

**AMENDED COOPERATIVE AGREEMENT  
SIGNATURE PAGE**

AGREEMENT NUMBER **18-0294-008-SF**

AMENDMENT NUMBER **1**

1. This Agreement is entered into between the State Agency and the Recipient named below:

STATE AGENCY'S NAME

**DEPARTMENT OF FOOD AND AGRICULTURE (CDFA)**

RECIPIENT'S NAME

**COUNTY OF SANTA BARBARA**

2. The term of this Agreement is: July 1, 2018 through June 30, 2019

3. The maximum amount of this Agreement is: \$161,674.01

4. The parties agree to comply with the terms and conditions of the following exhibits which are by this reference made a part of the Agreement:

Paragraph three (3) of the Agreement is hereby amended to increase the Agreement by \$133,862.92 for a new total not to exceed \$161,674.01.

A revised Budget for Fiscal Years 18/19 for the increased amount is attached (2 Pages), replaces the Budget in the original Agreement, and is incorporated into the Agreement effective May 1, 2019.

Amend to add funds because County of Santa Barbara encumbered additional funding from other counties due to insufficient federal funds that were not fully allocated throughout an original county agreement request.

All other terms and conditions of this Agreement shall remain the same.

**IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.**

**RECIPIENT**

RECIPIENT'S NAME (*Organization's Name*)

**COUNTY OF SANTA BARBARA**

BY (*Authorized Signature*)

DATE SIGNED (*Do not type*)

PRINTED NAME AND TITLE OF PERSON SIGNING

ADDRESS

263 Camino Del Remedio, Santa Barbara, CA 93110-1335

**STATE OF CALIFORNIA**

AGENCY NAME

**DEPARTMENT OF FOOD AND AGRICULTURE (CDFA)**

BY (*Authorized Signature*)

DATE SIGNED (*Do not type*)

PRINTED NAME AND TITLE OF PERSON SIGNING

**CRYSTAL MYERS, BRANCH CHIEF, OFFICE OF GRANTS ADMINISTRATION**

ADDRESS

1220 N STREET, ROOM 120  
SACRAMENTO, CA 95814

**County Personnel Cost Work Sheet**  
**Detector Dog Team Program**  
**FY 2018/2019**  
**July 1, 2018 through June 30, 2019**  
**Revised May 1, 2019**

Santa Barbara County

Title	Hourly Wage	Hourly Benefit Amount	Total Hourly Rate	Original Estimated Hours to be Worked	Original Total Cost	New Estimated Hours to be Worked	New Total Cost
Assistant Commissioner	\$63.42	\$41.08	\$104.50	0	\$0.00	0	\$0.00
Deputy Ag Commissioner	\$46.16	\$39.21	\$85.37	0	\$0.00	0	\$0.00
Handler/Ag Biologist III	\$34.37	\$35.20	\$69.57	0	\$0.00	1541	\$107,207.37
Support Staff/Ag Biologist I	\$26.81	\$27.31	\$54.12	0	\$0.00	0	\$0.00
Support Staff/Ag Biologist II	\$31.11	\$34.25	\$65.36	0	\$0.00	0	\$0.00
Support Staff/Ag Biologist III	\$34.37	\$35.20	\$69.57	0	\$0.00	0	\$0.00
<b>Total:</b>				0	\$0.00	1,541	\$107,207.37

County Work Plan Summary  
 Detector Dog Team Program  
 FY 2018/2019  
 July 1, 2018 through June 30, 2019  
 Revised May 1, 2019



CALIFORNIA DEPARTMENT OF  
 FOOD & AGRICULTURE

Santa Barbara County  
 Agreement Manager: Rudy Martel

Expenses	Description	Original Total		New Total	
		Total Activity Hours:	0	1,541	\$107,207.37
Personnel Costs for Dog Team Activities	Inspections of parcel facilities and other activities	Overhead Percentage:	0.00%	21%	\$22,513.55
Overhead Costs	Indirect Costs (Not to exceed 25% of Total Personnel Costs)	Itemized Supply List Required (Y/N):	N	N	\$15,330.59
Operating Expenses	All supply/equipment costs exceeding \$5,000.00 must be accompanied by a itemized list of items to be purchased.	Estimated Miles:	22,900	30,500	\$16,622.50
Mileage	Mileage rate must be \$0.545, or current federal rate ( <a href="https://www.gsa.gov/travel/plan-book/transportation-airfare-rates-pov-rates-etc/privately-owned-vehicle-pov-mileage-reimbursement-rates">https://www.gsa.gov/travel/plan-book/transportation-airfare-rates-pov-rates-etc/privately-owned-vehicle-pov-mileage-reimbursement-rates</a> ).	Rate Per Mile:	0.545	0.545	
TOTAL COST:			\$27,811.09		\$161,674.01