

# RESEARCH ADVISORY PANEL MEETING WEBEX





BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR

DEPARTMENT OF CONSUMER AFFAIRS • STRUCTURAL PEST CONTROL BOARD

2005 Evergreen St., Suite 1500, Sacramento, CA 95815

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# STRUCTURAL PEST CONTROL BOARD RESEARCH ADVISORY PANEL MEETING

### MEETING NOTICE Tuesday, December 3, 2024, 10:00 a.m.

This teleconference meeting will be held in accordance with Government Code section 11123.5. Board staff will be present at the physical meeting location below, and all panel members will be participating virtually from remote locations.

Members of the public may participate from a remote location by joining the meeting via WebEx: https://dca-meetings.webex.com/dca-meetings/i.php?MTID=m690d9be705a8e47d4b1c65462e30f0ee

### If joining using the link above:

Webinar number: 2482 571 7646 Webinar password: SPCB123

### **Physical Meeting Location**

SPCB Conference Room 2005 Evergreen Street, Suite 1500 Sacramento, CA 95815

### If joining by phone:

+1-415-655-0001 US Toll Access code: 2482 571 7646

Passcode: 722123

Members of the public may, but are not required to, identify themselves. When signing into the WebEx platform, participants may be asked for their name and email address. Participants who choose not to provide their names will need to provide a unique identifier such as their initials or another alternative, so that the meeting moderator can identify individuals who wish to make public comment. Participants who choose not to provide their email address may use a fictitious email address in the following sample format: <a href="mailto:XXXXX@mailinator.com">XXXXXX@mailinator.com</a>.

#### AGENDA

- 1. Roll Call/ Introductions
- 2. Consideration of Topic(s) for Soliciting Request(s) for Proposals for Research Contract(s) Funded by the Structural Pest Control Research Fund Pursuant to Business & Professions Code section 8674(t)(3)
- 3. Discuss and Possibly Establish Criteria Pursuant to Business and Professions Code section 8674(t)(3) that Research Proposals Must Meet for Recommendation to the Board
- 4. Public Comment for Items Not on the Agenda
  The Panel may not discuss or take action on any matter raised during this public comment
  section that is not included on this agenda, except to decide whether to place the matter on
  the agenda of a future meeting. [Government Code Sections 11125, 11125.7(a)]
- 5. Adjournment

This agenda can be found on the Structural Pest Control Board's Website at: <a href="www.pestboard.ca.gov">www.pestboard.ca.gov</a>

# **2018 SOLICITATION REQUEST**



### STRUCTURAL PEST CONTROL BOARD-ADMINISTRATION UNIT

2005 EVERGREEN STREET, STE. 1500 SACRAMENTO, CA 95815 P 916-561-8700 | F 916-263-2469 | <u>www.pestboard.ca.gov</u>



### STRUCTURAL PEST CONTROL BOARD RESEARCH PROPOSAL

### **SOLICITATION NOTICE NO. SPCB-18-01**

### May 10, 2018

You are invited to review and respond to this **Solicitation Notice No. SPCB-18-01** being requested by Department of Consumer Affairs (DCA), Structural Pest Control Board (SPCB), hereinafter referred to as the State. To submit an offer, you must comply with all instructions contained in this document. By submitting an offer, the Offeror agrees to the terms and conditions stated in this solicitation notice.

Note that all agreements entered into with the State of California will include by reference UniversityTerms and Conditions and Contractor's Certification Clauses that may be viewed and downloaded at Internet site: <a href="http://www.dgs.ca.gov/ols/Resources/StandardContractLanguage.aspx">http://www.dgs.ca.gov/ols/Resources/StandardContractLanguage.aspx</a>. If you do not have Internet access, a hard copy can be provided by contacting the person listed below.

Please read the attached document carefully. The response due date is June 8<sup>th</sup>, 2018, at 5:00 p.m. Pacific Standard Time (PST). Responses to this solicitation notice must be clearly labeled, signed, and sent by email, fax, or by mail to the SPCB contact person

Structural Pest Control Board
Attention: Kristina Jackson-Duran
2005 Evergreen Street, Suite 1500
Sacramento, CA 95815

Telephone: (916) 561-8710

Email: Kristina.Jackson-Duran@dca.ca.gov

Please note that no verbal information given will be binding upon the State unless such information is issued in writing as an official addendum.

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### A. Purpose and Description of Services

The Department of Consumers Affairs, Structural Pest Control Board (SPCB), has established a research fund, currently at approximately \$1,000,000, funded by pesticide use stamp purchases, to support research in the structural pest control field. All or a portion of the existing funds may be appropriated for research projects.

In accordance with Business and Professions Code Section 8674(t)(3), SPCB is soliciting proposals from educational research institutions in California with scientific research history focused on long-term prevention or suppression with minimal impact on human health, property, the environment, and non-target organisms, in the field of structural pest management, as described in SPCB Act, Section 1984. Proposals should focus on new studies and treatment of integrated pest management (IPM) for the following structural pests: ants, bed bugs, cockroaches, drywood termites, rodents, and yellowjackets. Within this framework, proposals may also include original innovative research on new procedures, processes, practices or programs.

#### B. Deliverables:

The contracting research entity shall provide a brief (two-three pages) written interim Progress Report every six (6) months, and a comprehensive written Final Report within three (3) months of completion of each research project. The progress reports are to address progress made, findings to date and problems encountered by the contractor. At the contractor's expense, the contracting entity will be asked to present a progress report at one (1) Board Meeting a year and upon completion of the Final Report. In addition to attending one (1) Board Meeting a year, if SPCB determines that a progress report presents findings of value, the contracting entity may be asked to present at additional Board Meeting(s) at the contractor's expense. The contractor shall provide a PDF version of all progress reports and Final Report to be posted on SPCB website and included in Board Meeting materials.

### C. Minimum Qualifications for Proposers

Proposers must have prior scientific research knowledge and experience of the principal project director and key participants, with relevance to the proposal. Proposers (individual researchers) must include a summary of no more than three (3) prior research projects or reprints of prior publications carried out by the proposer, that show significant research in structural pest management. The proposer must provide the name, tittle, address and telephone numbers of a reference relevant to the above-referenced projects (Attachment 4). The proposer must also demonstrate that the projects were completed within the allotted time frame and, if not, provide an explanation.

### D. Proposal Requirements and Information

#### 1. Time Schedule

All proposers are hereby advised of the following schedule and will be expected to adhere to the required dates and times.

Event	Date	Time
Solicitation Notice Available to Prospective Proposers	May 10, 2018	N/A
Written Question Submittal Deadline to Kristina Jackson-Duran	May 21, 2018	СОВ
Responses to Proposers' Questions	May 23, 2018	СОВ
Final Date for Proposal Submission	June 8, 2018	5:00 pm PST
Review of Proposers' Minimum Qualifications	June 13, 2018	
Public Research Advisory Panel (RAP) Meeting and	June 19, 2018	
Evaluation/Scoring of Proposals. (10-day public notice posted by		
SPCB, Multiple Contracts may be awarded)		
Board Meeting (Board Members to Adopt Recommended	July 26, 2018	N/A
Contracts)		
Agreement Start Date	September 1, 2018 or	N/A
	upon DGS approval	

### 2. Work Plan and Work Schedule Requirements

The proposer shall develop and submit a work plan or schedule for task completion, and identify each major task, necessary subtask, and/or specific milestone by which progress can be measured and payments made. Proposers should explain the organizational policies, practices, and conditions, which would apply to their accountability for procedures and products, included in a contract. The management plan to oversee the project must be specifically identified. A description of the data analysis and how it will be used must be included in the proposal.

### a) Project Personnel

List all proposed staff that will be working on the project and their titles, including professional and technical, full-time and part-time staff, and the percentage of time each will expends on the proposed project, regardless of whether any salary is to be funded by the State contract. Describe the duties and qualifications of all staff engaged in the proposed research project. If staff members are not currently employed by the contracting organization, state when they will begin. Include a curriculum vitae or resume of all professional staff.

### b) Facilities and Resources

Describe available research facilities, major equipment and resources, and the capacity to manage overall project activities.

### 3. Cost Detail Format and Requirements

Prepare a detailed line-item budget for the proposed contract period using the sample format provided in Attachment No. 2. If a two or three-year project is projected, a Budget for the second and/or third year must also be submitted.

Prepare a Budget Narrative explaining the proposed costs. Explain the need for budgeted travel, equipment, subcontracts and consultants (Attachment 3).

The proposed work should be broken down into the outline in Work Plan and Work Schedule (see No. 2 above) for the purpose of this proposal.

### 4. Cost Limitation

- a) The total amount of each proposal or resulting agreements shall each not exceed \$330,000
- b) It is understood and agreed that this total is an estimate and the SPCB will pay for only those services actually rendered as authorized by the SPCB Contract Manager or his/her designee.

#### 5. Submission of Proposal

- a) Proposals should provide straightforward and concise descriptions of the proposer's ability to satisfy the requirements of this solicitation notice. The proposal must be complete and accurate. Omissions, inaccuracies, or misstatements will be sufficient cause for rejection of a proposal.
- b) Proposals must be submitted as a hard copy under sealed cover by dates and times shown in Section D, Proposal Requirements and Information, Item 1, Time Schedule. Proposals received after the specified date and time will not be considered. Proposers are required to submit their proposals to the following address:

Structural Pest Control Board Attention: Kristina Jackson-Duran 2005 Evergreen Street, Suite 1500 Sacramento, CA 95815

- c) The original proposal must be marked "ORIGINAL COPY." All documents contained in the original proposal package must have original signatures and must be signed by a person who is authorized to bind the proposing form. All additional proposal sets may contain photocopies of the original package.
- d) Eight (8) copies of the proposal must be submitted.
- e) All proposals shall include the documents identified in Section E, Attachment 1 Required Attachment Checklist. Proposals not including the proper "required attachments" shall be deemed non-responsive. A non-responsive proposal is one that does not meet the basic proposal requirements.
- f) Proposals must be submitted for the performance of all the services described herein. Any deviation from the work specifications of the proposal will not be considered and will cause it to be rejected.
- g) Costs for developing proposals and in anticipation of award of the agreement are entirely the responsibility of the proposer and shall not be charged to the State of California.
- h) A cover letter, which shall be considered an integral part of the Final Proposal, shall be signed by an individual who is authorized to bind the proposer contractually. The signature must indicate the title or position that individual holds in the research entity.
- A proposer may modify a proposal after its submission by withdrawing its original proposal and resubmitting a new proposal prior to the proposal submission deadline. Proposal modifications offered in any other manner, oral or written, will not be considered.
- j) A proposer may withdraw its proposal by submitting a written withdrawal request to the State, signed by the proposer or an authorized agent. A proposer may thereafter submit a new proposal prior to the proposal submission deadline. Proposals may not be withdrawn without cause subsequent to proposal submission deadline.
- k) The awarding agency may modify the proposal after its submission of proposal by the issuance of an addendum to all parties who received a proposal package.
- I) The awarding agency reserves the right to reject all proposals for reasonable cause.
- m) Proposers are cautioned to not rely on the State during the evaluation to discover and report to the proposer any defects and errors in the submitted documents. Proposers, before submitting their documents, should carefully proof them for errors and adherence to the proposal requirements.
- n) Where applicable, proposer should carefully examine work sites and specifications. Proposers shall investigate conditions, character, and quality of surface or subsurface materials or obstacles that might be encountered. No additions or increases to the agreement amount will be made due to a lack of careful examination of work sites and specifications.

### 6. Evaluation and Scoring Process

- a) Each proposal will be checked for the presence or absence of required information in conformance with the submission requirements of this proposal.
- b) The State will put each proposal through a process of evaluation to determine its responsiveness to the State's needs.
- c) Proposals that contain false or misleading statements, or which provide references, which do not support an attribute or condition claimed by the proposer, may be rejected. If, in the opinion of the State, such information was intended to mislead the State in its evaluation of the proposal, and the attribute, condition, or capability is a requirement of this solicitation notice, it will be the basis for rejection of the proposal.
- d) The proposals will be evaluated and scored according to the criteria indicated below:

RATINGS/SCORING CRITERIA	MAXIMUM POINTS	MINIMUM POINTS
1. Research Objectives	25	21
2. Project Direction (Work Plan and Work Schedule)	35	29
3. Qualifications	20	16
4. Budget and Budget Narrative	20	14
TOTAL	100	80

Proposals that meet the minimum specified requirements and are considered to be responsive will be evaluated and assigned a score. Those proposals that do not meet the minimum qualifications will be disqualified and will not be evaluated. A minimum of 80 points must be achieved for items 1-4 (described below) and all required

documents must be submitted to be considered responsive. A responsive proposal is one that meets or exceeds the requirements stated in this solicitation notice.

Proposals must receive a minimum combined score of 80 points out of a maximum 100 points. Proposals that do not meet the minimum requirements will be eliminated from consideration.

If any proposals are received containing a bid offering price, which in the opinion of the awarding agency is an unreasonable price, the awarding agency shall not be required to award an agreement (Public Contract Code 10344(d) and 10377(d).

### **RATING/SCORING CRITERIA DESCRIPTION**

Maximum Possible Points

25

### 1) Research Objectives

Importance of the research objectives or hypothesis and the potential of the Research to advance knowledge in the field of structural pest management.

- A. Briefly state what the research described in this application is intended to accomplish and what hypotheses or research questions are to be tested.
- B. Briefly sketch the background of the present proposal, critically evaluating existing knowledge and identifying gaps that this project is intended to fill.

### 2) Project Direction (Work Plan and Work Schedule)

35

Presence of a clear research plan including specific goals and objectives, a reasonable timeline, the quality and appropriateness of the design of experiments and methodology selected, and focus on the study on the prioritized need(s) identified in the solicitation notice criteria.

- A. Discuss fully the research design and the procedures to be used and the tentative sequence or timetable for the investigation.
- B. State specific objectives, planned activities, and timelines for reaching objectives for the entire project.
- C. Include a discussion of how the data will be collected, analyzed, and interpreted.
- D. Describe the amount of time allocated to accomplish the major activities of the research project and the monitoring system. The percentage of time of each professional and/or technical investigator involved in the research project must be stated.

### 3) **Qualifications**

20

Prior research experience of the principal/project director and key participants and relevance to the proposal. Quality of research facilities, resources, and capacity to manage overall project activities.

- A. Three (3) prior research projects that show significant research in structural pest management.
- B. List appropriate references and attach other background material and relevant papers.
- C. Describe available facilities, major equipment and resources.
- D. Demonstrate that the contractor has the organization and staff to perform this work and provide information on the professional qualifications and experience of persons assigned to the project.

### 4) **Budget and Budget Narrative**

20

- A. Prepare a detailed line-item budget for the proposed contract period using the sample format Attachment 2.
- B. Prepare a Budget Narrative explaining the proposed costs. Explain the need for individual staff, budgeted travel, equipment, subcontracts and consultants. Give a general description of what is included in General Expense.

#### **Total Possible Points:**

100

### E. Required Attachments

Refer to the following pages for additional Required Attachments that are a part of this agreement.

### **ATTACHMENT 1**

### REQUIRED ATTACHMENT CHECKLIST

A complete proposal will consist of the items identified on the list below.

Complete this checklist to confirm that all items are contained with your proposal. Place a check mark or " $\checkmark$ " next to each item that you are submitting to the State. For your proposal to be responsive, in addition to your proposal, all required attachments must be returned. This checklist should be returned along with your proposal.

It is essential that the Cost Proposal be complete, thorough, and comply with content sequence requirements. The proposal must be typed and double-spaced on 8½ X 11 paper. All pages shall be consecutively numbered. All elements shall follow the sequence presented on the following checklist:

✓ Check	Attachment #	Attachment Name/Description	Form Provided	Completion Required
	Attachment 1	Required Attachment Checklist	YES	YES
	Attachment 2	Cost Proposal/Budget Display Sheets	YES	YES
	Attachment 3	Budget Narrative Form and Explanation of Costs	YES	YES
	Attachment 4	Proposer's References	YES	YES
	Attachment 5	Sample Agreement a) Project Summary and Scope of Work b) Schedule of Deliverables c) Key Personnel d) Authorized Representatives and Notices e) Use of Pre-existing Intellectual Property f) Current & Pending Support g) Third Party Confidential Information (if applicable) h) Budget Justification	YES	YES
	Attachment 6	Resumes (Curriculum Vitae) for Proposer, Proposer's staff involved in project, and all Subcontractors	NO	YES
	Attachment 7	Narrative of Research Objectives, as described in Rating/Scoring Criteria	NO	YES
	Attachment 8	Narrative of Project Direction (Work Plan and Work Schedule), as described in Rating/Scoring Criteria	NO	YES
	Attachment 9	Narrative of Qualifications, as described in "Minimum Qualifications for Proposers" and Rating/Scoring Criteria	NO	YES
	Attachment 10	Copy of current business license, professional certificates, or other credentials	NO	YES

### **ATTACHMENT 2**

# COST PROPOSAL/BUDGET DISPLAY RESEARCH PROPOSAL

YEAR 1 – (for first 12 months)

Period of award (i.e., 1/1/18-12/31/18) Use separate sheet for each year

Period of awa	ara:			
Contractor:				
Project Title/	Description:			
Project ritie/	Description.			
Desci	ription	Hours	Rate	Total
PERONNEL SEF	RVICES			
<ol> <li>Classif</li> </ol>	ication			
<ol><li>Classif</li></ol>	ication			
<ol><li>Classif</li></ol>	ication			
			Total Salaries	
			Total Benefits	
		Т	otal Personnel Services (A)	
SUBCONTRACT	TOR SERVICES			
<ol> <li>Classif</li> </ol>	ication			
<ol><li>Classif</li></ol>	ication			
<ol><li>Classif</li></ol>	ication			
		Total	Subcontractor Services (B)	
OTHER SERVIC	ES			
<ol> <li>Classif</li> </ol>	ication			
<ol><li>Classif</li></ol>	ication			
<ol><li>Classif</li></ol>	ication			
			Total Other Services (C)	
OPERATING EX	(PENSES			
<ol> <li>Supplie</li> </ol>	es and Expense			
2. Travel	In-State			
3. Travel	Out-of-State			
4. Equipr	ment			
5. Other	Costs			
		То	tal Operating Expenses (D)	
	el and Operating			
(Add A throug	h D)			
<b>Indirect Costs</b>	-			
TOTAL COSTS				
(for the first 1	2 months)			

### ATTACHMENT 2, Cont.

# COST PROPOSAL/BUDGET DISPLAY RESEARCH PROPOSAL

### YEAR 2 – (for months 13 thru 24)

Period of award (i.e., 1/1/18-12/31/18) Use separate sheet for each year

(for 12 months)

Period of award:			
r eniod or awarar			
Contractor:			
Project Title/Description:			
Description	Hours	Rate	Total
PERONNEL SERVICES			
4. Classification			
5. Classification			
6. Classification		Talal Calada	
	-	Total Salaries	
	. То	Total Benefits	
CLIDCONITD A CTOD CEDVICES	10	tal Personnel Services (A)	
SUBCONTRACTOR SERVICES  4. Classification			
5. Classification			
6. Classification			
0. Classification	Total 9	Subcontractor Services (B)	
OTHER SERVICES	Total	bubcontractor Services (B)	
4. Classification			
5. Classification			
6. Classification			
o. Classification		Total Other Services (C)	
OPERATING EXPENSES		Total Other Services (G)	
6. Supplies and Expense			
7. Travel In-State			
8. Travel Out-of-State			
9. Equipment			
10. Other Costs			
	Tot	al Operating Expenses (D)	
		<u> </u>	
Total Personnel and Operating			
(Add A through D)			
Indirect Costs (detail)			
TOTAL COSTS - Voor 2			

### ATTACHMENT 2, Cont.

# COST PROPOSAL/BUDGET DISPLAY RESEARCH PROPOSAL

### YEAR 3 – (for months 25 thru 36)

Period of award (i.e., 1/1/18-12/31/18) Use separate sheet for each year

(Add A through D)

Indirect Costs (detail)
TOTAL COSTS – Year 3
(for final 12 months)

Period of award:			
Contractor:			
Project Title/Description:			
Description	Hours	Rate	Total
PERONNEL SERVICES	nouis	nate	Total
7. Classification			
8. Classification			
9. Classification			
		Total Salaries	
		Total Benefits	
	Tota	al Personnel Services (A)	
SUBCONTRACTOR SERVICE			
7. Classification			
8. Classification			
9. Classification			
	Total Su	bcontractor Services (B)	
OTHER SERVICES			
7. Classification			
8. Classification			
9. Classification			
		Total Other Services (C)	
OPERATING EXPENSES			
11. Supplies and Exper	nse		
12. Travel In-State			
13. Travel Out-of-State			
14. Equipment			
15. Other Costs			
	Total	Operating Expenses (D)	
Total Personnel and Opera	iting		

### ATTACHMENT 2, Cont.

# COST PROPOSAL/BUDGET DISPLAY RESEARCH PROPOSAL

### **COMBINED YEARS – (up to 3 years or 36 months)**

Period of award (i.e., 1/1/18-12/31/18) Use separate sheet for each year

**Total Personnel and Operating** 

TOTAL COSTS – GRAND TOTAL UP TO 3 YEARS

(Add A through D)

**Indirect Costs (detail)** 

(for UP TO 36 months)

Period of award:			
Contractor:			
Project Title/Description:			
Description	Hours	Rate	Total
PERONNEL SERVICES			
10. Classification			
11. Classification			
12. Classification			
		Total Salaries	
		Total Benefits	
	Tot	cal Personnel Services (A)	
SUBCONTRACTOR SERVICES			
10. Classification			
11. Classification			
12. Classification			
	Total St	ubcontractor Services (B)	
OTHER SERVICES			
10. Classification			
11. Classification			
12. Classification			
		Total Other Services (C)	
OPERATING EXPENSES			
16. Supplies and Expense			
17. Travel In-State			
18. Travel Out-of-State			
19. Equipment			
20. Other Costs			
	Tota	Il Operating Expenses (D)	

### ATTACHMENT 3,

### **BUDGET NARRATIVE FORM AND EXPLANATION OF COSTS:**

Explain the need for individual staff, budgeted travel, equipment, subcontracts and consultants:	
	_
	-//
Please explain how the costs were arrived at:	
Please explain why the rates are considered reasonable and/or appropriate in your opinion:	
Are costs based on industry standard or other basis of measurement? Please explain:	

### **ATTACHMENT 4**

### **PROPOSER REFERENCES**

- 1. Please attach three letters of reference on company letterhead.
- 2. List below three references of similar types of services performed, as described in the description of services, within the last five years. If three references cannot be provided, please explain why on an attached sheet of paper.

REFERENCE 1		
Name of Firm		
Address		
Contact Person		
Telephone Number		
Dates of Service		
Value or Cost of Service		
Brief Description of Service	Provided:	
REFERENCE 2		
Name of Firm		
Address		
Contact Person		
Telephone Number		
Dates of Service		
Value or Cost of Service		
Brief Description of Service	Provided:	
REFERENCE 3		
Name of Firm		
Address		
Contact Person		
Telephone Number		
Dates of Service		
Value or Cost of Service		
Brief Description of Service	Provided:	
<u> </u>		
	<del></del>	

STATE OF CALIFORNIA

ADDRESS

1625 N. Market Blvd., Suite S-103

Sacramento, CA 95834

### ATTACHMENT 5 – SAMPLE AGREEMENT

STA	ANDARD AGREEMENT	ATTACTIVILITY 5 - SAIV	IF LL AGNELIVIE	IVI		
STD	213 (Rev 06/03)		AG	REEMENT NUMBER		
			RE	GISTRATION NUMBER		
1.	This Agreement is entered into bet	ween the State Agency and the Cor	ntractor named be	elow:		
	STATE AGENCY'S NAME  Department of Consumer Affairs,	Structural Pest Control Board				
	CONTRACTOR'S NAME  TBD					
2.	The term of this Agreement is: Septen	aber 1, 2018 (or upon approval, which	chever is later)	through TBD		
3.	The maximum amount \$ of this Agreement is:					
4.	The parties agree to comply with the part of the Agreement.	e terms and conditions of the follow	ring exhibits whic	h are by this reference made a		
Re	hibit A – A7: A–Scope of Work; A1 presentatives; A4–Use of Intellectua	al Property; A5-Resumes; A6-Curre		pport; page(s)		
Ex	-Third Party Confidential Informatior hibit B – B–Budget; B1–Budget Jus oice Elements		s (if applicable); E	page(s)		
	hibit C* – University Terms and Co	nditions		UTC-518		
Ch	eck mark additional Exhibits below, <b>Exhibit D</b> – Additional Require	and attach applicable Exhibits or pr ments Associated with Funding Sou		k: page(s)		
		for Security of Confidential Informa		page(s)		
	Exhibit F – Access to State Fac	cilities or Computing Resources		page(s)		
	Exhibit G – Negotiated Alterna	e UTC Terms		page(s)		
		nereby incorporated by reference and m tp://www.dgs.ca.gov/ols/Resource				
IN V	WITNESS WHEREOF, this Agreemen	has been executed by the parties he	ereto.			
	CON	TRACTOR	Cali	ifornia Department of General Services Use Only		
CON	NTRACTOR'S NAME (if other than an individual, st	ate whether a corporation, partnership, etc.)		·		
BY (	(Authorized Signature)	DATE SIGNED (L	Oo not type)			
Ø						
PRI	PRINTED NAME AND TITLE OF PERSON SIGNING					
ADD	DESC					
ADL	DRESS					
	STATE O	F CALIFORNIA				
AGE	NCY NAME					
	partment of Consumer Affairs, Stru					
BY (	Authorized Signature)	DATE SIGNED (L	Oo not type)			
Ø						
PRI	NTED NAME AND TITLE OF PERSON SIGNING					

### Exhibit A – Scope of Work

	Product Co	0.0			
	Project Summary	& Scope of Work			
	☐ Contract	☐ Grant			
PI Name:		·			
Project Title:					
Briefly describe the long-term	<b>Project Sumr</b> a objectives for achieving the s	nary/Abstract tated goals of the project.			
If Third-Part	y Confidential Informati	on is to be provided	by the State:		
	of the Scope of Work is a nformation and is subject	•			
<del></del> :	NDA between the Universincorporated in this Agree information.		•		
Scope of Work  Describe the goals and specific objectives of the proposed project and summarize the expected outcomes. If applicable, describe the overall strategy, methodology, and analyses to be used. Include how the data will be collected, analyzed, and interpreted as well as any resource sharing plans as appropriate. Discuss potential problems, alternative strategies, and benchmarks for success anticipated to achieve the goals and objectives.					

### **Exhibit A1 - Deliverables**

### **SCHEDULE OF DELIVERABLES**

List all items that will be delivered to the State under the proposed Scope of Work. Include all reports, including draft reports for State review, and any other Deliverables, if requested by the State and agreed to by the Parties.

If use of any Deliverable is restricted or is anticipated to contain preexisting Intellectual Property with any restricted use, it will be clearly identified in Exhibit A4, Use of Preexisting Intellectual Property.

Unless otherwise directed by the State, the University Principal Investigator shall submit all Deliverables to the State Contract Project Manager, identified in Exhibit A3, Authorized Representatives.

Deliverable	Description	<b>Due Date</b>
The following Delive	rables are subject to Section 19. Copyrights, paragra	ph B of Exhibit C
-		

### Exhibit A2 – Key Personnel

### **KEY PERSONNEL**

List Key Personnel as defined in the Agreement starting with the PI, by last name, first name followed by Co-PIs. Then list all other Key Personnel in alphabetical order by last name. For each individual listed include his/her name, institutional affiliation, and role on the proposed project. Use additional consecutively numbered pages as necessary.

Last Name, First Name	Institutional Affiliation	Role on Project
PI:		
Last name, First name	Institutional affiliation	Role on the project
Co-PI(s) – if applicable:		
Last name, First name	Institutional affiliation	Role on the project
Last name, First name	Institutional affiliation	Role on the project
Other Key Personnel (if applicable):		
Last name, First name	Institutional affiliation	Role on the project
Last name, First name	Institutional affiliation	Role on the project

### Exhibit A3 – Authorized Representatives

### **AUTHORIZED REPRESENTATIVES AND NOTICES**

The following individuals are the authorized representatives for the State and the University under this Agreement. Any official Notices issued under the terms of this Agreement shall be addressed to the Authorized Official identified below, unless otherwise identified in the Agreement.

	State Agency Contacts	University Contacts				
Agency Nam	ne: <agency name=""></agency>	University Name: <university name=""></university>				
Contract Pro	oject Manager (Technical)	Principal In	vestigator			
Name:	<name> <title>&lt;/th&gt;&lt;th&gt;Name:&lt;/th&gt;&lt;th&gt;&lt;Name&gt; &lt;Title&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Address:&lt;/td&gt;&lt;td&gt;&lt;Department&gt; &lt;Address&gt; &lt;City,State,Zip&gt;&lt;/td&gt;&lt;th&gt;Address:&lt;/th&gt;&lt;td&gt;&lt;Department&gt; &lt;Address&gt; &lt;City,State,Zip&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Telephone:&lt;br&gt;Fax:&lt;/td&gt;&lt;td&gt;&lt;Telephone#&gt; &lt;Fax#, if available&gt;&lt;/td&gt;&lt;th&gt;Telephone:&lt;br&gt;Fax:&lt;/th&gt;&lt;td&gt;&lt;Telephone#&gt; &lt;Fax#, if available&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Email:&lt;/td&gt;&lt;td&gt;&lt;EmailAddress&gt;&lt;/td&gt;&lt;td colspan=4&gt;Email: &lt;EmailAddress&gt; Designees to certify invoices under Section 14 of Exhibit C on behalf of PI:&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;&lt;/td&gt;&lt;td&gt;&lt;/td&gt;&lt;td colspan=4&gt;&lt;ol&gt;     &lt;li&gt;&lt;Name&gt;, &lt;Title&gt;, &lt;EmailAddress&gt;&lt;/li&gt;     &lt;li&gt;&lt;Name&gt;, &lt;Title&gt;, &lt;EmailAddress&gt;&lt;/li&gt;     &lt;li&gt;&lt;Name&gt;, &lt;Title&gt;, &lt;EmailAddress&gt;&lt;/li&gt; &lt;/ol&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Authorized&lt;/td&gt;&lt;td&gt;Official (contract officer)&lt;/td&gt;&lt;th&gt;Authorized&lt;/th&gt;&lt;td&gt;Official&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Name:&lt;/td&gt;&lt;td&gt;&lt;Name&gt; &lt;Title&gt;&lt;/td&gt;&lt;th&gt;Name:&lt;/th&gt;&lt;td&gt;&lt;Name&gt; &lt;Title&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Address:&lt;/td&gt;&lt;td&gt;&lt;Department&gt; &lt;Address&gt; &lt;City,State,Zip&gt;&lt;/td&gt;&lt;th&gt;Address:&lt;/th&gt;&lt;td&gt;&lt;Department&gt; &lt;Address&gt; &lt;City,State,Zip&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Telephone:&lt;/td&gt;&lt;td&gt;&lt;Telephone#&gt;&lt;/td&gt;&lt;th&gt;Telephone:&lt;/th&gt;&lt;td&gt;&lt;Telephone#&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Fax:&lt;/td&gt;&lt;td&gt;&lt;Fax#, if available&gt;&lt;/td&gt;&lt;th&gt;Fax:&lt;/th&gt;&lt;td&gt;&lt;Fax#, if available&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Email:&lt;/td&gt;&lt;td&gt;&lt;EmailAddress&gt;&lt;/td&gt;&lt;th&gt;Email:&lt;/th&gt;&lt;td&gt;&lt;EmailAddress&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Send notice&lt;/td&gt;&lt;td&gt;s to (if different):&lt;/td&gt;&lt;th&gt;Send notice&lt;/th&gt;&lt;td&gt;s to (if different):&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Name:&lt;/td&gt;&lt;td&gt;&lt;Name&gt; &lt;Title&gt;&lt;/td&gt;&lt;td colspan=3&gt;Name: &lt;Name&gt; &lt;Title&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Address:&lt;/td&gt;&lt;td&gt;&lt;Department&gt; &lt;Address&gt;&lt;/td&gt;&lt;th&gt;Address:&lt;/th&gt;&lt;td&gt;&lt;Department&gt; &lt;Address&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td&gt;Telephone:&lt;/td&gt;&lt;td&gt;&lt;City,State,Zip&gt; &lt;Telephone#&gt;&lt;/td&gt;&lt;th&gt;Telephone:&lt;/th&gt;&lt;td&gt;&lt;City,State,Zip&gt; &lt;Telephone#&gt;&lt;/td&gt;&lt;/tr&gt;&lt;/tbody&gt;&lt;/table&gt;</title></name>					

Email:	<emailaddress></emailaddress>	Email:	<emailaddress></emailaddress>
Administrat	ive Contact	Administrat	tive Contact
Name:	<name></name>	Name:	<name></name>
	<title>&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;Title&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Address:&lt;/th&gt;&lt;th&gt;&lt;Department&gt;&lt;/th&gt;&lt;th&gt;Address:&lt;/th&gt;&lt;th&gt;&lt;Department&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;Address&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;Address&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;City,State,Zip&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;City,State,Zip&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Telephone:&lt;/th&gt;&lt;th&gt;&lt;Telephone#&gt;&lt;/th&gt;&lt;th&gt;Telephone:&lt;/th&gt;&lt;th&gt;&lt;Telephone#&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Fax:&lt;/th&gt;&lt;th&gt;&lt;Fax#, if available&gt;&lt;/th&gt;&lt;th&gt;Fax:&lt;/th&gt;&lt;th&gt;&lt;Fax#, if available&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Email:&lt;/th&gt;&lt;th&gt;&lt;EmailAddress&gt;&lt;/th&gt;&lt;th&gt;Email:&lt;/th&gt;&lt;th&gt;&lt;EmailAddress&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Financial Co&lt;/th&gt;&lt;th&gt;ontact/Accounting&lt;/th&gt;&lt;th&gt;Authorized&lt;/th&gt;&lt;th&gt;Financial Contact/Invoicing&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Name:&lt;/th&gt;&lt;th&gt;&lt;Name&gt;&lt;/th&gt;&lt;th&gt;Name:&lt;/th&gt;&lt;th&gt;&lt;Name&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;ivanic.&lt;/th&gt;&lt;th&gt;&lt;Title&gt;&lt;/th&gt;&lt;th&gt;rune.&lt;/th&gt;&lt;th&gt;&lt;Title&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Address:&lt;/th&gt;&lt;th&gt;&lt;Department&gt;&lt;/th&gt;&lt;th&gt;Address:&lt;/th&gt;&lt;th&gt;&lt;Department&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;Address&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;Address&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;City,State,Zip&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;City,State,Zip&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Telephone:&lt;/th&gt;&lt;th&gt;&lt;Telephone#&gt;&lt;/th&gt;&lt;th&gt;Telephone:&lt;/th&gt;&lt;th&gt;&lt;Telephone#&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Fax:&lt;/th&gt;&lt;th&gt;&lt;Fax#, if available&gt;&lt;/th&gt;&lt;th&gt;Fax:&lt;/th&gt;&lt;th&gt;&lt;Fax#, if available&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;Email:&lt;/th&gt;&lt;th&gt;&lt;EmailAddress&gt;&lt;/th&gt;&lt;th&gt;Email:&lt;/th&gt;&lt;th&gt;&lt;EmailAddress&gt;&lt;/th&gt;&lt;/tr&gt;&lt;tr&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;&lt;/th&gt;&lt;th&gt;Section 14 c&lt;br&gt;Contact:&lt;br&gt;1. &lt;Na&lt;br&gt;2. &lt;Na&lt;/th&gt;&lt;th&gt;or invoice certification in accordance with of Exhibit C on behalf of the Financial time&gt;, &lt;Title&gt;, &lt;EmailAddress&gt; time&gt;, &lt;Title&gt;, &lt;EmailAddress&gt; time&gt;, &lt;Title&gt;, &lt;EmailAddress&gt; time&gt;, &lt;Title&gt;, &lt;EmailAddress&gt;&lt;/th&gt;&lt;/tr&gt;&lt;/tbody&gt;&lt;/table&gt;</title>		

### Exhibit A4 – Use of Intellectual Property

		USE OF INTELLECT	TUAL PROPERTY	
	copyrighted works, kno	sing any third-party or pre-existing into own patents, trademarks, service man If the nature of the restriction below. If	ks and trade secrets)	"IP" with restrictions on use,
A.	State: Preexisting IP performance in the S	to be provided to the University fr cope of Work.	om the State or a th	ird party for use in the
	☐ None or ☐ List	•		
	Owner (Name of State Agency or 3 <sup>rd</sup> Party)	Description		Nature of restriction:
	Owner (Name of University or 3 <sup>rd</sup> Party)	Description Description		Nature of restriction:
C.	If the University PI anti Work will have a restric	ns on use of Project Data. cipates that any of the Project Data getion on use (such as subject identifying below. If there are no restrictions ant	ng information in a da	ata set) then list all such
	Owner (University or 3 <sup>rd</sup> Party)	Description		Nature of Restriction:

### Exhibit A5 - RÉSUMÉ/BIOSKETCH

### **RÉSUMÉ/BIOSKETCH**

Attach Resume/Biosketch for the PI and other Key Personnel listed in Exhibit A2, Key Personnel.

### **Exhibit A6 – Current & Pending Support**

### **CURRENT & PENDING SUPPORT**

University will provide current & pending support information for Key Personnel identified in Exhibit A2 at time of proposal and upon request from State agency. The "Proposed Project" is this application that is submitted to the State. Add pages as needed.

Status					1
(currently active or pending approval)	Award # (if available)	Source (name of the sponsor)	Project Title	Start Date	End Date
Proposed					
Project					
CURRENT					
CURRENT					
PENDING					
NAME OF I	NDIVIDUAL				
Status	Award #	Source	Project Title	Start Date	End Date
Proposed	Awaid #	Cource	nuc	Start Date	LIIG Date
Project					
CURRENT					
CURRENT					
PENDING					
NAME OF I	NDIVIDUAL				
			Project		
Status	Award #	Source	Title	Start Date	End Date
Proposed					
Project					
CURRENT					
CURRENT					
PENDING					
	<b>—</b> (				
NAME OF I	NDIVIDUAL				
Status	Award #	Source	Project Title	Start Date	End Date
Proposed					
Project					
CURRENT					
CURRENT					
		•	•		1

### Exhibit A7

### **Third Party Confidential Information**

### **Confidential Nondisclosure Agreement**

(Identified in Exhibit A, Scope of Work – will be incorporated, if applicable)

If the Scope of Work requires the provision of third party confidential information to either the State or the Universities, then any requirement of the third party in the use and disposition of the confidential information will be listed below. The third party may require a separate Confidential Nondisclosure Agreement (CNDA) as a requirement to use the confidential information. Any CNDA will be identified in this Exhibit A7.

### **SAMPLE AGREEMENT**

### **EXHIBIT B**

### **BUDGET FOR PROJECT PERIOD**

(Cost Proposal/Budget Display from selected proposer will be inserted here)

#### **EXHIBIT B-1**

#### **BUDGET JUSTIFICATION**

The Budget Justification will include the following items in this format.

#### Personnel

Name. Starting with the Principal Investigator list the names of all known personnel who will be involved on the project for each year of the proposed project period. Include all collaborating investigators, individuals in training, technical and support staff or include as "to be determined" (TBD).

**Role on Project.** For all personnel by name, position, function, and a percentage level of effort (as appropriate), including "to-be-determined" positions.

#### Fringe Benefits.

In accordance with University policy, explain the costs included in the budgeted fringe benefit percentages used, which could include tuition/fee remission for qualifying personnel to the extent that such costs are provided for by University policy, to estimate the fringe benefit expenses on Exhibit B.

#### **Travel**

Itemize all travel requests separately by trip and justify in Exhibit B1, in accordance with University travel guidelines. Provide the purpose, destination, travelers (name or position/role), and duration of each trip. Include detail on airfare, lodging and mileage expenses, if applicable. Should the application include a request for travel outside of the state of California, justify the need for those out-of-state trips separately and completely.

### **Materials and Supplies**

Itemize materials supplies in separate categories. Include a complete justification of the project's need for these items. Theft sensitive equipment (under \$5,000) must be justified and tracked separately in accordance with State Contracting Manual Section 7.29.

### **Equipment**

List each item of equipment (greater than or equal to \$5,000 with a useful life of more than one year) with amount requested separately and justify each.

#### **Consultant Costs**

Consultants are individuals/organizations who provide expert advisory or other services for brief or limited periods and do not provide a percentage of effort to the project or program. Consultants are not involved in the scientific or technical direction of the project as a whole.

Provide the names and organizational affiliations of all consultants. Describe the services to be performed, and include the number of days of anticipated consultation, the expected rate of compensation, travel, per diem, and other related costs.

### Subawardee (Consortium/Subrecipient) Costs

Each participating consortium organization must submit a separate detailed budget for every year in the project period in Exhibit B2 Subcontracts. Include a complete justification for the need for any subawardee listed in the application.

#### **Other Direct Costs**

Itemize any other expenses by category and cost. Specifically justify costs that may typically be treated as indirect costs. For example, if insurance, telecommunication, or IT costs are charged as a direct expense, explain reason and methodology.

#### Rent

If the Scope of Work will be performed in an off-campus facility rented from a third party for a specific project or projects, then rent may be charged as a direct expense to the award.

### **Indirect (F&A) Costs**

Indirect costs are calculated in accordance with the budgeted indirect cost rate in Exhibit B.

### **Exhibit B2 – Subawardee Budgets**

### **Budget Pertaining to Subawardee(s) (when applicable)**

Subawardee Name:			Exhibit B2
Principal Investigator (Last, Fir	st):		

## COMPOSITE SUBAWARDEE BUDGET FOR ENTIRE PROPOSED PROJECT PERIOD 07/01/2016 to 06/30/2019

From: To:	7/1/2016 6/30/2017	7/1/2017 6/30/2018	7/1/2018 6/30/2019	
BUDGET CATEGORY	Year 1	Year 2	Year 3	TOTAL
PERSONNEL: Salary and fringe benefits.	\$0	\$0	\$0	\$0
TRAVEL	\$0	\$0	\$0	\$0
MATERIALS & SUPPLIES	\$0	\$0	\$0	\$0
EQUIPMENT	\$0	\$0	\$0	\$0
CONSULTANT	\$0	\$0	\$0	\$0
SUBRECIPIENT	\$0	\$0	\$0	\$0
Subject to OTHER DIRECT COSTS (ODC)  IDC Calc			W. J. J.	
ODC #1 Y	\$0	\$0	\$0	\$0
ODC #2 Y	\$0	\$0	\$0	\$0
ODC #3	\$0	\$0	\$0	\$0
ODC #4 Y	\$0	\$0	\$0	\$0
ODC #5	\$0	\$0	\$0	\$0
ODC #6 Y	\$0	\$0	\$0	\$0
TOTAL DIRECT COSTS	\$0	\$0	\$0	\$0
Indirect (F&A) Costs F&A Base	Ć0	ĆO	ćo	ćo
Rate MTDC *	\$0 <b>\$0</b>	\$0 <b>\$0</b>	\$0 <b>\$0</b>	<i>\$0</i> <b>\$0</b>
TOTAL COSTS PER YEAR	\$0	\$0	\$0	<b>,,</b>
TOTAL COSTS FOR PROPOSED PROJECT PERIOD		·		\$0

<sup>\*</sup> MTDC = Modified Total Direct Cost

**JUSTIFICATION.** See Exhibit B1 - Follow the budget justification instructions.

### **Project Period Budget Flexibility (lesser of % or Amount)**

Prior approval required for budget changes between approved budget categories above the thresholds identified.

% 10.00%

or

**Amount** \$10,000

### **Exhibit B3 – Invoice Elements**

### **Invoice and Detailed Transaction Ledger Elements**

In accordance with Section 14 of Exhibit C – Payment and Invoicing, the invoice, summary report and/or transaction/payroll ledger shall be certified by the University's Financial Contact and the PI (or their respective designees).

Summary Invoice – includes either on the invoice or in a separate summary document – by approved budget category (Exhibit B) – expenditures for the invoice period, approved budget, cumulative expenditures and budget balance available<sup>1</sup>

- Personnel
- Equipment
- Travel
- Subawardee Consultants
- Subawardee Subcontract/Subrecipients
- Materials & Supplies
- Other Direct Costs
  - o TOTAL DIRECT COSTS (if available from system)
- Indirect Costs
  - o TOTAL

### Detailed transaction ledger and/or payroll ledger for the invoice period <sup>2</sup>

- Univ Fund OR Agency Award # (to connect to invoice summary)
- Invoice/Report Period (matching invoice summary)
- GL Account/Object Code
- Doc Type (or subledger reference)
- Transaction Reference#
- Transaction Description, Vendor and/or Employee Name
- Transaction Posting Date
- Time Worked
- Transaction Amount

<sup>&</sup>lt;sup>1</sup> If this information is not on the invoice or summary attachment, it may be included in a detailed transaction ledger.

<sup>&</sup>lt;sup>2</sup> For salaries and wages, these elements are anticipated to be included in the detailed transaction ledger. If all elements are not contained in the transaction ledger, then a separate payroll ledger may be provided with the required elements.

### Exhibit C – University Terms and Conditions

CMA (AB20) State/University Model Agreement Terms & Conditions 518 http://www.dgs.ca.gov/ols/Resources/ModelContractLanguageUniversities.aspx



# **SCORING CRITERIA**

	Structural Pest Control Board-Evaluation Score Sheet				
	Solicitation No. SPCB-18-01				
	Researcher Name				
	Research Project Title				
	Project Term Dates				
	Requested Funding				
	Research Objectives	Value	Score		
1	Importance of the research objectives or hypothesis and the potential of the Research to advance knowledge in the field of structural pest management.  A. Briefly state what the research described in this application is intended to accomplish and what hypotheses or research questions are to be tested.  B. Briefly sketch the background of the present proposal, critically evaluating existing knowledge and identifying gaps that this project is intended to fill.	25			
	Comments	-			
2	Project Direction (Work Plan and Work Schedule)  Presence of a clear research plan including specific goals and objectives, a reasonable timeline, the quality and appropriateness of the design of experiments and methodology selected, and focus on the study on the prioritized need(s) identified in the solicitation notice criteria.  A. Discuss fully the research design and the procedures to be used and the tentative sequence or timetable for the investigation.  B. State specific objectives, planned activities, and timelines for reaching objectives for the entire project.  C. Include a discussion of how the data will be collected, analyzed, and interpreted.  D. Describe the amount of time allocated to accomplish the major activities of the research project and the monitoring system. The percentage of time of each professional and/or technical investigator involved in the research project must be stated.  Comments	35			
3	Prior research experience of the principal/project director and key participants and relevance to the proposal. Quality of research facilities, resources, and capacity to manage overall project activities.  A. Three (3) prior research projects that show significant research in structural pest management.  B. List appropriate references and attach other background material and relevant papers.  C. Describe available facilities, major equipment and resources.  D. Demonstrate that the contractor has the organization and staff to perform this work and provide information on the professional qualifications and experience of persons assigned to the project.  Comments	20			

4	Budget and Budget Narrative  A. Prepare a detailed line-item budget for the proposed contract period using the sample format Attachment 2.  B. Prepare a Budget Narrative explaining the proposed costs. Explain the need for individual staff, budgeted travel, equipment, subcontracts and consultants. Give a general description of what is included in General Expense.  Comments		
	Total Score	100	
	Evaluator Name		
	Evaluator Signature		
	Date signed		

# **RESEARCH FUND CONDITION**

# 0168 - Structural Pest Control Research Fund Analysis of Fund Condition (Dollars in Thousands)

Prepared on 10.3.2024

2024-25 Governor's Budget With 2023-24 Actuals	Actual 2023-24				r's Rudget With 2023-24 Actuals		20	CY 2024-25								CY 2024-25				BY +1 )26-27
BEGINNING BALANCE Prior Year Adjustment	\$ \$	983 1	\$ \$	1,197 -	\$ \$	1,372	\$ \$	1,550 -												
Adjusted Beginning Balance	\$	984	\$	1,197	\$	1,372	\$	1,550												
REVENUES, TRANSFERS AND OTHER ADJUSTMENTS  Revenues 4129200 - Other regulatory fees 4163000 - Income from surplus money investments	\$ \$	164 49	\$ \$	158 20	\$ \$	158 23	\$	158 26												
Totals, Revenues	\$	213	\$	178	\$	181	\$	184												
TOTAL RESOURCES	\$	1,197	\$	1,375	\$	1,553	\$	1,734												
Expenditures: 1111 Department of Consumer Affairs Regulatory Boards, Bureaus, Divisions (State Operations)	\$	-	\$	3	\$	3	\$	3												
TOTALS, EXPENDITURES AND EXPENDITURE ADJUSTMENTS	\$	-	\$	3	\$	3	\$	3												
FUND BALANCE Reserve for economic uncertainties	\$	1,197	\$	1,372	\$	1,550	\$	1,731												

### NOTES:

- 1- Assumes workload and revenue projections are realized in BY and ongoing.
- 2- Expenditure growth projected at 3% beginning BY.