

STATE OF CALIFORNIA  
**STANDARD AGREEMENT AMENDMENT**  
 STD 213A (Rev 8/03)

Agreement No. 16-502-2

Check here if additional pages are added: 1 Page(s)

Agreement Number 15-10977	Amendment Number A02
Registration Number:	

- This Agreement is entered into between the State Agency and Contractor named below:  
 State Agency's Name: California Department of Public Health Also known as CDPH or the State  
 Contractor's Name: \_\_\_\_\_ (Also referred to as Contractor)  
 County of Fresno
- The term of this Agreement is: December 1, 2015 through September 30, 2019
- The maximum amount of this Agreement after this amendment is: \$ 306,640 Three Hundred Six Thousand Six Hundred Forty Dollars
- The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

**Purpose of amendment:** This amendment is due to LAUNCH funding reductions that became effective for Fiscal Year 2017/2018 and Fiscal Year 2018/2019. Fiscal Year 2017/2018 is being reduced by \$30,664 and FY 2018/2019 is being reduced by \$57,032 respectively. This amendment also extends the contract term by adding Fiscal Year 2019/2020 to the contract in the amount of \$26,368. The total amount of this Agreement shall not exceed \$306,640. Additionally, Exhibit A, Scope of Work (SOW) is hereby replaced in its entirety due to dates changing as a result of the extension. This amendment also corrects the term end date and adds Paragraph B to the Amounts Payable clause of Exhibit B, Budget Detail and Payment Provisions, as well as Exhibit B, Attachment V, (Budget Year 5) which is being added to cover the costs of the extended term. This amendment revises the Contractor's name from City of Fresno, to County of Fresno. Any mention of Fresno County Public Health is hereby changed to County of Fresno.

- Certain changes made in this amendment are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).

(Continued on next page)

ATTEST:

BERNICE E. SEIDEL  
 Clerk of the Board of Supervisors  
 County of Fresno, State of California

By Rose Cruz

All other terms and conditions shall remain the same.

**IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.**

CONTRACTOR		CALIFORNIA Department of General Services Use Only	
Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.) <u>County of Fresno</u>		<div style="border: 2px solid blue; padding: 10px; text-align: center;"> <p><b>APPROVED</b></p> <p><b>JUN 21 2019</b></p> <p><b>OFFICE OF LEGAL SERVICES DEPT. OF GENERAL SERVICES</b></p> </div>	
By (Authorized Signature) 	Date Signed (Do not type) <u>6/11/19</u>		
Printed Name and Title of Person Signing <u>Nathan Magsig, Chairman of the Board of Supervisors of the County of Fresno</u>			
Address <u>1221 Fulton St, DPH Admin, 6th Floor, Fresno, CA 93721</u>			
STATE OF CALIFORNIA		<input type="checkbox"/> Exempt per:  	
Agency Name <u>California Department of Public Health</u>			
By (Authorized Signature) 	Date Signed (Do not type) <u>6/11/19</u>		
Printed Name and Title of Person Signing <u>Jeffrey Mapes, Chief, Contracts Management Unit</u>			
Address <u>1616 Capitol Avenue, Suite 74.262, MS 1802, P.O. Box 997377, Sacramento, CA 95899-7377</u>			

II. Exhibit B – Budget Detail and Payment Provisions

4. Amounts Payable

A. The amounts payable under this contract shall not exceed:

- 1) \$0 for the budget period of 12/01/15 through 06/30/16
- 2) \$122,656 for the budget period of 07/01/16 through 06/30/17
- 3) ~~\$122,656~~ **91,992** for the budget period of 07/01/17 through 06/30/18
- 4) ~~\$122,656~~ **65,624** for the budget period of 07/01/18 through 06/30/19
- 5) **\$26,368 for the budget period of 07/01/19 through 09/30/19**

B. **Payment allocations shall be made for allowable expenses up to the amount annually encumbered commensurate with the state fiscal year in which services are fulfilled and/or goods are received.**

**Exhibit A**  
Scope of Work

**1. Service Overview**

County of Fresno, Fresno County Department of Public Health (FCDPH) agrees to provide the following services to the California Department of Public Health (CDPH).

California Project LAUNCH (Linking and Addressing the Unmet Needs for Children's Health) is a program funded by the Substance Abuse and Mental Health Services Agency that replicates specific successful early childhood strategies resulting in improved mental health, reduced substance use, increased parenting skills, and improved maternal and child health. Under this contract, County of Fresno, FCDPH will replicate the strategies of mental health consultation into home visiting, Parent Cafes, and systems integration by participating in technical assistance and training provided by the lead local health jurisdiction, Alameda County Public Health and its contractors.

Parent Cafes are a series of structured small group conversations that bring parents together to discuss issues important to them. The goal is to engage parents in building protective factors needed to prevent maltreatment and promote healthy outcomes for their children.

This agreement provides further support for the population currently served by the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program. The program will help improve outcomes for families who reside in at-risk communities through evidence-based home visiting programs.

The Local Health Jurisdiction (LHJ), County of Fresno County, agrees to provide the services presented in this Scope of Work (SOW) from the CDPH's Maternal, Child and Adolescent Health (MCAH) Division.

The purpose of the SOW is to provide parameters for implementing the Project LAUNCH replication grant to achieve positive outcomes for children and families in Fresno County.

**2. Service Location**

Project LAUNCH will take place in Fresno County of Fresno.

**3. Service Hours**

The services will be provided during County working hours and days, except official holidays.

**Exhibit A**  
Scope of Work

**4. Project Representatives**

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

<b>California Department of Public Health</b> <b>Michael Neff</b> Fiona Humphrey, Contract Analyst <b>Manager</b> Telephone: (916) 650-0326 <b>341-6726</b> Fax: (916) 650-0309 Email: <a href="mailto:Fiona.Humphrey@cdph.ca.gov">Fiona.Humphrey@cdph.ca.gov</a> Email: <a href="mailto:michael.neff@cdph.ca.gov">michael.neff@cdph.ca.gov</a>	<b>Fresno County of Fresno Department of Public Health</b> Rose Mary Garrone, MCAH Director  Telephone: (559) 600-3330 Fax: (559) 455-4705 Email: <a href="mailto:rgarrone@co.fresno.ca.us">rgarrone@co.fresno.ca.us</a>
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B. Direct all inquiries to:

<b>California Department of Public Health</b> Financial Management & Contract Operations Attention: <b>Michael Neff</b> Fiona Humphrey, Contract Analyst <b>Manager</b> 1615 Capitol Avenue, Suite 73.560, MS 8305 P.O. Box 997420 Sacramento, CA 95899-7420 Telephone: (916) 650-0326 <b>341-6726</b> Fax: (916) 650-0309 Email: <a href="mailto:Fiona.Humphrey@cdph.ca.gov">Fiona.Humphrey@cdph.ca.gov</a> Email: <a href="mailto:michael.neff@cdph.ca.gov">michael.neff@cdph.ca.gov</a>	<b>Fresno County of Fresno Department of Public Health</b>  Attention: Rose Mary Garrone <b>Rahn</b> , MCAH Director 1221 Fulton Mall <b>Street</b> Fresno, CA 93721 Telephone: (559) 600-3330 Fax: (559) 455-4705 Email: <a href="mailto:rgarrone@co.fresno.ca.us">rgarrone@co.fresno.ca.us</a> <a href="mailto:rrahn@fresnocountyca.gov">rrahn@fresnocountyca.gov</a>
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C. **All payments from CDPH to the Contractor shall be sent to the following address:** ~~Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.~~

<b><u>Remittance Address</u></b>
<b>Contractor: County of Fresno</b> <b>Attention: Rose Mary Rahn</b> <b>Address: P.O. Box 11867</b> <b>City, Zip: Fresno, CA 93775-1867</b> <b>Phone: (559) 600-3330</b> <b>Fax: (559) 455-4705</b> <b>E-mail: <a href="mailto:rrahn@fresnocountyca.gov">rrahn@fresnocountyca.gov</a></b>

D. **Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this agreement.**

**Exhibit A**  
Scope of Work

**5. Subcontractor Requirements**

Subcontracts may be used in the performance of the scope of work.

**6. Reporting Requirements**

All activities in this SOW shall take place from receipt of funding beginning December 1, 2015 through June 30, 2016 for fiscal year 2015-16 and from July 1, 2016 through ~~June~~ **September** 30, 2019 for fiscal years ~~2016-2019~~ **2016-17 through 2019-20**, contingent on availability of funds and spending authority.

The table below summarizes a list of reports due to CHVP. Specifics related to the contents of reports are described further in this SOW and located under *Evaluation/Performance Measure* of each objective.

<b>Reporting</b>	<b>From</b>	<b>To</b>	<b>Due Date</b>
1 <sup>st</sup> Status Report	December 1	June 30	July 31
2 <sup>nd</sup> Status Report	July 1	June 30	July 31
3 <sup>rd</sup> Status Report	July 1	June 30	July 31
Final Status Report	July 1	June 30	July 31

- 7.** See Exhibit A, Attachment I for a detailed description of the services to be performed.

**Exhibit A**  
Scope of Work

Attachment I

**Goal 1:** Coordination with California Home Visiting Program (CHVP) to support the development and implementation of LAUNCH activities.

<b>Major Objective</b>	<b>Major Functions, Tasks and Activities</b>	<b>Time Line</b>	<b>Staff Responsibilities</b>	<b>Performance Measure and/or Deliverables</b>
1. Create guidelines for establishing cross-agency participation in technical assistance and activity implementation.	1.1 Participate in LAUNCH activities with specific emphasis on enhancing cross-agency coordination and collaboration; addressing mental health needs in home visiting programs; and increasing parent engagement through Parent Cafes.	December 2015 to <del>June</del> <b>September</b> 2019	MCAH Director  MCAH Coordinator  Mental Health Consultant	1.1.1 Meet with project director at least three times a year  1.1.2 Monitor provision of Technical Assistant (TA) as needed through emails, phone calls and meeting requests.
	1.2 Participate in the development of Project LAUNCH technical assistance and implementation activities.	December 2015 to <del>June</del> <b>September</b> 2019	MCAH Director	1.2.1 Submit annual progress reports on staffing and activity details.

**Exhibit A**  
Scope of Work

Attachment I

**Goal 2:** Develop mental health consultation in home visiting.

<b>Major Objective</b>	<b>Major Functions, Tasks and Activities</b>	<b>Time Line</b>	<b>Staff Responsibilities</b>	<b>Performance Measure and/or Deliverables</b>
2. Establish support activities to assist in implementation of mental health consultation into home visiting programs.	2.1 Participate in LAUNCH training opportunities and technical assistance activities.	July 2016 May 2017	MCAH Director MCAH Coordinator	2.1.1 Complete Assessment compiled and reviewed to determine needs around mental health consultation.  2.1.2 Create and submit plan to replicate mental health consultation into home visiting programs.
	2.2. Implement and/or pilot mental health consultation into home visiting programs.	June 2017	MCAH Coordinator Mental Health Consultant	2.2.1 Mental health consultation appointments scheduled with home visitors.  2.2.2. Document the number of home visitors consulting with the Mental Health Specialist (MHS), the mental health needs being addressed and the number of clients referred to the MHS.

**Exhibit A**  
Scope of Work

Attachment I

**Goal 3:** Develop and strengthen the implementation of Parent Cafés to build family engagement and leadership.

<b>Major Objective</b>	<b>Major Functions, Tasks and Activities</b>	<b>Time Line</b>	<b>Staff Responsibilities</b>	<b>Performance Measure and/or Deliverables</b>
3. Oversee and assist in the development and implementation of the Parent Café model.	3.1 Participate in LAUNCH training opportunities and technical assistance activities.	July 2016 May 2017	MCAH Director  MCAH Coordinator	3.1.1 Complete assessment to determine needs around parent cafes.  3.1.2 Develop and submit a plan on initiation and provision for Parent Cafes.
	3.2 Implement and/or strengthen local Parent Cafés in targeted areas.	June 2017	MCAH Coordinator  Mental Health Consultant	3.2.1 Submit attendance report for Parent Cafes.  3.2.2 Provide survey to attendees of Parent Cafes with questions on if an increase in parenting knowledge is achieved through participation.



**Exhibit A**  
Scope of Work

Attachment I

**Goal 4:** Participate in the Project LAUNCH **Substance Abuse and Mental Health Services Administration (SAMHSA)** evaluation, working with **SAMHSA**-designated evaluator and ensure all data, surveys and interviews are satisfied as requested.

Major Objective	Major Functions, Tasks and Activities	Time Line	Staff Responsibilities	Performance Measure and/or Deliverables
4. Complete and report all data, surveys and interviews.	4.1. Participate in external evaluation activities associated with the contract.	December 2015 to <del>June</del> <b>September</b> 2019	MCAH Director  MCAH Coordinator  Mental Health Consultant	4.1.1 Provide quarterly reports for progress on mental health consultation and parent cafe strategies.  4.1.2 Submit all SAMHSA required surveys and interviews regarding Project LAUNCH, including client level data, Parent Cafe attendance information, home visitors trained and home visiting clients served.

**Exhibit B, Attachment III  
Budget  
Year 3  
(07/01/17 through 06/30/18)**

<b>Personnel</b>		Amendment		Amendment	Original	Amendment
Position Title/Classification	Annual Salary	Annual Salary	FTE %	FTE %	Annual Cost	Annual Cost
MCAH Director	<del>\$ 112,974</del>	<b>\$ 117,580</b>	5.00%	5%	<del>\$ 5,649</del>	<b>\$ 5,879</b>
Supervising PHN	<del>\$ 103,323</del>	<b>\$ 106,925</b>	15.00%	15%	<del>\$ 15,498</del>	<b>\$ 16,039</b>
<u>Administrative Assistant</u>		<b>\$ 38,260</b>		5%	<del>\$ 0</del>	<b>\$ 1,913</b>
<u>Staff Analyst</u>		<b>\$ 61,595</b>		5%	<del>\$ 0</del>	<b>\$ 3,080</b>
					<b>Subtotal Total Personnel</b>	<b>\$ 21,147 \$ 26,911</b>
<b>Fringe Benefits</b> (74.7182.07% Personnel)					<del>\$ 15,799</del>	<b>\$ 22,086</b>
(Retirement 60.667.96%, OASDI 7.1%, Health Insurance 6.71%, Mgmt Life .2%, Ben Admin .1%)						
					<b>Total Personnel and Fringe Benefits</b>	<b>\$ 36,946 \$ 48,997</b>
<b>Operating Expenses</b>						
Training (Training parent leaders for Parent Cafe's at \$800/day for seven days.)					<del>\$ 5,600</del>	<b>\$ 1,911</b>
Printing (Charges related to office printing, forms, & informational handouts related to LAUNCH.)					<del>\$ 1,500</del>	<b>\$ 1,500</b>
Office Supplies (General office expenses for staff to carry out LAUNCH)					<del>\$ 1,300</del>	<b>\$ 1,300</b>
Facilities Rent (Space rental fees for related meetings/trainings.)					<del>\$ 1,177</del>	<b>\$ 1,000</b>
					<b>Total Operating Expenses</b>	<b>\$ 9,577 \$ 5,711</b>
<b>Equipment (major equipment &gt;\$5,000)</b>					\$ 0	\$ 0
					<b>Total Equipment</b>	<b>\$ 0 \$ 0</b>
<b>Travel</b>						
(Travel to Alameda for training and site visits, Occasional overnight stays. Reimbursement for staff for private auto mileage at rate of 0.54/mile when they travel to related trainings/meetings. County will bill only up to the State's per diem rate, Includes County vehicle & vehicle rental costs when private vehicles are not used. Also Includes expenses for meals and lodging for out of County travel.)					<del>\$ 5,200</del>	<b>\$ 2,700</b>
					<b>Total Travel Costs</b>	<b>\$ 5,200 \$ 2,700</b>
<b>Subcontracts*</b>						
Mental Health Consultant (SOW Goals 1,2,3 &4)					<del>\$ 30,000</del>	\$ 0
Parent Cafe Coordinator (SOW Goal 3)					<del>\$ 26,000</del>	<b>\$ 22,335</b>
					<b>Total Sub-contract Subcontracts Costs</b>	<b>\$ 56,000 \$ 22,335</b>
<b>Other Costs</b>					\$ 0	\$ 0
					<b>Total Other Costs</b>	<b>\$ 0 \$ 0</b>
<b>Indirect Costs*</b> (43.979% <u>25.000%</u> of Direct Costs <u>Total Personnel and Fringe Benefits</u> )					<del>\$ 14,933</del>	<b>\$ 12,249</b>
					<b>Total Budget Costs</b>	<b>\$ 122,656 \$ 91,992</b>

\*Indirect Costs are limited to the first \$25,000 of each subcontract.

**Exhibit B, Attachment IV  
Budget  
Year 4  
(07/01/18 through 06/30/19)**

<b>Personnel</b>		Amendment		Amendment	Original	Amendment
Position Title/Classification	Annual Salary	Annual Salary	FTE %	FTE %	Annual Cost	Annual Cost
MCAH Director	<del>\$ 112,974</del>	<u>\$ 0</u>	5.00%	0%	<del>\$ 5,649</del>	<u>\$ 0</u>
Supervising PHN	<del>\$ 103,323</del>	<u>\$ 111,165</u>	15.00%	<u>15.0002%</u>	<del>\$ 15,498</del>	<u>\$ 16,675</u>
Health Education Specialist		<u>\$ 46,544</u>		<u>14.999%</u>		<u>\$ 6,981</u>
					Subtotal <b>Total Personnel</b>	<del>\$ 21,147</del> <u>\$ 23,656</u>
<b>Fringe Benefits</b> (74.7476.36% Personnel)					<del>\$ 15,799</del>	<u>\$ 18,064</u>
(Retirement 60.662.25%, OASDI 7.1%, Health Insurance 6.71%, Mgmt Life .2%, Ben Admin .1%)						
					<b>Total Personnel and Fringe Benefits</b>	<del>\$ 36,946</del> <u>\$ 41,720</u>
<b>Operating Expenses</b>						
Training (Training parent leaders for Parent Cafes at \$800/day for seven days.)					<del>\$ 5,600</del>	<u>\$ 0</u>
Printing (Charges related to office printing, forms, & informational handouts related to LAUNCH.)					<del>\$ 1,500</del>	<u>\$ 1,431</u>
Office Supplies (General office expenses for staff to carry out LAUNCH)					<del>\$ 1,300</del>	<u>\$ 2,000</u>
Facilities Rent (Space rental fees for related meetings/trainings.)					<del>\$ 1,177</del>	<u>\$ 2,000</u>
<u>Supplies for Parent Café</u>						<u>\$ 7,000</u>
					<b>Total Operating Expenses</b>	<del>\$ 9,577</del> <u>\$ 12,431</u>
<b>Equipment (major equipment &gt;\$5,000)</b>						
					<del>\$ 0</del>	<u>\$ 0</u>
					<b>Total Equipment</b>	<del>\$ 0</del> <u>\$ 0</u>
<b>Travel</b>						
(Travel to Alameda for training and site visits, Occasional overnight stays. Reimbursement for staff for private auto mileage at rate of 0.54/mile when they travel to related trainings/meetings. County will bill only up to the State's per diem rate, Includes County vehicle & vehicle rental costs when private vehicles are not used. Also Includes expenses for meals and lodging for out of County travel.)					<del>\$ 5,200</del>	<u>\$ 1,043</u>
					<b>Total Travel Costs</b>	<del>\$ 5,200</del> <u>\$ 1,043</u>
<b>Subcontracts</b>						
Mental Health Consultant (SOW Goals 1,2,3 &4)					<del>\$ 30,000</del>	<u>\$ 0</u>
Parent Cafe Coordinator (SOW Goal 3)					<del>\$ 26,000</del>	<u>\$ 0</u>
					<b>Total Sub-contract Subcontracts Costs</b>	<del>\$ 56,000</del> <u>\$ 0</u>
<b>Other Costs</b>						
					<del>\$ 0</del>	<u>\$ 0</u>
					<b>Total Other Costs</b>	<del>\$ 0</del> <u>\$ 0</u>
<b>Indirect Costs*</b> 14.68 <u>25%</u> of Direct Costs <b>Total Personnel and Fringe Benefits</b>					<del>\$ 14,933</del>	<u>\$ 10,430</u>
					<b>Total Costs</b>	<del>\$ 122,656</del> <u>\$ 65,624</u>

\*Indirect Costs are limited to the first \$25,000 of each subcontract.

**Exhibit B, Attachment V**  
**Budget**  
**Year 5**  
**(07/01/19 through 09/30/19)**

**Personnel**

Position Title	Annual Salary	FTE %	Annual Cost
Supervising PHN	\$ 118,077	5.00%	\$ 5,904
Health Education Specialist	\$ 49,437	5.00%	\$ 2,472

**Total Personnel** \$ 8,376

**Fringe Benefits** (73.985% Personnel)

(Retirement 59.875%, OASDI 7.1%, Health Insurance 6.71%, Mgmt Life .2%, Ben Admin .1%)

\$ 6,197

**Total Personnel and Fringe Benefits** \$ 14,573

**Operating**

Supplies for Parent Café	\$ 4,125
Printing (Charges related to office printing, forms, & informational handouts related to LAUNCH.)	\$ 1,900
Office Supplies (General office expenses for staff to carry out LAUNCH)	\$ 1,127
Postage	\$ 1,000

**Total Operating** \$ 8,152

**Equipment (major equipment >\$5,000)**

\$ 0

**Total Equipment** \$ 0

**Travel**

(Travel to Alameda for training and site visits, Occasional overnight stays. Reimbursement for staff for private auto mileage at rate of 0.54/mile when they travel to related trainings/meetings. County will bill only up to the State's per diem rate, Includes County vehicle & vehicle rental costs when private vehicles are not used. Also Includes expenses for meals and lodging for out of County travel.)

\$ 0

**Total Travel** \$ 0

**Subcontracts**

\$ 0

**Total Subcontracts** \$ 0

**Other Costs**

\$ 0

**Total Other Costs** \$ 0

**Indirect Costs** ( 25.00% of Total Personnel and Fringe Benefits)

\$ 3,643

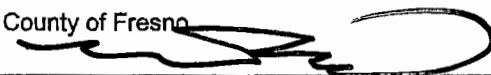
**Total Costs** \$ 26,368

Pursuant to Public Contract Code section 2010, a person that submits a bid or proposal to, or otherwise proposes to enter into or renew a contract with, a state agency with respect to any contract in the amount of \$100,000 or above shall certify, under penalty of perjury, at the time the bid or proposal is submitted or the contract is renewed, all of the following:

1. **CALIFORNIA CIVIL RIGHTS LAWS:** For contracts executed or renewed after January 1, 2017, the contractor certifies compliance with the Unruh Civil Rights Act (Section 51 of the Civil Code) and the Fair Employment and Housing Act (Section 12960 of the Government Code); and
2. **EMPLOYER DISCRIMINATORY POLICIES:** For contracts executed or renewed after January 1, 2017, if a Contractor has an internal policy against a sovereign nation or peoples recognized by the United States government, the Contractor certifies that such policies are not used in violation of the Unruh Civil Rights Act (Section 51 of the Civil Code) or the Fair Employment and Housing Act (Section 12960 of the Government Code).

**CERTIFICATION**

I, the official named below, certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Proposer/Bidder Firm Name (Printed)	Federal ID Number
County of Fresno 	94-6000512

By (Authorized Signature)

Printed Name and Title of Person Signing

Nathan Magsig, Chairman of the Board of Supervisors of the County of Fresno

Executed in the County of	Executed in the State of
Fresno	CA

Date Executed

June 4, 2019

ATTEST:

BERNICE E. SEIDEL  
Clerk of the Board of Supervisors  
County of Fresno, State of California

By 

**Submit**

### GOVERNMENT AGENCY TAXPAYER ID FORM

The principal purpose of the information provided is to establish the unique identification of the government entity.

**Instructions:** You may submit one form for the principal government agency and all subsidiaries sharing the same TIN. Subsidiaries with a different TIN must submit a separate form. Fields bordered in red are required. Please print the form to sign prior to submittal. You may email the form to: [GovSuppliers@cdph.ca.gov](mailto:GovSuppliers@cdph.ca.gov) or fax it to (916) 650-0100, or mail it to the address above.

Principal Government Agency Name **County of Fresno**

Remit-To Address (Street or PO Box) **P.O. Box 11867**

City: **Fresno** State: **CA** Zip Code+4: **93775-186**

Government Type:  City  County  Special District  Federal  Other (Specify)   
Federal Employer Identification Number (FEIN) **94-6000512**

List other subsidiary Departments, Divisions or Units under your principal agency's jurisdiction who share the same FEIN and receives payment from the State of California.

FI\$Cal ID# <small>(if known)</small>	<input type="text"/>	Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>
FI\$Cal ID# <small>(if known)</small>	<input type="text"/>	Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>
FI\$Cal ID# <small>(if known)</small>	<input type="text"/>	Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>
FI\$Cal ID# <small>(if known)</small>	<input type="text"/>	Dept/Division/Unit Name	<input type="text"/>	Complete Address	<input type="text"/>

Contact Person **Rose Mary Rahn** Title **MCAH Director**  
Phone number **(559)600-3330** E-mail address **rrahn@fresnocountyca.gov**  
Signature  Date **5/9/15**