



INTERGOVERNMENTAL AGREEMENT (IGA)  
AMENDMENT

ARIZONA DEPARTMENT OF  
HEALTH SERVICES  
1740 W. Adams Street, Room 303  
Phoenix, Arizona 85007  
(602) 542-1040  
(602) 542-1741 Fax

Contract No: ADHS12-010887

Amendment No. 3

Procurement Specialist  
Tracey Thomas

BNPA – CFSP/SFMNP

Effective October 1, 2014, it is mutually agreed that the Intergovernmental Agreement referenced is amended as follows:

1. The Price Sheet in Amendment Two (2) is hereby revised and replaced by the Price Sheet in Amendment Three (3). The total budget amount is **\$114,408.00** with the following changes:
  - a. Personnel Costs decreased by \$2,488.20 to allow for increases in ERE and travel costs and due to program budget cuts;
  - b. Employee Related Expenses increased by \$4,456.00 to cover additional costs;
  - c. Travel increased by \$475.00 to cover additional costs; and
  - d. Occupancy Expense decreased by \$1,000 to allow for increases in ERE and travel costs and due to program budget cuts; and
  - e. Other Operating Expenses decreased by \$941.80 to allow for increases in ERE and travel costs and due to program budget cuts; and
  - f. Capital Outlay Expense decreased by \$1,999.00 to allow for increases in ERE and travel costs and due to program budget cuts

In ProcureAZ the Contract pricing "Items" tab will be updated upon execution of this Amendment Three (3).

All other provisions of this agreement remain unchanged.

CONTRACTOR SIGNATURE

Pima County Health Department

Contractor Name

3950 South Country Club Road

Address

Tucson

Arizona

85714

City

State

Zip

Contractor Authorized Signature

Printed Name

Title

CONTRACTOR ATTORNEY SIGNATURE

Pursuant to A.R.S. § 11-952, the undersigned public agency attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of the State of Arizona.

Signature

Date

Printed Name

This Intergovernmental Agreement Amendment shall be effective the date indicated. The Public Agency is hereby cautioned not to commence any billable work or provide any material, service or construction under this IGA until the IGA has been executed by an authorized ADHS signatory.

State of Arizona

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 2014

Procurement Officer

Attorney General Contract No. P0012014000078, which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney General, who has determined that it is in proper form and is within the powers and authority granted under the laws of the State of Arizona.

Signature

Date

Assistant Attorney General

Printed Name:

RESERVED FOR USE BY THE SECRETARY OF STATE

Under House Bill 2011, A.R.S. § 11-952  
was amended to remove the requirement  
that Intergovernmental Agreements be filed  
with the Secretary of State.

REVIEWED BY:

Appointing Authority or Designee  
Pima County Health Department

|   |  |                 |  |
|---|--|-----------------|--|
|  | <b>INTERGOVERNMENTAL AGREEMENT (IGA)<br/>AMENDMENT</b> |                 | <b>ARIZONA DEPARTMENT OF<br/>HEALTH SERVICES</b><br>1740 W. Adams Street, Room 303<br>Phoenix, Arizona 85007<br>(602) 542-1040<br>(602) 542-1741 Fax |
|   | Contract No: ADHS12-010887                             | Amendment No. 3 | Procurement Specialist<br>Tracey Thomas  |

**CSFP and SFMNP Services**

**PRICE SHEET**

**Commodity Supplemental Food Program (CSFP)**

**Effective: October 1, 2014 to September 30, 2015**

| <b>LINE ITEM BUDGET</b>         | <b>AMOUNT</b>       |
|---------------------------------|---------------------|
| Personnel Services              | \$78,209.80         |
| Employee Related Expenses       | \$30,393.00         |
| Professional & Outside Services | \$200.00            |
| Travel Expense                  | \$2,500.00          |
| Occupancy Expense               | \$1,000.00          |
| Other Operating Expenses        | \$2,103.20          |
| Capital                         | \$1.00              |
| Indirect (if authorized)        | \$1.00              |
|                                 |                     |
| <b>TOTAL</b>                    | <b>\$114,408.00</b> |

**Senior Farmer's Market Nutrition Program (SFMNP)**

| <b>Type of Service</b>      | <b>Unit Rate</b> | <b>Unit of Measure</b> | <b>Estimated Number of<br/>Participants</b> |
|-----------------------------|------------------|------------------------|---|
| WIC SFMNP Check<br>Issuance | \$1.25           | WIC Participant        | AS NEEDED                                   |

**LINE ITEM BUDGET TRANSFERS**

Upon receipt of written authorization from the ADHS Program Manager, the Contractor is authorized to transfer up to a maximum of ten percent (10%) of the Total Budgeted Amount between line items. Transfers of funds are only allowed between funded line items. Transfers exceeding ten percent (10%) or to a non-funded line item shall require a Contract Amendment.