

SECOND AMENDMENT TO AGREEMENT

THIS SECOND AMENDMENT TO AGREEMENT (hereinafter "Amendment") is made and entered into this 23rd day of August, 2022, by and between COUNTY OF FRESNO, a Political Subdivision of the State of California, Fresno, California (hereinafter "COUNTY"), and The Regents of the University of California, San Francisco, a public university, whose address is c/o Office of Sponsored Research, 490 Illinois Street, 4th Floor, San Francisco, CA 94143 (hereinafter "CONTRACTOR").

WITNESSETH:

WHEREAS, COUNTY and CONTRACTOR entered into Agreement number D-21-130, dated April 21, 2021, pursuant to which CONTRACTOR agreed to provide on-call COVID-19 vaccination administration teams, including all necessary staffing, to conduct on-call vaccination clinics that will provide vaccinations and documentation (using the local immunization registry) to COUNTY residents; and

WHEREAS, COUNTY and CONTRACTOR entered into a First Amendment number D-21-130-1, dated October 8, 2021, to add the provision of monoclonal antibody therapy, flu vaccine administration services, the addition of COVID-19 testing services, and increase the total compensation to accommodate the provision of new and existing services through and including April 14, 2022 (Agreement number D-21-130 and First Amendment Number D-21-130-1, collectively, shall be referred to herein as "Agreement"); and

WHEREAS, the Agreement was extended for one (1) additional six (6) month period upon written approval of both parties through and including October 14, 2022; and

WHEREAS, COUNTY and CONTRACTOR have extended the Agreement with the second and final one (1) additional six (6) month period upon written approval of both parties through and including April 14, 2023; and

WHEREAS, COUNTY and CONTRACTOR now desire to amend the Agreement to add the provisions to conduct screening, vaccination, and treatment of communicable disease, effective upon execution, and increase the total compensation to accommodate the provision of new and existing services through April 14, 2023.

1 NOW, THEREFORE, for good and valuable consideration, the receipt and adequacy of which
2 is hereby acknowledged, COUNTY and CONTRACTOR agree as follows:

3 1. That all references to "Revised Exhibit A" in existing COUNTY Agreement number D-
4 21-130 shall be changed to read, "Second Revised Exhibit A", attached hereto and incorporated herein
5 by reference.

6 2. That all references to "Revised Exhibit B" in existing COUNTY Agreement number D-
7 21-130 shall be changed to read, "Second Revised Exhibit B", attached hereto and incorporated herein
8 by reference.

9 3. That Section 5 of the Agreement, located on page 3, lines 8 through 19, is deleted in its
10 entirety and replaced with the following:

11 "COMPENSATION/INVOICING: COUNTY agrees to pay CONTRACTOR and
12 CONTRACTOR agrees to receive compensation for actual costs as identified in Second Revised
13 Exhibit B, attached hereto and incorporated herein by reference. CONTRACTOR shall submit monthly
14 invoices to the County of Fresno, Department of Public Health, 6th Floor, P.O. Box 11867, Fresno, CA
15 93775, Attention: Business Office or dphboap@fresnocountyca.gov. Invoices shall be accompanied by
16 supporting cost documentation such as payroll records, equipment/supply invoices, lease payment,
17 payment records for marketing/education/outreach costs, utility/janitorial payment, mileage records if
18 applicable.

19 In no event shall services performed under this Agreement be in excess of Eight Million
20 Eight Hundred Eighty-Seven Thousand Forty-One and 67/100 Dollars (\$8,887,041.67) during the term
21 of this Agreement. It is understood that all expenses incidental to CONTRACTOR'S performance of
22 services under this Agreement shall be borne by CONTRACTOR. Invoice terms shall be a Net forty-
23 five (45) days from date of receipt of invoice by COUNTY."

24 COUNTY and CONTRACTOR agree that this Amendment is sufficient to amend the
25 Agreement and, that upon execution of this Amendment, the Agreement and this Amendment together
26 shall be considered the Agreement.

27 The parties agree that this Amendment may be executed by electronic signature as provided in
28 this section. An "electronic signature" means any symbol or process intended by an individual signing

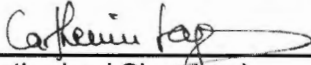
1 this Amendment to represent their signature, including but not limited to (1) a digital signature; (2) a
2 faxed version of an original handwritten signature; or (3) an electronically scanned and transmitted (for
3 example by PDF document) of a handwritten signature. Each electronic signature affixed or attached
4 to this Amendment (1) is deemed equivalent to a valid original handwritten signature of the person
5 signing this Amendment for all purposes, including but not limited to evidentiary proof in any
6 administrative or judicial proceeding, and (2) has the same force and effect as the valid original
7 handwritten signature of that person. The provisions of this section satisfy the requirements of Civil
8 Code section 1633.5, subdivision (b), in the Uniform Electronic Transaction Act (Civil Code, Division 3,
9 Part 2, Title 2.5, beginning with section 1633.1). Each party using a digital signature represents that it
10 has undertaken and satisfied the requirements of Government Code section 16.5, subdivision (a),
11 paragraphs (1) through (5), and agrees that each other party may rely upon that representation. This
12 Amendment is not conditioned upon the parties conducting the transactions under it by electronic
13 means and either party may sign this Amendment with an original handwritten signature.

14 The Agreement, as hereby amended, is ratified and continued. All provisions, terms,
15 covenants, conditions and promises contained in the Agreement and not amended herein shall remain
16 in full force and effect.

17 //

1 IN WITNESS WHEREOF, the parties hereto have executed this Second Amendment to
2 Agreement as of the day and year first hereinabove written.

3
4 **CONTRACTOR**
5 **The Regents of the University of**
6 **California, San Francisco**


7 
8 _____
9 (Authorized Signature)

10 Catherine Lagarde, Contracts Officer
11 _____
12 Print Name & Title

13 OSR
14 _____
15 490 Illinois St., 4th Floor
16 _____
17 San Francisco, CA 94143

18 _____
19 Mailing Address

COUNTY OF FRESNO

20 
21 _____
22 Brian Pacheco, Chairman of the Board of
23 Supervisors of the County of Fresno

24 **ATTEST:**
25 Bernice E. Seidel
26 Clerk of the Board of Supervisors
27 County of Fresno, State of California

28 By: 
_____ Deputy

FOR ACCOUNTING USE ONLY:

Fund: 0001

Subclass: 10000

ORG: 56201018, 56201019

Account: 7295

Second Revised Exhibit A

SCOPE OF WORK

The County of Fresno (County) Department of Public Health (DPH) is in need of temporary vendors to provide on-call COVID vaccine, **COVID testing, flu vaccine, and Monoclonal Antibody Therapy** administration teams, **while also conducting screening, vaccination, and treatment of communicable diseases**, available for vaccination events. Licensed and unlicensed medical staff (Registered Nurses, Licensed Vocational Nurses and Medical Assistants or Certified Nursing Assistants with valid licensure and/or certification in the State of California) and clerical staff will be needed to conduct on-call vaccination clinics that will provide vaccination and documentation through the appropriate State system (e.g. MY Turn or Interface from allowed electronic medical record) to County residents. Clinics will be held through employers or through community medical clinic/vaccination events that may be open to the general public.

The vendor will work with County staff to determine the size, date and time of the clinic request. Lead time to clinic scheduling will be 5 days – 4 weeks. The County anticipates 20 to 30 clinics per month, providing services to up to 1,000 patients per clinic. Clinic times will vary as follows:

- Any day of the week, including weekends and evenings.
- Clinic hours will vary from 2 – 8 hours depending on size of event.
- Events may be held inside, outside or as a drive thru.
- Events may be located anywhere within Fresno County.
- Patients served will be dependent on which vaccine is being administered at the event. The Pfizer vaccine is authorized for use in individuals 16 years of age and older. The Moderna and Janssen vaccines are authorized for use in individuals 18 years of age and older. **The Monoclonal Antibody Therapy is authorized for use in individuals over 12 years of age and older with mild-to-moderate COVID-19 who meet criteria under the FDA’s Emergency Use Authorization.** EUAs issued for each vaccine:
 - Pfizer EUA: <https://www.fda.gov/media/144412/download>
 - Moderna EUA: <https://www.fda.gov/media/144637/download>.
 - Janssen EUA: [Janssen COVID-19 Vaccine EUA Fact Sheet for Recipients and Caregivers \(fda.gov\)](#)
 - **Monoclonal Antibody Therapy EUA:** <https://www.fda.gov/media/143893/download>
 - Other vaccine requirements may vary. Vendor will be required to adhere to EUA for specific vaccines as additional vaccines are approved by the Food and Drug Administration (FDA).
- Vendor will be required to work with the venue host to determine if the vendor will need to provide tables, chairs, popup tents, etc.
- At County’s request, vendor may be required to conduct a similar event at the same venue in order to administer required second doses of vaccine. Arrangements for both events shall be made at the same time. Timing of the second event will depend on the recommended second dose frequency: Pfizer is currently 21 days and Moderna is one month (see respective EUAs

Second Revised Exhibit A

linked above and CDC clinical considerations linked here: <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html>). Janssen vaccine is one dose only. Vendor should always check for CDC and/or vaccine manufacturer updates to these requirements prior to each event.

- When applicable, the requirement to conduct a second, similar event, and its timing, are subject to change depending on vaccine availability at the time of the second event and changes in recommended second dose administration timing.
- Any extra ancillary supplies not included with vaccine shipment must be supplied by vendor.
- The County prefers that the vaccine and ancillary supplies be shipped directly to the vendor rather than be held by the County prior to the clinic. This will be dependent on the vendor's ability to maintain vaccine at the appropriate temperatures (see Cold Storage Capacity, below) and the size of the event.

The County will provide the following:

- Venue and direct payment to venue for any rental costs.
- Clinic date, time, location and venue contact information.
- Vaccine and ancillary supplies as provided for by CDPH. Depending on vendor's cold chain capabilities and registered Provider status, vaccine and ancillary supplies may be shipped directly to vendor or picked up at the Department of Public Health.
- For Pfizer, Moderna, Janssen, flu and potentially other vaccines, as well as Monoclonal Antibody Therapy, we expect the following ancillary supplies to be provided with each 100 vaccine doses.
 - 105 needles
 - 105 syringes
 - 210 alcohol prep pads
 - 1 needle information card
 - 100 vaccination cards
 - 2 disposable face shields
 - 4 surgical masks

The vendor will be responsible for the following:

- County prefers vendors to enroll as a Provider in the federal COVID-19 Vaccination Program, utilizing the California Department of Public Health's (CDPH) COVIDReadi portal and agree and adhere to all requirements specified in the Provider agreement. If provider is not currently an approved California COVID vaccine provider then provider must adhere to all COVID vaccine handling and reporting requirements established by the State of California.
- Vendor shall administer the vaccine and enter all vaccinations into the appropriate State system within 24 hours of administration.
- Vendor is to provide all office supplies, ancillary medical supplies not included with vaccine, PPE, tables, chairs, tents, etc., when needed.

Second Revised Exhibit A

- Vaccine will be transferred according to CDC or VFC recommendations, such as noted in the CDC's Vaccine Storage and Handling Toolkit, linked here: <https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/index.html>
- Return unused/unopened vaccines to DPH the day of the event, or the day following, as directed by DPH when scheduling each event(to be determined prior to each event.) However, with County's permission, vendor may retain unused vaccine for use on the following clinic date provided vendor has appropriate cold storage capacity and the vaccine will not have expired per manufacturer guidelines.
- If vendor has vaccine that may expire before it can be used at an upcoming vendor event, vendor will work with the County to ensure any surplus or short-dated doses are transferred to an approved provider in a timely manner.
- Document and notify DPH of any wasted vaccine doses.
- Staff in charge of storage and handling, will complete the 7 EZIZ training modules at the following website: <https://eziz.org/eziz-training/>
- Per federal regulations, vendor is required to provide the appropriate EUA document to all vaccine recipients:
 - Pfizer: <https://www.fda.gov/media/144414/download>
 - Moderna: <https://www.fda.gov/media/144638/download>
 - Janssen: [Janssen COVID-19 Vaccine EUA Fact Sheet for Recipients and Caregivers \(fda.gov\)](#)
 - **Monoclonal Antibody Therapy:** <https://www.fda.gov/media/143893/download>
- COVID-19 vaccination providers are required to report the following adverse events after COVID-19 vaccination, and other adverse events if later revised by CDC, to VAERS: <https://vaers.hhs.gov/reportevent.html> or calling 1-800-822-7967.
 - Vaccination administration errors, whether or not associated with an adverse event
 - Severe COVID-19 illness (e.g., resulting in hospitalization)
 - Serious adverse events (AE) regardless of causality. Serious AEs are defined as:
 - Death
 - A life-threatening AE
 - Inpatient hospitalization or prolongation of existing hospitalization
 - Persistent or significant incapacity or substantial disruption of the ability to conduct normal life functions
 - A congenital anomaly/birth defect
 - Multisystem Inflammatory Syndrome
 - Important medical events that may not result in death, be life-threatening, or require hospitalization may be considered serious when, based upon appropriate medical judgment, they may jeopardize the patient and may require medical or surgical intervention to prevent one of the outcomes listed above
- Also report any additional select adverse events and/or any revised safety reporting requirements per FDA's conditions of authorized use of vaccine(s) throughout the duration of any COVID-19 Vaccine being authorized under an Emergency Use Authorization (EUA).
- Vendor must make provision for patients with a history of anaphylaxis (due to any cause) to remain for observation for 30 minutes. For all other persons, observation period is 15 minutes.
- In the event of anaphylactic reaction, vendor must maintain appropriate emergency equipment at the event to manage anaphylaxis resulting from vaccination. See CDC recommended equipment

Second Revised Exhibit A

linked here: <https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/anaphylaxis-management.html>. Equipment supply should be sufficient to manage multiple patients experiencing anaphylaxis.

Cold Storage Survey (please check as appropriate):

- We have an ultra-low temperature freezer (temperature capability is -80°C to -60°C/-112°F to -76°F). Freezer make/model and cubic feet: SO-LOW MODEL U85-22 23.1 cubic ft - 3 units purchased. American Biotech Supply – ABT 115V-2186 17cubit ft. – 3 units purchased
- We have freezer storage capability (-25°C to -15°C/-13°F to 5°F). Freezer make/model and cubic feet: MCA Corporation MODEL HMCF7W4 – 7 Cubic Feet
- We have refrigerator storage capability (2°C to 8°C/36°F-40°F). Refrigerator make/model and cubic feet: American Biotech Supply PH-ABT-HC S16G 16 cubic ft.
*Current calibration certification will be required for freezers/refrigerators.
- We will pick up and return the vaccine the same day to the County and will make arrangements with County staff on pick up and drop off times.
- We have qualified container and packout for transport and digital data logger for continuous temperature monitoring during transport. We have purchased 6 transport containers for the purpose of transporting vaccines.
- We do not have qualified container and packout for transport and digital data logger for continuous monitoring during transport and will need to borrow from the Department of Public Health.

Per the CDC, a “qualified container and packout” are defined as “A type of container and supplies specifically designed for use when packing vaccines for transport. They are passive containers that do not require a power source and are ‘qualified’ through laboratory testing under controlled conditions to ensure they achieve and maintain desired temperatures for a set amount of time.” (<https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf>) An example a qualified container is linked here: <https://www.vericormed.com/product/cooler-cool-cube-08-vaccine-transport-cooler-at-refrigerated-temperatures-fresh-vaccine-vt-08/>

Vendor shall submit invoices to:

County of Fresno Department of Public Health
1221 Fresno Street, 6th fl. (Business Office)
Fresno, CA 93721

DPHBOAP@fresnocountyca.gov

Second Revised Exhibit A

KEY RESOURCES

- [CDC's Storage and Handling Toolkit](#)
- [CDC's COVID-19 Vaccination Information Page](#)
- Phase Guidance:
 - [CDC's Phase 1A Powerpoint](#)
 - [Interim ACIP Guidance](#)
 - [Early NASEM Phase Guidance](#)

Second Revised Exhibit B

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	
1	FCDPH Extension Budget 4/15/2022-4/14/2023																
2	Peterson																
3		Thru 4/30/22	May	June	July	August	September	October	November	December	January	February	March	April (1/2)	Total cost	Annual Cost	
4	Personnel-Salary+Benefits																
5	Associate Dean MP 0.10		5,080	5,080	5,080	5,080	5,080	5,080	5,080	5,080	5,080	5,080	5,080	5,080	2,540	58,420	60,960
6	Med Director KB 0.40		15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	15,000	7,500	172,500	180,000
7	Assistant Med Director SD 0.25		6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	3,175	73,025	76,200
8	Physician coverage 0.25		6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	6,350	3,175	73,025	76,200
9	Operations Manager		12,083	12,083	12,083	12,083	12,083	12,083	12,083	12,083	12,083	12,083	12,083	12,083	6,042	138,958	145,000
10	Clinical Supervisor		10,833	10,833	10,833	10,833	10,833	10,833	10,833	10,833	10,833	10,833	10,833	10,833	5,417	124,583	130,000
11	Nurse LVN 0.60		4,556	4,556	4,556	4,556	4,556	4,556	4,556	4,556	4,556	4,556	4,556	2,278	52,399	54,677	
12	Midlevel Provider #1 JJ		23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	11,591	266,591	278,182
13	Midlevel Provider #2 KE		23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	23,182	11,591	266,591	278,182
14	Admin Supervisor MK		9,208	9,208	9,208	9,208	9,208	9,208	9,208	9,208	9,208	9,208	9,208	9,208	4,604	105,896	110,500
15	Comm Coordinator NT		8,191	8,191	8,191	8,191	8,191	8,191	8,191	8,191	8,191	8,191	8,191	8,191	4,096	94,199	98,295
16	Operations Coordinator #1 JS		7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	3,609	83,011	86,620
17	Operations Coordinator #2		7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	3,609	83,011	86,620
18	Research Coordinator		7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	7,218	3,609	83,011	86,620
19	IT Support 0.5FTE		3,840	3,840	3,840	3,840	3,840	3,840	3,840	3,840	3,840	3,840	3,840	3,840	1,920	44,159	46,079
20	Finance Support		2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	1,042	23,958	25,000
21	Medical Assistant #1		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
22	Medical Assistant #2		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
23	Medical Assistant #3		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
24	Medical Assistant #4		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
25	Medical Assistant #5		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
26	Medical Assistant #6		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
27	Medical Assistant #7		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
28	Medical Assistant #8		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
29	Medical Assistant #9		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
30	Medical Assistant #10		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
31	Medical Assistant #11		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
32	Medical Assistant #12		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
33	Medical Assistant #13		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
34	Medical Assistant #14		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
35	Medical Assistant #15		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
36	Medical Assistant #16		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
37	Medical Assistant #17		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
38	Medical Assistant #18		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
39	Medical Assistant #19		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
40	Medical Assistant #20		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
41	Medical Assistant #21		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
42	Medical Assistant #22		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
43	Medical Assistant #23		5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	5,597	2,798	64,362	67,160
44	Total		280,318	280,318	280,318	280,318	280,318	280,318	280,318	280,318	280,318	280,318	280,318	280,318	140,159	3,223,656	3,363,815
45																	
46	Capital Investment																
47	IT equipment		1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	833	19,167	20,000
48	Lab equipment		6,667	6,667	6,667	6,667	6,667	6,667	6,667	6,667	6,667	6,667	6,667	6,667	3,333	76,667	80,000
49	Insurance		4,583	4,583	4,583	4,583	4,583	4,583	4,583	4,583	4,583	4,583	4,583	4,583	2,292	52,708	55,000
50	Total		12,917	12,917	12,917	12,917	12,917	12,917	12,917	12,917	12,917	12,917	12,917	12,917	6,458	148,542	155,000
51																	
52	Supplies																
53	Facility/Rent/RV Storage		11,950	11,950	11,950	11,950	11,950	11,950	11,950	11,950	11,950	11,950	11,950	11,950	5,975	137,425	143,400
54	Clinic Supplies/PPE		2,212	2,212	2,212	2,212	2,212	2,212	2,212	2,212	2,212	2,212	2,212	2,212	1,106	25,442	26,548
55	Shipping - testing		2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	1,042	23,958	25,000
56	Connectivity & Internet		2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	1,042	23,958	25,000
57	EMR license		1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	833	19,167	20,000
58	Office Supplies		333	333	333	333	333	333	333	333	333	333	333	333	167	3,833	4,000
59	Fuel		250	250	250	250	250	250	250	250	250	250	250	250	125	2,875	3,000
60	Mileage		500	500	500	500	500	500	500	500	500	500	500	500	250	5,750	6,000
61	Total		21,079	21,079	21,079	21,079	21,079	21,079	21,079	21,079	21,079	21,079	21,079	21,079	10,540	242,409	252,948
62																	
63	UCSF Network Costs		833	833	833	833	833	833	833	833	833	833	833	833	417	9,583	10,000
64	GAEL		100	100	100	100	100	100	100	100	100	100	100	100	50	1,150	1,200
65	Total		933	933	933	933	933	933	933	933	933	933	933	933	467	10,733	11,200

