



Cochise County Board of Supervisors

Public Programs...Personal Service
www.cochise.az.gov

PEGGY JUDD
Chairman
District 3

PATRICK G. CALL
Vice-Chairman
District 1

ANN ENGLISH
Supervisor
District 2

EDWARD T. GILLIGAN
County Administrator

ARLETHE G. RIOS
Clerk of the Board

AGENDA FOR REGULAR BOARD MEETING
Tuesday, September 25, 2018 at 10:00 AM
BOARD OF SUPERVISORS HEARING ROOM
1415 MELODY LANE, BUILDING G, BISBEE, AZ 85603

ANY ITEM ON THIS AGENDA IS OPEN FOR DISCUSSION AND POSSIBLE ACTION

PLEDGE OF ALLEGIANCE

THE ORDER OR DELETION OF ANY ITEM ON THIS AGENDA IS SUBJECT TO MODIFICATION AT THE MEETING

ROLL CALL

Members of the Cochise County Board of Supervisors will attend either in person or by telephone, video or internet conferencing.

The Board may permit public comment during the discussion of any item on this agenda. If you wish to be heard on a specific item, please sign up to be heard using the 'Specific Item' on the speaker form provided, and please list the item about which you wish to be heard. Persons will be permitted three minutes to speak.

Note that some attachments may be updated after the agenda is published. This means that some presentation materials displayed at the Board meeting may differ slightly from the attached version.

CALL TO THE PUBLIC

This is the time for the public to comment. Members of the Board may not discuss items that are not specifically identified on the agenda.

CONSENT

Board of Supervisors

1. Approve the Minutes of the regular meeting of the Board of Supervisors of September 11, 2018.
2. Adopt Resolution 18-19 approving the cancellation of uncontested board elections for Special District governing boards listed pursuant to A.R.S. 16-410, and appoint the candidates who filed for the Special District governing board, or declare seats vacant if an insufficient number of candidates giving all those appointed the same powers and duties in accordance with the law.

3. Approve an application for a Temporary Extension of Premises liquor license submitted by Mr. Leonel Urcadez for Gay 90s Bar located at 3856 S. Towner Avenue, Naco, AZ 85620 on September 29, 2018 through September 30, 2018, for the 1st Annual Fight for Life Cancer benefit, Vintage Car & Motorcycle gathering.
4. Approve the proposed settlement of the Small Tax Appeal in Rich, Tate A. v. Cochise County, CV201800198, now pending in Cochise County Superior Court.

Community Development

5. Accept Letter of Commitment to have the Cochise County Board of Supervisors commitment to serve as the lead coalition member, grantee, fiscal agent for the Brownfields Coalition Assessment Grant in the amount of \$600,000, effective Fiscal Year 2019 and to be used over a three year period.
6. Accept the County Engineer's recommendation and approve a Public Hearing for October 23, 2018 to establish a portion of Robbs Road as a County Highway.

Finance

7. Approve demands and budget amendments for operating transfers.

PUBLIC HEARINGS

Board of Supervisors

8. Approve a Person Transfer/Location Transfer liquor license application for a series #6 (Bar) license submitted by Mr. Chiragkumar R. Patel for Rookies #2, located at 4301 S. Highway 92, Sierra Vista, AZ 85630.

ACTION

Health & Social Services

9. Approve Intergovernmental Agreement (IGA) ADHS19-207425 for Women Infant Children Services (WIC) and the Breastfeeding Peer Counselor Program (BFPC) between the Arizona Department of Health Services and Cochise Health and Social Services with funding for Fiscal Year 2019 in the amounts of \$581,930 for WIC and \$48,500 for BFPC, effective October 1, 2018 through September 30, 2023.

REPORT BY EDWARD T. GILLIGAN COUNTY ADMINISTRATOR -- RECENT AND PENDING COUNTY MATTERS

SUMMARY OF CURRENT EVENTS

Report by District 1 Supervisor, Patrick Call

Report by District 2 Supervisor, Ann English

Report by District 3 Supervisor, Peggy Judd

Pursuant to the Americans with Disabilities Act (ADA), Cochise County does not, by reason of a disability, exclude from participation in or deny benefits or services, programs or activities or discriminate against any qualified person with a disability. Inquiries regarding compliance with ADA provisions, accessibility or accommodations can be directed to Chris Mullinax, Safety/Loss Control Analyst at (520) 432-9720, FAX (520) 432-9716, TDD (520) 432-8360, 1415 Melody Lane, Building F, Bisbee, Arizona 85603.

Cochise County Board of Supervisors
1415 Melody Lane, Building G Bisbee, Arizona 85603
520-432-9200 520-432-5016 fax board@cochise.az.gov

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018

Minutes

Submitted By: Melissa Belasco, Board of Supervisors

Department: Board of Supervisors

Presentation: No A/V Presentation

Document Signatures:

Recommendation:

of ORIGINALS

Submitted for Signature:

NAME n/a

TITLE n/a

of PRESENTER:

of PRESENTER:

Mandated Function?:

**Source of Mandate
or Basis for Support?:**

Information

Agenda Item Text:

Approve the Minutes of the regular meeting of the Board of Supervisors of September 11, 2018.

Background:

Minutes

Department's Next Steps (if approved):

Signed minutes routed for processing and posted on the internet.

Impact of NOT Approving/Alternatives:

n/a

To BOS Staff: Document Disposition/Follow-Up:

Scan to OnBase and File.

Budget Information

Information about available funds

Budgeted:

Funds Available:

Amount Available:

Unbudgeted:

Funds NOT Available:

Amendment:

Account Code(s) for Available Funds

1:

Fund Transfers

Attachments

No file(s) attached.

Board of Supervisors

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018

Cancel Uncontested Special District Elections & Appoint

Submitted By: Arlethe Rios, Board of Supervisors

Department: Board of Supervisors

Presentation: No A/V Presentation **Recommendation:** Approve

Document Signatures: BOS Signature NOT Required **# of ORIGINALS Submitted for Signature:** 0

NAME of PRESENTER: n/a **TITLE of PRESENTER:** n/a

Docket Number (If applicable):

Mandated Function?: Federal or State Mandate **Source of Mandate or Basis for Support?:** A.R.S. 16-410

Information

Agenda Item Text:

Adopt Resolution 18-19 approving the cancellation of uncontested board elections for Special District governing boards listed pursuant to A.R.S. 16-410, and appoint the candidates who filed for the Special District governing board, or declare seats vacant if an insufficient number of candidates giving all those appointed the same powers and duties in accordance with the law.

Background:

The Board is being asked to cancel the uncontested Special District governing board elections for the November 6, 2018 General Election.

A.R.S. §16-410 allows that if the number of persons who file nomination petitions plus the number of persons who file write-in affidavits is less than or equal to the number of positions to be filled for a special district election, the Board of Supervisors may cancel the election and appoint the person or persons to fill the vacant position(s) for the term of office for which the candidate was nominated. Doing so spares the district board of the expense from conducting an uncontested election.

Candidate(s) who filed will be appointed by the Board of Supervisors and will have the same powers and duties as if elected. If no nomination petitions or write-in affidavits were filed, the position will be deemed vacant to be filled as otherwise provided by law.

Pertinent sections authorizing cancellation and appointments are included:

- **Fire Districts:** A.R.S. §48-802(D)(4) [fire districts – cancel and appoint or cancel and deem vacant] and §48-803(B) [fire districts – cancel and appoint an administrator]
- **Water Districts:** A.R.S. §48-1012(E) [domestic water improvement districts – cancel and appoint or cancel and deem vacant]
- **Sanitary Districts:** A.R.S. §48-2010(A)(3) [sanitary district -- cancel and appoint or cancel and deem vacant]
- **Road Improvement and Maintenance Districts:** A.R.S. §48-1082(E) – cancel and appoint or cancel and deem vacant]
- **Hospital Districts:** A.R.S. §48-1908(C) – cancel and appoint or cancel and deem vacant]

Department's Next Steps (if approved):

Certificates of Election will be sent to those candidates who filed timely nomination petitions or write-in papers.

Impact of NOT Approving/Alternatives:

Positions will remain vacant.

To BOS Staff: Document Disposition/Follow-Up:

Send out certificates of Appointment.

Attachments

Resolution

RESOLUTION NO. 18-___

**A RESOLUTION OF THE BOARD OF SUPERVISORS OF COCHISE COUNTY, ARIZONA,
CANCELING THE REGULAR ELECTIONS OF NOVEMBER 6, 2018 FOR CERTAIN SPECIAL
DISTRICT GOVERNING BOARDS AND APPOINTING THOSE WHO FILED NOMINATION
PETITIONS OR NOMINATION PAPERS FOR UNCONTESTED DISTRICT POSITIONS**

WHEREAS, pursuant to A.R.S. § 16-410, if the number of persons who file nomination petitions plus the number of persons who file write-in affidavits is less than or equal to the number of positions to be filled for a special district election, the Board of Supervisors may cancel the election and appoint the person or persons to fill the vacant position(s) for the term of office for which the candidate was nominated; and

WHEREAS, Candidate(s) who filed will be appointed by the Board of Supervisors and will have the same powers and duties as if elected. If no nomination petitions or write-in affidavits were filed, the position will be deemed vacant to be filled as otherwise provided by law.

WHEREAS, for each of the following listed special district governing boards, the following person or persons filed a nominating petition or nominating paper for district office:

Bowie Fire District

Patrick William Dorsey

Elfrida Fire District

Rosa M. Aguallo

Alma Garcia

Andrew Warn

Fry Fire District

Eric N. Andersen

Robert W. McMurtrie

Norman A. Sturm

Naco Fire District

Marcelino H. Encinas

Sandra D. Flores

RESOLUTION 18-

A Resolution of the Board of Supervisors of Cochise County, Arizona, Canceling the Regular Elections of November 6, 2018 for Certain Special District Governing Boards.

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Pomerene Fire District

Sandra S. Leverty

Sunsites/Pearce Fire District

Camme Chantal Carlson-Watkins

Lillian M. Reed

Thomas Edward Whiteman

Northern Cochise Hospital District

Carol J. Dunagan

Raymond D. Scott, D.C.

Shirley Shotton

San Pedro Valley Hospital District

Ronald Desmarais

Carmen Krebs

Elfrida Water District

Reyna De La Cruz

James E. Fletcher

Andrew Warn

Whetstone Water District

Joe Dooley

Steven J. Usrey

and are the only persons to have done so, thus rendering each election an uncontested election; and

WHEREAS, for each of the following listed special district governing boards, no person or persons filed a nomination petition or nomination paper for the following District positions:

Pirtleville Fire District

1 position remains open

RESOLUTION 18-

A Resolution of the Board of Supervisors of Cochise County, Arizona, Canceling the Regular Elections of November 6, 2018 for Certain Special District Governing Boards.

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Pomerene Fire District

1 position remains open

San Jose Fire District

2 positions remain open

St. David Fire District

2 position remains open

Sunnyside Fire District

1 position remains open

Whetstone Fire District

3 positions remain open

Bowie Water District

3 positions remain open

Pomerene Water District

3 positions remain open

St. David Water District

3 positions remain open

Fairfield Estates Road Improvement Maintenance District

2 positions remain open

High Knoll Road Improvement Maintenance District

1 position remains open

NOW THEREFORE, BE IT RESOLVED by the Cochise County Board of Supervisors as follows:

1. The special district board elections scheduled on November 6, 2018, for each of the above listed special districts are hereby cancelled pursuant to the authority granted to the Cochise County Board of Supervisors as stated in A.R.S. § 16-410.

RESOLUTION 18-

A Resolution of the Board of Supervisors of Cochise County, Arizona, Canceling the Regular Elections of November 6, 2018 for Certain Special District Governing Boards.

Page | 4

2. All persons listed above are hereby appointed to fill the board positions for which they filed nomination petitions or nomination papers effective December 1, 2018 for Fire, Sanitary, Hospital, and Road Improvement Districts; and effective January 1, 2019 for Irrigation and Water Conservation Districts, pursuant to the authority granted to the Cochise County Board of Supervisors, as stated in A.R.S. § 16-410.
3. For those positions in which no one filed a nomination petition or nomination paper, those positions are hereby deemed vacant effective December 1, 2018, for Fire, Sanitary, Hospital, and Road Improvement Districts; and effective January 1, 2019 for Irrigation and Water Conservation Districts.
4. Vacancies remaining shall be filled as otherwise provided by law.

APPROVED BY the Board of Supervisors of the County of Cochise, this ____ day of _____, 2018.

Peggy Judd, Chairman,
Cochise County Board of Supervisors

ATTEST:

Arlethe G. Rios,
Clerk of the Board

APPROVED AS TO FORM:

Elda E. Orduño
Civil Deputy County Attorney

Board of Supervisors

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018

Temporary Extension of Premises Liquor License for Gay 90s Bar

Submitted By: Melissa Belasco, Board of Supervisors

Department: Board of Supervisors

Presentation: No A/V Presentation

Document Signatures:

Recommendation:

of ORIGINALS

Submitted for Signature:

NAME n/a

TITLE n/a

of PRESENTER:

of PRESENTER:

Mandated Function?:

Source of Mandate or Basis for Support?:

Information

Agenda Item Text:

Approve an application for a Temporary Extension of Premises liquor license submitted by Mr. Leonel Urcadez for Gay 90s Bar located at 3856 S. Towner Avenue, Naco, AZ 85620 on September 29, 2018 through September 30, 2018, for the 1st Annual Fight for Life Cancer benefit, Vintage Car & Motorcycle gathering.

Background:

Mr. Urcadez has applied for a temporary Extension of Premises/Patio liquor license for Gay 90s Bar located at 3856 S. Towner Avenue, Naco, AZ 85620. The temporary extension is for September 29, 2018 through September 30, 2018 for the 1st Annual Fight for Life Cancer benefit, Vintage Car & Motorcycle gathering. The Sheriff's Office has no recommendation and Planning and Zoning has recommended approval of the application and the Planning Department is currently working with the property owner on obtaining the proper permits for the Temporary Use.

Department's Next Steps (if approved):

Board staff will forward the Board's decision to the ADLLC.

Impact of NOT Approving/Alternatives:

The applicant will not be able to serve liquor outside of the established premises.

To BOS Staff: Document Disposition/Follow-Up:

Board staff will forward the Board's decision to the ADLLC.

Budget Information

Information about available funds

Budgeted:

Funds Available:

Amount Available:

Unbudgeted:

Funds NOT Available:

Amendment:

Account Code(s) for Available Funds

1:

Fund Transfers

Attachments

Application

Department Review Forms



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

DLLC USE ONLY

CSR: _____

Log #: _____

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

OBTAIN APPROVAL FROM LOCAL GOVERNING BOARD BEFORE SUBMITTING TO THE DEPARTMENT OF LIQUOR
****Notice: Allow 30-45 days to process permanent change of premise****

Permanent change of area of service. **A non-refundable \$50. Fee will apply.** Specific purpose for change:

Temporary change (**No Fee**) for date(s) of: 9/29/18 through 9/30/18 list specific purpose for change:

1. Licensee's Name: LUCASDEZ Leonel A. License#: 06020071
Last First Middle

2. Mailing address: P.O. Box 614 NACO AZ 85620
Street City State Zip Code

3. Business Name: Gay 90's Bar

4. Business Address: 3856 S. Townef NACO AZ 85620
Street City State Zip Code

5. Email Address: lucadez@yahoo.com

6. Business Phone Number: 520-432-4677 Contact Phone Number: 520-432-2377

7. Is extension of premises/patio complete?
 N/A Yes No If no, what is your estimated completion date? ___/___/___

8. Do you understand Arizona Liquor Laws and Regulations?
 Yes No

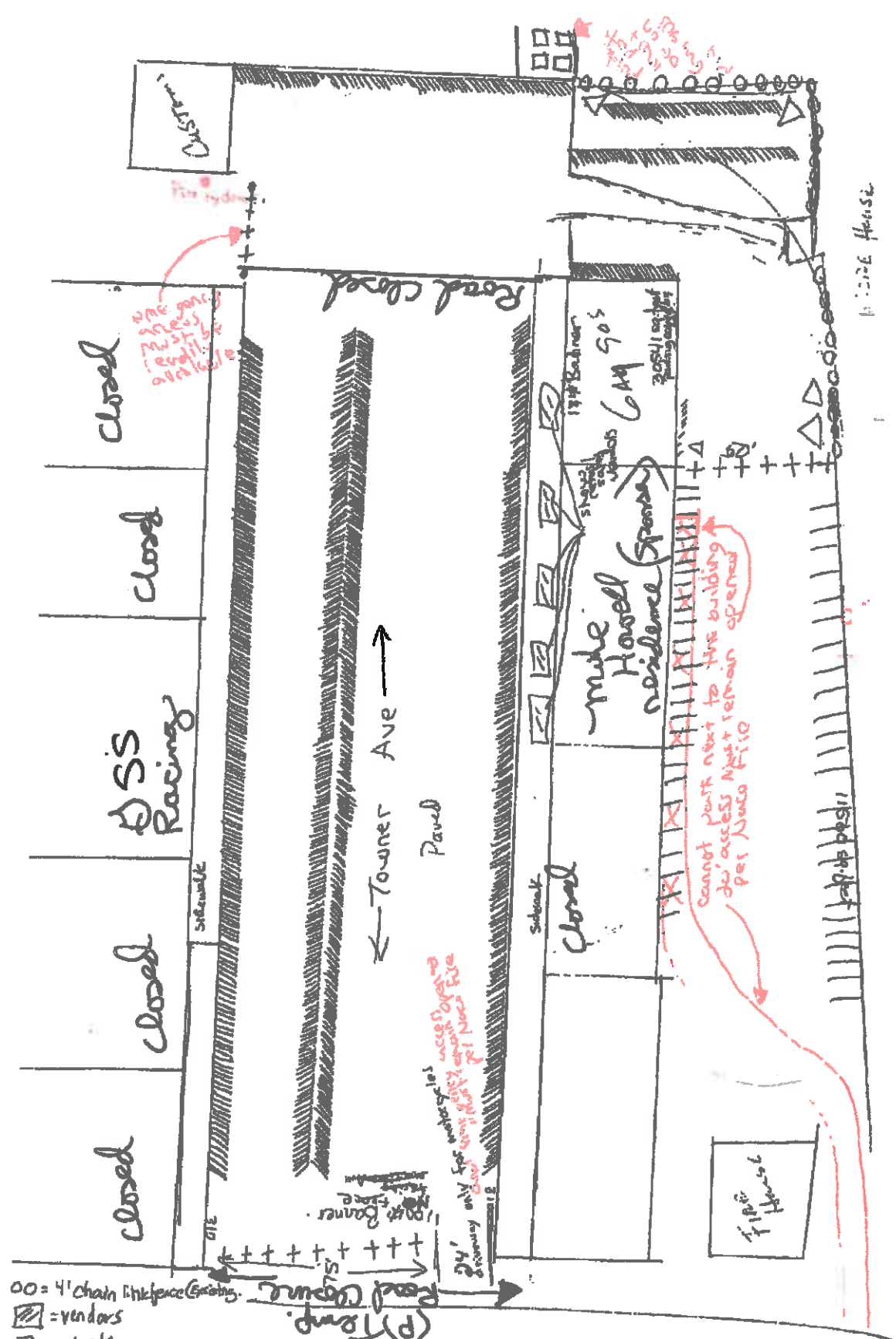
9. Does this extension bring your premises within 300 feet of a church or school?
 Yes No

10. Have you received approved Liquor Law Training?
 Yes No

11. What security precautions will be taken to prevent liquor violation s in the extended area?
Personel Gay 90's

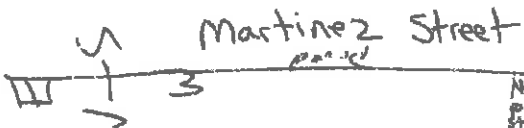
RECEIVED
 COCHISE COUNTY
 BOARD OF SUPERVISORS
 2018 SEP - 4 PM 12: 28

12. **IMPORTANT:** Attach the revised floor plan, clearly depicting your licensed premise along with the new extended area outlined in black marker or ink, if the extended area is not outlined and marked "extension" we cannot accept the application.



- oo = 4' chain link fence (existing)
- [hatched box] = vendors
- [square box] = portapots
- [triangle box] = dumpsters

/// = improved parking 3x7
 || = car parking



No additional lighting proposed besides existing street lights on 6-20th and 4th

Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premise. List specific reasons for exemption:

Approval Disapproval by DLLC: _____ Date: ____/____/____

Notary

I, (Print Full Name) Leonel Urcaez, hereby declare that I am a **CONTROLLING PERSON/ AGENT** filing this notification. I have read this document and the contents and all statements are true, correct and complete.

X (Signature) [Signature]
Controlling Person / Agent

State of Arizona County of Cochise
the foregoing instrument was acknowledged before me this

4th of September 2019
Day Month Year

My commission expires on:



[Signature]
Signature of NOTARY PUBLIC

GOVERNING BOARD

After completion, and **BEFORE submitting to the Department of Liquor**, please take this application to your local Board of Supervisors, City Council or Designate for their recommendation. This recommendation is not binding on the Department of Liquor.

Approval Disapproval

Authorized Signature Title Agency Date

DLLC USE ONLY

Investigation Recommendation: Approval Disapproval by: _____ Date: ____/____/____

Director Signature required for Disapprovals: _____ Date: ____/____/____

SEPT 29TH 2018

2-6 PM

1st Annual

**FIGHT
FOR
LIFE**



Cancer Benefit

live music

50/50 raffle

swapmeet

bike game

**carne asada
for sale**

**BLOCK
PARTY**

**VINTAGE
CAR &
MOTORCYCLE
GATHERING**

**@
GAY 90s**

3856 S. TOWNER AVE, NACO AZ

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

APPLICANT INFORMATION

Applicant Name: Leonel Urcadez Address: 3856 S. Towner Avenue
Business Name: Gay 90s City/Zip: Naco, 85620
Liquor License #: 06020071 Parcel #: 102-57-030
Ownership Type: Limited Liability Corporation Liquor License Temporary Extension of Premise
Partner(s): N/A Liquor License

TO BE COMPLETED BY THE SHERIFF'S OFFICE

Please advise if:

1. There have been a significant number of incidents at the named location within five (5) years prior to the application.

If so, please attach pertinent documentation.

Comments: The Sheriff's Office has not had to respond to a significant number of incidents at the above location within the last 5-years.

Based on the above information, the Sheriff's Office recommendation to the Board of Supervisors is:

Approval

Disapproval

No Recommendation

Name: Richard Morales

Title: Lieutenant

Signature: 

Date: 09/05/18

Contact phone: (520) 353-5087

Email: RDMorales@cochise.az.gov

Return completed form with any attachments by:

September 19, 2018

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

For internal use only:

- Restaurant/Hotel-Motel
- Club/Government
- Transfer of Premises

APPLICANT INFORMATION

Applicant Name: <u>Leonel Urcadez</u>	Address: <u>3856 S. Towner Avenue</u>
Business Name: <u>Gay 90s</u>	City/Zip: <u>85620</u>
Liquor License #: <u>06020071</u>	Parcel #: <u>102-57-030</u>
Ownership Type: <u>Limited Liability Corporation</u>	Liquor License <input type="checkbox"/> Temporary Extension of Premise Liquor License <input checked="" type="checkbox"/>
Partner(s): <u>n/a</u>	

TO BE COMPLETED BY THE PLANNING & ZONING DEPARTMENT

Please advise if, at the time the application was filed:

1. The premises for which the license is being applied for is within 300 horizontal feet of a church; or
2. The premises for which the license is being applied for is within 300 horizontal feet of a public or private school, or a fenced recreation area adjacent to a school building.

If so, please attach pertinent documentation and drawings or maps.

Comments: N/A, this application is exempt from the 300-foot rule, Special Event, no posting required.

Based on the above information, the Planning and Zoning Department's recommendation to the Board of Supervisors is:	Approval <input checked="" type="checkbox"/>	Disapproval <input type="checkbox"/>
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OTHER PERTINENT INFORMATION FOR THE BOARD'S CONSIDERATION:

Proper Zoning?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Zoning:	GB – General Business
Use permitted by P&Z?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Permit#:	Pending Submittal for Temp Use
Date Permit Issued:	Pending	Use Permitted:	Temp Use – Event of Public Interest
If use not permitted, is it LNC?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Year LNC Established:	N/A

- The Planning Department will notify the applicant that if any construction is proposed, a Non-Residential Permit must first be submitted and approved by this Department, or if there is a lapse of 12 months of non-operation of the business, a Non-Residential Permit will be required to re-establish the use from this Department.
- The Planning Department will notify the applicant that he/she will be required to obtain the proper permits before operating the business.
- The Planning Department is currently working with the property owner on several zoning-related issues with the subject property.
- The Planning Department is currently working with the property owner on obtaining the proper permits for the temporary event.

Name: <u>Dora V Amaya</u>	Title: <u>Zoning Administrator</u>
Signature: <u>Dora V Amaya</u>	Date: <u>September 6, 2018</u>
Contact phone: <u>520.803.3960</u>	Email: <u>Damaya@cochise.az.gov</u>

Return completed form with any attachments by: September 19, 2018

Regular Board of Supervisors Meeting

Board of Supervisors

Meeting Date: 09/25/2018

Approve the Proposed Settlement of the Small Tax Appeal Rich v. Cochise County

Submitted By: Susana Stark, County Attorney

Department: County Attorney

Presentation: No A/V Presentation **Recommendation:** Approve

Document Signatures: BOS Signature Required **# of ORIGINALS Submitted for Signature:** 1

NAME of PRESENTER: Christine J. Roberts **TITLE of PRESENTER:** Civil Deputy County Attorney

Docket Number (If applicable):

Mandated Function?: Federal or State Mandate **Source of Mandate or Basis for Support?:**

Information

Agenda Item Text:

Approve the proposed settlement of the Small Tax Appeal in Rich, Tate A. v. Cochise County, CV201800198, now pending in Cochise County Superior Court.

Background:

Taxpayer filed a civil action in Cochise County Superior Court, seeking a reduction in assessed value for parcel number 103-61-018 for tax year 2018. After inspecting the property, reviewing the taxpayers' documentation and other market factors/comparables, the Assessor agrees that the parcel's full cash value and limited property value for tax year 2018 should be lowered. The Assessor's recommended settlement offer is as follows:

- For tax year 2018, a reduction in full cash value from \$120,233 to \$80,000.
- For tax year 2018, a reduction in limited property value from \$120,233 to \$80,000.
- The assessment ratio shall remain at 18%.
- The legal class shall remain at 1.12.

These values apply to the 2018 assessment pursuant to A.R.S. § 42-16002 B.

These values and classifications will be in effect for one year due to the remodel and change in use of the subject property for the 2019 assessment, pursuant to A.R.S. § 42-16001 B.1.

Each party would bear their own attorneys' fees and costs.

The taxpayer has accepted the settlement offer.

Department's Next Steps (if approved):

Upon approval by the Board, the parties will file the stipulated judgment and stipulation for entry of judgment with the Cochise County Superior Court disposing of this matter, pursuant to the settlement terms.

Impact of NOT Approving/Alternatives:

Additional litigation for the County with the risk that the Court may: (1) rule in the taxpayers' favor; (2) order a larger reduction in the assessed value of the subject property; and (3) order the County to pay the Plaintiffs' fees and costs.

To BOS Staff: Document Disposition/Follow-Up:

Advise County Attorney's Office - Civil Division upon Board's approval.

Attachments

Stipulation for Entry of Judgement

Stipulated Judgement

1 BRIAN M. McINTYRE
2 COCHISE COUNTY ATTORNEY
3 By: CHRISTINE J. ROBERTS
4 Civil Deputy County Attorney
5 State Bar No. 033718
6 P.O. Drawer CA
7 Bisbee, AZ 85603
8 (520) 432-8700
9 CVAttymeo@cochise.az.gov
10 *Attorney for Defendant Cochise County*

11
12 **IN THE SUPERIOR COURT FOR THE STATE OF ARIZONA**
13 **IN AND FOR THE COUNTY OF COCHISE**

14 TATE A. RICH, a single man,) No. CV201800198
15)
16 Plaintiff,) STIPULATION FOR ENTRY OF
17) JUDGMENT
18 v.)
19) Judge: Hon. John F. Kelliher
20 COCHISE COUNTY, a political) Div. 2
21 subdivision of the State of Arizona,)
22)
23 Defendant.)

24
25 The parties to this action stipulate that the Court may enter the attached
26 Judgment in full and final disposition to this action.

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RESPECTFULLY SUBMITTED this ___ day of _____, 2018.

DATED: Aug 20 2018 

JOHN A. MACKINNON
Attorney for Plaintiff Tate A. Rich

Cochise County Attorney

By: 
CHRISTINE J. ROBERTS
Civil Deputy County Attorney
Attorney for Defendant Cochise County

Copy of the foregoing mailed
this _____ day of _____,
2018, to:

Honorable John F. Kelliher, Jr.
Division 2

John A. MacKinnon
Law Office of John A. MacKinnon, PLLC
P.O. Box 1836
Bisbee, AZ 85603
Attorney for Plaintiff Tate A. Rich

1 BRIAN M. McINTYRE
2 COCHISE COUNTY ATTORNEY
3 By: CHRISTINE J. ROBERTS
4 Civil Deputy County Attorney
5 State Bar No. 033718
6 P.O. Drawer CA
7 Bisbee, AZ 85603
8 (520) 432-8700
9 CVAttymeo@cochise.az.gov
10 *Attorney for Defendant Cochise County*

11
12 **IN THE SUPERIOR COURT FOR THE STATE OF ARIZONA**
13 **IN AND FOR THE COUNTY OF COCHISE**

14 TATE A. RICH, a single man,) No. CV201800198
15)
16 Plaintiff,) **STIPULATED JUDGMENT**
17)
18 v.) **Judge: Hon. John F. Kelliher**
19) **Div. 2**
20 COCHISE COUNTY, a political)
21 subdivision of the State of Arizona,)
22)
23 Defendant.)

24
25 The Parties to this action having stipulated to entry of Judgment and good cause
26 appearing,

27 **IT IS ORDERED, ADJUDGED AND DECREED THAT:**

- 28 1. The only parcel subject to this judgment is parcel 103-61-018.
29 2. For tax year 2018:
- The full cash value of the subject property shall be reduced from \$120,233 to \$80,000;

Community Development

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018

Letter of Commitment for EPA Brownfield Grant Application

Submitted By: Dan Coxworth, Community Development

Department: Community Development Division: Development Services

Presentation: No A/V Presentation Recommendation: Approve

Document Signatures: BOS Signature Required # of ORIGINALS Submitted for Signature: 0

NAME of PRESENTER: Dan Coxworth TITLE of PRESENTER: Director

Docket Number (If applicable):

Mandated Function?: Not Mandated

Source of Mandate or Basis for Support?:

Information

Agenda Item Text:

Accept Letter of Commitment to have the Cochise County Board of Supervisors commitment to serve as the lead coalition member, grantee, fiscal agent for the Brownfields Coalition Assessment Grant in the amount of \$600,000, effective Fiscal Year 2019 and to be used over a three year period.

Background:

The EPA offers a competitive grant that allows for brownfield inventory and assessment of properties with asbestos and lead-based paint. Cochise County will lead a coalition of government agencies in Cochise County and coordinate efforts with a consultant to apply for and administer the grant. The grant award is for \$600k to be used over three years. No matching requirement and the county may charge up to a 5% fee to administer the grant. Intergovernmental Agreements (IGA) between the County and coalition members is also necessary. Coalition members include Cochise County, City of Sierra Vista, City of Bisbee, and the City of Douglas. The goal is to assess properties and identify funding from the State or EPA to abate the property, thereby increasing the desirability of the property to developers for redevelopment or infill.

Department's Next Steps (if approved):

Include the signed letter of commitment in the grant application.

Impact of NOT Approving/Alternatives:

Cochise County will not apply for the grant and therefore not receive funding from the EPA to inventory and assess brownfield properties in Cochise County for lead-based paint or asbestos.

To BOS Staff: Document Disposition/Follow-Up:

Please return the signed Letter of Commitment to Dan Coxworth, Development Services.

Attachments

Letter of Commitment



Cochise County Board of Supervisors

Public Programs...Personal Service
www.cochise.az.gov

PEGGY JUDD
Chairman
District 3

EDWARD T. GILLIGAN
County Administrator

PATRICK G. CALL
Vice-Chairman
District 1

ARLETHE G. RIOS
Clerk of the Board

ANN ENGLISH
Supervisor
District 2

David Lloyd
Environmental Protection Agency
1200 Pennsylvania Avenue, N.W.
Washington, DC 20460

SUBJECT: Letter of Commitment Cochise County Brownfields Coalition Assessment Grant

Please accept this letter to demonstrate the Cochise County Board of Supervisors commitment as the lead coalition member/grantee/fiscal agent for the Fiscal Year 2019 Brownfields Coalition Assessment grant. Cochise County is excited to be part of the coalition to assess properties within the County's boundaries and partner with coalition members City of Sierra Vista, City of Bisbee, and the City of Douglas. Cochise County understands the responsibilities as the lead coalition member and has the financial and personnel resources to apply and administer a Brownfields Assessment grant. We are excited about the opportunity and convinced that this grant would further economic redevelopment and environmental cleanup in our county.

Sincerely,

Peggy Judd, Chairman

Patrick G. Call, Vice-Chairman

Ann English, Supervisor

Community Development

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018

Acceptance of County Engineer's recommendation and schedule a public hearing to establish Robbs Road as a declared County Highway.

Submitted By: Teresa Murphy, Community Development

Department: Community Development Division: Right of Way

Presentation: No A/V Presentation Recommendation: Approve

Document Signatures: BOS Signature Required # of ORIGINALS Submitted for Signature: 0

NAME of PRESENTER: Jackie Watkins TITLE of PRESENTER: County Engineer

Docket Number (If applicable):

Mandated Function?: Federal or State Mandate Source of Mandate or Basis for Support?: ARS 28-6701

Information

Agenda Item Text:

Accept the County Engineer's recommendation and approve a Public Hearing for October 23, 2018 to establish a portion of Robbs Road as a County Highway.

Background:

Robbs Road is a County Maintained Road near Willcox. The surface of Robbs Road from the intersection of Kansas Settlement east some 3 miles to Wayward Winds Road is currently classified as Primitive and receives regular maintenance. Cochise County has received an opportunity to improve this segment of Robbs Road to a paved surface through the awarding of the Arizona Commerce Authority Economic Strengths Grant. The Cochise County Highway Department has been able to maintain this road due to its historical status; however, to improve the road, it is necessary to establish this portion of Robbs Road as a Declared County Highway.

Department's Next Steps (if approved):

Upon acceptance of the County Engineer's recommendation, a public hearing will be scheduled and advertised as required by statute.

Impact of NOT Approving/Alternatives:

That portion of Robbs Road will not be established as a declared County Highway and improvements will not be made to the surface of the road.

To BOS Staff: Document Disposition/Follow-Up:

Contact Teresa Murphy, ROW Agent to retrieve original signed notice asap ext. 9333

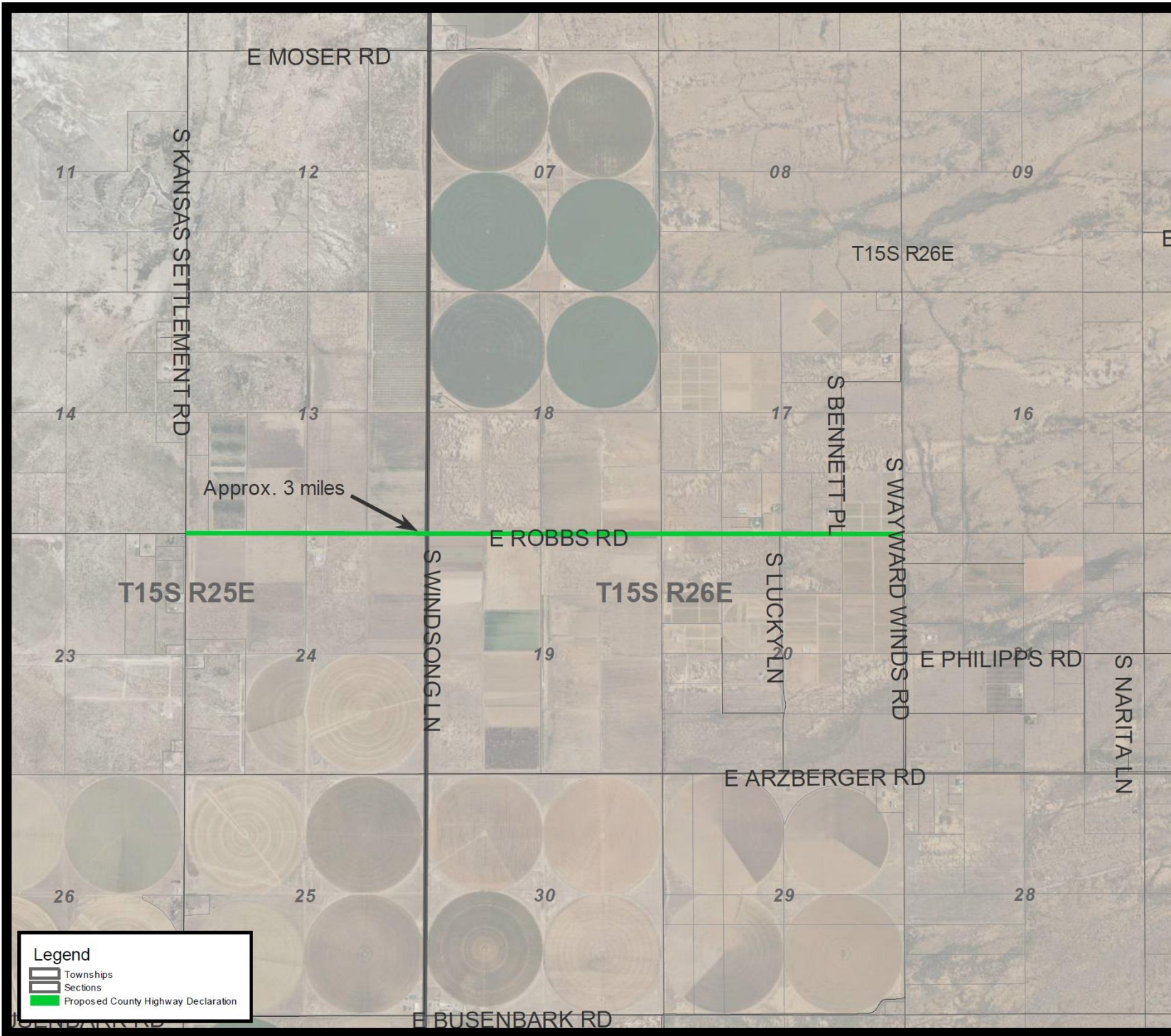
Attachments

Executive Summary Map

Executive Summary

Public Notice

Location Map

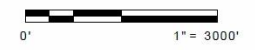


Executive Summary Map

Proposed Establishment of Robbs Road as a County Highway

Sections 13 & 24
Township 15 South
Range 25 East
&
Sections 17, 18, 19
& 20
Township 15 South
Range 26 East

This map is a product of the Cochise County GIS Information Technology Dept.



Legend

- Townships
- Sections
- Proposed County Highway Declaration



COCHISE COUNTY COMMUNITY DEVELOPMENT

"Public Programs...Personal Service"

DATE: September 12, 2018

TO: Board of Supervisors

THRU: Jackie Watkins, County Engineer

FROM: Teresa Murphy, Right-of-Way Agent

SUBJECT: Establishing Robbs Road as a Declared County Highway

Recommendation: Staff recommends accepting the County Engineer's recommendation and setting a public hearing for October 23rd, 2018 to establish a portion of Robbs Road as a County Highway.

Background (Brief): Robbs Road is a County Maintained Road near Willcox. The surface of Robbs Road from the intersection of Kansas Settlement east some 3 miles to Wayward Winds Road is currently classified as Primitive and receives regular maintenance. Cochise County has received an opportunity to improve this segment of Robbs Road to a paved surface through the awarding of the Arizona Commerce Authority Economic Strengths Grant. The Cochise County Highway Department has been able to maintain this road due to its historical status however to improve the road, it is necessary to establish this portion of Robbs Road as a Declared County Highway.

Fiscal Impact & Funding Sources: No fiscal impact for establishing a highway.

Next Steps/Action Items/Follow-up: Upon acceptance of the County Engineer's recommendation, a public hearing will be scheduled and advertised as required by statute.

Impact of Not Approving: That portion of Robbs Road will not be established as a declared County Highway and improvements will not be made to the surface of the road.

PUBLIC HEARING

ESTABLISHMENT OF A COUNTY HIGHWAY

There has been filed with the Board of Supervisors of Cochise County, Arizona, a recommendation by the County Engineer, for the establishment of a County Highway, more particularly described as follows:

That portion of Robbs Road commencing at the intersection of Robbs Road and Kansas Settlement Road, thence east approximately 3 miles, traversing Sections 13 and 24, Township 15 South, Range 25 East of the Gila and Salt River Base and Meridian, Cochise County, Arizona and further traversing Sections 17, 18, 19 & 20 Township 15 South, Range 26 East of the Gila and Salt River Base and Meridian, Cochise County, Arizona.

Notice is hereby given that Tuesday, 23rd day of October 2018, at the hour of 10:00 a.m., at the Office of the Board of Supervisors in Building G, 1415 W. Melody Lane, Bisbee, Arizona, is hereby set as the time and place for Hearing on said recommendation and all objections thereto, and all persons wishing to object to the action prayed for in the recommendation are directed to file with the Board, a statement in writing setting forth any objections, or opposition and to show cause why said recommendation should not be granted; and

That notice of said hearing be published in the San Pedro Valley News-Sun once (1) a week for two (2) consecutive weeks prior to the date of said hearing.

Dated this ___ day of _____, 2018.

Arlethe G. Rios, Clerk of the Board

Peggy Judd, Chairman
Board of Supervisors

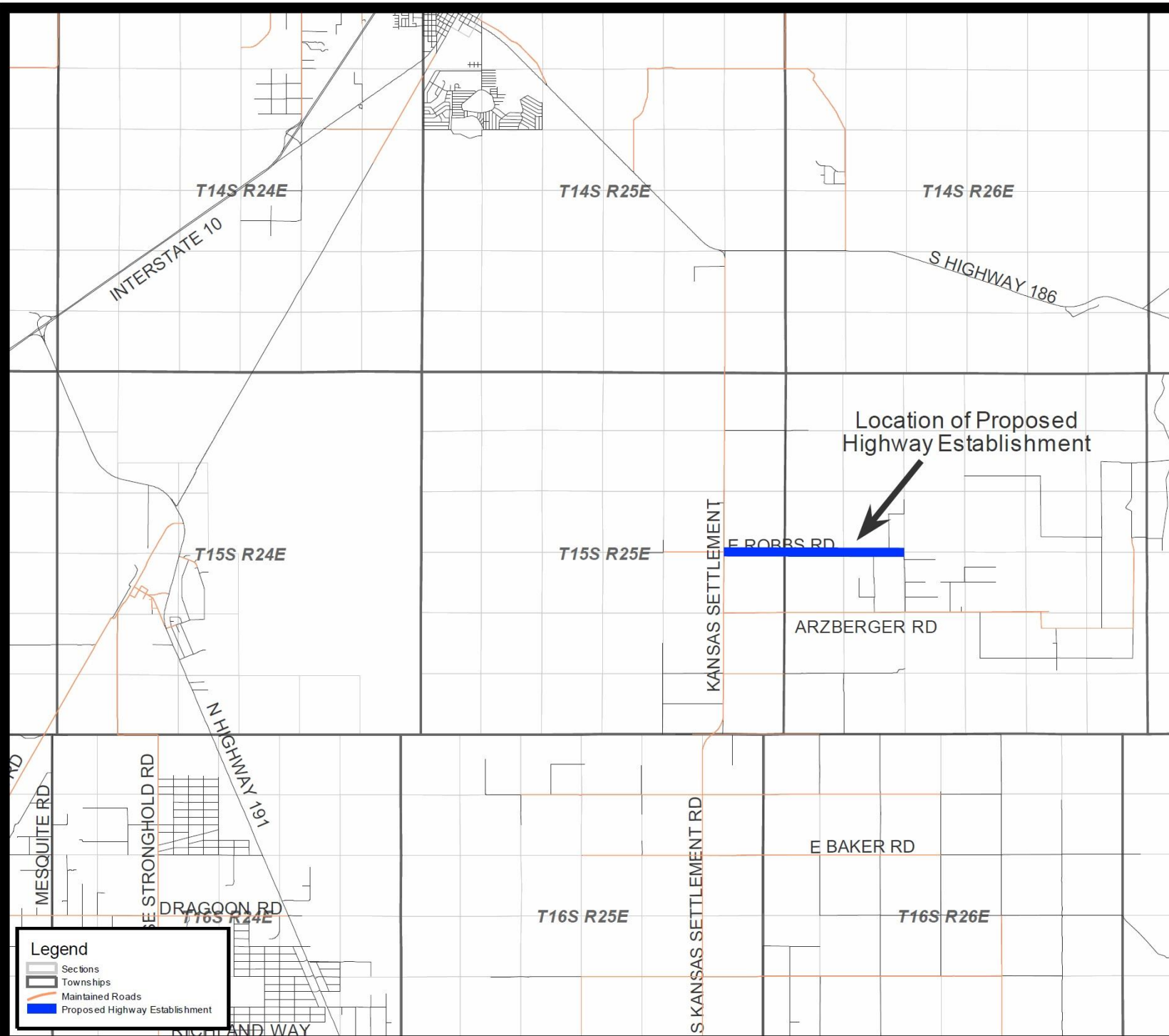


Location Map

Proposed
Establishment of
Robbs Road as a
County Highway

Sections 13 & 24
Township 15 South
Range 25 East
&
Sections 17, 18, 19
& 20
Township 15 South
Range 26 East

This map is a product of the
Cochise County GIS
Information Technology Dept.



Legend

- Sections
- Townships
- Maintained Roads
- Proposed Highway Establishment

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018

Demands

Submitted By: Melissa Belasco, Board of Supervisors

Department: Board of Supervisors

Presentation: No A/V Presentation

Document Signatures:

Recommendation:

of ORIGINALS

Submitted for Signature:

NAME n/a

TITLE n/a

of PRESENTER:

of PRESENTER:

Mandated Function?:

**Source of Mandate
or Basis for Support?:**

Information

Agenda Item Text:

Approve demands and budget amendments for operating transfers.

Background:

Auditor-General's requirement for Board of Supervisors to approve.

Department's Next Steps (if approved):

Return to Finance after BOS approval.

Impact of NOT Approving/Alternatives:

Board of Supervisors will not be in compliance with State law.

To BOS Staff: Document Disposition/Follow-Up:

Return to Finance after BOS approval.

Budget Information

Information about available funds

Budgeted:

Funds Available:

Amount Available:

Unbudgeted:

Funds NOT Available:

Amendment:

Account Code(s) for Available Funds

1:

Fund Transfers

Attachments

No file(s) attached.

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018

Bar Liquor License Rookies #2. Series 6

Submitted By: Melissa Belasco, Board of Supervisors

Department: Board of Supervisors

Presentation: No A/V **Recommendation:** Approve
Presentation

Document Signatures: BOS **# of ORIGINALS**
Signature **Submitted for Signature:**
NOT
Required

NAME of PRESENTER: Arlethe Rios **TITLE of PRESENTER:** Clerk of the Board

Mandated Function?: Not **Source of Mandate**
Mandated **or Basis for Support?:**

Docket Number (If applicable):

Information

Agenda Item Text:

Approve a Person Transfer/Location Transfer liquor license application for a series #6 (Bar) license submitted by Mr. Chiragkumar R. Patel for Rookies #2, located at 4301 S. Highway 92, Sierra Vista, AZ 85630.

Background:

Mr. Patel has applied for a series #6 Bar liquor license for Rookies #2, located at 4301 S. Highway 92, Sierra Vista, AZ 85630. The Sheriff's Office has no recommendation and the Treasurer's Office advised that the property taxes for the parcel in question are current. The Planning and Zoning Department has recommended approval of the application. There have been no formal protests to this liquor license.

The Environmental Health Department has no concerns with the issuance of the liquor license. The Health Department is will notify the applicant that he/she will be required to obtain the proper permits before operating the business.

Mr. Patel has paid the \$100.00 processing fee. Supporting documentation regarding this liquor license is attached.

Department's Next Steps (if approved):

Board staff will forward the Board's decision to the Arizona Department of Liquor License and Control.

Impact of NOT Approving/Alternatives:

A hearing on this application will be scheduled with the State Liquor Board.

To BOS Staff: Document Disposition/Follow-Up:

Send packet to ADLLC and copy of letter w/out attachments to applicant.

Budget Information

Information about available funds

Budgeted:

Funds Available:

Amount Available:

Unbudgeted:

Funds NOT Available:

Amendment:

Account Code(s) for Available Funds

1:

Fund Transfers

Attachments

Application

Department Review Forms

Affidavit of Posting



Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

DLLC USE ONLY
Job # 28933
Date Accepted: 8/17/18
CSR: [Signature]

Application for Liquor License
Type or Print with Black Ink

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE
A service fee of \$25 will be charged for all dishonored checks (A.R.S. § 44-6852)

SECTION 1 Type of License

- Interim Permit
New License
Person Transfer (series 6, 7 and 9)
Location Transfer (series 6, 7 and 9)
Probate/ Will Assignment/ Divorce Decree (No Fees)
Seasonal

Apply to become Arizona Lottery retailer

SECTION 2 Type of Ownership

- J.T.W.R.O.S.
Individual
Partnership
Corporation
Limited Liability Co
Club
Government
Trust
Tribe
Other (Explain)

AMENDMENT
28933
Rookie's #2

- SECTION 3 Type of Privilege
Add Sampling Privilege for Series 9 and 10 only (Complete Sampling Privilege application)
Add Growler privileges (restaurant, series 12 license only. 300-foot restriction applies)

1. Type of License (Series of license):
2. LICENSE #

SECTION 4 Applicants

1. Agent's Name: Patel, Chirakumar, R. (Last, First, Middle)

2. Individual/Owner Name: (Ownership name for type of ownership checked in section 2)

3. Business Name (Doing Business As-DBA): Rookie's #2

4. Business Location Address: (Do not use PO Box)

5. Mailing Address: 2239 E. Fair Blvd, Sierra Vista, AZ 85635

6. Business Phone: Daytime Contact Phone:

7. Email Address:

8. Is the Business located within the incorporated limits of the above city or town? Yes No
If you checked no, in what City, Town, County or Tribal/Indian Community is this business located?

9. Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only) \$

Department Use Only
Fees: Application, Interim Permit, Site Inspection, Finger Prints, Total of All Fees
Is Arizona Statement of Citizenship & Alien Status for State Benefits complete? Yes No



Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

DLLC USE ONLY

License # 28933
Date Accepted: 8/17/18
CSR: Jr

Application for Liquor License
Type or Print with Black Ink

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE
A service fee of \$25 will be charged for all dishonored checks (A.R.S. § 44-6852)

SECTION 1 Type of License

- Interim Permit
New License
Person Transfer (series 6, 7 and 9)
Location Transfer (series 6, 7 and 9)
Probate/ Will Assignment/ Divorce Decree (No Fees)
Seasonal

SECTION 2 Type of Ownership

- J.T.W.R.O.S.
Individual
Partnership
Corporation
Limited Liability Co
Club
Government
Trust
Tribe
Other (Explain)

SECTION 3 Type of Privilege

- Add Sampling Privilege for Series 9 and 10 only
Add Growler privileges (restaurant, series 12, license only)

1. Type of License (Series of license): #6-Bar 2. LICENSE # 06020083

SECTION 4 Applicants

- 1. Agent's Name: PATEL CHIRACKUMAR R.
2. Individual/Owner Name: SHREE GANESH ENTERPRISES, INC.
3. Business Name (Doing Business As-DBA): ROOKIES #2
4. Business Location Address: 4301 S. HIGHWAY 92 SIERRA VISTA AZ 85630 COCHISE
5. Mailing Address: 5022 E. CREAM CUPS PL. TULSON AZ 85756
6. Business Phone: PENDING Daytime Contact Phone: (520) 873-8711
7. Email Address: CHIRAGVENNABIZ@YAHOO.COM
8. Is the Business located within the incorporated limits of the above city or town? No
9. Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only) \$ 22,500.00

Department Use Only
Fees: Application Interim Permit Site Inspection Finger Prints Total of All Fees

SECTION 5 Interim Permit

If you intend to operate business while the application is pending, you will need an interim permit pursuant to A.R.S.§4-203.01. For approval of an interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for, **OR**
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S.§4-203.01(A)

1. Enter license number currently at the location: _____
2. Is the license currently in use? Yes No If no, how long has it been out of use? _____

NOTARY

I (Print Full Name) _____ hereby declare that I am the Agent, Current Owner, or Controlling Person on the stated license and location.

Signature: _____ State of _____ County of _____
 The foregoing instrument was acknowledged before me this _____ Day of _____, _____ Year

My Commission Expires on: _____ Date _____ Day _____ Month _____ Year

Signature of Notary

SECTION 6 Background Check

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. If the applicant is an entity, and not an individual, answer questions 1a-b.

a) Date Incorporated/Organized: 07/01/2013 State where Incorporated/Organized: ARIZONA

b) AZ Corporation or AZ L.L.C. File No: 18578690 Date authorized to do business in AZ: 05/31/2018

2. List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed. Disclose all controlling persons and members, shareholders or general partners who own a beneficial interest of 10% or more of the applicant or licensee.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
PATEL	CHIRAKUMAR	R.	Pres/CEO/Dia	100%	5022 E. CREAM CUPS R.	TULSON	AZ	85756

(Attach additional sheet if necessary)

SECTION 7 Probate, Receiver, Bankruptcy Trustee, Assignment, or Divorce Decree of an existing liquor license A.R.S.§4-204

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. Current Licensee's Name: _____
 (Exactly as it appears on the license) Last First Middle
2. Assignee's Name: _____
 Last First Middle
3. License Number: _____

ATTACH A COPY OF THE DOCUMENT THAT SPECIFICALLY ASSIGNS THE LIQUOR LICENSE TO THE ASSIGNEE.

SECTION 8 Government (for Cities, Towns or Counties only)

1. Government Entity: _____

2. Person/Designee: _____
Last First Middle Daytime Contact Phone #

**SECTION 9 Person to Person Transfer ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only - Series 06, 07, and 09)**

1. License #: 06020083

2. Individual Owner/Agent Name: MINAKES JR. MATHEW N/A
Last First Middle

3. Ownership Name: MINAKES JR. MATHEW
(Exactly as it appears on the license)

4. Current Business Name: DESERT STAR
(Exactly as it appears on the license)

5. Business Location Address: 3854 W. COUNTRY LN. MCNEAL AZ COCHISE 85617
Street City State County Zip

6. Current Daytime Phone: 815-345-1149 Primary Email Address: MBABER10@GMAIL.COM

7. Does current licensee intend to operate the business while this application is pending? Yes No

8. I, (Signature): _____ authorize the transfer of this license to the applicant.

MATHEW MINAKES JR. **NOTARY** *SEE ATTACHED AFFIDAVIT AND POWER OF ATTORNEY*

I (Print Full Name) BY TERESA TUBER hereby declare that I am the Individual Agent, Owner, Or Controlling Person on the stated license and location.

Signature: _____ State of _____ County of _____
The foregoing instrument was acknowledged before me this

My Commission Expires on: _____ Date _____ Day _____ Day of _____ Month _____ Year _____

ATTACHED _____
Signature of Notary

**SECTION 10 Location Transfer- Current Licensee Information ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only - Series 06, 07, and 09)**

1. Current Business: Name: DESERT STAR

Address: 3854 W. COUNTRY LN. MCNEAL, AZ 85617
(exactly as it appears on license)

2. New Business: Name: ROOKIES #2

Address: 4301 S. HIGHWAY 92 SIERRA VISTA, AZ
85630

SECTION 11 Proximity to Church or School - Questions to be completed by 6, 7, 9, 10 and 12G applicants.

A.R.S. §4-207. (A) and (B) state that no retailer's license shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12), or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building.

The above paragraph DOES NOT apply to:

- a) Restaurants that do not sell growlers (A.R.S. §4-205.02) Series 12
- b) Hotel/motel license (A.R.S. §4-205.01) Series 11
- c) Microbrewery (A.R.S. §4-205.08) Series 03
- d) Craft Distillery (A.R.S. §4-205.10) Series 18
- e) Government license (A.R.S. §4-205.03) Series 05
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 04
- h) Farm Winery Series 13
- i) Producer Series 01

1. Distance to nearest School: 1.35 miles
(If less than one (1) mile, note footage)

Name of School: MOACHULA MOUNTAIN ELEMENTARY SCHOOL
Address: 3228 ST. ANDREWS DR. SIERRA VISTA, AZ 85650

2. Distance to nearest Church: 2,678 FEET
(If less than one (1) mile, note footage)

Name of Church: LIVING WORLD FAMILY CHURCH
Address: 4060 E. MONSANTO DR. B SIERRA VISTA, AZ 85650

SECTION 12 Business Financials A.R.S. §4-202(F)

1. I am the:

- Tenant: a person who holds the lease of a property; a lessee.
- Sub-tenant: a person who holds a lease which was given to another person (tenant) for all or part of a property.
- Owner
- Purchaser
- Management Company

2. If the premises is leased give lessors: Name: N/A
Address: N/A
Street City State Zip

3. What is the penalty if the lease is not fulfilled? \$ N/A or Other: N/A

4. Total money borrowed for the Business, not including lease? \$ 100,000.00

Please List Lenders/People you owe money to for business.

Last	First	Middle	Amount Owed	Mailing Address	City	State	Zip
MACELHEENY	1999	TRUST U/A	100,000 -	219 ANACAPA ST.	SANTA BARBARA	CA	93101
DATE 02/03/1999							

(Attach additional sheet if necessary)

5. Has a license or a transfer license for the premises on this application been denied by the state within the past year?
 Yes No If yes, attach explanation.

6. Does any spirituous liquor manufacturer, wholesaler, or employee have an interest in your business?
 Yes No If yes, attach explanation.

SECTION 8 Government (for Cities, Towns or Counties only)

- 1. Government Entity: _____
- 2. Person/Designee: _____
Last First Middle Daytime Contact Phone #

**SECTION 9 Person to Person Transfer ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only - Series 06, 07, and 09)**

- 1. License #: 06020083
- 2. Individual Owner/Agent Name: MINAKES JR, MATTHEW N/A
Last First Middle
- 3. Ownership Name: MINAKES JR, MATTHEW
(Exactly as it appears on the license)
- 4. Current Business Name: DESERT STAR
(Exactly as it appears on the license)
- 5. Business Location Address: 3854 W. COUNTRY LN. McNEAL AZ COCHISE 85617
Street City State County Zip
- 6. Current Daytime Phone: 815-345-1149 Primary Email Address: MBABER10@gmail.com
- 7. Does current licensee intend to operate the business while this application is pending? Yes No
- 8. I, (Signature): _____ authorize the transfer of this license to the applicant.

NOTARY *SEE ATTACHED AFFIDAVIT AND POWER OF ATTORNEY*

I (Print Full Name) MATTHEW MINAKES JR. BY TERESA ROBER hereby declare that I am the Individual Agent, Owner, Or Controlling Person on the stated license and location.

Signature: TERESA ROBER State of IL County of McHenry
The foregoing instrument was acknowledged before me this

My Commission Expires on: 11.1.20 10 Day of August, 2018
Date Day Month Year

ROBERT S WITT
 Official Seal
 Notary Public - State of Illinois
 My Commission Expires Nov 1, 2020

[Signature]
Signature of Notary

**SECTION 10 Location Transfer- Current Licensee Information ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only - Series 06, 07, and 09)**

- 1. Current Business: Name: DESERT STAR
 Address: 3854 W. COUNTRY LN. McNEAL, AZ 85617
(exactly as it appears on license)
- 2. New Business: Name: ROOKIES #2
 Address: 4301 S. HIGHWAY 92 SIERRA VISTA, AZ
85630

JB

Bill of Sale

IN CONSIDERATION OF THE SUM OF:

*****TEN DOLLARS AND NO CENTS***** lawful currency of the United States of America, and other valuable consideration, receipt of which is hereby acknowledged, the SELLER:

Matthew Minakes, Jr., hereby grants, bargains, sells and transfers unto the BUYER:

Shree Ganesh Enterprises Inc., an Arizona Corporation, and his, her or their heirs, personal representatives, or assigns, to have and to hold forever, the following described personal property, goods or chattels:

That certain State of Arizona Liquor License #06020083

FURTHERMORE, Seller warrants that he, she or they are the lawful owner of said goods and hereby certifies, under oath, that he, she or they have good right to sell the same as aforesaid, and that the above described property is free and clear of all claims, liens and other encumbrances whatsoever, EXCEPT, as specified herein. Seller further agrees to warrant and defend same against the lawful claims and demands of all persons whomsoever.

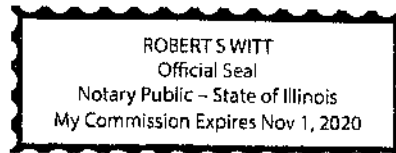
DATED: August 10, 2018



**Matthew Minakes, Jr. by Teresa Baber as
his executor of his estate**

State of IL } ss:
County of McHenry

On August 10, 2018, before me, the undersigned, a Notary Public in and for said County and State, personally appeared Matthew Minakes, Jr. by Teresa Baber as his executor of his estate personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.


Notary Public

Escrow No.: 00187168

17 JUN 23 11:49:49 AM 2017

AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

THE STATE OF Illinois)
)
COUNTY OF McHenry) ss.

Teresa M. Baber, being duly sworn, on her oath deposes and says:

1. Matthew Minakes died on August 3, 2016, in Tucson, Pima County, Arizona. More than thirty days have elapsed since the death of the decedent.

2. An application or petition for the appointment of a personal representative is not pending and a personal representative has not been appointed in any jurisdiction.

3. The value of all personal property in the decedent's estate, wherever located, less liens and encumbrances, does not exceed seventy-five thousand dollars as valued as of the date of death.

4. The affiant is one of four statutory heirs entitled to receive payment of any debt due the decedent, and is acting for herself and under authority of the attached Powers of Attorney, to collect and receive (on behalf of all statutory heirs) decedent's tangible personal property or an instrument evidencing the transfer to affiant of any debt, obligation, stock or chose in action belonging to decedent. Affiant will thereafter distribute any debt, obligation, stock or chose in action equally between the statutory heirs.

5. Decedent owned the following personal property:
ARIZONA SERIES 6 LIQUOR LICENSE
06020083

6. The affiant is entitled to receive decedent's tangible personal property belonging to decedent on behalf of all the statutory heirs.

This Affidavit is made pursuant to A.R.S. § 14-3971, as amended, for the purpose of making claim to property of the decedent.

DATED: 3-10-17

Teresa M. Baber
Teresa M. Baber

SUBSCRIBED AND SWORN TO before me on: 3/10/2017

Grace L. Mercuri
Notary Public

My Commission Expires: March 6, 2019



AFFIDAVIT

THE STATE OF Illinois)
COUNTY OF McHenry) ss.

I, Teresa M. Baber; hereby swear, upon my oath, as follows:

Matthew Minakes died on August 3, 2016.

I am acting as executor for the Estate of Matthew Minakes, making funeral arrangements, collecting property, paying final bills of decedent, and distributing any remaining assets to the heirs of Matthew Minakes. I am acting for myself and under authority of the Arizona Revised Statutes Sections 14-3971 and 14-5103, and Powers of Attorney executed by the heirs of Matthew Minakes to so act.

FURTHER AFFIANT SAYETH NOT.

DATED: 12-14-16

Teresa M. Baber
Teresa M. Baber

SUBSCRIBED AND SWORN to before me this 14th day of Dec, 2016.

[Signature]
Notary Public

My Commission Expires:

Aug 15, 2020



AZ

CERTIFICATION OF VITAL RECORDS



STATE OF ARIZONA

STATE OF ARIZONA DEPARTMENT OF HEALTH SERVICES - OFFICE OF VITAL RECORDS CERTIFICATE OF DEATH

State File NO. 102-2016-037287

17 JUN 23 11:49 AM Dept MISC07 18 AUG 17 11:49 AM PC:PM1103

Form with fields for decedent's name (MATTHEW MINAKES), date of death (78), place of death (CARONDELET ST. JOSEPHS HOSPITAL AND HEALTH CENTER), and certifier information (CYNTHIA M PORTERFIELD, D.O.).

DATE ISSUED: 09/07/2016



H 049518

This is a true certification of the facts on file with the OFFICE OF VITAL RECORDS, ARIZONA DEPARTMENT OF HEALTH SERVICES, PHOENIX, ARIZONA Revised 07/2015

Signature of Krystal Colburn, Assistant State Registrar



POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That I, Michael Minakes, hereby appoint as my attorney-in-fact, **Teresa M. Baber**, of Marengo, Illinois, to be my attorney-in-fact and to act in my place and stead with the following powers:

(a) To sign any and all documents which may be necessary or required in connection with the Estate of Matthew Minakes;

(b) To obtain, make inquiries about, discuss, negotiate and review any information from any taxing authority, including but not limited to the Arizona Department of Revenue and the Internal Revenue Service, regarding the Estate of Matthew Minakes;

(c) To receive income and/or property tax waivers from the Arizona Department of Revenue regarding the Estate of Matthew Minakes; and

(d) To collect and receive assets and/or income payable to Matthew Minakes or the Estate of Matthew Minakes.

The powers and authority hereby conferred upon my said attorney shall be applicable to all real and personal property or interests therein now owned or hereafter acquired by me and wherever situated.

GIVING AND GRANTING unto my said attorney full power and authority to do and perform all and every act and thing whatsoever requisite, necessary or appropriate to be done in and about the premises as fully to all intents and purposes as I might or could do if personally present, hereby ratifying all that my said attorney shall lawfully do or cause to be done by virtue of these present. When the context so requires, the masculine gender includes the feminine or neuter, and the singular number includes the plural.

I, Michael Minakes, the Principal, sign my name to this Power of Attorney this 14th day of DECEMBER, 2016, and being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my Power of Attorney and that I sign it willingly, or willingly direct another to sign for me, that I execute it as my free and voluntary act for the purposes expressed in the Power of Attorney and that I am eighteen years of age or older, of sound mind and under no constraint and undue influence.

Michael Minakes
Michael Minakes
512 Willow Road
Marengo, IL 60152

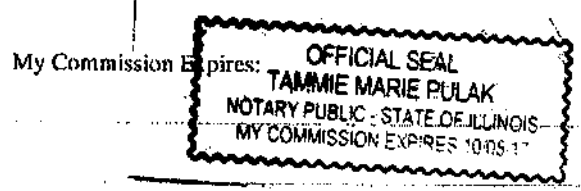
I, William D. Pulak, the Witness, sign my name to the foregoing Power of Attorney being first duly sworn and do declare to the undersigned authority that the Principal signs and executes this instrument as his Power of Attorney and that he signs it willingly, or willingly directs another to sign for him, and that I, in the presence and hearing of the Principal, sign this Power of Attorney as witness to the Principal's signing and that to the best of my knowledge the Principal is eighteen years of age or older, of sound mind and under no constraint or undue influence.

William D. Pulak
Witness

THE STATE OF ILLINOIS)
COUNTY OF McHENRY) SS.

Subscribed, sworn to and acknowledged before me by Michael Minakes, the principal, and subscribed and sworn to before me by William D. Pulak, witness, this 14th day of DECEMBER, 2016.

Tammie Marie Pulak
Notary Public



SECTION 13 Diagram of Premises

Check ALL boxes that apply to your business:

Walk-up or drive-through windows

Patio: Contiguous

Patio: Non-Contiguous within 30 feet

1. Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

Yes No If yes, what is your estimated completion date? 09/15/2018

2. What type of business will this license be used for? (be Specific) Bar/RESTAURANT

3. Please attach a diagram of the premises which clearly shows only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and kitchen.

DO NOT INCLUDE

Parking lots, living quarters or areas where business is not conducted under this liquor license. Please identify which orientation is North on the diagram.

4. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed areas such as parking lots, living quarters, etc.

ATTACH DIAGRAM

IMPORTANT NOTE: As stated in A.R.S.§4-207.01 (B), it is the licensee's responsibility to notify the Department of Liquor Licenses and Control when there are changes to the service areas or the square footage of the licensed premises, either by increase or decrease.

RESTAURANTS AND HOTELS/MOTELS ONLY

(**IMPORTANT NOTE:** A site inspection must be conducted prior to activation of the license. A \$50.00 fee for the inspection will be due and payable upon submitting this application.)

5a. Provide a detailed drawing of the kitchen and dining areas, including the locations of all kitchen equipment and dining furniture. These are required as part of the diagram. A.R.S.§4-205.02(C)

5b. Provide a restaurant operation plan.

SECTION 14 SIGNATURE BLOCK

NOTARY

I (Print Full Name) CHIRAKKUMAR R. PATEL hereby declare that I am the Individual Agent, Owner, Or Controlling Person on the stated license and location.

Signature: [Handwritten Signature] State of Arizona County of Pima

The foregoing instrument was acknowledged before me this

My Commission Expires on: 06/05/2021 Date

15TH Day of August, 2018
Day Month Year



[Handwritten Signature]
Signature of Notary

A.R.S. §41-1030. Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice

B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

D. THIS SECTION MAY BE ENFORCED IN A PRIVATE CIVIL ACTION AND RELIEF MAY BE AWARDED AGAINST THE STATE. THE COURT MAY AWARD REASONABLE ATTORNEY FEES, DAMAGES AND ALL FEES ASSOCIATED WITH THE LICENSE APPLICATION TO A PARTY THAT PREVAILS IN AN ACTION AGAINST THE STATE FOR A VIOLATION OF THIS SECTION.

E. A STATE EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE AGENCY'S ADOPTED PERSONNEL POLICY.

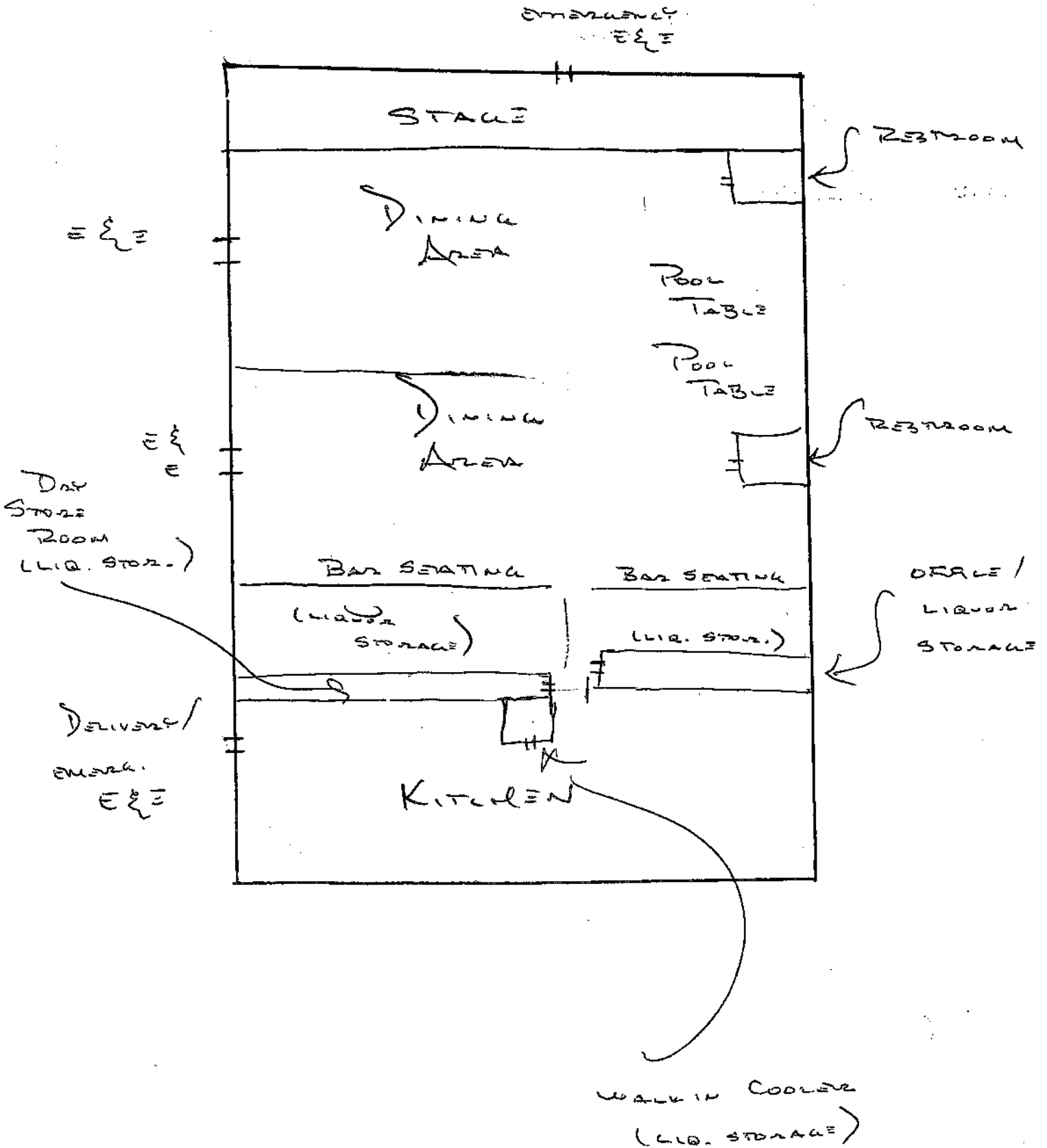
F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.

SECTION 13 CONT

18 AUG 17 LIQ. LIC. PM 104

"ZOOKIES #2"

3,300
SQ. FT.





Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

QUESTIONNAIRE
A.R.S. §4-202, 4-210
Type or Print with Black Ink

804,020

The fees allowed by R19-1-102 will be charged for all dishonored checks.

ATTENTION APPLICANT: This is a legally binding document. Please type or print in **black ink**. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

Attention local governments: Social security and birth date information is confidential. This information may be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT AND MANAGER BEING DISCLOSED TO THE DEPARTMENT. EACH PERSON COMPLETING THIS FORM MUST SUBMIT A BLUE OR BLACK LINED FINGERPRINT CARD ALONG WITH A \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE. FOR AN ADDITIONAL \$13 FEE, FINGERPRINTS MAY BE DONE AT THE DEPARTMENT OF LIQUOR WHEN ACCOMPANIED BY A COMPLETED APPLICATION.

Liquor License#: 010020083

1. Check the Appropriate Box →

<input checked="" type="checkbox"/> Controlling Person	<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Premises Manager (complete all questions except #12)
--	---	--

2. Name: PATEL CHIRAKUMAR R. Birth Date: _____
Last First Middle (NOT a public record)

3. Social Security #: _____ Driver License #: _____ State: ARIZONA

4. Place of birth: AMAD GUZARAT INDIA Height: 5'06" Weight: 190 Eyes: BRO Hair: BRO
City State COUNTRY (not County)

5. Name of current/most recent spouse: PATEL VERNA ASUTOSH Birth Date: _____
Last First Middle (NOT a public record)

6. Are you a bona fide resident of Arizona? Yes No If yes, what is your date of residency: 06/08/2007

7. Daytime telephone number: (520) 873-8711 E-mail address: CHIRAKVERNABIZ@YAHOO.COM

8. Business Name: ROOKIES #2 Business Phone: PENDING

9. Business Location Address: 4301 S. HIGHWAY 92 SIERRA VISTA AZ COCHISE 85630
Street (do not use PO Box) City State County Zip

10. List your employment or type of business during the past five (5) years. If unemployed, retired, or student, list residence address.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
07/2013	CURRENT	OWNER	ROOKIES 2239 E. FAY BLVD. SIERRA VISTA, AZ 85635
06/2007	02/2018	ASST. MANAGER	7-11 #17403 E 1080 N. COLUMBUS BLVD. TULSON, AZ 85711
11/2010	07/2017	MANAGER	7-11 23347 D 3856 E. 5TH ST. TULSON, AZ 85710

(ATTACH ADDITIONAL SHEET IF NECESSARY)

11. Provide your residence address information for the last five (5) years: A.R.S. §4-202(D)

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
03/2011	CURRENT	5022 E. CREAM CUPS PL. TULSON, AZ 85756


(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, then answer #13 below. if NO, skip to #14. Yes No
13. Have you attended a DLLC approved Basic & Management Liquor Law Training Course within the past 3 years? Yes No
14. Have you been cited, arrested, indicted, convicted, or summoned into court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years? Yes No
15. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses pending against you? (Do not include civil traffic tickets.) A.R.S. §4-210 Yes No
16. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No
17. Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No
18. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No

**If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement.
Give complete details including dates, agencies involved and dispositions.
CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED**

NOTARY

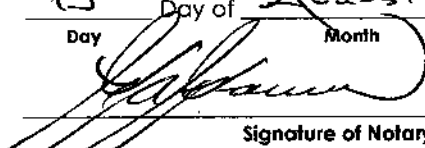
I (Print Full Name) CHIZAKKUMAR R. PATEL hereby declare that I am the Agent/ Controlling Person / Premises Manager filing this application. I have read this document and verify the contents and all statements are true, correct and complete, to the best of my knowledge.

Signature:  State of Arizona County of Pima

The foregoing instrument was acknowledged before me this 15TH Day of AUGUST 2018

My Commission Expires on: 06/05/2021 Day Month Year

OFFICIAL SEAL
KEVIN A KRAMBER
Notary Public - State of Arizona
PIMA COUNTY
My Comm. Expires June 5, 2021


Signature of Notary

The licensee has authorized the person named on this questionnaire to act as manager for the above License.

PRINT NAME: _____ SIGNATURE: _____



State of Arizona
 Department of Liquor Licenses and Control
 800 W. Washington 5th Floor
 Phoenix, AZ 85007
 (602) 542-5141

'18 AUG 17 11:47 AM 104

**ARIZONA STATEMENT OF CITIZENSHIP
 OR ALIEN STATUS FOR STATE PUBLIC BENEFITS**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I – APPLICANT INFORMATION

INDIVIDUAL OWNER/AGENT NAME (Print or type) CHIRACKUMAR R. PATEL

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States? Yes No

If Yes, indicate place of birth:

City LAHORE State (or equivalent) GUJARAT Country or Territory INDIA

If you answered Yes, 1) Attach a legible copy of a document from the attached list.

2) Name of document: US PASSPORT
 Go to Section IV.

If you answered No, you must complete Section III and IV.

SECTION III – ALIEN STATUS DECLARATION

To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status.

Name of document provided

Qualified Alien Status (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.
- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban/Haitian entrant.
- 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States.

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Non immigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

Alien Paroled into the United States for Less Than One Year (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.];
- 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present

- 14. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).

SECTION IV - DECLARATION

All applicants must complete this section.

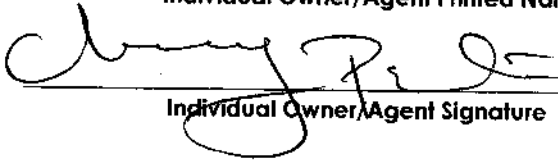
I declare under penalty of perjury under the laws of the state of Arizona that the answers and evidence I have given are true and correct to the best of my knowledge.

CHIZAKKUMAR R. PATEL

Individual Owner/Agent Printed Name

08/15/2018

Today's Date



Individual Owner/Agent Signature

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
4. A United States certificate of birth abroad.
5. A United States passport. ***Passport must be signed***
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

Certificate # _____

Certificate of Completion For Title 4 **BASIC** Liquor Law Training

<input checked="" type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input type="checkbox"/>	On- and off-sale

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

Chinakkumar Patel
Full Name (please print)

[Signature]
Signature

AUGUST 5, 2018
Training Completion Date

AUGUST 5, 2021
Certificate Expiration Date
(three years from completion date)

18 AUG 17 4:11 PM 104

Training Provider Information

AZLiquorTraining.com
Company Name

536 East Wagon Bluff Drive Tucson, AZ 85704
Mailing Address

(520) 235-5684
Daytime Contact Phone Number

I, KEVIN A. KRAMBER, certify that the above named individual did successfully complete Title 4 BASIC Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

[Signature]
Instructor Signature

05 / 08 / 2018
Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

- | | | | |
|----------------------------------|----------------------------------|--------------------------|--------------------------------------|
| In-state Microbrewery (series 3) | Government (series 5) | Bar (series 6) | Beer & Wine Bar (series 7) |
| Conveyance (series 8) | Liquor Store (series 9) | Private Club (series 14) | Hotel/Motel w/restaurant (series 11) |
| Restaurant (series 12) | In-state Farm Winery (series 13) | | Beer & Wine Store (series 10) |

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

Certificate # DhEC6LPvxA

Certificate of Completion For On/Off Premise Management (2 hours)

<input type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input checked="" type="checkbox"/>	On- and off-sale

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

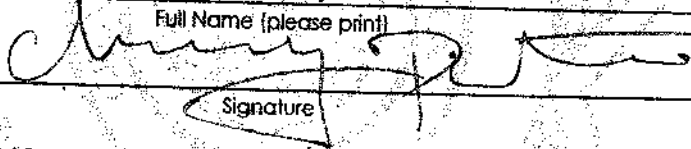
The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

Chiragkumar patel

Full Name (please print)



Signature

April 19, 2018

Training Completion Date

April 19, 2021

Certificate Expiration Date
(three years from completion date)

Training Provider Information

AzLiquorTraining.com

Company Name

536 E. Wagon Bluff Drive, Tucson, AZ 85704

Mailing Address

(520) 235-5684

Daytime Contact Phone Number

I, KEVIN A. KRAMBER (ON LINE), certify that the above named individual did successfully complete Title 4 BASIC Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

Instructor Name (please print)



Instructor Signature

19 / 04 / 2018
Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training:

- owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
- licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)	Government (series 5)	Bar (series 6)	Beer & Wine Bar (series 7)
Conveyance (series 8)	Liquor Store (series 9)	Private Club (series 14)	Hotel/Motel w/restaurant (series 11)
Restaurant (series 12)	In-state Farm Winery (series 13)		Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

*18 AUG 17 10:49 AM 1 04



License 06020083 (pending) - 006 Bar
 ROOKIE'S #2 (SHREE GANESH...

Seized

→ License History

Issued:

Reverted

Preview License Certificate

Original Issue f

Seasonal

Parent License:

Details

Conditions

Jobs

Warnings

Case Notes

Documents

Letters

Related Information

Premises

ROOKIE'S #2 (Bar)
 4301 S HIGHWAY 92



Amendment
 Amendment #28933 (In Review) - Location / Owner Tra...
 License: 06020083 - ROOKIE'S #2 (SHREE GANESH ENTERPRISES INC)

Licensee (Legal Entity)

SHREE GANESH ENTERPRISES INC
 Corporation



Agent (Legal Entity)

CHIRAGKUMAR R. PATEL
 Individual



*Region:

*Risk Factor:

STATE OF ARIZONA
DEPARTMENT OF LIQUOR LICENSES
AND CONTROL
ALCOHOLIC BEVERAGE LICENSE

BAR

License 06020083

Issue Date: 8/1/2018 Expiration Date: 6/30/2019

Issued To:
MATTHEW MINAKES JR., Owner
Location:
DESERT STAR
3854 W COUNTRY LANE
MCNEAL, AZ 85617
USA



Mailing Address:
MATTHEW MINAKES JR.
DESERT STAR
2014 FRINGLE DRIVE
MARENGO, IL 60152
USA

MINAKES

EXP 6/30/2019

POST THIS LICENSE IN A CONSPICUOUS PLACE

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

APPLICANT INFORMATION

Applicant Name: Chiragkumar R. Patel Address: 4301 S. Highway 92
Business Name: Rookies #2 City/Zip: Sierra Vista 85630
Liquor License #: Job#28933 Parcel #: 107-66-069
Ownership Type: Corporation Liquor License Special Event Liquor License
Partner(s): _____

TO BE COMPLETED BY THE ENVIRONMENTAL HEALTH DEPARTMENT


We would like to request your assistance in reviewing the attached application.

Please provide any pertinent information for the Board's consideration:

OTHER PERTINENT INFORMATION FOR THE BOARD'S CONSIDERATION:

The Health Department will notify the applicant that he/she will be required to obtain the proper permits before operating the business.

The Health Department is currently working with the property owner on health-related issues with the subject property.

Name: Michael McGee Title: Interim Env Health Director
Signature:  Date: 8/22/18
Contact phone: 520-586-8206 Email: mmcgee@cochise.az.gov

Return completed form with any attachments by: 8/29/2018

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

APPLICANT INFORMATION

Applicant Name: Chiragkumar R. Patel Address: 4301 S. Highway 92
Business Name: Rookies #2 City/Zip: Sierra Vista 85630
Liquor License #: Job# 28933 Parcel #: 107-66-069
Ownership Type: Corporation Liquor License Special Event Liquor License
Partner(s): _____

TO BE COMPLETED BY THE TREASURER'S OFFICE

Please advise if the property taxes for the parcel in question are current.

xxx Yes No

If not, please attach pertinent documentation.

Comments:

Name: KATHLEEN WILSON Title: TAX SPECIALIST 1
Signature: KATHLEEN WILSON Date: 8/22/2018
Contact phone: 520-432-8404 Email: kwilson@cochise.az.gov

Return completed form with any attachments by: 8/29/2018

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-0200

Fax (520) 432-5016

APPLICANT INFORMATION

Applicant Name: Chiragkumar R. Patel Address: 4301 S. Highway 92
Business Name: Rookies #2 City/Zip: Sierra Vista 85630
Liquor License #: Job#28933 Parcel #: 107-66-069
Ownership Type: Corporation Liquor License Special Event Liquor License
Partner(s): _____

TO BE COMPLETED BY THE SHERIFF'S OFFICE

Please advise if:

1. There have been a significant number of incidents at the named location within five (5) years prior to the application.

If so, please attach pertinent documentation.

Comments: The Sheriff's Office has not had to respond to a significant number of incidents to the above location within the last 5-years.

Based on the above information, the Sheriff's Office recommendation to the Board of Supervisors is:	Approval	Disapproval	No Recommendation
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Name: Richard Morales Title: Lieutenant
Signature: [Signature] Date: 08/23/18
Contact phone: (520)805-5672 Email: RDMorales@cochise.az.gov

Return completed form with any attachments by: 8/29/18

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

For internal use only:

- Restaurant/Hotel-Motel
- Club/Government
- Transfer of Premises

APPLICANT INFORMATION

Applicant Name: Chiragkumar R. Patel Address: 4301 S. Highway 92
 Business Name: Rookies #2 City/Zip: Sierra Vista 85630
 Liquor License #: Job#28933 Parcel #: 107-66-069
 Ownership Type: Corporation Liquor License Special Event Liquor License
 Partner(s): _____

TO BE COMPLETED BY THE PLANNING & ZONING DEPARTMENT

Please advise if, at the time the application was filed:

1. The premises for which the license is being applied for is within 300 horizontal feet of a church; or
2. The premises for which the license is being applied for is within 300 horizontal feet of a public or private school, or a fenced recreation area adjacent to a school building.

If so, please attach pertinent documentation and drawings or maps.

Comments: Proposed area not within 300 horizontal feet of a church, public or private school, or fenced recreation area adjacent to a school building.

Based on the above information, the Planning and Zoning Department's recommendation to the Board of Supervisors is:	Approval <input checked="" type="checkbox"/>	Disapproval <input type="checkbox"/>
---	---	---

OTHER PERTINENT INFORMATION FOR THE BOARD'S CONSIDERATION:

Proper Zoning? Y N Zoning: GB – General Business
 Use permitted by P&Z? Y N Permit#: Unable to locate permit parcel file.
 Date Permit Issued: 1980 Use Permitted: Restaurant
 If use not permitted, is it LNC? Y N Year LNC Established: N/A

- The Planning Department will notify the applicant that if any construction is proposed, a Non-Residential Permit must first be submitted and approved by this Department, or if there is a lapse of 12 months of non-operation of the business, a Non-Residential Permit will be required to re-establish the use from this Department.
- The Planning Department will notify the applicant that he/she will be required to obtain the proper permits before operating the business.
- The Planning Department is currently working with the property owner on several zoning-related issues with the subject property.
- The Planning Department is currently working with the property owner on obtaining the proper permits to operate the business.

Name: Dora V Amaya Title: Zoning Administrator
 Signature: Dora V Amaya Date: August 24, 2018
 Contact phone: 520.803.3960 Email: damaya@cochise.az.gov

Return completed form with any attachments by: 8/29/18



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

AFFIDAVIT OF POSTING

Date of Posting: 8-24-18 Date of Posting Removal: 9-17-18

Applicant's Name: Patel Chiragkumar R.
Last First Middle

Business Address: 4301 S. Highway 92 Sierra Vista 85630
Street City Zip

Job License #: 28933

I hereby certify that pursuant to A.R.S. 4-201, I posted notice in a conspicuous place on the premises proposed to be licensed by the above applicant and said notice was posted for at least twenty (20) days.

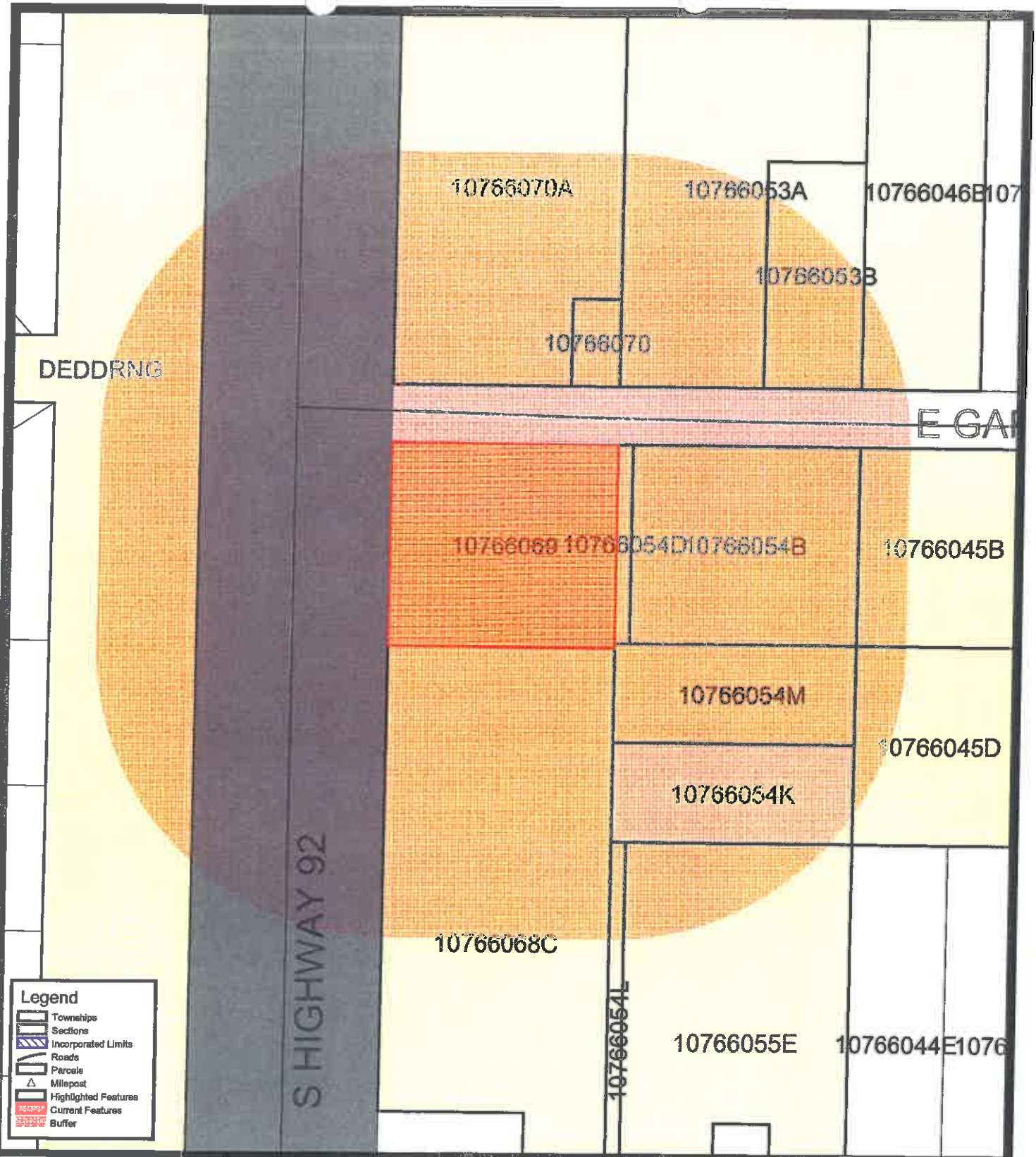
CHRIS Saylor CODE COMPLIANCE OFFICER 520-803-3963
Print Name of City/County Official Title Phone Number

Chris Saylor 9-17-18
Signature Date Signed

Return this affidavit with your recommendations (i.e., Minutes of Meeting, Verbatim, etc.) or any other related documents. If you have any questions please call (602) 542-5141 and ask for the Licensing Division.

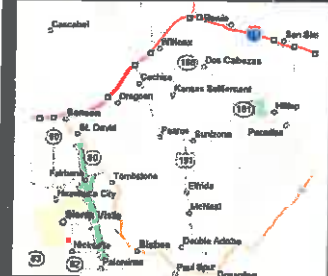


09/17/2018



Legend

- Township
- Sections
- Incorporated Limits
- Roads
- Parcels
- Milepost
- Highlighted Features
- Current Features
- Buffer



107-66-069
Liquor License Review

This map is a product of the Cochise County GIS Information Technology Dept.

Regular Board of Supervisors Meeting

Meeting Date: 09/25/2018
WIC & BFPC & FMNP Services
Submitted By: Briggita Hodges, Health & Social Services
Department: Health & Social Services
Presentation: No A/V Presentation
Document Signatures: BOS Signature NOT Required

Recommendation: Approve
of ORIGINALS Submitted for Signature: 0
TITLE of PRESENTER: Prevention Director
Source of Mandate or Basis for Support?:

NAME of PRESENTER: Judy Gilligan
Mandated Function?: Not Mandated

You will use this Agenda Item template if your item involves a Grant (whether a new or renewal grant). You also must attach the Grant Approval Form to the item before Finance will approve it. Select the SPECIAL LINKS on your left-hand menu and Click on "Grant Approval Form". Then complete the form, save it and attach it to your item (on the Attachments tab).

Information

Agenda Item Text:

Approve Intergovernmental Agreement (IGA) ADHS19-207425 for Women Infant Children Services (WIC) and the Breastfeeding Peer Counselor Program (BFPC) between the Arizona Department of Health Services and Cochise Health and Social Services with funding for Fiscal Year 2019 in the amounts of \$581,930 for WIC and \$48,500 for BFPC, effective October 1, 2018 through September 30, 2023.

Background:

The WIC Program is a supplemental nutrition program for income-eligible women, infants, and children, providing local families with nutrition education and referrals to social services within the county. The program also provides food vouchers to clients for a variety of nutritionally healthy staple foods, including milk, eggs, juice, fruit, vegetables, meat, peanut butter, and beans.

The Breastfeeding Peer Counselor Program provides counseling and support services that complement the WIC-provided breastfeeding education by allowing for additional, more in-depth education by a peer counselor trained through a breastfeeding curriculum. The goal of the BFPC program is to increase the incidence and duration of breastfeeding for all breastfeeding women in Cochise County.

IGA ADHS19-207425 is based on an annual WIC caseload of 3,500.

Department's Next Steps (if approved):

Your approvals are respectfully requested.

Impact of NOT Approving/Alternatives:

The WIC Program has provided nutrition services to low-income families in Cochise County for over 30 years. Approximately 3,500 county residents would be impacted by the discontinuation of the WIC and BFPC Programs. During these tough economic times, Cochise County families depend on the WIC Program to help meet their nutritional needs

To BOS Staff: Document Disposition/Follow-Up:

N/A

Budget Information

Information about available funds

Budgeted: **Funds Available:** **Amount Available:** 630430.00
Unbudgeted: **Funds NOT Available:** **Amendment:**

Account Code(s) for Available Funds

1:

Fund Transfers

Fiscal Year: 2019

One-time Fixed Costs? (\$\$\$):

Ongoing Costs? (\$\$\$):

County Match Required? (\$\$\$):

A-87 Overhead Amt? (Co. Cost Allocation \$\$\$): 242950.00

Source of Funding?:

Fiscal Impact & Funding Sources (if known):

The WIC and BFPC grants are cost-reimbursement, with the total net county subsidy of \$215,239, calculated as follows:

Attachments

[Executive Summary](#)
[Grant Approval Form](#)
[IGA Contract](#)

Executive Summary Form

Agenda Number: 4196

Recommendation:

Approval of IGA ADHS19-207425 for WIC Services (WIC) and the Breastfeeding Peer Counselor Program (BFPC) between the Arizona Department of Health Services and Cochise Health and Social Services for the period of 10/1/2018 – 9/30/2023, with FY19 funding of \$581,930 for WIC and \$48,500 for BFPC.

Background (Brief):

The WIC Program is a supplemental nutrition program for income-eligible women, infants, and children, providing local families with nutrition education and referrals to social services within the county. The program also provides food vouchers to clients for a variety of nutritionally healthy staple foods, including milk, eggs, juice, fruit, vegetables, meat, peanut butter, and beans.

The Breastfeeding Peer Counselor Program provides counseling and support services that complement the WIC-provided breastfeeding education by allowing for additional, more in-depth education by a peer counselor trained through a breastfeeding curriculum. The goal of the BFPC program is to increase the incidence and duration of breastfeeding for all breastfeeding women in Cochise County.

IGA ADHS19-207425 is based on an annual WIC caseload of 3,500.

Fiscal Impact & Funding Sources:

The WIC and BFPC grants are cost-reimbursement, with the total net county subsidy of \$215,239, calculated as follows:

Grant	Amount	Salaries + ERE's	Negotiated Overhead	A-87 OH @46.98%	Net Co. Subsidy
WIC	\$581,930	\$474,183	\$27,711	\$222,771	\$195,060
BFPC	\$48,500	\$42,951	\$0	\$20,178	\$20,178
FM	"As Needed"	\$0	\$0	\$0	\$0
Total:	\$630,430	\$517,134	\$27,711	\$242,950	\$215,239

Next Steps/Action Items/Follow-up:

Your approvals are respectfully requested.

Impact of Not Approving:

The WIC Program has provided nutrition services to low-income families in Cochise County for over 30 years. Approximately 3,500 county residents would be impacted by the discontinuation of the WIC and BFPC Programs. During these tough economic times, Cochise County families depend on the WIC Program to help meet their nutritional needs.

COCHISE COUNTY GRANT APPROVAL FORM

Form Initiator:

Date Prepared:

Point of Contact:

Phone Number:

Department:

PRIMARY GRANT

Primary Grantor:

CFDA:
www.CFDA.gov

Grant Title:

Grant Term From:

To:

Total Award Amount:

New Grant: Yes No

Grant No:

Amendment: Yes No

Amendment No:

GL Account No:

If new, Finance will assign a fund number.

Strategic Plan:

District:

Mandated by Law

Yes

No

Number of Positions Funded:

Asset(s) Acquired:

Grantor's reimbursement mileage rate:

Health or pension reimbursement:

Other reimbursement:

Briefly describe the purpose of the grant:

If this is a mandated service, cite the source. If not mandated, cite indications of local customer support for this service.

PRIMARY FUNDING SOURCE

Funding Year: Federal Funds 332.100

State Funds 336.100

County Funds 391.000

Other Funds:

Total Funds:

Has this amount been budgeted? Yes No

Method of collecting funds: Lump Sum Quarterly Draw Reimbursement

Is revertment of unexpected funds required at the end of grant period? Yes No

(a) Total indirect (A-87) Cost Allocation:

(b) Amount of overhead allowed by grant:

County Subsidy (a) - (b) =

Is there a Secondary Grant Award associated with this Grant? Yes No

Name of Grant:

Funder:

If yes please complete an additional grant approval form.

Is County match required? Yes No

County match source:

County match dollar amount or percentage:

NOTE: Please attach this Grant Approval form to the AgendaQuick item. The AgendaQuick "Grant Approval template" must be used. Once approved by the Board of Supervisors, the department is responsible for sending a copy of the fully executed GRANT DOCUMENT (not this approval form) to the Finance Department.



INTERGOVERNMENTAL AGREEMENT (IGA)

Contract No. ADHS19-207425

ARIZONA DEPARTMENT OF HEALTH SERVICES
150 North 18th Avenue, Suite 260
Phoenix, Arizona 85007
(602) 542-1045
(602) 542-1741 FAX

Project Title: WIC, BFPC, FMNP AND ONED SERVICES

Begin Date: October 1, 2018

Geographic Service Area: STATE OF ARIZONA

Termination Date: September 30, 2023

Arizona Department of Health Services has authority to contract for services specified herein in accordance with A.R.S. §§ 11-951, 11-952, 36-104 and 36-132. The Contractor represents that it has authority to contract for the performance of the services provided herein pursuant to:

- Counties:** A.R.S. §§ 11-201, 11-951, 11-952 and 36-182.
- Indian Tribes:** A.R.S. §§ 11-951, 11-952 and the rules and sovereign authority of the contracting Indian Nation.
- School Districts:** A.R.S. §§ 11-951, 11-952, and 15-342.
- City of Phoenix:** Chapter II, §§ 1 & 2, Charter, City of Phoenix.
- City of Tempe:** Chapter 1, Article 1, §§ 1.01 & 1.03, Charter, City of Tempe.

Amendments signed by each of the parties and attached hereto are hereby adopted by reference as a part of this Contract, from the effective date of the Amendment, as if fully set out herein.

Arizona Transaction (Sales) Privilege: _____ Federal Employer Identification No.: _____ Tax License No.: _____ Contractor Name: Cochise Health and Social Services Address: 1415 Melody Lane, Building A, Bisbee, AZ 85603	<p style="text-align: center;">FOR CLARIFICATION, CONTACT:</p> Name: _____ Phone: _____ FAX No: _____ E-mail: _____
<p style="text-align: center;">CONTRACTOR SIGNATURE:</p> The Contractor agrees to perform all the services set forth in the Agreement and Work Statement.	<p>This Contract shall henceforth be referred to as Contract No. <u>ADHS19-207425</u>. The Contractor is hereby cautioned not to commence any billable work or provide any material, service or construction under this Contract until Contractor receives a fully executed copy of the Contract.</p> <p>State of Arizona Signed this _____ day of _____, 201_</p>
Signature of Person Authorized to Sign Date Print Name and Title	<p style="text-align: center;">Procurement Officer</p>
<p>CONTRACTOR ATTORNEY SIGNATURE:</p> Pursuant to A.R.S. § 11-952, the undersigned Contractor's Attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of Arizona.	<p>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 the proper form and is within the powers granted under the laws of the State of Arizona to those parties to the Agreement represented by the Attorney General. The Attorney General, BY:</p>
<p><i>Christine J. Roberts</i> August 9, 2018</p> Signature of Person Authorized to Sign Date Christine J. Roberts, Civil Deputy County Attorney	<p style="text-align: center;">Signature Date</p> Assistant Attorney General:
Print Name and Title	

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
ADHS19-207425	

- 1. Definition of Terms.** As used in this Contract, the terms listed below are defined as follows:
- 1.1 "Attachment" means any document attached to the Contract and incorporated into the Contract.
 - 1.2 "ADHS" means Arizona Department of Health Services.
 - 1.3 "Budget Term" means the period of time for which the contract budget has been created and during which funds should be expended.
 - 1.4 "Change Order" means a written order that is signed by a Procurement Officer and that directs the Contractor to make changes authorized by the Uniform Terms and Conditions of the Contract.
 - 1.5 "Contract" means the combination of the Uniform and Special Terms and Conditions, the Specifications and Statement or Scope of Work, Attachments, Referenced Documents, any Contract Amendments and any terms applied by law.
 - 1.6 "Contract Amendment" means a written document signed by the Procurement Officer and the Contractor that is issued for the purpose of making changes in the Contract.
 - 1.7 "Contractor" means any person who has a Contract with the Arizona Department of Health Services.
 - 1.8 "Cost Reimbursement" means a contract under which a contractor is reimbursed for costs, which are reasonable, allowable and allocable in accordance with the contract terms and approved by ADHS.
 - 1.9 "Days" means calendar days unless otherwise specified.
 - 1.10 "Fixed Price" establishes a set price per unit of service. The set price shall be based on costs, which are reasonable, allowable and allocable.
 - 1.11 "Gratuity" means a payment, loan, subscription, advance, deposit of money, services, or anything of more than nominal value, present or promised, unless consideration of substantially equal or greater value is received.
 - 1.12 "Materials" unless otherwise stated herein, means all property, including but not limited to equipments, supplies, printing, insurance and leases of property.
 - 1.13 "Procurement Officer" means the person duly authorized by the State to enter into and administer Contracts and make written determinations with respect to the Contract.
 - 1.14 "Purchase Order" means a written document that is signed by a Procurement Officer, that requests a vendor to deliver described goods or services at a specific price and that, on delivery and acceptance of the goods or services by ADHS, becomes an obligation of the State.
 - 1.15 "Services" means the furnishing of labor, time or effort by a Contractor or Subcontractor.
 - 1.16 "Subcontract" means any contract, express or implied, between the Contractor and another party or between a subcontractor and another party delegating or assigning, in whole or in part, the making or furnishing of any material or any service required for the performance of this Contract.
 - 1.17 "State" means the State of Arizona and/or the ADHS. For purposes of this Contract, the term "State" shall not include the Contractor.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
ADHS19-207425	

2. Contract Type.

This Contract shall be:

- Fixed Price
 Cost Reimbursement

3. Contract Interpretation.

- 3.1. Arizona Law. The law of Arizona applies to this Contract including, where applicable, the Uniform Commercial Code as adopted by the State of Arizona.
- 3.2. Implied Contract Terms. Each provision of law and any terms required by law to be in this Contract are a part of this Contract as if fully stated in it.
- 3.3. Contract Order of Precedence. In the event of a conflict in the provisions of the Contract, as accepted by the State and as they may be amended, the following shall prevail in the order set forth below:
- 3.3.1. Terms and Conditions;
 - 3.3.2. Statement or Scope of Work;
 - 3.3.3. Attachments; and
 - 3.3.4. Referenced Documents.
- 3.4. Relationship of Parties. The Contractor under this Contract is an independent Contractor. Neither party to this Contract shall be deemed to be the employee or agent of the other party to the Contract.
- 3.5. Severability. The provisions of this Contract are severable. Any term or condition deemed illegal or invalid shall not affect any other term or condition of the Contract.
- 3.6. No Parole Evidence. This Contract is intended by the parties as a final and complete expression of their agreement. No course of prior dealings between the parties and no usage of the trade shall supplement or explain any terms used in this document.
- 3.7. No Waiver. Either party's failure to insist on strict performance of any term or condition of the Contract shall not be deemed a waiver of that term or condition even if the party accepting or acquiescing in the nonconforming performance knows of the nature of the performance and fails to object to it.
- 3.8. Headings. Headings are for organizational purposes only and shall not be interpreted as having legal significance or meaning.

4. Contract Administration and Operation.

- 4.1. Term. As indicated on the signature page of the Contract, the Contract shall be effective as of the Begin Date and shall remain effective until the Termination Date.
- 4.2. Contract Renewal. This Contract shall not bind, nor purport to bind, the State for any contractual commitment in excess of the original Contract period. The term of the Contract shall not exceed five years. However, if the original Contract period is for less than five years, the State shall have the right, at its sole option, to renew the Contract, so long as the original Contract period together with the renewal periods does not exceed five years. If the State exercises such rights, all terms, conditions and provisions of the original Contract shall remain the same and apply during the renewal period with the exception of price and Scope of Work, which may be renegotiated.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
ADHS19-207425	

- 4.3. New Budget Term. If a budget term has been completed in a multi-term Contract, the parties may agree to change the amount and type of funding to accommodate new circumstances in the next budget term. Any increase or decrease in funding at the time of the new budget term shall coincide with a change in the Scope of Work or change in cost of services as approved by the Arizona Department of Health Services.
- 4.4. Non-Discrimination. The Contractor shall comply with State Executive Order No. 2009-09 and all other applicable Federal and State laws, rules and regulations, including the Americans with Disabilities Act.
- 4.5. Records and Audit. Under A.R.S. § 35-214 and A.R.S. § 35-215, the Contractor shall retain and shall contractually require each subcontractor to retain all data and other records (“records”) relating to the acquisition and performance of the Contract for a period of five years after the completion of the Contract. All records shall be subject to inspection and audit by the State and where applicable the Federal Government at reasonable times. Upon request, the Contractor shall produce a legible copy of any or all such records.
- 4.6. Financial Management. For all contracts, the practices, procedures, and standards specified in and required by the Accounting and Auditing Procedures Manual for the ADHS funded programs shall be used by the Contractor in the management of Contract funds and by the State when performing a Contract audit. Funds collected by the Contractor in the form of fees, donations and/or charges for the delivery of these Contract services shall be accounted for in a separate fund.
- 4.6.1. *Federal Funding*. Contractors receiving federal funds under this Contract shall comply with the certified finance and compliance audit provision of the Office of Management and Budget (OMB) Circular A-133, if applicable. The federal financial assistance information shall be stated in a Change Order or Purchase Order.
- 4.6.2. *State Funding*. Contractors receiving state funds under this Contract shall comply with the certified compliance provisions of A.R.S. § 35-181.03.
- 4.7. Inspection and Testing. The Contractor agrees to permit access, at reasonable times, to its facilities.
- 4.8. Notices. Notices to the Contractor required by this Contract shall be made by the State to the person indicated on the signature page by the Contractor, unless otherwise stated in the Contract. Notices to the State required by the Contract shall be made by the Contractor to an ADHS Procurement Officer, unless otherwise stated in the Contract. An authorized ADHS Procurement Officer and an authorized Contractor representative may change their respective person to whom notice shall be given by written notice, and an amendment to the Contract shall not be necessary.
- 4.9. Advertising and Promotion of Contract. The Contractor shall not advertise or publish information for commercial benefit concerning this Contract without the prior written approval of an ADHS Procurement Officer.
- 4.10. Property of the State.
- 4.10.1. *Equipment*. Except as provided below or otherwise agreed to by the parties, the title to any and all equipment acquired through the expenditure of funds received from the State shall remain the property of the State by and through the ADHS and, as such, shall remain under the sole direction, management and control of the ADHS. When this Contract is terminated, the disposition of all such property shall be determined by the ADHS. For Fixed Price contracts, when the Contractor provides the services/materials required by the Contract, any and all equipment purchased by the Contractor remains the property of the Contractor. All purchases of equipment need to be reported to the ADHS Office of Inventory Control.
- 4.10.2. *Title and Rights to Materials*. As used in this section, the term “Materials” means all products created or produced by the Contractor under this Contract, including, but not limited to: written and electronic information, recordings, reports, research, research findings, conclusions, abstracts,

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
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results, software, data and any other intellectual property or deliverables created, prepared, or received by the Contractor in performance of this Contract. Contractor acknowledges that all Materials are the property of the State by and through the ADHS and, as such, shall remain under the sole direction, management and control of the ADHS. The Contractor is not entitled to a patent or copyright on these Materials and may not transfer a patent or copyright on them to any other person or entity. To the extent any copyright in any Materials may originally vest in the Contractor, the Contractor hereby irrevocably transfers to the ADHS, for and on behalf of the State, all copyright ownership. The ADHS shall have full, complete and exclusive rights to reproduce, duplicate, adapt, distribute, display, disclose, publish, release and otherwise use all Materials. The Contractor shall not use or release these Materials without the prior written consent of the ADHS. When this Contract is terminated, the disposition of all such Materials shall be determined by the ADHS. Further, the Contractor agrees to give recognition to the ADHS for its support of any program when releasing or publishing program Materials.

- 4.10.3. *Notwithstanding the above, if the Contractor is a State agency, the following shall apply instead:* It is the intention of ADHS and Contractor that all material and intellectual property developed under this Agreement be used and controlled in ways to produce the greatest benefit to the parties to this Contract and the citizens of the State of Arizona. As used in this paragraph, "Material" means all written and electronic information, recordings, reports, findings, research information, abstracts, results, software, data, discoveries, inventions, procedures and processes of services developed by the Contractor and any other materials created, prepared or received by the Contractor and subcontractors in performance of this Agreement. "Material" as used herein shall not include any pre-existing data, information, materials, discoveries, inventions or any form of intellectual property invented, created, developed or devised by Contractor (or its employees, subcontractors or agents) prior to the commencement of the services funded by this Agreement or that may result from Contractor's involvement in other service activities that are not funded by the Agreement.
- 4.10.4. Title and exclusive copyright to all Material shall vest in the State of Arizona, subject to any rights reserved on behalf of the federal government. As State agencies and instrumentalities, both ADHS and Contractor shall have full, complete, perpetual, irrevocable and non-transferable rights to reproduce, duplicate, adapt, make derivative works, distribute, display, disclose, publish and otherwise use any and all Material. The Contractor's right to use Material shall include the following rights: the right to use the Material in connection with its internal, non-profit research and educational activities, the right to present at academic or professional meetings or symposia and the right to publish in journals, theses, dissertations or otherwise of Contractor's own choosing. Contractor agrees to provide ADHS with a right of review prior to any publication or public presentation of the Material, and ADHS shall be entitled to request the removal of its confidential information or any other content the disclosure of which would be contrary to the best interest of the State of Arizona. Neither party shall release confidential information to the public without the prior expressly written permission of the other, unless required by the State public records statutes or other law, including a court order. Each party agrees to give recognition to the other party in all public presentations or publications of any Material, when releasing or publishing them.
- 4.10.5. In addition, ADHS and Contractor agree that any and all Material shall be made freely available to the public to the extent it is in the best interest of the State. However, if either party wants to license or assign an intellectual property interest in the material to a third-party for monetary compensation, ADHS and Contractor agree to convene to determine the relevant issues of title, copyright, patent and distribution of revenue. In the event of a controversy as to whether the Material is being used for monetary compensation or in a way that interferes with the best interest of the state or ADHS, then the Arizona Department of Administration shall make the final decision. Notwithstanding the above, "monetary compensation" does not include compensation paid to an individual creator for traditional publications in academia (the copyrights to which are Employee- Excluded Works under ABOR Intellectual Property Policy Section 6-908C.4.), an honorarium or other reimbursement of expenses for an academic or professional presentation, or an unprofitable distribution of Material.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT TERMS AND CONDITIONS
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- 4.11. E-Verify Requirements In accordance with A.R.S. § 41-4401, Contractor warrants compliance with all Federal immigration laws and regulations relating to employees and warrants its compliance with Section A.R.S. § 23-214, Subsection A.
- 4.12. Federal Immigration and Nationality Act The Contractor shall comply with all federal, state and local immigration laws and regulations relating to the immigration status of their employees during the term of the Contract. Further, the Contractor shall flow down this requirement to all subcontractors utilized during the term of the Contract. The State shall retain the right to perform random audits of Contractor and subcontractor records or to inspect papers of any employee thereof to ensure compliance. Should the State determine that the Contractor and/or any subcontractors be found noncompliant, the State may pursue all remedies allowed by law, including, but not limited to; suspension of work, termination of the Contract for default and suspension and/or debarment of the Contractor.

5. **Costs and Payments**

- 5.1. Payments. Payments shall comply with the requirements of A.R.S. Titles 35 and 41, net 30 days. Upon receipt and acceptance of goods or services, the Contractor shall submit a complete and accurate Contractor's Expenditure Report for payment from the State within thirty (30) days, as provided in the Accounting and Auditing Procedures Manual for the ADHS.
- 5.2. Recoupment of Contract Payments.
- 5.2.1. *Unearned Advanced Funds*. Any unearned State funds that have been advanced to the Contractor and remain in its possession at the end of each budget term, or at the time of termination of the Contract, shall be refunded to the ADHS within forty-five (45) days of the end of a budget term or of the time of termination.
- 5.2.2. *Contracted Services*. In a fixed price contract, if the number of services provided is less than the number of services for which the Contractor received compensation, funds to be returned to the ADHS shall be determined by the Contract price. Where the price is determined by cost per unit of service or material, the funds to be returned shall be determined by multiplying the unit of service cost by the number of services the Contractor did not provide during the Contract term. Where the price for a deliverable is fixed, but the deliverable has not been completed, the Contractor shall be paid a pro rata portion of the completed deliverable. In a cost reimbursement contract, the ADHS shall pay for any costs that the Contractor can document as having been paid by the Contractor and approved by ADHS. In addition, the Contractor will be paid its reasonable actual costs for work in progress as determined by Generally Accepted Accounting Procedures up to the date of contract termination.
- 5.2.3. *Refunds*. Within forty-five (45) days after the end of each budget term or of the time of termination of the Contract, the Contractor shall refund the greater of: i) the amount refundable in accordance with paragraph 4.2.1, Unearned Advanced Funds; or ii) the amount refundable in accordance with paragraph 5.2.2, Contracted Services.
- 5.2.4. *Unacceptable Expenditures*. The Contractor agrees to reimburse the ADHS for all Contract funds expended, which are determined by the ADHS not to have been disbursed by the Contractor in accordance with the terms of this Contract. The Contractor shall reimburse ADHS within 45 days of the determination of unacceptability.
- 5.3. Unit Costs/Rates or Fees. Unit costs/rates or fees shall be based on costs, which are determined by ADHS to be reasonable, allowable and allocable as outlined in the Accounting and Auditing Procedures Manual for the ADHS.

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5.4. Applicable Taxes.

5.4.1. *State and Local Transaction Privilege Taxes.* The State of Arizona is subject to all applicable state and local transaction privilege taxes. Transaction privilege taxes apply to the sale and are the responsibility of the seller to remit. Failure to collect taxes from the buyer does not relieve the seller from its obligation to remit taxes.

5.4.2. *Tax Indemnification.* The Contractor and all subcontractors shall pay all federal, state and local taxes applicable to its operation and any persons employed by the Contractor. Contractor shall require all subcontractors to hold the State harmless from any responsibility for taxes, damages and interest, if applicable, contributions required under Federal, and/or state and local laws and regulations and any other costs, including transaction privilege taxes, unemployment compensation insurance, Social Security and Worker's Compensation.

5.4.3. *I.R.S. W9 Form.* In order to receive payment under any resulting Contract, the Contractor shall have a current I.R.S. W9 Form on file with the State of Arizona.

5.5. Availability of Funds for the Next Fiscal Year. Funds may not be presently available for performance under this Contract beyond the first year of the budget term or Contract term. The State may reduce payments or terminate this Contract without further recourse, obligation or penalty in the event that insufficient funds are appropriated in the subsequent budget term. The State shall not be liable for any purchases or Subcontracts entered into by the Contractor in anticipation of such funding. The Procurement Officer shall have the discretion in determining the availability of funds.

5.6. Availability of Funds for the Current Contract Term. Should the State Legislature enter back into session and decrease the appropriations through line item or general fund reductions, or for any other reason these goods or services are not funded as determined by ADHS, the following actions may be taken by ADHS:

5.6.1. Accept a decrease in price offered by the Contractor;

5.6.2. Reduce the number of goods or units of service and reduce the payments accordingly;

5.6.3. Offer reductions in funding as an alternative to Contract termination; or

5.6.4. Cancel the Contract.

6. Contract Changes

6.1. Amendments, Purchase Orders and Change Orders. This Contract is issued under the authority of the Procurement Officer who signed this Contract. The Contract may be modified only through a Contract Amendment, Purchase Order and/or Change Order within the scope of the Contract, unless the change is administrative or otherwise permitted by the Special Terms and Conditions. Changes to the Contract, including the addition of work or materials, the revision of payment terms, or the substitution of work or materials, directed by an unauthorized State employee or made unilaterally by the Contractor are violations of the Contract and of applicable law. Such changes, including unauthorized Contract Amendments, Purchase Orders and/or Change Orders, shall be void and without effect, and the Contractor shall not be entitled to any claim under this Contract based on those changes.

6.2. Subcontracts. The Contractor shall not enter into any subcontract under this Contract without the advance written approval of the Procurement Officer. The subcontract shall incorporate by reference all material and applicable terms and conditions of this Contract.

6.3. Assignments and Delegation. The Contractor shall not assign any right nor delegate any duty under this Contract without the prior written approval of the Procurement Officer. The State shall not unreasonably withhold approval.

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7. Risk and Liability

7.1. Risk of Loss. The Contractor shall bear all loss of conforming material covered under this Contract until received and accepted by authorized personnel at the location designated in the Purchase Order, Change Order or Contract. Mere receipt does not constitute final acceptance. The risk of loss for nonconforming materials shall remain with the Contractor regardless of receipt.

7.2. Mutual Indemnification. Each party (as "indemnitor") agrees to indemnify, defend and hold harmless the other party (as "indemnitee") from and against any and all claims, losses, liability, costs or expenses (including reasonable attorney's fees) (hereinafter collectively referred to as "claims") arising out of bodily injury of any person (including death) or property damage, but only to the extent that such claims, which result in vicarious/derivative liability to the indemnitee, are caused by the act, omission, negligence, misconduct, or other fault of the indemnitor, its officers, officials, agents, employees or volunteers.

7.3. Force Majeure.

7.3.1. *Liability and Definition.* Except for payment of sums due, neither party shall be liable to the other nor deemed in default under this Contract if and to the extent that such party's performance of this Contract is prevented by reason of force majeure. The term "*force majeure*" means an occurrence that is beyond the control of the party affected and occurs without its fault or negligence. Without limiting the foregoing, force majeure includes acts of God; acts of the public enemy; acts of terrorism; war; riots; strikes; mobilization; labor disputes; civil disorders; fire; flood; lockouts; injunctions-interventions not caused by or resulting from the act or failure to act of the parties; failures or refusals to act by government authority not caused by or resulting from the act or failure to act of the parties; and other similar occurrences beyond the control of the party declaring force majeure, which such party is unable to prevent by exercising reasonable diligence.

7.3.2. *Exclusions.* Force Majeure shall not include the following occurrences:

7.3.2.1. Late delivery of Materials caused by congestion at a manufacturer's plant or elsewhere, or an oversold condition of the market;

7.3.2.2. Late performance by a subcontractor unless the delay arises out of a force majeure occurrence in accordance with this force majeure term and condition; or

7.3.2.3. Inability of either the Contractor or any subcontractor to acquire or maintain any required insurance, bonds, licenses or permits.

7.3.3. *Notice.* If either party is delayed at any time in the progress of the work by force majeure, the delayed party shall notify the other party in writing of such delay, as soon as is practicable and no later than the following working day of the commencement thereof, and shall specify the causes of such delay in such notice. Such notice shall be delivered or mailed certified-return receipt and shall make a specific reference to this article, thereby invoking its provisions. The delayed party shall cause such delay to cease as soon as practicable and shall notify the other party in writing when it has done so. The time of completion shall be extended by Contract Amendment for a period of time equal to the time that the results or effects of such delay prevent the delayed party from performing in accordance with this Contract.

7.3.4. *Default.* Any delay or failure in performance by either party hereto shall not constitute default hereunder or give rise to any claim for damages or loss of anticipated profits if, and to the extent that, such delay or failure is caused by force majeure.

7.4. Third Party Antitrust Violations. The Contractor assigns to the State any claim for overcharges resulting from antitrust violations to the extent that those violations concern materials or services supplied by third parties to the Contractor for or toward the fulfillment of this Contract.

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8. Description of Materials

The following provisions shall apply to Materials only:

- 8.1. Liens. The Contractor agrees that the Materials supplied under this Contract are free of liens. In the event the Materials are not free of liens, Contractor shall pay to remove the lien and any associated damages or replace the Materials with Materials free of liens.
- 8.2. Quality. Unless otherwise modified elsewhere in these terms and conditions, the Contractor agrees that, for one year after acceptance by the State of the Materials, they shall be:
 - 8.2.1. Of a quality to pass without objection in the Contract description;
 - 8.2.2. Fit for the intended purposes for which the Materials are used;
 - 8.2.3. Within the variations permitted by the Contract and are of even kind, quantity, and quality within each unit and among all units;
 - 8.2.4. Adequately contained, packaged and marked as the Contract may require; and
 - 8.2.5. Conform to the written promises or affirmations of fact made by the Contractor.
- 8.3. Inspection/Testing. Subparagraphs 8.1 through 8.2 of this paragraph are not affected by inspection or testing of or payment for the Materials by the State.
- 8.4. Compliance With Applicable Laws. The Materials and services supplied under this Contract shall comply with all applicable federal, state and local laws, and the Contractor shall maintain all applicable license and permit requirements.
- 8.5. Survival of Rights and Obligations After Contract Expiration and Termination.
 - 8.5.1. *Contractor's Representations*. All representations and warranties made by the Contractor under this Contract in paragraphs 7 and 8 shall survive the expiration or termination hereof. In addition, the parties hereto acknowledge that pursuant to A.R.S. § 12.510, except as provided in A.R.S. § 12-529, the State is not subject to or barred by any limitations of actions prescribed in A.R.S. Title 12, Chapter 5.
 - 8.5.2. *Purchase Orders and Change Orders*. Unless otherwise directed in writing by the Procurement Officer, the Contractor shall fully perform and shall be obligated to comply with all Purchase Orders and Change Orders received by the Contractor prior to the expiration or termination hereof, including, without limitation, all Purchase Orders and Change Orders received prior to but not fully performed and satisfied at the expiration or termination of this Contract.

9. State's Contractual Remedies

- 9.1. Right to Assurance. If the State, in good faith, has reason to believe that the Contractor does not intend to, or is unable to, perform or continue performing under this Contract, the Procurement Officer may demand in writing that the Contractor give a written assurance of intent to perform. Failure by the Contractor to provide written assurance within the number of Days specified in the demand may, at the State's option, be the basis for terminating the Contract.
- 9.2. Stop Work Order.
 - 9.2.1. *Terms*. The State may, at any time, by written order to the Contractor, require the Contractor to stop all or any part of the work called for by this Contract for a period up to ninety (90) Days after the order is delivered to the Contractor, and for any further period to which the parties may agree.

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The order shall be specifically identified as a stop work order issued under this clause. Upon receipt of the order, the Contractor shall immediately comply with its terms and take all reasonable steps to minimize the incurrence of costs allocable to the work covered by the order during the period of work stoppage.

9.2.2. *Cancellation or Expiration.* If a stop work order issued under this clause is canceled or the period of the order or any extension expires, the Contractor shall resume work. The Procurement Officer shall make an equitable adjustment in the delivery schedule or Contract price, or both, and the Contract shall be amended in writing accordingly.

9.3. Non-exclusive Remedies. The rights and remedies of ADHS under this Contract are not exclusive, and ADHS is entitled to all rights and remedies available to it, including those under the Arizona Uniform Commercial Code and Arizona common law.

9.4. Right of Offset. The State shall be entitled to offset against any sums due the Contractor in any Contract with the State or damages assessed by the State because of the Contractor's non-conforming performance or failure to perform this Contract. The right to offset may include, but is not limited to, a deduction from an unpaid balance and a collection against the bid and/or performance bonds. Any offset taken for damages assessed by the State shall represent a fair and reasonable amount for the actual damages and shall not be a penalty for non-performance.

10. Contract Termination

10.1. Cancellation for Conflict of Interest. Pursuant to A.R.S. § 38-511, the State may cancel this Contract within three (3) years after Contract execution without penalty or further obligation if any person significantly involved in initiating, negotiating, securing, drafting or creating the Contract on behalf of the State is, or becomes at any time while the Contract or an extension of the Contract is in effect, an employee of or a consultant to any other party to this Contract with respect to the subject matter of the Contract. The cancellation shall be effective when the Contractor receives written notice of the cancellation, unless the notice specifies a later time. If the Contractor is a political subdivision of the State, it may also cancel this Contract as provided in A.R.S. § 38-511.

10.2. Gratuities. The State may, by written notice, terminate this Contract, in whole or in part, if the State determines that employment or a Gratuity was offered or made by the Contractor or a representative of the Contractor to any officer or employee of the State for the purpose of influencing the outcome of the procurement, securing the Contract or an Amendment to the Contract, or receiving favorable treatment concerning the Contract, including the making of any determination or decision about Contract performance. The State, in addition to any other rights or remedies, shall be entitled to recover exemplary damages in the amount of three times the value of the Gratuity offered by the Contractor.

10.3. Suspension or Debarment. The State may, by written notice to the Contractor, immediately terminate this Contract if the State determines that the Contractor or its subcontractor has been debarred, suspended or otherwise lawfully prohibited from participating in any public procurement activity, including but not limited to, being disapproved as a subcontractor of any public procurement unit or other governmental body.

10.4. Termination Without Cause.

10.4.1. Both the State and the Contractor may terminate this Contract at any time with thirty (30) days' notice in writing specifying the termination date. Such notices shall be given by personal delivery or by certified mail, return receipt requested.

10.4.2. If the Contractor terminates this Contract, any monies prepaid by the State, for which no service or benefit was received by the State, shall be refunded to the State within 5 days of the termination notice. In addition, if the Contractor terminates the Contract, the Contractor shall indemnify the State for any sanctions imposed by the funding source as a result of the Contractor's failure to complete the Contract.

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10.4.3. If the State terminates this Contract pursuant to this Section, the State shall pay the Contractor the Contract price for all Services and Materials completed up to the date of termination. In a fixed price contract, the State shall pay the amount owed for the Services or Materials by multiplying the unit of service or item cost by the number of unpaid service units or items. In a cost reimbursement contract, the ADHS shall pay for any costs that the Contractor can document as having been paid by the Contractor and approved by ADHS. In addition, the Contractor will be paid its reasonable actual costs for work in progress as determined by GAAP up to the date of termination. Upon such termination, the Contractor shall deliver to the ADHS all deliverables completed. ADHS may require Contractor to negotiate the terms of any remaining deliverables still due.

10.5. Mutual Termination. This Contract may be terminated by mutual written agreement of the parties specifying the termination date and the terms for disposition of property and, as necessary, submission of required deliverables and payment therein.

10.6. Termination for Default. The State reserves the right to terminate the Contract in whole or in part due to the failure of the Contractor to comply with any material obligation, term or condition of the Contract, to acquire and maintain all required insurance policies, bonds, licenses and permits, or to make satisfactory progress in performing the Contract. In the event the ADHS terminates the Contract in whole or in part as provided in this paragraph, the ADHS may procure, upon such terms and in such manner as deemed appropriate, Services or Materials, similar to those terminated, and Contractor shall be liable to the ADHS for any excess costs incurred by the ADHS in obtaining such similar Services or Materials.

10.7. Continuation of Performance Through Termination. Upon receipt of the notice of termination and until the effective date of the notice of termination, the Contractor shall perform work consistent with the requirements of the Contract and, if applicable, in accordance with a written transition plan approved by the ADHS. If the Contract is terminated in part, the Contractor shall continue to perform the Contract to the extent not terminated. After receiving the notice of termination, the Contractor shall immediately notify all subcontractors, in writing, to stop work on the effective date of termination, and on the effective date of termination, the Contractor and subcontractors shall stop all work.

10.8. Disposition of Property. Upon termination of this Contract, all property of the State, as defined herein, shall be delivered to the ADHS upon demand.

11. Arbitration

Pursuant to A.R.S. § 12-1518, disputes under this Contract shall be resolved through the use of arbitration when the case or lawsuit is subject to mandatory arbitration pursuant to rules adopted under A.R.S. § 12 -133.

12. Communication

12.1. Program Report. When reports are required by the Contract, the Contractor shall provide them in the format approved by ADHS.

12.2. Information and Coordination. The State will provide information to the Contractor pertaining to activities that affect the Contractor’s delivery of services, and the Contractor shall be responsible for coordinating their activities with the State’s in such a manner as not to conflict or unnecessarily duplicate the State’s activities. As the work of the Contractor progresses, advice and information on matters covered by the Contract shall be made available by the Contractor to the State throughout the effective period of the Contract.

13. Client Grievances

If applicable, the Contractor and its subcontractors shall use a procedure through which clients may present grievances about the operation of the program that result in the denial, suspension or reduction of services provided pursuant to this Contract and which is acceptable to and approved by the State.

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14. Sovereign Immunity

Pursuant to A.R.S. § 41-621(O), the obtaining of insurance by the State shall not be a waiver of any sovereign immunity defense in the event of suit.

15. Administrative Changes

The Procurement Officer, or authorized designee, reserves the right to correct any obvious clerical, typographical or grammatical errors, as well as errors in party contact information (collectively, "Administrative Changes"), prior to or after the final execution of a Contract or Contract Amendment. Administrative Changes subject to permissible corrections include: misspellings, grammar errors, incorrect addresses, incorrect Contract Amendment numbers, pagination and citation errors, mistakes in the labeling of the rate as either extended or unit, and calendar date errors that are illogical due to typographical error. The Procurement Office shall subsequently send to the Contractor notice of corrections to administrative errors in a written confirmation letter with a copy of the corrected Administrative Change attached.

16. Survival of Terms After Termination or Cancellation of Contract

All applicable Contract terms shall survive and apply after Contract termination or cancellation to the extent necessary for Contractor to complete and for the ADHS to receive and accept any final deliverables that are due after the date of the termination or cancellation.

17. Health Insurance Portability and Accountability Act of 1996 (HIPAA)

17.1. The Contractor warrants that it is familiar with the requirements of HIPAA, as amended by the Health Information Technology for Economic and Clinical Health Act (HITECH Act) of 2009, and accompanying regulations and will comply with all applicable HIPAA requirements in the course of this Contract. Contractor warrants that it will cooperate with the Arizona Department of Health Services (ADHS) in the course of performance of the Contract so that both ADHS and Contractor will be in compliance with HIPAA, including cooperation and coordination with the Arizona Department of Administration-Arizona Strategic Enterprise Technology (ADOA-ASET) Office, the ADOA-ASET Arizona State Chief Information Security Officer and HIPAA Coordinator and other compliance officials required by HIPAA and its regulations. Contractor will sign any documents that are reasonably necessary to keep ADHS and Contractor in compliance with HIPAA, including, but not limited to, business associate agreements.

17.2. If requested by the ADHS Procurement Office, Contractor agrees to sign a "Pledge To Protect Confidential Information" and to abide by the statements addressing the creation, use and disclosure of confidential information, including information designated as protected health information and all other confidential or sensitive information as defined in policy. In addition, if requested, Contractor agrees to attend or participate in HIPAA training offered by ADHS or to provide written verification that the Contractor has attended or participated in job related HIPAA training that is: (1) intended to make the Contractor proficient in HIPAA for purposes of performing the services required and (2) presented by a HIPAA Privacy Officer or other person or program knowledgeable and experienced in HIPAA and who has been approved by the ADOA-ASET Arizona State Chief Information Security Officer and HIPAA Coordinator.

18. Comments Welcome

The ADHS Procurement Office periodically reviews the Uniform Terms and Conditions and welcomes any comments you may have. Please submit your comments to: ADHS Procurement Administrator, Arizona Department of Health Services, 150 North 18th Avenue, Suite 280, Phoenix, Arizona 85007.

19. Data Universal Numbering System (DUNS) Requirement

For federal funding, pursuant to 2 CFR 25.100 et seq., no entity (defined as a Governmental organization, which is a State, local government, or Indian tribe; foreign public entity; domestic or foreign nonprofit organization; domestic or foreign for-profit organization; or Federal agency, but only as a subrecipient under an award or

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subaward to a non-Federal entity) may receive a subaward from ADHS unless the entity provides its Data Universal Numbering System (DUNS) Number to ADHS.

20. The Federal Funding Accountability and Transparency Act (FFATA or Transparency Act - P.L.109-282, as amended by section 6202(a) of P.L. 110-252), found at <https://www.fsrc.gov/>

If applicable, the Contractor/Grantee shall submit to ADHS via email the Grant Reporting Certification Form. This form and the instructions can be downloaded from the ADHS Procurement website at <http://www.azdhs.gov/operations/financial-services/procurement/index.php#ffata> and must be returned to the ADHS by the 15th of the month following that in which the award was received. The form shall be completed electronically, and submitted using the steps outlined in the Grant Reporting Certification Form Instructions to the following email address: ADHS_Grant@azdhs.gov. All required fields must be filled including Top Employee Compensation, if applicable. Completing the Grant Reporting Certification Form is required for compliance with the Office of Management and Budget (OMB), found at <http://www.whitehouse.gov/omb/open>. Failure to timely submit the Grant Reporting Certification Form could result in the loss of funds. This requirement applies to all subcontractors/sub-awardees utilized by the Contractor/Grantee for amounts exceeding \$30,000.00 during the term of the Award.

21. Contracting; Procurement; Investment; Prohibitions

- 21.1. A public entity may not enter into a contract with a company to acquire or dispose of services, supplies, information technology or construction unless the contract includes a written certification that the company is not currently engaged in, and agrees for the duration of the contract to not engage in, a boycott of Israel.
- 21.2. A public entity may not adopt a procurement, investment or other policy that has the effect of inducing or requiring a person or company to boycott Israel.
- 21.3. Contractor hereby certifies that it is not currently engaged in, and will not for the duration of this Contract engage in, a boycott of Israel as defined by A.R.S. § 35-393.01. Violation of this certification by Contractor may result in action by the State up to and including termination of this Contract.

22. Technology Replacement

In any event where product is discontinued, no longer available or technically inferior to newly developed product, the Contractor shall provide an equivalent replacement model at no additional cost and shall honor the original contract terms

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1. Background

The Arizona Department of Health Services (ADHS) Bureau of Nutrition and Physical Activity (BNPA) administers funds provided by the United States Department of Agriculture (USDA) for the operation of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), Breastfeeding Peer Counseling Program (BFPC), and the Women and Children's Farmers Market Nutrition Programs (FMNP) for the State of Arizona. The USDA nutrition programs are discretionary, and each provides a specific service to women, infants, and children who are low income and at nutrition risk. The overall goal of all the USDA Nutrition Programs is to improve the health status of eligible participants through adoption of healthy behavioral lifestyle changes and to help prevent the occurrence of health problems.

1.1. WIC Nutrition Services

The WIC Program accomplishes this goal by providing participant-centered services (PCS) including nutrition and breastfeeding information and support, specific supplemental healthy foods through the issuance of food benefits that can be used at ADHS-approved grocery stores and farmers' markets, and referrals to other health and human services as an adjunct to good health care during critical times of growth and development. Service population eligibility for the WIC Program is based upon federal regulations such as participant category (pregnant and breastfeeding woman, infant or child under five years of age), a household income at or below 185% of federal poverty guidelines, residence within the service area, and nutrition risks.

To be considered as a WIC Local Agency, the organization must be a local public or private non-profit organization, County health department, or tribal entity under contract with ADHS to provide WIC services according to the WIC Program federal regulations and state policies and procedures. The State awards a WIC Contract based on the ability of the organization to provide WIC services, potential eligible population, need, response to the Scope of Work, information technology capacity, and available funds. The State determines and awards the WIC contract amount based on a funding formula using several factors such as a base level for a program to function, the amount of caseload negotiated with each Local Agency, and quality of performance.

1.1.1. Specific objectives for nutrition services (based on Healthy People 2020 goals) are:

- 1.1.1.1. To increase the incidence of breastfeeding to 82% of women initiating breastfeeding;
- 1.1.1.2. To increase the duration of breastfeeding to 61% of women breastfeeding for the first six (6) months of their baby's life;
- 1.1.1.3. To increase the duration of breastfeeding to 34% of women breastfeeding for the first year of their baby's life;
- 1.1.1.4. To increase the rate infants are exclusively breastfed to 44% at three (3) months and 24% at six months;
- 1.1.1.5. To reduce the proportion of adults who are considered obese to 31%;
- 1.1.1.6. To reduce the proportion of children ages 2-5 who are considered obese to 10%;
- 1.1.1.7. To increase the consumption and variety of fruits and vegetables by those two (2) and older;
- 1.1.1.8. To increase the consumption of whole grains by those two (2) and older; and
- 1.1.1.9. To increase the proportion of children ages 0-2 who view no television or videos on an average day to 45%.

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1.2. Breastfeeding Peer Counseling (BFPC)

- 1.2.1. In 2003, the USDA Food and Nutrition Service (FNS) entered into a cooperative agreement with Best Start Social Marketing (Best Start) to gather information to obtain a clear understanding of the components that are necessary to sustain effective peer counseling programs and how to structure these programs so they are cost effective and manageable. They developed the program "Using Loving Support to Implement Best Practices in Peer Counseling", which is a training and technical assistance project that will be used as a model to aid WIC in designing, building, maintaining, and sustaining peer counseling programs that will improve breastfeeding initiation and duration rates. Arizona will be using this program to guide and develop the state peer counseling program.
- 1.2.2. The discretionary peer counseling services are considered an adjunct support to WIC breastfeeding services to help achieve the WIC Nutrition Services objectives regarding breastfeeding.
- 1.2.3. Peer counseling has been a significant factor in improving initiation and duration rates of breastfeeding among women in a variety of settings, including disadvantaged and WIC populations representing diverse cultural backgrounds and geographical locations. Peer counselors are especially effective in communities where role models for breastfeeding behaviors, knowledgeable health care providers, and cultural practices that include breastfeeding as the norm, are scarce. Combining peer counseling with the ongoing WIC breastfeeding promotion and support efforts has the potential to significantly impact breastfeeding rates among WIC participants, and most significantly, increase the harder to achieve breastfeeding duration rates. WIC Local Agencies are strongly encouraged to provide peer counseling services in addition to the ongoing breastfeeding support to their WIC participants. Contractors must provide a breastfeeding friendly environment and have policies to accommodate participants and staff who are breastfeeding.

1.3. Farmer's Market Nutrition Program (FMNP)

The Women and Children Farmers' Market Nutrition Program (FMNP) is intended to increase consumption of locally grown fresh fruits and vegetables by providing FMNP checks to a limited number of WIC women, children, and infants as ADHS allows to purchase these items directly from growers at ADHS-approved farmers' markets. FMNP is also intended to support local agriculture by expanding the awareness, use of, and sales at farmers' markets.

2. Objective

At a minimum, to provide WIC services while allowing each Local Agency to provide, at their discretion, Breastfeeding Peer Counseling Services and / or Farmers' Market Nutrition Program Services.

3. Scope of Service

3.1. WIC Services

The WIC Program Contractor shall perform all the work required to administer and provide WIC services to eligible participants according to the Arizona WIC Program Policies and Procedures Manual (WIC PPM). These include, but are not limited to the following activities:

- 3.1.1. Perform WIC certification procedures such as categorical and income screening and health and nutrition assessments;
- 3.1.2. Provide participant centered nutrition and breastfeeding support services to WIC participants;
- 3.1.3. Provide the mandatory and appropriate additional referrals reflecting the needs of the individual WIC participants;
- 3.1.4. Issue WIC food benefits tailored to meet the needs of the participants;

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- 3.1.5. Ensure the collection and recording of accurate information;
- 3.1.6. Provide professional training, mentoring and monitoring of WIC staff competencies necessary for delivery of required services;
- 3.1.7. Provide administrative functions for operation of the WIC Program; and
- 3.1.8. Prepare and submit all required plans/reports in accordance with this contract and the WIC PPM.

3.2. Breastfeeding Peer Counseling (BFPC)

WIC BFPC Contractors shall perform all the work required to administer and provide additional breastfeeding support services to WIC mothers following the Loving Support best practice guidelines for peer counseling services and according to the Contractor's proposal in order to increase the breastfeeding rate and duration of breastfeeding.

3.3. Farmer's Market Nutrition Program (FMNP)

WIC FMNP Contractors shall perform all the work required to administer and provide WIC FMNP services to eligible participants including but not limited to:

- 3.3.1. Identifying participants and offering program services;
- 3.3.2. Distributing information to participants;
- 3.3.3. Issuing of FMNP benefits;
- 3.3.4. Safeguarding FMNP benefits;
- 3.3.5. Documenting accurately all required information;
- 3.3.6. Providing administrative functions necessary for operation of the FMNP;
- 3.3.7. Preparing and submitting all required reports in accordance with this Contract; and
- 3.3.8. Adhering to all provisions of the Arizona Farmers' Market Nutrition Program Policies and Procedures Manual.

4. Tasks

4.1. WIC Services Outreach and Referrals

- 4.1.1. Conduct outreach activities targeting high risk and underserved populations by developing written and verbal presentations or utilizing available materials to inform potentially WIC eligible individuals of the availability of the WIC Program and to explain the benefits of participation according to the outreach plan proposal submitted and accepted with this Contract.
- 4.1.2. Establish community partnerships with, at a minimum, the mandatory referral agencies, local hospitals, OB/GYN and pediatricians offices, and provide regular contacts according to the outreach and plan proposal submitted and accepted with this Contract.
- 4.1.3. Establish community partnerships with community organizations such as food banks, community organizations, human and social services, school districts, etc. according to the outreach and referral plan proposal submitted and accepted with this Contract.

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4.1.4. Establish a referral system with breastfeeding/lactation specialists, including but not limited to, International Board Certified Lactation Consultants (IBCLC), Certified Lactation Counselors (CLC), Certified Breastfeeding Counselors (CBC), and Certified Lactation Educators (CLE) according to the outreach and referral plan proposal submitted and accepted with this Contract.

4.2. Additional BFPC Outreach Tasks:

4.2.1. Develop and document an internal referral link between WIC Program and WIC Peer Counseling Program when applicable. Interaction between WIC Program and WIC Peer Counseling Program shall occur at least monthly and may be in the form of site visits from Peer Counselors, participation of Peer Counselors in WIC clinic meetings, and/or additional training for WIC clinic staff and Peer Counselors.

4.3. Participant Records:

4.3.1. Follow and maintain documentation of participant centered certification and administrative procedures as described in the WIC PPM, including but not limited to:

- 4.3.1.1. Eligibility and ineligibility determinations;
- 4.3.1.2. Nutrition assessments;
- 4.3.1.3. Nutrition and breastfeeding education and support;
- 4.3.1.4. Nutrition and breastfeeding counseling;
- 4.3.1.5. Encourage participants in setting behavioral goals;
- 4.3.1.6. Appropriate referrals;
- 4.3.1.7. Program abuse; and
- 4.3.1.8. Food benefit issuances.

4.3.2. Maintain inventory and accountability records, as set forth in the WIC PPM, of paper food instrument stock, food instruments issued by the Contractor, eWIC cards, and eWIC cards issued by the Contractor.

4.3.3. Assure participant confidentiality by obtaining written permission from affected program participant(s) prior to the release of participant information to any agency. The Contractor shall have a written agreement, completed in accordance with 7 CFR (Code of Federal Regulations) 246.26 (h) (3), and the Arizona WIC Policy and Procedure Manual, with any agency or program that will share participant information. The above federal regulation details the implementation of a written agreement and state plan to regulate use and disclosure of confidential applicant and participant information.

4.3.4. Staff shall only access the WIC Computer Data System and client files for business related reason(s).

4.3.5. Ensure paper files containing confidential participant information are stored in a secure location in the clinic, archived when appropriate, and destroyed according to the retention schedule. All files should be destroyed in an appropriate manner.

4.3.6. The Local Agency shall notify the State Agency immediately by telephone call and email upon the discovery of a breach of a participant's confidentiality.

4.3.7. The Local Agency shall immediately investigate such security incident, breach, or unauthorized use or disclosure of participant information, including:

- 4.3.7.1. What data elements were involved and the extent of the data involved in the breach;

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- 4.3.7.2. A description of the unauthorized person(s) known or reasonably believed to have improperly used or disclosed the protected information;
- 4.3.7.3. A description of where the protected information is believed to have been improperly transmitted, sent, or utilized;
- 4.3.7.4. A description of the probable causes of the improper use or disclosure; and
- 4.3.7.5. Whether Arizona Revised Statutes (A.R.S) § 18-545 or any other federal or state laws requiring individual notifications of breaches are triggered.

4.3.8. The Local Agency shall provide a written report of the investigation to the Chief of the Bureau of Nutrition and Physical Activity (BNPA)/WIC Director and Program Integrity Manager within ten (10) working days of the discovery of the breach or unauthorized use or disclosure. The report shall include the information specified above, as well as a full, detailed corrective action plan, including information on measures that were taken to halt and/or contain the improper use or disclosure.

4.3.9. The Local Agency shall notify individuals of the breach or unauthorized use or disclosure when notification is required under state or federal law and shall pay any costs of such notifications, as well as any costs associated with the breach. The BNPA Chief/WIC Director, Program Integrity Manager, and Assistant Attorney General shall approve the time, manner and content of any such notifications. The Local Agency will arrange and pay for any mitigation (e.g. LifeLock) for participants at risk for identity theft because of breach of security of information.

4.4. Additional FMNP Participant Records Tasks:

4.4.1. Document nutrition education and distribution of FMNP benefits and submit reports to ADHS according to the Arizona Farmers' Market Nutrition Program Policies and Procedures Manual.

4.5. Service Delivery and Program Rules

The Contractor shall:

4.5.1. Determine eligibility of persons requesting WIC services by screening individuals in accordance with procedures set forth in the WIC PPM; Eligible program participants shall include the following categories whose household income does not exceed 185% of the current designated federal poverty guidelines, who have a nutritional risk as defined in the WIC PPM, and reside in Arizona as defined by the WIC PPM;

4.5.1.1. Pregnant women, breastfeeding women up to 12 months post-partum, and non-breastfeeding women up to six (6) months following the end of a pregnancy;

4.5.1.2. Infants from birth to age one (1), and

4.5.1.3. Children from age one (1) year up to five (5) years of age.

4.5.2. Provide complete nutrition assessment and document results and follow-up in accordance with Value Enhanced Nutrition Assessment (VENA) initiative as outlined in Chapter 2 and 7 of the Arizona WIC Policy and Procedure Manual;

4.5.3. Provide participant-centered nutrition education to participants and appropriately utilize emotion-based materials provided by the State;

4.5.4. Assist participants in setting goals for behavioral change and follow-up on goals set;

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- 4.5.5. Promote breastfeeding to WIC participants and provide breastfeeding education and support, and refer to and promote the Breastfeeding Peer Counseling Program, when appropriate;
- 4.5.6. Prescribe and tailor a food package appropriate to the participant's nutritional risk(s), category, and cultural preferences and issue food benefits as set forth in the WIC PPM;
- 4.5.7. Provide program participants with information about available health and social services to which the participant could be referred. The participant shall be provided with written information regarding community services and referrals in accordance with the WIC PPM and Local Agency referral procedures;
- 4.5.8. Coordinate WIC Services with other health and social services available within the service area, including but not limited to immunizations, voter registration, and breastfeeding support;
- 4.5.9. Provide information, check for understanding, and document training to participants on program rules, regulations, WIC approved foods, use of eWIC cards, food benefit use and redemption, and if applicable, FMNP benefits. The training shall be documented in the participant's record as set forth in the WIC PPM and/or AzFMNP Manual;
- 4.5.10. Additional BFPC Service Delivery tasks:
 - 4.5.10.1. Accept referrals generated from calls to the ADHS Pregnancy and Breastfeeding Hotline into the Peer Counseling Program;
 - 4.5.10.2. Provide peer counseling services, when appropriate. Services shall be made available outside of usual clinic hours and outside of the WIC clinic, but may also be available during usual clinic hours and in the WIC clinic; and
 - 4.5.10.3. Provide supervision, mentoring, monitoring, and evaluation of peer counselors, when appropriate.
- 4.5.11. Additional FMNP Delivery tasks:
 - 4.5.11.1. Identify eligible participants, offer FMNP benefits, and provide services to participants in accordance with the Arizona Farmers' Market Nutrition Program Policies and Procedures Manual;
 - 4.5.11.2. Issue a unique series of ADHS-provided FMNP check numbers after participant has been certified as an eligible WIC participant and has expressed a desire to participate in the program, through the Arizona electronic participant record system;
 - 4.5.11.3. Submit a written request to the ADHS FMNP Manager for authorization to utilize a Local Agency WIC staff to train and certify local growers at no extra cost to ADHS. Grower training shall be conducted only by ADHS authorized individuals. Each request to conduct training will be granted on a case-by-case basis, and shall not be performed without receipt of prior written approval from the ADHS FMNP Manager;
 - 4.5.11.4. Distribute information to all participants regarding the authorized WIC vendors and the location and hours of ADHS approved Arizona Farmers' Markets;
 - 4.5.11.5. Distribute to participants a brief description of non-allowable and allowable items (Participant Guide and other information provided by ADHS) and the time period for redeeming FMNP benefits;
 - 4.5.11.6. Notify ADHS within five (5) working days of receipt of any notification of change to the date, time or location of an individual Farmers' Market; and

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4.5.11.7. If funding for additional FMNP benefits becomes available and the contract budget (as shown on the Contract Price Sheet) has been fully expended, the Contractor may choose whether or not to distribute the additional checks with no increase in the Contract budget.

4.6. Participant-Centered Nutrition Education

The Contractor shall:

4.6.1. Prepare and submit a two (2) year Nutrition Services and Training Plan for participants to include, but not be limited to:

4.6.1.1. Adoption and Implementation of ADHS goals for nutrition services. In addition, Local Agencies will identify their own goals for nutrition services in this plan; and

4.6.1.2. Adoption and implementation of the State objectives for staff training and client interventions related to the goals for nutrition services. In addition, Local Agencies are required to provide at least one additional objective for each goal.

4.6.2. Provide and document participant-centered nutrition education to all WIC adult participants, and to parents or caretakers of participants according to the guidelines of the State Nutrition Services Plans. A minimum of two (2) nutrition education contacts in each six (6) month certification period shall be made and documented in the participant's record. Breastfeeding women, children, infants and migrants from any eligibility category are certified for one (1) year and will receive one (1) nutrition education contact for each three (3) month period. Pregnant women certified through six (6) weeks postpartum will receive one (1) nutrition education contact for each three (3) month period.

4.6.3. Provide and document professional supervision, mentoring and monitoring of staff at the clinic level on a regular basis, in accordance with Local Agency Self-Assessment requirements and as often as necessary, to ensure competence.

4.6.4. Offer, as often as necessary, high- and medium-risk nutrition education/counseling by an RD to all participants deemed high-risk upon assessment. As defined in the WIC PPM Local Agencies may designate a Bachelor's degree nutritionist or Dietetic Technician Registered to provide medium-risk counseling to participants under the supervision of the RD.

4.6.5. Expend for nutrition education activities an aggregate amount that is not less than the sum of one-sixth (1/6) of the amount the Contractor receives for provision of WIC services each contract year. If the one-sixth (1/6) amount is not expended for nutrition education activities, ADHS may request the Contractor to return an amount equal to the difference between the one-sixth (1/6) requirement and the actual amount expended IF ADHS must pay a penalty to the Federal Government. Costs that can be applied to meet the one-sixth (1/6) requirement for nutrition education include:

4.6.5.1. Salary and other costs for time spent on nutrition education, whether with an individual or group;

4.6.5.2. The cost of procuring and producing nutrition education materials;

4.6.5.3. The cost of training nutrition educators, including costs related to conducting training sessions and purchasing and producing training materials;

4.6.5.4. The cost of conducting participant evaluations of nutrition education;

4.6.5.5. The salary and other costs incurred in developing the nutrition education plan; and

4.6.5.6. Other ADHS-approved costs.

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- 4.6.6. Coordinate nutrition education activities and messages. Wherever possible, the Contractor shall utilize USDA and/or AZ Health Zone materials and messages to ensure common nutrition messages.
- 4.6.7. The Local Agency will provide documentation that a minimum of 4% of their annual WIC expenditures have been used to support breastfeeding promotion and education. If the 4% is not expended for breastfeeding promotion and education activities, ADHS may request the Contractor to return an equal to the difference between the 4% and the actual amount expended IF ADHS must pay a penalty to the Federal Government.

4.7. Staffing

The Contractor shall:

- 4.7.1. Designate a WIC Program Director/Manager who is an RD, with previous WIC and/or community health experience to manage and administer the WIC Program and may provide high-risk nutrition counseling and/or formula authorization to WIC participants. If an RD is on *staff* to provide the WIC RD services and with prior approval from ADHS, the Contractor shall designate a Director with a minimum of an undergraduate degree from an accredited institution in nutrition (community nutrition, public health nutrition, nutrition education, human nutrition or nutrition science) or a related field such as home economics or biochemistry with an emphasis in nutritional science or public health administration.
- 4.7.2. Identify an RD to serve as the Local Agency Nutrition Coordinator as defined in the WIC PPM. The Nutrition Coordinator will oversee all WIC nutrition services for the Local Agency. If a Local Agency has barriers to this staffing standard, they must be submitted in writing to ADHS with their plan for coordination of nutrition services within the Local Agency to be approved by ADHS.
- 4.7.3. Provide an appropriate number of RDs to perform high-risk and medium-risk counseling, formula authorization, and as necessary, certification of participants. The Contractor shall provide the RD services in a number proportional to the agency's high-risk caseload in accordance with the WIC PPM, The Contractor may hire nutrition degree graduates or Registered Dietetic Technicians, to do medium-risk counseling, formula authorization, and as necessary participant certification under the direction of an RD. If a Local Agency has a barrier to having an RD on staff, the agency must submit in writing to ADHS with their plan for providing high risk nutrition counseling to participants.
- 4.7.4. Provide staff to conduct outreach activities targeting high risk and underserved populations, including but not limited to homeless and migrants, by developing written and verbal presentations or utilizing available materials to inform the potentially eligible individuals of the availability of WIC Program and explain the benefits of participation
- 4.7.5. When applicable and necessary, provide an appropriate number of adequately trained certification specialists to provide categorical and financial eligibility screening, pre-certification and record required documentation, in accordance with the WIC PPM, as well as administrative support services when necessary. Such individuals shall have the minimum of a high school degree or equivalent and must complete the state training requirements and be certified by the Contractor as competent according to the competencies for the position. Previous nutrition or health related job experience is desirable. These individuals shall meet individual ADHS competencies as set forth in the WIC PPM prior to providing each service such as certifying applicants for participation and/or providing health assessments in the Arizona WIC Program Staff should be observed and certified by the supervising authority to be competent in an activity before being allowed to perform on their own without supervision.
- 4.7.6. Provide an appropriate number of adequately trained nutrition education specialists to provide certification and nutrition education services to participants in accordance with the WIC PPM. Such individuals will have the minimum of a high school diploma with nutrition experience, education, and training that have been certified by local or state agencies to be competent for the position. An Associate or Bachelor's degree is highly preferred. These individuals shall meet the ADHS competencies for Nutrition Education Specialists as set forth in the WIC PPM prior to certifying applicants for participation and/or providing

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nutrition education in the Arizona WIC Program. Staff should be observed and certified by the supervising authority to be competent in an activity before being allowed to perform on their own without supervision.

- 4.7.7. Identify an International Board Certified Lactation Consultant (IBCLC) to serve as the local agency Breastfeeding Coordinator as defined in the WIC PPM. The Breastfeeding Coordinator will oversee all WIC breastfeeding services for the local agency to ensure all participants have access to breastfeeding promotion and support services. If a local agency has barriers to this staffing standard, they must be submitted in writing to ADHS with their plan for coordination of breastfeeding services within the local agency to be approved by ADHS.
- 4.7.8. All Local Agencies will identify a Training Coordinator as defined in the WIC PPM. The Training Coordinator will oversee and facilitate both new employee and ongoing WIC training for the Local Agency including certifying that staff has met competencies prior to providing services without supervision. If a Local Agency has barriers to this staffing standard, they must submit in writing to ADHS their plan for coordination of training services within the Local Agency to be approved by ADHS.
- 4.7.9. When applicable and necessary, provide WIC Clerks to perform administrative support within WIC clinics at the option of the Contractor. Such individuals shall have the minimum of a high school degree or equivalent. They must meet WIC Program competencies. Previous clerical or work experience is desirable.
- 4.7.10. Maintain a record of training provided, monitoring, and observation results of staff competencies in each staff file and/or the state Learning Management System (LMS)

4.8. Additional BFPC Service Staffing

- 4.8.1. Employ a BFPC Program Manager to plan, direct and coordinate general operation of Peer Counseling Program. Ideal candidate will be an International Board Certified Lactation Consultant (IBCLC), have WIC experience, and be familiar with community resources.
- 4.8.2. Develop a support referral system for peer counselors with community Lactation Consultants, including IBCLCs, if the BFPC Program Manager is not an IBCLC or is unable to fulfill consultation duties for any reason.
- 4.8.3. Employ Breastfeeding Peer Counselors to provide services. Qualifications for peer counselors shall be previous personal experience with breastfeeding, enthusiasm for helping others to succeed at breastfeeding, and similarities with the WIC population the program serves (including similar age, ethnic background, and language spoken). Exemptions to the peer counselor qualifications must be approved by ADHS before hire. When possible, peer counselors should be current or previous WIC participants

4.9. Staff Training

The Contractor shall:

- 4.9.1. Train new staff as outlined in the ADHS developed new employee training plan.
- 4.9.2. Register and ensure all WIC staff complete all ADHS required WIC on-line courses according to the time requirements set forth by the State through ADHS Learning Management System (LMS) at az.train.org, or state-assigned LMS System in accordance with the ADHS WIC PPM.
- 4.9.3. In addition to state requirements for competency trainings, Local Agencies must implement and adopt the state training standards as reflected in the Nutrition Education Plan and the ADHS WIC PPM. In addition, Local Agencies must participate in any mandatory training provided by ADHS due to changes in policy, procedures, and / or federal regulations.

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- 4.9.4. Provide training for all new staff members regarding Civil Rights, Americans with Disabilities Act (ADA), and Voter Registration during their orientation and, annually, provide all staff with training on Civil Rights, ADA, and Voter Registration issues by completing the ADHS LMS courses on Civil Rights and Voter Registration or other courses or trainings that will be required by ADHS.
- 4.9.5. Provide one (1) representative for a maximum of six (6) mandatory, face-to-face, two (2) day meetings or trainings sessions in Phoenix, as scheduled by ADHS on a yearly basis. These meetings will be opportunities for the Local Agency to discuss issues with regards to WIC policies and procedures, federal rules and regulations, and nutrition standards.
- 4.9.6. Provide one (1) representative for a maximum of 12 GoToMeeting teleconference meetings to receive information updates on WIC operations, policies and procedures, and other relevant materials being held in lieu of face to face meetings.
- 4.9.7. Provide one (1) representative to attend a two (2) day trainer conference in Phoenix during each fiscal year for skill and knowledge building.

4.10. Additional BFPC Staff Training:

- 4.10.1. Send the WIC Director or designee and the Breastfeeding Peer Counselor Program Manager to a two (2) day training at the ADHS office in Phoenix during each Peer Counseling Program contract term.
- 4.10.2. Provide training of Breastfeeding Peer Counselors using the *Loving Support through Peer Counseling* curriculum within one (1) month of employment.
- 4.10.3. Provide continual education and adequate resources to peer counselors. Continual education shall include basic and continuing breastfeeding training, and may include opportunities to shadow lactation consultants, opportunities to meet with other peer counselors, and related training such as counseling skills, adult learning styles, and others.
- 4.10.4. Provide all WIC clinic staff the PowerPoint presentation "Peer Counseling: Making a Difference for W IC Families" through the *Loving Support* curriculum at least once during each Peer Counseling Program contract term.

4.11. Data Collection

The Contractor shall:

- 4.11.1. Utilize the hardware, software, and training provided by the Arizona WIC Program to operate the Contractor's portion of the WIC Computer Data System.
- 4.11.2. Complete all data elements required on the WIC Computer Data System as outlined in the WIC PPM.
- 4.11.3. WIC Computer Data System users are required to maintain integrity by keeping their username and password secure. Users shall not share their login information with others.
- 4.11.4. When applicable and necessary to fulfill WIC business functions, local WIC IT shall coordinate with ADHS WIC IT to ensure immediate restoration of technical equipment (i.e. ADHS owned equipment) to include but not limited to providing a temporary administrative account.

4.12. Administrative Services

The Contractor shall:

- 4.12.1. In addition to complying with the Guidance for Federal Grant Award Management (Blue Book), State of Arizona Accounting Manual (SAAM) for Contractors of ADHS Funded programs, AND Chapter 12 and 13 of the Policy and Procedure Manual (PPM):

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- 4.12.1.1. Maintain a formal inventory listing or subsidiary record of all equipment owned by the Contractor in an organized manner as a part of the official accounting system. Ensure the non-capital and capital equipment listing includes the following: Tag or ID number, Description, Purchase cost or fair market value on date of donation, Purchase or donation date, Location, Disposal Date, Funding Source, Serial Number, Manufacturer, Model Number, RAM size (if applicable), Specifications (if applicable), and Receipt/Invoice (proof of purchase).
- 4.12.1.2. Provide maintenance and upkeep for all equipment purchased with WIC funds. Maintenance may be provided through the Contractor's own organization or the Contractor may participate in State maintenance contracts where available.
- 4.12.1.3. Obtain written permission from ADHS prior to expending WIC funds to purchase equipment with a value of \$5,000 or more.
- 4.12.1.4. Obtain written permission from ADHS prior to expending WIC funds for the purchase of any asset resource related item: hardware (e.g. computers, printers) or software, regardless of cost as well as their transfer or disposal;
 - 4.12.1.4.1. Once the asset resource related item is purchased ADHS must be provided the information listed in 8.1.1 within 10 business days of the item being received
 - 4.12.1.4.2. Transfer and disposals must follow the procedures outlined in the PPM.
 - 4.12.1.4.3. Destroyed/Missing/Stolen asset resources must be reported upon discovery no later than 10 business days from the time of incident.
- 4.12.1.5. Submit to ADHS for approval in writing any policy or procedure that deviates from those set forth in the Arizona WIC PPM.
- 4.12.1.6. Update the Local Agency information on a timely basis on the WIC Clinic Search administrative website including but not limited to names of CEO/Health Officer, WIC Director, Clinic Supervisors, Nutrition Coordinator, Breastfeeding Coordinator, Training Coordinator, FMNP Coordinator, IT lead(s), clinic names, addresses, phone numbers, days and hours of operations, closure days, and other pertinent information for the public to know.
- 4.12.1.7. Provide at least 10 weeks written notice when planning on opening, moving, or suspending WIC services at any location.
- 4.12.1.8. Read, timely, all ADHS provided documents and provide requested response, if applicable.
- 4.12.1.9. The Local Agency Director shall ensure the State Agency has their most recent contact information in an effort to maintain current and accurate information in the Arizona Health Alert Network (AzHAN) account.
- 4.12.1.10. Maintain records of WIC services in WIC Computer Data System, if applicable, according to the WIC PPM, including but not limited to:
 - 4.12.1.10.1. Signed consent for anemia screening and anthropometrics;
 - 4.12.1.10.2. Signed Rights and Obligations for enrolled participant files (active and inactive);
 - 4.12.1.10.3. Eligible participant files (active and inactive);
 - 4.12.1.10.4. Ineligible applicant signatures;

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- 4.12.1.10.5. Monthly Participation Reports by Category and Ethnicity;
- 4.12.1.10.6. Outreach files;
- 4.12.1.10.7. Medical documentation;
- 4.12.1.10.8. Staff files: Trainings attended, skill observations, and annual evaluations;
- 4.12.1.10.9. Documentation of dual participation actions;
- 4.12.1.10.10. Waiting lists (when applicable);
- 4.12.1.10.11. Reconciliation of eWIC cards;
- 4.12.1.10.12. Civil rights file to include documentation and resolution of all civil rights complaints;
- 4.12.1.10.13. Documentation of annual civil rights and voter registration training of all employees; and
- 4.12.1.10.14. Documentation of WIC Confidentiality and Conflict of Interest forms.
- 4.12.1.11. Correct and resolve inappropriate or missing participant information, improbable assessment values, duplicate participation, and other quality assurance WIC Computer Data System issues identified in the report provided to the Contractor by ADHS within the timeframes specified in the WIC PPM.
- 4.12.1.12. Correct any regulatory deficiency or discrepancy noted during any of the three program Management Evaluations, Audits, Local Agency Compliance Investigations or Program Financial Reviews within sixty (60) calendar days of the date of the audit report unless an extension date is granted by the auditing/reviewing agency and documented.
- 4.12.1.13. Prepare and submit individual electronic copies of the Contractor's Expenditure Reports (CER) for each contracted program according to the instructions and requirements of the WIC PPM.
- 4.12.1.14. Local agencies not meeting their monthly participation level as outlined in Section H of this document shall prepare and submit monthly status reports of caseload countermeasures taken.
- 4.12.1.15. Prepare and submit Final Closeout CER invoice for each contracted program reflecting the cumulative expenditures for a contract year.
- 4.12.1.16. Prepare and submit WIC Local Agency Quarterly Cost Summary Reports that matches the amount of each quarter's expenditures including the Final Closeout CER invoice respectively in accordance with the requirements in the WIC PPM.
- 4.12.1.17. Prepare and submit an annual evaluation on the annual Contractor's Outreach Plan and a progress report on activities accomplished during the year.
- 4.12.1.18. Prepare and submit an annual evaluation on the Two (2) Year Nutrition Services and Training Plan and a progress report on activities accomplished during the year.
- 4.12.1.19. Prepare and submit an annual Amendment Application in accordance with the individual program requirements that will include budget breakdown of line items and budget justifications of any budget changes.

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4.12.1.20. Prepare and submit a Local Agency Annual Summary of the Local Agency self-assessment(s). Local Agency self-assessments must be done annually in the year that the Local Agency has a Management Evaluation, and semi-annually in the year that they do not have a Management Evaluation.

4.12.1.21. Prepare and submit all required plans, reports, and documents in accordance with the requirements in the WIC PPM.

4.13. Additional Peer Counseling Administrative Services:

4.13.1. Prepare and submit a Quarterly Report for the Peer Counseling services in the format provided by ADHS.

4.13.2. Present program logistics, highlights, and data at a Nutrition Programs meeting at a time and location to be determined by ADHS.

4.14. Additional FMNP Administrative Services:

4.14.1. Assume liability for the distribution and reconciliation of all FMNP checks, and assume financial liability for any checks that cannot be accounted for and reconciled.

5. Deliverables

If applicable, any work plan or other documentation submitted to and accepted by ADHS regarding participation in WIC, BFPC or FMNP shall be incorporated into this Agreement. Furthermore, any policy or procedure that deviates from those set forth in the Arizona WIC Program and / or Arizona Farmers' Market Nutrition Program Policies and Procedures Manuals requires approval from ADHS prior to implementation.

The Contractor shall submit to ADHS:

- 5.1. Updated copies of Local Agency Policies and Procedures that will include coordination and referral procedures with internal and external programs and agencies, i.e. WIC and Peer Counseling;
- 5.2. Prepare and submit individual electronic CER copies invoice for each program, not later than *thirty* (30) days following the end of each report month of the program year;
- 5.3. WIC Local Agency Quarterly Cost Summary matching the WIC Contractor's Quarterly CER not later than *thirty* (30) days following the end of each quarter report of the program year
- 5.4. Final CER invoice for each program not later than *forty-five* (45) days following the end of each Contract year;
- 5.5. WIC Local Agency 4th Quarterly Final Cost Summary matching the WIC Contractor's Final CER, not later than *forty-five* (45) days following the end of each Contract year;
- 5.6. Each Contracted Program's amendment application by the specified deadline for the following contract year which contains the following information:
 - 5.6.1. Request for Caseload to be served;
 - 5.6.2. Request for budget and budget justification;
 - 5.6.3. Updated Participant Nutrition Services and Training Plan for the following contract year and a evaluation of the previous year's activities;
 - 5.6.4. Updated Outreach Plan of each contract year and a progress report of previous year's activities; and
 - 5.6.5. Any additional services and other documents specified.

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5.7. All required responses to federal and state audits and reviews submitted in a timely manner

5.8. Additional Peer Counseling Deliverables:

5.8.1. Quarterly reports for the Peer Counseling Program to be submitted 15 days after each quarter of the Contract year.

6. Performance Standards And Awards

6.1. Upon Contract finalization, ADHS shall notify the Contractor by certified mail of the assigned caseload, and throughout the term of the Contract, of any changes to the assigned caseload. The Contractor shall maintain an average monthly participation level in accordance with the following table:

<u>Caseload Assignment</u>	<u>% Maintained</u>
<10,000 participants/month	97%
10,000 to <49,999 participants/month	98%
>50,000 participants/month	99%

6.2. If, after each quarter of the Federal Fiscal Year (October through September), the Contractor has not attained the required participation level, ADHS will have the option of reducing the assigned caseload and resources to the Contractor's current service level. ADHS may also then move the unused caseload and corresponding resources to other WIC Local Agencies in order to fully utilize the resources.

6.3. Local Agencies shall be eligible for one (1) or more of the following awards:

6.3.1. Any local agency which meets 100% or more of its caseload assignment for three (3) consecutive months during the previous 12 month period (April 1 through March 31) may receive an award of \$10,000 added to that agency's following fiscal year WIC funding formula award if the Contract is extended and additional expenditures can be identified;

6.3.2. Utilizing the "Nutrition Discussion Contact" report ran for the last 6 months preceding time of application (September through February), any Local Agency meeting 95% of its nutrition education documentation requirement for each participation time period may receive an award of \$10,000 added to that agency's following fiscal year WIC funding formula award if the Contract is extended and additional expenditures can be identified;

6.3.3. The agency with the highest percentage of IENs in the first quarter (Oct 1 through Dec 31) of each fiscal year within their Assigned Caseload Cohort may be eligible to receive an award added to the following fiscal year WIC funding formula award if the Contract is extended and additional expenditures can be identified. Assigned Caseload Cohorts and award amounts will be determined as follows:

Assigned Caseload Cohort	Award Amount
Less than 2000	\$5,000
2000 - 8000	\$10,000
More than 8000	\$15,000

6.3.4. Pursuant to 7 CFR 246. 14, which allows the WIC program to fund nutrition services and administrative expenses, the Performance Awards may be part of the annual funding formula and awarded to the Contractor in the next contract year; and

6.3.5. USDA has the option to award breastfeeding performance awards to State Agencies who exceed the national average. If funds are awarded to Arizona, each Local Agency program will receive a proration of the amount based upon the number of exclusively nursing women in their Local Agency. It will be a set amount, and may only be used for purposes outlined in the current federal guidelines.

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT
ADHS19-207425	SCOPE OF WORK

7. State Provided Items

ADHS shall provide the following:

- 7.1. Paper copies of the Arizona WIC Program and the Arizona FMNP Policies and Procedures Manual, upon request.
- 7.2. Hardware and software necessary for operation of the WIC Computer Database System.
- 7.3. Learning Management courses for software training and nutrition education courses for staff to complete and/or pass.
- 7.4. FMNP Food Instrument stock and blank eWIC Cards.
- 7.5. Method for submitting expenditures. The ADHS WIC Program Manager or designee will accept and approve the expenditures prior to payment.
- 7.6. Nutrition Education Materials for participants.
- 7.7. Quarterly Report template (electronic) for Peer Counseling Program.
- 7.8. Technical assistance and support.
- 7.9. Breastfeeding material lending and library for Peer Counselor use.
- 7.10. Assistance with International Board Certified Lactation Consultant (IBCLC) career track or advanced lactation consultant education, when appropriate.
- 7.11. *Loving Support through Peer Counseling* curriculum, which includes the PowerPoint presentation "Peer Counseling: Making a Difference for WIC Families," when appropriate.
- 7.12. FMNP Participant Guides.
- 7.13. Online, downloadable information regarding the location and hours of approved Arizona Farmers' Markets.
- 7.14. Monitoring of WIC Authorized Vendors and Farmers' Markets for compliance with regulations, and coordination with tribal and county officials when doing compliance buys for markets on a reservation.
- 7.15. Periodic redemption reports for issued benefits.
- 7.16. Formats for required reports.

8. Reference Documents

- 8.1. Arizona WIC Program Policies and Procedures Manual, refer to:
http://azdhs.gov/azwic/local_agencies_policyManual.htm
- 8.2. Arizona FMNP Manual, refer to:
<http://azdhs.gov/documents/prevention/azwic/fmnp/fmnp-local-agency-manual.pdf>
- 8.3. Guidance for Federal Grant Award Management (Blue Book):
<https://www.azdhs.gov/documents/prevention/womens-childrens-health/childrens-health/homevisiting/guidance-for-federal-grant-award-management.pdf>
- 8.4. State of Arizona Accounting Manual (SAAM): <https://gao.az.gov/publications/SAAM/>

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- 8.5. Federal Regulations: Refer to:
<https://www.ecfr.gov/cgi-bin/text-idx?SID=a42889f84f99d56ec18d77c9b463c613&node=7:4.1.1.1.10&rgn=div5>
- 8.6. 7 CFR 246.14: program costs
- 8.7. 7 CFR 246.26 (h)(2): notice to applicants and participants about the use and disclosure of confidential applicant and participant information
- 8.8. 7 CFR 246.26 (h)(3): implementation of a written agreement and state plan to regulate use and disclosure of confidential applicant and participant information

9. Notices, Correspondence, and Reports

- 9.1. Notices, correspondence, reports and invoices/CERs from the contractor to ADHS shall be sent to:

Arizona Department of Health Services
150 N. 18th Avenue, Suite 310
Phoenix, Arizona 85007
Attention: WIC Program Manager

- 9.2. Notices, correspondence, and reports (and payments if sent to same address) from ADHS to the contractor shall be sent to:

Contractor: Cochise Health and Social Services

Attention: Judith Gilligan

Address: 1415 Melody Lane

Address: Building A

City, State, ZIP: Bisbee, AZ 85603

Phone: 520 432 9400

Fax: 520 432 9480

Email: jgilligan@cochise.az.gov

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT PRICE SHEET
ADHS19-207425	

WIC Services

October 1, 2018 to September 30, 2019

Cost Reimbursement Line Item Budget

WIC Services Account Classification	Amount
Personnel	\$322,468.00
Employee Related Expenses	\$151,715.00
Professional & Outside Services	\$0.00
Travel Expense	\$13,244.00
Occupancy Expenses	\$0.00
Other Operating Expenses	\$16,792.00
Capital Expenditures	\$0.00
Indirect Cost	\$27,711.00
RD Supplement	\$50,000.00
Total	\$581,930.00

Breastfeeding Peer Counseling Services

Cost Reimbursement Line Item Budget

Account Classification	Amount
Personnel	\$29,295.00
Employee Related Expenses	\$13,656.00
Professional & Outside Services	\$2,000.00
Travel Expense	\$2,278.00
Occupancy Expenses	\$0.00
Other Operating Expenses	\$1,271.00
Capital Expenditures	\$0.00
Indirect Costs	\$0.00
Total	\$48,500.00

Farmer's Market Nutrition Program Services

March 1, 2019 to September 30, 2019

Type of Service	Unit Rate	Unit of Measure	Estimated Number of Participants
WIC FMNP Check Issuance	\$1.75	WIC Participant	AS NEEDED

CONTRACT NUMBER	INTERGOVERNMENTAL AGREEMENT PRICE SHEET
ADHS19-207425	

Additional Terms and Conditions:

With prior written approval from the Program Manager, the Contractor is authorized to transfer up to a maximum of ten percent (10%) of the total budget amount between funded line items except for Registered Dietitian Expenses. Transfers of funds are only allowed between funded line items. Transfers exceeding ten percent (10%) or to a non-funded line item shall require an amendment. The Registered Dietitian line item is meant to fund additional Registered Dietitian position(s) to meet high risk counseling requirements.

Authorization for purchase of services under this Contract shall be made only upon ADHS issuance of a Purchase Order that is signed by an authorized agent. The Purchase Order will indicate the Contract number and the dollar amount of funds authorized. The Contractor shall only be authorized to perform services up to the amount on the Purchase Order. ADHS shall not have any legal obligation to pay for services in excess of the amount indicated on the Purchase Order. No further obligation for payment shall exist on behalf of ADHS unless a.) the Purchase Order is modified with an official ADHS Procurement Change Order, and/or b.) an additional Purchase Order is issued for purchase of services under this Contract.

ADHS reserves the right to adjust awards given to local agencies depending on federal dollars received. Adjustments will be at the discretion of ADHS.

Additional WIC Program:

Should additional administrative monies become available through state or federal grants, ADHS may increase the purchase order to increase the number of participants served and increase the total of this contract.

The assigned caseload for FFY 2019 is: 3,500

Additional Breastfeeding Peer Counseling Program:

Allowable costs for the Peer Counseling Program include compensation for peer counselors and designated peer counselor managers/coordinators, and related costs such as training and training materials; telephone expenses for participant contacts (including pager, cell phones and answering machines); travel for training and home and hospital visits; recruitment of peer counseling staff; and the purchase of demonstration materials (e.g., breast pumps for demonstration purposes, videos). Out of state travel must be pre-approved by ADHS. Items and materials for distribution to WIC participants (e.g. breast pumps, breastfeeding aids) are not allowable costs.

Farmer's Market Nutrition Program:

If funding for additional FMNP checks becomes available and the contract budget (as shown on the Contract Price Sheet) has been fully expended, Contractor may choose whether or not to distribute the additional checks with no increase in the contract budget.