o be completed b	y State Office – Date Received:	
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Grant Application Signature Page State of Kansas Department of Health and Environment

Grant Period: July 1, 2017 – June 30, 2018

1000 SW Jackson, Suite 340 Topeka, KS 66612-1365

This form, complete with signatures, is required to complete your Aid to Local application package.

Upload to Catalyst as an attachment on the Organization Summary Page.

All applications due March 17, 2017.

APPLICANT:	Child Care Licensing Program	
Sedgwick County Division of Health	Chronic Disease Risk Reduction	-
	Community-Based Primary Care Clinic Grant	8 7 .
STREET ADDRESS:	Disease Intervention	\$201,507.00
1900 E 9 th St. North, Wichita, Kansas 67214	Family Planning	\$317,046.00
	Healthy Family Services	
NAME OF DIRECTOR:	HIV Prevention Program - Community	~
Adrienne Byrne, Health Director	HIV Prevention Program – Opt Out	\$10,000.00
ć.	Immunization Action Plan	\$80,359.00
PRIMARY CONTACT:	Maternal & Child Health	\$563,086.00
Lucretia Burch, Finance Manager	Pregnancy Maintenance Initiative (PMI)	(#)
	PREP	-
TELEPHONE OF PRIMARY CONTACT:	Public Health Emergency Preparedness	\$353,453.00
(316) 660-7354	Ryan White	
	Special Health Care Needs	
Signaturas	State Formula	\$346,900.00
Signatures:	Teen Pregnancy Targeted Case Management	
11 " 12	WIC/ICP Collaborative	\$75,558.00
Adrienne Byrne, Director Date Division of Health	Total Funds Requested:	\$1,947,909.00
	Match Information Only:	
	Family Planning Match	\$126,818.00
X	MCH Match	\$225,234.00
David M. Unruh, Chairman Date Sedgwick County Board of	Total Match Funding:	\$352,052.00
County Commission	Combined Total:	\$2,299,961.00
ATTESTED TO:		
	Approved as to form: Nisha Jawb Wawen	e e
Kelly B. Arnold,	Misha Jacobs-Warren,	e
Kelly B. Arnold, County Clerk	Misha Jawb Warren	e.