File No. 200370

Committee Item No. <u>1</u> Board Item No. _____

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee:	Budget and Finance Committee	Date	November 17, 2021
Board of Sup	pervisors Meeting	Date	

Cmte Board

	Motion Resolution Ordinance Legislative Digest Budget and Legislative Analyst Report Youth Commission Report Introduction Form Department/Agency Cover Letter and/or Report MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Form 126 – Ethics Commission Award Letter Application Public Correspondence
OTHER	(Use back side if additional space is needed)
	Original Agreement 7/1/16 Amendment No. 1 10/11/17 Amendment No. 2 2/1/19 BOS Resolution No. 167-19

Completed by:_	Brent Jalipa	Date	November 12, 2021
Completed by:	Brent Jalipa	Date	

FILE NO. 200370

1 [Agreement Amendment - San Francisco AIDS Foundation - HIV Prevention - City-Wide Syringe Access and Disposal Services - Not to Exceed \$42,115,471] 2 3 Resolution approving Amendment No. 3, to the agreement between the San Francisco 4 AIDS Foundation and the Department of Public Health to provide HIV prevention 5 services through City-wide syringe access and disposal services; to increase the 6 contract amount by \$6,507,312 for a total amount not to exceed \$42,115,471 with no 7 change to the contract term of July 1, 2016, through June 30, 2026, to commence upon 8 Board approval. 9 10 WHEREAS, The Department of Public Health (DPH) selected the San Francisco AIDS 11 Foundation to provide HIV Prevention City-wide Syringe Access and Disposal services 12 through a Request For Proposals; and 13 WHEREAS, DPH established an agreement for an initial term of two years, July 1, 14 2016, through June 30, 2018, with a not to exceed amount of \$4,976,830, and subsequently 15 amended it to extend the term one additional year, July 1, 2018, through June 30, 2019, for a 16 total contract amount not to exceed \$9,839,487; and 17 WHEREAS. The Board of Supervisors approved a second amendment to the 18 agreement extending the term by seven years, from July 1, 2019, through June 30, 2026, for 19 a total term of ten years, July 1, 2016, through June 30, 2026, for a total contract amount not 20 to exceed \$35,608,159 through Resolution No. 167-19 (File No. 190242); and 21 WHEREAS, DPH wishes to increase the contract by \$6,507,312 for a total contract 22 amount not to exceed \$42,115,471,to reflect add-back of General Fund support to address 23 encampment services; and 24 WHEREAS, This amendment will enable the continuation of HIV Prevention services 25 through City-wide Syringe Access and Disposal services targeting people in behavioral risk

1 populations such as injection drug users, people who are homeless, active drug users,

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formerly incarcerated individuals and/or who are struggling with mental health challenges; and

WHEREAS, These services will include program coordination with community-based
organizations, the DPH's Rapid Response Clean Team, and service providers which are
subcontractors in this contract, including the Glide Foundation, St. James Infirmary, the
Homeless Youth Alliance, and the San Francisco Drug Users Union; and

WHEREAS, The goal of these services is to reduce syringe-sharing and the risk of
transmission of HIV and other communicable diseases through the provision of sterile
injection equipment, health education, HIV/HCV testing, and collection of disposed needles,
both on-site and in City-wide syringe sweep events that focus on areas of greatest need; and
RESOLVED, That the Board of Supervisors hereby authorizes the Director of Public
Health and the Purchaser, on behalf of the City and County of San Francisco, to amend the

13 contract with San Francisco AIDS Foundation to increase the contract amount by \$6,507,312

14 for a total amount not to exceed \$42,115,471; and, be it

FURTHER RESOLVED, That the Board of Supervisors authorizes the Department of Public Health to enter into any amendments or modifications to the contract, prior to its final execution by all parties, that the Department determines, in consultation with the City Attorney, are in the best interest of the City, do not otherwise materially increase the obligations or liabilities of the City, are necessary or advisable to effectuate the purposes of the contract, and are in compliance with all applicable laws; and, be it

FURTHER RESOLVED, That within thirty (30) days of the contract amendment being fully executed by all parties, the Director of Health and/or the Director of Office of Contract Administration/Purchased shall provide the final contract to the Clerk of the Board for inclusion in the official file (File No. <u>200370</u>).

1	RECOMMENDED:	
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3	<u>/s/</u>	
4	Grant Colfax, M.D.	
5	Director of Health	
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Item 1 File 20-0370 (Continued from November 10, 2021)	Department: Department of Public Health
EXECUTIVE SUMMARY	
I	Legislative Objectives
	oves Amendment No. 3 to the contract with the AIDS -too-exceed amount by \$6,507,312 from \$35,608,159 to
	Key Points
exceed \$4,976,830 for two years contract annually for a period o	was awarded the contract in 2016 for an amount not to a, July 1, 2016 - June 30, 2018, with the option to renew the f one year through June 30, 2026. The contract has beer e contract not to exceed amount to \$35,608,159 and e 2026.
community organizations to pro syringe sharing and lower the ris	tion is the lead agency on the contract and partners with ovide syringe access and disposal services to help reduce k of transmission of HIV and other communicable diseases. njection equipment, health education, HIV and hepatitis C ed needles.
Syringe Sweeps Program across t	ds funding and services for syringe clean-up through the the city, focusing on priority neighborhoods, hot spots, and r with the San Francisco War Memorial Veterans Building.
	Fiscal Impact
Foundation in FY 2016-17 throug	7,277,830 on services under the contract with the AIDS gh FY 2020-21. The Department projects new expenditures 5-26 of \$24,837,641, including a contingency, for a tota of \$42,115,471 over ten years.
toward the Syringe Sweeps	iding under this proposed amendment will primarily go Program (\$5,850,775), which started as a Mayora additional \$34,685 in increased funding reflects the work
	Recommendations
Finance Committee with update	^F Public Health provide a written report to the Budget and ed performance data through FY 2020-21 for all service in the San Francisco AIDS Foundation once this information
• Approve the proposed resolution	n

MANDATE STATEMENT

City Charter Section 9.118(b) states that any contract entered into by a department, board or commission that (1) has a term of more than ten years, (2) requires expenditures of \$10 million or more, or (3) requires a modification of more than \$500,000 is subject to Board of Supervisors approval.

BACKGROUND

The Department of Public Health (DPH) issued a Request for Proposals (RFP) for an HIV prevention program with citywide syringe access and disposal services in March 2016. The San Francisco AIDS Foundation was the only vendor to respond with a Letter of Intent to submit a proposal. DPH, per the terms of the RFP, directly negotiated with the AIDS Foundation rather than continue a formal solicitation process. The AIDS Foundation is the lead agency on the contract and partners with Homeless Youth Alliance, Drug Users Union, Glide, and St James Infirmary to provide services. As the lead agency, the AIDS Foundation is responsible for coordinating services, mapping locations, centralizing, and distributing supplies, and holding regular meetings with partners to coordinate and problem solve.

The initial contract authorized an amount not to exceed \$4,976,830 for two years, July 1, 2016 - June 30, 2018, with the option to renew the contract annually for a period of one year through June 30, 2026. The contract has been modified twice, increasing the contract not-to-exceed amount to \$35,608,159 and extending the term through June 2026, as shown in Table 1 below.

No.	Date	Description	Not-to-Exceed Amount
1	10/1/2017	Extended the contract for an additional year: July 1, 2018 - June 30, 2019.	\$9,839,487
2	2/1/2019	Extended the contract for seven years: July 1, 2019 – June 30, 2026 for a total term of 10 years (July 1, 2016 – June 30, 2026). (File 19-0242)	\$35,608,159

Exhibit 1: Previous Contract Amendments

In 2020, the Department of Public Health had sought Board of Supervisors approval for Amendment No. 3 to the contract with the AIDS Foundation, increasing the not-to-exceed amount of the contract by \$6,507,312, for a total not to exceed \$42,115,471. However, due to the onset of the COVID-19 pandemic and ensuing City budget deficit, the Mayor's Office raised concerns about funding availability and the Department of Public Health withdrew its request to approve Amendment No. 3. With an improved fiscal outlook, these concerns have been alleviated and the Department of Public Health is now seeking Board of Supervisors approval for Amendment No. 3 to the contract.

DETAILS OF PROPOSED LEGISLATION

The proposed resolution approves Amendment No. 3 to the contract with the AIDS Foundation, increasing the not-too-exceed amount by \$6,507,312 from \$35,608,159 to \$42,115,471. This additional funding reflects add-back of General Fund support to address additional syringe cleanup and disposal services, target priority neighborhoods and hot spots, and a work order with the War Memorial.

Services Provided

Through this contract, the AIDS Foundation and its partners provide syringe access and disposal services to help reduce syringe sharing and lower the risk of transmission of HIV and other communicable diseases. This includes providing sterile injection equipment, health education, HIV and hepatitis C testing, and collection of disposed needles. The contract in total supports 26.295 full-time equivalent (FTE) positions annually.

Amendment No. 3 continues citywide syringe access and disposal services, including:

- Syringe Access & Disposal Services, which provides access to sterile syringes and safer injection supplies to help reduce the likelihood of syringe sharing and decrease the risk of HIV transmission. In addition, this work includes providing 24-hour access to 10 large disposal kiosks and nine smaller boxes, and services through the Syringe Pick-up crew that provides syringe collection and disposal services 7 days a week from 7am-7pm. Community members may also text the AIDS Foundation 415-810-1337 to report syringe litter or can contact the Department of Public Works via 311.
- Homeless Youth Alliance (HYA) wrap around program, which targets wraparound and syringe services to young adults.
- Harm Reduction Center, which provides a physical space for clients to drop in, receive education on overdose prevention, harm reduction counseling, crisis intervention, and link to HIV and hepatitis testing and care.
- **Syringe Sweeps**, a Citywide clean-up effort, focusing on priority neighborhoods, hot spots, and encampments.
- **The War Memorial Work Order,** which provides syringe clean-up services around the San Francisco War Memorial Veterans Building.
- **Drug Testing Support**, which was a one-time effort in FY 2020-21 to support mobile drug testing services that allow drug users to test their drugs prior to consumption.

As noted above, the proposed Amendment No. 3 outlines expanded funding and services for syringe clean-up through the Syringe Sweeps Program across the City and specifically at the San Francisco War Memorial Veterans Building. The additional funding for the Syringe Sweeps

Program and War Memorial Work Order will support a total of 9.775 FTEs¹ for syringe clean up and management services, focusing on priority neighborhoods, hot spots, and encampments. The work order with the War Memorial will including managing the syringe disposal boxes in the city building as well as preforming clean-up outside around the building property.

Exhibit 2 below shows the units of service included in the proposed third amendment.

Exhibit 2: San Francisco AIDS Foundation Contract Units of Service

Service Component	Units of Service / Number of Contacts in Proposed Amendment #3 (FY 21-22 through FY 25-26)	Change from Amendment #2 (approved 2019)
Syringe Access and Disposal Services	 -4,302 hours of syringe access and disposal services per year (~12.63 clients contacted per hour for an estimated 54,300 contacts per year) -12 months of syringe access and disposal coordination and bulk purchasing -3,710 hours of Citywide sweeps 	Removes 67 Community- Based Sweeps Events, which involved coordinating residents and staff of agencies working in areas where sweeps are necessary.
Homeless Youth Alliance	 -12 months of personnel, operation, and syringe disposal services per year 	No Change
Harm Reduction Center	 -1,888 hours of syringe access services per year (16.6 contacts per hour for an estimated 31,341 contacts) -2,550 hours of lounge services per year (6 clients contacted per hour for an estimated 15,300 contacts per year) 	Increased the estimated number of client contacts per hour for lounge services from 3 per hour to 6 per hour for an additional 7,650 contacts per year
Syringe Sweeps	 -4,368 hours of syringe disposal services per year (includes providing education to community about safe disposal options) 	New
War Memorial	-52 weeks of syringe disposal services (no direct services provided to individuals)	New

Source: Department of Public Health Contract with San Francisco AIDS Foundation, Appendix A Note: One full-time equivalent position is approximately 1,768 hours

Units of Service

As shown in Exhibit 3 below, the monitoring report indicates that the AIDS Foundation exceeded the contracted number of units for contacts related to syringe access and disposal services and syringe clean-up services (Syringe Sweeps). However, services provided through the Harm Reduction Lounge did not meet their contracted targets. According to DPH staff, this was likely to do changes in service because of shelter-in-place orders during the spring of 2020.

¹ An additional 9.775 FTE will be supported through the Syringe Sweeps Program (9.65 FTE) and War Memorial Work Order (0.125 FTE); however, the net increase in contract positions is 7.27 FTEs due to a reduction in the existing Syringe Sweeps program from 11.55 to 9.05 FTE. This reduction in FTEs was made to offset increased operating costs.

Units of Service	Contracted	Actual	Actual as Percentage of Contracted
Syringe Access and Disposal Contacts	54,300	68,310	125.8%
Harm Reduction Center, Hours	2,550	1,723	67.6%
Harm Reduction Center, Contacts	8,079	9,190	113.8%
Harm Reduction Center, Syringe Access Hours	1,888	1,480	78.4%
Syringe Sweeps Hours	4,368	5,336	122.2%

Exhibit 3: San Francisco AIDS Foundation Contract Performance FY 2019-20

Source: Monitoring Report FY19-20, San Francisco AIDS Foundation HIV Syringe Access and Disposal Services Note: The contract monitoring report for Coordination & Bulk Purchasing and Syringe Access & Disposal Services Contacts have listed contracted numbers that are slightly higher than what is in the contract: 54,310 vs. 54,300 contacts for Coordination & Bulk Purchasing and 8,079 vs. 8,000 for Syringe Access & Disposal Services Contacts.

According to the Department of Public Health, the War Memorial Work Order began in July 2021 and have not yet been monitored for performance. The Drug Testing Support work was one-time funding for FY 2020-21 and not included in monitoring.

Homeless Youth Alliance

The Homeless Youth Alliance, a subcontractor of the AIDS Foundation, was separately monitored in FY 2018-19 but not in FY 2019-20. The Department of Public Health advises that staff that typically monitor contractor performance were re-assigned to pandemic tasks. Moving forward, this program will resume being monitored as a stand-alone program.

Syringe Collection

Syringe Sweeps Clean-up Team has a contracted objective of collecting 120,000 syringes annually. According to data provided by DPH, the Syringe Sweep Clean-up Team collected 173,598 syringes in calendar year 2020.

FISCAL IMPACT

Exhibit 5 provides an overview of changes between the existing agreement and the proposed amendment.

Program	Current Funding (Approved Under Amendment #2)	Proposed Funding (Amendment #3 Under Consideration)	Change	Explanation
Syringe Access & Disposal	\$21,870,049	\$22,650,163	\$390,707	Cost of Doing Business increase
HYA Wrap Around Program	1,664,821	1,696,126	31,232	Cost of Doing Business increase
Harm Reduction Center	9,228,000	9,543,092	315,092	Cost of Doing Business increase
Syringe Sweeps Program		5,850,775	5,850,775	New Services added in FY 2019-20; Cost of Doing Business increase
War Memorial Work Order		34,685	34,685	Work order added for FY 2021-22 through FY 2025-26
Subtotal	\$32,762,870	\$39,773,841	\$7,010,971	
Contingency Adjustment*	2,845,290	2,341,630	(503,660)	
Total	\$35,608,160	\$42,115,471	\$6,507,312	

Exhibit 5: Proposed Funding Changes for San Francisco AIDS Foundation Contract (FY 2016-17 through FY 2025-26)

Source: Department of Public Health

*The contingency adjustment in the proposed funding amount in Amendment #3 (under consideration) is determined based on projected expenditures for FY 2021-22 through FY 2025-26

**Total varies from the not-to-exceed amount due to rounding.

As shown above, the majority of the increased \$6,507,312 funding is being allocated to the Syringe Sweeps program. Of the increased amount, \$5,850,775 supports a total of 9.65 FTE in the Syringe Sweeps Program for syringe clean-up and management services. The \$34,685 work order with the War Memorial supports 0.125 FTE and includes managing the syringe disposal boxes in the City building as well as preforming clean-up outside around the building property. Cost of Doing Business increases added to the contract are projected through FY 2025-26 and amounts beyond the current fiscal year are subject to future Board of Supervisors' approval.

The contract budget covers the units of service, as detailed above, and the health educator and administrative functions at the AIDS Foundation and its subcontractors. Contract expenditures are funded by the General Fund.

Actual and Projected Expenditures

The Department has spent \$17,277,830 on services under the contract with the AIDS Foundation in FY 2016-17 through FY 2020-21. The Department projects new expenditures in FY 2020-21 through FY 2025-26 of \$24,837,641, including a contingency, for a total contract not-to-exceed amount of \$42,115,471 over ten years.

POLICY CONSIDERATION

FY 2020-21 Performance Data

The Department of Public Health is in the process of conducting its performance monitoring and updating its performance data for this contractor in FY 2020-21. We recommend that the Department of Public Health provide a written report to the Board of Supervisors on the performance of these services in FY 2020-21 upon completing performance monitoring of the program.

RECOMMENDATIONS

- 1. Request that the Department of Public Health provide a written report to the Budget and Finance Committee with updated performance data through FY 2020-21 for all service components of the contract with the San Francisco AIDS Foundation once this information is available.
- 2. Approve the proposed resolution.

Item 2 File 20-0370	Department: Department of Public Health
EXECUTIVE SUMMARY	
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• Approve the proposed resolutio	n
San Francisco Board of Supervisors	BUDGET AND LEGISLATIVE ANALYST

MANDATE STATEMENT

City Charter Section 9.118(b) states that any contract entered into by a department, board or commission that (1) has a term of more than ten years, (2) requires expenditures of \$10 million or more, or (3) requires a modification of more than \$500,000 is subject to Board of Supervisors approval.

BACKGROUND

The Department of Public Health (DPH) issued a Request for Proposals (RFP) for an HIV prevention program with citywide syringe access and disposal services in March 2016. The San Francisco AIDS Foundation was the only vendor to respond with a Letter of Intent to submit a proposal. DPH, per the terms of the RFP, directly negotiated with the AIDS Foundation rather than continue a formal solicitation process. The AIDS Foundation is the lead agency on the contract and partners with Homeless Youth Alliance, Drug Users Union, Glide, and St James Infirmary to provide services. As the lead agency, the AIDS Foundation is responsible for coordinating services, mapping locations, centralizing, and distributing supplies, and holding regular meetings with partners to coordinate and problem solve.

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DETAILS OF PROPOSED LEGISLATION

The proposed resolution approves Amendment No. 3 to the contract with the AIDS Foundation, increasing the not-too-exceed amount by \$6,507,312 from \$35,608,159 to \$42,115,471. This additional funding reflects add-back of General Fund support to address additional syringe cleanup and disposal services, target priority neighborhoods and hot spots, and a work order with the War Memorial.

Services Provided

Through this contract, the AIDS Foundation and its partners provide syringe access and disposal services to help reduce syringe sharing and lower the risk of transmission of HIV and other communicable diseases. This includes providing sterile injection equipment, health education, HIV and hepatitis C testing, and collection of disposed needles. The contract in total supports 26.295 full-time equivalent (FTE) positions annually.

Amendment No. 3 continues citywide syringe access and disposal services, including:

- Syringe Access & Disposal Services, which provides access to sterile syringes and safer injection supplies to help reduce the likelihood of syringe sharing and decrease the risk of HIV transmission. In addition, this work includes providing 24-hour access to 10 large disposal kiosks and nine smaller boxes, and services through the Syringe Pick-up crew that provides syringe collection and disposal services 7 days a week from 7am-7pm. Community members may also text the AIDS Foundation 415-810-1337 to report syringe litter or can contact the Department of Public Works via 311.
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Program and War Memorial Work Order will support a total of 9.775 FTEs¹ for syringe clean up and management services, focusing on priority neighborhoods, hot spots, and encampments. The work order with the War Memorial will including managing the syringe disposal boxes in the city building as well as preforming clean-up outside around the building property.

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Harm Reduction Center	 -1,888 hours of syringe access services per year (16.6 contacts per hour for an estimated 31,341 contacts) -2,550 hours of lounge services per year (6 clients contacted per hour for an estimated 15,300 contacts per year) 	Increased the estimated number of client contacts per hour for lounge services from 3 per hour to 6 per hour for an additional 7,650 contacts per year
Syringe Sweeps	 -4,368 hours of syringe disposal services per year (includes providing education to community about safe disposal options) 	New
War Memorial	-52 weeks of syringe disposal services (no direct services provided to individuals)	New

Source: Department of Public Health Contract with San Francisco AIDS Foundation, Appendix A Note: One full-time equivalent position is approximately 1,768 hours

Units of Service

As shown in Exhibit 3 below, the monitoring report indicates that the AIDS Foundation exceeded the contracted number of units for contacts related to syringe access and disposal services and syringe clean-up services (Syringe Sweeps). However, services provided through the Harm Reduction Lounge did not meet their contracted targets. According to DPH staff, this was likely to do changes in service because of shelter-in-place orders during the spring of 2020.

¹ An additional 9.775 FTE will be supported through the Syringe Sweeps Program (9.65 FTE) and War Memorial Work Order (0.125 FTE); however, the net increase in contract positions is 7.27 FTEs due to a reduction in the existing Syringe Sweeps program from 11.55 to 9.05 FTE. This reduction in FTEs was made to offset increased operating costs.

Units of Service	Contracted	Actual	Actual as Percentage of Contracted
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Harm Reduction Center, Syringe Access Hours	1,888	1,480	78.4%
Syringe Sweeps Hours	4,368	5,336	122.2%

Exhibit 3: San Francisco AIDS Foundation Contract Performance FY 2019-20

Source: Monitoring Report FY19-20, San Francisco AIDS Foundation HIV Syringe Access and Disposal Services Note: The contract monitoring report for Coordination & Bulk Purchasing and Syringe Access & Disposal Services Contacts have listed contracted numbers that are slightly higher than what is in the contract: 54,310 vs. 54,300 contacts for Coordination & Bulk Purchasing and 8,079 vs. 8,000 for Syringe Access & Disposal Services Contacts.

According to the Department of Public Health, the War Memorial Work Order began in July 2021 and have not yet been monitored for performance. The Drug Testing Support work was one-time funding for FY 2020-21 and not included in monitoring.

Homeless Youth Alliance

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Syringe Collection

Syringe Sweeps Clean-up Team has a contracted objective of collecting 120,000 syringes annually. According to data provided by DPH, the Syringe Sweep Clean-up Team collected 173,598 syringes in calendar year 2020.

FISCAL IMPACT

Exhibit 5 provides an overview of changes between the existing agreement and the proposed amendment.

Program	Current Funding (Approved Under Amendment #2)	Proposed Funding (Amendment #3 Under Consideration)	Change	Explanation
Syringe Access & Disposal	\$21,870,049	\$22,650,163	\$390,707	Cost of Doing Business increase
HYA Wrap Around Program	1,664,821	1,696,126	31,232	Cost of Doing Business increase
Harm Reduction Center	9,228,000	9,543,092	315,092	Cost of Doing Business increase
Syringe Sweeps Program		5,850,775	5,850,775	New Services added in FY 2019-20; Cost of Doing Business increase
War Memorial Work Order		34,685	34,685	Work order added for FY 2021-22 through FY 2025-26
Subtotal	\$32,762,870	\$39,773,841	\$7,010,971	
Contingency Adjustment*	2,845,290	2,341,630	(503,660)	
Total	\$35,608,160	\$42,115,471	\$6,507,312	

Exhibit 5: Proposed Funding Changes for San Francisco AIDS Foundation Contract (FY 2016-17 through FY 2025-26)

Source: Department of Public Health

*The contingency adjustment in the proposed funding amount in Amendment #3 (under consideration) is determined based on projected expenditures for FY 2021-22 through FY 2025-26

**Total varies from the not-to-exceed amount due to rounding.

As shown above, the majority of the increased \$6,507,312 funding is being allocated to the Syringe Sweeps program. Of the increased amount, \$5,850,775 supports a total of 9.65 FTE in the Syringe Sweeps Program for syringe clean-up and management services. The \$34,685 work order with the War Memorial supports 0.125 FTE and includes managing the syringe disposal boxes in the City building as well as preforming clean-up outside around the building property. Cost of Doing Business increases added to the contract are projected through FY 2025-26 and amounts beyond the current fiscal year are subject to future Board of Supervisors' approval.

The contract budget covers the units of service, as detailed above, and the health educator and administrative functions at the AIDS Foundation and its subcontractors. Contract expenditures are funded by the General Fund.

Actual and Projected Expenditures

The Department has spent \$17,277,830 on services under the contract with the AIDS Foundation in FY 2016-17 through FY 2020-21. The Department projects new expenditures in FY 2020-21 through FY 2025-26 of \$24,837,641, including a contingency, for a total contract not-to-exceed amount of \$42,115,471 over ten years.

POLICY CONSIDERATION

FY 2020-21 Performance Data

The Department of Public Health is in the process of conducting its performance monitoring and updating its performance data for this contractor in FY 2020-21. We recommend that the Department of Public Health provide a written report to the Board of Supervisors on the performance of these services in FY 2020-21 upon completing performance monitoring of the program.

RECOMMENDATIONS

- 1. Request that the Department of Public Health provide a written report to the Budget and Finance Committee with updated performance data through FY 2020-21 for all service components of the contract with the San Francisco AIDS Foundation once this information is available.
- 2. Approve the proposed resolution.

Item 3 Files 20-0370	Department: Department of Public Health
EXECUTIVE SUMMARY	
	Legislative Objectives
Department of Public Health prevention program, increasing	approve Amendment No. 3 to the contract between the (DPH) and San Francisco AIDS Foundation for an HIV the total contract amount by \$6,507,312 for a total not to over the total term of 10 years (July 2016 - June 2026).
	Key Points
exceed \$4,976,830 for two years contract for a period of one yea	was awarded the contract in 2016 for an amount not to s, July 1, 2016 - June 30, 2018, with the option to renew the ir each year through June 30, 2026. The contract has been e contract not to exceed amount to \$35,608,159 and e 2026.
community organizations to pro syringe sharing and lower the ris	tion is the lead agency on the contract and partners with ovide syringe access and disposal services to help reduce of transmission of HIV and other communicable diseases. njection equipment, health education, HIV and hepatitis C ed needles.
Syringe Sweeps Program across	ds funding and services for syringe clean-up through the the city, focusing on priority neighborhoods, hot spots, and r with the San Francisco War Memorial Veterans Building.
	Fiscal Impact
with the AIDS Foundation in FY 2 expenditures in FY 2020-21 thr contingency, for a total of contu The majority of the \$6,507,312	ojects to spend \$13,129,672 on services under the contract 2016-17 through FY 2019-20. The Department projects new rough FY 2025-26 of \$28,985,799, including a 12 percent ract not to exceed amount over ten years of \$42,115,471. In increased funding will go toward the Syringe Sweeps a Mayoral Enhancement that started in FY 2019-20.
	Policy Consideration
project a FY 2019-20 shortfall projected to increase to \$753.9 the Mayor's Budget Instruction provided for a 10 percent reduct	the General Fund. The Controller and Mayor's Budget Office in the General Fund budget of \$246.2 million, which is million in FY 2020-21. The Mayor's Budget Office presented to the Board of Supervisors on May 18, 2020, which tion in City departments' General Fund budgets; services to pulations are given priority for funding.
	Recommendation
Approval of the proposed resolution	ition is a policy matter for the Board of Supervisors.

MANDATE STATEMENT

City Charter Section 9.118(b) states that any contract entered into by a department, board or commission that (1) has a term of more than ten years, (2) requires expenditures of \$10 million or more, or (3) requires a modification of more than \$500,000 is subject to Board of Supervisors approval.

BACKGROUND

The Department of Public Health (DPH) issued a Request for Proposals (RFP) for an HIV prevention program with citywide syringe access and disposal services in March 2016. The San Francisco AIDS Foundation was the only vendor to respond with a Letter of Intent to submit a proposal. DPH, per the terms of the RFP, directly negotiated with the AIDS Foundation rather than continue a formal solicitation process. The AIDS Foundation is the lead agency on the contract and partners with Homeless Youth Alliance, Drug Users Union, Glide and St James Infirmary to provide services. As the lead agency, the AIDS Foundation is responsible for coordinating services, mapping locations, centralizing and distributing supplies, and holding regular meetings with partners to coordinate and problem solve.

The initial contract authorized an amount not to exceed \$4,976,830 for two years, July 1, 2016 - June 30, 2018, with the option to renew the contract for a period of one year each year through June 30, 2026. The contract has been modified twice, increasing the contract not-to-exceed amount to \$35,608,159 and extending the term through June 2026, as shown in Table 1 below.

No.	Date	Description	Updated Not- to-Exceed Amount
1	10/1/2017	Extended the contract for an additional year: July 1, 2018 - June 30, 2019.	\$9,839,487
2	2/1/2019	Extended the contract for seven years: July 1, 2019 – June 30, 2026 for a total term of 10 years (July 1, 2016 – June 30, 2026).	\$35,608,159

Source: February 2020 Proposed Modification

DETAILS OF PROPOSED LEGISLATION

The proposed resolution approves a third modification to the contract with the AIDS Foundation, increasing the not-too-exceed amount by \$6,507,312 from \$35,608,159 to \$42,115,471. This additional funding reflects add-back of General Fund support to provide syringe clean-up services through the Syringe Sweeps Program.

Services Provided

Through this contract, the AIDS Foundation and its partners provide syringe access and disposal services to help reduce syringe sharing and lower the risk of transmission of HIV and other communicable diseases. This includes providing sterile injection equipment, health education, HIV and hepatitis C testing, and collection of disposed needles. Syringe disposal services include 24-hour disposal kiosks and the Syringe Pick-up crew that provides syringe collection and disposal services 7 days a week from 7am-7pm through a text message system.

Amendment No. 3 continues citywide syringe access and disposal services, including the Homeless Youth Alliance (HYA) wrap around program, which targets services to young adults; and, services at the Harm Reduction Center, which provides a physical space for clients to drop in, receive education on overdose prevention, harm reduction counseling, crisis intervention, etc., and link to HIV and HCV testing and care.

Amendment No. 3 outlines expanded funding and services for syringe clean-up through the Syringe Sweeps Program across the city and specifically at the San Francisco War Memorial Veterans Building. The additional funding for the Syringe Sweeps Program and War Memorial Work Order will support a total of 9.775 FTEs for syringe clean up and management services, focusing on priority neighborhoods, hot spots, and encampments. The work order with the War Memorial will including managing the syringe disposal boxes in the city building as well as preforming clean-up outside around the building property.

Performance Monitoring

The FY 2018-19 Monitoring Report for the HIV Syringe Access & Disposal and Harm Reduction Center components of the contract, indicate that the overall program was rated "4 – Commendable/Exceeds Standards." Table 2 below summarizes the contract performance objectives and performance to date for the Syringe Access & Disposal and Harm Reduction Center components of the contract.

Performance Objective	Most Recent Reporting Year	Objective Description	Performance
1	FY 2018-19	Syringe Access Collaborative/San Francisco AIDS Foundation will report on the percentage of HIV tests among people who inject drugs.	3 percent (453/18,197)
2	FY 2018-19	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.	75 percent (6/8) linkage to care
3	FY 2018-19	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.	99 percent (113/114) retention

Table 2. San Francisco AIDS Foundation Syringe Access and Disposal Contract Performance

Source: Department of Public Health

The FY 2018-19 Monitoring Report for the Homeless Youth Alliance (HYA) Wrap Around program, indicates that the overall program was rated "4 – Commendable/Exceeds Standards." They also received 35 out of 35 points (100%) on program deliverables, achieving 451% of contracted units of services:

- Syringe Sweeps: 600 Contracted; 622 Actual
- Syringes In: 0 Contracted; 461,685 Actual
- Syringes Out: 210,000 Contracted; 486,595 Actual

The monitoring report for the HYA Wrap Around program recommends the development of a program plan to justify the units of services and establish targeted productivity.

Performance monitoring for the Syringe Sweeps and War Memorial elements of the contract are not available yet as they began in FY 2019-20. However, in addition to the objectives listed above in Table 2, the proposed Amendment No. 3 adds an additional objective:

• By the end of each program year, the Syringe Clean-up Team will collect at least 120,000 syringes annually as documented by disposal clean-up logs.

Data from the Department of Public Health indicates that in FY 2018-19, over 318,000 syringes were collected off the streets. From July 2019 – February 2020, over 299,000 syringes were collected as part of street sweeps. Between January and February 2020, 45,839 syringes were collected as part of street sweeps, which accounts for roughly 8.4 percent of all syringes collected during this period.

The Department engaged with the City's Performance Unit in 2019 to enhance standardized data collection and reporting on syringe recovery and disposal efforts and adopt a results-based accountability framework to help identify measures that promote desired outcomes. This process resulted in a series of recommendations, including establishing consistent syringe collection and disposal processes; engaging with waste management vendors to improve reporting; invest in expanded reporting of public perceptions and street and sidewalk inspection data; and, improve use of internal syringe recovery dashboard and use it to develop future external facing information.

FISCAL IMPACT

Tables 3 below summarizes actual and projected contract spending through FY 2019-20 and budgeted spending through FY 2025-26, including a 12 percent contingency, totaling \$42,115,471.

Table 3. San Francisco AIDS Foundation Contract Actual, Projected, and Budgeted Expenditures

Actual and Projected Expenditures	
FY 2016-17 through FY 2019-20	\$13,129,672
Budgeted Expenditures	
FY 2020-21 through FY 2025-26 (proposed Amendment #3)	25,880,178
Contingency (12%)	<u>3,105,621</u>
Total	\$42,115,471

Actuals for 2016-17, 2017-18, and 2018-19; Actuals & Forecasted for 2019-20 Source: Department of Public Health

Table 4 provides an overview of changes between Amendment No. 2 and No. 3. According to Michelle Ruggels, Director of the Business Office at the Department of Public Health, the majority of the \$6,507,211 increase is going toward the Syringe Sweeps Program (\$5,523,378), which is a Mayoral Enhancement that started in FY 2019-20. Ms. Ruggels advises that future funding, including future Cost of Doing Business increases, continues to be contingent upon Board of Supervisors appropriation approval. If funding is not appropriated, the City's standard contract language states that the City has no obligation to make an appropriation to the contractor.

Use	Current Funding	Proposed Funding	Increase	Explanation
Syringe Access & Disposal	\$21,870,049	\$22,260,756	\$390,707	Cost of Doing Business
HYA Wrap Around Program	\$1,664,821	\$1,696,053	\$31,232	Cost of Doing Business
Harm Reduction Center	\$9,228,000	\$9,481,104	\$253,104	Cost of Doing Business
Syringe Sweeps Program		\$5,523,378	\$5,523,378	 Mayoral Enhancement starting FY 2019-20 through FY 2025-26. Annually funds 9.65 FTEs for syringe clean up and management.
War Memorial Work Order		\$48,559	\$48,559	 Work order added for FY 2019-20 through FY 2025- 26. Annually Funds 0.125 FTE for syringe clean up.
Contingency Adjustment	\$2,845,290	\$3,105,621	\$260,331	, , , , , , , , , , , , , , , , , , , ,
Total	\$35,608,160	\$42,115,471	\$6,507,311	

Table 4. Proposed Funding Increases for San Francisco AIDS Foundation Contract

Source: Department of Public Health

The contract is funded by the General Fund.

POLICY CONSIDERATION

The Budget Outlook Update (May Joint Report), prepared by the Budget and Legislative Analyst's Office, Mayor's Budget Office, and Controller, projected FY 2019-20 shortfall in the General Fund budget of \$246.2 million due to the impacts of the COVID-19 public health emergency and a slower economic recovery. That shortfall is projected to increase to \$753.9 million in FY 2020-21 and continue into subsequent fiscal years. The Mayor's Budget Office presented the Mayor's Budget Instructions to the Board of Supervisors on May 18, 2020, which provided for a 10 percent reduction in City departments' General Fund budgets; services to vulnerable and underserved populations are given priority for funding.

Because of the projected shortfall in the General Fund, the Budget and Legislative Analyst considers approval of new General Fund monies for the proposed contract modification in FY 2020-21 through FY 2025-26, totaling \$6,507,311 (shown in Table 4 above) to be a policy matter for the Board of Supervisors.

RECOMMENDATION

Approval of the proposed resolution is a policy matter for the Board of Supervisors.

SAN FRANCISCO BOARD OF SUPERVISORS

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

Third Amendment

THIS AMENDMENT (this "Amendment") is made as of **February 1st**, 2020, in San Francisco, California, by and between **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 increase the 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 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;

WHEREAS, the City's Board of Supervisors approved this Agreement by ______-20 on ______;

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:

Contract ID# 1000002634

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

Second Amendment dated February 1, 2019 (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 3.3.1 Payment of the 2nd 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 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.

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 Forty-Two Million One Hundred Fifteen Thousand Four Hundred Seventy-One DOLLARS (\$42,115,471). 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.

2.2 Article 4.5 Assignment, is herby amended in its entirety to read as follows:

Article 4 Services and Resources

4.5 Assignment. The Services to be performed by Contractor are personal in character. Neither this Agreement, nor any duties or obligations hereunder, may be directly or indirectly assigned, novated, hypothecated, transferred, or delegated by Contractor, or, where the Contractor is a joint venture, a joint venture partner, (collectively referred to as an "Assignment") unless first approved by City by written instrument executed and approved in the same manner as this Agreement in accordance with the Administrative Code. The City's approval of any such Assignment is subject to the Contractor demonstrating to City's reasonable satisfaction that the proposed transferee is: (i) reputable and capable, financially and otherwise, of performing each of Contractor's obligations under this Agreement and any other documents to be assigned, (ii) not forbidden by applicable law from transacting business or entering into contracts with City; and (iii) subject to the jurisdiction of the courts of the State of California. A change of ownership or control of Contractor or a sale or transfer of substantially all of the assets of Contractor shall be deemed an Assignment for purposes of this Agreement. Contractor shall immediately notify City about any Assignment. Any purported Assignment made in violation of this provision shall be null and void. 2.3 Article 5.1 Insurance, is herby amended in its entirety to read as follows:

Article 5 Insurance and Indemnity

5.1 Insurance.

5.1.1 **Required Coverages.** Insurance limits are subject to Risk Management review and revision, as appropriate, as conditions warrant. Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

 (a) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and

(b) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations; and

(c) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

- (d) Reserved. (Professional Liability Coverage)
- (e) Reserved. (Technology Errors and Omissions Coverage)

(f) Contractor shall maintain in force during the full life of the agreement Cyber and Privacy Insurance with limits of not less than \$5,000,000 per claim. Such insurance shall include coverage for liability arising from theft, dissemination, and/or use of confidential information, including but not limited to, bank and credit card account information or personal information, such as name, address, social security numbers, protected health information or other personally identifying information, stored or transmitted in any form.

5.1.2 Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

5.1.3 Contractor's Commercial General Liability and Commercial Automobile Liability Insurance policies shall provide that such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that the insurance applies separately to each insured against whom claim is made or suit is brought.

5.1.4 All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in Section 11.1, entitled "Notices to the Parties."

5.1.5 Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

5.1.6 Should any of the required insurance be provided under a form of coverage that includes a general annual aggregate limit or provides that claims investigation or legal defense costs be included in such general annual aggregate limit, such general annual aggregate limit shall be double the occurrence or claims limits specified above.

5.1.7 Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

5.1.8 Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

5.1.9 Reserved. (Waiver of Subrogation)

5.1.10 If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

2.4 Add Article 7.3 Withholding, to this Agreement as Amended to reads as follows:

Article 7 Payment of Taxes

7.3 Withholding. Contractor agrees that it is obligated to pay all amounts due to the City under the San Francisco Business and Tax Regulations Code during the term of this Agreement. Pursuant to Section 6.10-2 of the San Francisco Business and Tax Regulations Code, Contractor further acknowledges and agrees that City may withhold any payments due to Contractor under this Agreement if Contractor is delinquent in the payment of any amount required to be paid to the City under the San Francisco Business and Tax Regulations Code. Any payments withheld under this paragraph shall be made to Contractor, without interest, upon Contractor coming back into compliance with its obligations. 2.5 Article 10.11 Limitations on Contributions, is herby amended in its entirety to read as follows:

Article 10 Additional Requirements Incorporated by Reference

10.11 Limitations on Contributions. By executing this Agreement, Contractor acknowledges its obligations under section 1.126 of the City's Campaign and Governmental Conduct Code, which prohibits any person who contracts with, or is seeking a contract with, any department of the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, for a grant, loan or loan guarantee, or for a development agreement, from making any campaign contribution to (i) a City elected official if the contract must be approved by that official, a board on which that official serves, or the board of a state agency on which an appointee of that official serves, (ii) a candidate for that City elective office, or (iii) a committee controlled by such elected official or a candidate for that office, at any time from the submission of a proposal for the contract until the later of either the termination of negotiations for such contract or twelve months after the date the City approves the contract. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 10% in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. Contractor certifies that it has informed each such person of the limitation on contributions imposed by Section 1.126 by the time it submitted a proposal for the contract, and has provided the names of the persons required to be informed to the City department with whom it is contracting.

2.6 Article 10.17 Distribution of Beverages and Water, is herby amended in its entirety to read as follows:

Article 10 Additional Requirements Incorporated by Reference

10.17 Distribution of Beverages and Water.

10.17.1 Sugar-Sweetened Beverage Prohibition. Contractor agrees that it shall not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.17.2 **Packaged Water Prohibition.** Contractor agrees that it shall not sell, provide, or otherwise distribute Packaged Water, as defined by San Francisco Environment Code Chapter 24, as part of its performance of this Agreement.

2.7 Article 13.4 Management of City Data and Confidential Information, is herby amended in its entirety to read as follows:

Article 13 Data and Security

13.4 Management of City Data and Confidential Information

13.4.1 Access to City Data. City shall at all times have access to and control of all data given to Contractor by City in the performance of this Agreement ("City Data" or "Data"), and shall be able to retrieve it in a readable format, in electronic form and/or print, at any time, at no additional cost.

13.4.2 Use of City Data and Confidential Information. Contractor agrees to hold City's Confidential Information received from or created on behalf of the City in strictest confidence. Contractor shall not use or disclose City's Data or Confidential Information except as permitted or required by the Agreement or as otherwise authorized in writing by the City. Any work using, or sharing or storage of, City's Confidential Information outside the United States is subject to prior written authorization by the City. Access to City's Confidential Information must be strictly controlled and limited to Contractor's staff assigned to this project on a need-to-know basis only. Contractor is provided a limited non-exclusive license to use the City Data or Confidential Information solely for performing its obligations under the Agreement and not for Contractor's own purposes or later use. Nothing herein shall be construed to confer any license or right to the City Data or Confidential Information, by implication, estoppel or otherwise, under copyright or other intellectual property rights, to any third-party. Unauthorized use of City Data or Confidential Information by Contractor, subcontractors or other thirdparties is prohibited. For purpose of this requirement, the phrase "unauthorized use" means the data mining or processing of data, stored or transmitted by the service, for commercial purposes, advertising or advertising-related purposes, or for any purpose other than security or service delivery analysis that is not explicitly authorized.

13.4.3 Disposition of Confidential Information. Upon termination of Agreement or request of City, Contractor shall within forty-eight (48) hours return all Confidential Information which includes all original media. Once Contractor has received written confirmation from City that Confidential Information has been successfully transferred to City, Contractor shall within ten (10) business days purge all Confidential Information from its servers, any hosted environment Contractor has used in performance of this Agreement, work stations that were used to process the data or for production of the data, and any other work files stored by Contractor in whatever medium. Contractor shall provide City with written certification that such purge occurred within five (5) business days of the purge.

2.8 Add Article 13.5 Protected Health Information, to this Agreement as Amended to reads as follows:

Article 13 Data and Security

13.5 **Protected Health Information.** Contractor, all subcontractors, all agents and employees of Contractor and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all private health information disclosed to Contractor by City in the performance of this Agreement. Contractor agrees that any failure of Contractor to comply with the requirements of federal and/or state and/or local privacy laws shall be a material breach of the Contract. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of protected health information given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

The Appendices listed below are Amended as follows:

2.9 Delete Appendix A, and replace in its entirety with Appendix A to Agreement as amended. Dated: 02/01/2020.

2.10 Delete Appendix A-1, and replace in its entirety with Appendix A-1 to Agreement as amended. Dated: 02/01/2020.

2.11 Delete Appendix A-2, and replace in its entirety with Appendix A-2 to Agreement as amended. Dated: 02/01/2020.

2.12 Delete Appendix A-3, and replace in its entirety with Appendix A-3 to Agreement as amended. Dated: 02/01/2020.

2.13 Delete Appendix A-4, and replace in its entirety with Appendix A-4 to Agreement as amended. Dated: 02/01/2020.

2.14 Delete Appendix A-5, and replace in its entirety with Appendix A-5 to Agreement as amended. Dated: 02/01/2020.

2.15 Delete Appendix B, and replace in its entirety with Appendix B to Agreement as amended. Dated: 02/01/2020.

2.16 Delete Appendix B-1k, and replace in its entirety with Appendix B-1k to Agreement as amended. Dated: 02/01/2020.

2.17 Delete Appendix B-11, and replace in its entirety with Appendix B-11 to Agreement as amended. Dated: 02/01/2020.

2.18 Delete Appendix B-1m, and replace in its entirety with Appendix B-1m to Agreement as amended. Dated: 02/01/2020.

2.19 Delete Appendix B-1n, and replace in its entirety with Appendix B-1n to Agreement as amended. Dated: 02/01/2020.

2.20 Delete Appendix B-10, and replace in its entirety with Appendix B-10 to Agreement as amended. Dated: 02/01/2020.

2.21 Delete Appendix B-1p, and replace in its entirety with Appendix B-1p to Agreement as amended. Dated: 02/01/2020.

2.22 Delete Appendix B-1q, and replace in its entirety with Appendix B-1q to Agreement as amended. Dated: 02/01/2020.

2.23 Delete Appendix B-1r, and replace in its entirety with Appendix B-1r to Agreement as amended. Dated: 02/01/2020.

2.24 Delete Appendix B-1s, and replace in its entirety with Appendix B-1s to Agreement as amended. Dated: 02/01/2020.

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2.25 Delete Appendix B-1t, and replace in its entirety with Appendix B-1t to Agreement as amended. Dated: 02/01/2020.

2.26 Delete Appendix B-1u, and replace in its entirety with Appendix B-1u to Agreement as amended. Dated: 02/01/2020.

2.27 Delete Appendix B-1v, and replace in its entirety with Appendix B-1v to Agreement as amended, Dated: 02/01/2020.

2.28 Delete Appendix B-2d, and replace in its entirety with Appendix B-2d to Agreement as amended. Dated: 02/01/2020.

2.29 Delete Appendix B-2e, and replace in its entirety with Appendix B-2e to Agreement as amended, Dated: 02/01/2020.

2.30 Delete Appendix B-2f, and replace in its entirety with Appendix B-2f to Agreement as amended. Dated: 02/01/2020.

2.31 Delete Appendix B-2g, and replace in its entirety with Appendix B-2g to Agreement as amended. Dated; 02/01/2020.

2.32 Delete Appendix B-2h, and replace in its entirety with Appendix B-2h to Agreement as amended. Dated: 02/01/2020.

2.33 Delete Appendix B-2i, and replace in its entirety with Appendix B-2i to Agreement as amended. Dated: 02/01/2020.

2.34 Delete Appendix B-3d, and replace in its entirety with Appendix B-3d to Agreement as amended. Dated: 02/01/2020.

2.35 Delete Appendix B-3e, and replace in its entirety with Appendix B-3e to Agreement as amended. Dated: 02/01/2020.

2.36 Delete Appendix B-3f, and replace in its entirety with Appendix B-3f to Agreement as amended. Dated: 02/01/2020.

2.37 Delete Appendix B-3g, and replace in its entirety with Appendix B-3g to Agreement as amended. Dated: 02/01/2020.

2.38 Delete Appendix B-3h, and replace in its entirety with Appendix B-3h to Agreement as amended. Dated: 02/01/2020.

2.39 Delete Appendix B-3i, and replace in its entirety with Appendix B-3i to Agreement as amended. Dated: 02/01/2020.

2.40 Delete Appendix B-4a, and replace in its entirety with Appendix B-4a to Agreement as amended. Dated: 02/01/2020.

2.41 Add Appendix B-4b to Agreement as amended. Dated: 02/01/2020.

2.42 Add Appendix B-4c to Agreement as amended. Dated: 02/01/2020.

2.43 Add Appendix B-4d to Agreement as amended. Dated: 02/01/2020.

2.44 Add Appendix B-4e to Agreement as amended. Dated: 02/01/2020.

2.45 Add Appendix B-4f to Agreement as amended. Dated: 02/01/2020.

2.46 Add Appendix B-5a to Agreement as amended. Dated: 02/01/2020.

2.47 Add Appendix B-5b to Agreement as amended. Dated: 02/01/2020.

2.48 Add Appendix B-5c to Agreement as amended. Dated: 02/01/2020.

2.49 Add Appendix B-5d to Agreement as amended. Dated: 02/01/2020.

2.50 Add Appendix B-5e to Agreement as amended. Dated: 02/01/2020.

2.51 Add Appendix B-5f to Agreement as amended. Dated: 02/01/2020.

2.52 Delete Appendix F-1k, and replace in its entirety with Appendix F-1k to Agreement as amended. Dated: 02/01/2020.

2.53 Delete Appendix F-11, and replace in its entirety with Appendix F-11 to Agreement as amended. Dated: 02/01/2020.

2.54 Delete Appendix F-1m, and replace in its entirety with Appendix F-1m to Agreement as amended. Dated: 02/01/2020.

2.55 Delete Appendix F-1n, and replace in its entirety with Appendix F-1n to Agreement as amended. Dated: 02/01/2020.

2.56 Delete Appendix F-10, and replace in its entirety with Appendix F-10 to Agreement as amended. Dated: 02/01/2020.

2.57 Delete Appendix F-1p, and replace in its entirety with Appendix F-1p to Agreement as amended. Dated: 02/01/2020.

2.58 Delete Appendix F-1q, and replace in its entirety with Appendix F-1q to Agreement as amended. Dated: 02/01/2020.

2.59 Delete Appendix F-1r, and replace in its entirety with Appendix F-1r to Agreement as amended. Dated: 02/01/2020.
2.60 Delete Appendix F-1s, and replace in its entirety with Appendix F-1s to Agreement as amended. Dated: 02/01/2020.

2.61 Delete Appendix F-1t, and replace in its entirety with Appendix F-1t to Agreement as amended. Dated: 02/01/2020.

2.62 Delete Appendix F-1u, and replace in its entirety with Appendix F-1u to Agreement as amended. Dated: 02/01/2020.

2.63 Delete Appendix F-1v, and replace in its entirety with Appendix F-1v to Agreement as amended. Dated: 02/01/2020.

2.64 Delete Appendix F-2d, and replace in its entirety with Appendix F-2d to Agreement as amended. Dated: 02/01/2020.

2.65 Delete Appendix F-2e, and replace in its entirety with Appendix F-2e to Agreement as amended. Dated: 02/01/2020.

2.66 Delete Appendix F-2f, and replace in its entirety with Appendix F-2f to Agreement as amended. Dated: 02/01/2020.

2.67 Delete Appendix F-2g, and replace in its entirety with Appendix F-2g to Agreement as amended. Dated: 02/01/2020.

2.68 Delete Appendix F-2h, and replace in its entirety with Appendix F-2h to Agreement as amended. Dated: 02/01/2020.

2.69 Delete Appendix F-2i, and replace in its entirety with Appendix F-2i to Agreement as amended. Dated: 02/01/2020.

2.70 Delete Appendix F-3d, and replace in its entirety with Appendix F-3d to Agreement as amended. Dated: 02/01/2020.

2.71 Delete Appendix F-3e, and replace in its entirety with Appendix F-3e to Agreement as amended. Dated: 02/01/2020.

2.72 Delete Appendix F-3f, and replace in its entirety with Appendix F-3f to Agreement as amended. Dated: 02/01/2020.

2.73 Delete Appendix F-3g, and replace in its entirety with Appendix F-3g to Agreement as amended. Dated: 02/01/2020.

2.74 Delete Appendix F-3h, and replace in its entirety with Appendix F-3h to Agreement as amended. Dated: 02/01/2020.

2.75 Delete Appendix F-3i, and replace in its entirety with Appendix F-3i to Agreement as amended. Dated: 02/01/2020.

2.76 Delete Appendix F-4a, and replace in its entirety with Appendix F-4a to Agreement as amended. Dated: 02/01/2020.

2.77 Add Appendix F-4b to Agreement as amended. Dated: 02/01/2020.

2.78 Add Appendix F-4c to Agreement as amended. Dated: 02/01/2020.

2.79 Add Appendix F-4d to Agreement as amended. Dated: 02/01/2020.

2.80 Add Appendix F-4e to Agreement as amended. Dated: 02/01/2020.

2.81 Add Appendix F-4f to Agreement as amended. Dated: 02/01/2020.

2.82 Add Appendix F-5a to Agreement as amended. Dated: 02/01/2020.

2.83 Add Appendix F-5b to Agreement as amended. Dated: 02/01/2020.

Contract ID# 1000002634

2.84 Add Appendix F-5c to Agreement as amended. Dated: 02/01/2020.

2.85 Add Appendix F-5d to Agreement as amended. Dated: 02/01/2020.

2.86 Add Appendix F-5e to Agreement as amended. Dated: 02/01/2020.

2.87 Add Appendix F-5f to Agreement as amended. Dated: 02/01/2020.

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.

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. Reports:

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. Possession of Licenses/Permits:

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. Grievance Procedure:

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 for its employees, agents and subcontractors 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 its employees, agents, subcontractors 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 its employees, agents and subcontractors, 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. Under-Utilization Reports:

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
Appendix A-4	HIV Syringe Access and Disposal Services – Syringe Sweeps Program
Appendix A-5	HIV Syringe Access and Disposal Services – Syringe Sweeps War Memorial

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

Service Provider(s): Fiscal Agency: Total Contract Amount: Funding Source: Program Name: System of Care: Program Code:	San Francisco AIDS Foundation San Francisco AIDS Foundation \$39,009,850 HPS General Fund/CDC Syringe Access and Disposal Services HIV Prevention Services (HPS) N/A									
Provider Address: Provider Phone: Contact Person:	1035 Market Street, Suite 400 - SF CA 94103 415-487-3000 Richard Hill, Director of Government Contracts Dire	ct Phone Numb	er: 415-487-8042	Email: rhill(@sfaf.org			Provi	der Fax: 415-487	-3094
RFP#:	3-2016									
Appendix A:					Appendix A-1		Access Services			
Appendix B:		B-1 GF	B-1a GF	B-1b	B-1c	B-1d GF	B-1e	B-1f GF	B-1g	B-1h
Funding Source		\$1,863,232	\$196,713	CDC \$5,000	GF \$1,909,813	\$201,631	CDC \$5,000	\$1,956,679	GF \$206,672	CDC \$5,000
Funding Amount: Unspent Amount:		\$1,003,232	\$190,113	\$5,000	\$1,909,013	\$201,031	-\$3,036	-\$19,386	\$200,072	-\$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
r unung r unn	the second se	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
Appendix B:		B-1i	B-1j	B-1k	B-11	B-1m	B-1n	B-10	B-tp	B-1g
Funding Source		GF	GF	GF	GF	GF	GF	GF	GF	GF
Funding Amount:		\$2,016,280	\$212,872	\$2,066,687	\$218,194	\$2,066,687	\$218,194	\$2,066,687	\$218,194	\$2,066,687
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
	and the state of some in the	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	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

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

lumber of NOC:	and the set of a second set of the	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
opendix B:		B-1r	B-1s	B-1t	B-1u	B-1v				
inding Source	9	GF	GF	GF	GF	GF				
nding Amount: Inding Term:		\$218,194 7.1.23 - 6.30.24	\$2,066,687 7.1.24 - 6.30.25	\$218,194 7.1.24 - 6.30.25	\$2,066,687 7.1.25 - 6.30.26	\$218,194 7.1.25 - 6.30.26		_		
inding form		UOS	UOS	UOS	UOS	UOS				
mber 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	-		1	
	Community-Based Sweeps Events	N/A	N/A	N/A	N/A	N/A			1	
umber of NOC:		NOC	NOC	NOC	NOC	NOC				
	Syringe Access & Disposal Services Hrs.	N/A	54,300	N/A	54,300	N/A				P
	Syringe Access, Disposal Coordination & Bulk Purchasing	N/A	N/A	N/A	N/A	N/A		- E 1		
	Citywide Syringe Sweeps	N/A	N/A	N/A	N/A	N/A		- 1		
	Community-Based Sweeps Events	N/A	N/A	N/A	N/A	N/A				
efinition and # of	A Unit of Service (UOS) is equivalent to 1 hour of se	envice/activity or 1	month of Program	Coordination						-
IOS:					and and a state of the state of					Marana
arget Population:	Intravenous drug users (IDUs) throughout San Fran	and the second se								
arget ropulation.	Intravenous unug users (ibios) unoughout carrinan	01000.								
Description of Services:	Provides access to sterile syringes and safer injection population. SFAF will serve as the lead agency for									
1.	Union.			Namanan	annanananan					
ppendix A:					Annendix A.	2 Homeless Yo	uth Alliance			
			B-2a	B-2b	B-2c	B-2d	B-2e	B-2f	B-2g	B-2h
P. D		B-2								
ppendix B:		B-2 GF	the second s	GF	and the second se	GF	GF	GF	GF	
opendix B: Inding Source		GF	GF	GF \$164,794	GF	GF \$173.982	GF \$173.982	GF \$173.982	GF \$173.982	GF
opendix B: Inding Source Inding Amount:			the second s	GF \$164,794 7.1.18-6.30.19	and the second se	GF \$173,982 7.1.20 - 6.30.21	GF \$173,982 7.1.21 - 6.30.22	GF \$173,982 7.1.22 - 6.30.23	GF \$173,982 7.1.23 - 6.30.24	
opendix B: Inding Source Inding Amount: Inding Term:		GF \$156,854	GF \$160,775	\$164,794	GF \$169,738	\$173,982	\$173,982	\$173,982	\$173,982	GF \$173,982
opendix B: Inding Source Inding Amount: Inding Term:	HYA Wrap Around & Disposal Services	GF \$156,854 7.1.16-6.30.17	GF \$160,775 7.1.17-6.30.18	\$164,794 7.1.18-6.30.19	GF \$169,738 7.1.19 - 6.30.20	\$173,982 7.1.20 - 6.30.21	\$173,982 7.1.21 - 6.30.22	\$173,982 7.1.22 - 6.30.23	\$173,982 7.1.23 - 6.30.24	GF \$173,982 7.1.24 - 6.30
ppendix B: unding Source unding Amount: unding Term: umber of UOS: umber of	HYA Wrap Around & Disposal Services	GF \$156,854 7.1.16-6.30.17 UOS	GF \$160,775 7.1.17-6.30.18 UOS	\$164,794 7.1.18-6.30.19 UOS	GF \$169,738 7.1.19 - 6.30.20 UOS	\$173,982 7.1.20 - 6.30.21 UOS	\$173,982 7.1.21 - 6.30.22 UOS	\$173,982 7.1.22 - 6.30.23 UOS	\$173,982 7.1.23 - 6.30.24 UOS	GF \$173,982 7.1.24 - 6.30 UOS
Appendix 8: Funding Source Funding Amount: Funding Term: Number of UOS: Number of	HYA Wrap Around & Disposal Services	GF \$156,854 7.1.16-6.30.17 UOS 12	GF \$160,775 7.1.17-6.30.18 UOS 12	\$164,794 7.1.18-6.30.19 UOS 12	GF \$169,738 7.1.19 - 6.30.20 UOS 12	\$173,982 7.1.20 - 6.30.21 UOS 12	\$173,982 7.1.21 - 6.30.22 UOS 12	\$173,982 7.1.22 - 6.30.23 UOS 12	\$173,982 7.1.23 - 6.30.24 UOS 12	GF \$173,98 7.1.24 - 6.3 UOS 12

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

Appendix B:	1	B-2i						1		
Funding Source		GF								
Funding Amount:		\$173,982								
Funding Term:		7.1.25 - 6.30.26								
Number of UOS:	the second se	UOS				1				
	HYA Wrap Around & Disposal Services	12								1
Number of UDC/NOC:		NOC		1.2.2.2				2		
	HYA Wrap Around & Disposal Services	N/A								1.
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 month	n of activities associate	ed with the admini	istration of these t	funds.					
Target Population:	Young adults aged 13-29 living on the stress in	the Haight and female	identified IDUs in	the Mission						
Tarnet Population:	agent for HYA. SFAF's agreement with HYA is	an and the state of the state of the	and for excelore allow	a seal and dear						
	Funds are to be used for various personnel and	operating expenses a	nd for syringe dis	posal services.	Annandia A 3	Ath Change House	Baduatian Ct			
	Funds are to be used for various personnel and	operating expenses a	nd for syringe dis	posal services.	Appendix A-3	6th Street Harm	Reduction Ct.			
	Funds are to be used for various personnel and	B-3	nd for syringe dis	posal services.	Appendix A-3 B-3c	6th Street Harm B-3d	Reduction Ct. B-3e	B-3f	B-3g	B-3h
Appendix A:	Funds are to be used for various personnel and			B-3b GF	B-3c GF	B-3d GF	B-3e GF	GF	GF	GF
Appendix A: Appendix B: Funding Source Funding Amount:	Funds are to be used for various personnel and	B-3	B-3a	B-3b	B-3c	B-3d	B-3e			
Appendix A: Appendix B: Funding Source Funding Amount: Unspent Amount:	Funds are to be used for various personnel and	B-3 GF	B-3a GF	B-3b GF \$1,000,000	B-3c GF	B-3d GF	B-3e GF	GF	GF	GF
Appendix A: Appendix B: Funding Source Funding Amount:	Funds are to be used for various personnel and	B-3 GF \$344,000	B-3a GF \$884,000	B-3b GF \$1,000,000 -\$111,396	B-3c GF \$1,030,000	B-3d GF \$1,055,750	B-3e GF \$1,055,750	GF \$1,055,750	GF \$1,055,750	GF \$1,055,750
Appendix A: Appendix B: Funding Source Funding Amount: Unspent Amount:	Funds are to be used for various personnel and	B-3 GF \$344,000 11.1.16-6.30.17	B-3a GF \$884,000 7.1.17-6.30.18	B-3b GF \$1,000,000 -\$111,396 7.1.18-6.30.19	B-3c GF \$1,030,000 7.1.19 - 6.30.20	B-3d GF \$1,055,750 7.1.20 - 6.30.21	B-3e GF \$1,055,750 7.1.21 - 6.30.22	GF \$1,055,750 7.1.22 - 6.30.23	GF \$1,055,750 7.1.23 - 6.30.24	GF \$1,055,750 7.1.24 - 6.30,25
Appendix A: Appendix B: Funding Source Funding Amount: Unspent Amount: Funding Term:	Funds are to be used for various personnel and	B-3 GF \$344,000 11.1.16-6.30.17 UOS	B-3a GF \$884,000 7.1.17-6.30.18 UOS	B-3b GF \$1,000,000 -\$111,396 7.1.18-6.30.19 UOS	B-3c GF \$1,030,000 7.1.19 - 6.30.20 UOS	B-3d GF \$1,055,750 7.1.20 - 6.30.21 UOS	B-3e GF \$1,055,750 7.1.21 - 6.30.22 UOS	GF \$1,055,750 7.1.22 - 6.30.23 UO\$	GF \$1,055,750 7.1.23 - 6.30.24 UOS	GF \$1,055,750 7.1.24 - 6.30.25 UOS
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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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efinition and # of DS: A Unit of Service (UOS) is equivalent to 1 Hour of Syringe Disposal Services. A Unit of Services (UOS) is equivalent to 1 Hour of Syringe Disposal Services. A Unit of Services are provided to individuals through these services, however, intravenous drug users (IDUs) throughout San Francisco are the targeted community. Reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.	oppendix A: oppendix B: unding Source unding Amount: unding Term: umber of UOS: umber of NOC:	 syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC 	B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368	GF \$791,813 7.1.25 - 6.30.26 UOS 4,368			
OS: A Unit of Service (UOS) is equivalent to 1 Hour of Syringe Disposal Services. arget Population: No Direct Services are provided to individuals through these services, however, intravenous drug users (IDUs) throughout San Francisco are the targeted community. ascription of Reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.	opendix B: Inding Source Inding Amount: Inding Term:	syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours	B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC	GF \$791,813 7.1.25 - 6.30.26 UOS 4,368 NOC			
OS: A Unit of Service (UOS) is equivalent to 1 Hour of Syringe Disposal Services. arget Population: No Direct Services are provided to individuals through these services, however, intravenous drug users (IDUs) throughout San Francisco are the targeted community. ascription of Reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.	opendix B: Inding Source Inding Amount: Inding Term:	syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours	B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC	GF \$791,813 7.1.25 - 6.30.26 UOS 4,368 NOC			
Inget Population: No Direct Services are provided to individuals through these services, however, intravenous drug users (IDUs) throughout San Francisco are the targeted community. Reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.	opendix B: Inding Source Inding Amount: Inding Term: Imber of UOS: Imber of NOC:	syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours	B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC	GF \$791,813 7.1.25 - 6.30.26 UOS 4,368 NOC			
escription of Reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.	opendix B: unding Source unding Amount: unding Term: umber of UOS: umber of NOC: effinition and # of	 syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours Syringe Disposal Service Hours 	B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC N/A	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC N/A	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC	GF \$791,813 7.1.25 - 6.30.26 UOS 4,368 NOC			
escription of Reduce new HIV infections by providing syringe access and disposal services to people who inject drugs (PWID) in San Francisco.	opendix B: inding Source inding Amount: inding Term: imber of UOS: imber of NOC: offinition and # of	 syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours Syringe Disposal Service Hours 	B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC N/A	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC N/A	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC	GF \$791,813 7.1.25 - 6.30.26 UOS 4,368 NOC			
	opendix B: unding Source unding Amount: unding Term: umber of UOS: umber of NOC: efinition and # of OS:	 syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours Syringe Disposal Service Hours A Unit of Service (UOS) is equivalent to 1 Hour 	B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC N/A	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC N/A	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC N/A	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC N/A	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC N/A	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC N/A	GF \$791,813 7.1.25 - 6.30,26 UOS 4,368 NOC N/A			
irvices:	opendix B: unding Source unding Amount: unding Term: umber of UOS: umber of NOC: efinition and # of OS: arget Population:	 syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours Syringe Disposal Service Hours A Unit of Service (UOS) is equivalent to 1 Hour No Direct Services are provided to individuals to 	W medications. B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC N/A r of Syringe Disposal S	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC N/A ervices.	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC N/A	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC N/A DUs) throughout	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC N/A San Francisco ar	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC N/A	GF \$791,813 7.1.25 - 6.30,26 UOS 4,368 NOC N/A			
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	opendix B: unding Source unding Amount: unding Term: umber of UOS: umber of NOC: effinition and # of OS: arget Population:	 syringe access services, including access to s food and snacks; a breakfast club adherence program; secure lockers for clients to store HIV and HC Syringe Disposal Service Hours Syringe Disposal Service Hours A Unit of Service (UOS) is equivalent to 1 Hour No Direct Services are provided to individuals to 	W medications. B-4 GF \$772,500 7.1.19-6.30.20 UOS 4,368 NOC N/A r of Syringe Disposal S	B-4a GF \$791,813 7.1.20-6.30.21 UOS 4,368 NOC N/A ervices.	B-4b GF \$791,813 7.1.21 - 6.30.22 UOS 4,368 NOC N/A	Appendix A- B-4c GF \$791,813 7.1.22 - 6.30.23 UOS 4,368 NOC N/A DUs) throughout	B-4d GF \$791,813 7.1.23 - 6.30.24 UOS 4,368 NOC N/A San Francisco ar	B-4e GF \$791,813 7.1.24 - 6.30.25 UOS 4,368 NOC N/A	GF \$791,813 7.1.25 - 6.30,26 UOS 4,368 NOC N/A			

Appendix A:				Appendix	A-5 Syringe St	weeps Program	War Memorial F	rogram		
Appendix B:		B-5	B-5a	B-5b	B-5c	B-5d	B-5e	B-5f		· · · · ·
unding Source		WO	WO	WO	WO	WO	WO	WO		
inding Amount:		\$6,937	\$6,937	\$6,937	\$6,937	\$6,937	\$6,937	\$6,937		1
inding Term:		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	7.1.25 - 6,30.26		
	and the second	UOS	UOS	UOS	UOS	UOS	UOS	UOS		1
mber of UOS:	Syringe Disposal Service Weeks	52	52	52	52	52	52	52		
umber of NOC:		NOC	NOC	NOC	NOC	NOC	NOC	NOC	1	
	Syringe Disposal Service Weeks	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
efinition and # of OS:	A Unit of Service (UOS) is equivalent to 1 We	ek of Syringe Disposal	Services,							
arget Population:	No Direct Services are provided to individuals War Memorial.	through these services	, however, intrave	enous drug users (DUs) are the targ	geted community.	This program wi	Il focus on clean-u	up activities at t	he San Franci
escription of	Reduce new HIV infections by providing syrin	ge access and disposal	services to peopl	e who inject drugs	(PWID) in San F	rancisco.				

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 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-1b) 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 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	Units of Service (UOS)	Number of Contacts (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	4,302	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	3,710	N/A
Community-Based Sweeps Events (B-1f) 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-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 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
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 ~12.63 clients per hour * 4,302 hours = 54,300 NOC	4,302	54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1i) 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-1i) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	3,710	N/A
Total Services Delivered	8,024	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	Units of Service (UOS)	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	4,302	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	3,710	N/A
Total Services Delivered	8,024	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	4,302	54,300
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	12	N/A
Citywide Syringe Sweeps (B-1m) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	3,710	N/A
Total Services Delivered	8,024	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1n) 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 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 ~12.63 clients per hour * 4,302 hours = 54,300 NOC	4,302	54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-10) 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-10) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	3,710	N/A
Total Services Delivered	8,024	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1p) 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 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	4,302	54,300

Total Services Delivered	8,024	54,300
One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	3,710	N/A
Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS Citywide Syringe Sweeps (B-1q)	12	N/A
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1q) One UOS = one month of Syringe Access and Disposal Coordination & Bulk	10	27/4

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1r) 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 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 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	3,710	N/A
Total Services Delivered	8,024	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 UOS	12	N/A
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 UOS ~12.63 clients per hour * 4,302 hours = 54,300 NOC	4,302	54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1u) 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-1u) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	3,710	N/A
Total Services Delivered	8,024	54,300

Syringe Access, Disposal Coordination & Bulk Purchasing (B-1v) 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

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.

 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.
- 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:
 - 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:
 - 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.

 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

- 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.
- 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 Strategy and Evaluation, 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 Strategy and Evaluation 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.

10. Subcontractors & Consultants:

- A. SFAF is responsible for the performance of its subcontractors and consultants this Agreement.
- B. SFAF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFAF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFAF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Bloodborne Pathogen and Aerosol Transmissible Diseases. SFAF must demonstrate appropriate policies and procedures for reporting such workrelated injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' compensation laws and regulations.
- D. SFAF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- E. SFAF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- F. Any such subcontract agreements will be kept on file with SFAF, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFAF, and SFAF acknowledges that it must comply with all requirements of the Agreements, regardless of whether there are listed again here in this Appendix.

Appendix A-2 Appendix Term: 7/1/2016 – 6/30/2026 Funding Sources: General Fund

1. Identifiers:

Program Name: San Francisco AIDS Foundation: HIV Syringe Access and Disposal 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.or

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 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-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 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-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 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-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	12	N/A
One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses	12	2.64
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 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

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

9. Required Language: None required.

10. Subcontractors & Consultants:

- A. SFAF is responsible for the performance of its subcontractors and consultants this Agreement.
- B. SFAF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFAF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFAF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Bloodborne Pathogen and Aerosol Transmissible Diseases. SFAF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to

the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' compensation laws and regulations.

- D. SFAF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- E. SFAF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- F. Any such subcontract agreements will be kept on file with SFAF, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFAF, and SFAF acknowledges that it must comply with all requirements of the Agreements, regardless of whether there are listed again here in this Appendix.

Contractor: San Francisco AIDS Foundation Program Name: HIV Syringe Access and Disposal Services – Harm Reduction Center Appendix A-3 Appendix Term: 11/01/2016 – 06/30/2026 Funding Sources: General Fund

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

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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	1,724	28,628
7/1/17-12/31/17: 30 hrs/wk * 26 wks = 780 UOS		
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)		
One UOS = one hour of Lounge services	.1,275	7 650
1/1/18-6/30/18: ~49 hrs/wk * 26 weeks = 1,275 UOS		7,650
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 Contacts (NOC)
Syringe Access Services		
One UOS = one hour of Syringe Access services 36.3 hrs/wk * 52 wks = 1,888 UOS	1,888	31,341
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	2.010	10.04.6
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	2,550	8,000
One UOS = one hour of Lounge services		
49.03 hrs/wk * 52 weeks = 2,550 UOS		
approx. 3 contacts per hour * 2,550 hours = 8,000 NOC		
Total Services Delivered	4,438	39,341

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		
16.6 contacts per hour * 1,888 hours = 31,341 NOC		
Lounge Services		
One UOS = one hour of Lounge services	2,550	8,000
49.03 hrs/wk * 52 weeks = 2,550 UOS		
approx. 3 contacts per hour * 2,550 hours = 8,000 NOC		
Total Services Delivered	4,438	39,341

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

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		8,000
One UOS = one hour of Lounge services	2,550	
49.03 hrs/wk * 52 weeks = 2,550 UOS		
approx. 3 contacts per hour * 2,550 hours = 8,000 NOC		
Total Services Delivered	4,438	39,341

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		1.0.1
One UOS = one hour of Lounge services	2,550	8,000
49.03 hrs/wk * 52 weeks = 2,550 UOS		
approx. 3 contacts per hour * 2,550 hours = 8,000 NOC		
Total Services Delivered	4,438	39,341

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		31,341
One UOS = one hour of Syringe Access services	1,888	
36.3 hrs/wk * 52 wks = 1,888 UOS		
16.6 contacts per hour * 1,888 hours = 31,341 NOC		
Lounge Services		8,000
One UOS = one hour of Lounge services	2,550	
49.03 hrs/wk * 52 weeks = 2,550 UOS		
approx. 3 contacts per hour * 2,550 hours = 8,000 NOC		
Total Services Delivered	4,438	39,341

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	1,888	31,341
One UOS = one hour of Syringe Access services 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 49.03 hrs/wk * 52 weeks = 2,550 UOS approx. 3 contacts per hour * 2,550 hours = 8,000 NOC	2,550	8,000
Total Services Delivered	4,438	39,341

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	1,888	31,341
One UOS = one hour of Syringe Access services 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 49.03 hrs/wk * 52 weeks = 2,550 UOS approx. 3 contacts per hour * 2,550 hours = 8,000 NOC	2,550	8,000
Total Services Delivered	4,438	39,341

Contractor: San Francisco AIDS Foundation Program Name: HIV Syringe Access and Disposal Services – Harm Reduction Center Appendix A-3 Appendix Term: 11/01/2016 – 06/30/2026 Funding Sources: General Fund

*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 elub 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

- 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.
- 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.

10. Subcontractors & Consultants:

- A. SFAF is responsible for the performance of its subcontractors and consultants this Agreement.
- B. SFAF acknowledges that it must comply with Article 5, Insurance and Indemnity, of the Agreement, in relation to its subcontractors and consultants. All SFAF staff, as well as its consultants and subcontractors, must have the appropriate insurance coverage as outlined in Article 5 of the Agreement.
- C. SFAF assumes all liability for any and all work-related injuries/illness, including but not limited to infectious exposures such as Bloodborne Pathogen and Aerosol Transmissible Diseases. SFAF must demonstrate appropriate policies and procedures for reporting such work-related injuries/illnesses to the City and to any state or federal regulatory agencies and providing appropriate post-exposure medical management as required by the State Workers' compensation laws and regulations.
- D. SFAF acknowledges that it will provide to City a list of any subcontractors and consultants in relation to which it seeks the City's approval. No such subcontractors or consultants may be used to provide services under this Agreement absent such consent pursuant to Section 4.3.1 of the Agreement.
- E. SFAF will develop and execute subcontract agreements with all approved subcontractors providing services or support outlined in this project. Such subcontracts shall comply with all requirements of the Agreement.
- F. Any such subcontract agreements will be kept on file with SFAF, with a copy sent the Department of Public Health's Program Director associated with this engagement.
- G. This list of requirements is provided to highlight for SFAF, and SFAF acknowledges that it must comply with all requirements of the Agreements, regardless of whether there are listed again here in this Appendix.
| Contractor Name: San Francisco AIDS Foundation | Appendix A-4 |
|--|---|
| Program Name: HIV Syringe Access and Disposal Services –
Syringe Sweeps Program | Appendix Term: 07/1/2019 – 6/30/2026 |
| | Funding Source: GF |

1. Identifiers:

San Francisco AIDS Foundation – HIV Syringe Access and Disposal Services – Syringe Sweeps Program

1035 Market Street, Suite 400, San Francisco, CA 94103 (415) 487-3000/fax (415) 487-3094 Website Address: www.sfaf.org

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

2. Nature of Document:

Original

d I

Contract Amendment

RPB

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:

N/A – no direct services are provided to individuals on this contract.

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

Year One: July 1, 2019 - June 30, 2020 (General Fund) (B-4)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Hours One UOS = one hour of Syringe Disposal Services 364 hours of syringe disposal services/month * 12 months = 4,368 UOS.	4,368
Total Services Delivered	4,368

Year Two: July 1, 2020 - June 30, 2021 (General Fund) (B-4a)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Hours One UOS = one hour of Syringe Disposal Services 364 hours of syringe disposal services/month * 12 months = 4,368 UOS.	4,368
Total Services Delivered	4,368

Contractor Name: San Francisco AIDS Foundation	Appendix A-4
Program Name: HIV Syringe Access and Disposal Services – Syringe Sweeps Program	Appendix Term: 07/1/2019 – 6/30/2026
	Funding Source: GF

Year Three: July 1, 2021 - June 30, 2022 (General Fund) (B-4b)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Hours One UOS = one hour of Syringe Disposal Services 364 hours of syringe disposal services/month * 12 months = 4,368 UOS.	4,368
Total Services Delivered	4,368

Year Four: July 1, 2022 - June 30, 2023 (General Fund) (B-4c)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Hours One UOS = one hour of Syringe Disposal Services 364 hours of syringe disposal services/month * 12 months = 4,368 UOS.	4,368
Total Services Delivered	4,368

Year Five: July 1, 2023 - June 30, 2024 (General Fund) (B-4d)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Hours One UOS = one hour of Syringe Disposal Services 364 hours of syringe disposal services/month * 12 months = 4,368 UOS.	4,368
Total Services Delivered	4,368

Year Six: July 1, 2024 - June 30, 2025 (General Fund) (B-4e)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Hours One UOS = one hour of Syringe Disposal Services 364 hours of syringe disposal services/month * 12 months = 4,368 UOS.	4,368
Total Services Delivered	4,368

Contractor Name: San Francisco AIDS Foundation	Appendix A-4
Program Name: HIV Syringe Access and Disposal Services – Syringe Sweeps Program	Appendix Term: 07/1/2019 – 6/30/2026
	Funding Source: GF

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Hours One UOS = one hour of Syringe Disposal Services 364 hours of syringe disposal services/month * 12 months = 4,368 UOS.	4,368
Total Services Delivered	4,368

6. Methodology:

- A. Citywide Syringe Clean-up: A coordinated effort of staff members 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. Clean-up activities must be complementary to other disposal efforts provided by the applicant and in collaboration with the SFDPH Rapid Response Clean Team. Requirements include:
 - Development of clean-up schedules, focusing on hot spots, i.e., locations where improperly discarded syringes historically have appeared frequently.
 - Ability to respond to DPH requests to increase clean-ups in specific areas as needed. Clean-up schedules may be adjusted to meet the needs of the community.
 - Ability to incorporate other new methods of responding to clean-up requests in real-time such as cell phone, text, mobile phone application.
 - Providing education to community about safe disposal options. All Clean-up Team 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.
- B. Data Collection and Reporting: Syringe Clean-up Data is collected monthly including the route cleaned and the number of needles collected. Clean-up Team members track: # of Syringes collected, # of sharps containers distributed, and the disposal clean-up route.
- C. Syringe Disposal Evaluation Activities: With our external contractors, SFAF has built an app for the purpose of tracking our disposal efforts through our Syringe Clean-up program. The app enables Clean-up staff to enter the number of syringes collected and disposed of during their shifts. As the app has geo-location features, we are able to report to SFDPH the total number of syringes collected as well as coverage areas and hot spots for given time periods. We are also created opportunities for expansion to our SAC partners, DPH partners, and volunteers as the app is used. Phase two development will

Contractor Name: San Francisco AIDS Foundation	Appendix A-4
Program Name: HIV Syringe Access and Disposal Services – Syringe Sweeps Program	Appendix Term: 07/1/2019 – 6/30/2026
	Funding Source: GF

focus on a feature to enable individuals from the community to let our teams know about syringes they have identified and Clean-up staff will be dispatched in a timely manner to complete sweeps of the identified areas.

7. Objectives and Measurements:

By the end of each program year, the Syringe Clean-up Team will collect at least 120,000 syringes annually as documented by disposal clean-up logs.

8. Continuous Quality Improvement (CQI):

Describe the program's CQI activities to enhance, improve, and monitor the quality of services delivered, including data collection and reporting. The CQI section must include a guarantee of compliance with Health Commission, Local, State, Federal, and/or Funding Source policies and requirements - such as, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction.

SFAF complies 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 Syringe Clean-up Team members comply with the CHEP "Syringe Access and Disposal Program Policies and Guidelines" located here: <u>http://harmreduction.org/wp-content/uploads/2012/01/SPPPGVersion2-3-1-2011.pdf.</u>

9. Required Language: None required.

Contractor Name: San Francisco AIDS Foundation	Appendix A-5
Program Name: HIV Syringe Access and Disposal Services – Syringe Sweeps – War Memorial	Appendix Term: 07/1/2019 – 6/30/2026
	Funding Source: Work Order

1. Identifiers:

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

Website Address: www.sfaf.org

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

2. Nature of Document:

Original

Contract Amendment

RPB

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:

N/A - no direct services are provided to individuals on this contract.

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

Year One: July 1, 2019 - June 30, 2020 (B-5)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Weeks One UOS = one week of Syringe Disposal Services 52 weeks/year = 52 UOS.	52
Total Services Delivered	52

Year Two: July 1, 2020 - June 30, 2021 (B-5a)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Weeks One UOS = one week of Syringe Disposal Services 52 weeks/year = 52 UOS.	52
Total Services Delivered	52

Contractor Name: San Francisco AIDS Foundation	Appendix A-5
Program Name: HIV Syringe Access and Disposal Services – Syringe Sweeps – War Memorial	Appendix Term: 07/1/2019 – 6/30/2026
	Funding Source: Work Order

Year Three: July 1, 2021 - June 30, 2022 (B-5b)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Weeks One UOS = one week of Syringe Disposal Services 52 weeks/year = 52 UOS.	52
Total Services Delivered	52

Year Four: July 1, 2022 - June 30, 2023 (B-5c)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Weeks One UOS = one week of Syringe Disposal Services 52 weeks/year = 52 UOS.	52
Total Services Delivered	52

Year Five: July 1, 2023 - June 30, 2024 (B-5d)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Weeks One UOS = one week of Syringe Disposal Services 52 weeks/year = 52 UOS.	52
Total Services Delivered	52

Year Six: July 1, 2024 - June 30, 2025 (B-5e)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Weeks One UOS = one week of Syringe Disposal Services 52 weeks/year = 52 UOS.	52
Total Services Delivered	52

Contract ID# 1000002634

Contractor Name: San Francisco AIDS Foundation	Appendix A-5
Program Name: HIV Syringe Access and Disposal Services – Syringe Sweeps – War Memorial	Appendix Term: 07/1/2019 – 6/30/2026
	Funding Source: Work Order

Year Seven: July 1, 2025 - June 30, 2026 (B-5f)

Units of Service (UOS) Description	Units of Service (UOS)
Syringe Disposal Service Weeks One UOS = one week of Syringe Disposal Services 52 weeks/year = 52 UOS.	52
Total Services Delivered	52

6. Methodology:

This appendix funds syringe clean-up activities at the San Francisco War Memorial Veterans Building. For complete description of syringe clean-up activities, see Appendix A-4.

7. Objectives and Measurements:

See Appendix A-4.

8. Continuous Quality Improvement (CQI):

See Appendix A-4.

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

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 Appendix B-2, B-2a, B-2b, B-2c. B-2d. B-2e, B-2f, B-2g, B-2h, B-2i Appendix B-3, B-3a, B-3b, B-3c, B-3d, B-3e B-3f, B-3g, B-3h, B-3i Appendix B-4, B-4a, B-4b, B-4c, B-4d, B-4e, B-4f

Appendix B-5, B-5a, B-5b, B-5c, B-5d, B-5e, B-5f

Budget Summary

HIV Syringe Access and Disposal Services

HIV Syringe Access and Disposal Services – Homeless Youth Alliance

HIV Syringe Access and Disposal Services – Harm Reduction Center

HIV Syringe Access and Disposal – Syringe Sweeps Program

HIV Syringe Access and Disposal – Syringe Sweeps War Memorial

B. Contractor understands that, of the maximum dollar obligation listed in section 3.3.1 of this Agreement, \$3,105,621 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	
Revision to Program Budgets #3	07/01/19 - 06/30/20	General Fund	\$750,000	
Revision to Program Budgets #3	07/01/20 - 06/30/21	General Fund	\$750,000	
Revision to Program Budgets #4	07/01/2019 - 06/30/2020	General Fund	\$9,783	
Revision to Program Budgets #4	07/01/2019 - 06/30/2020	General Fund	\$1,034	
Revision to Program Budgets #4	07/01/2019 - 06/30/2020	General Fund	\$824	
Revision to Program Budgets #4	07/01/2019 - 06/30/2020	General Fund	\$30,000	
Revision to Program Budgets #4	07/01/2019 - 06/30/2020	General Fund	\$22,500	
Revision to Program Budgets #4	07/01/2019 - 06/30/2020	Work Order	\$6,937	
Amendment #3	07/01/2018 - 06/30/2019	General Fund - Unspent	-\$111,396	
Amendment #3	07/01/2018 - 06/30/2019	General Fund - Unspent	-\$19,386	
Amendment #3	07/01/2020 - 06/30/2021	General Fund	\$60,190	
Amendment #3	07/01/2020 - 06/30/2021	General Fund	\$6,356	
Amendment #3	07/01/2020 - 06/30/2021	General Fund	\$5,068	
Amendment #3	07/01/2020 - 06/30/2021	General Fund	\$55,750	
Amendment #3	07/01/2020 - 06/30/2021	General Fund	\$41,813	
Amendment #3	07/01/2020 - 06/30/2021	Work Order	\$6,937	
Amendment #3	07/01/2021 - 06/30/2022	General Fund	\$60,190	
Amendment #3	07/01/2021 - 06/30/2022	General Fund	\$6,356	
Amendment #3	07/01/2021 - 06/30/2022	General Fund	\$5,068	
Amendment #3	07/01/2021 - 06/30/2022	General Fund	\$55,750	
Amendment #3	07/01/2021 - 06/30/2022	General Fund	\$791,813	
Amendment #3	07/01/2021 - 06/30/2022	Work Order	\$6,937	
Amendment #3	07/01/2022 - 06/30/2023	General Fund	\$60,190	
Amendment #3	07/01/2022 - 06/30/2023	General Fund	\$6,356	
Amendment #3	07/01/2022 - 06/30/2023	General Fund	\$5,068	
Amendment #3	07/01/2022 - 06/30/2023	General Fund	\$55,750	
Amendment #3	07/01/2022 - 06/30/2023	General Fund	\$791,813	
Amendment #3	07/01/2022 - 06/30/2023	Work Order	\$6,937	
Amendment #3	07/01/2023 - 06/30/2024	General Fund	\$60,190	
Amendment #3	07/01/2023 - 06/30/2024	General Fund	\$6,356	
Amendment #3	07/01/2023 - 06/30/2024	General Fund	\$5,068	
Amendment #3	07/01/2023 - 06/30/2024	General Fund	\$55,750	
Amendment #3	07/01/2023 - 06/30/2024	General Fund	\$791,813	

Amendment #3	07/01/2023 - 06/30/2024	Work Order	\$6,937
Amendment #3	07/01/2024 - 06/30/2025	General Fund	\$60,190
Amendment #3	07/01/2024 - 06/30/2025	General Fund	\$6,356
Amendment #3	07/01/2024 - 06/30/2025	General Fund	\$5,068
Amendment #3	07/01/2024 - 06/30/2025	General Fund	\$55,750
Amendment #3	07/01/2024 - 06/30/2025	General Fund	\$791,813
Amendment #3	07/01/2024 - 06/30/2025	Work Order	\$6,937
Amendment #3	07/01/2025 - 06/30/2026	General Fund	\$60,190
Amendment #3	07/01/2025 - 06/30/2026	General Fund	\$6,356
Amendment #3	07/01/2025 - 06/30/2026	General Fund	\$5,068
Amendment #3	07/01/2025 - 06/30/2026	General Fund	\$55,750
Amendment #3	07/01/2025 - 06/30/2026	General Fund	\$791,813
Amendment #3	07/01/2025 - 06/30/2026	Work Order	\$6,937
		Total Award	\$39,009850
	Contingency (FY	20/21 thru FY25/26)	\$3,105,621
	(This equals	the total NTE) Total	\$42,115,471

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.

	1000002634	rtment of Pub				1	Appendix #	В	Page #	5
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		1.0			Funding No	tification Date	1/29/2020
Contractor Name (may be same as above)	San Francisc	o AIDS Found	lation							FN#9
Program/Provider Name				HIV Syringe	Access & Dispo	osal 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 5
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		10	1.00						1.000	1
Salaries	\$ 271,038	\$ -	\$ -	\$.	\$ 174,282	\$ 464,500	\$ -	\$ -	\$ -	\$ 909,820
Employee Benefits			\$ -	\$ -	\$ 43,569	\$ 116,125	\$ -	\$ -	\$ -	\$ 227,454
Total Personnel Expenses	\$ 338,798	\$ -	\$ -	\$ -	\$ 217,851	\$ 580,625	\$ -	\$ -	\$ -	\$ 1,137,274
Operating Expense	\$ 1,355,049			\$ 142,595		\$ 1,155,569		\$ 4,545	\$ 146,160	\$ 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	\$ 4,402,744
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	1. M		28.00	1000		1000 C 1000			A. 100. 100 At 1	A Lands L
DPH Funding Sources (select from drop-down list)	1 m		2					1.1.1		
HPS COUNTY HPS GF	1,863,232					1,909,813		1		3,773,045
HPS COUNTY GF Children's Fund		196,713					201,631			398,344
HPS FED CDC - PD90, CFDA #93.940	1		5,000					5,000		10,000
HPS COUNTY HPS GF			1	156,854					160,775	317,629
HHS COUNTY GF					344,000			1		344,000
Unspent Funds								(3,036)		(3,036
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	4,839,982
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursemen (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursemen (CR)	Cost Reimbursemen (CR)	Cost Reimbursement (CR)	
Prepared By	Lorn Zonath	-		Phone #		415-487-3055				The second se

DPH 1: Department of Public Health Contract	ct Budget Summary by Program
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DPH Section	10.001							
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Agency/Organization Name					1	Fu	nding Notification Date	1/29/2020
Contractor Name (may be same as above)	San Francisco	AIDS Foundation	nc					FN#
Program/Provider Name		HIVS	Syringe Access	& Disposal Ser	vices		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 6	Pages 5 & 6
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	1	1.1.12.1.1.1
EXPENSES		a started	122				A REAL PROPERTY AND	San area
Salaries	\$ 588,550	\$ 488,174	\$ -	\$ -	\$ -	\$ 671,050	\$ 1,747,774	\$ 2,657,594
Employee Benefits	\$ 147,138	\$ 122,044	\$ -	s -	\$ -	\$ 167,763	\$ 436,945	\$ 664,399
Total Personnel Expenses	\$ 735,688	\$ 610,218	\$ -	\$ -	\$ -	\$ 838,813	\$ 2,184,719	\$ 3,321,993
Operating Expense	\$ 67,948	\$ 1,168,581	\$ 187,884	\$ 4,545	\$ 149,814	\$ 70,278	\$ 1,649,050	\$ 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								
DPH Funding Sources (select from drop-down list)		- 3.1.J3.7					and the second s	
HPS COUNTY HPS GF		1,956,679	1		No. of the last	100 million (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	1.1			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		(19,386)		(5,000)		(111,396)	(135,782)	(138,818
Total DPH Revenues	884,000	1,937,293	206,672		164,794	888,604	- 4,081,363	8,921,345
Total Revenues (DPH and Non-DPH)	884,000	1,937,293	206,672	0	164,794	888,604	- 4,081,363	8,921,345
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		

DPH 1: Department of Public Health Contract Budget Summary by Program

DPH 1: Department of Public Health	Contract Budget Summary by Program
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CID#	1000002634								Appendix #	B			Page #	7
DPH Section	HPS													-
Check one: / Original X AMD	1 IRPB						Cor	ntract Term (7/	1/16-6/30/26)			the second second	Fiscal Year(s)	16-26
Agency/Organization Name	San Francisco	AIDS Founda	tion									Funding No	tification Date	1/29/2020
Contractor Name (may be same as above)	San Francisco	AIDS Founda	ation											FN#9
Program/Provider Name				HIV S	vringe Access	& Disposal S	ervices	1	1. C. M. C. C. C.	The second se		12.2.2.2.2.1	TOTALS -	TOTALS -
Appendix Number	A-1/B-11	A-1/B-1j	A-2/B-2c	A-3/B-3c	A-4/B-4	A-5/B-5	A-1/B-1k	A-1/8-11	A-2/B-2d	A-3/8-3d	sec.	A-5/B-5a	Page 7	Pages 5-7
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.19-5.30.20	7.1.19-6,30.20	7.1.19-8.30.20	7,1,19-6.30,20	7.1.19-6.30.20	7.1.19-6.30.20	7.1.20-6.30.21	7.1.20-8.30.21	7.1.20-6.30.21	7.1.20-8.30.21	7.1.20-6.30.21	7.1.20-8.30.21		
EXPENSES						1	1		1		1		1000	
Salaries	\$ 496,916	\$ -	\$ -	\$ 680,792	\$ 470,605	\$ 5,878	\$ 521,453	\$ -	\$ -	\$ 699,520	\$ 483,524	\$ 5,878	\$ 3,364,566	\$ 6,022,160
Employee Benefits	\$ 124,229		\$ -		\$ 141,182		\$ 130,363	5 -	\$ -	\$ 174,880	\$ 145,057	\$.	\$ 885,909	\$ 1,550,308
Total Personnel Expenses			\$ -		\$ 611,787		\$ 651,816		\$ -	\$ 874,400			\$ 4,250,475	\$ 7,572.468
Operating Expense							\$ 1,226,990		\$ 158,166					\$ 8,348,658
Subtotal Direct Costs	\$ 1,832,982	\$ 193,520	\$ 154,308	\$ 936,364	\$ 671,739	\$ 6,032	\$1,878,806	\$ 198,358	\$ 158,166	\$ 959,773	\$ 688,533	\$ 6,032	\$ 7,684,613	\$ 15,921,126
Indirect Cost Amount		\$ 19,352	\$ 15,430		\$ 100,761		\$ 187,881	\$ 19,836	\$ 15,816	\$ 95,977	\$ 103,280	\$ 905	\$ 837,077	\$ 1,660,727
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	15.0%	15.0%	10.0%	10.0%	10.0%	10.0%	15.0%	15.0%	1	
Total Expenses	\$ 2,016,280	\$ 212,872	\$ 169,738	\$1,030,000	\$ 772,500	\$ 6,937	\$ 2,066,687	\$ 218,194	\$ 173,982	\$1,055,750	\$ 791,813	\$ 6,937	\$ 8,521,690	\$ 17,581,853
REVENUES & FUNDING SOURCES			1 30 m 1		100 Mar 100	2000		Same Local	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		102 M			
DPH Funding Sources (select from drop-down list)							in the best							Contraction of the
HPS COUNTY HPS GF	2,016,280					-	2,066,687						4,082,967	9,812,691
HPS COUNTY GF Children's Fund		212,872						218,194					431,066	1,036,082
HPS FED CDC - PD90, CFDA #93.940				3					and the second second					15,000
HPS COUNTY HPS GF			169,738						173,982				343,720	826,143
HHS COUNTY GF				1,030,000	772,500			A		1,055,750	791,813		3,650,063	5,878,063
HHS COUNTY GF			1					A				Contraction of the local distribution of the		(138,818
Work Order				1.		6,937				in the second	and the second sec	6,937	13,874	13,874
Total DPH Revenues	2,016,280	212,872	169,738	1,030,000	772,500	6,937	2,066,687	218,194	173,982	1,055,750	791,813	6,937	8,521,690	17,443,035
Total Revenues (DPH and Non-DPH)	2,016,280	212,872	169,738	1,030,000	772,500	6,937	2,066,687	218,194	173,982	1,055,750	791,813	6,937	8,521,690	17,443,035
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cosl Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursameni (CR)	1.1	
Prepared By	Larry Zapatka	Ú.		Phone #				415-487-3055						

CID#	1000002634								Appendix #	B			Page #	8
DPH Section									The partons in				1.030.0	
Check one: Original X AMD	1 1RPB						Co	ntract Term (7/	1/16-6/30/26)			-	Fiscal Year(s)	16-26
Agency/Ordanization Name	San Francisco	AIDS Founda	tion	_					and a state of the second s			Funding No	otification Date	1/29/2020
Contractor Name (may be same as above)	San Francisco	AIDS Founda	ation											FN#S
Program/Provider Name				HIVS	Swinge Acces	s & Disposal S	iervices		2.7				TOTALS -	TOTALS -
Appendix Number	A-1/B-1m	A-1/B-1n	A-2/B-2e	A-3/B-3e	248-40	A-5/B-5b	A-178-10	A-1/B-1p	A-2/B-2f	A-3/B-3f	Aut Finde	A-5/B-5c	Page 8	Pages 5 - 8
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.21-8.30.22	7.1.21-6.30.22	7.1.21-0.30.22	7.1.21-8.30.22	7.1.21-8.30.22	7.1.21-8.30.22	7.1.22-6.30.23	7.1.22-6.30.23	7.1.22-8.30.23	7.1.22-6.30.23	7.1.22-8.30.23	7.1.22-6.30.23		
EXPENSES	1		(Black State)				1,40,.014	The second second	1		Carlos - Sector	1	10.000	La montre la
Salaries	\$ 521,453	\$.	5 .	\$ 699,520	\$ 483,524	\$ 5,878	\$ 521,453	5 .	\$ -	\$ 699,520	\$ 483,524	\$ 5,878	\$ 3,420,750	\$ 9,442,910
Employee Benefits	\$ 130,363	\$ -	\$.	\$ 174,880	\$ 145,057	5 -	\$ 130,363	\$ -	\$ -	\$ 174,880	\$ 145,057	5 -	\$ 900,600	\$ 2,450,908
Total Personnel Expenses	\$ 651,816	5 -	\$ -	\$ 874,400	\$ 628,581	\$ 5,878	\$ 651,816	\$ -	\$ -	\$ 874,400	\$ 628,581	\$ 5,878	\$ 4,321,350	\$ 11,893,818
Operating Expense	\$ 1,226,990	\$ 198,358	\$ 158,166	\$ 85,373	\$ 59,952	\$ 154	\$ 1,226,990	5 198,358	\$ 158,166	\$ 85,373	\$ 59,952	\$ 154	\$ 3,457,986	\$ 11,806,644
Subtotal Direct Costs	\$ 1,878,806	\$ 198,358	\$ 158,166	\$ 959,773	\$ 688,533	\$ 6,032	\$ 1,878,806	\$ 198,358	\$ 158,166	\$ 959,773	\$ 688,533	\$ 6,032	\$ 7,779,336	\$ 23,700,462
Indirect Cost Amount	\$ 187,881	\$ 19,835	\$ 15,816	\$ 95,977	\$ 103,280	\$ 905	\$ 187,881	\$ 19,836	\$ 15,816	\$ 95,977	\$ 103,280	\$ 905	\$ 847,390	\$ 2,508,117
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	15.0%	15.0%	10.0%	10.0%	10.0%	10.0%	15.0%	15.0%		
Total Expenses	\$ 2,066,687	\$ 218,194	\$ 173,982	\$1,055,750	\$ 791,813	\$ 6,937	\$ 2,066,687	\$ 218,194	\$ 173,982	\$ 1,055,750	\$ 791,813	\$ 6,937	\$ 8,626,726	\$ 26,208,579
REVENUES & FUNDING SOURCES			and the second	-									10.00 million and	2
DPH Funding Sources (select from drop-down list)	1. Inc. 1. 1997		-		1		and the second							A 10 10
HPS COUNTY HPS GF	2.066,687						2,066,687	1			-		4,133,374	13,946,065
HPS COUNTY GF Children's Fund		218,194					1.000	218,194					436,388	1,472,470
HPS FED CDC - PD90, CFDA #93.940			Lan and and					1					1	15,000
HPS COUNTY HPS GF			173,982		1 million				173,982	1 Internet			347,964	1,174,107
HHS COUNTY GF			10 million (100)	1,055,750	791.813					1,055,750	791,813		3,695,126	9,573,189
Unspent Funds					1									138,810
Work Order					1000	6,937	1 December 1					6,937	13,874	27,748
Total DPH Revenues	2,066,687	218,194	173,982	1,055,750	791,813	6,937	2,066,687	218,194	173,982	1,055,750	791,813	6,937	8,626,726	26,069,761
Total Revenues (DPH and Non-DPH)	2,066,687	218,194	173,982	1,055,750	791,813	6,937	2,066,687	218,194	173,982	1,055,750	791,813	6,937	8,626,726	26,069,761
Payment Method	Cost Reimbursomont (CR)	Cost Rembursement (CR)	Cost Reimbursement (CR)	Cosi Raimbursement (CR)	Cost Reimbursement (CR)	Cost Reinbursement (CR)	Cost Reimbursement (CR)	Cost Reinbursement (CR)	Cest Reimbursament (CR)	Cost Reinbursement (CR)	Cost Reimburgement (CR)	Cost Reimbursement (CR)		
Prepared By	Larry Zanatka			Phone #				415-487-3055						

			DPH 1: Dep	partment of P	ublic Health	Contract Bud	get Summary	by Program	-				100 million (1997)	
CID#	1000002634								Appendix #	В			Page #	9
DPH Section	HPS								A. George					
Check one:	RPB						Cor	ntract Term (7/	1/16-6/30/26				Fiscal Year(s)	16-26
Agency/Organization Name												Funding No	tification Date	1/29/2020
Contractor Name (may be same as above)	San Francisco	AIDS Founda	ition											FN#S
Program/Provider Name			1.1.12 T.m.	HIV S	vringe Access	& Disposal S	ervices			 X-100 		1.1.0.1.1.1.1	TOTALS -	TOTALS -
Appendix Number	A-1/8-19	A-1/B-1r	A-2/B-2g	A-3/B-3g	A-VB-4d	A-5/B-5d	A-1/B-1s	A-1/8-1t	A-2/B-2h	A-3/B-3h	Antonio	A-5/B-5e	Page 9	Pages 5 - 9
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.23-6.30.24	7.1.23-6.30.24	7.1.23-8.30.24	7.1.23-6.30.24	7.1.23-6.30.24	7.1.23-6.30.24	7.1.24-8.30.25	7.1.24-8.30.25	7.1.24-6.30.25	7.1.24-6.30.25	7.1.23-8.30.24	7.1.23-6.30.24	1.	
EXPENSES	A CONTRACTOR	1.000	i le contra de la			to Children and						a de la contra de	11	
Salaries	\$ 521,453	5 -	5 -	\$ 699,520	\$ 483,524	\$ 5,878	\$ 521,453	\$ -	5 -	\$ 699,520	\$ 483,524	\$ 5,878	\$ 3,420,750	\$ 12,863,660
Employee Benefits	\$ 130,363	\$ -	\$ -	\$ 174,880	\$ 145,057	\$ -	\$ 130,363	5 -	\$.	\$ 174,880	\$ 145,057	5 -	\$ 900,600	\$ 3,351,508
Total Personnel Expenses	\$ 651,816	\$ -	\$ -	\$ 874,400	\$ 628,581				5 .		\$ 628,581			\$ 16,215,168
Operating Expense				\$ 85,373	\$ 59,952		\$1,226,990		and the second se	\$ 85,373				\$ 15,264,630
Subtotal Direct Costs	\$ 1,878,806	\$ 198,358	\$ 158,166			\$ 6,032	\$1,878,806	\$ 198,358	\$ 158,166	\$ 959,773	\$ 688,533	\$ 6,032	\$ 7,779,336	\$ 31,479,798
Indirect Cost Amount			\$ 15,816	\$ 95,977			\$ 187,881		\$ 15,816		\$ 103,280		\$ 847,390	\$ 3,355,507
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	15.0%	15.0%	10.0%	10.0%	10.0%	10.0%	15.0%	15.0%		in the state of
Total Expenses	\$ 2,066,687	\$ 218,194	\$ 173,982	\$1,055,750	\$ 791,813	\$ 6,937	\$2,066,687	\$ 218,194	\$ 173,982	\$1,055,750	\$ 791,813	\$ 6,937	\$ 8,626,726	\$ 34,835,305
REVENUES & FUNDING SOURCES	1		and the second second											
DPH Funding Sources (select from drop-down list)												-		
HPS COUNTY HPS GF	2,066,687	1		1			2,066,687						4,133,374	18,079,439
HPS COUNTY GF Children's Fund		218,194	1	1				218,194	-				436.388	1,908,858
HPS FED CDC - PD90, CFDA #93.940					-	-								15,000
HPS COUNTY HPS GF			173,982						173,982				347,964	1,522,071
HHS COUNTY GF				1,055,750	791,813					1,055,750	791,813		3,695,126	13,268,315
Unspent Funds				-						1	-			138,818
Work Order					-	6,937			100 000			6,937	13,874	41,622
Total DPH Revenues	2,066,687	218,194	173,982	1,055,750	791,813	6,937	2,066,687	218,194	173,982	1,055,750	791,813	6,937	8,626,726	34,696,487
Total Revenues (DPH and Non-DPH)	2,066,687	218,194	173,982	1,055,750	791,813	6,937	2,066,687	218,194	173,982	1,055,750	791,813	6,937	8,626,726	34,696,487
Payment Method	Cost Reinbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)									
Prepared By	Lerry Zapatka			Phone #				415-487-3055						1

	1000002634	12.00					pendix #	В	Page #	10
DPH Section	HPS									
Check one: [] Original [X] AMD	[] RPB		(C)		Contrac	t Term (7/1/16-	6/30/26)		Fiscal Year(s)	16-26
Agency/Organization Name	San Francisco	AIDS Founda	ition				F	unding N	otification Date	1/29/2020
Contractor Name (may be same as above)	San Francisco	AIDS Founda	tion							FN#
Program/Provider Name	a second second		HIV Syring	e Access & Di	sposal Service	S		1. The second	TOTALS -	TOTALS -
Appendix Number	A-1/B-1u	A-1/8-1v	A-2/B-2i	A-3/B-3i	A-4/8-41	A-5/B-5f			Page 10	Page 5 - 10
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	7.1.25-6.30.26	7.1.25-6.30.26				
EXPENSES						1 million and the second		1	15	the second second
Salaries	\$ 521,453	\$ -	\$ -	\$ 699,520	\$ 483,524	\$ 5,878			\$ 1,710,375	\$ 14,574,035
Employee Benefits	\$ 130,363	\$ -	\$ -	\$ 174,880	\$ 145,057	\$ -			\$ 450,300	\$ 3,801,808
Total Personnel Expenses	\$ 651,816	\$ -	\$ -	\$ 874,400	\$ 628,581	\$ 5,878	\$ -	\$ -	\$ 2,160,675	\$ 18,375,843
Operating Expense	\$ 1,226,990	\$ 198,358	\$ 158,166	\$ 85,373	\$ 59,952	\$ 154			\$ 1,728,993	\$ 16,993,623
Subtotal Direct Costs	\$ 1,878,806	\$ 198,358	\$ 158,166	\$ 959,773	\$ 688,533	\$ 6,032	\$ -	\$ -	\$ 3,889,668	\$ 35,369,466
Indirect Cost Amount	\$ 187,881	\$ 19,836	\$ 15,816	\$ 95,977	\$ 103,280	\$ 905	1.000		\$ 423,695	\$ 3,779,202
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	15.0%	15.0%	0.0%	0.0%	1	A press works
Total Expenses	\$ 2,066,687	\$ 218,194	\$ 173,982	\$ 1,055,750	\$ 791,813	\$ 6,937	\$ -	\$ -	\$ 4,313,363	\$ 39,148,668
REVENUES & FUNDING SOURCES										1000000
DPH Funding Sources (select from drop-down list)								-		
HPS COUNTY HPS GF	2,066,687	100 Aug 11			1.0	1000	1.1	1.0.0	2,066,687	20,146,126
HPS COUNTY GF Children's Fund		218,194			1		C	1.	218,194	2,127,052
HPS FED CDC - PD90, CFDA #93.940		1		1000	1		1	1		15,000
HPS COUNTY HPS GF			173,982	1 C 1 C 1 C 1			1.1.1.1	1.1.1.1.1	173,982	1,696,053
HHS COUNTY GF				1,055,750	791,813		1.0.00		1,847,563	15,115,878
Unspent Funds					10000		1			(138,818
Work Order			1.1000	a state of the	10.00	6,937			6,937	48,559
Total DPH Revenues	2,066,687	218,194	173,982	1,055,750	791,813	6,937	-		4,313,363	39,009,850
Total Revenues (DPH and Non-DPH)	2,066,687	218,194	173,982	1,055,750	791,813	6,937	1.61	11.2.1	4,313,363	39,009,850
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)			-	
Prepared By	Larry Zapatka	CT		Phone #		415-487-3055	0			(C

DPH 1: Department of Public Health Contract Budget Summary by Program

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-1k 1 20-21 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES			1
Personnel Expenses		Syringe Acces (Hrs., City-wid Sweep	le Syringe	Syringe Access Coordination Purchas	& Bulk	-		
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,700	100%		0%		1.000	5,700
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,308	100%		0%			5,308
Data Manager	0.05	4,815	100%	· · · · · · · · · · · · · · · · · · ·	0%			4,815
SAS Director	0.75	69,254	89%	8,559	11%			77,813
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%	1.000		63,705
Logistics Associates	2.00	28,256	25%	84,770	75%	Y	÷	113,026
SSE/Vol Coordinator	0.75	53,944	100%		0%			53,944
Health Educator	3.40	190,142		-	0%			190,142
			0%		0%	-		-
Total FTE & Total Salaries	8.10	379,445	73%	142,008	27%			521,453
Fringe Benefits	25.00%	94,861	73%	35,502	27%			130,363
Total Personnel Expenses		474,306	73%	177,510	27%			651,816
Operating Expanses		Expenditure	%	Expenditure	%	xpenditure	4	Contract Total
Operating Expenses			1.0			I		95,666
		85,166	89%	10,500	11%			
Total Occupancy		85,166 144,875	89% 29%	10,500 354,695	11% 71%	-		
Total Occupancy Total Materials and Supplies		144,875	29%	354,695	71%			499,570
Total General Operating		the second se	29% 61%		and the second se			499,570 10,916
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:		144,875 6,659	29%	354,695	71% 39%			499,570
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		144,875 6,659 620,838 857,538	29% 61% 100% 70%	354,695 4,257 	71% 39% 0% 30%			499,570 10,916 620,838 1,226,990
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	144,875 6,659 620,838 857,538 1,331,844	29% 61% 100%	354,695 4,257	71% 39% 0%			499,570 10,916 620,838 1,226,990 1,878,806
Total Occupancy Total Materials and Supplies Total General Operating	10.00%	144,875 6,659 620,838 857,538	29% 61% 100% 70%	354,695 4,257 - - 369,452 546,962	71% 39% 0% 30% 29%			499,570 10,916 620,838 1,226,990
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		144,875 6,659 620,838 857,538 1,331,844 133,185	29% 61% 100% 70% 71% 71%	354,695 4,257 	71% 39% 0% 30% 29% 29%			499,570 10,916 620,838 1,226,990 1,878,806 187,881 2,066,687
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	144,875 6,659 620,838 857,538 1,331,844 133,185 1,465,029	29% 61% 100% 70% 71% 71%	354,695 4,257 369,452 546,962 54,696 601,658	71% 39% 0% 30% 29% 29%			499,570 10,916 620,838 1,226,990 1,878,806 187,881

BUDGET JUSTIFICATION

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

\$140,000.00

Appendix #: B-1k Fiscal Year: 20-21

7,000

\$

1a) SALARIES

Stan FUSICION 1. Flograms & Op	erations Directo	r	and the second se	
with all activities	and that all requir station and refiner	ed data is reported; wor nent; coordinates currer	that assures monitoring too ks with partner agencies and and emerging health infor surance procedures.	d program staf
Masters in Public Minimum gualifications: equivalent comb			g and public health experien	ce or an
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$114,000.00	0.05	12	1	\$ 5,70
Staff Position 2: Director, Behavio	and the second se		the implementation, manag	CONTRACTOR OF
evaluation of the continuum that is	program structure responsive to the	e and provision of profes	ssional oversight to create a l-being needs, including HIV	service deliver
evaluation of the continuum that is Brief description of job duties: and bisexual mer Masters degree i	program structure responsive to the n. n psychology, soc pacity, especially i	e and provision of profes a current health and well cial sciences, business of	ssional oversight to create a	service deliver needs of gay ars experience
evaluation of the continuum that is Brief description of job duties: and bisexual mer Masters degree i a supervisory cap	program structure responsive to the n. n psychology, soc pacity, especially i	e and provision of profes a current health and well cial sciences, business of	ssional oversight to create a l-being needs, including HIV r related discipline; three yea	service delive needs of gay ars experienc

Staff Position 3: Dir. Gov't Grant	S				
Maintains operati	ional and statistic uirements, produ	al reporting mechanisms ces routine and ad hoc	ement and contract related a s in accordance with contract reporting as needed, and en juality assurance activities.	t and	
	and evaluation;		perience in health services writing; government contract		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	,	Total
\$106.165.00	0.05	12	1	\$	5,308

0.05

12

1

Staff Position 4: Data Manager				
summaries to ena and public health	sure foundation p impact. Respon	rograms are rigorously a sible for review, abstrac	on, quality assurance, report evaluated for process and he tion from client records and co o meet programmatic and co	alth outcomes database entry
Bachelor's degree Minimum qualifications: years equivalent			ensuring quality for large clie	nt data sets or t
			ensuring quality for large clie Annualized (if less than 12 months):	nt data sets or

Staff Position 5: SAS Director				
departmental stra effective partners and training full-ti exchange supplie Brief description of job duties: waste removal co Three years expe program manage	ategic goals in alig hips with other H me and temporar s. Organizes rer ompany, prepare arience working w ment, supervision	gnment with agency and IV/AIDS and Harm Red ry staff in appropriate ex noval of biohazard wast reports for compliance a lith injection and drug us n experience preferred.	exchange sites. Develops a d city objectives. Builds and r uction agencies. Responsible change protocol. Responsible from sites and coordinates and maintain safety protocols sers required. Associates De Must hold HIV test counselo	naintains e for scheduling le for purchasin removal with s. gree with
Minimum qualifications: be willing to obtain	in certification on	the job.		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$103,750.00	0.75	12	1	\$ 77,813

Staff Position 6: Logistics Inve	entory Mrg				-
Responsible f	or purchasing excha	nge supplies. Organize	porary staff in appropriate exi s removal of biohazard wast re reports for compliance and	e from	sites and
homeless pop interviewing a	ulations required. A nd strong understan on preferred. Exper	ssociates degree prefer ding of harm reduction p rience using a pallet jack	ple who use drugs, highly ma red, experience using motiva practices and principles, expe s, hand truck, and carts and u	ational	e doing
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	1	Total
\$63,705.00	1.00	12			

	te - Staffs exchar	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

	ange coord - Resp		aining, and supervising seco	
develop training r	materials, includin		curriculum for these trainings evant to MSM-IDU speed use e sites.	
High school diplo		ry; valid California driver n drug users and with v	's license and excellent drivi olunteers.	ng record. 1 yea
			Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total

Staff Position 9: Health Educator					
testing and linkag	e to care; harm r	eduction counseling) the	revention; vein care; referral rough mobile and encampmo iding crisis intervention supp	ent ou	
High school diplo		y; valid California driver n drug users and with v	's license and excellent drivin olunteers.	ng rea	ord. 1 yea
Willinnun guaincauons.					
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total

Staff Position 10:				
Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
			0	\$

Total FTE:

8.10

521,453

Total Salaries: \$

1b) EMPLOYEE FRINGE BENEFITS:

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

Cost	
\$	39,891.00
\$	9,960.00
\$	53,866.00
S	2,712.00
\$	21,223.00
\$	2,711.00
Total Fringe Benefit:	130,363
	/ \$ t \$ s s s f s s s

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 651,816

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 1,945,960 syringes.	\$0.15	291,894
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.75	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 \$7.40/bundle.	\$7.40	296
Group Food	Additional food for increased groups \$718.14/wk x 50 wks.	718.14/wk	35,907
¢	Total	Materials & Supplies:	499.570

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
	- Li	Total General Operating:	10,916

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,etc	\$104,014yr	104,014
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$108,258/yr	108,258
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$236,684/yr	236,684
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$171,882/vr	171,882
	Total Cons	sultants/Subcontractors:	620,838

TOTAL OPERATING EXPENSES: 1,226,990

TOTAL DIRECT COSTS: 1,878,806

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%	Amount
of total direct costs.	187,881
Indirect Rate:	10.00%

TOTAL INDIRECT COSTS: 187,881

TOTAL EXPENSES: 2,066,687

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 1

B-11 1 20-21 1/29/2020

Funding Not

	· · · · · · · · · · · · · · · · · · ·	S	ERVICE M	ODES	1	_	
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	153,358	100%		0%	-	0%	153,358
Total General Operating	12,000	100%	1.0	0%	1	0%	12,000
Total Operating Expenses	198,358	100%		0%	· · · ·	0%	198,358
Total Direct Expenses	198,358	100%	-	0%	-	0%	198,358
Indirect Expenses 10.00%	19,836	100%	1	0%		0%	19,836
TOTAL EXPENSES	218,194	100%	-	0%	-	0%	218,194
Units of Service (UOS) per Service Mode	12	-	- 0	-	- 1	-	12
Cost Per Unit of Service by Service Mode		and the second division of the second divisio	1.044			1	1
(NOC) per Service Mode			1			-	N/A

UOS COST ALLOCATION BY SERVICE MODE

BUDGET JUSTIFICATION

Contractor Name San Francisco 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

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	398,920 syringes @ \$.15 each.	\$0.15	59,838
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.	\$293.33/mo	3,520
Condoms & Lube	16,666 Lube packets @ \$.75 each.	\$0.75	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:	153,358

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	I General Operating:	12,000

TOTAL OPERATING EXPENSES: 198,358

TOTAL DIRECT COSTS: 198,358

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.		19,836
AND ALL ALL ALL ALL ALL ALL ALL ALL ALL AL		

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,836

TOTAL EXPENSES: 218,194

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-1m 1 21-22 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

	k			SERVICE MO	DES			
Personnel Expenses		Syringe Acces (Hrs., City-wid Sweep	e Syringe	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,700	100%		0%			5,700
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0,05	5,308	100%		0%			5,308
Data Manager	0.05	4,815	100%		0%	· · · · · · · · ·		4,815
SAS Director	0.75	69,254	89%	8,559	11%	1		77,813
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%		_	63,705
Logistics Associates	2.00	28,256	25%	84,770	75%	122		113,026
SSE/Vol Coordinator	0.75	53,944	100%		0%			53,944
Health Educator	3.40	190,142		-	0%	1		190,142
		· · · · · · · · · · · · · · · · · · ·				1.000		-
			0%	÷	0%	1		1
Total FTE & Total Salaries	8.10	379,445	73%	142,008	27%			521,453
Fringe Benefits	25.00%	94,861	73%	35,502	27%	1		130,363
Total Personnel Expenses		474,306	73%	177,510	27%			651,816
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	3	Contract Total
Cherating Expenses		and the second se	0001		11%			95,666
		85,166	89%	10.500 1				
Total Occupancy		85,166 144,875	89% 29%	10,500 354,695	71%	· · ·	1.0	499.570
Total Occupancy Total Materials and Supplies		85,166 144,875 6,659	29%	354,695 4,257	71% 39%	-		499.570
Total Occupancy		144,875 6,659	29% 61%	354,695	39%			10,916
Total Occupancy Total Materials and Supplies Total General Operating		144,875	29%	354,695				
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		144,875 6,659 620,838 857,538	29% 61% 100% 70%	354,695 4,257 369,452	39% 0% 30%			10,916 620,838 1,226,990
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	144,875 6,659 620,838 857,538 1,331,844	29% 61% 100% 70% 71%	354,695 4,257	39% 0%			10,916 620,838 1,226,990 1,878,806
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses	10.00%	144,875 6,659 620,838 857,538	29% 61% 100% 70%	354,695 4,257 369,452 546,962	39% 0% 30% 29%			10,916 620,838 1,226,990
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses		144,875 6,659 620,838 857,538 1,331,844 133,185	29% 61% 100% 70% 71% 71%	354,695 4,257 369,452 546,962 54,696	39% 0% 30% 29% 29%			10,916 620,838 1,226,990 1,878,806 187,881
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	rice Mode	144,875 6,659 620,838 857,538 1,331,844 133,185 1,465,029	29% 61% 100% 70% 71% 71%	354,695 4,257 369,452 546,962 54,696 601,658	39% 0% 30% 29% 29%			10,916 620,838 1,226,990 1,878,806 187,881 2,066,687

1.

BUDGET JUSTIFICATION

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

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

1a) SALARIES

Staff Position 1: Programs & O				
with all activities	and that all require ptation and refiner	red data is reported; wor ment; coordinates currer	that assures monitoring too rks with partner agencies an int and emerging health inform surance procedures.	d program staff
Masters in Publ Minimum qualifications: equivalent com		2. 영상, 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 3 . 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	ig and public health experier	ce or an
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$114,000.00	0.05	12	1	\$ 5,70
evaluation of the continuum that Brief description of job duties: and bisexual me Masters degree	oral Health Svc - F e program structure s responsive to the m. in psychology, soo	Responsible for ensuring e and provision of profe e current health and wel cial sciences, business c	the implementation, managesional oversight to create a l-being needs, including HIV or related discipline; three ye	service deliver needs of gay ars experience
Director, Behav evaluation of th continuum that Brief description of job duties: and bisexual mo Masters degree	oral Health Svc - F e program structur s responsive to the n. in psychology, soo pacity, especially	Responsible for ensuring e and provision of profe e current health and wel cial sciences, business o in HIV prevention and do	ssional oversight to create a I-being needs, including HIV or related discipline; three ye emonstrated program manag	service deliver needs of gay ars experience
Director, Behav evaluation of th continuum that Brief description of job duties: and bisexual mo Masters degree a supervisory ca	oral Health Svc - F e program structur s responsive to the n. in psychology, soo pacity, especially	Responsible for ensuring e and provision of profe e current health and wel cial sciences, business o in HIV prevention and do	ssional oversight to create a I-being needs, including HIV or related discipline; three ye	service deliver needs of gay ars experience
Director, Behav evaluation of th continuum that Brief description of job duties: and bisexual mo Masters degree a supervisory ca Minimum qualifications: program develo	oral Health Svc - F e program structure s responsive to the n. in psychology, so pacity, especially pment experience	Responsible for ensuring e and provision of profe e current health and wel cial sciences, business o in HIV prevention and do	ssional oversight to create a I-being needs, including HIV or related discipline; three ye emonstrated program manage Annualized (if less than	service deliver needs of gay ars experience gement and
Director, Behav evaluation of the continuum that Brief description of job duties: and bisexual mo Masters degree a supervisory ca Minimum qualifications: program develo Annual Salary:	oral Health Svc - F e program structur s responsive to the in psychology, so pacity, especially pment experience x FTE: 0.05	Responsible for ensuring e and provision of profe e current health and wel cial sciences, business o in HIV prevention and d x Months per Year:	ssional oversight to create a I-being needs, including HIV or related discipline; three ye emonstrated program manage Annualized (if less than	service deliver needs of gay ars experience gement and Total

 planning, design, and evaluation; grant development and writing; government contracts management

 Minimum qualifications: and negotiations.
 Annualized (if less than

 Annual Salary:
 x FTE:
 x Months per Year:
 12 months):
 Total

 \$106,165.00
 0.05
 12
 1
 \$ 5,308

Staff Position 4: Data Manager				
summaries to en and public health	sure foundation p impact. Respon	rograms are rigorously e sible for review, abstract	on, quality assurance, report evaluated for process and he tion from client records and o meet programmatic and co	alth outcomes database entry
Bachelor's degree Minimum qualifications: years equivalent			ensuring quality for large clie	nt data sets or 5
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-ti exchange supplie Brief description of job duties: waste removal co Three years expe	ategic goals in all ships with other H ime and temporar s. Organizes ren ompany, prepare erlence working w ement, supervision	gnment with agency and IV/AIDS and Harm Red ry staff in appropriate ex noval of biohazard wast reports for compliance a rith injection and drug us n experience preferred.	exchange sites. Develops a d city objectives. Builds and n uction agencies. Responsible change protocol. Responsible from sites and coordinates and maintain safety protocols sers required. Associates De Must hold HIV test counselor	naintains a for scheduling e for purchasing removal with i. gree with
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$103,750.00	0.75	12		\$ 77,813

Re Re co	esponsible for purcha	uling and tra asing exchar	nge supplies. Organize	oorary staff in appropriate exe s removal of biohazard wast e reports for compliance and	e from sites and
	entering and an all the		tenes distant in a difference	the table time dense. Making an	arginalized or
ho	omeless populations terviewing and strong aalth education prefe	required. A g understand rred. Experi	ssociates degree prefer ding of harm reduction p ence using a pallet jack	ple who use drugs, highly ma red, experience using motiva practices and principles, expe t, hand truck, and carts and t	ational erience doing
ha int he	omeless populations terviewing and strong aalth education prefe afe lifting techniques	required. A g understand rred. Experi	ssociates degree prefer ding of harm reduction p ence using a pallet jack	red, experience using motiva practices and principles, expe	ational erience doing

	te - Staffs exchar	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/Volunteer	Coordinator	and the second se		
exchangers willin develop training r	g to become pee 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 diplo		ry; valid California driver n drug users and with ve	's license and excellent drivin olunteers.	ng record. 1 yea
	and an and a second	designed to be and	Annualized (if less than	-
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total

Staff Position 9: Health Educator	r	and the strength		
testing and linkag	ge to care; harm r	reduction counseling) the	revention; vein care; referrals rough mobile and encampme riding crisis intervention supp	ent outreach;
High ophogl diplo	me or equivalence	on traffid California deluga	In Roomen and supplies that date to	and the second
		on drug users and with v	's license and excellent drivi olunteers.	ng record. 1 yea
of evertines wa				ng record. 1 yea

Staff Position 10:				
Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
			0	\$

Total FTE:

3

Total Salaries: \$ 521,453

1b) EMPLOYEE FRINGE BENEFITS: (Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	\$	39,891.00
Retirement	\$	9,960.00
Medical	\$	53,866.00
Dental		
Unemployment Insurance	S	2,712.00
Disability Insurance	\$	21,223.00
Paid Time Off		
Workers comp	\$	2,711.00
	Total Fringe Benefit:	130,363

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 651,816

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 1,945,960 syringes.	\$0.15	291,894
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.75	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 \$7.40/bundle.	\$7.40	296
Group Food	Additional food for increased groups \$718.14/wk x 50 wks.	718.14/wk	35,907
Dec			
	Total	Materials & Supplies:	499.570

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	\$104,014yr	104,014
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$108,258/yr	108,258
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$236,684/yr	236,684
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$171,882/yr	171,882
	Total Cons	sultants/Subcontractors:	620,838

TOTAL OPERATING EXPENSES: 1,226,990

TOTAL DIRECT COSTS: 1,878,806

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.	187,881
Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	187,881

TOTAL EXPENSES: 2,066,687

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

B-1n Appendix # Page # Fiscal Year(s) 1/29/2020

1 21-22

Funding Notification Date

UOS COST ALLOCATION BY SERVICE MODE

		S	ERVICE M	ODES	L Transfer of		
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	153,358	100%	1	0%	-	0%	153,358
Total General Operating	12,000	100%	11 N# 1	0%	-	0%	12,000
Total Operating Expenses	198,358	100%	-	0%	-	0%	198,358
Total Direct Expenses	198,358	100%	-	0%	-	0%	198,358
Indirect Expenses 10.00%	19,836	100%		0%	1	0%	19,836
TOTAL EXPENSES	218,194	100%	-	0%	-	0%	218,194
Units of Service (UOS) per Service Mode	12		-	-	-1	-	12
Cost Per Unit of Service by Service Mode	18,182.84		100410	-	-		1
(NOC) per Service Mode	N/A	-		100			N/A

BUDGET JUSTIFICATION

Contractor Name	San Francisco 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	398,920 syringes @ \$.15 each.	\$0.15	59,838
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.	\$293.33/mo	3,520
Condoms & Lube	16,666 Lube packets @ \$.75 each.	\$0.75	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 I	Materials & Supplies:	153,358

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	I General Operating:	12,000

TOTAL OPERATING EXPENSES: 198,358

TOTAL DIRECT COSTS: 198,358

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of	of 10%
of total direct costs.	19,836

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,836

TOTAL EXPENSES: 218,194

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

Appendix # B-Page # 1 Fiscal Year(s) 22-Funding Notification Date 1/29/

B-10 1 22-23 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES			
Personnel Expenses		Syringe Acces (Hrs., City-wid Sweep	e Syringe	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,700	100%	A	0%	1		5,700
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,308	100%		0%			5,308
Data Manager	0.05	4,815	100%		0%			4,815
SAS Director	0.75	69,254	89%	8,559	11%			77,813
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%			63,705
Logistics Associates	2.00	28,256	25%	84,770	75%		1	113,026
SSE/Vol Coordinator	0.75	53,944	100%	1,	0%			53,944
Health Educator	3.40	190,142		4	0%			190,142
			0.01	1				
Total FTE & Total Salaries	8.10	379,445	0% 73%	142,008	0% 27%			521,453
Fringe Benefits	25.00%	94,861	73%	35,502	27%		-	130,363
Total Personnel Expenses	20.0070	474,306	73%	177,510	27%		-	651,816
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	9	Contract Total
Total Occupancy		85,166	89%	10,500	11%	ponunui		95,666
Total Materials and Supplies		144,875	29%	354,695	71%		-	499,570
Total General Operating		6,659	61%	4,257	39%			10,916
Consultants/Subcontractor:		620,838	100%	1,201	0%			620,838
Total Operating Expenses		857,538	70%	369,452	30%			1,226,990
Total Direct Expenses	1	1,331,844	71%	546,962	29%	1		1,878,806
Indirect Expenses	10.00%	133,185	71%	54,696	29%			187,881
TOTAL EXPENSES		1,465,029	71%	601,658	29%	1		2,066,687
TOTAL EATENGES								
Units of Service (UOS) per Ser	vice Mode	8,012		12	-			8,024
		8,012 182.86		12 50,138.22	-		-	8,024

BUDGET JUSTIFICATION

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: Programs & Op					
with all activities a	and that all requir tation and refiner	red data is reported; wor ment; coordinates curren	that assures monitoring too ks with partner agencies and and emerging health inform surance procedures.	d progra	am staff
Masters in Public Minimum qualifications: equivalent combi			g and public health experien	ce or a	n
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Ť	otal
\$114,000.00	0.05	12	1	\$	5,70
Staff Position 2: Director, Behavi	ioral Health Ser	vices		-	-
evaluation of the	program structure responsive to the	e and provision of profes	the implementation, manag ssional oversight to create a I-being needs, including HIV	service	delivery
			r related discipline; three yea		

a supervisory cap Minimum gualifications: program develop	and the second		emonstrated program manage	gement and
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$140,000.00	0.05	12	1	\$ 7,00

Staff Position 3: Dir. Gov't Grant	S				
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 uality assurance activities.	tand	
	and evaluation; g		perience in health services p writing; government contract		nent
minimum quantoatoris, and hogolations.		and a state of the	Annualized (if less than		_
Annual Salary:	x FTE:	x Months per Year:	12 months):	Tota	đ

Staff Position 4: Data Manager				
summaries to ens and public health	sure foundation p impact. Respon	rograms are rigorously a sible for review, abstrac	on, quality assurance, report evaluated for process and he tion from client records and o meet programmatic and co	alth outcomes database entry
Bachelor's degree Minimum gualifications: years equivalent			ensuring quality for large clie	nt data sets or !
			ensuring quality for large clie Annualized (if less than 12 months):	nt data sets or Total

Staff Position 5: SAS Director				
departmental stra effective partners and training full-tii exchange supplie Brief description of job duties: waste removal co Three years expe	ategic goals in alig hips with other H me and temporar es. Organizes ren ompany, prepare erience working w	gnment with agency and IV/AIDS and Harm Redu y staff in appropriate ex noval of biohazard wast reports for compliance a ith injection and drug us	ers required. Associates De	naintains e for scheduling le for purchasin removal with
			Must hold HIV test counselor	certification or
Minimum qualifications: be willing to obtai	in certification on	the job.	Annualized (if less than	
				certification or Total

Staff Position 6: Logistics Inven	tory Mrg		and the second se		
Responsible for	purchasing excha	nge supplies. Organize	porary staff in appropriate exe s removal of biohazard waste re reports for compliance and	e from	sites and
			ple who use drugs, highly ma	argina	lized, or
interviewing and health education	strong understan preferred. Exper	ding of harm reduction p ience using a pallet jack	red, experience using motiva practices and principles, expe s, hand truck, and carts and u	erience	e doing
interviewing and	strong understan preferred. Exper	ding of harm reduction p ience using a pallet jack	practices and principles, expe	erienci unders	e doing

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

exchangers willin develop training r	ange coord - Resp ig 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
		y; valid California driver n drug users and with v	's license and excellent drivi olunteers.	ng record. 1 ye
			A second for the second second	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 9: Health Educato	r			11. T. T. T.
testing and linkag	ge to care; harm n	eduction counseling) thi	revention; vein care; referral rough mobile and encampme riding crisis intervention supp	ent outreach
af singestern service		y; valid California driver n drug users and with v	's license and excellent drivi olunteers.	ng record. 1
Minimum qualifications:	and the second se			
Minimum qualifications: or experience wo Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 10:				
Brief description of job duties:				
Minimum qualifications:		2.6		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
		1	0	\$

Total FTE:

8.10

Total Salaries: \$ 521,453

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	39,891.00
Retirement	\$	9,960.00
Medical	\$	53,866.00
Dental		
Unemployment Insurance	\$	2,712.00
Disability Insurance	\$	21,223.00
Paid Time Off		
Workers comp	\$	2,711.00
	Total Fringe Benefit:	130,363

25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 651,816

Fringe Benefit %:

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
	1	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 1,945,960 syringes.	\$0.15	291,894
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.75	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 \$7.40/bundle.	\$7.40	296
Group Food	Additional food for increased groups \$718.14/wk x 50 wks.	718.14/wk	35,907
p	Total	Materials & Supplies:	499,570

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	\$104.014yr	104.014
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$108,258/yr	108,258
Homeless youth Alliance	Operational expenses; staffing, office, IT, etc	\$236,684/vr	236,684
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$171,882/yr	171,882
	Total Con	sultants/Subcontractors:	620,838

TOTAL OPERATING EXPENSES: 1,226,990

TOTAL DIRECT COSTS: 1,878,806

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%	Amount
of total direct costs.	187,881
Indirect Rate	e: 10.00%

TOTAL INDIRECT COSTS: 187,881
Appendix # B-1p Page # Fiscal Year(s)

1 22-23 1/29/2020

Funding Notification Date UOS COST ALLOCATION BY SERVICE MODE

		S	ERVICE M	ODES	1		1
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	153,358	100%		0%		0%	153,358
Total General Operating	12,000	100%	-	0%	-	0%	12,000
Total Operating Expenses	198,358	100%		0%	-	0%	198,358
Total Direct Expenses	198,358	100%	-	0%	-	0%	198,358
Indirect Expenses 10.00%	19,836	100%		0%		0%	19,836
TOTAL EXPENSES	218,194	100%	-	0%	-	0%	218,194
Units of Service (UOS) per Service Mode	12		- 0		-		12
Cost Per Unit of Service by Service Mode		5-00-01				-	The second se
(NOC) per Service Mode		Recorded in	1.000	-		-	N/A

Contractor Name	San Francisco 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	398,920 syringes @ \$.15 each.	\$0.15	59,838
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.	\$293.33/mo	3,520
Condoms & Lube	16,666 Lube packets @ \$.75 each.	\$0.75	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:	153,358

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	I General Operating:	12,000

TOTAL OPERATING EXPENSES: 198,358

TOTAL DIRECT COSTS: 198,358

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.		19,836
	and a second	

Indirect Rate: 10.00%

TOTAL INDIRECT COSTS: 19,836

TOTAL EXPENSES: 218,194

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

B-19 1 23-24 1/29/2020

	_			SERVICE MO	DES			1
Personnel Expenses		Syringe Acces (Hrs., City-wid Sweep	e Syringe	Syringe Access Coordination Purchas	& Bulk		-	
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,700	100%		0%			5,700
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,308	100%		0%			5,308
Data Manager	0.05	4,815	100%	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0%			4,815
SAS Director	0.75	69,254	89%	8,559	11%	1		77,813
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 Coordinator	0.75	53,944	100%		0%			53,944
Health Educator	3.40	190,142		-	0%	1		190,142
		-	0%	-	0%			
Total FTE & Total Salaries	8.10	379,445	73%	142,008	27%			521,453
Fringe Benefits	25.00%	94,861	73%	35,502	27%			130,363
Total Personnel Expenses		474,306	73%	177,510	27%	1		651,816
		Expenditure	%	Expenditure	%	xpenditure		Contract Total
Operating Expenses						- p e l la lia l		95,666
Operating Expenses Total Occupancy		And the second se	89%	10,500	11%			
Total Occupancy		85,166	89% 29%	10,500	11% 71%	-		
Total Occupancy Total Materials and Supplies	_	85,166 144,875	29%	354,695	71%	-	-	499,570
Total Occupancy Total Materials and Supplies Total General Operating		85,166 144,875 6,659	29% 61%		71% 39%			499,570 10.916
Total Occupancy Total Materials and Supplies		85,166 144,875	29%	354,695	71%			499,570
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		85,166 144,875 6,659 620,838 857,538	29% 61% 100% 70%	354,695 4,257 369,452	71% 39% 0% 30%			499,570 10,916 620,838 1,226,990
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	85,166 144,875 6,659 620,838 857,538 1,331,844	29% 61% 100% 70%	354,695 4,257 	71% 39% 0% 30% 29%			499,570 10,916 620,838 1,226,990 1,878,806
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:		85,166 144,875 6,659 620,838 857,538	29% 61% 100% 70%	354,695 4,257 369,452	71% 39% 0% 30%			499,570 10,916 620,838 1,226,990
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	10.00%	85,166 144,875 6,659 620,838 857,538 1,331,844 133,185	29% 61% 100% 70% 71% 71%	354,695 4,257 	71% 39% 0% 30% 29% 29%			499,570 10,916 620,838 1,226,990 1,878,806 187,881 2,066,687
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses	10.00% vice Mode	85,166 144,875 6,659 620,838 857,538 1,331,844 133,185 1,465,029	29% 61% 100% 70% 71% 71%	354,695 4,257 369,452 546,962 54,696 601,658	71% 39% 0% 30% 29% 29%			499,570 10,916 620,838 1,226,990 1,878,806 187,881

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

1a) SALARIES

Staff Position 1: Programs & Op	erations Directo	r			
with all activities	and that all requir station 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 program	n staff
Masters in Public Minimum gualifications: equivalent combi			g and public health experien	ce or an	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	То	tal
\$114,000.00	0.05	12	1	\$	5,700
evaluation of the continuum that is	program structure responsive to the	and provision of profes	the implementation, manag ssional oversight to create a I-being needs, including HIV	service d	elivery
Brief description of iop duties: and bisexual men					gay
a supervisory cap	n psychology, soc pacity, especially i		er related discipline; three yes emonstrated program manag		ience ir
Masters degree in	n psychology, soc pacity, especially i				ience i nd

Staff Position 3: Dir. Gov't Grants	S				
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.	tand	
	and evaluation; g		perience in health services writing; government contract		ement
			Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):	To	tal

Staff Position 4: Data Manager				
summaries to ens and public health	sure foundation p impact. Respon	rograms are rigorously e sible for review, abstrac	on, quality assurance, report evaluated for process and he tion from client records and o meet programmatic and co	alth outcomes database entry
Bachelor's degree Minimum qualifications: years equivalent e			ensuring quality for large clie	ont data sets or 5
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months);	Total
/ Infracti e citer j				1 Otal

Staff Position 5: SAS Director				
departmental stra effective partners and training full-ti exchange supplie Brief description of job duties: waste removal co Three years expe	ategic goals in alig hips with other H me and temporar es. Organizes ren ompany, prepare prience working w ment, supervision	nment with agency and IV/AIDS and Harm Redi y 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. Responsib e from sites and coordinates and maintain safety protocols sers required. Associates De Must hold HIV test counselo	maintains e for scheduling le for purchasin s removal with s. gree with
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 6: Logistics Inven	tory Mrg			
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 a
homeless popula	ations required. A	ssociates degree prefer	ple who use drugs, highly ma red, experience using motiva practices and principles, expe	ational
	preferred. Exper	ience using a pallet jack	, hand truck, and carts and i	
health education	preferred. Exper	ience using a pallet jack		understanding

	te - Staffs exchar	nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nspo	orts 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/Volunteer	Coordinator		Are contracted and the second s	
exchangers willin develop training Brief description of job duties: and manages the	ng to become pee materials, includir e site volunteers a	r educators. Develops on ng specific materials relevand supervises exchange		and helps ers. Schedules
		y; valid California driver n drug users and with ve	's license and excellent drivi olunteers.	ng record. 1 yea
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 9: Health Edu	cator			
testing and l	inkage to care; harm i	reduction counseling) th	revention; vein care; referral rough mobile and encampm viding crisis intervention supp	ent outreach;
Linh school	dialoma or aquivalant	and confid Colliferante debury	de Reserve and succellant data.	the second second second
Sector Sect		on drug users and with v	r's license and excellent drivi olunteers.	ng record. 1 yea
			olunteers. Annualized (if less than	Total

Annual Salary:	AFIE.	x Months per Year.	12 monuts).	\$
Annual Salas :	x FTE:	w Months por Voor	Annualized (if less than 12 months):	Tota
Minimum qualifications:			A	
Brief description of job duties:				
Staff Position 10:				

8.10

Total FTE:

E:

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	39,891.00
Retirement	\$	9,960.00
Medical	S	53,866.00
Dental	1	
Unemployment Insurance	\$	2,712.00
Disability Insurance	\$	21,223.00
Paid Time Off		
Workers comp	\$	2,711.00
	Total Fringe Benefit:	130,363

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 651,816

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:

Brief Description	Rate	Cost
Office supply & Postage \$51.16/FTE x 8.1 x 12mo.	\$51.16	4,973
Snacks, T-shirts, etc - \$333.34/mo.	\$333.34	4,000
Syringes \$.15/each x 1,945,960 syringes.	\$0.15	291,894
18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
2 gallon - 18,182 x \$2.75.	\$2.75	50.000
257 cases x \$38.91/case.	\$38.91	10,000
1,040bags x \$16.827bag.	\$16.827	17,500
430 Cases x \$81.396/case.	\$81.396	35,000
40 bundles x \$7.40/bundle.	\$7.40	296
Additional food for increased groups \$718.14/wk x 50 wks.	718.14/wk	35,907
		499,570
	Office supply & Postage \$51.16/FTE x 8.1 x 12mo. Snacks, T-shirts, etc - \$333.34/mo. Syringes \$.15/each x 1,945,960 syringes. 18/19 gallon buckets - 2,052 x \$24.367. 2 gallon - 18,182 x \$2.75. 257 cases x \$38.91/case. 1,040bags x \$16.827bag. 430 Cases x \$81.396/case. 40 bundles x \$7.40/bundle. Additional food for increased groups \$718.14/wk x 50 wks.	Office supply & Postage \$51.16/FTE x 8.1 x 12mo. \$51.16 Snacks, T-shirts, etc - \$333.34/mo. \$333.34 Syringes \$.15/each x 1,945,960 syringes. \$0.15 18/19 gallon buckets - 2,052 x \$24.367. \$24.367 2 gallon - 18,182 x \$2.75. \$2.75 257 cases x \$38.91/case. \$38.91 1,040bags x \$16.827bag. \$16.827 430 Cases x \$81.396/case. \$81.396 40 bundles x \$7.40/bundle. \$7.40 Additional food for increased groups \$718.14/wk x \$7.40

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	\$104,014yr	104,014
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$108,258/yr	108,258
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$236,684/yr	236,684
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$171,882/yr	171,882
	Total Con	sultants/Subcontractors:	620,838

TOTAL OPERATING EXPENSES: 1,226,990

TOTAL DIRECT COSTS: 1,878,806

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.	187,881
Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	

TOTAL EXPENSES: 2,066,687

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

23-24 1/29/2020

	i seconda anda a	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	153,358	100%		0%		0%	153,358
Total General Operating	12,000	100%	1.1.1	0%	-	0%	12,000
Total Operating Expenses	198,358	100%	10 - 13 E	0%	-	0%	198,358
Total Direct Expenses	198,358	100%	-	0%	-	0%	198,358
Indirect Expenses 10.00%	19,836	100%		0%		0%	19,836
TOTAL EXPENSES	218,194	100%	-	0%		0%	218,194
Units of Service (UOS) per Service Mode	12		- 1		-		12
Cost Per Unit of Service by Service Mode		-	10.00-03	-	-	1	
(NOC) per Service Mode		-		-		-	N/A

Contractor Name	San Francisco 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
		Total Occupancy:	33.000

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	398,920 syringes @ \$.15 each.	\$0.15	59,838
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,	\$293.33/mo	3,520
Condoms & Lube	16,666 Lube packets @ \$.75 each.	\$0.75	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:	153,358

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
	Tot	al General Operating:	12,000

TOTAL OPERATING EXPENSES: 198,358

TOTAL DIRECT COSTS: 198,358

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.		19,836

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,836

TOTAL EXPENSES: 218,194

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

B-1s 1 24-25 1/29/2020

			SERVICE MO	DES			
	(Hrs., City-wid	e Syringe	Coordination	& Bulk			
FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
0.05	5,700	100%		0%			5,700
0.05	6,100	87%	900	13%			7,000
0.05	5,308	100%		0%		1.000	5,308
0.05	4,815	100%		0%			4,815
0.75	69,254	89%	8,559	11%			77,813
1.00	15,926	25%	47,779	75%			63,705
2.00	28,256	25%	84,770	75%			113,026
0.75	53,944	100%		0%			53,944
3.40	190,142			0%			190,142
-		0%		0.0/			
8.10	379.445		142.008			-	521,453
	the second s						130,363
	474,306	73%	177,510	27%		-	651,816
	Expenditure	%	Expenditure	%	vnenditure	3	Contract Total
	the second se				ponditure		95,666
	Name and Address of the Owner	and the second se					499,570
						-	10,916
			4,207				620,838
	857,538	70%	369,452	30%			1,226,990
	1.331.844	71%	546,962	29%			1,878,806
10.00%					1		187,881
	1,465,029	71%	601,658	29%	-		2,066,687
vice Mode	8.012		12		- 1		8 024
vice Mode vice Mode	8,012 182.86		12 50,138.22		1	-	8,024
	0.05 0.05 0.05 0.75 1.00 2.00 0.75	(Hrs., City-wid Sweep FTE Salaries 0.05 5,700 0.05 6,100 0.05 6,308 0.05 4,815 0.75 69,254 1.00 15,926 2.00 28,256 0.75 53,944 3.40 190,142 - - 8.10 379,445 25.00% 94,861 474,306 - 8.10 379,445 25.00% 94,861 474,306 - 8.10 379,445 94,861 - - - 8.10 379,445 94,861 - - - - - 6,659 6,659 620,838 857,538 1,331,844 10.00%	(Hrs., City-wide Syringe Sweeps) FTE Salaries % FTE 0.05 5,700 100% 0.05 6,100 87% 0.05 5,308 100% 0.05 5,308 100% 0.05 4,815 100% 0.75 69,254 89% 1.00 15,926 25% 2.00 28,256 25% 0.75 53,944 100% 3.40 190,142 - - 0% - 3.40 190,142 - - 0% - 25.00% 94,861 73% 25.00% 94,861 73% 474,306 73% - - 6,659 61% 6,659 61% 620,838 100% 857,538 70% - 10.00% 133,1844 71%	Syringe Access Services (Hrs., City-wide Syringe Sweeps) Syringe Access Coordination Purchas FTE Salaries % FTE Salaries 0.05 5,700 100% 900 0.05 6,100 87% 900 0.05 6,100 87% 900 0.05 6,100 87% 900 0.05 6,100 87% 900 0.05 5,308 100% - 0.75 69,254 89% 8,559 1.00 15,926 25% 47,779 2.00 28,256 25% 84,770 0.75 53,944 100% - 3.40 190,142 - - - 0% - - 8.10 379,445 73% 142,008 25.00% 94,861 73% 35,502 474,306 73% 177,510 Expenditure % Expenditure 85,166 89% 10,500	(Hrs., City-wide Syringe Sweeps) Coordination & Bulk Purchasing FTE Salaries % FTE Salaries % FTE 0.05 5,700 100% 0% 0.05 6,100 87% 900 13% 0.05 5,308 100% 0% 0% 0.05 4,815 100% 0% 0% 0.05 4,815 100% 0% 0% 0.75 69,254 89% 8,559 11% 1.00 15,926 25% 47,779 75% 2.00 28,256 25% 84,770 75% 0.75 53,944 100% - 0% 3.40 190,142 - 0% - - 0% - 0% - 0% 3.40 190,142 - 0% - 0% 25.00% 94,861 73% 35,502 27% 25.00% 94,861 73% 17,510 27%	Syringe Access Services (Hrs., City-wide Syringe Sweeps) Syringe Access, Disposal Coordination & Bulk Purchasing FTE Salaries % FTE Salaries % FTE Salaries 0.05 5,700 100% 0% 0% 0.05 6,100 87% 900 13% 0.05 6,100 87% 900 13% 0.05 5,308 100% 0% 0% 0.05 4,815 100% 0% 0% 0.05 4,815 100% 0% 0% 1.00 15,926 25% 47,779 75% 2.00 28,256 25% 84,770 75% 0.75 53,944 100% - 0% 3.40 190,142 - 0% - - 0% - 0% - 25.00% 94,861 73% 35,502 27% 25.00% 94,861 73% 177,510 27% 474,306 73%	Syringe Access Services (Hrs., City-wide Syringe Sweeps) Syringe Access, Disposal Coordination & Bulk Purchasing FTE Salaries % FTE Salaries % FTE 0.05 5,700 100% 0% 0% 0.05 6,100 87% 900 13% 0% 0.05 6,100 87% 900 13% 0% 0% 0.05 6,308 100% 0%

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

1a) SALARIES

	Operations Directo		that accurac manifestar las	le or	integert
			that assures monitoring too rks with partner agencies an		
			nt and emerging health infor		
Brief description of job duties: coordinates pl					
			g and public health experier	ice oi	ran
Minimum qualifications: equivalent cor	nbination of education	on and experience.	1	-	-
	FTF		Annualized (if less than	1	
Annual Salary:	x FTE: 0.05	x Months per Year:	12 months):		Total
\$114,000.00	0.05	12	1	\$	5,7
Staff Position 2: Director, Beh	avioral Health Ser	vices		-	
			the implementation, manage	ieme	nt and
			ssional oversight to create a		
		e current health and we	I-being needs, including HIV	need	is of gay
Brief description of job duties: and bisexual n		alat aslancar, business,	an and a fact of the state of the second state of the	0.0212	
			or related discipline; three ye emonstrated program mana		
Minimum qualifications: program deve			emonsualeo program mana	geme	ant and
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	Annualized (if less than		S
Annual Salary:	x FTE:	x Months per Year:	12 months):		Total
\$140,000.00	0.05	12	1	\$	7,0
				-	
Staff Position 3: Dir. Gov't Gra	ints				
Minimum qualifications: and negotiatio		11000-1010	Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):		Total
\$106,165.00	0.05	12	1	\$	5,3
Staff Position 4: Data Manage	r				
Data Manager	 Responsible for co 	pordinating data collection	on, quality assurance, report	ing ar	nd
summaries to	ensure foundation p	rograms are rigorously e	on, quality assurance, report avaluated for process and he	alth o	outcome
summaries to and public hea	ensure foundation pl th impact. Respons	rograms are rigorously e sible for review, abstrac	evaluated for process and he tion from client records and d	alth d	outcome ase entr
summaries to and public hea of all data colle	ensure foundation pl th impact. Respons	rograms are rigorously e sible for review, abstrac	evaluated for process and he	alth d	outcome ase entr
summaries to and public hea of all data colle Brief description of job duties: requirements.	ensure foundation p Ith impact. Respon- ected from clients as	rograms are rigorously e sible for review, abstrac s well as data analysis to	evaluated for process and he tion from client records and o meet programmatic and co	alth d databa ntract	outcome ase entr
summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg	ensure foundation p Ith impact. Respon- ected from clients as ree and 2 years exp	rograms are rigorously e sible for review, abstrac s well as data analysis to perience managing and	evaluated for process and he tion from client records and d	alth d databa ntract	outcome ase entr
summaries to and public hea of all data colle Brief description of job duties: requirements.	ensure foundation p Ith impact. Respon- ected from clients as ree and 2 years exp	rograms are rigorously e sible for review, abstrac s well as data analysis to perience managing and	evaluated for process and he tion from client records and o meet programmatic and co ensuring quality for large clie	alth d databa ntract	outcome ase entr
summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg	ensure foundation p Ith impact. Respon- ected from clients as ree and 2 years exp	rograms are rigorously e sible for review, abstrac s well as data analysis to perience managing and	evaluated for process and he tion from client records and o meet programmatic and co	alth d datab ntract	outcome ase entr
summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg Minimum qualifications: years equivale	ensure foundation p Ith impact. Respon- ected from clients as ree and 2 years exp nt experience requir	rograms are rigorously e sible for review, abstrac swell as data analysis to perience managing and red.	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than	alth d datab ntract	ase entry ta sets o
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summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg Minimum qualifications: years equivale Annual Salary: \$96,300.00 Staff Position 5: SAS Director	ensure foundation p Ith impact. Respon- ected from clients as ree and 2 years exp nt experience requir x FTE: 0.05	rograms are rigorously e sible for review, abstrac swell as data analysis to perience managing and red. x Months per Year: 12	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1	alth c Jatabi ntract ent da	ta sets c Total 4,8
summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg Minimum qualifications: years equivale Annual Salary: \$96,300.00 Staff Position 5; SAS Director SAS Director -	ensure foundation p th impact. Respon- ected from clients as ree and 2 years exp nt experience requir x FTE: 0.05 Provides oversight a	rograms are rigorously e sible for review, abstrac swell as data analysis to perience managing and red. x Months per Year: 12 and management of 11	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops an	salth c datab ntract nt da \$	ta sets o Total 4,8
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summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg Minimum qualifications: years equivale Annual Salary: \$96,300.00 Staff Position 5: SAS Director SAS Director - departmental s effective partmental s effective partmental s effective partmental s effective partmental s effective partmental s effective partmental s	ensure foundation p Ith impact. Respon- acted from clients as ree and 2 years exp nt experience requir x FTE: 0.05 Provides oversight i trategic goals in alig arships with other Hi I-time and temporar olies. Organizes rem	rograms are rigorously e sible for review, abstrac swell as data analysis to perience managing and red. x Months per Year: 12 and management of 11 gnment with agency and IV/AIDS and Harm Redu y staff in appropriate exi noval of biohazard waste	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites, Develops and city objectives, Builds and no rection agencies, Responsible change protocol, Responsible from sites and coordinates	salth of Jataba Intract Int da s nnual nainta e for s e for j remo	ta sets c Total 4,8 tins tins tichedulir purchasi
summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg Minimum qualifications: years equivale Annual Salary: \$96,300.00 Staff Position 5: SAS Director SAS Director SAS Director departmental s effective partmental and training ful exchange supp Brief description of job duties: waste removal	ensure foundation p Ith impact. Respon- acted from clients as ree and 2 years exp nt experience requir x FTE: 0.05 Provides oversight a trategic goals in alig arships with other Hi I-time and temporar olies. Organizes rem company, prepare r	rograms are rigorously e sible for review, abstrac swell as data analysis to perience managing and red. x Months per Year: 12 and management of 11 gnment with agency and IV/AIDS and Harm Redu y staff in appropriate exi noval of biohazard waste reports for compliance a	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites, Develops and city objectives, Builds and no riction agencies, Responsible change protocol, Responsible from sites and coordinates and maintain safety protocols	saith c databb ntract nt da s nnual nainta s for s e for y remo	ta sets c Total 4,8 tins chedulir purchas vval with
summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg Minimum qualifications: years equivale Annual Salary: \$96,300.00 Staff Position 5: SAS Director SAS Director SAS Director departmental s effective partment and training ful exchange supp Brief description of job duties: waste removal Three years ex	ensure foundation p Ith impact. Respon- acted from clients as ree and 2 years exp nt experience requir x FTE: 0.05 Provides oversight i trategic goals in alig arships with other HI I-time and temporar blies. Organizes rem company, prepare r perience working without	rograms are rigorously e sible for review, abstrac swell as data analysis to perience managing and red. x Months per Year: 12 and management of 11 gnment with agency and IV/AIDS and Harm Redu y staff in appropriate exi noval of biohazard waste reports for compliance a ith injection and drug us	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites, Develops and city objectives, Builds and no riction agencies, Responsible change protocol, Responsible from sites and coordinates and maintain safety protocols ers required. Associates Deg	alth c databa ntract nt da \$ nnual nainta e for s e for y remo	ta sets c Total 4,8 tins chedulir purchasi vval with
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summaries to and public hea of all data colle Brief description of job duties: requirements. Bachelor's deg Minimum qualifications: years equivale Annual Salary: \$96,300.00 Staff Position 5: SAS Director SAS Director - departmental s effective partment and training ful exchange supp Brief description of job duties: waste removal Three years ex- program mana	ensure foundation p Ith impact. Respon- ected from clients as ree and 2 years exp nt experience requir x FTE: 0.05 Provides oversight a trategic goals in alig arships with other HI I-time and temporar company, prepare r perience working wi gement, supervision	rograms are rigorously e sible for review, abstracts well as data analysis to perience managing and red. x Months per Year: 12 and management of 11 gnment with agency and IV/AIDS and Harm Rede y staff in appropriate ex- noval of biohazard wast the injection and drug us nexperience preferred. 1	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites. Develops and city objectives. Builds and no rection agencies. Responsible change protocol. Responsible from sites and coordinates nd maintain safety protocols ers required. Associates Deg Must hold HIV test counselor	ealth c databb ntract ant da \$ \$ nnual nainta a for s e for y remo	ta sets c Total 4,8 tins chedulir purchasi vval with

77,813

\$

1

0.75

12

\$103,750.00

Staff Position 6: Logistics Inve				
Responsible for	or purchasing excha	nge supplies. Organize	porary staff in appropriate ex is removal of biohazard wast re reports for compliance and	te from sites a
homeless population interviewing an	ulations required. A	ssociates degree prefer ding of harm reduction p	ple who use drugs, highly manufactured, experience using motivation or actices and principles, experiences and principles.	ational
health education Minimum qualifications: safe lifting tech			k, hand truck, and carts and i	understandin
			Annualized (if less than	

	te - Staffs exchar	nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nspo	rts 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/Volunteer	Coordinator			
exchangers willin develop training r	g to become pee materials, includir	r educators. Develops of	aining, and supervising seco curriculum for these trainings avant to MSM-IDU speed use e sites.	and helps
High school diplo		y; valid California driver n drug users and with v	's license and excellent drivin olunteers.	ng record. 1 yea
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
				1 Otal

Staff Position 9: Health Educato			and the second second second	A ton to
testing and linkag	ge to care; harm r	eduction counseling) th	revention; vein care; referral rough mobile and encampmo iding crisis intervention supp	ent outreach;
			· · · · · · · · · · · · · · · · · · ·	
		:y; valid California driver in drug users and with v	's license and excellent drivi olunteers.	ng record. 1 yea
				ng record. 1 yea

Staff Position 10:				
Brief description of job duties:				
Minimum gualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
			0	\$

Total FTE:

5

Total Salaries: \$ 521,453

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	39,891.00
Retirement	\$	9,960.00
Medical	\$	53,866.00
Dental		
Unemployment Insurance	\$	2,712.00
Disability Insurance	\$	21,223.00
Paid Time Off		
Workers comp	S	2,711.00
	Total Fringe Benefit:	130,363

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 651,816

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	\$0.15	291,894	
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.75	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 \$7.40/bundle.	\$7.40	296
Group Food	Additional food for increased groups \$718.14/wk x 50 wks.	718.14/wk	35,907
	Total	Materials & Supplies:	499.570

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	\$104,014yr	104.014
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$108,258/yr	108,258
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$236,684/yr	236,684
S.F. Drug Users Union	Operational expenses; staffing, office, IT, etc	\$171,882/yr	171,882
	Total Con	sultants/Subcontractors:	620,838

TOTAL OPERATING EXPENSES: 1,226,990

TOTAL DIRECT COSTS: 1,878,806

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%	Amount
of total direct costs.	187,881
Indirect Rate:	10.00%

TOTAL INDIRECT COSTS: 187,881

TOTAL EXPENSES: 2,066,687

Appendix # B-1t Page # 1 Fiscal Year(s) 24-25

1/29/2020

Funding Notification Date 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	153,358	100%	-	0%	1-1	0%	153,358
Total General Operating	12,000	100%		0%	-	0%	12,000
Total Operating Expenses	198,358	100%	1.00	0%	-	0%	198,358
Total Direct Expenses	198,358	100%	-	0%	1 -1	0%	198,358
Indirect Expenses 10.00%	19,836	100%	1	0%		0%	19,836
TOTAL EXPENSES	218,194	100%	-	0%	-	0%	218,194
Units of Service (UOS) per Service Mode	12		- 1		-	-	12
Cost Per Unit of Service by Service Mode	18,182.84	-					
(NOC) per Service Mode		the state of the s	1	-		-	N/A

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

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	398,920 syringes @ \$.15 each.	\$0.15	59,838
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.	\$293.33/mo	3,520
Condoms & Lube	16,666 Lube packets @ \$.75 each.	\$0.75	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:	153,358

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	I General Operating:	12,000

TOTAL OPERATING EXPENSES: 198,358

TOTAL DIRECT COSTS: 198,358

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.	19,836

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,836

TOTAL EXPENSES: 218,194

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

B-1u 1 25-26 1/29/2020

		-		SERVICE MC	DES		_	
Personnel Expenses		Syringe Acces (Hrs., City-wid Sweep	e Syringe	Syringe Access Coordination Purchas	& Bulk			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	5,700	100%	1	0%			5,700
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%			7,000
Dir. Gov't Contracts	0.05	5,308	100%	1.	0%	1		5,308
Data Manager	0.05	4,815	100%		0%		100.00	4,815
SAS Director	0.75	69,254	89%	8,559	11%	12001		77,813
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 Coordinator	0.75	53,944	100%		0%			53,944
Health Educator	3.40	190,142		-	0%)	190,142
			0%		0%			
Total FTE & Total Salaries	8.10	379,445	73%	142,008	27%			521,453
Fringe Benefits 25.00%		94,861	73%	35,502	27%			130,363
Total Personnel Expenses		474,306	73%	177,510	27%			651,816
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	3	Contract Total
Total Occupancy		85,166	89%	10,500	11%			95,666
Total Materials and Supplies		144,875	29%	354,695	71%			499,570
Total General Operating		6,659	61%	4,257	39%			10,916
Consultants/Subcontractor:	1	620,838	100%	-	0%			620,838
Total Operating Expenses		857,538	70%	369,452	30%			1,226,990
Total Direct Expenses	1	1,331,844	71%	546,962	29%			1,878,806
Indirect Expenses 10.00%		133,185	71%	54,696	29%			187,881
TOTAL EXPENSES		1,465,029	71%	601,658	29%			2,066,687
the second se	Unite of Convice (UOS) per Convice Made			12		1	_	8,024
Units of Service (UOS) per Service	vice Mode	8.012		121	and the second s			
Units of Service (UOS) per Service Cost Per Unit of Service by Ser		8,012 182.86		50,138.22	-		-	0,024

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

Appendix #:	B-1u
Fiscal Year:	25-26

1a) SALARIES

Staff Position 1: Programs & Op	erations Directo	r			
with all activities	and that all require tation and refiner	red data is reported; wo ment; coordinates curre	that assures monitoring too rks with partner agencies and nt and emerging health inform ssurance procedures.	d prog	gram staff
Masters in Public Minimum gualifications: equivalent comb			ng and public health experien	nce or	an
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	. T	Total
\$114,000.00	0.05	12	1	\$	5,70
Staff Position 2: Director, Behavio Director, Behavio	rioral Health Sen oral Health Svc - F	vices Responsible for ensuring	the implementation, manag	iemer	nt and
Staff Position 2: Director, Behavio Director, Behavio evaluation of the continuum that is	rioral Health Sen oral Health Svc - F program structure s responsive to the	vices Responsible for ensuring e and provision of profe	the implementation, manag ssional oversight to create a I-being needs, including HIV	iemer servid	nt and ce deliver
Staff Position 2: Director, Behavio Director, Behavio evaluation of the continuum that is Brief description of job duties: and bisexual men Masters degree i	rioral Health Sen program structure responsive to the n. n psychology, soc pacity, especially i	vices Responsible for ensuring e and provision of profe e current health and wel cial sciences, business o	ssional oversight to create a	remer servid need ars ex	nt and ce deliver is of gay operience
Staff Position 2: Director, Behavio Director, Behavio evaluation of the continuum that is Brief description of job duties: and bisexual men Masters degree i a supervisory cap	rioral Health Sen program structure responsive to the n. n psychology, soc pacity, especially i	vices Responsible for ensuring e and provision of profe e current health and wel cial sciences, business o	ssional oversight to create a I-being needs, including HIV or related discipline; three yea	gemer servid need ars ex gemei	nt and ce deliver is of gay operience

Maintains operat	ontracts - Respon ional and statistic uirements, produ	al reporting mechanisms ces routine and ad hoc r	ement and contract related a s in accordance with contrac reporting as needed, and en maily assurance activities	t and	
Bachelor's degre	e and at least two , and evaluation; g	years demonstrated ex	perience in health services writing; government contract		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	11	
rannour outer y.	A.I. I. best	A Monute por roar.	12 monuis).		Total

Staff Position 4: Data Manager				
summaries to en- and public health	sure foundation p impact. Respon	rograms are rigorously i sible for review, abstrac	on, quality assurance, report evaluated for process and he tion from client records and o meet programmatic and co	ealth outcomes database entry
Bachelor's degree Minimum qualifications: years equivalent			ensuring quality for large clie	ent data sets or f
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
	0.05			

Staff Position 5: SAS Director				
departmental stra effective partners and training full-ti exchange supplie Brief description of job duties: waste removal co Three years expe program manage	tegic goals in alig hips with other H me and temporar s. Organizes ren mpany, prepare rience working w ment, supervision	gnment with agency and IV/AIDS and Harm Redu y staff in appropriate ex noval of biohazard wast reports for compliance a ith injection and drug us n experience preferred.	exchange sites. Develops an I city objectives. Builds and ru uction agencies. Responsible change protocol. Responsible from sites and coordinates and maintain safety protocols ters required. Associates De Must hold HIV test counselor	maintains e for scheduling le for purchasir removal with s. gree with
Minimum qualifications: be willing to obtain	n certification on	the job.		
	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tridad
Annual Salary:		A month por rour.	in monthing.	Total

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	te from	sites and
homeless popul 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 m red, experience using motive practices and principles, exp c, hand truck, and carts and	ational erience	e 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

	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	\$ 113,026

Staff Position 8: SSE/Volunteer	the second se	analkia farmanilina in	aining, and supervising seco	and and
exchangers willin develop training	ng to become pee materials, includir	r educators. Develops of	curriculum for these trainings want to MSM-IDU speed use	and helps
High school diplo		y; valid California driver n drug users and with vo	's license and excellent drivi olunteers.	ng record. 1 ye
Minimum gualifications:		A CONTRACTOR OF CONTRACTOR OF CONTRACTOR		
Minimum qualifications:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

testing and linkag	nclude health edu ge to care; harm r	eduction counseling) the	revention; vein care; referral rough mobile and encampm riding crisis intervention supp	ent o	
	ma or equivalence	v: valid California driver	's license and excellent drivi	na re	cord 1 ve
		n drug users and with v			
16 - Charles Market States and Stat					Total

			0	\$
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
Minimum qualifications:				
Brief description of job duties:				
Staff Position 10:				

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	\$	39,891.00
Retirement	\$	9,960.00
Medical	\$	53,866.00
Dental	1	
Unemployment Insurance	\$	2,712.00
Disability Insurance	\$	21,223.00
Paid Time Off		
Workers comp	\$	2,711.00
	Total Fringe Benefit:	130,363

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 651,816

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 1,945,960 syringes.	\$0.15	291,894
Bio Buckets	18/19 gallon buckets - 2,052 x \$24.367.	\$24.367	50,000
Bio Buckets	2 gallon - 18,182 x \$2.75.	\$2.75	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 \$7.40/bundle.	\$7.40	296
Group Food	Additional food for increased groups \$718.14/wk x 50 wks.	718.14/wk	35,907
	Total	Materials & Supplies:	499,570

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:

onsultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,etc	\$104,014yr	104,014
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$108,258/yr	108,258
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$236,684/yr	236,684
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$171.882/yr	171,882
	Total Con	sultants/Subcontractors:	620,838

TOTAL OPERATING EXPENSES: 1,226,990

TOTAL DIRECT COSTS: 1,878,806

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.	187,881
Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	187,881

TOTAL EXPENSES: 2,066,687

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

1 25-26 1/29/2020

		S	ERVICE M	ODES	1		
Personnel Expenses	Syringe Access Coordination Purchas	n & Bulk					Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Total Occupancy	33,000	100%	-	0%	10.00	0%	33,000
Total Materials and Supplies	153,358	100%	-	0%		0%	153,358
Total General Operating	12,000	100%		0%	1	0%	12,000
Total Operating Expenses	198,358	100%	-	0%	10	0%	198,358
Total Direct Expenses	198,358	100%	-1	0%	-	0%	198,358
Indirect Expenses 10.0	0% 19,836	100%		0%		0%	19,836
TOTAL EXPENSES	218,194	100%		0%	-	0%	218,194
of Service (UOS) per Service Mode	12	-	-		-	-	12
er Unit of Service by Service Mode	18,182.84	1000					
(NOC) per Service Mode	N/A	10000		-		-	N/A

Contractor Name	San Francisco 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	398,920 syringes @ \$.15 each.	\$0.15	59,838
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.	\$293.33/mo	3,520
Condoms & Lube	16,666 Lube packets @ \$.75 each.	\$0.75	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	Waterials & Supplies:	153,358

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	General Operating:	12,000

TOTAL OPERATING EXPENSES: 198,358

TOTAL DIRECT COSTS: 198,358

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,

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 19,836

TOTAL EXPENSES: 218,194

Appendix # Page # Fiscal Year(s) Funding Notification Date 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

		S	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	158,166	100%		0%		0%	158,166
Total Operating Expenses	158,166	100%	•	0%		0%	158,166
Total Direct Expenses	158,166	100%	-	0%	-	0%	158,166
Indirect Expenses 10.00%	15,816	100%		0%	1	0%	15,816
TOTAL EXPENSES	173,982	100%	-	0%	-	0%	173,982
Units of Service (UOS) per Service Mode	12	-	- [200	-		12
Cost Per Unit of Service by Service Mode	14,498.50		1				and the second second
(NOC) per Service Mode	N/A	1000					N/A

B-2d 1 20-21

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

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$158,166	158,166
	Total C	onsultants/Subcontractors:	158,166
	TOTA	L OPERATING EXPENSES:	158,166
		TOTAL DIRECT COSTS:	158,166

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.	the second s	15,816

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-	Indirect Rate:	10.00%
2	TOTAL INDIRECT COSTS:	15,816

TOTAL EXPENSES: 173,982

Appendix # B-2e Page # 1 Fiscal Year(s) Funding Notification Date

21-22 1/29/2020

		ş	SERVICE M	ODES	5. A		
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	158,166	100%	-	0%	-	0%	158,166
Total Operating Expenses	158,166	100%	-	0%	1.00	0%	158,166
Total Direct Expenses	158,166	100%		0%	-	0%	158,166
Indirect Expenses 10.00%	15,816	100%		0%		0%	15,816
TOTAL EXPENSES	173,982	100%	-	0%	-	0%	173,982
Units of Service (UOS) per Service Mode	12	-	- 1	-	-1	-	12
Cost Per Unit of Service by Service Mode	14,498.50	-		-	1	1.00	10000
(NOC) per Service Mode						-	N/A

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

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$158,166	158,166
	Total Cons	ultants/Subcontractors:	158,166
	TOTAL C	PERATING EXPENSES:	158,166
		TOTAL DIRECT COSTS:	158,166

4) INDIRECT COSTS

total direct costs 15 Pt	an Francisco AIDS Foundation has a negotiated rate of 27%	This contract seeks reimbursement at a rate of 10%	1.
10/ai ulieci cosis. 13,0	f total direct costs.		15,816

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	Indirect Rate:	10.00%
10-C-1	TOTAL INDIRECT COSTS:	15,816

TOTAL EXPENSES: 173,982

Appendix # Page # Fiscal Year(s)

1 22-23

B-2f

1/29/2020

Funding Notification Date UOS COST ALLOCATION BY SERVICE MODE

		ŝ	SERVICE M	ODES		-	
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	158,166	100%	-	0%	-	0%	158,166
Total Operating Expenses	158,166	100%		0%	-	0%	158,166
Total Direct Expenses	158,166	100%	-	0%	-	0%	158,166
Indirect Expenses 10.00%	15,816	100%		0%		0%	15,816
TOTAL EXPENSES	173,982	100%	-	0%	-	0%	173,982
Units of Service (UOS) per Service Mode	12	2.2.3	- 1		-1	-	12
Cost Per Unit of Service by Service Mode	14,498.50	-			1.1		
(NOC) per Service Mode	N/A	1 100 100					N/A

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

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$158,166	158,166
			-
	Total Cons	sultants/Subcontractors:	158,166
	TOTAL	OPERATING EXPENSES:	158,166
		TOTAL DIRECT COSTS:	158,166

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.		15,816

	Indirect Rate:	10.00%
1	TOTAL INDIRECT COSTS:	15,816

TOTAL EXPENSES: 173,982

Appendix # B-2g Page # 1 Fiscal Year(s) 23-24 **Funding Notification Date**

1/29/2020

	1	5	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	158,166	100%		0%	-	0%	158,166
Total Operating Expenses	158,166	100%	-	0%	-	0%	158,166
Total Direct Expenses	158,166	100%	-	0%		0%	158,166
Indirect Expenses 10.00%	15,816	100%		0%		0%	15,816
TOTAL EXPENSES	173,982	100%	-	0%	-	0%	173,982
Units of Service (UOS) per Service Mode	12		-	-	-1		12
Cost Per Unit of Service by Service Mode	14,498.50					1	
(NOC) per Service Mode	N/A			Sector and			N/A

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

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$158,166	158,166
			-
	Total Consultant	s/Subcontractors:	158,166
	TOTAL OPERA	TING EXPENSES:	158,166
	ΤΟΤΑΙ	DIRECT COSTS:	158,166

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	1.1.1.1.1.1.1
of total direct costs.		15,816

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,816

TOTAL EXPENSES: 173,982

Appendix # B-2h Fiscal Year(s) Funding Notification Date

1 24-25 1/29/2020

		5	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	158,166	100%	-	0%	-	0%	158,166
Total Operating Expenses	158,166	100%	-	0%	-	0%	158,166
Total Direct Expenses	158,166	100%	1 -1	0%	1 -1	0%	158,166
Indirect Expenses 10.00%	15,816	100%		0%		0%	15,816
TOTAL EXPENSES	173,982	100%	-	0%	-	0%	173,982
Units of Service (UOS) per Service Mode	12	-	1	-	-1	-	12
Cost Per Unit of Service by Service Mode	14,498.50	Long St.	-	-	0	-	and the second second
(NOC) per Service Mode	N/A	18. T		_		-	N/A

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

Consultants/Subcontractors:

onsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$158,166	158,166
			-
	Total C	onsultants/Subcontractors:	158,16
	ТОТ	AL OPERATING EXPENSES:	158,16
		TOTAL DIRECT COSTS:	158,160

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.		15,816
and an end the second sec		

 Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,816

TOTAL EXPENSES: 173,982

Appendix # B-2i Page # Fiscal Year(s) Funding Notification Date

1 25-26 1/29/2020

		8	SERVICE M	ODES			
Personnel Expenses	HYA Wrap A Disposal Se						Contract Totals
Operating Expenses	Expenditure	%	xpenditur	%	xpenditur	%	Contract Total
Consultants/Subcontractor:	158,166	100%		0%	in the second	0%	158,166
Total Operating Expenses	158,166	100%		0%	1	0%	158,166
Total Direct Expenses	158,166	100%	-	0%	-	0%	158,166
Indirect Expenses 10.00%	15,816	100%		0%		0%	15,816
TOTAL EXPENSES	173,982	100%	-	0%	-	0%	173,982
Units of Service (UOS) per Service Mode	12	-	1	-		-	12
Cost Per Unit of Service by Service Mode	14,498.50	-		1	1.0.0	100	
(NOC) per Service Mode	N/A	-				-	N/A

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

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$158,166	158,166
			-
	Total Con	sultants/Subcontractors:	158,166
	TOTAL	OPERATING EXPENSES:	158,166
		TOTAL DIRECT COSTS:	158,166

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.		15,816
		-

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,816

TOTAL EXPENSES: 173,982

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

B-3d 1 20-21 1/29/2020

				SERVICE MO	DES			
Personnel Expenses		Syringe Access Services		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, Behavioral Health Services	0.05	3,000	50%	3,000	50%	11. I.S.	0%	6,000
Director, SAS 0.1		7,781	50%	7,782	50%		0%	15,563
Associate Director, 6th Street HRC	1.00	39,199	50%	39,199	50%	() () (i) (ii)	0%	78,398
Health Educator	7.75	218,988	50%	218,988	50%	1	0%	437,976
Mobile Health Educator 0.5		14,129	50%	14,128	50%		0%	28,257
Health Educator/Inventory Team Lead	1.00	28,256	50%	28,257	50%	1	0%	56,513
Inventory Associate/Health Educator	1.00	28,257	50%	28,256	50%	1	0%	56,513
Total FTE & Total Salaries	11.55	349,760	50%	349,760	50%	11.1.1.1	0%	699,520
Fringe Benefits	25.00%	87,440	50%	87,440	50%		0%	174,880
Total Personnel Expenses		437,200	50%	437,200	50%	-	0%	874,400
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
and an and a state of the state		18,594	50%	18,593	50%	-	0%	37,187
Total Occupancy								
Total Occupancy Total Materials and Supplies		12,432	50%	12,432	50%	1	0%	24,864
Total Materials and Supplies			50% 50%	12,432 11,661	50% 50%		0%	24,864 23,322
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses		12,432				0		
Total Materials and Supplies Total General Operating Total Operating Expenses		12.432 11,661	50%	11,661	50%	-	0%	23,322
Total Materials and Supplies Total General Operating	10.00%	12,432 11,661 42,687	50% 50%	11,661 42,686	50% 50%	-	0% 0%	23,322 85,373
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses	10.00%	12,432 11,661 42,687 479,887	50% 50%	11,661 42,686 479,886	50% 50%	-	0% 0%	23,322 85,373 959,773
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		12,432 11,661 42,687 479,887 47,988	50% 50% 50%	11,661 42,686 479,886 47,989	50% 50% 50%		0% 0% 0% 0%	23,322 85,373 959,773 95,977
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	12.432 11,661 42,687 479,887 47,988 527,875	50% 50% 50%	11,661 42,686 479,886 47,989 527,875	50% 50% 50%		0% 0% 0% 0%	23,322 85,373 959,773 95,977 1,055,750
Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-3d					
------------------------	--	--------------	-------	---				
	HIV Syringe Access & Disposal Services -			-				
Program Name:	Harm Reduction Center	Fiscal Year:	20-21					
				-				

Start Position 1	: V.P Programs a			and the state of t	_	
	structure and pro responsive to the	vision of professio	onal oversight to c	ement and evaluation of the reate a service delivery conti s, including HIV needs of ga	nuum	that is
Brief description of job duties:			1		- X.,	
	also include three demonstrated pro	e years' experienc	e in supervisory ca	less or related disciplines. R apacity, especially in HIV pre evelopment experience.		
Minimum qualifications:		1		1		_
Annual Salary:	- 1	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
	\$203,000.00	0.10	12	1	\$	20,30
					-	
Staff Position 2:	Director, Behav			ement and evaluation of the		
Brief description of job duties:	responsive to the men.	current health an	d well-being need	eate a service delivery contin s, including HIV needs of gay ess or related discipline; three	/ and	bisexual
Minimum qualifications:	experience in a s	upervisory capacil	y, especially in HI ment experience.	V prevention and demonstra		
2			x Months per	Annualized (if less than		2.1.1
Annual Salary:	\$120,000.00	x FTE: 0.05	Year: 12	12 months):	_	Total
	\$120,000.00]	0.05	12		\$	6,00
Staff Position 3:	strategic goals in partnerships with training full-time a	alignment with ag other HIV/AIDS a and temporary stat	ency and city obje nd Harm Reductio ff in appropriate ex	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for icchange protocol. Responsib waste from sites and coordin	effec sche le for	tive duling an purchasi
Starr Position 3: Brief description of job duties:	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove	alignment with ag other HIV/AIDS a and temporary stal es. Organizes rem al company, prepa	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard are reports for con	ctives. Builds and maintains n agencies. Responsible for	effect sche le for lates proto	tive duling an purchasi removal cols.
Brief description of job duties:	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experience program manage	alignment with ag other HIV/AIDS a and temporary stal es. Organizes rem al company, prepa rience working will ment, supervision	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard are reports for con h injection and dru	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir apliance and maintain safety ug users required. Associate red. Must hold HIV test coun	effect sche le for lates proto	tive duling an purchasi removal cols. gree with
	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experience program manage	alignment with ag other HIV/AIDS a and temporary stal es. Organizes rem al company, prepa rience working will ment, supervision	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for con h injection and dru experience prefer	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir apliance and maintain safety ug users required. Associate red. Must hold HIV test coun	effect schei le for nates proto s Deg selor	tive duling an purchasi removal cols. gree with
Brief description of job duties: Minimum qualifications:	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experience program manage	alignment with ag other HIV/AIDS a and temporary stal es. Organizes rem al company, prepa rience working wil ment, supervision willing to obtain c	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for com h injection and dru experience prefer ertification on the x Months per	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir apliance and maintain safety ug users required. Associate red. Must hold HIV test coun tob. Annualized (if less than	effect schei le for nates proto s Deg selor	tive duling an purchasi removal cols. gree with
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experience program manage certification or be \$103,750.00	alignment with ag other HIV/AIDS a and temporary states. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c <u>x FTE:</u> 0.15	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard are reports for com h injection and dru experience prefer ertification on the x Months per Year: 12	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir apliance and maintain safety ug users required. Associate red. Must hold HIV test coun job. Annualized (if less than 12 months):	effect schei le for nates proto s Deg selor	tive duling an purchasi removal cols. pree with Total
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversigners over signer strategic goals in partnerships with training full-time a exchange supplie with waste remover three years experiment of the program manage certification or be \$103,750.00 Associate Direct Direc	alignment with ag other HIV/AIDS a and temporary stal es. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H	ency and city obje nd Harm Reductio if in appropriate ex- oval of biohazard are reports for con h injection and dru- experience prefer ertification on the X Months per Year: 12 RC	ctives. Builds and maintains n agencies. Responsible for ichange protocol. Responsib waste from sites and coordir apliance and maintain safety ug users required. Associate red. Must hold HIV test coun job. Annualized (if less than 12 months): 1	effect schei le for hates proto s Deg selor	tive duling an purchasi removal cols. gree with Total 15,56
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4:	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experies program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develop	alignment with ag other HIV/AIDS a and temporary states. Organizes remail company, prepa- rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nolude site operation prent; supervisin verdose prevention poment; managing	ency and city obje nd Harm Reductio if in appropriate ex- oval of biohazard are reports for com h injection and dru- experience prefer ertification on the x Months per Year: 12 RC ons (schedules, lo g health educators n, vein care) and ri- syringe access, d	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordir apliance and maintain safety ug users required. Associate red. Must hold HIV test coun job. Annualized (if less than 12 months):	effect sche le for nates proto s Deg selor \$ f 6th \$ nduct ilitatic nking	tive duling an purchasi removal cols. gree with Total 15,56 Street ing healt on, and
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4: Brief description of job duties:	Provides oversiglistrategic goals in partnerships with training full-time a exchange supplie with waste removing three years experiment of the sector of the	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working wi ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operati Center; supervisin verdose prevention pment; managing v/HCV testing and ence working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio fin appropriate ex- oval of biohazard are reports for com h injection and dri- experience prefer ertification on the x Months per Year: 12 RC ons (schedules, lo g health educators h, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and th	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin opliance and maintain safety ug users required. Associate red. Must hold HIV test coun tob. Annualized (if less than 12 months): 1 gistics, QA, programming) or s, volunteers, and interns; co eferrals; program design, fac isposal, and lounge space; li nd providing crisis intervention y marginalized, or homeless ing motivational interviewing bles, experience doing health eatment. Supervisory experience	effect scheile for nates proto s Deg selor \$ f 6th \$ f 6th \$ f 6th \$ f 6th \$ f 6th \$ gon sup popul and u educ	tive duling an purchasi removal cols. ree with Total 15,56 Street ing healt on, and pport. ations strong cation.
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4:	Provides oversiglistrategic goals in partnerships with training full-time a exchange supplie with waste removing three years experiment of the sector of the	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working wi ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operati Center; supervisin verdose prevention pment; managing //HCV testing and ence working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio fin appropriate ex- oval of biohazard are reports for com h injection and dri- experience prefer ertification on the x Months per Year: 12 RC ons (schedules, lo g health educators h, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and th	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin opliance and maintain safety ug users required. Associate red. Must hold HIV test coun tob. Annualized (if less than 12 months): 1 gistics, QA, programming) or s, volunteers, and interns; co eferrals; program design, fac isposal, and lounge space; li nd providing crisis intervention y marginalized, or homeless ing motivational interviewing bles, experience doing health eatment. Supervisory experience	effect scheile for proto s Deg selor \$ f 6th \$ f 6th \$ f 6th \$ n sup popul and u educence,	tive duling an purchasi removal cols. ree with Total 15,56 Street ing health on, and pport. ations strong cation.

referrals; program	include conducting m design, facilitatio	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ige a	ccess,
Minimum, 1-3 ye	ars experiencing v	vorking with drug u	edge of HIV/HCV prevention/	ferre tx pr	d. Harm eferred.
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	and the state of t			
HIV/HCV testing	and linkage to car reach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and
Minimum, 1-3 yea 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	0.50	12	1	\$ 28,25

referrals; suppor	include conductin ts syringe access, ge to care; and pro	g health education disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo supply inventory. 	s to HIV/HCV
Minimum, 1-3 ye Minimum qualifications: reduction, motiva			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	1.00	12	1	\$ 56,51

referrals; support testing and linkag Street sites; supe Brief description of job duties: maintenance and Minimum, 1-3 yea	include conductin ts syringe access, ge to care; and pro ervises volunteers; I transport. ars experiencing v	g health education disposal, and lour oviding crisis intervi- and assists Inven- vorking with drug u	e (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo tory Team Lead with supply i users. Associates Degree pre	s to HIV/HC bile and 6th nventory ferred. Ham
Minimum qualifications: reduction, motiva	itional interviewing	skills, and knowle		x preterred.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,

11.55

Total FTE:

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	COSC	
Social Security	\$	53,513.00
Retirement	\$	13,361.00
Medical	\$	72,260.00
Dental		
Unemployment Insurance	\$	3,638.00
Disability Insurance	\$	28,470.00
Paid Time Off		
Other (Workers Comp):	\$	3,638.00
	Total Fringe Benefit:	174,880

Fringe Benefit %: 25.00%

Total Salaries: \$

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 874,400

699,520

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$2,000/mo x 12 mo.	2000	24,000
Rent-6th Street	Prorated rent @ \$432.25/mo x 12 mo.	432.25	5,187
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo,	500	6,000
		Total Occupancy:	37,187

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exchange incentives, 1,260 incentives @ \$5each =\$6,300.		6,300
Group supplies	snacks, t-shirts, etc \$1.000/mo x 12 mo.	1000	12,000
	Total	Aaterials & Supplies	24 864

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorial svc \$1,735.17/mo.	1,735.17/mo	20,822
Insurance	Prorated gen liability, hazard and auto insurance.	208.34	2,500
		7	
	T _{el}	al Consuel Origination	00 000

Total General Operating: 23,322

TOTAL OPERATING EXPENSES: 85,373

TOTAL DIRECT COSTS: 959,773

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.		95,977

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	95,977

TOTAL EXPENSES: 1,055,750

4

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-3e 1 21-22 1/29/2020

				SERVICE MO	DES		_	
Personnel Expenses		Syringe A Servic	es	Lounge Se				
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, Behavioral Health Services	0.05	3,000	50%	3,000	50%	1	0%	6,000
Director, SAS	0.15	7,781	50%	7,782	50%	1	0%	15,563
Associate Director, 6th Street HRC	1.00	39,199	50%	39,199	50%	1200	0%	78,398
Health Educator	7.75	218,988	50%	218,988	50%		0%	437,976
Mobile Health Educator	0.50	14,129	50%	14,128	50%	1	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	349,760	50%	349,760	50%	· · · · · ·	0%	699,520
Fringe Benefits	25.00%	87,440	50%	87,440	50%		0%	174,880
Total Personnel Expenses		437,200	50%	437,200	50%	-	0%	874,400
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
Total Occupancy		18.594	50%	18,593	50%		0%	37,187
Total Materials and Supplies		12.432	50%	12,432	50%		0%	24.864
Total General Operating	111	11,661	50%	11,661	50%	12 11 2	0%	23,322
Total Operating Expenses		42,687	50%	42,686	50%	1	0%	85,373
		479.887	50%	479.886	50%	-	0%	959,773
Total Direct Expenses		419,001				(05 077
Total Direct Expenses Indirect Expenses	10.00%	47,988	50%	47,989	50%		0%	95,977
	10.00%				50% 50%	1	0% 0%	1,055,750
Indirect Expenses TOTAL EXPENSES		47,988	50%	47,989 527,875		-		
Indirect Expenses	vice Mode	47,988 527,875	50%	47,989				1,055,750

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-3e
	HIV Syringe Access & Disposal Services -		
Program Name:	Harm Reduction Center	Fiscal Year:	21-22

Staff Position	1: V.P Programs &				_	
	structure and pro responsive to the	vision of professio	nal oversight to c	ement and evaluation of the reate a service delivery contines, including HIV needs of gay	nuum	that is
Brief description of job dutie	s: men.	Crossile Restored	Information In 1	and an additional data and the second		
	also include three	e years' experienc	e in supervisory ca	ess or related disciplines. R apacity, especially in HIV pre avelopment experience.		
Minimum gualification	s:					
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):	4	Total
	\$203,000.00	0.10	12	1	\$	20,30
						_
Staff Position 2	2: Director, Behav			ement and evaluation of the		N 100
Brief description of job duties	responsive to the s: men.	current health and	d well-being needs	eate a service delivery contin s, including HIV needs of gay ess or related discipline; thre	and	bisexual
Nation for some start at the second	experience in a s	upervisory capacit	y, especially in HI	V prevention and demonstrat		
Minimum qualifications	s: management and	program develop	x Months per	Annualized (if less than	1.0	
Annual Salary:		x FTE:	Year:	12 months):		Total
,	\$120,000.00	0.05	12	1	\$	6,00
Star Position	strategic goals in partnerships with training full-time a exchange supplie	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for cchange protocol. Responsib waste from sites and coordin	effec sche le for lates	tive duling and purchasir removal
Brief description of job duties Minimum qualifications	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working with ment, supervision	ency and city obje nd Harm Reductio if in appropriate ex- oval of biohazard are reports for com th injection and dru- experience prefer ertification on the	ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun job.	effect sche le for lates proto	tive duling an purchasi removal cols.
Brief description of job duties Minimum qualifications	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stat es. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard are reports for com th injection and dru experience prefer ertification on the x Months per	ctives. Builds and maintains in agencies. Responsible for tochange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun job.	effec sche le for lates proto s Deg selor	tive duling and purchasi removal cols. gree with
Brief description of job duties	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be 5:	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c x FTE:	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard are reports for com th injection and dru experience prefer ertification on the x Months per Year:	ctives. Builds and maintains n agencies. Responsible for tochange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months):	effec sche le for lates proto s Deg selor	tive duling and purchasi removal cols. pree with Total
Brief description of job duties Minimum qualifications	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stat es. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c	ency and city obje nd Harm Reductio if in appropriate ex- oval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per	ctives. Builds and maintains in agencies. Responsible for tochange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun job.	effec sche le for lates proto s Deg selor	tive duling and purchasi removal cols. pree with Total
Brief description of job duties Minimum qualifications Annual Salary:	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be 5: \$103,750.00	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c x FTE: 0.15	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard are reports for com h injection and dru experience prefer ertification on the X Months per Year: 12	ctives. Builds and maintains n agencies. Responsible for tochange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months):	effec sche le for lates proto s Deg selor	tive duling an purchasi removal cols. pree with Total
Brief description of job duties Minimum qualifications Annual Salary: Staff Position 4	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be 3: \$103,750.00 I: Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develo	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street HI cclude site operati Center; supervisin verdose preventior pment; managing	ency and city obje nd Harm Reductio ff in appropriate ex- oval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per Year: 12 RC ons (schedules, lo g health educators n, vein care) and n syringe access, d	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months): 1 gistics, QA, programming) of s, volunteers, and interns; con eferrals; program design, fac isposal, and lounge space; li	effec sche le for ates proto s Deg selor \$ f 6th 3 nduct ilitationking	tive duling an purchasi removal cols. ree with Total 15,56 Street ing healt on, and
Brief description of job duties Minimum qualifications Annual Salary: Staff Position 4 Brief description of job duties	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be 3: \$103,750.00 I: Associate Direct Responsibilities in Harm Reduction (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street Hi celude site operati center; supervision prent; managing //HCV testing and ence working with tes Degree prefer harm reduction pri- HIV/HCV disease	ency and city obje nd Harm Reductio fin appropriate ex- oval of biohazard are reports for com th injection and dri- experience prefer ertification on the <u>x Months per Year:</u> 12 <u>RC</u> ons (schedules, lo g health educators n, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and the	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months): 1 1 signification of the set of the set isposal, and lounge space; li ind providing crisis intervention y marginalized, or homeless sing motivational interviewing bles, experience doing health eatment. Supervisory experience	effec scheile for ates proto s Deg selor \$ f 6th 3 ilitation nking on su popul and educ	tive duling an purchasi removal cols. ree with Total 15,56 Street ing health on, and pport. ations strong cation.
Brief description of job duties Minimum qualifications Annual Salary: Staff Position 4	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be 3: \$103,750.00 I: Associate Direct Responsibilities in Harm Reduction (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street Hi celude site operati center; supervision prent; managing //HCV testing and ence working with tes Degree prefer harm reduction pri- HIV/HCV disease	ency and city obje nd Harm Reduction fin appropriate ex- oval of biohazard are reports for com- th injection and dru- experience prefer- ertification on the j <u>x Months per-</u> <u>Year:</u> 12 <u>RC</u> ons (schedules, log g health educators h, vein care) and ru- syringe access, d linkage to care; a drug users, highly- red, experience us actices and princip prevention and tru- gement experience	ctives. Builds and maintains n agencies. Responsible for techange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months): 1 1 sistics, QA, programming) of s, volunteers, and interns; con eferrals; program design, fac isposal, and lounge space; li ind providing crisis intervention y marginalized, or homeless sing motivational interviewing bles, experience doing health eatment. Supervisory experience required,	effec scheile for ates proto s Deg selor \$ f 6th 3 ilitation nking on su popul and educ	tive duling an purchasi removal cols. ree with Total 15,56 Street ing health on, and pport. ations strong cation.
Brief description of job duties Minimum qualifications Annual Salary: Staff Position 4 Brief description of job duties	Provides oversigh strategic goals in partnerships with training full-time a exchange supplie with waste remov 3: Three years expe program manage certification or be 3: \$103,750.00 I: Associate Direct Responsibilities in Harm Reduction (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street Hi celude site operati center; supervision prent; managing //HCV testing and ence working with tes Degree prefer harm reduction pri- HIV/HCV disease	ency and city obje nd Harm Reductio fin appropriate ex- oval of biohazard are reports for com th injection and dri- experience prefer ertification on the <u>x Months per Year:</u> 12 <u>RC</u> ons (schedules, lo g health educators n, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and the	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months): 1 1 signification of the set of the set isposal, and lounge space; li ind providing crisis intervention y marginalized, or homeless sing motivational interviewing bles, experience doing health eatment. Supervisory experience	effec scheile for ates proto s Deg selor \$ f 6th 3 ilitation nking on su popul and a educence,	tive duling and purchasin removal cols. reee with Total 15,56 Street ing health on, and pport. ations strong cation.

Brief description of job duties:	referrals; program disposal, and lour	design, facilitation nge space; linking	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ge ad	ccess,
	Minimum, 1-3 yea			users. Associates Degree pre edge of HIV/HCV prevention/		
the second s	Minimum, 1-3 yea					

HIV/HCV testing	and linkage to car reach; overseeing	e; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and	is
Minimum, 1-3 yea 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):	Tot	al
\$56,513.00	0.50	12	1	\$ 2	28,257

referrals; suppor	ts syringe access, ge to care; and pro	disposal, and lour oviding crisis interv	1 (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo supply inventory.	s to HIV/HCV
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):	Total
\$56,513.00	1.00	12	1	\$ 56,513

referrals; support testing and linkag Street sites; supe Brief description of job duties; maintenance and	ts syringe access, ge to care; and pre- ervises volunteers I transport. ars experiencing v	disposal, and lour oviding crisis interv ; and assists Inver working with drug u	a (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo tory Team Lead with supply i users. Associates Degree pre	s to HIV/HCV bile and 6th inventory ferred. Harm
Minimulti gaamoatoris, roduotori, motiva	donar meer viewin		Annualized (if less than	a proisired.
Annual Salary:	x FTE:	Year:	12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,5

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	\$	53,513.00
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Medical	\$	72,260.00
Dental		
Unemployment Insurance	\$	3,638.00
Disability Insurance	\$	28,470.00
Paid Time Off	H.C.	
Other (Workers Comp):	\$	3,638.00
	Total Fringe Benefit:	174.880

Fringe Benefit %: 25.00%

Total Salaries: \$

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 874,400

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2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
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		tal General Operating	23 322

Total General Operating: 23,322

TOTAL OPERATING EXPENSES: 85,373

TOTAL DIRECT COSTS: 959,773

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.		95,977

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	95,977

TOTAL EXPENSES: 1,055,750

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-3f 1 22-23 1/29/2020

	-			SERVICE MO	DES			
Personnel Expenses		Syringe A Servic	es	Lounge Se				1
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, Behavioral Health Services	0.05	3,000	50%	3,000	50%		0%	6,000
Director, SAS	0.15	7,781	50%	7,782	50%	-	0%	15,563
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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%	(1	0%	56,513
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Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
				10 000	50%		0%	37,187
		18,594	50%	18,593	0070		070	37,107
Total Occupancy		18,594 12,432	50% 50%	18,593	50%	-	0%	
Total Occupancy Total Materials and Supplies					the second se			24,864
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses		12,432	50%	12,432	50%	1 -	0%	24,864 23,322 85,373
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses		12,432 11,661	50% 50%	12,432 11,661	50% 50%		0% 0%	24,864 23,322
Total Occupancy Total Materials and Supplies Total General Operating	10.00%	12,432 11,661 42,687	50% 50% 50%	12,432 11,661 42,686	50% 50% 50%	-	0% 0% 0%	24,864 23,322 85,373
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	10.00%	12,432 11,661 42,687 479,887	50% 50% 50%	12,432 11,661 42,686 479,886	50% 50% 50%	-	0% 0% 0%	24,864 23,322 85,373 959,773 95,977
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses		12,432 11,661 42,687 479,887 47,988	50% 50% 50% 50%	12,432 11,661 42,686 479,886 47,989	50% 50% 50% 50%	-	0% 0% 0% 0%	24,864 23,322 85,373 959,773
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	12,432 11,661 42,687 479,887 47,988 527,875	50% 50% 50% 50%	12,432 11,661 42,686 479,886 47,989 527,875	50% 50% 50% 50%	-	0% 0% 0% 0%	24,864 23,322 85,373 959,773 95,977 1,055,750

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-3f
	HIV Syringe Access & Disposal Services -		
Program Name:	Harm Reduction Center	Fiscal Year:	22-23

Staff Position 1	: V.P Programs &	& Services				
Puter descalation of laber define	structure and pro responsive to the	vision of profession	onal oversight to c	ement and evaluation of the eate a service delivery contines, including HIV needs of gay	nuum	that is
Brief description of job duties	: men.	In moushalamu and	dal anadasa kusis	ess or related disciplines. R	e e i i la	omente
	also include three	e years' experienc	e in supervisory ca	apacity, especially in HIV pre velopment experience.		
Minimum qualifications						_
Annual Salary:	_	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
, unidal odiality	\$203,000.00	0.10	12	1	\$	20,30
Staff Position 2	: Director, Behav				_	
Brief description of job duties	structure and pro responsive to the men.	vision of profession current health an	nal oversight to cr d well-being needs	ement and evaluation of the eate a service delivery contin s, including HIV needs of gay	and	that is bisexual
Minimum qualifications	experience in a s	upervisory capacit	ty, especially in HI	ess or related discipline; thre V prevention and demonstrat		
The second second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		x Months per	Annualized (if less than	11	
Annual Salary:		x FTE:	Year:	12 months):	<u></u>	Total
	\$120,000.00	0.05	12	1	\$	6,00
Staff Position 3	strategic goals in partnerships with training full-time a exchange supplie	alignment with ag other HIV/AIDS a and temporary states. Organizes rem	ency and city obje nd Harm Reductio ff in appropriate ex loval of biohazard	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for icchange protocol. Responsible waste from sites and coordin	effect schei le for lates	tive duling an purchasi removal
Brief description of job duties	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal as. Organizes rem al company, prepa prience working with ment, supervision	ency and city obje nd Harm Reductio ff in appropriate ex loval of biohazard are reports for com th injection and dru	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin apliance and maintain safety ug users required. Associates red. Must hold HIV test coun	effect schei le for lates proto	tive duling an purchasi removal cols. ree with
Brief description of job duties Minimum qualifications	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal as. Organizes rem al company, prepa- prience working with ment, supervision willing to obtain c	ency and city obje nd Harm Reductio ff in appropriate ex loval of biohazard are reports for com th injection and dru experience prefer ertification on the x Months per	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin apliance and maintain safety ing users required. Associated red. Must hold HIV test coun ob.	effect scheid le for lates proto s Deg selor	tive duling an purchasi removal cols. pree with
Brief description of job duties	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal as. Organizes rem al company, prepa mence working with ment, supervision willing to obtain c x FTE:	ency and city obje nd Harm Reductio ff in appropriate ex- toval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per Year:	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin opliance and maintain safety ag users required. Associates red. Must hold HIV test coun ob.	effect sched le for ates proto s Deg selor	tive duling an purchasi removal cols. pree with Total
Brief description of job duties Minimum qualifications	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal as. Organizes rem al company, prepa- prience working with ment, supervision willing to obtain c	ency and city obje nd Harm Reductio ff in appropriate ex loval of biohazard are reports for com th injection and dru experience prefer ertification on the x Months per	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin apliance and maintain safety ing users required. Associated red. Must hold HIV test coun ob.	effect scheid le for lates proto s Deg selor	tive duling an purchasi removal cols. pree with Total
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750.00	alignment with ag other HIV/AIDS a and temporary stat as. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c <u>x FTE:</u> 0.15	ency and city obje nd Harm Reductio ff in appropriate ex- loval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per Year: 12	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin apliance and maintain safety ing users required. Associated red. Must hold HIV test coun ob.	effect sched le for ates proto s Deg selor	tive duling an purchasi removal cols. pree with Total
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750.00 Associate Direct	alignment with ag other HIV/AIDS a and temporary stat as. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street H	ency and city obje nd Harm Reductio ff in appropriate ex- loval of biohazard are reports for com th injection and dru- experience prefer ertification on the X Months per Year: 12 RC	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	tive duling an purchasi removal cols. ree with Total 15,56
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develo	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operation verdose prevention poment; managing	ency and city obje nd Harm Reductio ff in appropriate ex- loval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per Year: 12 RC ons (schedules, lo g health educators n, vein care) and n syringe access, d	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin apliance and maintain safety ing users required. Associated red. Must hold HIV test coun ob.	effect scher le for ates proto s Deg selor \$ f 6th \$	tive duling an purchas removal cols. ree with Total 15,56 Street ing healt on, and
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4: Brief description of job duties:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat as. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operation performent; managing V/HCV testing and ience working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio fi nappropriate ex- loval of biohazard are reports for com th injection and dri- experience prefer ertification on the <u>x Months per</u> <u>Year:</u> 12 <u>RC</u> ons (schedules, lo g health educators n, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and th	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin opliance 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; con eferrals; program design, fac isposal, and lounge space; li nd providing crisis intervention y marginalized, or homeless p ing motivational interviewing poles, experience doing health eatment. Supervisory experience	effect schee le for ates proto s Deg selor \$ f 6th \$ f 6th \$ f 6th \$ nduct ilitation pon sup popul and a educe	tive duling an purchasi removal cols. ree with Total 15,56 Street ing healt on, and opport. ations strong cation.
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat as. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operation center; supervision verdose prevention opment; managing v/HCV testing and ience working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio fi nappropriate ex- loval of biohazard are reports for com th injection and dri- experience prefer ertification on the <u>x Months per</u> <u>Year:</u> 12 <u>RC</u> ons (schedules, lo g health educators n, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and th	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin opliance 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; con eferrals; program design, fac isposal, and lounge space; li nd providing crisis intervention y marginalized, or homeless p ing motivational interviewing poles, experience doing health eatment. Supervisory experience	effect schee le for ates proto s Deg selor \$ f 6th \$ f 6th \$ f 6th \$ nduct ilitation pon sup popul and a educe	tive duling an purchasi removal cols. ree with Total 15,56 Street ing healt on, and opport. ations strong cation.
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4: Brief description of job duties:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat as. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operation center; supervision verdose prevention opment; managing v/HCV testing and ience working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio fi nappropriate ex- loval of biohazard are reports for com th injection and dri- experience prefer ertification on the <u>x Months per</u> <u>Year:</u> 12 <u>RC</u> ons (schedules, lo g health educators n, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and th gement experience	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin opliance 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 interris; con eferrals; program design, fac isposal, and lounge space; li nd providing crisis intervention y marginalized, or homeless j sing motivational interviewing oles, experience doing health eatment. Supervisory experie e required.	effect schee le for ates proto s Deg selor \$ f 6th \$ f 6th \$ f 6th \$ nduct ilitation nking on sup oopul and a educe	tive duling an purchasi removal cols. ree with Total 15,56 Street ing health on, and opport. ations strong cation.

Staff Position 5: Health Educato				
referrals; program	n design, facilitation noe space: linking	on, and curriculum participants to HI	(e.g. overdose prevention, vo development; supports syrin V/HCV testing and linkage to	ge access,
Minimum, 1-3 yea	ars experiencing v	orking with drug u	users. Associates Degree pre adge of HIV/HCV prevention/	ferred. Harm tx preferred.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	7.75	12	1	\$ 437,97

HIV/HCV testing	nclude health edu and linkage to car reach; overseeing	e; harm reduction	ose prevention; veln care; ref counseling) through mobile a outreach volunteers; and prov	and
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):	Total
\$56,513.00	0.50	12	1	\$ 28,257

referrals; support	s syringe access, ge to care; and pro	disposal, and lour	 (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo supply inventory. 	s to HIV/HCV
Minimum, 1-3 year Minimum qualifications: reduction, motiva			users. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:		Annualized (if less than 12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,51

referrals; suppor testing and linka Street sites; sup Brief description of job duties: maintenance and	rts syringe access, ge to care; and pro- ervises volunteers d transport. ears experiencing v	disposal, and lour oviding crisis interv and assists Inver vorking with drug u	I (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo nory Team Lead with supply i users. Associates Degree pre adde of HIV/HCV prevention/	s to HIV/HCV bile and 6th nventory ferred. Harm
			Annualized (if less than	
Annual Salary	x FTE:	Year:	12 months):	Total

Total FTE: 11.55

Total Salaries: \$ 699,520

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	53,513.00
Retirement	\$	13,361.00
Medica	5	72,260.00
Dental		
Unemployment Insurance	\$	3,638.00
Disability Insurance	\$	28,470.00
Paid Time Off		
Other (Workers Comp):	\$	3,638.00
	Total Fringe Benefit:	174,880

Total Fringe Benefit: 174,880

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 874,400

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$2,000/mo x 12 mo.	2000	24,000
Rent-6th Street	Prorated rent @ \$432.25/mo x 12 mo.	432.25	5,187
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	37,187

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exchange incentives, 1,260 incentives @ \$5each =\$6,300.		6,300
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total A	laterials & Supplies:	24 864

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorial svc \$1,735.17/mo.	1,735.17/mo	20,822
Insurance	Prorated gen liability, hazard and auto insurance.	208.34	2,500
	To	tal General Operating:	23,322

Total General Operating: 23,322

TOTAL OPERATING EXPENSES: 85,373

TOTAL DIRECT COSTS: 959,773

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.		

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	95,977

TOTAL EXPENSES: 1,055,750

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-3g 1 23-24 1/29/2020

				SERVICE MO	DES			
Personnel Expenses		Syringe A Servic	es	Lounge Se			2.1	1
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, Behavioral Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	7,781	50%	7,782	50%		0%	15,56
Associate Director, 6th Street HRC	1.00	39,199	50%	39,199	50%	÷.	0%	78,39
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	349,760	50%	349,760	50%	10.00	0%	699,520
Fringe Benefits	25.00%	87,440	50%	87,440	50%		0%	174,880
Total Personnel Expenses		437,200	50%	437,200	50%	-	0%	874,400
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
Total Occupancy		18,594	50%	18,593	50%	-	0%	37,187
Total Materials and Supplies		12,432	50%	12,432	50%	-	0%	24.864
Total General Operating		11,661	50%	11,661	50%		0%	23,322
Total Operating Expenses		42,687	50%	42,686	50%	-	0%	85,373
		479,887	50%	479,886	50%	-1	0%	959,773
Total Direct Expenses							00/	95,977
Total Direct Expenses Indirect Expenses	10.00%	47,988	50%	47,989	50%		0%	00,017
Total Direct Expenses Indirect Expenses TOTAL EXPENSES	10.00%	the second se		47,989 527,875	50% 50%	-	0%	
Indirect Expenses TOTAL EXPENSES		47,988	50%			-		1,055,750
Indirect Expenses	vice Mode	47,988 527,875	50%	527,875				1,055,750

Contractor I	Name San Francisco AIDS Foundation	Appendix #:	B-3g	
	HIV Syringe Access & Disposal Services -			_
Program Na	ame: Harm Reduction Center	Fiscal Year:	23-24	
100 × 1000		- 7 G. (1)		_

Staff Position 1	: V.P Programs				
	structure and pro responsive to the	vision of professio	onal oversight to ci	ement and evaluation of the reate a service delivery conti s, including HIV needs of gay	nuum that is
Brief description of job duties					
Minimum qualifications	also include three demonstrated pro	e years' experience	e in supervisory ca	ess or related disciplines. R apacity, especially in HIV pre avelopment experience.	
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
Annadi Gulary:	\$203,000.00	0.10	12	1	\$ 20,3
Staff Desition 2	Director, Behav	loral Lloolth Com	daga		
Brief description of job duties:	structure and pro responsive to the men.	vision of profession current health an	nal oversight to cr d well-being needs	ement and evaluation of the eate a service delivery contin s, including HIV needs of gay	nuum that is and bisexua
Minimum qualifications:	experience in a s	upervisory capacit	y, especially in HI	ess or related discipline; thre V prevention and demonstrat	
Annual Salary:		x FTE:	Year:	12 months):	Total
Annual Salary.	\$120,000.00	0.05	12	1	\$ 6,0
Staff Position 3:	Provides oversig strategic goals in partnerships with	alignment with ag other HIV/AIDS a	ency and city obje nd Harm Reductio	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for	effective scheduling a
	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard	ctives. Builds and maintains	effective scheduling as le for purchas ates removal
Staff Position 3: Brief description of job duties: Minimum qualifications:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal s. Organizes rem al company, prepa- rience working with ment, supervision	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for com th injection and dru experience prefer ertification on the j	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin ppliance and maintain safety ug users required. Associates red. Must hold HIV test coun job.	effective scheduling at le for purchas ates removal protocols. s Degree with
Brief description of job duties: Minimum qualifications:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c	ency and city obje nd Harm Reductio if in appropriate ex- oval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin ppliance and maintain safety ug users required. Associate red. Must hold HIV test coun lob.	effective scheduling al le for purchas ates removal protocols. s Degree with selor
Brief description of job duties:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal s. Organizes rem al company, prepa- rience working with ment, supervision	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for com th injection and dru experience prefer ertification on the j	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin ppliance and maintain safety ug users required. Associates red. Must hold HIV test coun job.	effective scheduling at le for purchas ates removal protocols. s Degree with
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversigi strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750,00	alignment with ag other HIV/AIDS a and temporary stal s. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c x FTE: 0,15	ency and city obje nd Harm Reductio ff in appropriate ex- oval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per Year: 12	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin ppliance and maintain safety ug users required. Associate red. Must hold HIV test coun lob.	effective scheduling at le for purchas ates removal protocols. s Degree with selor Total
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be \$103,750.00 Associate Direct	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street H	ency and city obje nd Harm Reductio ff in appropriate ex- oval of biohazard are reports for com th injection and dru experience prefer ertification on the X Months per Year: 12 RC	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin pliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months): 1	effective scheduling at le for purchas ates removal protocols. s Degree with selor Total \$ 15,5
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversigi strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years exper program manage certification or be \$103,750,00 Associate Direct Responsibilities in Harm Reduction (e.g. ov curriculum develo	alignment with ag other HIV/AIDS a and temporary stat is. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street H nelude site operati Center; supervisin verdose prevention pment; managing	ency and city obje nd Harm Reductio ff in appropriate ex- oval of biohazard are reports for com th injection and dru- experience prefer ertification on the x Months per Year: 12 RC ons (schedules, lo g health educators n, vein care) and n syringe access, d	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin ppliance and maintain safety ug users required. Associate red. Must hold HIV test coun lob.	effective scheduling at le for purchas ates removal protocols. s Degree with selor Total \$ 15,5 f 6th Street iducting heal ilitation, and hking
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4: Brief description of job duties:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years exper program manage certification or be \$103,750,00 Associate Direct Responsibilities in education (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operati Center; supervisin verdose prevention pment; managing v/HCV testing and ience working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio ff in appropriate ex- oval of biohazard are reports for com th injection and dri- experience prefer ertification on the X Months per Year: 12 RC ons (schedules, lo g health educators h, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and th	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin ppliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months): 1 gistics, QA, programming) of s, volunteers, and interns; co- eferrals; program design, fac isposal, and lounge space; li nd providing crisis intervention y marginalized, or homeless sing motivational interviewing bles, experience doing health eatment. Supervisory experience	effective scheduling at le for purchas ates removal protocols. s Degree with selor Total \$ 15,50 feth Street inducting heal ilitation, and nking on support. populations and strong education.
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years exper program manage certification or be \$103,750,00 Associate Direct Responsibilities in education (e.g. ov curriculum develo participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nclude site operati Center; supervisin verdose prevention pment; managing v/HCV testing and ience working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio fin appropriate ex- oval of biohazard are reports for com th injection and dri- experience prefer ertification on the j <u>x Months per</u> <u>Year:</u> 12 <u>RC</u> ons (schedules, lo g health educ ators n, vein care) and n syringe access, d linkage to care; a drug users, highly red, experience us actices and princip prevention and th gement experience	ctives. Builds and maintains n agencies. Responsible for schange protocol. Responsib waste from sites and coordin ppliance and maintain safety ug users required. Associates red. Must hold HIV test coun job. Annualized (if less than 12 months): 1 gistics, QA, programming) of s, volunteers, and interns; co- eferrals; program design, fac isposal, and lounge space; li nd providing crisis intervention y marginalized, or homeless sing motivational interviewing bles, experience doing health eatment. Supervisory experience	effective scheduling at le for purchas ates removal protocols. s Degree with selor Total \$ 15,50 feth Street inducting heal ilitation, and nking on support. populations and strong education.

referrals; program	nclude conducting n design, facilitation nge 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, 1-3 yea	ars experiencing w	vorking with drug u	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	7.75	12	1	\$ 437,97

Staff Position 6: Mobile Health E	Educator	and the second		and the second
HIV/HCV testing	and linkage to can reach; overseeing	e; harm reduction	ose prevention; vein care; ref counseling) through mobile a utreach volunteers; and prov	bne
	ars experiencing v		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	\$ 28.257

referrals; suppor	include conductin ts syringe access, ge to care; and pro	g health education disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v ige space; linking participants vention support. Supports mo supply inventory. 	s to HI	W/HCV
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):		Total
\$56,513.00	1.00	12	1	\$	56,513

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

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	\$	53,513.00
Retirement	\$	13,361.00
Medical	\$	72,260.00
Dental		
Unemployment Insurance	S	3,638.00
Disability Insurance	\$	28,470.00
Paid Time Off		1.1.1.1.1.1.1.1
Other (Workers Comp):	\$	3,638.00
	Total Fringe Benefit:	174,880

Total Salaries: \$

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 874,400

699,520

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$2,000/mo x 12 mo.	2000	24,000
Rent-6th Street	Prorated rent @ \$432.25/mo x 12 mo.	432.25	5,187
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	37,187

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exchange incentives, 1,260 incentives @ \$5each =\$6,300.		6,300
Group supplies	snacks, t-shirts, etc \$1.000/mo x 12 mo.	1000	12,000
	Tota	I Materials & Supplies:	24,864

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorial svc \$1,735.17/mo.	1,735.17/mo	20,822
Insurance	Prorated gen liability, hazard and auto insurance.	208.34	2,500
	Tot	al Conoral Operating	22 222

Total General Operating: 23,322

TOTAL OPERATING EXPENSES: 85,373

TOTAL DIRECT COSTS: 959,773

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.		95,977

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	95,977

TOTAL EXPENSES: 1,055,750

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 1/29/2020

				SERVICE MO	DES			
Personnel Expenses		Syringe Access Services		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, Behavioral Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	7,781	50%	7,782	50%	-	0%	15,563
Associate Director, 6th Street HRC	1.00	39,199	50%	39,199	50%	-	0%	78,398
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	349,760	50%	349,760	50%	-	0%	699,520
Fringe Benefits 2	25.00%	87,440	50%	87,440	50%	-	0%	174,880
Total Personnel Expenses		437,200	50%	437,200	50%	1	0%	874,400
		Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
Operating Expenses Total Occupancy		Expenditure 18,594	% 50%	Expenditure 18,593	% 50%	xpenditur	%	Contract Total 37,187
Operating Expenses Total Occupancy		the second s		18,593			0%	1 2 1 2 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2
Operating Expenses		18,594	50%	the second se	50%	-		37,187 24,864
Operating Expenses Total Occupancy Total Materials and Supplies		18,594 12,432	50% 50%	18,593 12,432	50% 50%	-	0% 0%	
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses		18,594 12,432 11,661 42,687	50% 50% 50% 50%	18,593 12,432 11,661 42,686	50% 50% 50% 50%	-	0% 0% 0% 0%	37,187 24,864 23,322 85,373
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses	0.00%	18,594 12,432 11,661	50% 50% 50%	18,593 12,432 11,661	50% 50% 50%	*	0% 0% 0%	37,187 24,864 23,322
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses		18,594 12,432 11,661 42,687 479,887	50% 50% 50% 50%	18,593 12,432 11,661 42,686 479,886	50% 50% 50% 50%	*	0% 0% 0% 0%	37,187 24,864 23,322 85,373 959,773
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses 1 TOTAL EXPENSES	0.00%	18,594 12,432 11,661 42,687 479,887 47,988	50% 50% 50% 50% 50%	18,593 12,432 11,661 42,686 479,886 479,889	50% 50% 50% 50% 50%		0% 0% 0% 0% 0%	37,187 24,864 23,322 85,373 959,773 95,977
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	0.00% ce Mode	18,594 12,432 11,661 42,687 479,887 47,988 527,875	50% 50% 50% 50% 50%	18,593 12,432 11,661 42,686 479,886 479,889 527,875	50% 50% 50% 50% 50%	-	0% 0% 0% 0% 0%	37,187 24,864 23,322 85,373 959,773 95,977 1,055,750

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-3h	
	HIV Syringe Access & Disposal Services -			_
Program Name:	Harm Reduction Center	Fiscal Year:	24-25	
10 / 10 · 1 / 11 / 11 / 11 / 11 / 11 / 1				_

Staff Position 1	: V.P Programs &					
	structure and pro	vision of professio	onal oversight to cr	ement and evaluation of the eate a service delivery continues s, including HIV needs of gas	nuum	that is
Brief description of job duties	and the second se	- out of the mount of	e non bonig nood	of moleculog the fields of ga	~ ~ ~	Conduit
	Master's degree also include three	e years' experienc	e in supervisory ca	ess or related disciplines. R apacity, especially in HIV pre evelopment experience.		
Minimum qualifications						
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
,	\$203,000.00	0.10	12	1	\$	20,30
					-	_
Staff Position 2:	Director, Behav			ement and evaluation of the	-	201
Brief description of job duties:	responsive to the men. Masters degree in	current health an n psychology, soci	d well-being needs al sciences, busin	eate a service delivery contin s, including HIV needs of gay ess or related discipline; thre V prevention and demonstrat	and e yea	bisexual ars
Minimum gualifications:			ment experience.			ogram
			x Months per	Annualized (if less than		20.5
Annual Salary:	£400.000.00	x FTE:	Year:	12 months):		Total
	\$120,000.00	0.05	12	1	\$	6,00
Staff Position 3:	Provides oversigh strategic goals in partnerships with training full-time a	alignment with ag other HIV/AIDS a and temporary stat	ency and city obje nd Harm Reductio if in appropriate ex	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for cchange protocol. Responsib waste from sites and coordin	effec sche le for	tive duling and purchasi
Staff Position 3: Brief description of job duties:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage	alignment with ag other HIV/AIDS a and temporary stat es. Organizes rem al company, prepa ritence working with ment, supervision	ency and city obje nd Harm Reductio ff in appropriate ex oval of biohazard are reports for com th injection and dru experience prefer	ctives. Builds and maintains n agencies. Responsible for cchange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun	effect schei le for lates proto	tive duling an purchasi removal cols. ree with
	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experies program manage certification or be	alignment with ag other HIV/AIDS a and temporary stat es. Organizes rem al company, prepa ritence working with ment, supervision	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for com th injection and dru experience prefer ertification on the j	ctives. Builds and maintains n agencies. Responsible for the change protocol. Responsible waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun- tob.	effect schei le for lates proto	tive duling an purchasi removal cols. ree with
Brief description of job duties: Minimum qualifications:	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experies program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal es. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c	ency and city obje nd Harm Reductio if in appropriate ex- toval of biohazard are reports for com th injection and dru- experience prefer ertification on the j x Months per	ctives. Builds and maintains n agencies. Responsible for tochange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob.	effec schei le for ates proto s Deg selor	tive duling an purchasi removal cols. gree with
Brief description of job duties:	Provides oversigl strategic goals in partnerships with training full-time a exchange supplie with waste remov Three years expe program manage certification or be	alignment with ag other HIV/AIDS a and temporary stat es. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c x FTE:	ency and city obje nd Harm Reductio ff in appropriate ex- toval 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 coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun tob. Annualized (if less than 12 months):	effect scheid le for lates proto s Deg selor	tive duling an purchasi removal cols. ree with Total
Brief description of job duties: Minimum qualifications:	Provides oversight strategic goals in partnerships with training full-time a exchange supplie with waste remove Three years experies program manage certification or be	alignment with ag other HIV/AIDS a and temporary stal es. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c	ency and city obje nd Harm Reductio if in appropriate ex- toval of biohazard are reports for com th injection and dru- experience prefer ertification on the j x Months per	ctives. Builds and maintains n agencies. Responsible for tochange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun ob.	effec schei le for ates proto s Deg selor	tive duling an purchasi removal cols. ree with Total
Brief description of job duties: Minimum qualifications: Annual Salary:	Provides oversiglistrategic goals in partnerships with training full-time a exchange supplie with waste removing the vaste remo	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working wit ment, supervision willing to obtain c x FTE: 0.15	ency and city obje nd Harm Reductio if in appropriate ex- oval 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 n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun tob. Annualized (if less than 12 months):	effect scheid le for lates proto s Deg selor	tive duling an purchasi removal cols. ree with Total
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4:	Provides oversiglistrategic goals in partnerships with training full-time a exchange supplie with waste remov Three years experies program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develop	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa rience working with ment, supervision willing to obtain c <u>x FTE:</u> 0.15 tor, 6th Street H nelude site operati Center; supervisin verdose preventior pment; managing	ency and city obje nd Harm Reductio if in appropriate ex- ioval 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 h, vein care) and n syringe access, d	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun tob. Annualized (if less than 12 months):	effec scheide for aates proto s Deg selor \$ f 6th \$	tive duling an purchasi removal cols. ree with Total 15,56 Street ing healt on, and
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4: Brief description of job duties:	Provides oversiglistrategic goals in partnerships with training full-time a exchange supplie with waste remov Three years experience program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develop participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street H nclude site operati Center; supervisin verdose prevention pment; managing v/HCV testing and ence working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio if in appropriate ex- ioval 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 n syringe access, d l linkage to care; a drug users, highly red, experience us actices and princip prevention and tro	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib 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): 1 gistics, QA, programming) of s, volunteers, and interns; col efernals; program design, fac isposal, and lounge space; lii nd providing crisis intervention y marginalized, or homeless p ing motivational interviewing poles, experience doing health eatment. Supervisory experience	effect scheile for ates proto s Deg selor \$ f 6th \$ f 6th \$ illitation nking on sup popul and educ	tive duling an purchasi removal cols. ree with Total 15,56 Street ing health on, and opport. ations strong cation.
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4:	Provides oversiglistrategic goals in partnerships with training full-time a exchange supplie with waste remov Three years experience program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develop participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street H nclude site operati Center; supervisin verdose prevention pment; managing v/HCV testing and ence working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio if in appropriate ex- ioval 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 n syringe access, d l linkage to care; a drug users, highly red, experience us actices and princip prevention and tro	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib 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): 1 gistics, QA, programming) of s, volunteers, and interns; col efernals; program design, fac isposal, and lounge space; lii nd providing crisis intervention y marginalized, or homeless p ing motivational interviewing poles, experience doing health eatment. Supervisory experience	effect scheile for ates proto s Deg selor \$ f 6th \$ f 6th \$ illitation nking on sup popul and educ	tive duling an purchasi removal cols. ree with Total 15,56 Street ing health on, and opport. ations strong cation.
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 4: Brief description of job duties:	Provides oversiglistrategic goals in partnerships with training full-time a exchange supplie with waste remov Three years experience program manage certification or be \$103,750.00 Associate Direct Responsibilities in Harm Reduction (education (e.g. ov curriculum develop participants to HIV Five years' experi required. Associa understanding of Understanding of	alignment with ag other HIV/AIDS a and temporary stat s. Organizes rem al company, prepa- rience working with ment, supervision willing to obtain c x FTE: 0.15 tor, 6th Street H nclude site operati Center; supervisin verdose prevention pment; managing v/HCV testing and ence working with tes Degree prefer harm reduction pr HIV/HCV disease	ency and city obje nd Harm Reductio fin appropriate ex- loval 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 n syringe access, d l linkage to care; a drug users, highly red, experience us actices and princip prevention and tru gement experience	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib 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): 1 sistics, QA, programming) of s, volunteers, and interns; con eferrals; program design, fac isposal, and lounge space; lii nd providing crisis intervention y marginalized, or homeless j ing motivational interviewing oles, experience doing health eatment. Supervisory experie e required.	effec scheile for ates proto s Deg selor \$ f 6th \$ f 6th \$ illitation nking pon sup popul and educence,	tive duling and purchasi removal cols. ree with Total 15,56 Street ing health on, and oport. ations strong cation.

	nclude conducting		(e.g. overdose prevention, verdose preventin, verdose prevention, verdose prevention, verdose prevention,		
	nge space; linking	participants to HI	V/HCV testing and linkage to	~	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
			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

HIV/HCV testing	include health edu and linkage to car reach; overseeing	e; harm reduction	ose prevention; vein care; ref counseling) through mobile a putreach volunteers; and prov	and
Minimum, 1-3 ye Minimum gualifications: reduction, motiva			sers. Associates Degree preedoe 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; support	include conductin is syringe access, ge to care; and pro	g health education disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo supply inventory. 	s to HIV/HCV
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):	Total
\$56,513.00	1.00	12	1	\$ 56,513

referrals; support testing and linkag Street sites; support Brief description of job duties: maintenance and	ts syringe access, ge to care; and pro ervises volunteers I transport.	disposal, and lour oviding crisis interv ; and assists Inven	(e.g. overdose prevention, v ige space; linking participants /ention support. Supports mo itory Team Lead with supply i	s to HIV bile and inventor	//HCV d 6th ry
Minimum, 1-3 yes Minimum gualifications: reduction, motiva			users. Associates Degree pre adge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year			otal
\$56,513.00	1.00	12	1	\$	56.5

Total FTE: 11.55

Total Salaries: \$ 699,520

1b) EMPLOYEE FRINGE BENEFITS:

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

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Disability Insurance	\$	28,470.00		
Paid Time Off	Contraction of the second	100		
Other (Workers Comp):	\$	3,638.00		
	Total Fringe Benefit:	174 880		

Total Fringe Benetit: 1/4,880

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 874,400

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
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Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exchange incentives, 1,260 incentives @ \$5each =\$6,300.		6,300
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total N	laterials & Supplies:	24 864

General Operating:

Expense Item	Brief Description	Rate	Cost
Janitorial	Prorated Monthly janitorial svc \$1,735.17/mo.	1,735.17/mo	20,822
Insurance	Prorated gen liability, hazard and auto insurance.	208.34	2,500
		otal General Operating:	23 322

Total General Operating: 23,322

TOTAL OPERATING EXPENSES: 85,373

TOTAL DIRECT COSTS: 959,773

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.		95,977

4

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	95,977

TOTAL EXPENSES: 1,055,750

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-3i 1 25-26 1/29/2020

				SERVICE MO	DES			1
Personnel Expenses		Syringe A Servic	es	Lounge Se	a design of the second s			
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, Behavioral Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
Director, SAS	0.15	7,781	50%	7,782	50%		0%	15,563
Associate Director, 6th Street HRC	1.00	39,199	50%	39,199	50%	-	0%	78,398
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	349,760	50%	349,760	50%	-	0%	699,520
Fringe Benefits	25.00%	87,440	50%	87,440	50%	1	0%	174,880
Total Personnel Expenses		437,200	50%	437,200	50%		0%	874,400
Operating Expenses	-	Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
		18,594	50%	18,593	50%		0%	37,187
Total Occupancy							00/	24.864
Total Occupancy Total Materials and Supplies		12,432	50%	12,432	50%		0%	24,004
Total Occupancy Total Materials and Supplies Total General Operating	-		50% 50%	12,432 11,661	50% 50%	-	0%	23,322
Total Materials and Supplies		12,432	the second s					
Total Materials and Supplies Total General Operating Total Operating Expenses		12,432 11,661	50%	11,661	50%	-	0%	23,322
Total Materials and Supplies Total General Operating	10.00%	12,432 11,661 42,687	50% 50%	11,661 42,686	50% 50%	-	0% 0%	23,322 85,373
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses	10.00%	12,432 11,661 42,687 479,887	50% 50%	11,661 42,686 479,886	50% 50%	-	0% 0%	23,322 85,373 959,773
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES		12,432 11,661 42,687 479,887 47,988	50% 50% 50% 50%	11,661 42,686 479,886 47,989	50% 50% 50%	-	0% 0% 0%	23,322 85,373 959,773 95,977
Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	vice Mode	12,432 11,661 42,687 479,887 47,988 527,875	50% 50% 50% 50%	11,661 42,686 479,886 47,989 527,875	50% 50% 50%	-	0% 0% 0%	23,322 85,373 959,773 95,977 1,055,750

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-3i
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	HIV Syringe Access & Disposal Services -		
Program Name:	Harm Reduction Center	Fiscal Year:	25-26

structure and pro	ensuring the imple vision of profession	onal oversight to cr	ement and evaluation of the preate a service delivery conting, including HIV needs of gav	nuum that is
Brief description of job duties:		e nen een g neee	, menerang tint mesere er gey	
			ess or related disciplines. Re ty, especially in HIV prevention	
demonstrated pro			velopment experience.	
demonstrated pro Minimum qualifications:				
				Total

structure a	le for ensuring the imple nd provision of profession	mentation, managonal oversight to cr	ement and evaluation of the eate a service delivery conting s, including HIV needs of gay	nuum that is
	in a 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 s. Organizes rem	ency and city obje nd Harm Reductio ff in appropriate ex noval of biohazard	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for cchange protocol. Responsibl waste from sites and coordin npliance and maintain safety	effective scheduling and le for purchasir ates removal
Three years expe	ment, supervision	experience prefer	ig users required. Associates red. Must hold HIV test coun	•
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$103,750.00	0.15	12	1	\$ 15.56

Reduction Cente education (e.g. o curriculum devel Brief description of job duties:	include site operat or; supervising hea overdose preventio opment; managing IV/HCV testing and	ions (schedules, lo th educators, volu n, vein care) and r syringe access, d I linkage to care; a	gistics, QA, programming) o nteers, and interns; conducti eferrals; program design, fac isposal, and lounge space; li and providing crisis interventi y marginalized, or homeless	ng hea ilitatio inking on sup	alth n, and oport.
understanding of	harm reduction pr f HIV/HCV disease	actices and princip prevention and tr	sing motivational interviewing bles, experience doing health eatment. Supervisory experie e required.	educa	ation.
Annual Salary	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$78,398.00	1.00	12	1	\$	78,398

Stan Position 5: He	ealth Educato	r			
ref	ferrals; program sposal, and lou	n design, facilitatio	n, and curriculum participants to HIV	(e.g. overdose prevention, ve development; supports syrin V/HCV testing and linkage to	ge access,
Mi				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,
Staff Position 6: Mo	obile Health E	Educator			
HI ou Brief description of job duties: su Mi	V/HCV testing a treach; oversed pport. nimum, 1-3 yea	and linkage to care eing a team of stre ars experiencing w	e; harm reduction eet outreach volunt orking with drug u	se prevention; vein care; refi counseling) through mobile a leers; and providing crisis int sers. Associates Degree pre	and encampr ervention ferred. Harm
Minimum qualifications: rec	auction, motiva	x FTE:	x Months per Year:	Annualized (if less than 12 months):	x preferred. Total
and the second se	\$56,513.00	0.50	12	1	\$ 28,3
1.1.1.1	and the second states of			ge space; linking participants ention support. Supports mol	Contraction and the second second
				supply inventory.	Dile and 6th
Brief description of job duties: Str	reet sites; supe nimum, 1-3 yea	rvises volunteers; ars experiencing w	and coordinates s orking with drug us skills, and knowle	sers. Associates Degree pref dge of HIV/HCV prevention/t	ferred. Harm
Brief description of job duties: Str Min Minimum qualifications: red Annual Salary:	reet sites; supe nimum, 1-3 yea duction, motiva	rvises volunteers; ars experiencing w tional interviewing x FTE:	and coordinates s orking with drug us skills, and knowle x Months per Year:	sers. Associates Degree prei dge of HIV/HCV prevention/t Annualized (if less than 12 months);	ferred. Harm x preferred. Total
Brief description of job duties: Str Min Minimum qualifications: red Annual Salary:	reet sites; supe nimum, 1-3 yea	ervises volunteers; ars experiencing w tional interviewing	and coordinates s orking with drug us skills, and knowled x Months per	sers. Associates Degree pref dge of HIV/HCV prevention/t Annualized (if less than	ferred. Harm x preferred.
Brief description of job duties: Str Min Minimum qualifications: red Annual Salary: Staff Position 8: Inv Re reference	reet sites; supe nimum, 1-3 yea duction, motivat \$56,513.00 ventory Assoc asponsibilities i errals; supports sting and linkag reet sites; supe	rvises volunteers; ars experiencing w tional interviewing x FTE: 1.00 ciate/Health Educ nclude conducting s syringe access, e to care; and pro rvises volunteers;	and coordinates s orking with drug us skills, and knowle x Months per Year: 12 ator health education disposal, and loun- viding crisis interve	sers. Associates Degree prei dge of HIV/HCV prevention/t Annualized (if less than 12 months);	ferred. Harm x preferred. Total \$ 56, ein care) and to HIV/HCV bile and 6th
Brief description of job duties: Str Min Minimum qualifications: red Annual Salary: Staff Position 8: Inv Re ref tes Str Brief description of job duties: ma	reet sites; supe nimum, 1-3 yea duction, motivat \$56,513.00 ventory Assoc asponsibilities i errals; supports sting and linkag reet sites; supe intenance and nimum, 1-3 yea	x FTE: 1.00 x FTE: 1.00 x ftealth Educ nclude conducting s syringe access, of to care; and pro- rvises volunteers; transport. ars experiencing w	and coordinates s orking with drug us skills, and knowled x Months per Year: 12 ator health education disposal, and loun- viding crisis intervi and assists Inven orking with drug us skills, and knowled	sers. Associates Degree prei dge of HIV/HCV prevention/t Annualized (if less than 12 months): 1 (e.g. overdose prevention, vi- ge space; linking participants ention support. Supports mol- tory Team Lead with supply i sers. Associates Degree pref dge of HIV/HCV prevention/t:	ferred. Harm x preferred. Total \$ 56, bin care) and to HIV/HCV bile and 6th nventory ferred. Harm
Brief description of job duties: Str Min Minimum qualifications: red Annual Salary: Staff Position 8: Inv Re ref tes Str Brief description of job duties: ma Min Minimum qualifications: red Annual Salary:	reet sites; supe nimum, 1-3 yea duction, motivat \$56,513.00 ventory Assoc asponsibilities i errals; supports sting and linkag reet sites; supe intenance and nimum, 1-3 yea	x FTE: 1.00 x FTE: 1.00 x ftealth Educ nclude conducting s syringe access, of to care; and pro- rvises volunteers; transport. ars experiencing w	and coordinates s orking with drug us skills, and knowled x Months per Year: 12 ator health education disposal, and louny viding crisis intervi and assists Inven orking with drug us	sers. Associates Degree prei dge of HIV/HCV prevention/t Annualized (if less than 12 months): 1 (e.g. overdose prevention, vi ge space; linking participants ention support. Supports mol tory Team Lead with supply i sers. Associates Degree pref	ferred. Harm x preferred. Total \$ 56, bin care) and to HIV/HCV bile and 6th nventory ferred. Harm

1b) EMPLOYEE FRINGE BENEFITS:

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

	and the second sec
\$	53,513.00
5	13,361.00
\$	72,260.00
\$	3,638.00
	28,470.00
\$	3,638.00
Total Fringe Benefit:	174,880
	\$ \$ \$ \$ \$

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 874,400

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent -Warehouse	\$2,000/mo x 12 mo.	2000	24,000
Rent-6th Street	Prorated rent @ \$432.25/mo x 12 mo.	432.25	5,187
Building Maint	Prorated maintenance cost @ \$166.67/mo.	166.67	2,000
Utilities	\$500/mo x 12 mo.	500	6,000
		Total Occupancy:	37,187

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$547/mo.	\$547/mo	6,564
Incentives	exchange incentives, 1,260 incentives @ \$5each =\$6,300.		6,300
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total	Materials & Supplies:	24.864

General Operating:

	Expense Item	Brief Description	Rate	Cost
	Janitorial	Prorated Monthly janitorial svc \$1,735.17/mo.	1,735.17/mo	20,822
	Insurance	Prorated gen liability, hazard and auto insurance.	208.34	2,500
-			Total General Operating:	23,322

TOTAL OPERATING EXPENSES: 85,373

TOTAL DIRECT COSTS: 959,773

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.		95,977

Indirect Rate: 10.00% TOTAL INDIRECT COSTS: 95,977

TOTAL EXPENSES: 1,055,750

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-4a 1 20-21 1/29/2020

		-		SERVICE	MODES			
		Syringe Di	sposal		-			
Personnel Expenses		Service H	lours		-			-
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
Manager, Syringe Clean Up	2.00	140.000	100%		0%		0%	140.000
Inventory & Logistics Coordinator	0.80	37,622	100%	-	0%	-	0%	37,622
Associate Syringe Clean Up	5.60	227,483	100%	-	0%	-	0%	227.483
Syringe Sweeps Mgr. Disposal, Mobile & C	0.25	23,882	100%	-	0%	-	0%	23.882
Associate, Syringe Clean Up - Mobile	1.00	54,537	100%	-	0%	-	0%	54,537
			0%		0%	1 ······	0%	
			0%		0%		0%	
			0%		0%		0%	
Total FTE & Total Salaries	9.65	483,524	100%	-	0%		0%	483,524
Fringe Benefits	30.00%	145,057	100%	-	0%		0%	145,057
Total Personnel Expenses		628,581	100%		0%	-	0%	628,581
Total Total And			10070		470		0.70	
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Tota
Total Occupancy		31,752	100%		0%	-	0%	31,752
Total Materials and Supplies		8,800	100%		0%	-	0%	8.800
Total General Operating		19,400	100%		0%	1	0%	19,400
Total Staff Travel			0%		0%	-	0%	
Consultants/Subcontractor:			0%		0%	-	0%	-
Other (specify):		-	0%	-	0%	-	0%	-
			0%		0%		0%	-
			0%		0%		0%	
			0%	1	0%		0%	-
			0%		0%		0%	-
		*	0%		0%		0%	
Total Operating Expenses		59,952	100%	•	0%		0%	59,952
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenses		Lapenditure	0%	Experidicule	0%	Experiorure	0%	Sonnact Total
Capital Expenditure 2			0%		0%		0%	
Total Capital Expenses		-	0%		0%	-	0%	-
Total Capital Expenses		1	070		070	<u> </u>	070	<u>I</u>
Total Direct Expenses		688,533	100%		0%		0%	688,533
Indirect Expenses	15.00%	103,280	100%	-	0%		0%	103,280
TOTAL EXPENSES	100	791,813	100%	•	0%		0%	791,813
Units of Service (UOS) per Service	vice Mode	4,368			-			4,368
Cost Per Unit of Service by Service		181.28	-			1.1		1,000
(NOC) per Sen		N/A	-					N/A

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-4a
	HIV Syringe Access & Disposal Services -		
Program Name:	Syringe Sweeps	Fiscal Year:	20-21
		a substantia a series a	

	ge Clean Up			
	ules and coordin	nates clean-up a	nbers. Ensures adherence ctivities; and completes re	
	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		the second s	
Driver's License Minimum qualifications: drugs and one			ence working with people eams.	who inject
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.00	2.00	12	1	\$ 140,00
Staff Position 2: Inventory & Log				
			s, scheduling, coordination	
Brief description of job duties: administrative, a			and the second of the second o	
Minimum qualifications: Driver's License	a. Tyear or more	a of experience v	vorking with people who in	ject drugs.
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$47,028.00	0.80	12	1	\$ 37,62
and hot spots. A	ge clean up effor Adheres to safet	y protocols and p	per disposal in priority neig procedures. Disseminates	safe disposa
Conducts syring and hot spots. A information to co Brief description of job duties: accurately.	ge clean up effor Adheres to safet ommunity memb	y protocols and poers during clear	procedures. Disseminates -ups. Documents disposa	safe disposa efforts
Conducts syring and hot spots. A information to co Brief description of job duties: accurately.	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clear ce working or vol	orocedures. Disseminates -ups. Documents disposa unteering with substance	safe disposa efforts
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m	ge clean up effor Adheres to safet ommunity memb	y protocols and poers during clear ce working or vol arm reduction pr	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms.	safe disposa efforts
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clear ce working or vol	orocedures. Disseminates -ups. Documents disposa unteering with substance	safe disposa efforts
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m	ge clean up effor Adheres to safet ommunity memb nonths experienc lations, and/or h	y protocols and p pers during clear ce working or vol arm reduction pr x Months per	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms. Annualized (if less than	safe disposa i efforts users,
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60	y protocols and pers during clean we working or vol arm reduction pr x Months per Year: 12	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months); 1	safe disposa l efforts users, Total
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal,	y protocols and pers during clean we working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months); 1	safe disposa efforts users, Total \$ 227,48
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob	y protocols and p pers during clean we working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and	Annualized (if less than 12 months); 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	safe disposa efforts users, Total \$ 227,48 Includes
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob	y protocols and p pers during clean we working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months); 1	safe disposa efforts users, Total \$ 227,48 Includes
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob ealth educators,	y protocols and p pers during clean we working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and , Syringe Clean I	Annualized (if less than 12 months): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	safe disposa efforts users, Total \$ 227,48 Includes ry
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob realth educators, se years supervision	y protocols and pers during clean e working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean I sing staff. Minim	Annualized (if less than 12 months): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	safe disposa efforts users, Total \$ 227,48 Includes ry
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators. Brief description of job duties:	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob realth educators, se years supervision	y protocols and pers during clean e working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean I sing staff. Minim d/or are experier	Annualized (if less than 12 months): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	safe disposa efforts users, Total \$ 227,48 Includes ry
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators. Brief description of job duties:	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob realth educators, se years supervision	y protocols and pers during clean e working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean I sing staff. Minim	Annualized (if less than 12 months): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	safe disposa efforts users, Total \$ 227,48 Includes ry

priority neighbo procedures. Di	ile-based syringe orhoods, hot spo sseminates safe	e access and cle ts, and encampn disposal information	an up efforts to ensure pro nents. Adheres to safety p ation and health education ts activities accurately.	rotocols and
Minimum three Minimum qualifications: homeless popu			volunteering with substanc rograms.	e users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$54,537.00	1.00	12	1	\$ 54,537

Total FTE: 9.65 Total Salaries: \$ 483,524

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	36,990
Retirement	\$	23,741
Medical	\$	59,619
Dental		
Unemployment Insurance	5	2,514
Disability Insurance	\$	19,679
Paid Time Off		
Other (workers comp):	\$	2,514
	Total Fringe Benefit:	145,057

Fringe Benefit %: 30.00%

TOTAL OIL LOUDO & FUEL OVER FRUIDE DELIVERING	000 004
TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS	628,581

2) OPERATING EXPENSES:

Occupancy:

	Expense Item	Brief Description	Rate	Cost
	Rent	Touch downspace for sweeps, approx \$1,500/mo for contract staff.	\$1,500/mo	18,000
1	Phone	Desk phone, 2 phone in space @ \$73/phone/mo x 2 x 12.	\$73/phone/mo	1,752
	Phone	Monthly mobile phone charge @ \$100/phone/mo x 10 phones x 12 mo.	\$100/phone/mo	12,000
		The second se	Total Occupancy:	31,752

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Printing & Repro	palm cards and flyers, refer to 311.		1,074
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.	\$602.17/mo	7,226
Supplies	General supplies like pens, pads, etc.		500
	Tota	I Materials & Supplies:	8.800

General Operating:

	Expense Item	Brief Description	Rate	Cost
1.00	Parking	Parking for vehicle, \$800/mo x 12 mo.	\$800/mo	9,600
1	Auto Fuel	fuel for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

	Insurance	Insurance for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400
	Professional services	Service providers like Apple Development, Amazon Web Svc, ancillary maint.		5,000
-			Total General Operating:	10 400

Total General Operating:

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
			- Table 1 75	-
			Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
	Total Con	sultants/Subcontractors:	

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other	r:

TOTAL OPERATING EXPENSES: 59,952

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES:	

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	103,280
	-

Indirect Rate: 15.00% TOTAL INDIRECT COSTS: 103,280

TOTAL EXPENSES: 791,813

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

Appendix # B-4b Page # 1 Fiscal Year(s) 21-22 Funding Notification Date 1/29/2020

		1		SERVICE	MODES	0		
Personnel Expenses		Syringe Di Service I						
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salarles	% FTE	Contract Totals
Manager, Syringe Clean Up	2.00	140.000	100%	Calaries	0%	Galaries	0%	140.000
Inventory & Logistics Coordinator	0.80	37,622	100%		0%		0%	37.622
Associate, Svringe Clean Up	5.60	227,483	100%	-	0%		0%	227,483
Syringe Sweeps Mgr. Disposal, Mobile & C	0.25	23,882	100%	1	0%		0%	23.882
Associate, Syringe Clean Up - Mobile	1.00	54.537	100%	-	0%	-	0%	54,537
Noodiala, ayninga alaan ap maana	1.00	01,007	0%		0%		0%	01,007
			0%		0%		0%	
		-	0%		0%		0%	
Total FTE & Total Salaries	9.65	483.524	100%	1 .	0%	-	0%	483,524
	0.00%	145,057	100%		0%	-	0%	145.057
Total Personnel Expenses	0.0070	628,581	100%		0%	-1	0%	628,581
Total Personner Expenses		020,001	10070	1	0 70	1	070	020,301
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy	-	31,752	100%		0%	-	0%	31,752
Total Materials and Supplies		8,800	100%		0%	-	0%	8.800
Total General Operating		19,400	100%		0%	-	0%	19,400
Total Staff Travel		-	0%	-	0%		0%	
Consultants/Subcontractor:		-	0%		0%	-	0%	
Other (specify):			0%	-	0%	-	0%	
			0%		0%		0%	
			0%		0%		0%	-
			0%		0%		0%	-
			0%		0%		0%	-
			0%	· · · · · · · · · · · · · · · · · · ·	0%		0%	
Total Operating Expenses		59,952	100%	-	0%	-	0%	59,952
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1		anperiariare	0%	Experiantare	0%	-	0%	Sona dor Total
Capital Expenditure 2	_		0%		0%		0%	-
Total Capital Expenses			0%	-	0%	-	0%	
						n1		
Total Direct Expenses	. Und	688,533	100%	-	0%	-	0%	688,533
	5.00%	103,280	100%		0%		0%	103,280
TOTAL EXPENSES		791,813	100%	-	0%	-	0%	791,813
Units of Service (UOS) per Service	e Mode	4,368	-		-	- 1	-	4.368
Cost Per Unit of Service by Service		181.28	-	1.1.1				4,000
		N/A	-		-			N/A
(NOC) per Service								

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-4b	
	HIV Syringe Access & Disposal Services -			
Program Name:	Syringe Sweeps	Fiscal Year:	21-22	
		and the second se		_

	ge Clean Up			
	ules and coordin	nates clean-up a	nbers. Ensures adherence ctivities; and completes re	
	e. Minimum of th	ree years experi	ence working with people eams.	who inject
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.00	2.00	12	1	\$ 140,00
Staff Position 2: Inventory & Log				_
			s, scheduling, coordination	
Brief description of job duties: administrative, a		And and a second s		-
Minimum qualifications: Driver's License	e. 1 year or more	e of experience w	vorking with people who in	ject drugs.
		x Months per	Annualized (if less than	
Annual Salary:	X FTE:	Year:	12 months):	Total
\$47,028.00	0.80	12	1	\$ 37,62
the second se				
and hot spots. A	ge clean up effor Adheres to safet	y protocols and p	per disposal in priority neig procedures. Disseminates	safe disposa
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean ce working or vol	procedures. Disseminates -ups. Documents disposa unteering with substance	safe disposa l efforts
Conducts syring and hot spots. A information to co Brief description of job duties: accurately.	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean ce working or vol	procedures. Disseminates -ups. Documents disposa unteering with substance	safe disposa l efforts
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul	ge clean up effor Adheres to safet ommunity memb nonths experienc lations, and/or h	y protocols and p pers during clean ce working or vol arm reduction pr x Months per	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms.	safe disposa l efforts users,
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary:	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean ce working or vol arm reduction pr	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms.	safe disposa l efforts users, Total
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul	ge clean up effor Adheres to safet community memb nonths experienc lations, and/or h x FTE:	y protocols and p pers during clean ce working or vol arm reduction pr x Months per Year:	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months):	safe disposa l efforts users, Total
Conducts syring and hot spots. A information to co Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal,	y protocols and p pers during clean arm reduction pr x Months per Year: 12 Mobile & Outrea	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months): 1	safe disposa l efforts users, Total \$ 227,48
Conducts syring and hot spots. A information to ca Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob	y protocols and p pers during clean ce working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and	orocedures. Disseminates -ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months): 1	safe disposa l efforts users, Total \$ 227,48 Includes
Conducts syring and hot spots. A information to ca Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob ealth educators, se years supervise	y protocols and p pers during clean arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean (sing staff. Minim	Annualized (if less than 12 months): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	safe disposa l efforts users, <u>Total</u> \$ 227,48 Includes ry
Conducts syring and hot spots. A information to ca Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators. Brief description of job duties:	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob ealth educators, se years supervise	y protocols and p pers during clean arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean (sing staff. Minim	Annualized (if less than 12 months): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	safe disposa l efforts users, <u>Total</u> \$ 227,48 Includes ry

priority neight procedures. [bile-based syringe borhoods, hot spo Disseminates safe	e access and cle ts, and encampn disposal informa	an up efforts to ensure pro nents. Adheres to safety p ation and health education ts activities accurately.	rotocols and
Minimum thre Minimum qualifications: homeless por			volunteering with substanc rograms.	e users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$54,537.00	1.00	12	1	\$ 54,537

Total FTE: 9.65 Total Salaries: \$ 483,524

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	36,990
Retirement	\$	23,741
Medical	\$	59,619
Dental		
Unemployment Insurance	\$	2,514
Disability Insurance	\$	19,679
Paid Time Off	-	
Other (workers comp):	\$	2,514
	Total Fringe Benefit:	145,057

Fringe Benefit %: 30.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 628,581

2) OPERATING EXPENSES:

Occupancy:

Expense Ite	em Brief Description	Rate	Cost
Rent	Touch downspace for sweeps, approx \$1,500/mo for contract staff.	\$1,500/mo	18,000
Phone	Desk phone, 2 phone in space @ \$73/phone/mo x 2 x 12.	\$73/phone/mo	1,752
Phone	Monthly mobile phone charge @ \$100/phone/mo x 10 phones x 12 mo.	\$100/phone/mo	12,000
		Total Occupancy:	31.752

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Printing & Repro	paim cards and flyers, refer to 311.	1	1,074
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.	\$602.17/mo	7,226
Supplies	General supplies like pens, pads, etc.		500
	Totz	al Materials & Supplies:	8.800

General Operating:

Expense Item	Brief Description	Rate	Cost
 Parking	Parking for vehicle, \$800/mo x 12 mo.	\$800/mo	9,600
Auto Fuel	fuel for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

Insurance	Insurance for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400
Professional services	Service providers like Apple Development, Amazon Web Svc, ancillary maint.		5,000
			10.100

Total General Operating:

19,400

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		-		
		4	Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			-
		1	
-	Total Cor	sultants/Subcontractors:	

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	

TOTAL OPERATING EXPENSES: 59,952

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
		S: -
	TOTAL DIRECT COST	rs: 688,533

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	103,280

V	Indirect Rate:	15.00%
	TOTAL INDIRECT COSTS:	103,280

TOTAL EXPENSES: 791,813

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16 - 6/30/26 Funding Source General Fund Appendix # E Page # Fiscal Year(s) 23 Funding Notification Date 1/29

B-4c 1 22-23 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

			NODES	SERVICE N		Longer		
				1		Syringe Di Service H		Personnel Expenses
Contract Total	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	FTE	Position Titles
140,000	0%		0%		100%	140,000	2.00	Manager, Syringe Clean Up
37 622	0%		0%	-	100%	37,622	0.80	Inventory & Logistics Coordinator
227,483	0%	-	0%		100%	227,483	5.60	Associate, Syringe Clean Up
23,882	0%	· · · · · · · ·	0%		100%	23,882	0.25	Syringe Sweeps Mgr. Disposal, Mobile & C
54,537	0%	4	0%	-	100%	54,537	1.00	Associate, Syringe Clean Up - Mobile
	0%	· · · · · · · · · · · · · · · · · · ·	0%	· · · · · · · · · · · · · · · · · · ·	0%			
1	0%		0%		0%			
1	0%	-	0%	-	0%	P		
483,524	0%	-1	0%	-	100%	483,524	9.65	Total FTE & Total Salaries
145,057	0%	-	0%		100%	145,057	30.00%	Fringe Benefits
628,581	0%		0%		100%	628,581		Total Personnel Expenses
	-					11		
Contract Tota	%	Expenditure	%	Expenditure	%	Expenditure		Operating Expenses
31,752	0%	-	0%		100%	31,752		Total Occupancy
8,800	0%		0%		100%	8,800		Total Materials and Supplies
19,400	0%	-	0%		100%	19,400		Total General Operating
	0%		0%		0%	-		Total Staff Travel
	0%	· ·	0%		0%			Consultants/Subcontractor:
	0%		0%		0%	-		Other (specify):
	0%	-	0%	-	0%			and the second sec
	0%		0%	-	0%			
	0%		0%	-	0%			
	0%	-	0%		0%			
i bai	0%		0%	1.	0%			
59,952	0%	1	0%		100%	59,952	_	Total Operating Expenses
Contract Total	%	Expenditure	%	Expenditure	%	Expenditure	1	Capital Expenses
	0%		0%	-	0%			Capital Expenditure 1
-	0%		0%		0%			Capital Expenditure 2
	0%		0%	•	0%			Total Capital Expenses
	0.01	-	00/ 1		10000	000 500		
688,533	0%		0%	-	100%	688,533	15.000	Total Direct Expenses
103,280	0%		0%	-	100%	103,280	15.00%	Indirect Expenses
791,813	0%	•	0%	•	100%	791,813		TOTAL EXPENSES
4,368		- [-	4,368	vice Mode	Units of Service (UOS) per Service
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						181.28	vice Mode	Cost Per Unit of Service by Service
N/A	-				-			(NOC) per Sen

t.

Contractor Name	Contractor Name San Francisco AIDS Foundation		B-4c
	HIV Syringe Access & Disposal Services -		10.00
Program Name:	Syringe Sweeps	Fiscal Year:	22-23

	ge Clean Up			
	ules and coordin	nates clean-up a	nbers. Ensures adherence ctivities; and completes re	
and the set of the set	e. Minimum of th	ree years experi	ence working with people eams.	who inject
			1	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.00	2.00	12	1	\$ 140,0
Staff Position 2: Inventory & Log	istics Coordinat	10		
Supports the m	anagers with log	istics, operation	s, scheduling, coordination	
Brief description of job duties: administrative,	and inventory/su	pply manageme	nt. Conducts street clean-	up.
Minimum qualifications: Driver's License	e. 1 year or more	of experience w	vorking with people who in	ject drugs.
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$47,028.00	0.80	12	1	\$ 37,6
and hot spots. A	ge clean up effor Adheres to safet	y protocols and p	per disposal in priority neig procedures. Disseminates	safe dispos
Conducts syring and hot spots. / information to c Brief description of job duties: accurately.	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean	procedures. Disseminates -ups. Documents disposa	safe dispos l efforts
Conducts syring and hot spots. / information to c Brief description of job duties: accurately.	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean ce working or vol	orocedures. Disseminates I-ups. Documents disposa unteering with substance	safe dispos l efforts
Conducts syring and hot spots. / information to c Brief description of job duties: accurately. Minimum of 6 m	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean ce working or vol	orocedures. Disseminates I-ups. Documents disposa unteering with substance	safe dispos l efforts
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary:	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE:	y protocols and p eers during clean ee working or vol arm reduction pr x Months per Year:	orocedures. Disseminates I-ups. Documents disposa unteering with substance ograms.	safe dispos l efforts users, Total
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popu	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h	y protocols and p pers during clean we working or vol arm reduction pr x Months per	orocedures. Disseminates I-ups. Documents disposa unteering with substance ograms.	safe dispos l efforts users,
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popu Annual Salary: \$40,622.00	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60	y protocols and pers during clean even working or vol arm reduction pr x Months per Year: 12	orocedures. Disseminates i-ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months): 1	safe dispos l efforts users, Total
Conducts syring and hot spots. / information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popu Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates an supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob	y protocols and pers during clean even working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and	orocedures. Disseminates i-ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months): 1	safe dispos l efforts users, Total \$ 227,4 Includes
Conducts syring and hot spots. A information to c Brief description of job duties: Minimum of 6 m Minimum qualifications: homeless popu Annual Salary: S40,622.00 Staff Position 4: Syringe Sweeps Coordinates an supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob health educators are years supervision	y protocols and pers during clean e working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean I sing staff. Minim	orocedures. Disseminates i-ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months): 1 ach d syringe disposal efforts. Jp Managers, and Invento um three years of experier	safe dispos l efforts users, Total \$ 227,4 Includes ry
Conducts syring and hot spots. A information to c accurately. Minimum of 6 m Minimum qualifications: homeless popu Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates an supervision of h Coordinators. Brief description of job duties:	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob health educators are years supervision	y protocols and pers during clean e working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean I sing staff. Minim	orocedures. Disseminates i-ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months): 1 ach d syringe disposal efforts. Jp Managers, and Invento um three years of experier	safe dispos l efforts users, Total \$ 227,4 Includes ry

priority neighbo procedures. Dis	rhoods, hot spot sseminates safe	s, and encampn disposal informa	an up efforts to ensure pro- nents. Adheres to safety p ation and health education ts activities accurately.	rotocols and
Minimum three Minimum qualifications: homeless popu			olunteering with substanc ograms.	e users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$54,537.00	1.00	12	1	\$ 54,537

Total FTE: 9.65 Total Salaries: \$ 483,524

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	36,990
Retirement	\$	23,741
Medical	\$	59,619
Dental		
Unemployment Insurance	\$	2,514
Disability Insurance	\$	19,679
Paid Time Off		
Other (workers comp):	\$	2,514
	Total Fringe Benefit:	145,057

Fringe Benefit %: 30.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:	628,581

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Touch downspace for sweeps, approx \$1,500/mo for contract staff.	\$1,500/mo	18,000
Phone	Desk phone, 2 phone in space @ \$73/phone/mo x 2 x 12.	\$73/phone/mo	1,752
Phone	Monthly mobile phone charge @ \$100/phone/mo x 10 phones x 12 mo.	\$100/phone/mo	12,000
		Total Occupancy:	31,752

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Printing & Repro	palm cards and flyers, refer to 311.		1,074
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.	\$602.17/mo	7,226
Supplies	General supplies like pens, pads, etc.		500
	Tota	al Materials & Supplies:	8,800

General Operating:

	Expense Item	Brief Description	Rate	Cost
	Parking	Parking for vehicle, \$800/mo x 12 mo.	\$800/mo	9,600
1	Auto Fuel	fuel for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

		Total General Operating:	19,400
Professional services	Service providers like Apple Development, Amazon Web Svc, ancillary maint.		5,000
Insurance	Insurance for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		and the second		-
				-
			Total Staff Trave	1-

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
	Total Con	sultants/Subcontractors:	

Other:

Brief Description	Rate	Cos
	1	-
	T.4.100	1
	Brief Description	Brief Description Rate

TOTAL OPERATING EXPENSES: 59,952

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES:	- 20

4) INDIRECT COSTS

Amount		
103,280		

	Indirect Rate:	15.00%
1	TOTAL INDIRECT COSTS:	103,280

TOTAL EXPENSES: 791,813 Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16 - 6/30/26 Funding Source General Fund

Appendix # B-4d Fiscal Year(s) Funding Notification Date 1 1/29/2020

23-24

	SERVICE MODES							
Personnel Expenses		Syringe Di Service H						
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Manager, Syringe Clean Up	2.00	140,000	100%	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	0%		0%	140,000
Inventory & Logistics Coordinator	0.80	37.622	100%		0%	-	0%	37,622
Associate, Syringe Clean Up	5.60	227,483	100%	-	0%	-	0%	227.483
Syringe Sweeps Mgr. Disposal, Mobile & C	0.25	23,882	100%	-	0%	-	0%	23,882
Associate, Syringe Clean Up - Mobile	1.00	54,537	100%		0%	-	0%	54,537
			0%		0%		0%	
			0%	1	0%		0%	
		-	0%	-	0%	· ·	0%	
Total FTE & Total Salaries	9.65	483,524	100%	-	0%		0%	483,524
Fringe Benefits 30	.00%	145,057	100%	-	0%	-	0%	145,057
Total Personnel Expenses		628,581	100%	4	0%		0%	628,581
				11 11				-
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		31,752	100%		0%	-	0%	31.752
Total Materials and Supplies		8,800	100%	1	0%	-	0%	8,800
Total General Operating		19,400	100%	1	0%	-	0%	19,400
Total Staff Travel		-	0%	· · · · ·	0%	-	0%	-
Consultants/Subcontractor:			0%		0%		0%	-
Other (specify):		-	0%	-	0%	-	0%	-
		ſ	0%		0%		0%	-
			0%		0%	1	0%	-
			0%		0%	· · · · · · · · · · · · · · · · · · ·	0%	-
			0%	· · · · · · · · · · · · · · · · · · ·	0%		0%	-
And the second sec			0%		0%		0%	1
Total Operating Expenses		59,952	100%		0%	-	0%	59,952
Capital Expenses	1	Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1		-	0%	-	0%		0%	-
Capital Expenditure 2			0%		0%		0%	
Total Capital Expenses			0%	•	0%	-	0%	-
Total Direct Expenses		688,533	100%	-	0%	-	0%	688,533
	.00%	103,280	100%	-	0%	1	0%	103,280
TOTAL EXPENSES		791,813	100%	•	0%	•	0%	791,813
Units of Service (UOS) per Service	Mode	4,368				- 1		4,368
Cost Per Unit of Service by Service Mode		181.28	-		-	100 C (100 C		
(NOC) per Service		N/A						N/A
Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-4d					
-----------------	--	--------------	-------					
	HIV Syringe Access & Disposal Services -							
Program Name:	Syringe Sweeps	Fiscal Year:	23-24					

1a) SALARIES

Staff Position 1: Manager, Syrin	ige Clean Up			
	lules and coordin	nates clean-up a	nbers. Ensures adherence ctivities; and completes re	
Driver's License Minimum qualifications: drugs and one			ence working with people eams.	who inject
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.00	2.00	12	1	\$ 140,00
Staff Position 2: Inventory & Loo	istics Coordinat	or		
	anagers with log	jistics, operation	s, scheduling, coordination nt. Conducts street clean-	
Minimum qualifications: Driver's License	e. 1 year or more	e of experience v	vorking with people who in	ject drugs.
	- FTF-	x Months per Year:	Annualized (if less than 12 months):	Total
Annual Salary:	x FTE:	Teal.	12 monutoj.	Total

Staff Position 3: Associate, Syri Conducts syrin		rts to ensure pro	per disposal in priority nei	ghborhoods
			procedures. Disseminates n-ups. Documents disposa	
		ZANTA DELET	States a second and the second second	
			unteering with substance	users,
Minimum qualifications: homeless popu	lations, and/or h	arm reduction pr	ograms.	
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
\$40,622.00	5.60	12	1	\$ 227,48

	health educators		d syringe disposal efforts. Up Managers, and Invento	
			um three years of experiencing homelessness.	nce working
			Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total

priority neighbo procedures, Dis	rhoods, hot spo sseminates safe	ts, and encampri disposal information	an up efforts to ensure pro- nents. Adheres to safety p ation and health education ts activities accurately.	rotocols and
Minimum three Minimum qualifications: homeless popu			olunteering with substanc ograms.	e users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$54,537.00	1.00	12	1	\$ 54,537

Total FTE: 9.65 Total Salaries: \$ 483,524

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost		
Social Security	\$	36,990	
Retirement	s	23,741	
Medical	5	59,619	
Dental			
Unemployment Insurance	S	2,514	
Disability Insurance	\$	19,679	
Paid Time Off			
Other (workers comp):	\$	2,514	
	Total Fringe Benefit:	145,057	

Fringe Benefit %: 30.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 628,581

2) OPERATING EXPENSES:

Occupancy:

Expe	ense Item	Brief Description	Rate	Cost
	Rent	Touch downspace for sweeps, approx \$1,500/mo for contract staff.	\$1,500/mo	18,000
F	hone	Desk phone, 2 phone in space @ \$73/phone/mo x 2 x 12.	\$73/phone/mo	1,752
F	hone	Monthly mobile phone charge @ \$100/phone/mo x 10 phones x 12 mo.	\$100/phone/mo	12,000
			Total Occupancy:	31,752

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Printing & Repro	palm cards and flyers, refer to 311.		1,074
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.	\$602.17/mo	7,226
Supplies	General supplies like pens, pads, etc.		500
	Tota	al Materials & Supplies:	8,800

General Operating:

Expense Item	Brief Description	Rate	Cost
Parking	Parking for vehicle, \$800/mo x 12 mo.	\$800/mo	9,600
Auto Fuel	fuel for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

		Total General Operating:	19,400
Professional services	Service providers like Apple Development, Amazon Web Svc, ancillary maint.		5,000
Insurance	Insurance for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		1 T		
		1	Total Staff Trave	1

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			-
	Total Con	sultants/Subcontractors	

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other	1

TOTAL OPERATING EXPENSES: 59,952

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITO	URES: -

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	103,280

Indirect Rate:	15.00%
TOTAL INDIRECT COSTS:	103,280

TOTAL EXPENSES: 791,813 Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16 - 6/30/26 Funding Source General Fund

Page # Fiscal Year(s) Funding Notification Date

Appendix #

B-4e 1 24-25 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	MODES			
Personnel Expenses	-	Syringe Di Service H						
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contrast Total
	2.00	140,000	100%	Salaries	0%	Salaries	0%	Contract Totals 140,000
Manager, Syringe Clean Up Inventory & Logistics Coordinator	0.80	37,622	100%	-	0%	-	0%	37,622
Associate, Syringe Clean Up	5.60	227,483	100%	-	0%		0%	227,483
Syringe Sweeps Mgr. Disposal, Mobile & C	0.25	23,882	100%	-	0%	-	0%	23.882
Associate, Syringe Clean Up - Mobile	1.00	54,537	100%		0%		0%	54,537
Associate, Synnige Clean Op - Mobile	1.00	54,557	0%		0%		0%	04,001
			0%		0%		0%	
			0%	-	0%	-	0%	
Total FTE & Total Salaries	9.65	483,524	100%		0%		0%	483,524
	30.00%	145,057	100%	-	0%		0%	145.057
Total Personnel Expenses	00.0070	628,581	100%		0%		0%	628,581
Total Personnei Expenses		020,001	100%	1	0%		0%	020,301
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		31,752	100%		0%		0%	31,752
Total Materials and Supplies		8,800	100%		0%	-	0%	8,800
Total General Operating		19,400	100%		0%		0%	19,400
Total Staff Travel		-	0%	-	0%	-	0%	
Consultants/Subcontractor:		-	0%		0%	-	0%	-
Other (specify):		-	0%	-	0%		0%	
			0%		0%		0%	
			0%		0%		0%	-
			0%	1	0%		0%	
and the second s	A		0%	1	0%		0%	-
and the second			0%		0%		0%	
Total Operating Expenses		59,952	100%	-	0%	-	0%	59,952
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1		LApenditure	0%	-	0%	Experiance	0%	Sonador Total
Capital Expenditure 2		-	0%	-	0%		0%	
Total Capital Expenses			0%	-	0%	-	0%	-
				1				
Total Direct Expenses		688,533	100%		0%	· · · ·	0%	688,533
	15.00%	103,280	100%	-	0%		0%	103,280
TOTAL EXPENSES		791,813	100%	-	0%		0%	791,813
Units of Service (UOS) per Servic	ce Mode	4,368	-		-	.1	-	4,368
Cost Per Unit of Service by Service		181.28						.,000
	ce Mode	N/A						N/A

endix #:	B-4e
al Year:	24-25
C	scal Year:

1a) SALARIES

	nge Clean Up				_
protocol; sched	dules and coordin	nates clean-up a	nbers. Ensures adherence ctivities; and completes re		əty
Brief description of job duties: documentation					_
Driver's Licens Minimum qualifications: drugs and one			ence working with people eams.	who inj	ect
T			1		_
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	То	otal
\$70,000.00	2.00	12	1	\$ 1	40,00
Staff Position 2: Inventory & Log	aistics Coordinat	or		-	-
Supports the m	anagers with log	istics, operation	s, scheduling, coordination		
Brief description of job duties: administrative,					
Minimum qualifications: Driver's License	e. 1 year or more	of experience v	vorking with people who in	ject dru	gs.
		x Months per	Annualized (if less than		_
Annual Salary:	x FTE:	Year:	12 months):	To	tal
\$47,028.00	0.80	12	1		37,62
Staff Position 3: Associate, Syri	nge Clean Up				
and hot spots.	Adheres to safety	y protocols and p	per disposal in priority neig procedures. Disseminates -ups. Documents disposa	safe dis	sposa
			unteering with substance i ograms.	users,	
1	1	x Months per	Annualized (if lass than 1		
		X MONUNS DEL	Annualized (IT less than I		
Annual Salary	x FTE:	Year:	Annualized (if less than 12 months):	То	tal
Annual Salary: \$40,622.00	x FTE: 5.60				tal 27,48
\$40,622.00	5.60	Year: 12	12 months): 1		
\$40,622.00 Staff Position 4: Syringe Sweep	5.60 s Mgr. Disposal,	Year: 12 Mobile & Outrea	12 months): 1	\$ 23	27,48
\$40,622.00 Staff Position 4: Syringe Sweep Coordinates an supervision of h Coordinators.	5.60 s Mgr. Disposal, d oversees mobi	Year: 12 Mobile & Outrea ile, outreach, and	12 months): 1	\$ 2:	27,48
\$40,622.00 Staff Position 4: Syringe Sweep Coordinates an supervision of h Coordinators. Brief description of job duties:	5.60 s Mgr. Disposal, d oversees mobi nealth educators,	Year: 12 Mobile & Outrea le, outreach, and Syringe Clean I	12 months): 1 dch d syringe disposal efforts. Jp Managers, and Invento	\$ 2: Includes ry	27,48 s
\$40,622.00 Staff Position 4: Syringe Sweep Coordinates an supervision of h Coordinators. Brief description of job duties:	5.60 s Mgr. Disposal, id oversees mobi nealth educators, ee years supervis	Year: 12 Mobile & Outrea le, outreach, and Syringe Clean I sing staff. Minim	12 months): 1 d syringe disposal efforts. Jp Managers, and Invento	\$ 2: Includes ry	27,48 s
\$40,622.00 Staff Position 4: Syringe Sweep Coordinates an supervision of r Coordinators. Brief description of job duties: Minimum of three	5.60 s Mgr. Disposal, id oversees mobi nealth educators, ee years supervis	Year: 12 Mobile & Outrea le, outreach, and Syringe Clean I sing staff. Minim d/or are experier	12 months): 1 d syringe disposal efforts. Jp Managers, and Invento um three years of experier noing homelessness.	\$ 2: Includes ry	27,48 s
\$40,622.00 Staff Position 4: Syringe Sweep Coordinates an supervision of r Coordinators. Brief description of job duties: Minimum of three	5.60 s Mgr. Disposal, id oversees mobi nealth educators, ee years supervis	Year: 12 Mobile & Outrea le, outreach, and Syringe Clean I sing staff. Minim	12 months): 1 d syringe disposal efforts. Jp Managers, and Invento	\$ 2: Includes ry nce work	s

\$

1

23,882

0.25

\$95,529.00

12

priority neig procedures	nobile-based syringe ghborhoods, hot spo s. Disseminates safe	e access and cle ts, and encampn disposal informa	Mobile an up efforts to ensure pro- nents. Adheres to safety p ation and health education ts activities accurately.	rotocols and
Minimum th Minimum qualifications: homeless			volunteering with substance rograms.	e users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$54,537.0	1.00	12	1	\$ 54,537

Total FTE: 9.65 Total Salaries: \$ 483,524

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost		
Social Security	\$	36,990	
Retirement	\$	23,741	
Medical	\$	59,619	
Dental			
Unemployment Insurance	\$	2,514	
Disability Insurance	\$	19,679	
Paid Time Off			
Other (workers comp):	\$	2,514	
	Total Fringe Benefit:	145,057	

Fringe Benefit %: 30.00%

-	the second se	and the second se
E	TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:	628,581

2) OPERATING EXPENSES:

Occupancy:

 Expense Item	Brief Description	Rate	Cost
 Rent	Touch downspace for sweeps, approx \$1,500/mo for contract staff.	\$1,500/mo	18,000
Phone	Desk phone, 2 phone in space @ \$73/phone/mo x 2 x 12.	\$73/phone/mo	1,752
Phone	Monthly mobile phone charge @ \$100/phone/mo x 10 phones x 12 mo.	\$100/phone/mo	12,000
 		Total Occupancy:	31,752

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Printing & Repro	palm cards and flyers, refer to 311.	1	1,074
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.	\$602.17/mo	7,226
Supplies	General supplies like pens, pads, etc.		500
	Tota	al Materials & Supplies:	8.800

General Operating:

	Expense Item	Brief Description	Rate	Cost
	Parking	Parking for vehicle, \$800/mo x 12 mo.	\$800/mo	9,600
1	Auto Fuel	fuel for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

		Total General Operating:	19,400
Professional services	Service providers like Apple Development, Amazon Web Svc, ancillary maint.		5,000
Insurance	Insurance for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		1.1.2.2.1		
		1	Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
	Total Con	sultants/Subcontractors:	1

Other:

Expense Item	Brief Description	Rate	Cost
			1
		Total Other	

TOTAL OPERATING EXPENSES: 59,952

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURE	S: -

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	103,280

Indirect Rate:	15.00%
TOTAL INDIRECT COSTS:	103,280

TOTAL EXPENSES: 791,813 Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16 - 6/30/26 Funding Source General Fund

Appendix # B-4f Page # Fiscal Year(s) 1 Funding Notification Date 1/29/2020

25-26

UOS COST ALLOCATION BY SERVICE MODE

		10		SERVICE	MODES			1
Personnel Expenses	1	Syringe Di Service H						
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
Manager, Syringe Clean Up	2.00		100%		0%		0%	140,000
Inventory & Logistics Coordinator	0.80		100%	-	0%	-	0%	37,622
Associate, Syringe Clean Up	5.60	227,483	100%	-	0%	-	0%	227,483
Syringe Sweeps Mgr. Disposal, Mobile & C	0.25	23,882	100%	-	0%	-	0%	23,882
Associate, Syringe Clean Up - Mobile	1.00	54,537	100%		0%		0%	54,537
			0%		0%		0%	
			0%	-	0%		0%	
		1.00.00	0%		0%	-	0%	
Total FTE & Total Salaries	9.65	483,524	100%	•	0%	-	0%	483,524
Fringe Benefits	30.00%	145.057	100%	· · · · ·	0%		0%	145,057
Total Personnel Expenses		628,581	100%	-	0%		0%	628,581
	_			A				
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		31,752	100%		0%	-	0%	31,752
Total Materials and Supplies		8,800	100%		0%	-	0%	8,800
Total General Operating		19,400	100%	1	0%	-	0%	19,400
Total Staff Travel		-	0%		0%	-	0%	-
Consultants/Subcontractor:		-	0%		0%		0%	
Other (specify):		-	0%	-	0%		0%	
			0%		0%		0%	-
			0%		0%		0%	1
			0%		0%		0%	-
		-	0%		0%		0%	
			0%		0%		0%	-
Total Operating Expenses		59,952	100%	-	0%	-	0%	59,952
Constant Francisco		Francis dia	0/	[Free an all forms]	0/	Free on diterral	0/	
Capital Expenses Capital Expenditure 1		Expenditure	% 0%	Expenditure	% 0%	Expenditure	%	Contract Total
Capital Expenditure 1 Capital Expenditure 2			0%		0%	-	0%	
Total Capital Expenses			0%		0%		0%	-
Total Capital Expenses		-	0%	· · · ·	0%	•	0%	
Total Direct Expenses	and some the	688,533	100%		0%	-	0%	688,533
Indirect Expenses	15.00%	103,280	100%		0%	1	0%	103,280
TOTAL EXPENSES		791,813	100%	-	0%	-	0%	791,813
Units of Service (UOS) per Service	vice Mode	4,368				-	-	4.368
Cost Per Unit of Service by Serv							-	4,308
(NOC) per Service by S		N/A			-	-		N/A
								IN/PA

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-4f
	HIV Syringe Access & Disposal Services -		
Program Name:	Syringe Sweeps	Fiscal Year:	25-26

1a) SALARIES

Staff Position 1: Manager, Syrin	ge clean op			
	lules and coordin	nates clean-up a	mbers. Ensures adherence ctivities; and completes re	
	e. Minimum of th	ree years experi	ence working with people eams.	who inject
		1.2722.275		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.00	2.00	12	1	\$ 140,00
				1.00
Staff Position 2: Inventory & Log				
Supports the m Brief description of job duties: administrative, a			s, scheduling, coordination	
Minimum qualifications: Driver's License				
winimum qualifications. Driver's License	a. I year of more	or experience w	vorking with people who in	ject uruga.
		x Months per	Annualized (if less than	1.1
Annual Salary:	x FTE:	Year:	12 months):	Total
\$47,028.00	0.80	12	1	\$ 37,62
	ge clean up effor		per disposal in priority neig procedures. Disseminates	
Conducts syring and hot spots. A information to c	ge clean up effor Adheres to safet	y protocols and p		safe disposa
Conducts syring and hot spots. A information to c Brief description of job duties: accurately.	ge clean up effor Adheres to safet ommunity memb	y protocols and p ers during clean	procedures. Disseminates	safe disposa l efforts
Conducts syring and hot spots. A information to c Brief description of job duties: accurately.	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean se working or vol	procedures. Disseminates i-ups. Documents disposa unteering with substance	safe disposa l efforts
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean be working or vol arm reduction pr	procedures. Disseminates i-ups. Documents disposa unteering with substance i ograms.	safe disposa l efforts
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul	ge clean up effor Adheres to safet ommunity memb nonths experienc lations, and/or h	y protocols and p pers during clean we working or vol arm reduction pr x Months per	orocedures. Disseminates i-ups. Documents disposa unteering with substance ograms.	safe disposa l efforts users,
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary:	ge clean up effor Adheres to safet ommunity memb	y protocols and p pers during clean be working or vol arm reduction pr	procedures. Disseminates i-ups. Documents disposa unteering with substance i ograms.	safe disposa l efforts users, Total
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE:	y protocols and p pers during clean we working or vol arm reduction pr x Months per Year:	orocedures. Disseminates i-ups. Documents disposa unteering with substance ograms. Annualized (if less than 12 months):	safe disposa l efforts users, Total
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal,	y protocols and p ers during clean arm reduction pr x Months per Year: 12 Mobile & Outrea	orocedures. Disseminates i-ups. Documents disposa unteering with substance or ograms. Annualized (if less than 12 months): 1	safe disposa l efforts users, <u>Total</u> \$ 227,48
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob	y protocols and p eers during clean ee working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and	orocedures. Disseminates i-ups. Documents disposa unteering with substance or ograms. Annualized (if less than 12 months): 1 ach d syringe disposal efforts.	safe disposa l efforts users, <u>Total</u> \$ 227,48 Includes
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob	y protocols and p eers during clean ee working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and	orocedures. Disseminates i-ups. Documents disposa unteering with substance or ograms. Annualized (if less than 12 months): 1	safe disposa l efforts users, <u>Total</u> \$ 227,48 Includes
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob	y protocols and p eers during clean ee working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and	orocedures. Disseminates i-ups. Documents disposa unteering with substance or ograms. Annualized (if less than 12 months): 1 ach d syringe disposal efforts.	safe disposa l efforts users, <u>Total</u> \$ 227,48 Includes
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob lealth educators	y protocols and p pers during clean e working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea ile, outreach, and Syringe Clean I	orocedures. Disseminates i-ups. Documents disposa unteering with substance or ograms. Annualized (if less than 12 months): 1 ach d syringe disposal efforts.	safe disposa l efforts users, Total \$ 227,48 Includes ry
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators.	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob health educators, se years supervise	y protocols and p eers during clean ee working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea le, outreach, and Syringe Clean I sing staff. Minim	Annualized (if less than 12 months): 1 1 2 2 3 3 4 4 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5	safe disposa l efforts users, Total \$ 227,48 Includes ry
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators. Brief description of job duties:	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob health educators, se years supervise	y protocols and p pers during clean arm reduction pr x Months per Year: 12 Mobile & Outrea le, outreach, and Syringe Clean I sing staff. Minim d/or are experier	Annualized (if less than 12 months): 1 1 2 2 3 3 4 4 4 5 5 7 4 5 7 7 7 7 7 7 7 7 7 7 7 7	safe disposa l efforts users, Total \$ 227,48 Includes ry
Conducts syring and hot spots. A information to c Brief description of job duties: accurately. Minimum of 6 m Minimum qualifications: homeless popul Annual Salary: \$40,622.00 Staff Position 4: Syringe Sweeps Coordinates and supervision of h Coordinators. Brief description of job duties:	ge clean up effor Adheres to safet ommunity memb nonths experience lations, and/or h x FTE: 5.60 s Mgr. Disposal, d oversees mob health educators, se years supervise	y protocols and p eers during clean ee working or vol arm reduction pr x Months per Year: 12 Mobile & Outrea le, outreach, and Syringe Clean I sing staff. Minim	Annualized (if less than 12 months): 1 1 2 2 3 3 4 4 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5	safe disposa l efforts users, Total \$ 227,48 Includes ry

priority neight procedures. I	bile-based syringe porhoods, hot spo Disseminates safe	e access and cle ts, and encampn disposal informa	an up efforts to ensure pro nents. Adheres to safety p ation and health education ts activities accurately.	rotocols and
Minimum thre Minimum qualifications: homeless pop			volunteering with substance rograms.	e users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$54,537.00	1.00	12	1	\$ 54,537

Total FTE: 9.65 Total Salaries: \$ 483,524

1b) EMPLOYEE FRINGE BENEFITS:

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

Cost	
\$	36,990
\$	23,741
\$	59,619
\$	2,514
\$	19,679
\$	2,514
Total Fringe Benefit:	145,057
	\$ \$ \$ \$ \$

Fringe Benefit %: 30.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 628,581

2) OPERATING EXPENSES:

Occupancy:

1	Expense Item	Brief Description	Rate	Cost
	Rent	Touch downspace for sweeps, approx. \$1,500/mo for contract staff.	\$1,500/mo	18,000
	Phone	Desk phone, 2 phone in space @ \$73/phone/mo x 2 x 12.	\$73/phone/mo	1,752
	Phone	Monthly mobile phone charge @ \$100/phone/mo x 10 phones x 12 mo.	\$100/phone/mo	12,000
			Total Occupancy:	31,752

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Printing & Repro	palm cards and flyers, refer to 311.		1,074
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.	\$602.17/mo	7,226
Supplies	General supplies like pens, pads, etc.		500
	Tota	al Materials & Supplies:	8,800

General Operating:

	Expense Item	Brief Description	Rate	Cost
1	Parking	Parking for vehicle, \$800/mo x 12 mo.	\$800/mo	9,600
	Auto Fuel	fuel for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

		Total General Operating:	19,400
Professional services	Service providers like Apple Development, Amazon Web Svc, ancillary maint.		5,000
Insurance	Insurance for vehicle, \$200/mo x 12 mo.	\$200/mo	2,400

Total General Operating:

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
			100000000000000000000000000000000000000	
			Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
		1	
	Total Con	sultants/Subcontractors:	

Other:

Expense Item	Brief Description	Rate	Cost
			1
		Total Other	

TOTAL OPERATING EXPENSES: 59,952

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITU	RES: -

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	103,280
	10-

Indirect Rate: 15.00% TOTAL INDIRECT COSTS: 103,280

> TOTAL EXPENSES: 791,813

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

Appendix # B-5a Page # 1 Fiscal Year(s) Funding Notification Date 1/29/2020

20-21

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	MODES			
Personnel Expenses		Syringe Dispos Weeks - War		Evaluat	ion			-
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Associate, Syringe Clean Up	0.125	5,878	100%	1	0%	200 201	0%	5,878
			0%	2	0%	4	0%	11
			0%	-	0%	×.	0%	
			0%		0%		0%	1
1		1	0%	-]	0%	2	0%	-
			0%		0%		0%	
			0%		0%	· · · · · · · · · · ·	0%	1
			0%	-	0%	-	0%	1
Total FTE & Total Salaries	0.125	5,878	100%	-	0%	-	0%	5,878
Fringe Benefits	0.0%	1	0%	-	0%	-	0%	1
Total Personnel Expenses		5,878	100%	-	0%	•	0%	5,878
O		Europe diturnal	%	Europediture	%	C	%	
Operating Expenses		Expenditure	0%	Expenditure		Expenditure		Contract Total
Total Occupancy		454			0%	-	0%	
Total Materials and Supplies	_	154	100%		0%	-	0%	154
Total General Operating Total Staff Travel		- 71	0% 0%		0% 0%	-	0% 0%	
Consultants/Subcontractor:			0%		0%	-	0%	
Other (specify):			0%		0%	-	0%	
Other (specify):			0%	-	0%			-
1					0%		0%	
			0%		0%		0%	
			0%		0%		0%	
			0%		0%		0%	
Total Operating Expenses		154	100%		0%		0%	154
		-		-				
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1		-	0%	-	0%		0%	-
Capital Expenditure 2			0%		0%		0%	
Total Capital Expenses	_		0%	-	0%	•	0%	-
Total Direct Expenses		6,032	100%		0%		0%	6,032
Indirect Expenses	15.00%	905	100%	-	0%	1 2 1 1	0%	905
TOTAL EXPENSES	Contord S	6,937	100%		0%		0%	6,937
Unite of Capitar (100) C	ine Mad	F0 1						
Units of Service (UOS) per Serv	ice Mode	52	-			-		52
Cost Per Unit of Service by Serv (NOC) per Serv	rice Mode	133.41 N/A		-				N/A
(NOC) per serv	nue mode	14/74						IWA

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-5a
	HIV Syringe Access & Disposal Services -	and the second se	-
Program Name:	Syringe Sweeps War Memorial	Fiscal Year:	20-21

1a) SALARIES

and hot spots. A	ge clean up effo Adheres to safel	ty protocols and	pper disposal in priority nei procedures. Disseminates n-ups. Documents disposa	safe	dispos	
Minimum of 6 m Minimum qualifications: homeless popu			lunteering with substance rograms.	users	s,	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total	
\$47,027.00	0.125	12	1	\$	5,8	378
Old K Decilier D						_
Staff Position 2: Brief description of job duties:						_
Minimum gualifications:						-
				_		_
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total	
			0	\$		
Staff Position 3:						_
Brief description of job duties: Minimum gualifications:				-	_	-
Minimum quaincations.				_	-	-
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	11	Total	Ĩ
			0	\$		
				-		_
Staff Position 4: Brief description of job duties:						_
Minimum qualifications:						_
within during damed long.						-
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	1	Total	
			0	\$	1.00	
				_		_
Staff Position 5: Brief description of job duties:					_	_
Minimum qualifications:				-		_
winimum quaincations.			No. 1997			-
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total	ī
			0	\$		_

Total FTE:

0.125

Total Salaries: \$ 5,878

1b) EMPLOYEE FRINGE BENEFITS:

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

Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (workers comp):	
	Total Falses Develt

Total Fringe Benefit:

Fringe Benefit %: 0.0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 5,878

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost	
		1	1.000	
		Table		
		Total Occupancy:		

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.		154
	Total	Materials & Supplies:	154

General Operating:

Expense Item	Brief Description	Rate	Cost
			1112-12
			1
		1.	1
		21/20/20/20/20	0.0
		Total General Operating	11

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
	the second se	1		
			Total Staff Trave	d.

Total Staff Travel:

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			-
		-	
	Total Con	sultants/Subcontractor	e'

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	
	TOTAL O	PERATING EXPENSES:	15

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES:	

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	905
	1

I

Indirect Rate:	15.00%
TOTAL INDIRECT COSTS:	905

TOTAL EXPENSES: 6,937

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

Appendix # B-5b Page # 1 Fiscal Year(s) 21-22 Funding Notification Date 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

1			AODES	SERVICE N				
			ion	Evaluat		Syringe Dispos Weeks - War		Personnel Expenses
Contract Tota	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	FTE	Position Titles
5,87	0%	1000	0%		100%	5,878	0.125	Associate, Syringe Clean Up
	0%	-	0%	-	0%			
	0%		0%	-	0%			
	0%	-	0%	-	0%			
	0%	-	0%	-	0%		-	
	0%		0%		0%			
	0%		0%		0%		1	
	0%	-	0%	· · · · ·	0%	1		
5,87	0%		0%	-	100%	5,878	0.125	Total FTE & Total Salaries
	0%		0%	-	0%		0.0%	Fringe Benefits
5,87	0%	-	0%		100%	5,878		Total Personnel Expenses
			D/	E				
Contract Tota	%	Expenditure	%	Expenditure	%	Expenditure		Operating Expenses
	0%	-	0%		0%			Total Occupancy
154	0%		0%		100%	154		Total Materials and Supplies
	0%	-	0%		0%			Total General Operating
-	0%		0%		0%			Total Staff Travel
	0%	-	0%		0%			Consultants/Subcontractor
	0%		0%		0%	-		Other (specify):
	0%		0%		0%			
	0%	-	0%		0%			
-	0%		0%		0%			
	0%	· · · · · · · · · · · · · · · · · · ·	0%		0%			
	0%		0%		0%			
154	0%	•	0%	-1	100%	154		Total Operating Expenses
Contract Tota	%	Expenditure	%	Expenditure	%	Expenditure	- 1	Capital Expenses
	0%		0%	-	0%			Capital Expenditure 1
	0%		0%		0%			Capital Expenditure 2
	0%	•	0%	•	0%	•		Total Capital Expenses
6,032	0%		0%	-1	100%	6.032		Total Direct Expenses
905	0%		0%	-	100%	905	15.00%	Indirect Expenses
	0%		0%		100%		10.00%	TOTAL EXPENSES
6,937	0%	•	0%	-1	100%	6,937		IUTAL EXPENSES
52	-			1	-	52		Units of Service (UOS) per Service
Contraction of the local division of the loc				÷	-	133.41		Cost Per Unit of Service by Serv
						N/A		(NOC) per Serv

•

Contractor Name	a San Francisco AIDS Foundation	Appendix #:	B-5b	
	HIV Syringe Access & Disposal Services -		19 miles	-
Program Name:	Syringe Sweeps War Memorial	Fiscal Year:	21-22	
		a second second second second		-

1a) SALARIES

and hot spots.	Adheres to safe	ty protocols and	per disposal in priority nei procedures. Disseminates n-ups. Documents disposa	safe dispos
Minimum of 6 Minimum qualifications: homeless pop			lunteering with substance rograms.	users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$47,027.00	0.125	12	1	\$ 5,8
Staff Position 2:		1.00		_
Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
			0	\$
Minimum qualifications:	0.000	x Months per	Annualized (if less than	1
1		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
			0	\$
Staff Position 4:				
Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
	10 C 10 C		0	\$
Otaff Desilian Fr				
Staff Position 5: Brief description of job duties:				
Minimum qualifications:			Annualized (if less than	_
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total

1b) EMPLOYEE FRINGE BENEFITS:

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

Social Se	Security
Retir	rement
M	Medical
	Dental
Unemployment Insu	urance
Disability Insu	
Paid Tir	
Other (workers o	
	Total Eringo Bonofit

Total Fringe Benefit:

Fringe Benefit %: 0.0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 5,878

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.		154
	Total	Materials & Supplies:	154

General Operating:

Expense Item	Brief Description	Rate	Cost
		Total General Operating:	

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				1
			Do Tes Sterney America	
			Total Staff Trave	1.

Total Staff Travel:

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			1
		-	1
		-	1
	Total Con	eultants/Subcontractor	

Other:

Expense Item	Brief Description	Rate	Cos
		Total Other:	

TOTAL OPERATING EXPENSES: 154

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITUR	RES: -
	TOTAL DIRECT COS	STS: 6.032

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	905
	1

Indirect Rate:	15.00%
TOTAL INDIRECT COSTS:	905

TOTAL EXPENSES: 6,937

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

Appendix # B-5c Page # 1 Fiscal Year(s) Funding Notification Date 1/29/2020

22-23

UOS COST ALLOCATION BY SERVICE MODE

			IODES	SERVICE N				
			ion	Evaluat		Syringe Dispos Weeks - War		Personnel Expenses
Contract Totals	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	FTE	Position Titles
5,878	0%		0%		100%	5,878	0.125	Associate, Syringe Clean Up
	0%	-	0%	-	0%			
	0%	-	0%	-	0%			
	0%	-	0%	-	0%			
	0%		0%	-	0%			
	0%	1	0%		0%			
	0%	1	0%		0%			
	0%	-	0%	•	0%			
5,878	0%		0%	•	100%	5,878	0.125	Total FTE & Total Salaries
10000	0%	-	0%	-	0%		0.0%	Fringe Benefits
5,878	0%	•	0%	-	100%	5,878		Total Personnel Expenses
		-				-		
Contract Total	%	Expenditure	%	Expenditure	%	Expenditure		Operating Expenses
	0%	-	0%		0%			Total Occupancy
154	0%	-	0%		100%	154		Total Materials and Supplies
	0%		0%		0%			Total General Operating
-	0%	-	0%		0%			Total Staff Travel
	0%	-	0%		0%	· · · ·		Consultants/Subcontractor:
	0%		0%		0%			Other (specify):
-	0%		0%		0%			
	0%		0%	-	0%		_	
	0%	-	0%		0%			
-	0%		0%		0%	-		
154	0%		0%		0% 100%	154		Total Operating Expenses
104	070				10070			
Contract Total	%	Expenditure	%	Expenditure	%	Expenditure		Capital Expenses
-	0%		0%	-	0%	-		Capital Expenditure 1
	0%		0%		0%		-	Capital Expenditure 2
-	0%		0%	-1	0%	- · · ·		Total Capital Expenses
6,032	0%		0%		100%	6,032		Total Direct Expenses
905	0%		0%		100%	905	15.00%	Indirect Expenses
6,937	0%		0%		100%	6.937	10.0070	TOTAL EXPENSES
0,001	• /0					0,001		
52		-	-			52		Units of Service (UOS) per Serv
And the second second	1	•		1		133.41	vice Mode	Cost Per Unit of Service by Serv
N/A			and the second s		-	N/A	vice Mode	(NOC) per Serv

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-5c	
	HIV Syringe Access & Disposal Services -			-
Program Name:	Syringe Sweeps War Memorial	Fiscal Year:	22-23	
				-

1a) SALARIES

Staff Position 1: Associate, Syri					
and hot spots.	Adheres to safet	y protocols and	per disposal in priority nei procedures. Disseminates n-ups. Documents disposa	safe	disposa
			lunteering with substance rograms.	user	s,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$47,027.00	0.125	12	1	\$	5,87
Staff Position 2:				_	
Brief description of job duties:					
Minimum qualifications:				-	-
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
			0	\$	
Staff Position 3:					
Brief description of job duties:					
Minimum qualifications:					
		x Months per	Annualized (if less than	_	
Annual Salary:	x FTE:	Year:	12 months):		Total
			0	\$	
Staff Position 4:					
Brief description of job duties: Minimum gualifications:					-
		x Months per	Annualized (if less than	-	
Annual Salary	x FTE:	x Months per Year:	12 months):		Total
	x FTE:			\$	Total
Annual Salary	x FTE:		12 months):		Total
Annual Salary	x FTE:		12 months):		Total
Annual Salary	x FTE:		12 months):		Total
Annual Salary Staff Position 5: Brief description of job duties:	x FTE:	Year:	12 months): 0		Total
Annual Salary Staff Position 5: Brief description of job duties:	x FTE:		12 months):	\$	Total

Total FTE:

0.125

Total Salaries: \$ 5,878

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	COSt
Soci	ial Security
	Retirement
	Medical
	Dental
Unemployment	Insurance
	Insurance
Pai	id Time Off
Other (work	ers comp):
	Total Frings Ponsfit:

Total Fringe Benefit:

Fringe Benefit %: 0.0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 5,878

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
			1
			-
		Total Occupancy:	-

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.		154
	Total	Materials & Supplies:	154

General Operating:

Expense Item	Brief Description	Rate	Cost
		1	-
		Total General Operating	N ⁺

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cos
				1
				-
			Total Staff Trave	

Total Staff Travel:

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
	Total Con	sultants/Subcontractors	

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	
	TOTAL	OPERATING EXPENSES:	15

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES:	•

4) INDIRECT COSTS

Amount
905
1

	Indirect Rate:	15.00%
1	TOTAL INDIRECT COSTS:	905

TOTAL EXPENSES: 6,937

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

Appendix # B-5d Page # 1 Fiscal Year(s) 23-24 Funding Notification Date 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

1	_		NODES	SERVICE N				
-			on	Evaluati		Syringe Dispos Weeks - War	= 1	Personnel Expenses
Contract Total	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	FTE	Position Titles
5,878	0%	· · · · · · · · · · · · · · · · · · ·	0%		100%	5,878	0.125	Associate, Syringe Clean Up
	0%	. · · · · · · · · · · · · · · · · · · ·	0%		0%		1	
	0%		0%	÷ .	0%		1	
	0%	-	0%	-	0%			
	0%		0%		0%			
	0%		0%		0%			
	0%		0%	1	0%			
	0%	-	0%	-	0%		1.	
5,878	0%		0%	-	100%	5,878	0.125	Total FTE & Total Salaries
	0%	-	0%	· · · ·	0%		0.0%	Fringe Benefits
5,878	0%	-	0%	-	100%	5,878		Total Personnel Expenses
Contract Tata	%	Expenditure	%	Expenditure	%	Expenditure		Operating Expenses
Contract Tota	0%		0%	Expenditure	0%	Expenditure		
154	0%		0%		100%	154		Total Occupancy Total Materials and Supplies
104	0%		0%		0%	154		Total General Operating
1	0%		0%		0%	-		Total Staff Travel
	0%	-	0%		0%			Consultants/Subcontractor:
	0%		0%	-	0%			Other (specify):
	0%	-	0%		0%			Other (specify).
	0%		0%		0%			
	0%		0%		0%			
	0%		0%		0%			
-	0%		0%		0%	10000		
154	0%		0%	-	100%	154		Total Operating Expenses
C	%	Francis all the second	%	End an alltring	0/	Europe and the same		0
Contract Tota	0%	Expenditure	0%	Expenditure	% 0%	Expenditure		Capital Expenses Capital Expenditure 1
	0%		0%	-	0%	-		Capital Expenditure 1 Capital Expenditure 2
	0%		0%		0%			
	0%		0%	-	0%			Total Capital Expenses
6,032	0%	-	0%		100%	6,032		Total Direct Expenses
905	0%		0%		100%	905	15.00%	Indirect Expenses
6,937	0%		0%	-	100%	6,937		TOTAL EXPENSES
52		1		-		52	vice Med-	Units of Service (UOS) per Serv
52		-				133.41		
N/A						133.41 N/A	vice Mode	Cost Per Unit of Service by Serv (NOC) per Serv

Contractor Na	ne San Francisco AIDS Foundation	Appendix #:	B-5d
	HIV Syringe Access & Disposal Services -		
Program Nam	e: Syringe Sweeps War Memorial	Fiscal Year:	23-24

1a) SALARIES

and hot spots.	ge clean up effo Adheres to safe	ty protocols and	per disposal in priority nei procedures. Disseminates n-ups. Documents disposa	safe disp	
			lunteering with substance rograms.	users,	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota	al
\$47,027.00	0.125	12	1	\$!	5,871
Staff Position 2:					_
Brief description of job duties:					
Minimum qualifications:					_
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota	ıl
			0	\$	
Staff Position 3: Brief description of job duties: Minimum qualifications:					_
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota	đ
			0	\$	_
Staff Position 4:					-
Brief description of job duties:					
Minimum qualifications:					
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota	1
			0	\$	
Stoff Decking Fr				12.0	_
Staff Position 5: Brief description of job duties:					_
Minimum qualifications:					_
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota	
			0	\$	

Total FTE:

0.125

Total Salaries: \$ 5,878

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	COST
Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (workers comp):	
	Tatal Palace Barrow

Total Fringe Benefit:

Fringe Benefit %: 0.0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 5,878

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
			11-
		-	100
		Total Occupanc	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.		154
	Tatal	Materials & Supplies:	154

General Operating:

Expense Item	Brief Description	Rate	Cos
			1
			-
		Total General Operating	,

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cos
the second s				
				_
			Total Staff Traus	1.

Total Staff Travel:

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			-
			-
		1	
	Total Con	sultants/Subcontractor	e.

Other:

Expense Item	Brief Description	Rate	Cos
		Total Other:	

TOTAL OPERATING EXPENSES: 154

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES:	_
	TOTAL CAPITAL EXPENDITORES:	

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	905

A company of the second	Indirect Rate:	15.00%
TOTAL IN	DIRECT COSTS:	905

TOTAL EXPENSES: 6,937

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

Appendix # E Page # Fiscal Year(s) 2 Funding Notification Date 1/2

B-5e 1 24-25 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

1			NODES	SERVICE I				
-			ion	Evaluat		Syringe Dispos Weeks - War		Personnel Expenses
Contract Tota	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	FTE	Position Titles
5.87	0%		0%		100%	5,878	0.125	Associate, Syringe Clean Up
	0%		0%	-	0%		1.11.11.11.11.11	
	0%	-	0%	-	0%			
1 · · · · · · · · · · · · · · · · · · ·	0%		0%		0%		2	
	0%		0%	-	0%			
	0%		0%	·	0%			
	0%		0%		0%			
	0%		0%		0%	· · · · · · · · · · · · · · · · · · ·	1.1.1.1.1.1	
5,871	0%		0%	•	100%	5,878	0.125	Total FTE & Total Salaries
	0%		0%	-	0%		0.0%	Fringe Benefits
5,871	0%		0%	•	100%	5,878		Total Personnel Expenses
					_			
Contract Tota	%	Expenditure	%	Expenditure	%	Expenditure		Operating Expenses
	0%	1	0%		0%			Total Occupancy
154	0%		0%		100%	154		Total Materials and Supplies
	0%	-	0%		0%			Total General Operating
	0%		0%		0%		Total Staff Travel	
	0%	-	0%	-	0%	-		Consultants/Subcontractor:
	0%		0%	•	0%	-		Other (specify):
	0%		0%		0%			
-	0%		0%	1.000	0%	-		
	0%		0%		0%			
	0%		0%		0%			
154	0%		0% 0%		0% 100%	154		Total Operating Expenses
154	076		0 70		100 /6	154		Total Operating Expenses
Contract Tota	%	Expenditure	%	Expenditure	%	Expenditure	1	Capital Expenses
	0%		0%		0%			Capital Expenditure 1
	0%		0%		0%			Capital Expenditure 2
	0%		0%	· · ·	0%	-		Total Capital Expenses
0.000	00/	1	00/		1000/	0000		Takal Direct Processor
6,032	0%		0%		100%	6,032	15 000/	Total Direct Expenses
905	0%		0%	-	100%	905	15.00%	Indirect Expenses
6,937	0%	•	0%	•	100%	6,937		TOTAL EXPENSES
52	-	• []		1		52	vice Mode	Units of Service (UOS) per Service
02						133.41		Cost Per Unit of Service by Serv
						N/A		(NOC) per Serv

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-5e
	HIV Syringe Access & Disposal Services -	_	
Program Name:	Syringe Sweeps War Memorial	Fiscal Year:	24-25
1 1 1 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1		and the second sec	

1a) SALARIES

Staff Position 1: Associate, Syri				
and hot spots.	Adheres to safe	ty protocols and	per disposal in priority nei procedures. Disseminates n-ups. Documents disposa	safe disposa
	months experien	ce working or vo	lunteering with substance	users.
Minimum qualifications: homeless popul				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$47,027.00	0.125	12	1	\$ 5,87
Staff Position 2:				
Brief description of job duties:				
Minimum qualifications:				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
			0	\$
Staff Position 3:				
Brief description of job duties: Minimum gualifications:				
winimum qualifications.			10 TATE	
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total
			0	\$
Staff Position 4:				-
Brief description of job duties:				
Minimum gualifications:				
		x Months per	Annualized (if less than	12.00
Annual Salary:	x FTE:	Year:	12 months): 0	Total
			U	\$
Staff Position 5:				
Brief description of job duties:				000
Minimum qualifications:				
1		v Monthe ac-	Appualized (if least then	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
Annual Salary:	ATTE.	real,		
			0	\$

Total FTE:

0.125

Total Salaries: \$ 5,878

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost
Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (workers comp):	
	Total Eringe Benefit

Total Fringe Benefit:

Fringe Benefit %: 0.0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 5,878

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cos
	and the second		
		Total Occupanc	V'

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.		154
	Total	Materials & Supplies:	154

General Operating:

Expense Item	Brief Description	Rate	Cost
		Total General Operating:	

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				1.1.
				1
			T-1-1 01 11 T	-

Total Staff Travel:

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
		1	4 4
			-
I	Total Con	sultants/Subcontractors	5: -

Other:

Total Other: -	Expense Item	Brief Description	Rate	Cost
			Total Other:	

TOTAL OPERATING EXPENSES:

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPEND	TURES: -
		COSTS: 6,032

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	905

 Indirect Rate:	15.00%
TOTAL INDIRECT COSTS:	905

TOTAL EXPENSES: 6,937 Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 07/01/16 -06/30/26 Funding Source Work Order

Appendix # B-5f Page # Fiscal Year(s) Funding Notification Date 1

25-26 1/29/2020

UOS COST ALLOCATION BY SERVICE MODE

-			IODES	SERVICE N					
-			ion	Evaluat	al Service Vemorial	Syringe Dispos Weeks - War		Personnel Expenses	
Contract Total	% FTE	Salaries	% FTE	Salaries	% FTE	Salaries	FTE	Position Titles	
5,878	0%		0%		100%	5.878	0.125	Associate, Syringe Clean Up	
	0%	-	0%	-	0%				
	0%	-	0%	-	0%				
	0%	-	0%		0%				
	0%		0%	-	0%				
	0%	11 month	0%		0%	-			
	0%		0%		0%		i		
	0%	-	0%	×	0%	A .	1 - Sector		
5,878	0%	-	0%	-	100%	5,878	0.125	Total FTE & Total Salaries	
	0%	1	0%	-	0%		0%	Fringe Benefits	
5,878	0%		0%	-	100%	5,878		Total Personnel Expenses	
	N	F	of 1	le in l	~ 1				
Contract Tota	%	Expenditure	%	Expenditure	%	Expenditure		Operating Expenses	
	0%	-	0%		0%	154		Total Occupancy	
154	0%		0%		100%	154		Total Materials and Supplies	
	0%	-	0%		0%		Total General Operating		
	0%	-	0%	-	0%		Total Staff Travel		
	0%		0%		0%			Consultants/Subcontractor:	
-	0%	-	0%		0%			Other (specify):	
	0%		0%		0%				
	0%		0%		0%				
	0%		0%		0%				
	0%		0%		0%				
154	0%	-	0%		0% 100%	154		Total Operating Expenses	
Contract Tota	%	Expenditure	%	Expenditure	%	Expenditure		Capital Expenses	
1	0%	NUMBER OF STREET	0%	-	0%			Capital Expenditure 1	
	0%	1	0%		0%			Capital Expenditure 2	
	0%	-	0%	•	0%	····		Total Capital Expenses	
6,032	0%		0%	1	100%	6,032		Total Direct Expenses	
905	0%		0%		100%	905	Indirect Expenses 15.00%		
6,937	0%	-	0%		100%	6,937	10.0070	TOTAL EXPENSES	
52	11	· · · ·	-			52	vice Mode	Units of Service (UOS) per Serv	
		-		•		133.41		Cost Per Unit of Service by Serv	
N/A						N/A	vice Mode	(NOC) per Serv	

Contractor Name	San Francisco AIDS Foundation	Appendix #:	B-5f
	HIV Syringe Access & Disposal Services -		
Program Name:	Syringe Sweeps War Memorial	Fiscal Year:	25-26

1a) SALARIES

Conducts syring and hot spots. /	Adheres to safet	ty protocols and	per disposal in priority nei procedures. Disseminates n-ups. Documents disposa	safe disposa
Minimum of 6 m Minimum qualifications: homeless popu			lunteering with substance rograms.	users,
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$47,027.00	0.125	12	1	\$ 5,87
Staff Position 2:				
Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
			0	\$
Staff Position 3:				
Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
			0	\$
Oto# Desilies 4				_
Staff Position 4: Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
			0	\$

Brief description of job duties: Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
			0	\$

Total FTE:

0.125

Total Salaries: \$ 5,878

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost
Social Security	A
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (workers comp):	
	1 m 1 m ft

Total Fringe Benefit:

Fringe Benefit %: 0.0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 5,878

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Program Supplies	Items include, but not limited to, tongs, bio buckets, gloves, bags, etc.		154
	Total	Materials & Supplies:	154

General Operating:

Expense Item	Brief Description	Rate	Cost
			1
		a here in the second	
		Total General Operating	

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				-
			Total Chaff Total	

Total Staff Travel:

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			1
	Total Con	sultants/Subcontractor	e'

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	

TOTAL OPERATING EXPENSES: 154

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURE	:S: -
	TOTAL DIRECT COST	

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e., FTE, square footage, or other)	Amount
The San Francisco AIDS Foundation has a federally negotiated indirect rate .of 27%. This contract seeks a reimbursement rate of 15% of total direct costs.	905

Indirect Rate:	15.00%
TOTAL INDIRECT COSTS:	905

TOTAL EXPENSES: 6,937

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR MONTHLY DELIVERABLES AND COST REIMBURSEMENT INVOICE

								07/01/	APPEN 2020 - 06	DIX F-1 5/30/202 PAGE
		Contra	ct ID #					h	nvoice Nun	0.000
Contractor: San Francisco AIDS Found	ation	10000	02634						A-1JUL2	20
Address: 1035 Market Street, Suite 40 San Francisco, CA 94103				Co	ntract Pu	rchase (order No:	-		
Telephone: 415-487-3000				6		Funding	Source:	6	eneral F	und
Fax:		CH	EP						cherari	unu
Program Name: HIV Syringe Access and Dis	sposal Se	ervices		D	2000		hority ID:			
ACE Control #:					Proj	act ID-Ac	tivity ID:			
- SC						Invoice	e Period:	07/	1/20 - 07/	/31/20
						FINA	L Invoice		(check it	f Yes)
DELIVERABLES	TOT CONTR UOS		DELIV THIS P UOS			ATE		OF TAL NOC		AINING ERABLES NOC
Syringe Access Services (hrs., City-Wide &	8,012	54.300	000	HOU	000	T	000	noc	8,012	54,300
Syringe Access, Disposal Coordination & Bu	12	N/A			2				12	N/A
			1.0	1.00		100.01			-	
					-	-				
				-		-	-	-		-
T		NOC		NOC		NOC		NOC	11	NOC
Number of Clients for Appendix		54300	· · · · · ·		1	1			1	54.300
EXPENDITURES	BUD	GET	EXPE THIS P			INSES	% BUD	OF		AINING
Total Salaries (See Page B)	\$521,	the second s			1					453.00
Fringe Benefits	\$130,									363.00
Total Personnel Expenses	\$651,	816		_					\$651,8	816.00
Operating Expenses:	COE 1	200		_					COF F	
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$95,6	000		-			-		\$90,0	66.00
Materials and Supplies-(e.g., Office,	\$499.	570		_					\$499	570.00
Postage, Printing and Repro., Program Supplies)	0100,							-		110.00
General Operating-(e.g., Insurance, Staff	\$10,9	916		_	-			_	\$10.9	16.00
Training, Equipment Rental/Maintenance)							1			10.00
Staff Travel - (e.g., Local & Out of Town)	-		-	_				_		
Consultant/Subcontractor	\$620,	838							\$620,8	838.00
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)	-	-			-					
Total Operating Expenses	\$1,226	,990	_		_		1		\$1,226.	990.00
Capital Expenditures							<u> </u>			
TOTAL DIRECT EXPENSES	\$1,878								\$1,878,	
Indirect Expenses	\$187, \$2,066		_	_					\$187,8	
LESS: Initial Payment Recovery	92,000	,007			NOTES				<u> </u> ⊕2,000,	007.00
Other Adjustments (Enter as negative, if appropri	iate)		-	_	10110					

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 403 San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	By: (DPH Authorized Signatory)	Date:
APPENDIX F-1k 07/01/2020 - 06/30/2021 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:	10 11 1 1 1 1 1 1 1	
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal Services	아이아는 아파이가 집 프	
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/20 - 07/31/20
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
		THIS PERIOD	TO DATE	BUDGET	BALANCE
					\$5,700.00
					\$7,000.00
					\$5,308.00
					\$4,815.00
					\$77,813.00
1.00	\$63,705				\$63,705.00
2.00	\$113,026				\$113,026.00
	\$53,944				\$53,944.00
3.40	\$190,142	-		-	\$190,142.00
			1		
-					-
			100 million (100 million)		
				-	-
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-			1		
8 10	\$521 /52				\$521,453.00
	0.75	FTE SALARY 0.05 \$5,700 0.05 \$7,000 0.05 \$7,000 0.05 \$5,308 0.05 \$4,815 0.75 \$77,813 1.00 \$63,705 2.00 \$113,026 0.75 \$53,944 3.40 \$190,142	FTE SALARY THIS PERIOD 0.05 \$5,700 0.05 0.05 \$7,000 0.05 0.05 \$5,308 0.05 0.05 \$4,815 0.75 0.75 \$77,813 1.00 1.00 \$63,705 2.00 2.00 \$113,026 0.75 0.75 \$53,944 3.40 3.40 \$190,142	FTE SALARY THIS PERIOD TO DATE 0.05 \$5,700	FTE SALARY THIS PERIOD TO DATE BUDGET 0.05 \$5,700

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-11
07/01/2020 - 06/30/2021
DACEA

										PAGE
	Sec. 1		act ID #					In	voice Num	
Contractor: San Francisco AIDS Founda		10000	002634						A-1JUL2	0
Address: 1035 Market Street, Suite 40 San Francisco, CA 94103	0	Contract Purchase Order No:					-	_		
San Hansisto, ox 54100				001	uact r ur	unașe c	Auto.	-		
Telephone: 415-487-3000		Funding Source:					G	eneral F	und	
Fax:		CHEP					-		_	
Program Name: HIV Syringe Access and Dis	posal S	ervices	-	De	epartment	ID-Aut	nonty ID:	-		_
					Proje	ct ID-Ad	tivity ID:	1		-
ACE Control #:						10		_	_	
						Invoic	e Period:	07/1	/20 - 07/	31/20
						FINA	Invoice	-	(check if	Yes)
			. Salah		600					
		RACTED	THIS PI		DELIV TO D		% TO			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	uos	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A			-			1	12	N/A
	_	11.1	-		1	-				-
	_	-		_	-		-			
		-	-							-
	-	-								
				5.000				1.02		
	_	NOC		NOC		NOC		NOC	0	NOC
lumber of Clients for Appendix		N/A				-		-	-	N/A
EXPENDITURES			EXPEN	ISES	EXPEN	ISES	%	DF	REMA	INING
	BUD	DGET	THIS PE	RIOD	TO D	ATE	BUD	GET	BAL	ANCE
otal Salaries (See Page B)										
ringe Benefits					-	_		1		_
Total Personnel Expenses	_									
perating Expenses:	600	000			-			_		00.00
Occupancy-(e.g., Rental of Property, Utilities,	\$33,	,000					-		\$33,0	00.00
Building Maintenance Supplies and Repairs)					-		-	-	-	
Materials and Supplies-(e.g., Office,	\$153	,358	-	-			-		\$153,3	58 00
Postage, Printing and Repro., Program Supplies)	\$100	,,000		-	-				\$100,0	00.00
	-						1	-	1	
General Operating-(e.g., Insurance, Staff	\$12,	,000	-		_				\$12,0	00.00
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)			-			-	-		-	
Stan Haver - (e.g., Local & Out of Town)			-		-		1			_
Consultant/Subcontractor										_
04h-12 - 14 - 14 - 14 - 14 - 14 - 14 - 14 -					-		11			_
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)						-			-	
oupones, Founditions)	-		-	-	-		-			
Total Operating Expenses	\$198	358			-				\$198.3	58.00
Capital Expenditures										
OTAL DIRECT EXPENSES	\$198					1			\$198,3	
Indirect Expenses	\$19,						1		\$19,83	
OTAL EXPENSES	\$218	,194	-						\$218,1	94.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if appropri	ate)			-						
REIMBURSEMENT										

I certify that the information provided above is, to the bast 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:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:	A Real Property and the second s	Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-11
07/01/2020 - 06/30/2021
PAGE B

Invoice Number			
A-1JUL20	2	San Francisco AIDS Foundation	Contractor:
		1035 Market Street, Suite 400	Address:
	Contract Purchase Order No:	San Francisco, CA 94103	
General Fund	Fund Source:	415-487-3000	Telephone:
			Fax:
	Department ID-Authority ID:		
	- 이외에 나무는 눈이 많았다. 프	HIV Syringe Access and Disposal Services	Program Name:
	Project ID-Activity ID:		
			ACE Control #:
07/1/20 - 07/31/20	Invoice Period:		
(check if Yes)	FINAL Invoice		

DETAIL PERSONNEL EXPENDITURES

DEDRONNEL		BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
PERSONNEL	FTE	SALARY	THIS PERIOD	TODATE	BUDGET	BALANCE
			-			
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					+	
					-	
OTAL SALARIES				the second s	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:

Title:

APPENDIX F-1m
07/01/2021 - 06/30/2022
PAGEA

		and the second s	ict ID #						voice Nun	nber
Contractor: San Francisco AIDS Found		10000	02634					1	A-1JUL2	21
Address: 1035 Market Street, Suite 4	00				-		12.00			
San Francisco, CA 94103				Con	tract Pu	rchase C	rder No:			
Telephone: 415-487-3000		1	- 1			Funding	Source:	1 6	eneral F	bou
Fax:		CH	FP			r unung	oource.		cherari	unu
				De	partmen	t ID-Auti	nority ID:			-
Program Name: HIV Syringe Access and Dis	sposal S	ervices	_					2	-	
	(m. 1				Proje	oct ID-Ac	tivity ID:	1		
ACE Control #:										_
						Invoice	Period:	07/	1/21 - 07/	31/21
								-	1	
						FINAL	. Invoice		(check in	(Yes)
	TO	TAL	DELIVE	RED	DELIN	ERED	%	OF	REM	AINING
		RACTED	THIS PE			ATE		TAL		RABLES
DELIVERABLES Syringe Access Services (hrs., City-Wide &	UOS 8,012	NOC 54,300	UOS	NOC	UOS	NOC	UOS	NOC	UOS 8,012	NOC
Syringe Access, Disposal Coordination & Bu	12	N/A	-				-	-	12	54,300 N/A
While Access, Disposal Cooldination & Da	14	TW/ S			-		-	-	1	1
		1	i			1000				-
		-	-	-		_	-	-		
		NOC		NOC		NOC		NOC		NOC
lumber of Clients for Appendix		54300	_		-			_	10	54.300
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an and the second s	-	1 01000								
EXPENDITURES	PH		EXPEN			NSES		OF		INING
NEARA 12-0		GET	EXPEN THIS PE			NSES DATE		OF IGET	BAL	
otal Salaries (See Page B)	\$521	GET							BAL	AINING ANCE
otal Salaries (See Page B)	\$521 \$130	GET							BAL \$521,4 \$130,3	
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses:	\$521 \$130 \$651	0GET ,453 ,363 ,816							BAL \$521,4 \$130,3 \$651,8	AINING ANCE 153.00 363.00 316.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$521 \$130 \$651	GET ,453 ,363							BAL \$521,4 \$130,3 \$651,8	AINING ANCE 153.00 363.00
rotal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses:	\$521 \$130 \$651	0GET ,453 ,363 ,816							BAL \$521,4 \$130,3 \$651,8	AINING ANCE 453.00 363.00 316.00
otal Salaries (See Page B) Finge Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$521 \$130 \$651 \$95,	0GET ,453 ,363 ,816 666							BAL \$521,4 \$130,5 \$651,6 \$95,6	ANCE 153.00 363.00 316.00 66.00
Initial 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,	\$521 \$130 \$651	0GET ,453 ,363 ,816 666							BAL \$521,4 \$130,5 \$651,6 \$95,6	AINING ANCE 453.00 363.00 316.00
otal Salaries (See Page B) ringe 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)	\$521 \$130 \$651 \$95, \$499	0GET ,453 ,363 ,816 6666 ,570							BAL \$521,4 \$130,5 \$651,6 \$95,6	ANCE 4NCE 153.00 363.00 316.00 66.00
otal Salaries (See Page B) ringe 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	\$521 \$130 \$651 \$95,	0GET ,453 ,363 ,816 6666 ,570							BAL \$521,4 \$130,5 \$651,8 \$95,6 \$499,5	ANCE 4NCE 153.00 363.00 316.00 66.00
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)	\$521 \$130 \$651 \$95, \$499	0GET ,453 ,363 ,816 6666 ,570							BAL \$521,4 \$130,5 \$651,8 \$95,6 \$499,5	AINING ANCE 153.00 363.00 316.00 66.00 570.00
otal Salaries (See Page B) ringe 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	\$521 \$130 \$651 \$95, \$499	0GET ,453 ,363 ,816 6666 ,570							BAL \$521,4 \$130,5 \$651,8 \$95,6 \$499,5	AINING ANCE 153.00 363.00 316.00 66.00 570.00
otal Salaries (See Page B) Finge 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)	\$521 \$130 \$651 \$95, \$499 \$10,	OGET ,453 ,363 ,816 6666 9,570 916							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9	AINING ANCE 153.00 363.00 316.00 66.00 570.00 16.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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)	\$521 \$130 \$651 \$95, \$499	OGET ,453 ,363 ,816 6666 9,570 916							BAL \$521,4 \$130,5 \$651,8 \$95,6 \$499,5	AINING ANCE 153.00 363.00 316.00 66.00 570.00 16.00
otal Salaries (See Page B) Finge 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)	\$521 \$130 \$651 \$95, \$499 \$10,	OGET ,453 ,363 ,816 6666 9,570 916							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9	AINING ANCE 153.00 363.00 316.00 66.00 570.00 16.00
otal Salaries (See Page B) ringe 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	\$521 \$130 \$651 \$95, \$499 \$10,	OGET ,453 ,363 ,816 6666 9,570 916							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9	AINING ANCE 153.00 363.00 316.00 66.00 570.00 16.00
otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)	\$521 \$130 \$651 \$95, \$499 \$10, \$620	9GET ,453 ,363 ,816 6666 9,570 916 ,838							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9 \$10,9 \$620,6	AINING ANCE 153.00 363.00 316.00 666.00 570.00 16.00 16.00
otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses	\$521 \$130 \$651 \$95, \$499 \$10,	9GET ,453 ,363 ,816 6666 9,570 916 ,838							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9	AINING ANCE 153.00 363.00 316.00 666.00 570.00 16.00 16.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Diperating 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	\$521 \$130 \$651 \$95, \$499 \$10, \$620 \$1,22	OGET ,453 ,363 ,816 6666 916 ,838 6,990							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9 \$10,9 \$620,8 \$620,8 \$1,226	AINING ANCE 153.00 363.00 316.00 66.00 570.00 16.00 338.00 338.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Diperating 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	\$521 \$130 \$651 \$95, \$499 \$10, \$620	PGET ,453 ,363 ,816 6666 9,570 916 ,838 6,990 6,990 8,806							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9 \$10,9 \$620,6	AINING ANCE 153.00 363.00 316.00 66.00 570.00 16.00 16.00 338.00 990.00 806.00
otal Salaries (See Page B) Finge 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 Other - (Meals, Audil, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$521 \$130 \$651 \$95, \$499 \$10, \$620 \$1,22 \$1,87	JOGET ,453 ,363 ,816 666 ,570 916 ,838 6,990 8,806 ,881							BAL \$521, \$130,3 \$651,4 \$95,6 \$499,5 \$10,9 \$10,9 \$620,8 \$620,8 \$1,226 \$1,878,9	AINING ANCE 153.00 363.00 316.00 66.00 570.00 16.00 16.00 338.00 990.00 806.00 81.00

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:

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- 1	JU	e.	

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1m 07/01/2021 - 06/30/2022 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:			
		Department ID-Authority ID:	
Program Name:	HIV Syringe Access and Disposal Services		
		Project ID-Activity ID:	
ACE Control #:			
		Invoice Period:	07/1/21 - 07/31/21
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

DEDSONNEL	11-22	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,700		1		\$5,700.00
Dir. Behavioral Health Svc	0.05	\$7,000				\$7,000.00
Dir. Gov't Contracts	0.05	\$5,308				\$5,308.00
Data Manager	0.05	\$4,815		1		\$4,815.00
SAS Director	0.75	\$77,813				\$77,813.00
Logistics Inventory Mgr	1.00	\$63,705		12		\$63,705.00
Logistics Associates	2.00	\$113,026		1		\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944	· · · · · · · · · · · · · · · · · · ·			\$53,944.00
Health Educator	3.40	\$190,142				\$190,142.00
and the second s						
				1		A
				1		
					-	
	-					_
TOTAL SALARIES	8.10	\$521,453				\$521,453.00

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:

							0110112	021-00	PAGE
tion			T						
	10000	102034	1					A-1JUL2	1
10			Co	ntract Pu	chase C	rder No:			
			1		Funding	Source:	G	eneral Fi	und
	CH	EP						unuun	
posal S	ervices	-				1013			-
				Proje	ect ID-Ac	tivity ID:	1		
					Invoice	Period:	07/1	/21 - 07/	31/21
					FINAL	Invoice		(check if	Yes)
									RABLES
UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
12	N/A							12	N/A
		_	-	1			-		
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\$33.	000	-				1		\$33.0	00.00
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\$153	,358					-		\$153,3	58.00
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\$12,	000	-				1		\$12,00	00.00
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	-	-					-	-	
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		-				-		-	
			_		_	_			
					-	-		\$198,3	58.00
\$198,	,358			-					
\$198,	,358							\$198,3	58.00
\$198, \$19,8	,358 836							\$198,3 \$19,83	58.00 36.00
\$198,	,358 836			NOTES				\$198,3	58.00 36.00
	TO CONTF UOS 12 BUD \$33, \$153	TOTAL CONTRACTED UOS NOC 12 N/A	TOTAL DELIV contracted Uos 12 N/A Uos NOC NOC Uos NOC EXPE BUDGET THIS P	total 1000002634 00 Contracted contracted THIS PERIOD UOS NOC 12 N/A NOC NOC NOC NOC NOC NOC NOC NOC State THIS PERIOD State THIS PERIOD State THIS PERIOD State State State State State State State State State State	ation 1000002634 Do Contract Put CHEP Departmen sposal Services Proje CONTRACTED DELIVERED DELIV UOS NOC UOS 12 N/A Image: Contract Put NOC NOC NOC NOC NOC TO D Statistical Statis Statistical Statistical Statistical	ation 1000002634 Do Contract Purchase C Funding Department ID-Autility sposal Services Project ID-Autility sposal Services DeLiveReD TOTAL DELiveReD UOS NOC 12 N/A NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC NOC Statistical Statistics Statistical Statistics Statistical Statistics Statistical Statistics	1000002634 OO Contract Purchase Order No: Funding Source: Department ID-Authority ID: posal Services Project ID-Activity ID: Invoice Period: TOTAL DELIVERED OO NOC NOC	Contract ID # Im ation 1000002634 Contract Purchase Order No:	ation 1000002634 A-1JUL2 Contract Purchase Order No:

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-1n

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-1n
07/01/2021 - 06/30/2022
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:		
	Department ID-Authority ID:	
rogram Name: HIV Syringe Access and Disposal Services	1 1 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Project ID-Activity ID:	
ACE Control #:		
	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
	1					
					-	
					-	
					-	
					1	
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	I I				- 1	
					1	
					-	
The second second second						
OTAL 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:

Title:

	APPENDIX F-10 07/01/2022 - 06/30/2023 PAGE A
	Invoice Number
1	A-1JUL22
Contract Purchase Order	No:
Funding Sour	ce: General Fund

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

Telephone: 415-487-3000 Fax:

CHEP

Contract ID #

1000002634

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

Project ID-Activity ID:

Department ID-Authority ID:

Invoice Period: 07/1/22 - 07/31/22

FINAL Invoice (check if Yes)

CONTR	ACTED	THIS P	ERIOD	TOT	DATE	TO	TAL	DELIVE	AINING RABLES NOC
8.012	54,300					1	1	-	54,300
12	N/A	1	-		_			12	N/A
		-							-
							1		
	CONTR UOS 8,012	8,012 54,300	CONTRACTED THIS P UOS NOC UOS 8,012 54,300	CONTRACTED THIS PERIOD UOS NOC UOS NOC 8,012 54,300	CONTRACTED THIS PERIOD TO I UOS NOC UOS NOC UOS 8,012 54,300	CONTRACTED THIS PERIOD TO DATE UOS NOC UOS NOC 8,012 54,300	CONTRACTED THIS PERIOD TO DATE TO UOS NOC UOS NOC UOS NOC UOS 8,012 54,300	CONTRACTED THIS PERIOD TO DATE TOTAL UOS NOC UOS NOC UOS NOC UOS NOC 8,012 54,300	CONTRACTED THIS PERIOD TO DATE TOTAL DELIVE UOS NOC UOS NOC UOS NOC UOS NOC UOS NOC UOS 8,012 54,300 8,012

	NOC	NOC	NOC	NOC	NOC
Number of Clients for Appendix	54300				54,300

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
Total Salaries (See Page B)	\$521,453				\$521,453.00
Fringe Benefits	\$130,363				\$130,363.00
Total Personnel Expenses	\$651,816				\$651,816.00
Operating Expenses:					
Occupancy-(e.g., Rental of Property, Utilities,	\$95,666				\$95,666.00
Building Maintenance Supplies and Repairs)		-	-		-
Materials and Supplies-(e.g., Office,	\$499,570		-		\$499,570.00
Postage, Printing and Repro., Program Supplies)					
General Operating-le.g., Insurance, Staff	\$10,916	-			\$10,916.00
Training, Equipment Rental/Maintenance)					
Staff Travel - (e.g., Local & Out of Town)	-				
Consultant/Subcontractor	\$620,838				\$620,838.00
Other - (Meals, Audit, Transportation Reimb,					
Stipends, Facilitators)			-		
Total Operating Expenses	\$1,226,990			-	\$1,226,990.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$1,878,806				\$1,878,806.00
Indirect Expenses	\$187,881				\$187,881.00
TOTAL EXPENSES	\$2,066,687				\$2,066,687.00
LESS: Initial Payment Recovery			NOTES:		
Other Adjustments Enter as negative, if approx REIMBURSEMENT	priate				

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:

Send to:	SFDPH Fiscal / Involce Processing			
	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-10 07/01/2022 - 06/30/2023 PAGE B

		Invoice Number
Contractor: San Francisco AIDS Foundation	E	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:		
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal Services	:	
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/22 - 07/31/22
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES % OF REMAINING THIS PERIOD PERSONNEL TO DATE BUDGET FTE SALARY BALANCE Pams & Ops Director 0.05 \$5,700 \$5,700.00 Dir. Behavioral Health Svc 0.05 \$7,000 \$7,000.00 \$5,308 Dir. Gov't Contracts 0.05 \$5,308.00 Data Manager 0.05 \$4,815 \$4,815.00 \$77,813 \$77,813.00 SAS Director 0.75 Logistics Inventory Mgr 1.00 \$63,705 \$63,705.00 Logistics Associates 2.00 \$113,026 \$113,026.00 0.75 \$53,944 SSE/Vol Coordinator \$53,944.00 Health Educator 3.40 \$190,142 \$190,142.00 TOTAL SALARIES 8.10 \$521,453 \$521,453.00 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-1p	
07/01/2022 - 06/30/2023	
DAGEA	

										PAGE
Contractor: San Francisco AIDS Founda	tion	permitted and a second second	act ID # 002634				1.1	In	A-1JUL2	
Address: 1035 Market Street, Suite 40		1.000	002001					-	A-IJULZ	4
San Francisco, CA 94103				Cor	ntract Purc	hase C	order No:		-	
Telephone: 415-487-3000		E	3.00		F	unding	Source:	G	eneral Fu	und
Fax:		CH	IEP			-		-		
Program Name: HIV Syringe Access and Dis	posal S	ervices		De	epartment	IU-AUG	nority ID:			
1000 - 110					Projec	et ID-Ad	tivity ID:			
ACE Control #:						Invoice	Period:	07/1	/22 - 07/	31/22
						FINAL	Invoice		(check if	Yes)
			05144	-	DELIVE					AINING
	CONT	RACTED	THIS P	RIOD	TO DA	ATE	% (TOT	AL	DELIVE	RABLES
ELIVERABLES Syringe Access, Disposal Coord. & Bulk Pur	12	NOC N/A	UOS	NOC	UOS	NOC	UOS	NOC	UOS 12	NOC N/A
lyinge Access, Disposar Coord, & Baik Pur	12	19/5				-			12	INCA
									1	
			1					-		1
		NOC		NOC		NOC		NOC		NOC
umber of Clients for Appendix		N/A	1 1	1		1				N/A
	BUC	DGET	EXPEN THIS PE		EXPEN TO DA		% C BUDO			INING
otal Salaries (See Page B) ringe Benefits				_						
Total Personnel Expenses									-	
perating Expenses:	600	000		_					P00.0	00.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$33	,000		_		-	-		\$33,0	30.00
Materials and Supplies-(e.g., Office,	\$153	3,358	-		-		-		\$153,3	58.00
Postage, Printing and Repro., Program Supplies)	_	_	-		-				-	_
General Operating-le.g., Insurance, Staff	\$12	.000					-		\$12,00	00.00
Training, Equipment Rental/Maintenance)							1			
Staff Travel - (e.g., Local & Out of Town)	-						-			_
Consultant/Subcontractor		_		_	-	-			-	_
Other - (Meals, Audit, Transportation Reimb,					-				-	_
Stipends, Facilitators)	_			-			1200		1	
Total Operating Expenses	\$198	358			-				\$198,3	58.00
Capital Expenditures							-			
OTAL DIRECT EXPENSES		358				- 11			\$198,3	
Indirect Expenses		836					1		\$19,83	
OTAL EXPENSES	\$218	,194				211			\$218,1	94.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if appropri REIMBURSEMENT	ate)		-	-						
			_							

I carlify 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:

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments	1.0	(DPH Authorized Signatory)	

APPENDIX F-1p 07/01/2022 - 06/30/2023 PAGE B

Invoice Number		
A-1JUL22		r: San Francisco AIDS Foundation
		s: 1035 Market Street, Suite 400
	Contract Purchase Order No:	San Francisco, CA 94103
General Fund	Fund Source:	e: 415-487-3000
		K!
	Department ID-Authority ID:	
		: HIV Syringe Access and Disposal Services
	Project ID-Activity ID:	
		¥:
07/1/22 - 07/31/22	Invoice Period:	
(check if Yes)	FINAL Invoice	

DETAIL PERSONNEL EXPENDITURES PERSONNEL FTE SALARY EXPENSES CODATE BUDGET BUDG

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-1q
07/01/2023 - 06/30/2024
PAGE A

		Contra	ict ID #					Ir	voice Nun	ber
Contractor: San Francisco AIDS Found	ation		02634				1		A-1JUL2	
Address: 1035 Market Street, Suite 4	00									-
San Francisco, CA 94103				Cor	tract Pu	chase C	order No:			
Telephone: 415-487-3000		122	100			Funding	Source:	G	ieneral F	und
Fax:		CH	EP							
				De	partmen	t ID-Auti	nority ID:	-		
Program Name: HIV Syringe Access and Di	sposal 5	ervices			Proie	ect ID-Ad	tivity ID:			-
ACE Control #:										
						Invoice	e Period;	07/1	/23 - 07/	31/23
						FINAL	Invoice		(check it	Yes)
	то	TAL	DELIV	RED	DELIN	ERED	% (DF	REM	AINING
DELIVERABLES	CONTR	NOC	THIS PLUOS	NOC	TOL	NOC	TOT	AL	DELIVE	RABLES
Syringe Access Services (hrs., City-Wide &	8,012	54,300	000	nou	000	1100	1	neu	8,012	54,300
Syringe Access, Disposal Coordination & Bu	12	N/A						1	12	N/A
	115			_	-					
			-					-	-	-
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		54300	1	-	1				1	54,300
EXPENDITURES	0115	GET	EXPER			NSES	% C			INING
Total Salaries (See Page B)	\$521		THIS PI	RIOD	101	AIE	BODA	SE I		ANCE
Fringe Benefits	\$130		-		-			_		363.00
Total Personnel Expenses	\$651						-		\$651,8	
Operating Expenses:	-		1							
Occupancy-(e.g., Rental of Property, Utilities,	\$95,	666	-	-	-				\$95,6	66.00
Building Maintenance Supplies and Repairs)				-		- 13				
Materials and Supplies-(e.g., Office,	\$499	.570		_	-				\$499,5	70.00
Postage, Printing and Repro., Program Supplies)	4.155					-	-			
General Operating-(e.g., Insurance, Staff	\$10,	916	-		-	-	-	-	\$10,9	16.00
Training, Equipment Rental/Maintenance)					-	- 1			2.1212	
Staff Travel - (e.g., Local & Out of Town)				-				-		-
Consultant/Subcontractor	\$620	,838				-	1		\$620,8	38.00
Other - (Meals, Audit, Transportation Reimb,				_	6	-	-	_	-	
Stipends, Facilitators)	-					-				_
Total Operating Expenses	\$1,22	6,990	-		-		-		\$1.226	990.00
Capital Expenditures			-							
TOTAL DIRECT EXPENSES	\$1,87			-	-			_	\$1,878,	
Indirect Expenses	\$2,06			-	-			-	\$2,066.	
LESS: Initial Payment Recovery	φ2,00	0,007			NOTES				02,000	001.00
Other Adjustments (Enter as negative, if approp	rlate)									
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:

Title:

Send to:	SFDPH Fiscal / Invoice Processing		
	1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-1q 07/01/2023 - 06/30/2024 PAGE B

	Invoice Number
	A-1JUL23
1.11	
Order No:	
d Source:	General Fund
hority ID:	
ctivity ID:	
e Period: 07	7/1/23 - 07/31/23

EXPENSES

FINAL Invoice (check if Yes)

% OF

BUDGET

REMAINING

BALANCE

\$5,700.00

\$7,000.00

\$5,308.00

\$4,815.00

EXPENSES

PERSONNEL FTE SALARY THIS PERIOD TO DATE Pgms & Ops Director 0.05 \$5,700 0.05 \$7,000 Dir. Behavioral Health Svc Dir. Gov't Contracts \$5,308 0.05 Data Manager 0.05 \$4,815 SAS Director \$77,813 0.75 1.00 \$63,705 2.00 \$113,026 0.75 \$53,944 3.40 \$190,142

BUDGETED

\$77,813.00 Logistics Inventory Mgr \$63,705.00 Logistics Associates \$113,026.00 SSE/Vol Coordinator \$53,944.00 Health Educator \$190,142.00 TOTAL SALARIES 8.10 \$521,453 \$521,453.00

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:

DETAIL PERSONNEL EXPENDITURES

Title:

								07/01/2	2023 - 06	/30/2024 PAGE A
		Contra	act ID #					In	voice Num	ber
Contractor: San Francisco AIDS Founda	tion	and the second s	02634]			1.0	1	A-1JUL2	
Address: 1035 Market Street, Suite 40	0		100						1000	
San Francisco, CA 94103				Co	ntract Pu	irchase C	Order No:	_	_	
Telephone: 415-487-3000 Fax:		CH	EP	1		Funding	Source:	G	eneral Fi	und
1 84.		U		D	epartme	nt ID-Aut	hority ID:			
Program Name: HIV Syringe Access and Dis	posal S	ervices	_	1.1.2				-		
					Proj	ect ID-Ad	tivity ID:			4
ACE Control #:										
						Invoice	e Period:	07/1	/23 - 07/	31/23
						FINA	L Invoice	-	(check if	(Ves)
							a involue		Tencer u	103)
		RACTED		ERED		VERED	% (TO			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	uos	NOC	uos	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A	1	1.00	1			1.000	12	N/A
		-		-	-			-	1	
				-	-			-		
		1		-	1					
		1.541		10.0		1.1		67.1		
Number of Clients for Appendix		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A	1	-	0	1		-	0	N/A
EXPENDITURES	BUD	GET		NSES		ENSES DATE	% (BUD			
Total Salaries (See Page B)							-		1	
Fringe Benefits				_		-				1
Total Personnel Expenses Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$33,	000	-	-		_		-	\$33.0	00.00
Building Maintenance Supplies and Repairs)			-				1		000,0	00.00
						-				
Materials and Supplies-(e.g., Office,	\$153	,358		-			-		\$153,3	58.00
Postage, Printing and Repro., Program Supplies)			-		-					
General Operating-(e.g., Insurance, Staff	\$12,	000			-		-	_	\$12,0	00.00
Training, Equipment Rental/Maintenance)	2751									
Staff Travel - (e.g., Local & Out of Town)			-			-	1		-	
Consultant/Subcontractor	_			-		_				-
Other - (Meals, Audit, Transportation Reimb,	-		-	_			-	-	-	-
Stipends, Facilitators)			-				-		-	
Total Operating Expenses	\$198	.358			-	-			\$198,3	58.00
Capital Expenditures	5100	070	_	_	<u> </u>					70.00
Indirect Expenses	\$198		-					-	\$198,3	
TOTAL EXPENSES	\$218		-						\$19,8	
LESS: Initial Payment Recovery	φ <u>2</u> 10	,104			NOTES	1			- 4210,1	34.00
Other Adjustments (Enter as negative, if appropri-	ate				1.20					
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-1r

Send to:	SFDPH Fiscal / Invoice Processing			
10.00	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1r 07/01/2023 - 06/30/2024 PAGE B

Invoice Number	-	
A-1JUL23		San Francisco AIDS Foundation
		1035 Market Street, Suite 400
	Contract Purchase Order No:	San Francisco, CA 94103
General Fund	Fund Source:	415-487-3000
	Department ID-Authority ID:	
	· · · · · · · · · · · · · · · · · · ·	HIV Syringe Access and Disposal Services
	Project ID-Activity ID:	
-10 CON 10 CON 10 C		
07/1/23 - 07/31/23	Involce Period:	
(check if Yes)	FINAL Invoice	

ERSONNEL	KPENDITURES	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
				1.0		
		1		-		
				1		
						-
						100 C
					-	
					-	
					-	
					1	
	-					
					1	
					-	
					-	
					-	
					-	
					-	
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:

Title:

	2022		1444		1.20			07/01/	APPEN 2024 - 06	DIX F-1 /30/202 PAGE /
		Contra						li	nvoice Nun	nber
Contractor: San Francisco AIDS Founda		10000	02634						A-1JUL2	24
Address: 1035 Market Street, Suite 40 San Francisco, CA 94103				Co	ntract Pu	rchase C	Order No:			
Telephone: 415-487-3000		1.4.4	2.21			Funding	Source:	0	General F	und
Fax:		CH	EP							
Program Name: HIV Syringe Access and Dis	posal Se	ervices		U	epartmen					_
ACE Control #:					Proj	ect ID-A	ctivity ID:			_
						Involc	e Period:	07/	1/24 - 07/	31/24
						FINA	L Invoice		(check it	f Yes)
DELIVERABLES	TO CONTR UOS		DELIVI THIS PI UOS			ERED DATE NOC	% TO UOS	OF TAL NOC		AINING RABLES NOC
Syringe Access Services (hrs., City-Wide &	8,012	54,300	000	1100	000		000	1100	8,012	54,300
Syringe Access, Disposal Coordination & Bu	12	N/A	1						12	N/A
	_	-								
	_						-	-	-	-
				100	1					
		NOC	1	NOC	1.14	NOC	-	NOC		NOC
Number of Clients for Appendix		54300	1		1	100		-	1	54,300
EXPENDITURES	BUD	GET	EXPENTITIES PE			NSES	% I BUD			AINING
Total Salaries (See Page B)	\$521,			_						453.00
Fringe Benefits	\$130, \$651,			_				_	\$130,3	
Total Personnel Expenses Operating Expenses:	9001	010			-			-	\$651,8	510.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$95,6	366				-			\$95,6	66.00
Materials and Supplies-(e.g., Office,	\$499,	570		-					\$499,5	570.00
Postage, Printing and Repro., Program Supplies)	\$100			-					0.00,0	
General Operating-(e.g., Insurance, Staff	\$10,5	916		-	-		-	-	\$10,9	16.00
Training, Equipment Rental/Maintenance)	ere,		-	1	-				010,0	10.00
Staff Travel - (e.g., Local & Out of Town)	-			-		- 1		-		
Consultant/Subcontractor	\$620,	838		_	-			_	\$620,8	338.00
Other - (Meals, Audit, Transportation Relmb, Stipends, Facilitators)					-	-		-		
Total Operating Expenses	\$1,226	.990		_		-		_	\$1,226.	990.00
Capital Expenditures		000		_					61 240	000 50
TOTAL DIRECT EXPENSES	\$1,878		-			-			\$1,878,	806.00
TOTAL EXPENSES	\$2,066					-	-			687.00
LESS: Initial Payment Recovery					NOTES					
Other Adjustments (Enter as negative, if appropr REIMBURSEMENT	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:

Send to:	SFDPH Fiscal / Invoice Processing		
	1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-1s 07/

	9
01/2024 - 06/30/202	5
PAGE	З

(check if Yes)

FINAL Invoice

		Invoice Number
Contractor: San Francisco AIDS Foundation		A-1JUL24
Address: 1035 Market Street, Suite 400		10 M T
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	General Fund
Fax:		
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal Services	이 같은 것은 영양에 귀엽다.	
	Project ID-Activity ID:	
ACE Control #:		C. P. Constanting of the
	Invoice Period:	07/1/24 - 07/31/24

DETAIL PERSONNEL EXPENDITURES

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,700				\$5,700.00
Dir. Behavioral Health Svc	0.05	\$7,000		1		\$7,000.00
Dir. Gov't Contracts	0.05	\$5,308		1		\$5,308.00
Data Manager	0.05	\$4,815				\$4,815.00
SAS Director	0.75	\$77,813		1.		\$77,813.00
Logistics Inventory Mgr	1.00	\$63,705			1	\$63,705.00
Logistics Associates	2.00	\$113,026				\$113,026.00
SSE/Vol Coordinator	0.75	\$53,944		1.0		\$53,944.00
Health Educator	3.40	\$190,142				\$190,142.00
					-	
				-		
	-					
· · · · · · · · · · · · · · · · · · ·						
TOTAL SALARIES	8.10	\$521,453			-	\$521,453.00

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:

								01/01/2	2024 - 06	PAGE
Contractor: San Francisco AIDS Founda	tion	and the second s	o2634	í.				In	voice Num A-1JUL2	
Address: 1035 Market Street, Suite 400 San Francisco, CA 94103					Toiri				A- IUULZ	
		_		Cor	tract Pu	rchase C	order No:		-	
Telephone: 415-487-3000 Fax:		СН	EP	1		Funding	Source:	G	eneral Fi	und
rogram Name: HIV Syringe Access and Dis	need C	12.0	- 212-	De	partmen	t ID-Auti	hority ID:		_	
rogram Name: Hiv Synnge Access and Dis	posal S	ervices			Proje	ect ID-Ac	tivity ID:			
ACE Control #:						Invoice	e Period:	07/1	/24 - 07/	31/24
							Invoice	_	(check if	- 1
	то	TAL	DELIV	ERED	DELIV	ERED		OF		AINING
DELIVERABLES	CONTR	NOC	THIS P UOS	ERIOD	TOE	NOC	TO	NOC	DELIVE	RABLES
syringe Access, Disposal Coord. & Bulk Pur	12	N/A		-		1			12	N/A
		1						1	1	
				1			1			
		-							-	-
		-			-				<u> </u>	-
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umber of Clients for Appendix		NOC N/A		NOC		NOC		NOC	-	NOC N/A
XPENDITURES	BUC	GET	EXPE THIS P		EXPE TO D	NSES		OF		
otal Salaries (See Page B)	000	GET	111011	LINOD	100		000	OLI	GAL	NOL
ringe Benefits	-		-				-		1.	
Total Personnel Expenses										
perating Expenses:		Ja - 1		I	-					
Occupancy-(e.g., Rental of Property, Utilities,	\$33,	000		-					\$33,0	00.00
Building Maintenance Supplies and Repairs)							1	1		
Materials and Supplies-(e.g., Office,	\$153	358	-		-				\$153,3	58.00
Postage, Printing and Repro., Program Supplies)		,			-		-			
General Operating-(e.g., Insurance, Staff	\$12.	000	-	-			1		\$12,0	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	\$198	358		- 0					\$198,3	58.00
Capital Expenditures						3				
OTAL DIRECT EXPENSES	\$198								\$198,3	
Indirect Expenses	\$19,		-	1	-				\$19,8	
OTAL EXPENSES	\$218	194			NOTES:]	\$218,1	94.00
LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if appropri REIMBURSEMENT	ate)	-			NUTES:				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:

APPENDIX F-1t

Send to:	SFDPH Fiscal / Involce Processing			
1380 Howard Street, 4th Floor, S San Francisco, CA 94103 Attn: Contract Payments	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments	1.5	(DPH Authorized Signatory)	

APPENDIX F-11
07/01/2024 - 06/30/2025
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:		
	Department ID-Authority ID:	
ogram Name: HIV Syringe Access and Disposal Services		
A CONTRACTOR OF	Project ID-Activity ID:	
CE Control #:		Louis estate
	Invoice Period:	07/1/24 - 07/31/24
	FINAL Invoice	(check if Yes

DETAIL PERSONNEL EXPENDITURES PERSONNEL FTE SALARY EXPENSES CODATE BUDGET BUDGE

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:

								07/01/	APPEN 2025 - 06	DIX F-11 /30/2026 PAGE A
		Contra	act ID #					- 1	voice Num	ther
Contractor: San Francisco AIDS Founda	ation		02634	1					A-1JUL2	
Address: 1035 Market Street, Suite 40 San Francisco, CA 94103	00			Cor	tract Pu	chase C	rder No:			
							1.1			
Telephone: 415-487-3000 Fax:		CH	EP		epartmen	1.15	Source:	0	Seneral Fi	und
Program Name: HIV Syringe Access and Dis	posal Se	ervices	_] De						
ACE Control #:					Proje	ect ID-Ac	tivity ID:			
						Invoice	Period:	07/	1/25 - 07/	31/25
						FINAL	Invoice	1.0	(check if	Yes)
DELIVERABLES		ACTED	THIS F	ERIOD	TOL	ERED	% (TOT	TAL	DELIVE	RABLES
Syringe Access Services (hrs., City-Wide &	UOS 8,012	NOC 54,300	UOS	NOC	UOS	NOC	UOS	NOC	UOS 8,012	NOC 54,300
Syringe Access, Disposal Coordination & Bu	12	N/A		-					12	N/A
					5			-		
		-					-		-	
		NOC		NOC	0	NOC		NOC	0	NOC
Number of Clients for Appendix	-	54300		NOC	1	NOC		NUC	1	54,300
EXPENDITURES	BUD	GET		NSES		NSES	% (BUD			
Total Salaries (See Page B)	\$521.		Ther	LINOD	100	ALL	000	011		153.00
Fringe Benefits	\$130								the second se	363.00
Total Personnel Expenses	\$651,	,816							\$651,8	316.00
Operating Expenses:	COL	000		_		-		-	COF C	00 99
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$95,	000							\$95,6	00.00
Durining Warnenance Coppies and Repairs)	-				-					_
Materials and Supplies-(e.g., Office,	\$499,	570							\$499,5	570.00
Postage, Printing and Repro., Program Supplies)	6 . A	_	-	-	-	_	-			
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$10,9	916	_	_					\$10,9	16.00
Staff Travel - (e.g., Local & Out of Town)									_	
Consultant/Subcontractor	\$620,	838			-		-		\$620,8	38.00
Other - (Meals, Audit, Transportation Reimb,	-		-			-	-		-	1
Stipends, Facilitators)				/				_		
Total Operating Expenses	\$1,226	6,990	-			-	-		\$1,226	990.00
Capital Expenditures					-		11			
TOTAL DIRECT EXPENSES	\$1,878		1.2		-				\$1,878.	
Indirect Expenses TOTAL EXPENSES	\$187,		-					-	\$187,8	
LESS: Initial Payment Recovery	\$2,000	1,007			NOTES			-	J #2,000,	007.00
Other Adjustments (Enter as negative, if appropr	iate)	-				_				
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:

Title:

Send to:	SFDPH Fiscal / Invoice Processing			
1380 Howard Street, 4th Floor, Suit San Francisco, CA 94103 Attn: Contract Payments	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:	A Real Property in the second	Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-1u 07/01/2025 - 06/30/2026 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:		
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal Services		
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/25 - 07/31/25
	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	\$5,700				\$5,700.00
Dir, Behavioral Health Svc	0.05	\$7,000			-	\$7,000.00
Dir. Gov't Contracts	0.05	\$5,308				\$5,308.00
Data Manager	0.05	\$4,815			-	\$4,815.00
SAS Director	0.75	\$77,813				\$77,813.00
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		1		\$53,944.00
Health Educator	3.40	\$190,142				\$190,142.00
					-	
					-	
				1		
	-					
	-					
				11-1-1-1-1-1-		
	4				-	-
TOTAL SALARIES	8.10	\$521,453				\$521,453.00

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:

								07/01/2	2025 - 06	/30/202 PAGE
Contractor: San Francisco AIDS Founda	tion		oct ID #	1				In	A-1JUL2	
Address: 1035 Market Street, Suite 40 San Francisco, CA 94103				Cor	tract Pu	chase C	Order No:	-		
Telephone: 415-487-3000						Funding	Source:	G	eneral Fi	und
Fax:		CH	EP	De	nartmen	+ 10-4-11	hority ID:			_
Program Name: HIV Syringe Access and Dis	posal Se	ervices	-							-
ACE Control #:					Proje	ect ID-Ad	tivity ID:	-		
						Invoic	e Period:	07/1	/25 - 07/	31/25
						FINA	L Invoice		(check if	(Yes)
	TO	ACTED	DELIV THIS P	ERIOD	TOL	ERED	% (TOT	AL	DELIVE	AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A			-				12	N/A
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	_	-	11-11-11		-					-
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		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A	-	NOC	-	NOC	1	NUC	1	NOC N/A
EXPENDITURES	BUD	GET	EXPE THIS P			NSES	% (BUD			
Total Salaries (See Page B)			[uice.
ringe Benefits										
Total Personnel Expenses										
Operating Expenses:						1				
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,	\$153,	358			-		-		\$153,3	358.00
Postage, Printing and Repro., Program Supplies)		_					-			
General Operating-(e.g., Insurance, Staff	\$12,0	000			-			-	\$12,0	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	\$198.	358		-			-	-	\$198,3	58.00
Capital Expenditures				1	<u>.</u>				1.1.1.1.1	22
OTAL DIRECT EXPENSES	\$198,				1		1.0		\$198,3	
Indirect Expenses	\$19,8					-		i i	\$19,83	
TOTAL EXPENSES	\$218,	194	_		TINGTON				\$218,1	94.00
LESS: Initial Payment Recovery Other Adjustments [Enter as negative, if appropri REIMBURSEMENT	ate)		-		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:

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Date:

APPENDIX F-1v

Send to:	SFDPH Fiscal / Invoice Processing		
1.00	1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-1v 07/01/2025 - 06/30/2026 PAGE B

Project ID-Activity ID:			
Address: 1035 Market Street, Suite 400 San Francisco, CA 94103 Telephone: 415-487-3000 Fax: orgram Name: HIV Syringe Access and Disposal Services E Control #: Invoice Period:	Invoice Number		
San Francisco, CA 94103 Contract Purchase Order No: Telephone: 415-487-3000 Fund Source: General Fund Fax: Department ID-Authority ID: Department ID-Authority ID: gram Name: HIV Syringe Access and Disposal Services Project ID-Activity ID: Department ID-Authority ID: E Control #: Invoice Period: 07/1/25 - 07/31/25	A-1JUL25		Contractor: San Francisco AIDS Foundation
Telephone: 415-487-3000 Fund Source: General Fund Fax: Department ID-Authority ID: gram Name: HIV Syringe Access and Disposal Services Project ID-Activity ID: E Control #: Invoice Period: 07/1/25 - 07/31/25			Address: 1035 Market Street, Suite 400
Fax: Department ID-Authority ID: gram Name: HIV Syringe Access and Disposal Services Project ID-Activity ID: Invoice Period: 07/1/25 - 07/31/25		Contract Purchase Order No:	San Francisco, CA 94103
gram Name: HIV Syringe Access and Disposal Services Project ID-Activity ID: E Control #: Invoice Period: 07/1/25 - 07/31/25	General Fund	Fund Source:	Telephone: 415-487-3000
gram Name: HIV Syringe Access and Disposal Services Project ID-Activity ID: Invoice Period: 07/1/25 - 07/31/25			Fax:
E Control #: Project ID-Activity ID: Invoice Period: 07/1/25 - 07/31/25		Department ID-Authority ID:	
E Control #: Invoice Period:07/1/25 - 07/31/25		신 사람이 있는 것은 것이 있는 것이 없다.	ogram Name: HIV Syringe Access and Disposal Services
Invoice Period: 07/1/25 - 07/31/25		Project ID-Activity ID:	
			CE Control #:
FINAL Invoice (check if Yes	07/1/25 - 07/31/25	Invoice Period:	
	(check if Yes)	FINAL Invoice	
	(check if Yes)		

DETAIL PERSONNEL EXPENDITURES PERSONNEL BUDGETED EXPENSES EXPENSES No GF REMAINING Image: Solution of the solution

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:

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	166								66.00
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\$158,	166 166 316							\$158,1	66.00 66.00 16.00
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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:		÷
Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

			APPENDIX F-2d 07/01/2020 - 06/30/2021 PAGE B
			Invoice Number
Contractor:	San Francisco AIDS Foundation	E	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:			
		Department ID-Authority ID:	
Program Name:	HIV Syringe Access and Disposal S	Services - Homeless Youth Alliance	
	a los la sur sur sur sur	Project ID-Activity ID:	
ACE Control #:			
		Invoice Period:	07/1/20 - 07/31/20
			the states

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
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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:

		Contro	act ID #					In	voice Num	her
Contractor: San Francisco AIDS Found	ation		02634	1					A-2JUL2	
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Con	tract Pu	rchase O	rder No:			
Telephone: 415-487-3000 Fax:		СН	EP			Funding	Source:	G	eneral Fo	und
rogram Name: HIV Syringe Access and Dis	sposal Se	1.1.1.4	1 Mar 1		h Allian	ce	ority ID:	11		
ACE Control #:					Proje		tivity ID:	07/4	/21 - 07/	24/04
							Invoice	0771	(check if	1.11
	TO			ERED	DELIV		Wolce %		REMA	I CS)
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
YA Wrap Around & Disposal Services	12	N/A			1				12	N/A
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umber of Clients for Appendix		NOC N/A		NOC		NOC		NOC		NOC N/A
umber of Clients for Appendix						NOC		NOC		the second s
XPENDITURES	BUD	N/A	EXPE THIS P	NSES	EXPE TO D	NSES	% (BUD)F	REMA	N/A
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XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses:	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe 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	BUD	N/A		NSES		NSES)F		N/A
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Propeny, 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)	BUD:	GET		NSES		NSES)F		INING INING INCE
XPENDITURES Dtal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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		GET		NSES		NSES)F		INING INING INCE
XPENDITURES Dtal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Propeny, 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,		GET		NSES		NSES)F		INING INING INCE
XPENDITURES Dtal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)		N/A GET 166		NSES		NSES)F	\$158,1	N/A INING NCE
XPENDITURES Dtal Salaries (See Page B) ringe Benefits Total Personnel Expenses Docupancy-(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	\$158,	N/A GET 166		NSES		NSES)F		N/A INING NCE
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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 DTAL DIRECT EXPENSES	\$158, \$158, \$158,	N/A GET 166 166		NSES		NSES)F	BALA \$158,1 \$158,1 \$158,1	N/A INING NCE 66.00 66.00 66.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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,	\$158, \$158,	N/A GET 166 166		NSES		NSES)F	\$158,1	N/A INING NCE 66.00 66.00 66.00 66.00

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:

Title:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	32.4

APPENDIX F-2e 07/01/2021 - 06/30/2022 PAGE B

	THOLE
	Invoice Number
	A-2JUL21
Contract Purchase Order No:	
Fund Source:	General Fund
-	
Department ID-Authority ID:	
vices - Homeless Youth Alliance	
Project ID-Activity ID:	
Invoice Period:	07/1/21 - 07/31/21
FINAL Invoice	(check if Yes)
	Fund Source: Department ID-Authority ID: vices - Homeless Youth Alliance Project ID-Activity ID: Invoice Period:

DETAIL PERSONNEL EXPENDITURES PERSONNEL FIE BUDGETED EXPENSES EXPENSES FO DATE BUDGET BUDGET BUDGET BUDGETED FIE SALARY FHIS PERIOD TO DATE BUDGET B

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:

								07/01/2	2022 - 06	/30/20	
Contractor: San Francisco AIDS Found	ation		o2634	ĩ			. P		voice Num A-2JUL2		
Address: 1035 Market Street, Suite 4		10000	02001						A-230L2	2	
San Francisco, CA 94103		Contract Purchase Order No:									
Telephone: 415-487-3000 Fax:		CHEP				Funding Source:		G	General Fund		
Program Name: HIV Syringe Access and Di	isposal S	ervices -	Homele		h Allian	ce					
ACE Control #:]				Proje		tivity ID:				
						Invoice	e Period:	07/1	/22 - 07/	31/22	
						FINAL	Invoice		(check if	Yes)	
	CONTI	TAL	THIS P		TOD	ERED	% TO	TAL	DELIVE		
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	
TYA Wrap Around & Disposal Services	12	N/A	-			-		-	12	N/A	
	-		_			-		-	-	_	
		1									
Number of Clients for Appendix		NOC N/A		NOC	_	NOC		NOC		NOC N/A	
EXPENDITURES		1.101	EXPE	NSES	EXPE	NSES	%	OF	REMA	INING	
	BUD	GET	THIS P	ERIOD	TOD		BUD	GET		NCE	
fotal Salaries (See Page B) Fringe Benefits		-	_	_	-	-	18.000				
Total Personnel Expenses 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)	-			_					2		
Consultant/Subcontractor	\$158	,166						-	\$158,1	66.00	
Other - (Meals, Audit, Transportation Relmb,	-			- 5							
Stipends, Facilitators)		-	-						-		
Total Operating Expenses Capital Expenditures	\$158	166							\$158,1	66.00	
OTAL DIRECT EXPENSES	\$158	,166		-					\$158,1	66.00	
									\$15,81		
Indirect Expenses	\$15,								010,0	0.00	
Indirect Expenses FOTAL EXPENSES			-	1					\$173,9		
Indirect Expenses FOTAL EXPENSES LESS: Initial Payment Recovery	\$15, \$173				NOTES:						
Indirect Expenses TOTAL EXPENSES	\$15, \$173				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:

Title:

Date:

APPENDIX F-2f

1380 Howard Street, 4th Floor, Suite 403 San Francisco, CA 94103	By:		Date:	
Attn: Contract Payments	-	(DPH Authorized Signatory)		

		APPENDIX F-2f 07/01/2022 - 06/30/2023 PAGE B
		Invoice Number
Contractor: San Francisco AIDS Foundation	E	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:		
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal S	Services - Homeless Youth Alliance	
	Project ID-Activity ID:	· · · · · · · · · · · · · · · · · ·
ACE Control #:		
	Invoice Period:	07/1/22 - 07/31/22
		Test tester is

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
		1				
				1		1000
					1	
					+	
					-	
					+	
		-				
				-	+	
1					-	
				-		
				-	1 1	
					1	
					-	
					-	
and the state of t						
TOTAL SALARIES						

L 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:

Contractor: San Francisco AIDS Found	ation	and the second s	act ID #	1			1		A-2JUL2	
Address: 1035 Market Street, Suite 4		10000	02004	1			1	-	A-23012	
San Francisco, CA 94103				Co	ntract Pu	rchase C	rder No:	-		
Telephone: 415-487-3000		1.2.23	2.1	1		Funding	Source:	G	eneral Fi	und
Fax:		CH	EP		epartmen	-	acity ID.			_
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Homele		· · · · · · · · · · · · · · · · · · ·		ionty iD:[
					Proje	ect ID-Ac	tivity ID:	1		
ACE Control #:						Involce	Period:	07/1	/23 - 07/	31/23
									1	
						FINAL	Invoice		(check if	Yes)
		TAL		ERED	DELIV TO E		% C TOT		REM/	RABIES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
HYA Wrap Around & Disposal Services	12	N/A		-			1.11		12	N/A
		-	-				-	-	-	
		-		-			-	-		-
		-		-		-		-		
		-	-	-		-				
				1.1				-		
	-	NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix	1	N/A		_						N/A
EXPENDITURES	BUC	GET	EXPE THIS P		EXPE TO D		% C BUDO			INING
Total Salaries (See Page B)										
ringe Benefits	-			_	-		-	<u> </u>		
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)	_		-	-	-	-				
r consign r mining and rispiral r regram coppines/	-		-	-	-	-	1		-	
General Operating-(e.g., Insurance, Staff			-							
Training, Equipment Rental/Maintenance)					-		1		1	
Staff Travel - (e.g., Local & Out of Town)	-		1	-			-			
Stan maver - (e.g., Locar & Out of Town)					-		-	-		
Consultant/Subcontractor	\$158	.166	1	-	1				\$158,1	66.00
Other - (Meals, Audit, Transportation Reimb,		-		-					-	-
Stipends, Facilitators)								1	-	_
	1.5	1000				1			1	
Total Operating Expenses	\$158	166	1						\$158,1	66.00
Capital Expenditures		100	1				_			
OTAL DIRECT EXPENSES	\$158				-				\$158,1	
Indirect Expenses	\$15,		_						\$15,81	
OTAL EXPENSES	\$173	302			NOTES				\$173,9	02.00
LESS: Initial Payment Recovery	1111				NULES:					
Other Adjustments [Enter as negative, if appropriate										

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

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	-

	APPENDIX F-20	9
07/01/2	2023 - 06/30/2024	
	PACEE	2

			Invoice Number
Contractor:	San Francisco AIDS Foundat	tion	A-2JUL23
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:			
		Department ID-Authority ID:	
Program Name:	HIV Syringe Access and Disp	oosal Services - Homeless Youth Alliance	
		Project ID-Activity ID:	
ACE Control #:			in the second second
		Invoice Period:	07/1/23 - 07/31/23
		E State of S	the second se

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
					1	
					+ +	
				-		
					-	
					1	
					1	
					-	
					-	
					-	
			and the second			
CONTRACTOR AND A						
OTAL SALARIES						

T certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursament 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:

Contractor: San Francisco AIDS Found	ation		oct ID #	1			[voice Num A-2JUL2	
Address: 1035 Market Street, Suite 4	00						- T. Hank	1	-	
San Francisco, CA 94103				Cor	ntract Pur	chase O	rder No:	-		
Telephone: 415-487-3000 Fax:		CH	EP		0	Funding	Source:	G	eneral Fu	ind
Fax:		CH	CF	De	partment	ID-Auth	ority ID:			-
Program Name: HIV Syringe Access and Dis	sposal Se	ervices -	Homele							
					Proje	ect ID-Ac	tivity ID:			
ACE Control #:						Invoice	Period:	07/1	/24 - 07/3	31/24
						meeter		0//1	124-011	51124
						FINAL	Invoice		(check if	Yes)
	TO	AL	DELIN	ERED	DELIV	FRED	%0	F	REMA	INING
DELIVERABLES	CONTR		THIS P	ERIOD	TOD		TOT		DELIVE	RABLE
HYA Wrap Around & Disposal Services	12 12	N/A	005	NOC	005	NUC	005	NUC	12	NOC N/A
	1,6	3,400	1.1	1.11	2					
	-		-	1		_				-
	-		-		-		-	-		-
		-	· · · ·							-
		NOC		NOC		NOC		100	1	NO
lumber of Clients for Appendix	_	N/A	1	NOC	1	NOC	1	NOC		NOC N/A
	-	1471								1402
XPENDITURES	BUD	CET	EXPE THIS P		EXPE TO D		% O BUDG			INING
otal Salaries (See Page B)	000	GET	inio r	LINOD	100		DUDG		DALA	NUCE
ringe Benefits	-									
Total Personnel Expenses										-
										_
								-		-
Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)								-		
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)										
Occupancy-(e.g., Rental of Property, Utilities,										
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)										
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,										
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)										
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										
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)	\$158,	166							\$158,1	66.00
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	\$158,	166							\$158,1	66.00
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)	\$158,	166							\$158,1	66.00
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)										
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	\$158,								\$158,1	
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	\$158,	166							\$158,1	66.00
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	\$158. \$158, \$15,8	166 166 316							\$158,1 \$158,1 \$15,81 \$15,81	66.00 66.00
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	\$158,	166 166 316			NOTES:				\$158,1	66.00 66.00

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:

Title:

Date:

APPENDIX F-2h 07/04/0004 00/00/000

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:	Construction in the second second second second	Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-2h 07/01/2024 - 06/30/2025 PAGE B

		THOL
		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:		
	Department ID-Authority ID:	
rogram Name: HIV Syringe Access and Disposal Se	ervices - Homeless Youth Alliance	
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/24 - 07/31/24
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
				1		
			-	1		
				-		
				-		
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					+	
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KAC	1					
				1.		
				1		
OTAL 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:

Title:

		Contr	act ID #					ir.	voice Num	iber
Contractor: San Francisco AIDS Found	ation	10000	02634				1.1	(A-2JUL2	5
Address: 1035 Market Street, Suite 4	00							_		-
San Francisco, CA 94103				Co	ntract Pur	chase C	rder No:			
Telephone: 415-487-3000		-		1	1.0	Funding	Source:	G	eneral Fi	und
Fax:		CH	EP			-	anthe ID.			
Program Name: HIV Syringe Access and Dis	sposal S	ervices -	Homeles		epartmen th Allian		ionty ID:	-	-	
							tivity ID:			
ACE Control #:						227				
						Invoice	Period:	07/1	/25 - 07/	31/25
						FINAL	Invoice		(check if	Yes)
	10	TAL	DELIV	EDED	DELIV	EPED	% (DE.	REM	AINING
and the second second	CONTR	ACTED	THIS P	ERIOD	TOD	ATE	TOT	AL	DELIVE	RABLES
DELIVERABLES HYA Wrap Around & Disposal Services	UOS	NOC N/A	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
ATA Wrap Around & Disposal Services	12	N/A			-	-	-		12	N/A
					1		-		-	-
		1	1	1				-		
			-				Sec. 4	1		
					1	100	1.00			
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix	+	N/A	1	04,4				inde	1	N/A
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D		% C BUD			
Total Salaries (See Page B) Fringe Benefits		-								
Total Personnel Expenses			-			-	-			-
Operating Expenses:			1							
Occupancy-(e.g., Rental of Property, Utilities,					1					
Building Maintenance Supplies and Repairs)				_		-				
Materials and Supplies-(e.g., Office,	-									_
Postage, Printing and Repro., Program Supplies)			-	_		-	-	-		
General Operating-je.g., Insurance, Staff	_		-	_		-	-			
Training, Equipment Rental/Maintenance)			-						-	
Staff Travel - (e.g., Local & Out of Town)	_	_	-					-		
									1.	
Consultant/Subcontractor	\$158	,166			-	- 1			\$158,1	66.00
Other - (Meals, Audit, Transportation Reimb,			-					-		_
Stipends, Facilitators)										
Total Operating Expenses	\$158	166	-			-	-	-	\$158.1	66.00
Capital Expenditures		/00	-	-				_		00.00
OTAL DIRECT EXPENSES	\$158.	166		-					\$158,1	66.00
Indirect Expenses	\$15,	B16							\$15,8	
OTAL EXPENSES	\$173	982							\$173,9	82.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if appropriate	iate									
REIMBURSEMENT										

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 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-2i

APPENDIX F-2i 07/01/2025 - 06/30/2026 PAGE B

		1110
		Invoice Number
Contractor: San Francisco AIDS Foundation		A-2JUL25
Address: 1035 Market Street, Sulte 400		
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	General Fund
Fax:		
	Department ID-Authority ID:	
ogram Name: HIV Syringe Access and Disposal Serv	ices - Homeless Youth Alliance	
	Project ID-Activity ID:	
CE Control #:		
	Invoice Period:	07/1/25 - 07/31/25
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES PERSONNEL FIE BUDGETED EXPENSES EXPENSES TO DATE BUDGET REMAINING BALANCE Inis PERIOD TO DATE BUDGET Inis PERIOD Inis PERIOD

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:

Contractor: San Francisco AIDS Found	lation		02634	1			ſ		A-3JUL2	_
Address: 1035 Market Street, Suite 4							1.13			
San Francisco, CA 94103				Co	ntract Pur	chase O	rder No:	_		_
Telephone: 415-487-3000		-		1		Funding	Source:	G	eneral Fi	und
Fax:		CH	EP	1 5						
rogram Name: HIV Syringe Access and DI	enceal S	anvices +	Harm Re		epartment n Center		ority ID:			
logram hame. The synnige Access and Dr	aposar o	CI 11003 -	narin is	Judeuo			tivity ID:	-		
ACE Control #:						Involution	Period:	07/4	/20 - 07/	24/20
						myoice	Feriod.[0771	120-011	31/20
						FINAL	. Invoice		(check if	Yes)
	то	TAL	DELIV	ERED	DELIV	ERED	%			AINING
ELIVERABLES	LOS	NOC	THIS P UOS	ERIOD NOC	TO D UOS	NOC	UOS	NOC	UOS	RABLES
Syringe Access Services	1,888	31,341							1,888	31,341
ounge Services	2,550	8,000		1	1	1			2,550	8,000
						1				
	_			-	_					-
	-			-		-		_		-
	-		-	277	0		-			-
		NOC		NOC		NOC		NOC		NOC
umber of Clients for Appendix	_	39341				10.00		-		39,341
XPENDITURES			EXPE	NSES	EXPE	VSES	% 0	0F	REMA	INING
		GET	THIS P	ERIOD	TOD	ATE	BUDO	SET		ANCE
otal Salaries (See Page B)	\$699	the second se							\$699,5	
ringe Benefits	\$174			_			_		\$174,8	
Total Personnel Expenses	\$874	,400						_	\$874,4	100.00
Occupancy-(e.g., Rental of Property, Utilities,	\$37,	187		_	-				\$37,1	87 00
Building Maintenance Supplies and Repairs)		107			-			1		07.00
Materials and Supplies-(e.g., Office,	\$24,	864			-		-		\$24.8	64 00
Postage, Printing and Repro., Program Supplies)	φ24,	004	-		-		-		φ2.4,0	04.00
Coulder, Friday and Hepror, Frequences					-				-	
General Operating-(e.g., Insurance, Staff	\$23,	322							\$23,3	22.00
Training, Equipment Rental/Maintenance)		-			-	-		_		
			-		1	-	1	-		
Staff Travel - (e.g., Local & Out of Town)										
								-		
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor					-					
							1	-		
Consultant/Subcontractor								-		
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)	\$85	373			1				\$85.3	73.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses	\$85,	373							\$85,3	73.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$959	,773							\$959,7	73.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$959 \$95,	,773 977							\$959,7 \$95,9	73.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses OTAL EXPENSES	\$959	,773 977							\$959,7	73.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$959 \$95, \$1,055	,773 977			NOTES				\$959,7 \$95,9	73.00

re is, to the be 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. Signature:

Title:

Date:

APPENDIX F-3d 07/04/0000 00/00/0004

1380 Howard Street, 4th Floor, Suite 403			1.1
San Francisco, CA 94103	By:	Date:	
 Attn: Contract Payments	(DPH Authorized Signatory)		
APPENDIX F-3d 07/01/2020 - 06/30/2021 PAGE B

			THOLE
			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-3JUL20
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:			
		Department ID-Authority ID:	
Program Name:	HIV Syringe Access and Disposal Servi	ices - Harm Reduction Center	
		Project ID-Activity ID:	
ACE Control #:			
1000 C		Invoice Period:	07/1/20 - 07/31/20
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL		BUDGETED	EXPENSES THIS PERIOD	EXPENSES	% OF	REMAINING
	FTE	SALARY	THIS PERIOU	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	\$15,563				\$15,563.00
Associate Director, 6th Street HRC	1.00	\$78,398				\$78,398.00
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	\$699,520				\$699.520.00

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:

Contractor: San Francisco AIDS Found	Intion	Contra 10000		1			ſ		voice Num A-3JUL2	-
Address: 1035 Market Street, Suite 4		10000	02034	1					A-3JUL2	
San Francisco, CA 94103				Co	ntract Pu	rchase C	order No:			
Telephone: 415-487-3000				1		Funding	Source:	G	eneral Fu	Ind
Fax:		CH	EP	D	epartmen	t ID-Aut				
Program Name: HIV Syringe Access and D	isposal Se	arvices - I	Harm Re				ionity iD.[
ACE Control #:	1				Proje	ect ID-Ad	tivity ID:	_	-	_
	1					Invoic	Period:	07/1	/21 - 07/	31/21
						FINAL	Invoice		(check if	Yes)
	TO		DELIV	EDED	DELA	ERED	% (DE		INING
DELIVERABLES	CONTR		THIS P UOS			NOC	TOT			RABLES
Syringe Access Services	1,888	31,341	-			1	1	112.4	1,888	31,341
ounge Services	2,550	8,000					1.1	-	2,550	8,000
		1.1.1.1	_			1 1			1	1
						-	-			-
	-		-	-		-	-	-	-	-
		NOC		NOC		NOC		NOC	-	NOC
lumber of Clients for Appendix		39341		NUC	1	NOC	1	NOC	1	39,341
EXPENDITURES	BUD	GET	EXPE			NSES	% C BUDO			INING
otal Salaries (See Page B)			THISP	ERIOD	101		BUDU	GET	DALA	
otal balance loce lage bi	\$699,	and the second se	THIS P	ERIOD	101	_	BOD	GET	\$699,5	20.00
ringe Benefits	\$174.	520 880	THIS P	ERIOD		-	6000	GET	\$699,5	80.08
ringe Benefits Total Personnel Expenses		520 880	THISP	ERIOD				GET	\$699,5	80.08
ringe Benefits <u>Total Personnel Expenses</u> Operating Expenses:	\$174, \$874,	520 880 400	THIS P	ERIOD				3ET	\$699,5 \$174,8 \$874,4	80.00
ringe Benefits <u>Total Personnel Expenses</u> Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$174.	520 880 400	THIS P	ERIOD				GET	\$699,5	80.00 00.00
ringe Benefits Total Personnel Expenses Operating Expenses:	\$174, \$874,	520 880 400		ERIOD				3ET	\$699,5 \$174,8 \$874,4	80.00
ringe Benefits <u>Total Personnel Expenses</u> Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$174, \$874,	520 880 400 187		ERIOD				3ET	\$699,5 \$174,8 \$874,4	80.00 00.00 87.00
ringe Benefits <u>Total Personnel Expenses</u> Operating Expenses: <u>Occupancy-(e.g., Rental of Property, Utilities,</u> Building Maintenance Supplies and Repairs)	\$174, \$874, \$37,	520 880 400 187		ERIOD				3ET	\$699,5 \$174,8 \$874,4 \$37,11	80.00 00.00 87.00
ringe Benefits Total Personnel Expenses Deerating 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)	\$174, \$874, \$37, \$24,1	520 880 400 187 864		ERIOD				3ET	\$699,5 \$174,8 \$874,4 \$37,11 \$24,80	80.00 00.00 87.00 64.00
ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$174, \$874, \$37,	520 880 400 187 864	THISP	ERIOD				3ET	\$699,5 \$174,8 \$874,4 \$37,11	80.00 00.00 87.00 64.00
ringe Benefits Total Personnel Expenses Deerating 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	\$174, \$874, \$37, \$24,1	520 880 400 187 864		ERIOD				3ET	\$699,5 \$174,8 \$874,4 \$37,11 \$24,80	80.00 00.00 87.00 64.00
ringe Benefits Total Personnel Expenses 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)	\$174, \$874, \$37, \$24,1	520 880 400 187 864		ERIOD				3ET	\$699,5 \$174,8 \$874,4 \$37,11 \$24,80	80.00 00.00 87.00 64.00
ringe Benefits Total Personnel Expenses Deerating 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)	\$174, \$874, \$37, \$24,1	520 880 400 187 864		ERIOD				3ET	\$699,5 \$174,8 \$874,4 \$37,11 \$24,80	80.00 00.00 87.00 64.00
ringe Benefits Total Personnel Expenses 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, Audil, Transportation Relimb,	\$174, \$874, \$37, \$24,1	520 880 400 187 864		ERIOD				3ET	\$699,5 \$174,8 \$874,4 \$37,11 \$24,80	80.00 00.00 87.00 64.00
ringe Benefits Total Personnel Expenses 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	\$174, \$874, \$37, \$24,1	520 880 400 187 864		ERIOD					\$699,5 \$174,8 \$874,4 \$37,11 \$24,80	80.00 00.00 87.00 64.00
ringe Benefits Total Personnel Expenses Decaupancy-(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)	\$174, \$874, \$37, \$24,1 \$23,3	520 880 400 187 864 322		ERIOD					\$699,5 \$174,8 \$874,4 \$37,11 \$24,80	80.00 00.00 87.00 64.00 22.00
ringe Benefits Total Personnel Expenses Decaupancy-(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	\$174, \$874, \$37, \$24,1	520 880 400 187 864 322		ERIOD					\$699,5 \$174,8 \$874,4 \$37,11 \$24,80 \$23,32	80.00 00.00 87.00 64.00 22.00
ringe Benefits Total Personnel Expenses perating 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	\$174, \$874, \$37, \$24, \$23, \$23, \$23, \$23, \$23, \$23, \$23, \$25, \$25, \$25, \$25,	520 880 400 187 864 322 373 773		ERIOD					\$699,5 \$174,8 \$874,4 \$37,11 \$24,8 \$23,3 \$23,5 \$24,8 \$24,8 \$24,8 \$24,8 \$24,8 \$24,8 \$25,5 \$2	80.00 00.00 87.00 54.00 22.00 73.00
ringe Benefits Total Personnel Expenses Jerating 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, Audil, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$174, \$874, \$37, \$24, \$23, \$23, \$23, \$23, \$23, \$23, \$25, \$25, \$959, \$95,	520 880 400 187 864 322 373 773 977		ERIOD					\$699,5 \$174,6 \$874,4 \$37,11 \$24,80 \$23,32 \$2	80.00 00.00 87.00 64.00 22.00 73.00 73.00 77.00
ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses OTAL EXPENSES	\$174, \$874, \$37, \$24, \$23, \$23, \$23, \$23, \$23, \$23, \$23, \$25, \$25, \$25, \$25,	520 880 400 187 864 322 373 773 977		ERIOD					\$699,5 \$174,8 \$874,4 \$37,11 \$24,8 \$23,3 \$23,5 \$24,8 \$24,8 \$24,8 \$24,8 \$24,8 \$24,8 \$25,5 \$2	80.00 00.00 87.00 64.00 22.00 73.00 73.00 77.00
ringe Benefits Total Personnel Expenses 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, Audil, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$174, \$874, \$37, \$24, \$23, \$23, \$23, \$23, \$23, \$23, \$25, \$25, \$85, \$959, \$95, \$95, \$95, \$1,055	520 880 400 187 864 322 373 773 977		ERIOD	NOTES				\$699,5 \$174,6 \$874,4 \$37,11 \$24,80 \$23,32 \$2	80.00 00.00 87.00 64.00 22.00 73.00 73.00 77.00

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:		
Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403 San Francisco, CA 94103	Ву:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

			07/01/2021 - 06/30/2022 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:			
		Department ID-Authority ID:	
Program Name:	HIV Syringe Access and Disposal	Services - Harm Reduction Center	
		Project ID-Activity ID:	
ACE Control #:			
		Invoice Period:	07/1/21 - 07/31/21
		FINAL Invoice	(check if Yes)

BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE THIS PERIOD TO DATE BUDGET SALARY BALANCE \$20,300 0.10 \$20,300.00 V.P. Programs & Services Director, Behavioral Health Services 0.05 \$6,000 \$6,000.00 \$15,563 \$15,563.00 Director, SAS 0.15 Associate Director, 6th Street HRC 1.00 \$78,398 \$78,398.00 Health Educator \$437,976 7.75 \$437,976.00 0.50 \$28,257 \$28,257.00 Mobile Health Educator 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 \$699,520 \$699,520.00

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:

DETAIL PERSONNEL EXPENDITURES

Date:

APPENDIX F-3e

Contractor: San Francisco AIDS Found	ation		02634				T		A-3JUL2	
Address: 1035 Market Street, Suite 4	00	-						-		
San Francisco, CA 94103				Cor	ntract Pu	chase C	order No:	11.11		_
Telephone: 415-487-3000		-				Funding	Source:	G	eneral Fi	und
Fax:		CH	EP	De	partmen	t ID-Auth	nority ID:			_
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Harm Re					-		
	1.11				Proje	ect ID-Ac	tivity ID:	-		
ACE Control #:						Invoice	Period:	07/-	1/22 - 07/	31/22
								011		1.4
						FINAL	Invoice		(check if	Yes)
		TAL	DELIVE			ERED	%0			AINING
DELIVERABLES	UOS	NOC	THIS PE	NOC	UOS	NOC	UOS	NOC	UOS	RABLES
Syringe Access Services	1,888	31,341							1,888	31,341
Lounge Services	2,550	8,000	-		1				2,550	8,000
	-	-		-		-		-		-
		1		1	-	1		1		
	1									
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix	-	39341		nee	N.	100		1100	1	39,341
EXPENDITURES	BUD \$699	GET	EXPEN THIS PE			NSES	% O BUDG			ANCE
ringe Benefits	\$174		1	-	-	1			\$174,8	
Total Personnel Expenses	\$874	,400	_						\$874,4	100.00
Operating Expenses:	\$37,	107	-		-			_	\$37,1	07 00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$31,	107	-			_	-	_	\$37,1	07.00
Materials and Supplies-(e.g., Office,	\$24,	864							\$24,8	64.00
Postage, Printing and Repro., Program Supplies)		-		-	-		-	_	1	_
General Operating-(e.g., Insurance, Staff	\$23,	322	-		-		-		\$23.3	22.00
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)			1	_				_		_
Consultant/Subcontractor			-	_		_		-		-
Other - (Meals, Audit, Transportation Reimb,					-		-	-	-	-
Stipends, Facilitators)			1						-	-
Total Operation Engeneers	\$85,	272		-				_	\$85,3	73.00
Total Operating Expenses Capital Expenditures	\$00,	575		-	-				000,0	0.00
OTAL DIRECT EXPENSES	\$959						1		\$959,7	
Indirect Expenses	\$95,							-	\$95,97	
OTAL EXPENSES	\$1,05	5,750					-		\$1,055,	750.00
					NOTES					
LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if approp					NOTES					

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-3f

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-3f
07/01/2022 - 06/30/2023
PAGER

		THOLE
		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:		
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal	Services - Harm Reduction Center	
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/22 - 07/31/22
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
			THIS PERIOD	TUDATE	BODGET	the second s
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	\$15,563			1	\$15,563.00
Associate Director, 6th Street HRC	1.00	\$78,398			-	\$78,398.00
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	\$699,520				\$699,520.00

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:

								07/01/	APPEN 2023 - 06	
		Contra	act ID #					Je	voice Num	her
Contractor: San Francisco AIDS Found	dation		02634	1			113		A-3JUL2	_
Address: 1035 Market Street, Suite San Francisco, CA 94103	400	-			dan at Du	anhana (order No:			
			_	COL				-	-	_
Telephone: 415-487-3000 Fax:		CH	EP	1.5		Funding	Source:	G	eneral Fi	und
Program Name: HIV Syringe Access and D		1000	222				hority ID:	1		
Program Name: HIV Syringe Access and D	isposal Se	ervices -	narm Ke	aucuo			tivity ID:	1		
ACE Control #:]					invoice	Period:	07/-	1/23 - 07/	24/02
								Un		
						FINAL	Invoice	-	(check if	
DELIVERABLES		TAL ACTED NOC	DELIV THIS P UOS			ATE NOC	% (TOT UOS			AINING RABLES NOC
Syringe Access Services	1,888	31,341	1727	1	1.00		1		1,888	31,341
Lounge Services	2,550	8,000	1.000		-			1	2,550	8,000
			1						-	
	-		-			-			-	-
		-	-			-		-	-	-
		NOC	-	NOC		NOC		NOC		NOC
Number of Clients for Appendix	-	39341		NOC	-	NOC	1	NOC	1	NOC 39,341
EXPENDITURES	BUD		EXPE THIS PI			NSES	% C BUDO		BAL	
Total Salaries (See Page B)	\$699		_						\$699,5	
Fringe Benefits Total Personnel Expenses	\$174, \$874		-		-		-	_	\$174,8	
Operating Expenses:		,400	-		_				\$014,4	00.00
Occupancy-(e.g., Rental of Property, Utilities,	\$37,	187					-		\$37,1	87.00
Building Maintenance Supplies and Repairs)					<u> </u>			_		
Materials and Supplies-(e.g., Office,	\$24,8	864		_					\$24,8	64.00
Postage, Printing and Repro., Program Supplies)			-		-	-		-		
General Operating-(e.g., Insurance, Staff	\$23,3	322			-			_	\$23,3	22 00
Training, Equipment Rental/Maintenance)									420,0	
Staff Travel - (e.g., Local & Out of Town)			13	-			1	_		
Consultant/Subcontractor				-	-		1	_	-	
Other - (Meals, Audit, Transportation Reimb,					-		-		-	-
Stipends, Facilitators)					-					
Total Operating Expenses	\$85,3	373					-		\$85,37	73.00
Capital Expenditures					-					
TOTAL DIRECT EXPENSES	\$959,		-				-		\$959,7	
Indirect Expenses	\$95,9	511		-		-			\$95,97	
TOTAL EXDENSES	\$1 055	750								I MANU
	\$1,055	5,750			NOTES				1.000	
TOTAL EXPENSES LESS: Initial Payment Recovery Other Adjustments (Enter as negative if approp REIMBURSEMENT		5,750		_	NOTES				1,000,	

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 403 San Francisco, CA 94103 Attn: Contract Payments	By: (DPH Authorized Signatory)	Date:	

APPENDIX F-3g 07/01/2023 - 06/30/2024 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:		
	Department ID-Authority ID:	
rogram Name: HIV Syringe Access and Disposal S	Services - Harm Reduction Center	
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/23 - 07/31/23
	FINAL Invoice	(check if Yes)

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				\$20,300.0
Director, Behavioral Health Services	0.05	\$6,000				\$6,000.00
Director, SAS	0.15	\$15,563			1	\$15,563.00
Associate Director, 6th Street HRC	1.00	\$78,398				\$78,398.00
Health Educator	7.75	\$437,976			1.1.1.1.1	\$437,976.00
Mobile Health Educator	0.50	\$28,257				\$28,257.00
Health Educator/Inventory Team Lea	1.00	\$56,513			1	\$56,513.00
Inventory Associate/Health Educator	1.00	\$56,513				\$56,513.00
TOTAL SALARIES	11.55	\$699,520				\$699,520.00

Teerlify 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:

		Contra	ct ID #	2 H H				In	voice Nun	nber
Contractor: San Francisco AIDS Found	lation	10000	02634					21	A-3JUL2	24
Address: 1035 Market Street, Suite 4	00			1.1.1.				_		
San Francisco, CA 94103				Con	tract Pur	chase C	rder No:	-		
Telephone: 415-487-3000		CH	ED		- 9	Funding	Source:	G	ieneral F	und
Fax:		Cn	CP	De	partmen	t ID-Aut	ority ID:	-		
rogram Name: HIV Syringe Access and Di	isposal S	ervices - I	Harm Re	duction				2		
ACE Control #:	1				Proje	ect ID-Ac	tivity ID:			
						Invoice	Period:	07/1	1/24 - 07/	31/24
						FINAL	. Invoice](check it	f Yes)
		TAL	DELIV THIS P		DELIV TO D		% (TOT			AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services	1,888	31,341	1.1		1	P	1.1.1.1.1	÷	1,888	31,34
ounge Services	2,550	8,000			-	-		-	2,550	8,000
	-				-					
	1		11 - 1		-	1000	1	i		
		1		100		-				-
and the second sec		NOC		NOC		NOC	-	NOC		NOC
Number of Clients for Appendix	-	39341	11.000	13-14		-	-			39,341
EXPENDITURES	000	GET	EXPE		EXPE		% (AINING
otal Salaries (See Page B)	\$699		THIS P	ERIOD	TOD	ATE	BUD	JE1	The second second	ANCE
ringe Benefits	\$174									
Total Personnel Expenses		,880			-			-		380.00
rotal Personnel Expenses	\$874				-	-		-	\$174,8	
Operating Expenses:		,400				-			\$174,8 \$874,4	380.00 400.00
	\$874	,400				-			\$174,8 \$874,4	380.00
Operating Expenses:		,400							\$174,8 \$874,4	380.00 400.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)		,400 187							\$174,8 \$874,4 \$37,1	380.00 100.00 87.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$37.	,400 187							\$174,8 \$874,4	380.00 100.00 87.00
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)	\$37. \$24,	,400 187 864							\$174,8 \$874,4 \$37,1 \$24,8	380.00 400.00 87.00 64.00
Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$37.	,400 187 864							\$174,8 \$874,4 \$37,1	380.00 400.00 87.00 64.00
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	\$37. \$24,	,400 187 864							\$174,8 \$874,4 \$37,1 \$24,8	380.00 400.00 87.00 64.00
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)	\$37. \$24,	,400 187 864							\$174,8 \$874,4 \$37,1 \$24,8	380.00 400.00 87.00 64.00
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	\$37. \$24,	,400 187 864							\$174,8 \$874,4 \$37,1 \$24,8	380.00 400.00 87.00 64.00
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)	\$37. \$24,	,400 187 864							\$174,8 \$874,4 \$37,1 \$24,8	380.00 400.00 87.00 64.00
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, Stipends, Facilitators) Total Operating Expenses	\$37. \$24,	,400 187 864 322							\$174,8 \$874,4 \$37,1 \$24,8	380.00 400.00 87.00 64.00 22.00
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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$37. \$24, \$23, \$23, \$85,	,400 187 864 322 373							\$174,6 \$874,4 \$37,1 \$24,8 \$23,3 \$23,3 \$23,3	380.00 400.00 87.00 64.00 22.00 73.00
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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$37. \$24, \$23, \$23, \$85, \$959,	,400 187 864 322 373 773							\$174,6 \$874,4 \$37,1 \$24,8 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$24,8 \$25,10 \$24,8 \$25,100\$ \$25,100	380.00 100.00 87.00 64.00 22.00 73.00
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	\$37. \$24. \$23. \$23. \$23. \$23. \$23. \$23. \$25. \$95.9 \$95.5	,400 187 864 322 373 373 977							\$174,6 \$874,4 \$37,1 \$24,8 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,5 \$24,8 \$24,8 \$24,8 \$25,5 \$25,	380.00 100.00 87.00 64.00 22.00 73.00 73.00 77.00
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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses OTAL EXPENSES	\$37. \$24, \$23, \$23, \$85, \$959,	,400 187 864 322 373 373 977							\$174,6 \$874,4 \$37,1 \$24,8 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$24,8 \$25,10 \$24,8 \$25,100\$ \$25,100	380.00 100.00 87.00 64.00 22.00 73.00 73.00 77.00
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	\$37. \$24. \$23. \$23. \$23. \$23. \$23. \$23. \$25. \$959. \$959. \$959. \$1,055	,400 187 864 322 373 373 977			NOTES				\$174,6 \$874,4 \$37,1 \$24,8 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,3 \$23,5 \$24,8 \$24,8 \$24,8 \$25,5 \$25,	380.00 100.00 87.00 64.00 22.00 73.00 73.00 77.00

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:

Title:

Date:

APPENDIX F-3h

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

APPENDIX F-3h 07/01/2024 - 06/30/2025 PAGE B

		Invoice Number
Contractor: San Francisco AIDS Foundation		A-3JUL24
Address: 1035 Market Street, Suite 400		1. X
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	General Fund
Fax:		
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal S	Services - Harm Reduction Center	
	Project ID-Activity ID:	
ACE Control #:	The second second second	
	Invoice Period:	07/1/24 - 07/31/24
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
			THIS PERIOD	TODATE	BODGET	
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	\$15,563			-	\$15,563.00
Associate Director, 6th Street HRC	1.00	\$78,398			-	\$78,398.00
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	\$699,520				\$699,520.00

T cartify 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:

							9	07/01/2	APPEN 2025 - 06	
		Contra	ict ID #					in	voice Num	10.200
Contractor: San Francisco AIDS Foundation			02634	1			6	_	A-3JUL2	
Address: 1035 Market Street, Suite 4	001	1			ntract Pur					-
San Francisco, CA 94103				Cor	ntract Pur	chase C	rder No:			
Telephone: 415-487-3000 Fax:		CH	ED	1		Funding	Source:	G	eneral Fi	und
		1.000	2.2		epartmen		nority ID:	_		_
Program Name: HIV Syringe Access and D	isposal Se	ervices - I	Harm Re	eductio			tivity ID:			
ACE Control #:]				1.010					-
						Invoic	Period:	07/1	/25 - 07/	31/25
						FINAL	Invoice		(check if	Yes)
		TAL		ERED	DELIV TO D		% O			NING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services	1,888	31,341	1					-	1,888	31,341
ounge Services	2,550	8,000	(2,550	8,000
					-				-	1000
			-		-				-	-
			-	-	-	1		-		
		NOC		NOC		NOC		NOC		NOC
lumber of Clients for Appendix	<u> </u>	39341		NOC	1	NOC	1	NUC	-	39.341
XPENDITURES	BUD		EXPE THIS P		EXPE TO D		% O BUDG		REMA BALA	INING
otal Salaries (See Page B)	\$699,			-			-		\$699,5	
ringe Benefits	\$174,		-						\$174,8	
Total Personnel Expenses	\$874,	,400								00.00
Occupancy-e.g., Rental of Property, Utilities,									30/4,4	
Building Maintenance Supplies and Repairs)	\$27	187		_					1	87 00
Building Maintenance Supplies and Repairs)	\$37,	187			-				\$37,1	37.00
									\$37,18	
Materials and Supplies-(e.g., Office,	\$37,								1	
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$24,8	864							\$37,11	64.00
Materials and Supplies-(e.g., Office,		864							\$37,18	54.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff	\$24,8	864							\$37,11	64.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$24,8	864							\$37,11	64.00
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)	\$24,8	864							\$37,11	64.00
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	\$24,8	864							\$37,11	64.00
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)	\$24,8	322							\$37,11	54.00 22.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses	\$24,8	322							\$37,11	54.00 22.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$24,8	864 322 373							\$37,11 \$24,80 \$23,32 \$85,37	54.00 22.00 73.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$24,8	864 322 373 773							\$37,11	54.00 22.00 73.00 73.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$24,8 \$23,3 \$85,3 \$85,3	864 322 373 773 977							\$37,11 \$24,84 \$23,32 \$85,37 \$85,37	54.00 22.00 73.00 73.00 73.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$24,8 \$23,5 \$85,5 \$959, \$95,5	864 322 373 773 977			NOTES:				\$37,11 \$24,80 \$23,33 \$23,33 \$85,33 \$85,33 \$959,7 \$95,97	54.00 22.00 73.00 73.00 73.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses OTAL EXPENSES	\$24,4 \$23,4 \$85,5 \$85,5 \$959, \$95,5 \$1,055	864 322 373 773 977			NOTES:				\$37,11 \$24,80 \$23,33 \$23,33 \$85,33 \$85,33 \$959,7 \$95,97	54.00 22.00 73.00 73.00 73.00

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. Signature: Date:

Title:

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403				
	San Francisco, CA 94103	By:	C	Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

APPENDIX F-3i 07/01/2025 - 06/30/2026 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:		
	Department ID-Authority ID:	
ogram Name: HIV Syringe Access and Disposal Se	rvices - Harm Reduction Center	
	Project ID-Activity ID:	
CE Control #:		
	Invoice Period:	07/1/25 - 07/31/25
	FINAL Invoice	(check if Yes)

BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE THIS PERIOD TO DATE BUDGET SALARY 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 \$15,563 \$15,563.00 Associate Director, 6th Street HRC 1.00 \$78,398 \$78,398.00 \$437,976 Health Educator 7.75 \$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 \$699,520 \$699,520.00 I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in

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:

DETAIL PERSONNEL EXPENDITURES

								07/01/2	APPENI 2020 - 06/	
		Contra	act ID #					In	voice Num	ber
Contractor: San Francisco AIDS Found	lation	10000	02634]			1.5		A-4JUL2	0
Address: 1035 Market Street, Suite 400 San Francisco, CA 94103				Cor	ntract Pu	chase C	order No:	C 1		-
Telephone: 415-487-3000		1	1.1	1		Funding	Source:	G	eneral FL	ind
Fax:		CH	EP	11.5		1.1				
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Syringe	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	S		nority ID:			
ACE Control #:	1				Proje	ect ID-Ac	tivity ID:			-
						Invoice	e Period:	07/1	/20 - 07/3	31/20
						FINAL	Invoice	2.8.9	(check if	Yes)
DELIVERABLES		TAL ACTED NOC		ERED ERIOD NOC	DELIV TO E UOS	ERED DATE NOC	% TOT UOS	OF TAL NOC		RABLES NOC
Syringe Disposal Service Hours	4,368	N/A	003	NOC	003	NOC	003	NOC	4,368	N/A
oyinige proposal certites risels	1,000	1		1					1,000	
					1				1	
1		-		-						-
		1				-				
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A			1		l	-		N/A
EXPENDITURES	BUD			NSES	EXPE TO D	1.2.4.2.4.4	% (BUD		A 40-0320	
Total Salaries (See Page B)	\$483							1	\$483,5	
Fringe Benefits	\$145		-	-	-				\$145,0	
Total Personnel Expenses	\$628	,581							\$628,5	81.00
Operating Expenses:	\$24	752	-		-				\$31,7	52 00
Occupancy-(e.g., Rental of Property, Utilities,	\$31,	152		_			-		\$31,73	52.00
Building Maintenance Supplies and Repairs)	-				-		-		-	
Materials and Supplies-(e.g., Office,	\$8,8	300			-		-		\$8,80	0.00
Postage, Printing and Repro., Program Supplies)					-			_		
General Operating-e.g., Insurance, Staff	\$19,	400							\$19,40	00.00
Training, Equipment Rental/Maintenance)	1			_			-	_		
Staff Travel - (e.g., Local & Out of Town)			-	_	_	_		-		-
Consultant/Subcontractor		_	-		-				-	
Other - (Meals, Audit, Transportation Reimb,			-	_	-	-			-	_
Stipends, Facilitators)										
Total Operating Expenses	\$59.	952	-		-				\$59,95	52.00
Capital Expenditures						1				
TOTAL DIRECT EXPENSES	\$688,						1		\$688,5	
Indirect Expenses	\$103,				1		-		\$103,2	80.00
TOTAL EXPENSES	\$791,	813	-				-		\$791,8	13.00
LESS: Initial Payment Recovery		1			NOTES					
Other Adjustments (Enter as negative, if approp	oriate)		_							
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:

Send to:	SFDPH Fiscal / Invoice Processing		
	1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-4a
07/01/2020 - 06/30/2021
PAGE B

		Invoice Number
Contractor: San Francisco AIDS Foundation		A-4JUL20
Address: 1035 Market Street, Suite 400	1	
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	General Fund
Fax:		
	Department ID-Authority ID:	
ogram Name: HIV Syringe Access and Disposal Se	ervices - Syringe Sweeps	
No. 6 Parts and a standard standards	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/20 - 07/31/20
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE 2.00 \$140,000 Manager, Syringe Clean Up \$140,000.00 \$37,622 \$227,483 \$37,622.00 \$227,483.00 Inventory & Logistics Coordinator 0.80 Associate, Syringe Clean Up 5.60 Syringe Sweeps Mgr. Disposal, Mobil 0.25 \$23,882 \$23,882.00 Associate, Syringe Clean Up - Mobile \$54,537 \$54,537.00 1.00 TOTAL SALARIES 9.65 \$483,524 \$48 I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for reimbursement is in \$483,524.00

I cartify 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:

								07/01/2	2021 - 06	DIX F-48 /30/2022 PAGE A
		Contra	act ID #					In	voice Num	ber
Contractor: San Francisco AIDS	Foundation	10000	02634					-	A-4JUL2	1
Address: 1035 Market Street, S	Suite 400									
San Francisco, CA 9	4103			Con	tract Pu	rchase C	order No:			
Telephone: 415-487-3000			-	1		Funding	Source:	G	eneral Fu	und
Fax:		CH	EP	De	narimen	t ID.Aut	nority ID;	-		
Program Name: HIV Syringe Access a	and Disposal Se	ervices -	Svringe				ionity in			
						ect ID-Ac	tivity ID:			
ACE Control #:										
office have a second						Invoice	Period:	07/1	/21 - 07/3	31/21
						FINAL	. Invoice	-	(check if	200
		ACTED	THIS F	ERED	TOT	ERED	% TO	OF TAL	(check if REMA DELIVE	Ycs) UNING RABLES
DELIVERABLES	CONTR	ACTED NOC				ERED	%	OF	(check if REMA DELIVE UOS	Ycs) UNING RABLES NOC
DELIVERABLES Syringe Disposal Service Hours	CONTR	ACTED	THIS F	ERIOD	TOT	ERED	% TO	OF TAL	(check if REMA DELIVE	Ycs) UNING RABLES
	CONTR	ACTED NOC	THIS F	ERIOD	TOT	ERED	% TO	OF TAL	(check if REMA DELIVE UOS	Ycs) UNING RABLES NOC
	CONTR	ACTED NOC	THIS F	ERIOD	TOT	ERED	% TO	OF TAL	(check if REMA DELIVE UOS	Ycs) UNING RABLES NOC
	CONTR	ACTED NOC	THIS F	ERIOD	TOT	ERED	% TO	OF TAL	(check if REMA DELIVE UOS	Ycs) UNING RABLES NOC
	CONTR	ACTED NOC	THIS F	ERIOD	TOT	ERED	% TO	OF TAL	(check if REMA DELIVE UOS	Ycs) UNING RABLES NOC
	CONTR	ACTED NOC	THIS F	ERIOD	TOT	ERED	% TO	OF TAL	(check if REMA DELIVE UOS	Ycs) UNING RABLES NOC

EXPENDITURES	BUDGET	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
Total Salaries (See Page B)	\$483,524				\$483,524.00
Fringe Benefits	\$145,057				\$145,057.00
Total Personnel Expenses	\$628,581	1	1		\$628,581.00
Operating Expenses:		· · · · · · · · · · · · · · · · · · ·			
Occupancy-(e.g., Rental of Property, Utilities,	\$31,752	1			\$31,752.00
Building Maintenance Supplies and Repairs)					
Materials and Supplies-(e.g., Office,	\$8,800				\$8,800.00
Postage, Printing and Repro., Program Supplies)					
General Operating-e.g., Insurance, Staff	\$19,400				\$19,400.00
Training, Equipment Rental/Maintenance)					
Staff Travel - (e.g., Local & Out of Town)			-		
Consultant/Subcontractor					
Other - (Meals, Audit, Transportation Relmb,		1		1.1	-
Stipends, Facilitators)				-	
Total Operating Expenses	\$59,952			1	\$59,952.00
Capital Expenditures					
TOTAL DIRECT EXPENSES	\$688,533				\$688,533.00
Indirect Expenses	\$103,280				\$103,280.00
TOTAL EXPENSES	\$791,813				\$791,813.00
LESS: Initial Payment Recovery			NOTES:		
Other Adjustments (Enter as negative, if appropr REIMBURSEMENT	iale)				

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 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-4b
07/01/2021 - 06/30/2022
PAGE B

	Contractor: San Francisco AIDS Foundation
	Address: 1035 Market Street, Suite 400
Contract Purchase Order No:	San Francisco, CA 94103
Fund Source:	Telephone: 415-487-3000
	Fax:
Department ID-Authority ID:	
ervices - Syringe Sweeps	rogram Name: HIV Syringe Access and Disposal S
Project ID-Activity ID:	
	ACE Control #:
Invoice Period:	HICK I HICK
FINAL Invoice	
	Fund Source: Department ID-Authority ID: ervices - Syringe Sweeps Project ID-Activity ID:

BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE THIS PERIOD TO DATE BUDGET BALANCE SALARY 2.00 \$140,000 \$140,000.00 Manager, Syringe Clean Up \$37,622.00 \$227,483.00 Inventory & Logistics Coordinator 0.80 \$37,622 \$227,483 5.60 Associate, Syringe Clean Up Syringe Sweeps Mgr. Disposal, Mobil 0.25 \$23,882 \$23,882.00 Associate, Syringe Clean Up - Mobile \$54,537 \$54,537.00 1.00 9.65 \$483,524 \$483,524.00 TOTAL SALARIES

Tcertify 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:

DETAIL PERSONNEL EXPENDITURES

								07/01/2	2022 - 06	/30/20 PAGE
Contractor: San Francisco AIDS Found	lation	-	act ID #)02634	1				In	voice Num A-4JUL2	
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103				Con	tract Pu	rchase C	Irder No:			-
Telephone: 415-487-3000 Fax:		CH	EP	1		Funding	Source:	G	eneral Fu	und
Fax:		U	EP	De	partmen	t ID-Auth	ority ID:		_	-
Program Name: HIV Syringe Access and Di	sposal Se	ervices -	Syringe				ionity ion	-		-
	1				Proje	ect ID-Ac	tivity ID:	_		_
ACE Control #:	L					Invole	Period:	07/1	/22 - 07/3	21/22
						medice	renou.		122 - 011	01122
						FINAL	Invoice	-	(check if	Yes)
		ACTED	THIS P		TOT	ERED	% (TOT	TAL	DELIVE	
DELIVERABLES	UOS	NOC N/A	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Disposal Service Hours	4,368	N/A			-	-			4,368	N/A
				1				_		
	-		-		-					-
			-		-	-			-	-
				A.L.S.						-
lumber of Clients for Appendix	-	NOC N/A		NOC	-	NOC		NOC		NOC N/A
EXPENDITURES	BUD	GET	EXPE THIS P			NSES	% (BUD			
otal Salaries (See Page B)	\$483,		1		1			1.1	\$483,5	
ringe Benefits Total Personnel Expenses	\$145 \$628.		-		-				\$145,0	
operating Expenses:	\$020.	,501	-						\$020,0	01.00
Occupancy-(e.g., Rental of Property, Utilities,	\$31,	752							\$31,7	52.00
Building Maintenance Supplies and Repairs)										
Materials and Supplies-(e.g., Office,	\$8,8	00			-	-			\$8,80	0.00
Postage, Printing and Repro., Program Supplies)	90,0					-			40,00	0.00
General Operating-(e.g., Insurance, Staff	\$19,4	400					1.1		\$19,40	00.00
Training, Equipment Rental/Maintenance)					1	- 1				
Staff Travel - (e.g., Local & Out of Town)				_				-		_
Consultant/Subcontractor			-	_			-			
Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)				_		_		_		
Total Operating Expenses	\$59,9	952				_			\$59,95	52.00
Capital Expenditures					-					
OTAL DIRECT EXPENSES	\$688,	7.7.7		-	-		-	_	\$688,5	
Indirect Expenses OTAL EXPENSES	\$103, \$791,		-		1				\$103,2 \$791,8	
LESS: Initial Payment Recovery					NOTES			-	\$791,0	10.00
Other Adjustments (Enter as negative, if approx	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:

Title:

Date:

APPENDIX F-4c

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 403			- 11
1.	San Francisco, CA 94103	By:	Date:	1.1
	Attn: Contract Payments	(DPH Authorized Signatory)		2.1

	APPENDIX F-4c 07/01/2022 - 06/30/2023 PAGE B
En la companya de la	Invoice Number
Contractor: San Francisco AIDS Foundation	A-4JUL22
Address: 1035 Market Street, Suite 400	
San Francisco, CA 94103 Contract Purchase Order No:	
Telephone: 415-487-3000 Fund Source:	General Fund
Fax:	
Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal Services - Syringe Sweeps	
Project ID-Activity ID:	
ACE Control #:	
Invoice Period:	07/1/22 - 07/31/22

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

DEDRONNEL		BUDGETED	EXPENSES	EXPENSES	% OF BUDGET	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TODATE	BUDGET	BALANCE
Manager, Syringe Clean Up	2.00	\$140,000				\$140,000.00
Inventory & Logistics Coordinator	0.80	\$37,622				\$37,622.00
Associate, Syringe Clean Up	5.60	\$227,483			1	\$227,483.00
Syringe Sweeps Mgr. Disposal, Mobil	0.25	\$23,882			1	\$23,882.00
Associate, Syringe Clean Up - Mobile	1.00	\$54,537				\$54,537.00
				-	-	
	-				1	
	-	_				
	-				-	
	-					
				_		
TOTAL SALARIES	9.65	\$483,524				\$483,524.00

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:

			act ID #					In	voice Num	ber
Contractor: San Francisco AIDS Found		10000	02634	1			L	- 1	A-4JUL2	3
Address: 1035 Market Street, Sulte 40 San Francisco, CA 94103					tract Pu	rchase C	order No:		_	_
Telephone: 415-487-3000		1.4	-	1		Funding	Source:	G	eneral Fu	ind
Fax:		CH	EP	De	partmen	t ID-Auti	nority ID:			
rogram Name: HIV Syringe Access and Di	sposal Se	rvices -	Syringe	Sweep		ect ID-Ad	tivity ID:	-		
ACE Control #:	6						Period:	07/4	/23 - 07/3	1/02
							10.1	07/1	x	1.
				_	-		Invoice		(check if	
DELIVERABLES	CONTR. UOS			ERED ERIOD NOC		ATE NOC	% C TOT UOS		DELIVE	INING RABLE NO
Syringe Disposal Service Hours	4,368	N/A							4,368	N/A
					1				1	
	-		-		-	-			1	_
				-	-		-	-		-
	-									
Contraction of		NOC		NOC	1	NOC	-	NOC	1.17	NO
lumber of Clients for Appendix	· · · · · · · · · · · · · · · · · · ·	N/A	I.		1		I I			N/A
			-			_				
XPENDITURES	BUD		EXPE			NSES	% O		REMA	
	BUD(GET	EXPE THIS P			NSES	% O BUDG		BALA	NCE
otal Salaries (See Page B)	\$483,	GET 524				A to a second second			BALA \$483,5	NCE 24.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses		GET 524 057				A to a second second			BALA	NCE 24.00 57.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses operating Expenses:	\$483, \$145,	GET 524 057 581				A to a second second			BALA \$483,5 \$145,0	NCE 24.00 57.00 81.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	\$483, \$145, \$628,	GET 524 057 581				A to a second second			BALA \$483,5 \$145,0 \$628,5	NCE 24.00 57.00 81.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$483, \$145, \$628, \$31,7	GET 524 057 581 752				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75	NCE 24.00 57.00 81.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$483, \$145, \$628,	GET 524 057 581 752				A to a second second			BALA \$483,5 \$145,0 \$628,5	NCE 24.00 57.00 81.00
otal Salaries (See Page B) ringe 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	\$483, \$145, \$628, \$31,7	GET 524 057 581 752 00				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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)	\$483, \$145, \$628, \$31,7 \$8,8	GET 524 057 581 752 00				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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)	\$483, \$145, \$628, \$31,7 \$8,8	GET 524 057 581 752 00				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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)	\$483, \$145, \$628, \$31,7 \$8,8	GET 524 057 581 752 00				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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)	\$483, \$145, \$628, \$31,7 \$8,8	GET 524 057 581 752 00				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$483, \$145, \$628, \$31,7 \$8,8	GET 524 057 581 752 00				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)	\$483, \$145, \$628, \$31,7 \$8,8 \$19,4	GET 524 057 581 752 00 400				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$8,80 \$19,40	NCE 24.00 57.00 81.00 52.00 0.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$483, \$145, \$628, \$31,7 \$8,8	GET 524 057 581 752 00 400				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00 0.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$483, \$145, \$628, \$31,7 \$8,8 \$19,4 \$19,4 \$59,9 \$59,9	GET 524 057 581 752 00 100 100				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$8,80 \$19,40	NCE 24.00 57.00 81.00 0.00 0.00 00.00
otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$483, \$145, \$628, \$31,7 \$8,8 \$19,4 \$19,4 \$59,9 \$59,9 \$688,3 \$103,3	SET 524 057 581 752 00 00 100 152 533 280				A to a second second			BALA \$483,5 \$145,0 \$628,5 \$31,75 \$8,80 \$19,40 \$19,40 \$59,96 \$59,96 \$59,96 \$59,96 \$59,96 \$59,96 \$59,96	NCE 24.00 57.00 81.00 52.00 0.00 0.00 52.00 52.00 33.00 80.00
otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$483, \$145, \$628, \$31,7 \$8,8 \$19,4 \$19,4 \$59,9 \$59,9	SET 524 057 581 752 00 00 100 152 533 280							BALA \$483,5 \$145,0 \$628,5 \$31,75 \$8,80 \$19,40 \$19,40 \$59,96 \$59,96	NCE 24.00 57.00 81.00 52.00 0.00 0.00 0.00 52.00 33.00 80.00

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. Signature:

Title:

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-4d
07/01/2023 - 06/30/2024
PAGE B

		Invoice Number
Contractor: San Francisco AIDS Foundation		A-4JUL23
Address: 1035 Market Street, Suite 400		
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	General Fund
Fax:		
	Department ID-Authority ID:	
ogram Name: HIV Syringe Access and Disposal Se	ervices - Syringe Sweeps	
and the second second second second	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/23 - 07/31/23
	FINAL Invoice	(check if Yes

BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE THIS PERIOD TO DATE BUDGET SALARY BALANCE 2.00 \$140,000 \$140,000.00 Manager, Syringe Clean Up Inventory & Logistics Coordinator 0.80 \$37,622 \$37,622.00 \$227,483 5.60 \$227,483.00 Associate, Syringe Clean Up Syringe Sweeps Mgr. Disposal, Mobil 0.25 \$23,882 \$23,882.00 Associate, Syringe Clean Up - Mobile \$54,537 \$54,537.00 1.00 TOTAL SALARIES 9.65 \$483,524 \$483,524.00

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:

DETAIL PERSONNEL EXPENDITURES

Contractor: San Francisco AIDS Found	lation		02634]			11		A-4JUL2	
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Cor	tract Pu	chase (rder No:	_		_
								-	-	
Telephone: 415-487-3000 Fax:		СН	EP				Source:	G	eneral Fu	ind
Program Name: HIV Syringe Access and Di	sposal Se	ervices -	Syringe		partmen s	t ID-Auti	nority ID:			
ACE Control #:					Proje	ect ID-Ac	tivity ID:			_
						Invoice	Period:	07/1	/24 - 07/3	31/24
						FINAL	Invoice	-](check if	Yes)
	CONTR	ACTED	THIS P		TO	ATE	% C TOT	AL	DELIVE	INING
DELIVERABLES Syringe Disposal Service Hours	4.368	NOC N/A	UOS	NOC	UOS	NOC	uos	NOC	UOS 4.368	NOC N/A
Syninge Disposal Service Hours	4,500	DV/A	1					1	4,000	IN/A
	1		-						-	
	_	-					-			-
			-			-			-	-
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A	1					- 011 (C)		N/A
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D	NSES	% C BUDO		REMA	INING
Total Salaries (See Page B)	\$483	524							\$483,5	the second se
ringe Benefits	\$145,						-		\$145,0	
Total Personnel Expenses	\$628	581	-					-	\$628,5	81.00
Occupancy-(e.g., Rental of Property, Utilities,	\$31,	752	-					_	\$31,75	2 00
Building Maintenance Supplies and Repairs)		JZ	-			_				2.00
Materials and Supplies-(e.g., Office,	\$8,8	00							\$8,80	0.00
Postage, Printing and Repro., Program Supplies)				1	-					
General Operating-(e.g., Insurance, Staff	\$19,4	400							\$19,40	00.00
Training, Equipment Rental/Maintenance)				1	-			-		
2.44	-	_		-				_	-	-
Staff Travel - (e.g., Local & Out of Town)				-		-	-	-	-	_
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor					-	_			-	
Consultant/Subcontractor										_
					-	_			-	
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses	\$59,9	952					-		\$59,98	2.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures										
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$688,	533							\$688,5	33.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES Indirect Expenses	\$688, \$103,	533 280							\$688,5 \$103,2	33.00 80.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES	\$688,	533 280			NOTES				\$688,5	33.00 80.00

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:

Title:

Date:

APPENDIX F-4e

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	A. 20

			APPENDIX F-4e 07/01/2024 - 06/30/2025 PAGE B
			Invoice Number
Contractor: S	an Francisco AIDS Foundation		A-4JUL24
Address: 1	35 Market Street, Suite 400		
S	an Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 4*	5-487-3000	Fund Source:	General Fund
Fax:			
		Department ID-Authority ID:	
Program Name: H	V Syringe Access and Disposal Service	vices - Syringe Sweeps	
		Project ID-Activity ID:	
ACE Control #:			
		Invoice Period:	07/1/24 - 07/31/24
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
			THIS PERIOD	TODATE	BODGET	BALANCE
Manager, Syringe Clean Up	2.00	\$140,000				\$140,000.00
Inventory & Logistics Coordinator	0.80	\$37,622			-	\$37,622.00
Associate, Syringe Clean Up	5.60	\$227,483				\$227,483.00
Syringe Sweeps Mgr. Disposal, Mobil	0.25	\$23,882		-		\$23,882.00
Associate, Syringe Clean Up - Mobile	1.00	\$54,537			-	\$54,537.00
	_		_			
	-					
	-					
	-					-
	-					
	-					
	-					
TOTAL SALARIES	9.65	\$483,524				\$483,524.00

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-4f
07/01/2025 - 06/30/2026
PAGE A

		-	act ID #					In	voice Num	ber
Contractor: San Francisco AIDS Found	1.	10000	02634]					A-4JUL2	5
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Con	tract Purc	hase C	order No:	É.		
		<u></u>		1					-	
Telephone: 415-487-3000 Fax:		CH	EP		F	unding	Source:	G	eneral Fu	Ind
rogram Name: HIV Syringe Access and Di	enceal S	1. S. S. S.			partment	ID-Auth	nority ID:		_	_
	shosa a	ervices .	Synnge	Sweep		t ID-Ad	tivity ID:			
ACE Control #:						Invoice	Period:	07/1	/25 - 07/	31/25
							Invoice		(check if	
	CONTR	TAL ACTED NOC		ERED	DELIVE TO DA UOS			OF TAL NOC	DELIVE	
DELIVERABLES	UOS	N/A	005	NOC	003	NOC	003	NUC	4,368	NOC N/A
Syringe Disposal Service Hours	4,368	N/A			-	-			4,300	N/A
		-			-			1		
									1	
-			· · · · · · · · · · · · · · · · · · ·	1000	-	·		1.	1	
								-	1	
		NOC		NOC		NOC		NOC		NOC
lumber of Clients for Appendix	-	N/A								N/A
		GET		NSES	EXPEN TO DA		% BUD	OF GET	BALA	INING
otal Salaries (See Page B)	\$483	.524							BAL/	NCE
otal Salaries (See Page B) ringe Benefits	\$483 \$145	,524 ,057							BAL/ \$483,5 \$145,0	NCE 24.00 57.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	\$483	,524 ,057							BAL/	NCE 24.00 57.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses:	\$483 \$145 \$628	,524 ,057 ,581							BAL/ \$483,5 \$145,0 \$628,5	NCE 24.00 57.00 81.00
Context Series (See Page B) Context Series (Series (Serie	\$483 \$145	,524 ,057 ,581							BAL/ \$483,5 \$145,0	NCE 24.00 57.00 81.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$483 \$145 \$628 \$31,	,524 ,057 ,581 752							BAL/ \$483,5 \$145,0 \$628,5 \$31,75	NCE 24.00 57.00 81.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Propeny, Utilities,	\$483 \$145 \$628	,524 ,057 ,581 752							BAL/ \$483,5 \$145,0 \$628,5	NCE 24.00 57.00 81.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Propeny, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$483 \$145 \$628 \$31, \$8,8	,524 ,057 ,581 752 300							BAL/ \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Propeny, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$483 \$145 \$628 \$31,	,524 ,057 ,581 752 300							BAL/ \$483,5 \$145,0 \$628,5 \$31,75	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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	\$483 \$145 \$628 \$31, \$8,8	,524 ,057 ,581 752 300							BAL/ \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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)	\$483 \$145 \$628 \$31, \$8,8	,524 ,057 ,581 752 300							BAL/ \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Propeny, 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	\$483 \$145 \$628 \$31, \$8,8	,524 ,057 ,581 752 300							BAL/ \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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)	\$483 \$145 \$628 \$31, \$8,8	,524 ,057 ,581 752 300							BAL/ \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00
otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)	\$483 \$145 \$628 \$31, \$8,8 \$19, \$19,	,524 ,057 ,581 752 300 400							BAL/ \$483,5 \$145,0 \$628,5 \$31,7 \$8,800 \$19,44	NCE 24.00 57.00 81.00 52.00 00.00
otal Salaries (See Page B) ringe Benefits Total Personnel 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	\$483 \$145 \$628 \$31, \$8,8	,524 ,057 ,581 752 300 400							BAL/ \$483,5 \$145,0 \$628,5 \$31,75 \$31,75 \$8,80	NCE 24.00 57.00 81.00 52.00 00.00
otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$483 \$145 \$628 \$31, \$8,8 \$19, \$19,	,524 ,057 ,581 752 300 400							BAL/ \$483,5 \$145,0 \$628,5 \$31,7 \$8,800 \$19,44	NCE 24.00 57.00 81.00 52.00 00.00 00.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Propeny, 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	\$483 \$145 \$628 \$31, \$8,8 \$19, \$59, \$59, \$688 \$103	524 057 581 752 300 400 952 533 280							BAL/ \$483,5 \$145,0 \$628,5 \$31,7 \$8,80 \$19,40 \$19,40 \$59,93 \$59,93 \$59,93 \$59,93 \$59,93	NCE 24.00 57.00 81.00 52.00 0.00 00.00 00.00 52.00 52.00 52.00 53.00 80.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Propeny, 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	\$483 \$145 \$628 \$31, \$8,8 \$19, \$19, \$59, \$688	524 057 581 752 300 400 952 533 280							BAL/ \$483,5 \$145,0 \$628,5 \$31,7 \$8,80 \$19,44 \$19,44 \$59,92 \$59,92 \$59,92	NCE 24.00 57.00 81.00 52.00 0.00 00.00 00.00 52.00 52.00 52.00 53.00 80.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Propeny, 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	\$483 \$145 \$628 \$31, \$8,8 \$19, \$19, \$59, \$688 \$103 \$791	524 057 581 752 300 400 952 533 280							BAL/ \$483,5 \$145,0 \$628,5 \$31,7 \$8,80 \$19,40 \$19,40 \$59,93 \$59,93 \$59,93 \$59,93 \$59,93	NCE 24.00 57.00 81.00 52.00 0.00 00.00 00.00 52.00 52.00 52.00 53.00 80.00

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:

Title:

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	

			07/01/2025 - 06/30/2026 PAGE B
			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-4JUL25
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	General Fund
Fax:			
		Department ID-Authority ID:	
Program Name:	HIV Syringe Access and Disposal Se	rvices - Syringe Sweeps	
		Project ID-Activity ID:	
ACE Control #:			Sector Sector Sector
		Involce Period:	07/1/25 - 07/31/25
		FINAL Involce	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	BALANCE
Manager, Syringe Clean Up	2.00	\$140,000	11101 21100			\$140,000.00
Inventory & Logistics Coordinator	0.80	\$37,622				\$37,622.00
Associate, Syringe Clean Up	5.60	\$227,483				\$227,483.00
Syringe Sweeps Mgr. Disposal, Mobi	0.25	\$23,882		-		\$23,882.00
Associate, Syringe Clean Up - Mobile	1.00	\$54,537				\$54,537.00
	-					
	_					
	-					
	-		-			
	-	-				
	-					-
	-					-
	-					
TOTAL SALARIES	9.65	\$483,524				\$483,524.00

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:

Date:

APPENDIX F-4f

Contractor: San Francisco AIDS Found	ation		act ID #	1			ī		voice Num A-5JUL2	
Address: 1035 Market Street, Suite 4	C TIFEE	10000	02001	1			1		A-000L2	0
San Francisco, CA 94103				Con	tract Pur	chase O	rder No:			
Telephone: 415-487-3000				1		Funding	Source:	v	Vork Ord	er
Fax:		CH	EP	De	partmen	ID-Auth	ority ID-	_		_
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Syringe					-		
							tivity ID:	1		
ACE Control #:						Inciden	Desta del	07/4	00 07/	14/00
						Invoice	Period:	07/1	/20 - 07/3	31/20
						FINAL	Invoice		(check if	Yes)
		TAL		ERED	DELIV		% (REMA	INING
DELIVERABLES	LONTR	NOC	THIS P UOS	NOC	UOS	NOC	TOT	NOC	UOS	NOC
Syringe Disposal Service Weeks	52	N/A				10000			52	N/A
					1	1			1	-
					-	-	-			-
						-		-	-	
		1								
		NOC	1.000	NOC		NOC		NOC		NO
lumber of Clients for Appendix		N/A	1		12 - 0	1.00		1100		N/A
EXPENDITURES	BUD	GET	EXPE		EXPE		% (INING
			THIS P	ERIOD	100		BUDO	GET	BALA	
otal Salaries (See Page B)	\$5,8		THIS P	ERIOD	TOD		BUDO	GET	\$5,87	the state of the s
ringe Benefits	\$5,8	378		ERIOD			BUDG	3ET	\$5,87	8.00
ringe Benefits Total Personnel Expenses		378		ERIOD			BODO	JET	and the second se	8.00
ringe Benefits Total Personnel Expenses Operating Expenses:	\$5,8	378		ERIOD			BUDG	GET	\$5,87	8.00
ringe Benefits Total Personnel Expenses	\$5,8	378		ERIOD			BUDG	JET	\$5,87	8.00
ringe Benefits Total Personnel Expenses Deperating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$5,8 \$5,8	378					BUDG		\$5,87 \$5,87	8.00
Total Personnel Expenses Departing Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$5,8	378					BODO		\$5,87	8.00
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)	\$5,8 \$5,8	378					BUDC	3ET	\$5,87 \$5,87	8.00
ringe Benefits Total Personnel Expenses Departing Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$5,8 \$5,8	378					BUDC	3ET	\$5,87 \$5,87	8.00
ringe Benefits Total Personnel Expenses Deerating 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	\$5,8 \$5,8	378					BUD	3ET	\$5,87 \$5,87	8.00
ringe Benefits Total Personnel Expenses Deerating 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)	\$5,8 \$5,8	378					BUD	3ET	\$5,87 \$5,87	8.00
ringe Benefits Total Personnel Expenses Deerating 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	\$5,8 \$5,8	378					BUD		\$5,87 \$5,87	8.00
ringe Benefits Total Personnel Expenses Depending 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)	\$5,8 \$5,8	378					BUD		\$5,87 \$5,87	8.00
ringe Benefits Total Personnel Expenses Decrating 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	\$5,8 \$5,8	54					BUD		\$5,87 \$5,87	8.00
ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$5,8 \$5,8 \$18 \$18 \$18	54 54					BUD		\$5,87 \$5,87 \$154 \$154 \$154	8.00
ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$5,8 \$5,8 \$18 \$18 \$18 \$18 \$6,0	54 54 532					BUD		\$5,87 \$5,87 \$154 \$154 \$154 \$154	8.00 8.00 4.00
ringe Benefits Total Personnel Expenses Decrating 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	\$5,8 \$5,8 \$18 \$18 \$18	54 54 54 54 54					BUD		\$5,87 \$5,87 \$154 \$154 \$154	8.00 8.00 4.00 4.00 5.00 5.00

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 clied 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-5a

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 403				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments	-	(DPH Authorized Signatory)		

			APPENDIX F-5a 07/01/2020 - 06/30/2021 PAGE B
			Invoice Number
Contractor: San Franc	isco AIDS Foundation		A-5JUL20
Address: 1035 Mark	et Street, Suite 400		
San Franc	isco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-30	000	Fund Source:	Work Order
Fax:			
		Department ID-Authority ID:	
Program Name: HIV Syring	e Access and Disposal Servi	ices - Syringe Sweeps War Memoria	al
		Project ID-Activity ID:	
ACE Control #:			
		Invoice Period:	07/1/20 - 07/31/20
		FINAL Invoice	(check if Vec)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Associate, Syringe Clean Up	0.125	\$5,878		l re eure	1 1	\$5,878.00
ricestiale, ettinge elean op	0.120					00,010.00
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				-	1	
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The second se						
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			-			
		10.07		1. Contract (1. Contract)		
TOTAL SALARIES	0.125	\$5,878				\$5,878.00

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:

		Contra	act ID #					In	volce Num	ber
Contractor: San Francisco AIDS Found	ation		02634	1			T		A-5JUL2	V4.90
Address: 1035 Market Street, Suite 4										
San Francisco, CA 94103				Co	ntract Put	urchase Order No:				
Telephone: 415-487-3000		0		Funding Source:				Work Order		
Fax:		CH	EP	D	epartmen	t ID-Auth	ority ID:	-		-
rogram Name: HIV Syringe Access and Di	sposal S	ervices -	Syringe	Sweep			tivity ID:			
ACE Control #:					Proje					
						Invoice	Period:	07/1	/21 - 07/3	31/21
						FINAL	Invoice	-	(check if	Yes)
		TAL	DELIV THIS P			ERED	% C TOT			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Disposal Service Weeks	52	N/A	-			-		0.00	52	N/A
	-	-		-	-	-		-		-
				-						-
				-	-	-		-	-	-
				-						
		NOC		NOC		NOC		NOC		NOC
umber of Clients for Appendix		N/A	1	NOC	1	NOC	1	NOC		N/A
		Tura		-		-		_		10/5
XPENDITURES	BUD	GET	EXPE THIS P	and the second sec	EXPE TO D		% C			INING
otal Salaries (See Page B)	\$5,		THO T	LINIOD	101		0000		\$5,87	
ringe Benefits	40,0	10				-			00,07	0.00
Total Personnel Expenses	\$5,8	378	-	-					\$5,87	8.00
perating Expenses:							-			
Occupancy-(e.g., Rental of Property, Utilities,										
Building Maintenance Supplies and Repairs)										_
Materials and Supplies to a office	\$1	-		_		_			\$154	1.00
Materials and Supplies-(e.g., Office,	Φ 1	24		-			-		\$104	¥.00
Postage, Printing and Repro., Program Supplies)				_	-					
General Operating-(e.g., Insurance, Staff		-			-					_
Training, Equipment Rental/Maintenance)						1	2		-	-
Staff Travel - (e.g., Local & Out of Town)					-		1			
Canonikant/Subaartanta			-				· · · · · · · · · · · · · · · · · · ·			
Consultant/Subcontractor			1	_		-			-	_
Other - (Meals, Audit, Transportation Relmb,			1			1	1		11.	
Stipends, Facilitators)		-	1		-					
	\$1		_						\$154	00
	01		-		-		-	_	5154	
Total Operating Expenses		· · · · · · · · · · · · · · · · ·							\$6.03	2.00
Total Operating Expenses Capital Expenditures	\$6.0	32					-			
Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$6,0 \$9		-	-					\$905	5.00
Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$9)5						-	\$905	
Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses OTAL EXPENSES)5			NOTES			-	\$905 \$6,93	
Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$90 \$6,9)5			NOTES					

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-5b

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403				
1.1	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

		APPENDIX F-5b 07/01/2021 - 06/30/2022 PAGE B
		Invoice Number
Contractor: San Francisco AIDS Foundation		A-5JUL21
Address: 1035 Market Street, Suite 400		
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	Work Order
Fax:		
	Department ID-Authority ID:	
Program Name: HIV Syringe Access and Disposal Ser	vices - Syringe Sweeps War Memoria	al
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/21 - 07/31/21
		and the second s

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Associate, Syringe Clean Up	0.125	\$5,878			T	\$5,878.00
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l						
TOTAL SALARIES	0.125	\$5,878				\$5,878.00

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:

Contractor: San Francisco AIDS Found	atlan		act ID #	1					voice Num	
Address: 1035 Market Street, Suite 4		1000	02034	ł., .,			1		A-5JUL2	2
San Francisco, CA 94103				Con	tract Pu	rchase C	order No:	_	_	_
Telephone: 415-487-3000	CHED		1		Funding	Source:	٧	Vork Ord	er	
Fax:		CHEP		De	partmen	t ID-Aut	nority ID:		-	
Program Name: HIV Syringe Access and Di	sposal Se	ervices -	Syringe		s War M	emorial				
					Proje	ect ID-Ac	tivity ID:		_	_
ACE Control #:						Invoice	Period:	07/1	/22 - 07/	31/22
						FINAL	Invoice	-	(check if	Yes)
DELIVERABLES	TO CONTR UOS			ERED ERIOD NOC		ERED DATE NOC	% C TOT UOS		REMA DELIVE UOS	AINING RABLES
Syringe Disposal Service Weeks	52	N/A	1	1100	000			1100	52	N/A
		1			1	1.00	1.1	-		
		-			-		-			-
	-	-	-		-				-	-
					-			1	-	-
		NOC	1.1	NOC		NOC		NOC		NOC
lumber of Clients for Appendix		_						1100		N/A
tained of anomo for repetitaix		N/A					1		1	19/74
	BUD		EXPE THIS P		1.000	NSES	% O BUDG			INING
EXPENDITURES	BUD \$5,8	GET	EXPE THIS P		1.000	NSES DATE	% O BUDG			
otal Salaries (See Page B) ringe Benefits	\$5,8	GET 178			1.000	1.1.2 The P			BAL/ \$5,87	INING ANCE 8.00
otal Salaries (See Page B) ninge Benefits Total Personnel Expenses		GET 178			1.000	1.1.2 The P			BALA	INING ANCE 8.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses:	\$5,8	GET 178			1.000	1.1.2 The P			BAL/ \$5,87	INING ANCE 8.00
EXPENDITURES Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Deprating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$5,8	GET 178			1.000	1.1.2 The P			BAL/ \$5,87	INING ANCE 8.00
EXPENDITURES Fotal Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses:	\$5,8	GET 178			1.000	1.1.2 The P			BAL/ \$5,87	INING ANCE 8.00
EXPENDITURES	\$5,8	GET 178 178			1.000	1.1.2 The P			BAL/ \$5,87	8.00
EXPENDITURES 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)	\$5,8 \$5,8	GET 178 178			1.000	1.1.2 The P			BAL ² \$5,87	UNING ANCE 8.00 8.00
Contemporation of the second	\$5,8 \$5,8	GET 178 178			1.000	1.1.2 The P			BAL ² \$5,87	UNING ANCE 8.00 8.00
	\$5,8 \$5,8	GET 178 178			1.000	1.1.2 The P			BAL ² \$5,87	UNING ANCE 8.00 8.00
EXPENDITURES	\$5,8 \$5,8	GET 178 178			1.000	1.1.2 The P			BAL ² \$5,87	8.00
EXPENDITURES Total Salaries (See Page B) Finge Benefits Total Personnel Expenses Dperating 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)	\$5,8 \$5,8	GET 178 178			1.000	1.1.2 The P			BAL ² \$5,87	8.00
EXPENDITURES	\$5,8 \$5,8	GET 178 178			1.000	1.1.2 The P			BAL ² \$5,87	UNING ANCE 8.00 8.00
EXPENDITURES otal Salaries (See Page B) ringe 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)	\$5,8 \$5,8	GET 178 178			1.000	1.1.2 The P			BAL ² \$5,87	UNING ANCE 8.00 8.00
Consultant/Subcontractor Otal Salarles (See Page B) ringe Benefits Total Personnel 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,	\$5,8 \$5,8	GET 78 78 54			1.000	1.1.2 The P		Concerning of the second se	BAL ² \$5,87	UNING NICE 8.00 8.00
CXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$5,8 \$5,8 \$18 \$15	GET 78 78 54 54			1.000	1.1.2 The P		Concerning of the second se	BAL2 \$5.87 \$5,87 \$154 \$154	LINING NCE 8.00 8.00 4.00
CXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$5,8 \$5,8 \$18 \$15 \$15 \$6,0	GET 78 78 54 54 54 54 54			1.000	1.1.2 The P		Concerning of the second se	BAL2 \$5.87 \$5,87 \$154 \$154 \$154 \$154	LINING NICE 8.00 8.00 4.00 4.00
EXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$5,8 \$5,8 \$18 \$18 \$15 \$5,0 \$90 \$90	GET 78 78 54 54 54 54 55			1.000	1.1.2 The P		Concerning of the second se	BAL2 \$5,87 \$5,87 \$154 \$154 \$154 \$164 \$6,03 \$905	LINING NICE 8.00 8.00 1.00
EXPENDITURES	\$5,8 \$5,8 \$18 \$15 \$15 \$6,0	GET 78 78 54 54 54 54 55			1.000			Concerning of the second se	BAL2 \$5.87 \$5,87 \$154 \$154 \$154 \$154	LINING NICE 8.00 8.00 4.00

ove is, to the best of my I ce ge, con d for reim ement 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:

Send to:	SFDPH Fiscal / Invoice Processing		
	1380 Howard Street, 4th Floor, Suite 403		
· · · · · · · · · · · · · · · · · · ·	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-5c 07/01/2022 - 06/30/2023 PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-5JUL22
Address:	1035 Market Street, Suite 400		
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	Work Order
Fax:			and the second second
		Department ID-Authority ID:	
ogram Name:	HIV Syringe Access and Disposal Servi	ices - Syringe Sweeps War Memoria	
		Project ID-Activity ID:	
CE Control #:			
		Invoice Period:	07/1/22 - 07/31/22
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Associate, Syringe Clean Up	0.125	\$5,878	-			\$5,878.00
					1	
		_				
				1		
	-				-	_
	-					_
					-	
	-				-	
	-			-		
	-			-		
TOTAL SALARIES	0.125	\$5,878				\$5,878.00

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:

			act ID #						voice Num	
Contractor: San Francisco AIDS Found		10000	02634				1	1.5	A-5JUL2	3
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Cor	tract Dur	chase O	rder No-		-	-
San Francisco, CA 34103				CO	ontract Purchase Order No:					
Telephone: 415-487-3000		01	CHEP		Funding Source:			Work Order		
Fax:		CH	EP	De	partmen	D-Auth	ority ID-			
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Syringe		•			-		-
			1.1				tivity ID:			
ACE Control #:						Enters	n	0714	100 071	04/00
						Invoice	Period:	07/1	/23 - 07/	31/23
						FINAL	Invoice	a. 11	(check if	Yes)
	то	TAL	DELIV	ERED	DELIV	FRED	%)F	REMA	INING
	CONTR	ACTED	THIS P	ERIOD	TOD	ATE	TOT	AL		RABLES
DELIVERABLES Syringe Disposal Service Weeks	UOS 52	NOC N/A	UOS	NOC	UOS	NOC	uos	NOC	UOS 52	NOC N/A
Syninge Dispussi Service Weeks	JE	1975		-				-	02	140
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		1222				1		1.1		
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	_	NOC	_	NOC	-	NOC		NOC	_	NOC
Number of Clients for Appendix		N/A				1	1.5-01			N/A
EXPENDITURES			EXPE	NSES	EXPE	NSES	% 0	F	REMA	INING
/Mar 1 / 4 []		GET	THIS P	ERIOD	TOD	ATE	BUDO	GET		NCE
Total Salaries (See Page B)	\$5,8	378	_	~ -1	-	-			\$5,87	8.00
ringe Benefits	er a	70	-						PE 07	0.00
Total Personnel Expenses	\$5,8	5/6							\$5,87	8.00
Occupancy-(e.g., Rental of Property, Utilities,	-	-	-	-	-				-	
Building Maintenance Supplies and Repairs)			-					-		-
3									date	
Materials and Supplies-(e.g., Office,	\$1	54							\$154	1.00
Postage, Printing and Repro., Program Supplies)										-
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)			<u></u>						-	
					_					_
0. M. P			-	-	-					
Staff Travel - (e.g., Local & Out of Town)					-	- 1				_
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor	_									_
Consultant/Subcontractor		-		-						
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb,									-	
Consultant/Subcontractor								_		-
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb,	\$1!	54						_	\$154	.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures										
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$6,0	32							\$6,03	2.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$6,0 \$90	132 15							\$6,03 \$905	2.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES Indirect Expenses TOTAL EXPENSES	\$6,0	132 15							\$6,03	2.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$6,0 \$90 \$6,9	132 15			NOTES				\$6,03 \$905	2.00

I cer 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-5d

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 403		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-5d 07/01/2023 - 06/30/2024 PAGE B

		Invoice Number
Contractor: San Francisco AIDS Foundation		A-5JUL23
Address: 1035 Market Street, Suite 400		
San Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 415-487-3000	Fund Source:	Work Order
Fax:		
	Department ID-Authority ID:	
ogram Name: HIV Syringe Access and Disposal S	Services - Syringe Sweeps War Memoria	
	Project ID-Activity ID:	
ACE Control #:		
	Invoice Period:	07/1/23 - 07/31/23
	FINAL Invoice	(check if Yes

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
Associate, Syringe Clean Up	0.125	\$5,878	THOT ETHOP	TODATE	T	\$5,878.00
rissociate, of hige orean op	0.120	00,070				\$0,070.00
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and the second second		in the second				a terrent
TOTAL SALARIES	0.125	\$5,878				\$5,878.00

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:

		Contra	act ID #					In	voice Num	ber
Contractor: San Francisco AIDS Found	dation 1000002634		I			1	1227	A-5JUL2	4	
Address: 1035 Market Street, Suite 400 San Francisco, CA 94103 Telephone: 415-487-3000				Cor	itract Pur	chase C	order No:			_
		1		r fai		Funding	Source:	V	Vork Ord	er
Fax:		CH	EP	17.04						
Program Name: HIV Syringe Access and Di	sposal Se	ervices -	Syringe	1	epartmen s War M					_
ACE Control #:	ŕ				Proje	ect ID-Ad	tivity ID:	1	_	-
						Invoice	Period:	07/1	/24 - 07/3	31/24
						FINAL	Invoice	12.471	(check if	Yes)
DELIVERABLES	TOT CONTR UOS		DELIV THIS P UOS		DELIV TO D	ERED ATE NOC	% t TOT UOS			INING RABLES NOC
Syringe Disposal Service Weeks	52	N/A	003	NOC	003	NOC	005	NOC	52	N/A
			-	-				1		THE
-	i		-			· · · · ·		(1	
									-	-
	-							-		-
	-	NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A							· · · · ·	N/A
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D		% C BUD		REMA BALA	
rotal Salaries (See Page B) ringe Benefits	\$5,8	78	-		-	-	-		\$5,87	8.00
	P.C. 0								\$5.87	8.00
Total Personnel Expenses	\$5,8	78		-					\$0,07	
	\$5,8	78		-			[\$5,07	
	\$5,8	78			-				\$0,07	
Operating Expenses:	\$5,8	78		_					\$0,07	-
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)								_	-	
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$5,8								\$154	.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)									-	.00
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)									-	.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,									-	.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									-	.00
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)									-	.00
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									-	.00
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)									-	.00
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, Stipends, Facilitators) Total Operating Expenses									-	
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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$15	4							\$154	.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	\$15 \$15 \$15 \$6,03	4							\$154 \$154 \$154 \$154	.00
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, Stipends, Facilitators) Total Operating Expenses	\$15	4							\$154	.00 2.00 .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:

Title:

Send to:	SFDPH Fiscal / Invoice Processing				
	1380 Howard Street, 4th Floor, Suite 403				
	San Francisco, CA 94103	By:		Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

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			APPENDIX F-5e
			07/01/2024 - 06/30/2025
			strate and see the set and set and set
			PAGE B
			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-5JUL24
Address:	1035 Market Street, Suite 400		and the second sec
	San Francisco, CA 94103	Contract Purchase Order No:	
Telephone:	415-487-3000	Fund Source:	Work Order
Fax:			
		Department ID-Authority ID:	
Program Name:	HIV Syringe Access and Disposal Ser	vices - Syringe Sweeps War Memoria	el
		Project ID-Activity ID:	
ACE Control #:			
		Invoice Period:	07/1/24 - 07/31/24
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF	REMAINING BALANCE
		11107 11100	Tourne	1 1	\$5,878.00
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0.125	\$5 872		-	-	\$5,878.00
	6.125	FTE SALARY 0.125 \$5,878	BUDGETED EXPENSES 0.125 \$5,878	BUDGETED EXPENSES EXPENSES 0.125 \$5,878 TO DATE 0.125 \$5,878	BUDGETED EXPENSES EXPENSES % OF 0.125 \$5,878

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:

			act ID #						voice Nun	_
Contractor: San Francisco AIDS Foundatio Address: 1035 Market Street, Suite 400 San Francisco, CA 94103		10000	02634						A-5JUL2	5
				Con	ntract Pu	chase O	rder No:			_
Telephone: 415-487-3000		L.S.C.		100		Funding	Source:	V	Nork Ord	ler
Fax:		CH	EP			11				
Program Name: HIV Syringe Access and Di	enceal S	anvices	Svringe		epartmen s War M			-		
rogiani name. The synnige Access and Di	aposar o	er ricea -	Synnge	owcop			tivity ID:	1		
ACE Control #:						23		-		
						Invoice	Period:	07/1	/25 - 07/	31/25
						FINAL	Invoice	15 + 4	(check if	Yes)
	TO	TAL	DELIV	EDED	DELM	ERED	% (DE .	REM	INING
	CONTR	ACTED	THIS P	ERIOD	TO	ATE	TOT	AL	DELIVE	RABLES
DELIVERABLES Syringe Disposal Service Weeks	UOS 52	NOC N/A	UOS	NOC	UOS	NOC	UOS	NOC	UOS 52	NOC N/A
Shinge Disposal bervice Weeks	JE	INCA							52	19/2
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		1100		1100						
lumber of Clients for Appendix	-	NOC N/A	1	NOC		NOC	-	NOC	-	NOC N/A
									-	
EXPENDITURES	BUD	GET	EXPER THIS PI		EXPE	NSES	% (BUD			ANCE
otal Salaries (See Page B)	\$5,8					1			\$5,87	
ringe Benefits				1.1					_	
Total Personnel Expenses	\$5,8	378			<u> </u>	-			\$5,87	8.00
Occupancy-(e.g., Rental of Property, Utilities,									-	
Building Maintenance Supplies and Repairs)	-			-	-					
Materials and Supplies-(e.g., Office,	\$1	54		- 2		-			\$154	1.00
Postage, Printing and Repro., Program Supplies)				-						
General Operating-(e.g., Insurance, Staff	-			-	-	-	-	-	-	
Training, Equipment Rental/Maintenance)			1		-				2	
0. // 7		3	-	_			-	_		
Staff Travel - (e.g., Local & Out of Town)	-		-	_	-		-	_	-	
Consultant/Subcontractor			-					-		
Other - (Meals, Audit, Transportation Reimb,	-		-	-	-					
Stipends, Facilitators)			-		-		1	-		
								1		
Total Operating Expenses	\$15	54							\$154	.00
Capital Expenditures OTAL DIRECT EXPENSES	\$6,0	32	-	-	-				\$6,03	2.00
Indirect Expenses	\$90	05	1						\$905	5.00
OTAL EXPENSES	\$6,9	37	-	- 20-1	-				\$6,93	7.00
LESS: Initial Payment Recovery					NOTES:					
Other Adjustments (Enter as negative, if approp	nate		-							

Signature:

Title:

Send to:	SFDPH Fiscal / Invoice Processing			
	1380 Howard Street, 4th Floor, Suite 403			
	San Francisco, CA 94103	By:	2	Date:
	Attn: Contract Payments	~*	(DPH Authorized Signatory)	

APPENDIX F-5f
07/01/2025 - 06/30/2026
PAGER

			Invoice Number
Contractor: Sa	an Francisco AIDS Foundation		A-5JUL25
Address: 10	35 Market Street, Suite 400		
S	an Francisco, CA 94103	Contract Purchase Order No:	
Telephone: 41	5-487-3000	Fund Source:	Work Order
Fax:			
		Department ID-Authority ID:	
rogram Name: HI	V Syringe Access and Disposal Serv	ices - Syringe Sweeps War Memorial	C
	The second second second	Project ID-Activity ID:	
ACE Control #:			
		Invoice Period:	07/1/25 - 07/31/25
		FINAL Invoice	(check if Ves

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Associate, Syringe Clean Up	0.125	\$5,878			T	\$5,878.00
			1			the second second second second
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				1.5.		
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	-				-	
	-				-	
				-		
					+	
TOTAL SALARIES	0.125	\$5,878				\$5,878.00

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:

CLAIMS-MADE X OCCUR DAMAGE TO RENTED PREMISES (Ea occurrence) \$1 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- TROT X LOC PRODUCTS - COMPION ST GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- TROT X LOC PRODUCTS - COMPION ST S2 OTHER: V VIDONOBLE LIABILITY Y 2019-00950 4/1/2018 4/1/2018 4/1/2020 FCOMBINED SINGLE LIMIT \$1 A AUTONOBLE LIABILITY Y 2019-00950-UMB 4/1/2018 4/1/2019 H/1/2020 FCOMBINED SINGLE LIMIT \$1 A AUTOS ONLY X ANONOWED AUTOS ONLY X AUTOS ONLY X BODILY INJURY (Per accident) \$ A X UMBRELLA LIAB X OCCUR 2019-00950-UMB 4/1/2019 4/1/2020 EACH OCCURRENCE \$1 B MORKERS COMPENSATION \$10.000 S SAWC033700 7/1/2019 7/1/2020 X STATUTE TH+ EL. EACH ACCIDENT \$1 B MORKERS COMPENSATION N /A SAWC033700 7/1/2019 4/1/2019 4/1/2020 FLoch ACCIDENT </th <th>10/29/2019</th>	10/29/2019
If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. If this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). PEODUCER. CaliNonprofits Insurance Services 1500 41st Avenue Soutie 220 CaliNonprofits Insurance Services 1500 41st Avenue Sam Francisco AIDS Foundation 025 Market Street, Ste, 400 San Francisco CA 94103 Insures : Insure :	HOLDER. THIS
PRODUCER CaliNonprofils Insurance Services 1600 41st Avenue Calinota CA 95010 Naurez A: Monprofils Insurance Alliance of California Insurez California Insurez A: Monprofils Insurance Alliance of California Insurez A: Monprofils Insurance Alliance	
Starting and Applice and Set Nuess Starting and Applice and	
Sulfe 280 Capitola CA 95010 Capitola CA 95010 SANFRAM44 San Francisco AIDS Foundation 1035 Market Street, Ste, 400 San Francisco AIDS Foundation 1035 Market Street, Ste, 400 San Francisco CA 94103 CERTIFICATE NUMBER: 453153371 REVISION NUMBER: COVERAGES CERTIFICATE NUMBER: 453153371 REVISION NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ADOVE FOR THE INSURER E: INSURE	
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San Francisco AIDS Foundation 1035 Market Street, Ste, 400 Insures 8: Benafinal Plantaway Polices Units and Insurance Comparison San Francisco CA 94103 San Francisco CA 94103 San Francisco CA 94104 San Francisco CA 94103 San Francisco CA 94103 San Francisco CA 94103 San Francisco CA 94104 San Francisco CA 94104 San Francisco CA 94104 San Francisco CA 94104 San Francisco CA 94104 San Francisco CA 94104 San Francisco CA 94104 San Franc	10023
1035 Market Street, Ste, 400 INSURER 5: LOGY Syndicate San Francisco CA 94103 INSURER 5: LOGY Syndicate San Francisco CA 94103 INSURER 5: LINUT Street Steep Stee	ny
INSURER E: INSURER F: INSUR F: INSUR F: INSURER F: INSURER F: INSURER F: INSURER F: INS	-
INSURER F: COVERAGES CERTIFICATE NUMBER: 453153371 REVISION NUMBER: INSURER F: CERTIFICATE NUMBER: 453153371 REVISION NUMBER: INSURER F: INSURER F: INSURER F: REVISION NUMBER: INSURER F: INSURER F: INSURER F: INSURER F: INSURER F: INSURER F: INSURE FOR THER INSURER F: INSURER F: INSURE F: INSURER F: INSURE FOR THER INSURE FOR THER <td>-</td>	-
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Workers Compensation as permitted by law.	General spects to
CERTIFICATE HOLDER CANCELLATION	
City and County of San Francisco, Department of Public Health	
Attn: Contracts 101 Grove Street, Suite 307 San Francisco CA 94102	

ACORD 25 (2016/03)

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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:

(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.



BY

Pamel C. R.

(00950)

(AUTHORIZED REPRESENTATIVE)

NIAC - SCHEDULE AI - NPO

NONPROFITS INSURANCE ALLIANCE OF CALIFORNIA (NIAC)

www.insurancefornonprofits.org

BUSINESS AUTO COVERAGE ADDITIONAL INSURED/LOSS PAYEE EXTENSION

POLICY NUMBER: 2019-00950-NPO

NAME OF INSURED: San Francisco AIDS Foundation; Stonewall; Magnet

ADDITIONAL INSUREDS /

LOSS PAYEE Additional Insured - NIAC A1 City and County of San Francisco - SFMTA 1 South Van Ness Avenue, 7th Floor San Francisco, CA 94103 As respects vehicle(s): ALL Additional Insured - NIAC A1 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 Additional Insured - NIAC A1 Golden Gate National Recreation Area Office of Special Park Uses Fort Mason Bldg, 204 San Francisco, CA 94103 As respects vehicle(s): ALL Additional Insured - CA2001 Penske Truck Leasing Co. LP 630 Cesar Chavez St. San Francisco, CA 94124 As respects vehicle(s): ALL Additional Insured - NIAC A1 San Francisco Department Of Public Health 25 Van Ness Avenue, Suite 500 San Francisco, CA 94102 As respects vehicle(s): ALL Loss Pavee - CA9944 Subaru of America, Inc. its parent and subsidiaries c/o Ebix BPO, Inc. P.O. Box 257, Dept. 14-Z-343849 Portland, MI 48875 As respects vehicle(s): ALL

Schedule Al

Page 1

NONPROFITS SURANCE **ALLIANCE OF CALIFORNIA**

A Head for Insurance. A Heart for Nonprofits.



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.

City and County of San Francisco Office of Contract Administration Purchasing Division City Hall, Room 430 1 Dr. Carlton B. Goodlett Place San Francisco, California 94102-4685

Agreement between the City and County of San Francisco and

San Francisco AIDS Foundation

This Agreement is made this 1st day of July, 2016, in the City and County of San Francisco, State of California, by and between San Francisco AIDS Foundation, 1035 Market Street, San Francisco CA 94103 ("Contractor") and City.

Recitals

WHEREAS, the Department of Public Health ("Department") wishes to HIV Syringe Access and Disposal services; and,

WHEREAS, a Request for Proposal ("RFP") was issued on March 3, 2016, and City selected Contractor as the highest qualified scorer pursuant to the RFP; and

WHEREAS, there is no Local Business Entity ("LBE") subcontracting participation requirement for this Agreement; and

WHEREAS, Contractor represents and warrants that it is qualified to perform the Services required by City as set forth under this Agreement; and

WHEREAS, approval for this Agreement was obtained when the Civil Service Commission approved Contract number 2006 07/08 on March 31, 2014;

Now, THEREFORE, the parties agree as follows:

Article 1 Definitions

The following definitions apply to this Agreement:

1.1 "Agreement" means this contract document, including all attached appendices, and all applicable City Ordinances and Mandatory City Requirements which are specifically incorporated into this Agreement by reference as provided herein.

1.2 "City" or "the City" means the City and County of San Francisco, a municipal corporation, acting by and through both its Director of the Office of Contract Administration or the Director's designated agent, hereinafter referred to as "Purchasing" and Department of **Public Health**."

1.3 "CMD" means the Contract Monitoring Division of the City.

1.4 "Contractor" or "Consultant" means San Francisco AIDS Foundation, 1035 Market Street, San Francisco CA 94103.

1.5 "Deliverables" means Contractor's work product resulting from the Services that are provided by Contractor to City during the course of Contractor's performance of the Agreement, including without limitation, the work product described in the "Scope of Services" attached as Appendix A.

1.6 "Effective Date" means the date upon which the City's Controller certifies the availability of funds for this Agreement as provided in Section 3.1.

1.7 "Mandatory City Requirements" means those City laws set forth in the San Francisco Municipal Code, including the duly authorized rules, regulations, and guidelines implementing such laws, that impose specific duties and obligations upon Contractor.

1.8 "Party" and "Parties" mean the City and Contractor either collectively or individually.

1.9 "Services" means the work performed by Contractor under this Agreement as specifically described in the "Scope of Services" attached as Appendix A, including all services, labor, supervision, materials, equipment, actions and other requirements to be performed and furnished by Contractor under this Agreement.

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, 2018, 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
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

Article 3 Financial Matters

3.1 Certification of Funds; Budget and Fiscal Provisions; Termination in the Event of Non-Appropriation. This Agreement is subject to the budget and fiscal provisions of the City's Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City's obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor's assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

THIS SECTION CONTROLS AGAINST ANY AND ALL OTHER PROVISIONS OF THIS AGREEMENT.

3.2 Guaranteed Maximum Costs. The City's payment obligation to Contractor cannot at any time exceed the amount certified by City's Controller for the purpose and period stated in such certification. Absent an authorized Emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is the City required to honor, any offered or promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, "Modification of this Agreement."

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 Four Million Nine Hundred Seventy-Six Thousand Eight Hundred Thirty DOLLARS (\$4,976,830). 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. In no event shall City be liable for interest or late charges for any late payments.

3.3.2 Payment Limited to Satisfactory Services. Contractor is not entitled to any payments from City until Department of Public Health approves Services, including any furnished Deliverables, as satisfying all of the requirements of this Agreement. Payments to Contractor by City shall not excuse Contractor from its obligation to replace unsatisfactory Deliverables, including equipment, components, materials, or Services even if the unsatisfactory character of such Deliverables, equipment, components, materials, or Services may not have been apparent or detected at the time such payment was made. Deliverables, equipment, components, materials and Services that do not conform to the requirements of this Agreement may be rejected by City and in such case must be replaced by Contractor without delay at no cost to the City.

3.3.3 Withhold Payments. If Contractor fails to provide Services in accordance with Contractor's obligations under this Agreement, the City may withhold any and all payments due Contractor until such failure to perform is cured, and Contractor shall not stop work as a result of City's withholding of payments as provided herein.

3.3.4 Invoice Format. Invoices furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City, and must include a unique invoice number. Payment shall be made by City to Contractor at the address specified in Section 11.1, "Notices to the Parties," or in such alternate manner as the Parties have mutually agreed upon in writing.

3.3.5 Reserved. (LBE Payment and Utilization Tracking System)

3.3.6 Getting paid for goods and/or services from the City.

(a) All City vendors receiving new contracts, contract renewals, or contract extensions must sign up to receive electronic payments through Paymode-X, the City's third party service that provides Automated Clearing House (ACH) payments. Electronic payments are processed every business day and are safe and secure. To sign up for electronic payments, visit www.sfgov.org/ach.

(b) The following information is required to sign up: (i) The enroller must be their company's authorized financial representative, (ii) the company's legal name, main telephone number and all physical and remittance addresses used by the company, (iii) the company's U.S. federal employer identification number (EIN) or Social Security number (if they are a sole proprietor), and (iv) the company's bank account information, including routing and account numbers.

3.3.7 Grant Funded Contracts.

(a) **Disallowance**. If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement or any other Agreement between Contractor and City.

(b) Reserved (Grant Terms)

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 \$500,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. Said requirements can be found at the following website address: http://www.whitehouse.gov/omb/circulars/a133/a133.html.

If Contractor expends less than \$500,000 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 of a waiver of the aforementioned audit requirement 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.

3.5 Submitting False Claims. The full text of San Francisco Administrative Code Chapter 21, Section 21.35, including the enforcement and penalty provisions, is incorporated into this Agreement. Pursuant to San Francisco Administrative Code §21.35, any contractor or subcontractor who submits a false claim shall be liable to the City for the statutory penalties set forth in that section. A contractor or subcontractor will be deemed to have submitted a false claim to the City if the contractor or subcontractor: (a) knowingly presents or causes to be presented to an officer or employee of the City a false claim or request for payment or approval; (b) knowingly makes, uses, or causes to be made or used a false record or statement to get a false claim paid or approved by the City; (c) conspires to defraud the City by getting a false claim allowed or paid by the City; (d) knowingly makes, uses, or causes to be made or used a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the City; or (e) is a beneficiary of an inadvertent submission of a false claim to the City, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the City within a reasonable time after discovery of the false claim.

Article 4 Services and Resources

4.1 Services Contractor Agrees to Perform. Contractor agrees to perform the Services provided for in Appendix A, "Scope of Services." Officers and employees of the City are not authorized to request, and the City is not required to reimburse the Contractor for, Services beyond the Scope of Services listed in Appendix A, unless Appendix A is modified as provided in Section 11.5, "Modification of this Agreement."

4.2 Qualified Personnel. Contractor shall utilize only competent personnel under the supervision of, and in the employment of, Contractor (or Contractor's authorized subcontractors) to perform the Services. Contractor will comply with City's reasonable requests regarding assignment and/or removal of personnel, but all personnel, including those assigned at City's request, must be supervised by Contractor. Contractor shall commit adequate resources to allow timely completion within the project schedule specified in this Agreement.

4.3 Subcontracting. Contractor may subcontract portions of the Services only upon prior written approval of City. Contractor is responsible for its subcontractors throughout the course of the

work required to perform the Services. All Subcontracts must incorporate the terms of Article 10 "Additional Requirements Incorporated by Reference" of this Agreement, unless inapplicable. Neither Party shall, on the basis of this Agreement, contract on behalf of, or in the name of, the other Party. Any agreement made in violation of this provision shall be null and void. City's execution of this Agreement constitutes its approval of the **subcontractors listed below**.

a.	Glide
b.	Saint James Infirmary
c.	Homeless Youth Alliance
d.	SF Drug Users Union

4.4 Independent Contractor; Payment of Employment Taxes and Other Expenses.

4.4.1 Independent Contractor. For the purposes of this Article 4, "Contractor" shall be deemed to include not only Contractor, but also any agent or employee of Contractor. Contractor acknowledges and agrees that at all times, Contractor or any agent or employee of Contractor shall be deemed at all times to be an independent contractor and is wholly responsible for the manner in which it performs the services and work requested by City under this Agreement. Contractor, its agents, and employees will not represent or hold themselves out to be employees of the City at any time. Contractor or any agent or employee of Contractor shall not have employee status with City, nor be entitled to participate in any plans, arrangements, or distributions by City pertaining to or in connection with any retirement, health or other benefits that City may offer its employees. Contractor or any agent or employee of Contractor is liable for the acts and omissions of itself, its employees and its agents. Contractor shall be responsible for all obligations and payments, whether imposed by federal, state or local law, including, but not limited to, FICA, income tax withholdings, unemployment compensation, insurance, and other similar responsibilities related to Contractor's performing services and work, or any agent or employee of Contractor providing same. Nothing in this Agreement shall be construed as creating an employment or agency relationship between City and Contractor or any agent or employee of Contractor. Any terms in this Agreement referring to direction from City shall be construed as providing for direction as to policy and the result of Contractor's work only, and not as to the means by which such a result is obtained. City does not retain the right to control the means or the method by which Contractor performs work under this Agreement. Contractor agrees to maintain and make available to City, upon request and during regular business hours, accurate books and accounting records demonstrating Contractor's compliance with this section. Should City determine that Contractor, or any agent or employee of Contractor, is not performing in accordance with the requirements of this Agreement, City shall provide Contractor with written notice of such failure. Within five (5) business days of Contractor's receipt of such notice, and in accordance with Contractor policy and procedure, Contractor shall remedy the deficiency. Notwithstanding, if City believes that an action of Contractor, or any agent or employee of Contractor, warrants immediate remedial action by Contractor, City shall contact Contractor and provide Contractor in writing with the reason for requesting such immediate action.

4.4.2 Payment of Employment Taxes and Other Expenses. Should City, in its discretion, or a relevant taxing authority such as the Internal Revenue Service or the State Employment Development Division, or both, determine that Contractor is an employee for purposes of collection of

CMS# 7774 P-600 9-15; DPH 4-16) any employment taxes, the amounts payable under this Agreement shall be reduced by amounts equal to both the employee and employer portions of the tax due (and offsetting any credits for amounts already paid by Contractor which can be applied against this liability). City shall then forward those amounts to the relevant taxing authority. Should a relevant taxing authority determine a liability for past services performed by Contractor for City, upon notification of such fact by City, Contractor shall promptly remit such amount due or arrange with City to have the amount due withheld from future payments to Contractor under this Agreement (again, offsetting any amounts already paid by Contractor which can be applied as a credit against such liability). A determination of employment status pursuant to the preceding two paragraphs shall be solely for the purposes of the particular tax in question, and for all other purposes of this Agreement, Contractor shall not be considered an employee of City. Notwithstanding the foregoing, Contractor agrees to indemnify and save harmless City and its officers, agents and employees from, and, if requested, shall defend them against any and all claims, losses, costs, damages, and expenses, including attorneys' fees, arising from this section.

4.5 Assignment. The Services to be performed by Contractor are personal in character and neither this Agreement nor any duties or obligations hereunder may be assigned or delegated by Contractor unless first approved by City by written instrument executed and approved in the same manner as this Agreement. Any purported assignment made in violation of this provision shall be null and void.

4.6 Warranty. Contractor warrants to City that the Services will be performed with the degree of skill and care that is required by current, good and sound professional procedures and practices, and in conformance with generally accepted professional standards prevailing at the time the Services are performed so as to ensure that all Services performed are correct and appropriate for the purposes contemplated in this Agreement.

Article 5 Insurance and Indemnity

5.1 Insurance.

5.1.1 Required Coverages. Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

(a) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and

(b) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence and \$2,000,000 general aggregate for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations; and

Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

5.1.2 Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to provide:

(a) Name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

(b) That such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that insurance applies separately to each insured against whom claim is made or suit is brought.

5.1.3 All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in Section 11.1, entitled "Notices to the Parties."

5.1.4 Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

5.1.5 Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

5.1.6 Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

5.1.7 If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

5.2 Indemnification. Contractor shall indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them from and against any and all claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with any: (i) injury to or death of a person, including employees of City or Contractor; (ii) loss of or damage to property; (iii) violation of local, state, or federal common law, statute or regulation, including but not limited to privacy or personally identifiable information, health information, disability and labor laws or regulations; (iv) strict liability imposed by any law or regulation; or (v) losses arising from Contractor's execution of subcontracts not in accordance with the requirements of this Agreement applicable to subcontractors; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) – (v) above) arises directly or indirectly from Contractor's performance of this Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable

under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is not contributed to by any act of, or by any omission to perform some duty imposed by law or agreement on Contractor, its subcontractors, or either's agent or employee. Contractor shall also indemnify, defend and hold City harmless from all suits or claims or administrative proceedings for breaches of federal and/or state law regarding the privacy of health information, electronic records or related topics, arising directly or indirectly from Contractor's performance of this Agreement, except where such breach is the result of the active negligence or willful misconduct of City. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants and experts and related costs and City's costs of investigating any claims against the City.

In addition to Contractor's obligation to indemnify City, Contractor specifically acknowledges and agrees that it has an immediate and independent obligation to defend City from any claim which actually or potentially falls within this indemnification provision, even if the allegations are or may be groundless, false or fraudulent, which obligation arises at the time such claim is tendered to Contractor by City and continues at all times thereafter.

Contractor shall indemnify and hold City harmless from all loss and liability, including attorneys' fees, court costs and all other litigation expenses for any infringement of the patent rights, copyright, trade secret or any other proprietary right or trademark, and all other intellectual property claims of any person or persons arising directly or indirectly from the receipt by City, or any of its officers or agents, of Contractor's Services.

Article 6 Liability of the Parties

6.1 Liability of City. CITY'S PAYMENT OBLIGATIONS UNDER THIS AGREEMENT SHALL BE LIMITED TO THE PAYMENT OF THE COMPENSATION PROVIDED FOR IN SECTION 3.3.1, "PAYMENT," OF THIS AGREEMENT. NOTWITHSTANDING ANY OTHER PROVISION OF THIS AGREEMENT, IN NO EVENT SHALL CITY BE LIABLE, REGARDLESS OF WHETHER ANY CLAIM IS BASED ON CONTRACT OR TORT, FOR ANY SPECIAL, CONSEQUENTIAL, INDIRECT OR INCIDENTAL DAMAGES, INCLUDING, BUT NOT LIMITED TO, LOST PROFITS, ARISING OUT OF OR IN CONNECTION WITH THIS AGREEMENT OR THE SERVICES PERFORMED IN CONNECTION WITH THIS AGREEMENT

6.2 Liability for Use of Equipment. City shall not be liable for any damage to persons or property as a result of the use, misuse or failure of any equipment used by Contractor, or any of its subcontractors, or by any of their employees, even though such equipment is furnished, rented or loaned by City.

6.3 Liability for Incidental and Consequential Damages. Contractor shall be responsible for incidental and consequential damages resulting in whole or in part from Contractor's acts or omissions.

Article 7 Payment of Taxes

7.1 Except for any applicable California sales and use taxes charged by Contractor to City, Contractor shall pay all taxes, including possessory interest taxes levied upon or as a result of this Agreement, or the Services delivered pursuant hereto. Contractor shall remit to the State of California any sales or use taxes paid by City to Contractor under this Agreement. Contractor agrees to promptly provide information requested by the City to verify Contractor's compliance with any State requirements for reporting sales and use tax paid by City under this Agreement.

7.2 Contractor acknowledges that this Agreement may create a "possessory interest" for property tax purposes. Generally, such a possessory interest is not created unless the Agreement entitles the Contractor to possession, occupancy, or use of City property for private gain. If such a possessory interest is created, then the following shall apply:

7.2.1 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that Contractor, and any permitted successors and assigns, may be subject to real property tax assessments on the possessory interest.

7.2.2 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that the creation, extension, renewal, or assignment of this Agreement may result in a "change in ownership" for purposes of real property taxes, and therefore may result in a revaluation of any possessory interest created by this Agreement. Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report on behalf of the City to the County Assessor the information required by Revenue and Taxation Code section 480.5, as amended from time to time, and any successor provision.

7.2.3 Contractor, on behalf of itself and any permitted successors and assigns, recognizes and understands that other events also may cause a change of ownership of the possessory interest and result in the revaluation of the possessory interest. (see, e.g., Rev. & Tax. Code section 64, as amended from time to time). Contractor accordingly agrees on behalf of itself and its permitted successors and assigns to report any change in ownership to the County Assessor, the State Board of Equalization or other public agency as required by law.

7.2.4 Contractor further agrees to provide such other information as may be requested by the City to enable the City to comply with any reporting requirements for possessory interests that are imposed by applicable law.

Article 8 Termination and Default

8.1 Termination for Convenience

8.1.1 City shall have the option, in its sole discretion, to terminate this Agreement, at any time during the term hereof, for convenience and without cause. City shall exercise this option by giving Contractor written notice of termination. The notice shall specify the date on which termination shall become effective.

8.1.2 Upon receipt of the notice of termination, Contractor shall commence and perform, with diligence, all actions necessary on the part of Contractor to effect the termination of this Agreement on the date specified by City and to minimize the liability of Contractor and City to third parties as a result of termination. All such actions shall be subject to the prior approval of City. Such actions shall include, without limitation:

(a) Halting the performance of all Services under this Agreement on the date(s) and in the manner specified by City.

(b) Terminating all existing orders and subcontracts, and not placing any further orders or subcontracts for materials, Services, equipment or other items.

(c) At City's direction, assigning to City any or all of Contractor's right, title, and interest under the orders and subcontracts terminated. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.

(d) Subject to City's approval, settling all outstanding liabilities and all claims arising out of the termination of orders and subcontracts.

(e) Completing performance of any Services that City designates to be completed prior to the date of termination specified by City.

(f) Taking such action as may be necessary, or as the City may direct, for the protection and preservation of any property related to this Agreement which is in the possession of Contractor and in which City has or may acquire an interest.

8.1.3 Within 30 days after the specified termination date, Contractor shall submit to City an invoice, which shall set forth each of the following as a separate line item:

(a) The reasonable cost to Contractor, without profit, for all Services prior to the specified termination date, for which Services City has not already tendered payment. Reasonable costs may include a reasonable allowance for actual overhead, not to exceed a total of 10% of Contractor's direct costs for Services. Any overhead allowance shall be separately itemized. Contractor may also recover the reasonable cost of preparing the invoice.

(b) A reasonable allowance for profit on the cost of the Services described in the immediately preceding subsection (a), provided that Contractor can establish, to the satisfaction of City, that Contractor would have made a profit had all Services under this Agreement been completed, and provided further, that the profit allowed shall in no event exceed 5% of such cost.

(c) The reasonable cost to Contractor of handling material or equipment returned to the vendor, delivered to the City or otherwise disposed of as directed by the City.

(d) A deduction for the cost of materials to be retained by Contractor, amounts realized from the sale of materials and not otherwise recovered by or credited to City, and any other appropriate credits to City against the cost of the Services or other work.

8.1.4 In no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the termination date specified by City, except for those costs specifically enumerated and described in Section 8.1.3. Such non-recoverable costs include, but are not limited to, anticipated profits on the Services under this Agreement, post-termination employee salaries, post-termination administrative expenses, post-termination overhead or unabsorbed overhead, attorneys' fees or other costs relating to the prosecution of a claim or lawsuit, prejudgment interest, or any other expense which is not reasonable or authorized under Section 8.1.3.

8.1.5 In arriving at the amount due to Contractor under this Section, City may deduct: (i) all payments previously made by City for Services covered by Contractor's final invoice; (ii) any claim which City may have against Contractor in connection with this Agreement; (iii) any invoiced costs or expenses excluded pursuant to the immediately preceding subsection 8.1.4; and (iv) in instances in which, in the opinion of the City, the cost of any Service performed under this Agreement is excessively high due to costs incurred to remedy or replace defective or rejected Services, the difference between the invoiced amount and City's estimate of the reasonable cost of performing the invoiced Services in compliance with the requirements of this Agreement.

8.1.6 City's payment obligation under this Section shall survive termination of this Agreement.

8.2 Termination for Default; Remedies.

8.2.1 Each of the following shall constitute an immediate event of default ("Event of Default") under this Agreement:

(a) Contractor fails or refuses to perform or observe any term, covenant or condition contained in any of the following Sections of this Agreement:

3.5	Submitting False Claims.	10.4	Nondisclosure of Private, Proprietary or Confidential Information	
4.5	Assignment	10.10	Alcohol and Drug-Free Workplace	
Article 5	Insurance and Indemnity	10.13	Working with Minors	
Article 7	Payment of Taxes	11.10	10 Compliance with Laws	
10.4.3	Protected Health Information	Item 1 of Appendix D attached to this Agreement		

(b) Contractor fails or refuses to perform or observe any other term, covenant or condition contained in this Agreement, including any obligation imposed by ordinance or statute and incorporated by reference herein, and such default continues for a period of ten days after written notice thereof from City to Contractor.

(c) Contractor (i) is generally not paying its debts as they become due; (ii) files, or consents by answer or otherwise to the filing against it of a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction; (iii) makes an assignment for the benefit of its creditors; (iv) consents to the appointment of a custodian, receiver, trustee or other officer with similar powers of Contractor or of any substantial part of Contractor's property; or (v) takes action for the purpose of any of the foregoing.

(d) A court or government authority enters an order (i) appointing a custodian, receiver, trustee or other officer with similar powers with respect to Contractor or with respect to any substantial part of Contractor's property, (ii) constituting an order for relief or approving a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction or (iii) ordering the dissolution, winding-up or liquidation of Contractor.

8.2.2 On and after any Event of Default, City shall have the right to exercise its legal and equitable remedies, including, without limitation, the right to terminate this Agreement or to seek specific performance of all or any part of this Agreement. In addition, where applicable, City shall have

the right (but no obligation) to cure (or cause to be cured) on behalf of Contractor any Event of Default; Contractor shall pay to City on demand all costs and expenses incurred by City in effecting such cure, with interest thereon from the date of incurrence at the maximum rate then permitted by law. City shall have the right to offset from any amounts due to Contractor under this Agreement or any other agreement between City and Contractor: (i) all damages, losses, costs or expenses incurred by City as a result of an Event of Default; and (ii) any liquidated damages levied upon Contractor pursuant to the terms of this Agreement; and (iii), any damages imposed by any ordinance or statute that is incorporated into this Agreement by reference, or into any other agreement with the City.

8.2.3 All remedies provided for in this Agreement may be exercised individually or in combination with any other remedy available hereunder or under applicable laws, rules and regulations. The exercise of any remedy shall not preclude or in any way be deemed to waive any other remedy. Nothing in this Agreement shall constitute a waiver or limitation of any rights that City may have under applicable law.

8.2.4 Any notice of default must be sent by registered mail to the address set forth in

8.3 Non-Waiver of Rights. The omission by either party at any time to enforce any default or right reserved to it, or to require performance of any of the terms, covenants, or provisions hereof by the other party at the time designated, shall not be a waiver of any such default or right to which the party is entitled, nor shall it in any way affect the right of the party to enforce such provisions thereafter.

8.4 Rights and Duties upon Termination or Expiration.

8.4.1 This Section and the following Sections of this Agreement listed below, shall survive termination or expiration of this Agreement:

3.3.2	Payment Limited to Satisfactory Services	9.1	Ownership of Results	
3.3.7(a)	Grant Funded Contracts - Disallowance	9.2	Works for Hire	
3.4	Audit and Inspection of Records	10.4	Nondisclosure of Private, Proprietary or Confidential Information	
3.5	Submitting False Claims	11.6	Dispute Resolution Procedure	
Article 5	Insurance and Indemnity	11.7	Agreement Made in California; Venue	
6.1	Liability of City	11.8	Construction	
6.3	Liability for Incidental and Consequential Damages	11.9	Entire Agreement	
Article 7	Payment of Taxes	11.10	Compliance with Laws	
8.1.6	Payment Obligation	11.11	Severability	
10.4.3	Protected Health Information	Item 1 of	Appendix D attached to this Agreement	

8.4.2 Subject to the survival of the Sections identified in Section 8.4.1, above, if this Agreement is terminated prior to expiration of the term specified in Article 2, this Agreement shall be of no further force or effect. Contractor shall transfer title to City, and deliver in the manner, at the times, and to the extent, if any, directed by City, any work in progress, completed work, supplies, equipment,

Article 11.

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and other materials produced as a part of, or acquired in connection with the performance of this Agreement, and any completed or partially completed work which, if this Agreement had been completed, would have been required to be furnished to City.

Article 9 Rights In Deliverables

9.1 **Ownership of Results**. Any interest of Contractor or its subcontractors, in the Deliverables, including any drawings, plans, specifications, blueprints, studies, reports, memoranda, computation sheets, computer files and media or other documents prepared by Contractor or its subcontractors, shall become the property of and will be transmitted to City. However, unless expressly prohibited elsewhere in this Agreement, Contractor may retain and use copies for reference and as documentation of its experience and capabilities.

9.2 Works for Hire. If, in connection with Services, Contractor or its subcontractors creates Deliverables including, without limitation, artwork, copy, posters, billboards, photographs, videotapes, audiotapes, systems designs, software, reports, diagrams, surveys, blueprints, source codes, or any other original works of authorship, whether in digital or any other format, such works of authorship shall be works for hire as defined under Title 17 of the United States Code, and all copyrights in such works shall be the property of the City. If any Deliverables created by Contractor or its subcontractor(s) under this Agreement are ever determined not to be works for hire under U.S. law, Contractor hereby assigns all Contractor's copyrights to such Deliverables to the City, agrees to provide any material and execute any documents necessary to effectuate such assignment, and agrees to include a clause in every subcontract imposing the same duties upon subcontractor(s). With City's prior written approval, Contractor and its subcontractor(s) may retain and use copies of such works for reference and as documentation of their respective experience and capabilities.

Article 10 Additional Requirements Incorporated by Reference

10.1 Laws Incorporated by Reference. The full text of the laws listed in this Article 10, including enforcement and penalty provisions, are incorporated by reference into this Agreement. The full text of the San Francisco Municipal Code provisions incorporated by reference in this Article and elsewhere in the Agreement ("Mandatory City Requirements") are available at www.sfgov.org under "Government."

10.2 Conflict of Interest. By executing this Agreement, Contractor certifies that it does not know of any fact which constitutes a violation of Section 15.103 of the City's Charter; Article III, Chapter 2 of City's Campaign and Governmental Conduct Code; Title 9, Chapter 7 of the California Government Code (Section 87100 *et seq.*), or Title 1, Division 4, Chapter 1, Article 4 of the California Government Code (Section 1090 *et seq.*), and further agrees promptly to notify the City if it becomes aware of any such fact during the term of this Agreement.

10.3 **Prohibition on Use of Public Funds for Political Activity.** In performing the Services, Contractor shall comply with San Francisco Administrative Code Chapter 12G, which prohibits funds appropriated by the City for this Agreement from being expended to participate in, support, or attempt to influence any political campaign for a candidate or for a ballot measure. Contractor is subject to the enforcement and penalty provisions in Chapter 12G.

10.4 Nondisclosure of Private, Proprietary or Confidential Information.

10.4.1 If this Agreement requires City to disclose "Private Information" to Contractor within the meaning of San Francisco Administrative Code Chapter 12M, Contractor and subcontractor shall use such information only in accordance with the restrictions stated in Chapter 12M and in this Agreement and only as necessary in performing the Services. Contractor is subject to the enforcement and penalty provisions in Chapter 12M.

10.4.2 In the performance of Services, Contractor may have access to City's proprietary or confidential information, the disclosure of which to third parties may damage City. If City discloses proprietary or confidential information to Contractor, such information must be held by Contractor in confidence and used only in performing the Agreement. Contractor shall exercise the same standard of care to protect such information as a reasonably prudent contractor would use to protect its own proprietary or confidential information.

10.4.3 Protected Health Information. Contractor, all subcontractors, all agents and employees of Contractor and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all private health information disclosed to Contractor by City in the performance of this Agreement. Contractor agrees that any failure of Contractor to comply with the requirements of federal and/or state and/or local privacy laws shall be a material breach of the Contract. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of protected health information given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

10.5 Nondiscrimination Requirements

10.5.1 Non Discrimination in Contracts. Contractor shall comply with the provisions of Chapters 12B and 12C of the San Francisco Administrative Code. Contractor shall incorporate by reference in all subcontracts the provisions of Sections12B.2(a), 12B.2(c)-(k), and 12C.3 of the San Francisco Administrative Code and shall require all subcontractors to comply with such provisions. Contractor is subject to the enforcement and penalty provisions in Chapters 12B and 12C.

10.5.2 Nondiscrimination in the Provision of Employee Benefits. San Francisco Administrative Code 12B.2. Contractor does not as of the date of this Agreement, and will not during the term of this Agreement, in any of its operations in San Francisco, on real property owned by San Francisco, or where work is being performed for the City elsewhere in the United States, discriminate in the provision of employee benefits between employees with domestic partners and employees with spouses and/or between the domestic partners and spouses of such employees, subject to the conditions set forth in San Francisco Administrative Code Section12B.2.

10.6 Local Business Enterprise and Non-Discrimination in Contracting Ordinance. Contractor shall comply with all applicable provisions of Chapter 14B ("LBE Ordinance"). Contractor is subject to the enforcement and penalty provisions in Chapter 14B. 10.7 Minimum Compensation Ordinance. Contractor shall pay covered employees no less than the minimum compensation required by San Francisco Administrative Code Chapter 12P. Contractor is subject to the enforcement and penalty provisions in Chapter 12P. By signing and executing this Agreement, Contractor certifies that it is in compliance with Chapter 12P.

10.8 Health Care Accountability Ordinance. Contractor shall comply with San Francisco Administrative Code Chapter 12Q. Contractor shall choose and perform one of the Health Care Accountability options set forth in San Francisco Administrative Code Chapter 12Q.3. Contractor is subject to the enforcement and penalty provisions in Chapter 12Q.

10.9 First Source Hiring Program. Contractor must comply with all of the provisions of the First Source Hiring Program, Chapter 83 of the San Francisco Administrative Code, that apply to this Agreement, and Contractor is subject to the enforcement and penalty provisions in Chapter 83.

10.10 Alcohol and Drug-Free Workplace. City reserves the right to deny access to, or require Contractor to remove from, City facilities personnel of any Contractor or subcontractor who City has reasonable grounds to believe has engaged in alcohol abuse or illegal drug activity which in any way impairs City's ability to maintain safe work facilities or to protect the health and well-being of City employees and the general public. City shall have the right of final approval for the entry or re-entry of any such person previously denied access to, or removed from, City facilities. Illegal drug activity means possessing, furnishing, selling, offering, purchasing, using or being under the influence of illegal drugs or other controlled substances for which the individual lacks a valid prescription. Alcohol abuse means possessing, furnishing, selling, offering, or using alcoholic beverages, or being under the influence of alcohol.

Contractor agrees in the performance of this Agreement to maintain a drug-free workplace by notifying employees that unlawful drug use is prohibited and specifying what actions will be taken against employees for violations; establishing an on-going drug-free awareness program that includes employee notification and, as appropriate, rehabilitation. Contractor can comply with this requirement by implementing a drug-free workplace program that complies with the Federal Drug-Free Workplace Act of 1988 (41 U.S.C. § 701)

10.11 Limitations on Contributions. By executing this Agreement, Contractor acknowledges that it is familiar with section 1.126 of the City's Campaign and Governmental Conduct Code, which prohibits any person who contracts with the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, or for a grant, loan or loan guarantee, from making any campaign contribution to (1) an individual holding a City elective office if the contract must be approved by the individual, a board on which that individual serves, or the board of a state agency on which an appointee of that individual serves, (2) a candidate for the office held by such individual, or (3) a committee controlled by such individual, at any time from the commencement of negotiations for the contract is approved. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 20 percent in Contractor. Contractor must inform each such

person of the limitation on contributions imposed by Section 1.126 and provide the names of the persons required to be informed to City.

10.12 Reserved. (Slavery Era Disclosure)

10.13 Working with Minors In accordance with California Public Resources Code Section 5164, if Contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach, Contractor shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position in a position having supervisory or disciplinary authority over a minor if that person has been convicted of any offense listed in Public Resources Code Section 5164. In addition, if Contractor, or any subcontractor, is providing services to the City involving the supervision or discipline of minors or where Contractor, or any subcontractor, will be working with minors in an unaccompanied setting on more than an incidental or occasional basis, Contractor and any subcontractor shall comply with any and all applicable requirements under federal or state law mandating criminal history screening for such positions and/or prohibiting employment of certain persons including but not limited to California Penal Code Section 290.95. In the event of a conflict between this section and Section 10.14, "Consideration of Criminal History in Hiring and Employment Decisions," of this Agreement, this section shall control.

10.14 Consideration of Criminal History in Hiring and Employment Decisions

10.14.1 Contractor agrees to comply fully with and be bound by all of the provisions of Chapter 12T, "City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions," of the San Francisco Administrative Code ("Chapter 12T"), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Chapter 12T are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the Chapter 12T is available on the web at http://sfgov.org/olse/fco. A partial listing of some of Contractor's obligations under Chapter 12T is set forth in this Section. Contractor is required to comply with all of the applicable provisions of 12T, irrespective of the listing of obligations in this Section. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Chapter 12T.

10.14.2 The requirements of Chapter 12T shall only apply to a Contractor's or Subcontractor's operations to the extent those operations are in furtherance of the performance of this Agreement, shall apply only to applicants and employees who would be or are performing work in furtherance of this Agreement, and shall apply when the physical location of the employment or prospective employment of an individual is wholly or substantially within the City of San Francisco. Chapter 12T shall not apply when the application in a particular context would conflict with federal or state law or with a requirement of a government agency implementing federal or state law.

10.15 Public Access to Nonprofit Records and Meetings. If Contractor receives a cumulative total per year of at least \$250,000 in City funds or City-administered funds and is a non-profit organization as defined in Chapter 12L of the San Francisco Administrative Code, Contractor must comply with the City's Public Access to Nonprofit Records and Meetings requirements, as set forth in Chapter 12L of the San Francisco Administrative Code, including the remedies provided therein.

10.16 Food Service Waste Reduction Requirements. Contractor shall comply with the Food Service Waste Reduction Ordinance, as set forth in San Francisco Environment Code Chapter 16, including but not limited to the remedies for noncompliance provided therein.

10.17 Sugar-Sweetened Beverage Prohibition. Contractor agrees that it will not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.18 **Tropical Hardwood and Virgin Redwood Ban**. Pursuant to San Francisco Environment Code Section 804(b), the City urges Contractor not to import, purchase, obtain, or use for any purpose, any tropical hardwood, tropical hardwood wood product, virgin redwood or virgin redwood wood product.

10.19 Reserved. (Preservative Treated Wood Products)

Article 11 General Provisions

11.1 Notices to the Parties. Unless otherwise indicated in this Agreement, all written communications sent by the Parties may be by U.S. mail or e-mail, and shall be addressed as follows:

To CITY:	Office of Contract Management and Compliance Department of Public Health		
	101 Grove Street, Room 402 San Francisco, California 94102	FAX: e-mail:	(415) 554-1100 Irene.carmona@sfdph.org
And:	Tracey Packer CHEP 25 VAN NESS SUITE 500 SAN FRANCISCO, CA 94102	e-mail:	Tracey.packer@sfdph.org
To CONTRACTOR:	SAN FRANCISCO AIDS FOUNDATION 1035 MARKET ST. SUITE400		
	SAN FRANCISCO, CA 94103	e-mail:	rhill@sfaf.org

Any notice of default must be sent by registered mail. Either Party may change the address to which notice is to be sent by giving written notice thereof to the other Party. If email notification is used, the sender must specify a receipt notice.

11.2 **Compliance with Americans with Disabilities Act**. Contractor shall provide the Services in a manner that complies with the Americans with Disabilities Act (ADA), including but not limited to Title II's program access requirements, and all other applicable federal, state and local disability rights legislation.

11.3 Reserved. (Payment Card Industry ("PCI") Requirements)

11.4 Sunshine Ordinance. Contractor acknowledges that this Agreement and all records related to its formation, Contractor's performance of Services, and City's payment are subject to the

California Public Records Act, (California Government Code §6250 et. seq.), and the San Francisco Sunshine Ordinance, (San Francisco Administrative Code Chapter 67). Such records are subject to public inspection and copying unless exempt from disclosure under federal, state or local law.

11.5 Modification of this Agreement. This Agreement may not be modified, nor may compliance with any of its terms be waived, except as noted in Section 11.1, "Notices to Parties," regarding change in personnel or place, and except by written instrument executed and approved in the same manner as this Agreement.

11.6 Dispute Resolution Procedure.

11.6.1 Negotiation; Alternative Dispute Resolution. The Parties will attempt in good faith to resolve any dispute or controversy arising out of or relating to the performance of services under this Agreement. If the Parties are unable to resolve the dispute, then, pursuant to San Francisco Administrative Code Section 21.35, Contractor may submit to the Contracting Officer a written request for administrative review and documentation of the Contractor's claim(s). Upon such request, the Contracting Officer shall promptly issue an administrative decision in writing, stating the reasons for the action taken and informing the Contractor of its right to judicial review. If agreed by both Parties in writing, disputes may be resolved by a mutually agreed-upon alternative dispute resolution process. If the parties do not mutually agree to an alternative dispute resolution process or such efforts do not resolve the dispute, then either Party may pursue any remedy available under California law. The status of any dispute or controversy notwithstanding, Contractor shall proceed diligently with the performance of its obligations under this Agreement in accordance with the Agreement and the written directions of the City. Neither Party will be entitled to legal fees or costs for matters resolved under this section.

11.6.2 Government Code Claim Requirement. No suit for money or damages may be brought against the City until a written claim therefor has been presented to and rejected by the City in conformity with the provisions of San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq. Nothing set forth in this Agreement shall operate to toll, waive or excuse Contractor's compliance with the California Government Code Claim requirements set forth in San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq.

11.6.3 Health and Human Service Contract Dispute Resolution Procedure. The Parties shall resolve disputes that have not been resolved administratively by other departmental remedies in accordance with the Dispute Resolution Procedure set forth in Appendix G incorporated herein by this reference.

11.7 Agreement Made in California; Venue. The formation, interpretation and performance of this Agreement shall be governed by the laws of the State of California. Venue for all litigation relative to the formation, interpretation and performance of this Agreement shall be in San Francisco.

11.8 **Construction.** All paragraph captions are for reference only and shall not be considered in construing this Agreement.

11.9 Entire Agreement. This contract sets forth the entire Agreement between the parties, and supersedes all other oral or written provisions. This Agreement may be modified only as provided in Section 11.5, "Modification of this Agreement."

11.10 Compliance with Laws. Contractor shall keep itself fully informed of the City's Charter, codes, ordinances and duly adopted rules and regulations of the City and of all state, and federal laws in any manner affecting the performance of this Agreement, and must at all times comply with such local codes, ordinances, and regulations and all applicable laws as they may be amended from time to time.

11.11 Severability. Should the application of any provision of this Agreement to any particular facts or circumstances be found by a court of competent jurisdiction to be invalid or unenforceable, then (a) the validity of other provisions of this Agreement shall not be affected or impaired thereby, and (b) such provision shall be enforced to the maximum extent possible so as to effect the intent of the parties and shall be reformed without further action by the parties to the extent necessary to make such provision valid and enforceable.

11.12 **Cooperative Drafting**. This Agreement has been drafted through a cooperative effort of City and Contractor, and both Parties have had an opportunity to have the Agreement reviewed and revised by legal counsel. No Party shall be considered the drafter of this Agreement, and no presumption or rule that an ambiguity shall be construed against the Party drafting the clause shall apply to the interpretation or enforcement of this Agreement.

11.13 Order of Precedence. Contractor agrees to perform the services described below in accordance with the terms and conditions of this Agreement, implementing task orders, the RFP or Sole Source, and Contractor's proposal dated March 3, 2016. The RFP and Contractor's proposal are incorporated by reference as though fully set forth herein. Should there be a conflict of terms or conditions, this Agreement and any implementing task orders shall control over the RFP and the Contractor's proposal.

11.14 **Order of Precedence**. Contractor agrees that in the event of discrepancy, inconsistency, gap, ambiguity, or conflicting language between the City's terms and Contractor's printed terms attached, the City's terms shall take precedence, followed by the procurement issued by the department, Contractor's proposal, and Contractor's printed terms, respectively.

11.15 Additional Terms. Additional Terms are attached hereto as Appendix D and are incorporated into this Agreement by reference as though fully set forth herein.

Article 12 MacBride And Signature

12.1 MacBride Principles -Northern Ireland. The provisions of San Francisco Administrative Code §12F are incorporated herein by this reference and made part of this Agreement. By signing this Agreement, Contractor confirms that Contractor has read and understood that the City urges companies doing business in Northern Ireland to resolve employment inequities and to abide by the MacBride Principles, and urges San Francisco companies to do business with corporations that abide by the MacBride Principles. IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the day first mentioned above.

CITY

Recommended by:

14/16 Date: Barbara A. Garcia, MPA

Director of Health Department of Public Health

CONTRACTOR

San Francisco AIDS Foundation Date: Joe Hollendomer

CEO

City vendor number: 16252

Approved as to Form:

Dennis J. Herrera City Attorney

uply Date 2/14/12 By:

Deputy City Attorney

Approved:

Jaci Fong

Director of the Office of Contract Administration, and Purchaser

Appendices

- A: Scope of Services
- B: Calculation of Charges
- C: Reserved
- D: Additional Terms
- E: HIPAA Business Associate Agreement
- F: Invoice
- G: Dispute Resolution

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TNEMTRAPED EPARTHENT

CMS# 7774 P-600 (9-15; DPH 4-16)

July 1, 2016

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Appendix A Scope of Services

1. Terms

A. <u>Contract Administrator:</u>

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

B. Reports:

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 San Francisco General of 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 San Francisco General Hospital 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. Possession of Licenses/Permits:

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., Grievance Procedure:

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 Healthfunded 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. 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.

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

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.

Contractor: San Francisco AIDS Foundation Fiscal Year: 2016-2017 2017-2018

SUMMARY

Service Provider(s): Fiscal Agency: Total Contract Amount: Funding Source: System of Care: Provider Address: Provider Phone: Contact Person:	San Francisco AIDS Foundation San Francisco AIDS Foundation \$4,443,598 General Fund, CDC HIV Prevention Section (HPS) 1035 Market Street, Suite 400, San F 415-487-3000 Richard Hill, Director, Government C Direct Phone #: 415- 487-8042	Provide	4103 er Fax: 415-487-3094
	email: rhill@sfaf.org		
		and a	
Program Name: Amount: Term: Definition of UOS: UOS and UDC/NOC:	Appendix A-1 YEAR ONE Syringe Access Services \$2,064,945 07.01.16 – 6.30.17 A Unit of Service (UOS) is equivalent Program Coordination. <u>Modality</u> Syringe Access & Disposal Services Citywide Syringe Sweeps Community-Based Sweeps Events Program Coordination		B-1; B-1a; B-1b ervice/activity or 1 month of # of UDC/NOC 44,300 N/A N/A N/A N/A
Program Name: Amount: Term: Definition of UOS: UOS and UDC/NOC:	YEAR TWO Syringe Access Services 2,064,945 07.01.17 – 6.30.18 A Unit of Service (UOS) is equivalent month of Program Coordination. <u>Modality</u> Syringe Access & Disposal Services Citywide Syringe Sweeps Community-Based Sweeps Events Program Coordination		B-1c; B-1d; B-1e ervice/activity or 1 # of UDC/NOC 44,300 N/A N/A N/A N/A
Target Population: Description of Service: Appendix A CMS# 7774	Intravenous drug users (IDUs) throu Provides access to sterile syringes an IDUs have clean syringes, and reduci 5	d safer injectio	on supplies thus ensuring

Contractor: San Francisco AIDS Foundation Fiscal Year: 2016-2017 2017-2018		Appendix A Contract Term: 07.01.16 through 06.30.18 Funding Sources: General Fund and CDC		
	the risk of HIV transmission among to the lead agency for all syringe access partners St. James Infirmary, Glide, to Francisco Drug Users Union.	s and disposal s	services in the city, with	
Program Name: Amount: Term: Definition of UOS: UOS and UDC/NOC:	Appendix A-2 YEAR ONE Homeless Youth Alliance \$156,854 07.01.16 – 6.30.17 A Unit of Service (UOS) is equivalent the administration of these funds. <u>Modality</u> HYA Personnel and Operating Exp. HYA Disposal Services	Appendix to 1 month of <u># of UOS</u> 12 12 12		
Program Name: Amount: Term: Definition of UOS: UOS and UDC/NO	YEAR TWO Homeless Youth Alliance \$156,854 07.01.17 – 6.30.18 A Unit of Service (UOS) is equivalent the administration of these funds. <u>Modality</u> HYA Personnel and Operating Exp. HYA Disposal Services	Appendix to 1 month of <u># of UOS</u> 12 12 12		
Target Population: Description of Service:	Young adults aged 13-29 living on the identified IDUs in the Mission. This appendix addresses administrat by the City and County of San Francis Foundation serves as the fiscal agent that all invoicing will come from Tide payable to Tides/Homeless Youth All Funds are to be used for various pers syringe disposal services.	ive activities to sco to the Hom t for HYA. SFAF is Foundation a iance.	be paid by funds provided eless Youth Alliance. Tides sagreement with HYA is and the checks are made	

Contractor: San Francisco AIDS Foundation Fiscal Year: 2016-2017 2017-2018

1.	Identifiers:
	Program Name: San Francisco AIDS Foundation - Syn
	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: Terry Morris, Manager Syringe Access Service	es
Telephone: (510) 338-8159 cell/ (415) 487-8043 desk	
Email Address: tmorris@sfaf.org	

2. Nature of Document:

New New

Renewal

Modification

- Syringe Access Services

Appendix Terms:

Appendix #: A-1	Appendix #: A-1
Appendix Term: 07/01/16 - 06/30/17	Appendix Term: 07/01/17 - 06/30/18

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:

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: July 1, 2016 - June 30, 2017

Units of Service (UOS) Description	Units of Service (UOS)	# of Contacts (NOC)
Syringe Access and Disposal Service Hours Syringe Access and Disposal Service Hours 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 Citywide Syringe Sweeps One UOS = one hour of Citywide Sweeps 39 hours of sweeps per week * 52 weeks = 2,028 UOS Community-Based Sweeps Events One UOS = one Community-Based Sweep Event 264 events = 264 UOS	5,906	44,300
Syringe Access and Disposal Coordination & Bulk Purchasing 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	5,918	44,300

Year Two: July 1, 2017 - June 30, 2018

Units of Service (UOS) Description	Units of Service (UOS)	# of Contacts (NOC)
Syringe Access and Disposal Service Hours Syringe Access and Disposal Service Hours 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 Citywide Syringe Sweeps One UOS = one hour of Citywide Sweeps 39 hours of sweeps per week * 52 weeks = 2,028 UOS Community-Based Sweeps Events One UOS = one Community-Based Sweep Event 264 events = 264 UOS	5,906	44,300
Syringe Access and Disposal Coordination & Bulk Purchasing 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	5,918	44,300

Appendix A-1 Contract Term: 07.01.16 through 06.30.18 Funding Sources: General Fund and CDC

6. Methodology:

The Syringe Access Collaborative (SAC) will provide 3,614 hours of syringe access, 264 Community Cleanups, and 2,028 hours of disposal sweeps annually in eight San Francisco neighborhoods.

- A. Syringe Access and Disposal Services includes the following direct client services:
 - 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.
 - 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:
 - 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.
 - 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:
 - 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:
 - 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.
 - 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.
 - 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 neighborhood-wide 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).

- 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.
- 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.

 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

- By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will provide at least 3,500,000 syringes annually to 44,300 people as documented by syringe access logs.
- By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will provide at least 200,000 condoms annually to 16,500 people as documented by condom cases ordered.
- By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will collect at least 10,500 syringes annually as documented by disposal sweep logs.
- 4) By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will conduct at least 264 community clean-up events annually to 900 people as documented by volunteer sign in sheets and sweep logs.
- 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.
- 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.
Contractor: San Francisco AIDS Foundation Fiscal Year: 2016-2017 2017-2018

- 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.

8. Continuous Quality Improvement (CQI):

Describe the program's CQI activities to enhance, improve, and monitor the quality of services delivered, including data collection and reporting. The CQI section must include a guarantee of compliance with Health Commission, Local, State, Federal, and/or Funding Source policies and requirements - such as, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction.

a) Staff assigned to program evaluation.

At SFAF, all program data are compiled and reviewed quarterly by our Director of Program Development and Operations, Government Contracts Director, Senior Director of Programs and Services, and Executive Director of Gay and Bi Men's Health and Wellness. 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 Senior Director of Programs and Services and Director of Program Development and Operations keep and review an active list of the action items. These processes will continue with SIP. 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: http://harmreduction.org/wp-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.

Contractor: San Francisco AIDS Foundation Fiscal Year: 2016-2017 2017-2018

1, Identifiers:

Program Name: San Francisco AIDS Foundation – Syringe Access Services: Additional Funds for 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.staf.org

Contractor Address: same as above City, State, Zip Code: Person completing this Narrative: Terry Morris, Manager Syringe Access Services Telephone: (510) 338-8159 cell/ (415) 487-8043 desk Email Address: tmorris@staf.org

Renewal

2. Nature of Document:

New New

Modification

Appendix Terms:

Appendix #: A-2	Appendix #: A-2
Appendix Term: 07/01/16 - 06/30/17	Appendix Term: 07/01/17 - 06/30/18

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:

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. No client services will be provided at 607-A Haight Street.

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

Year One: July 1, 2016 - June 30, 2017

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

Year Two: July 1, 2017 - June 30, 2018

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

6. Methodology

This Appendix addresses administrative activities to be paid by funds provided by the City and County of San Francisco to the Homeless Youth Alliance. Tides Foundation serves as the fiscal agent for HYA. SFAF's agreement with HYA is that all invoicing will come from Tides Foundation and the checks are made payable to Tides/Homeless Youth Alliance.

For this Appendix, the additional funding for Homeless Youth Alliance will be used for various personnel and operating expenses, and for syringe disposal services, during the period July 1, 2016 – June 30, 2017 as well as the period July 1 2017 – June 30, 2018.

7. Objectives and Measurements - N/A

8. Continuous Quality Improvement - Please see Appendix A-1

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 HIV Syringe Access and Disposal Services

B. Contractor understands that, of the maximum dollar obligation listed in Article 3.3.1 of this Agreement, \$533,232 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	7/01/2016-6/30/2017	General Fund	\$2,216,799
Agreement Original	7/01/2016-12/31/2016	Federal CDC	\$5,000
Agreement Original	7/01/2017-6/30/2018	General Fund	\$2,216,799
Agreement Original	7/01/2017-12/31/2017	Federal CDC	\$5,000
Agreement		Contingency	\$533,232
		(This equals the total	\$4.976.830

(This equals the total \$4,976,830 NTE)Total

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.

	Α	В	C	D	E	F	G	н	- F - 1	3
1	D	PH 1: Departn	nent of Public	Health Contra	ct Budget Sun	nmary by Prog	ram			
2	CMS # 7774				1		Appendix #	B	Page #	3
3	DPH Section	1000				1.200				
4	Check one: [X] New [] Renewal	[] Modifica			C	ontract Term (7	/1/16-6/30/18)		Fiscal Year(s)	16-18
5	Agency/Organization Name	San Francisco	AIDS Foundati	on				Funding N	otification Date	6/10/2016
6	Contractor Name (may be same as above)	San Fra	ncisco AIDS Fo	undation						
7	Program/Provider Name		1	Syrin	ge Access and	d Disposal Ser	vices		1. TO S. T. S. 1.	Starting and
8	Appendix Number	A-1/B-1	A-1/B-1a	A-1/B-b	A-2/B-2	A-1/B-1c	A-1/B-1d	A-1/B-1e	A-2/B-2a	TOTALS
9	Appendix Term (mm/dd/yy-mm/dd/yy)	7.01.16-6.30.17	7.01.16-6.30.17	7.01.16-12.31.16	7.01.16-6.30.17	7.01.17-6.30.18	7.01.17-6.30.18	7.01.17-12.31.17	7.01.17-6.30.18	
10	the second	1	18	a						and all a
11	Salaries	\$ 254,725		\$ -	\$ -	\$ 254,725	\$ -	\$ -	\$ -	\$ 509,450
12			\$ -	\$ -	\$ -	\$ 63,681	\$ -	\$ -	\$ -	\$ 127,362
13	Total Personnel Expenses			\$ -	\$ -	\$ 318,406	\$ -	\$ -	\$ -	\$ 636,812
14	Operating Expense		\$ 178,830	\$ 4,545	\$ 142,595	\$ 1,375,441	\$ 178,830	\$ 4,545	\$ 142,595	\$ 3,402,822
15	Capital Expense (\$5,000 and over)		10.3.12.7	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$.
16	Subtotal Direct Costs		\$ 178,830		\$ 142,595	\$ 1,693,847	\$ 178,830	\$ 4,545	\$ 142,595	\$ 4,039,634
17	Indirect Cost Amount		\$ 17,883		\$ 14,259		\$ 17,883		The second se	\$ 403,964
18	A CONTRACTOR OF A CONTRACT	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%
19	Total Expenses	\$ 1,863,232	\$ 196,713	\$ 5,000	\$ 156,854	\$ 1,863,232	\$ 196,713	\$ 5,000	\$ 156,854	\$ 4,443,598
22		1,863,232	400 740			1,863,232	100 710			3,726,464
	HPS COUNTY GF Children's Fund HPS FED CDC - PD90, CFDA #93.940		196,713	5,000			196,713	F 000		393,426
25				5,000	156,854			5,000	450.054	10,000
20		-			100,004				156,854	313,708
20										
28										
29			-							
30		T. Contraction of the second s	1							
31		st							-	
32		1,863,232	196,713	5,000	156,854	1,863,232	196,713	5,000	156,854	4,443,598
33	An one was the second se		1		1 1 1 1 1 1 1 1	1				
34					1.1			1	1	
35										-
36									· · · · · · ·	-
37	This row left blank for funding sources not in drop-down li	st				(e)				1
38			1		1.000	11	10 CON 11			1
39		1,863,232	196,713	5,000	156,854	1,883,232	196,713	5,000	156,854	4,443,598
40	1	Cost Reimbursement	Cost	Cost Reimbursement (CR)	Cost Relmbursement (CR)	Cost	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	
40		Larry Zapatka		1		415-487-3055		(3.4	1	
.**1	Prepared by	wany capaina			1 nond #	10-0000				

1	Contractor Name: San Francisco AIDS	B Foundation	l c on	D	E	F	G .	ppendix #	B-1
2	Contract Term: 7/1/16-6/30/18						-	Page #	
3	Funding Source: General Fund					É.u.		al Year(s)	
4		UOS	COST ALLO	CATION E	BY SERVICE M		ling Notifica	uon Date	6/10/2016
6		~			SERVICE MO	DES			1
					Pgm Coordina				1
8	Personnel Expenses		Syringe Acces	ss Services	Purchas	ing		-	
	Position Tities	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	ontract Tota
	Pgms & Ops Director	0.05	the second se	100%		0%			4,250
	Dir. Behavioral Health Svc	0.05	4,100	82%	900	18%			5,000
	Dir. Gov't Contracts	0.05	4,500	100%		0%			4,500
	Evaluation Assoc.	0.05	3,250	100%		0%	-		3,250
	Budget & Contracts Mgr	0.05	4,250	100%	7 100	0%		-	4,250
	SAS Mgr	0.75	40,737	85%	7,188	15%			47,925
	Logistics Associates SSE/Vol Cordinator	3.00	104,850 34,500	75% 100%	34,950	25%_ 0%		-	139,800 34,500
	Comm, Engagement & Kit Packing Assoc	0.75	11.250	100%		0%			11.250
10	Comm, Engagement & Kit Packing Assoc	0.20	11,200	0%		0%			11,200
20	Total FTE & Total Salaries	5.00	211,687	83%	43,038	17%	-		254,725
21	Fringe Benefits	25.0%	52,922	83%	10,759	17%	-	-	63,681
22	Total Personnel Expenses	2010 10	264,609	83%	53,797	and the second se			318,406
23									
	Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	6	Contract Tota
	Total Occupancy		70,437	100%	-	0%			70,437
	Total Materials and Supplies		305,470	42%	415,599	58%			721,069
27	Total General Operating		64,704	84%	12,500	16%			77,204
	Total Staff Travel		-	0%	-	0%	· · · · · · · · · · · · · · · · · · ·		
	Consultants/Subcontractor:		506,731	100%	-	0%	1.00		506,731
-	Other (specify):			0%	-	0%		10	-
31				-4-			1	1	-
32								_	-
33								-	-
34									
	Total Operating Expenses		947,342	69%	428,099	31%			1,375,441
37	Total operating axpenses					0170			ijereji i i
	Capital Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
	Capital Expenditure 1			0%		0%			
	Capital Expenditure 2			0%	·	0%		1	-
41	Total Capital Expenses			0%	-	0%			
42			1 1						
43	Fotal Direct Expenses		1,211,951	72%	481,896	28%			1,693,847
	Indirect Expenses		121,195	72%	48,190	28%		- 6	169,385
	TOTAL EXPENSES		1,333,146	72%	530,086	28%			1,863,232
46			4						
17	Units of Service (UOS) per Serv	ice Mode			12				5,918
48	Cost Per Unit of Service by Serv				44,173.80		1.4.7		
	Unduplicated Clients (UDC) per Serv	ICE MODE	44,300		N/A				
50									Kev. 07/15
-									

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

Appendix #: B-1 Fiscal Year: 16-17

1a) SALARIES

	erations Directo	r			
Integrated with at	I activities and the program adaptation	at all required data on and refinement	plan that assures monitoring Is reported; works with partn ; coordinates current and em ng, evaluation and quality ass	er age erging	ncies an health
Masters In Public Minimum qualifications: equivalent combi			anizing and public health exp	erienc	e or an
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Ι.	Total
\$85,000.00	0.05	12	1	\$	4,25
Staff Position 2: Director, Behav	ioral Health Ser	vices			
			suring the implementation, m	anada	and the second second
	m that is responsi		professional oversight to create alth and well-being needs, I	ate a s	ervice
delivery continuum Brief description of job duties: needs of gay and Masters degree in	m that is responsi bisexual men. n psychology, soc upervisory capaci	ve to the current h lai sciences, busin ty, especially in Hi		ate a si includi ee year	ervice ng HIV
delivery continuum Brief description of job duties: needs of gay and Masters degree in expereince in a s	m that is responsi bisexual men. n psychology, soc upervisory capaci	ve to the current h lai sciences, busin ty, especially in Hi	ealth and well-being needs, l	ate a si ncludi ee year ted pro	ervice ng HIV

M	Director, Gov't Contracts - Responsible for all data management and contract related as Maintains operational and statistical reporting mechanisms in accordance with contract departmental requirements, produces routine and ad hoc reporting as needed, and ens integrity of the service database by overseeing database quality assurance activities.	and
B	Bachelor's degree and at least two years demonstrated experience in health services p planning, design, and evaluation; grant development and writing; government contracts	
Minimum qualifications: m	management and negotiations.	-

0.05

12

1

\$90,000.00

and summaries	ciate - Responsible to ensure foundation ublic health impact	on programs are ri	data collection, quality assura gorously evaluated for proce review, abstraction from clie ell as data analysis to meet p	ss and healt nt records ar
	The State of the second s		the second s	
Bachelor's degre Minimum qualifications: or 5 years equiva			and ensuring quality for larg	e client data
			Annualized (if less than 12 months):	

Staff Position 5:	Budget & Contracts Mgr
Brief description of job duties:	Budget & Contracts Mgr - Prepares monthly contract invoices, records contract accruals into financial management system, prepares budgets for contract proposals, modifications, and revisions. Prepares reports for contract financial information and maintains databases related to
Minimum gualifications:	Bachelor's degree in Finance or related field or equivalent experience in accounting, budgeting and contract management. Two years demonstrated experience in a finance/contract

4,500

\$

Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$85,000.00	0.05	12	1	\$ 4,250

Staff Position 6: SAS Manager				
departmental stra effective partners scheduling and tr Responsible for p	ategic goals in alig ships with other Hi raining full-time an purchasing exchar	V/AIDS and Harm d temporary staff nge supplies. Orga	ment of 11 exchange sites. D y and city objectives. Builds a Reduction agencles. Respo in appropriate exchange prot anizes removal of blohazard ny, prepare reports for compli	and maintains nsible for ocol. waste from site
Three years expe	ement, supervision	experience prefe	ug users required. Associate rred. Must hold HIV test cour job.	
territori godinodijono.				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$63,900.00	0.75	12	1	\$ 47,925

Staff Position 7: Logistics Assoc	ciates			
Logistics Associa Brief description of job duties: supplies to excha			rvises volunteers at the sites. sites as needed.	. Transports
			uman service organization. E	
English/Spanish Minimum gualifications: Must be able to I	desired. Ability to	follow directions a	nd good communications skil	
	desired. Ability to	follow directions a		lls necessary

exchangers w develop traini	change coord - Resp illing to become pee ng materials, includir	educators. Deve g specific materia	ng, training, and supervising lops curriculum for these train is relevant to MSM-IDU spee	nings and help
Brief description of job duties: Schedules an	d manages the site v	olunteers and sup	ervises exchange sites.	
High school of Minimum qualifications: year of experi	iploma or equivalence	v: valid California	driver's license and excellent	driving record
High school of Minimum qualifications: year of exper Annual Salary:	iploma or equivalence	v: valid California	driver's license and excellent	

engagement with Brief description of job duties: recruiting and co	Engagement and I people who inject ordinating SAS participation	Kit Packing Associ t drugs (PWID), or articipant voluntee	ate is responsible for outread ganizing harm reduction kit p rs (PWID) and other voluntee	ers to assist with
	ma or equivalency	y; 1 year of experie	ence working with injection di	rug users and
Minimum qualifications: with volunteers.				1. A.
Minimum qualifications: with volunteers. Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Total FTE:

5.00

Total Salaries: \$ 254,725

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Co	st
Social Security	\$	19,486.00
Retirement	\$	4,865.00
Medical	\$	26,313.00
Dental		
Unemployment Insurance	\$	1,325.00
Disability Insurance	\$	10,367.00
Paid Time Off		
Workers comp	\$	1,325.00
	Total Fringe Bene	fit: 63,681

Fringe Benefit %: 25%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 318,406

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 5.0 FTE x 12 m	\$800/FTE	48,000
Rent office	6Th Street- \$1,416.67/mo	\$1,416.67/mo	17,000
Telephone	Office & Cell \$55.618/FTE x 5.0 FTE x 12 mo.	55.618/FTE	3,337.00
Bldg Maintenance	Janitorial at \$175/mo	\$175/mo	2,100.00
	l	Total Occupancy:	70,437

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 5.0 x 12m	\$51.16	3,070
Volunteer Spt	Snacks, T-shirts, etc - \$200/mo	\$200.00	2,400
Syringes	Syringes \$.15/each x 3,110,646 syringes	\$0.15	466,597
Bio Buckets	18/19 gallon buckets - 3,148 x \$25.006	\$25.006	78,718
Bio Buckets	2 gallon - 23,986 x \$2.75	\$2.75	65,962
Alcohol Wipes	500 cases x \$28/case	\$28.00	14,000
Cotton balls and pellets	1,040bags x \$17.788/bag	\$17.788	18,500
Sterile Water	431 Cases x \$\$81.205/case	\$81.205	35,000
Bagging Supplies	104 bundles x \$7.90/bundle	\$7.90	822
Condoms	170 cases x \$70.59/case	\$70.59	12,000
Lube	55 cases x \$218.18/case	\$218.18	12,000
Site Supples	Brillo, Vitaimn C tabs, etc \$1,000/mo	\$1,000.00	12,000
· · · · · · · · · · · · · · · · · · ·	Total M	aterials & Supplies:	721,069

General Operating:

Expense Item	Brief Description	Rate	Cost
Insurance	Liability insurance \$45/FTE x 5 x 12 mo	\$45/FTE	2,700
Insurance	Auto insurance \$291.67/mo x 12 mo	\$291.67/mo	3,500
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE	\$86.75/ FTE	5,205
Offsite storage	Records storage \$4.98/FTE x 5 x 12 mo	\$4.98/FTE	299
Parking	Parking for vans \$1,041.67/mo x 12 mo	\$1041.67/mo	12,500
Travel	Vehicle Fuel	\$166.66/mo	2,000
Travel	Vehicle Repairs	\$83.33/mo	1,000
Bio Waste Disposal	Monthly disposal costs per ton of waste-12 tons	\$4,166.67	50,000
	Tota	General Operating:	77,204

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
	- 11 1 1 - C	The start is		
		1	Total Staff Travel	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,etc	\$94,231/yr	94,231
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$98,077/yr	98,077
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$214,423/yr	214,423
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$100,000/yr	100,000
	Total Consu	Itants/Subcontractors:	506,731

Other:

Brief Description	Rate	Cost
	Total Other	-
	Brief Description	Brief Description Rate

TOTAL OPERATING EXPENSES: 1,375,441

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES:	

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.		169,385

Indirect Rate: 10% TOTAL INDIRECT COSTS: 169,385

TOTAL EXPENSES: 1,863,232

100	A B		C	D	E	F	G	H	
1	Contractor Name: San Francisco AIDS Foun	datior	1					Appendix #	
2	Contract Term: 7/1/16-6/30/18	-						Page #	
3	Funding Source: General Fund							cal Year(s)	
4	and the second sec	1.16	632.07		The second second	F	unding Notific	ation Date	6/10/2016
5		UOS	COST ALLO	CATION	BY SERVICE	MODE			
6		1.1		10.00		1.1.1			
7					SERVICE I	MODES	·		
			Progra	100					
8	Personnel Expenses		Coordination	on/Bulk					
9	Position Titles FT	E	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	contract Totals
10	0		1	0%	1	0%		0%	-
11	0		-	0%	-	0%	-	0%	-
12	0	-	5	0%	-	0%	· · · · · · · ·	0%	-
13	0	-		0%	-	0%	-	0%	
14	0		-	0%	-	0%		0%	-
15	0		-	0%	-	0%	-	0%	-
16	Total FTE & Total Salaries	-	-	0%	-	0%	-	0%	-
17	Fringe Benefits 09	6		0%	-	0%		0%	-
18	Total Personnel Expenses		-	0%	-	0%		0%	
19							1		
	Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
	Total Occupancy		-	0%	-	0%	-	0%	
	Total Materials and Supplies		148,830	100%		0%	-	0%	148,830
	Total General Operating		30,000	100%		0%	1	0%	30,000
	Total Staff Travel		-	0%	-	0%	-	0%	12
	Consultants/Subcontractor:			0%		0%	-	0%	-
	Other (specify):			0%	-	0%		0%	
27				0%		0%		0%	10.11
28				0%		0%		0%	
29			10 - 1 - 1 - 1	0%		0%		0%	-
30			1	0%		0%		0%	
31				0%		0%		0%	N
32	Total Operating Expenses		178,830	100%	-	0%		0%	178,830
33		_					1		
34	Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
	Capital Expenditure 1		· · · · · · ·	0%	-	0%	-	0%	
	Capital Expenditure 2			0%		0%		0%	
37	Total Capital Expenses			0%	-	0%		0%	1
38									
	Total Direct Expenses		178,830	100%	-	0%		0%	178,830
40	Indirect Expenses		17,883	100%		0%		0%	17,883
	TOTAL EXPENSES		196,713	100%	-	0%	-	0%	196,713
42		- i							
	Units of Service (UOS) per Service M	lode	12	-	- 1		-1		12
43	Cost Per Unit of Service by Service M		16,392.75		100 C	-			
	COSt Fat Offic Of Service Dy Service in								
43 44 45		lode	N/A						

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

Appendix #: B-1a Fiscal Year: 16-17

1a) SALARIES

Brief description of job duties: Minimum qualifications:				
winningin qualifications.				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tot
		· · · · · · · · · · · · · · · · · · ·	0	\$
Staff Position 2:				
Brief description of job duties:				
Minimum qualifications:				
S. Barden P		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tot
			0	\$
				-
Staff Position 3:				
Brief description of job duties:				
Minimum gualifications:				
		x Months per	Annualized (if less than	1.000
Annual Salary:	x FTE:	Year:	12 months):	To
			0	\$
Staff Position 4:				
Brief description of job duties:				
		_		
Brief description of job duties:	I	A Monthe por	Appubliced (# loss than	
Brief description of job duties: Minimum qualifications:	v ETE:	x Months per	Annualized (if less than	To
Brief description of job duties:	x FTE:	x Months per Year:	12 months):	
Brief description of job duties: Minimum qualifications:	x FTE:			To: \$
Brief description of job duties: Minimum qualifications: Annual Salary:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	12 months): 0	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	12 months): 0 Annualized (if less than	\$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	12 months): 0	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	12 months): 0 Annualized (if less than 12 months):	\$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary:		Year:	12 months): 0 Annualized (if less than 12 months):	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:		Year:	12 months): 0 Annualized (if less than 12 months):	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	12 months): 0 Annualized (if less than 12 months):	\$ To
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:		Year:	12 months): 0 Annualized (if less than 12 months):	\$ To
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year: x Months per Year:	12 months): 0 Annualized (if less than 12 months): 0	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	12 months): 0 Annualized (if less than 12 months):	Tot

Total FTE:

Total Salaries: \$

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	COSL
Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (specify):	
	Total Eringe Repetit:

nent:

Fringe Benefit %:

0%

.

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
		1	
			_
		2	
		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	Syringes \$.15 each x 591,213	\$0.15	88,682
Bio Buckets	18/19 gallon buckets - 1,026 x \$25.006	\$25.006	25,656
Bio Buckets	2 gallon - 7,995 x \$2.75	\$2.75	21,986
Sterile Water	154 Cases x \$81.205/case	\$81.205	12,506
	T	otal Materials & Supplies:	148,830

General Operating:

Expense Item	Brief Description	Rate	Cost
Bio hazzard Disposal	Monthly disposal costs per ton of waste -7.2 tons	\$4,166.67	30,000
	To	tal General Operating:	30,000

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
			Total Staff Travel:	

Consultants/Subcontractors:

ription	Rate	Cost	
	Total Consultants/	Total Consultants/Subcontractors:	

Other:

E

Expense Item	Brief Description	Rate	Cost
1		Total Othe	r:

TOTAL OPERATING EXPENSES: 178,830

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDIT	URES: -
	TOTAL DIRECT C	

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.	17,883

Indirect Rate: 10% TOTAL INDIRECT COSTS: 17,883

TOTAL EXPENSES: 196,713

-	A	B	C	D	E	F	G	н	
1		Foundatio	n				1	Appendix #	
2								Page #	
3	Funding Source: CDC							cal Year(s)	
4							nding Notific	ation Date	6/10/2016
5		UOS C	OST ALLO	CATION	BY SERVICI	EMODE			
6							_		
7					SERVICE	MODES			
8	Personnel Expenses		Progr Coordinat Purcha	ion/Bulk					
									1
9	Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
10	0	-		0%		0%		0%	
11	0	1	-	0%	-	0%	-	0%	
12	0			0%	-	0%		0%	
13	0			0%	-	0%		0%	
14	0	1.4		0%	-	0%	1.5	0%	
15	0	-	-	0%		0%	-	0%	
18	Total FTE & Total Salarles	-		0%	-	0%		0%	
17	Fringe Benefits	0%	-	0%		0%	-	0%	
18	Total Personnel Expenses			0%	-	0%		0%	
19									
	Operating Expenses	-	Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
	Total Occupancy			0%	-	0%		0%	
	Total Materials and Supplies		4,545	100%	-	0%	1	0%	4,545
	Total General Operating		-	0%	1 <u>.</u>	0%	-	0%	
	Total Staff Travel		-	0%		0%	-	0%	
	Consultants/Subcontractor:		-	0%		0%	-	0%	
	Other (specify):	_	-	0%	-	0%		0%	
27				0%	· · · · · · · ·	0%		0%	-
28				0%		0%		0%	· · · · · · · · · · · · ·
29			· · · · · · · · · · · · · · · · · · ·	0%		0%		0%	
30				0%		0%		0%	
31			1	0%		0%		0%	
32	Total Operating Expenses		4,545	100%	-	0%		0%	4,545
33	and the second				1				
34	Capital Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Total
	Capital Expenditure 1			0%	-	0%		0%	
36	Capital Expenditure 2			0%		0%		0%	
37	Total Capital Expenses		•	0%	-	0%	-	0%	
38									
39	Total Direct Expenses		4,545	100%	-	0%		0%	4,545
40	Indirect Expenses		455	100%		0%		0%	455
41	TOTAL EXPENSES		5,000	100%	-	0%	•	0%	5,000
42	4								
43	Units of Service (UOS) per Servi	ce Mode	6		-	1	•		6
44	Cost Per Unit of Service by Servi	ce Mode	833.33			1	1.1.14/10		T
45	Unduplicated Cilents (UDC) per Servi		N/A	ALL PROPERTY.	13451	1.000			IK
48 47									
47		_							Kev. 07/1

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

Appendix #: B-1b Fiscal Year: 16-17

1a) SALARIES

Staff Position 1:				
Brief description of job duties:				
Minimum qualifications:				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
Annual Galary.		Tour.	0	\$
		- J		•
Staff Position 2:			· · · · · · · · · · · · · · · · · · ·	t dela
Brief description of job duties:				
Minimum qualifications:				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
			0	\$
Staff Position 3:				
Brief description of job duties:				
Minimum qualifications:				
· · · · · · · · · · · · · · · · · · ·		x Months per	Annualized (if less than	
Annual Salany	x FTE:	Year:		Tata
Annual Salary:	XFIE:	rear.	12 months):	Tota
			0	\$
Staff Position 4:				
Brief description of job duties:				
Minimum gualifications:				
Mitanum quanications.				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
Annual Galary.			0	\$
				Ψ
Staff Position 5:		-		
Brief description of job duties:				
Minimum qualifications:				
Within quantoations.				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
7 officer octairy?			0	\$
		-1		*
Staff Position 6:	Martin Contraction			• 1
Brief description of job duties:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · ·		
Minimum gualifications:				
		x Months per	Annualized (if less than I	
	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months): 0	Tota \$

 1b) EMPLOYEE FRINGE BENEFITS:

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

 Component

 Cost

oomponent	0001
Si	ocial Security
	Retirement
	Medical
	Dental
Unemployme	ent Insurance
Disabil	lity insurance
	Paid Time Off
Ot	ther (specify):
	Total Frings Dansfit:

Total Fringe Benefit:

Fringe Benefit %:

0%

.

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
			-
			1
		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Condoms	60 cases x \$75.75/case	\$75.75	4,545
		Total Materials & Supplies:	4,545

General Operating:

ief Description	Rat	te Cos
	The second second	
	Total Ganaral (Onerating
		Total General G

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		1		
		1 1	Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
		-	
			-
		1	
	Total Con	sultants/Subcontractor	e' .

Total Consultants/Subcontractors:

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	

TOTAL OPERATING EXPENSES: 4,545

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES:	
	TOTAL CAPITAL EXPENDITORES.	-

4) INDIRECT COSTS

	Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbursement at a rate of 10
455	otal direct costs.

Indirect Rate: 10% TOTAL INDIRECT COSTS: 455

TOTAL EXPENSES: 5,000

Contractor Name: San Francisco AIDS Contract Term: 7/1/16-6/30/18 Funding Source: General Fund	Foundatio	n		-			Appendix #	
Funding Source: General Fund								
							cal Year(s)	
						unding Notific	cation Date	6/10/2016
	UOS	COST ALLO	CATION B	Y SERVICE I	MODE			
					_			
				SERVICE	NODES			
Personnel Expenses		Syringe Acces	s Services	Pgm Coordin Purcha				1.5.7.71
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
Pgms & Ops Director	0.05	4,250	100%		0%			4,250
			82%	900	18%			5,000
Dir. Gov't Contracts	0.05				0%		i line.	4,500
Evaluation Assoc.	0.05	3,250	100%					3,250
Budget & Contracts Mar	0.05	4,250					·	4,250
				7,188			1	47,925
			75%	34,950			7	139,800
				-				34,500
	0.25			-				11,250
				-	0%		1	
Total FTE & Total Salaries	5.00	211,887	83%	43,038				254,725
Fringe Benefits							1	63,681
		264,609	83%		17%			318,406
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure		Contract Total
								70,437
				415.599			1	721,069
							C	77,204
							5	
		506,731		- 15				506,731
		-						
		T						-
			-	_			-	
	-	1		1				
								-
otal Operating Expenses		947,342	69%	428,099	31%			1,375,441
						0		
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
		-		-			14	
otal Capital Expenses					0%			
						I		
otal Direct Expenses		1,211,951	72%	481 896	28%	1		1,693,847
								169,385
								1,863,232
Units of Service (UOS) per Service	dea Mode	5 906	-	12 1		- 1		5,918
							All other Division in which the	0,010
							12-1-1	
ana abilitating anona (ana) bai gara	100 11000	11,000						
	Pgms & Ops Director Dir. Behavioral Health Svc Dir. Gov't Contracts Evaluation Assoc. Budget & Contracts Mgr SAS Mgr Logistics Associates SSE/Vol Cordinator Comm. Engagement & Kit Packing Assoc Total FTE & Total Salaries Fringe Benefits Total Personnel Expenses Total Occupancy Total Materials and Supplies Total General Operating Total Staff Travel Consultants/Subcontractor: Dther (specify): Fotal Operating Expenses Capital Expenditure 1 Capital Expenditure 1 Capital Expenditure 2 Total Capital Expenses Indirect Expenses Total Direct Expenses Indirect Expenses Total Direct Expenses Cotal Operating Expenses Cotal Direct Expenses Indirect Expenses Indirect Expenses	Pgms & Ops Director 0.05 Dir. Behavioral Health Svc 0.05 Dir. Gov't Contracts 0.05 Evaluation Assoc. 0.05 Budget & Contracts Mgr 0.05 SAS Mgr 0.75 Logistics Associates 3.00 SSE/Vol Cordinator 0.75 Comm. Engagement & Kit Packing Assoc 0.25 Total FTE & Total Salaries 5.00 Fringe Benefits 25.0% Total Personnel Expenses 0.05 Total General Operating 0.05 Total General Operating 0.05 Total General Operating 0.05 Total Staff Travel 0.05 Consultants/Subcontractor: 0.05 Dither (specify): 0.05 Fotal Operating Expenses 0.06 Capital Expenditure 1 0.02 Capital Expenditure 1 0.02 Capital Expenses 0.07 Total Direct Expenses 0.07 Total Operating Expenses 0.07 Cotal Operating Expenses 0.00 Cotal Operating Expenses 0.00 Cotal Capital Expenses	Pagms & Ops Director0.054,250Dir. Behavioral Health Svc0.054,100Dir. Gov't Contracts0.054,500Evaluation Assoc.0.053,250Budget & Contracts Mgr0.054,260SAS Mgr0.7540,737.ogistics Associates3.00104,850SSE/Vol Cordinator0.7534,500Comm. Engagement & Kit Packing Associates0.0511,250Comm. Engagement & Kit Packing Associates0.2511,250Comm. Engagement & Kit Packing Associates264,609-Consultants/Subcontractor:70,43752,922Total FTE & Total Salaries264,609-Dearating ExpensesExpenditureTotal Occupancy70,437Total General Operating64,704Total Staff Travel-Consultants/Subcontractor:506,731Dither (specify):-Cotal Operating Expenses947,342Capital Expenditure 1-Capital Expenditure 2-Cotal Capital Expenses1,211,951Indirect Expenses1,211,951Indirect Expenses1,211,951Indirect Expenses1,211,951Indirect Expenses1,211,951Indirect Expenses1,211,951	Pagms & Ops Director 0.05 4,250 100% Dir. Gov*t Contracts 0.05 4,100 82% Dir. Gov*t Contracts 0.05 4,500 100% Svaluation Assoc. 0.05 3,250 100% Sudget & Contracts Mgr 0.05 4,250 100% SAS Mgr 0.75 40,737 85% Logistics Associates 3.00 104,850 75% SE/Vol Cordinator 0.75 34,500 100% Comm. Engagement & Kit Packing Assoc 0.25 11,250 100% Comm. Engagement & Kit Packing Assoc 0.25 11,250 100% Total FTE & Total Salaries 5.00 211,667 83% Fringe Benefits 25.0% 52,922 83% Total Personnel Expenses 284,609 83% Total Atterials and Supplies 305,470 42% Total General Operating 64,704 84% Total Staff Travel - 0% Cotal Staff Travel - 0% Cot	Pagms & Ops Director 0.05 4.250 100% Dir. Behavioral Health Svc 0.05 4,100 82% 900 Dir. Gov't Contracts 0.05 4,500 100% 32% 900 Svaluation Assoc. 0.05 3,250 100% 334,800 334,800 34,850 SAS Mgr 0.075 40,737 85% 7,188 .008 75% 34,950 SAS Mgr 0.75 40,737 85% 7,188 .009% - Contracts Associates 3.00 104,850 76% 34,950 .00% - SE/Vol Cordinator 0.75 34,500 100% - .0% - .0% - .0% - .0% - .0% - .0% - .0% - .0% - .0% - .0% .0.769 .00% .0.769 .00% .0.769 .0.769 .0.769 .0.761 .0.769 .0.761 .0.769 .0.761 .0.761 .0.761 <td>Pagms & Ops Director 0.05 4.250 100% 0% Dir. Behavioral Health Svc 0.05 4,100 82% 900 18% Dir. Gov't Contracts 0.05 4,500 100% 0% 0% Svaluation Assoc. 0.05 3,250 100% 0% 0% Sudget & Contracts Mgr 0.05 4,250 100% 0% 0% SAS Mgr 0.76 40,737 8% 7,188 15% orgistics Associates 3.00 104,850 76% 34,950 25% SSE/Vol Cordinator 0.75 34,500 100% - 0% Cortal FTE & Total Salaries 5.00 211,867 83% 43,038 17% Total Personnel Expenses 284,609 83% 53,797 17% Total Personnel Expenses 284,609 83% 53,797 17% Cotal Occupancy 70,437 100% - 0% 0% 0% 0% 0% 0% 0% 0%</td> <td>Degms & Ops Director 0.05 4.250 100% 0% Dir. Behavioral Health Svc 0.05 4,100 82% 900 18% Dir. Govit Contracts 0.05 4,500 100% 0% 0% Evaluation Assoc. 0.05 3,250 100% 0% 0% SAS Mgr 0.05 4,250 100% 0% 0% SAS Mgr 0.75 40,737 85% 7,188 15% orgettics Associates 3.00 104,850 75% 34,950 25% SEE/Vol Cordinator 0.76 34,500 100% - 0% Comm. Engagement & Kit Packing Assoc 0.25 11,250 100% - 0% Total FTE & Total Salaries 5.00 211,867 83% 43,038 17% Total Personnel Expenses Expenditure % Expenditure % Expenditure Total Materials and Supplies 305,470 42% 415,599 58% 1043 Total Materials and Supp</td> <td>Pagma & Ops Director 0.05 4.250 100% 0% Dir. Behavioral Health Svo 0.05 4,100 82% 900 18% Dir. Govt Contracts 0.05 3,250 100% 0% 18% Svaluation Assoc. 0.05 3,250 100% 0% 18% Sudget & Contracts 0.05 4,250 100% 0% 18% Sudget & Contracts 0.00 104,850 75% 34,950 25% 100% 0% 10% <td< td=""></td<></td>	Pagms & Ops Director 0.05 4.250 100% 0% Dir. Behavioral Health Svc 0.05 4,100 82% 900 18% Dir. Gov't Contracts 0.05 4,500 100% 0% 0% Svaluation Assoc. 0.05 3,250 100% 0% 0% Sudget & Contracts Mgr 0.05 4,250 100% 0% 0% SAS Mgr 0.76 40,737 8% 7,188 15% orgistics Associates 3.00 104,850 76% 34,950 25% SSE/Vol Cordinator 0.75 34,500 100% - 0% Cortal FTE & Total Salaries 5.00 211,867 83% 43,038 17% Total Personnel Expenses 284,609 83% 53,797 17% Total Personnel Expenses 284,609 83% 53,797 17% Cotal Occupancy 70,437 100% - 0% 0% 0% 0% 0% 0% 0% 0%	Degms & Ops Director 0.05 4.250 100% 0% Dir. Behavioral Health Svc 0.05 4,100 82% 900 18% Dir. Govit Contracts 0.05 4,500 100% 0% 0% Evaluation Assoc. 0.05 3,250 100% 0% 0% SAS Mgr 0.05 4,250 100% 0% 0% SAS Mgr 0.75 40,737 85% 7,188 15% orgettics Associates 3.00 104,850 75% 34,950 25% SEE/Vol Cordinator 0.76 34,500 100% - 0% Comm. Engagement & Kit Packing Assoc 0.25 11,250 100% - 0% Total FTE & Total Salaries 5.00 211,867 83% 43,038 17% Total Personnel Expenses Expenditure % Expenditure % Expenditure Total Materials and Supplies 305,470 42% 415,599 58% 1043 Total Materials and Supp	Pagma & Ops Director 0.05 4.250 100% 0% Dir. Behavioral Health Svo 0.05 4,100 82% 900 18% Dir. Govt Contracts 0.05 3,250 100% 0% 18% Svaluation Assoc. 0.05 3,250 100% 0% 18% Sudget & Contracts 0.05 4,250 100% 0% 18% Sudget & Contracts 0.00 104,850 75% 34,950 25% 100% 0% 10% <td< td=""></td<>

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

Appendix #:	B-1c
Fiscal Year:	17-18

1a) SALARIES

integrated with al	n and maintenand I activities and the program adaptation	e of an evaluation t all required data on and refinement	plan that assures monitoring is reported; works with partn coordinates current and em ig, evaluation and quality ass	er agencies an erging health
Masters in Public Minimum qualifications: equivalent combined			anizing and public health exp	erience or an
			1.	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$85,000.00	0.05	12	1	\$ 4,25
Staff Position 2: Director, Behav	ioral Health Ser	vices		*
delivery continuur Brief description of job duties: needs of gay and Masters degree in	m that is responsi bisexual men. n psychology, soc upervisory capaci	ve to the current h al sciences, bush ty, especially in HI	professional oversight to create alth and well-being needs, i ess or related discipline; three V prevention and demonstrated of the second s	ncluding HIV
Minimum quaincations, management and	program develop			
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$100,000.00	0.05	12	1	\$ 5,00
Staff Position 3: Dir. Gov't Grant	S			
Maintains operation	onal and statistica uirements, produc	I reporting mecha es routine and ad	anagement and contract rela nisms in accordance with cor hoc reporting as needed, an ase quality assurance activiti	ntract and d ensures the
Bachelor's degree	e and at least two and evaluation; g	years demonstrate	ed experience in health servi and writing; government con	ces program
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months);	Total
\$90,000.00	0.05	12	1	\$ 4,50
Staff Position 4: Evaluation Asso	ociate			
Evaluation Associ and summaries to	iate - Responsible o ensure foundation blic health impact	n programs are rig Responsible for	lata collection, quality assura gorously evaluated for proces review, abstraction from clier all as data analysis to meet o	ss and health it records and

Bachelor's degree and 2 years experience managing and ensuring quality for large client data sets Minimum qualifications: or 5 years equivalent experience required.

Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
\$65,000.00	0.05	12	1	\$ 3

Staff Position 5: Budge	t & Contracts Mgr			_
Brief description of job duties: Budget	& Contracts Mgr - Prepar	res monthly contract	invoices, records contract accr	uals into
Minimum qualifications: Bachel	or's degree in Finance or	related field or equiv	alent experience in accounting	, budgetin
2.0.121.0.	-		Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Total

	_
tes. Develops	annual
ociates Degre	e with
10 m 34 1	
than	
Te	otal
\$	47,92
	ciates Degre

Staff Position	8: SSE/Voluntee	r Coordinator		and the second		
Brief description of job dutie	es: Secondary Exc	hange coord - Resp	consible for recruiting	ng, training, and supervising	seco	ondary
Minimum qualification	ns: High school alp	ioma or equivalenc	cy; valio California o	river's license and excellent	ariv	ng record.
			x Months per	Annualized (if less than		
Appual Salana		x FTE:	Year:	12 months):		Total
Annual Salary:	¢48,000,00	0.75	12			
in a final second s	\$46,000.00	0.75	12	1	\$	34,50
			Packing Associat			
Brief description of job dutie	es: The Community	Engagement and	Kit Packing Associa	ate is responsible for outread	h ar	d
Minimum gualification	ns: High school dip	loma or equivalenc	y; 1 year of experie	nce working with injection dr	rug u	sers and
			x Months per	Annualized (if less than		
		x FTE:	Year:	12 months):	_	Total
Annual Salary:			10	4		44 95
) EMPLOYEE FRINGE BENEFITS		0.25 5.00	12	Total Salaries:		254,72
) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00		Total Salaries: t the contractor's ledger a	\$	254,72
o) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00	ents should reflec	Total Salaries: t the contractor's ledger a Cost	\$	254,72 unts.)
) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00	ents should reflec	Total Salaries: t the contractor's ledger a Cost	\$	254,72 unts.) 19,486.0
) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00	ents should reflec Social Security Retirement	Total Salaries: t the contractor's ledger a Cost \$	\$	254,72 unts.) 19,486.0 4,865.0
o) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00	ents should reflec Social Security Retirement Medical	Total Salaries: t the contractor's ledger a Cost \$ \$	\$	254,72 unts.) 19,486.0 4,865.0
o) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00 udgeted compone	ents should reflec Social Security Retirement Medical Dental	Total Salaries: t the contractor's ledger a Cost \$ \$	\$	254,72 unts.) 19,486.0 4,865.0 26,313.0
) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00 udgeted compone Unemplo	ents should reflec Social Security Retirement Medical Dental	Total Salaries: t the contractor's ledger a Cost \$ \$ \$	\$	254,72 unts.) 19,486.0 4,865.0 26,313.0 1,325.0
Annual Salary: b) EMPLOYEE FRINGE BENEFITS Components provided below are san	Total FTE:	5.00 udgeted compone Unemplo	ents should reflec Social Security Retirement Medical Dental oyment Insurance sability Insurance	Total Salaries: t the contractor's ledger a Cost \$ \$ \$ \$ \$	\$	11,25 254,72 unts.) 19,486.0 4,865.0 26,313.0 1,325.0 10,367.0
o) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00 udgeted compone Unemplo	ents should reflec Social Security Retirement Medical Dental Dental oyment Insurance sability Insurance Paid Time Off	Total Salaries: t the contractor's ledger a Cost \$ \$ \$ \$ \$	\$	254,72 Unts.) 19,486.0 4,865.0 26,313.0 1,325.0 10,367.0
) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00 udgeted compone Unemplo	ents should reflec Social Security Retirement Medical Dental oyment Insurance sability Insurance	Total Salaries: t the contractor's ledger a Cost \$ \$ \$ \$ \$	\$	254,72 unts.) 19,486.0 26,313.0 1,325.0
) EMPLOYEE FRINGE BENEFITS	Total FTE:	5.00 udgeted compone Unemplo	ents should reflect Social Security Retirement Medical Dental Dental oyment Insurance sability Insurance Paid Time Off	Total Salaries: t the contractor's ledger a Cost \$ \$ \$ \$ \$ \$	\$	254,72 Junts.) 19,486.1 26,313.1 1,325.1 10,367.1 1,325.1

Expense item	Bher Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 5.0 FTE x 12 mg	\$800/FTE	48,000
Rent office	6Th Street- \$1,416.67/mo	\$1,416.67/mo	17,000
Telephone	Office & Cell \$55.618/FTE x 5.0 FTE x 12 mo.	55.618/FTE	3,337.00
Bldg Maintenance	Janitorial at \$175/mo	\$175/mo	2,100.00
	··· I	Total Occupancy:	70,437

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 5.0 x 12m	\$51.16	3,070
Volunteer Spt	Snacks, T-shirts, etc - \$200/mo	\$200.00	2,400
Syringes	Syringes \$.15/each x 3,110,646 syringes	\$0.15	466,597
Bio Buckets	18/19 gallon buckets - 3,148 x \$25.006	\$25.006	78,718
Bio Buckets	2 gallon - 23,986 x \$2.75	\$2.75	65,962

	1	otal Materials & Supplies:	721,069
Site Supples	Brillo, Vitaimn C tabs, etc \$1,000/mo	\$1,000.00	12,000
Lube	55 cases x \$218.18/case	\$218.18	12,000
Condoms	170 cases x \$70.59/case	\$70.59	12,000
Bagging Supplies	104 bundles x \$7.90/bundle	\$7.90	822
Sterile Water	431 Cases x \$\$81.205/case	\$81.205	35,000
Cotton balls and pellets	1,040bags x \$17.788/bag	\$17.788	18,500
Alcohol Wipes	500 cases x \$28/case	\$28.00	14,000

General Operating:

Expense Item	Brief Description	Rate	Cost
Insurance	Liability insurance \$45/FTE x 5 x 12 mo	\$45/FTE	2,700
Insurance	Auto insurance \$291.67/mo x 12 mo	\$291.67/mo	3,500
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE	\$86.75/ FTE	5,205
Offsite storage	Records storage \$4.98/FTE x 5 x 12 mo	\$4.98/FTE	299
Parking	Parking for vans \$1,041.67/mo x 12 mo	\$1041.67/mo	12,500
Travel	Vehicle Fuel	\$166.66/mo	2,000
Travel	Vehicle Repairs	\$83.33/mo	1,000
Bio Waste Disposal	Monthly disposal costs per ton of waste-12 tons	\$4,166.67	50,000
		al General Operating:	77,204

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost	
		1 · · · · · · · · · · · · · · · · · · ·			
				-	
		1	Total Staff Travel:		

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost	
Glide	Operational expenses; staffing, office, IT,etc	\$94,231/yr	94,231	
Saint James Infirmary	Operational expenses; staffing, office, IT,etc	\$98,077/yr	98,077	
Homeless youth Alliance	Operational expenses; staffing, office, IT,etc	\$214,423/yr	214,423	
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc	\$100,000/yr	100,000	
	Total Cons	Total Consultants/Subcontractors:		

-	A I Contractor Name: San Francisco AIDS	B	C	D	E	F	G	H ppendix #	B-1d
_		roundation	n	2.1			A		
2	Contract Term: 7/1/16-6/30/18						1.1	Page #	
3	Funding Source: General Fund							al Year(s)	
4							unding Notifica	ation Date	6/10/2016
5		UOS	COST ALLO	CATION E	BY SERVICE M	NODE			
6									
7					SERVICE M	ODES			1
		_	Progra	m	1				1
	transmission and the second		Coordinatio	n/Bulk					
8	Personnel Expenses		Purchas				S		1
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				1.0		1.01		1	
	1. 10 Land		1.1.1.1.1	1.000	13.2.3.	79.5.5	G151.4.4	Corne .	Contractor
9	Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Tota
10	0	1		0%		0%		0%	
11	0		· · · · ·	0%		0%		0%	
12	0			0%		0%	1	0%	
13	0	1.1	-	0%	-	0%		0%	
14	0		1	0%		0%		0%	
15	0		-	0%		0%		0%	1
16	Total FTE & Total Salaries	1011		0%		0%			F
17	Fringe Benefits	0%	-	0%		0%		0%	
18	Total Personnel Expenses	074	-	0%		0%	-	0%	-
19	Total Totoonnor Exponeto						I		
	Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Tota
			Expenditore	0%		0%		0%	Contract Tota
	Total Occupancy		440.000		-		-		440.00
	Total Materials and Supplies		148,830	100%	-	0%		0%	148,830
23	Total General Operating		30,000	100%	1	0%		0%	30,000
	Total Staff Travel		-	0%		0%	-	0%	
	Consultants/Subcontractor:		-	0%		0%		0%	
	Other (specify):		-	0%		0%		0%	
27				0%	1	0%	-	0%	
28				0%		0%		0%	
29				0%		0%		0%	11
30				0%		0%		0%	1
31			C N	0%		0%		0%	1.7-1.17
32	Total Operating Expenses		178,830	100%		0%	-	0%	178,83
33									
34	Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Tota
	Capital Expenditure 1			0%		0%	_	0%	
	Capital Expenditure 2			0%		0%		0%	
	Total Capital Expenses		-	0%	-	0%		0%	
38	Total askini subolicoo			0.10		470	lk		0
	Total Direct Expenses		178,830	100%	-	0%		0%	178,83
39 40	Indirect Expenses		17,883	100%		0%		0%	170,03
	TOTAL EXPENSES		196,713	100%		0%	-	0%	196,71
_	IVIAL EAPENSES		190,/13	100%		070		0%	190,/1
42				_	ļ	-	L		1
43	Units of Service (UOS) per Service		12	-					1
44	Cost Per Unit of Service by Service				· · · · · · · · ·	-	1.000	1	
45	Unduplicated Clients (UDC) per Servi	ice Mode	N/A	· · · ·					
46 47									Mari ante
									Kev. 07/

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

Appendix #: B-1d Fiscal Year: 17-18

1a) SALARIES

Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tot
)	0	\$
Staff Position 2:				
Brief description of job duties:				
Minimum qualifications:				
		x Months per	Annualized (If less than	
Annual Salary:	x FTE:	Year:	12 months):	Tot
Annual Galary.		Tota,	0	\$
				•
Staff Position 3:				
Brief description of job duties:				
Minimum qualifications:				
	- "S SS1		and a state of the	
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tot
	- IT LITTLE IS A	-	0	\$
Staff Position 4:				
Brief description of job duties:				
Brief description of job duties:	1	L v Mantha sau	Annualized /6 lace them	
Brief description of job duties: Minimum qualifications:		x Months per	Annualized (if less than	Tel
Brief description of job duties:	x FTE:	x Months per Year:	12 months):	
Brief description of job duties: Minimum qualifications:	x FTE:			Tot \$
Brief description of job duties: Minimum qualifications: Annual Salary:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		12 months):	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	12 months): 0	
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	12 months): 0 Annualized (if less than	\$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	12 months): 0	Tot \$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	12 months): 0 Annualized (If less than 12 months):	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary:		Year:	12 months): 0 Annualized (If less than 12 months):	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:		Year:	12 months): 0 Annualized (If less than 12 months):	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary:		Year:	12 months): 0 Annualized (If less than 12 months):	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year: x Months per Year:	12 months): 0 Annualized (if less than 12 months): 0	\$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Annual Salary: Staff Position 6: Brief description of job duties: Minimum qualifications: Brief description of job duties: Minimum qualifications:	x FTE:	Year: x Months per Year: x Months per	12 months): 0 Annualized (if less than 12 months): 0	\$ Tot \$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year: x Months per Year:	12 months): 0 Annualized (if less than 12 months): 0	\$ Tot

1b) EMPLOYEE FRINGE BENEFITS:

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

y	Social Security
it	Retirement
al	Medical
al	Dental
e	Unemployment Insurance
e	Disability Insurance
f	Paid Time Off
):	Other (specify):
Tatal Falsan Damafite	

Total Fringe Benefit:

Fringe Benefit %:

0%

-

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
· · · · · · · · · · · · · · · · · · ·		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Syringes	Syringes \$.15 each x 591,213	\$0.15	88,682
Bio Buckets	18/19 gallon buckets - 1,026 x \$25.006	\$25.006	25,656
Bio Buckets	2 gallon - 7,995 x \$2.75	\$2.75	21,986
Sterile Water	154 Cases x \$81.205/case	\$81.205	12,506
	· · · · · · · · · · · · · · · · · · ·	Total Materials & Supplies:	148,830

General Operating:

Expense item	Brief Description	Rate	Cost
Bio hazzard Disposal	Monthly disposal costs per ton of waste -7.2 tons	\$4,166.67	30,000
· · · · · · · · · · · · · · · · · · ·			
k	То	tal General Operating:	30,000

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
			Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			-
			-
	1		1
	Total Con	sultants/Subcontractor	s

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	

TOTAL OPERATING EXPENSES: 178,830

TOTAL DIRECT COSTS:

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
		_
	TOTAL CAPITAL EXPENDITURES:	

4) INDIRECT COSTS

Amount
1%
17,883
10%

TOTAL INDIRECT COSTS: 17,883

TOTAL EXPENSES: 196,713

178,830

-	A	В	C	D	E	F	G	H	1
1	Contractor Name: San Francisco AIDS I	Foundatio	n		1	-	A	opendix #	B-1e
2	Contract Term: 7/1/16-6/30/18							Page #	ŧ 1
3	Funding Source: CDC						Fisca	al Year(s)	17-18
4		1000	5 . T T P.	1.77.		FL	Inding Notifica	tion Date	6/10/2016
5		UOS	COST ALLOC	ATION	BY SERVICE	MODE			
6									
7					SERVICE M	ODES			1
			Progra	m					
	the state of the second state of the		Coordinatio	n/Bulk					
8	Personnel Expenses		Purchas	ing				-	
			1	10.00	1.0		1.	1.7	
9	Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
10	0		1	0%		0%		0%	
11	0		-	0%		0%		0%	
12	0			0%	C	0%		0%	-
13	0			0%		0%		0%	
14	0			0%	· · · · · · ·	0%		0%	
15	0			0%	-	0%		0%	
16	Total FTE & Total Salaries		-	0%	-	1 001	•	0%	
17	Fringe Benefits	0%	-	0%	-	0%		0%	
18	Total Personnel Expenses			0%		1 4 4 1		0%	
19				_		1			
20	Operating Expenses	1.1.1	Expenditure	%	Expenditure	1 %	Expenditure	%	Contract Total
21	Total Occupancy		-	0%		0%		0%	
_	Total Materials and Supplies		4,545	100%	-	0%	1	0%	4,545
23	Total General Operating			0%		0%		0%	1,0,0
_	Total Staff Travel			0%	-	0%	1	0%	· · · · · · · ·
	Consultants/Subcontractor:		-	0%	-	0%	11	0%	-
26	Other (specify):			0%	-	0%		0%	
27	- sic top			0%		0%		0%	
28				0%	1	0%		0%	
29				0%		0%		0%	
30				0%	1	0%		0%	
31				0%		0%		0%	
32	Total Operating Expenses		4,545	100%		0%		0%	4,545
33						1			lize di
34	Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
35	Capital Expenditure 1			0%		0%		0%	
36	Capital Expenditure 2			0%	1	0%		0%	
	Total Capital Expenses		•	0%		0%		0%	
38									
39	Total Direct Expenses		4,545	100%	-	0%		0%	4,545
40	Indirect Expenses		455	100%		0%		0%	455
41	TOTAL EXPENSES		5,000	100%	100 C	0%		0%	5,000
42									
43	Units of Service (UOS) per Serv	ice Mode	6			a second	4		6
44	Cost Per Unit of Service by Serv				-			1	a contract in
45			N/A				r =		
46						The second se			

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

Appendix#: B-1e Fiscal Year: 17-18

1a) SALARIES

Staff Position 1:				
Brief description of job duties:				
Minimum qualifications:				_
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	То
, entre entre j.			0	\$
Staff Position 2:				
Brief description of job duties:				_
Minimum qualifications:				_
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	To
			0	\$
Staff Position 3:				
Brief description of job duties:				
Minimum qualifications:				
		x Months per	Annualized (if less than	
Annual Salary:	X FTE:	Year:	12 months):	Тс
			0	\$
Staff Position 4:				
Brief description of job duties:				1
Minimum qualifications:				_
	1	x Months per	Annualized (If less than	
Annual Salary:	x FTE:	Year:	12 months):	
				To
		1	0	To \$
Staff Position 5:				
Brief description of job duties:				
Staff Position 5: Brief description of job duties: Minimum qualifications:				
Brief description of job duties:		x Months per	0	
Brief description of job duties: Minimum qualifications:		x Months per Year:	0 Annualized (if less than	\$
Brief description of job duties:	x FTE:	x Months per Year:	0	\$
Brief description of job duties: Minimum qualifications:			0 Annualized (if less than 12 months):	To
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:			0 Annualized (if less than 12 months):	\$ To
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:			0 Annualized (if less than 12 months):	\$ To
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:			0 Annualized (if less than 12 months):	\$ To
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	0 Annualized (if less than 12 months): 0	\$ To
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties: Minimum qualifications:	x FTE:	x Months per	0 Annualized (if less than 12 months): 0	\$ To \$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	0 Annualized (if less than 12 months): 0	\$ To

Total FTE: - Total Salaries: \$

 1b) EMPLOYEE FRINGE BENEFITS:

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

 Component
 Cost

 Social Security

Social Security	
 Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
 Paid Time Off	
Other (specify):	
	Palace Dens Ch.

al Fringe Benefit: Fringe Benefit %:

0%

.

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Brief Description	Rate	Cost
	-	
	Tatal Garman	
	Brief Description	Brief Description Rate

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Condoms	60 cases x \$75.75/case	\$75.75	4,545
			1.5
		Total Materials & Supplies:	4.545

General Operating:

Expense Item	Brief Description	Rate	Cost
			-
		-	
		Total General Operating	

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		1.1		
			Total Staff Travel	_

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost

thar	Total Con	sultants/Subcontractors:	
Expense Item	Brief Description	Rate	Cost
		Total Other:	
	TOTAL	OPERATING EXPENSES:	4,54
CADITAL EXPENDITURES: (If needed	A unit valued at \$5 000 or more)		
CAPITAL EXPENDITURES: (If needed. Capital Expenditure Item	A unit valued at \$5,000 or more) Brief Description		Cost
B) CAPITAL EXPENDITURES: (If needed. Capital Expenditure Item	Brief Description	APITAL EXPENDITURES:	Co

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.		455

I

10% Indirect Rate: TOTAL INDIRECT COSTS:

> TOTAL EXPENSES: 5,000

11	A	в	C	D	E	F	G	H	1
1	Contractor Name: San Francisco AIDS Fo	unda	tion					Appendix #	B-2
2	Contract Term: 7/1/16-6/30/18							Page #	1
	Funding Source: 7/1/16-6/30/18						Fis	cal Year(s)	16-17
4						1.20	Funding Notific		6/10/2016
5		IOS	COST ALLOC	ATION F	SY SERVICE		and generating		4.19.44.14
6									
7					SERVICE	MODES			1.1.1
-			I DEA THINK		1	MODEO			
	Decrement Decrement		HYA Wrap						T
8	Personnel Expenses		Dispo	sai		-			1 A. A. A. A. A. A.
						10.00			Contract
9	Position Titles F	TE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
10	0	-		0%		0%		0%	
11	0			0%	· · · · · · · · ·	0%		0%	1 ····
12	0	-	-	0%	1	0%	-	0%	
13	0		-	0%	-	0%	-	0%	
14	0		-	0%	1	0%		0%	-
15	0		-	0%	-	0%	-	0%	
16	Total FTE & Total Salaries			0%		0%	-	0%	
17		1%	-	0%	S	0%	-	0%	
18	Total Personnel Expenses			0%	-	0%		0%	
19		-	L I					-10	
	Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
	Total Occupancy			0%	-	0%		0%	-
	Total Materials and Supplies			0%	-	0%	-	0%	
	Total General Operating			0%		0%		0%	
	Total Staff Travel			0%	1	0%	-	0%	() · · · · · · · · · · · · · · · · · · ·
	Consultants/Subcontractor:		142,595	100%		0%		0%	142,595
	Other (specify):	-	142,000	0%		0%		0%	142,000
27	other (apoeny).	-		0%		0%		0%	
28				0%		0%		0%	
29		-		0%		0%		0%	
30			-	0%		0%		0%	
31		-		0%		0%		0%	
32	Total Operating Expenses		142,595	100%		0%		0%	142,595
33	Total operating antionood	_	L majore [10070	n		<u> </u>		T ALJOUT
	Capital Expenses	111	Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
	Capital Expenditure 1		Expenditure	0%	Experience	0%	Experidicare	0%	ounder rotar
	Capital Expenditure 2			0%	-	0%		0%	
30	Total Capital Expenses			0%	-	0%	-	0%	
38	Total oupline Expenses	-	-	070		010		670	
1.00	Total Direct Expenses	-	142,595	100%	-	0%	-	0%	142,595
39 40	Indirect Expenses	-	142,595	100%		0%		0%	14,259
	TOTAL EXPENSES		156,854	100%		0%		0%	156,854
41	I O THE LAT ENOLO		150,054	10070		0.70		0.70	100,004
	linite of Sondeo (1006) nor Convine t	lode	12						12
43	Units of Service (UOS) per Service M Cost Per Unit of Service by Service M						-		12
44	nduplicated Clients (UDC) per Service M	lode		1				-	terrange of the second s
40	indubicated chemis (DDC) per Service N	1000	N/A						
46 47									Rev. 07/15

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

Appendix #: B-2 Fiscal Year: 16-17

1a) SALARIES

Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tot
			0	\$
Claff Desilies Or				_
Staff Position 2: Brief description of job dutles:				-
Minimum gualifications:				_
Willing daineauona.				
		x Months per	Annualized (if less than	-
Annual Salary:	x FTE:	Year:	12 months):	Tol
			0	\$
Staff Position 3:				
Brief description of job duties:				
Minimum qualifications:				_
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tot
Annual Galary.	A116	Tour.	0	\$
			· ·	-
Staff Position 4:				
Brief description of job duties:				
Minimum gualifications:				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tot
			0	\$
Oleff Decilies Fr				
Staff Position 5: Brief description of job duties:				
Minimum qualifications:				
Minimum quantications.				
		x Months per	Annualized (if less than	-
	the second se		12 months):	Tot
Annual Salary:	x FTE:			
Annual Salary:	x FTE:	Year:	0	\$
Annual Salary:	x FTE:			
Annual Salary: Staff Position 6:	x FTE:			
Staff Position 6: Brief description of job duties:	x FTE:			
Staff Position 6:	x FTE:			
Staff Position 6: Brief description of job duties:	x FTE:	Year:	0	
Staff Position 6: Brief description of job duties: Minimum qualifications:		Year: x Months per	0	\$
Staff Position 6: Brief description of job duties:	x FTE:	Year:	0	

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	CUSL
 Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (specify):	
	Total Fringe Benefit: -

Total Fringe Benefit:

Fringe Benefit %:

0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: .

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
			1 (19-19) 2
		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
	·····		
	Total Materials & Supplies:		-

General Operating:

Expense Item	Brief Description	Rate	Cost
	· · · · · · · · · · · · · · · · · · ·		
		Total General Operating:	

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
			Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services	\$142,595	142,595
	Total Co	neultante/Subcontractore	142 50

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	
	TOTAL	OPERATING EXPENSES:	142,59

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES	
	TOTAL DIRECT COSTS	142.595

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%	6
of total direct costs.	14,259
Indirect Rate:	109
TOTAL INDIRECT COSTS:	14,259

TOTAL EXPENSES: 156,854

142,595
-	A Contractor Name: San Francisco AIDS I	B	C	D	E	F	G	H ppondix #	P 2e
							A	ppendix #	B-2a
	Contract Term: 7/1/16-6/30/18							Page #	1
3	Funding Source: General Fund	unding Source: General Fund						al Year(s)	17-18
4			1201002				unding Notifica	ation Date	6/10/2016
5		UOS	COST ALLOC	ATION	BY SERVICE	MODE			
6						_			
7					SERVICE	MODES			
101	A		HYA Wrap A						
8	Personnel Expenses		Dispos	al					1 mar 1 mar
				1.0	1				Contract
9	Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Totals
10	0			0%		0%		0%	
11	0			0%	-	0%	-	0%	-
12	0			0%		0%		0%	1
13	0			0%	-	0%	-	0%	
14	0			0%	-	0%		0%	-
15	0	-		0%		0%		0%	
16	Total FTE & Total Salaries			0%		0%		0%	
10	Fringe Benefits	0%		0%	-	0%		0%	
18	Total Personnel Expenses	076		0%		0%		0%	
-	Total Personnel Expenses			0 76		070		070	
19	Operating Expenses		Frank alterna	%	I Francisco Marcol	N	In the second second	%	Contract To
			Expenditure	0%	Expenditure	%	Expenditure		Contract 10
	Total Occupancy				-			0%	
22	Total Materials and Supplies		-	0%	•	0%	-	0%	
	Total General Operating			0%		0%	~	0%	
_	Total Staff Travel		-	0%	-	0%	· ·	0%	
	Consultants/Subcontractor:	_	142,595	100%	-	0%	-	0%	142,58
	Other (specify):			0%	-	0%		0%	
27				0%		0%		0%	
28			1	0%	-	0%		0%	
29		_	1	0%		0%		0%	
30		_		0%		0%		0%	
31				0%		0%	-	0%	
_	Total Operating Expenses		142,595	100%	-	0%	•	0%	142,59
33						_			
	Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract To
	Capital Expenditure 1			0%		0%		0%	
36	Capital Expenditure 2		1	0%		0%	1.	0%	_
_	Total Capital Expenses		-	0%	-	0%	-	0%	
38		_			(*************************************				
39	Total Direct Expenses		142,595	100%	-	0%	-	0%	142,59
40	Indirect Expenses		14,259	100%		0%		0%	14,25
	TOTAL EXPENSES		156,854	100%	-	0%		0%	156,85
42						_	l.		
43	Units of Service (UOS) per Serv		12		1.1.1.1		1		
44	Cost Per Unit of Service by Serv						-		-
45	Unduplicated Clients (UDC) per Serv	ice Mode	N/A	-				-	-
46 47				the second s					

BUDGET JUSTIFICATION

Contractor Name San Francisco AIDS Foundaiton Appendix Program Name: Syringe Access & Disposal Services Fiscal Yes

Appendix #: B-2a Fiscal Year: 17-18

1a) SALARIES

Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (If less than 12 months):	Te
			0	\$
Staff Position 2:				
Brief description of job duties: Minimum qualifications:				
Minimum quaincauons.				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	т
			0	\$
				-
Staff Position 3: Brief description of job dutles:				and the second second
Minimum gualifications:				
Winning quaincabons.				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Т
			0	\$
Staff Position 4: Brief description of job dutles:				
Minimum qualifications:				
winning quaincations.				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Te
			0	\$
Staff Position 5: Brief description of job duties:	1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -			
Minimum qualifications:				
winitiani qualincatorio.				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Тс
			0	\$
Staff Position 6:				
Brief description of job duties: Minimum qualifications:	1-			
winimum qualifications;			<u></u>	
		x Months per	Annualized (If less than	and the second
Annual Salary:	x FTE:	Year:	12 months):	Тс
			0	\$

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

Social Security	
Retirement	
Medical	
Dental	

Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (specify):	
	1.0.1

Total Fringe Benefit:

Fringe Benefit %:

0%

*

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Brief Description	Rate	Cost
	State of the second second	
		-
	-	
	The low	1
	Brief Description	Brief Description Rate

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
		-	
			-
		14	
			1.1.200
		Total Materials & Supplies	

General Operating:

Expense Item	Brief Description	Rate	Cost
		Total General Operating:	

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		1		1.000
				1
			Total Staff Travel	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services	\$142,595	142,595
			_
	Total Co	nsultants/Subcontractors:	142,595

Other:

Expense Item	Brief Description	Rate	Cost
		3	

3) CAPITAL EXPENDITURES: (If needed. /	A unit valued at \$5,000 or more)	
Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITU	IRES: -
	TOTAL DIRECT CO	OSTS: 142,595
4) INDIRECT COSTS		
	ost Allocation (i.e., FTE, square footage, or other) tiated rate of 27%. This contract seeks reimbursement at a rate	Amount

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.	14,259
Indirect Rate:	10%
Indirect Rate.	107

TOTAL INDIRECT COSTS: 14,259

> TOTAL EXPENSES: 156,854

Appendix C Insurance Waiver Reserved

Appendix D Additional Terms

1. PROTECTED HEALTH INFORMATION AND BAA

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, transmission, and storage of health information.

The parties acknowledge that CONTRACTOR is one of the following:

CONTRACTOR will render services under this contract that include possession or knowledge of identifiable Protected Health Information (PHI), such as health status, health care history, or payment for health care history obtained from CITY. Specifically, CONTRACTOR will do one or more of the following:

- Create PHI
- Receive PHI
- Maintain PHI
- Transmit PHI and/or
- Access PHI

The Business Associate Agreement (BAA) in Appendix E is required and is incorporated into this Agreement by reference as though fully set forth herein. Please note that BAA requires attachments to be completed.

CONTRACTOR will <u>not</u> have knowledge of, create, receive, maintain, transmit, or have access to any Protected Health Information (PHI), such as health status, health care history, or payment for health care history obtained from CITY.

The Business Associate Agreement is not required.

2. THIRD PARTY BENEFICIARIES

No third parties are intended by the parties hereto to be third party beneficiaries under this Agreement, and no action to enforce the terms of this Agreement may be brought against either party by any person who is not a party hereto.



This Business Associate Agreement ("Agreement") supplements and is made a part of the contract ("Contract")] by and between the City and County of San Francisco, the Covered Entity ("CE"), and San Francisco AIDS Foundation ("Contractor"), the Business Associate ("BA"), dated July 1, 2016 (CMS #7774). To the extent that the terms of the Contract are inconsistent with the terms of this Agreement, the terms of this Agreement 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 Contract, some of which may constitute Protected Health Information ("PHI") (defined below).

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

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 Agreement to permit BA to have access to such information and comply with the BA requirements of HIPAA, the HITECH Act, and the HIPAA Regulations.

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

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, 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 Agreement, 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 health



Appendix E

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 Agreement, 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. The BA will be required to complete and return to CE (and retain in BA's records for a period of seven years) the following forms, incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1), Data Security (Attachment



2) and Compliance (Attachment 3) within ninety (90) calendar days from the execution of the Contract. If CE makes changes to any of these forms during the term of the Contract that CE believes are substantial, the BA will be required to complete and return CE's updated forms to CE within ninety (90) calendar days from the date that CE provides BA with written notice of such changes.

b. User Agreements. The BA shall maintain proof that it has required all of its employees or agents that will access SFDPH PHI have signed and completed the following forms prior to accessing SFDPH PHI for the first time and annually thereafter during the term of the Contract (and retain in BA's records for a period of seven years): the SFDPH User Agreement for Confidentiality, Data Security and Electronic Signature (Attachment 4) and the SFDPH Code of Conduct (Attachment 5), incorporated by reference as though fully set forth herein.

c. Permitted Uses. BA may use, access, and/or disclose PHI only for the purpose of performing BA's obligations for or on behalf of the City and as permitted or required under the Contract [MOU] and Agreement, or as required by law. Further, BA shall not use PHI 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 Contract [MOU] and Agreement, 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 Agreement 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. k. of the Agreement, to the extent it has obtained knowledge of such 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 PHI other than as permitted or required by the Contract and Agreement, 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 PHI 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 Contract.

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 Contract or this Agreement, 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.d. 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 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 six (6) 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 [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 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 Agreement; 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 Agreement, 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 subcontractor or agent that BA believes constitutes a material breach or violation of the subcontractor or agent sobligations under the Contract or this Agreement within five (5) calendar



San Francisco Department of Public Health

Business Associate Agreement

Appendix E

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

b. Judicial or Administrative Proceedings. CE may terminate the Contract and this Agreement, 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 Contract and this Agreement 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 Agreement 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 Agreement, 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 Contract or this Agreement may be required to



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 Agreement embodying written assurances consistent with the standards and requirements of HIPAA, the HITECH Act, the HIPAA regulations or other applicable state or federal laws. CE may terminate the Contract upon thirty (30) days written notice in the event (i) BA does not promptly enter into negotiations to amendment to the Contract or this Agreement when requested by CE pursuant to this section or (ii) BA does not enter into an amendment to the Contract or this Agreement 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 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.

- Attachment 1 SFDPH Privacy Attestation, version 10/29/15
- Attachment 2 SFDPH Data Security Attestation, version 10/29/15
- Attachment 3 SFDPH Compliance Attestation, version 10/29/15
- Attachment 4 SFDPH User Agreement for Confidentiality, Data Security and Electronic Signature, version 4/23/15
- Attachment 5 SFDPH Code of Conduct, version 6/17/15

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)	

Organization Name:

Contractor City Vendor ID

ATTACHMENT 1

SFDPH PRIVACY ATTESTATION

This Attestation is to be completed by Contractors and Data Trading Partners that are required to abide by the SFDPH Business Associates Agreement (BAA) In compliance with the Health Information Portability and Accountability Act (HIPAA) and other patient confidentiality laws and regulations. **INSTRUCTIONS**: File and retain completed Attestations for a period of 7 years. Please be prepared to submit your completed Attestations, along with evidence of the following, when and if requested to do so.

Yes	No*	DOES	YOUR ORGANIZATION				
A	1.14	Have	formal Privacy Policies? (use of SFDPH Privacy	y Policies will suffice for "yes")	a second the second second second		
B			a designated Privacy Officer? The Privacy Officer? The Privacy Officer? The Privacy Officer? The Privacy Officer?		o will authorize your employee's "Systems Access Request		
		lf yes:	Email:				
C	Require Privacy Training for all employees who have access to PHI upon hire and annually thereafter? (Use of <u>SFDPH Privacy/Data Security Training</u> suffice for "yes"). [Beginning in FY1516, DPH will require document retention for 7 years.]						
D			proof that employees upon hire, and annually nning in FY1516, DPH will require document re		dentiality, Security, and Electronic Signature Form"?		
E		Have evidence that SFDPH was notified to de-provision employees who have access to SFDPH PHI within 2 business days for regular terminations and within 24 hours for terminations due to cause?					
F			re that staff who download, create, or transfer PHI is only transferred or created on devices th		held), have prior supervisorial authorization to do so AND		
G		Have	(or will have if/when applicable) BAAs with su	ubcontractors or vendors who create, receive, m	aintain or transmit SFDPH PHI.		

Does your organization serve patients/clients for or on behalf of DPH? If ___YES, answer h-k. If ___NO, these questions are not applicable, please go directly to ATTEST.

	Yes N	* DOES YOUR ORGANIZATION
н		Have evidence in each patient's/client's chart or electronic file that the <u>Privacy Notice</u> was provided in the patient's language (English, Cantonese, Vietnamese, Tagalog, Spanish, Russian forms are available from SFDPH).
1	20	Have visibly posted the Summary of the Notice of Privacy Practices In all six languages in common patient areas of your treatment facility?
1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Have documented each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations?
к	1.1	When required by law, have proof that signed authorization for disclosure forms (that meet the requirements of the HIPAA Federal Privacy Rule) are obtained PRIOR to releasing a patient's/clients health information?

ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct.

ATTESTED by Privacy Officer	Name (print)	Signature	Date
ATTESTED by CEO / Exec Director	G PETRONI	Signature	Date
ATTESTED by Chair, Board of Directors / Trustees		Signature	Date

* EXCEPTIONS: If you have answered "NO" to any question in A-G or H-K (if applicable), please contact OCPA at <u>compliance.privacy@sfdph.org</u> or call 1-855-729-6040 for a consultation. Any "No" answers will need to be reviewed and approved as exceptions by OCPA.

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

San Francisco Department of Public Health (SFDPH) Office of Compliance and Privacy	y Attairs (Of	CPA)
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Organization Name:

Contractor City

Vendor ID

SFDPH DATA SECURITY ATTESTATION

This Attestation is to be completed by Contractors and Data Trading Partners that are required to abide by the SFDPH Business Associates Agreement in compliance with the Health Information Portability and Accountability Act (HIPAA, ADMINISTRATIVE 45 CFR 164.308(a)(8)), Health Information Technology for Economic and Clinical Health Act (HITECH), and the American Institute of Certified Public Accountants (AICPA) requirements. INSTRUCTIONS: File and retain completed Attestations for a period of 7 years. Please be prepared to submit your completed Attestations, along with evidence of the following, when and if requested to do so.

	YES	NO*	DOES YOUR ORGANIZATION							
A			nduct 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? [Beginning in FY1516, DPH will require document retention for 7 years.]							
В			Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?							
			Date of last Data Security Risk Assessment/Audit							
			Name of firm or person(s) who performed the							
			Assessment/Audit and/or authored the final report							
C			Have a formal Data Security Awareness Program?							
D			Have a designated Security Officer?							
			If yes: IT Security Phone # Email:							
			Officer							
E			Require Data Security training for all employees who have access to PHI upon hire and annually thereafter? (Use of SFDPH Privacy/Data Security Training							
			will suffice for "yes".) [Beginning in FY1516, DPH will require document retention for 7 years.]							
F			Have policies and procedures to detect, contain, and correct security violations? (Use of SFDPH Privacy Policies will suffice for "yes".)							
G			Have (or will have if/when applicable) Business Associate Agreements with subcontractors or vendors who create, receive, maintain or transmit SFDPH PHI.							
H			Have (or will have if/when applicable) a diagram (of how SFDPH data flows between your organization and this downstream or 3rd party entity (including							
			named users, access methods, on-premise data hosts, processing systems, etc.)?							

ATTEST: Under penalty of periury. I hereby attest that to the best of my knowledge the information herein is true and correct.

ATTESTED by Data Security	Name	Signature	Date	
Officer	(print)			20. A
ATTESTED by CEO / Exec	Name	Signature	Date	
Director	(print)			
ATTESTED by Chair, Board	Name	Signature	Date	
of Directors / Trustees	(print)			

* EXCEPTIONS: If you have answered "NO" to any question, please contact OCPA at compliance.privacy@sfdph.org or call 1-855-729-6040 for a consultation. Any "No" answers will need to be reviewed and approved as exceptions by OCPA.

EXCEPTION(S) APPROVED	Name	Signature	·	Date
by OCPA	(print)			

San Francisco Department of Publi	c Health (SFDPH) Office of (Compliance and Privacy A	Affairs (OCPA)		ATTACHMENT 3
Organization Name:				Contractor City Vendor ID	

SFDPH COMPLIANCE ATTESTATION

This Attestation is to be completed by Contractors and Data Trading Partners that are required to abide by the SFDPH Business Associates Agreement in compliance with Medicare Medicaid Conditions of Participation, False Claims Act and other ethics/compliance laws and regulations. **INSTRUCTIONS**: File and retain completed Attestations for a period of 7 years. Please be prepared to submit your completed Attestations, along with evidence of the following, when and if requested to do so.

Y	ES N	*0/	DOES YO	OUR ORGANIZATION						
A	T		Have a fe	ormal Compliance Program?						
B	T		Have a designated Compliance Officer?							
		If yes: Compliance Phone # Email:								
C					Systems or PHI to take Compliance training upon I 1516, DPH will require you to retain these records	hire and annually thereafter? (Use of SFDPH <u>compliance</u> for 7 years.]				
D	T			oof that employees upon hire, and annual document retention for 7 years.]	ally thereafter, have signed agreement to the SFDPH	H "Code of Conduct"? [Beginning in FY1516, DPH will				
E			to servic			to the SFDPH all identified compliance deficiencies related pation in government health care programs, including				
F				e and promote the SFDPH Compliance and lower protections in staff areas where it o		City's Whistleblower Program including posting a notice of				
G					udes a mechanism for staff to confidentially and an ompliance <u>policies</u> will suffice for "yes".)?	onymously report potential compliance concerns as well				
Н			Health C or gover	Care Services (DHCS) exclusion lists upon in	initial hire and monthly thereafter to ensure that n	ministration (GSA), and the California Department of to employee, temporary employee, volunteer, consultant, services is excluded from (may not work in) a federal				
					contractors/vendors to comply with all requirement	A REAL AND A REAL PROPERTY OF A				

ATTEST: Under penalty of perjury, I hereby attest that to the best of my knowledge the information herein is true and correct.

ATTESTED by Compliance Officer	Name (print)	Signature	Date	
ATTESTED by CEO / Exec Director		Signature	Date	
ATTESTED by Chair, Board of Directors / Trustees		Signature	Date	*

* EXCEPTIONS: If you have answered "NO" to any question, please contact OCPA at <u>compliance.privacy@sfdph.org</u> or call 1-855-729-6040 for a consultation. Any "No" answers will need to be reviewed and approved as exceptions by OCPA.

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

7/01/	6-6/30/17
	PAGE A
en New	abor

APPENDIX F-1

Contractor: San Francisco AIDS Founda	ation					5# 74	ê h		A-1JUL1	
Address: P. O. Box 426182				100	5.1.1					
San Francisco, CA 94142-6182				Con	tract Pur	chase O	rder No:			_
Telephone: (415) 487-3000			20	1	1	Funding	Source:	0	eneral FL	Ind
Fax: (415) 487-3009		H	PS		G	rant Cod	e/Detail:	-	-	
rogram Name: Syringe Access Services	1		-	1					_	
ACE Control #:					Pro	Ject Cod	e/Detail:			_
						Involce	Period:	07/	1/16 - 07/	31/16
						FINAL	Invoice		(check if	Yes)
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XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	\$254,1	9ET 725		INSES		NSES		OF	BAL/	UNING ANCE 25.00 81.00
XPENDITURES otal Salarles (See Page B) ringe Benefits Total Personnel Expenses perating Expenses:	\$254,1 \$63,6 \$318,4	9ET 725 981 406		INSES		NSES		OF	BAL/ \$254,7 \$63,6 \$318,4	UNING ANCE 25.00 81.00 106.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	\$254, \$63,6	9ET 725 981 406		INSES		NSES		OF	BAL/ \$254,7 \$63,6	UNING ANCE 25.00 81.00 106.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$254,, \$63,6 \$318,4 \$70,4	SET 725 881 406 37		INSES		NSES		OF	BAL/ \$254,7 \$63,6 \$318,4 \$70,4	UNING ANCE 725.00 81.00 106.00 37.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$254,1 \$63,6 \$318,4	SET 725 881 406 37		INSES		NSES		OF	BAL/ \$254,7 \$63,6 \$318,4	UNING ANCE 725.00 81.00 106.00 37.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)	\$254, \$63,6 \$318,4 \$70,4 \$721,1	9ET 725 881 406 37		INSES		NSES		OF	BAL/ \$254,7 \$63,6 \$318,4 \$70,4 \$70,4 \$721,0	AINING ANCE 725.00 81.00 406.00 37.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$254,, \$63,6 \$318,4 \$70,4	9ET 725 881 406 37		INSES		NSES		OF	BAL/ \$254,7 \$63,6 \$318,4 \$70,4	AINING ANCE 725.00 81.00 406.00 37.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$254, \$63,6 \$318,4 \$70,4 \$721,1	9ET 725 881 406 37		INSES		NSES		OF	BAL/ \$254,7 \$63,6 \$318,4 \$70,4 \$70,4 \$721,0	AINING ANCE 725.00 81.00 406.00 37.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)	\$254, \$63,6 \$318,4 \$70,4 \$721,1 \$77,2	9ET 725 881 37 37 069		INSES		NSES		OF	BAL/ \$254,7 \$63,6 \$318,4 \$70,4 \$70,4 \$721,0	AINING ANCE 725.00 81.00 106.00 37.00 37.00 069.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$254, \$63,6 \$318,4 \$70,4 \$721,1	9ET 725 881 37 37 069		INSES		NSES		OF	BAL \$254,7 \$63,6 \$318,4 \$70,4 \$77,4 \$7721,0 \$777,2	UNING ANCE 25.00 81.00 06.00 37.00 37.00 069.00 04.00
XPENDITURES bial Salaries (See Page B) Inge Benefits Total Personnel Expenses perating 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)	\$254, \$63,6 \$318,4 \$70,4 \$721,1 \$77,2	9ET 725 881 37 37 069		INSES		NSES		OF	BAL \$254,7 \$63,6 \$318,4 \$70,4 \$77,4 \$7721,0 \$777,2	UNING ANCE 25.00 81.00 06.00 37.00 37.00 069.00 04.00
XPENDITURES bial Salaries (See Page B) chage Benefits Total Personnel Expenses perating 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)	\$254, \$63,6 \$318, \$70,4 \$770,4 \$771,1 \$777,2 \$506,1	9ET 725 881 37 37 069 904 731		INSES		NSES		OF	BAL \$254,7 \$63,6 \$318,4 \$70,4 \$77,4 \$77,2 \$77,2 \$77,2 \$506,7	AINING ANCE 225.00 81.00 106.00 37.00 37.00 069.00 04.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$254, \$63,6 \$318,4 \$70,4 \$721,1 \$77,2	9ET 725 881 37 37 069 904 731		INSES		NSES		OF	BAL \$254,7 \$63,6 \$318,4 \$70,4 \$77,4 \$7721,0 \$777,2	AINING ANCE 225.00 81.00 106.00 37.00 37.00 069.00 04.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$254, \$63,6 \$318,4 \$70,4 \$721,1 \$77,2 \$77,2 \$506,4 \$506,4 \$1,375,	25 125 181 1406 37 37 37 37 37 37 37 37 37 37		INSES		NSES		OF	BAL \$254,7 \$63,6 \$318,4 \$70,4 \$77,4 \$77,2 \$77,2 \$77,2 \$506,7 \$506,7 \$1,375,	AINING ANCE 225.00 81.00 106.00 37.00 37.00 069.00 04.00 04.00 731.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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 DTAL DIRECT EXPENSES	\$254, \$63,6 \$318,4 \$70,4 \$721,3 \$77,2 \$77,2 \$506,4 \$1,375, \$1,693, \$169,3	DET 725 881 406 37 069 04 731 731 441 8847 885		INSES		NSES		OF	BAL \$254,7 \$63,6 \$318,4 \$70,4 \$77,4 \$77,2 \$77,2 \$77,2 \$506,7	ANNING 225.000 406.000 406.000 406.000 406.000 441.000 441.000 847.000
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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 - (Meels, Audit, Transportation Reimb,	\$254, \$63,6 \$318,4 \$70,4 \$721,4 \$77,2 \$77,2 \$506,4 \$1,375, \$1,693,	DET 725 881 406 37 069 04 731 731 441 8847 885				NSES DATE		OF	BAL \$254,7 \$63,6 \$318,4 \$70,4 \$77,4 \$77,4 \$77,2 \$75,2 \$77,2 \$75,2 \$77,2 \$75,2	441.00 85.00

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:

Title:

Date:

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

APPENDIX F-1 7/01/16-8/30/17 PAGE B

Involce Number

A-1JUL16

General Fund

Contractor: San Francisco AIDS Foundation Address: P. O. Box 426182 San Francisco, CA 94142-6182

Contract Purchase Order No: Fund Source:

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

Program Name: Syringe Access Services

ACE Control #:

Grant Code/Detail:	-

Project Code/Detail:

07/1/16 - 07/31/16 Involce Period:

FINAL Invoice (check if Yes)

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
rights & Ops Director	0.05	\$4,250			1	\$4,250.00
Dir. Behavioral Health Svcs	0.05	\$5,000				\$5,000.00
Dir. Govt Contracts	0.05	\$4.500				\$4,500.0
Evaluation Assoc	0.05	\$3,250				\$3,250.0
Budget & Contracts Migr	0.05	\$4,250				\$4,250.0
SAS Mgi	0.75	\$47.925		-		\$47,925.0
ogistics Associates	3.00	\$139,800		1		\$139,800.0
SSE/Vol Coordiantor	0.75	\$34,500				\$34,500.0
Comm. Engagement & Kit Packig Assoc	0.25	\$11,250				\$11,250.00
TOTAL SALARIES	5.00	\$254,725				\$254.725.0

DETAIL PERSONNEL EXPENDITURES

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:

									7/01/1	6-6/30/1 PAGE
Contractor: San Francisco AIDS Found	ation					IS# 74	1		A-1JUL1	_
Address: P. O. Box 426182 San Francisco, CA 94142-6183	2			Con	tract Pu	chase 0	order No:	_	-	-
Telephone: (415) 487-3000	1.0	-		1			Source:	6	eneral Fi	und
Fax: (415) 487-3009		HF	PS	<u> </u>					Cheratin	anto
Program Name: Syringe Access Services				1			le/Detail:	-	-	
ACE Control #:	8				Pro	ject Cod	ie/Detall:			
A Contraction of the second se						Involc	e Period:	07/1	/16 - 07/	31/16
						FINA	L Involce		(check if	Yes)
	CONTR			ERED		ERED		OF		RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS 12	NOC
ngin cooldinaadu	12			-					12	
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EXPENDITURES	BUD	3ET	EXPE THIS P	NSES	EXPE TO D	NSES		OF		AINING
Total Salaries (See Page B) Fringe Benefits	_		C							
Total Personnel Expenses			-	-	-			_		
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	2							_		-
Materials and Supplies-(e.g., Office,	\$148.	830	1			-		-	\$148,8	830.00
Postage, Printing and Repro., Program Supplies)			1			-				
General Operating-(e.g., insurance, Staff	\$30.0	000	-	-	-				\$30.0	00.00
Training, Equipment Rental/Maintenance)	15/01		-	-						
Staff Travel - (e.g., Local & Out of Town)		-			-	-51				
Consultant/Subcontractor			-					-		
Other - (Meals, Audit, Transportation Reimb,		-								
Stipends, Facilitators)			-				-			-
Total Operating Expenses	\$178,	830	1. A						\$178,8	330.00
	2 84.70	020			_				E4707	200 000
Indirect Expenses	\$178,		-	-		-			\$178,8	
manout Expenses			-		-		-	-	\$196,7	
TOTAL EXPENSES	\$196.	/13 1								
TOTAL EXPENSES LESS: Initial Payment Recovery	\$196,	/13		-	NOTES	:			- 0100,i	10.00

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:

Title:

Date:

APPENDIX F-1a

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

APPENDIX F-1a 7/01/16-6/30/17 PAGE B

Invoice Number

A-1JUL16

Contractor: San Francisco AIDS Foundation Address: P. O. Box 426182 San Francisco, CA 94142-6182

Contract Purchase Order No: Fund Source: General Fund

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

Program Name: Syringe Access Services

ACE Control #:

Grant	Code/Detail:	

Project Code/Detail:

Invoice Period: 07/1/16 - 07/31/16

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES PERSONNEL PERSON

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the smount 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:

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7/01/2016

										PAGE
					CM	S#		In	voice Num	ber
Contractor: San Francisco AIDS Found	ation				77	74	1 [1.0	A-1JUL1	6
Address: P. O. Box 426182					-					
San Francisco, CA 94142-618	2	Contract Purchase Order No:								
Telephone: (415) 487-3000	7 N	-	1.1	1		Funding	Source:	14	CDC	
Fax: (415) 487-3009		H	PS		1.5					
Program Name: Syringe Access Services	5.				G	rant Cod	le/Detail:	HCH	HIVPREV	NGR
					Pro	ject Cod	ie/Detail:	1.4	HCPD9	0
ACE Control #:	e internet in the second s					Involce	e Period:	07/1	/16 - 07/	21/16
						myoici	e renou.[0//1	110-011	51/10
						FINAL	L Invoice	11.00	(check if	Yes)
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DEI NEDADI CO	CONTRA			ERIOD		ATE	TOT			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
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EXPENDITURES	BUDO	PET		NSES	EXPE	NSES	% (BUD			AINING
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Fringe Benefits	1. 1. 1.	1.	-							
Total Personnel Expenses				-						
Operating Expenses:							1		-	
Occupancy-(e.g., Rental of Property, Utilities,		-						_		
Building Maintenance Supplies and Repairs)	ALC: BURNER			-			-			
	10000		-		-					
Materials and Supplies-(e.g., Office,	\$4.5	45	1						\$4,54	15.00
Postage, Printing and Repro., Program Supplies)					-		-			-
General Operating-(e.g., Insurance, Staff			-	-			-			
Training, Equipment Rental/Maintenance)								_		
Staff Travel - (e.g., Local & Out of Town)		5-3	-		-			- 1	-	
à	-			_						
Consultant/Subcontractor	-		-					-	-	
Other - (Meals, Audit, Transportation Reimb,	1		12		1					-
Stipends, Facilitators)			-							
Total Operating Expenses	\$4,5	45	1						\$4,54	15.00
Capital Expenditures	54	2-2								
TOTAL DIRECT EXPENSES	\$4,5	45							\$4,54	5.00
Indirect Expenses	\$45	5							\$45	5.00
TOTAL EXPENSES	\$5,0	00							\$5,00	00.00
LESS: Initial Payment Recovery		11			NOTES	6				
Other Adjustments (Enter as negative, if approp	riate)			1						
REIMBURSEMENT			1.0			-		-	_	-

I cartify 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:

APPENDIX F-1b 7/01/16-12/31/16

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

APPENDIX F-1b 7/01/16-12/31/16 PAGE B

Contractor:	San Francisco AIDS Foundation
Address:	P. O. Box 426182
	San Francisco, CA 94142-8182

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

Program Name: Syringe Access Services

ACE Control #:

	Invoice Number
	A-1JUL16
Contract Purchase Order No:	
Fund Source:	CDC
Grant Code/Detall:	HCHIVPREVNGR
Project Code/Detail:	HCPD90
Invoice Period:	07/1/16 - 07/31/16

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

ERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
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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:

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					CM	5#	1.1	Ic	voice Num	ber
Contractor: San Francisco AIDS Found	ation				77	74		1	A-1JUL1	7
Address: P. O. Box 426182								_		
San Francisco, CA 94142-6182	2			Con	tract Pur	chase O	Irder No:	1.1	_	
Telephone: (415) 487-3000			-	1		Funding	Source:	G	eneral Fu	Ind
Fax: (415) 487-3009		H	PS							
		1			G	ant Cod	e/Detail:			
Program Name: Syringe Access Services					120					
ACE Control #:					Pro	ject Cod	le/Detail:	-	_	
						Involce	Period:	07/	/17 - 07/	31/17
						-			· · · · ·	
						FINAL	. Involce		(check if	Yes)
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DELIVERABLES	CONTR	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	RABLES
Access	5,906	1	1						5,906	
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Unduplicated Clients for Appendix	10.724	NOC	12. 1	NOC		NOC		NOC	12 1	NOG
EXPENDITURES	BUD	GET		NSES		NSES		OF		ANCE
Total Salaries (See Page B)	\$254								\$254,7	
Fringe Benefits	4		-	-					\$63,6	
Total Personnel Expenses	\$318	406						-	\$318,4	106.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$70,	437	-						\$70,4	37.00
Building Maintenance Supplies and Repairs)	41.01	141						2001	- tropi	
	-									
Materials and Supplies-(e.g., Office,	\$721	069	-		-	-			\$721,0	069.00
Postage, Printing and Repro., Program Supplies)			-	-	-					-
General Operating-(e.g., Insurance, Staff	\$77	204	1	-					\$77,2	04.00
Training, Equipment Rental/Maintenance)									1	
Staff Travel - (e.g., Local & Out of Town)	-									
								~	1	-02 - I
Consultant/Subcontractor	\$506,	731			-		-		\$506,7	31.00
Other - (Meals, Audit, Transportation Reimb,		-				-	-	-	-	
Stipends, Facilitators)				-	-		-			
	-									
Total Operating Expenses	\$1,375	5,441		-	-		1	_	\$1,375,	441.00
Capital Expenditures	\$1,693	847	-	-			-		\$1,693,	847.00
IVIAL DIRECT CAPENSES		1.04/		-			-	_		
Indirect Expenses									\$169 3	185,181
Indirect Expenses	\$169.	385	-						\$169,3	
TOTAL EXPENSES		385			NOTES	_	-		\$169,3 \$1,863,	
Indirect Expenses TOTAL EXPENSES LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if approp REIMBURSEMENT	\$169. \$1,863	385			NOTES		-			

I cartify 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		
1.1	1380 Howard Street, 4th Floor		
San Francisco, CA 94103 Attn: Contract Payments	By:	Date:	
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-1c 7/01/17-6/30/18 PAGE B

Invoice Number

Contractor: San Francisco AIDS Foundation Address: P. O. Box 426182 San Francisco, CA 94142-6182 A-1JUL17
Contract Purchase Order No:
Fund Source: General Fund

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

Program Name: Syringe Access Services

ACE Control #:

Project Code/Detail:

Invoice Period: 07/1/17 - 07/31/17

FINAL Invoice (check if Yes)

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
is & Ops Director	1 0.05	S-A . 0				\$4,250.0
ir. Behavioral Health Svcs	0.05	\$5,004		·		\$5,000.0
ir. Govt Contracts	0.05	\$4,5(81)				\$4,500.0
valuation Assoc	0.05	\$3.250				\$3,250.00
udget & Contracts Mgr	0.05	\$4.2:				\$4,250.00
AS Mgr	0.75	\$47,925	1.00			\$47,925.0
ogistics Associates	3.00	\$139,800				\$139,800.0
SE/Vol Coordiantor	0.75	\$34,500				\$34,500.00
omm. Engagement & Kit Packig Assoc	0.25	\$11,250				\$11,250.00
OTAL SALARIES	5.00	\$254,725				\$254.725.0

DETAIL PERSONNEL EXPENDITURES

I cartify that the information provided above is, to the best of my knowledge, complete and accurate; the emount 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:

7/01/2016

Date:	

									7/01/1	7-6/30/1
Contractor: San Francisco AIDS Found	lation					15# 74	1		voice Num A-1JUL1	
Address: P. O. Box 426182 San Francisco, CA 94142-618	2			Co	ntract Pu	rchase C	order No:			
Telephone: (415) 487-3000 Fax: (415) 487-3009		Н	PS			Funding	Source:	G	eneral Fi	Ind
rogram Name: Syringe Access Services					G	rant Cod	le/Detall:			
ogram warne. Synnige Access Services	1.1				Pro	ject Cod	e/Detail:	1		
ACE Control #:						Involc	e Period:	07/1	/17 - 07/3	31/17
						FINAL	Involce		(check if	Yes)
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nduplicated Clients for Appendix	(C)(2)				$\gamma_{\rm e} \sim 1$					-
XPENDITURES	BUD	GET	EXPE THIS P			INSES DATE		OF		AINING
otal Salaries (See Page B) ringe Benefits										
Total Personnel Expenses	1 1 1	1961 - H								
perating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)		12					1			
Materials and Supplies-(e.g., Office,	100	-	-	-	-				\$148,8	30.00
Postage, Printing and Repro., Program Supplies)					1		-			
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$30,0	000				-	-		\$30,0	00.00
Staff Travel - (e.g., Local & Out of Town)	L	100		-			-			
Consultant/Subcontractor	-				-				-	_
Other - (Meals, Audit, Transportation Relmb, Stipends, Facilitators)		100	-							
Total Operating Expenses	\$178,	830							\$178,8	30.00
Capital Expenditures OTAL DIRECT EXPENSES	\$178,								\$178,8	
Indirect Expenses	\$17,8	383				-			\$17,8	83.00
OTAL EXPENSES LESS: Initial Payment Recovery	\$196,	/15	-	-	NOTES	:		_	\$196,7	13.00
Other Adjustments (Enter as negative, If approp REIMBURSEMENT	orlate)									

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:

By:

(DPH Authorized Signatory)

Title:

SFDPH Fiscal / Involce Processing 1380 Howard Street, 4th Floor San Francisco, CA 94103

Attn: Contract Payments

Send to:

Date:

APPENDIX F-1d

APPENDIX F-1d 7/01/17-6/30/18 PAGE B

Contractor: San Francisco AIDS Foundation Address: P. O. Box 426182 San Francisco, CA 94142-6182

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

Program Name: Syringe Access Services

ACE Control #:

	Involce Number
E	A-1JUL17
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	
Invoice Period:	07/1/17 - 07/31/17
FINAL Involce	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	BALANCE
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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:

									7/01/17-	-12/31/17 PAGE /
Contractor: San Francisco AIDS Found	ation			1.5		15# 74	n e		voice Num	ber
Address: P. O. Box 426182 San Francisco, CA 94142-6182				Con			rder No:		TUCLI	-
Telephone: (415) 487-3000 Fax: (415) 487-3009		H	PS			Funding	Source:		CDC	
Program Name: Syringe Access Services			-		G	rant Cod	e/Detail:	HCH	IVPREV	NGR
					Pro	ject Cod	e/Detail:		HCPD90	1
ACE Control #:						Invoice	Period:	07/1	/17 - 07/3	31/17
						FINAL	Involce		(check if	Yes)
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Unduplicated Clients for Appendix	15.15			1	15/1					
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Total Salaries (See Page B)										
Fringe Benefits	9h	- them		-						
Total Personnel Expenses Operating Expenses:				-	-					_
Occupancy-(e.g., Rental of Property, Utilities,			-	-	-	_				
Building Maintenance Supplies and Repairs)			-						1	
	-			2.5						
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$4,	545	-		-		-		\$4,54	5.00
			1 Constant							
General Operating-(e.g., Insurance, Staff					-				-	
Training, Equipment Rental/Maintenance)				-	-		-		-	
Staff Travel - (e.g., Local & Out of Town)					-					_
Consultant/Subcontractor				_	-	-		-	1	
Other - (Meals, Audit, Transportation Reimb,		-	-		-		-			
Stipends, Facilitators)				-	_					-
									-	
Total Operating Expenses	\$4,5	545						-	\$4,54	5.00
Capital Expenditures TOTAL DIRECT EXPENSES	\$4.3	545	-						\$4.54	5.00
Indirect Expenses	\$4			-		-	-		\$455	
TOTAL EXPENSES	\$5,0				-		1-1-0-		\$5,00	

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:

NOTES:

Date:

APPENDIX F-1e

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

Title:

LESS: Initial Payment Recovery

Other Adjustments (Enter as negative, if appropriate) REIMBURSEMENT

APPENDIX F-1e 7/01/17-12/31/17 PAGE B

Contractor:	San Francisco AIDS Foundation
Address:	P. O. Box 426182
	San Francisco, CA 94142-6182

	Invoice Number
Fund Source:	A-1JUL17
Contract Purchase Order No:	
Fund Source:	CDC
Grant Code/Detail:	HCHIVPREVNGR
Project Code/Detall:	HCPD90

Program Name: Syringe Access Services

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

ACE Control #:

Invoice Period: 07/1/17 - 07/31/17

FINAL Involce (check if Yes)

DETAIL PERSONNEL EXPENDITURES

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I cartify 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-2
7/01/16-6/30/17
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Contractor: San Francisco AIDS Founda	ation				77	74	11.1		A-1JUL1	6
Address: P. O. Box 426182								-		1
San Francisco, CA 94142-6182	2			Con	tract Pur	chase O	rder No:			_
Telephone: (415) 487-3000				Funding Source:			General Fund			
Fax: (415) 487-3009	HPS				amanig			Choraiti		
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rogram Name: Syringe Acess Services			-				÷			
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ACE Control #:						Invoice	Period:	07/1	/16 - 07/	31/16
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						FINAL	Invoice	((check if	Yes)
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otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses:	BUD	GET								
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otal Salaries (See Page B) ringe Benefits Total Personnel Expenses operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	BUD	GET								
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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)	BUD	GET								
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otal Salaries (See Page B) ringe 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)	BUD	GET								
otal Salaries (See Page B) ringe 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	BUD	JET								
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otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)	BUD \$142,									ANCE
otal Salaries (See Page B) ringe 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									BAL	ANCE
otal Salaries (See Page B) ringe 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 Other - (Meels, Audit, Transportation Reimb,									BAL	ANCE
otal Salaries (See Page B) ringe 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									BAL	ANCE
otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)		585							BAL	595.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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 - (Meels, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses	\$142;	585							\$142,5	595.00
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$142;	595							\$142,5	595.00
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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		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	

APPENDIX F-2 7/01/16-6/30/17 PAGE B

Invoice Number

Contractor:	San Francisco AIDS Foundation
Address:	P. O. Box 426182
	San Francisco, CA 94142-6182

	A-1JUL16	1
Contract Purchase Order No:		
Fund Source:	General Fund	

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

Program Name: Syringe Acess Services

ACE Control #:

Project	Code/Detail:	

Grant Code/Detail:

Involce Period: 07/1/16 - 07/31/16

FINAL Involce (check if Yes)

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Certified By:

Date:

aAPPENDIX F-2 7/01/17-6/30/18 PAGE A

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Other Adjustments (Enter as negative, if approp REIMBURSEMENT	nate)										
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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 / Involce Processing 1380 Howard Street, 4th Floor		
	San Francisco, CA 94103	Ву:	Date:
1	Attn: Contract Payments	(DPH Authorized Signatory)	

aAPPENDIX F-2 7/01/17-6/30/18 PAGE B

Invoice Number

Contractor: San Francisco AIDS Foundation Address: P. O. Box 426182 San Francisco, CA 94142-6182 A-1JUL17
Contract Purchase Order No:
Fund Source: General Fund

Fax: (415) 487-3009

Program Name: Syringe Acess Services

Telephone: (415) 487-3000

ACE Control #:

Grant	Code/Deta	

Project Code/Detail:

Invoice Period: 07/1/17 - 07/31/17

FINAL Involce (check if Yes)

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Certified By:

Date:

Appendix G

Dispute Resolution Procedure For Health and Human Services Nonprofit Contractors 9-06

Introduction

The City Nonprofit Contracting Task Force submitted its final report to the Board of Supervisors in June 2003. The report contains thirteen recommendations to streamline the City's contracting and monitoring process with health and human services nonprofits. These recommendations include: (1) consolidate contracts, (2) streamline contract approvals, (3) make timely payment, (4) create review/appellate process, (5) eliminate unnecessary requirements, (6) develop electronic processing, (7) create standardized and simplified forms, (8) establish accounting standards, (9) coordinate joint program monitoring, (10) develop standard monitoring protocols, (11) provide training for personnel, (12) conduct tiered assessments, and (13) fund cost of living increases. The report is available on the Task Force's website at http://www.sfgov.org/site/npcontractingtf_index.asp?id=1270. The Board adopted the recommendations in February 2004. The Office of Contract Administration created a Review/Appellate Panel ("Panel") to oversee implementation of the report recommendations in January 2005.

The Board of Supervisors strongly recommends that departments establish a Dispute Resolution Procedure to address issues that have not been resolved administratively by other departmental remedies. The Panel has adopted the following procedure for City departments that have professional service grants and contracts with nonprofit health and human service providers. The Panel recommends that departments adopt this procedure as written (modified if necessary to reflect each department's structure and titles) and include it or make a reference to it in the contract. The Panel also recommends that departments distribute the finalized procedure to their nonprofit contractors. Any questions for concerns about this Dispute Resolution Procedure should be addressed to purchasing@sfgov.org.

Dispute Resolution Procedure

The following Dispute Resolution Procedure provides a process to resolve any disputes or concerns relating to the administration of an awarded professional services grant or contract between the City and County of San Francisco and nonprofit health and human services contractors.

Contractors and City staff should first attempt to come to resolution informally through discussion and negotiation with the designated contact person in the department.

If informal discussion has failed to resolve the problem, contractors and departments should employ the following steps:

- Step 1 The contractor will submit a written statement of the concern or dispute addressed to the Contract/Program Manager who oversees the agreement in question. The writing should describe the nature of the concern or dispute, i.e., program, reporting, monitoring, budget, compliance or other concern. The Contract/Program Manager will investigate the concern with the appropriate department staff that are involved with the nonprofit agency's program, and will either convene a meeting with the contractor or provide a written response to the contractor within 10 working days.
- Step 2 Should the dispute or concern remain unresolved after the completion of Step 1, the contractor may request review by the Division or Department Head who supervises the Contract/Program Manager. This request shall be in writing and should describe why the concern is still unresolved and propose a solution that is satisfactory to the contractor. The Division or Department Head will consult with other Department and City staff as appropriate, and will provide a written determination of the resolution to the dispute or concern within 10 working days.
- Step 3 Should Steps 1 and 2 above not result in a determination of mutual agreement, the contractor may
 forward the dispute to the Executive Director of the Department or their designee. This dispute
 shall be in writing and describe both the nature of the dispute or concern and why the steps taken
 to date are not satisfactory to the contractor. The Department will respond in writing within 10
 working days.

Appendix G CMS#7774

7/01/2016

Appendix G

In addition to the above process, contractors have an additional forum available only for <u>disputes that concern</u> <u>implementation of the thirteen policies and procedures recommended by the Nonprofit Contracting Task Force and</u> <u>adopted by the Board of Supervisors</u>. These recommendations are designed to improve and streamline contracting, invoicing and monitoring procedures. For more information about the Task Force's recommendations, see the June 2003 report at <u>http://www.sfgov.org/site/npcontractingtf_index.asp?id=1270</u>.

The Review/Appellate Panel oversees the implementation of the Task Force report. The Panel is composed of both City and nonprofit representatives. The Panel invites contractors to submit concerns about a department's implementation of the policies and procedures. Contractors can notify the Panel after Step 2. However, the Panel will not review the request until all three steps are exhausted. This review is limited to a concern regarding a department's implementation of the policies and procedures in a manner which does not improve and streamline the contracting process. This review is not intended to resolve substantive disputes under the contract such as change orders, scope, term, etc. The contractor must submit the request in writing to purchasing@sfgov.org. This request shall describe both the nature of the concern and why the process to date is not satisfactory to the contractor. Once all steps are exhausted and upon receipt of the written request, the Panel will review and make recommendations regarding any necessary changes to the policies and procedures or to a department's administration of policies and procedures.
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C B R	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.									
tł	IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).									
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) RE: Ongoing service contracts with city and county of SF City and County of SF, its officers, directors employees agents and representatives are named as additional insureds as respects General Liability and Auto Liability as required by written contract.										
CERTIFICATE HOLDER CANCELLATION										
City and County of San Francisco - SFDPH 101 Grove Street San Francisco, CA 94102					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
					1.ac					

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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 Person or Organization:

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, in consideration of food contributions or client referrals you receive from them.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.



Policy Number: 201500950NPO 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:

(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.

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

First Amendment

THIS AMENDMENT (this "Amendment") is made as of 1st day of October, 2017, in San Francisco, California, by and between 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 and increase contract amount; 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:

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

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 Original Agreement 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, 2018, 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
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, 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	
the second se		

2.2 Article 3 Financial Matters of the Original Agreement currently reads as follows:

Article 3 Financial Matters

3.1 Certification of Funds; Budget and Fiscal Provisions; Termination in the Event of Non-Appropriation. This Agreement is subject to the budget and fiscal provisions of the City's Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City's obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor's assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

THIS SECTION CONTROLS AGAINST ANY AND ALL OTHER PROVISIONS OF THIS AGREEMENT.

3.2 Guaranteed Maximum Costs. The City's payment obligation to Contractor cannot at any time exceed the amount certified by City's Controller for the purpose and period stated in such certification. Absent an authorized Emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is the City required to honor, any offered or promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, "Modification of this Agreement."

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 Four Million Nine Hundred Seventy-Six Thousand Eight Hundred Thirty DOLLARS (\$4,976,830). 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. In no event shall City be liable for interest or late charges for any late payments.

3.3.2 Payment Limited to Satisfactory Services. Contractor is not entitled to any payments from City until Department of Public Health approves Services, including any furnished Deliverables, as satisfying all of the requirements of this Agreement. Payments to Contractor by City shall not excuse Contractor from its obligation to replace unsatisfactory Deliverables, including

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equipment, components, materials, or Services even if the unsatisfactory character of such Deliverables, equipment, components, materials, or Services may not have been apparent or detected at the time such payment was made. Deliverables, equipment, components, materials and Services that do not conform to the requirements of this Agreement may be rejected by City and in such case must be replaced by Contractor without delay at no cost to the City.

3.3.3 Withhold Payments. If Contractor fails to provide Services in accordance with Contractor's obligations under this Agreement, the City may withhold any and all payments due Contractor until such failure to perform is cured, and Contractor shall not stop work as a result of City's withholding of payments as provided herein.

3.3.4 **Invoice Format.** Invoices furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City, and must include a unique invoice number. Payment shall be made by City to Contractor at the address specified in Section 11.1, "Notices to the Parties," or in such alternate manner as the Parties have mutually agreed upon in writing.

3.3.5 Reserved. (LBE Payment and Utilization Tracking System)

3.3.6 Getting paid for goods and/or services from the City.

(a) All City vendors receiving new contracts, contract renewals, or contract extensions must sign up to receive electronic payments through Paymode-X, the City's third party service that provides Automated Clearing House (ACH) payments. Electronic payments are processed every business day and are safe and secure. To sign up for electronic payments, visit www.sfgov.org/ach.

(b) The following information is required to sign up: (i) The enroller must be their company's authorized financial representative, (ii) the company's legal name, main telephone number and all physical and remittance addresses used by the company, (iii) the company's U.S. federal employer identification number (EIN) or Social Security number (if they are a sole proprietor), and (iv) the company's bank account information, including routing and account numbers.

3.3.7 Grant Funded Contracts.

(a) **Disallowance**. If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement or any other Agreement between Contractor and City.

(b) Reserved (Grant Terms)

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 \$500,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. Said requirements can be found at the following website address: http://www.whitehouse.gov/omb/circulars/a133/a133.html.

If Contractor expends less than \$500,000 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 of a waiver of the aforementioned audit requirement 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.

3.5 Submitting False Claims. The full text of San Francisco Administrative Code Chapter 21, Section 21.35, including the enforcement and penalty provisions, is incorporated into this Agreement. Pursuant to San Francisco Administrative Code §21.35, any contractor or subcontractor who submits a false claim shall be liable to the City for the statutory penalties set forth in that section. A contractor or subcontractor will be deemed to have submitted a false claim to the City if the contractor or subcontractor: (a) knowingly presents or causes to be presented to an officer or employee of the City a false claim or request for payment or approval; (b) knowingly makes, uses, or causes to be made or used a false record or statement to get a false claim paid or approved by the City; (c) conspires to defraud the City by getting a false claim allowed or paid by the City; (d) knowingly makes, uses, or causes to be made or used a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the City; or (e) is a beneficiary of an inadvertent submission of a false claim to the City, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the City within a reasonable time after discovery of the false claim.

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

P-650 (6-16; DPH 8-17) Contract ID# 1000002634 5

Article 3 Financial Matters

3.1 Certification of Funds; Budget and Fiscal Provisions; Termination in the Event of Non-Appropriation. This Agreement is subject to the budget and fiscal provisions of the City's Charter. Charges will accrue only after prior written authorization certified by the Controller, and the amount of City's obligation hereunder shall not at any time exceed the amount certified for the purpose and period stated in such advance authorization. This Agreement will terminate without penalty, liability or expense of any kind to City at the end of any fiscal year if funds are not appropriated for the next succeeding fiscal year. If funds are appropriated for a portion of the fiscal year, this Agreement will terminate, without penalty, liability or expense of any kind at the end of the term for which funds are appropriated. City has no obligation to make appropriations for this Agreement in lieu of appropriations for new or other agreements. City budget decisions are subject to the discretion of the Mayor and the Board of Supervisors. Contractor's assumption of risk of possible non-appropriation is part of the consideration for this Agreement.

THIS SECTION CONTROLS AGAINST ANY AND ALL OTHER PROVISIONS OF THIS AGREEMENT.

3.2 Guaranteed Maximum Costs. The City's payment obligation to Contractor cannot at any time exceed the amount certified by City's Controller for the purpose and period stated in such certification. Absent an authorized Emergency per the City Charter or applicable Code, no City representative is authorized to offer or promise, nor is the City required to honor, any offered or promised payments to Contractor under this Agreement in excess of the certified maximum amount without the Controller having first certified the additional promised amount and the Parties having modified this Agreement as provided in Section 11.5, "Modification of this Agreement."

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.

3.3.2 Payment Limited to Satisfactory Services. Contractor is not entitled to any payments from City until Department of Public Health approves Services, including any furnished Deliverables, as satisfying all of the requirements of this Agreement. Payments to Contractor by City shall not excuse Contractor from its obligation to replace unsatisfactory Deliverables, including equipment, components, materials, or Services even if the unsatisfactory character of such Deliverables, equipment, components, materials, or Services may not have been apparent or detected at the time such payment was made. Deliverables, equipment, components, materials and Services that do not conform to the requirements of this Agreement may be rejected by City and in such case must be replaced by Contractor without delay at no cost to the City.

3.3.3 Withhold Payments. If Contractor fails to provide Services in accordance with Contractor's obligations under this Agreement, the City may withhold any and all payments due Contractor until such failure to perform is cured, and Contractor shall not stop work as a result of City's withholding of payments as provided herein.

3.3.4 Invoice Format. Invoices furnished by Contractor under this Agreement must be in a form acceptable to the Controller and City, and must include a unique invoice number. Payment shall be made by City as specified in Section 3.3.6, or in such alternate manner as the Parties have mutually agreed upon in writing.

3.3.5 Reserved (LBE Payment and Utilization Tracking System).

3.3.6 Getting paid for goods and/or services from the City.

(a) All City vendors receiving new contracts, contract renewals, or contract extensions must sign up to receive electronic payments through, the City's Automated Clearing House (ACH) payments service/provider. Electronic payments are processed every business day and are safe and secure. To sign up for electronic payments, visit www.sfgov.org/ach.

(b) The following information is required to sign up: (i) The enroller must be their company's authorized financial representative, (ii) the company's legal name, main telephone number and all physical and remittance addresses used by the company, (iii) the company's U.S. federal employer identification number (EIN) or Social Security number (if they are a sole proprietor), and (iv) the company's bank account information, including routing and account numbers.

3.3.7 Grant Funded Contracts.

(a) Disallowance. If Contractor requests or receives payment from City for Services, reimbursement for which is later disallowed by the State of California or United States Government, Contractor shall promptly refund the disallowed amount to City upon City's request. At its option, City may offset the amount disallowed from any payment due or to become due to Contractor under this Agreement or any other Agreement between Contractor and City.

(b) Grant Terms. The funding for this Agreement is provided in full or in part by a Federal or State Grant to the City. As part of the terms of receiving the funds, the City is required to incorporate some of the terms into this Agreement. The incorporated terms may be found in Appendix D, "Grant Terms." To the extent that any Grant Term is inconsistent with any other provisions of this Agreement such that Contractor is unable to comply with both the Grant Term and the other provision(s), the Grant Term shall apply.

(c) Contractor shall insert each Grant Term into each lower tier subcontract. Contractor is responsible for compliance with the Grant Terms by any subcontractor, lower-tier subcontractor or service provider.

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 \$500,000 or more in Federal funding per year, from any and all Federal awards, said audit shall be conducted in accordance with OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. Said requirements can be found at the following website address: http://www.whitehouse.gov/omb/circulars/a133/a133.html.

If Contractor expends less than \$500,000 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.

3.5 Submitting False Claims. The full text of San Francisco Administrative Code Chapter 21, Section 21.35, including the enforcement and penalty provisions, is incorporated into this Agreement. Pursuant to San Francisco Administrative Code §21.35, any contractor or subcontractor who submits a false claim shall be liable to the City for the statutory penalties set forth in that section. A contractor or subcontractor will be deemed to have submitted a false claim to the City if the contractor or subcontractor: (a) knowingly presents or causes to be presented to an officer or employee of the City a false claim or request for payment or approval; (b) knowingly makes, uses, or causes to be made or used a false record or statement to get a false claim paid or approved by the City; (c) conspires to defraud the City by getting a false claim allowed or paid by the City; (d) knowingly makes, uses, or causes to be made or used a false record or statement to conceal, avoid, or decrease an obligation to pay or transmit money or property to the City; or (e) is a beneficiary of an inadvertent submission of a false claim to the City, subsequently discovers the falsity of the claim, and fails to disclose the false claim to the City within a reasonable time after discovery of the false claim.

3.6 Reserved (Payment of Prevailing Wages).

2.3 Article 4 Services and Resources, is hereby amended in its entirety to read as follows:

Article 4 Services and Resources

4.1 Services Contractor Agrees to Perform. Contractor agrees to perform the Services provided for in Appendix A, "Scope of Services." Officers and employees of the City are not authorized to request, and the City is not required to reimburse the Contractor for, Services beyond the Scope of Services listed in Appendix A, unless Appendix A is modified as provided in Section 11.5, "Modification of this Agreement."

4.2 Qualified Personnel. Contractor shall utilize only competent personnel under the supervision of, and in the employment of, Contractor (or Contractor's authorized subcontractors) to perform the Services. Contractor will comply with City's reasonable requests regarding assignment and/or removal of personnel, but all personnel, including those assigned at City's request, must be supervised by Contractor. Contractor shall commit adequate resources to allow timely completion within the project schedule specified in this Agreement.

4.3 Subcontracting.

4.3.1 Contractor may subcontract portions of the Services only upon prior written approval of City. Contractor is responsible for its subcontractors throughout the course of the work required to perform the Services. All Subcontracts must incorporate the terms of Article 10 "Additional Requirements Incorporated by Reference" of this Agreement, unless inapplicable. Neither Party shall, on the basis of this Agreement, contract on behalf of, or in the name of, the other Party. Any agreement made in violation of this provision shall be null and void.

4.3.2 City's execution of this Agreement constitutes its approval of the subcontractors listed below.

Glide
Saint James Infirmary
Homeless Youth Alliance
SF Drug Users Union

4.4 Independent Contractor; Payment of Employment Taxes and Other Expenses.

4.4.1 Independent Contractor. For the purposes of this Article 4, "Contractor" shall be deemed to include not only Contractor, but also any agent or employee of Contractor. Contractor acknowledges and agrees that at all times, Contractor or any agent or employee of Contractor shall be

deemed at all times to be an independent contractor and is wholly responsible for the manner in which it performs the services and work requested by City under this Agreement. Contractor, its agents, and employees will not represent or hold themselves out to be employees of the City at any time. Contractor or any agent or employee of Contractor shall not have employee status with City, nor be entitled to participate in any plans, arrangements, or distributions by City pertaining to or in connection with any retirement, health or other benefits that City may offer its employees. Contractor or any agent or employee of Contractor is liable for the acts and omissions of itself, its employees and its agents. Contractor shall be responsible for all obligations and payments, whether imposed by federal, state or local law, including, but not limited to, FICA, income tax withholdings, unemployment compensation, insurance, and other similar responsibilities related to Contractor's performing services and work, or any agent or employee of Contractor providing same. Nothing in this Agreement shall be construed as creating an employment or agency relationship between City and Contractor or any agent or employee of Contractor. Any terms in this Agreement referring to direction from City shall be construed as providing for direction as to policy and the result of Contractor's work only, and not as to the means by which such a result is obtained. City does not retain the right to control the means or the method by which Contractor performs work under this Agreement. Contractor agrees to maintain and make available to City, upon request and during regular business hours, accurate books and accounting records demonstrating Contractor's compliance with this section. Should City determine that Contractor, or any agent or employee of Contractor, is not performing in accordance with the requirements of this Agreement, City shall provide Contractor with written notice of such failure. Within five (5) business days of Contractor's receipt of such notice, and in accordance with Contractor policy and procedure, Contractor shall remedy the deficiency. Notwithstanding, if City believes that an action of Contractor, or any agent or employee of Contractor, warrants immediate remedial action by Contractor, City shall contact Contractor and provide Contractor in writing with the reason for requesting such immediate action.

4.4.2 Payment of Employment Taxes and Other Expenses. Should City, in its discretion, or a relevant taxing authority such as the Internal Revenue Service or the State Employment Development Division, or both, determine that Contractor is an employee for purposes of collection of any employment taxes, the amounts payable under this Agreement shall be reduced by amounts equal to both the employee and employer portions of the tax due (and offsetting any credits for amounts already paid by Contractor which can be applied against this liability). City shall then forward those amounts to the relevant taxing authority. Should a relevant taxing authority determine a liability for past services performed by Contractor for City, upon notification of such fact by City, Contractor shall promptly remit such amount due or arrange with City to have the amount due withheld from future payments to Contractor under this Agreement (again, offsetting any amounts already paid by Contractor which can be applied as a credit against such liability). A determination of employment status pursuant to the preceding two paragraphs shall be solely for the purposes of the particular tax in question, and for all other purposes of this Agreement, Contractor shall not be considered an employee of City. Notwithstanding the foregoing, Contractor agrees to indemnify and save harmless City and its officers, agents and employees from, and, if requested, shall defend them against any and all claims, losses, costs, damages, and expenses, including attorneys' fees, arising from this section.

4.5 Assignment. The Services to be performed by Contractor are personal in character and neither this Agreement nor any duties or obligations hereunder may be assigned or delegated by Contractor unless first approved by City by written instrument executed and approved in the same manner as this Agreement. Any purported assignment made in violation of this provision shall be null and void.

4.6 Warranty. Contractor warrants to City that the Services will be performed with the degree of skill and care that is required by current, good and sound professional procedures and practices, and in conformance with generally accepted professional standards prevailing at the time the Services are performed so as to ensure that all Services performed are correct and appropriate for the purposes contemplated in this Agreement.

2.4 Article 5 Insurance and Indemnity, is hereby amended in its entirety to read as follows:

Article 5 Insurance and Indemnity

5.1 Insurance.

5.1.1 **Required Coverages.** Without in any way limiting Contractor's liability pursuant to the "Indemnification" section of this Agreement, Contractor must maintain in force, during the full term of the Agreement, insurance in the following amounts and coverages:

 (a) Workers' Compensation, in statutory amounts, with Employers' Liability Limits not less than \$1,000,000 each accident, injury, or illness; and

(b) Commercial General Liability Insurance with limits not less than \$1,000,000 each occurrence for Bodily Injury and Property Damage, including Contractual Liability, Personal Injury, Products and Completed Operations; and

(c) Commercial Automobile Liability Insurance with limits not less than \$1,000,000 each occurrence, "Combined Single Limit" for Bodily Injury and Property Damage, including Owned, Non-Owned and Hired auto coverage, as applicable.

5.1.2 Commercial General Liability and Commercial Automobile Liability Insurance policies must be endorsed to provide:

(a) Name as Additional Insured the City and County of San Francisco, its Officers, Agents, and Employees.

(b) That such policies are primary insurance to any other insurance available to the Additional Insureds, with respect to any claims arising out of this Agreement, and that insurance applies separately to each insured against whom claim is made or suit is brought.

5.1.3 All policies shall be endorsed to provide thirty (30) days' advance written notice to the City of cancellation for any reason, intended non-renewal, or reduction in coverages. Notices shall be sent to the City address set forth in Section 11.1, entitled "Notices to the Parties."

5.1.4 Should any of the required insurance be provided under a claims-made form, Contractor shall maintain such coverage continuously throughout the term of this Agreement and, without lapse, for a period of three years beyond the expiration of this Agreement, to the effect that, should occurrences during the contract term give rise to claims made after expiration of the Agreement, such claims shall be covered by such claims-made policies.

5.1.5 Should any of the required insurance be provided under a form of coverage that includes a general annual aggregate limit or provides that claims investigation or legal defense costs be

included in such general annual aggregate limit, such general annual aggregate limit shall be double the occurrence or claims limits specified above.

5.1.6 Should any required insurance lapse during the term of this Agreement, requests for payments originating after such lapse shall not be processed until the City receives satisfactory evidence of reinstated coverage as required by this Agreement, effective as of the lapse date. If insurance is not reinstated, the City may, at its sole option, terminate this Agreement effective on the date of such lapse of insurance.

5.1.7 Before commencing any Services, Contractor shall furnish to City certificates of insurance and additional insured policy endorsements with insurers with ratings comparable to A-, VIII or higher, that are authorized to do business in the State of California, and that are satisfactory to City, in form evidencing all coverages set forth above. Approval of the insurance by City shall not relieve or decrease Contractor's liability hereunder.

5.1.8 If Contractor will use any subcontractor(s) to provide Services, Contractor shall require the subcontractor(s) to provide all necessary insurance and to name the City and County of San Francisco, its officers, agents and employees and the Contractor as additional insureds.

5.2 Indemnification. Contractor shall indemnify and hold harmless City and its officers, agents and employees from, and, if requested, shall defend them from and against any and all claims, demands, losses, damages, costs, expenses, and liability (legal, contractual, or otherwise) arising from or in any way connected with any: (i) injury to or death of a person, including employees of City or Contractor; (ii) loss of or damage to property; (iii) violation of local, state, or federal common law, statute or regulation, including but not limited to privacy or personally identifiable information, health information, disability and labor laws or regulations; (iv) strict liability imposed by any law or regulation; or (v) losses arising from Contractor's execution of subcontracts not in accordance with the requirements of this Agreement applicable to subcontractors; so long as such injury, violation, loss, or strict liability (as set forth in subsections (i) - (v) above) arises directly or indirectly from Contractor's performance of this Agreement, including, but not limited to, Contractor's use of facilities or equipment provided by City or others, regardless of the negligence of, and regardless of whether liability without fault is imposed or sought to be imposed on City, except to the extent that such indemnity is void or otherwise unenforceable under applicable law, and except where such loss, damage, injury, liability or claim is the result of the active negligence or willful misconduct of City and is not contributed to by any act of, or by any omission to perform some duty imposed by law or agreement on Contractor, its subcontractors, or either's agent or employee. Contractor shall also indemnify, defend and hold City harmless from all suits or claims or administrative proceedings for breaches of federal and/or state law regarding the privacy of health information, electronic records or related topics, arising directly or indirectly from Contractor's performance of this Agreement, except where such breach is the result of the active negligence or willful misconduct of City. The foregoing indemnity shall include, without limitation, reasonable fees of attorneys, consultants and experts and related costs and City's costs of investigating any claims against the City.

In addition to Contractor's obligation to indemnify City, Contractor specifically acknowledges and agrees that it has an immediate and independent obligation to defend City from any claim which actually or potentially falls within this indemnification provision, even if the allegations are or may be groundless, false or fraudulent, which obligation arises at the time such claim is tendered to Contractor by City and continues at all times thereafter. Contractor shall indemnify and hold City harmless from all loss and liability, including attorneys' fees, court costs and all other litigation expenses for any infringement of the patent rights, copyright, trade secret or any other proprietary right or trademark, and all other intellectual property claims of any person or persons arising directly or indirectly from the receipt by City, or any of its officers or agents, of Contractor's Services.

2.5 Article 8 Termination and Default, is hereby amended in its entirety to read as follows:

Article 8 Termination and Default

8.1 Termination for Convenience

8.1.1 City shall have the option, in its sole discretion, to terminate this Agreement, at any time during the term hereof, for convenience and without cause. City shall exercise this option by giving Contractor written notice of termination. The notice shall specify the date on which termination shall become effective.

8.1.2 Upon receipt of the notice of termination, Contractor shall commence and perform, with diligence, all actions necessary on the part of Contractor to effect the termination of this Agreement on the date specified by City and to minimize the liability of Contractor and City to third parties as a result of termination. All such actions shall be subject to the prior approval of City. Such actions shall include, without limitation:

(a) Halting the performance of all Services under this Agreement on the date(s) and in the manner specified by City.

(b) Terminating all existing orders and subcontracts, and not placing any further orders or subcontracts for materials, Services, equipment or other items.

(c) At City's direction, assigning to City any or all of Contractor's right, title, and interest under the orders and subcontracts terminated. Upon such assignment, City shall have the right, in its sole discretion, to settle or pay any or all claims arising out of the termination of such orders and subcontracts.

(d) Subject to City's approval, settling all outstanding liabilities and all claims arising out of the termination of orders and subcontracts.

(e) Completing performance of any Services that City designates to be completed prior to the date of termination specified by City.

(f) Taking such action as may be necessary, or as the City may direct, for the protection and preservation of any property related to this Agreement which is in the possession of Contractor and in which City has or may acquire an interest.

8.1.3 Within 30 days after the specified termination date, Contractor shall submit to City an invoice, which shall set forth each of the following as a separate line item:

(a) The reasonable cost to Contractor, without profit, for all Services prior to the specified termination date, for which Services City has not already tendered payment. Reasonable costs may include a reasonable allowance for actual overhead, not to exceed a total of 10% of Contractor's direct costs for Services. Any overhead allowance shall be separately itemized. Contractor may also recover the reasonable cost of preparing the invoice.

(b) A reasonable allowance for profit on the cost of the Services described in the immediately preceding subsection (a), provided that Contractor can establish, to the satisfaction of City, that Contractor would have made a profit had all Services under this Agreement been completed, and provided further, that the profit allowed shall in no event exceed 5% of such cost.

(c) The reasonable cost to Contractor of handling material or equipment returned to the vendor, delivered to the City or otherwise disposed of as directed by the City.

(d) A deduction for the cost of materials to be retained by Contractor, amounts realized from the sale of materials and not otherwise recovered by or credited to City, and any other appropriate credits to City against the cost of the Services or other work.

8.1.4 In no event shall City be liable for costs incurred by Contractor or any of its subcontractors after the termination date specified by City, except for those costs specifically enumerated and described in Section 8.1.3. Such non-recoverable costs include, but are not limited to, anticipated profits on the Services under this Agreement, post-termination employee salaries, post-termination administrative expenses, post-termination overhead or unabsorbed overhead, attorneys' fees or other costs relating to the prosecution of a claim or lawsuit, prejudgment interest, or any other expense which is not reasonable or authorized under Section 8.1.3.

8.1.5 In arriving at the amount due to Contractor under this Section, City may deduct: (i) all payments previously made by City for Services covered by Contractor's final invoice; (ii) any claim which City may have against Contractor in connection with this Agreement; (iii) any invoiced costs or expenses excluded pursuant to the immediately preceding subsection 8.1.4; and (iv) in instances in which, in the opinion of the City, the cost of any Service performed under this Agreement is excessively high due to costs incurred to remedy or replace defective or rejected Services, the difference between the invoiced amount and City's estimate of the reasonable cost of performing the invoiced Services in compliance with the requirements of this Agreement.

8.1.6 City's payment obligation under this Section shall survive termination of this

Agreement.

8.2 Termination for Default; Remedies.

8.2.1 Each of the following shall constitute an immediate event of default ("Event of Default") under this Agreement:

(a) Contractor fails or refuses to perform or observe any term, covenant or condition contained in any of the following Sections of this Agreement:

3.5	Submitting False Claims.	10.10	Alcohol and Drug-Free Workplace
4.5	Assignment	10.13	Working with Minors

Amendment: 10/01/2017

Article 5	Insurance and Indemnity	11.10	Compliance with Laws
Article 7	Payment of Taxes	13.1	Nondisclosure of Private, Proprietary or Confidential Information
13.4	Protected Health Information		

(b) Contractor fails or refuses to perform or observe any other term, covenant or condition contained in this Agreement, including any obligation imposed by ordinance or statute and incorporated by reference herein, and such default continues for a period of ten days after written notice thereof from City to Contractor.

(c) Contractor (i) is generally not paying its debts as they become due; (ii) files, or consents by answer or otherwise to the filing against it of a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction; (iii) makes an assignment for the benefit of its creditors; (iv) consents to the appointment of a custodian, receiver, trustee or other officer with similar powers of Contractor or of any substantial part of Contractor's property; or (v) takes action for the purpose of any of the foregoing.

(d) A court or government authority enters an order (i) appointing a custodian, receiver, trustee or other officer with similar powers with respect to Contractor or with respect to any substantial part of Contractor's property, (ii) constituting an order for relief or approving a petition for relief or reorganization or arrangement or any other petition in bankruptcy or for liquidation or to take advantage of any bankruptcy, insolvency or other debtors' relief law of any jurisdiction or (iii) ordering the dissolution, winding-up or liquidation of Contractor.

8.2.2 On and after any Event of Default, City shall have the right to exercise its legal and equitable remedies, including, without limitation, the right to terminate this Agreement or to seek specific performance of all or any part of this Agreement. In addition, where applicable, City shall have the right (but no obligation) to cure (or cause to be cured) on behalf of Contractor any Event of Default; Contractor shall pay to City on demand all costs and expenses incurred by City in effecting such cure, with interest thereon from the date of incurrence at the maximum rate then permitted by law. City shall have the right to offset from any amounts due to Contractor under this Agreement or any other agreement between City and Contractor: (i) all damages, losses, costs or expenses incurred by City as a result of an Event of Default; and (ii) any liquidated damages levied upon Contractor pursuant to the terms of this Agreement; and (iii), any damages imposed by any ordinance or statute that is incorporated into this Agreement by reference, or into any other agreement with the City.

8.2.3 All remedies provided for in this Agreement may be exercised individually or in combination with any other remedy available hereunder or under applicable laws, rules and regulations. The exercise of any remedy shall not preclude or in any way be deemed to waive any other remedy. Nothing in this Agreement shall constitute a waiver or limitation of any rights that City may have under applicable law.

8.2.4 Any notice of default must be sent by registered mail to the address set forth in Article 11.

8.3 Non-Waiver of Rights. The omission by either party at any time to enforce any default or right reserved to it, or to require performance of any of the terms, covenants, or provisions hereof by the other party at the time designated, shall not be a waiver of any such default or right to which the party is entitled, nor shall it in any way affect the right of the party to enforce such provisions thereafter.

8.4 Rights and Duties upon Termination or Expiration.

8.4.1 This Section and the following Sections of this Agreement listed below, shall survive termination or expiration of this Agreement:

3.3.2	Payment Limited to Satisfactory Services	9.1	Ownership of Results
3.3.7(a)	Grant Funded Contracts - Disallowance	9.2	Works for Hire
3.4	Audit and Inspection of Records	11.6	Dispute Resolution Procedure
3.5	Submitting False Claims	11.7	Agreement Made in California; Venue
Article 5	Insurance and Indemnity	11.8	Construction
6.1	Liability of City	11.9	Entire Agreement
6.3	Liability for Incidental and Consequential Damages	11.10	Compliance with Laws
Article 7	Payment of Taxes	11.11	Severability
8.1.6	Payment Obligation	13.1	Nondisclosure of Private, Proprietary or Confidential Information
13.4	Protected Health Information	1.1.1	

8.4.2 Subject to the survival of the Sections identified in Section 8.4.1, above, if this Agreement is terminated prior to expiration of the term specified in Article 2, this Agreement shall be of no further force or effect. Contractor shall transfer title to City, and deliver in the manner, at the times, and to the extent, if any, directed by City, any work in progress, completed work, supplies, equipment, and other materials produced as a part of, or acquired in connection with the performance of this Agreement, and any completed or partially completed work which, if this Agreement had been completed, would have been required to be furnished to City.

2.6 Article 10 Additional Requirements Incorporated by Reference, is hereby amended in its entirety to read as follows:

Article 10 Additional Requirements Incorporated by Reference

10.1 Laws Incorporated by Reference. The full text of the laws listed in this Article 10, including enforcement and penalty provisions, are incorporated by reference into this Agreement. The full text of the San Francisco Municipal Code provisions incorporated by reference in this Article and elsewhere in the Agreement ("Mandatory City Requirements") are available at http://www.amlegal.com/codes/client/san-francisco ca/

10.2 Conflict of Interest. By executing this Agreement, Contractor certifies that it does not know of any fact which constitutes a violation of Section 15.103 of the City's Charter; Article III, Chapter 2 of City's Campaign and Governmental Conduct Code; Title 9, Chapter 7 of the California Government Code (Section 87100 *et seq.*), or Title 1, Division 4, Chapter 1, Article 4 of the California Government Code (Section 1090 *et seq.*), and further agrees promptly to notify the City if it becomes aware of any such fact during the term of this Agreement.

10.3 **Prohibition on Use of Public Funds for Political Activity.** In performing the Services, Contractor shall comply with San Francisco Administrative Code Chapter 12G, which prohibits funds appropriated by the City for this Agreement from being expended to participate in, support, or attempt to influence any political campaign for a candidate or for a ballot measure. Contractor is subject to the enforcement and penalty provisions in Chapter 12G.

10.4 Reserved.

10.5 Nondiscrimination Requirements

10.5.1 Non Discrimination in Contracts. Contractor shall comply with the provisions of Chapters 12B and 12C of the San Francisco Administrative Code. Contractor shall incorporate by reference in all subcontracts the provisions of Sections12B.2(a), 12B.2(c)-(k), and 12C.3 of the San Francisco Administrative Code and shall require all subcontractors to comply with such provisions. Contractor is subject to the enforcement and penalty provisions in Chapters 12B and 12C.

10.5.2 Nondiscrimination in the Provision of Employee Benefits. San Francisco Administrative Code 12B.2. Contractor does not as of the date of this Agreement, and will not during the term of this Agreement, in any of its operations in San Francisco, on real property owned by San Francisco, or where work is being performed for the City elsewhere in the United States, discriminate in the provision of employee benefits between employees with domestic partners and employees with spouses and/or between the domestic partners and spouses of such employees, subject to the conditions set forth in San Francisco Administrative Code Section12B.2.

10.6 Local Business Enterprise and Non-Discrimination in Contracting Ordinance. Contractor shall comply with all applicable provisions of Chapter 14B ("LBE Ordinance"). Contractor is subject to the enforcement and penalty provisions in Chapter 14B.

10.7 Minimum Compensation Ordinance. Contractor shall pay covered employees no less than the minimum compensation required by San Francisco Administrative Code Chapter 12P. Contractor is subject to the enforcement and penalty provisions in Chapter 12P. By signing and executing this Agreement, Contractor certifies that it is in compliance with Chapter 12P.

10.8 Health Care Accountability Ordinance. Contractor shall comply with San Francisco Administrative Code Chapter 12Q. Contractor shall choose and perform one of the Health Care Accountability options set forth in San Francisco Administrative Code Chapter 12Q.3. Contractor is subject to the enforcement and penalty provisions in Chapter 12Q.

10.9 First Source Hiring Program. Contractor must comply with all of the provisions of the First Source Hiring Program, Chapter 83 of the San Francisco Administrative Code, that apply to this Agreement, and Contractor is subject to the enforcement and penalty provisions in Chapter 83.

10.10 Alcohol and Drug-Free Workplace. City reserves the right to deny access to, or require Contractor to remove from, City facilities personnel of any Contractor or subcontractor who City has reasonable grounds to believe has engaged in alcohol abuse or illegal drug activity which in any way impairs City's ability to maintain safe work facilities or to protect the health and well-being of City employees and the general public. City shall have the right of final approval for the entry or re-entry of any such person previously denied access to, or removed from, City facilities. Illegal drug activity means possessing, furnishing, selling, offering, purchasing, using or being under the influence of illegal drugs or other controlled substances for which the individual lacks a valid prescription. Alcohol abuse means possessing, furnishing, selling, offering, or using alcoholic beverages, or being under the influence of alcohol.

Contractor agrees in the performance of this Agreement to maintain a drug-free workplace by notifying employees that unlawful drug use is prohibited and specifying what actions will be taken against employees for violations; establishing an on-going drug-free awareness program that includes employee notification and, as appropriate, rehabilitation. Contractor can comply with this requirement by implementing a drug-free workplace program that complies with the Federal Drug-Free Workplace Act of 1988 (41 U.S.C. § 701).

10.11 Limitations on Contributions. By executing this Agreement, Contractor acknowledges that it is familiar with section 1.126 of the City's Campaign and Governmental Conduct Code, which prohibits any person who contracts with the City for the rendition of personal services, for the furnishing of any material, supplies or equipment, for the sale or lease of any land or building, or for a grant, loan or loan guarantee, from making any campaign contribution to (1) an individual holding a City elective office if the contract must be approved by the individual, a board on which that individual serves, or the board of a state agency on which an appointee of that individual serves, (2) a candidate for the office held by such individual, or (3) a committee controlled by such individual, at any time from the commencement of negotiations for the contract until the later of either the termination of negotiations for such contract or six months after the date the contract is approved. The prohibition on contributions applies to each prospective party to the contract; each member of Contractor's board of directors; Contractor's chairperson, chief executive officer, chief financial officer and chief operating officer; any person with an ownership interest of more than 20 percent in Contractor; any subcontractor listed in the bid or contract; and any committee that is sponsored or controlled by Contractor. Contractor must inform each such person of the limitation on contributions imposed by Section 1.126 and provide the names of the persons required to be informed to City.

10.12 Reserved. (Slavery Era Disclosure).

10.13 Working with Minors. In accordance with California Public Resources Code Section 5164, if Contractor, or any subcontractor, is providing services at a City park, playground, recreational center or beach, Contractor shall not hire, and shall prevent its subcontractors from hiring, any person for employment or a volunteer position in a position having supervisory or disciplinary authority over a minor if that person has been convicted of any offense listed in Public Resources Code Section 5164. In addition, if Contractor, or any subcontractor, is providing services to the City involving the supervision or discipline of minors or where Contractor, or any subcontractor, will be working with minors in an unaccompanied setting on more than an incidental or occasional basis, Contractor and any subcontractor shall comply with any and all applicable requirements under federal or state law mandating criminal history screening for such positions and/or prohibiting employment of certain persons including but not limited to California Penal Code Section 290.95. In the event of a conflict between this section and Section 10.14, "Consideration of Criminal History in Hiring and Employment Decisions," of this Agreement, this section shall control.

10.14 Consideration of Criminal History in Hiring and Employment Decisions

10.14.1 Contractor agrees to comply fully with and be bound by all of the provisions of Chapter 12T, "City Contractor/Subcontractor Consideration of Criminal History in Hiring and Employment Decisions," of the San Francisco Administrative Code ("Chapter 12T"), including the remedies provided, and implementing regulations, as may be amended from time to time. The provisions of Chapter 12T are incorporated by reference and made a part of this Agreement as though fully set forth herein. The text of the Chapter 12T is available on the web at <u>http://sfgov.org/olse/fco</u>. Contractor is required to comply with all of the applicable provisions of 12T, irrespective of the listing of obligations in this Section. Capitalized terms used in this Section and not defined in this Agreement shall have the meanings assigned to such terms in Chapter 12T.

10.14.2 The requirements of Chapter 12T shall only apply to a Contractor's or Subcontractor's operations to the extent those operations are in furtherance of the performance of this Agreement, shall apply only to applicants and employees who would be or are performing work in furtherance of this Agreement, and shall apply when the physical location of the employment or prospective employment of an individual is wholly or substantially within the City of San Francisco. Chapter 12T shall not apply when the application in a particular context would conflict with federal or state law or with a requirement of a government agency implementing federal or state law.

10.15 Public Access to Nonprofit Records and Meetings. If Contractor receives a cumulative total per year of at least \$250,000 in City funds or City-administered funds and is a non-profit organization as defined in Chapter 12L of the San Francisco Administrative Code, Contractor must comply with the City's Public Access to Nonprofit Records and Meetings requirements, as set forth in Chapter 12L of the San Francisco Administrative Code, including the remedies provided therein.

10.16 Food Service Waste Reduction Requirements. Contractor shall comply with the Food Service Waste Reduction Ordinance, as set forth in San Francisco Environment Code Chapter 16, including but not limited to the remedies for noncompliance provided therein.

10.17 Sugar-Sweetened Beverage Prohibition. Contractor agrees that it will not sell, provide, or otherwise distribute Sugar-Sweetened Beverages, as defined by San Francisco Administrative Code Chapter 101, as part of its performance of this Agreement.

10.18 Tropical Hardwood and Virgin Redwood Ban. Pursuant to San Francisco Environment Code Section 804(b), the City urges Contractor not to import, purchase, obtain, or use for any purpose, any tropical hardwood, tropical hardwood wood product, virgin redwood or virgin redwood wood product.

10.19 Reserved (Preservative Treated Wood Products).

2.7 Article 11 General Provisions, is hereby amended in its entirety to read as follows:

Article 11 General Provisions

11.1 Notices to the Parties. Unless otherwise indicated in this Agreement, all written communications sent by the Parties may be by U.S. mail or e-mail, and shall be addressed as follows:

Το СΙΤΥ:	Office of Contract Management and Compliance Department of Public Health		
	101 Grove Street, Room 402 San Francisco, California 94102	e-mail:	Nora.macias@sfdph.org
And:	TOMAS ARAGON, MD, MPH CHEP 101 GROVE STREET, ROOM 308		T 0 011
To CONTRACTOR:	SAN FRANCISCO, CA 94102 SAN FRANCISCO AIDS FOUNDATION	e-mail:	Tomas.aragon@sfdph.org
	1035 MARKET STREET, SUITE 400 SAN FRANCISCO, CA 94103	e-mail:	jhollendoner@sfaf.org

Any notice of default must be sent by registered mail. Either Party may change the address to which notice is to be sent by giving written notice thereof to the other Party. If email notification is used, the sender must specify a receipt notice.

11.2 Compliance with Americans with Disabilities Act. Contractor shall provide the Services in a manner that complies with the Americans with Disabilities Act (ADA), including but not limited to Title II's program access requirements, and all other applicable federal, state and local disability rights legislation.

11.3 Reserved.

11.4 Sunshine Ordinance. Contractor acknowledges that this Agreement and all records related to its formation, Contractor's performance of Services, and City's payment are subject to the California Public Records Act, (California Government Code §6250 et. seq.), and the San Francisco Sunshine Ordinance, (San Francisco Administrative Code Chapter 67). Such records are subject to public inspection and copying unless exempt from disclosure under federal, state or local law.

11.5 Modification of this Agreement. This Agreement may not be modified, nor may compliance with any of its terms be waived, except as noted in Section 11.1, "Notices to Parties," regarding change in personnel or place, and except by written instrument executed and approved in the same manner as this Agreement.

11.6 Dispute Resolution Procedure.

11.6.1 Negotiation; Alternative Dispute Resolution. The Parties will attempt in good faith to resolve any dispute or controversy arising out of or relating to the performance of services under this Agreement. If the Parties are unable to resolve the dispute, then, pursuant to San Francisco Administrative Code Section 21.36, Contractor may submit to the Contracting Officer a written request for administrative review and documentation of the Contractor's claim(s). Upon such request, the

Contracting Officer shall promptly issue an administrative decision in writing, stating the reasons for the action taken and informing the Contractor of its right to judicial review. If agreed by both Parties in writing, disputes may be resolved by a mutually agreed-upon alternative dispute resolution process. If the parties do not mutually agree to an alternative dispute resolution process or such efforts do not resolve the dispute, then either Party may pursue any remedy available under California law. The status of any dispute or controversy notwithstanding, Contractor shall proceed diligently with the performance of its obligations under this Agreement in accordance with the Agreement and the written directions of the City. Neither Party will be entitled to legal fees or costs for matters resolved under this section.

11.6.2 Government Code Claim Requirement. No suit for money or damages may be brought against the City until a written claim therefor has been presented to and rejected by the City in conformity with the provisions of San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq. Nothing set forth in this Agreement shall operate to toll, waive or excuse Contractor's compliance with the California Government Code Claim requirements set forth in San Francisco Administrative Code Chapter 10 and California Government Code Section 900, et seq.

11.6.3 Health and Human Service Contract Dispute Resolution Procedure. The Parties shall resolve disputes that have not been resolved administratively by other departmental remedies in accordance with the Dispute Resolution Procedure set forth in Appendix G incorporated herein by this reference.

11.7 Agreement Made in California; Venue. The formation, interpretation and performance of this Agreement shall be governed by the laws of the State of California. Venue for all litigation relative to the formation, interpretation and performance of this Agreement shall be in San Francisco.

11.8 **Construction.** All paragraph captions are for reference only and shall not be considered in construing this Agreement.

11.9 Entire Agreement. This contract sets forth the entire Agreement between the parties, and supersedes all other oral or written provisions. This Agreement may be modified only as provided in Section 11.5, "Modification of this Agreement."

11.10 Compliance with Laws. Contractor shall keep itself fully informed of the City's Charter, codes, ordinances and duly adopted rules and regulations of the City and of all state, and federal laws in any manner affecting the performance of this Agreement, and must at all times comply with such local codes, ordinances, and regulations and all applicable laws as they may be amended from time to time.

11.11 Severability. Should the application of any provision of this Agreement to any particular facts or circumstances be found by a court of competent jurisdiction to be invalid or unenforceable, then (a) the validity of other provisions of this Agreement shall not be affected or impaired thereby, and (b) such provision shall be enforced to the maximum extent possible so as to effect the intent of the parties and shall be reformed without further action by the parties to the extent necessary to make such provision valid and enforceable.

11.12 **Cooperative Drafting.** This Agreement has been drafted through a cooperative effort of City and Contractor, and both Parties have had an opportunity to have the Agreement reviewed and revised by legal counsel. No Party shall be considered the drafter of this Agreement, and no presumption or rule that an ambiguity shall be construed against the Party drafting the clause shall apply to the interpretation or enforcement of this Agreement.

11.13 Order of Precedence. Contractor agrees to perform the services described below in accordance with the terms and conditions of this Agreement, implementing task orders, the RFP, and Contractor's proposal dated March 3, 2016. The RFP and Contractor's proposal are incorporated by reference as though fully set forth herein. Should there be a conflict of terms or conditions, this Agreement and any implementing task orders shall control over the RFP and the Contractor's proposal.

2.8 Article 12 Department Specific Terms, is hereby amended in its entirety to read as follows:

Article 12 Department Specific Terms

12.1 Third Party Beneficiaries.

No third parties are intended by the parties hereto to be third party beneficiaries under this Agreement, and no action to enforce the terms of this Agreement may be brought against either party by any person who is not a party hereto.

12.2 Certification Regarding Lobbying.

CONTRACTOR certifies to the best of its knowledge and belief that:

A. No federally appropriated funds have been paid or will be paid, by or on behalf of CONTRACTOR to any persons for influencing or attempting to influence an officer or an 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 entering into of any federal cooperative agreement, or the extension, continuation, renewal, amendment, or modification of a federal contract, grant, loan or cooperative agreement.

B. If any funds other than federally appropriated funds have been paid or will be paid to any persons for influencing or attempting to influence an officer or employee of an 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, CONTRACTOR shall complete and submit Standard Form -111, "Disclosure Form to Report Lobbying," in accordance with the form's instructions.

C. CONTRACTOR shall require 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 cooperation agreements) and that all subrecipients shall certify and disclose accordingly.

D. 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.

12.3 Materials Review.

CONTRACTOR agrees that all materials, including without limitation print, audio, video, and electronic materials, developed, produced, or distributed by personnel or with funding under this Agreement shall be subject to review and approval by the Contract Administrator prior to such production, development or distribution. CONTRACTOR agrees to provide such materials sufficiently in advance of any deadlines to allow for adequate review. CITY agrees to conduct the review in a manner which does not impose unreasonable delays on CONTRACTOR'S work, which may include review by members of target communities.

12.4 Emergency Response.

CONTRACTOR will develop and maintain an Agency Disaster and Emergency Response Plan containing Site Specific Emergency Response Plan(s) for each of its service sites. The agency-wide plan should address disaster coordination between and among service sites. CONTRACTOR will update the Agency/site(s) plan as needed and CONTRACTOR will train all employees regarding the provisions of the plan for their Agency/site(s). CONTRACTOR will attest on its annual Community Programs' Contractor Declaration of Compliance whether it has developed and maintained an Agency Disaster and Emergency Response Plan, including a site specific emergency response plan for each of its service site. CONTRACTOR is advised that Community Programs Contract Compliance Section staff will review these plans during a compliance site review. Information should be kept in an Agency/Program Administrative Binder, along with other contractual documentation requirements for easy accessibility and inspection

In a declared emergency, CONTRACTOR'S employees shall become emergency workers and participate in the emergency response of Community Programs, Department of Public Health. Contractors are required to identify and keep Community Programs staff informed as to which two staff members will serve as CONTRACTOR'S prime contacts with Community Programs in the event of a declared emergency.

2.9 Add Article 13 Data and Security, to this Agreement as Amended to reads as follows:

Article 13 Data and Security

13.1 Nondisclosure of Private, Proprietary or Confidential Information.

13.1.1 If this Agreement requires City to disclose "Private Information" to Contractor within the meaning of San Francisco Administrative Code Chapter 12M, Contractor and subcontractor shall use such information only in accordance with the restrictions stated in Chapter 12M and in this Agreement and only as necessary in performing the Services. Contractor is subject to the enforcement and penalty provisions in Chapter 12M.

13.1.2 In the performance of Services, Contractor may have access to City's proprietary or confidential information, the disclosure of which to third parties may damage City. If City discloses proprietary or confidential information to Contractor, such information must be held by Contractor in

confidence and used only in performing the Agreement. Contractor shall exercise the same standard of care to protect such information as a reasonably prudent contractor would use to protect its own proprietary or confidential information.

13.2 Reserved. (Payment Card Industry ("PCI") Requirements.

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, transmission, and storage of health information and the Health Information Technology for Economic and Clinical Health Act, Public Law 111-005 ("the HITECH Act").

The parties acknowledge that CONTRACTOR is one of the following (Choose Only One):

- 1. CONTRACTOR will create, receive, maintain, transmit, or access SFDPH PHI And is a Covered Entity¹ as defined under HIPAA;
 - Complete the following attached documents:
 - Appendix E SFDPH Protected Information Privacy & Security Agreement (PSA) (06-21-2017)
 - b. SFDPH Attestation 1 PRIVACY (06-07-2017)
 - c. SFDPH Attestation 2 DATA SECURITY (06-07-2017)
 - d. SFDPH Attestation 3 COMPLIANCE (06-07-2017)
- 2. CONTRACTOR will create, receive, maintain, transmit, or access SFDPH PHI And is NOT a Covered Entity¹ as defined under HIPAA;
 - Complete the following attached documents:
 - a. Appendix E SFDPH Business Associates Agreement (BAA) (08-04-2017)
 - b. SFDPH Attestation 1 PRIVACY (06-07-2017)
 - c. SFDPH Attestation 2 DATA SECURITY (06-07-2017)
- 3. CONTRACTOR will <u>NOT</u> create, receive, maintain, transmit, or access SFDPH PHI;

Appendix E and attestations are not required.

This option requires review and approval from the Office of Compliance and Privacy Affairs.

- a. Health Care Providers (doctors, clinics, psychologists, pharmacies, nursing homes)
- b. Health Plans (Health insurance companies, HMOs, company health plans, government programs that pay for health care).
- c. Health Care Clearinghouse (Not Applicable to SFDPH contracts)
- Source: https://www.hhs.gov/hipaa/for-professionals/covered-entities/index.html
 - https://privacyruleandresearch.nih.gov/pr_06.asp

¹ A Covered Entity is defined under HIPAA as one of the following:

13.4 Protected Health Information. Contractor, all subcontractors, all agents and employees of Contractor and any subcontractor shall comply with all federal and state laws regarding the transmission, storage and protection of all private health information disclosed to Contractor by City in the performance of this Agreement. Contractor agrees that any failure of Contractor to comply with the requirements of federal and/or state and/or local privacy laws shall be a material breach of the Contract. In the event that City pays a regulatory fine, and/or is assessed civil penalties or damages through private rights of action, based on an impermissible use or disclosure of protected health information given to Contractor or its subcontractors or agents by City, Contractor shall indemnify City for the amount of such fine or penalties or damages, including costs of notification. In such an event, in addition to any other remedies available to it under equity or law, the City may terminate the Contract.

2.10 Add Article 14 MacBride And Signature, to this Agreement as Amended to reads as follows:

Article 14 MacBride And Signature

14.1 MacBride Principles -Northern Ireland. The provisions of San Francisco Administrative Code §12F are incorporated herein by this reference and made part of this Agreement. By signing this Agreement, Contractor confirms that Contractor has read and understood that the City urges companies doing business in Northern Ireland to resolve employment inequities and to abide by the MacBride Principles, and urges San Francisco companies to do business with corporations that abide by the MacBride Principles.

The Appendices listed below are Amended as follows:

2.11 Delete Appendix A, and replace in its entirety with Appendix A to Agreement as amended. Dated:10/01/2017.

2.12 Delete Appendix A-1, and replace in its entirety with Appendix A-1 to Agreement as amended. Dated: 10/01/2017.

2.13 Delete Appendix A-2, and replace in its entirety with Appendix A-2 to Agreement as amended. Dated: 10/01/2017. 2.14 Delete Appendix A-3, and replace in its entirety with Appendix A-3 to Agreement as amended. Dated: 10/01/2017.

2.15 Delete Appendix B, and replace in its entirety with Appendix B to Agreement as amended. Dated: 10/01/2017.

2.16 Delete Appendix B-1c, and replace in its entirety with Appendix B-1c to Agreement as amended. Dated: 10/01/2017.

2.17 Delete Appendix B-1d, and replace in its entirety with Appendix B-1d to Agreement as amended. Dated: 10/01/2017.

2.18 Delete Appendix B-1e, and replace in its entirety with Appendix B-1e to Agreement as amended. Dated: 10/01/2017.

2.19 Add Appendix B-1f to Agreement as amended. Dated: 10/01/2017.

2.20 Add Appendix B-1g to Agreement as amended. Dated: 10/01/2017.

2.21 Add Appendix B-1h to Agreement as amended. Dated: 10/01/2017.

2.22 Delete Appendix B-2a, and replace in its entirety with Appendix B-2a to Agreement as amended. Dated:10/01/2017.

2.23 Add Appendix B-2b to Agreement as amended. Dated: 10/01/2017.

2.24 Add Appendix B-3a to Agreement as amended. Dated: 10/01/2017.

2.25 Add Appendix B-3b to Agreement as amended. Dated: 10/01/2017.

2.26 Delete Appendix D, and replace in its entirety with Appendix D to Agreement as amended. Dated: 10/01/2017.

2.27 Delete Appendix E, and replace in its entirety with Appendix E to Agreement as amended. Dated: OCPA & CAT v6.21.2017 and Attestation forms 06-07-2017.

2.28 Delete Appendix F-1c, and replace in its entirety with Appendix F-1c to Agreement as amended. Dated: 10/01/2017.

2.29 Delete Appendix F-1d, and replace in its entirety with Appendix F-1d to Agreement as amended. Dated: 10/01/2017.

2.30 Delete Appendix F-1e, and replace in its entirety with Appendix F-1e to Agreement as amended. Dated: 10/01/2017.

2.31 Add Appendix F-1f to Agreement as amended. Dated: 10/01/2017.

2.32 Add Appendix F-1g to Agreement as amended. Dated: 10/01/2017.

2.33 Add Appendix F-1h to Agreement as amended. Dated: 10/01/2017.

2.34 Delete Appendix F-2a, and replace in its entirety with Appendix F-2a to Agreement as amended. Dated:10/01/2017.

2.35 Add Appendix F-2b to Agreement as amended. Dated: 10/01/2017.

2.36 Add Appendix F-3a to Agreement as amended. Dated: 10/01/2017.

2.37 Add Appendix F-3b to Agreement as amended. Dated: 10/01/2017.

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.

[SIGNATURES ON FOLLOWING PAGE]

.

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

CITY Recommended by:

Barbara A. Garcia, MPA Director of Health Department of Public Health

CONTRACTOR SAN FRANCISCO AIDS FOUNDATION

Joe Hollendoner Chief Executive Officer 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

Approved:

rest

Jaci Fong Director of the Office of Contract Administration, and Purchaser



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. <u>Evaluation</u>:

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. <u>Adequate Resources</u>:

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. <u>Admission Policy</u>:

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. Grievance Procedure:

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 Healthfunded 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. Under-Utilization Reports:

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

Service Provider(s): Fiscal Agency: Total Contract Amount: Funding Source: Program Name: System of Care: Program Code: Provider Address: Provider Phone: Contact Person:	San Francisco AIDS Foundation San Francisco AIDS Foundation \$9,060,163 HPS General Fund/CDC Syringe Access and Disposal Services Population Health - HIV Prevention Services (H N/A 1035 Market Street, Suite 400 - SF CA 94103 415-487-3000 Richard Hill, Director of Government Contracts 3-2016		mber: 415-487-80		ill@sfaf.org			Provider Fax: 415-487-3094
Appendix A:	3-2010		Append	liv A_4	yringe Access S	onvicae		
Appendix B:		B-1	B-1a	B-1b	B-1c	B-1d	B-1e	
Funding Source		GF	GF	CDC	GF	GF	CDC	
Funding Amount:		\$1,863,232	\$196,713	\$5,000	\$1,909,813	\$201,631	\$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	
-		UOS	UOS	UOS	UOS	UOS	UOS	
Number of UOS:	Syringe Access & Disposal Services Hrs.	3,614	N/A	N/A	3,614	N/A	N/A	
	Disposal Coordination & Bulk Purchasing	12	12	12	12	12	12	
	Citywide Syringe Sweeps	2,028	N/A	N/A	2,028	N/A	N/A	
	Community-Based Sweeps Events	264	N/A	N/A	264	N/A	N/A	
Number of UDC/NOC:		NOC	NOC	NOC	NOC	NOC	NOC	
	Syringe Access & Disposal Services Hrs.	44,300	N/A	N/A	44,300	N/A	N/A	
	Disposal Coordination & Bulk Purchasing	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	
	Community-Based Sweeps Events	N/A	N/A	N/A	N/A	N/A	N/A	
Appendix B:		B-1f	B-1g	B-1h		A CONTRACT	S. Contraction of the	
Funding Source		GF	GF	CDC				
Funding Amount:	0.00	\$1,956,679	\$206,672	\$5,000				
Funding Term:		7.1.18-6.30.19	7.1.18-6.30.19	1.1.18-12.31.18				
		UOS	UOS	UOS				
Number of UOS:	Syringe Access & Disposal Services Hrs.	3,614	N/A	N/A				
	Disposal Coordination & Bulk Purchasing	12	12	12				
	Citywide Syringe Sweeps	2,028	N/A N/A	N/A				
	Community-Based Sweeps Events	264	IVA	N/A				

C/NOC:	Contract in the second	NOC	NOC	NOC			
	Syringe Access & Disposal Services Hrs.	44,300	N/A	N/A			
	Disposal Coordination & Bulk Purchasing	N/A	N/A	N/A			
	Citywide Syringe Sweeps	N/A	N/A	N/A			
	Community-Based Sweeps Events	N/A	N/A	N/A			
ition and # of :	A Unit of Service (UOS) is equivalent to 1 hour	of service/activity of	or 1 month of Prog	ram Coordination.		718494949494949494717777949491	
et Population:	Intravenous drug users (IDUs) throughout San I	Francisco					
							and the state of the second
ription of	Provides access to sterile syringes and safer in						
ices:	population. SFAF will serve as the lead agency	for all syringe acc	ess and disposal s	ervices in the city,	th partners St. James	Infirmary, Glide,	, the Homeless Youth Alliance and the S
And the second	and the state of the second second second	1. Albert R.	Same a sugar	Alter Sec.	S Station States and States	an a star a that as a star	
pendix A:	A	Appendix A-2	Homeless Youth	Alliance			
pendix B:		B-2	B-2a	B-2b			
ding Source	D	GF	GF	GF			
ang source		BIEG DEA	\$160,775	\$164,794			
ding Amount:		\$156,854	Concession of the local division of the loca	the second se			
ding Amount: ding Term:		7.1.16-6.30.17	7.1.17-6.30.18	7.1.18-6.30.19			
ding Amount: ding Term:		7.1.16-6.30.17 UOS	7.1.17-6.30.18 UOS	7.1.18-6.30.19 UOS			
nding Amount: nding Term: mber of UOS:	HYA Wrap Around & Disposal	7.1.16-6.30.17	7.1.17-6.30.18	7.1.18-6.30.19			
nding Amount: nding Term: mber of UOS: mber of	HYA Wrap Around & Disposal	7.1.16-6.30.17 UOS	7.1.17-6.30.18 UOS	7.1.18-6.30.19 UOS			
nding Amount: nding Term: mber of UOS:	HYA Wrap Around & Disposal HYA Wrap Around & Disposal	7.1.16-6.30.17 UOS 12	7.1.17-6.30.18 UOS 12	7.1.18-6.30.19 UOS 12			
nding Amount: nding Term: mber of UOS: mber of	HYA Wrap Around & Disposal	7.1.16-6.30.17 UOS 12 NOC N/A	7.1.17-6.30.18 UOS 12 NOC N/A	7.1.18-6.30.19 UOS 12 NOC N/A			
nding Amount: nding Term: mber of UOS; mber of C/NOC:		7.1.16-6.30.17 UOS 12 NOC N/A	7.1.17-6.30.18 UOS 12 NOC N/A	7.1.18-6.30.19 UOS 12 NOC N/A	unds.		
nding Amount: nding Term: mber of UOS; mber of C/NOC: finition and # of	HYA Wrap Around & Disposal	7.1.16-6.30.17 UOS 12 NOC N/A	7.1.17-6.30.18 UOS 12 NOC N/A	7.1.18-6.30.19 UOS 12 NOC N/A	unds.		
nding Amount: nding Term: mber of UOS; mber of C/NOC: finition and # of	HYA Wrap Around & Disposal	7.1.16-6.30.17 UOS 12 NOC N/A h of activities asso	7.1.17-6.30.18 UOS 12 NOC N/A clated with the adr	7.1.18-6.30.19 UOS 12 NOC N/A ninistration of these	unds.		
nding Amount: nding Term: mber of UOS; mber of C/NOC: finition and # of S;	HYA Wrap Around & Disposal A Unit of Service (UOS) is equivalent to 1 mont Young adults aged 13-29 living on the stress in	7.1.16-6.30.17 UOS 12 NOC N/A h of activities asso the Haight and fer	7.1.17-6.30.18 UOS 12 NOC N/A clated with the adr	7.1.18-6.30.19 UOS 12 NOC N/A ninistration of these		Homeless Youth	Alliance Tides Foundation serves as the
nding Amount: nding Term: mber of UOS: mber of C/NOC: finition and # of S:	HYA Wrap Around & Disposal A Unit of Service (UOS) is equivalent to 1 mont	7.1.16-6.30.17 UOS 12 NOC N/A h of activities asso the Haight and feres to be paid by fullered	7.1.17-6.30.18 UOS 12 NOC N/A clated with the adr clated with the adr	7.1.18-6.30.19 UOS 12 NOC N/A ninistration of these s in the Mission e City and County of	San Francisco to the H		

ppendix A:		Appendix A-3	6th Street Harm	Reduction Ct.
ppendix B:		B-3	B-3a	B-3b
unding Source		GF	GF	GF
unding Amount:		\$344,000	\$884,000	\$1,000,000
unding Term:		11.1.16-6.30.17	7.1.17-6.30.18	7.1.18-6.30.19
		UOS	UOS	UOS
umber of UOS:	Harm Reduction Center Services Hrs.	8	12	12
umber of DC/NOC:		NOC	NOC	NOC
	Harm Reduction Center Services Hrs.	18,400	35,343	36,960
efinition and # of IOS: arget Population:	A Unit of Service (UOS) is equivalent to 1 Mo		on Center Services	8.

1. Identifiers:

Program Name: San Francisco AIDS Foundation – Syringe Access Services 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: Terry Morris, Manager Syringe Access Services Telephone: (510) 338-8159 cell/ (415) 487-8043 desk Email Address: tmotris@sfaf.org

2. Nature of Document:

New

Renewal

Modification

Appendix Terms:

Appendix A-1					
Term One: 7.1.16-6.30.17	Term Two: 7.1.17-6.30.18	Term Three: 7.1.18-06.30.19			

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:

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.

Appendix A-1 Contract Term: 07.01.16 through 6.30.19 Funding Sources: General Fund and CDC

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

A CONTRACT OF				
Year One	, B-1, B-1a	, B-1b: July 1	, 2016 – June 30	, 2017

Units of Service (UOS) Description	Units of Service (UOS)	# of Contacts (NOC)
Syringe Access and Disposal Service Hours 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 and Disposal Coordination & Bulk Purchasing 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 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 One UOS = one Community-Based Sweep Event 264 events = 264 UOS	264	N/A
Total Services Delivered	5,918	44,300

Year Two, B-1c: July 1, 2017 - June 30, 2018

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours 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 and Disposal Coordination & Bulk Purchasing 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 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 One UOS = one Community-Based Sweep Event 264 events = 264 UOS	264	N/A
Total Services Delivered	5,918	44,300

Appendix A-1 Contract Term: 07.01.16 through 6.30.19 Funding Sources: General Fund and CDC

Year Two, B-1d: July 1, 2017 - June 30, 2018

Syringe Access and Disposal Coordination & Bulk Purchasing 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 Two, B-1e: January 1, 2017 - December 31, 2017

Syringe Access and Disposal Coordination & Bulk Purchasing 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 Three, B-1f: July 1, 2018 - June 30, 2019

Units of Service (UOS) Description	Units of Service (UOS)	Number of Contacts (NOC)
Syringe Access and Disposal Service Hours 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 and Disposal Coordination & Bulk Purchasing 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 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 One UOS = one Community-Based Sweep Event 264 events = 264 UOS	264	N/A
Total Services Delivered	5,918	44,300

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Year Three, B-1g: July 1, 2018 - June 30, 2019

Syringe Access and Disposal Coordination & Bulk Purchasing 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 Three, B-1h: January 1, 2018 - December 31, 2018

Syringe Access and Disposal Coordination & Bulk Purchasing 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

6. Methodology:

The Syringe Access Collaborative (SAC) will provide 3,614 hours of syringe access, 264 Community Cleanups, and 2,028 hours of disposal sweeps annually in eight San Francisco neighborhoods.

- A. Syringe Access and Disposal Services includes the following direct client services:
 - 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.

Appendix A-1 Contract Term: 07.01.16 through 6.30.19 Funding Sources: General Fund and CDC

- 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.
- 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:
 - 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.

Appendix A-1 Contract Term: 07.01.16 through 6.30.19 Funding Sources: General Fund and CDC

- C. Bulk Purchasing and Distribution includes the following support services for any subcontractors:
 - 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:
 - 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.
 - 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 neighborhood-wide 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:
 - 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).
 - 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

- By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will provide at least 3,500,000 syringes annually to 44,300 people as documented by syringe access logs.
- By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will provide at least 200,000 condoms annually to 16,500 people as documented by condom cases ordered.
- 3) By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will collect at least 10,500 syringes annually as documented by disposal sweep logs.
- 4) By the end of each program year, Syringe Access Collaborative/San Francisco AIDS Foundation will conduct at least 264 community clean-up events annually to 900 people as documented by volunteer sign in sheets and sweep logs.
- 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.

- 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.

8. Continuous Quality Improvement (CQI):

Describe the program's CQI activities to enhance, improve, and monitor the quality of services delivered, including data collection and reporting. The CQI section must include a guarantee of compliance with Health Commission, Local, State, Federal, and/or Funding Source policies and requirements - such as, Harm Reduction, Health Insurance Portability and Accountability Act (HIPAA), Cultural Competency, and Client Satisfaction.

a) Staff assigned to program evaluation.

At SFAF, all program data are compiled and reviewed quarterly by our Director of Program Development and Operations, Government Contracts Director, Senior Director of Programs and Services, and Executive Director of Gay and Bi Men's Health and Wellness. 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 Senior Director of Programs and Services and Director of Program Development and Operations keep and review an active list of the action items. These processes will continue with SIP. 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: http://harmreduction.org/wp-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.
- Required Language: None required.

Appendix A-2 Contract Term: 07.01.16 through 06.30.19 Funding Sources: General Fund and CDC

1. Identifiers:

Program Name: San Francisco AIDS Foundation – Syringe Access Services: Additional Funds for 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: Terry Morris, Manager Syringe Access Services Telephone: (510) 338-8159 cell/ (415) 487-8043 desk Email Address: tmorris@sfaf.org

Renewal

2. Nature of Document:

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Modification

Appendix Terms:

Appendix A-2		
Term One: 7.1.16 - 6.30.17	Term Two: 7.1.17 -6.30.18	Term Three: 7.1.18-6.30.19

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:

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. No client services will be provided at 607-A Haight Street.

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

Appendix A-2 Contract Term: 07.01.16 through 06.30.19 Funding Sources: General Fund and CDC

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 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

6. Methodology

This Appendix addresses administrative activities to be paid by funds provided by the City and County of San Francisco to the Homeless Youth Alliance. Tides Foundation serves as the fiscal agent for HYA. SFAF's agreement with HYA is that all invoicing will come from Tides Foundation and the checks are made payable to Tides/Homeless Youth Alliance.

For this Appendix, the additional funding for Homeless Youth Alliance will be used for various personnel and operating expenses, and for syringe disposal services, during the period July 1, 2016 – June 30, 2017 as well as the period July 1 2017 – June 30, 2018.

7. Objectives and Measurements - N/A

8. Continuous Quality Improvement - Please see Appendix A-1

1. Identifiers:

Program Name: San Francisco AIDS Foundation – 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, Zlp 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 🔲 Renewal 🛛 Modification
 - **Appendix Terms:**

Appendix A-3		
Term One: 11.1.16-6.30.17	Term Two: 7.1.17-6.30.18	Term Three: 7.1.18-6.30.19

- Goal Statement: See Appendix A-1.
- 4. Target Population: See Appendix A-1.
- 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)
Harm Reduction Center service hours One UOS = one month of Harm Reduction Center services 7.1.17 to 10.15.17→ 2,618 clients per month * 3.5 months = 9,163NOC* 10.16.17 to 6.30.18→3,080 clients per month * 8.5 months = 26,180	12	35,343
Total Services Delivered	12	35,343

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

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 3,080 clients per month * 12 months = 36,960 NOC**	12	36,960
Total Services Delivered	12	36,960

6. Methodology:

The San Francisco AIDS Foundation's (SFAF's) Harm Reduction Center (HRC) is located at 117 6th Street in San Francisco's Mid-Market neighborhood, which has long housed one of SFAF's storefront syringe access services sites. The service delivery continuum at this location has now been significantly expanded and enhanced to provide a broad range of services to address the health and well-being needs of people who inject drugs (PWIDs). As part of this service expansion, the hours of operation at the site have been increased from 14 hours per week to 44 hours per week.

Current services available at the Harm Reduction Center to be expanded 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 and snacks;

New services to address adherence to HIV, HCV or PrEP medication provided at the HRC include:

- a "Breakfast Club" adherence program, i.e. a daily drop-in to engage homeless and marginally housed people who inject or PWIDs who are housed and have challenges taking their HIV/HCV, PrEP, or antibiotics as prescribed;
- secure lockers for clients to store medications and pick them up during the HRC's 44 hours of service; this program will be piloted with HCV medications because they require a limited duration and will be expanded as success and capacity indicate.

During the contract period, SFAF will also begin space improvements for proposed lab and clinical service expansion in the future.

7. Objectives and Measurements:

- a) By 06/30/2017 San Francisco AIDS Foundation will increase the hours of the Harm Reduction Center by 30 hours to 44 hours.
 (The actual current hours of operation of the HRC are 44 hours per week; however, 14 of these weekly hours are already included in the services provided in Appendix A-1 of this contract.)
- b) By 06/30/2017 San Francisco AIDS Foundation will increase the number of contacts by clients seen at the Harm Reduction Center by 2,300 to 3,400.
 (The HRC will provide 3,400 client contacts 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.)
- c) By 06/30/2017 San Francisco AIDS Foundation will increase the number of staff at the Harm Reduction Center by 6 FTE.

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	HIV Syringe Access and Disposal Services
Appendix B-2, B-2a, B-2b	HIV Syringe Access and Disposal Services – Homeless Youth Alliance
Appendix B-3, B-3a, B-3b	HIV Syringe Access and Disposal Services – Harm Reduction Center

B. Contractor understands that, of the maximum dollar obligation listed in section 3.3.1 of this Agreement, \$779,324 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.

	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

Appendix B Contract ID# 1000002634

Amendment: 10/01/2017

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
		Total Award	\$9,060,163
		Contingency	\$779,324
	(This equals	the total NTE)Total	\$9,839,487

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.

CMS #	7774						Appendix #	B	Page #	3
DPH Section										
	X] Modificatio				Co	ntract Term (7/	1/16-6/30/19)		iscal Year(s)	16-19
Agency/Organization Name								Funding Not	ification Date	6/27/2017
Contractor Name (may be same as above)	San Francisco	AIDS Founda	tion							
Program/Provider Name				Syringe Acc	cess & Dispos	al Services	A			TOTAL -
Appendix Number	A-1/B-1	A-1/B-1a	A-1/B-1b	A-2/B-2	A-3/B-3	人们自己	AREAD	A-1/8-1e	Continues 1	Page 3
Appendix Term (mm/dd/yy-mm/dd/yy)	7.1.16-6.30.17	7.1.16-6.30.17	7.1.16-8.30.17		11.1.16-6.30,17	7.1.17-8.30-18	7.1.17-6.30-18	7.1.17-6.30-18	7.1.17-6.30-18	
COPULATION STATES		1 1 1		Sec. Sec.	1	19 18 19 19 19 19 19 19 19 19 19 19 19 19 19			Service and	
Salaries	\$ 271,038	\$ -	5 -	\$ -	\$ 174,282	\$ 415,150		\$ -	\$ -	\$ 860,470
Employee Benefits	\$ 67,760	\$ -	\$ -	\$ -	\$ 43,569	\$ 103,788	\$ -	\$ -	\$ -	\$ 215,117
Total Personnel Expenses		\$ -		\$ -	\$ 217,851			\$ -		\$ 1,075,587
Operating Expense		\$ 178,830	\$ 4,545	\$ 142,595	\$ 94,876	\$ 1,217,256	\$ 183,301	\$ 4,545	\$ 148,160	\$ 3,327,157
Capital Expense (\$5,000 and over)			\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$.
Subtotal Direct Costa			\$ 4,545			\$ 1,736,194		\$ 4,545		\$ 4,402,744
Indirect Cost Amount								\$ 455		\$ 440,274
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	1
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
TEVENINGS & FUNDING SCHROES	3.	The second		and the set	Section of a	11	Action 18	A		
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF	1,863,232					1,909,813	1			3,773,045
HPS COUNTY GF Children's Fund		196,713			·		201,631		1	398,344
HPS FED CDC - PD90, CFDA #93.940	0		5,000		· · · · · · · ·			5,000		10,000
HPS COUNTY HPS GF		-	1.	156,854	100 m		A		160,775	317,629
HHS COUNTY GF			1		344,000		1			344,000
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	·				L		1			-
	· · · · · · · · · · · · · · · · · · ·			-	-					
										-
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		180,/13	5,000	100,004	344,000	1,808,013	201,031	5,000	100,115	4,040,010
Non-DPH Funding Sources (select from drop-down list	1	1	1							1
						-				
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Total Non-DPH Revenues										-
Total Revenues (DPH and Non-DPH)	1,863,232	196,713	5,000	156,854	344,000	1,909,813	201,631	5,000	160,775	4,843,01
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)	Cost Reimbursement (CR)	
	Larry Zapatka			Phone #		415-487-3055				

	DPH 1:	Department of P	ublic Health Co	ontract Budget	Summary by	Program				
CMS #	7774						Appendix #	В	Page #	4
DPH Section										
	[X] Modificat					Contract Term (7/	1/16-6/30/19)		Fiscal Year(s)	16-19
Agency/Organization Name								Funding N	Notification Date	6/27/2017
Contractor Name (may be same as above)	San Francisco	AIDS Foundation	1						-	
Program/Provider Name			Syrin	ge Access & Di	sposal Service				Total - Page	TOTAL -
Appendix Number	A-3/B-3a	A-178-11	Main a Mi	10 - Sant 10	E union a	A-3/B-3b			3	Page 3 & 4
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	7.1.18-6.30.19	7.1.18-6.30.19	7.1.18-6.30.19				
EXPENSES				Press and a second						
Salaries		\$ 435,950	\$ -	\$ -	\$ -	\$ 671,050			\$ 860,470	\$ 2,556,020
Employee Benefits		\$ 108,988		\$ -	\$ -	\$ 167,763			\$ 215,117	\$ 639,006
Total Personnel Expenses		\$ 544,938		\$ -	\$ -	\$ 838,813			\$ 1,075,587	
Operating Expense		\$ 1,233,861		\$ 4,545	\$ 149,814	\$ 70,278			\$ 3,327,157	\$ 5,041,487
Capital Expense (\$5,000 and over)			Ŧ	\$ -					\$ -	\$ -
Subtotal Direct Costs		\$ 1,778,799			\$ 149,814				\$ 4,402,744	\$ 8,236,513
Indirect Cost Amount		\$ 177,880							\$ 440,274	\$ 823,650
Indirect Cost Rate (%)	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%				
Total Expenses					\$ 164,794				\$ 4,843,018	\$ 9,060,163
REVENUES A TUROUTE SOURCES			1. S. S. S.	A State of the second			and I doing	2 ²	Stand States	
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF		1,956,679							\$3,773,045	5,729,724
HPS COUNTY GF Children's Fund			206,672						\$398,344	605,016
HPS FED CDC - PD90, CFDA #93.940				5,000					\$10,000	15,000
HPS COUNTY HPS GF					164,794				\$317,629	482,423
HHS COUNTY GF	884,000					1,000,000			\$344,000	2,228,000
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	884,000	1,956,679	206,672	5,000	164,794	1,000,000	-	-	\$4,843,018	9,060,163
Non-DPH Funding Sources (select from drop-down lis	<u> </u>							·		
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Total Non-DPH Revenues	st									
		4 0 5 0 5 0	-	-	-		-	-		-
Total Revenues (DPH and Non-DPH)	884,000	1,956,679	206,672	5,000	164,794	1,000,000	-	-	4,843,018	9,060,163
	Cost Reimbursement	Cost Dalahumana	Cost	Cost	Cost	0				
	remoursement	Cost Reimbursement	Reimbursement	Reimbursement	Reimbursement	Cost Reimbursement		1	1	
Pavment Method	(CR)	(CR)	(CR)	(CR)	(CR)	(CR)				

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/19 Funding Source General Fund

Appendix # B-1c Page # 1 Fiscal Year(s) 17-18 Funding Notification Date 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE				
Personnel Expenses		Syringe Acces	ss Services	Prgm Coordin Purchas				
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
Prgms & Ops Director	0.05	5,250	100%		0%			5,250
Dir. Behavioral Health Svc	0.05	5,100	85%	900	15%			6,000
Dir. Gov't Contracts	0.05	4,900	100%		0%	1		4,900
Data Manager	0.05	3,750	100%		0%			3,750
SAS Director	0.75	60,075	89%	7,425	11%	4		67,500
Logistice Inventory Mgr	1.00	15,500	25%	46,500	75%			62,000
Logistics Associates	2.00	27,500	25%	82,500	75%	-	_	110,000
SSE/Vol Coordinator	0.75	46,500	100%	-	0%			46,500
Health Educator	1.75	96,250			0%		1	96,250
Comm. Engagement & Kit Packing Assoc	0.25	13,000	100%		0%			13,000
		-	0%	-	0%			
Total FTE & Total Salaries	6.70		66.922%		33.078%			415,150
Fringe Benefits	25%		66.922%		33.078%			103,788
Total Personnel Expenses		347,282	66.922%	171,656	33.078%			518,938
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	_	Contract Tota
Total Occupancy		70,792	100%		0%			70,792
Total Materials and Supplies		195,199	36%	340,990	64%		14	536,189
Total General Operating		3,518	42%	4,857	58%			8,375
Total Staff Travel		0,010	0%	4,007	0%			0,5/1
Consultants/Subcontractor.		601,900	100%		0%			601,900
Other (specify):		001,000	0%		0%	-		001,900
Outer (apecity).			070		070			
		1		-				
Total Operating Expenses		871 400	71.588%	345 R47	28.412%			1,217,256
Total Operating Expenses		011,400	11.00070	0101011	1200-1270			1,217,250
Capital Expenses		Expenditure		Expenditure	%	Expenditure	%	Contract Tota
Capital Expenditure 1			0%	-	0%	1. 1. 1. 1. 1.		
Capital Expenditure 2		· · · · ·	0%		0%	1	1.00	· · · · · · · ·
Total Capital Expenses		•	0%	•	0%	5. A	_	
Total Direct Expenses		1,218,691	70,193%	517,503	29.807%			1,736,194
Indirect Expenses	10%		70.193%	51,750	29.807%	1		173,619
		1,340,560			29.807%			1,909,813
TOTAL EXPENSES								1
	vica Mode	5 906		12	1			E 019
TOTAL EXPENSES Units of Service (UOS) per Ser Cost Per Unit of Service by Ser		5,906 226.99		12 47,437.78	<u></u>			5,918

BUDGET JUSTIFICATION

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

Appendix #:	B-1c	
Fiscal Year:	17-18	

1a) SALARIES

Brief description of job duties	with all activities a program adaptation coordinates progr	and that all require on and refinemen	ed data is reported; work	that assures monitoring tools is with partner agencies and id emerging health informatio surance procedures.	program staff or
	Masters in Public equivalent combine			and public health experienc	e or an
Minimum qualifications	s:				
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
	\$105,000.00	0.05	12	1	\$ 5,250

evaluation of the	ral Health Svc - R program structure	esponsible for ensuring and provision of profes	the implementation, manage sional oversight to create a s being needs, including HIV n	ervice delivery
Masters degree in	bacity, especially i		r related discipline; three yea monstrated program manage	
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: Dir. Gov't Grant					
Maintains operation departmental requ	onal and statistica uirements, produc	al reporting mechanisms	ement and contract related ac in accordance with contract eporting as needed, and ensu surance activities.	and	
Brief description of job duties:					
	e and at least two	years demonstrated exp	perience in health services pr	rogram	nlonnir
그는 그는 것 같아. 이는 것 같아. 이는 것 같아. 것 같아. 것 같아. 것 같아. 것 같아. 가지? 것 같아. 가지? 것 같아. 가지? 것 같아.	ation; grant deve	lopment and writing; gov	ernment contracts managem		
design, and evalu Minimum qualifications: negotiations. Annual Salary:	ation; grant deve	opment and writing; gov		ient ar	

Staff Position 4: Data Manager					
summaries to ens and public health	sure foundation pr impact. Respons	ograms are rigorously e sible for review, abstract	n, quality assurance, reportin valuated for process and hea ion from client records and da eet programmatic and contra	ith out atabas	e entry o
			nsuring quality for large clien	t data	sets or 5
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	1	otal
\$75,000.00	0.05	12	1 1	*	3.750

Staff Position 5: SAS Director					
departmental stra partnerships with training full-time a exchange supplie	ategic goals in alig other HIV/AIDS a and temporary sta as. Organizes rem	nment with agency and and Harm Reduction age if in appropriate exchan- noval of biohazard waste	exchange sites. Develops an city objectives. Builds and ma ncies. Responsible for scheo ge protocol. Responsible for from sites and coordinates in ad maintain safety protocols.	aintair duling purcha remov	and asing
	pervision experien		ers required, Associates Deg HIV test counselor certificati		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$90,000.00	0.75	12	1 1	\$	67,500

	gistics Invento			the second s		
dep part train excl	bartmental strat therships with ning full-time a change supplies	tegic goals in alig other HIV/AIDS a nd temporary sta s. Organizes rem	nment with agency and and Harm Reduction age if in appropriate exchange noval of blohazard waste	exchange sites. Develops an city objectives. Builds and ma ncies. Responsible for scheo ge protocol. Responsible for from sites and coordinates in ad maintain safety protocols.	aintain duling a purcha remova	and sing
Thre				ers required. Associates Deg HIV test counselor certificati		
	obtain certificati		is protorios. must note		on or b	e willing
to ol			x Months per Year:	Annualized (if less than 12 months):		e willing

	ate - Staffs exchar	nge sites and supervises rs down sites as needed	volunteers at the sites. Tran d.	sports suppl
English/Spanish	desired. Ability to		e service organization. Bilinguod communications skills neo	
able to lift maxim Minimum gualifications:	ium 45 pounds.			
Minimum qualifications: Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

willing to become materials, includi	ange coord - Resp e peer educators:	Develops curriculum for als relevant to MSM-IDU	aining, and supervising secon these trainings and helps de speed users. Schedules an	evelop training
		y; valid California driver's n drug users and with vo	s license and excellent drivin lunteers.	g record. 1 year
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$62,000.00	0.75	1 12	1	\$ 46,500

testing and linkag	ge to care; harm re	eduction counseling) thro	evention; vein care; referrals bugh mobile and encampmer ding crisis intervention suppo	nt out	
			s license and excellent drivin	g rec	ord. 1 yea
Minimum qualifications:	orking with injection	n drug users and with vo	lunteers.		
	x FTE:	x Months per Year:	Annualized (if less than 12 months):	1	Total

with people who i	Engagement and I inject drugs (PWII	Kit Packing Associate is 0), organizing harm redu	responsible for outreach and oution kit packing events, rec volunteers to assist with kit p	ruitin	g and
High school diplo volunteers. Minimum qualifications:	ma or equivalency	y; 1 year of experience v	vorking with injection drug us	ers a	nd with
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$52,000.00	0.25	12	1	\$	13,000
Total FTE:	6.70		Total Salaries:	\$	415,150

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	31,759.00
Retirement	\$	7,929.00
Medical	\$	42,885.00
Dental		
Unemployment insurance	\$	2,159.00
Disability Insurance	\$	16,897.00
Paid Time Off		
Workers comp	\$	2,159.00
	Total Fringe Benefit:	103,788

Fringe Benefit %: 25%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 518,938

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 6.7 FTE x 12 mo.	\$800	64,320
Bldg Maintenance	Janitorial at \$166.66/mo.	\$166.66	2,000
Utilities	Phone, PG&E & trash-\$55.62 X 6.7 FTE x 12mo.	\$55.62	4,472
		Total Occupancy:	70,792

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 6.7 x 12mc	51.16	4,113
Volunteer Spt	Snacks, T-shirts, etc - \$166.66/mo.	\$166.66	2,000
Syringes	Syringes \$.15/each x 2,492,127 syringes.	\$0.15	373,819
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000
Bio Buckets	2 gallon - 9,090 x \$2.75.	\$2.7502	25,000
Alcohol Wipes	178 cases x \$28/case.	\$28.00	4,984
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Sterile Water	431 Cases x \$81.205/case.	\$81.205	35,000
Bagging Supplies	104 bundles x \$7.433/bundle.	\$7.433	773
Condoms	170 cases x \$70.59/case.	\$70.59	12,000
Lube	55 cases x \$218.18/case.	\$218.18	12,000
Site Supplies	Brillo, Vitaimn C tabs, etc \$1,000/mo.	\$1,000.00	12,000
Sweep Incentives	\$1000/mo for sweeps x 12 months.	\$1,000.00	12,000
		Total Materials & Supplies:	536,189

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 6.7FTE x 12 mo.	\$86.75	6,975
Offsite storage	Records storage \$4.98/FTE x 6.7 x 12 mo.	\$4.98	400
Travel	Vehicle Fuel.	\$41.66/mo	500
Travel	Vehicle Repairs.	\$41.66/mo	500
		Total General Operating:	8,375

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
			and the second sec	_
		, I.	Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,etc.	\$144,087/yr	144,087
Saint James Infirmary	Operational expenses; staffing, office, IT,etc.	\$106,279/yr	106,279
Homeless Youth Alliance	Operational expenses; staffing, office, IT, etc.	\$230,284/yr	230,284
S.F. Drug Users Union	Operational expenses; staffing, office, IT,etc.	\$121,250/yr	121,250
	Total Cons	sultants/Subcontractors:	601,900

Other:

Expense Item	Brief Description	Rate	Cost
			1.
		Tetal Other	
		Total Other:	

TOTAL OPERATING EXPENSES: 1,217,256

TOTAL DIRECT COSTS:

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EX	PENDITURES

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e. San Francisco AIDS Foundation has a negotiated rate of 27%.	Amount 173,619
of total direct costs.	

Indirect Rate:	10%
TOTAL INDIRECT COSTS:	173,619

TOTAL EXPENSES: 1,909,813

1,736,194

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/19 Funding Source General Fund

Appendix # Page # Fiscal Year(s) Funding Notification Date B-1d 1 17-18 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	NODES			
Personnel Expenses		Progra Coordinatio Purchas	n/Bulk					
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
			0%		0%		0%	1.000.00
			0%		0%	100 million (100 million)	0%	
			0%		0%	2	0%	· · · · ·
			0%		0%		0%	
			0%		0%		0%	
			0%	· · · ·	0%		0%	
Total FTE & Total Salaries		-	0%		0%		0%	
Fringe Benefits	0%		0%	-	0%		0%	-
Total Personnel Expenses			0%		0%	·	0%	1.1
Operating Expenses	-	Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		61,801	100%	-	0%	-	0%	61,801
Total Materials and Supplies		93,300	100%		0%	-	0%	93,300
Total General Operating		28,200	100%	-	0%	-	0%	28,200
Total Staff Travel		-	0%	-	0%	-	0%	
Consultants/Subcontractor:		-	0%	-	0%	1	0%	-
Other (specify):		-	0%	-	0%		0%	
			0%	1.1	0%		0%	
			0%		0%		0%	
			0%		0%	1	0%	11
			0%		0%		0%	
			0%		0%		0%	
Total Operating Expenses		183,301	100%	-	0%		0%	183,301
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1		anyonunuie	0%	- Aponunuio	0%		0%	Sonador Total
Capital Expenditure 2			0%		0%		0%	
Total Capital Expenses		-	0%	-	0%	-	0%	-
Total Direct Expenses		183,301	100%	1	0%		0%	183,301
Indirect Expenses	10%	18,330	100%		0%		0%	18,330
TOTAL EXPENSES	10.70	201,631	100%	-	0%		0%	201,631
Units of Service (UOS) per Ser	vice Mode	12.	_	<u> </u>			_	12
Cost Per Unit of Service by Ser	vice Mode	16,802.59	_		-			12
CONTENT UNIT OF SHEVICE OV SHE	vice Mode	N/A		-	_	-		

BUDGET JUSTIFICATION

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

Appendix #: B-1d Fiscal Year: 17-18

1a) SALARIES

Brief description of job duties:				
Minimum gualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	To
			0	\$
		-		
Staff Position 2:				
Brief description of job duties:				
Minimum gualifications:				
	TTT.	x Months per	Annualized (if less than	-
Annual Salary:	x FTE:	Year:	12 months):	To
			0	\$
01-11 D11 0-				_
Staff Position 3: Brief description of job duties:			17	
Minimum qualifications:				
Minimum quaimeatoris.				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	To
	C 1 1 1 1 1 1 1 1	1.	0	\$
Staff Position 4:				
Brief description of job duties:				
Minimum qualifications:				-
		1 11 11		
and the second second	property .	x Months per	Annualized (if less than	100
Annual Salary:	x FTE:	Year:	12 months):	To
			0	\$
01.77.0 10				_
Staff Position 5: Brief description of job duties:				-
Minimum qualifications:				
Winittani quaincatorio.				
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	To
	and a second second		0	\$
Staff Position 6:				
Brief description of job duties:				
Minimum qualifications:				
		1	1.4	_
		x Months per	Annualized (if less than	
			1	
Annual Salary:	x FTE:	Year:	12 months): 0	To:

Total FTE:

Total Salaries: \$

1b) EMPLOYEE FRINGE BENEFITS:

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

Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
 Paid Time Off	
Other (specify):	
	Educe Develop

Total Fringe Benefit:

Fringe Benefit %:

0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: -

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent	Rent for 6th street location, partial allocation.	46,201	46,201
Bldg Maint	Allocated amount of bldg maint for 6 th street.	\$466.67/mo	5,600
Utilities	Phone, water, PG&E, allocated for 6th street.	833.34/mo	10,000
		Total Occupancy:	61,801

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Blo Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000
Bio Buckets	2 gailon - 5,454 x \$2.7502.	\$2.7502	15,000
Sterile Water	348 Cases x \$81.321/case.	\$81.321	28,300
Condons & Lube	25,000 condoms @ \$.10 each.	\$0.100	2,500
Group food/snacks	\$192.307/week for location snack/group food x 52 weeks.	\$192.307	10,000
Incentives	1250 incentives @ \$10 each.	\$10.000	12,500
	Total	Materials & Supplies:	93,300

General Operating:

Expense Item	Brief Description	Rate	Cost
Repairs and maintenance	Auto fuel, repairs, maintenance for delivery vehicles.	366.67/mo	4,400
Insurance	Allocated amount of liability/umbrella insurance.	333.34/mo	4,000
Janitorial	Prorated janitoroialservices for 6th street location.	\$1,650/mo	19,800
	Tot	al General Operating:	28,200

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				1.00
			T.C.I.O. MT.	1.
			Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
		1	1
			-
	Total Con	eutonte/Subsentrester	

Total Consultants/Subcontractors:

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	

TOTAL OPERATING EXPENSES: 183,301

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cos
	TOTAL CAPITAL EXP	ENDITURES

TOTAL DIRECT COSTS: 183,301

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	18,330
of total direct costs.		

Indirect Rate: 10% TOTAL INDIRECT COSTS: 18,330

TOTAL EXPENSES: 201,631

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/19 Funding Source CDC

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

B-1e 1 17-18 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE I	NODES		_	
Personnel Expenses		Progra Coordinatio Purchas	n/Bulk		4			
*-								
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
			0%		0%		0%	
		-	0%	-	0%		0%	
		-	0%		0%	-	0%	
			0%		0%	-	0%	
		-	0%	-	0%	1	0%	
Total FTE & Total Salaries		-	0%		0%		0%	
Fringe Benefits	0%		0%		0%		0%	
Total Personnel Expenses	0 /0		0%		0%		0%	
			- 10	1			•10	
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		-	0%	-	0%	-	0%	-
Total Materials and Supplies			0%		0%	-	0%	
Total General Operating		4,545	100%		0%		0%	4,545
Total Staff Travel			0%		0%	-	0%	
Consultants/Subcontractor:		-	0%	-	0%		0%	
			0%	-	0%	-	0%	1
			0%		0%	7	0%	
			0%		0%		0%	
	-		0%	1	0%		0%	· · · · · · · · · · · ·
	-	·	0%		0%		0%	
	1		0%	·	0%	15 V	0%	
Total Operating Expenses		4,545	100%	-	0%	-	0%	4,545
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1			0%		0%	-	0%	
Capital Expenditure 2 Total Capital Expenses			0%		0%		0%	
Total Capital Expenses	_	-	0.70		078		070	
Total Direct Expenses		4,545	100%	-	0%	-1	0%	4,545
Indirect Expenses	10%	455	100%		0%		0%	455
TOTAL EXPENSES		5,000	100%	-	0%		0%	5,000
Units of Service (UOS) per Service			-		222			12
Cost Per Unit of Service by Service	vice Mode	416.67			-	1-0-01-01		44
Number of Contacts (NOC) per Serv	1	N/A						

BUDGET JUSTIFICATION

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

Appendix #: B-1e Fiscal Year: 17-18

1a) SALARIES

Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
			0	\$
Staff Position 2:				
Brief description of job duties:				
Minimum qualifications:				
		L w Mantha non	Annual and //f loop than	
101	U.F.T.F.	x Months per	Annualized (If less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
			0	\$
Staff Position 3:				
Brief description of job duties:				
Minimum qualifications:				
	1	x Months per	Annualized (if less than	-
Annual Saland	x FTE:	Year:	12 months):	Tot
Annual Salary:	ATTE.	Teal.		
		and the second se	n	2
		10 73 76	0.	\$
Chaff Dealling 4.			0.	\$
Staff Position 4:			0.	\$
Brief description of job duties:		<u> </u>	0.	\$
	,		0.	\$
Brief description of job duties:		x Months ner		\$
Brief description of job duties: Minimum qualifications:	v ETE.	x Months per	Annualized (if less than	
Brief description of job duties:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
Brief description of job duties: Minimum qualifications:	x FTE:		Annualized (if less than	
Brief description of job duties: Minimum qualifications: Annual Salary:	x FTE:		Annualized (if less than 12 months):	Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		Annualized (if less than 12 months):	Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:		Annualized (if less than 12 months):	Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		Annualized (if less than 12 months):	Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	Annualized (if less than 12 months): 0	Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	Annualized (if less than 12 months): 0 Annualized (if less than	Tota \$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	Annualized (if less than 12 months): 0 Annualized (if less than 12 months):	Tota \$ Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	Annualized (if less than 12 months): 0 Annualized (if less than	Tota \$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary:		Year:	Annualized (if less than 12 months): 0 Annualized (if less than 12 months):	Tota \$ Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:		Year:	Annualized (if less than 12 months): 0 Annualized (if less than 12 months):	Tota \$ Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	Annualized (if less than 12 months): 0 Annualized (if less than 12 months):	Tota \$ Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:		Year:	Annualized (if less than 12 months): 0 Annualized (if less than 12 months):	Tota \$ Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year: x Months per Year:	Annualized (if less than 12 months): 0 Annualized (if less than 12 months): 0	Tota \$ Tota
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	Annualized (if less than 12 months): 0 Annualized (if less than 12 months):	Tota \$ Tota

Total FTE:

Total Salaries: \$

1b) EMPLOYEE FRINGE BENEFITS:

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

Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (specify):	
	Total Frings Banafit

Total Fringe Benefit:

Fringe Benefit %:

0%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: -

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
			2
			C
		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
			1 C
		·	11
			1
		Total Materials & Supplies	

General Operating:

Expense Item	Brief Description	Rate	Cost
Auto repairs, maintenance & Fuel	Maintenance on program vehicles. \$378.75/mo x 12 mo.	\$378.75	4,545
	-		
		Total General Operating:	4,545

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				1
				1.000
			Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
	Total Co	onsultants/Subcontractors:	
Other:			

Expense Item	Brief Description	Rate	Cost
		Total Other:	

TOTAL OPERATING EXPENSES: 4,545

TOTAL DIRECT COSTS:

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPEND	

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This contract seeks reimbur of total direct costs.	45
of total direct costs.	

Indirect Rate: 10%
TOTAL INDIRECT COSTS: 455

TOTAL EXPENSES: 5,000

4,545

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/19 Funding Source General Fund

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

B-1f 1 18-19 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE				
Personnel Expenses		Syringe Acces	ss Services	Pgm Coordina Purchas				
		<u></u>					5.	
Position Titles	FTE	Salarles	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
Prgms & Ops Director	0.05	5,250	100%		0%			5,250
Dir. Behavioral Health Svc	0.05	5,100	85%	900	15%			6,000
Dir. Gov't Contracts	0.05	4,900	100%		0%			4,90
Data Manager	0.05	3,750	100%		0%	1		3,75
SAS Director	0.75	60,075	89%	7,425	11%			67,50
Logistice Inventory Mgr	1.00	15,500	25%	46,500	75%			62,00
Logistics Associates	2.00	27,500	25%	82,500	75%			110,000
SSE/Vol Cordinator	0.75	46,500	100%	-	0%			46,50
Health Educator	1.75	96,250	10010	-	0%			96,250
Comm. Engagement & Kit Packing Assoc	0.65	33,800	100%	-	0%			33,800
south angugement of the Facility Abdot	0.00		0%	-	0%			00,000
Total FTE & Total Salaries	7.10	298,625	68.500%	137,325	31.500%	-		435,950
Fringe Benefits	25%		68.500%		31.500%		-	108,988
Total Personnel Expenses	2070		68.500%		31.500%			544,93
								0.1100
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure		Contract Tota
Total Occupancy		74,899	100%		0%			74,899
Total Materials and Supplies		191,834	36%	341,038	64%			532,87
Total General Operating		5,303	58%	3,840	42%			9,143
Total Staff Travel		0,000	0%	0,040	0%			5,140
Consultants/Subcontractor:		616,947	100%		0%			616,947
Other (specify):		010,041	0%	-	0%	-	-	010,84
Other (specify).			070		076	-		
					-			
				-	-			
		and the second sec						
			-					
Total Operating Expenses		888,983	72.049%	344,878	27.951%			1,233,861
Capital Expenses		888,983 Expenditure	%	Expenditure	%	Expenditure	%	
Capital Expenses Capital Expenditure 1			% 0%		% 0%		%	
Total Operating Expenses Capital Expenses Capital Expenditure 1 Capital Expenditure 2		Expenditure	% 0% 0%	Expenditure	% 0% 0%		%	1,233,861 Contract Tota
Capital Expenses Capital Expenditure 1 Capital Expenditure 2			% 0%	Expenditure	% 0%		%	
Capital Expenses Capital Expenditure 1 Capital Expenditure 2 Total Capital Expenses Total Direct Expenses		Expenditure - - 1,262,265	% 0% 0% 0%	Expenditure	% 0% 0% 29.038%	Expenditure	%	Contract Tota
Capital Expenses Capital Expenditure 1 Capital Expenditure 2 Total Capital Expenses Total Direct Expenses Indirect Expenses	10%	Expenditure - - 1,262,265	% 0% 0%	Expenditure	% 0% 0%	Expenditure	%	Contract Tota
Capital Expenses Capital Expenditure 1 Capital Expenditure 2 Total Capital Expenses Total Direct Expenses	10%	Expenditure - - 1,262,265	% 0% 0% 0% 70.962% 70.962%	Expenditure - - 516,534 51,653	% 0% 0% 29.038%	Expenditure	%	
Capital Expenses Capital Expenditure 1 Capital Expenditure 2 Total Capital Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	-	Expenditure - 1,262,265 126,227 1,388,492	% 0% 0% 0% 70.962% 70.962%	Expenditure - - 516,534 51,653 568,187	% 0% 0% 29.038% 29.038% 29.038%	Expenditure	%	Contract Tota 1,778,799 177,880 1,956,675
Capital Expenses Capital Expenditure 1 Capital Expenditure 2 Total Capital Expenses Total Direct Expenses Indirect Expenses	vice Mode	Expenditure - - 1,262,265 126,227	% 0% 0% 0% 70.962% 70.962%	Expenditure - - 516,534 51,653	% 0% 0% 29.038% 29.038% 29.038%	Expenditure	%	Contract Tota

BUDGET JUSTIFICATION

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

Appendix #:	B-1f		
Fiscal Year:	18-19		

1a) SALARIES

Staff Position 1: F						
v o	with all activities in program adapt	and that all requir tation and refinen	red data is reported; wor	that assures monitoring too its with partner agencies an it and emerging health inform surance procedures.	d prog	gram staff
Brief description of job duties:	An other to Physics	Marchine and Owner				
Minimum qualifications: e	Aasters in Public	Health and 3 yea	ars community organizin	ig and public health experier	108 01	an
Minimum qualifications: e	quivalent combi	nation of educatio	n anu experience.	ľ	-	
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
	\$105,000.00	0.05	12	1	\$	5,25
Staff Position 2: D	litector Behav	Ioral Health Ser	vices		_	
e c Brief description of job duties: ^a M	valuation of the continuum that is and bisexual mer fasters degree in	program structure responsive to the n. n psychology, soo	e and provision of profes a current health and well cial sciences, business of	y the implementation, managesional oversight to create a l-being needs, including HIV or related discipline; three ye	servi neec	ce deliver ls of gay xpereince
Minimum gualifications: p			ly in Hiv prevention and	I demonstrated program ma	nager	nent and
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
	1400 000 00					
Staff Position 3: D			12	1	\$	6,00
Staff Position 3: D D M d Ir	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req	s ontracts - Respon onal and statistic uirements, produc	sible for all data manag al reporting mechanisms ces routine and ad hoc r	ement and contract related a s in accordance with contract reporting as needed, and en quality assurance activities.	activit activit	165.
Staff Position 3: D D M Brief description of job duties: B	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req ntegrity of the se fachelor's degree lanning, design,	s ontracts - Respon onal and statistic uirements, produ- rvice database by e and at least two and evaluation; g	sible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database o y years demonstrated ex	ement and contract related a s in accordance with contrac reporting as needed, and en	activit and sures	les. the am
Staff Position 3: D D M d Brief description of job duties: B	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req ntegrity of the se fachelor's degree lanning, design,	s ontracts - Respon onal and statistic uirements, produ- rvice database by e and at least two and evaluation; g	sible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database o y years demonstrated ex	ement and contract related as in accordance with contract reporting as needed, and en quality assurance activities. operience in health services writing; government contract	activit and sures	les. the am
Staff Position 3: D D M d Brief description of job duties: B P Minimum qualifications: a	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req ntegrity of the se fachelor's degree lanning, design,	s ontracts - Respon onal and statistic ulrements, produc rvice database by e and at least two and evaluation; g	esible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database of y years demonstrated ex grant development and v	ement and contract related as in accordance with contract reporting as needed, and en uality assurance activities. operience in health services writing; government contract Annualized (if less than	activit and sures	les. the am nagement
Staff Position 3: D D M d Ir Brief description of job duties: B	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req ntegrity of the se lachelor's degree lanning, design, nd negotiations.	s ontracts - Respon onal and statistic uirements, produc rvice database by e and at least two and evaluation; g x FTE:	sible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database of y years demonstrated ex grant development and v x Months per Year:	ement and contract related as in accordance with contract reporting as needed, and en quality assurance activities. operience in health services writing; government contract	activit and sures progra	les. the am nagement Total
Staff Position 3: D D M d Brief description of job duties: B P Minimum qualifications: a	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req ntegrity of the se fachelor's degree lanning, design,	S ontracts - Respon onal and statistic ulrements, produc rvice database by e and at least two and evaluation; g	esible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database of y years demonstrated ex grant development and v	ement and contract related as in accordance with contract reporting as needed, and en uality assurance activities. operience in health services writing; government contract Annualized (if less than	activit and sures	les. the am nagement
Staff Position 3: D D M Brief description of job duties: B Minimum qualifications: a Annual Salary: Staff Position 4: D	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req ntegrity of the se lachelor's degree lanning, design, nd negotiations. \$98,000.00	s ontracts - Respon onal and statistic ulrements, produc rvice database by e and at least two and evaluation; g x FTE: 0.05	asible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database of y years demonstrated ex grant development and v x Months per Year: 12	ement and contract related a s in accordance with contract reporting as needed, and en quality assurance activities. perience in health services in writing; government contract Annualized (if less than 12 months): 1	activit and sures progra s mar	les. the am nagement Total 4,90
Staff Position 3: D D M Brief description of job duties: Minimum qualifications: a Annual Salary: Staff Position 4: D Staff Position 4: D Staff Position 4: D	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req integrity of the se lachelor's degree lanning, design, nd negotiations. \$98,000.00 Data Manager Data Manager Data Manager Data Manager Data Manager Data Manager Data Manager Data Manager	s ontracts - Respon onal and statistic ulrements, produc rvice database by e and at least two and evaluation; g x FTE: 0.05 Responsible for co sure foundation pr Impact. Response	asible for all data manages al reporting mechanisms ces routine and ad hoc r y overseeing database of y years demonstrated ex- grant development and v x Months per Year: 12 bordinating data collection rograms are rigorously esible for review, abstract	ement and contract related as in accordance with contract reporting as needed, and en uality assurance activities. operience in health services writing; government contract Annualized (if less than	activit tr and sures progra s mar \$ ing ar aalth o datab	the am nagement Total 4,90 nd outcomes ase entry
Staff Position 3: D D M d Brief description of job duties: Minimum qualifications: a Annual Salary: Staff Position 4: D Staff Position 4: D Staff Position 4: D Brief description of job duties: re B	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req integrity of the se lachelor's degree lanning, design, nd negotiations. \$98,000.00 Data Manager - Rummarles to ens nd public health f all data collecte equiments. Tachelor's degree	s ontracts - Respon onal and statistic ulrements, produc rvice database by e and at least two and evaluation; g x FTE: 0.05 Responsible for co sure foundation pr Impact. Response ad from clients as	asible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database of y years demonstrated ex grant development and v x Months per Year: 12 bordinating data collection rograms are rigorously esible for review, abstracts well as data analysis to perience managing and estimations of the second perience managing and estimations of the second second second second second second second second second second second se	ement and contract related as in accordance with contract reporting as needed, and en quality assurance activities. operience in health services writing; government contract Annualized (if less than 12 months): 1 2 2 2 2 2 2 2 2 2 2 2 2 2	activit tr and sures progra s mar s mar s mar s mar s datab	the am agement Total 4,90 ad outcomes ase entry t
Staff Position 3: D D M Brief description of job duties: Minimum qualifications: a Annual Salary: Staff Position 4: D Staff Position 4: D Brief description of job duties: re B Minimum qualifications: ^{ye} Annual Salary:	Dir. Gov't Grant Director, Gov't Co Maintains operati epartmental req integrity of the se lachelor's degree lanning, design, nd negotiations. \$98,000.00 Data Manager - Rummarles to ens nd public health f all data collecte equiments. Tachelor's degree	s ontracts - Respon onal and statistic ulrements, produc rvice database by e and at least two and evaluation; g x FTE: 0.05 Responsible for co sure foundation pr Impact. Respon ad from clients as e and 2 years exp	asible for all data manag al reporting mechanisms ces routine and ad hoc r y overseeing database of y years demonstrated ex grant development and v x Months per Year: 12 bordinating data collection rograms are rigorously esible for review, abstracts well as data analysis to perience managing and estimations of the second perience managing and estimations of the second second second second second second second second second second second se	ement and contract related as in accordance with contract reporting as needed, and en quality assurance activities. operience in health services porting; government contract activities; government contract and 12 months): 1 1 2 2 2 2 2 3 3 3 4 3 5 5 6 6 7 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1	activit tr and sures progra s mar s mar s mar s mar s datab	the am agement Total 4,90 ad outcomes ase entry t
Staff Position 5: SAS Directo	r		and the second s			
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departmental effective partm and training for exchange sup	strategic goals in alignerships with other H ull-time and temporal oplies. Organizes rer	gnment with agency and IV/AIDS and Harm Red ry staff in appropriate ex noval of biohazard wast	exchange sites. Develops and d city objectives. Builds and n uction agencies. Responsible change protocol. Responsible from sites and coordinates and maintain safety protocols	naintains e for scheduling e for purchasin removal with		
Three years e program man		n experience preferred.	ers required. Associates Deg Must hold HIV test counselor			
Minimum gualifications: be willing to o	Diant Germicauon on	the job.				
Minimum qualifications: be willing to o	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total		

Staff Position 6: Logistics Invent	ory Mrg		and the second sec	
departmental stra effective partners and training full-ti exchange supplie	ategic goals in all hips with other H me and temporar as. Organizes ren	gnment with agency and IV/AIDS and Harm Red ry staff in appropriate ex noval of biohazard was	exchange sites. Develops and dicity objectives. Builds and n uction agencies. Responsible schange protocol. Responsible from sites and coordinates and maintain safety protocols	naintains e for scheduling e for purchasin removal with
	rinnen warking w	the Intention and drug up	and the first states D	
program manage	ment, supervision	n experience preferred.	ers required. Associates Deg Must hold HIV test counselor	
program manage	ment, supervision	n experience preferred.		

Staff Position 7: Logistics Associ				
		nge sites and supervise 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 ood communications skills ne	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$55,000.00	2.00	12	1	\$ 110,000

	ange coord - Resp		aining, and supervising seco	
develop training r	materials, includin		curriculum for these trainings evant to MSM-IDU speed use e sites.	
High school diplo of experience wo Minimum qualifications:	ma or equivalence rking with injection	y; valid California driver n drug users and with ve	's license and excellent drivi plunteers.	ng record. 1 ye
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$62,000.00	0.75	12	1	\$ 46,50

Staff Position 9: Health Educa				_	
testing and link	age to care; harm i	reduction counseling) the	revention; vein care; referrals rough mobile and encampme iding crisis intervention supp	ent ou	
				_	
of experience v		cy; valid California driver on drug users and with v	's license and excellent driving olunteers.	ng rec	ord. 1 y
			olunteers. Annualized (if less than		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 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	sers	and with
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$52,000.00	0.65	12	1	\$	33,800
Total FTE:	7.10		Total Salaries:	1	435.950

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	\$	33,350.00
Retirement	\$	8,327.00
Medical	\$	45,034.00
Dental		
Unemployment Insurance	\$	2,267.00
Disability Insurance	\$	17,743.00
Paid Time Off		1.00
Workers comp	\$	2,267.00
	Total Fringe Benefit	108 988

Total Fringe Benefit: 108,988

Fringe Benefit %: 25%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 544,938

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
Rent office	1035 Market St -\$800/FTE/mo x 7.1 FTE x 12 mo.	\$800	68,160
Bidg Maintenance	Janitorial at \$166.66/mo.	\$166.66	2,000
Utilities	Phone, PG&E & trash-\$55.62x7.1FTEx12mo.	55.62	4,739
			1
		Total Occupancy	: 74.899

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Office Supplies & Postage	Office supply & Postage \$51.16/FTE x 7.1 x 12mo.	\$51.16	4,359
Volunteer Spt	Snacks, T-shirts, etc - \$166.66/mo.	\$166.66	2,000
Syringes	Syringes \$.15/each x 2,468,373 syringes.	\$0.15	370,256
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.367.	\$24.367	25,000
Bio Buckets	2 gallon - 9,090 x \$2.75.	\$2.7502	25,000
Alcohol Wipes	178 cases x \$28/case.	\$28.00	4,984
Cotton balls and pellets	1,040bags x \$16.827bag.	\$16.827	17,500
Sterile Water	431 Cases x \$\$81.205/case.	\$81.205	35,000
Bagging Supplies	104 bundles x \$7.433/bundle.	\$7.433	773
Condoms	170 cases x \$70.59/case.	\$70.59	12,000
Lube	55 cases x \$218.18/case.	\$218.18	12,000
Site Supplies	Brillo, Vitaimn C tabs, etc \$1,000/mo.	\$1,000.00	12,000
Sweep Incentives	\$1000/mo for sweeps x 12 months.	\$1,000.00	12,000
	Total	Materials & Supplies:	532.872

General Operating:

Expense Item	Brief Description	Rate	Cost
Equip rent & Lease	Office equip lease and maint cost \$86.75/FTE x 7.1FTE x 12mo.	\$86.75	7,391
Offsite storage	Records storage \$4.98/FTE x 7.1 x 12 mo.	\$4.98	424
Travel	Vehicle Fuel.	\$69/mo	828
Travel	Vehicle Repairs.	\$41.66/mo	500
		Total General Operating:	9,143

lotal General Operating

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				_
			Total Staff Traval	

Total Staff Travel

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Glide	Operational expenses; staffing, office, IT,etc.	\$147,689/yr	147,689
Saint James Infirmary	Operational expenses; staffing, office, IT, etc.	\$108,936/yr	108,936
Homeless youth Alliance	Operational expenses; staffing, office, IT, etc.	\$236,041/yr	236,041
S.F. Drug Users Union	Operational expenses; staffing, office, IT, etc.	\$124,281/yr	124,281
	Total Cons	ultants/Subcontractors:	616,947

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	

TOTAL OPERATING EXPENSES: 1,233,861

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

TOTAL DIRECT COSTS: 1,778,799

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e.,		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% TOTAL INDIRECT COSTS: 177,880

TOTAL EXPENSES: 1,956,679

Contractor Name	San Francisco AIDS Foundation
Contract Term (mm/dd/yyyy)	7/1/16-6/30/19
Funding Source	General Fund

Appendix # B-1g Page # 1 Fiscal Year(s) 18-19 Funding Notification Date 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	MODES		-	
Personnel Expenses		Coordinatio Purchas			_			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salarles	% FTE	Contract Totals
			0%	-	0%		0%	
		-	0%	-	0%	-	0%	
			0%	-	0%	-	0%	
		-	0%	-	0%		0%	-
	_		0%		0%		0%	
		-	0%	-	0%	-	0%	
Total FTE & Total Salaries			0%	-	0%	-	0%	
Fringe Benefits	0%	-	0%	-	0%	-	0%	
Total Personnel Expenses		-	0%	-	0%	-	0%	
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		63,801	100%	-	0%	-	0%	63,801
Total Materials and Supplies		93,300	100%	· · · · ·	0%	· · ·	0%	93,300
Total General Operating		30,783	100%		0%	-	0%	30,783
Total Staff Travel		-	0%		0%		0%	
Consultants/Subcontractor:			0%		0%		0%	
Other (specify):			0%		0%		0%	-
			0%		0%	· · · · · · · · · · · · · · · · · · ·	0%	-
· · · · · · · · · · · · · · · · · · ·			0%	1	0%		0%	
			0%		0%		0%	-
			0%		0%		0%	
			0%		0%		0%	
Total Operating Expenses		187,884	100%	-	0%		0%	187,884
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1		-	0%	-	0%	-	0%	
Capital Expenditure 2			0%		0%		0%	
Total Capital Expenses		· · · · · · · · · · · · · · · · · · ·	0%		0%	-	0%	-
Total Direct Expenses		187,884	100%	-	0%	-	0%	187,884
Indirect Expenses 10%		18,788	100%	-	0%		0%	18,788
TOTAL EXPENSES		206,672	100%	-	0%	-	0%	206,672
Units of Service (UOS) per Service	Made	12	-	<u> </u>			-	12
Cost Per Unit of Service by Servic			-				-	12
Number of Contacts (NOC) per Service	a Mode	N/A	-	-				

BUDGET JUSTIFICATION

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

Appendix #: B-1g Fiscal Year: 18-19

1a) SALARIES

Brief description of job duties:				
Minimum qualifications:			2	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tot
			0	\$
06-75 D 111 0-				
Staff Position 2:				
Brief description of job duties:				
Minimum qualifications:				
		x Months per	Annualized (if less than	-
Annual Calence	N ETE			Tet
Annual Salary:	x FTE:	Year:	12 months):	Tota
			0	\$
Staff Position 3:				
				_
Brief description of job duties:				
Minimum qualifications:				_
		x Months per	Annualized (if less than	
Annual Colore	x FTE:	Year:		Tot
Annual Salary:	XFIC.	rear.	12 months):	
			0	\$
Staff Position 4:				
Brief description of job duties:				
Minimum qualifications:				
winimum qualifications.				
	1	x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tot
Annual Galary.	ATTE:	rear.	0	\$
		1	U	÷.
Staff Position 5:				
Brief description of job duties:				
Minimum qualifications:				
winimum qualifications.				
		x Months ner	Annualized (it less than	
Annual Salany	V ETE:	x Months per	Annualized (if less than	Tet
Annual Salary:	x FTE:	x Months per Year:	12 months):	
Annual Salary:	x FTE:		12 months):	Tota \$
	x FTE:		12 months):	
Staff Position 6:	x FTE:		12 months):	
Staff Position 6: Brief description of job duties:	x FTE:		12 months):	
Staff Position 6:	x FTE:		12 months):	
Staff Position 6: Brief description of job duties:	x FTE:	Year:	12 months): 0	
Staff Position 6: Brief description of job duties:	x FTE:		12 months):	Tota \$ Tota

Total FTE:

Total Salaries: \$

1b) EMPLOYEE FRINGE BENEFITS:

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

Component Cost	
Social Security	
Retirement	
Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (specify):	
Total Filmer Discrete	

Total Fringe Benefit:

Fringe Benefit %: 0%

-

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Expense li	m	Brief Description	Rate	Cost
Rent	R	ent for 6th street location, partial allocation.	46,201	46,201
Bldg Mai	nt Al	located amount of bldg maint for 6 th street.	\$550/mo	6,600
Utilities		none, water, PG&E, allocated for 6th street.	916.67/mo	11,000
0			Total Occupancy:	63,801

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Bio Buckets	18/19 gallon buckets - 1,026 x \$24.387.	\$24.367	25,000
Bio Buckets	2 gallon - 5,454 x \$2.7502.	\$2.7502	15,000
Sterile Water	348 Cases x \$81.321/case.	\$81.321	28,300
Condons & Lube	25,000 condoms @ \$.10 each.	\$0.100	2,500
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:	93,300

General Operating:

Expense Item	Brief Description	Rate	Cost
Repairs and maintenance	Auto fuel, repairs, maintenance for delivery vehicles.	498.59/mo	5,983
Insurance	Allocated amount of liability/umbrella insurance.	333.34/mo	4,000
Janitorial	Prorated janitoroialservices for 6th street location	\$1,733.34/mo	20,800
		Total General Operating:	30,783

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				1
		+		
			Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
			32
			1.5
	Total Co	nsultants/Subcontractors	

Other:

Expense Item	Brief Description	Rate	Cost
			1.1.1.1.2.1.1.1
		Total Other:	

TOTAL OPERATING EXPENSES: 187,884

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES	

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%	18,788
of total direct costs.	
Indirect Rate:	10%
TOTAL INDIRECT COSTS:	18,788

TOTAL EXPENSES: 206,672

Contractor Name	San Francisco AIDS Foundation
Contract Term (mm/dd/yyyy)	7/1/16-6/30/18
Funding Source	

Appendix # B-1h Page # 1 Fiscal Year(s) 18-19 Funding Notification Date 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	MODES			1
Personnel Expenses		Coordinatic Purchas						
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
		· · · · · · · · · · · ·	0%	•	0%	1	0%	
			0%		0%		0%	
	-	-	0%	-	0%	-	0%	
			0%		0%	-	0%	
	_	-	0%		0%		0%	
			0%	-	0%	-	0%	
Total FTE & Total Salaries		•	0%	-	0%	•	0%	-
	0%		0%	-	0%	-	0%	
Total Personnel Expenses	_	-	0%		0%	-	0%	
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		T	0%	-	0%	-	0%	
Total Materials and Supplies		1	0%		0%		0%	
Total General Operating		4,545	100%	-	0%		0%	4,545
Total Staff Travel			0%	-	0%		0%	
Consultants/Subcontractor:		·	0%	-	0%		0%	-
	-		0%	-	0%	-	0%	-
		· · · · · · · · · · · · · · · · · · ·	0%		0%		0%	-
		1	0%		0%		0%	-
			0%		0%		0%	-
March 1997	1.1		0%		0%		0%	-
			0%		0%	100 St. 100	0%	
Total Operating Expenses		4,545	100%		0%	· · · · · · · · · · · · · · · · · · ·	0%	4,545
Capital Expenses		Expenditure	%	Expenditure	%	Expanditure	%	Contract Total
Capital Expenditure 1		-	0%	-	0%	-	0%	-
Capital Expenditure 2			0%		0%		0%	-
Total Capital Expenses			0%		0%		0%	
Total Direct Expenses		4,545	100%	-	0%	-	0%	4,545
	10%	455	100%		0%		0%	455
TOTAL EXPENSES		5,000	100%	-	0%		0%	5,000
Units of Service (UOS) per Service	Mode	12			-			12
Cost Per Unit of Service by Service			-		-		-	
Number of Contacts (NOC) per Service	Made	N/A					-	

BUDGET JUSTIFICATION

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

Appendix #: B-1h Fiscal Year: 18-19

1a) SALARIES

Brief description of job duties: Minimum gualifications:				
Minimum quaincations.				
Annual Salary:	× FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
		P	0	\$
Staff Position 2:				
Brief description of job duties: Minimum qualifications:				
Minimum quaincations.				
	No. Sector	x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
	· · · · · · · · · · · · · · · · · · ·		0	\$
Staff Position 3:				
Brief description of job duties:				
Minimum gualifications:				
	11	x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
	1		0	\$
Staff Position 4:				
Brief description of job duties:				
Minimum qualifications:		_		
		x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
runied editry.			0	\$
Staff Position 5:				
Brief description of job duties:				
Minimum qualifications:				
		L v Mantha nav	Annualized (if less them	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
Allinual Salary.	ALIE.	Tear,	0	\$
				Ψ.
Staff Position 6:				
Brief description of job duties:				
Minimum qualifications:				
1.4.3.	100000000000000000000000000000000000000	x Months per	Annualized (if less than	1.1
Annual Salary:	x FTE:	Year:	12 months):	Tota
	1		0	\$
Total FTE:	0 - P		Total Salaries:	\$
MPLOYEE FRINGE BENEFITS: conents provided below are samples only. The bu Component	udgeted compone	ents should reflect	the contractor's ledger acco Cost	ounts.)
component		Social Security	0101	
	~ 1	Retirement		

Medical	
Dental	
Unemployment Insurance	
Disability Insurance	
Paid Time Off	
Other (specify):	

Total Fringe Benefit:

Fringe Benefit %: 0%

•

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Description	Rate	Cost
		Total Occupancy:	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
			1
			-
		Total Materials & Supplie	5:

General Operating:

Expense Item	Brief Description	Rate	Cost
Auto repairs, maintenance & Fuel	Maintenance on program vehicles. \$378.75/mo x 12 mo.	\$378.75	4,545
1			r
		Total General Operating:	4,54

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
				-
				-
			Total Staff Trave	d: -

Consultants/Subcontractors:

Service Description	Rate	Cost
		-
Table	and life to life the entry of a res	
		Service Description Rate

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	- - 24,
	TOTAL	OPERATING EXPENSES:	4,545
CAPITAL EXPENDITURES: (If needed	A unit valued at \$5,000 or more)		

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURE	:S: -

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%	455
of total direct costs.	
Indirect Rate:	10%
TOTAL INDIRECT COSTS:	455

4

TOTAL EXPENSES: 5,000

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/19 Funding Source General Fund

Page # Fiscal Year(s) Funding Notification Date

Appendix #

B-2a 1 17-18

6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	NODES		_	
Personnel Expenses	HYA	Wrap A Dispos	Around & sal				1	
Position Titles F	TE Sa	aries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
			0%		0%		0%	
		-	0%	-	0%	-	0%	
		-	0%		0%	-	0%	
		-	0%	-	0%	-	0%	
		-	0%	-	0%	-	0%	
		-	0%	-	0%	-	0%	
Total FTE & Total Salarles	1.4	-	0%	-	0%	-	0%	
	0%	-	0%	-	0%	-	0%	
Total Personnel Expenses			0%		0%	•	0%	1
Operating Expenses	Expe	nditure	%	Expenditure	%	Expenditure	%.	Contract Tota
Total Occupancy		-	0%	-	0%	-	0%	
Total Materials and Supplies			0%	-	0%	-	0%	
Total General Operating		-	0%	-	0%	-	0%	
Total Staff Travel		-	0%	-	0%		0%	
Consultants/Subcontractor.	1	46,160	100%	-	0%	-	0%	146,160
Other (specify):		-	0%	1	0%	-	0%	1.10110
ound (option))			0%		0%		0%	
			0%		0%		0%	
V			0%		0%		0%	
		-	0%		0%		0%	
			0%	· · · · · · · · · · · · · · · · · · ·	0%		0%	
Total Operating Expenses	1	46,160	100%	•	0%	-	0%	146,160
Capital Expenses	Expe	nditure	%	Expenditure	%	Expenditure	%	Contract Tota
Capital Expenditure 1		-	0%	1	0%	-	0%	
Capital Expenditure 2			0%	·	0%		0%	
Total Capital Expenses			0%		0%	-	0%	
Total Direct Expenses	1 14	46,160	100%	-1	0%	-	0%	146,160
Indirect Expenses 10%		14,615	100%		0%		0%	14,615
TOTAL EXPENSES		80,775	100%	•	0%	+	0%	160,775
Units of Service (UOS) per Service	Mode	12		-1	-		-	12
Cost Per Unit of Service by Service	Mode 13.3	397.92			-	1	-	
Number of Contacts (NOC) per Service		I/A						

BUDGET JUSTIFICATION

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

Appendix #: B-2a Fiscal Year: 17-18

1a) SALARIES

Brief description of job duties:				-
Minimum qualifications:				
				-
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tot
			0	\$
01-71 0				
Staff Position 2:				
Brief description of job duties:				
Minimum qualifications:				
		x Months per	Annualized (if less than	_
Annual Colony	WETE.			
Annual Salary:	x FTE:	Year:	12 months):	Tot
	and the second second		0	\$
Staff Position 3:				-
Brief description of job duties:				
Minimum gualifications:				_
Minimum qualifications.				
	1	x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tot
Annual Salary.	ATTE:	1 Gal.	0	\$
				Ŷ
	1		1	4
Staff Position 4:				4
Brief description of job duties:				•
Staff Position 4: Brief description of job duties: Minimum qualifications:				*
Brief description of job duties:			Appusited (# loss than 1	*
Brief description of job duties: Minimum qualifications:		x Months per	Annualized (if less than	
Brief description of job duties:	x FTE;	x Months per Year:	12 months):	Tot
Brief description of job duties: Minimum qualifications:	x FTE;			
Brief description of job duties: Minimum qualifications: Annual Salary:	x FTE:		12 months):	Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		12 months):	Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:		12 months):	Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5:	x FTE:		12 months):	Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	12 months): 0	Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	12 months): 0 Annualized (if less than	Tot \$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties:	x FTE:	Year:	12 months): 0 Annualized (if less than 12 months):	Tot \$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications:		Year:	12 months): 0 Annualized (if less than	Tot \$
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary:		Year:	12 months): 0 Annualized (if less than 12 months):	Tot \$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:		Year:	12 months): 0 Annualized (if less than 12 months):	Tot \$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	12 months): 0 Annualized (if less than 12 months):	Tot \$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6:		Year:	12 months): 0 Annualized (if less than 12 months):	Tot \$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year: x Months per Year:	12 months): 0 Annualized (if less than 12 months): 0	Tot \$ Tot
Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 5: Brief description of job duties: Minimum qualifications: Annual Salary: Staff Position 6: Brief description of job duties:		Year:	12 months): 0 Annualized (if less than 12 months):	Tot \$ Tot

Total FTE: - Total Salaries: \$

1b) EMPLOYEE FRINGE BENEFITS:

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

	o other other is	
1.	Social Security	
	Retirement	
	Medical	
	Denta	
	Unemployment Insurance	
	Disability Insurance	
	Paid Time Off	
	Other (specify):	
		Tatal Column Damaffa

Total Fringe Benefit:

Fringe Benefit %:

0%

-

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

2) OPERATING EXPENSES:

Occupancy:

Brief Description	Rate	Cost
	1	
• •	Total Occupancy	
	Brief Description	Brief Description Rate

Materials & Supplies:

Brief Description	Rate	Cost
	14	-
	1	
		1
		Brief Description Rate

General Operating:

Expense Item	Brief Description	Rate	Cost
			-
			-
			-
		Total General Operating	

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		1.1		
				_
		4 <u> </u>	Total Staff Travel:	

Consultants/Subcontractors:

Consultant/Subcontractor Name		Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$146,160	146,160
	Total C	onsultants/Subcontractors:	146,160
ther:			
Expense Item	Brief Description	Rate	Cost
			1
		Total Other:	
	eeded. A unit valued at \$5,000 or more)	L OPERATING EXPENSES:	146,16
CAPITAL EXPENDITURES: (If no Capital Expenditure Item	A STATE AND A STATE AND A STATE		
	Brief Description		146,160
	Brief Description	L OPERATING EXPENSES:	146,160
Capital Expenditure Item	eeded. A unit valued at \$5,000 or more) Brief Description TOTAL	L OPERATING EXPENSES: CAPITAL EXPENDITURES: TOTAL DIRECT COSTS:	146,160 Cost - 146,160
Capital Expenditure Item	Brief Description	L OPERATING EXPENSES:	146,160 Cost

10% Indirect Rate: TOTAL INDIRECT COSTS: 14,615

> TOTAL EXPENSES: 160,775

4

Contractor Name	San Francisco AIDS Foundation
Contract Term (mm/dd/yyyy)	7/1/16-6/30/19
Funding Source	

Appendix # Page # Fiscal Year(s) Funding Notification Date B-2b

1 18-19 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	MODES			
		HYA Wrap A						
Personnel Expenses		Dispos	sal					1
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
		Culture	0%		0%		0%	-
		-	0%	-	0%		0%	
		-	0%	-	0%	-	0%	-
			0%		0%	-	0%	-
		-	0%	-	0%	-	0%	-
		-	0%	-	0%		0%	-
Total FTE & Total Salarles		-	0%	-	0%	-	0%	
Fringe Benefits	0%	-	0%		0%	-	0%	
Total Personnel Expenses	_	•	0%	•	0%	•	0%	-
Operating Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy			0%	-	0%		0%	-
Total Materials and Supplies		-	0%	-	0%		0%	
Total General Operating		-	0%		0%		0%	
Total Staff Travel		-	0%	-	0%		0%	
Consultants/Subcontractor:		149,814	100%	-	0%		0%	149,814
Other (specify):		-	0%	-	0%		0%	-
	_		0%		0%		0%	-
			0%		0%		0%	
		1	0%		0%		0%	
			0%		0%		0%	-
			0%		0%		0%	
Total Operating Expenses	1.1	149,814	100%		0%		0%	149,814
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1			0%	-	0%	-	0%	
Capital Expenditure 2		- L. S	0%		0%	-1-	0%	
Total Capital Expenses		•	0%	-	0%	-	0%	
Total Direct Expenses		149,814	100%		0%		0%	149,814
Indirect Expenses	10%	14,980	100%		0%		0%	14,980
TOTAL EXPENSES		164,794	100%		0%		0%	164,794
Units of Service (UOS) per Service	s Mode	12		-1		- 1		12
Cost Per Unit of Service by Service	e Mode	13,732.84					-	100000
Number of Contacts (NOC) per Service		N/A						

BUDGET JUSTIFICATION

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

Appendix #: B-2b Fiscal Year: 18-19

1a) SALARIES

Staff Position 1:				
Brief description of job duties:				
Minimum qualifications:				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tota
Ailidai Salary.	ATTE.	I Coll.	0	\$
				4
Staff Position 2:				
Brief description of job duties:				_
Minimum gualifications:				
		x Months per	Annualized (if less than	-
Annual Salary:	x FTE:	Year:	12 months):	Tota
			0	\$
		A		
Staff Position 3:				
Brief description of job duties:				
Minimum qualifications:			some start and the second	
		x Months per	Annualized (if less than	1.5.5.1
Annual Salary:	x FTE:	Year:	12 months):	Tota
			0	\$
Staff Position 4:				
Brief description of job duties:				
Minimum qualifications:			And and a state of the state of the	
		x Months per	Annualized (if less than	1.000
Annual Salary:	x FTE:	Year:	12 months):	Tota
			0	\$
			·	
Staff Position 5:				
Brief description of job duties:				
Minimum qualifications:				
	a service and service and	x Months per	Annualized (if less than	
Annual Salary:	x FTE:	Year:	12 months):	Tota
	· · · · · · · · · · · · · · · · · · ·		0	\$
Staff Position 6:				
Brief description of job duties:				
Minimum qualifications:			and the state of the	
		x Months per	Annualized (if less than	1.4.10
Annual Salary:	x FTE:	Year:	12 months):	Tota
			0	\$
			5	
Total FTE:			Total Salaries:	\$
IPLOYEE FRINGE BENEFITS:				
Component			Cost	
		Social Security	/	
		Retirement	t	
		Medical		
		Dental		-
	Unempl	oyment Insurance		
		isability Insurance		
		Paid Time Off	F	
		Other (specify):		-

Fringe Benefit %:

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:

0%

•

2) OPERATING EXPENSES:

Occupancy:

Expense Item	Brief Descript	lon	Rate	Cost
			Total Occupancy:	
Materials & Supplies:				
Expense Item	Expense Item Brief Description	Rate	Cost	
		Total	Materials & Supplies:	
General Operating:				
Expense Item	Brief Descript	lon	Rate	Cost
. 7		To	tal General Operating:	
Staff Travel:				
Purpose of Travel	Location	Expense Item	Rate	Cost
			Total Staff Travel:	
Consultants/Subcontractors: Consultant/Subcontractor Name Homeless Youth Alliance	Service Descrip		Rate \$149,814	Cost 149,814
	A	Total Consult	tants/Subcontractors:	149,814
				140,014
Other:				
Expense Item	Brief Descript	lon	Rate	Cost
		_	Total Other:	1.14
		TOTAL OP	ERATING EXPENSES:	149,814
3) CAPITAL EXPENDITURES: (If needed. A	unit valued at \$5,000 or m	ore)		
Capital Expenditure Item	Brief Descript	ion		Cost
		TOTAL CAPI	TAL EXPENDITURES:	
		TC	TAL DIRECT COSTS:	149,814
				140,014
4) INDIRECT COSTS				
Describe method and basis for Indirect Co	ost Allocation (i.e., FTE, s	quare footage, or of	her)	Amount
San Francisco AIDS Foundation has a negot of total direct costs.	lated rate of 27%. This co	ntract seeks reimbur	sement at a rate of 10%	14,980
			Indirect Rate:	10%
		TOT	AL INDIRECT COSTS:	14,980

164,794

TOTAL EXPENSES:

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/19 Funding Source General Fund

Appendix # B-3a Fiscal Year(s) Funding Notification Date

1 17-18 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE	MODES			1
Personnel Expenses		Harm Red Cente						
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
V.P Programs & Services	0.10	20,300	100%		0%		0%	20,300
Dir. Behavorial Health Services	0.05	6,000	100%		0%	-	0%	6,000
Director, SAS	0.20	18,000	100%		0%		0%	18,000
Associate Director, 6th Street HRC	1.00	63,000	100%		0%		0%	63,000
Health Educator	6.25	343,750	100%	-	0%	-	0%	343,750
Mobile Health Educator	0.50	27,500	100%	- · · · ·	0%		0%	27,500
Health Educator/Inventory Team Lead	1.00	55,000	100%		0%	-	0%	55,000
Inventory Associate/Health Educator	1.00	55,000	100%	-	0%	-	0%	55,000
Total FTE & Total Salaries	10.10	588,550	100%	•	0%	-	0%	588,550
Fringe Benefits	25%	147,138	100%	*	0%	-	0%	147,138
Total Personnel Expenses		735,688	100%	4	0%	-	0%	735,688
Onerting European		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Operating Expenses Total Occupancy		32,214	100%	Expenditure	0%	Experiance	0%	32,214
Total Materials and Supplies	-	24,234	100%		0%	-	0%	24,234
Total General Operating		11,500	100%		0%		0%	11,500
Total Staff Travel		11,500	0%		0%	-	0%	11,500
			0%		0%	-	0%	
Consultants/Subcontractor.	-			-				
Other (specify):		-	0%		0%		0%	
	_		0%		0%		0%	
			0%		0%		0%	-
	-		0%		0%		0%	
			0%		0%		0%	-
7.1.10 ··································		07.040	0%		0%	1	0%	07 040
Total Operating Expenses	-	67,948	100%		0%		0%	67,948
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1			0%		0%		0%	
Capital Expenditure 2	-		0%		0%		0%	-
Total Capital Expenses		-	0%	4	0%	-	0%	-
Total Direct Expenses		803,636	100%	1	0%	-	0%	803,636
Indirect Expenses	10%	80,364	100%	-	0%	-	0%	80,364
TOTAL EXPENSES	1070	884,000	100%		0%		0%	884,000
							_	
Units of Service (UOS) per Servi			-	-		-		12
Cost Per Unit of Service by Service Number of Contacts (NOC) per Service			-	÷				
trained of earlings fire at por out in		outo in						

BUDGET JUSTIFICATION

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

Appendix #: B-3a Fiscal Year: 17-18

1a) SALARIES

st	esponsible for e nucture and pro	ensuring the Imple vision of profession	onal oversight to c	ement and evaluation of the reste a service delivery cont s, including HIV needs of ga	inuum that is
Brief description of job duties: me	en.				
				ness or related disciplines. F	
				apacity, especially in HIV pre evelopment experience.	evention and
					evention and
de					Total

structure and pro	ensuring the imple	onal oversight to c	rement and avaluation of the reate a service delivery cont s, including HIV needs of ga	inuum that is
Masters degree i	supervisory capaci	ty, especially in H	ness or related discipline; thr IV 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

	Provides oversight			e sites. Develops annual dep actives. Builds and maintains	
12 13	training full-time a purchasing excha coordinates remo	and temporary sta ange supplies. Or	ff in appropriste e ganizes removal o	on agencies. Responsible for xchange protocol. Responsit of biohazard waste from sites repare reports for complianc	ble for and
	Three years expe	ment, supervision	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
	\$90,000.00	0.20	12	1	\$ 18,000

Harm Reduction education (e.g. o curriculum develo	nclude site operat Center, supervisin verdose preventio opment; managing	ions (schedules, l ng health educator n, vein care) and g syringe access,	ogistics, QA, programming) o s, volunteers, and interns; c referrals; program design, fa disposal, and iounge space; and providing crisis intervent	onducting health cilitation, and linking
Five years' exper required. Associa understanding of	tes Degree prefer harm reduction p HIV/HCV disease	rred, experience u ractices and princ e prevention and t	ly marginalized, or homeless sing motivational intervlewin 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
\$63,000.00	1.00	12	1	\$ 63,000

Staff Position 5: Health Educato		bealth education	(e.g. overdose prevention,	has (eres new
referrals; program disposal, and lou	m design, facilitatio	on, and curriculum participants to HI	development; supports syri V/HCV testing and linkage t	nge access,
Minimum, 1-3 ye			users. Associates Degree pr adge of HIV/HCV prevention	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$55,000.00	6.25	12	1	\$ 343,75
Staff Position 6: Mobile Health E	Educator			-
HIV/HCV testing encampment out Brief description of job duties: Intervention supp	and linkage to car treach; overseeing port.	e; harm reduction a team of street of	ose prevention; vein care; re counseling) through mobile outreach volunteers; and pro users. Associates Degree pr	and oviding crisis
		skills, and knowle	edge of HIV/HCV prevention	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$55,000.00	0,50	12	1	\$ 27,50
relenais, suppor	ts syringe access,	disposal, and lour	ige space; linking participan	ts to HIV/HCV
testing and linkag Brief description of job duties: Street sites; supe	ge to care; and pro ervises volunteers	viding crisis intervision and coordinates	vention support. Supports m supply inventory.	obile and 6th
testing and linkag Brief description of job duties: Street sites; supe	ge to care; and pro ervises volunteers ars experiencing v	viding crisis interv and coordinates	vention support. Supports m supply inventory. users. Associates Degree pr	obile and 6th
testing and linkag Brief description of job duties: Street sites; supe Minimum, 1-3 ye Minimum qualifications: reduction, motive Annual Salary:	ge to care; and pro ervises volunteers ars experiencing v	viding crisis interv and coordinates	vention support. Supports m supply inventory. users. Associates Degree pr	obile and 6th
testing and linkag Brief description of job duties: Street sites; sup Minimum, 1-3 ye Minimum qualifications: reduction, motive	ge to care; and pro ervises volunteers ars experiencing v ational interviewing	voiding crisis interv ; and coordinates vorking with drug u skills, and knowle x Months per	vention support. Supports m supply inventory. users. Associates Degree pr adge of HIV/HCV prevention Annualized (if less than	obile and 6th eferred. Harm /b: preferred. Total
testing and linkag Brief description of job duties: Street sites; supe Minimum, 1-3 ye Minimum qualifications: reduction, motive Annual Salary:	ge to care; and pro ervises volunteers ars experiencing v ational interviewing x.FTE: 1.00	oviding crisis interv ; and coordinates working with drug u skills, and knowle x Months per Year: 12	vention support. Supports m supply inventory. users. Associates Degree pr edge of HIV/HCV prevention Annualized (if less than 12 months):	obile and 6th eferred. Harm /bx preferred. Total
testing and linkag Brief description of job duties: Street sites; super Minimum, 1-3 ye Minimum qualifications: reduction, motives Annual Salary: \$55,000.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support testing and linkag Street sites; super maintenance and	ge to care; and pro ervises volunteers ars experiencing v ational interviewing <u>x FTE:</u> 1.00 ciate/Health Educ include conducting ts syringe access, ge to care; and pro ervises volunteers d transport.	viding crisis interv ; and coordinates vorking with drug u skills, and knowle x Months per Year: 12 cator g health education disposal, and lour oviding crisis interv ; and assists inver	rention support. Supports m supply inventory. laters. Associates Degree pr adge of HIV/HCV prevention Annualized (if less than 12 months): 1 (e.g. overdose prevention, nge space; linking participan vention support. Supports m ntory Team Lead with supply	obile and 6th eferred. Harm /bx preferred. Total \$ 55,00 vein care) and ts to HIV/HCV obile and 6th y Inventory
testing and linkag Brief description of job duties: Street sites; super Minimum, 1-3 ye Minimum qualifications: reduction, motives Annual Salary: \$55,000.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support testing and linkag Street sites; super maintenance and	ge to care; and pro ervises volunteers ars experiencing v ational interviewing <u>x FTE:</u> 1.00 ciate/Health Educ include conduction ts syringe access, ge to care; and pro ervises volunteers d transport. ars experiencing v	oviding crisis interv ; and coordinates ; and coordinates vorking with drug u g skills, and knowle x Months per Year: 12 cator g health education disposal, and lour oviding crisis interv ; and assists inver vorking with drug u g skills, and knowle	rention support. Supports m supply inventory. Isers. Associates Degree pr adge of HIV/HCV prevention Annualized (if less than 12 months): 1 (e.g. overdose prevention, nge space; linking participan vention support. Supports m ntory Team Lead with supply isers. Associates Degree pr adge of HIV/HCV prevention	obile and 6th eferred. Harm /bx preferred. Total \$ 55,00 vein care) and ts to HIV/HCV obile and 6th r Inventory eferred. Harm
testing and linkag Brief description of job duties: Street sites; super Minimum, 1-3 ye Minimum qualifications: reduction, motive Annual Salary: \$55,000.00 Staff Position 8: Inventory Assoc Responsibilities referrals; support testing and linkag Street sites; super testing and linkag Street sites; super testing and linkag Street sites; super testing and linkag Street sites; super Minimum, 1-3 ye	ge to care; and pro ervises volunteers ars experiencing v ational interviewing <u>x FTE:</u> 1.00 ciate/Health Educ include conduction ts syringe access, ge to care; and pro ervises volunteers d transport. ars experiencing v	oviding crisis interv ; and coordinates vorking with drug u g skills, and knowle x Months per Year: 12 cator g health education disposal, and lour oviding crisis interv ; and assists Inver	rention support. Supports m supply inventory. Isers. Associates Degree pr adge of HIV/HCV prevention Annualized (if less than 12 months): 1 (e.g. overdose prevention, nge space; linking participan vention support. Supports m ntory Team Lead with supply isers. Associates Degree pr	obile and 6th eferred. Harm /bx preferred. Total \$ 55,00 vein care) and ts to HIV/HCV obile and 6th r Inventory eferred. Harm

1b) EMPLOYEE FRINGE BENEFITS:

Component	Cost	
Social Security	\$	45,024.00
Retirement	\$	11,242.00
Medical	\$	60,797.00
Dental		
Unemployment Insurance	\$	3,060.00
Disability Insurance	\$	23,955.00
Paid Time Off		
 Other (Workers Comp): 	\$	3,060.00
	Total Fringe Benefit:	147,138

Fringe Benefit %: 25%

the second	the second s
TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS:	735,688

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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 @ \$351.17/mo x 12 mo.	351.17	4,214
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:	32,214

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost
Supplies	General office and program supplies\$519.5/mo.	519.5	6,234
Incentives	exhange incentives, 1,200 incentives @ \$5each =\$6,000.	5	6,000
Volunteer support	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total	Istarials & Supplies	26 234

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	208.34	2,500
			_
	T	otal General Operating:	11,500

Operating merai

Staff Travel:

Purpose of Travel	Location	Expense Item	Rate	Cost
		1		
			Total Staff Trave	al: -

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
	Total Cons	ultants/Subcontractors:	

Other:

Expense Item	Brief Description	Rate	Cost
	The second se		
		Total Other:	

TOTAL OPERATING EXPENSES: 67,948

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES	
	TOTAL DIRECT COSTS	: 803,636

4) INDIRECT COSTS

Describe method and basis for Indirect Cost Allocation (i.e	, FIE, square rootage, or other)	Amount
San Francisco AIDS Foundation has a negotiated rate of 27%.	This contract seeks reimbursement at a rate of 10%	80,364
of total direct costs.		

indirect Rate:	10%
TOTAL INDIRECT COSTS:	80,364

TOTAL EXPENSES: 884,000

Contractor Name San Francisco AIDS Foundation Contract Term (mm/dd/yyyy) 7/1/16-6/30/19 Funding Source General Fund

Appendix # Page # Fiscal Year(s)

Funding Notification Date

B-3b 1 18-19 6/27/2017

UOS COST ALLOCATION BY SERVICE MODE

	-			SERVICE	MODES		-	
Personnel Expenses		Harm Red Cente			•			
Position Tities	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
V.P Programs & Services	0.10	20,300	100%		0%		0%	20,300
Dir. Behavorlal Health Services	0.05	6,000	100%		0%	-1	0%	6,000
Director, SAS	0.20	18,000	100%		0%		0%	18,000
Associate Director, 6th Street HRC	1.00	63,000	100%	· · · ·	0%	-	0%	63,000
Health Educator	7.75	426,250	100%	-	0%		0%	426,250
Mobile Health Educator	0.50	27,500	100%	-	0%		0%	27,500
Health Educator/Inventory Team Lead	1.00	55,000	100%	-	0%	- 2	0%	55,000
Inventory Associate/Health Educator	1.00	55,000	100%	-	0%		0%	55,000
Total FTE & Total Salaries	11.60	671,050	100%		0%	-	0%	671,050
Fringe Benefits	25%	167,763	100%	· · · · ·	0%	-	0%	167,763
Total Personnel Expenses		838,813	100%	-	0%	-	0%	838,813
		ller	8/	1		11 mar 11 mar 1		
Operating Expenses	_	Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Total Occupancy		33,214	100%	-	0%		0%	33,214
Total Materials and Supplies		24,564	100%		0%		0%	24,564
Total General Operating	_	12,500	100%	-	0%	-	0%	12,500
Total Staff Travel	_	-	0%		0%		0%	
Consultants/Subcontractor:		-	0%	-	0%	-	0%	
Other (specify):		-	0%	-	0%	-	0%	-
			0%		0%	1	0%	-
			0%	-	0%		0%	
	_		0%		0%		0%	
			0%		0%		0%	
	_		0%		0%	-	0%	
Total Operating Expenses	_	70,278	100%	-	0%		0%	70,278
Capital Expenses		Expenditure	%	Expenditure	%	Expenditure	%	Contract Total
Capital Expenditure 1	-	-	0%	-	0%		0%	
Capital Expenditure 2			0%		0%		0%	
Total Capital Expenses		-	0%	-	0%	-	0%	
Tatal Direct Evenence		000.004	100%		0%		0%	000.001
Total Direct Expenses Indirect Expenses	10%	909,091 90,909	100%	-	0%		0%	909,091
TOTAL EXPENSES	10 76	1,000,000	100%		0%		0%	1,000,000
Units of Service (UOS) per Service			-	-		· ·		12
Cost Per Unit of Service by Service	Mode	83,333.34		-				1
Number of Contacts (NOC) per Service	a Mode	36,960				Automatical and the		

BUDGET JUSTIFICATION

Contractor Name San Francisco AIDS Foundaiton Program Name: Syringe Access & Disposal Services Appendix #: B-3b Fiscal Year: 18-19

1a) SALARIES

structure and pro	ensuring the imple vision of profession	onal oversight to c	gement and evaluation of the reate a service delivery cont s, including HIV needs of ga	inuum that is
Master's degree also include three	e years' experienc	e in supervisory c	ness or related disciplines. F apacity, especially in HIV pre evelopment experience.	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$203,000.00	0.10	12	1	\$ 20,300
	ensuring the imple		pement and evaluation of the reate a service delivery cont	

responsiv Brief description of job duties: men.	ve to the current health ar	nd well-being need	s, including HIV needs of ga	y and bisexual
	e in a supervisory capac	ity, especially in H	ness or related discipline; thr IV prevention and demonstra	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$120,00	0.00 0.05	12	1	\$ 6,000

Staff Position 3: Brief description of job duties:	Provides oversi strategic goals partnerships wit training full-time purchasing exc coordinates ren	ight and manager in alignment with th other HIV/AIDS and temporary s hange supplies. noval with waster	agency and city obje and Harm Reduction taff in appropriate e Organizes removal	e sites. Develops annual depar ectives. Builds and maintains on agencies. Responsible for s xchange protocol. Responsible of biohazard waste from sites a repare reports for compliance	effective scheduling and a for and
Minimum qualifications:	program manage	ement, supervisi		ug users required. Associates rred. Must hold HIV test couns job.	
Annual Salary:	i ka	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

0.20

12

1

\$90,000.00

Harm Reduction education (e.g. curriculum deve	include site operat n Center; supervisio overdose preventio alopment; managing	tions (schedules, ling health educator on, vein care) and g syringe access,	ogistics, QA, programming) of s, volunteers, and interns; c referrals; program design, fa disposal, and lounge space; and providing crisis Intervent	onducting healt icilitation, and linking
required. Assoc understanding of	tiates Degree prefe of harm reduction p of HIV/HCV disease	rred, experience u ractices and princ e prevention and t	ly marginalizad, or homeless sing motivational Interviewin ples, experience doing healt reatment. Supervisory exper ce required.	g and strong th education.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$63,000.00	1.00	12	1	\$ 63,00

18,000

\$

Staff Position 5: Health Educato	Nr .				
Responsibilities i referrals; program disposal, and lou	include conducting m design, facilitatio	on, and curriculum participants to Hi	(e.g. overdose prevention, v development; supports syri V/HCV testing and linkage to	nge a	ccess,
Minimum, 1-3 ye			users. Associates Degree pri adge of HIV/HCV prevention		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$55,000.00	7.75	12	1	\$	426,25
Staff Position 6: Mobile Health E	Educator			-	
encampment out Brief description of job duties: intervention supp	treach; overseeing port. ars experiencing v	a team of street o	counseling) through mobile putreach volunteers; and pro users. Associates Degree pre edge of HIV/HCV prevention	viding	d. Harm
Annual Salary:	x FTE:	x Months per Year:	Annualized (If less than 12 months):		Total
\$55,000.00	0.50	12	1	\$	27,50
	Include conducting		e.g. overdose prevention, nge space; linking participant		
referrals; support testing and linkag Brief description of job duties: Street sites; support Minimum, 1-3 ve	Include conducting ts syringe access, ge to care; and pro ervises volunteers ars experiencing v	g health education disposal, and iour oviding crisis inter ; and coordinates working with drug t	nge space; linking participant vention support. Supports mo supply inventory. users. Associates Degree pro	ts to Hobile a	HIV/HCV and 6th
referrals; support testing and linkag Brief description of job duties: Street sites; supp	Include conducting ts syringe access, ge to care; and pro ervises volunteers ars experiencing v	g health education disposal, and iour oviding crisis inter ; and coordinates working with drug t	nge space; linking participant vention support. Supports mo supply inventory. users. Associates Degree pro edge of HIV/HCV prevention	ts to Hobile a	HIV/HCV and 6th
referrals; support testing and linkag Brief description of job duties: Street sites; support Minimum, 1-3 ve	Include conducting ts syringe access, ge to care; and pro ervises volunteers ars experiencing v	g health education disposal, and iour oviding crisis inter ; and coordinates working with drug t	nge space; linking participant vention support. Supports mo supply inventory. users. Associates Degree pro	ts to H oblie a sferre /bx pre	HIV/HCV and 6th
referrals; support testing and linkag Brief description of job duties: Street sites; support Minimum, 1-3 ye Minimum qualifications: reduction, motive	Include conductin ts syringe access, ge to care; and pro ervises volunteers ars experiencing v ational interviewing	g health education disposal, and lou oviding crisis inter- ; and coordinates working with drug to skills, and knowle x Months per	nge space; linking participant vention support. Supports mo supply inventory. users. Associates Degree pro edge of HIV/HCV prevention Annualized (if less than	ts to H oblie a sferre /bx pre	HIV/HCV and 6th d. Harm eferred. Total
Annual Salary: Staff Position 8: Inventory Assoc Responsibilities i upport Staff Position 8: Inventory Assoc Responsibilities i referrals; support testing and linkes Street sites; support	Include conductin ts syringe access, ge to care; and pro- arvises volunteers ars experiencing v ational interviewing x FTE: 1.00 clate/Health Educ include conducting te syringe access, ge to care; and pro- arvises volunteers d transport.	g health education disposal, and lou oviding crisis inten- ; and coordinates working with drug to skills, and knowle x Months per Year: 12 cator health education disposal, and lou oviding crisis inten ; and assists Inver	nge space; linking participant vention support. Supports mo supply inventory. users. Associates Degree pro- edge of HIV/HCV prevention. Annualized (if less than 12 months): 1 (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo ntory Team Lead with supply	ts to Hobile a aferre Ax pro \$ sein ca ts to Hobile a inver	HIV/HCV and 6th d. Harm efemed. Total 55,000 are) and HIV/HCV and 6th mory
Annual Salary: Staff Position 8: Inventory Assoc Responsibilities i upport Staff Position 8: Inventory Assoc Responsibilities i referrals; support testing and linkes Street sites; support	Include conducting ts syringe access, ge to care; and pro- arvises volunteers ars experiencing v ational interviewing <u>x FTE:</u> 1.00 clate/Health Educ include conducting ts syringe access, ge to care; and pro- arvises volunteers t transport. ars experiencing v	g health education disposal, and lou oviding crisis inten- ; and coordinates vorking with drug to skills, and knowle x Months per Year: 12 cator health education disposal, and lou oviding crisis inten ; and assists Inver- vorking with drug to skills, and knowle	Inge space; linking participant vention support. Supports mo supply inventory. Isers. Associates Degree pro- edge of HIV/HCV prevention/ Annualized (if less than 12 months): 1 (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo ntory Team Lead with supply users. Associates Degree pre- edge of HIV/HCV prevention/	ts to H oblie a sferre /tx pro \$ sein ca ts to H oblie a inver	HIV/HCV and 6th d. Harm eferred. Total 55,000 are) and HIV/HCV and 6th mtory d. Harm
Annual Salary: Staff Position 8: Inventory Assoc Responsibilities i street sites; super Minimum, 1-3 ye Minimum, 1-3 ye \$55,000.00 Staff Position 8: Inventory Assoc Responsibilities i referrals; support testing and linkag Street sites; super testing and linkag Street sites; super Street si	Include conducting ts syringe access, ge to care; and pro- arvises volunteers ars experiencing v ational interviewing <u>x FTE:</u> 1.00 clate/Health Educ include conducting ts syringe access, ge to care; and pro- arvises volunteers t transport. ars experiencing v	g health education disposal, and lou oviding crisis inten ; and coordinates vorking with drug to skills, and knowle x Months per Year: 12 cator health education disposal, and lou oviding crisis inten ; and assists Inver-	nge space; linking participant vention support. Supports mo supply inventory. users. Associates Degree pro edge of HIV/HCV prevention/ Annualized (if less than 12 months): 1 (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo ntory Team Lead with supply users. Associates Degree pre-	ts to H bblie a ferre /tx pre /tx pre s to H bblie a inver eferre /tx pre	HIV/HCV and 6th d. Harm eferred. Total 55,000 are) and HIV/HCV and 6th mtory d. Harm

1b) EMPLOYEE FRINGE BENEFITS:

Component	Cost	
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 Fringe Benefit:	167,763

Fringe Benefit %: 25%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 838,813

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 mc.	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.	5	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	e 291.67	3,500
1				
<u> </u>			Fotal General Operating:	12,500

Staff Travel:

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
		A CONTRACTOR OF	
	Total Com	eultante/Subcontractor	

Other:

Expense Item	Brief Description	Rate	Cost
		Total Other:	
		ERATING EXPENSES:	70,27

3) CAPITAL EXPENDITURES: (If needed. A unit valued at \$5,000 or more)

Capital Expenditure Item	Brief Description	Cost
	TOTAL CAPITAL EXPENDITURES	
	TOTAL DIRECT COSTS	909,091

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%
 90,909

 of total direct costs.

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

TOTAL EXPENSES: 1,000,000

Appendix D Reserved



San Francisco Department of Public Health Protected Information Privacy and Security Agreement

PROTECTED INFORMATION Privacy and Security Agreement

San Francisco AID Foundation ("CONTRACTOR") hereby acknowledges and agrees to the following privacy and security obligations and commitments in regard to access to the Department of Public Health's (SFDPH) Protected Information:

a. Compliance with Federal and State Laws. CONTRACTOR shall protect the privacy and provide for the security of SFDPH's medical information or protected health information ("PHI") (collectively, "Protected Information") 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").

b. Attestations. Except when SFDPH's data privacy officer exempts CONTRACTOR in writing, the CONTRACTOR shall complete the following forms, attached and incorporated by reference as though fully set forth herein, SFDPH Attestations for Privacy (Attachment 1), Data Security (Attachment 2), and Compliance (Attachment 3) within sixty (60) calendar days from the execution of the Agreement. If SFDPH makes substantial changes to any of these forms during the term of the Agreement, the CONTRACTOR will be required to complete SFDPH's updated forms within sixty (60) calendar days from the date that SFDPH provides CONTRACTOR with written notice of such changes. CONTRACTOR shall retain such records for a period of seven years after the Agreement terminates and shall make all such records available to SFDPH within 15 calendar days of a written request by SFDPH.

c. Appropriate Safeguards. CONTRACTOR shall take the appropriate security measures to protect the confidentiality, integrity and availability of Protected Information that it accesses, creates, receives, maintains, or transmits.

d. Notification of Breach, Security Threats, and Unpermitted Uses or Disclosures. CONTRACTOR shall notify SFDPH in writing within 5 calendar days of any breach of Protected Information; any reasonable suspicion or detection of security incidents related to Protected Information and any use or disclosure of data in violation of any applicable federal or state laws by CONTRACTOR or its agents or subcontractors. SFDPH will notify CONTRACTOR of any reasonable suspicion or detection of security incidents that could compromise SFDPH systems and confidentiality. In such security incidents, both parties will work collaboratively to mitigate the situation and to identify a solution. APPENDIX E



San Francisco Department of Public Health

Protected Information Privacy and Security Agreement

e. Notification of Breach to Regulatory Agencies. CONTRACTOR acknowledges and agrees that, as a Covered Entity and health care provider, it has an obligation independent of SFDPH to notify regulatory agencies and patients of privacy breaches caused by the acts or omissions of its employees or agents or related to the security of its electronic systems.

f. Corrective Action. CONTRACTOR shall take prompt corrective action to remedy any breach of Protected Information, mitigate to the extent practicable any harmful effect of a use or disclosure of Protected Information, and take any other action required by applicable federal and state laws and regulations pertaining to such breach.

g. Protection Against Threats. CONTRACTOR shall protect against any reasonably anticipated threats or hazards to the security or integrity of the Protected Information.

h. Protection Against Unpermitted Uses or Disclosures. CONTRACTOR shall protect against any reasonably anticipated access, uses or disclosures of the Protected Information that are not permitted or required under federal or state law.

i. Security Violations. CONTRACTOR shall maintain written policies and procedures to prevent, detect, contain, and correct security violations, including risk analysis, risk management, sanctions, and information system activity review.

j. Privacy and Security Officers. CONTRACTOR shall maintain qualified Privacy and Security Officers.

k. Appropriate Access. CONTRACTOR shall ensure that all CONTRACTOR employees and agents have appropriate access to electronic Protected Information and shall prevent those employees and agents who do not need access from obtaining it. This includes procedures for authorizing and supervising access, workforce clearance, and personnel termination procedures.

I. Training. CONTRACTOR shall provide privacy and security awareness and training for all employees and agents, including management. This shall include initial training and periodic reminders and updates, including requirements and obligations under federal and state law. Training shall cover protecting against viruses and malicious software and password management.

m. Security Incidents. CONTRACTOR shall maintain policies and procedures to report, mitigate and document Security Incidents.

n. Periodic Evaluations. CONTRACTOR shall conduct periodic evaluations of the security implementation against the Security Standards and environmental or operational changes affecting the security of electronic Protected Information.

APPENDIX E



San Francisco Department of Public Health

Protected Information Privacy and Security Agreement

o. Facility Access Controls. CONTRACTOR shall maintain facility access controls, which limit physical access to the provider's electronic information systems and the facilities in which they are housed, while ensuring that authorized access is allowed. These controls include a facility security plan, access control procedures, and facility maintenance.

p. Workstation Use. CONTRACTOR shall maintain security policies and procedures on workstation use, including the physical surroundings of workstations that permit access to electronic Protected Information.

q. Access Controls. CONTRACTOR shall maintain access controls to restrict access to persons or processes that have been granted access rights. These include unique user identification, emergency access procedures, and automatic log off of systems after no more than a ten minute period of inactivity.

r. Audit Control Mechanisms. CONTRACTOR shall comply with SFDPH requests to audit appropriateness of usage of SFDPH electronic records systems. Quarterly, SFDPH shall provide CONTRACTOR with a list representing a random 1% of patient records that were accessed by CONTRACTOR staff during the fiscal year. CONTRACTOR shall develop an audit tool to ensure that the SFDPH electronic records systems are accessed only for treatment reasons, shall conduct quarterly audits, and shall provide the results of these audits to the SFDPH Chief Integrity Officer within 14 calendar days of receipt.

s. Civil and Criminal Penalties. CONTRACTOR understands and agrees that it may be subject to civil or criminal penalties for the unauthorized use, access or disclosure of Protected Information in accordance with the HIPAA Regulations and the HITECH Act including, but not limited to, 42 U.S.C. 17934 (c) and other state and federal laws.

t. Deprovision of Access. Within 24 hours of expiration or earlier termination of the Agreement, CONTRACTOR shall provide SFDPH with a list of all employees and other individuals or entities that have access to SFDPH's electronic records systems. Within 48 hours of expiration or earlier termination of the Agreement, SFDPH shall ensure that all access to SFDPH's electronic records systems is deprovisioned with respect to all individuals and entities on CONTRACTOR's user list.

u. Data Destruction. When no longer needed, CONTRACTOR must destroy all Protected Information received from SFDPH or obtained on SFDPH's behalf that CONTRACTOR has in its possession using the Gutmann or U.S. Department of Defense (DoD) 5220.22-M (7 Pass) standard, or by degaussing. Media may also be physically destroyed in accordance with NIST Special Publication 800-88.

v. Survival. The obligations of CONTRACTOR under this Appendix shall survive the expiration or termination of this Agreement.

San Francisco Department of Public Health



Protected Information Privacy and Security Agreement

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

Attachment 1 – SFDPH Privacy Attestation, version (06-07-2017) Attachment 2 – SFDPH Data Security Attestation, version (06-07-2017) Attachment 3 – SFDPH Compliance Attestation, version (06-07-2017)

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

ATTACHMENT 1

Contractor Name:	Contractor	2
	City Vendo	or 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 YOUR ORGANIZ	ITION	Yes	No*		
Α	Have formal Privac	y Policies that comply with the Health Insurance Portability and Accountability Act (HIPAA)?				
В	Have a Privacy Offi	ave a Privacy Officer or other individual designated as the person in charge of investigating privacy breaches or related incidents?				
	If Name & yes: Title:	Phone # Email:				
C						
D	a seals have a second se		•			
E						
F	 Require health information Privacy 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 privacy training materials are available for use; contact OCPA at 1-855-729-6040.] Have proof that employees have signed a form upon hire and annually thereafter, with their name and the date, acknowledging that they have received health information privacy training? [Retain documentation of acknowledgement of trainings for a period of 7 years.] Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain , transmit, or access SFDPH's health information? Assure that staff who create, or transfer health information (via laptop, USB/thumb-drive, handheld), have prior supervisorial authorization to do so AND that health information is only transferred or created on encrypted devices approved by SFDPH Information Security staff? 					

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 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?		
1	Document each disclosure of a patient's/client's health information for purposes other than treatment, payment, or operations?		
ĸ	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?		

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:			
or designated person	(nrint)			
et accientes person	and the second s	Signature	Date	8

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				
by OCPA	(print)	Signature	Date	

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

San Francisco Department of Public Health (SFDPH) Office of Compliance and Priv

ATTACHMENT 2

Contractor Name:		Contractor	1. 2
	the second s	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]					
В	Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?					
	Date of last Data Security Risk Assessment/Audit:	1.1				
	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:					
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.]					
н						
1	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:		1.1	
Officer or designated person				
entited of designated person	1	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	1.		
OCPA	(print)	Second and	1.011	
OCA		Signature	Date	

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

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

ATTACHMENT 3

Contractor Name:

Contractor City Vendor ID

COMPLIANCE ATTESTATION FOR HIPAA COVERED ENTITIES

All business partners of SFDPH that are HIPAA Covered Entities must have a formal compliance program and demonstrate Integrity in their business practices. 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.	DOES Y	OUR ORGANIZATION			Yes	No*
Α	Have	a formal Compliance Program that meets Offic	e of the Inspector General (OIG) require	nents?		
в	Have	a Compliance Officer or other individual design	nated as the person in charge of handling	compliance matters?		
	lf yes:	Name & Title:	Phone #	Email:		
С	Requi	re Compliance Training upon hire and annually	thereafter for all employees? [Retain tra	aining materials for 7 years.]		
D	Have	proof that employees have completed complia	nce training? [Retain proof for 7 years.]			
E	and the second sec	a Code of Conduct or Ethics policy that include liance concerns. [Retain versions for 7 years.]	s a non-retaliation clause and a mechani	sm for staff to confidentially and anonymously report potential		
F	Have proof that employees upon hire, and annually thereafter, have signed agreement to your organization's Code of Conduct? [Retain proof for 7 years.]					
G	G Have mechanisms in place to identify and promptly respond to compliance deficiencies (including reporting any deficiencies to SFDPH) that could jeopardize your organization's continued participation in government health care programs including Medicare or Medi-Cal funded programs?					
н		rstand and comply with state and federal regul upported by the required medical record docum		edi-Cal programs and assure that bills submitted to such programs		
ł	the second second	cize the SFDPH Compliance and Privacy Hotline ctions in staff areas where it can be seen?	number (1-855-729-6040) or the City's \	Vhistleblower Program including posting a notice of whistleblower		
J	the C mem	alifornia Department of Health Care Services (D	OHCS) to ensure that any employee, temp	spector General (OIG), General Services Administration (GSA), and borary employee, volunteer, consultant, or governing body ices who is on any of these lists is excluded from (may not work in)		
K	and the second	hire and re-enrollment of clinical providers, ch billed in the name of a deceased provider. [Re	the second se	Death Master File to ensure that Medicaid or Medicare is not		
L	Requi	re (or will require if/when applicable) subcontr	ractors that are HIPAA Covered Entities t	o comply with all applicable requirements in this Attestation?		
- 5			and the second state of the second state of the		-	

II. Under penalty of perjury, I attest that I have authority to sign on behalf of my organization and that, to the best of my knowledge, the information herein is true and correct:

Attested	Name: (print)	Title:	Signature:	Date:
by:				

III. *EXCEPTIONS: If you answered "ND" to any question or believe a question is Not Applicable, please contact OCPA for a consultation at 1-855-729-6040 or compliance.privacy@sfdph.org. All "No" or "N/A" answers must be reviewed and approved by OCPA below.

Approved	Name: (print)	Title:	Signature:	Date:
by OCPA:				
APPEND	X F-1c			
---------------	---------			
07/01/17 - 06	8/30/18			
P	AGE A			

Contractor: San Francisco AIDS Found	ation				Contra 10000	02634	i I		A-1JUL1	
Address: 1035 Market Street, Suite 4					10000	02001	1 1	-	A-IJULI	1
	80			Contract Purchase Order No:				-		
San Francisco, CA 94103				Con	tract Put	chase O	rder No:			_
Telephone: 415-487-3000		-				Fundlan	Source:	-	eneral Fi	have
Fax: 415-487-3009		CH	ED			unging	aource.[G	eneral Pl	ina
Fax: 413-407-3009		UL	Er		-	and Card	e/Detail:	-		-
Barrow News Contrast Assess Condered					G	ant coo	en perait: [-		
Program Name: Syringe Access Services							. in	-		-
100 m 1 m					Pro	Ject Cod	e/Detail:		-	_
ACE Control #:										
						Invoice	Period:	07/1	/17 - 07/	31/17
									1	1.10
						FINAL	Invoice	1.1.1	(check if	Yes)
	TO	TAL	DELIVE	DED	DELIV	EDED	%	DE	REM	INING
		RACTED	THIS PE		TOE		TOT			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOG	UOS	NOC
Syringe Access Services	5,906	44,300	1-21	1.1	10000	14.000	1.00		5,906	44,300
Program Coordination	12	N/A	1			-		N/A	12	N/A
									1	
				-	-		-	-		-
	-	-			-		-	-		-
		-	-	-		-			1	
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		44300	1			1		7	1	44,300
EXPENDITURES			EXPEN		EXPE		% (INING
		GET	THIS PE	RIOD	TOD	ATE	BUD	GET		ANCE
Total Salaries (See Page B)	\$415						-		\$415,1	
Fringe Benefits	\$103	the second se	-	_	-			_	\$103,7	
Total Personnel Expenses Operating Expenses:	2010	,938		_				_	\$010,8	38.00
Occupancy-(e.g., Rental of Property, Utilities,	\$70	792			-		-		\$70 7	92.00
Building Maintenance Supplies and Repairs)	- TO,	102						_	\$10,1	82.00
building manner and ouppines and repairs?							-	-		
Materials and Supplies-(e.g., Office,	\$536	.189	-		-			-	\$536,	89.00
Postage, Printing and Repro., Program Supplies)	1	-	1.	- 1	-		-			
the second comments of the second second				i				-		
General Operating-(e.g., Insurance, Stelf	\$8,3	375			į				\$8,37	75.00
Training, Equipment Rental/Maintenance)				1					1	
				1						
Staff Travel - (e.g., Local & Out of Town)	-							_		
Consultant/Subcontractor	0001	000		-	-				\$601.9	00.00
consultant/subcontractor	\$601	,000		-					\$001,8	00.00
Other - (Meals, Audil, Transportation Reimb,										
Stipends, Facilitators)				-	-	-			-	
			1						1.2	-
Total Operating Expenses	\$1,21	7,256	4				1		\$1,217	256.00
Capital Expenditures						1				
TOTAL DIRECT EXPENSES	\$1,73						-		\$1,736	
Indirect Expenses	\$173				· · · · ·				\$173,6	
TOTAL EXPENSES	\$1,90	9,813					-	+1	\$1,909	813.00
LESS: Initial Payment Recovery					NOTES					
Other Adjustments (Enter as negative, if approp	niate)		-							
REIMBURSEMENT										

I cartly that the information provided above is, to the bast 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 Attn: Contract Payments	By: (DPH Authorized Signatory)	Date:

APPENDIX F-1c 07/01/17 - 06/30/18 PAGE B

Involce Number

A-1JUL17

General Fund

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

Contract Purchase Order No:	

Fund Source:

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

Program Name: Syringe Access Services

ACE Control #:

Grant Code/Detail:	

Project Code/Detail:

Invoice Period: 07/1/17 - 07/31/17

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	BALANCE
Prgms & Ops Director	0.051	\$5,250	THUT LITED	TOPRIL	LODGET	\$5,250.00
Dir. Behavioral Health Svc	0.05	\$6,000				\$6,000.00
Dir. Gov't Contracts	0.05	\$4,900			1	\$4,900.00
Data Manager	0.05	\$3,750				\$3,750.00
SAS Director	0.75	\$67,500				\$67,500.00
Logistics Inventory Mgr	1.00	\$62,000				\$62,000.00
Logistics Associates	2.00	\$110,000				\$110,000.00
SSE/Vol Coordinator	0.75	\$46,500		-		\$46,500.00
Health Educator	1.75	\$96,250				\$96,250.00
Comm. Engagement & Kit Packing A	0.25	\$13,000				\$13,000.00
	-					
	-					
	-					
	-					
	-					-
			-	-		
	-				-	
TOTAL SALARIES	6.70	\$415,150				\$415,150.00

I cardly 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-1d 07/01/17 - 06/30/18 PAGE A

1000002634		A-1JUL1			
Contract Purchase Order No:					
Funding	Source:	General F	und		
Grant Code	e/Detail:		_		
Project Code	e/Detail:		_		
Invoice	Period: 0	7/1/17 - 07/	/31/17		
FINAL	Invoice	(check i	f Yes)		
DELIVERED TO DATE	% OF TOTAL	DELIVE	AINING		
UOS NOC	UOS NO		NOC		
		12	N/A		
		-	-		
			-		
		-	-		
		-	1-		
NOS					
NOC	NO N//		NOC		
	1907		1 19/3		
EXPENSES TO DATE	% OF BUDGET		AINING		
		-	_		
	-				
		\$61,8	301.00		
		_			
		\$93.3	300.00		
		\$28,2	200.00		
			-		
	-				
		\$183,	301 00		
		#100,			
		\$183	301.00		
IOTES:		and the second			
0.002.00					
10	TES:	TES:	\$18,3		

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: Signature:

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

APPENDIX F-1d 07/01/17 - 06/30/18 PAGE B

A-1JUL17

General Fund

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

Contract Purchase Order No:

Fund Source:

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

Program Name: Syringe Access Services

ACE Control #:

Grant Code/Detail:		

Project Code/Detail:

Invoice Period: 07/1/17 - 07/31/17

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
1	1 1				1	
		The providence of the second s				
		read in a second				
			· · ·			
TOTAL SALARIES						

Certify that the information provided above is, to the bast 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-1e 01/01/17 - 12/31/17 PAGE A

Contractor: San Francisco AIDS Foundation				Contract ID # 1000002634					A-1JAN17		
Address: 1035 Market Street, Suite 400 San Francisco, CA 94103 Telephone: 415-487-3000				Con	tract Pu	chase O	rder No:	-			
		-		1		Funding	Source:		CDC	-	
Fax: 415-487-3009		CH	EP					-		-	
Program Name: Syringe Access Services				1	G	rant Cod	le/Detail:		_	-	
ACE Control #:					Pro	ject Cod	e/Detail:	-	HCPD90)	
ACE Control #:						Invoice	Period:	01/1	/17 - 01/	31/17	
						FINAL	. Invoice	1	(check if	Yes)	
		TAL		ERED		ERED		OF TAL		RABLES	
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	
Program Coordination	12	N/A				-			12	N/A	
	_			-	-					-	
						-	-				
						-		-			
				-	-		-	-	-	-	
	-			-				-		-	
	-	NOC		NOC		NOC		NOC		NOC	
lumber of Clients for Appendix	5	N/A		(L. J. J.		1.1	1.000	N/A	10. TO 10.	N/A	
TYPENDITURES	BUD	GET		RIOD		NSES		OF GET		AINING	
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)	-				1	-			-		
General Operating-(e.g., Insurance, Staff	\$4,5	545	-		-			_	\$4,54	15.00	
Training, Equipment Rental/Maintenance)	×4		_		1						
Staff Travel - (e.g., Local & Out of Town)				- 1	-				2	_	
Consultant/Subcontractor	-	-			1.100	-	-				
Other and the second second									-	-	
Other - (Meals, Audit, Transportation Relmb,										-	
Stipends, Facilitators)			-		-				-		
Total Operating Expenses	\$4,5	45		-					\$4,54	5.00	
Capital Expenditures			1								
OTAL DIRECT EXPENSES	\$4,5								\$4,54		
Indirect Expenses	\$4			1					\$45		
		0.0						1.1	\$5.00	00.00	
	\$5,0	000			TTT TTT TTT				40100		
TOTAL EXPENSES LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if appropri		00			NOTES	:			40,00		

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:		
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-1e 01/01/17 - 12/31/17 PAGE B

Involce Number

A-1JAN17

CDC

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

Contract Purchase Order No:

Fund Source:

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

Program Name: Syringe Access Services

ACE Control #:

Grant Code/Detail:	

Project Code/Detail: HCPD90

Invoice Period: 01/1/17 - 01/31/17

FINAL Invoice (check if Yes)

ERSONNEL	EXPENDITURE:	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	BALANCE
ENGOMMEE	1 1	BALLAN	THOTENOD	TODATE	BODGET	BALANCE
					1 1	
					+ +	
					1 1	
					1 1	
and the second s						
					1	
				1		
				r		
				-		

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 diad 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-1f 07/01/18 - 06/30/19 PAGE A

Contractor: San Francisco AIDS Foundation Address: 1035 Market Street, Suite 400				-	102634		-	A-1JUL1		
									TT TODE	
San Francisco, CA 94103				Con	tract Pu	chase O	rder No:			
Telephone: 415-487-3000		lou				Funding	Source:	G	eneral F	und
Fax: 415-487-3009		CH	EP					-		
Program Name: Syringe Access Services			-				e/Detali:			
ACE Control #:					Pro	ject Cod	e/Detail:			
10.000 m						Invoice	Period:	07/1	/18 - 07/	31/18
						FINAL	Invoice		(check i	f Yes)
	CONTR	TAL	DELIV THIS P	ERIOD	TOT	ATE	TO	OF	DELIVE	AINING
DELIVERABLES Syringe Access Services	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Program Coordination	5,906	44,300 N/A		11.00		-	-	N/A	5,906	44,300 N/A
	14	ingr s	1221				-	TWC	14	19/0
				15.001	1	-	1		11 - 14	C
				1	1	1	1	1 1 1		
		NOC		NOC		NOC		NOC		NOC
lumber of Clients for Appendix		44300	1				1000	1	1.1.1.1	44,300
EXPENDITURES	BUIL	GET	EXPE			NSES		OF		AINING
Total Salaries (See Page B)	\$435		THIS P	EROD	101	I	BUL	GET		950.00
Inge Benefits	\$108					-	-			988.00
Total Personnel Expenses	\$544	938								938.00
Operating Expenses:								11		
Occupancy-(e.g., Rental of Property, Utilities,	\$74,	899							\$74,8	\$99.00
Building Maintenance Supplies and Repairs)				_			-		-	
Materials and Supplies-(e.g., Office,	\$532	872	-	-					\$532	872.00
Postage, Printing and Repro., Program Supplies)	4002	der a							WOUL,	012.00
									-	
General Operating-(e.g., Insurance, Staff	\$9,	143	1					1	\$9,1	43.00
Training, Equipment Rental/Maintenance)					-		-	1		-
Staff Travel - (e.g., Local & Out of Town)			-				_	-		
Consultant/Subcontractor	\$616	,947				_		-	\$616,	947.00
Other - (Mesis, Audit, Transportation Reimb,	-				-					
Stipends, Facilitators)			-						1.	
Total Operating Expenses	\$1,23	3,861	1		_	-	-		\$1,233	,861.00
Capital Expenditures		0 100								
		8.799		1	-				\$1,778	
OTAL DIRECT EXPENSES	\$1,77					1			6477	00 00
INDIRECT EXPENSES	\$177	,880			-		-		\$177,	
TOTAL DIRECT EXPENSES		,880			NOTES				\$1,956	

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 / Involce Processing 1380 Howard Street, 4th Floor, Suite 423 San Francisco, CA 94103	By:	Date:
1	Attn: Contract Payments	(DPH Authorized Signatory)	

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

Invoice Number

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

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

Program Name: Syringe Access Services

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

ACE Control #:

Project Code/Detail:

Invoice Period: 07/1/18 - 07/31/18

FINAL Involce (check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
	and in the local division of the local divis	the second se	THIS PERIOD	TODATE	BUDGET	the second se
Prgms & Ops Director	0.05	\$5,250				\$5,250.00
Dir. Behavloral Health Svc	0.05	\$6,000			-	\$6,000.00
Dir. Gov't Contracts	0.05	\$4,900			-	\$4,900.00
Data Manager	0.05	\$3,750			-	\$3,750.00
SAS Director	0.75	\$67,500				\$67,500.00
Logistics Inventory Mgr	1.00	\$62,000		-		\$62,000.00
Logistics Associates	2.00	\$110,000				\$110,000.00
SSE/Vol Coordinator	0.75	\$46,500				\$46,500.00
Health Educator	1.75	\$96,250	-			\$96,250.00
Comm. Engagement & Kit Packing A	0.65	\$33,800				\$33,800.00
	-					
						-
	=					
	_					
TOTAL SALARIES	7.10	\$435,950				\$435,950.00

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-1g 07/01/18 - 06/30/19 PAGE A

Contractor: San Francisco AIDS Foundation						02634			voice Num A-1JUL1	
Address: 1035 Market Street, Suite 40 San Francisco, CA 94103 Telephone: 415-487-3000				Con	tract Pur	chase O	rder No:	-	_	-
						Funding	Source:	G	eneral Fi	und
Fax: 415-487-3009		CH	EP		G	rant Cod	e/Detail:			
Program Name: Syringe Access Services					Pro	ject Cod	e/Detail:	-		
ACE Control #:						Involce	Period:	07/1	/18 - 07/	31/18
							Invoice	011	(check if	
		TAL		ERED		TINAL	%		REM	AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Program Coordination	12	N/A				1			12	N/A
			1					1		
									1	
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		100				-				
Jumber of Cliente for Annondiv		NOC	1	NOC		NOC	-	NOC		NOC
Number of Clients for Appendix	_	N/A	-					N/A		N/A
EXPENDITURES	BUD	GET	EXPE THIS P			NSES		OF		AINING
Total Salaries (See Page B)					1				1	
Fringe Benefits									1	
Total Personnel Expenses			1			-				
Operating Expenses:										
Occupancy-(e.g., Rental of Property, Utilities,	\$63,	801							\$63,8	01.00
Building Maintenance Supplies and Repairs)	-			Ii	1					1
Materials and Supplies-(e.g., Office,	\$93,	300	-		-		-		\$93,3	00.00
Postage, Printing and Repro., Program Supplies)					-			_	-	
Concert Concertion (\$30,	700		-	-	-			600 7	00 00
General Operating-(e.g., Insurance, Staff	\$30,	103			-		-	-	\$30,7	83.00
Training, Equipment Rental/Maintenance)									-	
Staff Travel - (e.g., Local & Out of Town)										
Chart Traver - (e.g., Looal & Cut of Tomin					-				-	
Consultant/Subcontractor				-	-					_
Other - (Meals, Audit, Transportation Relmb,										
Stipends, Facilitators)				1		100				
	-									
Total Operating Expenses	\$187	,884		1			-		\$187,8	84.00
Capital Expenditures	-							1		
TOTAL DIRECT EXPENSES	\$187								\$187,8	
Indirect Expenses	\$18,		1				-	-		88.00
TOTAL EXPENSES	\$206	,672							\$206,6	372.00
LESS: Initial Payment Recovery					NOTES					
Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)	-	-		1.11					

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	Bv	Date:
	Atin: Contract Payments	(DPH Authorized Signatory)	

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

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

	Involce Number	
	A-1JUL18]
Contract Purchase Order No:]
Fund Source:	General Fund]
Grant Code/Detall:		1

Program Name: Syringe Access Services

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

ACE Control #:

Project Code/Detail:

Invoice Period: 07/1/18 - 07/31/18

FINAL Invoice (check if Yes)

FTE	CALADY	EXPENSES	EXPENSES	% OF	REMAINING
	SALARY	THIS PERIOD	TODATE	BUDGET	BALANCE
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			1		1
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				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:

Title:

APPENDIX F-1h 01/01/18 - 12/31/18 PAGE A

Contractor: San Francisco AIDS Founda Address: 1035 Market Street, Suite 40					Contra 10000	02634	1		voice Nun A-1JAN1	_
San Francisco, CA 94103				Con	tract Pur	chase O	Irder No:	-		
Telephone: 415-487-3000 Fax: 415-487-3009		CH	EP		1.1	Funding	Source:		CDC	
					Gr	rant Cod	le/Detail:	ſ		
Program Name: Syringe Access Services					Pro	Ject Cod	e/Detail:	1	HCPD9	0
ACE Control #:						Inclusion	Period:	0.014	/18 - 01/	24/40
								01/1	110-011	31/10
DELIVERABLES	CONTR	TAL RACTED NOC	DELIVE THIS PE UOS		DELIV TO D UOS	ERED		OF TAL NOC		Yes) AINING RABLES NOC
Program Coordination	12	I N/A	005	NUC	005	NOC	005	NUC	12	I N/A
	16	19/5		-				-	16	19/0
								1		-
		-		*				1	1	-
		-			-	-				-
				NOC		NOC		NOC		NOC
Number of Clients for Appendix	_	NOC N/A	U I				1.00	N/A		N/A
	BUC	and the second se	EXPEN THIS PE	ISES	EXPE TO D			OF GET		AINING ANCE
EXPENDITURES Total Salaries (See Page B)	BUD	N/A		ISES		NSES		OF		AINING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits	BUD	N/A		ISES		NSES		OF		AINING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses	BUD	N/A		ISES		NSES		OF		AINING
	BUC	N/A		ISES		NSES		OF		AINING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Meintenance Supplies and Repairs)	BUC	N/A		ISES		NSES		OF		AINING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	BUC	N/A		ISES		NSES		OF		AINING
EXPENDITURES 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)		DGET		ISES		NSES		OF	BAL	AINING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Meintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,		N/A		ISES		NSES		OF	BAL	AINING
EXPENDITURES 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		DGET		ISES		NSES		OF	BAL	AINING
EXPENDITURES 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)		DGET		ISES		NSES		OF	BAL	AINING
EXPENDITURES 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)		DGET		ISES		NSES		OF	BAL	AINING
EXPENDITURES 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		DGET		ISES		NSES		OF	BAL	AINING
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb,		DGET 545		ISES		NSES		OF	\$4,5	AINING
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$4,: \$4,:	DGET 545 545		ISES		NSES		OF	\$4,5	45.00
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES	\$4,: \$4,: \$4,:	545 545		ISES		NSES		OF	\$4,5	45.00 45.00
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES Indirect Expenses	\$4,: \$4,: \$4,: \$4,: \$4,:	545 545 545 545 555		ISES		NSES		OF	\$4,5 \$4,5 \$4,5 \$4,5 \$4,5	45.00 45.00 45.00
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES	\$4,: \$4,: \$4,:	545 545 545 545 555		ISES		NSES		OF	\$4,5 \$4,5 \$4,5 \$4,5 \$4,5	45.00 45.00

Signature.

Title

Send to:	SFDPH Fiscal / Involce Processing		
	1380 Howard Street, 4th Floor, Suite 423		
	San Francisco, CA 94103	By:	Date:
	Attn: Contract Payments	(DPH Authorized Signatory)	100 March 100 Ma

APPENDIX F-1h 01/01/18 - 12/31/18 PAGE B

A-1JAN18

CDC

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

Contract Purchase Order No:

Fund Source:

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

Program Name: Syringe Access Services

ACE Control #:

Grant Code/Detall:	
Grant Gode/Detail:1	

Project Code/Detail: HCPD90

Invoice Period: 01/1/18 - 01/31/18

FINAL Involce (check if Yes)

	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
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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:

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APPENDIX F-2a 07/01/17 - 06/30/18 PAGE A

A A A MARK AND A MARK OF A CARLES A CARLES A	lation				10000	02634]		A-2JUL1	7
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Cor	tract Pur	chase O	rder No:			
Telephone: 415-487-3000		CH	ED			Funding	Source:	G	eneral Fu	und
Fax: 415-487-3009		СП	EP		Gi	ant Cod	e/Detail:			_
rogram Name: Syringe Access Services -	HYA				Pro	ject Cod	e/Detail:			-
ACE Control #:	1							07/4	112 071	
							e Period:	07/1	/17 - 07/	
	то	TAL	DELIVE		DELIV	FINAL		OF		AINING
ELIVERABLES	LOS	NOC	THIS PE	NOC	TO D UOS	NOC	UOS	NOC	DELIVE	RABLES
YA Wrap Around & Dosposal	12	N/A						-	12	N/A
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under of Ollecto Fee Assessed to	-	NOC		NOC	1	NOC		NOC	-	NOC
umber of Clients for Appendix		N/A						N/A		N/A
XPENDITURES		GET	EXPEN THIS PE			NSES	%			AINING
otal Salaries (See Page B)	BUL	GEI	THISPL	RIOD	100	MIE	600	GET	BAL	NVLE
ringe Benefits										
Total Personnel Expenses	1		-							
Occupancy-(e.g., Rental of Property, Utilities,										
Building Maintenance Supplies and Repairs)			-	_					-	
Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	-									_
										_
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)										
Materials and Supplies-(e.g., Office,										
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff										
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$146	;160							\$146,	160.00
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	\$146	,160							\$146,1	160.00
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)	\$146	,160							\$146,1	160.00
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 Relmb, Stipends, Facilitators)										
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Treining, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Relmb,	\$146								\$146,	
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$146	,160							\$146,1	160.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$146 \$148 \$148 \$14,	,160 ,160 615							\$146,1 \$146,1 \$146,3	160.00 160.00 15.00
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 Relmb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$146 \$148 \$148 \$14,	,160			NOTES				\$146,1	160.00 160.00 15.00

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-2a 07/01/17 - 06/30/18 PAGE B

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

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

REPROVINEL EVERYDENDE

4

Program Name: Syringe Access Services - HYA

ACE Control #

. ...

Invoice Number
A-2JUL17
General Fund

Project Code/Detail:

Invoice Period: 07/1/17 - 07/31/17

FINAL Involce (check if Yes)

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
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1. Sec. 17710 2						1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
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 beckup records for those claims are maintained in our office at the address indicated.

Certified By:

Title:

APPENDIX F-2b 07/01/18 - 06/30/19 PAGE A

Contractor: San Francisco AIDS Found Address: 1035 Market Street, Suite 4						02634	1		A-2JUL1		
San Francisco, CA 94103				Con	tract Pur	chase O	rder No:				
Telephone: 415-487-3000 Fax: 415-487-3009		CHEP			Funding Source:			G	General Fund		
		on	LF		G	rant Cod	e/Detail:			-	
Program Name: Syringe Access Services -	HIA				Pro	ject Cod	e/Detail:	-		-	
ACE Control #:						Invoice	Period:	07/1	/18 - 07/	31/18	
						FINAL	Invoice		(check ii	Yes)	
		TAL	DELIV THIS P		DELIV TO D	ERED	% (TOT		REM	AINING	
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	
YA Wrap Around & Dosposal	12	N/A	1 1 mm	1 1 1 1 1 4					12	N/A	
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lumber of Cilents for Appendix		NOC N/A		NOC		NOC		NOC N/A		NOC N/A	
XPENDITURES	BUD	GET	EXPE THIS P			NSES	% (BUD	DF		AINING	
otal Salaries (See Page B)					1	1					
ringe Benefits							_				
Total Personnel Expenses			S		-					_	
Operating Expenses:	-				-		-				
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)		-	-	_			-		-		
Materials and Supplies-(e.g., Office,			1						-		
Postage, Printing and Repro., Program Supplies)			1				-				
General Operating-(e.g., Insurance, Staff			1								
Treining, Equipment Rental/Maintenance)			· · · · · · · · · · · · · · · · · · ·								
Staff Travel - (e.g., Local & Out of Town)										-	
Consultant/Subcontractor	6140	044	-			-	-		\$149,8	14 00	
Consultant/Subcontractor	\$149	,014	1		-		-		0140,0	514.00	
Other - (Meals, Audit, Transportation Reimb,				-							
Stipends, Facilitators)							-				
7.110	6440	044					-		P4404	14 00	
Total Operating Expenses	\$149	,814							\$149,8	314.00	
Capital Expenditures OTAL DIRECT EXPENSES	\$149	814				-		-	\$149,8	14 00	
Indirect Expenses	\$14,		-						\$14,9		
OTAL EXPENSES	\$164		S						\$164,		
LESS: Initial Payment Recovery					NOTES	:				-	
Other Adjustments (Enter as negative, if approp	priate)				1000						
REIMBURSEMENT						_				_	
certify that the information provided above is, to the beaucordance with the budget approved for the contract cl accords for those claims are maintained in our office at the	ted for servi	ces provide	1								

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

Title:

APPENDIX F-2b 07/01/18 - 06/30/19 PAGE B

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: Syringe Access Services - HYA

ACE Control #:

	Invoice Number
	A-2JUL18
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	

Invoice Period: 07/1/18 - 07/31/18

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES PERSONNEL FTE SALARY EXPENSES TO DATE BUDGET BUDGETED FTE SALARY THIS PERIOD TO DATE BUDGET BULDGET BUL

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:

									07/01/17	06/30/1 PAGE
Contractor: San Francisco AIDS Found	ation					02634	6.13		voice Num A-3JUL1	12.50
Address: 1035 Market Street, Suite 4	00	10				Contract Purchase Order No:				
Sen Francisco, CA 94103		0		Cor	tract Pul	cnase O	roer No:			
Telephone: 415-487-3000 Fax: 415-487-3009		CH	EP			Funding	Source:	G	eneral F	und
		10.50	27. P	l,	G	rant Cod	e/Detail:			
Program Name: Syringe Access - Harm Rec	luction C	enter			Pro	ject Cod	e/Detail:			
ACE Control #:										
						Invoice	Period:	07/1	/17 - 07/	31/17
						FINAL	Invoice		(check i	Yes)
	CONTR	TAL		ERIOD	TOT	ERED		TAL	DELIVE	AINING
DELIVERABLES Harm Reduction Center	12	NOC 35,343	UOS	NOC	UOS	NOC	UDS	NOC	UOS 12	NOC 35,343
	12	00,040	-						12	30,043
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				-	1	-				-
			-							
		NOC		NOC	100	NOC		NOC		NOC
Number of Clients for Appendix		35343			1	2 - 4			1	35,343
EXPENDITURES	BUD	GET		NSES		NSES	% BUD	-		AINING
Total Salaries (See Page B) Fringe Benefits	\$588						2			550.00
Total Personnel Expenses	\$147 \$735		1	~						138.00
Operating Expenses:							1			
Occupancy-(e.g., Rental of Property, Utilities,	\$32,	214					-		\$32,2	14.00
Building Maintenance Supplies and Repairs)	-	-		-						-
Materials and Supplies-(e.g., Office,	\$24,	234				-			\$24,2	34.00
Postage, Printing and Repro., Program Supplies)			1							_
General Operating-(e.g., insurance, Staff	\$11,	500	-	-		-		-	\$11.5	00.00
Training, Equipment Rental/Maintenance)				-						
Otals Tanand Star Land Constant						-			-	
Staff Travel - (e.g., Local & Out of Town)										
Consultant/Subcontractor									-	
Consultant/Subcontractor		_			-	_	-		-	
Consultant/Subcontractor Other - (Meals, Audit, Transportation Relmb, Stipends, Facilitators) Total Operating Expenses	\$67,	948							\$67,9	48.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures										
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operation Expenses Capital Expenditures FOTAL DIRECT EXPENSES	\$67, \$803 \$80,	,636							\$803,0	48.00 336.00 64.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES Indirect Expenses TOTAL EXPENSES	\$803	,636 364							\$803,0 \$80,3	336.00
Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES	\$803 \$80, \$884	,636 364			NOTES				\$803,0 \$80,3	336.00 64.00

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:

Title:

Date:

APPENDIX F-3a

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

APPENDIX F-3a 07/01/17 - 06/30/18 PAGE B

A-3JUL17

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

Telephone: 415-487-3000 Fax: 415-487-3009 Fund Source: General Fund

Contract Purchase Order No:

Grant Code/Detail:

Program Name: Syringe Access - Harm Reduction Center

ACE Control #:

Project Code/Detail:	

Invoice Period: 07/1/17 - 07/31/17

FINAL Invoice (check if Yes)

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				\$20,300.00
Dir. Behavorial Health Services	0.05	\$6,000				\$6,000.00
Director, SAS	0.20	\$18,000				\$18,000.00
Associate Director, 6th Street HRC	1.00	\$63,000				\$63,000.00
Health Educator	6.25	\$343,750				\$343,750.00
Mobile Health Educator	0.50	\$27,500				\$27,500.00
Health Educator/Inventory Team Lea	1.00	\$55,000				\$55,000.00
Inventory Associate/Health Educator	1.00	\$55,000				\$55,000.00
1						
*				i		
	70.10	5805 FF0				
TOTAL SALARIES	10.10	\$588,550				\$588,550.00

I cartify 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-36
07/01/18 - 06/30/19
PAGE A

Contract ID # Invoice Number 1000002634 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 Funding Source: General Fund CHEP Fax: 415-487-3009 Grant Code/Detail: Program Name: Syringe Access - Harm Reduction Center Project Code/Detail: ACE Control #: Invoice Period: 07/1/18 - 07/31/18 **FINAL** Invoice (check if Yes) REMAINING TOTAL DELIVERED DELIVERED % OF DELIVERABLES CONTRACTED THIS PERIOD TOTAL TO DATE DELIVERABLES UOS NOC UOS NOC UOS NOC UOS NOC UOS NOC Harm Reduction Center 36,960 12 12 36,960 NOC NOC NOC NOC NOC Number of Clients for Appendix 36960 36,960 EXPENDITURES **EXPENSES** EXPENSES % OF REMAINING BUDGET THIS PERIOD TO DATE BUDGET BALANCE \$671,050 Total Salaries (See Page B) \$671,050.00 Fringe Benefits \$167,763 \$167,763.00 Total Personnel Expenses \$838,813 \$838,813.00 Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, \$33,214 \$33,214.00 Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, \$24,564 \$24,564.00 Postage, Printing and Repro., Program Supplies) \$12,500 General Operating-(e.g., Insurance, Staff \$12,500.00 Training, Equipment Rental/Maintenance) Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stinends, Facilitators) Total Operating Expenses \$70,278 \$70,278.00 Capital Expenditures TOTAL DIRECT EXPENSES \$909,091 \$909,091.00 \$90,909 \$90,909.00 Indirect Expenses TOTAL EXPENSES \$1,000,000 \$1,000,000.00 **LESS: Initial Payment Recovery** NOTES: 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:

- 14	a	е.		
			-	

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

A-3JUL18

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

Telephone: 415-487-3000 Fax: 415-487-3009 Fund Source: General Fund

Contract Purchase Order No:

Grant Code/Detail:

Program Name: Syringe Access - Harm Reduction Center

ACE Control #:

DETAIL PERSONNEL EXPENDITURES

Project	Code/Detail:	

Invoice Period: 07/1/18 - 07/31/18

FINAL Involce (check if Yes)

BUDGETED EXPENSES **EXPENSES** % OF REMAINING PERSONNEL FTE THIS PERIOD TO DATE BUDGET BALANCE SALARY \$20,300 \$20,300.00 V.P. Programs & Services 0.10 Dir. Behavorial Health Services 0.05 \$6,000 \$6,000.00 Director, SAS 0.20 \$18,000.00 \$18,000 Associate Director, 6th Street HRC 1.00 \$63,000 \$63,000.00 Health Educator 7.75 \$426,250 \$426,250.00 0.50 \$27,500 \$27,500.00 Mobile Health Educator Health Educator/Inventory Team Lea 1.00 \$55,000 \$55,000.00 Inventory Associate/Health Educator 1.00 \$55,000 \$55,000.00 TOTAL SALARIES 11.60 \$671.050 \$671.050.00 Teerlify that the information provided above is, to the beet of my knowledge, complete and accurate; the amount requested for reimbursement is in

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for raimbursement 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:

ACORD CI				RTI	FICATE OF LIA	ABIL		S. J. M. N	CE		POBAR: (MM/DD/YYYY) /21/2017
8	ERI	CERTIFICATE IS ISSUED AS A TIFICATE DOES NOT AFFIRMAT DW. THIS CERTIFICATE OF INS RESENTATIVE OR PRODUCER, AN	IVEL	Y O	R NEGATIVELY AMEND	EXTE	ND OR ALT	TER THE CO	OVERAGE AFFORDED	BY TH	E POLICIES
11	SU nis c	RTANT: If the certificate holde BROGATION IS WAIVED, subje- certificate does not confer rights t	ct to	the	terms and conditions of	the po	licy, certain	policies may	NAL INSURED provision require an endorsemen	ns or b nt. A si	e endorsed. tatement on
G2 140	nsu Nev	_{ER} License # 0H81923 rance Services, LLC v Montgomery, 21st Floor ncisco, CA 94105				CONTA NAME: PHONE (A/C, NG E-MAIL ADDRE	, Ext): (415)	426-6600	FAX (A/C, No):	(415)	426-6601
									RDING COVERAGE	NIACI	NAIC#
INSI	RED								Iomestate Insurance Com		20044
		San Francisco AIDS Founda	tion			INSURE					
		1035 Market Street, Ste. 400 San Francisco, CA 94103				INSURE	RD:			-	1000
		San Francisco, CA 94103				INSURE	RE:				
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					E NUMBER:				REVISION NUMBER:		A Robert March
IN C	ERT	IS TO CERTIFY THAT THE POLICIE ATED. NOTWITHSTANDING ANY R IFICATE MAY BE ISSUED OR MAY USIONS AND CONDITIONS OF SUCH	PER	TAIN	ENT, TERM OR CONDITION THE INSURANCE AFFORM	N OF A	THE POLIC	CT OR OTHER	R DOCUMENT WITH RESPE	ECT TO	WHICH THIS
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A	X	COMMERCIAL GENERAL LIABILITY			and the second se			THURSDALLT.	EACH OCCURRENCE	\$	1,000,000
	1	CLAIMS-MADE X OCCUR	x		2017-00950	- "	04/01/2017	04/01/2018	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
									MED EXP (Any one person)	8	20,000
						- 0		1	PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:								GENERAL AGGREGATE	\$	3,000,000
	-	POLICY JECT X LOC							PRODUCTS - COMP/OP AGG	\$	3,000,000
A	AU	TOMOBILE LIABILITY			Strates				COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X	ANY AUTO	X		2017-00950		04/01/2017	04/01/2018	BODILY INJURY (Per person)	\$	
		AUTOS ONLY SCHEDULED AUTOS ONLY AUTOS AUTOS ONLY AUTOS ONLY							BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$ \$	
-	-		-							\$	40.000.000
A	X	UMBRELLA LIAB X OCCUR				- 1	04/04/0047	04/01/2018	EACH OCCURRENCE	\$	10,000,000
	-	EXCESS LIAB , CLAIMS-MADE			2017-00950-UMB	04/0	04/01/2017	0-01/2010	AGGREGATE	\$	10,000,000
D		DED X RETENTION \$ 10,000	_	-			_		V PER OTH-	5	
в	ANE	RKERS COMPENSATION DEMPLOYERS' LIABILITY Y/N		x	SAWC819099	1	07/01/2017	07/01/2018	X PER OTH- STATUTE ER		1,000,000
	OFF	PROPRIETOR/PARTNER/EXECUTIVE	NIA	^		- 9	and may re-		E.L. EACH ACCIDENT	3	1,000,000
	If ye	s, describe under CRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE		1,000,000
	DES	CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
City Liab	and	TION OF OPERATIONS / LOCATIONS / VEHICI olng service contracts with City and County of San Francisco, its office and Auto Liability as required by w Compensation as permitted by law	rs, di ritten	recto	ors, employees, agents, and	d repres	sentatives an	e named as a	dditional insureds as res	pects G with re	Seneral Ispects to
											-
CE	RTIP	FICATE HOLDER		-		CANC	ELLATION				
		City and County of San Fran Health	cisco	o, De	epartment of Public	THE	EXPIRATION	N DATE TH	ESCRIBED POLICIES BE C/ EREOF, NOTICE WILL I Y PROVISIONS.		

AUTHORIZED REPRESE	TATIVE
De	
an	

Attn: Contracts 101 Grove Street, Suite 307 San Francisco, CA 94102

ACORD 25 (2016/03)

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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.



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.

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);

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).

and

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)
- <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.



8 of 13

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.

2.46	Add Appendix F-11 to Agreement as amended. Dated: 02/01/2019.	
2.47	Add Appendix F-1m to Agreement as amended. Dated: 02/01/2019.	
2.48	Add Appendix F-1n to Agreement as amended. Dated: 02/01/2019.	
2.49	Add Appendix F-10 to Agreement as amended. Dated: 02/01/2019.	
2.50	Add Appendix F-1p to Agreement as amended. Dated: 02/01/2019.	
2.51	Add Appendix F-1q to Agreement as amended. Dated: 02/01/2019.	
2.52	Add Appendix F-1r to Agreement as amended. Dated: 02/01/2019.	
2.53	Add Appendix F-1s to Agreement as amended. Dated: 02/01/2019.	
2.54	Add Appendix F-1t to Agreement as amended. Dated: 02/01/2019.	
2.55	Add Appendix F-1u to Agreement as amended. Dated: 02/01/2019.	
2.56	Add Appendix F-1v to Agreement as amended. Dated: 02/01/2019.	
2.57	Add Appendix F-2c to Agreement as amended. Dated: 02/01/2019.	
2.58	Add Appendix F-2d to Agreement as amended. Dated: 02/01/2019.	
2.59	Add Appendix F-2e to Agreement as amended. Dated: 02/01/2019.	
2.60	Add Appendix F-2f 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 JOÉ HOLLENDONER Grant Colfax, MD 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



P-650 (6-16; DPH 4-18) Contract ID# 1000002634 Amendment: 02/01/2019
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. Reports:

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. Possession of Licenses/Permits:

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. Grievance Procedure:

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. Under-Utilization Reports:

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

Service Provider(s): Fiscal Agency: Total Contract Amount: Funding Source: Program Name: System of Care: Program Code:	San Francisco AIDS Foundation San Francisco AIDS Foundation \$32,762,870 HPS General Fund/CDC Syringe Access and Disposal Services HIV Prevention Services (HPS) N/A									
Provider Address:	1035 Market Street, Suite 400 - SF CA 94103									
Provider Phone: Contact Person:	415-487-3000 Richard Hill, Director of Government Contracts Dire	ct Phone Numbe	415_487_8042	Email: rhill@	Defat ora			Provid	ler Fax: 415-487	-3094
Contact Person:	Richard Alli, Director of Government Contracts Dire		1.410-407-0042		goldi.org					
RFP#:	3-2016									
Appendix A:					ppendix A-1		ccess Services			
Appendix B:		B-1	B-1a	B-1b	B-1c	B-1d	B-1e	B-1f	B-1g	B-1h
Funding Source	4	GF	GF	CDC	GF	GF	CDC	GF	GF	CDC
Funding Amount: Unspent Amount:		\$1,863,232	\$196,713	\$5,000	\$1,909,813	\$201,631	\$5,000 -\$3,036	\$1,956,679	\$206,672	\$5,000 -\$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
2		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:	second and a second second	NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC
Humber of the of	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 .
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
Number of UDD.	Syringe Access & Disposal Services Hrs.	UOS 4,302	UOS N/A	UOS 4,302	UOS N/A	UOS 4,302	UOS N/A	UOS 4,302	UOS N/A	UOS 4,302
Number of UOS:	Syringe Access & Disposal Services His. Syringe Access, Disposal Coordination & Bulk				1					
	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 [NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC	NOC
	Syringe Access & Disposal Services Hrs. Syringe Access, Disposal Coordination & Bulk Purchasing	54,300	N/A	54,300	N/A	54,300	N/A	54,300	N/A	54,300
		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
ppendix B:		B-1r	B-1s	B-1t	B-1u	B-1v				
unding Source		GF	GF	GF	GF	GF				
unding Amount:		\$211,838	\$2,006,497	\$211,838	\$2,006,497	\$211,838		11		
unding 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		1	()	
	and a construction of the second s	UOS	UOS	UOS	UOS	UOS				
umber 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		-		
umber of NOC:		NOC	NOC	NOC	NOC	NOC				
	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		4		
	Community-Based Sweeps Events	N/A	N/A	N/A	N/A	N/A				
Definition and # of JOS:	A Unit of Service (UOS) is equivalent to 1 hour of se	ervice/activity or 1	month of Program							
arget 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.	on supplies thus e all syringe access	ensuring IDUs have and disposal ser	e clean syringes, vices in the city, w	and reducing the ith partners St. Ja	likelihood of syring ames Infirmary, G	ge sharing and th lide, the Homeles	e risk of HIV trans is Youth Alliance	mission among t and the San Fran	he target cisco Drug Use
Appendix A:						2 Homeless Yo		0.153.000		-
Appendix B:		B-2	B-2a	B-2b	B-2c	B-2d	B-2e	B-2f	B-2g	B-2h
unding Source		GF	GF	GF	GF	GF	GF	GF	GF	GF
unding Amount:		\$156,854	\$160,775	\$164,794	\$168,914	\$168,914	\$168,914	\$168,914	\$168,914	\$168,914
unding 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 - 6.30.3
		1100	11/00	1100	1100	1100	1100	1100	1100	1100
lumber of UOS:	HYA Wrap Around & Disposal Services	UOS 12	UOS 12	UOS 12	UOS 12	UOS 12	UOS 12	UOS 12	UOS 12	UOS 12

Number of UDC/NOC:

HYA Wrap Around & Disposal Services

NOC

N/A

Appendix B:		B-2i								
Funding Source		GF								
Funding Amount:		\$168,914				1				
Funding Term:		7.1.25 - 6.30.26		1						1.
Number of UOS:	the second	UOS		· · · · · · · · · · ·	-			1		1
	HYA Wrap Around & Disposal Services	12								1
Number of UDC/NOC:		NOC								
	HYA Wrap Around & Disposal Services	N/A								
Definition and # of UOS:	A Unit of Service (UOS) is equivalent to 1 month	n of activities associate	d with the admini	stration of these f	unds.					
Target Population:	Young adults aged 13-29 living on the stress in	the Haight and female	identified IDUs in	the Mission						
	This appendix addresses administrative activitie agent for HYA. SFAF's agreement with HYA is	that all invoicing will co	ome from Tides F	oundation and the	checks are made	e payable to Tide	s/Homeless Yout	h Alliance.		
Target Population:	Funds are to be used for various personnel and					*****	*****			
Target Population:										
n						6th Street Harm				
Appendix A:				posal services.	Appendix A-3 B-3c	6th Street Harm B-3d		B-3f	B-3g	B-3h
Appendix A: Appendix B:		operating expenses a	nd for syringe dis	posal services.	Appendix A-3	6th Street Harm	Reduction Ct.	B-3f GF	B-3g GF	B-3h GF
Appendix A:		operating expenses a	nd for syringe dis B-3a GF \$884,000	posal services.	Appendix A-3 B-3c	6th Street Harm B-3d	Reduction Ct. B-3e	B-3f		and the second se
Appendix A: Appendix B: Funding Source		B-3 GF	nd for syringe dis B-3a GF	B-3b GF	Appendix A-3 B-3c GF	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21	Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22	B-3f GF \$1,000,000 7.1.22 - 6.30.23	GF	GF \$1,000,000 7.1.24 - 6.30.25
Appendix A: Appendix B: Funding Source Funding Amount:		B-3 GF \$344,000	nd for syringe dis B-3a GF \$884,000	B-3b GF \$1,000,000	Appendix A-3 B-3c GF \$1,000,000	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS	Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS	GF \$1,000,000 7.1.23 - 6.30.24 UOS	GF \$1,000,000 7.1.24 - 6.30.25 UOS
Appendix A: Appendix B: Funding Source Funding Amount:		B-3 GF \$344,000 11.1.16-6.30.17	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 7.1.19 - 6.30.20	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21	Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22	B-3f GF \$1,000,000 7.1.22 - 6.30.23	GF \$1,000,000 7.1.23 - 6.30.24	GF \$1,000,000 7.1.24 - 6.30.25
Appendix A: Appendix B: Funding Source Funding Amount: Funding Term:	Funds are to be used for various personnel and	B-3 GF \$344,000 11.1.16-6.30.17 UOS	B-3a GF \$884,000 7.1.17-6.30.18 UOS	B-3b GF \$1,000,000 7.1.18-6.30.19 UOS	Appendix A-3 B-3c GF \$1,000,000 7.1.19 - 6.30.20 UOS	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS	Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS	GF \$1,000,000 7.1.23 - 6.30.24 UOS	GF \$1,000,000 7.1.24 - 6.30.25 UOS
Appendix A: Appendix B: Funding Source Funding Amount: Funding Term:	Funds are to be used for various personnel and	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	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A	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	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
Appendix A: Appendix B: Funding Source Funding Amount: Funding Term:	Funds are to be used for various personnel and Harm Reduction Center Services Hrs. Syringe Access Services	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	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888	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	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
Appendix A: Appendix B: Funding Source Funding Amount: Funding Term: Number of UOS:	Funds are to be used for various personnel and Harm Reduction Center Services Hrs. Syringe Access Services	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8 N/A N/A	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	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888 2,550	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	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
Appendix A: Appendix B: Funding Source Funding Amount: Funding Term: Number of UOS:	Funds are to be used for various personnel and 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 N/A	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	6th Street Harm B-3d GF \$1,000,000 7.1.20 - 6.30.21 UOS N/A 1,888 2,550 NOC	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	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
Appendix A: Appendix B: Funding Source Funding Amount: Funding Term: Number of UOS:	Funds are to be used for various personnel and Harm Reduction Center Services Hrs. Syringe Access Services Lounge Services	B-3 GF \$344,000 11.1.16-6.30.17 UOS 8 N/A N/A N/A N/A N/A NOC 18,400 18,400	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	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	Reduction Ct. B-3e GF \$1,000,000 7.1.21 - 6.30.22 UOS N/A 1,888 2,550 NOC N/A	B-3f GF \$1,000,000 7.1.22 - 6.30.23 UOS N/A 1,888 2,550 NOC N/A	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

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

Appendix B: Funding Source Funding Amount:		B-3i GF \$1,000,000				
Funding Term:		7,1,25 - 6,30,26		 -		
and ing room	Contraction of the second	UOS		 		
Number of UOS:	Harm Reduction Center Services Hrs.	N/A				
	Syringe Access Services	1,888				
	Lounge Services	2,550				
Number of NOC:		NOC		2		
	Harm Reduction Center Services Hrs.	N/A			1	
	Syringe Access Services	31,341				
					2	
	Lounge Services	15,300	1.1.1			
	Lounge Services A Unit of Service (UOS) is equivalent to 1 Mon		r Services.			
Definition and # of UOS: Target Population:		h of Harm Reduction Cente	r Services.			

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 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-1b) 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 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)
yringe Access and Disposal Service Hours (B-1f) one UOS = one hour of Syringe Access and Disposal Services 2.73 hours of syringe access and disposal services per week * 52 weeks = 4,302 OS 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	3,710	N/A
Community-Based Sweeps Events (B-1f) 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-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 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
Total Services Delivered	12	N/A

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

Units of Service (UOS) Description		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 ~12.63 clients per hour * 4,302 hours = 54,300 NOC		54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1i) One UOS = one month of Syringe Access and Disposal Coordination & Bulk Purchasing 12 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS Citywide Syringe Sweeps (B-1i) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	12	N/A
	3,710	N/A
Community-Based Sweeps Events (B-1i) 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-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 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		Number of Contacts (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 Citywide Syringe Sweeps (B-1k) One UOS = one hour of Citywide Sweeps 71.35 hours of sweeps per week * 52 weeks = 3,710 UOS	12	N/A
	3,710	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	4,302	54,300
	12	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)	1.1	1
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-1n) 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 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 ~12.63 clients per hour * 4,302 hours = 54,300 NOC	4,302	54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-10) 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-10) 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-10) 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-1p) 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 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	4,302	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 months of Syringe Access and Disposal Coordination & Bulk Purchasing = 12 UOS	12	N/A
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)	115.00	1
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)		Tax
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 UOS	12	N/A
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 UOS ~12.63 clients per hour * 4,302 hours = 54,300 NOC	4,302	54,300
Syringe Access, Disposal Coordination & Bulk Purchasing (B-1u) 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-1u) 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-1u) 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-1v) 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

6. Methodology:

- A. Syringe Access and Disposal Services includes the following direct client services:
 - 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.
 - 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).
 - 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.
 - 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.

San Francisco AIDS Foundation HIV Syringe Access and Disposal Services Homeless Youth Alliance Appendix A-2 Appendix Term: 7/1/16 – 6/30/26 Funding Sources: General Fund

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
mail Address: rhill@sfaf.org

 Nature of Document: Check one New

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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 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-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 One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses		N/A
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 One UOS = one month of personnel/operating expenses & disposal services One UOS = one month of personnel and operating expenses		N/A
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)	Number of Contacts (NOC)
12	N/A
e 12	N/A
	Service (UOS)

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	& disposal services One	
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

Contractor: San Francisco AIDS Foundation HIV Syringe Access and Disposal Services 6th Street Harm Reduction

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:

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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	1,724	28,628
7/1/17-12/31/17: 30 hrs/wk * 26 wks = 780 UOS		
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)		
One UOS = one hour of Lounge services	1,275	7,650
1/1/18-6/30/18: ~49 hrs/wk * 26 weeks = 1,275 UOS		
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	1,888	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	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	2,550	15,300
49.03 hrs/wk * 52 weeks = 2,550 UOS		
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		
16.6 contacts per hour * 1,888 hours = 31,341 NOC		
Lounge Services		15,300
One UOS = one hour of Lounge services	2,550	
49.03 hrs/wk * 52 weeks = 2,550 UOS		
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

e UOS = one hour of Syringe Access services 3 hrs/wk * 52 wks = 1,888 UOS 6 contacts per hour * 1,888 hours = 31,341 NOC unge Services e UOS = one hour of Lounge services 03 hrs/wk * 52 weeks = 2,550 UOS	Units of Service (UOS)	Number of Contacts (NOC)	
Syringe Access Services		1000	
One UOS = one hour of Syringe Access services	1,888	31,341	
36.3 hrs/wk * 52 wks = 1,888 UOS	1,000	51,541	
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	15,500	
6 contacts per hour * 2,550 hours = 15,300 NOC		L.	
Total Services Delivered	4,438	46,641	

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

ne UOS = one hour of Syringe Access services 5.3 hrs/wk * 52 wks = 1,888 UOS 5.6 contacts per hour * 1,888 hours = 31,341 NOC bunge Services ne UOS = one hour of Lounge services 9.03 hrs/wk * 52 weeks = 2,550 UOS contacts per hour * 2,550 hours = 15,300 NOC	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	51,541	
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	15,500	
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

ne UOS = one hour of Syringe Access services 5.3 hrs/wk * 52 wks = 1,888 UOS 5.6 contacts per hour * 1,888 hours = 31,341 NOC ounge Services ne UOS = one hour of Lounge services 0.03 hrs/wk * 52 weeks = 2,550 UOS	Units of Service (UOS)	Number of Contacts (NOC)	
Syringe Access Services			
	1,888	31,341	
가장 가	1,000	51,511	
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	15,500	
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 36.3 hrs/wk * 52 wks = 1,888 UOS 16.6 contacts per hour * 1,888 hours = 31,341 NOC	1,888	31,341
Lounge Services One UOS = one hour of Lounge services 49.03 hrs/wk * 52 weeks = 2,550 UOS 6 contacts per hour * 2,550 hours = 15,300 NOC	2,550	15,300
Total Services Delivered	4,438	46,641

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

ne UOS = one hour of Syringe Access services 5.3 hrs/wk * 52 wks = 1,888 UOS 5.6 contacts per hour * 1,888 hours = 31,341 NOC ounge Services ne UOS = one hour of Lounge services 0.03 hrs/wk * 52 weeks = 2,550 UOS	Units of Service (UOS)	Number of Contacts (NOC)	
Syringe Access Services			
	1,888	31,341	
0			
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	

*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

- 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.

 Required Language: None required.

Appendix B Calculation of Charges

1. Method of Payment

4.1 - 24

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	HIV Syringe Access and Disposal Services
B-1n, B-1o, B-1p, B-1q, B-1r, B-1s, B-1t, B-1u, B-1v	
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	
	Contingenc	ey (FY19/20 thru FY25/26)	\$2,845,289	
	(This e	equals 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 & #6
Program/Provider Name				HIV Syringe	Access & Disp	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	1
EXPENSES		and the second second		12		C				
Salaries	\$ 271,038	\$ -	\$ -	\$ -	\$ 174,282	\$ 464,500	s -	\$ -	\$ -	\$ 909,820
Employee Benefits	\$ 67,760	\$ -	\$ -	\$ -	\$ 43,569	\$ 116,125	\$ -	\$ -	\$ -	\$ 227,454
Total Personnel Expenses	\$ 338,798	5 -	\$ -	\$ -	\$ 217,851	\$ 580,625	\$ -	\$ -	\$ -	\$ 1,137,274
Operating Expense					\$ 94,876	\$ 1,155,569	\$ 183,301	\$ 4,545	\$ 146,160	\$ 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	\$ 4,402,744
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						1			And the Party of t	1
DPH Funding Sources (select from drop-down list)		_								1.
HPS COUNTY HPS GF	1,863,232					1,909,813				3,773,045
HPS COUNTY GF Children's Fund		196,713			i		201,631		· · · · · · · · · · · · · · · · · · ·	398,344
HPS FED CDC - PD90, CFDA #93.940			5,000					5,000		10,000
HPS COUNTY HPS GF	·		1	156,854	1			1	160,775	317,629
HHS COUNTY GF			1		344,000			1		344,000
Unspent Funds	6	S. David	1	15-5	11-01-01-01-01-01-01-01-01-01-01-01-01-0	1		(3,036)	1	(3,036
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	4,839,982
Payment Method		Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursemen (CR)	Cost Reimbursement (CR)	
Prepared By	Larry Zapatk	a		Phone #		415-487-3055				

DPH 1: Department of Public Health Contract Budge	t Summary b	y Program
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CID#	1000002634			uoget summar	j =j · · · · · · · ·	Appendix #	B Page #	5
DPH Section								
Check one: [] Original [X] AMD [] RPB			C	ontract Term (7		Fiscal Year(s)	16-26
Agency/Organization Name		the second se				Fu	nding Notification Date	12/21/2018
Contractor Name (may be same as above)	San Francisco	AIDS Foundatio	n					FN#5 & #
Program/Provider Name			Syringe Access	& 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			17	1 Y		1	La della casa della	
Salaries	and the second se	the second se	\$ -	\$ -	\$ -	\$ 671,050		\$ 2,657,594
Employee Benefits		\$ 122,044	\$ -	\$ -	\$ -	\$ 167,763	\$ 436,945	
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		\$ 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	A STATE OF	I am an an and a state			and the second second			1
DPH Funding Sources (select from drop-down list)	-							
HPS COUNTY HPS GF		1,956,679			1		1,956,679	5,729,724
HPS COUNTY GF Children's Fund	1		206,672		1	-	206,672	605,016
HPS FED CDC - PD90, CFDA #93.940	/		1	5,000			5,000	15,000
HPS COUNTY HPS GF	Frank and	1	Sec		164,794		164,794	482,423
HHS COUNTY GF	884,000		farmer a		1	1,000,000	1,884,000	2,228,000
Unspent Funds				(5,000)		1	(5,000)	(8,036
Total DPH Revenues	884,000	1,956,679	206,672	14	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)		
	Larry Zapatka			Phone #		415-487-3055		-

DPH 1: Department of Public Health Contract Budget Summary by Program
CID#	1000002634				get Summary		Appendix #	В	Page #	6	
DPH Section	HPS										
Check one: [] Original [X] AMD	[]RPB				Cor	ntract Term (7/	1/16-6/30/26)		Fiscal Year(s)	16-26	
Agency/Organization Name	and the second se							Funding 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 S	yringe Access	& Disposal Se	ervices			TOTALS -	TOTALS -	
Appendix Number	A-1/B-11	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		1			i and	100 million 100	Sector And Sector P.		1	i in a second	
Salaries	\$ 496,916	\$ -	\$ -	\$ 680,792	\$ 496,916	\$ -	\$ -	\$ 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	s -	\$ -	\$ 850,990	\$ 621,145	\$ -	s -	\$ 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					1000 C						
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			1.00					1	4.	15,000	
HPS COUNTY HPS GF	-		168,914				168,914		337,828	820,251	
HHS COUNTY GF				1,000,000			1	1,000,000	2,000,000	4,228,000	
Unspent Funds				1						(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	15,826,625	
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	15,826,625	
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursoment (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)			
Prepared By	Larry Zapatka			Phone #		415-487-3055				Station of the	

DPH 1: Department of Public Health	Contract Budget Summary by Progra	m
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	000002634						Appendix #	В	Page #	7
DPH Section I										
Check one: [] Original [X] AMD]] RPB				Cor	tract Term (7/*	1/16-6/30/26)		Fiscal Year(s)	16-26
Agency/Organization Name								Funding No	tification Date	12/21/2018
Contractor Name (may be same as above)	San Francisco	AIDS Foundat	tion							FN#5 & #6
Program/Provider Name			HIV S	yringe Access	& Disposal Se	rvices			TOTALS -	TOTALS -
Appendix Number	A-1/8-1m	A-1/B-1n	A-2/B-2e	A-3/B-3e	A-1/B-10	A-1/B-1p	A-2/8-2f	1- 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	100 C	
EXPENSES	10000				22.0	The state of the s	Concession of a	0.000		
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		Contraction of the second		M. Contraction	Section sector and					the second s
DPH Funding Sources (select from drop-down list)										
HPS COUNTY HPS GF	2,006,497				2,006,497			1	4,012,994	13,755,712
HPS COUNTY GF Children's Fund		211,838			1	211,838			423,676	1,452,368
HPS FED CDC - PD90, CFDA #93.940							11.			15,000
HPS COUNTY HPS GF			168,914				168,914		337,828	1,158,079
HHS COUNTY GF				1,000,000			1	1,000,000	2,000,000	6,228,000
Unspent Funds						1.000	1		12.20	(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)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)		
Prepared By	Larry Zapatka	LT-m	3 31 1	Phone #		415-487-3055	-	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		

DPH 1: Department of Public Health Contract Budget Summary	/ by	Program	٤.
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CID#	1000002634						Appendix #	В	Page #	8
DPH Section	HPS									
Check one: [] Original [X] AMD	[] RPB				Cor	ntract Term (7/	1/16-6/30/26)		Fiscal Year(s)	16-26
Agericy/Organization Name	the second s		and the second se					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-10	A-1/B-11	A-2/B-2g	A-3/B-3g	A-1/B-1s	A-1/B-11	A-2/8-2h	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	1	
EXPENSES			1.1.1.1	The second second			A COMPANY OF A COMPANY			To a strike as
Salaries	\$ 496,916	s -	\$.	\$ 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%		1
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			100 m	-	Carlos Marcal		and the second s		State of the second sec	
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			1						C	15,000
HPS COUNTY HPS GF			168,914	and the second second	1		168,914	in the second start	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	29,375,62
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	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		1.000	Phone #		415-487-3055				0.000

DPH 1: Department of Public Health Contract Budget Summary by Program

	1000002634				19	Ap	pendix #	В	Page #	9
DPH Section					_	-				
Check one: [] Original [X] AMD]	RPB			Contr	act Term	(7/1/16-		(Fiscal Year(s)	16-26
Agency/Organization Name			A last sector				FL	unding 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-10	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			1.00			1.00
EXPENSES			Concernant de	I				1000	En all all	State and
Salaries	\$ 496,916	\$ -	\$ -	\$ 680,792	-		-		\$ 1,177,708	\$ 10,901,550
Employee Benefits	\$ 124,229	\$ -	\$ -	\$ 170,198			1		\$ 294,427	\$ 2,725,388
Total Personnel Expenses	\$ 621,145	\$ -	\$ -	\$ 850,990	\$ -	\$ -	\$ -	\$ -	\$ 1,472,135	\$ 13,626,938
Operating Expense			\$ 153,559	\$ 58,101			(CLUTT)	10.00	\$ 1,607,183	\$ 16,164,801
Subtotal Direct Costs	and the second se		\$ 153,559	\$ 909,091	\$ -	\$ -	\$ -	\$ -	\$ 3,079,318	\$ 29,791,739
Indirect Cost Amount	\$ 182,409		\$ 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%		1000
Total Expenses	\$ 2,006,497	\$ 211,838	\$ 168,914	\$ 1,000,000	\$ -	\$ -	\$ -	\$ -	\$ 3,387,249	\$ 32,770,906
REVENUES & FUNDING SOURCES					Sec. 1					1
DPH Funding Sources (select from drop-down list)	and the second state									100 Aug 10 100
HPS COUNTY HPS GF	2,006,497		1	1) I I	1	1.	1	2,006,497	19,775,203
HPS COUNTY GF Children's Fund	1	211,838	100000000000000000000000000000000000000		11 200	1		11	211,838	2,087,882
HPS FED CDC - PD90, CFDA #93.940	1.	1	1							15,000
HPS COUNTY HPS GF	1		168,914	in the second second			1.		168,914	1,664,821
HHS COUNTY GF				1,000,000	1			1	1,000,000	11,228,000
Unspent Funds		1	Production of the					11	-	(8,036
Total DPH Revenues	2,006,497	211,838	168,914	1,000,000	-	•	1.1.2.1	0.004	3,387,249	32,762,870
Total Revenues (DPH and Non-DPH)	2,006,497	211,838	168,914	1,000,000			1.1	-	3,387,249	32,762,870
Payment Method	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)	Cost Reimbursement (CR)						
Prepared By	Larry Zapatka	L		Phone #	ŧ	415-487-	3055			

DPH 1: Department of Public Health Contract Budget Summary by Program

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

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

			1						
Personnel Expenses		Syringe Access Services (Hrs., City-wide & Community-Based Sweeps Events)		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%	1.000	1	5,709	
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%	1		7,000	
Dir. Gov't Contracts	0.05	5,190	100%	10x 1 1 1	0%			5,190	
Data Manager	0.05	4,412	100%		0%			4,412	
SAS Director	0.75	36,267	89%	4,483	11%	1 1 2 2 2		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%	11 200 20	A	114,180	
SSE/Vol Cordinator	0.75	54,495	100%		0%			54,495	
Health Educator	2.75	156,998		2	0%	1		156,998	
Comm. Engagement & Kit Packing Assoc	0.65	35.084	100%	· · · · · · · · · · · · · · · · · · ·	0%		-	35,084	
		-	0%	1	0%			1	
Total FTE & Total Salaries	8.10	348,889	71%	139,285	29%			488,174	
Fringe Benefits	25.00%	87,222	71%	34,822	29%	1.1.1		122,044	
Total Personnel Expenses	1	436,111	71%	174,107	29%			610,218	
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	9	Contract Total	
		85,166	89%	10,500	11%			95.666	
Total Occupancy					70%			530,113	
		160,385	30%	369,728					
		160,385 6,354		369,728	39%			10,416	
Total Materials and Supplies			61% 100%					10,416	
Total Materials and Supplies Total General Operating Consultants/Subcontractor:		6,354	61%		39%				
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses		6,354 532,386	61% 100%	4,062	39% 0%			10,416 532,386 1,168,581	
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses	10.00%	6,354 532,386 784,291	61% 100% 67%	4,062 384,290	39% 0% 33%			10,416 532,386	
Total General Operating	10.00%	6,354 532,386 784,291 1,220,402	61% 100% 67%	4,062 384,290 558,397	39% 0% 33% 31%			10,416 532,386 1,168,581 1,778,799	
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses		6,354 532,386 784,291 1,220,402 122,040	61% 100% 67% 69% 69%	4,062 384,290 558,397 55,840 614,237	39% 0% 33% 31% 31%			10,416 532,386 1,168,581 1,778,799 177,880	
Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect Expenses TOTAL EXPENSES	vice Mode	6,354 532,386 784,291 1,220,402 122,040 1,342,442	61% 100% 67% 69% 69%	4,062 384,290 558,397 55,840 614,237	39% 0% 33% 31% 31%			10,416 532,386 1,168,581 1,778,799 177,880 1,956,679	

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

Appendix #:	B-1f
Fiscal Year:	18-19

1a) SALARIES

with a	all activities and the ogram adaptation	hat all require and refiner	ed data is reported; wor nent; coordinates currer	that assures monitoring too ks with partner agencies and and emerging health inform surance procedures.	d prog	ram staff
	ers in Public Heal	th and 3 yea	ars community organizin	g and public health experien	ice or	an
wining damoatoris, equiv			and a standard and	Annualized (if less than 12 months):	Total	
Annual Salary:	X	FTE:	x Months per Year:	12 monuis).	1.	Total

continuum that is Brief description of job duties: and bisexual mer	responsive to the	e current health and wel	I-being needs, including HIV	needs of gay
	pacity, especially	in HIV prevention and de	or related discipline; three ye emonstrated program mana	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$140,000.00	0.05	12	1	\$ 7,000

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 contract reporting as needed, and en quality assurance activities.	t and
Bachelor's degree	e and at least two and evaluation; g	years demonstrated ex	perience in health services writing; government contract	
Minimum qualificationa: and nogotations.		A DAMAGE CONTRACTOR	Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 4: Data Manager		Sector Contractor		
summaries to en- and public health	sure foundation p 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 outcomes database entry
Bachelor's degree Minimum qualifications: vears equivalent			ensuring quality for large clie	ent data sets or
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$88,230.00	0.05	12		\$ 4.412

Staff Position 5: SAS Director				
departmental stra effective partners and training full-ti exchange supplie Brief description of job duties: waste removal co Three years expe	ategic goals in all ships with other H ime and temporar as. Organizes rer 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 vith injection and drug us n experience preferred.	exchange sites. Develops a l city objectives. Builds and r uction agencies. Responsible change protocol. Responsible from sites and coordinates and maintain safety protocols ers required. Associates De Must hold HIV test counselou	naintains e for scheduling le for purchasir removal with b. gree with
Minimum qualifications: be writing to obtain	in certification on	Life job.	Appualized /if loss than I	
Annual Salary	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$108,666.00	0.75		0.5	

Staff Position 6: Logistics Invent	tory Mrg	5 T.L		21000
Responsible for a Responsible for a coordinates remo	scheduling and tra purchasing excha	nge supplies. Organize	porary staff in appropriate ex s removal of biohazard was re reports for compliance an	te from sites and
Brief description of job duties: protocols.		and the state of	and the second second	
homeless popula interviewing and	tions 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 motiv practices and principles, exp c, hand truck, and carts and	ational erience doing
withinitian quantications, sale inting techni	ques and injury p	levenuon.	Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$64,356.00	1.00	12	1	\$ 64,35
Staff Position 7: Logistics Assoc		and other and successfully	and the second the state Too	
		ars down sites as neede	s volunteers at the sites. Tra d.	nsports supplies
Experience work English/Spanish	desired. Ability to	follow directions and go	n service organization. Biling ood communications skills n	
Minimum qualifications: be able to lift max	ximum 45 pounds		Annualized (if less than	
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$57,090.00	2.00	12	1	\$ 114,180
		n drug users and with vi	's license and excellent drivi olunteers.	ng record. 1 yea
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$72,660.00	0.75	12	1	\$ 54,495
Staff Position 9: Health Educator				
Responsibilities in testing and linkag overseeing a tear Brief description of job duties: High school diplo	nclude health edu ge to care; harm n m of street outrea ma or equivalenc	eduction counseling) thr ch volunteers; and prov	evention; vein care; referral ough mobile and encampmi iding crisis intervention supp is license and excellent drivi plunteers.	ent outreach; oort.
Minimum qualifications: or experience wo	1		Annualized (if less than	
Annual Salary:	X FTE:	x Months per Year:	12 months):	Total
\$57,090.00	2.75	12	1	\$ 156,998
Staff Position 10: Community Eng	agement & Kit F	Packing Associate		
	nject drugs (PWII	D), organizing harm redu	responsible for outreach ar uction kit packing events, re volunteers to assist with kit	cruiting and
			working with injection drug u	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$53,976.00	0.65	12	1	\$ 35,084

\$53,976.00

8.10

0.65

\$

35,084

1b) EMPLOYEE FRINGE BENEFITS: (Components provided below are samples only. The budgeted components should reflect the contractor's ledger accounts.)

Component	Cost	
Social Security	S	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
	1	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
		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 San Francisco AIDS Foundation has a negotiated rate of 27%.	177,880
of total direct costs	
of total direct costs_	
	1

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

TOTAL EXPENSES: 1,956,679

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

		1. Sec. 1. Sec. 1.		SERVICE MO	DES	-		1
Personnel Expenses	4.1	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%	5.000		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%	1	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%		1	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%		1	155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	· · · ·	0%		· . ·	34,730
Press and the second		-	0%	-	0%	· · · · · ·	1	
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%	S		621,145
								0
Operating Expenses		Expenditure	%	Expenditure	%	xpenditure	3	Contract Lota
		Expenditure 85,166	% 89%	Expenditure 10.500		xpenditure	3	
Total Occupancy		85,166	89%	10,500	11%	xpenditure		95,666
Total Occupancy Total Materials and Supplies		85,166 160,385	89% 29%		11% 71%	xpenditure		95,666 550,665
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:		85,166 160,385 6,659	89% 29% 61%	10,500 390,280	11% 71% 39%	xpenditure		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	3	Contract Total 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		85,166 160,385 6,659 545,696	89% 29% 61% 100%	10,500 390,280 4,257	11% 71% 39% 0%	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	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
Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor: Total Operating Expenses Total Direct Expenses Indirect 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 	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 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%	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	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%		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-1i Fiscal Year: 19-20

1a) SALARIES

	perations Directo	or	the state of the state of the		
			that assures monitoring too		
			tks with partner agencies an		
on program ada	ptation and refine	ment; coordinates current	nt and emerging health infor	mation	collecti
Brief description of job duties: coordinates pro					-
			ig and public health experier	ice or a	3n
Minimum qualifications: equivalent com	bination of education	on and experience.	A	-	
C		the second second	Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):		otal
\$113,025.00	0.05	12	11	\$	5,6
					-
Staff Position 2: Director, Beha					
			the implementation, managed		
			ssional oversight to create a		
		e current nealth and we	I-being needs, including HIV	needs	orgay
billet desemption of job datiest		alal anianana huningan a	a related disciplina, three up		
			or related discipline; three ye emonstrated program mana		
Minimum qualifications: program develo			entonsuated program manag	Jement	anu
initiation quantications, program develo	smone experience.		Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):	Т	otal
\$140,000.00	0.05	12	1	\$	7,0
\$ Fiological	0.00			*	.,,0
Staff Position 3: Dir. Gov't Gran	to.				
			ement and contract related a		
Minimum qualifications: and negotiations		grant development and t	writing; government contract	s mana	igenie
Annual Calence	x FTE:	x Months per Year:	Annualized (if less than 12 months):		otal
Annual Salary: \$102,750.00	0.05	12	12 monuisj.	\$	5,1
\$102,750.00	0.00	12		*	0,1
Staff Position 4: Data Manager	-			_	_
	Responsible for co	ordinating data collection	on, quality assurance, report		
				ng and	1
summaries to en	isure foundation p	rograms are rigorously e	evaluated for process and he		
				alth out	tcome
and public health of all data collec	impact. Respon	sible for review, abstract	evaluated for process and he	alth ou databas	tcome
and public healt	impact. Respon	sible for review, abstract	evaluated for process and he tion from client records and d	alth ou databas	tcome
and public healt of all data collec Brief description of job duties: requiments.	n impact. Respon- ted from clients as	sible for review, abstract well as data analysis to	evaluated for process and he tion from client records and o meet programmatic and co	ealth ou databas ntract	itcome se entr
and public healt of all data collec Brief description of job duties: requiments.	n impact. Respon- ted from clients as	sible for review, abstrac well as data analysis to perience managing and i	evaluated for process and he tion from client records and d	ealth ou databas ntract	itcome se entr
and public healt of all data collec Brief description of job duties: requiments. Bachelor's degre	n impact. Respon- ted from clients as	sible for review, abstrac well as data analysis to perience managing and i	evaluated for process and he tion from client records and o meet programmatic and co	ealth ou databas ntract	itcome se entr
and public healt of all data collec Brief description of job duties: requiments. Bachelor's degre	n impact. Respon- ted from clients as	sible for review, abstrac well as data analysis to perience managing and i	evaluated for process and he tion from client records and o meet programmatic and co ensuring quality for large clie	ealth ou databas ntract int data	itcome se entr
and public healt of all data collec Brief description of job duties: requiments. Bachelor's degre Minimum qualifications: years equivalent	h impact. Respon- ted from clients as be and 2 years exp experience requir	sible for review, abstrac well as data analysis to perience managing and ed.	evaluated for process and he tion from client records and o meet programmatic and co ensuring quality for large clie Annualized (if less than	ealth ou databas ntract int data	se entr
and public healt of all data collec Brief description of job duties: requiments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary:	h impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE:	sible for review, abstract well as data analysis to perience managing and ed. x Months per Year:	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months):	ealth ou databas ntract ent data Te	se entr sets c
and public healt of all data collec Brief description of job duties: requiments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00	h impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE:	sible for review, abstract well as data analysis to perience managing and ed. x Months per Year:	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months):	ealth ou databas ntract ent data Te	se entr sets c
and public healt of all data collec Brief description of job duties: requiments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director	n impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE: 0.05	sible for review, abstract well as data analysis to berience managing and ed. <u>x Months per Year:</u> 12	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1	ealth oui databas ntract ant data To \$	itcome se entr sets o otal
and public health of all data collect Brief description of job duties: requiments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P	n impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE: 0.05 rovides oversight	sible for review, abstract well as data analysis to berience managing and ed. <u>x Months per Year:</u> 12 and management of 11	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months):	ealth oui databas ntract ant data To \$	otal 4,3
and public health of all data collect Brief description of job duties: requiments. Bachelor's degree Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmental str effective partners	n impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE: 0.05 rovides oversight ategic goals in alig ships with other H	sible for review, abstract well as data analysis to berience managing and red. <u>x Months per Year:</u> 12 and management of 11 prent with agency and IV/AIDS and Harm Redu	evaluated for process and he tion from client records and co meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n uction agencies. Responsible	ealth oui databas ntract int data Tr \$ nnual naintain e for sch	otal 4,3
and public health of all data collect Brief description of job duties: requiments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmental str effective partners and training full-1	n impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE: 0.05 rovides oversight ategic goals in alig ships with other H ime and temporar	sible for review, abstract well as data analysis to berience managing and red. <u>x Months per Year:</u> <u>12</u> and management of 11 prment with agency and IV/AIDS and Harm Redu y staff in appropriate exc	evaluated for process and he tion from client records and o meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n uction agencies. Responsible change protocol. Responsible	ealth oui databas ntract ant data Tr \$ nnual naintain e for sch e for pu	otal 4,3
and public health of all data collect Brief description of job duties: requiments. Bachelor's degree Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmentai str effective partners and training full- exchange suppli	n impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE: 0.05 rovides oversight ategic goals in alig ships with other H ime and temporar es. Organizes ren	sible for review, abstract well as data analysis to berience managing and red. <u>x Months per Year:</u> <u>12</u> and management of 11 prment with agency and IV/AIDS and Harm Redu y staff in appropriate exponentiate expone	evaluated for process and he tion from client records and o meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n riction agencies. Responsible change protocol. Responsible from sites and coordinates	ealth oui databas ntract ant data Tro \$ nanual naintain e for sch e for pur remova	osets c otal 4,3
and public health of all data collect Brief description of job duties: requiments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmental str effective partner and training full-i exchange suppli Brief description of job duties: waste removal c	n impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE: 0.05 rovides oversight ategic goals in alig ships with other H ime and temporar es. Organizes ren ompany, prepare to	sible for review, abstract well as data analysis to berience managing and red. <u>x Months per Year:</u> 12 and management of 11 inment with agency and IV/AIDS and Harm Redu y staff in appropriate ex- noval of biohazard waster reports for compliance a	evaluated for process and he tion from client records and o meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months): 1 exchange sites. Develops an city objectives. Builds and n rotion agencies. Responsible change protocol. Responsible from sites and coordinates nd maintain safety protocols	ealth oui databas ntract ant data T \$ nnual naintain a for sch e for pu remova	otal 4,3 hedulir urchas al with
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53,944

0.75

12

\$71,925.00

Responsible Responsible	or purchasing excha	ange supplies. Organize	porary staff in appropriate ex s removal of biohazard was re reports for compliance an	te fron	n sites an
homeless po Interviewing a	ulations required. And strong understant ion preferred. Expension	Associates degree prefer Iding of harm reduction prior reduction prior in the second s	pple who use drugs, highly m rred, experience using motiv, practices and principles, exp k, hand truck, and carts and	ationa	il ce doing
A	x FTE:	x Months per Year:	Annualized (if less than 12 months):	100	Total
Annual Salary:	A1 1 mm	A Month's per real.	12 monutoj.		
Annual Salary: \$63,705.0 Staff Position 7: Logistics As	1.00	12	1	\$	63,70
\$63,705.0 Staff Position 7: Logistics As Logistics Ass	1.00 cociates ciate - Staffs exchan	12	1 s volunteers at the sites. Tra		63,70
\$63,705.0 Staff Position 7: Logistics As Logistics Ass to exchanges Brief description of job duties: Experience w English/Span	1.00 cociates ciate - Staffs exchan sites and sets up/tea orking as a voluntee sh desired. Ability to	12 nge sites and supervises ars down sites as neede r or paid staff in a human follow directions and go	1 s volunteers at the sites. Tra	nsport	63,70 ts supplie
\$63,705.0 Staff Position 7: Logistics As Logistics Ass to exchanges Brief description of job duties: Experience w	1.00 cociates ciate - Staffs exchan sites and sets up/tea orking as a voluntee sh desired. Ability to	12 nge sites and supervises ars down sites as neede r or paid staff in a human follow directions and go	1 s volunteers at the sites. Tra d. n service organization. Biling	nsport jual in ecessa	63,70 ts supplie

exchangers willin develop training r	g to become pee materials, includir	r educators. Develops	alning, and supervising seco curriculum for these trainings evant to MSM-IDU speed use e sites.	s and helps
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 ye
Minimum qualifications:				
Minimum qualifications:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 9: Health Educato	or	The second second	and the second		
testing and linkage	ge to care; harm r	eduction counseling) th	revention; vein care; referral rough mobile and encampm riding crisis intervention supp	ent o	
High school diplo	ma or equivalence	v: valid California driver	's license and excellent drivi	00 10	and the
		n drug users and with v		ng ne	COID. 1 YE
					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	sers	and with
Win influent quantoations.					
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 second contraction of the second	\$	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	
Retiremen	t s	9,492.00	
Medica	\$	51,331.00	
Denta		23.0747.20	
Unemployment Insurance	S	2,584.00	
Disability Insurance	\$	20,224.00	
Paid Time Of	F		
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 /	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 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%	1
of total direct costs.	

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

TOTAL EXPENSES: 2,006,497

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

19-20 12/21/2018

	1	SERVICE MODES					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%	1	0%	1 - 2	0%	147,580
Total General Operating	12,000	100%	÷	0%	9 1	0%	12,000
Total Operating Expenses	192,580	100%	-	0%		0%	192,580
Total Direct Expenses	192,580	100%	-1	0%	1 -1	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	of the local division of the	-	-	-	-	12
Cost Per Unit of Service by Service Mode			1.1.1	-			
Unduplicated Clients (UDC) per Service Mode	N/A	-		-			11.2000-00

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 galion - 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
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 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%	A REAL PROV
of total direct costs.		19,258

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

TOTAL EXPENSES: 211,838

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

B-1k 1 20-21 12/21/2018

		1.2		SERVICE MC	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%	10200.0021	0%	-	1000	5,651
Dir. Behavioral Health Svc	0.05	6,100	87%	900	13%	1		7,000
Dir, Gov't Contracts	0.05	5,138	100%		0%		11	5,138
Data Manager	0.05	4,367	100%		0%	· · · · · · · · · · · · · · · · · · ·		4,367
SAS Director	0.75	48,010	89%	5,934	11%		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%	1	0%			53.944
Health Educator	2.75	155,411		() (e)	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%		1	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
	1	Expenditure	%	Expenditure	%	xpenditure	9	Contract Total
Operating Expenses		Expenditure 85,166	% 89%	Expenditure 10.500		xpenditure	9	Contract Total 95,666
Operating Expenses Total Occupancy		85,166	89%	Expenditure 10,500 390,280	11%	xpenditure	9	95,666
Operating Expenses Total Occupancy Total Materials and Supplies		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure	9	95,666 550,665
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating		85,166 160,385 6,659	89% 29% 61%	10,500	11% 71% 39%	xpenditure	0	95,666 550,665 10,916
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating Consultants/Subcontractor:		85,166 160,385	89% 29%	10,500 390,280	11% 71%	xpenditure	8	95,666 550,665
Operating Expenses 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 	11% 71% 39% 0% 34%	xpenditure	9	95,666 550,665 10,916 545,696 1,202,943
Operating Expenses 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 1,202,943 1,824,088
Operating Expenses 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 1,244,822	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
Operating Expenses 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 	11% 71% 39% 0% 34% 32% 32%	xpenditur	9	95,666 550,665 10,916 545,696 1,202,943 1,824,088 182,409
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	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 Program Name: HIV Syringe Access & Disposal Services

Appendix #:	B-1k
Fiscal Year:	20-21

1a) SALARIES

	perations Directo		des Transientes and		_
with all activities	and that all requi ptation and refine	red data is reported; wo ment; coordinates curre	that assures monitoring to rks with partner agencies au nt and emerging health info	nd program	n sta
	c Health and 3 ye	ars community organizin	ng and public health experie	nce or an	
			Annualized (if less than		-
Annual Salary:	x FTE:	x Months per Year:	12 months):	To	tal
\$113,025.00	0.05	12	1	\$	5,6
Staff Position 2: Director, Behav	vioral Health Ser	vices			_
Director, Behavia evaluation of the continuum that is Brief description of job duties: and bisexual me	program structures responsive to the n.	Responsible for ensuring e and provision of profe e current health and we	the implementation, mana ssional oversight to create a l-being needs, including HIV or related discipline; three ye	a service d / needs of	f gay
	pacity, especially	in HIV prevention and d	emonstrated program mana		
an und arthur	1.1.1.1.1.1		Annualized (if less than		če.
Annual Salary: \$140,000.00	x FTE: 0.05	x Months per Year: 12	12 months):	Tol	
\$140,000.00	0.05	12	1	\$	7,0
Staff Position 3: Dir, Gov't Grant	P			_	_
Minimum qualifications: and negotiations.	x FTE:	u Mantha new York	Annualized (if less than		
Annual Salary: \$102,750.00	0.05	x Months per Year. 12	12 months): 1	Tot \$	a) 5,13
+/					-,
Staff Position 4: Data Manager					
Data Manager - P		rograms are rigorously e	n, quality assurance, report valuated for process and he		
and public health of all data collecte Brief description of job duties: requirments. Bachelor's degree	ed from clients as and 2 years exp	well as data analysis to erience managing and e	ion from client records and o meet programmatic and co ensuring quality for large clie	database i ntract	entry
and public health of all data collecte Brief description of job duties: requirments. Bachelor's degree Minimum qualifications: years equivalent of	ed from clients as and 2 years exp	well as data analysis to erience managing and e ed	ion from client records and o meet programmatic and co ensuring quality for large clie Annualized (if less than	database i ntract int data se	entry ets o
and public health of all data collecte Brief description of job duties: requirments. Bachelor's degree	ed from clients as and 2 years exp experience require	well as data analysis to erience managing and e	ion from client records and o meet programmatic and co ensuring quality for large clie	database i ntract int data se Tota	entry ets or
and public health of all data collecte Brief description of job duties: requirments. Bachelor's degree Minimum qualifications: years equivalent of Annual Salary: \$87,338.00	ed from clients as e and 2 years exp experience require x FTE:	well as data analysis to erience managing and e ed x Months per Year:	ion from client records and o meet programmatic and co ensuring quality for large clie Annualized (if less than 12 months):	database i ntract int data se Tota	entry ets o al
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Staff Position 6: Log				the second se	
				porary staff in appropriate ex	
				s removal of blohazard was	
		oval with waste re	emoval company, prepa	re reports for compliance an	d maintain s
Brief description of job duties: prot	tocols.	1.000	and the second second		2000
Min	imum one to	three years' expe	rience working with peo	ple who use drugs, highly m	arginalized,
				red, experience using motiv	
inte	arviewing and	strong understan	ding of harm reduction	practices and principles, exp	erience doin
				k, hand truck, and carts and	understandi
Minimum qualifications: safe	e lifting techni	ques and injury p	revention.		
110/10/10		100 C	Contractor and the second	Annualized (if less than	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Annual Salary:		x FTE:	x Months per Year:	12 months):	Total
\$	63,705.00	1.00	12	1	\$ 63,
Staff Position 7: Log		and the second se	and all the second account of the		
			nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra	nsports sup
Brief description of job duties:	achanges sig	es and sets up/tea	ars down sites as neede	u.	
	adapaa warki	ing as a voluntoo	or poid staff in a huma	n service organization. Biling	auglin.
				od communications skills ne	
Minimum qualifications: be a					500336i y. 1910
				Annualized (if less than	
Annual Salary:		x FTE:	x Months per Year:	12 months):	Total
	56,513.00	2.00	12	1	\$ 113,
		Coordinator			
Staff Position 8: SSE	E/Volunteer	Containator			
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Sec exch deve Brief description of job duties: Annual Salary: Staff Position 9: Hea Rest testi Over Brief description of job duties: Annual Salary: Annual Salary: Staff Position 10: Con The with Brief description of job duties: coor High Minimum qualifications: volut	condary Excha hangers willin elop training r manages the h school diplo xperience wo 71,925.00 alth Educator ponsibilities in ing and linkag rseeing a tear h school diplo xperience wo 56,513.00 mmunity Eng Community Eng n school diplo	ange coord - Resp g to become pee materials, includir e site volunteers a ma or equivalence rking with injection x FTE: 0.75 noclude health edu ge to care; harm m m of street outrea ma or equivalence rking with injection x FTE: 2.75 agement & Kit F Engagement and nject drugs (PWII participant volun ma or equivalence	reducators. Develops of ag specific materials relevant and supervises exchang y; valid California driver n drug users and with von- x Months per Year: 12 cation (e.g. overdose pre- eduction counseling) this ch volunteers; and prov- y; valid California driver n drug users and with von- x Months per Year: 12 Packing Associate Kit Packing Associate is D), organizing harm reduc- teers (PWID) and other y; 1 year of experience von- tion of the service of	curriculum for these trainings evant to MSM-IDU speed use e sites. 's license and excellent driviounteers. Annualized (if less than 12 months): 1 revention; vein care; referral ough mobile and encampmo iding crisis intervention supp 's license and excellent drivio olunteers. Annualized (if less than 12 months): 1 s responsible for outreach an uction kit packing events, re volunteers to assist with kit working with injection drug u Annualized (if less than	s and helps ers. Schedul ng record. 1 Total \$ 53, s to HIV/HCV ent outreach bort. ng record. 1 Total \$ 155, ad engageme cruiting and packing. sers and wit
Sec exch deve Brief description of job duties: Annual Salary: Staff Position 9: Hea Res testi Over Brief description of job duties: Annual Salary: Staff Position 10: Con The with Brief description of job duties: coor High Minimum qualifications: volut	condary Excha hangers willin elop training r manages the h school diplo xperience wo 71,925.00 alth Educator ponsibilities in ing and linkag rseeing a tear h school diplo xperience wo 56,513.00 mmunity Eng Community Eng n school diplo	ange coord - Resp g to become pee materials, includir a site volunteers a ma or equivalence rking with injectio x FTE: 0.75 noclude health edu ge to care; harm m m of street outrea ma or equivalence rking with injection x FTE: 2.75 agement & Kit F Engagement and nject drugs (PWII participant volun	r educators. Develops of ng specific materials rele- ind supervises exchang y; valid California driver n drug users and with v <u>x Months per Year:</u> 12 cation (e.g. overdose pl eduction counseling) this ch volunteers; and prov y; valid California driver n drug users and with vo <u>x Months per Year:</u> 12 Packing Associate Kit Packing Associate is D), organizing harm reducteers (PWID) and other	curriculum for these trainings evant to MSM-IDU speed use e sites. 's license and excellent driviounteers. Annualized (if less than 12 months): 1 revention; vein care; referral ough mobile and encampme iding crisis intervention supp 's license and excellent drivio olunteers. Annualized (if less than 12 months): 1 s responsible for outreach an uction kit packing events, re volunteers to assist with kit working with injection drug u	s and helps ers. Schedul ng record. 1 Total \$ 53, s to HIV/HCV ent outreach bort. ng record. 1 Total \$ 155, ad engageme cruiting and packing.

3

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	Waterials & 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:

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 Co	onsultants/Subcontractors:	545,696
		L OPERATING EXPENSES:	-
	TOTA	LOPERATING EXPENSES:	1,202,943

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.		182,409

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

TOTAL EXPENSES: 2,006,497

Appendix # B-11 Page # 1 Fiscal Year(s) 20-21 Funding Notification Date 12/21/2018

		S	ERVICE M	ODES			
Personnel Expenses	Syringe Access, Disposal Coordination & Bulk Purchasing		Coordination & 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%		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%	1	0%		0%	19,258
TOTAL EXPENSES	211,838	100%		0%	-	0%	211,838
Units of Service (UOS) per Service Mode	12		-1		-1	-	12
Cost Per Unit of Service by Service Mode	17,653.17		-		1 ÷ 1 !	-	
Unduplicated Clients (UDC) per Service Mode		and the second				-	

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

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, bandalds, 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
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
	Te	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 10%	
of total direct costs.		19,258

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

TOTAL EXPENSES: 211,838

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

				SERVICE MO	DES			1
Personnel Expenses	4	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%		1.0	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%		1	155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	÷.	0%		1.0	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	1	Expenditure	%	Expenditure	%	xpenditure		Contract Total
Total Occupancy		85.166	89%	10,500	11%			95.666
Total Materials and Supplies		160,385	29%	390,280	71%			550,665
Total General Operating		6,659	61%	4,257	39%			10,916
Consultants/Subcontractor:		545,696	100%		0%			545,696
Total Operating Expenses		797,906	66%	405,037	34%			1,202,943
Total Direct Expenses		1,244,822	68%	579,266	32%	1		1,824,088
Indirect Expenses	10.00%	124,482	68%	57,927	32%			182,409
TOTAL EXPENSES		1,369,304	68%	637,193	32%			2,006,497
Units of Service (UOS) per Ser	vice Mode	8,079	-	12		-1		8,091
Cost Per Unit of Service by Service		169.49		53,099.42				
	NOC	54,300	-	N/A				
								Rev. 07/15

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

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

1a) SALARIES

		ssurance procedures.		llectio
		ng and public health experien	ce or an	1.1
x FTE:	x Months per Year:	Annualized (if less than 12 months):	Tot	tal
0.05	5 12	1	\$	5,65
	x FTE: 25.00 0.05 r, Behavioral Health Se	25.00 0.05 12	x FTE: x Months per Year: Annualized (if less than 12 months): 25.00 0.05 12 1	x FTE: x Months per Year: Annualized (if less than 12 months): Tol 25.00 0.05 12 1 \$ r, Behavioral Health Services

Brief description of job duties: and bisexual mer	n.		I-being needs, including HIV	
	pacity, especially i	in HIV prevention and de	or related discipline; three yes emonstrated program manag	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$140,000,00	0.05	12	1	\$ 7.000

Staff Position 3: Dir. Gov't Grants				
Maintains operation departmental requiremental requirementa re	onal and statistication uirements, produce	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.	tand
Bachelor's degree	and evaluation; g		perience in health services p writing; government contract	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total

Staff Position 4: Data Manager				-
summaries to ens and public health	sure foundation p impact. Respon	rograms are rigorously e 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
Bachelor's degree Minimum qualifications: years equivalent			ensuring quality for large clie	ent data sets or
	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
Annual Salary:	A. 1. 1. Inc.	A MOTILIO POLITOUL	12 110110101.	Total

Staff Position 5: SAS Director				-	
departmental stra effective partners and training full-ti 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 i erience working w ement, supervisior	Inment with agency and IV/AIDS and Harm Redu y staff in appropriate ex noval of biohazard wast reports for compliance a ith injection and drug us n experience preferred.	exchange sites. Develops and licity objectives. Builds and ru uction agencies. Responsible change protocol. Responsible e from sites and coordinates and maintain safety protocols sers required. Associates De Must hold HIV test counselor	naintai e for sc le for p remov s. gree wi	heduling urchasir al with
		the lob.			
Minimum qualifications: be writing to obtain		ute job.	Annualized (if less than	-	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	т	otal

Staff Position 6: Logistics Inver	tory Mrg	N LO SHA BR COMPANY			
Responsible for	purchasing excha	inge supplies. Organize	porary staff in appropriate ex s removal of biohazard wast re reports for compliance and	e fror	n sites and
homeless popul interviewing and	ations required. A strong understan preferred. Exper	Associates degree prefer ding of harm reduction pr fience using a pallet jack	ple who use drugs, highly m red, experience using motiva practices and principles, expo c, hand truck, and carts and p	ationa	l æ doing
August 0 - 1	x FTE:		Annualized (if less than		1.11
Annual Salary:	AFIE.	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 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

exchangers willin develop training Brief description of job duties: and manages the	ange coord - Resp ng to become pee materials, includir e site volunteers a	r educators. Develops on ng specific materials releand supervises exchang		and helps ers. Schedules
		y; valid California driver n drug users and with v	'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
\$71,925.00	0.75			

Staff Position 9: Health Educato	r				1.11
testing and linkag	e to care; harm r	eduction counseling) the	revention; vein care; referral rough mobile and encampm iding crisis intervention supp	ent o	
High school diplo	ma or equivalence	y; valid California driver	's license and excellent drivi	ng re	cord. 1 ye
Minimum qualifications: of experience wo	king widt injectio	n drug users and with vi	olunieels.		
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	cruiting and
Brief description of job duties: coordinating SAS	participant volun	teers (PWID) and other	volunteers to assist with kit	
	ma or equivalenc	y; 1 year of experience	working with injection drug u	sers and with
High school diplo Minimum qualifications: volunteers.	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 Annualized (if less than	sers and with
	ma or equivalenc	y; 1 year of experience x Months per Year:		sers and with 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

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	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	1.00	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 - 1 - C - C - C - C - C - C - C - C -

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%	Amount
of total direct costs.	182,409

	Indirect Rate:	10.00%
T	OTAL INDIRECT COSTS:	182,409

TOTAL EXPENSES: 2,006,497

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

	The second second	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%	1	0%	33,000
Total Materials and Supplies	147,580	100%	-	0%	-	0%	147,580
Total General Operating	12,000	100%	-	0%	4	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%	1	0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%		0%	211,838
Units of Service (UOS) per Service Mode	12	-	- 1	-	- 1		12
Cost Per Unit of Service by Service Mode			1.0.4	-			L.
Unduplicated Clients (UDC) per Service Mode			11 22 1				and the second sec

Contractor Name San Fancisco AIDS Foundation Appen Program Name: HIV Syringe Access & Disposal Services Fiscal

Appendix #: B-1n 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
		7.4.30	
		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
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 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%	1 - 1 - 1 - 1
of total direct costs.		19,258
f total direct costs.		19

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

TOTAL EXPENSES: 211,838

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

B-10 1 22-23 12/21/2018

UOS COST ALLOCATION B	BY SERVICE MODE
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		A second second second		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%	1		5,13
Data Manager	0.05	4,367	100%		0%	1		4,36
SAS Director	0.75	48.010	89%	5,934	11%		L	53.944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%	1		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
and the second			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	9	Contract Tota
Total Occupancy		85,166	89%	10,500	11%			95.666
Total Materials and Supplies		160,385	29%	390,280	71%	1.2.1.1.1		550,665
Total General Operating		6.659	61%	4.257	39%			10.916
Consultants/Subcontractor:	1	545.696	100%		0%	1.00		545.696
Total Operating Expenses		797,906	66%	405,037	34%			1,202,943
Total Direct Expenses		1,244,822	68%	579,266	32%			1,824,088
Indirect Expenses	10.00%	124,482	68%	57,927	32%			182,409
TOTAL EXPENSES		1,369,304	68%	637,193	32%			2,006,497
Units of Service (UOS) per Serv	ice Mode	8,079		12		-		8,091
		169.49		53,099.42				
Cost Per Unit of Service by Serv			and the second division of the second divisio	N/A				

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

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

1a) SALARIES

	perations Directo			
with all activities	and that all requi	red data is reported; wo ment; coordinates curre	n that assures monitoring too rks with partner agencies ar nt and emerging health infor ssurance procedures.	nd program staf
	ic Health and 3 yes	ars community organizing	ng and public health experie	nce or an
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$113,025.00	0.05	12	1	\$ 5,6
Staff Position 2: Director, Behav	vioral Health Ser	vices		
evaluation of the continuum that is Brief description of job duties: and bisexual me Masters degree	e program structur s responsive to the n. in psychology, soo pacity, especially	e and provision of profe e current health and we cial sciences, business o in HIV prevention and d	g the implementation, managesional oversight to create a silonal oversight to create a ll-being needs, including HIV or related discipline; three ye emonstrated program managemonstrated program ma	service delive needs of gay ars expereince
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$140,000.00	0.05	12	1	\$ 7,00
Maintains operat departmental reg	ional and statistica uirements, produc	al reporting mechanisms ces routine and ad hoc	ement and contract related a s in accordance with contrac reporting as needed, and en	tand
Maintains operat departmental req Brief description of job duties: integrity of the se Bachelor's degre planning, design,	ional and statistica quirements, produce ervice database by e and at least two , and evaluation; g	al reporting mechanisms ces routine and ad hoc voerseeing database of years demonstrated ex	s in accordance with contrac reporting as needed, and en	t and sures the program
Maintains operat departmental req Brief description of job duties: integrity of the se Bachelor's degre planning, design, Minimum qualifications: and negotiations.	ional and statistica quirements, produce ervice database by e and at least two , and evaluation; g	al reporting mechanisms ces routine and ad hoc voverseeing database of years demonstrated ex grant development and v	s in accordance with contrac reporting as needed, and en juality assurance activities. perience in health services p writing; government contract Annualized (if less than	t and sures the program
Maintains operat departmental req Brief description of job duties: integrity of the se Bachelor's degre planning, design,	ional and statistica quirements, produce ervice database by e and at least two , and evaluation; g	al reporting mechanisms ces routine and ad hoc voerseeing database of years demonstrated ex	s in accordance with contrac reporting as needed, and en juality assurance activities. perience in health services p writing; government contract	t and sures the program s managemen
Maintains operat departmental req Brief description of job duties: integrity of the se Bachelor's degre planning, design, Minimum qualifications: and negotiations. Annual Salary: \$102,750.00	ional and statistica quirements, produce arvice database by the and at least two and evaluation; g x FTE:	al reporting mechanisms ces routine and ad hoc i voverseeing database of years demonstrated ex grant development and v x Months per Year:	s in accordance with contract reporting as needed, and en quality assurance activities. sperience in health services p writing; government contract Annualized (if less than 12 months):	t and sures the program s managemen Total
Maintains operat departmental req Brief description of job duties: integrity of the se Bachelor's degre planning, design, Minimum qualifications: and negotiations. Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - F summaries to ens and public health of all data collector	ional and statistica guirements, produc- ervice database by e and at least two , and evaluation; g x FTE: 0.05 Responsible for co sure foundation pr impact. Respons	al reporting mechanisms ces routine and ad hoc i voverseeing database of years demonstrated ex grant development and v x Months per Year: 12 ordinating data collection rograms are rigorously es sible for review, abstract	s in accordance with contract reporting as needed, and en quality assurance activities. sperience in health services p writing; government contract Annualized (if less than 12 months):	t and sures the program s managemen Total \$ 5,13 ng and alth outcomes latabase entry
Maintains operat departmental rec Brief description of job duties: integrity of the se Bachelor's degre planning, design, Minimum qualifications: and negotiations. Annual Salary: Staff Position 4: Data Manager Data Manager - F summaries to ens and public health of all data collector Brief description of job duties: requirments. Bachelor's degree	ional and statistica guirements, produc- ervice database by e and at least two , and evaluation; g x FTE: 0.05 Responsible for co sure foundation pr impact. Response of from clients as e and 2 years expo	al reporting mechanisms ces routine and ad hoc i voverseeing database of years demonstrated ex- grant development and vo- x Months per Year: 12 ordinating data collection ograms are rigorously e- sible for review, abstract well as data analysis to erience managing and e-	s in accordance with contract reporting as needed, and en quality assurance activities. sperience in health services p writing; government contract Annualized (if less than 12 months): 1 0, quality assurance, reporting valuated for process and he ion from client records and c	t and sures the program s managemen Total \$ 5,13 ng and alth outcomes latabase entry ntract
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Staff Position 5: SAS Director				
departmental str effective partner and training full- exchange suppli Brief description of job duties: waste removal c Three years exp	rategic goals in ali ships with other H time and tempora- ies. Organizes rer company, prepare erience working w ement, supervisio	gnment with agency and IV/AIDS and Harm Red ry staff in appropriate ex moval of biohazard wast reports for compliance a rith injection and drug us n experience preferred.	exchange sites. Develops a d city objectives. Bullds and r uction agencies. Responsible change protocol. Responsib te from sites and coordinates and maintain safety protocols sers required. Associates De- Must hold HIV test counselou	maintains e for scheduling le for purchasing removal with s. gree with
		Contraction Contraction of	Annualized (if less than	Tax of a
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$71,925.00	0.75	12	1	\$ 53,944

Staff Position 6: Logistics Inv	entory Mrg			
Responsible fi coordinates re	or purchasing excha	ange supplies. Organize	porary staff in appropriate ex es removal of biohazard was re reports for compliance an	te from sites an
Brief description of job duties: protocols.	1	Contraction of the later	the state was	
homeless pop interviewing a	ulations required. And strong understan on preferred. Expe	Associates degree prefe nding of harm reduction rience using a pallet jac	ople who use drugs, highly m rred, experience using motiv practices and principles, exp k, hand truck, and carts and	ational perience doing
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$63,705.00		12	1	\$ 63,70
Staff Position 7: Logistics Ass				
		nge sites and supervise ars down sites as neede	s volunteers at the sites. Tra ed.	insports supplie
Experience wo	sh desired. Ability to	follow directions and go	n service organization. Bilin ood communications skills n	
		Land and the state	Annualized (if less than	1.000
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$56,513.00	2,00	12	1	\$ 113,02
Brief description of job duties: and manages	the site volunteers a	and supervises exchang	C	ers. Schedules
Brief description of job duties: and manages High school di of experience Minimum qualifications:	the site volunteers a ploma or equivalence working with injectio	and supervises exchang cy; valid California driver on drug users and with v	evant to MSM-IDU speed us e sites. 's license and excellent drivi olunteers. Annualized (if less than	ers. Schedules ng record. 1 ye
Brief description of job duties: and manages High school di of experience Minimum qualifications: Annual Salary:	the site volunteers a ploma or equivalence working with injection x FTE:	and supervises exchang cy; valid California driver on drug users and with v x Months per Year:	evant to MSM-IDU speed us le sites. 's license and excellent drivi olunteers.	ers. Schedules ng record. 1 ye Total
Brief description of job duties: and manages High school di of experience Minimum qualifications:	the site volunteers a ploma or equivalence working with injectio	and supervises exchang cy; valid California driver on drug users and with v	evant to MSM-IDU speed us e sites. 's license and excellent drivi olunteers. Annualized (if less than	ers. Schedules ng record. 1 ye
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Brief description of job duties: and manages High school di of experience Annual Salary: \$71,925.00 Staff Position 9: Health Educa Responsibilitie testing and link	the site volunteers a ploma or equivalence working with injection x FTE: 0.75 tor s include health educe tage to care; harm r	and supervises exchang cy; valid California driver on drug users and with v x Months per Year: 12 ucation (e.g. overdose p reduction counseling) the	evant to MSM-IDU speed us e sites. 's license and excellent drivi olunteers. Annualized (if less than	ers. Schedules ing record. 1 ye Total \$ 53,94 s to HIV/HCV ent outreach;
Brief description of job duties: and manages High school di of experience Minimum qualifications: Annual Salary: \$71,925.00 Staff Position 9: Health Educa Responsibilitie testing and link overseeing a te High school dij	the site volunteers a ploma or equivalence working with injection x FTE: 0.75 tor s include health edu cage to care; harm r earn of street outreat ploma or equivalence	and supervises exchang cy; valid California driver on drug users and with v x Months per Year: 12 ucation (e.g. overdose p reduction counseling) the ach volunteers; and prov	evant to MSM-IDU speed us re sites. 's license and excellent drivi olunteers. Annualized (if less than 12 months): 1 revention; vein care; referral rough mobile and encampm riding crisis intervention supp 's license and excellent drivi olunteers.	rs. Schedules ng record. 1 ye Total \$ 53,94 s to HIV/HCV ent outreach; port.
Brief description of job duties: and manages High school di of experience Annual Salary: \$71,925.00 Staff Position 9: Health Educa Responsibilitie testing and link overseeing a to High school di Minimum qualifications: of experience of	the site volunteers a ploma or equivalence working with injection x FTE: 0.75 tor s include health edu cage to care; harm r earn of street outreat ploma or equivalence working with injection	and supervises exchang cy; valid California driver on drug users and with v x Months per Year: 12 ucation (e.g. overdose p reduction counseling) thi ach volunteers; and prov cy; valid California driver on drug users and with v	evant to MSM-IDU speed us re sites. 's license and excellent drivi olunteers. Annualized (if less than 12 months): 1 revention; vein care; referral rough mobile and encampm riding crisis intervention supp 's license and excellent drivi olunteers. Annualized (if less than	ers. Schedules ng record. 1 ye Total \$ 53,94 s to HIV/HCV ent outreach; port. ng record. 1 ye
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Brief description of job duties: and manages High school di of experience Annual Salary: Staff Position 9: Health Educa Responsibilite testing and link overseeing a to High school di overseeing a to High school di Minimum qualifications: of experience Annual Salary: Staff Position 10: Community E The Communit with people wh Brief description of job duties: coordinating S	the site volunteers a ploma or equivalence working with injection x FTE: 0.75 tor s include health edu tage to care; harm r earn of street outreat ploma or equivalence working with injection x FTE: 2.75 ngagement & Kit F y Engagement and o inject drugs (PWI AS participant volun	and supervises exchang cy; valid California driver on drug users and with v x Months per Year: 12 ucation (e.g. overdose p reduction counseling) the ach volunteers; and prov cy; valid California driver on drug users and with v x Months per Year: 12 Packing Associate Kit Packing Associate is D), organizing harm red iteers (PWID) and other	evant to MSM-IDU speed us re sites. 's license and excellent drivi olunteers. Annualized (if less than 12 months): 1 revention; vein care; referral rough mobile and encampm riding crisis intervention supp 's license and excellent drivi olunteers. Annualized (if less than 12 months): 1 s responsible for outreach ar uction kit packing events, re- volunteers to assist with kit	ers. Schedules ng record. 1 ye Total \$ 53,94 s to HIV/HCV ent outreach; port. ng record. 1 ye Total \$ 155,41 ad engagement cruiting and packing.
Brief description of job duties: and manages High school di of experience Annual Salary: Staff Position 9: Health Educa Responsibilite testing and link overseeing a to High school di Minimum qualifications: of experience Annual Salary: Staff Position 10: Community E Staff Position 10: Community E The Communit with people wh Brief description of job duties: coordinating S High school dig	the site volunteers a ploma or equivalence working with injection x FTE: 0.75 tor s include health edu tage to care; harm r earn of street outreat ploma or equivalence working with injection x FTE: 2.75 ngagement & Kit F y Engagement and o inject drugs (PWI AS participant volun	and supervises exchang cy; valid California driver on drug users and with v x Months per Year: 12 ucation (e.g. overdose p reduction counseling) the ach volunteers; and prov cy; valid California driver on drug users and with v x Months per Year: 12 Packing Associate Kit Packing Associate is D), organizing harm red iteers (PWID) and other	evant to MSM-IDU speed us re sites. 's license and excellent driviounteers. Annualized (if less than 12 months): 1 revention; vein care; referral rough mobile and encampm riding crisis intervention supp 's license and excellent driviounteers. Annualized (if less than 12 months): 1 s responsible for outreach ar uction kit packing events, referral	ers. Schedules ng record. 1 ye Total \$ 53,94 s to HIV/HCV ent outreach; port. ng record. 1 ye Total \$ 155,41 ad engagement cruiting and packing.
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1b) EMPLOYEE FRINGE BENEFITS:

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

Component	Cost	
Social Security	5	38,014.00
Retirement	\$	9,492.00
Medical	\$	51,331.00
Dental	1	
Unemployment Insurance	\$	2,584.00
Disability Insurance	\$	20,224.00
Paid Time Off	M	
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	
Bidg 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	
	1	Total Occupancy:	95,666	

Materials & Supplies:

Expense Item	Brief Description	Rate	Cost	
Office Supplies & Postage	\$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	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, I	T,etc.	\$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, I	T,etc.	\$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT	T,etc.	\$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, I	T,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) 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

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

	SERVICE MODES					1	
Personnel Expenses	Syringe Access, Disposal Coordination & Bulk Purchasing			1			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%	1	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%	1	0%		0%	19,258
TOTAL EXPENSES	211,838	100%	-	0%	-	0%	211,838
Units of Service (UOS) per Service Mode	12	-	- 1		-		12
Cost Per Unit of Service by Service Mode		-	10.1-01		1.1.1	-	1
Unduplicated Clients (UDC) per Service Mode							
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
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 M	Aterials & 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	I General Operating:	12,000
	TOTAL OPE	RATING EXPENSES:	192,580
	то	TAL DIRECT COSTS:	192,580

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.	19,258

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

TOTAL EXPENSES: 211,838

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

B-1q 1 23-24 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 Total
Pams & Ops Director	0.05	5,651	100%		0%		1	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%		1	5,138
Data Manager	0.05	4.367	100%		0%		-	4.367
SAS Director	0.75	48,010	89%	5,934	11%	1	1	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%	1	1	53.944
Health Educator	2.75	155,411			0%	1		155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	-	0%		- 14	34,730
		-	0%		0%		-	
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%	1		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
Total General Operating		6,659	61%	4,257	39%			10,916
Consultants/Subcontractor:		545,696	100%	-	0%		-	545,696
Total Operating Expenses		797,906	66%	405,037	34%			1,202,943
Total Direct Expenses		1,244,822	68%	579,266	32%	-		1,824,088
Indirect Expenses	10.00%	124,482	68%	57,927	32%			182,409
TOTAL EXPENSES	1010074	1,369,304	68%	637,193	32%	1		2,006,497
Units of Service (UOS) per Service	vice Mode	8,079		12]	-	-1		8,091
		169.49		53,099.42		-		0,001
Cost Per Unit of Service by Service					and the second se		and the owner water of the owner owner owner owner owner ow	

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

Appendix #: B-1q Fiscal Year: 23-24

1a) SALARIES

Staff Position 1: Programs & Op	erations Directo	r			
	and the same office with the second	A STATE OF A	that assures monitoring too		
			ks with partner agencies an		
on program ada Brief description of job duties: coordinates prog			nt and emerging health Infor	matio	on collection
			g and public health experier		
Minimum qualifications: equivalent comb			g and public nearth experier	ice of	an
turning quanterions, equivalent comb	ination of calloan		Annualized (if less than		
Annual Salary:	x FTE:	x Months per Year:	12 months):		Total
\$113,025.00	0.05	12	1	\$	5,6
				-	
Staff Position 2: Director, Behav			0 - to -1		
evaluation of the	program structure	e and provision of profes	the implementation, managesional oversight to create a l-being needs, including HIV	servi	ce delive
Brief description of job duties: and bisexual me				_	
			r related discipline; three ye		
a supervisory ca Minimum qualifications: program develop			emonstrated program manage	geme	ent and
winning quantications, program develop	ment experience.		Annualized (if less than	1	
Annual Salary:	X FTE:	x Months per Year:	12 months):	11.1	Total
\$140,000.00	0.05	12	1	\$	7,00
Staff Position 3: Dir. Gov't Grant					
Director, Gov't C	ontracts - Respon	sible for all data manage	ement and contract related a	activit	ies.
			in accordance with contract		
			eporting as needed, and en		
Brief description of job duties: integrity of the se	rvice database by	v overseeing database o	uality assurance activities.		
			perience in health services	oroan	am
		· · · · · · · · · · · · · · · · · · ·	vriting; government contract	10.00	
Minimum qualifications: and negotiations	• • • • • • •	10 - V - C - C - C - C - C - C - C - C - C			- 42.1 mil
		100.00	Annualized (if less than		÷
Annual Salary:	x FTE:	x Months per Year:	12 months):	-	Total
\$102,750.00	0.05	12	1	\$	5,13
OF WEAT A Data Management				_	-
Staff Position 4: Data Manager	Dessensible for or	ordinating data collection	n, quality assurance, report		
Data Manader -					be
	sure foundation o	ronrams are rinorouch e	valuated for procees and he		
summaries to en		rograms are rigorously e sible for review abstract		alth (outcome
summaries to en and public health	impact. Respons	sible for review, abstract	ion from client records and o	alth datab	outcome ase entr
summaries to en and public health of all data collect	impact. Respons	sible for review, abstract		alth datab	outcome ase entr
summaries to en and public health of all data collect Brief description of job duties: requirments.	impact. Responsed from clients as	sible for review, abstract well as data analysis to	ion from client records and o meet programmatic and co	alth datab	outcome ase entry t
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Res Res coo	sponsible for pur	neduling and tra rchasing excha	nge supplies. Organize	porary staff in appropriate ex s removal of biohazard wast re reports for compliance and	te from	n sites and
Min	nimum one to thr	ee vears' expe	rience working with peo	ple who use drugs, highly m	aroina	lized. or
horr	meless populatio erviewing and str alth education pre	ns required. A ong understand eferred. Experi	ssociates degree prefer ding of harm reduction p ience using a pallet jack	red, experience using motive practices and principles, exp c, hand truck, and carts and i	ationa erienc	l e doing
hon inte hea	meless populatio erviewing and str alth education pre	ns required. A ong understand eferred. Experi	ssociates degree prefer ding of harm reduction p ience using a pallet jack	red, experience using motive practices and principles, exp	ationa erienc	e doing

	ate - 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 ood 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

exchangers willin develop training	ange coord - Resp ng to become pee 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 diplo		y; valid California driver n drug users and with vi	'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
\$71,925.00	0.75	12		\$ 53.9

Staff Position 9: Health				
testing	onsibilities include health edu g and linkage to care; harm r eeing a team of street outrea	eduction counseling) the	rough mobile and encampmi	ent outreach;
		and the second se		
High su	school diploma or equivalence	y; valid California driver	's license and excellent drivit	ng record. 1 y
High so Minimum qualifications: of expe	school diploma or equivalence perience working with injection	y; valid California driver n drug users and with v	olunteers.	ng record. 1 y
High so Minimum qualifications: of expe Annual Salary:	school diploma or equivalence erience working with injectio x FTE:	y; valid California driver n drug users and with v x Months per Year:	's license and excellent drivinolunteers. Annualized (if less than 12 months):	ng record. 1 y 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 volunteers to assist with kit	cruiting and
High school diplo	ma or equivalenc	y; 1 year of experience	working with injection drug u	sers and with
Minimum qualifications: volunteers.				
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	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

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.	\$166.86/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	onsultants/Subcontractors:	545,696
	ΤΟΤΑ	L 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.		182,409

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

TOTAL EXPENSES: 2,006,497

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

1 23-24 12/21/2018

	1	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%	11	0%	A State of the second	0%	147,580
Total General Operating	12,000	100%		0%	1.	0%	12,000
Total Operating Expenses	192,580	100%	•	0%	-	0%	192,580
Total Direct Expenses	192,580	100%	-1	0%	T -T	0%	192,580
Indirect Expenses 10.00%	19,258	100%	1.000	0%		0%	19,258
TOTAL EXPENSES	211,838	100%	1	0%		0%	211,838
Units of Service (UOS) per Service Mode	12		- 1	-	- 1	-	12
Cost Per Unit of Service by Service Mode	17,653.17	1-0-0		-	-		
Unduplicated Clients (UDC) per Service Mode	N/A	-		Statements of	1.	-	

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

2) OPERATING EXPENSES:

Occupancy:

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

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 M	Aaterials & 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	I 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: 10.00% TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838

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

B-1s 1 24-25 12/21/2018

				SERVICE MC	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%	147 - L		7,000
Dir. Gov't Contracts	0.05	5,138	100%		0%	-		5,138
Data Manager	0.05	4,367	100%	1	0%			4.367
SAS Director	0.75	48.010	89%	5,934	11%		1-22-2	53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%		1	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		11	0%		2	155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	1	0%		1	34,730
	Sec 14	· · · · ·	0%	1	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	4	Expenditure	%	Expenditure	%	xpenditure	9	Contract Total
Total Occupancy		85,166	89%	10,500	11%			95,666
Total Materials and Supplies		160,385	29%	390,280	71%	-	2	550,665
Total General Operating		6,659	61%	4.257	39%			10,916
Consultants/Subcontractor:	1	545,696	100%	1	0%			545,696
Total Operating Expenses		797,906	66%	405,037	34%			1,202,943
Total Direct Expenses		1,244,822	68%	579,266	32%	-	-	1,824,088
Indirect Expenses	10.00%	124,482	68%	57,927	32%		-	182,409
		1,369,304	68%	637,193	32%			2,006,497
TOTAL EXPENSES						-		0.001
	vice Mode	8,079		12		-	-	8,091
Units of Service (UOS) per Ser Cost Per Unit of Service by Ser		8,079 169.49	-	12 53,099.42		1.4		8,091

Contractor Name	San Francisco AIDS	Foundation	
Program Name:	HIV Syringe Access	& Disposal Services	1

Appendix #:	B-1s
Fiscal Year:	24-25

1a) SALARIES

	Operations Direct			
with all activitie on program ad	s and that all requ aptation and refine	ired data is reported; wo ment; coordinates curre	n that assures monitoring too rks with partner agencies an nt and emerging health infor	nd program sta
	lic Health and 3 ye	ars community organizir	ssurance procedures. ng and public health experies	nce or an
Minimum qualifications: equivalent com	bination of educat	ion and experience.	Annualized (if less than	1
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$113,025.00	0.05	12	1	\$ 5,6
		1.4.2		
Staff Position 2: Director, Beha				
evaluation of th continuum that Brief description of job duties: and bisexual m	e program structur is responsive to th en.	re and provision of profe e current health and we	g the implementation, manag ssional oversight to create a Il-being needs, including HIV	service deliver needs of gay
	apacity, especially	in HIV prevention and d	or related discipline; three ye emonstrated program mana	
		S. D. D. W. Part	Annualized (if less than	Constant.
Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$140,000.00	0.05	12	1	\$ 7,0
Staff Position 3: Dir. Gov't Gran	te			
planning, desigr	ee and at least two	years demonstrated ex	perience in health services p writing; government contract	
Minimum qualifications: and negotiations	5.	Constant of the Party of the Area	515	smanagemen
Minimum qualifications: and negotiations	s. x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
		x Months per Year: 12	Annualized (if less than	Total
Annual Salary: \$102,750.00 Staff Position 4: Data Manager	x FTE: 0.05	12	Annualized (if less than 12 months): 1	Total \$5,1
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healt of all data collect Brief description of job duties: requirments. Bachelor's degre	x FTE: 0.05 Responsible for consure foundation p in impact. Responsi ted from clients as see and 2 years exp	12 pordinating data collection rograms are rigorously esible for review, abstract swell as data analysis to perience managing and estimation	Annualized (if less than 12 months):	Total \$ 5,1 ng and alth outcome database entry htract
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healt of all data collec Brief description of job duties: requirments.	x FTE: 0.05 Responsible for consure foundation p in impact. Responsi ted from clients as see and 2 years exp	12 pordinating data collection rograms are rigorously esible for review, abstract suble for review, abstract well as data analysis to perience managing and e ed.	Annualized (if less than 12 months): 1 on, quality assurance, reporti evaluated for process and he ion from client records and co meet programmatic and cor ensuring quality for large clien	Total \$ 5,1 ng and alth outcome database entry htract
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healt of all data collec Brief description of job duties: requirments. Bachelor's degre Minimum qualifications: years equivalent	x FTE: 0.05 Responsible for consure foundation p in impact. Responsi ted from clients as see and 2 years experience require	12 pordinating data collection rograms are rigorously esible for review, abstract solution well as data analysis to perience managing and ended.	Annualized (if less than 12 months): 1 on, quality assurance, reporti evaluated for process and he ion from client records and co meet programmatic and cor ensuring quality for large clien Annualized (if less than	Total \$ 5,1 ng and alth outcome database entry ntract nt data sets o
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healt of all data collec Brief description of job duties: requirments. Bachelor's degre	x FTE: 0.05 Responsible for consure foundation p in impact. Responsi ted from clients as see and 2 years exp	12 pordinating data collection rograms are rigorously esible for review, abstract suble for review, abstract well as data analysis to perience managing and e ed.	Annualized (if less than 12 months): 1 on, quality assurance, reporti evaluated for process and he ion from client records and co meet programmatic and cor ensuring quality for large clien	Total \$ 5,1 ng and alth outcome database entr ntract nt data sets o Total
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healt of all data collec Brief description of job duties: requirments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary:	x FTE: 0.05 Responsible for consure foundation p in impact. Responsi ted from clients as see and 2 years experience require x FTE:	12 pordinating data collection rograms are rigorously estible for review, abstract well as data analysis to perience managing and estimation ed. x Months per Year:	Annualized (if less than 12 months): 1 on, quality assurance, reporti evaluated for process and he ion from client records and co meet programmatic and cor ensuring quality for large clien Annualized (if less than	Total \$ 5,1 Ing and alth outcome database entr ntract Int data sets c Total
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager summaries to er and public healt of all data collec Brief description of job duties: requirments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director	x FTE: 0.05 Responsible for consure foundation p in impact. Respon- ted from clients as the and 2 years experience require x FTE: 0.05	12 pordinating data collection rograms are rigorously estible for review, abstract well as data analysis to perience managing and e ed. x Months per Year: 12	Annualized (if less than 12 months): 1 on, quality assurance, reporti- evaluated for process and he- ion from client records and co- meet programmatic and cor- ensuring quality for large clien Annualized (if less than 12 months): 1	Total S 5,1 Ing and alth outcome latabase entr htract Int data sets of Total S 4,3
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healt of all data collec Brief description of job duties: requirments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmental str effective partners and training full-1 exchange suppli Brief description of job duties: waste removal o Three years exp program manage	x FTE: 0.05 Responsible for consure foundation p impact. Respon- ted from clients as tea and 2 years expe- experience requir x FTE: 0.05 rovides oversight a ategic goals in alig ships with other HI ime and temporar es. Organizes rem ompany, prepare re- prience working with ament, supervision	12 perdinating data collection regrams are rigorously essible for review, abstract well as data analysis to perience managing and est ed. <u>x Months per Year:</u> 12 and management of 11 of the ment with agency and V/AIDS and Harm Reduce the staff in appropriate exception to val of biohazard waster eports for compliance and th injection and drug user experience preferred. M	Annualized (if less than 12 months): 1 an, quality assurance, reporti- evaluated for process and he ion from client records and co meet programmatic and cor ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites. Develops and city objectives. Builds and monotonial thange protocol. Responsible from sites and coordinates	Total \$ 5,1 Ing and alth outcome database entr intract Int data sets of Total \$ 4,36 inual initiality for scheduling for scheduling iremoval with ree with
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healti of all data collec Brief description of job duties: requirments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmental str effective partner and training full-i exchange supplie Brief description of job duties: waste removal c Three years exp	x FTE: 0.05 Responsible for consure foundation p impact. Respon- ted from clients as tea and 2 years expe- experience requir x FTE: 0.05 rovides oversight a ategic goals in alig ships with other HI ime and temporar es. Organizes rem ompany, prepare re- prience working with ament, supervision	12 perdinating data collection regrams are rigorously essible for review, abstract well as data analysis to perience managing and est ed. <u>x Months per Year:</u> 12 and management of 11 of the ment with agency and V/AIDS and Harm Reduce the staff in appropriate exception to val of biohazard waster eports for compliance and th injection and drug user experience preferred. M	Annualized (if less than 12 months): 1 on, quality assurance, reporti- evaluated for process and he ion from client records and co- meet programmatic and cor- ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites. Develops and city objectives. Builds and mo- city objectives. Builds and mo- citon agencies. Responsible change protocol. Responsible inform sites and coordinates and maintain safety protocols. ers required. Associates Deg Must hold HIV test counselor	Total \$ 5,1 ng and alth outcome database entry ntract nt data sets o Total \$ 4,36 mual naintains for schedulin a for purchasis removal with ree with
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - summaries to er and public healti of all data collec Brief description of job duties: requirments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmental str effective partners and training full-1 exchange suppli Brief description of job duties: waste removal c Three years exp program manage Minimum qualifications: be willing to obta	x FTE: 0.05 Responsible for consure foundation p in impact. Respon- ted from clients as ee and 2 years exp experience requir x FTE: 0.05 rovides oversight a ategic goals in alig ships with other HI ime and temporar es. Organizes rem ompany, prepare r erience working with ement, supervision in certification on the	12 bordinating data collection rograms are rigorously estimates a solution of the solution of	Annualized (if less than 12 months): 1 n, quality assurance, reporti- valuated for process and he ion from client records and co meet programmatic and cor ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites. Develops and city objectives. Builds and mo- city objectives. Builds and mo- citon agencies. Responsible change protocol. Responsible and maintain safety protocols. ars required. Associates Deg Must hold HIV test counselor Annualized (if less than	Total \$ 5,1 ng and alth outcome database entry ntract int data sets o Total \$ 4,36 mual haintains for schedulin e for purchasis removal with ree with certification o
Annual Salary: \$102,750.00 Staff Position 4: Data Manager Data Manager - Summaries to er and public healti of all data collec Brief description of job duties: requirments. Bachelor's degre Minimum qualifications: years equivalent Annual Salary: \$87,338.00 Staff Position 5: SAS Director SAS Director - P departmental str effective partners and training full- exchange suppli Brief description of job duties: waste removal co Three years expired program manage	x FTE: 0.05 Responsible for consure foundation p impact. Respon- ted from clients as tea and 2 years expe- experience requir x FTE: 0.05 rovides oversight a ategic goals in alig ships with other HI ime and temporar es. Organizes rem ompany, prepare re- prience working with ament, supervision	12 perdinating data collection regrams are rigorously essible for review, abstract well as data analysis to perience managing and est ed. <u>x Months per Year:</u> 12 and management of 11 of the ment with agency and V/AIDS and Harm Reduce the staff in appropriate exception to val of biohazard waster eports for compliance and th injection and drug user experience preferred. M	Annualized (if less than 12 months): 1 an, quality assurance, reporti- evaluated for process and he ion from client records and co meet programmatic and cor ensuring quality for large client Annualized (if less than 12 months): 1 exchange sites. Develops and city objectives. Builds and m citon agencies. Responsible thange protocol. Responsible from sites and coordinates and maintain safety protocols. ars required. Associates Deg Must hold HIV test counselor Annualized (if less than 12 months): 1	Total \$ 5,1 Ing and alth outcome database entract Int data sets of Total \$ 4,3 Innual mual mual for schedulin for schedulin for purchas removal with reee with

Responsible	for scheduling and tr 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
Minimum one	to three years' expe	rience working with peo	ple who use drugs, highly m	arginalized, or
homeless po interviewing a health educa	and strong understantion preferred. Expension	ding of harm reduction p fience using a pallet jack	red, experience using motiva practices and principles, exp c, hand truck, and carts and t	ational erience doing
homeless po interviewing a	and strong understantion preferred. Expension	ding of harm reduction p fience using a pallet jack	red, experience using motiva practices and principles, expe	ational erience doing

	ate - Staffs exchar	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/Volunteer (Coordinator			100
exchangers willing develop training r	g to become pee materials, includir	r educators. Develops	raining, and supervising seco curriculum for these trainings avant to MSM-IDU speed use le sites.	and helps
		11 1 10 11 1 1 1 1 1 1		
		cy; valid California driver in drug users and with v	's license and excellent drivi olunteers.	ng record. 1 ye
of experience wor				ng record. 1 ye Total

Staff Position 9: Health Educato	r	a set and the set of the			-
testing and linkag	ge to care; harm r	eduction counseling) the	revention; vein care; referral rough mobile and encampmo iding crisis intervention supp	ent o	
			's license and excellent driving olupteers.	ng re	cord. 1 yes
Withinford undinications.					
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Ĉ.	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	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

Total FTE:

8.10

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	Vaterials & 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,e	tc \$101,477yr	101,477
Saint James Infirmary	Operational expenses; staffing, office, IT,e	tc \$105,618/yr	105,618
Homeless youth Alliance	Operational expenses; staffing, office, IT,et	tc \$230,911/yr	230,911
S.F. Drug Users Union	Operational expenses; staffing, office, IT,et	tc \$107,690/yr	107,690
		otal Consultants/Subcontractors:	545,696
		TOTAL OPERATING EXPENSES:	1,202,943
		TOTAL DIRECT COSTS:	

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		Describe method and basis for Indirect Cost Allocation (i.e.,	and the second	
of total direct costs. 182	182,409		This contract seeks reimbursement at a fate 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

		SERVICE MODES					
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%	1	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	-	1		12
Cost Per Unit of Service by Service Mode			1.000	-	CONTRACTOR OF	-	
Unduplicated Clients (UDC) per Service Mode	N/A	-	5	-	1.1	-	

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

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 N	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
	To	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: 10.00% TOTAL INDIRECT COSTS: 19,258

TOTAL EXPENSES: 211,838

Appendix # Page # Fiscal Year(s) Funding Notification Date 12/21/2018

B-1u 1 25-26

			1.0	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%	1.	1	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%	1		53,944
Logistics Inventory Mgr	1.00	15,926	25%	47,779	75%	1		63,705
Logistics Associates	2.00	28,256	25%	84,770	75%	1		113,026
SSE/Vol Cordinator	0.75	53,944	100%		0%	1	i (53,944
Health Educator	2.75	155,411		-	0%			155,411
Comm. Engagement & Kit Packing Assoc	0.65	34,730	100%	5	0%	100001		34,730
			0%	-	0%	1		1
Total FTE & Total Salaries	8.10	357,533	72%	139,383	28%	1.000		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
Total General Operating		6,659	61%	4,257	39%			10,916
Consultants/Subcontractor:		545.696	100%	-	0%			545,696
Total Operating Expenses		797,906	66%	405,037	34%			1,202,943
Total Direct Expenses		1,244,822	68%	579,266	32%		1	1,824,088
	10.00%	124,482	68%	57,927	32%	1		182,409
TOTAL EXPENSES		1,369,304	68%	637,193	32%			2,006,497
Units of Service (UOS) per Servi	ice Mode	8,079		12		-		8,091
		169.49		53,099.42	-	+.	- · · · ·	
Cost Per Unit of Service by Servi				N/A				

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

Appendix #: B-1u Fiscal Year: 25-26

1a) SALARIES

	perations Directo			_	
with all activities	s and that all requir aptation and refiner	red data is reported; wo ment; coordinates curre	that assures monitoring too ks with partner agencies an at and emerging health inform surance procedures.	d prog	ram staff
	ic Health and 3 year	ars community organizin	g and public health experien	ice or a	an
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$113,025.00	0.05	12	1 1	\$	5,65
Staff Position 2: Director, Beha	vioral Health Ser	vices		-	_
	in psychology, soc apacity, especially i		or related discipline; three ye emonstrated program manag		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$140,000.00	0.05	12	1	\$	7,00
Staff Position 3: Dir. Gov't Gran	its			-	
Director, Gov't C Maintains opera	Contracts - Respon- tional and statistica quirements, produce	al reporting mechanisms ces routine and ad hoc	ement and contract related a s in accordance with contract reporting as needed, and en-	t and	
Brief description of job duties: integrity of the s Bachelor's degrin planning, design	ee and at least two n, and evaluation; g	years demonstrated ex	perience in health services p writing; government contract	-	
Brief description of job duties: integrity of the s Bachelor's degr	ee and at least two n, and evaluation; g	years demonstrated ex	perience in health services p	s man	

of all data collect Brief description of job duties: requirments.	ed from clients as	well as data analysis to	meet programmatic and co	ntract
Bachelor's degre Minimum qualifications: years equivalent			ensuring quality for large clie	ent data sets or (
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$87 338 00	0.05	12	1	\$ 4367

Staff Position 5: SAS Director				
departmental stra effective partners and training full-ti exchange supplie Brief description of job duties; waste removal or Three years expe program manage	ategic goals in alig ships with other H ime and temporar es. Organizes ren ompany, prepare enence working w ement, supervision	gnment with agency and IV/AIDS and Harm Redu y 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 from sites and coordinates and maintain safety protocols sers required. Associates De Must hold HIV test counselo	naintains e for scheduling le for purchasin removal with s. gree with
Minimum qualifications: be willing to obta	in ceruncation on	the job.		
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	tory Mrg			-	1.00
Responsible for	purchasing excha	inge supplies. Organize	porary staff in appropriate ex is removal of biohazard was re reports for compliance an	te fror	n sites and
homeless popula interviewing and	ations required. A strong understan preferred. Exper	Associates degree prefer ding of harm reduction rience using a pallet jack	ple who use drugs, highly m red, experience using motiv practices and principles, exp s, hand truck, and carts and	ationa	al ce 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	lates			-	-
Logistics Associa	ate - Staffs exchan	nge sites and supervises ars down sites as neede	s volunteers at the sites. Tra d.	nsport	ts 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):	it.	Total
\$56,513.00	2.00	12	1	\$	113,026

Annual Salary:	x FTE:	x Months per Year:	12 months):	Total
\$56,513.00	2.00	12	1	\$ 113,026
Staff Position 8: SSE/Volunteer	Coordinator			-
exchangers willin develop training r	ig to become pee materials, includir	r educators. Develops	aining, and supervising seco curriculum for these trainings want to MSM-IDU speed use e sites.	and helps
		y; valid California driver n drug users and with v	's license and excellent drivi olunteers.	ng record. 1 yea
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 9: Health Educato	r		and a state of the second		
testing and linkag	ge to care; harm r	eduction counseling) thr	revention; vein care; referral rough mobile and encampm iding crisis intervention supp	ent o	
High school diplo Minimum qualifications: of experience wo			's license and excellent drivi olunteers.	ng re	cord. 1 ye
		1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	Annualized (if less than		100.00
Annual Salary:	x FTE:	x Months per Year:	12 months):	1.1	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
	oma or equivalenc	cy; 1 year of experience	working with injection drug u	users	and with
			the second se	_	
Annual Salary:	x FTE:	x Months per Year;	Annualized (if less than 12 months):		Total
(A ANTAN	x FTE: 0.65	x Months per Year: 12		\$	Totai 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	1.2	
Workers comp	S	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	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:

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 Consultants/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%.	, FTE, square footage, or other)	
No. of the second se	This contract seeks reinbursement 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-1v Page # Fiscal Year(s) Funding Notification Date

1 25-26 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%	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	-	-1		12
Cost Per Unit of Service by Service Mode	17,653.17			-			
Unduplicated Clients (UDC) per Service Mode	N/A	-	0	-			

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

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

	1	S	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%	-	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	Contraction of the	-	-	-	-	12
Cost Per Unit of Service by Service Mode	14,076.17	AL. 1940					1000
Unduplicated Clients (UDC) per Service Mode		-		-		-	

Contractor Name	San Francisco AIDS Foundaiton	Appendix #:	B-2c
Program Name:	HIV Syringe Access & Disposal Services	Fiscal Year:	19-20

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,55
	Total	Consultants/Subcontractors:	153,555
	тот	AL 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

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

		S	SERVICE M	ODES	1		1
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%	+ I	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	-	-	-	- 1	-	12
Cost Per Unit of Service by Service Mode	14,076.17	A	1.00		1000	1	
Unduplicated Clients (UDC) per Service Mode	N/A	Salar Salar		-		100	

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

Consultants/Subcontractors:

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

4) INDIRECT COSTS

San Francisco AIDS Foundation has a negotiated rate of 27%. This con	tract seeks reimbursement at a rate of 10%
of total direct costs.	15,3
	15,5

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

Appendix # B-2e Page # 1 Fiscal Year(s) 21-22

Funding Notification Date 12/21/2018

		5	SERVICE M	ODES	1		
Personnel Expenses	HYA Wrap A Disposal S						Contract Total
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%	-1	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	-	- 1		-		12
Cost Per Unit of Service by Service Mode	14,076.17		1004	-		-	
Unduplicated Clients (UDC) per Service Mode		-		C			

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

Consultants/Subcontractors:

nsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,55
			1
	Total Cons	sultants/Subcontractors:	153,55
	TOTAL	PERATING EXPENSES:	153,55
		TOTAL DIRECT COSTS:	153,55

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

Appendix # B-2f Page # Fiscal Year(s) Funding Notification Date

1 22-23 12/21/2018

		S	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%	1 -1	0%	-	0%	153,559
Indirect Expenses 10.00%	15,355	100%	2	0%	1	0%	15,355
TOTAL EXPENSES	168,914	100%	-	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	No.	-	-	- [-	12
Cost Per Unit of Service by Service Mode	14,076.17				1000		and and and
Unduplicated Clients (UDC) per Service Mode	N/A	-					

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

Consultants/Subcontractors:

onsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
			_
	Total Cons	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%	1998 - Carl
of total direct costs.		15,35

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

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

	2.2.	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%	-1	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%	1	0%	-	0%	168,914
Units of Service (UOS) per Service Mode	12	-	- 0	Selling Co	- 1	-	12
Cost Per Unit of Service by Service Mode	14,076.17	-			- Sec. 1	1.00	
Unduplicated Clients (UDC) per Service Mode		Contraction of the local division of the loc					

Francisco AIDS Foundaiton	Appendix #:	B-2g
Syringe Access & Disposal Services	Fiscal Year:	23-24

Consultants/Subcontractors:

onsultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,55
	Total Co	onsultants/Subcontractors:	153,55
	TOTA	L OPERATING EXPENSES:	153,55
		TOTAL DIRECT COSTS:	153.559

4) INDIRECT COSTS

All the second se	an Francisco AIDS Foundation has a negotiated rate of 21%	. This contract seeks reimbursement at a rate of 10%	
f total direct costs. 15,	f total direct costs.		15,35

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

Appendix # B-2h Page # 1 Fiscal Year(s) 24-25

Funding Notification Date 12/21/2018

		5	SERVICE M	ODES	1.		
Personnel Expenses	HYA Wrap A Disposal Se				1		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	-	- 1	-	-	-	12
Cost Per Unit of Service by Service Mode	14,076.17	And in case of	1	-	- 1		1
Unduplicated Clients (UDC) per Service Mode	N/A	-		-	1 C C C C	-	

Contractor Name San Francisco AIDS For	undaiton	Appendix #:	B-2h
Program Name: HIV Syringe Access & D	isposal Services	Fiscal Year:	24-25

Consultants/Subcontractors:

Consultant/Subcontractor Name	Service Description	Rate	Cost
Homeless Youth Alliance	Wrap around and disposal services.	\$153,559	153,559
	Total Co	nsultants/Subcontractors:	153,55
	TOTA	L OPERATING EXPENSES:	153,55
	1	TOTAL DIRECT COSTS:	153,559

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.	15,355

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

Appendix # Page # B-2i Fiscal Year(s) 25-26 Funding Notification Date 12/21/2018

1

		S	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%	-1	0%	11	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		-	-	- [12
Cost Per Unit of Service by Service Mode	14,076.17	No.	- 1	1		-	
Unduplicated Clients (UDC) per Service Mode	N/A			-			

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	153,55
	Total Cons	ultants/Subcontractors:	153,55

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 Pater	10.009

Indirect Rate:	10.00%
TOTAL INDIRECT COSTS:	15,355
	the second se
Appendix # Page # Fiscal Year(s) Funding Notification Date

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

UOS COST ALLOCATION BY SERVICE MODE

		1	SERVICE MODES					
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%	1	0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	-	0%	6,000
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%	63,000
Mobile Health Educator	7.75	213,125	50%	213,125	50%		0%	426.250
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
TOTAL EXPENSES								a second s
	vice Mode	1,888		1,924	-	-1		3,812
TOTAL EXPENSES Units of Service (UOS) per Sen Cost Per Unit of Service by Sen		1,888 264.83		1,924 259.88		. 1		3,812

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 Pro				
			ement and evaluation of the	
			reate a service delivery cont s, including HIV needs of ga	
Brief description of job duties: men.		in weil-being need	at molecting rary needs of ga	y a Disexual
	degree in psychology, so	cial services, busin	less or related disciplines. F	Requirements
			apacity, especially in HIV pre	
demonstr	ated program manageme	ent and program de	evelopment experience.	
Minimum gualifications:	5 (S S S S S S S S S S S S S S S S S S	and the second	and the second second	
			Annual and the loss of the	
Assural Calence	N ETE.	x Months per Year:	Annualized (if less than	Tetal
Annual Salary: \$203,00	x FTE: 0.00 0.10	12	12 months):	Total \$ 20,30
\$203,00	0.00	12		\$ 20,50
Staff Position 2: Director,	Rehavorial Health Ser	vices		
			ement and evaluation of the	program
			eate a service delivery conti	
responsiv			s, including HIV needs of gay	
Brief description of job duties: men.	and a strict design	tel autoaste konto	and an addated 10 - 2 million and	
			ess or related discipline; thre V prevention and demonstra	
	ent and program develop		Provention and demonstra	teo program
Minimum quaincations.		x Months per	Annualized (if less than	T
Annual Salary:	x FTE:	Year:	12 months):	Total
\$120,00	0.00 0.05	12	1	
strategic g partnershi	SAS oversight and manageme poals in alignment with ag ps with other HIV/AIDS a	nt of 11 exchange ency and city obje nd Harm Reduction	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for	artmental effective scheduling an
Provides o strategic g partnershi training fu exchange with waste	SAS oversight and manageme pals in alignment with ag ps with other HIV/AIDS a II-time and temporary sta supplies. Organizes rem	nt of 11 exchange ency and city object nd Harm Reduction of in appropriate ex noval of biohazard	sites. Develops annual depa	artmental effective scheduling an- le for purchasi aates removal
Provides o strategic g partnershi training fu exchange with waste Brief description of job duties:	SAS oversight and manageme goals in alignment with ag ps with other HIV/AIDS a II-time and temporary sta supplies. Organizes rem e removal company, prepa	nt of 11 exchange ency and city obje nd Harm Reduction ff in appropriate ex loval of biohazard are reports for com	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordin pliance and maintain safety	artmental effective scheduling an le for purchasi lates removal protocols.
Provides o strategic g partnershi training fu exchange with waste Brief description of job duties: Three yea program n	SAS poversight and manageme poals in alignment with ag ps with other HIV/AIDS a II-time and temporary sta supplies. Organizes rem e removal company, prepa rs experience working with nanagement, supervision	nt of 11 exchange ency and city obje nd Harm Reduction ff in appropriate ex ioval of biohazard are reports for com th injection and dru experience prefer	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for ichange protocol. Responsib waste from sites and coordin pliance and maintain safety ig users required. Associates red. Must hold HIV test coun	artmental effective scheduling an le for purchasi lates removal protocols. s Degree with
Provides o strategic g partnershi training fu exchange with waste Brief description of job duties: Three yea program n certificatio	SAS oversight and manageme poals in alignment with ag ps with other HIV/AIDS a II-time and temporary sta supplies. Organizes rem e removal company, prepa rs experience working with	nt of 11 exchange ency and city obje nd Harm Reduction ff in appropriate ex ioval of biohazard are reports for com th injection and dru experience prefer	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for ichange protocol. Responsib waste from sites and coordin pliance and maintain safety ig users required. Associates red. Must hold HIV test coun	artmental effective scheduling an le for purchasi lates removal protocols. s Degree with
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Provides o strategic g partnershi training fu exchange with waste Brief description of job duties: Three yea program n certifications:	SAS poversight and manageme poals in alignment with ag ps with other HIV/AIDS a II-time and temporary sta supplies. Organizes rem e removal company, prepa rs experience working with nanagement, supervision	nt of 11 exchange ency and city obje nd Harm Reduction ff in appropriate ex ioval of biohazard are reports for com th injection and dru experience prefer	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib waste from sites and coordin upliance and maintain safety g users required. Associates red. Must hold HIV test coun ob.	artmental effective scheduling an le for purchasi lates removal protocols. s Degree with
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Provides o strategic g partnershi training fu exchange with waste Brief description of job duties: Three yea program n certification Minimum qualifications: Annual Salary: \$90,000 Staff Position 4: Associate Responsit Harm Red education curriculum participant Five years	SAS oversight and manageme poals in alignment with ag ps with other HIV/AIDS a II-time and temporary star supplies. Organizes reme removal company, preparation rs experience working with nanagement, supervision n or be willing to obtain c <u>x FTE:</u> 0.00 0.20 a Director, 6th Street H willites include site operation uction Center; supervision (e.g. overdose prevention development; managing s to HIV/HCV testing and resperience working with	nt of 11 exchange ency and city objet nd Harm Reduction ff in appropriate ex loval of biohazard are reports for com th injection and dru experience prefere ertification on the junction x Months per Year: 12 RC ons (schedules, log g health educators h, vein care) and re syringe access, di linkage to care; ar drug users, highly	sites. Develops annual depa ctives. Builds and maintains in agencies. Responsible for ichange protocol. Responsib waste from sites and coordin pliance 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 interventio	artmental effective scheduling an le for purchasi nates removal protocols. s Degree with selor Total \$ 18,00 6th Street nducting health ilitation, and nking on support.
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re	eferrals; program isposal, and lour	design, facilitation	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ige a	ccess,
M	linimum, 1-3 vea	rs experiencing v	orking with drug (isers. Associates Degree pre	ferre	d Harm
re				adge of HIV/HCV prevention/		

Staff Position 6: Mol			1. 1. 1. I.		2.4	
HIV	HCV testing and lin ampment outreach;	kage to car	e; harm reduction	se prevention; vein care; ref counseling) through mobile a utreach volunteers; and prov	and	
Mini Minimum qualifications: redu				sers. Associates Degree pre dge of HIV/HCV prevention/		
Annual Salary:		FTE:		Annualized (if less than 12 months):		Total
\$5	5,000.00	0.50	12	1	\$	27,500

referrals; support	include conductin ts syringe access, ge to care; and pro	g health education disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo supply inventory. 	s to HIV/HCV
Minimum, 1-3 yea 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):	
\$55,000.00	1.00	12	1	\$ 55,000

referrals; support testing and linkag Street sites; supe Brief description of job duties: maintenance and	s syringe access, ge to care; and pro rvises volunteers; I transport.	disposal, and lour oviding crisis interv ; and assists Inver	a (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo ntory Team Lead with supply i users. Associates Degree pre	s to HIV/HCV bile and 6th nventory
Minimum gualifications: reduction, motiva				
Annual Salary:	x FTE:	x Months per Year:		Total
\$55,000.00	1.00	12	1	\$ 55,00

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	the second s
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	L	
Other (Workers Comp):	\$	3,489.00
	Total Fringe Benefit:	167,763

Fringe Benefit %: 25.00%

Total Salaries: \$

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 838,813

671,050

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
1	Janitorial	Monthly janitorioal svc \$750/mo.	750	9,000
	Insurance	Prorated gen liability, hazzard and auto insurance.	291.67	3,500
-				
-			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%	A Real Provide
of total direct costs.		90,909

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

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

B-3c 1 19-20 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

			SERVICE MODES					
Personnel Expenses		Syringe A Servic		Lounge Se	rvices	ļ		11111
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
V.P Programs & Services	0.10	10,150	50%	10,150	50%	1	0%	20,300
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%	1	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%	- 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%	9	0%	58,101
Total Direct Expenses		454,545	50%	454,546	50%	-	0%	909.091
	10.00%	45,454	50%	45,455	50%	1.1	0%	90,909
Indirect Expenses			50%	500.001	50%	-	0%	1,000,000
	-	499,999	5070					
Indirect Expenses TOTAL EXPENSES Units of Service (UOS) per Service	vice Mode	499,999	5070	2,550		-	-	4,438
TOTAL EXPENSES			5070	2,550 196.08				4,438

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

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

1a) SALARIES

Annual Salary: x FTE: \$203,000.00 0.10 Staff Position 2: Director, Behavorial Health Services Responsible for ensuring the Implementa structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, esp Minimum qualifications: management and program development of X Mc Annual Salary: x FTE: \$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 1: strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Brief description of job duties: Three years experience working with injector program management, supervision experi- certification or be willing to obtain certification		ement and evaluation of the	nrogram
Master's degree in psychology, social ser- also include three years' experience in su- demonstrated program management and Minimum qualifications: Annual Salary: x FTE: \$203,000.00 0.10 Staff Position 2: Director, Behavorial Health Services Responsible for ensuring the implementa structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, esp Minimum qualifications: management and program development of \$120,000.00 Staff Position 3: Director, SAS Provides oversight and management of 1: strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experi- certifications:	· · · · · · · · · · · · · · · · · · ·		inuum that is
Minimum qualifications: x Minimum qualifications: Annual Salary: x FTE: \$203,000.00 0.10 Staff Position 2: Director, Behavorial Health Services Responsible for ensuring the implemental structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, espination qualifications: management and program development of the strategic goals in alignment with agency a partnerships with other HIV/AIDS and Hart training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with injector program management, supervision experience trification or be willing to obtain certifications:	supervisory ca	pacity, especially in HIV pre	
Annual Salary: x FTE: \$203,000.00 0.10 Staff Position 2: Director, Behavorial Health Services Responsible for ensuring the implemental structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, esp Minimum qualifications: management and program development of x Max Annual Salary: x FTE: \$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 1's strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experience Minimum qualifications: Three years experience working with inject program management, supervision experience	na program de	velopment experience.	
Annual Salary: x FTE: \$203,000.00 0.10 Staff Position 2: Director, Behavorial Health Services Responsible for ensuring the Implementa structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, esp Minimum qualifications: management and program development of x Max Annual Salary: x FTE: \$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 1 strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experi certification or be willing to obtain certification	A	the second second second second	1
\$203,000.00 0.10 Staff Position 2: Director, Behavorial Health Services Responsible for ensuring the implementa structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, esp Minimum qualifications: management and program development of Annual Salary: x FTE: x Mode Staff Position 3: Director, SAS Provides oversight and management of 1 strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experi certification or be willing to obtain certification Minimum qualifications:	Months per Year:	Annualized (if less than 12 months):	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Staff Position 2: Director, Behavorial Health Services Responsible for ensuring the implementa structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, espi- Minimum qualifications: management and program development of Annual Salary: X Mo Annual Salary: x FTE: \$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 1: strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with injector program management, supervision experi- certification or be willing to obtain certification and an anagement, supervision experi- certification or be willing to obtain certification	12	12 monuns).	Total \$ 20,30
Responsible for ensuring the implementa structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, espi- Minimum qualifications: management and program development of Annual Salary: x FTE: \$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 11: strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experience extification or be willing to obtain certification			
structure and provision of professional ov responsive to the current health and well- Brief description of job duties: men. Masters degree in psychology, social scie expereince in a supervisory capacity, esp Minimum qualifications: management and program development of Annual Salary: x FTE: \$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 1 strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experi certification or be willing to obtain certification Minimum qualifications: X Mo			
expereince in a supervisory capacity, esp Minimum qualifications: management and program development of Annual Salary: x FTE: x Mo Staff Position 3: Director, SAS Provides oversight and management of 1 strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experi- certification or be willing to obtain certification Minimum qualifications: x Mo	ell-being needs,	, including HIV needs of gay	y and bisexual
Annual Salary: x FTE: \$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 1'strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experience working with inject program management with inject program management.	specially in HIV		
\$120,000.00 0.05 Staff Position 3: Director, SAS Provides oversight and management of 1: strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experience Minimum qualifications:	Months per Year:	Annualized (if less than 12 months):	Total
Provides oversight and management of 1 strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experi certification or be willing to obtain certifica Minimum qualifications:	12	1	\$ 6,00
Provides oversight and management of 1 strategic goals in alignment with agency a partnerships with other HIV/AIDS and Har training full-time and temporary staff in ap exchange supplies. Organizes removal of with waste removal company, prepare rep Brief description of job duties: Three years experience working with inject program management, supervision experi certification or be willing to obtain certifica Minimum qualifications:	_		
program management, supervision experi certification or be willing to obtain certifica Minimum qualifications:	y and city object larm Reduction appropriate exc I of biohazard w	tives. Builds and maintains agencies. Responsible for change protocol. Responsibl waste from sites and coordin	effective scheduling an le for purchasi nates removal
x Mo	erience preferre	ed. Must hold HIV test count	
	Months per Year:	Annualized (if less than 12 months):	Total
\$70,000.00 0.15	12	1	\$ 10,50
Staff Position 4: Associate Director, 6th Street HRC Responsibilities include site operations (so	(schedules, log	sistics, OA, programming) of	6th Street
Harm Reduction Center; supervising healt			

Brief description of job duties: participants to HIV/HCV testing and linkage to care; and providing crisis intervention support.

Five years' experience working with drug users, highly marginalized, or homeless populations required. Associates Degree preferred, experience using motivational interviewing and strong understanding of harm reduction practices and principles, experience doing health education. Understanding of HIV/HCV disease prevention and treatment. Supervisory experience, program Minimum qualifications: development, budgeting, and management experience required.

Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$64,733.00	1.00	12	1	\$ 64,733

referrals; progra disposal, and lo	s include conducting am design, facilitation	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ige access,
Minimum, 1-3 y			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				
HIV/HCV testin	g and linkage to car utreach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and
Minimum, 1-3 y Minimum qualifications: reduction, moti			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

referrals; support	include conductin s syringe access, te to care; and pro	g health education disposal, and lour oviding crisis interv	(e.g. overdose prevention, v ige space; linking participant rention support. Supports mo supply inventory.	s to HIV/HCV
Minimum, 1-3 yea Minimum qualifications: reduction, motiva			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	ts syringe access, ge to care; and pro ervises volunteers d transport. ars experiencing v	disposal, and lour oviding crisis interv ; and assists Inven vorking with drug u	(e.g. overdose prevention, v nge space; linking participants vention support. Supports mo tory Team Lead with supply in pasers. Associates Degree pre-	s to HIV/HCV bile and 6th nventory ferred. Harm
withintum qualifications. Teduction, motiva	uonai interviewin			
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,513.00	1.00	12		\$ 56,5

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	
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	S	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 & EMPLOYEE FRINGE BENEFITS: 850,990

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
	1	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 of 10%	A
of total direct costs.		90,909
		20,3

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

Appendix # B-3d Page # Fiscal Year(s) 4

Funding Notification Date

20-21	
2/21/2018	

UOS COST ALLOCATION BY SERVICE MODE

				SERVICE MO	DES			
Personnel Expenses		Syringe A Servic	and the second sec	Lounge Se			1	
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Total
V.P Programs & Services	0.10	10,150	50%	10,150	50%	I	0%	20,30
Director, Behavorial Health Services	0.05	3,000	50%	3,000	50%		0%	6,00
Director, SAS	0.15	5,250	50%	5,250	50%		0%	10,50
Associate Director, 6th Street HRC	1.00	32,366	50%	32,367	50%		0%	64,73
Health Educator	7.75	218,988	50%	218,988	50%		0%	437,97
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
Contraction of the second s	-	Expenditure 12,607	% 50%	Expenditure 12,607	% 50%	xpenditur	% 0%	
Total Occupancy							-	25,21
Operating Expenses Total Occupancy Total Materials and Supplies Total General Operating		12,607	50%	12,607	50%	1.	0%	25,214 24,564
Total Occupancy Total Materials and Supplies		12,607 12,282	50% 50%	12,607 12,282	50% 50%		0% 0%	Contract Tota 25,214 24,564 8,323 58,101
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 8,322 58,10
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	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
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect 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%	25,21 24,56 8,32 58,10 909,09 90,09
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 45,454 499,999	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 58,107 909,097
Total Occupancy Total Materials and Supplies Total General Operating Total Operating Expenses Total Direct Expenses Indirect Expenses	ice 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%	25,21/ 24,56/ 8,32: 58,10/ 909,09/ 90,909 1,000,000

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

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

1a) SALARIES

Staff Position 1	: V.P Programs				
Brief description of job duties	structure and pro responsive to the	vision of professio	nal oversight to c	gement and evaluation of the reate a service delivery cont is, including HIV needs of ga	inuum that is
	Master's degree also include three	e years' experienc	e in supervisory c	ness or related disciplines. F apacity, especially in HIV pre evelopment experience.	
Minimum qualifications				Stated to store and	
			x Months per	Annualized (if less than	
Annual Salary:	0000 000 00	x FTE:	Year:	12 months):	Total
	\$203,000.00	0.10	12	1	\$ 20,30
Stoff Position 2	Director, Behav	orial Health Son	loos		
Brief description of job duties:	Responsible for e structure and pro responsive to the	ensuring the imple vision of professio	mentation, manag nal oversight to c	ement and evaluation of the reate a service delivery conti s, including HIV needs of gas	nuum that is
Minimum qualifications:	Masters degree in expereince in a s	upervisory capacit	y, especially in HI ment experience.	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	\$ 6,00
Staff Position 3:					
Brief description of job duties:	partnerships with training full-time a exchange supplie with waste remove	other HIV/AIDS ar and temporary staf s. Organizes rem al company, prepa	nd Harm Reduction f in appropriate ex oval of biohazard re reports for con	ctives. Builds and maintains in agencies. Responsible for change protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates	scheduling and le for purchasin lates removal protocols.
Minimum qualifications:		ment, supervision willing to obtain ce		red. Must hold HIV test coun job.	selor
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
	\$70,000.00	0.15	12	1	\$ 10,50
Staff Position 4:	Associate Direct				Section and
Brief description of job duties:	Harm Reduction C education (e.g. ov curriculum develo participants to HIV Five years' experie	Center; supervising erdose prevention pment; managing //HCV testing and ence working with	health educators , vein care) and ro syringe access, d linkage to care; a drug users, highly	gistics, QA, programming) of s, volunteers, and interns; con eferrals; program design, fac isposal, and lounge space; lii nd providing crisis intervention marginalized, or homeless p	nducting health ilitation, and nking on support. populations
	required Associat	es Deoree prefern	ed, experience us	ing motivational interviewing	and strong
Minimum qualifications:	understanding of h Understanding of	narm reduction pra HIV/HCV disease	ctices and princip prevention and tr	eatment. Supervisory experies	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

referrals; program disposal, and lou	m design, facilitatio	on, and curriculum participants to HI	(e.g. overdose prevention, vo development; supports syrin V/HCV testing and linkage to	ge acce	ess,
	. FTF.	x Months per	Annualized (if less than		44
Annual Salary: \$56,513.00	x FTE: 7.75	Year: 12	12 months):	1.1.2	otal 437,97
Staff Position 6: Mobile Health E	Educator				
HIV/HCV testing encampment out Brief description of job duties: intervention supp	and linkage to car reach; overseeing port.	e; harm reduction a team of street o	ose prevention; vein care; ref counseling) through mobile a utreach volunteers; and prov	and riding cr	isis
Minimum qualifications: reduction, motiva		skills, and knowle	edge of HIV/HCV prevention/		
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	т	otal
rannaan oaran r.		40			00.00
\$56,513.00	0.50	12	1	\$	28,25
\$56,513.00				\$	28,25
\$56,513.00 Staff Position 7: Health Educato Responsibilities referrals; support testing and linkag Brief description of job duties: Street sites; supe	or/Inventory Team include conducting ts syringe access, ge to care; and pro arvises volunteers;	n Lead g health education disposal, and lour widing crisis interv and coordinates s	the second se	ein care s to HIV bile and	HCV 6th
\$56,513.00 Staff Position 7: Health Educato Responsibilities referrals; support testing and linkag Brief description of job duties: Street sites; supe	or/Inventory Team include conducting is syringe access, ge to care; and pro arvises volunteers; ars experiencing w	n Lead g health education disposal, and lour widing crisis interv and coordinates s vorking with drug u skills, and knowle	ge space; linking participants ention support. Supports mo supply inventory. sers. Associates Degree pre edge of HIV/HCV prevention/t	ein care s to HIV bile and ferred. I	e) and VHCV I 6th Harm
\$56,513.00 Staff Position 7: Health Educato Responsibilities referrals; support testing and linkag Brief description of job duties: Street sites; supe Minimum, 1-3 yea	or/Inventory Team include conducting is syringe access, ge to care; and pro arvises volunteers; ars experiencing w	n Lead g health education disposal, and lour widing crisis interv and coordinates s vorking with drug u	ge space; linking participants ention support. Supports mol supply inventory. sers. Associates Degree pre	ein care s to HIV bile and ferred. I tx prefer	e) and VHCV I 6th Harm

referrals; support testing and linkag	s syringe access, ge to care; and pro ervises volunteers	disposal, and loun oviding crisis interv	 (e.g. overdose prevention, v ige space; linking participant vention support. Supports mo tory Team Lead with supply is 	s to l	HIV/HCV and 6th
Minimum, 1-3 ye Minimum qualifications: reduction, motiva			sers. Associates Degree pre edge of HIV/HCV prevention/		
Annual Salary:	x FTE:		Annualized (if less than 12 months):		Total
\$56,513.00	1.00	12	4		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

a stripetient.		
Social Securit	y 5	52,081.00
Retiremen	t s	13,003.00
Medica	1 \$	70,326.00
Denta	d l	
Unemployment Insurance	9 \$	3,540.00
Disability Insurance	3 \$	27,708.00
Paid Time Of	Ť	
Other (Workers Comp)	: \$	3,540.00
	Total Fringe Benefit:	170,198

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

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 Ma	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
	Тс	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 of 10%	
of total direct costs.		90,909

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

Appendix # B-3e Page # Fiscal Year(s) 1 21-22

Funding Notification Date 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 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%	1	0%	56,513
Total FTE & Total Salaries	11.55	340,396	50%	340,396	50%	-	0%	680,792
Fringe Benefits 2	5.00%	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%	
Operating Expenses Total Occupancy Total Materials and Supplies				the second se		xpenditur -		Contract Total 25,214 24,564
Total Occupancy		12,607	50%	12,607	50%	-	0%	25,214 24,564
Total Occupancy Total Materials and Supplies		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% 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	0.00%	12,607 12,282 4,161 29,050	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 Total Operating Expenses Total Direct Expenses	0.00%	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		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 10 TOTAL EXPENSES	e 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

structure and p responsive to t	rovision of profession	onal oversight to c	gement and evaluation of the reate a service delivery contine s, including HIV needs of gas	nuum that is
Brief description of job duties: men.				
			less or related disciplines. R	
			apacity, especially in HIV pre- evelopment experience.	vention and
				vention and
demonstrated p				

S	Responsible for e tructure and pro esponsive to the	ensuring the imple vision of profession	mentation, manag	ement and evaluation of the reate a service delivery conti s, including HIV needs of gay	nuum that is
	xpereince in a s	upervisory 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	A			
strategic goals ir partnerships with training full-time exchange suppli	n alignment with a h other HIV/AIDS a and temporary sta ies. Organizes rer	gency and city obje and Harm Reduction aff in appropriate e moval of biohazard	e sites. Develops annual dep ectives. Builds and maintains on agencies. Responsible for xchange protocol. Responsit waste from sites and coordii npliance and maintain safety	effective scheduling and ble for purchasin nates removal
Three years exp program manage	ement, supervision		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
\$70,000.00	0.15	12	1	\$ 10,500

Harm Rec education curriculum	bilities include site opera luction Center; supervisi (e.g. overdose prevention development; managin	itions (schedules, l ing health educator on, vein care) and g syringe access, d	ogistics, QA, programming) or s, volunteers, and interns; co referrals; program design, far disposal, and lounge space; i and providing crisis interventi	nducting health cilitation, and inking
required. understan	Associates Degree prefe ding of harm reduction p iding of HIV/HCV diseas	erred, experience u practices and princi se prevention and to	ly marginalized, or homeless sing motivational interviewing ples, experience doing healt reatment. Supervisory experi ce regulred.	and strong education.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$64,733	3.00 1.00	12	1	\$ 64,733

referrals; prog disposal, and	es include conducting ram design, facilitation	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrin V/HCV testing and linkage to	ige ac	cess,
Minlmum, 1-3			users. Associates Degree pre edge of HIV/HCV prevention/		
Anπual 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 Health E				_	
HIV/HCV testing	and linkage to can reach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a putreach volunteers; and prov	and	
the second s	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):		Total
\$56,513.00	0.50	12	1	\$	28,25

referrals; support	ts syringe access, ge to care; and pro	disposal, and lour oviding crisis interv	 (e.g. overdose prevention, v nge space; linking participant: vention support. Supports mo supply inventory. 	s to HIV/HCV
Minimum, 1-3 ye Minimum gualifications: reduction, motiva			sers. 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

referrals; support testing and linkag Street sites; supe Brief description of job duties: maintenance and	s syringe access, ge to care; and pro ervises volunteers I transport.	disposal, and lour oviding crisis interv and assists Inven	a (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo ntory Team Lead with supply i	s to HIV/HCV bile and 6th nventory
Minimum, 1-3 yea Minimum qualifications: reduction, motiva			users. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:		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	S	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 & EMPLOYEE FRINGE BENEFITS: 850,990

Total Salaries: \$

680,792

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 Ma	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
	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 reimbursement at a rate	of 10%
of total direct costs.	90,909

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

Appendix # B-3f Page # Fiscal Year(s)

Funding Notification Date 1

		1			
	2	2-	23	3	
12	12	1/	2	01	8

UOS COST ALLOCATION BY SERVICE MODE

	-			SERVICE MC	DES			1
Personnel Expenses		Syringe A Servic		Lounge Se	ervices			
Position Titles	FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals
V.P Programs & Services	0.10	10,150	50%	10,150	50%	1	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	5.00%	85,099	50%	85,099	50%		0%	170,198
Total Personnel Expenses		425,495	50%	425,495	50%	$\sim -\infty$	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
Total General Operating	1	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%	-	0%	909,091
	0.00%	45,454	50%	45,455	50%		0%	90,909
TOTAL EXPENSES		499,999	50%	500,001	50%		0%	1,000,000
								4,438
Units of Service (UOS) per Service	e Mode	1,888		2,550	1			4,430
Units of Service (UOS) per Service Cost Per Unit of Service by Service		1,888 264.83	-	2,550 196.08				4,430

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

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

1a) SALARIES

Staff Position	n 1: V.P Programs	& Services			
Dulat descelation of lab. d. di	structure and pro responsive to the	vision of profession	onal oversight to c	gement and evaluation of the reate a service delivery conti is, including HIV needs of ga	nuum that is
Brief description of job duti		in nevehology so	dal convinces husir	ness or related disciplines. R	oquiromonto
	also include three	e years' experience	e in supervisory c	apacity, especially in HIV pre evelopment experience.	
Minimum gualificatio	ns:	2			
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
	\$203,000.00	0.10	12	1	\$ 20,30
Staff Position	2: Director, Behav Responsible for e	orial Health Ser	vices mentation, manag	ement and evaluation of the	program
tear and beauty	2: Director, Behav Responsible for e structure and pro responsive to the	orial Health Sen ensuring the imple	vices mentation, manag	ement and evaluation of the reate a service delivery contin s, including HIV needs of gay	program nuum that is
Brief description of job dution	n 2: Director, Behav Responsible for e structure and pro- responsive to the es: men. Masters degree in expereince in a si	orial Health Ser ensuring the imple vision of professio current health an psychology, soc upervisory capacil	vices mentation, manag onal oversight to cr d well-being needs ial sciences, busin ty, especially in HI	eate a service delivery contin s, including HIV needs of gay ess or related discipline; thre V prevention and demonstrat	program nuum that is and bisexual re years
tear and beauty	n 2: Director, Behav Responsible for e structure and pro- responsive to the es: men. Masters degree in expereince in a si	orial Health Ser ensuring the imple vision of professio current health an psychology, soc upervisory capacil	vices mentation, manag onal oversight to cr d well-being needs ial sciences, busin ty, especially in HI	eate a service delivery contin s, including HIV needs of gay ess or related discipline; thre V prevention and demonstrat	program nuum that is and bisexual re years

strategi partner training exchan	ic goals in alignment with a ships with other HIV/AIDS full-time and temporary sta ge supplies. Organizes rea	agency and city obje and Harm Reduction aff in appropriate e moval of biohazard	e sites. Develops annual dep actives. Builds and maintains on agencies. Responsible for xchange protocol. Responsib waste from sites and coordin npliance and maintain safety	effective scheduling and le for purchasing nates removal
program		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
\$70,0	000.00 0.15	12	1	\$ 10,500

H e cc Brief description of job duties: ^{Pi} Fi re u	tesponsibilities in larm Reduction (ducation (e.g. ov urriculum develo articipants to HI) ive years' experi- equired. Associa inderstanding of nderstanding of	nclude site operat Center; supervisir verdose preventio opment; managing V/HCV testing and ience working with tes Degree prefer harm reduction pi HIV/HCV disease	ions (schedules, k ng health educator n, vein care) and r syringe access, c d linkage to care; a n drug users, high rred, experience us ractices and princi e prevention and tr	ogistics, QA, programming) or s, volunteers, and interns; co referrals; program design, fac disposal, and lounge space; I and providing crisis interventi y marginalized, or homeless sing motivational interviewing ples, experience doing health reatment. Supervisory experi-	onducting hea cilitation, and inking ion support. populations g and strong h education.
	evelopment, but	geung, and mana			
winimum qualifications, or			V Maniho nor		
Annual Salary:	\$64,733.00	x FTE:	x Months per Year: 12	Annualized (if less than 12 months):	Total \$ 64,7

Responsibil referrals; pr disposal, ar	: Health Educator Responsibilities include conducting health education (e.g. overdose prevention, vein care) and referrals; program design, facilitation, and curriculum development; supports syringe access, disposal, and lounge space; linking participants to HIV/HCV testing and linkage to care; and providing crisis intervention support.					
Minimum, 1		CONCRETE AND A DESCRIPTION OF A	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		

HIV/HCV te	ties include health edu sting and linkage to ca it outreach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a outreach volunteers; and prov	and
			users. Associates Degree pre edge of HIV/HCV prevention/	
Minimum, 1 Minimum qualifications: reduction, n Annual Salary:		g skills, and knowle		

referrals; suppor testing and linka	s include conductin its syringe access, age to care; and pro-	g health education disposal, and lour oviding crisis interv	n (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo	s to HIV/HCV
Brief description of job duties: Street sites; sup	ervises volunteers	; and coordinates :	supply inventory.	
Minimum, 1-3 ye Minimum qualifications: reduction, motive			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	\$ 56.513

referrals; support testing and link Street sites; su Brief description of job duties: maintenance and	orts syringe access, age to care; and pro pervises volunteers nd transport. rears experiencing v	disposal, and lour oviding crisis inten ; and assists inver working with drug u	n (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo ntory Team Lead with supply i users. Associates Degree pre edge of HIV/HCV prevention/	s to HIV/HCV bile and 6th nventory ferred. Harm
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

Compor

1b) EMPLOYEE FRINGE BENEFITS:

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

Component	COSL	
Social Security	\$	52,081.00
Retirement	\$	13,003.00
Medical	5	70,326.00
Dental		
Unemployment Insurance	\$	3,540.00
Disability Insurance	\$	27,708.00
Paid Time Off		
Other (Workers Comp):	\$	3,540.00
	Total Esimas Deselite	470 400

Total Fringe Benefit: 170,198

Total Salaries: \$

Fringe Benefit %: 25.00%

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

680,792

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
1.000	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.	1	6,000
Group supplies	snacks, t-shirts, etc \$1,000/mo x 12 mo.	1000	12,000
	Total Ma	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
A		Total 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 reimbursement at a rate of 10%	
of total direct costs.		90,909

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

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

B-3g 1 23-24 12/21/2018

UOS COST ALLOCATION BY SERVICE MODE

			-	SERVICE MC	DES			
Personnel Expenses	1.1	Syringe Access Services Lo		Lounge Se	ervices			
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%	- e)	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%		0%	850,990
Operating Expenses		Expenditure	%	Expenditure	%	xpenditur	%	Contract Tota
Total Occupancy		12,607	50%	12,607	50%	- A	0%	25,214
Total Materials and Supplies	T. (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%	1-1	0%	58,101
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 Service	rice Mode	1,888	-	2,550	-	-	-	4,438
Cost Per Unit of Service by Service		264.83	-	196.08	-			1
	NOC	31,341	-	15,300	-		-	46,641
								Kev. 07/15

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

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

ta) SALARIES

	ements on and
112	Total
\$	20,30
•	bisexual
ee yea ated pro	ogram
L	Total
1000	6,000
	\$

	training full-time and tempor exchange supplies. Organiz	ary staff in appropriate e es removal of biohazard	exchange protocol. Responsible for s exchange protocol. Responsible d waste from sites and coordina mpliance and maintain safety p	e for purchasi ates removal
Brief description of job duties:				
Minimum gualifications:	program management, supe certification or be willing to o	rvision experience prefe	rug users required. Associates erred. Must hold HIV test couns job.	
Annual Calence	" ETC.	x Months per	Annualized (if less than	T-1-1

Annual Salary:	x FTE:	Year:	12 months):	Total
\$70,000.00	0.15	12	1	\$ 10,500

	Responsibilities in Harm Reduction education (e.g. or curriculum develo	nclude site operat Center; supervisir verdose preventio opment; managing	ions (schedules, k ng health educator n, vein care) and n g syringe access, c	ogistics, QA, programming) o s, volunteers, and interns; co referrals; program design, fa disposal, and lounge space; i and providing crisis intervent	onduct cilitation	ting health on, and
	required. Associa understanding of Understanding of	tes Degree prefer harm reduction pr HIV/HCV disease	red, experience us ractices and princi prevention and tr	y marginalized, or homeless sing motivational interviewing ples, experience doing healt reatment. Supervisory experi ce required.	g and h edu	strong cation.
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; prog	es include conducting ram design, facilitatio lounge space: linking	on, and curriculum participants to HI	(e.g. overdose prevention, v development; supports syrir V/HCV testing and linkage to	ige access,
Minimum, 1-3	years experiencing w	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 He				
HIV/HCV te	sting and linkage to can nt outreach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a putreach volunteers; and prov	and
Minimum, 1 Minimum qualifications: reduction, m			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

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

referrals; support testing and linkag Street sites; supe Brief description of job duties: maintenance and	include conductin s syringe access, ge to care; and pro ervises volunteers I transport. ars experiencing v	g health education disposal, and lour oviding crisis inten ; and assists Inver vorking with drug u	a (e.g. overdose prevention, v nge space; linking participant vention support. Supports mo ntory Team Lead with supply i users. Associates Degree pre	s to HIV/HCV bile and 6th inventory
	dendr interneting	x Months per	Annualized (if less than	
Annual Salary	x FTE:	Year:	12 months):	Total
\$56,513.00	1.00	12	1	\$ 56,51

11.55

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	\$	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: \$

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

680,792

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 Ma	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
		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 contract seeks reimbursement at a rate of 10%	
of total direct costs.		90,909

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

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

B-3h 1 24-25 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 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
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	01.1	29,050	50%	29,051	50%	-	0%	58,101
Total Direct Expenses	-	454,545	50%	454,546	50%	-	0%	909,091
	.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 Service	Mode	1,888	-	2,550	-	-1		4,438
Cost Per Unit of Service by Service		264.83		196.08		-		1
	NOC	31,341		15,300		1	1	46,641
								Rev. 0//15

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

Appendix #:	B-3h	
Fiscal Year:	24-25	

1a) SALARIES

structure	and provision of profess	onal oversight to c	gement and evaluation of the reate a service delivery continues s, including HIV needs of gay	nuun	that is
Master's also inclu		ce in supervisory c	ness or related disciplines. R apacity, especially in HIV pre- evelopment experience.		
	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
Annual Salary:	And these				

structure and	d provision of profession	onal oversight to c	gement and evaluation of the reate a service delivery conti s, including HIV needs of gay	nuum that is
	n a supervisory capaci	ty, especially in HI	ness or related discipline; thre V prevention and demonstra	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$120,000.0	0.05	12	1	\$ 6,000

Staff Position 3: Director, SAS				
strategic goals in partnerships with training full-time a exchange supplie with waste remov	alignment with ag other HIV/AIDS a and temporary sta as. Organizes ren	gency and city obje and Harm Reduction off in appropriate en moval of biohazard	a sites. Develops annual depa actives. Builds and maintains on agencies. Responsible for xchange protocol. Responsib waste from sites and coordin npliance and maintain safety	effective scheduling and le for purchasion nates removal
Brief description of ob duties:				
program manage	ment, supervision		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
\$70,000.00	0.15	12	1	\$ 10.50

Staff Position 4: Associate Direc Responsibilities i			ogistics, QA, programming) o	of 6th S	treet
education (e.g. o curriculum devek	verdose preventio opment; managing	on, vein care) and g syringe access, o	s, volunteers, and interns; co referrals; program design, fa disposal, and lounge space; l and providing crisis interventi	cilitation inking	n, and
required. Associa understanding of	ates Degree prefe harm reduction p f HIV/HCV disease	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 s h educa	trong ation.
Annual Salary.	x FTE:	x Months per Year:	Annualized (if less than 12 months):		otal
\$64,733.00	1.00	12	1	\$	64,73

referrals; disposal,	bilities include conducting program design, facilitation	on, and curriculum participants to HI	(e.g. overdose prevention, vo development; supports syrin V/HCV testing and linkage to	ge access,
Minimum			isers. Associates Degree pre edge of HIV/HCV prevention/	
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
\$56,51	3.00 7.75	12	1	\$ 437,97

Staff Position 6: Mobile Health I	Educator	100 million (100 million)		
HIV/HCV testing	and linkage to can reach; overseeing	e; 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 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

referrals; support testing and linkag Brief description of job duties: Street sites; supe	include conductin is syringe access, ge to care; and pro ervises volunteers	g health education disposal, and lour oviding crisis interv and coordinates		s to HIV/HCV bile and 6th
Minimum, 1-3 yea Minimum qualifications: reduction, motiva			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	1.00	12	1	\$ 56,5

referrals; support testing and linkag Street sites; support Brief description of job duties: maintenance and	nclude conducting s syringe access, ge to care; and pro ervises volunteers transport. ars experiencing v	y health education disposal, and lour oviding crisis interv ; and assists Inven working with drug u	(e.g. overdose prevention, ve age space; linking participants vention support. Supports mo- tory Team Lead with supply in users. Associates Degree pre- sed a of HIV/HCV cravention/	s to H bile a nven	IIV/HCV and 6th tory d. Harm
withinfull qualifications. reduction, motiva	uonar interviewing				sieneu.
Annual Salary:	x FTE:	x Months per Year:	Annualized (if less than 12 months):		Total
\$56,513.00	1.00	12	4		56,5

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	1	
Other (Workers Comp):	\$	3,540.00
	Total Fringe Benefit:	170,198

Fringe Benefit %: 25.00%

Total Salaries: \$

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

680,792

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 ilability, 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%. 7	his contract seeks reimbursement at a rate of 10%	C - 18 G
of total direct costs.		90,909

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

Appendix # Page # Fiscal Year(s)

B-3i 1 25-26 12/21/2018

Funding Notification Date

· · · · · · · ·			SERVICE MO	DES				
			Lounge Se	rvices				
FTE	Salaries	% FTE	Salaries	% FTE	Salaries	% FTE	Contract Totals	
0.10	10,150	50%	10,150	50%		0%	20,300	
0.05	3,000	50%	3,000	50%	-	0%	6,000	
0.15	5,250	50%	5,250	50%	- 1	0%	10,500	
1.00	32,366	50%	32,367	50%	-	0%	64,733	
7.75	218,988	50%	218,988	50%	-	0%	437,976	
0.50	14,129	50%	14,128	50%		0%	28,257	
1.00	28,256	50%	28,257	50%		0%	56,513	
1.00	28,257	50%	28,256	50%		0%	56,513	
11.55	340,396	50%	340,396	50%	-	0%	680,792	
25.00%	85,099	50%	85,099	50%		0%	170,198	
	425,495	50%	425,495	50%	- 1	0%	850,990	
-	Expenditure	%	Expenditure	%	xpenditur	%	Contract Total	
	12,607	50%	12,607	50%	-	0%	25,214	
10.00	12,282	50%	12,282	50%		0%	24,564	
Total Materials and Supplies Total General Operating		50%	1.100	50%		00/	8,323	
	4,161	2070	4,162	5076		0%	8.323	
	29,050	50%	29,051	50%		0%	58,101	
_		50%	29,051		1		58,101	
10.00%	29,050			50%	-	0%		
10.00%	29,050	50%	29,051 454,546	50%	-	0%	58,101 909,091	
10.00% vice Mode	29,050 454,545 45,454 499,999	50% 50% 50%	29,051 454,546 45,455	50% 50% 50%	-	0% 0% 0%	58,101 909,091 90,909	
	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	
	0.10 0.05 0.15 1.00 7.75 0.50 1.00 1.00 1.00 11.55	Service FTE Salaries 0.10 10,150 0.05 3,000 0.15 5,250 1.00 32,366 7.75 218,988 0.50 14,129 1.00 28,256 1.00 28,257 11.55 340,396 25.00% 85,099 425,495 Expenditure 12,607 12,282	0.10 10,150 50% 0.05 3,000 50% 0.15 5,250 50% 1.00 32,366 50% 7.75 218,988 50% 0.50 14,129 50% 1.00 28,256 50% 1.00 28,257 50% 1.00 28,257 50% 1.00 28,257 50% 25.00% 85,099 50% 425,495 50% Expenditure % 12,607 50% 12,282 50%	Syringe Access Services Lounge Set FTE Salaries % FTE Salaries 0.10 10,150 50% 10,150 0.05 3,000 50% 3,000 0.15 5,250 50% 5,250 1.00 32,366 50% 32,367 7.75 218,988 50% 218,988 0.50 14,129 50% 14,128 1.00 28,256 50% 28,257 1.00 28,257 50% 28,256 11.55 340,396 50% 340,396 25.00% 85,099 50% 85,099 425,495 50% 425,495 V 28,267 50% 12,607 12,607 50% 425,495 50%	Syringe Access Services Lounge Services FTE Salaries % FTE Salaries % FTE 0.10 10,150 50% 10,150 50% 0.05 3,000 50% 3,000 50% 0.15 5,250 50% 5,250 50% 1.00 32,366 50% 32,367 50% 0.50 14,129 50% 14,128 50% 1.00 28,256 50% 28,257 50% 1.00 28,257 50% 28,256 50% 1.00 28,257 50% 28,256 50% 1.00 28,257 50% 28,256 50% 1.00 28,257 50% 28,256 50% 1.00 28,257 50% 85,099 50% 25.00% 85,099 50% 85,099 50% 25.00% 85,099 50% 425,495 50% 25.00% 12,607 50% 12,607	Syringe Access Services Lounge Services FTE Salaries % FTE % FTE	Syringe Access Services Lounge Services FTE Salaries % FTE Salaries % FTE Salaries % FTE 0.10 10,150 50% 10,150 50% 0% 0.05 3,000 50% 3,000 50% 0% 0.15 5,250 50% 5,250 50% 0% 1.00 32,366 50% 32,367 50% 0% 7.75 218,988 50% 218,988 50% 0% 0.50 14,129 50% 14,128 50% 0% 1.00 28,256 50% 28,257 50% 0% 1.00 28,257 50% 28,256 50% 0% 1.00 28,257 50% 20% 0% 0% 1.00 28,257 50% 0% 0% 0% 25.00% 85,099 50% 0% 0% 0% 25.00% 85,099 50% 0% 0%	

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

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

1a) SALARIES

Staff Position 1: V.P F			allowed and a second		
structu	ure and pro	ovision of profession	onal oversight to c	gement and evaluation of the reate a service delivery conti s, including HIV needs of ga	inuum that is
Brief description of job duties: men.					
also in demor	nclude three	e years' experience	e in supervisory c	ness or related disciplines. F apacity, especially in HIV pre avelopment experience.	
Minimum qualifications:				Ammunition of the lange share	
Appual Salany		x FTE:	x Months per Year:	Annualized (if less than 12 months):	Taint
Annual Salary:	,000.00	0.10	12	12 monurs).	Total \$ 20,3
ψ200,	,000.00	0.10	12	1 1	φ 20,0
Staff Position 2: Direct	tor Behav	orial Health Sen	vices		
structu	are and prov	vision of professio	nal oversight to cr	ement and evaluation of the reate a service delivery continues s, including HIV needs of gay	nuum that is
Master	eince in a si	upervisory capacit	ty, especially in HI	ess or related discipline; thre V prevention and demonstrat	
Annual Salary:		x FTE:	x Months per Year:	Annualized (if less than 12 months):	Total
	00.000	0.05	12	1	\$ 6,0
\$120,					
Staff Position 3: Direct Provide strateg partner	es oversigh ic goals in a rships with	alignment with ag other HIV/AIDS a	ency and city obje nd Harm Reductio	sites. Develops annual depa ctives. Builds and maintains n agencies. Responsible for change protocol. Responsib	effective scheduling an
Staff Position 3: Directed Provide strateg partner training exchan with wa	es oversigh ic goals in rships with g full-time a nge supplie	alignment with ag other HIV/AIDS and and temporary staf s. Organizes rem	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard	ctives. Builds and maintains	effective scheduling an le for purchas lates removal
Staff Position 3: Director Provide strateg partner training exchan with wa Brief description of job duties: Three y program certifice	es oversigh gic goals in a rships with g full-time a nge supplies aste remova years expèr m managen	alignment with ag other HIV/AIDS and temporary staf s. Organizes rem al company, prepa rience working with ment, supervision	ency and city obje nd Harm Reductio f in appropriate ex oval of biohazard are reports for com h injection and dru	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test count	effective scheduling ar le for purchas lates removal protocols. s Degree with
Staff Position 3: Directed Provide strateg partner training exchan with wa Brief description of job duties: Three y program certifications:	es oversigh gic goals in a rships with g full-time a nge supplies aste remova years expèr m managen	alignment with ag other HIV/AIDS and temporary staf s. Organizes rem al company, prepa rience working with ment, supervision	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for com h injection and dru experience prefer	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun- ob.	effective scheduling ar le for purchas ates removal protocols. s Degree with selor
Staff Position 3: Directed Provide strateg partner training exchan with wa Brief description of job duties: Three y prograr certifica Minimum qualifications:	es oversigh gic goals in a rships with g full-time a nge supplies aste remova years expèr m managen	alignment with ag other HIV/AIDS and and temporary staf s. Organizes rem al company, prepa rience working with ment, supervision willing to obtain co	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for com h injection and dru- experience prefer ertification on the j x Months per	ctives. Builds and maintains n agencies. Responsible for tchange protocol. Responsib waste from sites and coordin upliance and maintain safety ug users required. Associates red. Must hold HIV test coun- ob.	effective scheduling ar le for purchas ates removal protocols. s Degree with selor Total
Staff Position 3: Directed Provide strateg partner training exchan with wa Brief description of job duties: Three y prograr certifica Minimum qualifications:	es oversigh ic goals in a rships with g full-time a nge supplies aste remova years exper m manager ation or be	alignment with ag other HIV/AIDS and and temporary staf s. Organizes rem al company, prepa rience working with ment, supervision willing to obtain of x FTE:	ency and city obje nd Harm Reductio if in appropriate ex oval of biohazard are reports for com h 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 coordin upliance and maintain safety ig users required. Associates red. Must hold HIV test count ob. Annualized (if less than 12 months):	effective scheduling ar le for purchas ates removal protocols. s Degree with selor Total
Staff Position 3: Directe Provide strateg partner training exchan with wa Brief description of job duties: Three y program certifications: Annual Salary: \$70,0 Staff Position 4: Associ	es oversigh ic goals in a rships with g full-time a nge supplies aste remova years exper m manager ation or be 000.00	alignment with ag other HIV/AIDS and ind temporary staf s. Organizes rem al company, prepa rience working with ment, supervision willing to obtain of x FTE: 0.15	ency and city obje nd Harm Reductio f in appropriate ex oval of biohazard are reports for com h injection and dru experience prefer ertification on the j x Months per Year: 12 RC	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 count ob. Annualized (if less than 12 months): 1	effective scheduling ar le for purchas lates removal protocols. s Degree with selor Total \$ 10,50
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ref dis	Responsibilities include conducting health education (e.g. overdose prevention, vein care) and referrals; program design, facilitation, and curriculum development; supports syringe access, disposal, and lounge space; linking participants to HIV/HCV testing and linkage to care; and						
Mir				sers. 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	7.75	12	1	\$	437,97	

Staff Position 6: Mobile Health		and the second		
HIV/HCV testin	ng and linkage to ca outreach; overseeing	re; harm reduction	ose prevention; vein care; ref counseling) through mobile a putreach volunteers; and prov	and
Minimum, 1-3 Minimum qualifications: reduction, moti			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

referrals; support testing and linka	include conducting ts syringe access,	health education disposal, and lour oviding crisis interv	(e.g. overdose prevention, vo ige space; linking participant vention support. Supports mo supply inventory.	s to H	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	\$	56,513

referrals; support testing and linkag	ts syringe access, ge to care; and pro ervises volunteers	disposal, and lour oviding crisis interv	I (e.g. overdose prevention, v nge space; linking participants vention support. Supports mo itory Team Lead with supply it itory Team	s to HIV/HCV bile and 6th
Minimum, 1-3 year Minimum gualifications: 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	4	\$ 56,5

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 Fringe Benefit:	170 198

Fringe Benefit %: 25.00%

Total Salaries: \$

TOTAL SALARIES & EMPLOYEE FRINGE BENEFITS: 850,990

680,792

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
	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 reimbursement at a rate of 10%
of total direct costs.	90,90

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



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:



San Francisco Department of Public Health 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



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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



San Francisco Department of Public Health

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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


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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



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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

APPENDIX E



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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



San Francisco Department of Public Health

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



San Francisco Department of Public Health

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.

DC	ES YOU	R ORGANIZ	ATION	and the second sec			Yes	No*
A	Have f	formal Privac	y Policies that comply with	the Health Insurance Portability and Accountability	y Act (HIPAA)?			1
В	Have a	a Privacy Offi	cer or other individual des	ignated as the person in charge of investigating priv	racy breaches or relat	ed incidents?		
	lf yes:	Name & Title:		Phone #	Email:		Y	
С				upon hire and annually thereafter for all employees years.] [SFDPH privacy training materials are availab				
D				m upon hire and annually thereafter, with their nan documentation of acknowledgement of trainings for				
E	10.12.22	(or will have information		ess Associate Agreements with subcontractors who	create, receive, main	ain , transmit, or access SFDPH's		
F	1.			Ith information (via laptop, USB/thumb-drive, hand red or created on encrypted devices approved by S	A CONTRACT OF A CONTRACT OF A CONTRACT OF			

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 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 Privacy Notice 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.)		
I.	Visibly post the Summary of the Notice of Privacy Practices in all six languages in common patient areas of your treatment facility?		
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?	-	

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:		
or designated person	(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	4	
by OCPA	(print)	Signature	Date

San Francisco Department of Public Health (SFDPH) Office of Compliance and Privacy	y Affairs (OCF	PA)
--	----------------	-----

ATTACHMENT 2

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]		
В	Use findings from the assessments/audits to identify and mitigate known risks into documented remediation plans?		
	Date of last Data Security Risk Assessment/Audit:		
	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?	1	1
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:		
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.]		
н	Have (or will have if/when applicable) Business Associate Agreements with subcontractors who create, receive, maintain, transmit, or access SFDPH's health information?		
1	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	(maint)	Signate	ure r	Date	
		orbitet		Juce	

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			1
OCPA	(print)	United I	1 A	
OCFA	1	Signature	Date	

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

APPEN	NDIX F-1f
07/01/18 -	06/30/19
	PAGE A

					Contr	act ID #			Invoice Nu	nber
Contractor: San Francisco AIDS Found	lation				1000	002634			A-1JUL	18
Address: 1035 Market Street, Suite 4	00								1.000	
San Francisco, CA 94103				Cor	ntract Pu	rchase C	Order No:	-		-
Telephone: 415-487-3000		1	-			Funding	Source:		General F	und
Fax: 415-487-3009	CHEP									
Program Name: HIV Syringe Access and Di	ennesi 9	anvicas			G	irant Cod	le/Detail:	-		_
Flogram Name. The Synnige Access and Di	sposaro	el vicea			Pro	ject Cod	le/Detail:			
ACE Control #:						Invola	e Period:	07	/1/18 - 07/	24/40
						myorci	a renou:[071	11/10 - 0/1	31/18
						FINAL	Invoice		(check i	fYes)
		TAL	DELIVE THIS PE			ATE	% (TOT			AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services (hrs., City-Wide &	8,079	54,300	1			1 T	1	1.00	8,079	54,300
Syringe Access, Disposal Coordinatoin & Bu	12	N/A	1					-	12	N/A
							-	-	+	-
			-		-					-
		-		-	-					
	-	NOC	1	-						
Number of Clients for Appendix	_	54300	-	NOC		NOC	-	NOC		NOC 54,300
EXPENDITURES	BUD \$488	GET	EXPEN THIS PE			NSES DATE	% C BUDO			INING ANCE
ringe Benefits	\$122	the second se		- 17					\$122.0	
Total Personnel Expenses	\$610	218		- 0					\$610,2	18.00
Operating Expenses:								-		
Occupancy-(e.g., Rental of Property, Utilities,	\$95,	666			-			_	\$95,6	66.00
Building Maintenance Supplies and Repairs)								_		
Materials and Supplies-(e.g., Office,	\$530,	113		-			-		\$530,1	13.00
Postage, Printing and Repro., Program Supplies)									1	
General Operating-(e.g., Insurance, Staff	\$10,4	116	-	-				-	\$10,4	16 00
Training, Equipment Rental/Maintenance)	φ10,	10			1	-			\$10,4	10.00
Staff Travel - (e.g., Local & Out of Town)	-		-		-	-			1	
									1.3.1.	
Consultant/Subcontractor	\$532,	386	_	-		-	1.000		\$532,3	86.00
Other - (Meals, Audit, Transportation Reimb,										
Stipends, Facilitators)										
Total Operating Expenses	\$1,168	.581		-	-	-	-		\$1,168.	581.00
Capital Expenditures										
OTAL DIRECT EXPENSES	\$1,778		_		_		-		\$1,778,1	
Indirect Expenses	\$177,			1	1				\$177,8	
OTAL EXPENSES	\$1,956	,679			10.900		_		\$1,956,6	579.00
LESS: Initial Payment Recovery		-			VOTES:					
Other Adjustments (Enter as negative, if appropr	iate)	+	_	-						
REIMBURSEMENT										

I cartify 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:

Send to:	SFDPH Fiscal / Invoice Processing				- 1
1.	1380 Howard Street, 4th Floor, Suite 423				2.17
	San Francisco, CA 94103	By:	A set of a s	Date:	
	Attn: Contract Payments		(DPH Authorized Signatory)		

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

Invoice Number

A-1JUL18

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

Telephone: 415-487-3000 Fax: 415-487-3009 Fund Source: General Fund
Grant Code/Detail:

Contract Purchase Order No:

P

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

oject Code/Detail:	
Incontra Destant	07440 07/0440
Involce Period:	07/1/18 - 07/31/18

FINAL Invoice (check if Yes)

PERSONNEL		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			1	\$5,190.00
Data Manager	0.05	\$4,412			1	\$4,412.00
SAS Director	0.75	\$40,750			1	\$40,750.00
Logistics Inventory Mgr	1.00	\$64,356			1	\$64,356.00
Logistics Associates	2.00	\$114,180				\$114,180.00
SSE/Vol Coordinator	0.75	\$54,495			1	\$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:

Title:

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

										PAGE	
					Contr	act ID #	1.1		Invoice Nur	nber	
Contractor: San Francisco AIDS Found	dation				10000	02634			A-1JUL	19	
Address: 1035 Market Street, Suite 4	400				-		-		11 19 2 9		
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:				
Telephone: 415-487-3000		-	- 72-0	1		Funding	Source:		General F	und	
Fax: 415-487-3009		CHEP							General Tunu		
Program Name: HIV Syringe Access and D	isnosal S	ervices		I,	G	rant Cod	le/Detail:	_		_	
regiant tank. The offinge Access and D	aposar a	ICI VICES			Pro	ject Cod	e/Detail:				
ACE Control #:	I							07	440.07		
						Invoice	e Period:	077	/1/19 - 07/	31/19	
						FINAL	Invoice		(check if	Yes)	
		TAL	DELIV		DELIV			OF		AINING	
ELIVERABLES	UOS	NOC	THIS P UOS	NOC	UOS	NOC	UOS	NOC	UOS	RABLES	
Syringe Access Services (hrs., City-Wide &	8,079	-	005	NOG	003	NOC	003	NUC	-	And in case of the local division of the loc	
Syringe Access, Disposal Coordinatoin & Bu	12	54,300 N/A	-			_			8,079	54,300	
synnige Access, Disposal Coordinatoin & Bu	12	IN/A		-					12	N/A	
			-					-	-	-	
			-		-		-	-		-	
				-	-				-	-	
	_			-				-	1	-	
		NOC		NOC		NOC		NOC		NOC	
umber of Clients for Appendix		54300		NUG		NUC	-	NUC	1	54,300	
XPENDITURES otal Salaries (See Page B)	BUD \$496	the second second second	EXPENTINS PE		EXPE TO D		BUD			INING NCE	
ringe Benefits	\$124				-				\$124,2		
Total Personnel Expenses	\$621				-				\$621,1		
perating Expenses:	\$0Z1	140							- \$021,1	45.00	
Occupancy-(e.g., Rental of Property, Utilities,	\$95,0	200	-	-	-			_	\$95,66	20 00	
	\$30,0	000							\$95,00	00.00	
Building Maintenance Supplies and Repairs)			-	-						_	
Materials and Supplies-e.g., Office,	\$550,	885	-				-	_	\$550,6	25 00	
Postage, Printing and Repro., Program Supplies)	\$550,	000			_		-		\$330,0	00.00	
Postage, Printing and Repro., Program Supplies)											
General Operating-(e.g., Insurance, Staff	\$10,9	016			_			-	\$10,91	00 91	
Training, Equipment Rental/Maintenance)		010			-				\$10,0	0.00	
Training, Equipment RentarMantenance)			-			-					
Staff Travel - (e.g., Local & Out of Town)						-	-			-	
Ctail Haver - (a.g., Local a Out of Town)	-	-						_			
Consultant/Subcontractor	\$545,	696						_	\$545,6	96.00	
Other Utels Auth Terroritin Origin			-								
Other - (Meals, Audit, Transportation Reimb,	-		_							_	
Stipends, Facilitators)	_					-					
Total Operating Experies	\$1,202	643			-			_	E4 000 0	12 00	
Total Operating Expenses	51,202	,943			-				\$1,202,9	43.00	
Capital Expenditures	84.042	700			_	_			64 882	00.00	
DTAL DIRECT EXPENSES	\$1,824					-			\$1,824,0		
Indirect Expenses	\$182,4			_		-	1		\$182,40		
DTAL EXPENSES	\$2,006	,497	-				_		\$2,006,4	97.00	
LESS: Initial Payment Recovery			-		NOTES:						
Other Adjustments (Enter as negative, if appropr	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:

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

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

Invoice Number

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

	A-1JUL19
Contract Purchase Order No:	
Fund Source:	General Fund

Grant Code/Detail:

P

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

DETAIL PERSONNEL EXPENDITURES

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

roject Code/Detall:	-	
an in Stand a suit		

Invoice Period: 07/1/19 - 07/31/19

FINAL Invoice (check if Yes)

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

									07/01/19	- 06/30/2 PAGE
					Contra	ct ID #		h	nvoice Nur	mber
Contractor: San Francisco AIDS Found	12/25/4/64				10000	02634]		A-1JUL	19
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Cor	tract Pur	chase C	Order No:			-
Telephone: 415-487-3000 Fax: 415-487-3009		CH	IEP	1	9	Funding	Source:	G	eneral F	und
		1.0.0			Gr	ant Cod	le/Detail:			
Program Name: HIV Syringe Access and Di	sposal S	ervices						_	_	
ACE Control #:					Proj	ect Cod	le/Detall:	-		-
						Invoice	Period:	07/*	1/19 - 07	/31/19
						FINAL	. Invoice		(check i	fYes)
DELIVERABLES		ACTED	DELIV THIS PI UOS		DELIVI TO D UOS		% TO UOS			AINING RABLES NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A		neu	000	1100	000	1100	12	N/A
oyninge noocoo, proposal ocora, a paix i a	1,6	14/15		-		-			14	INO
		-		-				-	-	
		-								-
	-			_			-	-	-	-
			n				-			-
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix	1	N/A					1		1	N/A
	-				-					lain ru
EXPENDITURES	BUD	DET	EXPEN THIS PE		EXPEN TO D		% C		0.000	ANCE
Total Salaries (See Page B)	BOD	361	Thisru		10 0/	110	BUD	DE I	DAL	ANCE
ringe Benefits		-			_	-	1			
Total Personnel Expenses			-	-		_		-		
Operating Expenses:				_					-	-
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000		-					\$33,0	00.00
Building Maintenance Supplies and Repairs)	4-44								4	
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)	φ12,0		-	-					\$12,00	0.00
Treaming, sedarburger (rentermenterioring)			-	-	-	-	-			

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:

\$192,580

\$192,580

\$19,258

\$211,838

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

NOTES:

Staff Travel - (e.g., Local & Out of Town)

Other - (Meals, Audit, Transportation Reimb,

Consultant/Subcontractor

Stipends, Facilitators)

Indirect Expenses

TOTAL EXPENSES

REIMBURSEMENT

Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES

LESS: Initial Payment Recovery

Other Adjustments (Enter as negative, if appropriate)

\$192,580.00

\$192,580.00

\$19,258.00

\$211,838.00

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

			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 #:			
		Invoice Period:	07/1/19 - 07/31/19
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES PERSONNEL BUDGETED EXPENSES EXPENSES TO DATE Nudget Remaining Image: state st

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:

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

Contractor: San Francisco AIDS Found						act ID # 002634]		A-1JUL	
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	100			Cor	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000 Fax: 415-487-3009	CHEP		1	Funding Source:			General Fund			
Program Name: HIV Syringe Access and Di	sposal S			1	G	irant Cod	le/Detail:			_
ACE Control #:	sposa o	er vices			Pro	ject Cod	de/Detail:			
						Invoic	e Period:	07/	1/20 - 07	/31/20
						FINAL	L Invoice		(check i	f Yes)
	CONTR	TAL	THIS P	ERED	TOI	ATE	TO	OF TAL	DELIVE	AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services (hrs., City-Wide & Syringe Access, Disposal Coordinatoin & Bu	8,079 12	54,300 N/A			-				8,079	54,30 N/A
			-	-	-		_	-		-
	_				1					
	-			1 = 1	-					
	_	NOC	_	NOC		NOC		NOC		NOC
Number of Clients for Appendix		54300			· · · · ·	1	0.00	1.1	1	54,300
EXPENDITURES	BUD	GET	EXPE THIS P			NSES	% (BUD			AINING
Total Salaries (See Page B)	\$496,	916							-	916.00
Fringe Benefits	\$124,	229							\$124,2	229.00
Total Personnel Expenses	\$621,	145							\$621,1	145.00
Operating Expenses:	POF								805.0	00.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$95,6	000						-	\$95,6	66.00
Materials and Supplies-(e.g., Office,	\$550,	665	-				1	-	\$550,6	65.00
Postage, Printing and Repro., Program Supplies)					-			_		
General Operating-(e.g., Insurance, Staff	\$10.9	916	-			-			\$10,9	16.00
Training, Equipment Rental/Maintenance)				-	-					
Staff Travel - (e.g., Local & Out of Town)			-				_			
Consultant/Subcontractor	\$545.	696			-				\$545,6	96.00
official and offic	40.10,			-					0010,0	00.00
Other - (Meals, Audit, Transportation Reimb,					_					
Stipends, Facilitators)		-		-	-					
Total Operating Expenses	\$1,202	,943					5	-	\$1,202,	943.00
Capital Expenditures								1		1
TOTAL DIRECT EXPENSES	\$1,824						-		\$1,824,	
Indirect Expenses	\$182,4								\$182,4	
TOTAL EXPENSES	\$2,006	,497	_						\$2,006,4	497.00
LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if appropr REIMBURSEMENT	iate)		_		NOTES:					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requ ted 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:

1.13	Dat	le'		
	Da	10.		
			_	

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-1k 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
Contract Purchase Order No:
Fund Source: General Fund

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

Grant Code/Detail.	
Project Code/Detail:	24

Invoice Period: 07/1/20 - 07/31/20

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

Telephone: 415-487-3000

Fax: 415-487-3009

DEDROMMEN		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	-		1	\$53,944.00
Health Educator	2.75	\$155,411			1 3	\$155,411.00
Comm. Engagement & Kit Packing A	0.65	\$34,730				\$34,730.00
		1.1				
	-					-
	-				-	-
					-	
	-				-	
	_				-	-
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:

									07/01/20	- 06/30/2 PAGE
						act ID #	-	Ir	voice Nun	nber
Contractor: San Francisco AIDS Found					10000	002634		A-1JUL20		
Address: 1035 Market Street, Suite 4	00									
San Francisco, CA 94103				Cor	ntract Pu	rchase (Order No:		_	-
Telephone: 415-487-3000		1.7.4.4		1		Funding	Source:	G	eneral F	und
Fax: 415-487-3009		CH	IEP			-				
Program Name: HIV Syringe Access and Di	sposal S	ervices	and the second	1	G	rant Cod	le/Detail:			
ACE Control #					Pro	Ject Coo	le/Detail:		_	
ACE Control #:						Involce	Period:	07/1	/20 - 07/	31/20
						FINAL	Invoice		(check if	Yes)
	TOT	ACTED	THIS P	ERED	TOD	ERED	% (TOT	AL	DELIVE	AINING
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A		-		-			12	N/A
						1	1	-	-	-
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							-	1.1.1.1	-	-
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A		-		1111	1.1.1.1.1			N/A
EXPENDITURES	BUD	BET	EXPE THIS P	NSES	EXPE TO D		% C BUDO		REMA	
Total Salaries (See Page B)			-	-						_
Total Personnel Expenses							-		-	
Operating Expenses:	-	7 2 1							1	
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000	1.1		1				\$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)	\$147,		1	-	-	_			ψ141,0	00.00
			-	1.1						
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)										
Consultant/Subcontractor				_				-		
Other - (Meals, Audit, Transportation Reimb,			-		-			-	-	
Stipends, Facilitators)			_			-	_		_	
Total Operating Expenses	\$192.5	580	-			-			\$192.58	30.00
Capital Expenditures	4 CORTA		-		-					
OTAL DIRECT EXPENSES	\$192,5	80							\$192,58	
Indirect Expenses	\$19,2		-		-			1	\$19,25	
OTAL EXPENSES	\$211,8	38						11	\$211,83	8.00
LESS: Initial Payment Recovery				1	NOTES:					
Other Adjustments (Enter as negative, if appropri				- 11						

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:

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-11 07/01/20 - 06/30/21 PAGE B

Invoice Number A-1JUL20

07/1/20 - 07/31/20

Contractor:	San Francisco AIDS Foundation	
Address:	1035 Market Street, Suite 400	
	San Francisco, CA 94103	Contra
Telephone:	415-487-3000	

ct Purchase Order No:

Fax: 415-487-3009

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

Fund Source:	General Fund
Grant Code/Detail:	
roject Code/Detall:	

Invoice Period:

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
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					1.1.1	1
TOTAL 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:

Title:

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

TO CONTR UOS 079 12 BUDO	TAL ACTED NOC 54,300 N/A NOC 54300		PERED ERIOD NOC	G Pro DELIN	Funding rant Co ject Coo Invoic		07/		und 31/21
TO CONTR UOS 079 12 BUDO	TAL ACTED NOC 54,300 N/A NOC 54300	DELIM THIS P UOS	PERED ERIOD NOC	G Pro DELM TO D	Funding rant Con ject Con Invoic FINA ERED DATE NOC	g Source: de/Detail: de/Detail: e Period: L Invoice % TO	OF TAL NOC	1/21 - 07/](check if REM, DELIVE UOS 8,079	31/21 (Yes) AINING RABLES NOC 54,300 N/A
TO CONTR UOS 079 12 BUDO	TAL ACTED NOC 54,300 N/A NOC 54300	DELIM THIS P UOS	NOC	Pro DELIN TO D	rant Con Invoic FINA ERED DATE NOC	de/Detail: de/Detail: e Period: L Invoice % TO	OF TAL NOC	1/21 - 07/](check if REM, DELIVE UOS 8,079	31/21 (Yes) AINING RABLES NOC 54,300 N/A
TO CONTR UOS 079 12 BUDO	TAL ACTED NOC 54,300 N/A NOC 54300	DELIM THIS P UOS	NOC	Pro DELIN TO D	Invoic FiNA FINA PERED DATE NOC	de/Detail: e Period: L Invoice % TO	OF TAL NOC	Check if REM DELIVE UOS 8,079	Yes) AINING RABLES NOC 54,300 N/A
TO CONTR UOS 079 12 BUDO	TAL LACTED NOC 54,300 N/A NOC 54300		NOC	DELIN TO L	Invoic FINA PERED DATE NOC	e Period: L Invoice % TO	OF TAL NOC	Check if REM DELIVE UOS 8,079	Yes) AINING RABLES NOC 54,300 N/A
BUDO	NOC 54,300 N/A N/A NOC 54300		NOC	DELIN TO L	Invoic FINA PERED DATE NOC	e Period: L Invoice % TO	OF TAL NOC	Check if REM DELIVE UOS 8,079	Yes) AINING RABLES NOC 54,300 N/A
BUDO	NOC 54,300 N/A N/A NOC 54300		NOC	TOL	FINA TERED DATE NOC	L Invoice % TO	OF TAL NOC	Check if REM DELIVE UOS 8,079	Yes) AINING RABLES NOC 54,30 N/A
BUDO	NOC 54,300 N/A N/A NOC 54300		NOC	TOL	NOC	% TO	OF TAL NOC	REM/ DELIVE UOS 8,079	AINING RABLES NOC 54,300 N/A
BUDO	NOC 54,300 N/A N/A NOC 54300		NOC	TOL	NOC	TO	TAL NOC	DELIVE UOS 8,079	RABLES NOC 54,30 N/A N/A
,079 12 BUD0	54,300 N/A NOC 54300		NOC					8,079	54,300 N/A
12 BUDO	N/A NOC 54300	EXPE			NOC		NOC		N/A NOC
BUDO	NOC 54300	EXPE			NOC		NOC	12	NOC
	54300	EXPE			NOC		NOC		-
	54300	EXPE			NOC		NOC		-
	54300	EXPE			NOC		NOC		-
	54300	EXPE						-	-
		EXPE	1050		-		-		
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\$124.	229					1.000	1.201	\$124,2	
\$621,	145						1	\$621,1	
						200			
\$95,6	666					1.000		\$95.66	6.00
							-		
\$550,	665	1	-	-				\$550,6	65.00
_		-			-				_
\$10.9	916	-	-		-	1.	-	\$10.91	6.00
		0							0.00
	-	-	-			-	-		_
\$545,0	696	-		_			-	\$545,6	96.00
_						-			_
							-	1	_
1,202	943	-						\$1,202,9	43.00
1 00 1	000	_							
1,824	,088	-		_					
\$182,4	109		_	_		-	-		
2,006	,497			CO. BOR				\$2,006,4	97.00
				NOTES:					
	\$550, \$10,\$ \$545, 1,202 7,824 \$182, 2,006	\$95,666 \$550,665 \$10,916 \$545,696 1,202,943 1,824,088 \$182,409 2,006,497	\$550,665 \$10,916 \$545,696 1,202,943 1,824,088 \$182,409 2,006,497	\$550,665 \$10,916 \$545,696 1,202,943 1,824,088 \$182,409 2,006,497	\$550,665 \$10,916 \$545,696 1,202,943 1,824,088 \$182,409 2,006,497 NOTES:	\$550,665 \$10,916 \$545,696 1,202,943 1,824,088 \$182,409 2,006,497 NOTES:	\$550,665 \$10,916 \$545,696 1,202,943 1,824,088 \$182,409 2,006,497 NOTES:	\$550,665 \$10,916 \$545,696 1,202,943 1,824,088 \$182,409 2,006,497 NOTES:	\$550,665 \$10,916 \$10,916 \$545,696 \$545,696 \$545,696 \$1,202,943 \$1,202,943 \$1,202,943 \$1,202,943 \$1,824,088 \$1,824,088 \$1,824,09 \$182,400 \$182,400 \$180,400\$ \$182,400\$ \$182,400\$100\$ \$180,400\$ \$180,400\$ \$

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:

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)	a for the second s

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

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

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

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

	the second se
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			1	\$496.916.00

DETAIL PERSONNEL EXPENDITURES

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

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:

									APPE 07/01/21	NDIX F-1 - 06/30/2 PAGE
					Contr	act ID #		- 11	voice Nun	ber
Contractor: San Francisco AIDS Found	ation				1000	002634			A-1JUL2	
Address: 1035 Market Street, Suite 4					E trees	A555A		-	TI TOOLA	
San Francisco, CA 94103				Co	stract Pu	rchasa (order No:	_		
San Francisco, OA 54105				001	inactru	Cildad C	1001 140.			
Telephone: 415-487-3000				É l		Funding	Source:	G	eneral F	ind
Fax: 415-487-3009		CU	IEP			, and ng	oouroe.		cheral P	2110
Fax. +15-407-5005		UL	ILF.			mant Cor	e/Detail:			-
Reserve Names UN Resident Assessment Di		L	-		G	rant Cot	e/Detail:			_
Program Name: HIV Syringe Access and Dis	sposal 5	ervices			Deal		le/Detail:			
ACE Control #:					Pro	Ject Cot	le/Detail:	-		
ACE CONTROL#:						Inumlar	Period:	07/4	104 07/	04/04
						Invoice	e Perioa:	07/1	/21 - 07/	31/21
							transfer I		D	
						FINAL	Involce		(check if	Yes)
	TOT	A	DELIV	FRED	DELA	ERED	%	DE	REMA	INING
	CONTR		THIS PI			DATE	TOT			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access, Disposal Coord, & Bulk Pur	12	N/A	-	- 1		-	-		12	N/A
		-								
						-	-			
				-	+	-	-			-
					-	-	-			
	-					-	-	-		
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A	-						1	N/A
EXPENDITURES	BUDO	GET	EXPEN THIS PE		EXPE TO D		% C BUDC		REMA	
Total Salaries (See Page B)			-		-					
Fringe Benefits										_
Total Personnel Expenses	_		-				_			
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0	000							\$33,00	0.00
Building Maintenance Supplies and Repairs)	400,0		-		-				000,00	0.00
			-		1.0					
Materials and Supplies-(e.g., Office,	\$147,	580	1		1				\$147,5	30.00
Postage, Printing and Repro., Program Supplies)			· · · · · · · · · · · · · · · · · · ·		5				1.000	
	-							1.1	10.00	1
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)									_	
Staff Travel - (e.g., Local & Out of Town)										
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor										
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)										
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses	\$192,5	580							\$192,58	0.00
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures										12.71
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	\$192,5	80							\$192,58	0.00
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	\$192,5 \$19,2	580 58							\$192,58 \$19,25	0.00 8.00
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES Indirect Expenses TOTAL EXPENSES	\$192,5	580 58							\$192,58	0.00 8.00
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES Indirect Expenses COTAL EXPENSES LESS: Initial Payment Recovery	\$192,5 \$19,2 \$211,8	580 58			NOTES:				\$192,58 \$19,25	0.00 8.00
Staff Travel - (e.g., Local & Out of Town) Consultant/Subcontractor Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES Indirect Expenses TOTAL EXPENSES	\$192,5 \$19,2 \$211,8	580 58			NOTES:				\$192,58 \$19,25	0.00 8.00

10 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:

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

APPENDIX F-1n 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

A-1JUL21
Contract Purchase Order No:
Fund Source:
General Fund

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

Telephone: 415-487-3000

Fax: 415-487-3009

Grant Code/Detail:	1.5

Project Code/Detail:

Invoice Period: 07/1/21 - 07/31/21

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EX		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
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						-
		1				
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:

Title:

DEPARTMENT OF PUBLIC HEALTH CONTRACTOR MC

MONTHLY DELI	ERABI	ES AND	COST	REIM	BURSEI	MENT	INVOIC	E		NDIX F-10 - 06/30/23 PAGE A
					Contra	ict ID #			nvoice Nur	nber
Contractor: San Francisco AIDS Found	ation					02634	7		A-1JUL	
Address: 1035 Market Street, Suite 4						112.03.00	-	-		
San Francisco, CA 94103	24.9			Cor	tract Pur	chase (Order No:			
Telephone: 415-487-3000		1.7.7.5	1.5	1	1 1	Funding	Source:	0	Seneral F	und
Fax: 415-487-3009		CH	EP	1						
		0			G	ant Cot	de/Detail:			
Program Name: HIV Syringe Access and Dis	sposal S	ervices							-	
		C			Pro	ect Cod	de/Detail:			
ACE Control #:								-		-
and report to the						Invoic	e Period:	07/	1/22 - 07/	31/22
						FINA	L Invoice	-	(check if	Yes)
	CONTR		DELIV		DELIM		%			RABLES
DELIVERABLES	UOS	NOC	THIS P	NOC	TO D UOS	NOC	UOS	NOC	UOS	NOC
Syringe Access Services (hrs., City-Wide &	8,079	54,300		1	1				8.079	54,300
Syringe Access, Disposal Coordinatoin & Bu	12	N/A				10.00		L	12	N/A
					-	10 A				
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		-	-	_		-	-			-
			-		-	-		-		
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix	1	54300		-					1	54.300
ALL WERE CONTRACTOR			1.000		1.2.1.1.				-	
EXPENDITURES	-		EXPEN		EXPEN		% (INING
	BUD		THIS PE	RIOD	TO D	ATE	BUDO	GET	BALA	
Total Salaries (See Page B) Fringe Benefits	\$496, \$124,		-	-	0		-		\$496,9	
Total Personnel Expenses	\$621.			_	-				\$621,1	
Operating Expenses:						-			0021,1	10.00
Occupancy-(e.g., Rental of Property, Utilities,	\$95,6	666	2-2-22						\$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)									4	
General Operating-(e.g., Insurance, Staff	\$10,9	16							\$10,91	6.00
Training, Equipment Rental/Maintenance)	010,0		-			-	-		\$10,31	0.00
						-		_	1	_
Staff Travel - (e.g., Local & Out of Town)								1		
			_							
Consultant/Subcontractor	\$545,6	396							\$545,6	96.00

Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) \$1,202,943 Total Operating Expenses \$1,202,943.00 Capital Expenditures TOTAL DIRECT EXPENSES \$1,824,088 \$1,824,088.00 \$182,409 Indirect Expenses \$182,409.00 TOTAL EXPENSES \$2,006,497 \$2,006,497.00 NOTES: LESS: Initial Payment Recovery 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.

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)	

Title:

Signature:

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

A-1JUL22

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

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

Fund Source:	General Fund

Contract Purchase Order No:

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

Grant Code/Detail:	
Project Code/Detail:	
Invoice Period:	07/1/22 - 07/31/22

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EXPENDITURES

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
Pgms & Ops Director	0.05	\$5,651	THOT HINDE	1	T	\$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			1 - 1	\$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:

and the second						act ID #	1		voice Nun	
Contractor: San Francisco AIDS Found Address: 1035 Market Street, Suite 4					1000	002634	1		A-1JUL2	22
San Francisco, CA 94103	00			Cor	ntract Pu	rchase C	order No:	1		
Telephone: 415-487-3000		-	-	T		Funding	Source:	G	eneral F	und
Fax: 415-487-3009		CH	EP		G	irant Cod	le/Detail:			_
Program Name: HIV Syringe Access and Dis	sposal S	ervices					le/Detail:			
ACE Control #:					PIC					-
						Invoice	e Period:	07/1	122 - 07/	31/22
						FINAL	Invoice		(check if	Yes)
	CONTR		THIS P	ERED	TOI	DATE	% (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
							-		-	
				-		-			-	-
		-	-		-			-	-	
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1										
		NOC	_	NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A	-						har is	N/A
	BUDO		EXPEI THIS PI		EXPE TO E	NSES	% C BUDO		REMA	INING
EXPENDITURES	BUD									INING
EXPENDITURES	BUD									INING
EXPENDITURES	BUDO									INING
EXPENDITURES Total Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUD									INING
EXPENDITURES Total Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUD0 \$33,0	GET								INING NCE
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses:		GET							BALA	INING NCE
EXPENDITURES Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$33,0	9ET							BALA \$33,00	INING INCE
EXPENDITURES Iotal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,		9ET							BALA	INING INCE
EXPENDITURES Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$33,0	9ET							BALA \$33,00	INING INCE
EXPENDITURES Initial Salaries (See Page B) ringe 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)	\$33,(\$147,	9ET 000 580							BALA \$33,00 \$147,5	INING INCE
EXPENDITURES Iotal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$33,0	9ET 000 580							BALA \$33,00	INING INCE
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Decaupancy-(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)	\$33,(\$147,	9ET 000 580							BALA \$33,00 \$147,5	INING INCE
EXPENDITURES Intervention Intervention Interventinter Intervention	\$33,(\$147,	9ET 000 580							BALA \$33,00 \$147,5	INING INCE
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Decaupancy-(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)	\$33,(\$147,	9ET 000 580							BALA \$33,00 \$147,5	INING INCE
EXPENDITURES otal Salaries (See Page B) ringe 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	\$33,(\$147,	9ET 000 580							BALA \$33,00 \$147,5	INING INCE
EXPENDITURES otal Salaries (See Page B) ringe 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)	\$33,(\$147,	9ET 000 580							BALA \$33,00 \$147,5	INING INCE
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators)	\$33,0 \$147, \$12,0	9ET							\$33,00 \$147,5 \$12,00	INING NCE 00.00 80.00 00.00
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses	\$33,(\$147,	9ET							BALA \$33,00 \$147,5	INING NCE 00.00 80.00 00.00
EXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$33,0 \$147, \$12,0 \$12,0 \$192,5	9ET 000 580 000 580 580							BAL4 \$33,00 \$147,5 \$12,00 \$12,00	INING INCE
EXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$33,0 \$147, \$12,0 \$192,5 \$192,5	9ET 000 580 000 580 580 580 580 580							BAL4 \$33,00 \$147,5 \$12,00 \$192,50 \$192,50	INING INCE
EXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Silpends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses	\$33,0 \$147, \$12,0 \$192,1 \$192,1 \$192,3 \$192,3	SED 580 580 580 580 580 580 580							BAL4 \$33,00 \$147,5 \$12,00 \$12,00 \$192,50 \$192,50 \$192,50 \$192,50 \$19,25	INING NCE 00.00 80.00 00.00 80.00 80.00 80.00 80.00
EXPENDITURES Iotal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$33,0 \$147, \$12,0 \$192,5 \$192,5	SED 580 580 580 580 580 580 580							BAL4 \$33,00 \$147,5 \$12,00 \$192,50 \$192,50	INING NCE 00.00 80.00 00.00 80.00 80.00 80.00

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:

Title:

Date:

APPENDIX F-1p

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

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 #:

DETAIL PERSONNEL EXPENDITURES

	A-1JUL22
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	
Invoice Period:	07/1/22 - 07/31/22
Entrat Investor	

ſ

FINAL Invoice (check if Yes)

EXPENSES EXPENSES BUDGETED % OF REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE TOTAL 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:

Title:

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

										PAGE
					Contra	act ID #	1.1	1	Invoice Nu	mber
Contractor: San Francisco AIDS Found	dation				10000	02634			A-1JUL	23
Address: 1035 Market Street, Suite 4	00				_		-	-		
San Francisco, CA 94103				Cor	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000		1	0.27	T		Funding	Source:	-	General F	und
Fax: 415-487-3009		CH	EP			121	0.10			
Program Name: HIV Syringe Access and Di	sposal S	Services	en la composition de la compos	1	G	rant Cot	le/Detail:		-	_
					Pro	ject Cod	le/Detail:			
ACE Control #:						Invoice	e Period:	07/	1/23 - 07	121/02
									1123-01	51/25
						FINAL	L Invoice	1	(check i	f Yes)
	CONTR	TAL	THIS P	ERED	DELIV TO D	ATE	TO	OF TAL	DELIVE	AINING
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
					2 0					
		-	-						-	-
				_						
	-			1000						-
		NOC		NOC		NOC		NOC	1	NOC
lumber of Clients for Appendix		NOC 54300		NOC		NOC		NOC	1	NOC
A Contract of the	BUD	54300	EXPE THIS P	NSES	EXPE	NSES	% (BUD	DF		54,300
XPENDITURES		54300	EXPE THIS P	NSES	EXPER TO D	NSES	% (BUD	DF	BAL	54,300
CXPENDITURES	\$496	54300 GET ,916		NSES		NSES		DF	BAL	54,300 AINING ANCE 016.00
XPENDITURES otal Salaries (See Page B) ringe Benefits	\$496 \$124	54300 GET ,916 ,229		NSES		NSES		DF	BAL \$496,9 \$124,2	54,300 AINING ANCE 916.00 229.00
CAPENDITURES otal Salaries (See Page B) fringe Benefits Total Personnel Expenses	\$496	54300 GET ,916 ,229		NSES		NSES		DF	BAL	54,300 AINING ANCE 916.00 229.00
CALE Salaries (See Page B) fringe Benefits Total Personnel Expenses Operating Expenses:	\$496 \$124 \$621	GET ,916 ,229 ,145		NSES		NSES		DF	BAL \$496,9 \$124,2 \$621,1	54,300 AINING ANCE 216.00 229.00 145.00
CAPENDITURES otal Salaries (See Page B) fringe Benefits Total Personnel Expenses	\$496 \$124	GET ,916 ,229 ,145		NSES		NSES		DF	BAL \$496,9 \$124,2 \$621,1	54,300 AINING ANCE 916.00 229.00
CALL Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$496 \$124 \$621 \$95,0	GET ,916 ,229 ,145 666		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6	54,300 AINING ANCE 916.00 229.00 145.00 66.00
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	\$496 \$124 \$621	GET ,916 ,229 ,145 666		NSES		NSES		DF	BAL \$496,9 \$124,2 \$621,1	54,300 AINING ANCE 916.00 229.00 145.00 66.00
CARPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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)	\$496 \$124 \$621 \$95,1 \$95,1	GET ,916 ,229 ,145 666 ,665		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6	54,300 AINING ANCE 216.00 229.00 145.00 66.00
CXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$496 \$124 \$621 \$95,0	GET ,916 ,229 ,145 666 ,665		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6	54,300 AINING ANCE 216.00 229.00 145.00 66.00
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)	\$496 \$124 \$621 \$95,1 \$95,1	GET ,916 ,229 ,145 666 ,665		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6	54,300 AINING ANCE 216.00 229.00 145.00 66.00
CXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$496 \$124 \$621 \$95,1 \$95,1	GET ,916 ,229 ,145 666 ,665		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6	54,300 AINING ANCE 216.00 229.00 145.00 66.00
XPENDITURES otal Salaries (See Page B) ringe 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)	\$496 \$124 \$621 \$95,1 \$95,1	GET ,916 ,229 ,145 6666 ,665 916		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6	54,300 AINING ANCE 216.00 229.00 145.00 66.00 665.00 16.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Propeny, 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	\$496 \$124 \$621 \$95, \$550, \$10,	GET ,916 ,229 ,145 6666 ,665 916		NSES		NSES		DF	BALJ \$496,5 \$124,2 \$621,1 \$95,6 \$550,6 \$550,6 \$10,9	54,300 AINING ANCE 215.00 229.00 145.00 66.00 665.00 16.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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,	\$496 \$124 \$621 \$95, \$550, \$10,	GET ,916 ,229 ,145 6666 ,665 916		NSES		NSES		DF	BALJ \$496,5 \$124,2 \$621,1 \$95,6 \$550,6 \$550,6 \$10,9	54,300 AINING ANCE 216.00 229.00 145.00 66.00 665.00 16.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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)	\$496 \$124 \$621 \$95, \$550, \$10, \$10, \$545,	54300 GET ,916 ,229 ,145 666 666 916 696		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6 \$10,9 \$10,9 \$545,6	54,300 AINING ANCE 316.00 229.00 145.00 66.00 665.00 16.00 965.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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	\$496 \$124 \$621 \$95, \$550, \$10,	54300 GET ,916 ,229 ,145 666 666 916 696		NSES		NSES		DF	BALJ \$496,5 \$124,2 \$621,1 \$95,6 \$550,6 \$550,6 \$10,9	54,300 AINING ANCE 316.00 229.00 45.00 66.00 665.00 16.00 965.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating Expenses: Occupancy-(e.g., Rental of Propeny, 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	\$496 \$124 \$621 \$95, \$550, \$10,3 \$545, \$12,202	54300 GET ,916 ,229 ,145 6666 916 696 696		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6 \$10,9 \$10,9 \$545,6 \$545,6 \$545,6	54,300 AINING ANCE 216.00 229.00 45.00 66.00 665.00 16.00 965.00 96.00
CXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures DTAL DIRECT EXPENSES	\$496 \$124 \$621 \$95, \$550, \$10,3 \$545, \$1,202 \$1,202	GET ,916 ,229 ,145 6666 916 916 696 696		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6 \$550,6 \$5545,6 \$1,92 \$1,202,1 \$1,202,1	54,300 AINING ANCE 229.00 45.00 66.00 665.00 16.00 96.00 96.00
CXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb,	\$496 \$124 \$621 \$95, \$550, \$10,3 \$545, \$12,202	54300 GET ,916 ,229 ,145 666 665 916 696 696 2.943 5,088 409		NSES		NSES		DF	BAL \$496,5 \$124,2 \$621,1 \$95,6 \$550,6 \$10,9 \$10,9 \$545,6 \$545,6 \$545,6	54,300 AINING ANCE 229.00 145.00 66.00 665.00 16.00 96.00 96.00 943.00 088.00 09.00

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:

Title:

Send to:	SFDPH Fiscal / Invoice Processing			
1000	1380 Howard Street, 4th Floor, Suite 423			
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments		(DPH Authorized Signatory)	100

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

A-1JUL23

07/1/23 - 07/31/23

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

Contract Purchase Order No:

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

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

	and the second se	
Project	Code/Detail:	
FIDIECI	Coue/Detail.	

Invoice Period:

Grant Code/Detail:

FINAL Involce (check if Yes)

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	BALANCE
Pgms & Ops Director	0.05	\$5,651			1	\$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			1	\$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.

Date:

Certified By:

Title:

Appendix F-19 Contract ID# 1000002634

Amendment: 02/01/2019

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

Invoice Number

A-1JUL23

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

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

1	CHEP
17	

TOTAL

CONTRACTED

NOC

N/A

NOC

N/A

BUDGET

\$33,000

\$147,580

\$12,000

UOS

12

Program Name: HIV Syringe Access and Disposal Services

ACE	Control #	

Syringe Access, Disposal Coord. & Bulk Pur

DELIVERABLES

Number of Clients for Appendix

Total Salaries (See Page B)

Total Personnel Expenses

Consultant/Subcontractor

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)

Other - (Meals, Audit, Transportation Reimb,

EXPENDITURES

Fringe Benefits

Operating Expenses:

	Con	tract Pu	rchase C	order No:			
P	1		Funding	Source:	G	eneral Fi	und
		G	rant Cod		-		
		Pro	ject Cod	e/Detail:		_	
			Invoice	Period:	07/1	/23 - 07/	31/23
			FINAL	Invoice		(check if	Yes)
	ERED		ATE NOC	% TOT UOS			NINING RABLES NOC
						12	N/A
				-		-	
1			12.23				
-			·				
-		-				1	
_	NOC	_	NOC		NOC	_	NOC
	C	-		-		1	N/A
EXPEI HIS PI	NSES	EXPE TO D	NSES ATE	% C BUDO		REMA BALA	
		-				\$33,00	00.00
			_		_	\$147,5	80.00
_						\$12,00	0.00

Contract ID #

1000002634

Stipends, Facilitators) Total Operating Expenses Capital Expenditures TOTAL DIRECT EXPENSES \$192,580 \$192,580.00 \$192,580 \$192,580.00 Indirect Expenses \$19,258 \$19,258.00 TOTAL EXPENSES \$211,838 \$211,838.00 NOTES: **LESS: Initial Payment Recovery** 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:

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-1r 07/01/23 - 06/30/24 PAGE B

Invoice Number A-1JUL23

07/1/23 - 07/31/23

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

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

Fund Source:	General Fund		
Grant Code/Detail:	-		

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

NUMBER OF STREET	
Project Code/Detail:	

Fund Source:

Invoice Period:

Contract Purchase Order No:

FINAL Invoice (check if Yes)

DETAIL PERSONNEL EX	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
					-	
					+	
	- +				-	
			Y			
				-	-	
					+ +	
-						
					-	
					1	
					-	
TOTAL SALARIES					-	

Tcertify 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-1s
07/01/24 - 06/30/25
DIOF 1

										PAGE
					Contra	act ID #	51 L.		nvoice Nur	nber
Contractor: San Francisco AIDS Found	lation				10000	02634			A-1JUL	24
Address: 1035 Market Street, Suite 4							-	-		1.0
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000		1.0.0	i eJ	1		Funding	Source:	(Seneral F	und
Fax: 415-487-3009		CH	EP							
Program Name: HIV Syringe Access and Di	sposal S	ervices		1	G	rant Co	de/Detail:			
		di tare i			Pro	ject Cod	de/Detail:	1		
ACE Control #:						Invoic	e Period:	07/	1/24 - 07/	31/24
							100	on		
						FINA	L Invoice	1	(check i	(Yes)
	CONTR	TAL	THIS P	ERED	TOD	ERED	%I TOT	AL	DELIVE	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
					1	1		1		
	-		-	1				-		-
		NOC		NOC		NOO		NOC		
Number of Clients for Appendix		NOC 54300	-	NOC	0	NOC	1	NOC	1	NOC 54,300
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D		% C BUDO			AINING
Total Salaries (See Page B)	\$496	,916				-			\$496,9	
Fringe Benefits	\$124	,229	20-00				1		\$124,2	29.00
Total Personnel Expenses	\$621	145			-				\$621,1	45.00
Operating Expenses:	1000									
Occupancy-(e.g., Rental of Property, Utilities,	\$95,0	666	1		-				\$95,6	66.00
Building Maintenance Supplies and Repairs)								-		
Materials and Supplies-je.g., Office,	\$550.	665	-			-	-		\$550,6	65.00
Postage, Printing and Repro., Program Supplies)							_			
Camprel Operation in January Dief	\$10,9	016	-	-	-			-	\$10,9	10 00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)							1		\$10,5	10.00
Staff Travel - (e.g., Local & Out of Town)					_	-				-
Consultant/Subcontractor	\$545,	696			-		-		\$545,6	96.00
0.1h					-		-			
Other - (Meals, Audit, Transportation Reimb,		-						-		
Stipends, Facilitators)			_							_
Total Operating Expenses	\$1,202	943		-	-		-		\$1,202,	943.00
Capital Expenditures									-	-
OTAL DIRECT EXPENSES	\$1,824				-	1			\$1,824,0	
Indirect Expenses	\$182,								\$182,4	
OTAL EXPENSES	\$2,006	,497	_					1	\$2,006,4	97.00
LESS: Initial Payment Recovery]	NOTES:					
Other Adjustments (Enter as negative, if appropr	iate)		_		1.1					
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:

1380 Howard Street, 4th Flor San Francisco, CA 94103 Attn: Contract Payments	A REAL PROPERTY OF A REAL PROPERTY AND A REAL PROPERTY.	By:		Date:	_
	Attn: Contract Payments		(DPH Authorized Signatory)		-

APPENDIX F-1s 07/01/24 - 06/30/25 PAGE B

A-1JUL24

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

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

DETAIL PERSONNEL EXPENDITURES

Fund Source: General Fund

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

Project Code/Detail:

Grant Code/Detail:

Contract Purchase Order No:

Invoice Period: 07/1/24 - 07/31/24

FINAL Invoice (check if Yes)

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
Pgms & Ops Director	0.05	\$5,651			1	\$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
	-					
	-					
	-					
		-				
					1.1.1	
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-11
07/01/24 - 06/30/25
PAGE A

Contractor: San Francisco AIDS Found						act ID # 002634]	li	A-1JUL	
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Cor	ntract Pu	rchase (Order No:		-	
Telephone: 415-487-3000						Funding	Source:	G	General Fund	
Fax: 415-487-3009		CH	EP			cant Cov	le/Detail:	_		
Program Name: HIV Syringe Access and Di	sposal S	ervices								
ACE Control #:					Pro	ject Coc	le/Detail:			-
						Invoice	e Period:	07/1	1/24 - 07/	31/24
						FINAL	L invoice		(check if	Yes)
DELIVERABLES	CONTR		DELIVE THIS PE UOS	RIOD		ERED ATE NOC		OF TAL NOC	DELIVE	RABLES
Syringe Access, Disposal Coord. & Bulk Pur	UOS	-	005	NOC	UOS	NOC	005	NUC	UOS	NOC
Syringe Access, Disposal Coord. & Buik Pur	12	N/A	-	-	-		-	1.	12	N/A
		-						1		-
	_								-	_
						1.32.6				
lumber of Clients for Appendix	_	NOC N/A		NOC	_	NOC		NOC		NOC N/A
otal Salaries (See Page B)	BUD	GET	EXPEN THIS PE		EXPEI TO D		% (BUD			INING
ringe Benefits										
Total Personnel Expenses					-	-	-	1		-
acorting Execonone:					-	_	-	-		
	\$22.0	200					-		£22.00	00.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$33,0	000							\$33,00	00.00
Occupancy-(e.g., Rental of Property, Utilities,	\$33,0 \$147,;								\$33,00	
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)										
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,		580								80.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$147,	580							\$147,5	80.00
Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff	\$147,	580							\$147,5	80.00
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)	\$147,	580							\$147,5	80.00
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)	\$147,	580							\$147,5	80.00
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	\$147,	580							\$147,5	80.00
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	\$147,	580							\$147,5	80.00
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	\$147, \$12,0 \$12,0	580							\$147,5 \$12,00 \$12,50	80.00
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	\$147, \$12,0 \$12,0 \$192,3 \$192,3	580							\$147,5 \$12,00 \$12,50 \$192,51 \$192,51	80.00 00.00 <u>80.00</u> 30.00
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,	\$147, \$12,0 \$12,0	580 000 580 580 58							\$147,5 \$12,00 \$12,50	80.00 00.00 30.00 30.00 8.00

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:

Title:

ELECTRONIC CONTRACTOR AND A	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:	
rogram Name: HIV Syringe Access and Disposal Services		
	Project Code/Detail:	
ACE Control #:		The second s
	Invoice Period:	07/1/24 - 07/31/24
	FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES

FTE			EXPENSES	% OF	REMAINING
1.12	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
		· · · ·			
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				-	
				1 mm	
				-	
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					-

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-1u
07/01/25 - 06/30/26
DAGE A

						act ID #			Invoice Nu	nber
Contractor: San Francisco AIDS Found	lation				10000	02634			A-1JUL	25
Address: 1035 Market Street, Suite 4	00				200					
San Francisco, CA 94103				Cor	ntract Pu	chase C	order No:	-		
Telephone: 415-487-3000		1		1		Funding	Source:	-	General F	und
Fax: 415-487-3009		CH	EP							
		120			G	rant Cod	le/Detail:	1	_	-
Program Name: HIV Syringe Access and Di	sposal S	ervices			Pro	lect Cod	e/Detail:	-		
ACE Control #:										
						Invoice	Period:	07/	1/25 - 07	31/25
						FINAL	Involce		(check i	f Yes)
		TAL	DELIV			ERED	% (AINING
DELIVERABLES	UOS	NOC	THIS P UOS	NOC	TO D UOS	NOC	UOS	NOC	UOS	RABLES
Syringe Access Services (hrs., City-Wide &	8,079	54,300				1.1			8,079	54,300
Syringe Access, Disposal Coordinatoin & Bu	12	N/A			1		P		12	N/A
		1.000				÷		-	1	1
			122.201	1000					1	
									-	
		it and the second	5				1 mm	1		-
		NOC		NOC		NOC		NOC		NOC
lumber of Clients for Appendix		54300		,		1,00			1	54.300
EXPENDITURES	BUD \$496		EXPEN THIS PE		EXPE TO D		% C BUDC		BAL	ANCE
ringe Benefits	\$124				_	-				29.00
Total Personnel Expenses	\$621				-				\$621,1	
Operating Expenses:	WOL 1	110	-	_	-	_		_		40.00
Occupancy-(e.g., Rental of Property, Utilities,	\$95.0	666		_	-				\$95,6	66.00
Building Maintenance Supplies and Repairs)	+							-	000,0	00.00
Materials and Supplies-(e.g., Office,	\$550.	665	-				-	-	\$550,6	65.00
Postage, Printing and Repro., Program Supplies)					1					
General Operating-(e.g., Insurance, Staff	\$10,9	16	-		1			_	\$10,9	16 00
Training, Equipment Rental/Maintenance)	φ το ₁ ,	510	-					_	\$10,5	10.00
Staff Travel - (e.g., Local & Out of Town)	_		-				-			-
Consultant/Subcontractor	\$545,	696		-					\$545,6	96.00
Consultant Subconductor	0010,								4010,0	00.00
Other - (Meals, Audit, Transportation Reimb,									1	
Stipends, Facilitators)	_			-	-				-	
Total Operating Expenses	51,202	,943			-				\$1,202,	943.00
Capital Expenditures			-				11			
OTAL DIRECT EXPENSES	\$1,824		1		-			-	\$1,824,0	
Indirect Expenses	\$182,				-				\$182,4	
OTAL EXPENSES	\$2,006	,497	_	1					\$2,006,4	197.00
LESS: Initial Payment Recovery				-	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:	

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

APPENDIX F-1u 07/01/25 - 06/30/26 PAGE B

Invoice Number

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

L	A-1JUL25
Contract Purchase Order No:	-
Fund Source:	General Fund
Grant Code/Detail:	
Project Code/Detail:	

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

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

DETAIL PERSONNEL EXPENDITURES

The second se	
Invoice Period:	07/1/25 - 07/31/25

FINAL Invoice (check if Yes)

BUDGETED EXPENSES EXPENSES % OF REMAINING PERSONNEL FTE THIS PERIOD TO DATE BUDGET SALARY BALANCE 0.05 \$5,651.00 Pgms & Ops Director \$5,651 Dir. Behavioral Health Svc 0.05 \$7,000 \$7,000.00 0.05 \$5,138 \$5,138.00 Dir. Gov't Contracts Data Manager 0.05 \$4,367 \$4,367.00 \$53,944 SAS Director 0.75 \$53,944.00 1.00 \$63,705 Logistics Inventory Mgr \$63,705.00 Logistics Associates 2.00 \$113,026 \$113,026.00 SSE/Vol Coordinator 0.75 \$53,944 \$53,944.00 2.75 \$155,411 Health Educator \$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-1v 07/01/25 - 06/30/26 PAGEA

					Contra	act ID #		Ir	woice Num	nber
Contractor: San Francisco AIDS Found	ation				10000	02634		1.1.1	A-1JUL2	25
Address: 1035 Market Street, Suite 4	00				-					
San Francisco, CA 94103				Cor	ntract Pu	rchase (order No:			
Telephone: 415-487-3000			1007	1		Funding	Source:	G	eneral F	und
Fax: 415-487-3009		CHEP							onoran 1	arra
New York Contract Access of Dis			1000	J	G	rant Coo	ie/Detail:			_
Program Name: HIV Syringe Access and Dis	sposal 5	ervices			Pro	ject Coo	e/Detall:	-		
ACE Control #:									-	
						Invoice	Period:	07/1	/25 - 07/	31/25
						FINAL	Invoice		(check if	Yes)
	TO	TAI	DELIV	ERED	DELIV	ERED	% (DE	REM	INING
DELIVERABLES		ACTED		ERIOD	TOD		TOT			RABLES
Syringe Access, Disposal Coord. & Bulk Pur	12	N/A	000	NOC	000	NOC	1 1	NOC	12	N/A
Synnige Access, Disposal Coold. & Duik Pul	14	IN/A		-			-		12	IN/A
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	-	-	-			-		-		
							1.00	1		
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lumber of Clients for Appendix		N/A		HOU		nou	T	NOU		N/A
EXPENDITURES	BUD	GET	EXPERTIES PI		EXPERTO D		% C BUDO		REMA	
fotal Salaries (See Page B))	
ringe Benefits										
Total Personnel Expenses							-			_
Operating Expenses:	600 0	000			-		-		600.00	0.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$33,0	000	-				-		\$33,00	00.00
Materials and Supplies-(e.g., Office,	\$147,	580		-	-	-			\$147,5	80.00
Postage, Printing and Repro., Program Supplies)	Q147,	000	-		-				ψ1+1,0	00.00
General Operating-(e.g., Insurance, Staff	\$12.0	000			-		-		\$12,00	00.00
Training, Equipment Rental/Maintenance)	- 412 ,0				-				\$12,00	0.00
Staff Travel - (e.g., Local & Out of Town)						-				-
Consultant/Subcontractor					-		-			
	_									
Other - (Meals, Audit, Transportation Reimb,	_		-		-	-		-		-
Stipends, Facilitators)				-				-		
Total Operating Expenses	\$192.	580			-				\$192,5	30.00
Capital Expenditures	F1007	500			_				#400 F	00.00
OTAL DIRECT EXPENSES	\$192,3 \$19.2			-	-	-		-	\$192,58	
OTAL EXPENSES	\$211,8		-		-	-		-	\$211,83	
LESS: Initial Payment Recovery	W2 11,0				NOTES:				4211,0	0.00
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:

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

A-1JUL25

General Fund

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

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

Grant Code/Detail:

Fund Source:

Contract Purchase Order No:

P

Program Name: HIV Syringe Access and Disposal Services

ACE Control #:

roject Code/Detail:	
Invoice Period:	07/1/25 - 07/31/25

FINAL Involce (check if Yes)

DETAIL PERSONNEL EXPENDITURES

CORONNEL		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
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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:

Title:

										PAGE
					Contr	act ID #		- In	volce Nur	nber
Contractor: San Francisco AIDS Found					10000	002634		1. A.	A-2JUL	19
Address: 1035 Market Street, Suite 4	00							_		
San Francisco, CA 94103				Cor	tract Pu	rchase (Order No:			_
Telephone: 415-487-3000 Fax: 415-487-3009		CH	IEP	1		Funding	Source:	G	eneral F	und
		01			G	rant Coo	le/Detail:			-
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Homele	ss You			or - or ann		-	
	- F		00000000				le/Detail:			-
ACE Control #:							_	-		
						Invoice	Period:	07/1	/19 - 07/	31/19
								1	1.15	
						FINAL	Invoice		(check if	Yes)
	-		-						-	
	CONTR		DELIV THIS P			ATE	% TO			RABLES
DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
HYA Wrap Around & Disposal Services	12	N/A					1.1	1	12	N/A
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			1. 4		-					
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A		10	-	15.0.1				N/A
	BUDG		EXPENTHIS PI		EXPE TO D		% (BUD)			N/A INING NCE
EXPENDITURES	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses:	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Operating Expenses:	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	BUDG				100.00					INING
	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe 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)	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office,	BUDG				100.00					INING
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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)	BUDG				100.00					INING
EXPENDITURES otal Salaries (See Page B) ringe 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	BUDG				100.00					INING
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel 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)					100.00				BAL	INING
CXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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)	BUDO \$153,5				100.00					INING
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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					100.00				BAL	INING
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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,					100.00				BAL	INING
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses perating 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					100.00				BAL	INING
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators)		SET			100.00				BAL	INING INCE
	\$153,5	559 559			100.00				BAL/	INING INCE 59.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel 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 Reimt, Stipends, Facilitators) Total Operating Expenses Capital Expenditures DTAL DIRECT EXPENSES	\$153,5 \$153,5 \$153,5	SET			100.00				BAL/ \$153,55 \$153,55 \$153,55	INING INCE 59.00 59.00
EXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures DTAL DIRECT EXPENSES Indirect Expenses	\$153,5 \$153,5 \$153,5 \$15,35	559 559 559 559 559			100.00				8AL/ \$153,55 \$153,55 \$153,55 \$153,53	INING INCE 59.00 59.00 59.00 59.00
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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 Reimt, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses DTAL EXPENSES	\$153,5 \$153,5 \$153,5	559 559 559 559 559							BAL/ \$153,55 \$153,55 \$153,55	INING INCE 59.00 59.00 59.00 59.00
EXPENDITURES otal Salaries (See Page B) ringe 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$153,5 \$153,5 \$153,5 \$15,3; \$168,9	559 559 559 559 559			100.00				8AL/ \$153,55 \$153,55 \$153,55 \$153,53	INING INCE 59.00 59.00 59.00 59.00

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:

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-2c

APPENDIX F-2c
07/01/19 - 06/30/20
PAGER

REMAINING

BALANCE

% OF

BUDGET

EXPENSES

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-2JUL19
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 S	Services - Homeless Youth Alliance	
		Project Code/Detall:	
ACE Control #:			
		Invoice Period:	07/1/19 - 07/31/19
		FINAL Invoice	(check if Yes)

EXPENSES

PERSONNEL FTE SALARY THIS PERIOD TO DATE TO DATE

BUDGETED

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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:

TOTAL SALARIES

Title:

DETAIL PERSONNEL EXPENDITURES

Contractor: San Francisco AIDS Founda Address: 1035 Market Street, Suite 40 San Francisco, CA 94103 Telephone: 415-487-3000						act ID #		te	voice Nun	diam'r
Address: 1035 Market Street, Suite 40 San Francisco, CA 94103 Telephone: 415-487-3000							- C		ACUTE HOR	ider
San Francisco, CA 94103 Telephone: 415-487-3000	00				10000	02634			A-2JUL2	0
Telephone: 415-487-3000										
				Cor	tract Pu	rchase C	Order No:		_	
			-	1		Funding	Source:	G	eneral Fi	und
Fax: 415-487-3009		CH	EP			i unung	course.		enerarri	1114
				1.1.1	G	rant Cod	e/Detail:			
Program Name: HIV Syringe Access and Dis	posal Se	ervices -	Homele	ss You						
					Pro	Ject Cod	ie/Detail:	-	_	
ACE Control #:						Invoice	Period:	07/1	/20 - 07/	21/00
						Invoice	e renou.	Un	120-011	51120
						FINAL	Invoice		(check if	Yes)
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20140212122	CONTRA	ACTED	THIS P	ERIOD	TOD	ATE	TO	TAL	DELIVE	RABLES
DELIVERABLES	UOS 12	NOC N/A	UOS	NOC	UOS	NOC	UOS	NOC	UOS 12	NOC N/A
HTA Wap Around & Disposal Services	12	IN/A					-		12	IN/A
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Number of Clients for Appendix		N/A	· · · · · ·	1.0					1	N/A
EXPENDITURES	BUDG	SET	EXPER THIS PI		EXPERTO D		% C BUDO		REMA	
Total Salaries (See Page B)	-		1		-					
Fringe Benefits	_						1		-	
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)							-		-	
					1	- 1				
General Operating-(e.g., Insurance, Staff										
Training, Equipment Rental/Maintenance)							-			
Staff Travel - (e.g., Local & Out of Town)	-			_			_			
Consultant/Subcontractor	\$153,5	59							\$153,5	59.00
04	-								-	
Other - (Meals, Audit, Transportation Reimb,		_	-	-	_	-	_	-	-	
Stipends, Facilitators)	-	-	-		_			-	-	_
Total Operating Expenses	\$153.5	59					1		\$153,55	59.00
Capital Expenditures										
TOTAL DIRECT EXPENSES	\$153,5		-					1	\$153,55	
Indirect Expenses	\$15,3		_				_		\$15,35	
TOTAL EXPENSES	\$168,9	14			DOTES				\$168,91	4.00
LESS: Initial Payment Recovery			-		NOTES:					
Other Adjustments (Enter as negative, if appropria REIMBURSEMENT	ste)		-	-						

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:

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/Detall:	
ogram Name: HIV Syringe Access and Disposal Se	ervices - Homeless Youth Alllance	
	Project Code/Detail:	
CE Control #:		
	Invoice Period:	07/1/20 - 07/31/20
	FINAL Invoice	(check if Yes

	XPENDITURE:	BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
ERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
			1			
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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:

Contractor: San Francisco AIDS Found					-	act ID #)02634	1	In	voice Nun A-2JUL2	
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	+00			Co	ntract Pu	rchase (Order No:			_
Telephone: 415-487-3000 Fax: 415-487-3009		CH	EP			Funding	Source:	G	eneral F	und
Program Name: HIV Syringe Access and D	isposal S		100	ss You			de/Detail:			
ACE Control #:	T				Pro	ject Cod	ie/Detail:	£		_
	1					Invoic	e Period:	07/1	/21 - 07/	31/21
						FINA	L Invoice	1.1	(check if	Yes)
DELIVERABLES	TO CONTR UOS		DELIV THIS P UOS	ERED ERIOD NOC		ERED DATE NOC	% (TOT UOS			AINING RABLES NOC
HYA Wrap Around & Disposal Services	12	N/A	000	NOU	003	nee	000	NOC	12	N/A
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				-			1.00		1	-
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				-				-	-	-
The second second second		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A			1.1.1	0.1.75.1				N/A
EXPENDITURES	BUD	GET	EXPERTING P		EXPE TO D		% C			INING
Total Salaries (See Page B) Fringe Benefits					-					
Total Personnel Expenses	-						-			
Operating Expenses:									1000	_
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	-		1	-						_
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	-		V			-	\$153,5	59.00
Capital Expenditures					10	1		Ì		
OTAL DIRECT EXPENSES	\$153,			-					\$153,55	
Indirect Expenses	\$15,3						1-222-		\$15,35	
OTAL EXPENSES	\$168,9	14			NISTER.				\$168,91	4.00
LESS: Initial Payment Recovery Other Adjustments (Enter as negative, if approp REIMBURSEMENT	riate)		-	-	NOTES:					

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the amount requested for relmbursement 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:

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)	Contraction of the second second

APPENDIX F-2e 07/01/21 - 06/30/22 PAGE B

Invoice Number			
A-2JUL21		San Francisco AIDS Foundation	Contractor:
· · · · · · · · · · · · · · · · · · ·		1035 Market Street, Suite 400	Address:
	Contract Purchase Order No:	San Francisco, CA 94103	
General Fund	Fund Source:	415-487-3000	Telephone:
		415-487-3009	Fax:
	Grant Code/Detail:		
A	ervices - Homeless Youth Alliance	HIV Syringe Access and Disposal Se	ogram Name:
	Project Code/Detail:		
			CE Control #:
07/1/21 - 07/31/21	Invoice Period:		
(check if Yes)	FINAL Invoice		

DETAIL PERSONNEL EXPENDITURES BUDGETED EXPENSES EXPENSES Y OF REMAINING PERSONNEL FTE SALARY THIS PERIOD TO DATE BUDGET BALANCE

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:

									APPE 07/01/22	- 06/30/2 PAGE
					-	act ID #		- ti	nvoice Nun	nber
Contractor: San Francisco AIDS Foun	- store and co				1000	002634		1	A-2JUL2	22
Address: 1035 Market Street, Suite	400									
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:	1	_	
Telephone: 415-487-3000				1		Funding	Source:	6	eneral F	und
Fax: 415-487-3009		CH	IEP			, anomy	ocurae.		enerali	UNU
					G	rant Con	de/Detail:	-	-	
Program Name: HIV Syringe Access and D	isposal S	ervices -	Homela	ess You	th Allian	ICE	1216			
					Pro	ject Cod	le/Detail:	1.1		
ACE Control #:	1						S. 6			
						Invoic	e Period:	07/1	/22 - 07/	31/22
						FINAL	Invoice	1.1	(check if	Yes)
							101 - 0 C E A			
DELIVERABLES	CONTR UOS			ERED PERIOD NOC		ATE NOC	% C TOT UOS			RABLES NOC
HYA Wrap Around & Disposal Services	12	N/A	000	1400	1	line	003	NOC	12	N/A
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Number of Cilents for Appendix		N/A	1		1	-		-		N/A
EXPENDITURES	BUDO	GET	EXPE THIS P		EXPE TO D		% C BUDG		REMA	C 1023 C 10.1
Total Salaries (See Page B)							5			100
Fringe Benefits Total Personnel Expenses					-		-		-	_
Operating Expenses:									-	
Occupancy-(e.g., Rental of Property, Utilities,	i				-					_
Building Maintenance Supplies and Repairs)			1							
Ward Land Barrier					_					
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)			_				_			
Postage, Printing and Repro., Program Supplies/					-				-	
General Operating-(e.g., Insurance, Staff	-									
Training, Equipment Rental/Maintenance)										
Staff Travel - (e.g., Local & Out of Town)					-					
Starr Traver - (e.g., Locar & Out of Town)	-		-			-				
Consultant/Subcontractor	\$153,5	559						-	\$153,55	59.00
Other - (Meals, Audit, Transportation Reimb,					-	-				
Stipends, Facilitators)					-					
7-1-10-00	8459 5	FO	-						CAPA PI	0.00
Total Operating Expenses Capital Expenditures	\$153,5	558	_		-				\$153,55	9.00
OTAL DIRECT EXPENSES	\$153,5	59	-	_	-		-	-	\$153,55	9.00
Indirect Expenses	\$15,3								\$15,35	
OTAL EXPENSES	\$168,9				-		-		\$168,91	
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:

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

APPENDIX F-2f 07/01/22 - 06/30/23 PAGE B

	Contractor: San Francisco AIDS Foundation
	Address: 1035 Market Street, Suite 400
Contract Purchase Order No:	San Francisco, CA 94103
Fund Source:	Telephone: 415-487-3000
	Fax: 415-487-3009
Grant Code/Detail:	
ervices - Homeless Youth Allance	ogram Name: HIV Syringe Access and Disposal S
Project Code/Detail:	
	CE Control #:
Invoice Period:	the function of the
FINAL Invoice	
	Fund Source: Grant Code/Detail: iervices - Homeless Youth Alliance Project Code/Detail: Invoice Period:

DETAIL PERSONNEL EXPENDITURES BUDGETED 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:

Title:

										PAGE
Statistical contractions.						act ID #		Ir	voice Nur	
Contractor: San Francisco AIDS Found					10000	02634	1		A-2JUL	23
Address: 1035 Market Street, Suite 4 San Francisco, CA 94103	00			Cor	tract Du	rchaen (Order No:	-		
		-	_	001	inact r u	Chicade C	Auger No.			
Telephone: 415-487-3000 Fax: 415-487-3009		CH	EP			Funding	Source:	G	eneral F	und
Fax: 415-467-5009		CH	EF		G	rant Cor	le/Detail:	-		
Program Name: HIV Syringe Access and Di	sposal Se	ervices -	Homele	ss You				-		
					Pro	ject Cod	le/Detail:	· · · · ·	_	
ACE Control #:						Involo	e Period:	07/4	/23 - 07/	24/22
						INVOIC	e renou.	011	125-011	51/23
						FINAL	. Invoice		(check if	Yes)
	TOT	AL	DELIV	ERED	DELIV	ERED	%	OF		AINING
DELIVERABLES	CONTR/	NOC	THIS P UOS	ERIOD	TOD	NOC	UOS	TAL	DELIVE	RABLES
HYA Wrap Around & Disposal Services	12	N/A						1.00	12	N/A
			-							
						1	1		1	1000
		-		-	-		-	1	1	-
			-							-
								-		
		1000								
Jumber of Clients for Appendix		NOC		NOC	1	NOC		NOC	-	NOC
Number of Clients for Appendix		NOC N/A		NOC		NOC		NOC	1	NOC N/A
Aumber of Clients for Appendix	BUDG	N/A	EXPERTITIES PR	NSES	EXPE	NSES	% BUD	OF		N/A
XPENDITURES	BUDG	N/A	EXPER THIS PI	NSES	EXPE TO D	NSES	% BUD	OF		N/A
EXPENDITURES	BUDG	N/A		NSES		NSES		OF		N/A
EXPENDITURES	BUDG	N/A		NSES		NSES		OF		N/A
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUDG	N/A		NSES		NSES		OF		N/A
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUDG	N/A		NSES		NSES		OF		N/A
otal Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUDG	N/A		NSES		NSES		OF		N/A
CXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	BUDG	N/A		NSES		NSES		OF		N/A
	BUDG	N/A		NSES		NSES		OF		N/A
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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)	BUDG	N/A		NSES		NSES		OF		N/A
	BUDG	N/A		NSES		NSES		OF		N/A
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs) Materials and Supplies-(e.g., Office, Postage, Printling and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	BUDG	N/A		NSES		NSES		OF		N/A
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel Expenses 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	BUDG	N/A		NSES		NSES		OF		N/A
EXPENDITURES Otal Salaries (See Page B) Finge Benefits Total Personnel 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)	BUDG	N/A		NSES		NSES		OF		
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		N/A		NSES		NSES		OF	BAL	
EXPENDITURES Otal Salaries (See Page B) ringe Benefits Total Personnel 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,		N/A		NSES		NSES		OF	BAL	N/A INING INCE
	\$153,5	N/A SET		NSES		NSES		OF	\$153,5	N/A INING NCE 59.00
	\$153,5 \$153,5 \$153,5	N/A ET 59 59 59		NSES		NSES		OF	BAL/ \$153,5 \$153,5 \$153,53	N/A INING NCE 59.00 59.00
XPENDITURES otal Salaries (See Page B) ringe Benefits Total Personnel 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 DTAL DIRECT EXPENSES	\$153,5 \$153,5 \$153,5 \$153,5 \$15,35	N/A SET 59 59 59 55		NSES		NSES		OF	BAL/ \$153,5 \$153,5 \$153,53 \$153,53	N/A NINING NCE 59.00 59.00 59.00 59.00
	\$153,5 \$153,5 \$153,5	N/A SET 59 59 59 55		NSES ERIOD		NSES		OF	BAL/ \$153,5 \$153,5 \$153,53	N/A NINING NCE 59.00 59.00 59.00 59.00

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:

Title:

Date:

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

APPENDIX F-2g

APPENDIX F-2g
07/01/23 - 06/30/24
PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-2JUL23
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 - Homeless Youth Alliance	
		Project Code/Detall:	
ACE Control #:			
		Invoice Period:	07/1/23 - 07/31/23
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES PERSONNEL BUDGETED EXPENSES Yo OF REMAINING Image: solution of the solution of 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:

Title:

					Contr	act ID #		In	voice Nun	nber
Contractor: San Francisco AIDS Found	lation					002634			A-2JUL2	
Address: 1035 Market Street, Suite 4								-		
San Francisco, CA 94103				Cor	ntract Pu	rchase C	Order No:			
Telephone: 415-487-3000				1		Funding	Source:	G	ieneral F	und
Fax: 415-487-3009		CH	IEP		G	irant Cor	e/Detail:	-	_	-
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Homele	ss You			and a second			
	-poul -						le/Detail:			
ACE Control #:						Invoice	Period:	17/4	/24 - 07/	24/24
								0771	124 - 011	31/24
						FINAL	Invoice	1.11	(check if	Yes)
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DELIVERABLES	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC	UOS	NOC
HYA Wrap Around & Disposal Services	12	N/A		1				1.1.1	12	N/A
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						1.1.1.1	-			-
	- 1			-	100.11			_		
	_	NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		N/A	1		1.1				10 million - 1	N/A
EXPENDITURES	BUD	SET	EXPERTING P	2E 77CA		NSES	% C			INING
	BUDO	GET	EXPE THIS PI	2E 77CA	EXPE TO D		% C BUDG			INING
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rotal Salaries (See Page B) ringe Benefits	BUDO	GET	and the second se	2E 77CA						
rotal Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUDO	GET	and the second se	2E 77CA						
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Deprating Expenses:	BUDO	GET	and the second se	2E 77CA						
rotal Salaries (See Page B) ringe Benefits Total Personnel Expenses	BUDO	GET	and the second se	2E 77CA						
Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	BUDO	GET	and the second se	2E 77CA						
Total Salaries (See Page B) ringe Benefits Total Personnel Expenses Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	BUDO	3ET	and the second se	2E 77CA						
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)	BUDO		and the second se	2E 77CA						
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,	BUDO	SET	and the second se	2E 77CA						
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	BUDO		and the second se	2E 77CA						
Total Salaries (See Page B). ringe 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)	BUD(and the second se	2E 77CA						NCE
Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repeirs) 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			and the second se	2E 77CA					BALA	NCE
Total Salaries (See Page B). Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repeirs) 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)			and the second se	2E 77CA					BALA	NCE
Total Salaries (See Page B). Finge Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repeirs) 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)		559	and the second se	2E 77CA					BALA	59.00
Total Salaries (See Page B). Finge Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repeirs) 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	\$153,5	559	and the second se	2E 77CA					BALA	59.00
Total Salaries (See Page B). Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repeirs) 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	\$153,5 \$153,5 \$153,5	559	and the second se	2E 77CA					BALA \$153,51 \$153,53 \$153,53	59.00 59.00
otal Salaries (See Page B). ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repeirs) 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	\$153,5 \$153,5 \$153,5 \$153,5 \$15,3	559 559 559 55	and the second se	2E 77CA					BALA \$153,51 \$153,53 \$153,53 \$153,53 \$153,53	59.00 59.00 59.00 59.00 59.00
Total Salaries (See Page B). ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repeirs) 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 OTAL EXPENSES	\$153,5 \$153,5 \$153,5	559 559 559 55	and the second se						BALA \$153,51 \$153,53 \$153,53	59.00 59.00 59.00 59.00 59.00
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	\$153,5 \$153,5 \$153,5 \$15,3 \$168,5	559 559 559 55	and the second se						BALA \$153,51 \$153,53 \$153,53 \$153,53 \$153,53	59.00 59.00 59.00

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:

Title:

Date:

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

APPENDIX F-2h

APPENDIX F-2h 07/01/24 - 06/30/25 PAGE B

	Invoice Number
1	A-2JUL24
Contract Purchase Order No:	
Fund Source:	General Fund
Grant Code/Detail:	
ices - Homeless Youth Alliance	
Project Code/Detail:	
그는 그는 그가 가슴을 가물	
Invoice Period:	07/1/24 - 07/31/24
FINAL Invoice	(check if Yes
	Fund Source: Grant Code/Detall: ices - Homeless Youth Alliance Project Code/Detail: Invoice Period:

DETAIL PERSONNEL EXPENDITURES

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
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OTAL 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:

Title:

Contractor: San Francisco AIDS Found Address: 1035 Market Street, Suite 4	C. C. J. C.				10000	act ID # 002634]		A-2JUL2	1.4.1.4.1.
San Francisco, CA 94103				Co	ntract Pu	rchase C	order No:	-		-
Telephone: 415-487-3000 Fax: 415-487-3009		СН	EP				Source:	G	ieneral Fi	und
Program Name: HIV Syringe Access and Di	sposal S	ervices -	Homele	ss You	th Allian	ce	le/Detail: ie/Detail:	_		
ACE Control #:							Period:	07/1	/25 - 07/	31/25
						FINAL	Invoice](check if	Yes)
DELIVERABLES	CONTR	ACTED	DELIV THIS P	ERIOD	TOD	ERED DATE NOC	% (TOT		DELIVE	INING
HYA Wrap Around & Disposal Services	12	NOC N/A	UOS	NOC	UOS	NOC	UOS	NUC	UOS 12	NOC N/A
			1					1		14/14
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Number of Clients for Appendix	_	NOC		NOC		NOC		NOC		NOC
Number of Chefts for Appendix		N/A		1				1.	1. III	N/A
	BUDO		EXPERT		EXPE		% C BUD		REMA	INING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits	BUDO		EXPEI THIS PI		EXPE TO D		% C BUDC		REMA BALA	INING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses	BUDO								A 194 - 194 - 1	INING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses:	BUDO								A 194 - 194 - 1	INING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses	BUDO								A 194 - 194 - 1	INING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	BUDO								A 194 - 194 - 1	INING
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	BUDO								A 194 - 194 - 1	INING
EXPENDITURES 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)	BUDO								A 24 - 23 - 4	INING
EXPENDITURES 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,	BUDO								A 24 - 23 - 4	INING
EXPENDITURES 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	BUDO								A 24 - 23 - 4	INING
EXPENDITURES 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)	BUDO								A 24 - 23 - 4	INING
EXPENDITURES 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									BALA	INING
EXPENDITURES 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)									BALA	INING
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses		SET							BALA	INING NCE
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$153,5 \$153,5	SET							\$153,54	INING NCE 59.00
EXPENDITURES Total Salaries (See Page B) Fringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$153,5 \$153,5 \$153,5	SET							\$153,53 \$153,53	59.00 59.00
EXPENDITURES 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 Other - (Meals, Audit, Transportation Reimb, Stipends, Facilitators)	\$153,5 \$153,5	559 559 559 559							\$153,54	INING NCE 59.00 59.00 59.00 59.00

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:

Title:

Date:

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

APPENDIX F-2

APPENDIX F-2i
07/01/25 - 06/30/26
PAGE B

			Invoice Number
Contractor:	San Francisco AIDS Foundation		A-2JUL25
Address:	1035 Market Street, Suite 400		
13	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: I	HIV Syringe Access and Disposal Ser	vices - Homeless Youth Alliance	
		Project Code/Detail:	
ACE Control #:			the second second
		Involce Period:	07/1/25 - 07/31/25
		FINAL Invoice	(check if Yes)

DETAIL PERSONNEL EXPENDITURES PERSONNEL BUDGETED EXPENSES EXPENSES TO DATE BUDGET BALANCE Image: solution of the soluticon of the solution of the solution of the sol

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:

									07/01/18	PAGE
Contractor: San Francisco AIDS Foun	dation					act ID #	1	-	A 2 H H	a harrist and a second s
Address: 1035 Market Street, Suite					1000	/02034	1		A-3JUL	18
San Francisco, CA 94103	100			Co	ntract Pu	rchase (order No:			
Telephone: 415-487-3000		[1		Funding	Source:	0	Seneral F	und
Fax: 415-487-3009		CH	EP		1.1					
Program Name: HIV Syringe Access and D	isoosal S	ervices -	Harm R	eduction			le/Detail:	_		_
	-	ci noco					le/Detail:			_
ACE Control #:]					Invoice	e Period:	07/	1/18 - 07/	31/18
								517		
						FINAL	Invoice		(check if	f Yes)
DELIVERABLES		TAL RACTED NOC		ERED ERIOD NOC		ERED DATE NOC	% TOT UOS			AINING RABLES NOC
Syringe Access Services	1,888	31,341	000					1100	1,888	31,341
Lounge Services	1,924	11,475	1.1.1.1	1		1			1,924	11,475
			-		-	-		_	-	-
	-	-		-	-		-	-		-
		1 1								-
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix	1	46641						-	1	46,641
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D		% C BUDO			
Total Salaries (See Page B)	\$671								\$671,0	
Fringe Benefits	\$167		1		-				\$167,7	
Total Personnel Expenses	\$838	813	-	_	-				\$838,8	13.00
Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$33,	214		-			-	-	\$33,2	14 00
Building Maintenance Supplies and Repairs)	400,	C.14	-		-	-			000,2	14.00
									1.5. 50	1
Materials and Supplies-(e.g., Office,	\$24,	564	2						\$24,56	34.00
Postage, Printing and Repro., Program Supplies)			-		_		1	-	1	-
General Operating-(e.g., Insurance, Staff	\$12,5	500							\$12,50	00.00
Training, Equipment Rental/Maintenance)	- WIL,		-	-	-				\$12,00	0.00
	-				-	-				1
Staff Travel - (e.g., Local & Out of Town)				-	_		-	_		
Consultant/Subcontractor			-	_	-			-		_
Other - (Meals, Audit, Transportation Reimb,	-	-	1000	-			1		1	
Stipends, Facilitators)					1					
Total Operating Expenses	\$70.2	78						-	\$70.27	8.00
Capital Expenditures	1.24			1						1
TOTAL DIRECT EXPENSES	\$909,			-1			1		\$909,0	
Indirect Expenses	\$90,9	009			-		-		\$90,90	
OTAL EXPENSES	\$1,000	,000	_		NOTES		-		\$1,000,0	00.00
LESS: Initial Payment Recovery	0.10				NOTES:					
Other Adjustments (Enter as negative, if approp REIMBURSEMENT	mate	-1	-		1.11		_			

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:

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

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 Se	ervices - Harm Reduction Center	
	Project Code/Detail:	
CE Control #:		
	Involce Period:	07/1/18 - 07/31/18
	FINAL Invoice	(check if Yes)

DEDRONNEL		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			1.0.0	\$6,000.00
Director, SAS	0.20	\$18,000				\$18,000.00
Associate Director, 6th Street HRC	1.00	\$63,000				\$63,000.00
Health Educator	7.75	\$426,250				\$426,250.00
Mobile Health Educator	0.50	\$27,500				\$27,500.00
Health Educator/Inventory Team Lea	1.00	\$55,000				\$55,000.00
Inventory Associate/Health Educator	1.00	\$55,000				\$55,000.00
		-				
TOTAL SALARIES	11.60	\$671,050				\$671.050.00

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.

Certified By:

Title:

									07/01/19	- 06/30/2 PAGE
Contractor: San Francisco AIDS Foun					and the second s	act ID # 002634	1		nvoice Nur A-3JUL	
Address: 1035 Market Street, Suite San Francisco, CA 94103	400			Cor	ntract Pu	rchase (Order No:	0		-
Telephone: 415-487-3000 Fax: 415-487-3009		CH	EP	1		Funding	Source:	(General F	und
		011	har I		G	rant Cod	de/Detail:	1-1-1		-
Program Name: HIV Syringe Access and D	isposal S	ervices -	Harm R	eductio						
	1				Pro	oject Cod	ie/Detail:			
ACE Control #:	1					Invoice	e Period:	07/	1/19 - 07/	31/19
						FINAL	L Invoice		(check is	f Yes)
	CONTR	TAL	THIS P		TO	ERED	% TOT	AL	DELIVE	AINING
DELIVERABLES Svringe Access Services	UOS 1,888	NOC 31,341	UOS	NOC	uos	NOC	UOS	NOC	UOS	NOC 31,341
Lounge Services	2,550	15,300					-	-	2,550	15,300
		1	-	1.19		1				
						-		_		1
	-	-	-		-	-		-		
						-		-	-	-
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		46641						-		46,641
EXPENDITURES	BUD	GET	EXPERTING PL		EXPE TO D		% C BUDO			INING
Total Salaries (See Page B)	\$680,							_		92.00
Fringe Benefits	\$170,		·					_	\$170,1	
Total Personnel Expenses	\$850,	990	_						\$850,9	90.00
Operating Expenses:	805	214			-		-	-	COE 0	14.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$25,2	214		_			-		\$25,2	14.00
Materials and Supplies-(e.g., Office,	\$24,5	564			-		-		\$24,5	64.00
Postage, Printing and Repro., Program Supplies)	1									
0 10 10	60.0	00			÷				40.00	0.00
General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$8,3	23		_					\$8,32	3.00
Staff Travel - (e.g., Local & Out of Town)		-		_	-			-	-	-
Consultant/Subcontractor										
Other - (Meals, Audit, Transportation Reimb,									1	
Stipends, Facilitators)		-								-
Total Operating Expenses	\$58,1	01	_						\$58.10	1.00
Capital Expenditures			1				1			
OTAL DIRECT EXPENSES	\$909,0			I					\$909,0	
									\$90.90	9 00 1
Indirect Expenses	\$90,9		-							
OTAL EXPENSES	\$90,9		1		NOTES				\$1,000,0	
	\$1,000				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:

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)	the second se

APPENDIX F-3c

			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:	
Program Name:	HIV Syringe Access and Disposal Ser	vices - Harm Reduction Center	
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/19 - 07/31/19
		FINAL Invoice	(check if Yes)

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 \$20,300.00 Director, Behavioral Health Services 0.05 \$6,000 \$6,000.00 \$10,500 Director, SAS 0.15 \$10,500.00 Associate Director, 6th Street HRC 1.00 \$64,733 \$64,733.00 Health Educator \$437,976 \$437,976.00 7.75 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.

Certified By:

Title:

									NDIX F-3 - 06/30/2 PAGE
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				10000	J02634	1 1	_	A-3JUL	20
.00			Co	ntract Pu	rchase (Order No:			_
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	CH	EP							
sposal S	ervices -	Harm R	eductio			ie/Detail:[-		
				Pro	ject Cod	le/Detail:			
e.					Invoic	e Period:	07/	1/20 - 07/	31/20
					EINA		_	Tenhalt	(New)
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1,888	31,341			1		T		1,888	31,341
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	46641			1		1			46,641
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\$25,2	214					1		\$25,2	14.00
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\$24.5	564	-	-	1.1.		-		\$24.56	34.00
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60.9	00			-		-	-	£0.00	0.00
40,3	23	-	-				-	\$0,52	5.00
		1.55						-	
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	-	-		-			-		-
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\$58.1	01						-	\$58,10	1.00
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\$90,9									
04 000								ST 1000 0	00.00
\$1,000	,000			NOTES				\$1,000,0	00.00
	TO CONTR UOS 1,888 2,550 888 2,550 8680, \$170, \$850, \$25,2 \$24,5 \$24,5 \$8,3 \$25,2 \$24,5 \$8,3 \$25,2 \$25	TOTAL CONTRACTED UOS NOC 1,888 31,341 2,550 15,300 NOC	TOTAL contracted UOS DELN THIS P UOS 1,888 31,341 2,550 15,300 NOC 46641 NOC 46641 S850,792 5170,198 \$25,214 5850,990 \$25,214 525,214 \$24,564 558,101 \$309,091 558,101	TOTAL CONTRACTED UOS DELIVERED THIS PERIOD UOS DELIVERED NOC NOC 15,300	TOTAL DELIVERED G sposal Services - Harm Reduction Center Pro CONTRACTED THIS PERIOD DOU UOS NOC UOS NOC 1,888 31,341 UOS UOS NOC NOC NOC NOC UOS NOC 1,888 31,341 UOS UOS NOC 1,888 31,341 UOS UOS UOS NOC NOC NOC UOS UOS \$2,550 15,300 UOS UOS UOS \$25,214 UOS THIS PERIOD TO D \$25,214 UOS UOS UOS \$25,214 UOS UOS UOS \$24,564 UOS UOS UOS \$24,564 UOS UOS UOS \$25,214 UOS UOS UOS \$25,214 UOS UOS UOS \$25,8101 UOS UOS UOS	Image: Non-trace of the second system Funding Grant Conservation Center Sposal Services - Harm Reduction Center Project Conservation Center Sposal Services - Harm Reduction Center Project Conservation Center Sposal Services - Harm Reduction Center Project Conservation Center Invoic Invoic TOTAL DELIVERED DELIVERED CONTRACTED DELIVERED DELIVERED 1,888 31,341 Invoic 1,888 31,341 Invoic 1,888 31,341 Invoic NOC NOC NOC NOC NOC NOC NOC NOC NOC 146641 Invoic Invoic Station 1990 Invoic Invoic \$25,214 Invoic Invoic \$24,564 Invoic Invoic \$88,323 Invoic Invoic \$88,323 Invoic Invoic \$909,091 Invoic Invoic	Interference Interference Interference Interference	dation 1000002634 k00 Contract Purchase Order No: CHEP Funding Source: Sposal Services - Harm Reduction Center Project Code/Detail: Invoice Period: 07/ FINAL invoice 07/ CONTRACTED DELIVERED % OF TOTAL DELIVERED TOTAL UOS NOC UOS NOC UOS NOC NOC NOC 1,888 31,341 Stoc Stoc NOC NOC NOC NOC NOC NOC Station Station Station Station Station Station Station Station Station Station Station Station Station Station Station Station Station Station Station	Idiation 1000002634 A-3JUL2 Image: State of the state 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. Signature:

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-3d 07/01/20 - 06/30/21 PAGE B

	-	Invoice Number
Contractor: San Francisco AIDS Foundation		A-3JUL20
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	Services - Harm Reduction Center	
	Project Code/Detall:	
CE Control #:		
CE Control #:	Invoice Period:	07/1/20 - 07/31/20

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING BALANCE
			THIS PERIOD	TODATE	BODGET	
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	1			\$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		\$56,513				\$56,513.00
Inventory Associate/Health Educator	1.00	\$56,513			-	\$56,513.00
	-					_
	-					
	1				-	
	-			_		
TOTAL SALARIES	11.55	\$680,792				\$680,792,

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.

Certified By:

Date:

Title:

									07/01/21	PAGE
					Contr	act ID #		h	nvoice Nur	nber
Contractor: San Francisco AIDS Found	dation					002634	7		A-3JUL	
Address: 1035 Market Street, Suite							-	-		
San Francisco, CA 94103				Cor	ntract Pu	rchase (Order No:	1	_	
Telephone: 415-487-3000		0	CD	1		Funding	Source:	6	eneral F	und
Fax: 415-487-3009		CH	EP	P		and Car	do/Dotoil.	-		
Program Name: HIV Syringe Access and D	innoral S	andese	Harm D	aductic			le/Detail:	-		_
riogram hame. The Synnige Access and D	iapuadi o	EI TILES -	namin	cuucuu	and the second second		le/Detail:	-	-	
ACE Control #:	T I				1.4		and ordering	-	_	
						Invoice	e Period:	07/1	/21 - 07/	31/21
						FINAL	Invoice	111	(check if	Yes)
	TO	TAL	DELO	ERED	DELA	ERED	% (DEM	INING
		ACTED		ERIOD		DATE	TOT			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
	-						-			-
					1					-
	1					100			1	
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix	-	46641		NOC		NUC		NOC	-	46,641
EXPENDITURES	BUD		EXPE THIS P		EXPE TO D		% C BUDC		BALA	INING
otal Salaries (See Page B)	\$680,		_					-	\$680,7	
ringe Benefits Total Personnel Expenses	\$170, \$850,				-				\$170,1	
Operating Expenses:	0000,								5850.9	00.00
Occupancy-(e.g., Rental of Property, Utilities,	\$25,3								\$850,9	
Building Maintenance Supplies and Repairs)	4-010	214	1	-					\$25,2	4.00
Denting Maintenance ouppriss and Repairs/	4201	214					_			4.00
									\$25,2*	
Materials and Supplies-(e.g., Office,	\$24,5									
									\$25,2*	
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff		564							\$25,2*	54.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies)	\$24,5	564							\$25,2 \$24,56	54.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff	\$24,5	564							\$25,2 \$24,56	54.00
Materials and Supplies-(e.g., Office, Postage, Printing and Repro., Program Supplies) General Operating-(e.g., Insurance, Staff Training, Equipment Rental/Maintenance)	\$24,5	564							\$25,2 \$24,56	54.00
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)	\$24,5	564							\$25,2 \$24,56	54.00
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	\$24,5	564							\$25,2 \$24,56	54.00
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)	\$24, ! \$8,3	23							\$25,2 \$24,56 \$8,32	3.00
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	\$24,5	23							\$25,2 \$24,56	3.00
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	\$24, ! \$8,3	564 23 01							\$25,2 \$24,56 \$8,32	54.00 3.00 1.00
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	\$24,5 \$8,3 \$58,1 \$58,1 \$909,0	564 23 01 091							\$25,2 \$24,50 \$8,32 \$58,10 \$909,03 \$90,90	54.00 3.00 1.00 9.00
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 OTAL EXPENSES	\$24,5 \$8,3 \$58,1 \$909,0	564 23 01 091							\$25,2 \$24,56 \$8,32 \$58,10 \$909,03	54.00 3.00 1.00 9.00
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	\$24,5 \$8,3 \$58,1 \$909,0 \$90,9 \$1,000	564 23 01 091			NOTES:				\$25,2 \$24,50 \$8,32 \$58,10 \$909,03 \$90,90	54.00 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:

Title:

Date:

Send to:	SFDPH Fiscal / Invoice Processing		
1.1	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 S	ervices - Harm Reduction Center	
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/21 - 07/31/21
		FINAL Invoice	(check if Yes)

		BUDGETED	EXPENSES	EXPENSES	% OF	REMAINING
PERSONNEL	FTE	SALARY	THIS PERIOD	TO DATE	BUDGET	BALANCE
V.P. Programs & Services	0.10	\$20,300				\$20,300.0
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			2 T	\$28,257.00
Health Educator/Inventory Team Lea	1.00	\$56,513			1	\$56,513.00
Inventory Associate/Health Educator	1.00	\$56,513				\$56,513.00
	1 1					
	-				-	
	-					
	_					-
	-					
	1					
	11.00	6600 700				
COTAL SALARIES certify that the information provided above is, t	11.55	\$680,792				\$680,792.00

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:

Title:

									APPE 07/01/22	- 06/30/2 PAGE
and the second second and	1.0					act ID #	-		nvoice Nur	
Contractor: San Francisco AIDS Foun					1000	002634	1		A-3JUL	22
Address: 1035 Market Street, Suite San Francisco, CA 94103	400			Co	ntract Pu	rchase (Order No:			
Telephone: 415-487-3000		-		1		Funding	Source:	0	eneral F	und
Fax: 415-487-3009		CH	EP					-	-	
		-		1			de/Detail:		_	_
Program Name: HIV Syringe Access and D	nsposal a	ervices -	narm n	eoucu			de/Detail:	-	_	
ACE Control #:	7					Jee. 00.	and becam.	-	- 24	
	-					Invoic	e Period:	07/	/22 - 07/	31/22
						FINA	L Involce	-](check if	Yes)
		TAL		ERED		ERED	% (TOT			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	_	1	-	-			2,550	15,300
	-	-	-	-						-
			1.1.2.			1-00		-	-	
					-					
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		46641		1100		nee	1	NOU	1	46.641
EXPENDITURES	BUD	GET	EXPE THIS P		EXPE TO D		% C BUDO			INING
Total Salaries (See Page B)	\$680,		11107	LINDE	10.0		0000		\$680,7	
Fringe Benelits	\$170,	198							\$170,1	
Total Personnel Expenses	\$850,	990	-				-		\$850,9	90.00
Operating Expenses:	\$25,2	244			-				POF OF	14.00
Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$23,4	214	-						\$25,2	14.00
building maintenance deppined one repairs)							1		3.2.5	
Materials and Supplies-(e.g., Office,	\$24,5	564							\$24,56	64.00
Postage, Printing and Repro., Program Supplies		-	1					-		
General Operating-(e.g., Insurance, Staff	\$8,3	23				-			\$8,32	2 00
Training, Equipment Rental/Maintenance)	φ0,0	20			-	-	1		ψ0,52	0.00
Staff Travel - (e.g., Local & Out of Town)			_	-	-			_		
Consultant/Subcontractor			-		-	-	-	-		-
Other - (Meals, Audit, Transportation Relmb,			-	-	-	-		-		
Stipends, Facilitators)			_	-					-	_
Total Operating Expenses	\$58,1	01	_	-	1 1				\$58,10	1.00
Capital Expenditures	1		1]
TOTAL DIRECT EXPENSES	\$909,0 \$90,9						-		\$909,09	
Indirect Expenses	\$90,9			_	0.000			-	\$90,90 \$1,000,0	
LESS: Initial Payment Recovery	φ1,000,	,000	-		NOTES:				\$1,000,0	00.00
Other Adjustments (Enter as negative, if approp	riate)			_	1000					
REIMBURSEMENT		1		_	_		-	_		_

I cartify 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:

Send to:	SFDPH Fiscal / Invoice Processing 1380 Howard Street, 4th Floor, Suite 423	1.0		
	San Francisco, CA 94103	By:		Date:
	Attn: Contract Payments	(0	OPH 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 Disposal S	ervices - Harm Reduction Center	
	Project Code/Detail:	
CE Control #:		
2. from	Invoice Period:	07/1/22 - 07/31/22
	FINAL Involce	(check if Yes

PERSONNEL	FTE	BUDGETED	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING
V.P. Programs & Services	0.10	\$20,300	THISTERIOD	TOURIE	BODGET	\$20.300.00
Director, Behavioral Health Services	0.05	\$6,000			-	\$6,000.00
	0.05	\$10,500			+	
Director, SAS	1.00	\$64,733			-	\$10,500.00
Associate Director, 6th Street HRC Health Educator	7.75	\$437.976			-	\$64,733.00
	0.50				+	\$437,976.00
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

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.

Certified By:

Title:

										PAGE
						act ID #		- 1	woice Nur	nber
Contractor: San Francisco AIDS Foun	C. 101 C. 1 1 1 1				10000	002634		1	A-3JUL	23
Address: 1035 Market Street, Suite	400									
San Francisco, CA 94103				Co	ntract Pu	rchase C	order No:			_
Telephone: 415-487-3000		011		1		Funding	Source:	G	ieneral F	und
Fax: 415-487-3009		CH	EP	1.5	G	irant Cor	le/Detail:		-	-
Program Name: HIV Syringe Access and D	ienocal S	onvices .	Harm R	aductio			cipetan.[_	
riogram Hame. Hit Synnige Access and D	isposal o	ervices -	narm	cuucii			e/Detall:	1		
ACE Control #:	I							_		
						Invoice	Period:	07/1	/23 - 07/	31/23
						FINAL	Invoice[(check i	(Yes)
		TAL		ERED		ERED	% (AINING
DELIVERABLES	LONTR	NOC	THIS P UOS	ERIOD	UOS	NOC	UOS	NOC	UOS	RABLES
Syringe Access Services	1,888	31,341			1	2	1.1	1.44	1,888	31,341
Lounge Services	2,550	15,300							2,550	15,300
			()	1		1		-	-	1
C						11.1			P. C. H. B.	
			2	1.00		1	1			
				-		10 11	1			
		NOC		NOC		NOC		NOC		NOC
Number of Clients for Appendix		46641			-					46.641
EXPENDITURES	BUD	GET	EXPE		EXPE		%0	F	REMA	INING
		Gui	THIS P	ERIOD	TOD	AIE	BUDG	ET	BAL	NCE
	\$680,	792	THISP	ERIOD	TOD	ATE	BUDG	BET	\$680,7	92.00
ringe Benefits	\$170,	792 198	THISP	ERIOD			BUDG	BET .	\$680,7	92.00 98.00
ringe Benefits Total Personnel Expenses		792 198	THIS P	ERIOD			BUDG	SET	\$680,7	92.00 98.00
ringe Benefits Total Personnel Expenses Derating Expenses:	\$170, \$850,	792 198 990	THISP	ERIOD			BUDG	JET	\$680,7 \$170,1 \$850,9	92.00 98.00 90.00
ringe Benefits Total Personnel Expenses Deperating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$170,	792 198 990	THISP	ERIOD			BUDG	JET	\$680,7	92.00 98.00 90.00
ringe Benefits Total Personnel Expenses Derating Expenses:	\$170, \$850,	792 198 990	THIS P				BUDG	JET	\$680,7 \$170,1 \$850,9	92.00 98.00 90.00
ringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$170, \$850, \$25,2	792 198 990 214	THIS P				BUDG	JET	\$680,7 \$170,1 \$850,9 \$25,2	92.00 98.00 990.00 14.00
ringe Benefits Total Personnel Expenses Derating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$170, \$850,	792 198 990 214					BUDG	JET	\$680,7 \$170,1 \$850,9	92.00 98.00 990.00 14.00
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)	\$170, \$850, \$25,: \$24,!	792 198 990 214 564	THIS P				BUDG		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50	92.00 98.00 990.00 14.00 54.00
ringe Benefits Total Personnel Expenses 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	\$170, \$850, \$25,2	792 198 990 214 564	THIS P				BUDG		\$680,7 \$170,1 \$850,9 \$25,2	92.00 98.00 990.00 14.00 54.00
ringe Benefits Total Personnel Expenses 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)	\$170, \$850, \$25,: \$24,!	792 198 990 214 564	THISP				BUDG		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50	92.00 98.00 990.00 14.00 54.00
ringe Benefits Total Personnel Expenses 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	\$170, \$850, \$25,: \$24,!	792 198 990 214 564	THISP				BUDC	jET	\$680,7 \$170,1 \$850,5 \$25,2 \$24,50	92.00 98.00 990.00 14.00 54.00
ringe Benefits Total Personnel Expenses 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)	\$170, \$850, \$25,: \$24,!	792 198 990 214 564	THISP				BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50	92.00 98.00 990.00 14.00 54.00
ringe Benefits Total Personnel Expenses 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	\$170, \$850, \$25,: \$24,!	792 198 990 214 564	THISP				BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50	92.00 98.00 990.00 14.00 54.00
ringe Benefits Total Personnel Expenses 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)	\$170, \$850, \$25,: \$24,!	792 198 990 214 564	THISP				BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50	92.00 98.00 990.00 14.00 54.00
ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators)	\$170, \$850, \$25,; \$24, \$8,3	792 198 990 214 564 23	THISP				BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50 \$8,32	92.00 98.00 990.00 14.00 54.00 3.00
ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses	\$170, \$850, \$25,: \$24,!	792 198 990 214 564 23					BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50	92.00 98.00 990.00 14.00 54.00 3.00
ringe Benefits Total Personnel Expenses 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, Audil, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$170, \$850, \$25,2 \$24,3 \$8,3 \$8,3 \$58,1 \$58,1 \$909,1	792 198 990 214 564 23 01 01 091	THISP				BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,50 \$8,32	92.00 98.00 990.00 14.00 54.00 3.00 3.00
ringe Benefits Total Personnel Expenses 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, Audil, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$170, \$850, \$25,2 \$24,3 \$8,3 \$8,3 \$58,1 \$909,1 \$90,9	792 198 990 214 564 23 01 01 091 009	THISP				BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,5 \$8,32 \$8,32 \$58,10 \$558,10 \$909,0 \$90,90	92.00 98.00 99.00 14.00 54.00 3.00 3.00 91.00 91.00
ringe Benefits Total Personnel Expenses 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, Audil, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES Indirect Expenses OTAL EXPENSES	\$170, \$850, \$25,2 \$24,3 \$8,3 \$8,3 \$58,1 \$58,1 \$909,1	792 198 990 214 564 23 01 01 091 009	THISP				BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,5 \$24,5 \$8,32 \$8,32 \$58,10 \$909,0	92.00 98.00 99.00 14.00 54.00 3.00 3.00 91.00 91.00
ringe Benefits Total Personnel Expenses 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, Audil, Transportation Reimb, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$170, \$850, \$25,; \$24,} \$8,3 \$8,3 \$58,1 \$909, \$90,9 \$90,9 \$1,000	792 198 990 214 564 23 01 01 091 009			NOTES:		BUDC		\$680,7 \$170,1 \$850,5 \$25,2 \$24,5 \$8,32 \$8,32 \$58,10 \$558,10 \$909,0 \$90,90	92.00 98.00 99.00 14.00 54.00 3.00 3.00 91.00 91.00

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:

Title:

Date:

APPENDIX F-3g

Send to:	SFDPH Fiscal / Invoice Processing			
1000	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:	
rogram Name: HIV Syringe Access and Disposal S	ervices - Harm Reduction Center	
	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 \$20,300.00 0.10 \$20,300 V.P. Programs & Services Director, Behavioral Health Services 0.05 \$6,000 \$6,000.00 Director, SAS \$10,500 \$10,500.00 0.15 Associate Director, 6th Street HRC 1.00 \$64,733 \$64,733.00 \$437,976.00 \$28,257.00 Health Educator \$437,976 7.75 Mobile Health Educator 0.50 \$28,257 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 cartify 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:

DETAIL PERSONNEL EXPENDITURES

								07/01/24	- 06/30/2 PAGE
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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-3h

	APPENDIX F-31 07/01/24 - 06/30/25
	PAGE E
	Invoice Number
	A-3JUL24
Contract Purchase Order No:	_

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

Grant Code/Detail:

Invoice Period:

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

Program Name: HIV Syringe Access and Disposal Services - Harm Reduction Center Project Code/Detail:

ACE Control #:

General Fund

07/1/24 - 07/31/24

(check if Yes) FINAL Invoice

PERSONNEL	FTE	BUDGETED SALARY	EXPENSES THIS PERIOD	EXPENSES TO DATE	% OF BUDGET	REMAINING 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	1			\$64,733.00
Health Educator	7.75	\$437,976			· · · · · · ·	\$437,976.00
Mobile Health Educator	0.50	\$28,257	1.0			\$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

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 thal contract. Full justification and backup records for those claims are maintained in our office at the address indicated.

Certified By:

Title:

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						act ID #	1 1	li	nvoice Nun	
Contractor: San Francisco AIDS Foun Address: 1035 Market Street, Suite					10000	002634	1 1		A-3JUL	25
San Francisco, CA 94103				Co	ntract Pu	rchase (Order No:			_
Telephone: 415-487-3000			-	1	1	Funding	Source:	G	General F	und
Fax: 415-487-3009		CH	EP			mat Co.	de/Detail:	-		2
Program Name: HIV Syringe Access and D	isposal S	ervices -	Harm R	eductio			Jerberan.		-	
	1				Pro	ject Coo	ie/Detail:			
ACE Control #:	1					Invoic	e Period:	07/	1/25 - 07/	31/25
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Total Salaries (See Page B)	BUD \$680,	GET 792	THIS P	ERIOD	TOD	ATE	BUDG	BET	BALA \$680,7	
ringe Benefits	\$680, \$170,	792 198	THIS P	ERIOD	тор	ATE	BUDG)ET	\$680,7 \$170,1	92.00 98.00
Fringe Benefits Total Personnel Expenses	\$680,	792 198	THIS P	ERIOD	TOD	ATE	BUDG)ET	\$680,7	92.00 98.00
Fringe Benefits Total Personnel Expenses Operating Expenses:	\$680, \$170, \$850,	792 198 990	THIS P	ERIOD		DATE	BUDG	SET	\$680,7 \$170,1 \$850,9	92.00 98.00 90.00
Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities,	\$680, \$170,	792 198 990	THIS P	ERIOD			BUDG	SET	\$680,7 \$170,1	92.00 98.00 90.00
Fringe Benefits Total Personnel Expenses Operating Expenses:	\$680, \$170, \$850,	792 198 990	THIS P	ERIOD			BUDG	SET	\$680,7 \$170,1 \$850,9	92.00 98.00 90.00
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,	\$680, \$170, \$850,	792 198 990 214	THISP	ERIOD			BUDG	SET	\$680,7 \$170,1 \$850,9	92.00 98.00 90.00 14.00
Fringe Benefits Total Personnel Expenses Operating Expenses: Occupancy-(e.g., Rental of Property, Utilities, Building Maintenance Supplies and Repairs)	\$680, \$170, \$850, \$25,2	792 198 990 214	THIS P				BUDG		\$680,7 \$170,1 \$850,9 \$25,2	92.00 98.00 90.00 14.00
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)	\$680, \$170, \$850, \$25,2 \$24,5	792 198 990 214 564	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$25,2 \$24,56	92.00 98.00 90.00 14.00 54.00
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,	\$680, \$170, \$850, \$25,2	792 198 990 214 564	THIS P	ERIOD			BUDG		\$680,7 \$170,1 \$850,9 \$25,2	92.00 98.00 90.00 14.00 54.00
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)	\$680, \$170, \$850, \$25,2 \$24,5	792 198 990 214 564	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$25,2 \$24,56	92.00 98.00 90.00 14.00 54.00
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	\$680, \$170, \$850, \$25,2 \$24,5	792 198 990 214 564	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$25,2 \$24,56	92.00 98.00 90.00 14.00 54.00
Fringe Benefits Total Personnel Expenses 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)	\$680, \$170, \$850, \$25,2 \$24,5	792 198 990 214 564	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$25,2 \$24,56	92.00 98.00 90.00 14.00 54.00
Fringe Benefits Total Personnel Expenses 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)	\$680, \$170, \$850, \$25,2 \$24,5	792 198 990 214 564	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$25,2 \$24,56	92.00 98.00 90.00 14.00 54.00
Fringe Benefits Total Personnel Expenses 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	\$680, \$170, \$850, \$25,2 \$24,5	792 198 990 214 564	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$25,2 \$24,56	92.00 98.00 90.00 14.00 54.00
Tringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses	\$680, \$170, \$850, \$25,2 \$24,5	792 198 990 214 564 23	THIS P				BUDG		\$680,7 \$170,1 \$850,9 \$25,2 \$25,2 \$24,56	92.00 98.00 90.00 14.00 54.00 3.00
ringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures	\$680, \$170, \$850, \$25,2 \$24,5 \$8,3 \$8,3 \$8,3	792 198 990 214 564 23 01	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$24,56 \$88,32 \$88,32 \$88,32	92.00 98.00 99.00 14.00 34.00 3.00
Tringe Benefits Total Personnel Expenses 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, Stipends, Facilitators) Total Operating Expenses Capital Expenditures OTAL DIRECT EXPENSES	\$680, \$170, \$850, \$25,2 \$24,5 \$8,3 \$8,3 \$8,3 \$58,1 \$909,0	792 198 990 214 564 23 01 01 091	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$24,56 \$88,32 \$88,32 \$558,10 \$558,10	92.00 98.00 99.00 14.00 34.00 3.00 11.00 91.00
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 Other - (Meals, Audit, Transportation Reimb,	\$680, \$170, \$850, \$25,2 \$24,5 \$8,3 \$8,3 \$8,3	792 198 990 214 564 23 01 01 09	THIS P						\$680,7 \$170,1 \$850,9 \$25,2 \$24,56 \$88,32 \$88,32 \$88,32	92.00 98.00 99.00 14.00 34.00 3.00 3.00 11.00 91.00 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:

Title:

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

			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:	
Program Name:	HIV Syringe Access and Disposal Ser	rvices - Harm Reduction Center	
		Project Code/Detail:	
ACE Control #:			
		Invoice Period:	07/1/25 - 07/31/25
		FINAL Invoice	(check if Yes)

BUDGETED EXPENSES EXPENSES % OF REMAINING BUDGET PERSONNEL THIS PERIOD TO DATE FTE SALARY BALANCE V.P. Programs & Services 0.10 \$20,300 \$20,300.00 Director, Behavioral Health Services Director, SAS 0.05 \$6,000 \$6,000.00 0.15 \$10,500 \$10,500.00 \$64,733.00 \$437,976.00 Associate Director, 6th Street HRC 1.00 \$64,733 7.75 \$437,976 Health Educator 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.

Certified By:

Title:

DETAIL PERSONNEL EXPENDITURES

Date:

APPENDIX F-3i

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Suite Capito Isurei San F	280 ola CA 95010 rancisco AID Market Street rancisco CA RAGES	S Fo	a. 400 03	SAN	RAN-							
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1	CLAIMS-MA	DE	X OCCUR						1.1.1.1	PREMISES (Ea occurrence)	\$ 1,000,0	00
-		_								MED EXP (Any one person)	\$ 20,000	
L		-								PERSONAL & ADV INJURY	\$ 3,000,0	00
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ANY	PROPRIETOR/PAR	TNER/	EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$ 1,000,0	00
(Mar	idatory in NH)									E.L. DISEASE - EA EMPLOYEE	\$1,000,0	00
DES	s, describe under CRIPTION OF OPE	RATIC	INS below		-					E.L. DISEASE - POLICY LIMIT	\$ 1,000.0	00
Crim	ical Malpractice le ar 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/56M Employee Dishonesty Overall Policy Agg.	1,000,00	00
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	Health Attn: Cor 101 Grov	trac e St			20, D	epartment of Public	AUTHORIZ	EXPIRATION	DATE THE H THE POLICY	SCRIBED POLICIES BE CA REOF, NOTICE WILL E Y PROVISIONS.		

ACORD 25 (2016/03) The ACORD name and logo are registered marks of ACORD 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	
POLICY NUMBER		San Francisco AIDS Foundation 1035 Market Street, Ste. 400 San Francisco CA 94103	
CARRIER	NAIC CODE		
		EFFECTIVE DATE:	
ADDITIONAL REMARKS			
THIS ADDITIONAL REMARKS FORM IS A SCHE	EDULE TO ACORD FORM,		
FORM NUMBER: 25 FORM TITLE: CE	ERTIFICATE OF LIABILITY	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.

POLICY NUMBER: 2019-00950

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.

FILE NO. 190242

RESOLUTION NO. 167-19

[Agreement Amendment - San Francisco AIDS Foundation - HIV Prevention - City-Wide Syringe Access and Disposal Services - Not to Exceed \$35,608,159]

Resolution approving Amendment No. 2 to the agreement between the San Francisco AIDS Foundation and the Department of Public Health to provide HIV prevention services through City-wide syringe access and disposal services; to increase the contract amount by \$25,768,672 for a total amount not to exceed \$35,608,159; and to extend the contract by seven years, to commence July 1, 2019, for a total contract term of July 1, 2016, through June 30, 2026.

WHEREAS, The Department of Public Health selected the San Francisco AIDS Foundation to provide HIV Prevention City-wide Syringe Access and Disposal services through a Request For Proposals; and

WHEREAS, The Department of Public Health subsequently established an agreement for an initial term of two years, July 1, 2016, through June 30, 2018, with a not to exceed amount of \$4,976,830 and amended the agreement to extend the term one additional year, July 1, 2018, through June 30, 2019, for a total contract amount not to exceed \$9,839,487; and

WHEREAS, The Department of Public Health wishes to extend the term of the contract an additional seven years, adding the period of July 1, 2019, through June 30, 2026, with a corresponding increase of \$25,768,672 for a total contract amount not to exceed \$35,608,159; and

WHEREAS, This amendment will enable the continuation of HIV Prevention services through City-wide Syringe Access and Disposal services targeting people in behavioral risk populations such as injection drug users, people who are homeless, active drug users, formerly incarcerated individuals and/or who are struggling with mental health challenges; and

Department of Public Health BOARD OF SUPERVISORS WHEREAS, These services will include program coordination with community-based organizations, the Department of Public Health's Rapid Response Clean Team, and service providers which are subcontractors in this contract, including the Glide Foundation, St. James Infirmary, the Homeless Youth Alliance, and the San Francisco Drug Users Union; and

WHEREAS, The goal of these services is to reduce syringe-sharing and the risk of transmission of HIV and other communicable diseases through the provision of sterile injection equipment, health education, HIV/HCV testing, and collection of disposed needles, both on-site and in City-wide syringe sweep events that focus on areas of greatest need; and

RESOLVED, That the Board of Supervisors hereby authorizes the Director of Public Health and the Purchaser, on behalf of the City and County of San Francisco, to amend the contract with San Francisco AIDS Foundation to increase the contract amount by \$25,768,672 for a total amount not to exceed \$35,608,159; and to extend the contract by seven years, from July 1, 2016, through June 30, 2019, to July 1, 2016, through June 30, 2026; and, be it

FURTHER RESOLVED, That the Board of Supervisors authorizes the Department of Public Health to enter into any amendments or modifications to the contract, prior to its final execution by all parties, that the Department determines, in consultation with the City Attorney, are in the best interest of the City, do not otherwise materially increase the obligations or liabilities of the City, are necessary or advisable to effectuate the purposes of the contract, and are in compliance with all applicable laws; and, be it

FURTHER RESOLVED, That within thirty (30) days of the contract amendment being fully executed by all parties, the Director of Health and/or the Director of Office of Contract Administration/Purchased shall provide the final contract to the Clerk of the Board of Supervisors for inclusion in the official file (File No. 190242).

Department of Public Health BOARD OF SUPERVISORS

RECOMMENDED: Grant Colfax, M.D. Director of Health

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City and County of San Francisco Tails Resolution

City Hall 1 Dr. Carlton B. Goodlett Place San Francisco, CA 94102-4689

File Number: 190242

Date Passed: April 09, 2019

Resolution approving Amendment No. 2 to the agreement between the San Francisco AIDS Foundation and the Department of Public Health to provide HIV prevention services through City-wide syringe access and disposal services; to increase the contract amount by \$25,768,672 for a total amount not to exceed \$35,608,159; and to extend the contract by seven years, to commence July 1, 2019, for a total contract term of July 1, 2016, through June 30, 2026.

April 03, 2019 Budget and Finance Sub-Committee - RECOMMENDED

April 09, 2019 Board of Supervisors - ADOPTED

Ayes: 11 - Brown, Fewer, Haney, Mandelman, Mar, Peskin, Ronen, Safai, Stefani, Walton and Yee

File No. 190242

I hereby certify that the foregoing Resolution was ADOPTED on 4/9/2019 by the Board of Supervisors of the City and County of San Francisco.

Angela Calvillo Clerk of the Board

London N. Breed Mayor

Date Approved



San Francisco Ethics Commission

25 Van Ness Avenue, Suite 220, San Francisco, CA 94102 Phone: 415.252.3100 . Fax: 415.252.3112 ethics.commission@sfgov.org . www.sfethics.org Received On:

File #: 200370 Bid/RFP #:

Notification of Contract Approval

SFEC Form 126(f)4 (S.F. Campaign and Governmental Conduct Code § 1.126(f)4) A Public Document

Each City elective officer who approves a contract that has a total anticipated or actual value of \$100,000 or more must file this form with the Ethics Commission within five business days of approval by: (a) the City elective officer, (b) any board on which the City elective officer serves, or (c) the board of any state agency on which an appointee of the City elective officer serves. For more information, see: <u>https://sfethics.org/compliance/cityofficers/contract-approval-city-officers</u>

1. FILING INFORMATION	2
TYPE OF FILING	DATE OF ORIGINAL FILING (for amendment only)
Original	S.
AMENDMENT DESCRIPTION – Explain reason for amendment	NO.
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2. CITY ELECTIVE OFFICE OR BOARD	
OFFICE OR BOARD	NAME OF CITY ELECTIVE OFFICER
Board of Supervisors	Members

3. FILER'S CONTACT		
NAME OF FILER'S CONTACT	TELEPHONE NUMBER	
Angela Calvillo	415-554-5184	
FULL DEPARTMENT NAME	EMAIL	
Office of the Clerk of the Board	Board.of.Supervisors@sfgov.org	

4. CONTRACTING DEPARTMENT CONTACT		
NAME OF DEPARTMENTAL CONTACT		DEPARTMENT CONTACT TELEPHONE NUMBER
Jacquie Hale		(415) 255-3508
FULL DEPARTMENT NAME		DEPARTMENT CONTACT EMAIL
DPH	Department of Public Health	Jacquie.Hale@SFDPH.org

7. COMMENTS

5. CONTRACTOR	
NAME OF CONTRACTOR	TELEPHONE NUMBER
San Francisco AIDS Foundation	(415) 487-3000
STREET ADDRESS (including City, State and Zip Code)	EMAIL
1035 Market STreet #40, San Francisco, CA 94103	Info@SFAF.org

6. CONTRACT		
DATE CONTRACT WAS APPROVED BY THE CITY ELECTIVE OFFICER(S)	ORIGINAL BID/RFP NUMBER	FILE NUMBER (If applicable)
		200370
DESCRIPTION OF AMOUNT OF CONTRACT		
\$42,115,471		
NATURE OF THE CONTRACT (Please describe)		
HIV Prevention City-wide Syringe Access and Di	sposal services	
S.		
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No. A Contraction of the second se		
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_	ONTRACT APPROVAL
This	contract was approved by:
	THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM
	A BOARD ON WHICH THE CITY ELECTIVE OFFICER(S) SERVES
	Board of Supervisors
	THE BOARD OF A STATE AGENCY ON WHICH AN APPOINTEE OF THE CITY ELECTIVE OFFICER(S) IDENTIFIED ON THIS FORM SITS

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
1	Borkon	Peter	Board of Directors
2	Brooke	Keri	Board of Directors
3	Brooks	Douglass	Board of Directors
4	Cowen	Christopher	Board of Directors
5	Dillon	Mike	Board of Directors
6	Duff	Frank	Board of Directors
7	Edwards	Kenneth	Board of Directors
8	Garcia	Ferd	Board of Directors
9	Harris Lazarre	Zoe	Board of Directors
10	Hodges	Philip	Board of Directors
11	Huang	Steven	Board of Directors
12	Kinsley	Michael	Board of Directors
13	Livingston	Sean	Board of Directors
14	Mapps	Roscoe	Board of Directors
15	Marquis	Mattew	Board of Directors
16	Nungaray	Manny	Board of Directors
17	Pincow	James	Board of Directors
18	Pizzuti	Dana	Board of Directors
19	Silva	Fredo	Board of Directors

9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
20	Vastardis	william	Board of Directors
21	Watson	Maureen	Board of Directors
22	Wong	Dora	Board of Directors
23	Hollendoner	Joe	CEO
24	Brooks	Lara	Other Principal Officer
25	Rogers	Kevin 😯	CFO
26	Roybal	Russell	Other Principal Officer
27	Sroda	Greg	C00
28			A CONTRACTOR
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9. AFFILIATES AND SUBCONTRACTORS

List the names of (A) members of the contractor's board of directors; (B) the contractor's principal officers, including chief executive officer, chief financial officer, chief operating officer, or other persons with similar titles; (C) any individual or entity who has an ownership interest of 10 percent or more in the contractor; and (D) any subcontractor listed in the bid or contract.

#	LAST NAME/ENTITY/SUBCONTRACTOR	FIRST NAME	ТҮРЕ
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	Check this box if you need to include add Select "Supplemental" for filing type.	litional names. Please submit a separate	form with complete information.

10. VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information I have provided here is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF CITY ELECTIVE OFFICER OR BOARD SECRETARY OR CLERK	DATE SIGNED
BOS Clerk of the Board	

From:	Hale, Jacquie (DPH)
То:	BOS Legislation, (BOS)
Cc:	<u>Colfax, Grant (DPH); Wagner, Greg (DPH); Ruggels, Michelle (DPH)</u>
Subject:	Resolution Requesting for Approval of Contract with the SF AIDS Foundation for Syringe Access and Disposal Program (1 of 2)
Date:	Monday, April 13, 2020 10:49:43 AM
Attachments:	DPH Res Agmt Amd 3 SF AIDS Fdn.docx.cleaned.pdf DPH Res Agmt Amd 3 SF AIDS Fdn.docx 1000002634 SFAF AMD#3 - Uncertified.pdf SFAF SFEC_Form_126.pdf DPH Res Agmt Amd 3 SF AIDS Fdn.pdf

Dear Ms. Calvillo:

Please find attached a proposed resolution for Board of Supervisors approval of an amendment to the agreement between the Department of Public Health and the San Francisco AIDS Foundation. Under this contract, the San Francisco AIDS Foundation will provide HIV Prevention services through the City-wide Syringe Access and Disposal program.

This program targets people in behavioral risk populations such as injection drug users, people who are homeless, active drug users, formerly incarcerated individuals and/or people struggling with mental health challenges. Its goal is to reduce syringe-sharing and the risk of transmission of HIV and other communicable diseases through the provision of sterile injection equipment, health education, HIV/HCV testing, and collection of disposed needles, both on-site and in City-wide syringe sweep events that focus on areas of greatest need.

We are submitting this contract for approval under San Francisco Charter Section 9.118.

The following is a list of accompanying documents:

- Proposed Resolution;
- Proposed Third Amendment;
- Resolution 167-19, approving the Second Amendment (*due to document size, this will be sent in a separate email*);
- Original Agreement, and First and Second Amendments (*due to document size, these will be sent in a separate email*);
- Form SFEC-126 (printout from database).

For questions on this matter, please contact me at (415) 255-3508, Jacquie.Hale@SFDPH.org.

Sincerely,

Jacquie Hale Manager, Pre-award Unit of the Office of Contract Management & Compliance, Business Office Department of Public Health, City and County of San Francisco

1380 Howard Street, Room 421b, San Francisco, CA 94103

(415) 255-3508

This e-mail is not a secured data transmission for Protected Health Information (PHI) as defined by the Healthcare Portability and Accountability Act (HIPAA), and it is the responsibility of all parties involved to take all reasonable actions to protect this message from non-authorized disclosure. This e-mail is intended for the recipient only. If you receive this e-mail in error, you should notify the sender and destroy the e-mail immediately. Disclosure of the information contained herein could subject to discloser to civil or criminal penalties under state and federal privacy laws.