ACCEPTANCE OF AWARD

Tuberculosis Control Local Assistance Funds

COUNTY OF HUMBOLDT

FUNDING SOURCE	FEDERAL BASE	STATE BASE
AWARD NUMBER:	2612BASE-F	2612BASE-S
AWARD AMOUNT:	$5,925	$6,507
FUNDING PERIOD:	7/1/2026-12/31/2026	7/1/2026-6/30/2027

I hereby accept this award. By accepting this award, I agree to the requirements as described in the FY 2026-2027 Tuberculosis Control Local Assistance Funds Standards and Procedures Manual and any other conditions stipulated by the California Department of Public Health, Tuberculosis Control Branch.

This award is contingent upon the availability of funds appropriated by the State of California and the federal government. The CDPH TBCB reserves the right to reduce, amend, or withdraw funding, in whole or in part, should funding from the state or federal government be reduced, delayed, or otherwise adjusted.

_____ _____
Authorized Signature Date

Sofia Pereira Public Health Director
Print Name Title

* Federal funds fiscal information: Project Grants and Cooperative Agreements for Tuberculosis Control Programs; ALN number: 93.116; FAIN number: NU52PS910282