AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

Gunnison County Legal Instrument # _____

Date of Request: 3/27/2013 **Contractual Deadline:** 4/4/2013 **Received in Administration:** 3/27/13

Desired Agenda Date: as soon as pos **Amount of Discussion Time Desired:**

Action Requested: Signature

Parties to the Agreement: Gunnison County and Colorado Department of Public Health and Environment

Term Begins: immediate **Term Ends:** 6/30/2013 **Grant Contract #:** OE FHA IMM13000030

Summary: $3,903 Increase in funding from Colorado Dept of Public Health for Immunization Core Services, to be used by June 30, 2013

Recommendation: Sign

Fiscal Impact: Increase Revenue, Community Health

Submitted by: Randy Morgan **Return To:** Randy Morgan

Finance Department Review: ● Required ○ Not Required

Comments: DHHS will need to Amend current County budget to reflect increase of grant award.

Signature 3/28/13 Discharge Date

County Attorney Review: ○ Required ○ Not Required

Comments:

OK DB 3/28/13

Certificate of Insurance Required

Yes ____ No X Initials

Signature Discharge Date

Returned to Administration: **Original Returned:**

County Manager Approval:

Signature 4/2/13 3-28-13 Date

(8)

○ Consent Agenda ○ Regular Agenda Time Allotted: _____

Revised January 2011

Randy Morgan

From: Carol Worrall
Sent: Tuesday, March 26, 2013 5:33 PM
To: McCracken, Lynn
Cc: Randy Morgan; Jane Wyman
Subject: RE: Immunization Amend 35 Funding Increase

Lynn
Thanks for the good news. If you need a reply to say we will accept these funds, then, yes, we will accept them.

Carol Worrall, RN BSN
Public Health Director
Gunnison County Dept. of Health and Human Services 225 North Pine Street, Suite E, Gunnison, CO 81230
Phone: (970) 641-0209 Direct: (970) 641-7912 Fax: (970) 641-8346 Email: cworrall@gunnisoncounty.org

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From: McCracken, Lynn [mailto:lynn.mccracken@state.co.us]
Sent: Tuesday, March 26, 2013 3:26 PM
To: Carol Worrall; Jane Wyman
Subject: Immunization Amend 35 Funding Increase

Dear Colleague:

I am pleased to let you know that we have extra year-end funding that is adequate to support a substantial increase for Amendment 35 Core services for all local public health agencies and nursing services.

We are attaching a modified budget page with the amount of increase for your agency. If you would like to accept the additional funding, this modified budget page needs to be transferred onto your letterhead, signed, and returned to us via e-mail attachment to cdphe.cisinvoice@state.co.us, or fax 303-691-6118, **no later than April 5, 2013**.

Upon receipt of the signed form, this funding will be added to your 2012/13 Immunization Amendment 35 Core Service Purchase Order and will be included in your automatic fourth quarter payment. An updated Purchase Order will be e-mailed to you.

Thank you for your continued efforts to prevent vaccine-preventable diseases in Colorado!

Gunnison County
COLORADO

HEALTH AND HUMAN SERVICES DEPARTMENTS
Human Services Phone: (970) 641-3244 Fax: (970) 641-3738
Public Health Phone: (970) 641-0209 Fax: (970) 641-8346
225 N Pine St, Gunnison, CO 81230
Website: www.GunnisonCounty.org

Budget Modification

Purchase Order #OE FHA IMM13000030

GUNNISON COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES
Immunization Amendment 35 Core Funding **increase** for funding period July 1, 2012 through June 30, 2013.

Description	Original Purchase Order Amount	Additional Funding Amount	Total Fourth Quarter Reimbursement Amount	New Purchase Order Total
Amendment 35 Core Services, as described in Sections I and II of Scope of Work	**$10,272.00**	**$3,903.00**	**$6,471.00**	**$14,175.00**

Payment for this additional funding will be included in your automatic fourth quarter payment.

_____
Contractor Name (Print) and Title

_____
Contractor Signature

_____
Date