



BOARD OF SUPERVISORS AGENDA ITEM REPORT  
AWARDS / CONTRACTS / GRANTS

☐ Award ☒ Contract ☐ Grant

Requested Board Meeting Date: 12/20/2022  
or Procurement Director Award: ☐

\* = Mandatory, information must be provided

**\*Contractor/Vendor Name/Grantor (DBA):**

Arizona Food Bank Network (AZFBN)

**\*Project Title/Description:**

Food Bank Assistance Program

**\*Purpose:**

The purpose of this amendment is to provide a no cost extension to the original term to allow for the completion of grant deliverables from the grant assistance program for foodbanks serving Pima County residents in response to increased demand due to the impact of COVID-19.

**\*Procurement Method:**

This grant agreement is a non-procurement contract and not subject to Procurement rules.

**\*Program Goals/Predicted Outcomes:**

Through competitive grant-making, AzFBN reviews grant applications, administers grants to qualified agencies, and distributes up to \$550,000 on behalf of County to food banks and partner agencies serving Pima County residents. AzFBN will use no greater than \$50,000 for the research and client data compilation and analysis to determine demographic and socioeconomic information of food bank users, the barriers to Link2Feed participation, and support system users.

**\*Public Benefit:**

Responding to the negative impacts of COVID-19 public health emergency by providing food security assistance to households throughout Pima County.

**\*Metrics Available to Measure Performance:**

Actual or estimated pounds of food provided to the agency to distribute food to insecure persons and actual or estimated number of food insecure persons and households served. Demographic and socioeconomic information for food bank users. Quarterly expenditure and performance reports indicating use of funds by category and performance metric data. Final report to County to include applicants and recipients by category, amounts awarded, primary purpose of award, and scores on performance metrics.

**\*Retroactive:**

No.

6mT approved  
12/2/22  
TO: COB 12-6-22  
Vers.: 3  
pgs.: 3

DEC05:22PM0447 PD

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (\*) fields

**Contract / Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_  
Commencement Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_  
☐ Expense Amount \$ \_\_\_\_\_ \* ☐ Revenue Amount: \$ \_\_\_\_\_

**\*Funding Source(s) required:** \_\_\_\_\_

Funding from General Fund? ☐ Yes ☒ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

Contract is fully or partially funded with Federal Funds? ☒ Yes ☐ No

If Yes, is the Contract to a vendor or subrecipient? \_\_\_\_\_

Were insurance or indemnity clauses modified? ☐ Yes ☒ No

If Yes, attach Risk's approval.

Vendor is using a Social Security Number? ☐ Yes ☒ No

If Yes, attach the required form per Administrative Procedure 22-10.

**Amendment / Revised Award Information**

Document Type: CT Department Code: GMI Contract Number (i.e., 15-123): 22-250  
Amendment No.: 01 AMS Version No.: 03  
Commencement Date: 1/1/2023 New Termination Date: 12/31/2023  
Prior Contract No. (Synergen/CMS): N/A

☐ Expense ☐ Revenue ☐ Increase ☐ Decrease

Is there revenue included? ☐ Yes ☒ No If Yes \$ \_\_\_\_\_

Amount This Amendment: \$ No cost extension

**\*Funding Source(s) required:** ARPA CSLFRF

Funding from General Fund? ☐ Yes ☒ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**Grant/Amendment Information** (for grants acceptance and awards)

☐ Award ☐ Amendment

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Grant Number (i.e., 15-123): \_\_\_\_\_  
Commencement Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Amendment Number: \_\_\_\_\_  
☐ Match Amount: \$ \_\_\_\_\_ ☐ Revenue Amount: \$ \_\_\_\_\_

**\*All Funding Source(s) required:** \_\_\_\_\_

**\*Match funding from General Fund?** ☐ Yes ☐ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**\*Match funding from other sources?** ☐ Yes ☐ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

**\*Funding Source:** \_\_\_\_\_


**\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**

Contact: Melissa Molina / Amy Fish x74217 / Alicia Montoya x74004

Department: Grants Management & Innovation

Telephone: 520.724.8562

Department Director Signature:  Date: 12/2/2022

Deputy County Administrator Signature:  Date: 12/2/2022

County Administrator Signature: \_\_\_\_\_ Date: 12/5/2022

**Pima County Department of Grants Management & Innovation (GMI)****Project:** Food Bank Assistance Program**Subrecipient:** Arizona Food Bank Network (AZFBN)**Contract No.:** CT-GMI-22-250**Contract Amendment No:** One (01)

<b>Orig. Contract Term:</b> 01/01/2022-12/31/2022	<b>Orig. Amount:</b>	\$600,000.00
<b>Termination Date Prior Amendment:</b> N/A	<b>Prior Amendment Amount:</b>	\$0.00
<b>Termination Date This Amendment:</b> 12/31/2023	<b>This Amendment Amount:</b>	\$0.00
	<b>Revised Total Amount:</b>	\$600,000.00

<b>SAM UEI:</b> J4L2YJKA25K3		<b>Expiration Date:</b> 03/02/2023		
<b>Research or Development:</b>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>Federal Contract No.:</b> N/A				
<b>Required Match:</b>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>Match Amount:</b> N/A				
<b>Indirect Cost Rate:</b>		<input type="checkbox"/> Federal	<input type="checkbox"/> NICRA	<input type="checkbox"/> de minimis <input checked="" type="checkbox"/> None
<b>Status of Agency:</b>		<input checked="" type="checkbox"/> Subrecipient <input type="checkbox"/> Contractor		
<b>CFDA</b>	<b>Program Description</b>	<b>National Funding</b>	<b>Pima County Award</b>	<b>FAIN</b>
21.027	American Rescue Plan Act, Coronavirus State & Local Fiscal Recovery Funds (CSLFRF)	\$350,000,000,000	03/2021 – 12/2024 \$203,421,668.00	SLFRP0180

**FEDERAL FINANCIAL ASSISTANCE SUBAWARD  
AMENDMENT ONE****1. Background and Purpose.**

- 1.1. **Background.** On February 15, 2022, Pima County ("County"), and Arizona Food Bank Network ("Subrecipient"), entered into the above-referenced Agreement ("Agreement") to support food banks serving Pima County residents in responding to increased demand due to the impact of COVID-19. On August 10, 2021, County's Board of Supervisors approved a plan to allocate a portion of its CSLFRF funds to respond to the negative economic impacts of COVID-19 public health emergency which includes assistance to nonprofit organizations and assistance to households. On December 21, 2021, the County's Board of Supervisor's approved the *Revised American Rescue Plan Act, Coronavirus Local Fiscal Recovery Funds (ARPA CLFRF) Spending Plan/Budget* which includes an allocation of \$600,000.00 for the Arizona

Food Bank Network to research system-use and administer a grant assistance program for food banks serving Pima County residents responding to increased demand due to the impact of COVID-19.

- 1.2. **Purpose.** The purpose of this amendment is to provide a no cost extension to the original term to allow for the completion of grant deliverables. Once vetting was complete for the initial grant round, only 63% of submitted applications were approved for a grant, leaving \$278,001 remaining in the funding pool. To ensure only projects of mandated quality and capable of due diligence were funded, a new round of applications was solicited with a process that opened August 2022. Grants are currently still being awarded. In addition, once grants are awarded, applicants are finding that supply chain disruptions sometimes preclude them from expending the funds in a timely way.
2. **Term.** As per Section 2 of the fully executed Agreement (02/15/2022), the parties want to extend the term for one (1) additional year. The term is hereby extended to December 31, 2023.
3. **Forced Labor of Ethnic Uyghurs.** Pursuant to A.R.S. § 35-394, if Subrecipient engages in for-profit activity and has 10 or more employees, Subrecipient certifies it is not currently using, and agrees for the duration of this Subaward to not use (1) the forced labor of ethnic Uyghurs in the People's Republic of China; (2) any goods or services produced by the forced labor of ethnic Uyghurs in the People's Republic of China; and (3) any subrecipients, subcontractors or suppliers that use the forced labor or any goods or services produced by the forced labor of ethnic Uyghurs in the People's Republic of China. If Subrecipient becomes aware during the term of the Subaward that the Company is not in compliance with A.R.S. § 35-394, Subrecipient must notify the County within five business days and provide a written certification to County regarding compliance within one hundred eighty days.
4. **Counterparts.** This Amendment No. 01 may be executed in any number of counterparts, each counterpart is considered an original, and together the counterparts constitute one and the same instrument.

All other provisions of the Agreement not specifically changed by this Amendment remain in effect and are binding upon the parties.

**SIGNATURE PAGE TO FOLLOW**

**PIMA COUNTY**

**SUBRECIPIENT**

\_\_\_\_\_  
Chair, Board of Supervisors

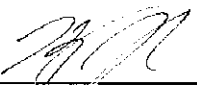
\_\_\_\_\_  
Date

ATTEST

\_\_\_\_\_  
Clerk of the Board

\_\_\_\_\_  
Date

APPROVED AS TO FORM

  
\_\_\_\_\_  
Deputy County Attorney

Kyle Johnson  
\_\_\_\_\_  
Print DCA Name

  
\_\_\_\_\_  
Authorized Officer Signature

Angela Rodgers  
\_\_\_\_\_  
Printed Name and Title

12/1/22

\_\_\_\_\_  
Date

APPROVED AS TO CONTENT

  
\_\_\_\_\_  
Department Head

12/2/22  
\_\_\_\_\_  
Date