



DATE: December 17, 2009
 PROGRAM: School Readiness C2-R2
 CONTROL NUMBER: 07C2-19-035AQ

LOCAL AGREEMENT FOR FIRST 5 CALIFORNIA FUNDS

COMMISSION NAME: First 5 Los Angeles County
 SITE LOCATION: Los Angeles Countywide Program
 SITE ADDRESS: N/A

By signing and returning this agreement to First 5 California, the Executive Director or designee certifies to the following: (1) He/she has read the conditions contained in this funding notification letter; (2) agrees to accept and use the funds referenced herein for expenditures pursuant to the purpose(s) stated in the School Readiness Cycle 2-Round 2 Request for Funding (RFF) dated January 30, 2007, as amended, and the approved application for funding, which by this reference are incorporated into this agreement; and (3) agrees to comply with all funding terms and conditions, contained in the RFF and/or by attachment and any amendments thereto, as a condition of funding.

The term of this agreement shall be from July 1, 2009 through June 30, 2011.

The amount payable pursuant to the provisions of this agreement shall not exceed \$2,560,000, which will be paid in accordance with the terms set forth in the RFF and any amendments thereto, consistent with the funding terms and conditions.

Funding of this agreement is contingent upon the availability of sufficient funds pursuant to California Health and Safety Code sections 130100 through 130155. This agreement may be terminated immediately by First 5 California if funds are not available in amounts sufficient to fund the State's obligations under this agreement.

Any provision of this agreement found to be in violation of federal and/or state statute or regulation shall be invalid, but such a finding shall not affect the remaining provisions of this agreement.

In Witness Whereof, this agreement has been executed by the parties identified below:				
STATE OF CALIFORNIA			AWARDEE	
AGENCY NAME FIRST 5 CALIFORNIA			COUNTY COMMISSION NAME FIRST 5 LOS ANGELES	
BY (Authorized Signature) 		DATE SIGNED 12-17-09	BY (Authorized Signature) 	
PRINTED NAME AND TITLE OF PERSON SIGNING Diane M. Levin, Chief Deputy Director			PRINTED NAME AND TITLE OF PERSON SIGNING Evelyn W. Martinez, Executive Director	
ADDRESS 2389 Gateway Oaks Drive, Ste 260 Sacramento, CA 95833			ADDRESS 750 North Alameda Street, Suite 300 Los Angeles, CA 90012	
First 5 California Office Use Only:				
Fund Title	ITEM	F.Y.	Projected Allocation	Amount Encumbered by this Document for FY 2009/10
Clearing Account	4250-601-0639	2007/08	\$0	\$1,280,000
Clearing Account	4250-601-0639	2008/09	\$0	Total Amount Encumbered To Date
Clearing Account	4250-601-0639	2009/10	\$1,280,000	\$0
Clearing Account	4250-601-0639	2010/11	\$1,280,000	Object Code
AGREEMENT TOTAL:			\$2,560,000	4250-702.19-99902

I CERTIFY upon my own personal knowledge that funds are available in the current budget year for the period and purpose of the expenditure stated above.

ACCOUNTING OFFICER'S SIGNATURE

DATE SIGNED