GRC Review Form

| Grant Title | Tuberculosis (TB) S | State FY 2022 Contract | | | |
|--|---|--|---|------------|--|
| Department | nent Auditor's Office | | | | |
| Dept Contact | Janna Caponera | | Extension 46 | | |
| • | 's Office, in conjunction the application and/o | on with the Grant Review Cor or award is | nmittee (GRC), has review | ed the app | olication and/or award as |
| | mmended This onse Received No | is grant application and/or aw is grant application and/or aw responses given by the GRC t applicable responses for the | ard is not recommended fo | - | |
| Totals 0 | Recommended | 0 Not Recommended | 0 No Response Re | eceived | 0 Not Applicable |
| Completed by: Janna Ca GRC Chair/ | · | | 29 April 2021 Date | | |
| with a required in ledisease (TB) in the | TB State contact to in kind match of \$40,460 community through t | ncrease state grant funds in t 0 for FY 2022. Grant to reduc the TB elimination program a 2021 through 8/31/2022. | e the risk of communicable | | Recommended Not Recommended No Response Received |
| FY2022 DSHS Tul amount of \$202,30 of \$242,760. Grant | 00 in state funds with a t funds will cover pers | and Control Grant Contract a a required in kind-match of \$ sonnel, benefits, supplies, con September 1, 2021 through A | 40,460 for a combined tota ntractual services and othe | | Recommended Not Recommended No Response Received |
| Purchasing Comm | ents | | | | |
| Purchasing policie | s and procedures app | oly. | | | Recommended Not Recommended No Response Received NA – No Purchasing Involved |
| Information Techno | ology (IT) Comments | | | | |
| Click here to enter | text. | | | | Recommended Not Recommended No Response Received NA – No IT Involved |
| Human Resources | s (HR) Comments | | | | |
| Click here to enter text. | | | | | Recommended Not Recommended No Response Received NA – No HR Involved |