITURES	BUD	GET	EXPEN		EXPE TO D		% (BUD			
Total Salaries (See Page B)										
Fringe Benefits Total Personnel Expenses			-							
Operating Expenses:				-				_		
Occupancy-(e.g., Rental of Property, Utilities,										
Building Maintenance Supplies and Repairs)						-				
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff]								
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$153,	559							\$153,5	59.00
Other - (Meals, Audit, Transportation Reimb,				-						
Stipends, Facilitators)										
Total Operating Expenses	\$153,5	559							\$153,5	59.00
Capital Expenditures TOTAL DIRECT EXPENSES	\$153.5	559							\$153,5	59.00
Indirect Expenses	\$15,3			_					\$15,35	
TOTAL EXPENSES	\$168,9								\$168,9	
LESS: Initial Payment Recovery					NOTES:					1
Other Adjustments (Enter as negative, if appropried REIMBURSEMENT	riate)									
REIMBORGEMENT			_							

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-2f

APPENDIX F-2f 07/01/22 - 06/30/23 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-2JUL22
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
ogram Name:	HIV Syringe Access and Disposal S	ervices - Homeless Youth Alliance	
2		Project Code/Detail:	
CE Control #:		7	
		Invoice Period:	07/1/22 - 07/31/22
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES Y OF REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE Image: Construction of the second of the sec

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date: _____

										PAGE
					and the second s	act ID #			nber	
Contractor: San Francisco AIDS Found					10000	02634		A-2JUL		23
Address: 1035 Market Street, Suite	400									
San Francisco, CA 94103				Co	ntract Pur	chase (Order No:			_
Telephone: 415-487-3000)	Funding	Source:		Seneral F	und
Fax: 415-487-3009			IEP			-			_	_
Program Name: HIV Syringe Access and D	ienceal S	envices -	Homele				de/Detail:			
Flogram Name. The Synnige Access and D	isposal 5	ervicea -	Tomere	53 700			de/Detail:			
ACE Control #:	1						acibetun.			
						Invoic	e Period:	07/	1/23 - 07/	31/23
						FINA	L Invoice		(check if	Yes)
	TO	TAL	DELIVI	ERED	DELIV	ERED	%	OF	REM/	AINING
	CONTR		THIS PI		TOD		TO			RABLES
DELIVERABLES	UOS 12	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
HYA Wrap Around & Disposal Services	12	N/A		_				_	12	N/A
							-	-		-
								_		
				-		1				
			. <u> </u>							
Number of Clients for Amongly		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A		_	<u> </u>	_			0	N/A
EXPENDITURES	BUD	GET	EXPEN THIS PE		EXPENTO D		% (BUD		REMA BALA	INING
Total Salaries (See Page B)	<u></u>									
Fringe Benefits										
Total Personnel Expenses										_
Operating Expenses:						_				
Occupancy-(e.g., Rental of Property, Utilities,										_
Building Maintenance Supplies and Repairs)			_	-						_
Materials and Supplies-(e.g., Office,				-				-		
Postage, Printing and Repro., Program Supplies)				_						
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)										
A. # N										
Staff Travel - (e.g., Local & Out of Town)										_
Consultant/Subcontractor	\$153,	559							\$153,5	59.00
Other - (Meals, Audit, Transportation Reimb,			_							-
Stipends, Facilitators)										_
Total Occuption Exercises	\$153,	50				_		_	6462 E	50.00
Total Operating Expenses Capital Expenditures	0103,0								\$153,5	58.00
TOTAL DIRECT EXPENSES	\$153,5	59		<u> </u>					\$153,55	00.00
Indirect Expenses	\$153,		_	-				-	\$15,35	
TOTAL EXPENSES	\$168,9					_			\$168,91	
LESS: Initial Payment Recovery	\$100,0				NOTES:				\$100,0	1.00
Other Adjustments (Enter as negative, if appropri-	riate			_						
REIMBURSEMENT		- +	-	-						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

APPENDIX F-2g 07/01/23 - 06/30/24

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPEN	DIX F-2g
07/01/23 -	06/30/24
	PAGE B

	Invoice Number
San Francisco AIDS Foundation	A-2JUL23
1035 Market Street, Suite 400	
San Francisco, CA 94103 Contract Purchase Order No:	
415-487-3000 Fund Source:	General Fund
415-487-3009	2
Grant Code/Detail:	
HIV Syringe Access and Disposal Services - Homeless Youth Alliance	
Project Code/Detall:	
Invoice Period:	07/1/23 - 07/31/23
FINAL Invoice	(check if Yes

ETAIL PERSONNEL E ERSONNEL	FTE	BUDGETED SALARY		% OF BUDGET	REMAINING BALANCE	
EROONNEL	T	SADARI	THOPENOD	TODATE	BODGET	BALANCE
					++	
					1	
					+	
					+	
					+	
					1	

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date:

										PAGE
					Contra	ct ID #			nvoice Nur	nber
Contractor: San Francisco AIDS Found					10000	02634		A-2JUL24		
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	100			Cor	ntract Pure	chase (Order No:			
Telephone: 415-487-3000				1		unding	Source:		Seneral F	und
Fax: 415-487-3009		CH	EP			anang	g oource.		Selleral F	una
Program Name: HIV Syringe Access and Di	isposal S	ervices -	Homele	 ss You			de/Detail:	L		
							de/Detail:			
ACE Control #:						Invoic	e Period:	07/	1/24 - 07/	/31/24
						FINA	L Invoice		(check it	f Yes)
	TO	TAL	DELIV	ERED	DELIVE	RED	%	OF		AINING
DELIVERABLES	CONTR	ACTED NOC	THIS P UOS	ERIOD	TO D/ UOS	ATE NOC	TO UOS	NOC	DELIVE	RABLES
HYA Wrap Around & Disposal Services	12	N/A							12	N/A
			-							
								_	1	-
		NOC		NOC	u1	NOC		NOC		NOC
Number of Clients for Appendix		N/A							1	N/A
EXPENDITURES	BUD	GET	EXPEN THIS PE		EXPEN TO DA		% (BUD			
Total Salaries (See Page B)										
Fringe Benefits										
Total Personnel Expenses										
Operating Expenses:	_							_		
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	_							_		
During Maintenance Supplies and Repairs/			-	_		_		_		
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										_
	_									
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)			-			_		_		
Staff Travel - (e.g., Local & Out of Town)						_				
Consultant/Subcontractor	\$153,	559						_	\$153,5	59.00
Other - (Meals, Audit, Transportation Reimb,								-		
Stipends, Facilitators)										
Total Operating Expenses	\$153,	559							\$153,5	59.00
Capital Expenditures	\$153,	550					_		\$153,5	50.00
Indirect Expenses	\$153,3								\$153,35	
TOTAL EXPENSES	\$168,9								\$168,9	
LESS: Initial Payment Recovery	1.001		_		NOTES:					
Other Adjustments (Enter as negative, if appropr	riate)									

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

APPENDIX F-2h 07/01/24 - 06/30/25

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:	Date:	
	Attn: Contract Payments	(DPH Authorized Signatory)		

APPENDIX F-2h 07/01/24 - 06/30/25 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-2JUL24
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
rogram Name:	HIV Syringe Access and Disposal Serv	ices - Homeless Youth Alliance	
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/24 - 07/31/24
		FINAL Invoice	(check if Yes

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	BALANCE
					+	
					+	
TOTAL SALARIES						

T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date:

										PAGE
						act ID #			nvoice Nur	nber
Contractor: San Francisco AIDS Found Address: 1035 Market Street, Sulte					10000	02634]	A-2JL		25
San Francisco, CA 94103				Co	ntract Pu	chase (Order No:			
Telephone: 415-487-3000				1	Į.	Funding	Source:	0	General F	und
Fax: 415-487-3009		CH	IEP		G	rant Cor	le/Detail:			
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Homele	ss You	uth Allian	ce				
ACE Control #:					Pro	Ject Cot	le/Detail:			
						Invoic	e Period:	07/	1/25 - 07/	31/25
						FINA	_ Invoice		(check if	f Yes)
		TAL		ERED	DELIV		% (AINING
DELIVERABLES	UOS	NOC	UOS	RIOD	TO D UOS	NOC	UOS	NOC	UOS	NOC
HYA Wrap Around & Disposal Services	12	N/A						_	12	N/A
							-			
		-								-
									<u> </u>	
				-						
									n	
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A								N/A
EXPENDITURES	BUD	GET	EXPE THIS P		EXPENTO D		% C BUDC			
Total Salaries (See Page B)										
Fringe Benefits				_						
Total Personnel Expenses					<u> </u>					
Operating Expenses:				_						
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	_			-		-				
building Maintenance Supplies and Repairs)						-	-			_
Materials and Supplies-(e.g., Office,										
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor	\$153,	559							\$153,5	59.00
Other - (Meals, Audit, Transportation Reimb,			1							-
Stipends, Facilitators)									_	_
Total Operating Expenses	\$153,	559							\$153,5	59.00
Capital Expenditures			_							
OTAL DIRECT EXPENSES	\$153,		_						\$153,5	
Indirect Expenses	\$15,3						_		\$15,35	
OTAL EXPENSES	\$168,9	514			NOTES:				\$168,9	14.00
LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if appropri-			-		NOTES:					
Conter Adjustments (Enter as negative, if appropried to the second secon	iate)									

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments	29	(DPH Authorized Signatory)		

APPENDIX F-2i 07/01/25 - 06/30/26

APPENDIX F-2i
07/01/25 - 06/30/26
PAGEB

	PAGE E
	Invoice Number
	A-2JUL25
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
ervices - Homeless Youth Alliance	
Project Code/Detail:	
Involce Period:	07/1/25 - 07/31/25
FINAL Invoice	(check if Yes)
	Fund Source: Grant Code/Detail: rvices - Homeless Youth Alliance Project Code/Detail:

DETAIL PERSONNEL EXPENDITURES PERSONNEL FTE SALARY EXPENSES TO DATE BUDGET BUDGET BALANCE EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET BALANCE FTE SALARY THIS PERIOD EXPENSES TO DATE BUDGET FTE SALARY THIS PERIOD EXPENSES TO DATE SALARY THE SALARY TH

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date:

APPENDIX F-3b 07/01/18 - 06/30/19

	PAGE A
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Address: 1035 Market Street, Suite 400 San Francisco, CA 94103 Contract Pu Telephone: 415-487-3009 Fax: 415-487-3009 Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Cente ACE Control #: DELIVERABLES UOS NOC UOS NO	ract ID #	-		nvoice Nur	
San Francisco, CA 94103 Telephone: 415-487-3009 Fax: 415-487-3009 Fax: 415-487-3009 Fax: 415-487-3009 CHEP G Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center Pro ACE Control #: DELIVERABLES DOC NOC NUMber of Clients for Appendix ACE Control #: DELIVERABLES DELIVERABLES DELIVERABLES DOC NOC NUMber of Clients for Appendix ACE Control #: DELIVERABLES DELIVERABLES DELIVERABLES DELIVERABLES DOC NOC NUMber of Clients for Appendix ACE Control #: DELIVERABLES DOC NOC	002634		-	A-3JUL	18
Telephone: 415-487-3009 CHEP Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center Production of the services - Harm Reduction Center Production Relation - Harm Reduction Center Production - Harm Reduction Center Production - Harm Reduction - Harm Reduction Center - (Mesis, Audit, Transportation Relmb, Stipends, Facilitators) - Harm Reduction Relmb, Stipends, Facilitators - Harm Reduction - Harm Reduction Relation - Harm Reduction - Harm Reduction Relmb, Stipends, Facilitators - Harm Reduction - Harm Reduction - Harm Reduction Relmb, Stipends, Facilitators - Harm Reduction - Harm Reduction Relmb, Stipends, Facilitators - Harm Reduction - Harm Reduction - Harm - Harm Reduction Relmb, Stipends, Facilitators - Harm - Har				_	
Fax: 415-487-3009 CHEP G Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center Program Reduction Center ACE Control #:	rchase C	Order No:			
Fax: 415-487-3009 CHEP G Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center Program Reduction Center ACE Control #:	Funding	Source:		Seneral F	und
Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center ACE Control #: DELIVERABLES Syringe Access Services 1,828 1,924 1,475 Lounge Services 1,924 1,925 1,926 1,927 1,928 <th>i unung</th> <th></th> <th></th> <th>Jeneral I</th> <th>unu</th>	i unung			Jeneral I	unu
Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center ACE Control #: TOTAL DELIVERABLES DELIVERABLES DELIVERABLES DOS NOC DOS NOC DOS NOC DOS NOC DOS NOC UOS NOC UOS NOC UOS NOC NOC <th>irant Cod</th> <th>le/Detail:</th> <th></th> <th></th> <th></th>	irant Cod	le/Detail:			
ACE Control #: DELIVERABLES UOS NOC UOS NOC UOS NOC UOS Syringe Access Services 1,828 1,824 11,475 Lounge Services 1,924 11,475 NOC					
TOTAL CONTRACTED DELIVERED THIS PERIOD DELIVERED TOTO DELI		le/Detail:			
DELIVERABLES CONTRACTED UOS THIS PERIOD UOS TO UOS Syringe Access Services 1,888 31,341	•		-		
DELIVERABLES CONTRACTED THIS PERIOD TO I UOS NOC UOS NOC UOS NOC UOS Syringe Access Services 1,888 31,341	Invoice	e Period:	07/	1/18 - 07/	31/18
DELIVERABLES CONTRACTED THIS PERIOD TO I UOS NOC UOS NOC UOS NOC UOS Syringe Access Services 1,888 31,341	FINAL	_ Invoice		(check it	Yes)
DELIVERABLES CONTRACTED THIS PERIOD TO I Syringe Access Services 1,888 31,341 Image: Contraction of the services of the service of the services of the service of the	/EPED	0/	OF	REM	AINING
Syringe Access Services 1,888 31,341 Lounge Services 1,924 11,475 Lounge Services 1,924 11,475 NOC NOC NOC Number of Clients for Appendix 46641 Image: Services EXPENDITURES EXPENSES EXPENSES Fringe Benefits \$167,763 Image: Services Total Salaries (See Page B) \$671,050 Fringe Benefits Total Personnel Expenses \$838,813 Image: Services Operating Expenses: Image: Services Services Occupancy-(e.g., Rentel of Property, Utilities, \$33,214 Image: Service, \$24,564 Image: Service, \$24,564 Materials and Supplies-(e.g., Office, Postage, Printing and Repro, Program Supplies) Image: Service, \$12,500 Image: Service, \$12,500 Materials and Supplies-(e.g., Insurance, Staff \$12,500 Image: Service, \$12,500 Image: Service, \$12,500 Staff Travel - (e.g., Local & Out of Town) Image: Service, \$12,500 Image: Service, \$12,500 Image: Service, \$12,500 Consultant/Subcontractor Image: Service, \$12,500 Image: Service, \$12,500 Image: Service, \$12,500 Training, Equipment Rental/Maintenance) Image: Service, \$12,500	DATE		TAL		RABLES
Lounge Services 1,924 11,475 Image: Services in the service in th	NOC	UOS	NOC	UOS	NOC
NOC NOC Number of Clients for Appendix 46641 EXPENDITURES EXPENSES EXPENDITURES Staff Travel - (e.g., Local & Out of Town) Training, Equipment Rental/Maintenance) \$12,500 Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$70,278 Total Operating Expenses \$70,278				1,888	31,341
Number of Clients for Appendix 46641 EXPENDITURES EXPENSES EXPENSES BUDGET THIS PERIOD TO D Total Salaries (See Page B) \$671,050 Fringe Benefits Fringe Benefits \$167,763 Image: State S				1,924	11,475
Number of Clients for Appendix 46641 EXPENDITURES EXPENSES EXPENSES BUDGET THIS PERIOD TO D Total Salaries (See Page B) \$671,050 Fringe Benefits Fringe Benefits \$167,763 Image: Salaries (See Page B) Total Personnel Expenses \$838,813 Image: Salaries (See Page B) Operating Expenses: Image: Salaries (See Page B) Staff Travel - (e.g., Rental of Property, Utilities, Salaries) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) Staff Travel - (e.g., Insurance, Staff \$12,500 Training, Equipment Rental/Maintenance) Image: Salaries (See Page B) Image: Salaries (See Page B) Image: Salaries (See Page B) Staff Travel - (e.g., Local & Out of Town) Image: Salaries (See Page B) Image: Salaries (See Page B) Image: Salaries (See Page B) Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Image: Salaries (See Page B) Image: Salaries (See Page B) Image: Salaries (See Page B) Total Operating Expenses \$70,278 Image: Salaries (See Page B) Image: Salaries (See Page B)					-
Number of Clients for Appendix 46641 EXPENDITURES EXPENSES EXPENSES BUDGET THIS PERIOD TO D Total Salaries (See Page B) \$671,050 Fringe Benefits Fringe Benefits \$167,763 Image: State S					
Number of Clients for Appendix 46641 EXPENDITURES EXPENSES EXPENSES BUDGET THIS PERIOD TO D Total Salaries (See Page B) \$671,050 Fringe Benefits Fringe Benefits \$167,763 Image: State S					
Number of Clients for Appendix 46641 EXPENDITURES EXPENSES EXPENSES BUDGET THIS PERIOD TO D Total Salaries (See Page B) \$671,050 Finge Benefits Fringe Benefits \$167,763 Image: Salaries (See Page B) Solaries (See Page B) Total Personnel Expenses \$838,813 Image: Salaries (See Page B) Solaries (See Page B) <t< td=""><td>NOC</td><td></td><td>NOC</td><td></td><td>NOC</td></t<>	NOC		NOC		NOC
EXPENDITURES EXPENSES EXPENDITURES EXPENSES EXPENDITURES EXPENDENCION EXPENSES EXPENDENCION EXPENSES EXPENDENCION EXPENSES	NOC		NOC	1	46.641
BUDGET THIS PERIOD TO D Total Salaries (See Page B) \$671,050 Fringe Benefits Fringe Benefits \$167,763 Image: Salaries (See Page B) Total Personnel Expenses \$838,813 Image: Salaries (See Page B) Operating Expenses: Image: Salaries (See Page B) \$671,050 Operating Expenses: Image: Salaries (See Page B) \$838,813 Operating Expenses: Image: Salaries (See Page B) Image: Salaries (See Page B) Occupancy-(e.g., Rental of Property, Utilities, Salaries (Salaries (Salar					40,041
Total Salaries (See Page B) \$671,050 Fringe Benefits \$167,763 Total Personnel Expenses \$838,813 Operating Expenses: \$33,214 Building Maintenance Supplies and Repairs) \$33,214 Materials and Supplies-(e.g., Office, \$24,564 Postage, Printing and Repro., Program Supplies) \$12,500 General Operating-(e.g., Insurance, Staff \$12,500 Training, Equipment Rental/Maintenance) \$12,500 Staff Travel - (e.g., Local & Out of Town) \$12,500 Consultant/Subcontractor \$12,500 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$70,278 Total Operating Expenses \$70,278		% (REMA	INING
Fringe Benefits \$167,763 Total Personnel Expenses \$838,813 Operating Expenses: \$33,214 Building Maintenance Supplies and Repairs) \$33,214 Materials and Supplies-(e.g., Coffice, \$24,564 Postage, Printing and Repro., Program Supplies) \$12,500 General Operating-(e.g., Insurance, Staff \$12,500 Training, Equipment Rental/Maintenance) \$12,500 Staff Travel - (e.g., Local & Out of Town) \$12,500 Consultant/Subcontractor \$12,500 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$70,278 Capital Expenditures \$70,278	ATE	BUD	GET		NCE
Total Personnel Expenses \$838,813 Operating Expenses:				\$671,0	
Operating Expenses: \$33,214 Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) \$33,214 Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) \$24,564 General Operating-(e.g., Insurance, Staff \$12,500 Training, Equipment Rental/Maintenance) \$12,500 Staff Travel - (e.g., Local & Out of Town) \$12,500 Consultant/Subcontractor \$12,500 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$70,278				\$838,8	
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) \$33,214 Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) \$24,564 General Operating-(e.g., Insurance, Staff \$12,500 Training, Equipment Rental/Maintenance) \$12,500 Staff Travel - (e.g., Local & Out of Town) \$12,500 Consultant/Subcontractor \$12,500 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$70,278 Capital Expenditures \$70,278				+000,0	10.00
Materials and Supplies-(e.g., Office, \$24,564 Postage, Printing and Repro., Program Supplies)				\$33,2	14.00
Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses \$70,278			_		_
Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses \$70,278				\$24,56	24.00
Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses \$70,278 Capital Expenditures				φ24,00	74.00
Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses \$70,278 Capital Expenditures				A40.54	0.00
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses \$70,278 Capital Expenditures	-	-		\$12,50	00.00
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses \$70,278 Capital Expenditures					
Stipends, Facilitators) Total Operating Expenses \$70,278 Capital Expenditures					
Stipends, Facilitators) Total Operating Expenses \$70,278 Capital Expenditures					
Capital Expenditures				_	
Capital Expenditures				670.05	0.00
				\$70,27	8.00
OTAL DIRECT EXPENSES \$909,091		_		\$909.0	91.00
Indirect Expenses \$90,909				\$90,90	
OTAL EXPENSES \$1,000,000				\$1,000,0	
LESS: Initial Payment Recovery NOTES:	8				
Other Adjustments (Enter as negative, if appropriate) REIMBURSEMENT					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature:

Date:

Title:

Date: _____

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-3b 07/01/18 - 06/30/19 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-3JUL18
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
ogram Name:	HIV Syringe Access and Disposal Ser	vices - Harm Reduction Center	
		Project Code/Detail:	
CE Control #:		7	
		Invoice Period:	07/1/18 - 07/31/18

DETAIL PERSONNEL EXPENDITURES EXPENSES BUDGETED EXPENSES % OF REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE V.P. Programs & Services 0.10 \$20,300 \$20,300.00 \$6,000 Director, Behavioral Health Services 0.05 \$6,000.00 Director, SAS 0.20 \$18,000 \$18,000.00 Associate Director, 6th Street HRC 1.00 7.75 \$63,000 \$63,000.00 Health Educator \$426,250 \$426,250.00 \$27,500.00 Mobile Health Educator 0.50 \$27,500 \$55,000 \$55,000.00 Health Educator/Inventory Team Lea 1.00 Inventory Associate/Health Educator 1.00 \$55,000 \$55,000.00

 Interview
 Sp(1,000)
 \$671,050.00

 I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

										PAGE /
					Contra	act ID #		1	voice Nur	nber
Contractor: San Francisco AIDS Foun	dation				10000	02634]		A-3JUL	
Address: 1035 Market Street, Suite	400						-			
San Francisco, CA 94103				Co	Intract Pur	chase (Order No:	/		
Telephone: 415-487-3000						Funding	Source:	6	eneral F	und
Fax: 415-487-3009		CH	EP			r ananış	, cource.		eneral	
							de/Detail:			
Program Name: HIV Syringe Access and D	isposal S	ervices -	Harm Re	ducti				_		_
ACE Control #:	1				Pro	ject Coo	le/Detall:		_	
	1					Invoic	e Period:	07/1	/19 - 07/	31/19
						FINA	L Invoice		(check if	Yes)
									DEM	-
		TAL	DELIVE		DELIV TO D		% (TO			AINING RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services	1,888	31,341				-			1,888	31,341
Lounge Services	2,550	15,300						_	2,550	15,300
				_						
				-						
		1100						100		
Number of Clients for Appendix		NOC 46641		NOC	1 1	NOC		NOC		NOC 46,641
		40041		_					1	40,041
EXPENDITURES			EXPENS		EXPEN		% (INING
		GET	THIS PER	RIOD	TO D	ATE	BUDO	GET		NCE
Total Salaries (See Page B) Fringe Benefits	\$680				<u> </u>				\$680,7	
Total Personnel Expenses	\$170 \$850			-					\$170,1	
Operating Expenses:	\$000	,330			<u> </u>				4030,8	30.00
Occupancy-(e.g., Rental of Property, Utilities,	\$25,	214				-			\$25,2	14.00
Building Maintenance Supplies and Repairs)	ψ2.0,					_				14.00
Materials and Supplies-(e.g., Office,	\$24,	564							\$24,56	64.00
Postage, Printing and Repro., Program Supplies)										
General Operating-(e.g., Insurance, Staff	\$8,3	23		-				-	\$8,32	3.00
Training, Equipment Rental/Maintenance)	<i>0,0</i>	20							40,02	0.00
Staff Travel - (e.g., Local & Out of Town)				-						
Consultant/Subcontractor										
Other (Mark A. d) Terroratellar Dalah										
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)										
Total Operating Expenses	\$58,1	01							\$58,10	1.00
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$909,								\$909,0	
Indirect Expenses	\$90,9			_					\$90,90	
TOTAL EXPENSES	\$1,000	,000			NOTES				\$1,000,0	00.00
LESS: Initial Payment Recovery	data)			-	NOTES:					
Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)			-						
				_						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.
Signature: Date:

Title:

Date:

APPENDIX F-3c 07/01/19 - 06/30/20

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-3c 07/01/19 - 06/30/20 PAGE B

			Invoice Number
Contractor	San Francisco AIDS Foundation		A-3JUL19
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
ogram Name:	HIV Syringe Access and Disposal Serv	ices - Harm Reduction Center	
ogram Name:	HIV Syringe Access and Disposal Serv	ices - Harm Reduction Center Project Code/Detail:	
anna - anna		-	
ogram Name: CE Control #:		-	07/1/19 - 07/31/19

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE V.P. Programs & Services 0.10 \$20,300.00 \$20,300 Director, Behavioral Health Services 0.05 \$6,000 \$6,000.00 \$10,500 Director, SAS \$10,500.00 0.15 Associate Director, 6th Street HRC 1.00 \$64,733 \$64,733.00 Health Educator 7.75 \$437,976 \$437,976.00 0.50 Mobile Health Educator \$28,257 \$28,257.00 Health Educator/Inventory Team Lea 1.00 \$56,513 \$56,513.00 Inventory Associate/Health Educator 1.00 \$56,513 \$56,513.00 TOTAL SALARIES 11.55 \$680,792 \$680,792.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

ACE Control #: Project Code/Detail: Invoice Period: 07/1/20 - 07/31/20 FINAL Invoice (check if Yes) DELIVERABLES CONTRACTED DELIVERABLE Syringe Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 1.46641 Vinge Access Services 1.46641 46641 EXPENSES EXPENSES BUDGET THIS PERIOD TO DATE BUDGET Total Personnel Expenses <th>Contractor: San Francisco AIDS Foun</th> <th>dation</th> <th></th> <th></th> <th></th> <th>and the second s</th> <th>act ID # 002634</th> <th>1</th> <th>, </th> <th>A-3JUL2</th> <th></th>	Contractor: San Francisco AIDS Foun	dation				and the second s	act ID # 002634	1	, 	A-3JUL2	
Telephone: 415-487-3009 Funding Source: General Funding Source: Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center Brant Code/Detail: General Funding Source: G	Address: 1035 Market Street, Suite	400						-			
Fax: 415-487-3009 CHEP Grant Code/Detail: Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center Project Code/Detail:	San Francisco, CA 94103				Co	ontract Pu	rchase (Order No:			
Grant Code/Detail: Grant Code/Detail: ACE Control #: Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center ACE Control #: DIVENTION Center Project Code/Detail: Invoice Period: 07/1/20 - 07/31/20 FIRAL Invoice Period: OT/1/20 - 07/31/20 FIRAL Invoice Period: OT/1/20 - 07/31/20 Surface Deturered Noc UOS Noc UOS Noc UOS Noc UOS Noc UOS Noc Noc <th></th> <th></th> <th>СН</th> <th>ED</th> <th></th> <th></th> <th>Funding</th> <th>source:</th> <th>6</th> <th>General F</th> <th>und</th>			СН	ED			Funding	source:	6	General F	und
ACE Control #: Project Code/Detail: Invoice Period: 07/1/20 - 07/31/20 FINAL Invoice (check if Yes) DELIVERABLES CONTRACTED DELIVERABLE Syringe Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 31,341 Lounge Services 2,550 15,300 Vinge Access Services 1.886 1.46641 Vinge Access Services 1.46641 46641 EXPENSES EXPENSES BUDGET THIS PERIOD TO DATE BUDGET Total Personnel Expenses <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>de/Detail:</th> <th></th> <th></th> <th></th>								de/Detail:			
Invoice Period: 07/1/20 - 07/31/20 FINAL Invoice	Program Name: HIV Syringe Access and D	isposal 5	ervices -	narm K	eaucu			le/Detail:			_
FINAL Invoice Contractient DELIVERABLES Contractient This PERIOD DELIVERABLES % OF REMAINING Deliverables UOS NOC UOS NOC UOS NOC UOS NOC Syringe Access Services 1.888 31.341 Image Services 2,550 15.300 Image Services 1 Image Services 2,550 15.300 Image Services 1 1 Image Services 1 <t< td=""><td>ACE Control #:</td><td>]</td><td></td><td></td><td></td><td></td><td>Invoic</td><td>Period:</td><td>07/</td><td>1/20 - 07/</td><td>31/20</td></t<>	ACE Control #:]					Invoic	Period:	07/	1/20 - 07/	31/20
TOTAL CONTRACTED DELIVERED THIS PERIOD DELIVERED TO DATE Soc UOS NOC DELIVERED TOTAL NOC DELIVERED UOS NOC NO									017	-	
CONTRACTED THIS PERIOD TO DATE TOTAL DELIVERABLES UOS NOC ISS 1,888 31,341 I I ISS 2,550 15,300 ISS 1,888 31,341 I ISS 2,550 15,300 ISS 1,888 31,341 ISS ISS 1,888 31,341 ISS <		1000									
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NOC NOC <td></td> <td>and the second se</td> <td>A REAL PROPERTY AND ADDRESS OF TAXABLE PARTY.</td> <td>000</td> <td>NOU</td> <td>1</td> <td>Inde</td> <td></td> <td>NOU</td> <td>11</td> <td>A REAL PROPERTY AND INCOME.</td>		and the second se	A REAL PROPERTY AND ADDRESS OF TAXABLE PARTY.	000	NOU	1	Inde		NOU	11	A REAL PROPERTY AND INCOME.
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Number of Clients for Appendix 46641 46641 46.841 EXPENDITURES BUDGET THIS PERIOD TO DATE BUDGET BALANCE Total Salaries (See Page B) \$680,792 \$680,792 \$680,792 \$680,792 \$680,792.00 Tringe Benefits \$170,198 \$170,198 \$170,198.00 \$170,198.00 Doperating Expenses: \$25,214 \$25,214.00 \$850,990.00 \$850,990.00 Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) \$25,214 \$25,214.00 \$25,214.00 Building Maintenance Supplies and Repairs) \$25,214 \$25,214.00 \$25,214.00 Materials and Supplies-(e.g., Office, Postage, Printing and Repro, Program Supplies) \$24,564 \$24,564.00 Ocsultant/Subcontractor \$88,323 \$88,323.00 \$88,323.00 Staff Travel - (e.g., Local & Out of Town) \$25,81,01 \$25,81,01 \$25,81,01 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$58,101 \$558,101.00 \$558,101.00 Total Operating Expenses \$558,101 \$558,101.00 \$909,091.00 \$909,091.00											
Number of Clients for Appendix 46641 46641 46.841 EXPENDITURES BUDGET THIS PERIOD TO DATE BUDGET BALANCE Total Salaries (See Page B) \$680,792 \$680,792 \$680,792 \$680,792 \$680,792.00 Tringe Benefits \$170,198 \$170,198 \$170,198.00 \$170,198.00 Doperating Expenses: \$25,214 \$25,214.00 \$850,990.00 \$850,990.00 Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) \$25,214 \$25,214.00 \$25,214.00 Building Maintenance Supplies and Repairs) \$25,214 \$25,214.00 \$25,214.00 Materials and Supplies-(e.g., Office, Postage, Printing and Repro, Program Supplies) \$24,564 \$24,564.00 Ocsultant/Subcontractor \$88,323 \$88,323.00 \$88,323.00 Staff Travel - (e.g., Local & Out of Town) \$25,81,01 \$25,81,01 \$25,81,01 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$58,101 \$558,101.00 \$558,101.00 Total Operating Expenses \$558,101 \$558,101.00 \$909,091.00 \$909,091.00									_		
Number of Clients for Appendix 46641 46641 46.841 EXPENDITURES BUDGET THIS PERIOD TO DATE BUDGET BALANCE Total Salaries (See Page B) \$680,792 \$680,792 \$680,792 \$680,792.00 Tringe Benefits \$170,198 \$170,198 \$170,198.00 \$170,198.00 Dotal Parsonnel Expenses \$850,990 \$850,990 \$850,990.00 \$850,990.00 Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) \$25,214 \$25,214.00 \$25,214.00 Materials and Supplies-(e.g., Office, Postage, Printing and Repro, Program Supplies) \$24,564 \$24,564.00 \$24,564.00 Postage, Printing and Repro, Program Supplies) \$88,323 \$88,323.00 \$88,323			NOC		NOC		NOC		NOC		NOC
BUDGET THIS PERIOD TO DATE BUDGET BALANCE Otal Salaries (See Page B) \$680,792 \$680,792 \$680,792.00 \$170,198.00 \$\$170,198.00 \$\$170,198.00 \$\$170,198.00 \$\$10,00,000 \$\$1,000,000 \$\$25,214 \$\$10,01,01 \$\$25,214.00 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 \$\$1,000,000 </td <td>Number of Clients for Appendix</td> <td></td> <td></td> <td></td> <td>1100</td> <td>1</td> <td></td> <td></td> <td>nee</td> <td></td> <td>46,641</td>	Number of Clients for Appendix				1100	1			nee		46,641
Total Salaries (See Page B) \$680,792 \$680,792 Finge Benefits \$170,198 \$170,198 Total Personnel Expenses \$850,990 \$850,990.00 Operating Expenses: \$25,214 \$25,214.00 Building Maintenance Supplies and Repairs) \$25,214 \$25,214.00 Materials and Supplies-(e.g., Office, Postage, Printing and Repro, Program Supplies) \$24,564 \$24,564.00 Ceneral Operating-(e.g., Insurance, Staff \$8,323 \$8,323.00 Training, Equipment Rental/Maintenance) \$8,323 \$8,323.00 Staff Travel - (e.g., Local & Out of Town) \$24,564 \$24,564.00 Consultant/Subcontractor \$24,564 \$24,564.00 Training, Equipment Rental/Maintenance) \$8,323.00 \$8,323.00 Staff Travel - (e.g., Local & Out of Town) \$25,214.00 \$24,564.00 Consultant/Subcontractor \$24,564 \$24,564.00 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$358,101 \$358,101.00 Capital Expenditures \$390,091 \$3909,091.00 \$3909,091.00 Indirect Expenses \$90,909 \$90,909.00 \$	EXPENDITURES	BUD	GET								
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Building Meintenance Supplies and Repairs) Image: Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro, Program Supplies) \$24,564 General Operating-(e.g., Insurance, Staff \$8,323 Training, Equipment Rental/Maintenance) \$8,323 Staff Travel - (e.g., Local & Out of Town) Image: Supplies and Reprox Consultant/Subcontractor Image: Supplies and Reprox Other - (Meals, Audit, Transportation Reimb, Stippends, Facilitators) Image: Staff Travel - (Staff Staff		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Statistics in the local division in the loca							\$170,1	98.00
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Postage, Printing and Repro., Program Supplies)	Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$850,	990							\$170,1 \$850,9	98.00 90.00
Postage, Printing and Repro., Program Supplies)	Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$850,	990							\$170,1 \$850,9	98.00 90.00
Training, Equipment Rental/Maintenance)	Dperating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$850, \$25,2	990 214							\$170,1 \$850,9 \$25,2	98.00 90.00 4.00
Training, Equipment Rental/Maintenance)	Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$850, \$25,2	990 214							\$170,1 \$850,9 \$25,2	98.00 90.00 4.00
Consultant/Subcontractor	Deperating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$850, \$25,2 \$24,5	990 214 564							\$170,1 \$850,9 \$25,2 \$24,56	98.00 90.00 4.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Stipends, Facilitators) Total Operating Expenses \$58,101 Capital Expenditures S58,101 OTAL DIRECT ExPENSES \$909,091 Indirect Expenses \$90,909 State \$90,909 State \$90,909 State \$1,000,000	Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff	\$850, \$25,2 \$24,5	990 214 564							\$170,1 \$850,9 \$25,2 \$24,56	98.00 90.00 4.00
Stipends, Facilitators) Stipends, Facilitators Total Operating Expenses \$58,101 Capital Expenditures \$58,101 OTAL DIRECT EXPENSES \$909,091 Indirect Expenses \$90,909 OTAL EXPENSES \$90,909 \$90,909 \$90,909.00 OTAL EXPENSES \$1,000,000	Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$850, \$25,2 \$24,5	990 214 564							\$170,1 \$850,9 \$25,2 \$24,56	98.00 90.00 4.00
Stipends, Facilitators) Stipends, Facilitators Total Operating Expenses \$58,101 Capital Expenditures \$58,101 OTAL DIRECT EXPENSES \$909,091 Indirect Expenses \$90,909 OTAL EXPENSES \$90,909 \$90,909 \$90,909.00 OTAL EXPENSES \$1,000,000	Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town)	\$850, \$25,2 \$24,5	990 214 564							\$170,1 \$850,9 \$25,2 \$24,56	98.00 90.00 4.00
Capital Expenditures Second Seco	Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor	\$850, \$25,2 \$24,5	990 214 564							\$170,1 \$850,9 \$25,2 \$24,56	98.00 90.00 4.00
OTAL DIRECT EXPENSES \$909,091 \$909,091 Indirect Expenses \$90,909 \$90,909.00 OTAL EXPENSES \$1,000,000 \$1,000,000	Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb,	\$850, \$25,2 \$24,5	990 214 564							\$170,1 \$850,9 \$25,2 \$24,56	98.00 90.00 4.00
Indirect Expenses \$90,909 \$90,909.00 OTAL EXPENSES \$1,000,000 \$1,000,000.00	Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses	\$850, \$25,2 \$24,5 \$8,3	990 214 564 23							\$170,1 \$850,9 \$25,2* \$24,50 \$8,32	98.00 90.00 14.00 34.00 3.00
OTAL EXPENSES \$1,000,000 \$1,000,000	Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$850, \$25,2 \$24,5 \$8,3 \$8,3 \$58,1	990 214 564 23 01							\$170,1 \$850,9 \$25,2 \$24,56 \$8,32 \$8,32 \$8,32	98.00 90.00 14.00 34.00 3.00 1.00
	Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$850, \$25,2 \$24,5 \$8,3 \$8,3 \$58,1 \$909,0	990 214 564 23 01							\$170,1 \$850,9 \$25,2 \$24,56 \$8,32 \$8,32 \$58,10 \$909,03	98.00 90.00 14.00 34.00 3.00 1.00
	Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$850, \$25,2 \$24,5 \$8,3 \$8,3 \$58,1 \$909,0 \$90,9	990 214 564 23 01 091							\$170,1 \$850,9 \$25,2 \$24,56 \$8,32 \$8,32 \$58,10 \$58,10 \$909,03 \$90,90	98.00 90.00 14.00 34.00 3.00 1.00 9.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.
Signature: Date:

Title:

Date: _____

APPENDIX F-3d

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-3d 07/01/20 - 06/30/21 PAGE B

			Invoice Number
Contractor: S	San Francisco AIDS Foundation		A-3JUL20
Address: 1	035 Market Street, Suite 400		
S	an Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 4	15-487-3000	Fund Source:	General Fund
Fax: 4	15-487-3009		
		Grant Code/Detail:	
ogram Name: H	IV Syringe Access and Disposal Serv	ices - Harm Reduction Center	
		Project Code/Detall:	
CE Control #:			
CE Control #:		Invoice Period:	07/1/20 - 07/31/20

PERCANNEL	-	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
V.P. Programs & Services	0.10	\$20,300				\$20,300.00
Director, Behavioral Health Services	0.05	\$6,000				\$6,000.00
Director, SAS	0.15	\$10,500				\$10,500.00
Associate Director, 6th Street HRC	1.00	\$64,733				\$64,733.00
Health Educator	7.75	\$437,976				\$437,976.00
Mobile Health Educator	0.50	\$28,257				\$28,257.00
Health Educator/Inventory Team Lea	1.00	\$56,513				\$56,513.00
Inventory Associate/Health Educator	1.00	\$56,513				\$56,513.00
TOTAL SALARIES	11.55	\$680,792		e		\$680,792.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

Title:

DETAIL DEDSONNEL EXDENDITUDES

									07/01/21	- 06/30/2 PAGE
					Contr	act ID #			nvoice Nur	nber
Contractor: San Francisco AIDS Foundation					1000002634			A-3JUL21		
Address: 1035 Market Street, Suite San Francisco, CA 94103	400			Co	ntract Pu	rchase (Order No:			
				, 00	mactru					_
Telephone: 415-487-3000 Fax: 415-487-3009		СН	EP			Funding	3 Source:	(General F	und
Program Names LIN/ Surings Assess and D	Veneral P			 			de/Detail:			
Program Name: HIV Syringe Access and D	isposal 3	ervices -	narm N	euucu			le/Detail:	_		
ACE Control #:]					Invoic	e Period:	07/	1/21 - 07/	31/21
								017	_	
	1						L Invoice		(check if	549-9540 (8 6)
DELIVERABLES	CONTR	TAL	THIS P		TO	DATE	% (TOT	TAL	DELIVE	RABLES
Svringe Access Services	UOS	NOC 31,341	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Lounge Services	1,888 2,550	15,300							1,888 2,550	31,341
								_		
				_						
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		46641			U				11	46,641
EXPENDITURES	BUD	GET	EXPENTITIES PI		EXPE TO D		% C BUDO			
Total Salaries (See Page B)	\$680,	792	(}					\$680,7	92.00
Fringe Benefits	\$170,								\$170,1	98.00
Total Personnel Expenses	\$850,	990							\$850,9	90.00
Operating Expenses:								-		
Occupancy-(e.g., Rental of Property, Utilities,	\$25,2	214							\$25,2	14.00
Building Maintenance Supplies and Repairs)			-		-					
Materials and Supplies-(e.g., Office,	\$24,5	564							\$24,56	\$4.00
Postage, Printing and Repro., Program Supplies)					-					
General Operating-(e.g., Insurance, Staff	\$8,3	23					· · · · · ·		\$8,32	3.00
Training, Equipment Rental/Maintenance)				_						
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,					-					
Stipends, Facilitators)									_	
Total Operating Expenses	\$58,1	01							\$58,10	1.00
Capital Expenditures	\$909.0	091					_		\$909.0	1 00
Indirect Expenses	\$90.9								\$90,90	
TOTAL EXPENSES	\$1,000								\$1,000,0	
LESS: Initial Payment Recovery	- 11		-		NOTES:					
Other Adjustments (Enter as negative, if approp	riate)				Contraction of the second s					
REIMBURSEMENT				1						

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: Date:

т	itle	
. 4	ITIE	

Send to:	SFDPH Fiscal / Invoice Processing		
Ocha to.	1380 Howard Street, 4th Floor, Suite 423		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-3e

APPENDIX F-3e 07/01/21 - 06/30/22 PAGE B

		Invoice Number
Contractor: San Francisco AIDS Foundation		A-3JUL21
Address: 1035 Market Street, Suite 400		
San Francisco, CA 94103	Contract Purchase Order No:	_
Telephone: 415-487-3000	Fund Source:	General Fund
Fax: 415-487-3009		
	Grant Code/Detail:	
rogram Name: HIV Syringe Access and Disposal Se	ervices - Harm Reduction Center	
	Project Code/Detail:	
ACE Control #:] _	
	Invoice Period:	07/1/21 - 07/31/21
	FINAL Invoice	(check if Yes)

PERSONNEL		BUDGETED SALARY	EXPENSES	EXPENSES	% OF BUDGET	REMAINING
	FTE 0.10		THIS PERIOD	TO DATE	BODGET	BALANCE \$20,300.00
V.P. Programs & Services		\$20,300				
Director, Behavioral Health Services	0.05	\$6,000			+	\$6,000.00
Director, SAS	0.15	\$10,500			+	\$10,500.00
Associate Director, 6th Street HRC	1.00	\$64,733				\$64,733.00
Health Educator	7.75	\$437,976				\$437,976.00
Mobile Health Educator	0.50	\$28,257				\$28,257.00
Health Educator/Inventory Team Lea	1.00	\$56,513				\$56,513.00
Inventory Associate/Health Educator	1.00	\$56,513				\$56,513.00
TOTAL SALARIES	11.55	\$680,792				\$680,792.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Date:

Certified By:

Title:

Appendix F-3e Contract ID# 1000002634
APPENDIX F-3f 07/01/22 - 06/30/23

PAGE	A

то	CH Services -	EP Harm R]	10000 Intract Pur G on Cente	Funding	Source: le/Detail:		A-3JUL2 General Fi	22
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TO ONTF OS 388	Gervices -]	G on Cente	Funding rant Cod	Source: le/Detail:		eneral F	ùnd
TO ONTF OS 388	Gervices -]	G on Cente	Funding rant Cod	Source: le/Detail:		eneral F	und
TO ONTF OS 388	Gervices -		leductio	G on Cente	rant Cod	le/Detail:		General F	und
TO ONTF OS 388	Gervices -		leducti	on Cente	r				
TO ONTF OS 388	TAL	Harm R	J leducti	on Cente	r			-	
TO ONTF OS 388	TAL					Detall			
ONTR OS 388						e/Detail:			
ONTR OS 388									
ONTR OS 388					Invoice	Period:	07/	1/22 - 07/	31/22
ONTR OS 388					FINAL	. Invoice		(check if	f Yes)
ONTR OS 388		DELIV	/ERED	DELIV	ERED	%	OF	REM/	AINING
388		THIS P	ERIOD	TOD	DATE	TOT	TAL	DELIVE	RABLES
	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
	31,341							1,888	31,341
	10,000							2,000	10,500
					_				
_									
	NOC		NOC		NOC		NOC		NOC
_	46641								46,641
BUD	GET	and a second second second second					23.02.2		
680,	,792			1				\$680,7	
			_					\$170,1	98.00
850,	,990							\$850,9	90.00
205	014							605 0	14.00
p20,4	214							\$20,2	14.00
524,	564							\$24,56	34.00
F 8 3	23							\$8.32	3.00
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58.1	01				-	-		\$58 10	1.00
								\$909,09	
		_						\$90,90	
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				NOTES:				\$1,000,0	00.00
	6800 1770 8550 \$25,; \$24,; \$8,3 \$8,3 \$58,1 909,; 909,	BUDGET 680,792 170,198 850,990 \$25,214 \$24,564 \$8,323 \$8,323 \$58,101 909,091 90,909 ,000,000	BUDGET THIS PA	680,792 1170,198 1850,990 \$25,214 \$24,564 \$8,323 \$58,101 909,091 909,091 909,099	BUDGET THIS PERIOD TO D. 5680,792	BUDGET THIS PERIOD TO DATE 680,792	BUDGET THIS PERIOD TO DATE BUDG 5680,792	BUDGET THIS PERIOD TO DATE BUDGET 5680,792	BUDGET THIS PERIOD TO DATE BUDGET BALA 6680,792 \$680,792 \$680,792 \$680,792 \$170,198 1170,198 \$170,198 \$170,198 \$170,198 \$170,198 \$25,214 \$25,214 \$25,214 \$25,214 \$25,214 \$24,564 \$24,564 \$24,564 \$24,564 \$88,323 \$88,323 \$88,32 \$88,32 \$58,101 \$58,101 \$58,101 \$58,101 \$909,091 \$909,090 \$90,900 \$90,900

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature: Title: Date:

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-3f 07/01/22 - 06/30/23 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-3JUL22
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
ogram Name:	HIV Syringe Access and Disposa	al Services - Harm Reduction Center	
22.1		Project Code/Detail:	
CE Control #:			
		Invoice Period:	07/1/22 - 07/31/22

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL THIS PERIOD FTE SALARY TO DATE BUDGET BALANCE V.P. Programs & Services 0.10 \$20,300 \$20.300.00 Director, Behavioral Health Services \$6,000 0.05 \$6,000.00 Director, SAS 0.15 \$10,500 \$10,500.00 1.00 \$64,733 \$437,976 \$64,733.00 Associate Director, 6th Street HRC Health Educator 7.75 \$437,976.00 Mobile Health Educator 0.50 \$28,257 \$28,257.00 Health Educator/Inventory Team Lea \$56,513 1.00 \$56,513.00 Inventory Associate/Health Educator 1.00 \$56,513 \$56,513.00 TOTAL SALARIES 11.55 \$680,792 \$680,792.00

T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Date:

Title:

									07/01/23	- 06/30/2 PAGE
					-	act ID #	-		nvoice Nur	nber
Contractor: San Francisco AIDS Foun					10000	02634			A-3JUL	23
Address: 1035 Market Street, Suite San Francisco, CA 94103	400			Co	Intract Pu	rchase (order No:			
Sall Francisco, CA 54103					intract r u	Cildse C	· L			
Telephone: 415-487-3000 Fax: 415-487-3009		CHEP			Funding Source:				General F	und
					G	rant Coo	le/Detail:			
Program Name: HIV Syringe Access and D	isposal S	ervices -	Harm R	educti			" 			
ACE Control #:	1				Pro	ject Coo	le/Detail:			
	1					Invoice	Period:	07/	1/23 - 07/	31/23
						FINAL	. Invoice		(check i	f Yes)
		TAL	DELIV THIS P	ERIOD	TO		то	OF TAL	DELIVE	AINING RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services	1,888	31,341							1,888	31,341
Lounge Services	2,550	15,300							2,550	15,300
		<u> </u>								
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		46641								46,641
EXPENDITURES	BUD	GET	EXPE THIS PI		EXPE TO D		% BUD			
Total Salaries (See Page B)	\$680.	Contract of the local division of the local		and the second second	1				\$680,7	
Fringe Benefits	\$170,	198			1				\$170,1	
Total Personnel Expenses	\$850,	990							\$850,9	90.00
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$25,2	214				· · · · · · · · · · · · · · · · · · ·	1		\$25,2	14.00
Building Maintenance Supplies and Repairs)			_	_			_			
Materials and Supplies-(e.g., Office,	\$24,	564		-					\$24,50	54.00
Postage, Printing and Repro., Program Supplies)										
Constal Operating to a lawrence Staff	\$8,3	22		-	<u> </u>			_	\$8,32	2.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	40, 3	23	_						φ0,32	3.00
riaming, Equipmont remaindent to the state of				_					-	
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor								_		_
Other - (Meals, Audit, Transportation Reimb,				-						
Stipends, Facilitators)										
Total Operating Expenses	\$58,1	01					-		\$58,10	1 00
Capital Expenditures	000,1								400, TC	
OTAL DIRECT EXPENSES	\$909,								\$909,0	91.00
Indirect Expenses	\$90,9								\$90,90	
OTAL EXPÉNSES	\$1,000	,000							\$1,000,0	00.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)				1					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.
Signature:
Date:

Title:

Date:

APPENDIX F-3g

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-3g 07/01/23 - 06/30/24 PAGE B

			Invoice Number
Contractor	San Francisco AIDS Foundation		A-3JUL23
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:	415-487-3009		
		Grant Code/Detail:	
ogram Name:	HIV Syringe Access and Disposal Service	vices - Harm Reduction Center	
9424		Project Code/Detail:	
ACE Control #:			
	· · · · · · · · · · · · · · · · · · ·	Invoice Period:	07/1/23 - 07/31/23
		FINAL Invoice	(check if Yes)

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
	0.10	\$20,300	THIS PERIOD	TODATE	BODGET	\$20,300.00
V.P. Programs & Services	0.05	\$6,000				
Director, Behavioral Health Services						\$6,000.00
Director, SAS	0.15	\$10,500				\$10,500.00
Associate Director, 6th Street HRC	7.75	\$64,733 \$437,976			+	\$64,733.00
Health Educator						\$437,976.00
Mobile Health Educator	0.50	\$28,257			+	\$28,257.00
Health Educator/Inventory Team Lea	1.00	\$56,513			+	\$56,513.00
Inventory Associate/Health Educator	1.00	\$56,513				\$56,513.00
OTAL SALARIES	11.55	\$680,792				\$680,792.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Date: _____

Title:

									07/01/24	- 06/30/2 PAGE
					and the second s	act ID #	-		nvoice Nur	
Contractor: San Francisco AIDS Four					10000	02634			A-3JUL	24
Address: 1035 Market Street, Suite San Francisco, CA 94103	400			Co	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000				1		Funding	Source:		General F	und
Fax: 415-487-3009		CH	EP						Sonorari	
Program Name: HIV Syringe Access and D	Disposal S	ervices -	Harm R	eductio			de/Detail:	L		
ACE Control #:	T				Pro	ject Co	de/Detail:			
ACE Control #.	1					Invoic	e Period:	07/	1/24 - 07/	31/24
						FINA	L Invoice		(check if	[Yes)
		TAL	DELIV THIS P			ERED	% TO	OF		AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services	1,888	31,341						1	1,888	31,341
Lounge Services	2,550	15,300			l			_	2,550	15,300
					<u> </u>			-		
										<u> </u>
	0									
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		46641								46,641
EXPENDITURES	BUD	GET	EXPEN THIS PE		EXPERTO D		% (BUD			
Total Salaries (See Page B)	\$680,	792							\$680,7	92.00
Fringe Benefits	\$170,								\$170,1	
Total Personnel Expenses	\$850,	990				_			\$850,9	90.00
Operating Expenses:	005									
Occupancy-(e.g., Rental of Property, Utilities,	\$25,2	214							\$25,2	14.00
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,	\$24,5	564		_					\$24,56	1 00
Postage, Printing and Repro., Program Supplies)	464,0	504							\$24,00	14.00
Tostage, Trining and Repro., Trogram Supplies/	-								-	
General Operating-(e.g., Insurance, Staff	\$8,3	23							\$8,32	3.00
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor								_		
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Caperide, i dematorej									-	
Total Operating Expenses	\$58,1	01							\$58,10	1.00
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$909,0					i -			\$909,09	91.00
Indirect Expenses	\$90,9								\$90,90	
TOTAL EXPENSES	\$1,000	,000							\$1,000,0	00.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if approp	priate)									
REIMBURSEMENT										

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated. Signature:

Title:

Date:

APPENDIX F-3h

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-3h 07/01/24 - 06/30/25 PAGE B

	Invoice Number
Г	A-3JUL24
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
rvices - Harm Reduction Center	
Project Code/Detail:	
Invoice Period:	07/1/24 - 07/31/24
FINAL Invoice	(check if Yes
	Fund Source: Grant Code/Detail: rvices - Harm Reduction Center Project Code/Detail: Invoice Period:

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE THIS PERIOD TO DATE BUDGET BALANCE SALARY \$20,300 \$20,300.00 0.10 V.P. Programs & Services Director, Behavioral Health Services 0.05 \$6,000 \$6,000.00 \$10,500 \$10,500.00 Director, SAS 0.15 Associate Director, 6th Street HRC 1.00 \$64,733 \$64,733.00 \$437,976 \$437,976.00 Health Educator 7.75 \$28,257 0.50 \$28,257.00 Mobile Health Educator Health Educator/Inventory Team Lea 1.00 \$56,513 \$56,513.00 Inventory Associate/Health Educator \$56,513 1.00 \$56,513.00 11.55 \$680,792 TOTAL SALARIES \$680,792.00

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Date:

Certified By: _____

Title:

4

									07/01/25	- 06/30/2 PAGE
					-	act ID #	-		nvoice Nur	nber
Contractor: San Francisco AIDS Foun					10000	002634]		A-3JUL	25
Address: 1035 Market Street, Suite San Francisco, CA 94103	400			Co	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000				1		Funding	Source:		General F	und
Fax: 415-487-3009		СН	EP		G	rant Cod	le/Detail:			
Program Name: HIV Syringe Access and D	isposal S	ervices -	Harm R	eductio						
	-				Pro	ject Coo	le/Detail:	1		_
ACE Control #:	L					Invoice	e Period:	07/	1/25 - 07/	31/25
						FINAL	L Invoice		(check i	f Yes)
		TAL ACTED	THIS P	ERED	TO	ERED	TOT			AINING RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services	1,888	31,341		-				_	1,888	31,341
Lounge Services	2,550	15,300				-	-	_	2,550	15,300
			_							
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		46641		_						46,641
EXPENDITURES			EXPE	NSES	EXPE	NSES	% (h	DEMA	INING
EXPENDITORES	BUD	GET	THIS P		TOD	2000	BUD			ANCE
Total Salaries (See Page B)	\$680.	And a state of the				1			\$680,7	
Fringe Benefits	\$170	198							\$170,1	
Total Personnel Expenses	\$850,	990							\$850,9	90.00
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$25,3	214							\$25,2	14.00
Building Maintenance Supplies and Repairs)										
	-								001 5	
Materials and Supplies-(e.g., Office,	\$24,	064							\$24,5	54.00
Postage, Printing and Repro., Program Supplies)			_							
General Operating-(e.g., Insurance, Staff	\$8,3	23							\$8,32	3.00
Training, Equipment Rental/Maintenance)	4010			1					+0,02	0.00
5. I.I.										
Staff Travel - (e.g., Local & Out of Town)	<u>.</u>									
Consultant/Subcontractor										
Other deals And Transactive Delet										
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)					-					
Superius, racinators/										
Total Operating Expenses	\$58,1	01							\$58,10	1.00
Capital Expenditures	- Andrewski -	i i								
TOTAL DIRECT EXPENSES	\$909,			1				1	\$909,0	
Indirect Expenses	\$90,9						_		\$90,90	
TOTAL EXPENSES	\$1,000	,000	_						\$1,000,0	00.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if approp	riate)		_							
REIMBURSEMENT								_		

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Signature:
Date:

Title:

Date: _____

APPENDIX F-3i

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 423				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments	-353	(DPH Authorized Signatory)		

APPENDIX F-3i 07/01/25 - 06/30/26 PAGE B

			Invoice Number
Contractor	San Francisco AIDS Foundation		A-3JUL25
Address	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone	415-487-3000	Fund Source:	General Fund
Fax	415-487-3009		
		Grant Code/Detail:	
ogram Mamo	HIV Syringe Access and Disposal Ser	rvices - Harm Reduction Center	
ugram Name.			
ogram Name		Project Code/Detail:	
		~ 2018년 1월 2019년 1월 2	
ACE Control #:		~ 2018년 1월 2019년 1월 2	07/1/25 - 07/31/25

DEBRONNEL		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING	
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE	
V.P. Programs & Services	0.10	\$20,300				\$20,300.00	
Director, Behavioral Health Services	0.05	\$6,000				\$6,000.00	
Director, SAS	0.15	\$10,500				\$10,500.00	
Associate Director, 6th Street HRC	1.00	\$64,733				\$64,733.00	
Health Educator	7.75	\$437,976				\$437,976.00	
Mobile Health Educator	0.50	\$28,257				\$28,257.00	
Health Educator/Inventory Team Lea	1.00	\$56,513				\$56,513.00	
Inventory Associate/Health Educator	1.00	\$56,513				\$56,513.00	
			0				
TOTAL SALARIES	11.55	\$680,792				\$680,792.00	

T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in accordance with the budget approved for the contract cited for services provided under the provision of that contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By: _____

Title:

Date:



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

	THIS CERTIFICATE IS ISSUED AS A											
	CERTIFICATE DOES NOT AFFIRMA BELOW. THIS CERTIFICATE OF IN REPRESENTATIVE OR PRODUCER, A	SUR.	ANCE	E DOES NOT CONSTIT	UTE A	CONTRACT	BETWEEN	THE ISSUING INSURE	R(S), AU	THORIZED		
L	IMPORTANT: If the certificate holder If SUBROGATION IS WAIVED, subject this certificate does not confer rights	t to	the to	erms and conditions of	the poli	cy, certain p dorsement(s	olicies may s).					
PRODUCER						CONTACT Kim Strehl						
CalNonprofits Insurance Services						o. Ext): 888-42		FAX (A/C, No)				
	500 41st Avenue uite 280						al-insurance.c					
	apitola CA 95010				ADDAS			RDING COVERAGE	1	NAIC #		
					INCLIDE		and the second s		many	INAIO P		
INS	NSURED SANFRAN-44					INSURER A : Berkshire Hathaway Homestate Insurance Company INSURER B : Continental Casualty						
S	an Francisco AIDS Foundation				Ballion Contractor		Insurance Co	moany		20443		
	035 Market Street, Ste. 400 an Francisco CA 94103					RD: Lloyds S		inpury		20201		
0	an Francisco CA 94103							Alliance of California		10023		
							its institutioe	Alicance of California		10025		
~		TICI	CATI	E NUMBER: 131233847	INSURE	KF:		REVISION NUMBER:				
	OVERAGES CER THIS IS TO CERTIFY THAT THE POLICIES					N ISSUED TO	THE INSUR		HE POU	CY PERIOD		
1	NOICATED, NOTWITHSTANDING ANY R SERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PER	REME	THE INSURANCE AFFOR	DED BY	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPE	CT TO V	HICH THIS		
NSP	TYPE OF INSURANCE		SUBR WVD		-	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMP	TS			
E	X COMMERCIAL GENERAL LIABILITY	Y		2019-00950	4/1/2019	4/1/2020	EACH OCCURRENCE	\$ 1,000,0	000			
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	\$ 1,000,0	000		
								MED EXP (Any one person)	\$ 20,000			
					3			PERSONAL & ADV INJURY	\$ 3,000,0	000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 3,000,0	000		
	POLICY FRO- JECT LOC							PRODUCTS - COMP/OP AGG				
E	AUTOMOBILE LIABILITY	Y	-	2019-00950	4/1/2019	4/1/2019	4/1/2020	COMBINED SINGLE LIMIT	\$ 1,000,0	00		
-	X ANY AUTO						(Ea accident) BODILY INJURY (Per person)					
	OWNED SCHEDULED						BODILY INJURY (Per accident)					
	AUTOS ONLY AUTOS X HIRED X NON-OWNED						PROPERTY DAMAGE	s				
	AUTOS ONLY AUTOS ONLY							(Per accident)	5			
E	X UMBRELLA LIAB X OCCUR			2019-00950-UMB	4/1/2019	4/1/2020	5400 000 000000	and the second second second	000			
-				2019-00920-0MB		4/1/2010	4/1/2020	EACH OCCURRENCE	\$ 10,000,	000		
	OLD SHOT WITH DE							AGGREGATE	\$			
	DED X RETENTION \$ 10,000	-	Y	0414/000470		7/1/2018	7/1/2019	X PER OTH-	\$			
A	AND EMPLOYERS' LIABILITY Y/N		T	SAWC928172	//1/2018	//1/2019						
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBEREXCLUDED?	N/A						E.L. EACH ACCIDENT	\$ 1,000,000			
	(Mandatory in NH)	- 1						E.L. DISEASE - EA EMPLOYEE				
	DESCRIPTION OF OPERATIONS below	_						E.L. DISEASE - POLICY LIMIT	\$ 1,000,0	00		
BCD	Medical Malpractice Crime Cyber Liability			HMA4032292517 82235661 EVO-PNP-386-234		4/1/2019 4/1/2019 4/1/2019	4/1/2020 4/1/2020 4/1/2020	\$4M/\$6M Employee Dishonesty Overall Policy Agg.	1,000,000 1,000,000			
RE: City Liab	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL Ongoing service contracts with City and and County of San Francisco, its officer vility and Auto Liability as required by wri- kers Compensation as permitted by law	tten o	ntv oi	f San Francisco					cts Gene h respec	eral ts to		
	Attached	_										
EF	TIFICATE HOLDER				CANC	ELLATION	_					
	City and County of San Fra Health	nciso	xo, D	epartment of Public	THE	EXPIRATION	DATE THE	SCRIBED POLICIES BE CA REOF, NOTICE WILL B PROVISIONS.				
	Attn: Contracts 101 Grove Street, Suite 307 San Francisco CA 94102					AUTHORIZED REPRESENTATIVE						

ACORD 25 (2016/03)

The ACORD name and logo are registered marks of ACORD

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THIS CERTIFICATE SUPERSEDES PREVIOUSLY ISSUED CERTIFICATE

AGENCY CUSTOMER ID: SANFRAN-44

LOC #:

ACORD

ADDITIONAL REMARKS SCHEDULE

Page 1 of 1

AGENCY CalNonprofits Insurance Services		NAMED INSURED San Francisco AIDS Foundation 1035 Market Street, Ste. 400 San Francisco CA 94103					
POLICY NUMBER		San Francisco CA 94103					
CARRIER	NAIC CODE	EFFECTIVE DATE:					
ADDITIONAL REMARKS							
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE	E TO ACORD FORM,						
FORM NUMBER: 25 FORM TITLE: CERTIF	ICATE OF LIABILITY I	NSURANCE					
Additonal Coverages Professional Liability \$1,000,000/\$3,000,000 Business Personal Property - \$2,895,000 Fine Arts - \$31,000							



A Head for Insurance. A Heart for Nonprofits:

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE ONLY

In consideration of the premium charged, it is understood and agreed that the following is added as an additional insured:

City And County Of San Francisco, SFDPH, its Officers, Directors, Employees, Agents and Representatives 101 Grove Street San Francisco, CA 94102 As respects vehicle(s): ALL

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

But only as respects a legally enforceable contractual agreement with the Named Insured and only for liability arising out of the Named Insured's negligence and only for occurrences of coverages not otherwise excluded in the policy to which this endorsement applies.

It is further understood and agreed that irrespective of the number of entities named as insureds under this policy, in no event shall the company's limits of liability exceed the occurrence or aggregate limits as applicable by policy definition or endorsement.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Any person or organization that you are required to add as an additional insured on this policy, under a written contract or agreement currently in effect, or becoming effective during the term of this policy. The additional insured status will not be afforded with respect to liability arising out of or related to your activities as a real estate manager for that person or organization.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
 - In the performance of your ongoing operations; or
 - In connection with your premises owned by or rented to you.

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- Available under the applicable Limits of Insurance shown in the Declarations; whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

1