FINANCIAL PLAN

Cooperator: HUMBOLDT COUNTY

Contact: Weylan Shaw, Agricultural Commissioner (Acting) Cooperative Service Agreement Number: 23-7306-0254-RA

WBS Element: AP.RA.RX06.73.0123

FMMI Shorthand Code: 23XXWSWR0606REIMBRX06730123

Location: Humboldt County, CA Dates: 07/01/23 – 06/30/2024

Work Plan:

This Work Plan is in reference to Cooperative Service Agreement No. 23-7306-0254-RA. USDA-APHIS-WS will administer an Integrated Wildlife Damage Management (IWDM) program in Humboldt County. USDA-APHIS-WS will assist business/property owners, private citizens, and governmental agencies in protecting human resources, which include, but are not limited to, residents, property, livestock, crops, and natural resources from damage caused by predators, wild and feral animals, and other nuisance wildlife.

Financial Plan:

The cooperator will be billed quarterly by USDA-APHIS for actual costs incurred but will not exceed \$80,173.00 annually. An estimated itemization of expenses is listed below; however, funds may be distributed between itemized categories at the discretion of USDA-APHIS-WS:

Cost Element			Full Cost
Personnel Compensation	\$		52,465.00
Travel	\$ A state A	N - 1 - 1	631.87
Vehicles	\$		6,305.00
Other Services - CEC	\$		1,500.00
Supplies and Materials	\$		1,076.00
Equipment	\$		1,076.00
Subtotal (Direct Charges)	\$	_	63,053.87
Pooled Job Costs	11.00%	\$	6,935.93
Indirect Costs	16.15%	\$	10,183.20
Aviation Flat Rate Collection		\$	N=
Agreement Total	\$		80,173.00

In accordance with the Debt Collection Improvement Act (DCIA) of 1996, bills issued by WS are due and payable within 30 days of receipt. The DCIA requires that all debts older than 120 days be forwarded to debt collection centers or commercial collection agencies for more aggressive action. Debtors have the option to verify, challenge and compromise claims, and have access to administrative appeals procedures which are both reasonable and protect the interests of the United States.

Financial Point of Contact/Billing Address [as appropriate]:

Cooperator Name. Address, Phone Number, Email

APHIS-WS State Office Name, Address. Phone Number. Email

Paula Lourenzo, Executive Secretary

Krista Dupre', Budget Analyst

5630 South Broadway

3419A Arden Way

Eureka, CA 95503

Sacramento, CA 95825

(707) 441-5260

(916) 979-2675

plourenzo2@co.humboldt.ca.us

Krista.M.Dupre@usda.gov

Signatures:

Cooperator Name/Signatory Official, Address, and

Phone Number:

Humboldt County 5630 S Broadway Eureka, CA 95503-6905 (707) 445-5261

Cooperator & Signature

actrone Chair BOS 6/6/23

APHIS-WS Signatory Name, Address, and Phone

Number:

USDA APHIS WS 3419A Arden Way Sacramento, CA 95825 (916) 979-2675

AARON COLLINS

Digitally signed by AARON COLLINS

Date: 2023.08.11 08:18:49 -07'00'

Aaron Collins, Acting California State Director

APHIS-WS Signatory Name, Address:

USDA APHIS WS 2150 Centre Avenue Building B, Mail Stop 3 W9 Fort Collins, CO 80526

JOHN STEUBER Digitally signed by JOHN STEUBER
DN: c=US, o=U.S. Government,
ou=Department of Agriculture, cn=JOHN
STEUBER,
0.9.2342.19200300.100.1.1=12001000021701
Date: 2023.08.22 22:01:40 -06'00'

John Steuber, Acting Western Regional Director

WBS: AP.RA.RX06.73.0123

[optional] Cooperator PO:

COOPERATIVE SERVICE AGREEMENT (CSA) between HUMBOLDT COUNTY (COOPERATOR) and

UNITED STATES DEPARTMENT OF AGRICULTURE (USDA) ANIMAL AND PLANT HEALTH INSPECTION SERVICE (APHIS) WILDLIFE SERVICES (WS)

ARTICLE 1 - PURPOSE

The purpose of this agreement is to maintain an USDA-APHIS-WS Integrated Wildlife Damage Management (IWDM) program in Humboldt County. USDA-APHIS-WS will assist business/property owners, private citizens, and governmental agencies in protecting human resources, which include, but are not limited to, residents, property, livestock, crops, and natural resources from damage caused by predators, wild and feral animals, and other nuisance wildlife.

ARTICLE 2 - AUTHORITY

USDA-APHIS-WS has statutory authority under the Acts of March 2, 1931, 46 Stat. 1468-69, 7 U.S.C. §§ 8351-8352, as amended, and December 22, 1987, Public Law No. 100-202, § 101(k), 101 Stat. 1329-331, 7 U.S.C. § 8353, to cooperate with States, local jurisdictions, individuals, public and private agencies, organizations, and institutions while conducting a program of wildlife services involving mammal and bird species that are reservoirs for zoonotic diseases, or animal species that are injurious and/or a nuisance to, among other things, agriculture, horticulture, forestry, animal husbandry, wildlife, and human health and safety.

ARTICLE 3 - MUTUAL RESPONSIBILITIES

The cooperating parties mutually understand and agree to/that:

- USDA-APHIS-WS shall perform services set forth in this Cooperative Service Agreement
 that constitutes an IWDM program that addresses the need for managing conflicts caused by
 predators and other nuisance wildlife in Humboldt County.
- USDA-APHIS-WS will provide to the Cooperator a Financial Plan annually for approval. It
 is understood and agreed that any monies allocated for the purpose of the Agreement shall be
 expended only towards the activities and related expenses outlined herein.
- Cooperate with the California Department of Fish and Wildlife, the U.S. Fish and Wildlife Service, County, city governments, and other entities to ensure compliance with applicable Federal, State, and local laws and regulations.
- The parties may mutually agree in writing, at any time during the term of this agreement, to amend, modify, add, or delete services from the CSA and/or Financial Plan.

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[optional]	Cooperator PO:	
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The Cooperator certifies that USDA-APHIS-WS has advised the Cooperator there may be private sector service providers available to provide IWDM services that the Cooperator is seeking from USDA-APHIS-WS.

- 6. Protect sensitive information exchanged or generated during this process. For public requests of such information, under the Freedom of Information Act (5 U.S.C. §552) and/or the California Public Records Act (California Government Code §6250-6276.48) or Information Privacy Act of 1977 (Cal. Civ. Code §§ 1798 et seq.), the releasing Agency will notify the other Agency and provide an opportunity to comment on whether the information is privileged, or otherwise prohibited from disclosure by applicable law.
- 7. USDA-APHIS-WS has advised the Cooperator that other private sector service providers may be available to provide wildlife management services and notwithstanding these other options, Cooperator requests that USDA-APHIS-WS provide wildlife management services as stated under the terms of this Agreement.
- 8. There will be no equipment with a procurement price of \$5,000 or more per unit purchased directly with funds from the cooperator for use on this project. All other equipment purchased for the program is and will remain the property of USDA-APHIS-WS.
- 9. USDA-APHIS-WS will provide overall direction and control of the program.
- 10. The cooperating parties agree to coordinate with each other before responding to media requests on work associated with this project.

ARTICLE 4 - COOPERATOR RESPONSIBILITIES

Cooperator agrees:

1. To designate the following as the authorized representative who shall be responsible for collaboratively administering the activities conducted in this agreement:

Cooperator Name, Address, Phone Number, Email

Weylan Shaw, Agricultural Commissioner (Acting) 5630 S Broadway Eureka, CA 95503-6905 (707) 441-5260 WShaw@co.humboldt.ca.us

WBS: AP.RA.RX06.73.0123

[optional]	Cooperator PO:	

To authorize USDA-APHIS-WS to wildlife damage management activities for Humboldt County.

- 3. To reimburse USDA-APHIS-WS for costs, not to exceed the annually approved amount specified in the Financial Plan. If costs are projected to exceed the amount reflected in the Financial Plan, the Financial Plan shall be formally revised and signed by both parties before services resulting in additional costs are performed. The Cooperator agrees to pay all costs of services submitted via an invoice from USDA-APHIS-WS within 30 days of the date of the submitted invoice(s). Late payments are subject to interest, penalties, and administrative charges and costs as set forth under the Debt Collection Improvement Act of 1996.
- 4. To provide a Tax Identification Number or Social Security Number in compliance with the Debt Collection Improvement Act of 1996.
- 5. As a condition of this agreement, the Cooperator ensures and certifies that it is not currently debarred or suspended and is free of delinquent Federal debt.
- 6. To notify USDA-APHIS-WS verbally or in writing as far in advance as practical of the date and time of any proposed meeting related to the program.
- 7. The Cooperator acknowledges that USDA-APHIS-WS shall be responsible for administration of USDA-APHIS-WS activities and supervision of APHIS-WS personnel.
- 8. The Cooperator will not be connected to the USDA-APHIS computer network(s).

ARTICLE 5 - USDA-APHIS-WS RESPONSIBILITIES

USDA-APHIS-WS Agrees:

1. To designate the following as the USDA-APHIS-WS authorized representative who shall be responsible for collaboratively administering the activities conducted in this agreement.

USDA-APHIS-WS State Director: Name/Title, Address,

Phone Number, Email

Dennis L. Orthmeyer/California State Director

3419A Arden Way

Sacramento, CA 95825

(916) 979-2675

Dennis.L.Orthmeyer@USDA.GOV

 To conduct activities at sites designated by Cooperator as described in this CSA and Financial Plans. USDA-APHIS-WS will provide qualified personnel and other resources necessary to implement the approved IWDM activities delineated in the CSA and Financial Plan of this agreement.

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[optional]	Cooperator PO:	
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3. The performance of IWDM actions by USDA-APHIS-WS under this agreement is contingent upon a determination by USDA-APHIS-WS that such actions are in compliance with the National Environmental Policy Act, Endangered Species Act, and any other applicable environmental statutes. USDA-APHIS-WS will not make a final decision to conduct requested IWDM actions until it has made the determination of such compliance.

- 4. To provide qualified personnel and other resources necessary to implement the approved IWDM activities delineated in this agreement and the Financial Plan referenced in Article 3.b. of this Agreement.
 - a. Conduct all control activities with trained USDA-APHIS-WS employees and volunteers.
 - b. Provide technical assistance which includes demonstrations on the proper use of management devices (i.e., propane exploders, exclusionary devices, cage traps, etc.) and information on animal husbandry, habitat management, and animal behavior modification that could reduce damage. Official USDA pamphlets may be used to convey this information to the public.
 - c. Provide predator/nuisance wildlife identification and removal when livestock, crop property, natural resource damage; or wildlife displaying aggressive behavior causing actual injury to county residents is verified.
 - d. Provide operational assistance when the problem cannot effectively be resolved through technical assistance, when resource owner implemented nonlethal actions have failed, or concurrently when technical assistance is delivered. Field assistance would mostly be provided for situations that require the use of methods and techniques that are challenging or unsuitable for the public to implement on their own. Resource owners that are provided operational assistance are also encouraged to use additional management strategies and sound husbandry practices, when and where appropriate, that could potentially further reduce damage. Field operations may include but are not limited to the monitoring, trapping, dispersal, and removal of wildlife causing damage to property, livestock, crops, and natural resources.
 - e. Procure and maintain a vehicle, tools, supplies, and other specialized equipment as deemed necessary by the State Director to accomplish the objectives identified in this agreement. All expenditures will be processed through USDA-APHIS Financial Management Modernization Initiative (FMMI) system.
- 5. To invoice Cooperator quarterly for actual costs incurred by USDA-APHIS-WS during the performance of services agreed upon and specified in this CSA and the Financial Plan. Authorized auditing representatives of the Cooperator shall be accorded reasonable opportunity to inspect the accounts and records of USDA-APHIS-WS pertaining to such claims for reimbursement to the extent permitted by Federal law and regulations.

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[optional] Cooperator PO: _____

ARTICLE 6 – CONTINGENCY STATEMENT

This agreement is contingent upon the passage by Congress of an appropriation from which expenditures may be legally met and shall not obligate USDA-APHIS-WS upon failure of Congress to so appropriate. This agreement may also be reduced or terminated if Congress only provides USDA-APHIS-WS funds for a finite period under a Continuing Resolution.

ARTICLE 7 - NON-EXCLUSIVE SERVICE CLAUSE

Nothing in this agreement shall prevent USDA-APHIS-WS from entering into separate agreements with any other organization or individual for the purpose of providing wildlife damage management services exclusive of those provided for under this agreement.

ARTICLE 8 - CONGRESSIONAL RESTRICTIONS

Pursuant to Section 22, Title 41, United States Code, no member of or delegate to Congress shall be admitted to any share or part of this agreement or to any benefit to arise therefrom.

ARTICLE 9 - LAWS AND REGULATIONS

This agreement is not a procurement contract (31 U.S.C. 6303), nor is it considered a grant (31 U.S.C. 6304). In this agreement, APHIS-WS provides goods or services on a cost recovery basis to nonfederal recipients, in accordance with all applicable laws, regulations and policies.

ARTICLE 10 - LIABILITY

USDA-APHIS-WS assumes no liability for any actions or activities conducted under this agreement except to the extent that recourse or remedies are provided by Congress under the Federal Tort Claims Act (28 U.S.C. 1346(b), 2401(b), and 2671-2680).

ARTICLE 11 - NON-DISCRIMINATION CLAUSE

The United States Department of Agriculture prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. Not all prohibited bases apply to all programs.

ARTICLE 12 - DURATION, REVISIONS, EXTENSIONS, AND TERMINATIONS

This agreement shall become effective on 1 July 2023 and shall continue through 30 June 2028, not to exceed five years. This Cooperative Service Agreement may be amended by mutual agreement of the parties in writing. The Cooperator must submit a written request to extend the end date at least 10 days prior to expiration of the agreement. Also, this agreement may be terminated at any time by mutual agreement of the parties in writing, or by one party provided that party notifies the other in writing at least 60 days prior to effecting such action.

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[optional] Cooperator PO:	
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Further, in the event the Cooperator does not provide necessary funds, USDA-APHIS-WS is relieved of the obligation to provide services under this agreement.

In accordance with the Debt Collection Improvement Act of 1996, the Department of Treasury requires a Taxpayer Identification Number for individuals or businesses conducting business with the agency.

Cooperator's Tax ID No.: 94-6000513 APHIS-WS's Tax ID: 41-0696271

Cooperator:

Humboldt County 5630 S Broadway Eureka, CA 95503-6905

County Representative/Title

Date

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE WILDLIFE SERVICES 3419A Arden Way Sacramento, CA 95825

AARON COLL	Digitally signed by AARON COLLINS Date: 2023.08.11 08:19:17 -07'00'	8/11/23	
Aaron Collins, Act	ing California State Director	Date	
JOHN STEUBER	Digitally signed by JOHN STEUBER DN: c=US, o=U.S. Government, ou=Department of Agriculture, cn=JOHN STEUBER, 0.9.2342.19200300.100.1.1=12001000021701 Date: 2023.08.22 22:02:23 -06'00'		

John Steuber, Acting Western Regional Director

Date

Form (Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; d	o not leave this line blank.									
	County of Humboldt	armatical and the second secon									
	2 Business name/disregarded entity name, if different from above										
n page 3.	following seven boxes.					4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
e. ons o	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC	l Partnership	Partnership Trust/estate			Exempt payee code (if any)					
ct io	☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶										
Print or type. Specific Instructions on	Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of t another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-memb is disregarded from the owner should check the appropriate box for the tax classification of its owner.				the LLC is				rting		
eci	✓ Other (see instructions) ► County Go	overnment			(A	pplies	to account	s mainta	ined o	utside	the U.S.)
Sp	5 Address (number, street, and apt. or suite no.) See instructions.		Requester	's na	me and	add	ress (op	tional)		
See	825 5th Street, Room 126										
0,	6 City, state, and ZIP code		1								
	Eureka, CA 95501										
	7 List account number(s) here (optional)										
Par	Taxpayer Identification Number (TIN)										
	our TIN in the appropriate box. The TIN provided must match the nan			Socia	l secur	ity n	umber				
	o withholding. For individuals, this is generally your social security nur		for a	\top				7 [
	nt alien, sole proprietor, or disregarded entity, see the instructions for s, it is your employer identification number (EIN). If you do not have a r		ot a			-		-			
TIN, la		nambon, coo mon to go	OI	r							
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Numb	er To Give the Requester for guidelines on whose number to enter.		Γ.		7 [
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Part	Certification										
Under	penalties of perjury, I certify that:										
2. I am Sen	number shown on this form is my correct taxpayer identification numl not subject to backup withholding because: (a) I am exempt from bac vice (IRS) that I am subject to backup withholding as a result of a failur onger subject to backup withholding; and	ckup withholding, or (b) I have no	t bee	en not	ified	by the	Inter	nal F ed m	Reve	enue at I am
3. I am	a U.S. citizen or other U.S. person (defined below); and										
	FATCA code(s) entered on this form (if any) indicating that I am exemple	ot from FATCA reportin	na is correc	ct.							
Certific you hat acquis other t	cation instructions. You must cross out item 2 above if you have been not be failed to report all interest and dividends on your tax return. For real estition or abandonment of secured property, cancellation of debt, contribution an interest and dividends, you are not required to sign the certification, be	otified by the IRS that yo tate transactions, item 2 ons to an individual retir	ou are curre 2 does not a rement arra	ently apply	/. For r nent (I	norto RA),	gage int	terest nerall	paid	d, avme	ents
Sign Here	Signature of U.S. person Maylan		Date ►	7/	128	1/2	207	2	-		
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related	e developments. For the latest information about developments I to Form W-9 and its instructions, such as legislation enacted ney were published, go to www.irs.gov/FormW9.	 Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) 									
	pose of Form	 Form 1099-S (proceeds from real estate transactions) Form 1099-K (merchant card and third party network transactions) 									
	ividual or entity (Form W-9 requester) who is required to file an	• Form 1098 (home									
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taxpay	er identification number (ATIN), or employer identification number	 Form 1099-A (acqu 	นเรเนอก อก ล	apani	uonme	11(0	secur	ea pr	ope	rty)	

Use Form W-9 only if you are a U.S. person (including a resident

be subject to backup withholding. See What is backup withholding,

If you do not return Form W-9 to the requester with a TIN, you might

alien), to provide your correct TIN.

later.

(EIN), to report on an information return the amount paid to you, or other

amount reportable on an information return. Examples of information

returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

APPROVAL FOR FISCAL YEAR 2023 AGREEMENTS

Initiative Title:	_	WS PROTECTION OF P	ROPERTY						
Proposed funding le	evel: \$	36,156,025							
What is the purpose of the initiative/agreement and how does it align with the Agency's and Secretary's priorities? Wildlife Services (WS) activities to protect property occur in a wide variety of settings, including rural, urban, industrial, and suburban areas. WS personnel work with homeowners, property managers, parks departments, and government agencies to reduce property damage caused by wildlife. Operational activities include: beaver control and dam removals to prevent flooding and damage to water irrigation, sewer and flood prevention systems and transportation infrastructure including roadways, bridges, railroads, and airports; crow, raptor, and vulture management to prevent nest construction and damage to buildings, telecommunication towers, military and energy infrastructure including defense systems, power lines, substations, and ethanol production; and pigeon, European starling and house sparrow removals to prevent contamination to equipment, livestock feed and aircraft, and prevent disease transmissions from within buildings including barns, grain silos, hospitals, office buildings, residences, convention centers, aircraft hangers, and terminals. WS personnel remove abundant waterfowl from areas where birds damage or contaminate landscapes, recreation areas, ponds, lakes, and other water features.									
This initiative supports U Previous year fundi		5,102,936							
		be found on an attack	•						
Historic instruments used to accomplish the initiatives goals Cooperative Grant Interagency Agreement Incoming Fund Agreement Agreement									
(CA) ⊠		(GR) ⊠							
Signatures:									
Approving official:		T		<u> </u>					
Title	Name	Signature and date							
Program Manager/ADODR	Steven Wickenheiser	STEVEN WICKENHEISER	Digitally signed by STEVEN WICKENHEISER Date: 2023.01.17 14:49:52 -05'00'	Signature needed					
Signatory or Delegate	David Reinhold	DAVID REINHOLD Digitally signed by DAVID REINHOLD Agriculture, on-ADVID REINHOLD, Agriculture, on-ADVID REINHOLD, 0.92.3921.9900.090.100.1,1-12001000092406 Date: 2023.01.16.075.30.04.45000		Signature needed					
SES	Janet Bucknall	DONNA LALLI	Digitally signed by DONNA LALLI	≥ \$250,000	\boxtimes				

HEATHER

TRAINUM

Digitally signed by HEATHER TRAINUM Date: 2023.01.19 19:06:20 -05'00' Signature

needed

Agreement/Grant

Specialist

Heather

Trainum