

## CALIFORNIA ORAL HEALTH PROGRAM

### Awarded By

THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH, hereinafter “Department”  
TO

County of San Mateo ~~San Mateo County Family Health Services~~, hereinafter “Grantee”  
Implementing the project, County of San Mateo Local Oral Health Program ,” hereinafter  
“Project”

### AMENDED GRANT AGREEMENT NUMBER 17-10722, A01

The Department amends this Grant and the Grantee accepts and agrees to use the Grant funds as follows:

**AUTHORITY:** The Department has authority to grant funds for the Project under Health and Safety Code, Section {131085}.

**PURPOSE FOR AMENDMENT:** The purpose of the Grant amendment is to revise Exhibit B, 4, A. Amounts Payable, to include a lump sum total. In addition, Exhibit B is hereby replaced in its entirety with Exhibit B, A01.

**Amendments** are shown as: Text additions are displayed in **bold and underline**. Text deletions are displayed as strike through text (i.e., ~~Strike~~).

**AMENDED GRANT AMOUNT:** This amendment is to increase the grant by \$38,230.00 (Thirty Eight Thousand Two Hundred Thirty Dollars) and total grant is amended to read : \$1,194,890.00 (One Million One Hundred Ninety Four Thousand and Eight Hundred Ninety Dollars).

Exhibit B BUDGET DETAIL AND PAYMENT PROVISIONS is hereby replaced with Exhibit B, A01 in its entirety

**This amendment will also change the name of the grantee from “ San Mateo County Family Health Services” to “County of San Mateo” to align and standardize grantee’s name with the new FI\$Cal accounting system.**

**PROJECT REPRESENTATIVES.** The Project Representatives during the term of this Grant will be:

California Department of Public Health	Grantee: <b><u>County of San Mateo</u></b> <del>San Mateo County Family Health Services</del>
Name: <del>Angela Wright</del> <b><u>Kimberly Steele</u></b> , Grant Manager	Name: Anand Chabra, MD, MPH, Medical Director, Family Health Services
Address: MS 7218, 1616 Capitol Avenue, Suite 74 420	Address: 2000 Alameda De Las Pulgas, Ste. 200
City, Zip: Sacramento, CA 95814	City, Zip: San Mateo, CA 94403
Phone: (916) 552-9898 <b><u>445-8012</u></b>	Phone: 650-573-3469
Fax: (916) 552-9729 <b><u>636-6678</u></b>	Fax: 650-573-2042
E-mail: Angela.Wright <b><u>Kimberly.Steele</u></b> @cdph.ca.gov	E-mail: achabra@smcgov.org

Direct all inquiries to:

<b>California Department of Public Health, California Oral Health Program</b>	<b>Grantee: <u>County of San Mateo</u> San Mateo County Family Health Services</b>
Attention: <del>Angela Wright</del> <b><u>Kimberly Steele</u></b> , Grant Manager	Attention: Anand Chabra, MD, MPH, Medical Director
Address: MS 7218, 1616 Capitol Avenue, Suite 74.420	Address: 2000 Alameda De Las Pulgas, Ste. 200 <del>220</del>
City, Zip: Sacramento, CA 95814	City, Zip: San Mateo, CA 94403
Phone: (916) <del>552-9898</del> <b><u>445-8012</u></b>	Phone: 650-573-3469
Fax: (916) <del>552-9729</del> <b><u>636-6678</u></b>	Fax: 650-573-2042
E-mail: <del>Angela.Wright</del> <b><u>Kimberly.Steele@cdph.ca.gov</u></b>	E-mail: achabra@smcgov.org

**All payments from CDPH to the Grantee; shall be sent to the following address:**

<b><u>Grantee: County of San Mateo</u></b>
<b><u>Attention "Cashier":</u></b>
<b><u>Address: 2000 Alameda de las Pulgas, Ste. 230</u></b>
<b><u>City, Zip: San Mateo, CA 94403</u></b>
<b><u>Phone: (650) 573-3469</u></b>
<b><u>Fax:</u></b>
<b><u>E-mail: achabra@smcgov.org</u></b>

**Either party may make changes to the information above by giving a written notice to the other party. Said changes shall not require an amendment to the agreement, but the Grantee will be required to submit a completed CDPH 9083 Governmental Entity Taxpayer ID Form or STD 204 Payee Data Record Form which can be request through the CDPH Project Representatives for processing.**

All other terms and conditions of this Grant shall remain the same.

IN WITNESS THEREOF, the parties have executed this Grant on the dates set forth below.

Executed By:

Date: \_\_\_\_\_

~~Louise Rogers, Chief of the Health System~~ **Lizelle Lirio  
de Luna, Director Family Health Services  
County of San Mateo** County Health System  
~~225 37<sup>th</sup> Avenue~~ **2000 Alameda de las Pulgas, Suite  
230,** San Mateo, CA 94403

Date: \_\_\_\_\_

\_\_\_\_\_  
~~Marsha Gregory~~ **Joseph Torrez**, Chief  
Contract Management Unit  
California Department of Public Health  
1616 Capitol Avenue, Suite 74.317  
P.O. Box 997377, MS 1800- 1804  
Sacramento, CA 95899-7377