

File No. 100015

Committee Item No. \_\_\_\_\_

Board Item No. 43

## COMMITTEE/BOARD OF SUPERVISORS

### AGENDA PACKET CONTENTS LIST

Board of Supervisors Meeting

Date January 12, 2010

#### Cmte Board

- |                          |                                     |  |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/>            | Motion                                       |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Resolution                                   |
| <input type="checkbox"/> | <input type="checkbox"/>            | Ordinance                                    |
| <input type="checkbox"/> | <input type="checkbox"/>            | Legislative Digest                           |
| <input type="checkbox"/> | <input type="checkbox"/>            | Budget Analyst Report                        |
| <input type="checkbox"/> | <input type="checkbox"/>            | Legislative Analyst Report                   |
| <input type="checkbox"/> | <input type="checkbox"/>            | Youth Commission Report                      |
| <input type="checkbox"/> | <input type="checkbox"/>            | Introduction Form (for hearings)             |
| <input type="checkbox"/> | <input type="checkbox"/>            | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/>            | MOU  |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Grant Information Form                       |
| <input type="checkbox"/> | <input type="checkbox"/>            | Grant Budget                                 |
| <input type="checkbox"/> | <input type="checkbox"/>            | Subcontract Budget                           |
| <input type="checkbox"/> | <input type="checkbox"/>            | Contract/Agreement                           |
| <input type="checkbox"/> | <input type="checkbox"/>            | Award Letter                                 |
| <input type="checkbox"/> | <input type="checkbox"/>            | Application                                  |
| <input type="checkbox"/> | <input type="checkbox"/>            | Public Correspondence                        |

#### OTHER

(Use back side if additional space is needed)

<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____

Completed by: Annette Lonich Date January 7, 2010

Completed by: \_\_\_\_\_ Date \_\_\_\_\_

An asterisked item represents the cover sheet to a document that exceeds 25 pages.  
The complete document is in the file.

84

1 [Accept & Expend Grant –CDC Kenya—Monitoring and Evaluation - \$48,837]

2 **Resolution authorizing the San Francisco Department of Public Health (DPH) to accept**  
3 **and expend retroactively a grant in the amount of \$48,837 from the Regents of the**  
4 **University of California, to assist with a project entitled “CDC Kenya—Monitoring and**  
5 **Evaluation;” for the period of November 1, 2009 through August 31, 2010.**  
6

7  
8 WHEREAS, The Regents of the University of California is the recipient of a grant award  
9 from the Centers for Disease Control (CDC) Department of Health and Human Services to  
10 support the project entitled “CDC Kenya—Monitoring and Evaluation;” and,

11 WHEREAS, It is considered in the best interest of the CDC Department of Health and  
12 Human Services, The Regents of the University of California, and DPH to collaborate on this  
13 project; and,

14 WHEREAS, Through this grant, The Regents of the University of California has agreed  
15 to fund DPH in the amount of \$48,837 for the period of November 1, 2009 through August 31,  
16 2010; and,

17 WHEREAS, As a condition of receiving the grant funds, The Regents of the University  
18 of California requires the City to enter into an agreement (the “Agreement”), a copy of which is  
19 on file with the Clerk of the Board of Supervisors in File No. 100015 which is hereby declared  
20 to be a part of this resolution as if set forth fully herein; and, Accept and Expend – National  
21 Endowment for the Arts Grant - \$50,000

22 WHEREAS, An ASO amendment is not required as the grant partially reimburses DPH  
23 for two existing positions, Senior Physician Specialist (Job Class #2232) at 0.10 FTE and  
24 Health Program Coordinator III (Job Class #2593) at 0.20 FTE, for the period of November 1,  
25 2009 through , August 31, 2010; and,

FILE NO.

RESOLUTION NO.

1 WHEREAS, A request for retroactive approval is being sought because DPH received  
2 the amended funding award on November 25, 2009; and,

3 WHEREAS, The budget includes a provision for indirect costs of \$5,233; now  
4 therefore, be it

5 RESOLVED, That DPH is hereby authorized to accept and expend a grant in the  
6 amount of \$48,837 from The Regents of the University of California; and, be it

7 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and  
8 expend the grant funds pursuant to San Francisco Administrative Code section 10.170-1; and,  
9 be it

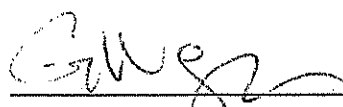
10 FURTHER RESOLVED, That the Director of Health is authorized to enter into the  
11 agreement on behalf of the City; and, be it

12 FURTHER RESOLVED, That the Controller is directed to designate all positions  
13 funded under this agreement as "G" or grant-funded positions which would terminate when  
14 the agreement expires.

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16  
17 RECOMMENDED:

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21 Mitchell Katz, M.D.  
22 Director of Health

APPROVED:

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25 Office of the Mayor

  
Office of the Controller



## INTRODUCTION FORM

By a member of the Board of Supervisors or the Mayor

1-5-6  
2/2

Time Stamp or  
Meeting Date

I hereby submit the following item for introduction:

- \_\_\_\_\_ 1. For reference to Committee:  
An ordinance, resolution, motion, or charter amendment.
- X   2. Request for next printed agenda without reference to Committee
- \_\_\_\_\_ 3. Request for Committee hearing on a subject matter.
- \_\_\_\_\_ 4. Request for letter beginning "Supervisor \_\_\_\_\_ inquires...".
- \_\_\_\_\_ 5. City Attorney request.
- \_\_\_\_\_ 6. Call file from Committee.
- \_\_\_\_\_ 7. Budget Analyst request (attach written motion).
- \_\_\_\_\_ 8. Substitute Legislation File Nos.

Please check the appropriate boxes. The proposed legislation should be forwarded to the following:

- |   |  |
|---|--|
| <input type="checkbox"/> Small Business Commission      | <input type="checkbox"/> Youth Commission    |
| <input type="checkbox"/> Ethics Commission              | <input type="checkbox"/> Planning Commission |
| <input type="checkbox"/> Building Inspection Commission |  |

**Note:** For the Imperative Agenda (a resolution not on the printed agenda), use a different form.]

**Sponsor(s):** Supervisor Bevan Dufty

**SUBJECT:** Accept and Expend Grant – CDC Kenya – Monitoring and Evaluation

Signature of Sponsoring Supervisor: \_\_\_\_\_

*Bevan Dufty*

**For Clerk's Use Only:**

1000/5





Gavin Newsom  
Mayor

Mitchell H. Katz, MD  
Director of Health

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Mitchell H. Katz, M.D. *MH*  
Director of Health

DATE: December 15, 2009

SUBJECT: Accept and Expend Resolution for Subject Allocation

GRANT TITLE: CDC Kenya—Monitoring and Evaluation

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Attached please find the original and 4 copies of each of the following:

- ☒ Proposed grant resolution, original signed by Department, Health Commission
- ☒ Grant information form, including disability checklist
- ☒ Grant budget and justification
- ☒ Agreement (1)

**Special Timeline Requirements:**

**Departmental representative to receive a copy of the adopted resolution:**

Name: Grace Alderson

Phone: 554-2655

Interoffice Mail Address: Dept. of Public Health, 101 Grove St., Room 330

Certified copy required Yes ☐

No ☒

FILE NO.

RESOLUTION NO.

[Accept & Expend Grant –CDC Kenya—Monitoring and Evaluation.]

**Resolution authorizing the San Francisco Department of Public Health (DPH) to accept and expend retroactively a grant in the amount of \$48,837 from the Regents of the University of California, to assist with a project entitled “CDC Kenya—Monitoring and Evaluation;” for the period of November 1, 2009 through August 31, 2010.**

WHEREAS, The Regents of the University of California is the recipient of a grant award from the Centers for Disease Control (CDC) Department of Health and Human Services to support the project entitled “CDC Kenya—Monitoring and Evaluation;” and,

WHEREAS, It is considered in the best interest of the CDC Department of Health and Human Services, The Regents of the University of California, and DPH to collaborate on this project; and,

WHEREAS, Through this grant, The Regents of the University of California has agreed to fund DPH in the amount of \$48,837 for the period of November 1, 2009 through August 31, 2010; and,

WHEREAS, As a condition of receiving the grant funds, The Regents of the University of California requires the City to enter into an agreement (the “Agreement”), a copy of which is on file with the Clerk of the Board of Supervisors in File No. \_\_\_\_\_; which is hereby declared to be a part of this resolution as if set forth fully herein; and,

WHEREAS, An ASO amendment is not required as the grant partially reimburses DPH for two existing positions, Senior Physician Specialist (Job Class #2232) at 0.10 FTE and Health Program Coordinator III (Job Class #2593) at 0.20 FTE, for the period of November 1, 2009 through , August 31, 2010; and,

FILE NO.

RESOLUTION NO.

1 WHEREAS, A request for retroactive approval is being sought because DPH received  
2 the amended funding award on November 25, 2009; and,

3 WHEREAS, The budget includes a provision for indirect costs of \$5,233; now  
4 therefore, be it

5 RESOLVED, That DPH is hereby authorized to accept and expend a grant in the  
6 amount of \$48,837 from The Regents of the University of California; and, be it

7 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and  
8 expend the grant funds pursuant to San Francisco Administrative Code section 10.170-1; and,  
9 be it

10 FURTHER RESOLVED, That the Director of Health is authorized to enter into the  
11 agreement on behalf of the City; and, be it

12 FURTHER RESOLVED, That the Controller is directed to designate all positions  
13 funded under this agreement as "G" or grant-funded positions which would terminate when  
14 the agreement expires.

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16  
17 RECOMMENDED:

APPROVED:

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20 \_\_\_\_\_  
21 Mitchell Katz, M.D.  
22 Director of Health

Office of the Mayor

23   
24 \_\_\_\_\_  
25 Office of the Controller



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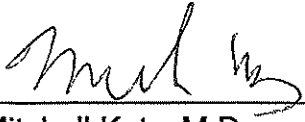
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17 RECOMMENDED:

APPROVED:

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20 \_\_\_\_\_  
21 Mitchell Katz, M.D.  
22 Director of Health

\_\_\_\_\_  
Office of the Mayor

\_\_\_\_\_  
Office of the Controller

**File Number:** \_\_\_\_\_  
(Provided by Clerk of Board of Supervisors)

**Grant Information Form**  
(Effective January 2000)

**Purpose:** Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: CDC Kenya – Monitoring and Evaluation
2. Department: Department of Public Health AIDS Office HIV Epidemiology Section
3. Contact Person: Henry Fisher Raymond Telephone: 554-9093
4. Grant Approval Status (check one):  
☒ [x] Approved by funding agency ☐ [ ] Not yet approved
5. Amount of Grant Funding Approved or Applied for: \$48,837
- 6a. Matching Funds Required: No  
b. Source(s) of matching funds (if applicable): N/A
- 7a. Grant Source Agency: Centers for Disease Control (CDC) Department of Health and Human Services  
b. Grant Pass-Through Agency (if applicable): The Regents of the University of California
8. Proposed Grant Project Summary:  
The CDC Kenya Monitoring and Evaluation project aims to provide technical assistance and training to Kenyan in-country partners around most-at-risk populations (MARPs) size estimations. Technical assistance includes training in sampling methods and data collection appropriate for different MARP populations.
9. Grant Project Schedule, as allowed in approval documents, or as proposed:  
Start-Date: November 1, 2009 End-Date: August 31, 2010
10. Number of new positions created and funded: The grant does not require an ASO amendment and partially reimburses the department for two existing positions:  
0.10 FTE Senior Physician Specialist (Job Class #2232)  
0.20 FTE Health Program Coordinator III (Job Class #2593)
11. If new positions are created, explain the disposition of employees once the grant ends? N/A
- 12a. Amount budgeted for contractual services: N/A  
b. Will contractual services be put out to bid? N/A  
c. If so, will contract services help to further the goals of the department's MBE/WBE requirements? N/A  
d. Is this likely to be a one-time or ongoing request for contracting out? N/A



- 13a. Does the budget include indirect costs? ☒ Yes ☐ No  
b1. If yes, how much? \$5,233 b2. How was the amount calculated? 12% of total modified direct costs  
c. If no, why are indirect costs not included? N/A  
☐ Not allowed by granting agency ☐ To maximize use of grant funds on direct services  
☐ Other (please explain):

14. Any other significant grant requirements or comments:

DPH respectfully requests for approval to accept and expend these funds retroactive to November 1, 2009 because the Department received the amendment of the funding award on November 25, 2009.

**\*\*Disability Access Checklist\*\***

15. This Grant is intended for activities at (check all that apply):

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s)      | <input type="checkbox"/> Existing Program(s) or Service(s)       |
| <input type="checkbox"/> Rehabilitated Site(s)       | <input type="checkbox"/> Rehabilitated Structure(s) | <input checked="" type="checkbox"/> New Program(s) or Service(s) |
| <input type="checkbox"/> New Site(s)                 | <input type="checkbox"/> New Structure(s)           |  |

16. The Departmental ADA Coordinator and/or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section:

Comments:

Departmental or Mayor's Office of Disability Reviewer: \_\_\_\_\_

Jason Hashimoto

Date Reviewed: 12/15/09

Department Approval: \_\_\_\_\_

Mitchell Katz, M.D.

Director of Public Health

San Francisco Department of Public Health (SFPDH)

AIDS Office HIV Epidemiology Section

CDC Kenya – Monitoring and Evaluation (M&E)

Budget Justification  
11/1/2009 – 8/31/2010

A. PERSONNEL & MANDATORY FRINGE

1. 0.10 FTE 2232 – Senior Physician Specialist: Willi McFarland  
Annual Salary \$183,092 x 0.10 FTE for 10 months = \$15,258  
Mandatory Fringe Benefits (@ 26.8%) = \$4,089 \$19,347
2. 0.20 FTE 2593 – Health program Coordinator III: H. Raymond III  
Annual Salary \$114,784 x 0.20 FTE for 10 months = \$19,131  
Mandatory Fringe Benefits (@ 26.8%) = \$5,127 \$24,258

Both employees to provide technical assistance and training to Kenya in-country partners around most-at-risk populations (MARs) size estimations.

3. COLA/STEP increases:

The salary expenditures are based on the rates per job classification and per Labor Union Agreements. The cost for COLA is as follow: COLA @ 4% = \$0 and STEP Increases @5% = \$0 \$0

TOTAL PERSONNEL: \$43,604

B. TRAVEL \$0

C. EQUIPMENT \$0

D. MATERIALS AND SUPPLIES \$0

E. CONTRACTUAL \$0

F. OTHER \$0

G. INDIRECT COSTS (12% of total modified direct costs) \$5,233

TOTAL BUDGET: \$48,837

Dept./Div: HPH-03  
 Fund Group: 2S/CHS/GNC  
 Index Code: HCHPDHIVSVGR  
 Grant Code:  
 Grant Detail: 0900

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH  
 AIDS Office - HIV Epidemiology Section  
 CDC Kenya - Monitoring and Evaluation (M&E)  
 November 1, 2009 - August 31, 2010

CATEGORY/LINE ITEM	Annual Salary	Annual Frin Ben	Total Annual Sal/Frin Ben	% OF TIME	% OF FTE	Monthly Rate	Mth	Salary Budget	Frin Ben Budget	Total Budget
<b>A. PERSONNEL</b>										
<b>HIV SEROEPIDEMIOLOGY</b>										
1 Sr. Physician Specialist 2232 7 W. McFarland	183,092	49,069	232,161	10%	0.10	15,258	10	15,258	4,089	19,347
2 Health Program Coordinator III 2593 5 H Fisher Raymond	114,784	30,762	145,546	20%	0.20	9,565	10	19,131	5,127	24,258
3 COLA 4%								0	0	0
4 STEP Increases 5%								0	0	0
<b>TOTAL SALARY/FRINGE</b>	<b>297,876</b>	<b>79,831</b>	<b>377,707</b>		<b>0.30</b>			<b>34,388</b>	<b>9,216</b>	<b>43,604</b>
<b>00101 SALARIES</b>										
00103 FRNG BN								34,388		34,388
<b>SUB TOTAL</b>								<u>9,216</u>	<u>0</u>	<u>43,604</u>
<b>C. TRAVEL</b>										
1. Local Travel (02301)								0		0
2. Out-of-Jurisdiction Travel(02101)								0		0
<b>Sub Total TRAVEL</b>								<u>0</u>	<u>0</u>	<u>0</u>
<b>D. EQUIPMENT</b>										
1. Non Inventorial Equipment								0		0
<b>Sub Total EQUIPMENT</b>								<u>0</u>	<u>0</u>	<u>0</u>
<b>E. MATERIALS AND SUPPLIES</b>										
1. Office Supplies (04951)								0		0
2. Food (04699)								0		0
3. Laboratory Supplies (04431)								0		0
4. Educational Supplies								0		0
<b>Sub Total SUPPLIES</b>								<u>0</u>	<u>0</u>	<u>0</u>
<b>F. CONTRACTUAL SERVICES (02789)</b>										
1. UCSF								0		0
2. PHFE								0		0
<b>Sub Total CONTRACTS</b>								<u>0</u>	<u>0</u>	<u>0</u>
<b>G. OTHER</b>										
1. Rent support/mtg fac (03011)								0		0
2. Telephone/Com (03241)								0		0
3. Postage (03561)								0		0
4. Delivery/Courier svc (03521)								0		0
5. Reproduction/Photocopy								0		0
a. Photocopier Leasing (03131)								0		0
b. Photocopier Maint (02931)								0		0
c. Repro Svc (In House)(031PR)								0		0
6. Print/Slide Svc (Outside)(03552)								0		0
7. Promotion/Advertisement (03599)								0		0
8. Frozen Storage Facility (03031)								0		0
9. Staff Training (02201)								0		0
10. BSS Stipends(02783)								0		0
<b>Sub Total OTHER</b>								<u>0</u>	<u>0</u>	<u>0</u>
<b>TOTAL DIRECT COST</b>										<b>43,604</b>

**SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH**  
**AIDS Office - HIV Epidemiology Section**  
**CDC Kenya - Monitoring and Evaluation (M&E)**  
**November 1, 2009 - August 31, 2010**

Dept / Div: HPH-03  
Fund Group: 2S/CHS/GNC  
Index Code: HCHPDHIVSVGR  
Grant Code:  
Grant Detail: 0900



CATEGORY/LINE ITEM	Annual Salary	28-30% Annual Frin Ben	Total Annual Sal/Frin Ben	% OF TIME	% OF FTE	Monthly Rate	Mth	Salary Budget	Frin Ben Budget	Total Budget
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**BUDGET SUMMARY**

A. SALARIES										34,388
B. MANDATORY FRINGE										9,216
C. TRAVEL										0
D. EQUIPMENT										0
E. MATERIALS AND SUPPLIES										0
F. CONTRACT / MOU										0
G. OTHER										0
DIRECT COSTS										43,604
H. INDIRECT COST (12% of total modified direct cost)										5,233
TOTAL BUDGET										48,837
AWARD										48,837
SURPL/(DEFICIT)										0

FTE = 0.30

## Subaward Agreement

<b>Institution/Organization ("UNIVERSITY")</b> <b>Name:</b> The Regents of the University of California <b>Address:</b> Office of Sponsored Research Division of Contracts and Grants University of California, San Francisco 3333 California Street, Suite 315 San Francisco, CA 94143-0962		<b>Institution/Organization ("COLLABORATOR")</b> <b>Name:</b> City and County of San Francisco <b>Address:</b> Department of Public Health 356 7 <sup>th</sup> Street San Francisco, CA 94103  EIN: 94-6000417 DUNS: 95-073-9449 <b>Collaborator's PI:</b> Dr. William McFarland	
<b>Dr. University's PI:</b> Dr. George Rutherford  <b>Prime Award Number:</b> UTGPS001814 <b>UCSF DPA / Fund Numbers:</b> 444250 / 24092 <b>CFDA Number:</b> 93.067		<b>Subcontract Number:</b> 5745ac	
<b>Awarding Agency:</b> National Institutes of Health - National Center for HIV, Viral Hepatitis, STDS and TB Prevention			
<b>Subaward Period of Performance:</b> <u>November 1, 2009</u> <del>8/1/2009 through 7/31/2010</del> <u>through August 31, 2010</u>		<b>Amount Funded this Action:</b> \$48,837.00  <b>Est. Total Project Budget:</b> \$250,000.00	
<b>Project Title:</b> CDC Kenya - Monitoring and Evaluation (M&E)			
<b>Reporting Requirements:</b> [Check here if applicable: <input checked="" type="checkbox"/> See Attachment 4]			
<h3 style="text-align: center;">Terms and Conditions</h3> <p>Unless otherwise stated in this Agreement, these standard terms and conditions shall apply.</p> <ol style="list-style-type: none"> <li>1) University hereby awards a cost reimbursable subaward, as described above, to Collaborator. The scope of work and budget for this subaward are detailed in Attachments 5 and 6. In its performance of subaward work, Collaborator shall be an independent entity and not an employee or agent of University.</li> <li>2) University shall reimburse Collaborator not more often than monthly for allowable costs. All invoices shall be submitted using Collaborator's standard invoice, but at a minimum shall include current and cumulative costs (including cost sharing), subaward number, and certification as to truth and accuracy of invoice. Invoices that do not reference University's subaward number shall be returned to Collaborator. Invoices and questions concerning invoice receipt or payments should be directed to the appropriate party's Financial Contact, as shown in Attachment 3.</li> <li>3) A final statement of cumulative costs incurred, including cost sharing, marked "FINAL," must be submitted to University's Financial Contact NOT LATER THAN forty-five (45) days after subaward end date. The final statement of costs shall constitute Collaborator's final financial report.</li> <li>4) All payments shall be considered provisional and subject to adjustment within the total estimated cost in the event such adjustment is necessary as a result of an adverse audit finding against the Collaborator.</li> <li>5) Matters concerning the technical performance of this subaward should be directed to the appropriate party's Project Director, as shown in Attachment 3. Technical reports are required as shown above, "Reporting Requirements."</li> <li>6) Matters concerning the request or negotiation of any changes in the terms, conditions, or amounts cited in this subaward agreement, and any changes requiring prior approval, should be directed to the appropriate party's Authorized Official, as shown in Attachment 3. Any such changes made to this subaward agreement require the written approval of each party's Authorized Official, as shown in Attachment 3.</li> <li>7) Each party shall be responsible for its negligent acts or omissions and the negligent acts or omissions of its employees, officers, or directors, to the extent allowed by law.</li> <li>8) Either party may terminate this agreement with thirty days written notice to the appropriate party's Administrative Contact, as shown in Attachment 3. University shall pay Collaborator for termination costs as allowable under OMB Circular A-21 or A-122, as applicable.</li> <li>9) No-cost extensions require the approval of the University. Any requests for a no-cost extension should be addressed to and received by the Principal Investigator, as shown in Attachment 3, not less than thirty days prior to the desired effective date of the requested change.</li> <li>10) The Subaward is subject to the terms and conditions of the Prime Award and other special terms and conditions as identified in Attachment 2.</li> <li>11) By signing below Collaborator makes the certifications and assurances shown in Attachments 1 and 2.</li> </ol>			
<b>By an Authorized Official of UNIVERSITY:</b>  John Radkowski Contracts and Grants Officer Office of Sponsored Research		<b>By an Authorized Official of COLLABORATOR:</b>  Name: Barbara Garcia Deputy Director of Health	
Date: <u>10-30-09</u>		Date: <u>11-2-09</u>	



**Attachment 1  
Subaward Agreement**

By signing the Subaward Agreement, the authorized official of COLLABORATOR certifies, to the best of his/her knowledge and belief, that:

**Certification Regarding Lobbying**

- 1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the Collaborator, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- 2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or intending to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the Collaborator shall complete and submit Standard Form -LLL, "Disclosure Form to Report Lobbying," to the University.
- 3) The Collaborator shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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

**Debarment, Suspension, and Other Responsibility Matters**

Collaborator certifies by signing this Subaward Agreement that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency.

**OMB Circular A-133 Assurance**

Collaborator assures University that it complies with A-133 and that it will notify University of completion of required audits and of any adverse findings which impact this subaward.



**Attachment 2**  
**Subaward Agreement**  
**NIH**

**Agency-Specific Certifications/Assurances**

1. The following assurances/certifications are made and verified by Collaborator's Authorized Official on the face page of this Subaward. Descriptions of individual assurances/certifications are provided in Section III of the PHS 298. 1) Human Subjects; 2) Research Using Human Embryonic Stem Cells; 3) Research on Transplantation of Human Fetal Tissue; 4) Women and Minority Inclusion Policy; 5) Inclusion of Children Policy; 6) Vertebrate Animals; 7) Debarment and Suspension; 8) Drug-Free Workplace; 9) Lobbying; 10) Non-Delinquency on Federal Debt; 11) Research Misconduct; 12) Civil Rights (Form HHS 441 or HHS 690); 13) Handicapped Individuals (Form HHS 641 or HHS 690); 14) Sex Discrimination (Form HHS 639-A or HHS 690); 15) Age Discrimination (Form HHS 680 or HHS 690); 16) Recombinant DNA and Human Gene Transfer Research; 17) Financial Conflict of Interest; 18) Smoke Free Workplace; 19) Prohibited Research; 20) Select Agent Research; 21) PI Assurance.

**General terms and conditions:**

1. The restrictions on the expenditure of federal funds in appropriations acts are applicable to this subaward to the extent those restrictions are pertinent.
2. 45 CFR Part 74 or 45 CFR Part 92 as applicable. [This is the CFR governing NIH.]
3. The NIH Grants Policy Statement, including addenda, in effect as of the beginning date of the period of performance and found at <http://grants.nih.gov/grants/policy/policy.htm>, except for the payment mechanism and final reporting requirements are replaced with Reporting Requirements and Terms and Conditions on the front page of this agreement.
4. This paragraph applies only if the prime grant was awarded under expanded authorities. Expanded Authorities apply, except for the right to initiate an automatic one-time extension of the end date, which is replaced by the need to obtain prior written approval from the University. Any prior approvals are to be sought from the University and not the Federal Awarding Agency.
5. Collaborator assures, by signing this Subaward Agreement, that all Collaborator's personnel who are responsible for the design and conduct of projects involving human research participants have successfully completed their institutional training in accordance with the NIH Guide, Notice OD-00-039.
6. Title to equipment costing \$5,000 or more that is purchased or fabricated with research funds or collaborator cost sharing funds, as direct costs of the project or program, shall unconditionally vest in the collaborator upon acquisition without further obligation to the Federal Awarding Agency subject to the conditions specified in the NIH Grants Policy Statement.

**Special terms and conditions:**

1. Copyrights  
Collaborator grants to University an irrevocable, royalty-free, non-transferable, non-exclusive right and license to use, reproduce, make derivative works, display, and perform publicly any copyrights or copyrighted material (including any computer software and its documentation and/or databases) first developed and delivered under this Subaward Agreement solely for the purpose of and only to the extent required to meet University's obligations to the Federal Government under its Prime Award.
2. Data Rights  
Collaborator grants to University the right to use data created in the performance of this Subaward Agreement solely for the purpose of and only to the extent required to meet University's obligations to the Federal Government under its Prime Award.



3. Objectivity in Research

Collaborator hereby assures University that it has implemented a policy on conflict of interest that complies with the federal regulations on Objectivity in Research, 42 CFR 50, Subpart F. Collaborator's policy will be made applicable to activities under this award. If Collaborator does not have a conflict of interest policy, it agrees to develop a policy. Collaborator also certifies that to the best of Collaborator's knowledge, all financial disclosures related to the activities funded by this Agreement have been made. Disclosures must be made by all persons who have responsibility for the design, conduct or reporting of the research. Prior to Collaborator's expenditure of any funds under this Award, Collaborator will report to University the existence of a conflict of interest (but not the nature of the interest or other details) found by Collaborator and assure that the conflict of interest has been managed, reduced or eliminated in accordance with the PHS regulations. For any interest that Collaborator identifies as conflicting subsequent to Collaborator's initial report under this award, the report will be made and the conflicting interest managed, reduced, or eliminated, at least on an interim basis, within thirty (30) days of that identification. The report must include the following information: (a) Grant/contract number; (b) Name of the PI; (c) Name of the investigator (if different from PI) with the conflict of interest; and (d) Which method was used to protect the involved PHS funded research from bias (eg, managed, reduced, or eliminated). The report should be made to the following University official:

University Official	COI Coordinator, Campus Box 0962
(For receipt of information	UCSF, Office of Sponsored Research
regarding objectivity in	3333 California Street, Suite 320
research only - NOT)	San Francisco, CA 94143-0962
for receipt of subcontract)	If sent by Fed Ex or UPS, the zip code is 94118

4. As required in its annual appropriations act, NIH, AHRQ and SAMSHA will not reimburse grantees for the Direct salaries of individuals at a rate in excess of the level specified in the annual appropriations language. Accordingly, none of the funds awarded under this Agreement shall be used to pay the salary of an individual at a rate in excess of the amount allowed under Federal law. This limitation applies to any subcontracts under any tier under this Agreement.
5. Hereby incorporated as part of this agreement is the project Scope of Work, included as Attachment 5.
6. Hereby incorporated as part of this agreement is the project Budget, included as Attachment 6.
7. Hereby incorporated as part of this agreement is the Notice of Grant Award as Attachment 7.
8. Carry over of an unobligated balance into the next budget period requires University Principal Investigator prior approval and subsequent formal amendment to this agreement.

YES X NO       

9. Cost Sharing

If this agreement contains cost share commitments (either voluntary, committed, or mandatory) then the subrecipient hereby certifies that it has systems and/or processes in place for tracking cost sharing, and will meet all cost share commitments under this agreement.



**Attachment 3  
Subaward Agreement**

<b>University Contacts</b>	<b>Collaborator Contacts</b>
<b>Administrative Contact (Departmental)</b> Name: Elyn Woo Address: UCSF Box 1224 San Francisco, CA 94143  Telephone: 415-597-8203 Email: <a href="mailto:ewoo@psg.ucsf.edu">ewoo@psg.ucsf.edu</a>	<b>Administrative Contact (Departmental)</b> Name: Sajid Shiakh Address: City and County of San Francisco Department of Public Health 356 7 <sup>th</sup> Street San Francisco, CA 94103  Telephone: Email:
<b>Principal Investigator</b> Name: Dr. George Rutherford Address: UCSF Box 1224 San Francisco, CA 94143  Telephone: 415-597-9108 Email: <a href="mailto:grutherford@psg.ucsf.edu">grutherford@psg.ucsf.edu</a>	<b>Project Director</b> Name: Dr. William McFarland Address: City and County of San Francisco Department of Public Health 356 7 <sup>th</sup> Street San Francisco, CA 94103  Telephone: Email:
<b>Financial Contact</b> Name: Accounts Payable Subcontract Payment Desk Address: UCSF Controller's Office 1855 Folsom Street, #425 San Francisco, CA 94143-0812  Telephone: 415-476-2126 Fax: 415-682-7403 Email: <a href="mailto:Subcontract@accounting.ucsf.edu">Subcontract@accounting.ucsf.edu</a>	<b>Financial Contact</b> Name:  Address:  Telephone:  Fax:  Email:
<b>Authorized Official</b> Name: John Radkowski Contracts and Grants Officer Address: UCSF Office of Sponsored Research 3333 California Street, Suite 315 San Francisco, CA 94143-0962  Telephone: 415-502-4029 Fax: 415-476-8158 Email: <a href="mailto:John.Radkowski@ucsf.edu">John.Radkowski@ucsf.edu</a>	<b>Authorized Official</b> Name:  Address:  Telephone:  Fax:  Email:



**Attachment 4  
Subaward Agreement**

**Reporting Requirements**

The Following checked Reporting Requirements apply to this Subaward Agreement:

  X   Collaborator agrees to submit interim progress reports if continuation is intended beyond the Termination Date and shall be submitted 90 (ninety) days before the end of the reporting period. Terminal progress reports must be submitted to University within 45 (forty-five) days after the Termination Date of this Agreement. The report should include a summary statement of progress toward the achievement of the originally stated aims, a list of the positive and negative results which are considered to be significant by the Project Director, and a list of publications resulting from the project with plans (if any) for further publication. All progress reports shall be submitted to University's Principal Investigator.

       Collaborator agrees to submit monthly technical/progress reports to University's Project Director identified in Attachment 3.

       Collaborator agrees to submit quarterly technical/progress reports within thirty (30) days from end of each project quarter to University's Project Director identified in Attachment 3.

  X   Patent rights for Subcontractor shall be in accordance with P.L. 96-620, Patent Rights (Small Business Firms and Nonprofit Organizations), as implemented by 37 CFR Chapter IV, Part 401. Subcontractor shall promptly and fully report directly to NIH all inventions conceived or made and reduced to practice under this Agreement. Subcontractor shall submit a copy of the transmittal letter of any such report to University and shall include this Agreement Number along with transmittal. Within ninety (90) days following expiration or termination of this agreement Subcontractor shall submit to University a final invention report.

       (Applicable NASA Grants) The Collaborator agrees to submit to University's Administrative Contact identified in Attachment 3, NASA Form 1679 "New Technology Disclosure" for each discovery of new technology individually and at the time of its Discovery. For a multi-year Subaward Agreement, Collaborator agrees to summarize the Previous year's disclosures on an annual basis by completing NASA Form C-3044, New Technology Summary Report and marking it Interim. The first Interim New Technology Summary Report is due exactly twelve (12) months from the effective date of the Subaward Agreement and anniversary thereafter.

- NASA Form 1679 and NASA Form C-3044 can be located at:  
<http://tco.osfc.nasa.gov/>

       (Applicable EPA Grants) Collaborator agrees to submit to University's Administrative Contact identified in Attachment 3, EPA Form 5700-52A "Minority Business Enterprises/Women-Owned Business Enterprises."

- EPA Form 5799-52A can be located at:  
<http://www.epa.gov/osbp/>



**ATTACHMENT 5**  
**SCOPE OF WORK**



**Scope of Work**  
**SFDPH**  
**November 1, 2009 – August 31, 2010**

**MARPs Size Estimation**

SFDPH, in conjunction with Tim Lane from UCSF, will provide TA and training to Kenyan in-country partners around most-at-risk populations (MARPs) size estimations. TA will include training in sampling methods & data collection appropriate for different MARPs populations.

**Activities:**

- 1) To append to the protocol the size estimation methods, develop the specific field procedures and questions, provide TA and oversight to this aspect of the IBBS, and develop specific questions for the survey instruments related to MARP size estimation.
- 2) To assist with a staffing plan to implement the IBBS, particularly with respect to the tasks and qualifications of a study coordinator.
- 3) To assist with the training of implementing staff for the IBBS, including training materials development, training workshops, site visits while in the field (e.g., at launch), and analysis and dissemination training.
- 4) To provide TA to the Kenya technical working group for MARPs on size estimation and extrapolation and MARP program planning.
- 5) To provide TA to other aspects of the IBBS design and implementation.

**Deliverables:** MARPs size estimation protocol, field procedures, and survey questions to include in IBBS; additional oversight and consultation on IBBS; training materials and workshops on MARPs size estimation; support to Kenya MARPs TWG.

**Staff Allocations:**

Willi McFarland – 0.10  
Henry Raymond – 0.20



**ATTACHMENT 6**

**BUDGET**



**Kenya Surveillance**  
**November 1, 2009 - August 31, 2010**

Personnel		Annual Salary	% effort	# mos.	Salary	Benefits	Total
McFarland, Will	Principal Investigator	\$183,092	10%	10	\$15,258	\$4,089	\$19,347
Raymond, Henry	Program Manager	\$114,784	20%	10	\$19,131	\$5,127	\$24,258

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<b>Total Personnel</b>			30%		\$34,388	\$9,216	\$43,604
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<b>Total Direct Costs</b>							\$43,604
<b>Overhead at 12%</b>							\$5,233
<b>Grand Total</b>							\$48,837

*MTDC*



**ATTACHMENT 7**

**NOGA**





**COOPERATIVE AGREEMENTS**

Department of Health and Human Services  
Centers for Disease Control and Prevention

NATIONAL CENTER FOR HIV, VIRAL HEPATITIS, STDs AND TB PREVENTION

Notice of Award

Issue Date: 09/01/2009



**Grant Number:** 1U2GPS001814-01

**Principal Investigator(s):**

GEORGE W RUTHERFORD, MD

**Project Title:** CDC KENYA - MONITORING AND EVALUATION (M&E)

CONTRACTS & GRANTS OFFICER  
THE REGENTS OF THE UNIV CALIFORNIA  
OFFICE OF SPONSORED RESEARCH  
3333 CALIFORNIA ST, SUITE 315  
SAN FRANCISCO, CA 941430962

Award e-mailed to: cgrasteam@ucsf.edu

**Budget Period:** 09/30/2009 - 09/29/2010

**Project Period:** 09/30/2009 - 09/29/2014

Dear Business Official:

The Centers for Disease Control and Prevention hereby awards a grant in the amount of \$500,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to CALIFORNIA UNIV SAN FRANCISCO in support of the above referenced project. This award is pursuant to the authority of Section 307 Public Health Service Act 42 U.S.C. Section 2421 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,

SHIRLEY WYNN  
Grants Management Officer  
Centers for Disease Control and Prevention

Additional information follows



**SECTION I - AWARD DATA - 1U2GPS001814-01****Award Calculation (U.S. Dollars)**

Salaries and Wages	\$180,594
Fringe Benefits	\$47,259
Personnel Costs (Subtotal)	\$227,853
Supplies	\$4,242
Consortium/Contractual Cost	\$50,036
Travel Costs	\$63,377
Other	\$41,207

Federal Direct Costs	\$406,715
Federal F&A Costs	\$93,285
Approved Budget	\$500,000
Federal Share	\$500,000
<b>TOTAL FEDERAL AWARD AMOUNT</b>	<b>\$500,000</b>

<b>AMOUNT OF THIS ACTION (FEDERAL SHARE)</b>	<b>\$500,000</b>
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Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

02	\$400,000
03	\$400,000
04	\$400,000
05	\$400,000

**Fiscal Information:**

CFDA Number:	93.087
EIN:	1946036493A1
Document Number:	UPS001814A

IC	CAN	2009	2010	2011	2012	2013
PS	921ZGXH	\$500,000	\$400,000	\$400,000	\$400,000	\$400,000

SUMMARY TOTALS FOR ALL YEARS		
YR	THIS AWARD	CUMULATIVE TOTALS
1	\$500,000	\$500,000
2	\$400,000	\$400,000
3	\$400,000	\$400,000
4	\$400,000	\$400,000
5	\$400,000	\$400,000

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

**CDC Administrative Data:**

PCC: N / OC: 4151 / Processed: WYNN500 09/01/2009

**SECTION II - PAYMENT/HOTLINE INFORMATION - 1U2GPS001814-01**

For payment information see Payment Information section in Additional Terms and Conditions.

**INSPECTOR GENERAL:** The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-6477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to [hhsips@oig.hhs.gov](mailto:hhsips@oig.hhs.gov) or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award.



### SECTION III – TERMS AND CONDITIONS – 1U2GPS001814-01

This award is based on the application submitted to, and as approved by, CDC on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
- d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:  
Additional Costs

### SECTION IV – PS Special Terms and Conditions – 1U2GPS001814-01

1. **INCORPORATION:** This award is subject not only to any terms and conditions detailed in the award, but also to those cited and incorporated by reference. Funding Opportunity Number PS05-950 entitled Strengthening HIV Strategic Information Activities in the Republic of Kenya Under PEPFAR and the application dated May 28, 2009 are made a part of this award by reference.

This action awards funds in the amount of \$500,000 for budget period 01 from September 30, 2009 through September 29, 2010. The project period ends September 29, 2014.

This award is partially funded in the amount of \$500,000.00. The application has been reviewed and approved, but not yet funded in the amount of \$1,000,000.00. The award of the remaining \$500,000 is subject to the availability of funds during the budget period.

2. **GOVERNING REGULATIONS, POLICIES AND PROCEDURES:** Title 45 Code of Federal Regulation Part 74, 2 CFR Part 215 Uniform Administrative Requirements for Grants and Other Agreements with Institutions of Higher Education, Hospitals, Other Nonprofit Organizations and 2 CFR 220 Cost Principles for Education Institutions.

3. **INDIRECT COSTS:** Indirect costs are based upon the agreement dated December 14, 2005.

4. **HUMAN SUBJECTS RESTRICTION -** This is a new application that proposes activities to strengthen and expand Kenya's surveillance capacity. Grantee plans to assess surveillance needs, design a 5-year surveillance plan, provide technical assistance, build capacity and help inform policy and program decision making.

In addition to service delivery, applicant proposes biomedical and behavioral prevention interventions to be implemented, assessment of patient ART outcomes through chart abstraction and to conduct needs assessments. Grantee indicates protocols are in development. However, no institutional mechanisms are described for review of potential human subjects issues.

Funds in the amount of \$100,000 are restricted until the protocols for the proposed data collection activities noted above are submitted for review of human subjects issues.

Data collection activities, evaluations or assessments, examination of patient records done for the purpose of research, evaluation or surveillance will require protocol submission, review and approval or determination from CDC/Atlanta prior to implementation. Also, any impact evaluation that would involve survey's interviews, focus groups, etc would need protocols in advance for human subject review and approval. Any local IRB approvals, IRB-exempt determinations, or institutional non-research determinations already obtained that relate to project activities should be submitted to CDC GAP/Atlanta. Funding for activities that are clearly service delivery may proceed without restrictions.

Grantee is reminded that a response should be received within 30 days of the Notice of Award (NOA). Failure to respond in the time allowed could result in the disapproval of funds.



Please contact CDC/GAP/ADS if you have questions or need additional information.

**RESTRICTED FUNDS SHALL NOT BE WITHDRAWN UNTIL APPROVAL IS RECEIVED AND THE RESTRICTIONS HAVE BEEN LIFTED BY AN AMENDED NOTICE OF AWARD.**

**5. RESPONSE TO SUMMARY STATEMENT:** The grantee is required to submit a response to the weaknesses, restrictions and recommendations noted in the Summary Statement. Submit responses in writing to the Grants Management Specialist within 30 days of receiving your Notice of Award.

**6. REPORTING REQUIREMENTS:**

- a. The SF 268 (Financial Status Report - FSR) is due to the CDC Grants Management Office no later than 90 days after the end of each budget period (December 29, 2010). The FSR is not to report costs cumulatively.
- b. An annual Progress Report is due to the CDC Grants Management Office on December 29, 2010.
- c. An interim progress report is due no less than 90 days before the end of the budget period, which serves as your non-competing continuation application. The interim progress report will be requested at the appropriate time by the Grants Management Office.

**FUNDING OF FUTURE NON-COMPETING CONTINUATION AWARDS IS CONDITIONED ON THE AVAILABILITY OF FUNDS, SATISFACTORY PROGRESS BY THE RECIPIENT, AND AN AWARDING OFFICE DETERMINATION THAT CONTINUED FUNDING IS IN THE BEST INTEREST OF THE GOVERNMENT.**

**7. FOREIGN TRAVEL:** Recipient Institutions must comply with the requirement that a U.S. flag air carrier be used by domestic grantees to the maximum extent possible when commercial air transportation is the means of travel between the United States and a foreign country or between foreign countries. This requirement shall not be influenced by factors of cost, convenience or personal travel preferences.

**8. CORRESPONDENCE:** All correspondence regarding this award must be identified with the award number as shown on the face page of this award.

**9. PRIOR APPROVAL:** All requests that require the prior approval of the Grants Management Officer must bear the signature of an authorized official of the grantee business office as well as that of the principal investigator or program director. Any request received without two signatures will be returned. Additionally, any requests involving funding issues must include a new proposed budget and a narrative justification of the requested changes.

**10. EQUIPMENT AND PRODUCTS:** To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made. Title to equipment acquired by a recipient with HHS funds shall vest in the recipient, subject to the conditions in 45 CFR 74.34. In addition, the recipient's property management standards for equipment acquired with Federal funds and federally-owned equipment shall be maintained in accordance with 45 CFR 74.34.

**11. INVENTIONS:** Acceptance of grant funds obligates recipients to comply with the standard patent rights clauses in 37 CFR 401.14.

**12. PUBLICATIONS:** Publications, journal articles, etc. produced under a CDC grant support project must bear an acknowledgment and disclaimer, as appropriate, such as: This publication (journal article, etc.) was supported by Cooperative Agreement Number PS001814-01 from Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.

**13. ACKNOWLEDGMENT OF FEDERAL SUPPORT:** When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3)



percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

**14. INSPECTOR GENERAL:** The HHS Office of the Inspector General (OIG) maintains a toll-free telephone number, (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to [hhsips@oig.hhs.gov](mailto:hhsips@oig.hhs.gov) or by mail to Office of the Inspector General, Department of Health and Human Services, and Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

#### **15. PAYMENT INFORMATION**

##### **Automatic Drawdown:**

Payment under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). PMS is administered by the Division of Payment Management, Program Support Center, HHS. PMS will forward (1) the HHS Manual for Recipients Financed under the Payment Management System; (2) (PMS), PMS-270 (Request for Advance and Reimbursement); (3) PMS-272 (Status of Federal Cash) forms; (4) a contact person's name; and (5) instructions regarding direct deposit and other payment routes.

A. PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, P.O. Box 6021, Rockville, MD 20852.

B. For all other carriers, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, Rockwall Building #1, Suite 700, 11400 Rockville Pike, Rockville, MD 20852.

C. By drawing or otherwise obtaining funds for the award from the grant payment system, the recipient accepts the terms and conditions of the award and agrees to perform in accordance with the requirements of the award.

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.

**16. AUDIT REQUIREMENT:** OMB Circular A-133, Audits of States, Local Governments and Non-profit Institutions establish audit requirements for this award.

**17. CAPACITY BUILDING REQUIREMENTS:** The grantee agrees to implement strategies for facilitating scale-up and sustainability of activities supported under this agreement that include building on and strengthening existing local networks and institutions that benefit the populations served. The grantee shall endeavor to strengthen indigenous capacity in all aspects of this agreement, and especially focus on human capacity development.

As part of the work-plan, the grantee shall develop a credible plan to phase out and devolve activities and management to local partners and beneficiaries. The work-plan will include a timeline for the achievement of organizational or human capacity sustainability and track progress towards that end. Renewals of this agreement will be based on the progress towards the accomplishment of the phase-out plan and such proposals should specify how capacity will be transferred to indigenous groups over the full award period.

**18. TRAFFICKING IN PERSONS:** This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term and condition, go to: [http://www.cdc.gov/od/pgo/funding/grants/Award\\_Term\\_and\\_Condition\\_for\\_Trafficking\\_in\\_Persons.shtml](http://www.cdc.gov/od/pgo/funding/grants/Award_Term_and_Condition_for_Trafficking_in_Persons.shtml).

#### **19. CDC CONTACT NAMES**

##### **Programmatic Contacts**

Mary Mulholland, Project Officer  
CDC/Global AIDS Program, (Kenya)  
Telephone: +254 20 2867107



E-mail: mmuholand@ke.cdc.gov

**STAFF CONTACTS**

Grants Management Specialist: Shicann Phillips  
Center for Disease Control and Prevention

PGO

Koger Center/2704.03

MS K-75

Atlanta, GA 30333

Email: ibq7@cdc.gov Phone: 770-488-2615 Fax: 770-488-2688

Grants Management Officer: Shirley Wynn

Centers for Disease Control and Prevention

Procurement and Grants Office

Koger Center, Colgate Building

2920 Brandywine Road, Mailstop K75

Atlanta, GA 30341

Email: zbxb6@cdc.gov Phone: 770-488-1515 Fax: 770-488-2688

**SPREADSHEET SUMMARY**

GRANT NUMBER: 1U2GPS001814-01

INSTITUTION: UNIVERSITY OF CALIFORNIA SAN FRANCISCO

Budget	Year 1	Year 2	Year 3	Year 4	Year 5
Salaries and Wages	\$180,594				
Fringe Benefits	\$47,259				
Personnel Costs (Subtotal)	\$227,853				
Supplies	\$4,242				
Consortium/Contractual Cost	\$50,039				
Travel Costs	\$83,377				
Other	\$41,207				
TOTAL	\$406,715	\$400,000	\$400,000	\$400,000	\$400,000
FEDERAL DC					
TOTAL	\$93,285				
FEDERAL F&A					
TOTAL COST	\$500,000	\$400,000	\$400,000	\$400,000	\$400,000

