ATTACHMENT Grant Summary Form

This form is available on the County's Intranet.

County of Siskiyou

GRANT SUMMARY FORM

GENERAL INFORMATION

Grant Title	Grant No.(CFDA)			
Public Health Emergency	93.069,93.889, N/A			
General Description of C	Grant Work scope			
Collectively, this funding	is intended to enhance d	ay-to-day response plans	and prepare for public health	
and/or medical emergend	cies. CDPH will enter into	a five-year grant agreeme	ent with Local Health	
Jurisdictions (LHJ) cover	ing the period July 1, 202	2 to June 30, 2027. LHJs	can apply for each funding	
source, as applicable.				
Granting Agency FEI	D STATE OTHER	Agency Contact	Phone No.	
CDC (PHEP), ASPR (HPP), CDPH GF(Pan Flu)		Sarah Westerman	916-650-6416	
Responsible Department		Department Contact	Extension No.	
Public Health		Shelly Davis	841-2140	
Board Approval Date	Application Date	Award Date	Est'd Completion Date	

GRANT COST AND REVENUE SUMMARY

Program Cost Summary	Total	Grant Portion
Revenue (Please display with brackets <>)	-1,610,350.00	-1,610,350.00
Soft/hard cash match or In kind (<>)		
Staffing	1,155,275.00	1,155,275.00
Contract Services	80,000.00	80,000.00
Supplies & Other Operating Expenditures	86,256.00	86,256.00
Capital Outlay		
Indirect Cost@ 21.85 % of Direct Costs	288,819.00	288,819.00
TOTAL GRANT COSTS AND REVENUES	\$ 0.00	\$ 0.00
How Was Grant Portion Determined?		
Allocation is determined by county population.		

Budget Amendment Requ Appropriation Transfer	uest Required?	Yes No	If yes, please attach copy of Budget
Does this grant allow for Does this grant allow for Will this require an adv	or program inc	ome? <u>Yes</u>	☑ No
			ompliance requirements)
	Use reverse s	side if necessary to p	provide additional information
Prepared By: \(\) Date: \(\leq \)	Jardo 155	> K. !	Der

****Please attach a copy of the grant guidelines and all supporting documents that relate to the program cost summary section.