

Woodsmoke Reduction Program Grant Agreement
Appendix A

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of March __, 2020.

DEPARTMENT FISCAL REVIEW:

Barbara A. Moed, APCO 2/14/20

Budgeted: ☐ Yes ☒ No

Budget Unit: 0327

Line Item: 76-0462 Woodsmoke Program
Trust Account

Grant: ☒ Yes ☐ No

Grant No.: G18-WSRP-14

CONTRACTOR/COMPANY NAME

By: _____

Date: _____

NAME AND ADDRESS OF CONTRACTOR:

California Air Resources Board

P.O. Box 2815

Sacramento, California 95812

COUNTY OF MENDOCINO

By: _____
JOHN HASCHAK, Chair
AIR QUALITY MANAGEMENT DISTRICT BOARD

Date: _____

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

ATTEST:

CARMEL J. ANGELO, Clerk of said Board

By: _____
Deputy

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

CARMEL J. ANGELO, Clerk of said Board

By: _____
Deputy

COUNTY COUNSEL REVIEW:

APPROVED AS TO FORM:

CHRISTIAN M. CURTIS,
Acting County Counsel

By: _____
Deputy

Date: _____

INSURANCE REVIEW:

By: _____
Risk Management

EXECUTIVE OFFICE/FISCAL REVIEW:

By: _____
Deputy CEO

Date: _____

Date: _____

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; **\$50,001+ Board of Supervisors**

Exception to Bid Process Required/Completed ☐ _____

Mendocino County Business License: Valid ☐

Exempt Pursuant to MCC Section: _____