

**JUSTIFICATION FOR NON-COMPETITIVE PROCUREMENT**

**COMPLETE THIS SECTION IF NEW CONTRACT**

For contract(s) in this request, answer applicable questions in each of the 4 major subject areas below in accordance with the Instructions for Preparation of Non-Competitive Procurement Form on the reverse side.

Request that negotiations be conducted only with ARGONNE NATIONAL LABS for the product and/or services described herein.

(Name of Person or Firm)

This is a request for \_\_\_\_\_ (One-Time Contractor Requisition # \_\_\_\_\_, copy attached) or 40983 Term Agreement or

Delegate Agency (Check one). If Delegate Agency, this request is for "blanket approval" of all contracts within the

EMERGENCY PREPAREDNESS (Attach List) Pre-Assigned Specification No. 70310

(Program Name) Pre-Assigned Contract No. \_\_\_\_\_

**COMPLETE THIS SECTION IF AMENDMENT OR MODIFICATION TO CONTRACT**

Describe in detail the change in terms of dollars, time period, scope of services, etc., its relationship to the original contract and the specific reasons for the change. Indicate both the original and the adjusted contract amount and/or expiration date with this change, as applicable. Attach copy of all supporting documents. Request approval for a contract amendment or modification to the following:

Contract #: \_\_\_\_\_ Company or Agency Name: \_\_\_\_\_

Specification #: \_\_\_\_\_ Contract or Program Description: \_\_\_\_\_

Mod. #: \_\_\_\_\_ (Attach List, if multiple)

Richard W. Rzeszutko 745-3504 [Signature] CDPH 11/24/08  
 Originator Name Telephone Signature Department Date

Indicate SEE ATTACHED in each box below if additional space needed:

<input checked="" type="checkbox"/> <b>PROCUREMENT HISTORY</b>	Contract Number 14903 With Argonne National Laboratory Expired in June of 2008. It was a one year Sole Source Contract	
<input checked="" type="checkbox"/> <b>ESTIMATED COST</b>	3year Total \$596,037.00	<b>S. S. R. B.</b> DATE <u>02/03/09</u> APPROVED... <u>5-0</u>
<input checked="" type="checkbox"/> <b>SCHEDULE REQUIREMENTS</b>	Attached	<b>CONDITIONALLY APPROVED...</b>
<input checked="" type="checkbox"/> <b>EXCLUSIVE OR UNIQUE CAPABILITY</b>	Attached	<b>RETURN TO DEPT... DISAPPROVED...</b>
<input type="checkbox"/> <b>OTHER</b>		

APPROVED BY: [Signature] 12/19/08 [Signature] 02/03/09  
 DEPARTMENT HEAD OR DESIGNEE DATE BOARD CHAIRPERSON DATE

[Signature]  
 CPO's Signature  
2-24-09  
 Date of Approval



City of Chicago  
Richard M. Daley, Mayor  
Department of Public Health

Terry Mason, M.D., F.A.C.S.  
Commissioner

333 South State Street  
Chicago, Illinois 60604  
(312) 747-9884  
(312) 747-9888 (24 hours)  
(312) 747-2374 (TTY)

<http://www.cityofchicago.org/health>

To MONTEL M. GAYLES  
Chief Procurement Officer  
City of Chicago Department of Procurement Services

From: Terry Mason, M.D., F.A.C.S.  
Commissioner, Chicago Department of Public Health

A handwritten signature in black ink, appearing to read "Terry Mason".

Date: 11/24/2008

Re: Request for Sole Source Contract with Argonne National Laboratory to Provide the Chicago Disease Outbreak Distance Tabletop Exercises.

The Chicago Department of Public Health (CDPH) requests the establishment of a Sole Source Contract with Argonne National Laboratory (ANL). ANL will utilize proprietary software and intellectual property that has been effectively used with organizations such as the U.S. Department of Defense, Department of Homeland Security, Department of Energy, City of Chicago, and the Chicago Hospital System. These proprietary tools and the unique experience of the ANL scientists who have worked with the aforementioned organizations will serve as the driving force behind CDPH's Disease Outbreak Distance Tabletop Exercises and the design, execution, and evaluation of public health disaster exercises. Research of other organizations has found that ANL is the only one that can effectively provide these services.

CDPH is seeking a multiple year contract with ANL to Provide the necessary services for the Health and Safety of the Citizens of Chicago.

Thank you for your assistance in this matter. If you have any questions or need additional information, please contact Richard Rzeszutko at 312-745-3504 or Rosemary Lebron at 312-747-9657.

cc. Rosemary Lebron

**RxChicago**

Department of Public Health  
*"Preceding the Prescription for a Healthier City"*



# DPS PROJECT CHECKLIST

For DPS Use Only	
Date Received	_____
Date Returned	_____
Date Accepted	_____
CA/CN's Name	_____

**IMPORTANT:** PLEASE READ AND FOLLOW THE INSTRUCTIONS FOR COMPLETING THE PROJECT CHECKLIST AND CONTACT THE APPROPRIATE UNIT MANAGER IF YOU HAVE ANY FURTHER QUESTIONS. ALL INFORMATION SHOULD BE COMPLETED, ATTACH ALL REQUIRED MATERIALS AND SUBMIT FOR HANDLING TO THE DEPARTMENT OF PROCUREMENT SERVICES, ROOM 403, CITY HALL, 121 N. LASALLE STREET, CHICAGO, ILLINOIS 60602.

**GENERAL INFORMATION:**

**Date:** 11-24-08  
**REQ No.:** 40983  
**Specification No.:** (if known): 70310  
**PO No.:** (if known):  
**Modification No.:** (if known):  
**Project Description:** SOLE SOURCE CONTRACT TO PLAN CHICAGO DISEASE OUTBREAK DISTANCE TABLETOP EXERCISES

**Contact Person:** R. RZESZUTKO  
**Tel:** 5-3504 **Fax:** **E-mail:** rzeszutko\_richard@cityofchicago.org  
**Project Manager:** Edward Lefevour  
**Tel:** 745-0251 **Fax:** **E-mail:** @cityofchicago.org  
**Previous PO No.:** (if known):

**FUNDING:**

City:  Corporate  Bond  Enterprise  Grant\*  Other  
 State:  IDOT/Transit  IDOT/Highway  Grant\*  Other  
 Federal:  FHWA  FTA  FAA  Grant\*  Other

LINE	FY	FUND	DEPT	ORGN	APPR	ACTV	OBJT	PROJECT	RPTG	\$ DOLLAR AMOUNT
1	08	0847	41		0140	0140		0413320	08FG60	\$ 416,037
2	08	0847			0140	0140		0413320	08FG70	\$ 180,000

**Estimated Value \$** 596,037.<sup>00</sup>

\*IF GRANT FUNDED, A COPY OF THE APPROVED GRANT AND APPLICATION ARE REQUIRED and any other Terms and Conditions that may apply.

**SCOPE STATEMENT:**

Attached is a Detailed Scope of Services and/or Specification

**IMPORTANT:** THIS IS A CRITICAL PORTION OF YOUR SUBMITTAL. IN ORDER FOR DPS TO ACCEPT YOUR SUBMITTAL YOU MUST COMPLETE THE SPECIFIC SCOPE REQUIREMENTS AS SET FORTH IN THE SUPPLEMENTAL CHECKLIST FOR THAT UNIT.

The following is a general description of what should be included in a Scope of Services or Specification:

A clear description of all anticipated services and products, including: time frame for completion, special qualifications of prospective vendors, special requirements or needs of the project, locations, anticipated participating user departments, citation of any applicable City ordinance or state/federal regulation or statute.

**TYPE OF PROCUREMENT REQUESTED** (check all that apply):

**NEW REQUEST**

Blanket Agreement  
 Standard Agreement  
 Small Orders

**MOD/AMENDMENT**

Time Extension  
 Vendor Limit Increase  
 Scope Change/Price Increase/Additional Line Item(s)  
 Other (specify):

**FORMS:**  Requisition  Special Approvals  Non-Competitive Review Board (NCRB)

**CONTRACT TERM:** 3 YEARS **Requested Term (number of months):** 36 MONTHS

# DPS PROJECT CHECKLIST

## PRE BID/SUBMITTAL REQUIREMENTS:

Requesting Pre Bid/Submittal Conference?  Yes  No Requesting Site Visit?  Yes  No

## ARCHITECTURAL/ENGINEERING SUPPLEMENTAL CHECKLIST

**Required Attachments:** Scope of Services, including location, description of project, services required, deliverables, and other information as required

### Risk Management

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

**If applicable, Pre-Qualification** Category No. \_\_\_\_\_ Category Description: \_\_\_\_\_

For Pre-Qualification Program, attach list of suggested firms to be solicited

**Other Agency Concurrence Required:**  None  State  Federal  Other (fill in) \_\_\_\_\_

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## AVIATION CONSTRUCTION SUPPLEMENTAL CHECKLIST

DOA sign-off for final design documents:  Yes  No

### Required Attachments:

Copy of Draft Contract Documents and Detailed Specifications.

### Risk Management:

Current Insurance Requirements prepared/approved by Risk Management: Yes  No

Will work be performed within 50 feet of CTA or ATS structure or property? Yes  No

Will work be performed airside? Yes  No

**\*NOTE:** Any non-construction Aviation request, complete the applicable section.

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## COMMODITIES SUPPLEMENTAL CHECKLIST

**Required Attachments:** Detailed Specifications (Scope of Services) including detailed description of the product, delivery location, user department contact, price escalation considerations, Bidder's qualification, contract term and extension options, Contractor's qualifications, citation of any applicable City/State/Federal statutes or regulations, citation of any applicable technical standards and Price Lists/Catalogs, technical drawings and other exhibits and attachments as appropriate.

**If Modification request,** please verify and provide the following:

Contractor's Name:

Contractor's Address:

Contractor's e-mail Address:

Contractor's Phone Number:

Contractor's Contact Person:

---

## CONSTRUCTION SUPPLEMENTAL CHECKLIST

### Required attachments:

Copy of Draft (80% Completion), Contract Documents and Detailed Specifications

### Risk Management

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

# DPS PROJECT CHECKLIST

## VEHICLES/HEAVY EQUIPMENT SUPPLEMENTAL CHECKLIST

### Required Attachments:

- Detailed Specifications including detailed description of the vehicle(s) or equipment, mounted equipment, if any, and options/accessories.
- Special Provisions (Delivery, Warranty, Manuals, Training, Additional Unit Purchase Options, Bid Submittal Information, etc.)
- Delivery Location(s)
- Technical Literature
- Drawings, if any
- Part Number List (            Manufacturer; or            Dealer;            or Other Source:            )
- Current Price List(s)/Catalog(s)
- Special Approval Form
- Exhibits and Attachments

If **Modification request**, please verify and provide the following:

Contractor's Name:

Contractor's Address:

Contractor's e-mail Address:

Contractor's Phone Number:

Contractor's Contact Person:

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## PROFESSIONAL SERVICES SUPPLEMENTAL CHECKLIST

- Detailed description of project listing obligations of each party.
- The Schedule of Compensation
- Deliverables
- Request for individual contract services (if applicable)
- The appropriate EPS form
- ITSC (approved by BIS)
- OBM (approved by Budget form/memo)
- Grant document attached

Attach any documentation indicating any previous purchase activity to assist in the procurement process

## TELECOMMUNICATIONS AND UTILITIES SUPPLEMENTAL CHECKLIST

**Required Attachments:** Detailed Scope of Services/Specification which sets forth all of the anticipated services and products the user department wants provided, including time frame for completion, special qualifications of prospective vendors, special requirements or needs of the project, locations, anticipated participating user departments, citation of any applicable City ordinance or state/federal regulation or statute.

Has the project been reviewed by BIS?             Yes    No

Attach copy of BIS Recommendation; Reservation(s); or participate under current contract.

Does the project include software?             Yes    No

If yes, is signed ITSC form attached?             Yes    No

Does the location involve:

A public way?             Yes    No

Any concession in the City's facilities?             Yes    No

Is it anticipated City Council approval of the project or contract will be required?             Yes    No

# DPS PROJECT CHECKLIST

## WORK SERVICES/FACILITY MAINTENANCE SUPPLEMENTAL CHECKLIST

**Required Attachments:** Detailed Specifications (Scope of Services) including detailed description of the work, locations (with supporting detail), user department contacts, work hours/days, laborer/supervisor mix, compensation and price escalation considerations, Bidder's qualification, contract term and extension options, Contractor's qualifications, citation of any applicable City/State/Federal statutes or regulations, citation of any applicable technical standards and Price Lists/Catalogs, technical drawings and other exhibits and attachments as appropriate.

**Risk Management:**

Will services be performed within 50 feet (50') of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

Will services require the handling of hazardous/bio-waste material?  Yes  No

Will services require the blocking of streets or sidewalks which may affect public safety?  Yes  No

**If Modification or Amendment request**, please verify and provide the following:

Contractor's Name:

Contractor's Address:

Contractor's e-mail Address:

Contractor's Phone Number:

Contractor's Contact Person:

## **CHICAGO DISEASE OUTBREAK DISTANCE TABLETOP EXERCISES**

Argonne is at the forefront of exercise policy development and methods research. Argonne assisted FEMA in developing its Radiological Emergency Preparedness (REP) exercise program by designing its exercise methodology and evaluation criteria. Argonne also developed and taught the REP exercise evaluation course at FEMA's Emergency Management Institute until December 2000. Building on their REP experience, in 1989, Argonne assisted the Army and FEMA in developing their CSEPP exercise program. In 1996, Argonne researched and designed an innovative exercise process called Integrated Performance Evaluation that became the standard exercise process for both REP and CSEPP. In 2002, with Argonne's assistance, the Department of Homeland Security adopted and adapted the IPE concept into the Homeland Security Exercise Evaluation Program (HSEEP). Argonne continues to be involved in exercise policy development by providing research and technical support to FEMA in the areas of exercise reporting systems, corrective action programs, lessons-learned, organization learning, and knowledge management constructs as part of DHS efforts to implement the HSEEP methodology. Additionally, Argonne sits on the FEMA HSEEP Toolkit Integration Committee, ensuring that current and future HSEEP automation systems comply with DHS guidelines and with external standards when appropriate.

As a result of working on a number of preparedness initiatives with CDPH, including prior exercises, Argonne has a unique knowledge of the City's public health emergency response plans. Additionally, Argonne has unique skills planning and conducting emergency response exercise involving multiple Chicago hospitals and public health agencies. In the last five years, Argonne has planned and conducted 19 tabletop and functional exercises involving individual hospitals, regional groups of hospitals, CDPH, the Illinois Department of Public Health, and regional county departments of public health. Argonne has developed Distance Exercise (DISTEX) method, which was utilized successfully in the conduct of two Distance Table Top Exercise. During 2007-2008, the city demonstrated that tabletop exercises including Flunami (2007) and IllWind (2008) using distance learning techniques could contribute significantly to preparedness efforts. Argonne staff has unique insights as to how to make the developing DISTEX exercise method successful in the challenging environment of Chicago regional healthcare. The DISTEX method itself, was developed by Argonne, is not available outside the Laboratory, and cannot presently be operated or replicated by any other organization.



Edward Tanzman  
Emergency Preparedness Group Leader

Decision and Information Sciences Division  
Argonne National Laboratory  
9700 South Cass Avenue, Bldg. 900  
Argonne, IL 60439-4832

1-630-252-3263 phone  
1-630-252-5327 fax  
tanzman@anl.gov

November 17, 2008

Mr. Steven A. Mier  
Assistant Commissioner  
Chicago Department of Public Health  
DePaul Center  
Room 200  
333 South State Street  
Chicago, IL 60604

Dear Mr. Mier:

I am writing at your request to document Argonne's unique capabilities to support the Chicago Department of Public Health (CDPH) in developing, moderating, and evaluating the Chicago Disease Outbreak Distance Tabletop Exercises (CDODTE) as proposed in Argonne's Proposal No. P-09018.

First, Argonne proposes to use its Distance Tabletop Exercise (DISTEX) method and software application to carry out the proposed work. DISTEX was developed under Argonne Proposal No. P-07092 for CDPH. The method and application remain developmental, and will be further improved during the course of the proposed work. No other organization has the skill or the software license(s) to enable it to do this work.

Second, Argonne has unique knowledge of and experience with emergency response plans and preparedness in the Chicago public health and hospital community. Since early 2003, Argonne has analyzed communicable disease outbreak emergency plans at eight major Chicago hospitals and has facilitated a process to improve their coordination and synchronization by using Argonne's proprietary Emergency Response Synchronization Matrix<sup>®</sup> software. Argonne has also supported aspects of regional response planning for both CDPH and the Illinois Department of Public Health (IDPH). Consequently, Argonne staff members are familiar with a broad array of hospital emergency plans, their various planning processes, their planning personnel, and their emergency response leadership. The Laboratory is aware of no other organization with equivalent knowledge and experience outside of CDPH itself.

Finally, Argonne has unique skills in planning and conducting emergency response exercises involving multiple Chicago hospitals and cognizant public health agencies. In the last six years, Argonne has planned and conducted 19 tabletop or functional exercises involving individual hospitals, regional groups of hospitals, CDPH, IDPH, and other regional county health departments. This responsibility has earned Argonne staff the respect and trust of key planners, as well as giving Argonne staff unique insights into how to make the new method of exercising successful in the challenging environment of Chicago healthcare. Argonne is not aware of any other organization that has planned or conducted a comparable range of emergency exercises involving the Chicago healthcare community.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Edward Tanzman", with a long horizontal flourish extending to the right.

Edward Tanzman, Co-Director,  
Center for Integrated Emergency Preparedness





City of Chicago  
Richard M. Daley, Mayor

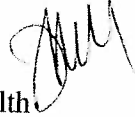
Department of Public Health

Terry Mason, M.D., F.A.C.S.  
Commissioner

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Chicago, Illinois 60604  
(312) 747-9884  
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(312) 747-2374 (TTY)

<http://www.cityofchicago.org/health>

To: Montel M. Gayles  
Chief Procurement Officer  
City of Chicago Department of Procurement Services

From: Terry Mason, M.D., F.A.C.S.   
Commissioner, Chicago Department of Public Health

Date: 11/24/2008

**RE: Waiver request of MBE/WBE compliance for a Sole Source contract with Argonne National Laboratories**

The Chicago Department of Public Health (CDPH) requests the establishment of a Sole Source Contract with Argonne National Laboratory (ANL). ANL will utilize proprietary software and intellectual property that has been effectively used with organizations such as the U.S. Department of Defense, Department of Homeland Security, Department of Energy, City of Chicago, and the Chicago Hospital System. These proprietary tools and the unique experience of the ANL scientists who have worked with the aforementioned organizations will serve as the driving force behind CDPH's Disease Outbreak Distance Tabletop Exercises and the design, execution, and evaluation of public health disaster exercises. Research of other organizations has found that ANL is the only one that can effectively provide these services.

The facility known as Argonne National Laboratory is owned by the United States Government and operated by UChicago Argonne LLC, under a Prime contract with the government. Based on these facts, we concur with Argonne National Laboratory, that no stated goals of the MBE/WBE requirement is appropriate for this contract.

Thank you for your assistance in this matter. If you have any questions or need additional information, please contact Richard Rzeszutko at 312-745-3504 or Rosemary Lebron at 312-747-9657.

cc. Esmeralda Soto  
Rosemary Lebron

**RxChicago**

Department of Public Health

"Providing the Prescription for a Healthy City"



**P-09018**

**CHICAGO DISEASE OUTBREAK DISTANCE TABLETOP EXERCISES**

Work proposed by:

Argonne National Laboratory  
Decision and Information Sciences Division  
9700 South Cass Avenue  
Lemont, IL 60439

Principal Investigator:  
Edward Tanzman

Submitted to:

Steve Mier  
Chicago Department of Public Health  
Room 200, DePaul Center  
333 South State Street  
Chicago, IL 60604  
(312) 747-9783

November 2008

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# **CHICAGO DISEASE OUTBREAK DISTANCE TABLETOP EXERCISES**

## **PROGRAM OVERVIEW**

The Chicago Department of Public Health (CDPH) is the municipal agency responsible for protecting public health in the City of Chicago. Part of the City of Chicago's (hereafter the City's) concern with protecting the public against chemical and other terrorist attacks involves monitoring events and coordinating the response to bioterrorism and contagious disease outbreaks. The purpose of the tasks identified in this Statement of Work (SOW) is to plan, conduct, and evaluate additional Chicago Disease Outbreak Distance Tabletop Exercises (CDODTE) using Argonne National Laboratory's Distance Exercise (DISTEX) method, which was initially developed under Argonne Proposal No. P-07092. Under the current proposal, Argonne will continue to improve the capability of the City's departments, private healthcare organizations, and associated jurisdictions to respond to such emergencies in an integrated and coordinated manner. Further improvement of these capabilities will strengthen the City's ability to protect the public from terrorist attacks, as well as from contagious disease outbreaks.

During 2007–2008, the City demonstrated that tabletop exercises using distance learning techniques could contribute significantly to preparedness. An underlying purpose of those exercises (FluNami 2007 and IllWInd 2008) was to increase the cost-effectiveness of tabletop exercising. By combining the essential elements of traditional tabletop exercising, such as scenario discussions and scenario injects, with distance learning technologies, FluNami and IllWInd allowed players to exercise a multiorganization scenario that unfolded over several weeks without requiring them to use valuable resources to travel from their home organizations to a central location. This approach also allowed planning organizations to include a broad range of staff in the exercise without disrupting normal operations.

Argonne is uniquely qualified to complete the work identified here because of its knowledge of the City's public health emergency response plans, its conduct of prior emergency response exercises across the region, and its development of the DISTEX method. First, since early 2003, Argonne has analyzed emergency plans addressing communicable disease outbreaks for eight major Chicago hospitals and two area health departments in addition to CDPH. Argonne has facilitated a process funded by the Department of Homeland Security to improve coordination and synchronization among these organizations by using Argonne's proprietary EMTTools software. Second, Argonne has unique skills in planning and conducting emergency response exercises involving multiple Chicago hospitals and cognizant public health agencies. In the last five years, Argonne has planned and conducted 19 tabletop and functional exercises involving individual hospitals, regional groups of hospitals, CDPH, the Illinois Department of Public Health, and regional county departments of public health. This responsibility has earned Argonne staff the respect and trust of key regional emergency planners, as well as giving Argonne staff unique insights as to how to make the developing DISTEX exercise method successful in the challenging environment of Chicago regional healthcare. Finally, the DISTEX method itself was developed at Argonne, is not available outside of the Laboratory, and cannot presently be operated or replicated by any other organization. In summary, the Laboratory is aware of no

other organization with equivalent knowledge and experience applicable to the work described in this proposal.

During FY 2009–2011, the CDODTE program will consist of an annual exercise lasting approximately four weeks and following a similar format to that of FluNami and IllWind. The exercises will be scheduled at a mutually agreeable time. The City recognizes and agrees that completion of this program requires its personnel to provide timely information and input to support its completion, and that this program may be delayed or become impossible to complete satisfactorily if inputs are not provided in a timely fashion. The program will comprise the tasks described in the following section.

## **TASKS**

### **TASK 1: PLAN CHICAGO DISEASE OUTBREAK DISTANCE TABLETOP EXERCISES**

#### **Task 1.1: Plan Exercise Development and Configure Exercise Web Site**

Under this task, Argonne will:

1. Prepare a draft CDODTE project management timeline for each exercise.
2. After receiving the City's comments, prepare a final CDODTE project management timeline for each exercise.
3. Participate in up to three meetings per exercise as directed by the City and, with users invited by the City, explain the DISTEX application and gather feedback.
4. On the basis of these meetings, configure the DISTEX Web site to support each exercise. Among the items to be configured are:
  - a. forms for inputting exercise data;
  - b. workflows and tasks, if applicable, for routing exercise-related assignments;
  - c. group permissions, if applicable, to enable control of access to exercise-related information;
  - d. reports, if applicable, for displaying data generated during the exercise;
  - e. user training; and
  - f. user guide.

#### **Task 1.2: Coordinate Development of Exercise Content**

The purpose of this task is to develop each exercise in detail. The Laboratory will work with City personnel and personnel from other organizations designated by the City that will be involved in planning exercises to draft the following documents:

1. Exercise objectives;
2. Extent-of-play;
3. Situation Manual;
4. Master Scenario Events List (MSEL);

5. Player problem-solving tasks, which will be assigned during weekly sessions to playing organizations;
6. Weekly injects and “mock media” stories; and
7. Exercise Evaluation Guide.

Many of these documents will evolve after their initial completion as additional information becomes available and as player involvement is crystallized.

## **TASK 2: FACILITATE EXERCISES**

Argonne will facilitate implementation of the exercises. Although specific Laboratory responsibilities will depend on the details of the exercise documents identified in Task 1.2, facilitation may include:

1. Assisting in testing player computers and other equipment prior to exercise kickoff to avoid operational issues that could interfere with successful exercise participation;
2. Providing one consolidated training session for each exercise and subsequent Help Desk (i.e., e-mail and telephone) support;
3. Developing moderator PowerPoint slides to guide moderator during weekly Webcast scenario discussion sessions;
4. Moderating or controlling the weekly Webcast scenario discussion sessions;
5. Disseminating scenario injects, “mock media” stories, and broadcasts;
6. Staffing or assisting the SIMCELL;
7. Collecting player feedback on exercise experiences;
8. Preparing a draft After-Action Report for each exercise based on evaluations by exercise evaluators identified by the City; and
9. After receiving the City’s comments, preparing a final After-Action Report for each exercise.

Because the success of the exercises will depend greatly on close coordination with the Laboratory as the weekly scenario discussion sessions unfold, the City agrees that it will provide at least a dedicated half-time person with decision-making authority to work directly with Laboratory personnel during the CDODTE development and implementation periods.

## **DELIVERABLES, ESTIMATED COSTS, AND BUDGET**

Table 1 lists the deliverables and estimated costs to provide the services identified in this SOW during FY 2009–2011. Table 2 presents the Laboratory’s estimated budget for Argonne Proposal No. P-09018.

**Table 1 Summary of FY 2009-2011 Deliverables and Estimated Costs for CDOOTE**

Task	Deliverable	Estimated Completion Date	FY 2009		FY 2010		FY 2011	
			Estimated Cost (\$)	Total Cost (\$)	Estimated Cost (\$)	Total Cost (\$)	Estimated Cost (\$)	Total Cost (\$)
1.1.1	Prepare draft CDOOTE project management timeline	Two weeks after program kickoff	2,500		2,613		2,731	
1.1.2	Prepare final CDOOTE project management timeline	One week after receiving City's comments on deliverable for Task 1.1.1	1,500		1,568		1,639	
1.1.3	Participate in up to 3 meetings to explain the DISTEX application and gather user feedback	Four weeks after completing Task 1.1.2	12,500		13,063		13,650	
1.1.4	Configure DISTEX Web site	Two months after completing Task 1.1.2	20,000		20,900		21,841	
		<b>Estimated Subtask Effort Cost</b>	<b>36,500</b>	<b>36,500</b>	<b>38,144</b>	<b>38,144</b>	<b>39,861</b>	<b>39,861</b>
1.2.1	Prepare exercise objectives	Three weeks after completing Task 1.1.2.	1,500		1,568		1,639	
1.2.2	Prepare extent-of-play	Two weeks after completing Task 1.2.1	1,500		1,568		1,639	
1.2.3	Prepare Situation Manual	Two weeks after completing Task 1.2.2	3,500		3,658		3,823	
1.2.4	Prepare MSEL	Four weeks after completing Tasks 1.2.1, 1.2.2, and 1.2.3	20,000		20,900		21,840	
1.2.5	Prepare weekly problem-solving tasks	At least one day before each weekly Webcast	25,000		26,125		27,298	
1.2.6	Prepare weekly injects and "mock media" stories	At least one day before each weekly Webcast	15,000		15,674		16,380	
1.2.7	Prepare Exercise Evaluation Guide	One week after completing Task 1.2.4	5,000		5,225		5,460	
		<b>Estimated Subtask Effort Cost</b>	<b>71,500</b>	<b>71,500</b>	<b>74,718</b>	<b>74,718</b>	<b>78,079</b>	<b>78,079</b>
		<b>Estimated Task Effort Cost</b>	<b>108,000</b>	<b>108,000</b>	<b>112,862</b>	<b>112,862</b>	<b>117,940</b>	<b>117,940</b>
2.1	Test player computers and other equipment	At least one week before first Webcast	1,500		1,568		1,639	
2.2	Provide training session and help desk	At least one week before first Webcast	5,000		5,225		5,460	
2.3	Develop moderator PowerPoint slides	On or before the date of each weekly Webcast scenario discussion session	10,000		10,450		10,920	
2.4	Moderate or control weekly Webcast scenario discussion sessions	On the date of each weekly Webcast scenario discussion session	10,000		10,450		10,920	
2.5	Disseminate scenario injects, mock media stories, and broadcasts	As determined by the schedule in the MSEL developed during Task 1.2.4	15,000		15,674		16,379	
2.6	Staff or assist SIMCELL	As determined by the schedule in the MSEL developed during Task 1.2.4	10,000		10,450		10,920	
2.7	Collect player exercise feedback	On the date of the final Webcast scenario discussion session	1,500		1,568		1,639	
2.8	Prepare draft After-Action Report	Four weeks after exercise is completed	20,000		20,900		21,840	
2.9	Prepare final After-Action Report	Two weeks after receiving City's comments on the draft After-Action Report prepared for Task 2.8	5,000		5,225		5,460	
		<b>Estimated Task Effort Cost</b>	<b>78,000</b>	<b>78,000</b>	<b>81,510</b>	<b>81,510</b>	<b>85,177</b>	<b>85,177</b>
		<b>Estimated Total Annual Effort Cost</b>	<b>186,000</b>	<b>186,000</b>	<b>194,372</b>	<b>194,372</b>	<b>203,117</b>	<b>203,117</b>
		Annual Travel	2,000		2,090		2,184	
		Annual Project Materials and Services	2,000		2,090		2,184	
		<b>Estimated Total Annual Cost</b>	<b>190,000</b>	<b>190,000</b>	<b>198,562</b>	<b>198,562</b>	<b>207,485</b>	<b>207,485</b>
		U.S. Department of Energy "Added Factor"	0		0		0	
		<b>ESTIMATED ANNUAL TOTAL COST</b>	<b>190,000</b>	<b>190,000</b>	<b>198,562</b>	<b>198,562</b>	<b>207,485</b>	<b>207,485</b>

**Table 2 Estimated Budget for Proposal No. P-09018\***

Component	FY 2009		FY 2010		FY 2011		TOTAL	
	Person-Months	Cost (\$1,000)	Person-Months	Cost (\$1,000)	Person-Months	Cost (\$1,000)	Person-Months	Cost (\$1,000)
Direct Effort	8.0	108.8	8.0	115.1	8.0	120.2	24.0	344.1
<b>Total Effort</b>	<b>8.0</b>	<b>108.8</b>	<b>8.0</b>	<b>115.1</b>	<b>8.0</b>	<b>120.2</b>	<b>24.0</b>	<b>344.1</b>
Purchased Material		2.0		2.1		2.2		6.3
Special Term Appointees		17.4		18.2		19.0		54.6
Travel		2.0		2.1		2.2		6.3
Other Direct Costs								
<b>Other Costs Subtotal</b>		<b>21.4</b>		<b>22.4</b>		<b>23.4</b>		<b>67.2</b>
<b>Total Direct Costs</b>		<b>130.2</b>		<b>137.5</b>		<b>143.6</b>		<b>411.3</b>
Laboratory Indirect (LI)		59.8		61.0		63.8		184.6
LDRD Indirect (included in LI)		11.9		11.2		11.7		34.8
<b>Total ANL Cost</b>		<b>190.0</b>		<b>198.5</b>		<b>207.5</b>		<b>596.0</b>
<b>Full-cost recovery rate</b>		<b>190.0</b>		<b>198.5</b>		<b>207.5</b>		<b>596.0</b>

\*Costs may be rounded.







**William M. Walsh**  
Contract Specialist Senior

**Office of the Chief Financial Officer**  
**Procurement Department**  
Argonne National Laboratory  
9700 South Cass Avenue, Bldg. 201  
Argonne, IL 60439

1-630-252-7030 phone  
1-630-252-4517 fax  
wmwalsh@anl.gov

November 18, 2008

Mr. Steven A. Mier  
Assistant Commissioner  
Chicago Department of Public Health  
**City of Chicago**  
DePaul Center  
Room 200  
333 South State Street  
Chicago, IL 60604

Dear Mr Mier:

**Subject: Minority Business Enterprises and Women Business Enterprises**  
**Reference: Argonne's Proposal P-09018 entitled "Chicago Disease Outbreak Distance Tabletop Exercises (CDODTE)"**

The facility known as Argonne National Laboratory is owned by the United States Government and operated by UChicago Argonne, LLC, under a Prime Contract with the Government. The Laboratory complies with the requirements dictated in our Prime Contract with respect to Socio-Economic Goals. The performance rating of the Laboratory by the federal Government is judged in part by our compliance with those requirements. In FY 2007 the Laboratory exceeded its Goals for Small Business Concerns, Women Owned Business Concerns, and Small Disadvantaged Minority Concerns. In FY-08 the Laboratory exceeded its goals in the two of the three areas and is committed to reaching and or exceeding all three in FY-09.

The Laboratory endorses the concept of including language regarding Minority and Women Business Enterprises in any contemplated agreement between our respective organizations. Because of the limitations inherent in our Prime Contract, we request that this provision continue to reflect the following language, which has been used in previous agreements that reads as follows: Section entitled *Minority and Women's Business Enterprises Commitment*

*"In the performance of this Agreement, including the procurement and lease of materials or equipment, the Laboratory abides by the U.S. Department of Energy requirements with respect to minority and women owned businesses."*

Should you have any questions, please feel free to contact the undersigned at your convenience at 630-252-7030.

Sincerely,

A handwritten signature in black ink that reads "William M. Walsh". The signature is written in a cursive, flowing style.

William M. Walsh

cc: K. Duke/Small Business Liaison

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
10/7/08

**PRODUCER**  
WAUSAU INSURANCE  
PO BOX 8017  
WAUSAU WI 54402-8017

**INSURED**  
UCHICAGO ARGONNE LLC,  
OPERATOR OF ARGONNE NATIONAL LABORATORY  
9700 S CASS AVE  
ARGONNE IL 60439

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

**INSURERS AFFORDING COVERAGE**

INSURER A: EMPLOYERS INSURANCE COMPANY OF WAUSAU  
INSURER B:  
INSURER C:  
INSURER D:  
INSURER E:

**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

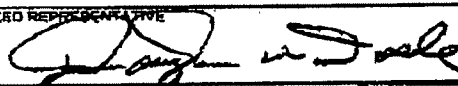
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	TBC-Y91-443017-028	10/01/08	10/01/09	EACH OCCURRENCE	\$ 5,000,000
					FIRE DAMAGE (Any one fire)	\$ 100,000
					MED EXP (Any one person)	\$ 5,000
					PERSONAL & ADV INJURY	\$ 5,000,000
					GENERAL AGGREGATE	\$ 5,000,000
	PRODUCTS - COMP/OP AGG	\$ 5,000,000				
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> _____ <input type="checkbox"/> _____	ASC-Y91-443017-038	10/01/08	10/01/09	COMBINED SINGLE LIMIT	\$ 5,000,000
					(Ea accident)	
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
					GARAGE LIABILITY	
					<input type="checkbox"/> ANY AUTO <input type="checkbox"/> _____	
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
					EACH OCCURRENCE	\$
					AGGREGATE	\$
A	<b>WORKERS COMPENSATION</b>	WCC-Y91-443017-018	10/01/08	10/01/09	WC STATUTORY LIMITS	
					OTHER	
					E.L. EACH ACCIDENT	\$ 500,000
					E.L. DISEASE - EA EMPLOYEE	\$ 500,000
	E.L. DISEASE - POLICY LIMIT	\$ 500,000				
	OTHER					

DESCRIPTION OF OPERATIONS, ADDENDUMS, ENDORSEMENTS, SPECIAL PROVISIONS

COVERAGE IS INCLUDED FOR ALL OPERATIONS OF THE NAMED INSURED IN CONNECTION WITH THE U.S. DEPARTMENT OF ENERGY CONTRACT #DE-AC02-06CH11357.

**CERTIFICATE HOLDER**  ADDITIONAL INSURED; **INSURER LETTER:**  
UCHICAGO ARGONNE LLC  
OPERATOR OF ARGONNE NATIONAL LABORATORY  
9700 S CASS AVE  
ARGONNE IL 60439

**CANCELLATION**  
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL \_\_\_\_\_ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE  


**CITY OF CHICAGO  
ECONOMIC DISCLOSURE STATEMENT  
AND AFFIDAVIT**

**SECTION I – GENERAL INFORMATION**

A. Legal name of Disclosing Party submitting this EDS. Include d/b/a/ if applicable:

UChicago Argonne LLC

**Check ONE of the following three boxes:**

Indicate whether Disclosing Party submitting this EDS is:

1.  the Applicant

OR

2.  a legal entity holding a direct or indirect interest in the Applicant. State the legal name of the Applicant in which Disclosing Party holds an interest: \_\_\_\_\_

OR

3.  a specified legal entity with a right of control (see Section II.B.1.b.) State the legal name of the entity in which Disclosing Party holds a right of control: \_\_\_\_\_

B. Business address of Disclosing Party: UChicago Argonne LLC

9700 South Cass Avenue

Lemont, IL 60439 \_\_\_\_\_

C. Telephone: 630-252-7030 Fax: 630-252-4517 Email: wmwalsh@anl.gov

D. Name of contact person: William M. Walsh

E. Federal Employer Identification No. (if you have one): 68-0628477

F. Brief description of contract, transaction or other undertaking (referred to below as the "Matter") to which this EDS pertains. (Include project number and location of property, if applicable):

Integrated Public Health Planning and Response to assist the City ability to prepare for responses to a variety of natural disease outbreaks, bioterrorism, and other outbreaks.

G. Which City agency or department is requesting this EDS? The Chicago Department of Public Health.

If the Matter is a contract being handled by the City's Department of Procurement Services, please complete the following:

Specification # 62420 and Contract # 17429

**SECTION II -- DISCLOSURE OF OWNERSHIP INTERESTS**

**A. NATURE OF DISCLOSING PARTY**

1. Indicate the nature of the Disclosing Party:

- |   |   |
|---|---|
| <input type="checkbox"/> Person                                   | <input checked="" type="checkbox"/> Limited liability company*      |
| <input type="checkbox"/> Publicly registered business corporation | <input type="checkbox"/> Limited liability partnership*             |
| <input type="checkbox"/> Privately held business corporation      | <input type="checkbox"/> Joint venture*                             |
| <input type="checkbox"/> Sole proprietorship                      | <input checked="" type="checkbox"/> Not-for-profit corporation      |
| <input type="checkbox"/> General partnership*                     | (Is the not-for-profit corporation also a 501(c)(3))?               |
| <input type="checkbox"/> Limited partnership*                     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Trust                                    | <input type="checkbox"/> Other (please specify)                     |
- 

\* Note B.1.b. below.

2. For legal entities, the state (or foreign country) of incorporation or organization, if applicable:

State of Illinois

3. For legal entities not organized in the State of Illinois: Has the organization registered to do business in the State of Illinois as a foreign entity?

- Yes                       No                       N/A

**B. IF THE DISCLOSING PARTY IS A LEGAL ENTITY:**

1.a. List below the full names and titles of all executive officers and all directors of the entity. For not-for-profit corporations, also list below all members, if any, which are legal entities. If there are no such members, write "no members." For trusts, estates or other similar entities, list below the legal titleholder(s).

Name

Title

Sole member is the University of Chicago

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1.b. If you checked "General partnership," "Limited partnership," "Limited liability company," "Limited liability partnership" or "Joint venture" in response to Item A.1. above (Nature of Disclosing Party), list below the name and title of each general partner, managing member, manager or any other person or entity that controls the day-to-day management of the Disclosing Party. NOTE: Each legal entity listed below must submit an EDS on its own behalf.

Name

Title

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2. Please provide the following information concerning each person or entity having a direct or indirect beneficial interest (including ownership) in excess of 7.5% of the Disclosing Party. Examples of such an interest include shares in a corporation, partnership interest in a partnership or joint venture, interest of a member or manager in a limited liability company, or interest of a beneficiary of a trust, estate or other similar entity. If none, state "None." **NOTE:** Pursuant to Section 2-154-030 of the Municipal Code of Chicago ("Municipal Code"), the City may require any such additional information from any applicant which is reasonably intended to achieve full disclosure.

Name

Business Address

Percentage Interest in the  
Disclosing Party

None

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**SECTION III -- BUSINESS RELATIONSHIPS WITH CITY ELECTED OFFICIALS**

Has the Disclosing Party had a "business relationship," as defined in Chapter 2-156 of the Municipal Code, with any City elected official in the 12 months before the date this EDS is signed?

Yes

No

If yes, please identify below the name(s) of such City elected official(s) and describe such relationship(s):

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**SECTION IV -- DISCLOSURE OF SUBCONTRACTORS AND OTHER RETAINED PARTIES**

The Disclosing Party must disclose the name and business address of each subcontractor, attorney, lobbyist, accountant, consultant and any other person or entity whom the Disclosing Party has retained or expects to retain in connection with the Matter, as well as the nature of the relationship, and the total amount of the fees paid or estimated to

be paid. The Disclosing Party is not required to disclose employees who are paid solely through the Disclosing Party's regular payroll.

“Lobbyist” means any person or entity who undertakes to influence any legislative or administrative action on behalf of any person or entity other than: (1) a not-for-profit entity, on an unpaid basis, or (2) himself. “Lobbyist” also means any person or entity any part of whose duties as an employee of another includes undertaking to influence any legislative or administrative action.

If the Disclosing Party is uncertain whether a disclosure is required under this Section, the Disclosing Party must either ask the City whether disclosure is required or make the disclosure.

Name (indicate whether retained or anticipated to be retained)	Business Address	Relationship to Disclosing Party (subcontractor, attorney, lobbyist, etc.)	Fees (indicate whether paid or estimated)

(Add sheets if necessary)

Check here if the Disclosing party has not retained, nor expects to retain, any such persons or entities.

**SECTION V -- CERTIFICATIONS**

**A. COURT-ORDERED CHILD SUPPORT COMPLIANCE**

Under Municipal Code Section 2-92-415, substantial owners of business entities that contract with the City must remain in compliance with their child support obligations throughout the term of the contract.

Has any person who directly or indirectly owns 10% or more of the Disclosing Party been declared in arrearage on any child support obligations by any Illinois court of competent jurisdiction?

Yes       No       No person owns 10% or more of the Disclosing Party.

If “Yes,” has the person entered into a court-approved agreement for payment of all support owed and is the person in compliance with that agreement?

Yes       No

B. FURTHER CERTIFICATIONS

1. The Disclosing Party and, if the Disclosing Party is a legal entity, all of those persons or entities identified in Section II.B.1. of this EDS:
  - a. are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from any transactions by any federal, state or local unit of government;
  - b. have not, within a five-year period preceding the date of this EDS, been convicted of a criminal offense, adjudged guilty, or had a civil judgment rendered against them in connection with: obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; a violation of federal or state antitrust statutes; fraud; embezzlement; theft; forgery; bribery; falsification or destruction of records; making false statements; or receiving stolen property;
  - c. are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in clause B.1.b. of this Section V;
  - d. have not, within a five-year period preceding the date of this EDS, had one or more public transactions (federal, state or local) terminated for cause or default; and
  - e. have not, within a five-year period preceding the date of this EDS, been convicted, adjudged guilty, or found liable in a civil proceeding, or in any criminal or civil action, including actions concerning environmental violations, instituted by the City or by the federal government, any state, or any other unit of local government.
  
2. The certifications in subparts 2, 3 and 4 concern:
  - the Disclosing Party;
  
  - any "Applicable Party" (meaning any party participating in the performance of the Matter, including but not limited to any persons or legal entities disclosed under Section IV, "Disclosure of Subcontractors and Other Retained Parties");
  
  - any "Affiliated Entity" (meaning a person or entity that, directly or indirectly: controls the Disclosing Party, is controlled by the Disclosing Party, or is, with the Disclosing Party, under common control of another person or entity. Indicia of control include, without limitation: interlocking management or ownership; identity of interests among family members, shared facilities and equipment; common use of employees; or organization of a business entity following the ineligibility of a business entity to do business with federal or state or local government, including the City, using substantially the same management, ownership, or



principals as the ineligible entity); with respect to Applicable Parties, the term Affiliated Entity means a person or entity that directly or indirectly controls the Applicable Party, is controlled by it, or, with the Applicable Party, is under common control of another person or entity;

- any responsible official of the Disclosing Party, any Applicable Party or any Affiliated Entity or any other official, agent or employee of the Disclosing Party, any Applicable Party or any Affiliated Entity, acting pursuant to the direction or authorization of a responsible official of the Disclosing Party, any Applicable Party or any Affiliated Entity (collectively "Agents").

Neither the Disclosing Party, nor any Applicable Party, nor any Affiliated Entity of either the Disclosing Party or any Applicable Party nor any Agents have, during the five years before the date this EDS is signed, or, with respect to an Applicable Party, an Affiliated Entity, or an Affiliated Entity of an Applicable Party during the five years before the date of such Applicable Party's or Affiliated Entity's contract or engagement in connection with the Matter:

- a. bribed or attempted to bribe, or been convicted or adjudged guilty of bribery or attempting to bribe, a public officer or employee of the City, the State of Illinois, or any agency of the federal government or of any state or local government in the United States of America, in that officer's or employee's official capacity;
  - b. agreed or colluded with other bidders or prospective bidders, or been a party to any such agreement, or been convicted or adjudged guilty of agreement or collusion among bidders or prospective bidders, in restraint of freedom of competition by agreement to bid a fixed price or otherwise; or
  - c. made an admission of such conduct described in a. or b. above that is a matter of record, but have not been prosecuted for such conduct; or
  - d. violated the provisions of Municipal Code Section 2-92-610 (Living Wage Ordinance).
3. Neither the Disclosing Party, Affiliated Entity or Applicable Party, or any of their employees, officials, agents or partners, is barred from contracting with any unit of state or local government as a result of engaging in or being convicted of (1) bid-rigging in violation of 720 ILCS 5/33E-3; (2) bid-rotating in violation of 720 ILCS 5/33E-4; or (3) any similar offense of any state or of the United States of America that contains the same elements as the offense of bid-rigging or bid-rotating.
  4. Neither the Disclosing Party nor any Affiliated Entity is listed on any of the following lists maintained by the Office of Foreign Assets Control of the U.S. Department of the Treasury or the Bureau of Industry and Security of the U.S. Department of Commerce or their successors: the Specially Designated Nationals List, the Denied Persons List, the Unverified List, the Entity List and the Debarred List.
  5. The Disclosing Party understands and shall comply with (1) the applicable requirements of the Governmental Ethics Ordinance of the City, Title 2, Chapter 2-156 of the Municipal Code; and (2) all the applicable provisions of Chapter

2-56 of the Municipal Code (Office of the Inspector General).

6. If the Disclosing Party is unable to certify to any of the above statements in this Part B (Further Certifications), the Disclosing Party must explain below:

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If the letters "NA," the word "None," or no response appears on the lines above, it will be conclusively presumed that the Disclosing Party certified to the above statements.

### C. CERTIFICATION OF STATUS AS FINANCIAL INSTITUTION

For purposes of this Part C, under Municipal Code Section 2-32-455(b), the term "financial institution" means a bank, savings and loan association, thrift, credit union, mortgage banker, mortgage broker, trust company, savings bank, investment bank, securities broker, municipal securities broker, securities dealer, municipal securities dealer, securities underwriter, municipal securities underwriter, investment trust, venture capital company, bank holding company, financial services holding company, or any licensee under the Consumer Installment Loan Act, the Sales Finance Agency Act, or the Residential Mortgage Licensing Act. However, "financial institution" specifically shall not include any entity whose predominant business is the providing of tax deferred, defined contribution, pension plans to public employees in accordance with Sections 403(b) and 457 of the Internal Revenue Code. (Additional definitions may be found in Municipal Code Section 2-32-455(b).)

#### 1. CERTIFICATION

The Disclosing Party certifies that the Disclosing Party (check one)

is  is not

a "financial institution" as defined in Section 2-32-455(b) of the Municipal Code.

2. If the Disclosing Party IS a financial institution, then the Disclosing Party pledges:

"We are not and will not become a predatory lender as defined in Chapter 2-32 of the Municipal Code. We further pledge that none of our affiliates is, and none of them will become, a predatory lender as defined in Chapter 2-32 of the Municipal Code. We understand that becoming a predatory lender or becoming an affiliate of a predatory lender may result in the loss of the privilege of doing business with the City."

If the Disclosing Party is unable to make this pledge because it or any of its affiliates (as defined in Section 2-32-455(b) of the Municipal Code) is a predatory lender within the meaning of Chapter 2-32 of the Municipal Code, explain here (attach additional pages if necessary):

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If the letters "NA," the word "None," or no response appears on the lines above, it will be conclusively presumed that the Disclosing Party certified to the above statements.

**D. CERTIFICATION REGARDING INTEREST IN CITY BUSINESS**

Any words or terms that are defined in Chapter 2-156 of the Municipal Code have the same meanings when used in this Part D.

1. In accordance with Section 2-156-110 of the Municipal Code: Does any official or employee of the City have a financial interest in his or her own name or in the name of any other person or entity in the Matter?

Yes  No

**NOTE:** If you checked "Yes" to Item D.1., proceed to Items D.2. and D.3. If you checked "No" to Item D.1., proceed to Part E.

2. Unless sold pursuant to a process of competitive bidding, or otherwise permitted, no City elected official or employee shall have a financial interest in his or her own name or in the name of any other person or entity in the purchase of any property that (i) belongs to the City, or (ii) is sold for taxes or assessments, or (iii) is sold by virtue of legal process at the suit of the City (collectively, "City Property Sale"). Compensation for property taken pursuant to the City's eminent domain power does not constitute a financial interest within the meaning of this Part D.

Does the Matter involve a City Property Sale?

Yes  No

3. If you checked "Yes" to Item D.1., provide the names and business addresses of the City officials or employees having such interest and identify the nature of such interest:

Name	Business Address	Nature of Interest
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4. The Disclosing Party further certifies that no prohibited financial interest in the Matter will be acquired by any City

official or employee.

**E. CERTIFICATION REGARDING SLAVERY ERA BUSINESS**

The Disclosing Party has searched any and all records of the Disclosing Party and any and all predecessor entities for records of investments or profits from slavery, the slave industry, or slaveholder insurance policies from the slavery era (including insurance policies issued to slaveholders that provided coverage for damage to or injury or death of their slaves) and has disclosed in this EDS any and all such records to the City. In addition, the Disclosing Party must disclose the names of any and all slaves or slaveholders described in those records. Failure to comply with these disclosure requirements may make the Matter to which this EDS pertains voidable by the City.

Please check either 1. or 2. below. If the Disclosing Party checks 2., the Disclosing Party must disclose below or in an attachment to this EDS all requisite information as set forth in that paragraph 2.

  X   1. The Disclosing Party verifies that (a) the Disclosing Party has searched any and all records of the Disclosing Party and any and all predecessor entities for records of investments or profits from slavery, the slave industry, or slaveholder insurance policies, and (b) the Disclosing Party has found no records of investments or profits from slavery, the slave industry, or slaveholder insurance policies and no records of names of any slaves or slaveholders.

       2. The Disclosing Party verifies that, as a result of conducting the search in step 1(a) above, the Disclosing Party has found records relating to investments or profits from slavery, the slave industry, or slaveholder insurance policies and/or the names of any slaves or slaveholders. The Disclosing Party verifies that the following constitutes full disclosure of all such records:

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**SECTION VI – CERTIFICATIONS FOR FEDERALLY-FUNDED MATTERS**

**NOTE:** If the Matter is federally funded, complete this Section VI. If the Matter is not federally funded, proceed to Section VII.

**A. CERTIFICATION REGARDING LOBBYING**

1. List below the names of all persons or entities registered under the federal Lobbying Disclosure Act of 1995 who have made lobbying contacts on behalf of the Disclosing Party with respect to the Matter: (Begin list here, add sheets as necessary):

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(If no explanation appears or begins on the lines above, or if the letters "NA" or if the word "None" appear, it will be conclusively presumed that the Disclosing Party means that NO persons or entities registered under the Lobbying Disclosure Act of 1995 have made lobbying contacts on behalf of the Disclosing Party with respect to the Matter.)

2. The Disclosing Party has not spent and will not expend any federally appropriated funds to pay any person or entity listed in Paragraph A.1. above for his or her lobbying activities or to pay any person or entity to influence or attempt to influence an officer or employee of any agency, as defined by applicable federal law, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress, in connection with the award of any federally funded contract, making any federally funded grant or loan, entering into any cooperative agreement, or to extend, continue, renew, amend, or modify any federally funded contract, grant, loan, or cooperative agreement.
3. The Disclosing Party will submit an updated certification at the end of each calendar quarter in which there occurs any event that materially affects the accuracy of the statements and information set forth in paragraphs A.1. and A.2. above.

If the Matter is federally funded and any funds other than federally appropriated funds have been or will be paid to any person or entity for influencing or attempting to influence an officer or employee of any agency (as defined by applicable federal law), a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the Matter, the Disclosing Party must complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. The form may be obtained online from the federal Office of Management and Budget (OMB) web site at <http://www.whitehouse.gov/omb/grants/sfillin.pdf>, linked on the page [http://www.whitehouse.gov/omb/grants/grants\\_forms.html](http://www.whitehouse.gov/omb/grants/grants_forms.html).

4. The Disclosing Party certifies that either: (i) it is not an organization described in section 501(c)(4) of the Internal Revenue Code of 1986; or (ii) it is an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 but has not engaged and will not engage in "Lobbying Activities".
5. If the Disclosing Party is the Applicant, the Disclosing Party must obtain certifications equal in form and substance to paragraphs A.1. through A.4. above from all subcontractors before it awards any subcontract and the Disclosing Party must maintain all such subcontractors' certifications for the duration of the Matter and must make such certifications promptly available to the City upon request.

#### B. CERTIFICATION REGARDING EQUAL EMPLOYMENT OPPORTUNITY

If the Matter is federally funded, federal regulations require the Applicant and all proposed subcontractors to submit the following information with their bids or in writing at the outset of negotiations.

Is the Disclosing Party the Applicant?

Yes

No

If "Yes," answer the three questions below:

1. Have you developed and do you have on file affirmative action programs pursuant to applicable federal regulations? (See 41 CFR Part 60-2.)

Yes

No

2. Have you filed with the Joint Reporting Committee, the Director of the Office of Federal Contract Compliance Programs, or the Equal Employment Opportunity Commission all reports due under the applicable filing requirements?

Yes

No

3. Have you participated in any previous contracts or subcontracts subject to the equal opportunity clause?

Yes

No

If you checked "No" to question 1. or 2. above, please provide an explanation:

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## **SECTION VII -- ACKNOWLEDGMENTS, CONTRACT INCORPORATION, COMPLIANCE, PENALTIES, DISCLOSURE**

The Disclosing Party understands and agrees that:

- A. By completing and filing this EDS, the Disclosing Party acknowledges and agrees, on behalf of itself and the persons or entities named in this EDS, that the City may investigate the creditworthiness of some or all of the persons or entities named in this EDS.
- B. The certifications, disclosures, and acknowledgments contained in this EDS will become part of any contract or other agreement between the Applicant and the City in connection with the Matter, whether procurement, City assistance, or other City action, and are material inducements to the City's execution of any contract or taking other action with respect to the Matter. The Disclosing Party understands that it must comply with all statutes, ordinances, and regulations on which this EDS is based.
- C. The City's Governmental Ethics and Campaign Financing Ordinances, Chapters 2-156 and 2-164 of the Municipal Code, impose certain duties and obligations on persons or entities seeking City contracts, work, business, or transactions. The full text of these ordinances and a training program is available on line at [www.cityofchicago.org/Ethics](http://www.cityofchicago.org/Ethics), and may also be obtained from the City's Board of Ethics, 740 N. Sedgwick St., Suite 500, Chicago, IL 60610, (312) 744-9660. The Disclosing Party must comply fully with the applicable

ordinances.

- D. If the City determines that any information provided in this EDS is false, incomplete or inaccurate, any contract or other agreement in connection with which it is submitted may be rescinded or be void or voidable, and the City may pursue any remedies under the contract or agreement (if not rescinded, void or voidable), at law, or in equity, including terminating the Disclosing Party's participation in the Matter and/or declining to allow the Disclosing Party to participate in other transactions with the City. Remedies at law for a false statement of material fact may include incarceration and an award to the City of treble damages.
- E. It is the City's policy to make this document available to the public on its Internet site and/or upon request. Some or all of the information provided on this EDS and any attachments to this EDS may be made available to the public on the Internet, in response to a Freedom of Information Act request, or otherwise. By completing and signing this EDS, the Disclosing Party waives and releases any possible rights or claims which it may have against the City in connection with the public release of information contained in this EDS and also authorizes the City to verify the accuracy of any information submitted in this EDS.
- F. The information provided in this EDS must be kept current. In the event of changes, the Disclosing Party must supplement this EDS up to the time the City takes action on the Matter. If the Matter is a contract being handled by the City's Department of Procurement Services, the Disclosing Party must update this EDS as the contract requires.

The Disclosing Party represents and warrants that:

- G. The Disclosing Party has not withheld or reserved any disclosures as to economic interests in the Disclosing Party, or as to the Matter, or any information, data or plan as to the intended use or purpose for which the Applicant seeks City Council or other City agency action.

For purposes of the certifications in H.1. and H.2. below, the term "affiliate" means any person or entity that, directly or indirectly: controls the Disclosing Party, is controlled by the Disclosing Party, or is, with the Disclosing Party, under common control of another person or entity. Indicia of control include, without limitation: interlocking management or ownership; identity of interests among family members; shared facilities and equipment; common use of employees; or organization of a business entity following the ineligibility of a business entity to do business with the federal government or a state or local government, including the City, using substantially the same management, ownership, or principals as the ineligible entity.

- H.1. The Disclosing Party is not delinquent in the payment of any tax administered by the Illinois Department of Revenue, nor are the Disclosing Party or its affiliates delinquent in paying any fine, fee, tax or other charge owed to the City. This includes, but is not limited to, all water charges, sewer charges, license fees, parking tickets, property taxes or sales taxes.
- H.2. If the Disclosing Party is the Applicant, the Disclosing Party and its affiliates will not use, nor permit their subcontractors to use, any facility on the U.S. EPA's List of Violating Facilities in connection with the Matter for the duration of time that such facility remains on the list.
- H.3. If the Disclosing Party is the Applicant, the Disclosing Party will obtain from any contractors/subcontractors hired or to be hired in connection with the Matter certifications equal in form and substance to those in H.1. and H.2.

above and will not, without the prior written consent of the City, use any such contractor/subcontractor that does not provide such certifications or that the Disclosing Party has reason to believe has not provided or cannot provide truthful certifications.

NOTE: If the Disclosing Party cannot certify as to any of the items in H.1., H.2. or H.3. above, an explanatory statement must be attached to this EDS.

**CERTIFICATION**

Under penalty of perjury, the person signing below: (1) warrants that he/she is authorized to execute this EDS on behalf of the Disclosing Party, and (2) warrants that all certifications and statements contained in this EDS are true, accurate and complete as of the date furnished to the City.

UChicago Argonne LLC  
(Print or type name of Disclosing Party)

Date: 9/05/08

By: [Signature]  
(sign here)

Richard E. Combs  
(Print or type name of person signing)

Manager, Sponsored Research Office  
(Print or type title of person signing)

Signed and sworn to before me on (date) 9/05/08, by Richard E Combs, at UChicago Argonne LLC

DuPage County, Illinois (state).

Sandra Kalina Notary Public.

Commission expires: 8/13/2012





**CITY OF CHICAGO  
ECONOMIC DISCLOSURE STATEMENT  
AND AFFIDAVIT**

**SECTION I -- GENERAL INFORMATION**

A. Legal name of Disclosing Party submitting this EDS. Include d/b/a/ if applicable:

The Univeristy of Chicago

**Check ONE of the following three boxes:**

Indicate whether Disclosing Party submitting this EDS is:

1.  the Applicant

OR

2.  a legal entity holding a direct or indirect interest in the Applicant. State the legal name of the Applicant in which Disclosing Party holds an interest: UChicago Argonne, LLC

OR

3.  a specified legal entity with a right of control (see Section II.B.1.b.) State the legal name of the entity in which Disclosing Party holds a right of control: \_\_\_\_\_

B. Business address of Disclosing Party: 5801 South Ellis Avenue  
Chicago, IL 60637

C. Telephone: 773-702-5799 Fax: 773-702-0934 Email: gmckeown@uchicago.edu

D. Name of contact person: Glenn McKeown

E. Federal Employer Identification No. (if you have one): 36-2177139

F. Brief description of contract, transaction or other undertaking (referred to below as the "Matter") to which this EDS pertains. (Include project number and location of property, if applicable):  
Integrated Public Health Planning and Response to assist the City ability to prepare for responses to a variety of natural disease outbreaks, bioterrorism, and other outbreaks.

G. Which City agency or department is requesting this EDS? The Chicago Department of Public Health.

If the Matter is a contract being handled by the City's Department of Procurement Services, please complete the following:

Specification # 62420 and Contract # 17429

**SECTION II -- DISCLOSURE OF OWNERSHIP INTERESTS**

**A. NATURE OF DISCLOSING PARTY**

1. Indicate the nature of the Disclosing Party:

- Person
- Publicly registered business corporation
- Privately held business corporation
- Sole proprietorship
- General partnership\*
- Limited partnership\*
- Trust
- Limited liability company\*
- Limited liability partnership\*
- Joint venture\*
- Not-for-profit corporation  
(Is the not-for-profit corporation also a 501(c)(3))?
- Yes                       No
- Other (please specify)

\* Note B.1.b. below.

2. For legal entities, the state (or foreign country) of incorporation or organization, if applicable:

State of Illinois

3. For legal entities not organized in the State of Illinois: Has the organization registered to do business in the State of Illinois as a foreign entity?

- Yes                       No                       N/A

**B. IF THE DISCLOSING PARTY IS A LEGAL ENTITY:**

1.a. List below the full names and titles of all executive officers and all directors of the entity. For not-for-profit corporations, also list below all members, if any, which are legal entities. If there are no such members, write "no members." For trusts, estates or other similar entities, list below the legal titleholder(s).

Name	Title
<u>[Please see Attachment A]</u>	
_____	
_____	
_____	

1.b. If you checked "General partnership," "Limited partnership," "Limited liability company," "Limited liability partnership" or "Joint venture" in response to Item A.1. above (Nature of Disclosing Party), list below the name and title of each general partner, managing member, manager or any other person or entity that controls the day-to-day management of the Disclosing Party. NOTE: Each legal entity listed below must submit an EDS on its own behalf.

Name

Title

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2. Please provide the following information concerning each person or entity having a direct or indirect beneficial interest (including ownership) in excess of 7.5% of the Disclosing Party. Examples of such an interest include shares in a corporation, partnership interest in a partnership or joint venture, interest of a member or manager in a limited liability company, or interest of a beneficiary of a trust, estate or other similar entity. If none, state "None." **NOTE:** Pursuant to Section 2-154-030 of the Municipal Code of Chicago ("Municipal Code"), the City may require any such additional information from any applicant which is reasonably intended to achieve full disclosure.

Name

Business Address

Percentage Interest in the  
Disclosing Party

None

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**SECTION III -- BUSINESS RELATIONSHIPS WITH CITY ELECTED OFFICIALS**

Has the Disclosing Party had a "business relationship," as defined in Chapter 2-156 of the Municipal Code, with any City elected official in the 12 months before the date this EDS is signed?

Yes

No

If yes, please identify below the name(s) of such City elected official(s) and describe such relationship(s):

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**SECTION IV -- DISCLOSURE OF SUBCONTRACTORS AND OTHER RETAINED PARTIES**

The Disclosing Party must disclose the name and business address of each subcontractor, attorney, lobbyist, accountant, consultant and any other person or entity whom the Disclosing Party has retained or expects to retain in connection with the Matter, as well as the nature of the relationship, and the total amount of the fees paid or estimated to

be paid. The Disclosing Party is not required to disclose employees who are paid solely through the Disclosing Party's regular payroll.

“Lobbyist” means any person or entity who undertakes to influence any legislative or administrative action on behalf of any person or entity other than: (1) a not-for-profit entity, on an unpaid basis, or (2) himself. “Lobbyist” also means any person or entity any part of whose duties as an employee of another includes undertaking to influence any legislative or administrative action.

If the Disclosing Party is uncertain whether a disclosure is required under this Section, the Disclosing Party must either ask the City whether disclosure is required or make the disclosure.

Name (indicate whether retained or anticipated to be retained)	Business Address	Relationship to Disclosing Party (subcontractor, attorney, lobbyist, etc.)	Fees (indicate whether paid or estimated)
None			

(Add sheets if necessary)

Check here if the Disclosing party has not retained, nor expects to retain, any such persons or entities.

**SECTION V -- CERTIFICATIONS**

**A. COURT-ORDERED CHILD SUPPORT COMPLIANCE**

Under Municipal Code Section 2-92-415, substantial owners of business entities that contract with the City must remain in compliance with their child support obligations throughout the term of the contract.

Has any person who directly or indirectly owns 10% or more of the Disclosing Party been declared in arrearage on any child support obligations by any Illinois court of competent jurisdiction?

Yes       No       No person owns 10% or more of the Disclosing Party.

If “Yes,” has the person entered into a court-approved agreement for payment of all support owed and is the person in compliance with that agreement?

Yes       No

**B. FURTHER CERTIFICATIONS**

1. The Disclosing Party and, if the Disclosing Party is a legal entity, all of those persons or entities identified in Section II.B.1. of this EDS:
  - a. are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from any transactions by any federal, state or local unit of government;
  - b. have not, within a five-year period preceding the date of this EDS, been convicted of a criminal offense, adjudged guilty, or had a civil judgment rendered against them in connection with: obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; a violation of federal or state antitrust statutes; fraud; embezzlement; theft; forgery; bribery; falsification or destruction of records; making false statements; or receiving stolen property;
  - c. are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in clause B.1.b. of this Section V;
  - d. have not, within a five-year period preceding the date of this EDS, had one or more public transactions (federal, state or local) terminated for cause or default; and
  - e. have not, within a five-year period preceding the date of this EDS, been convicted, adjudged guilty, or found liable in a civil proceeding, or in any criminal or civil action, including actions concerning environmental violations, instituted by the City or by the federal government, any state, or any other unit of local government.
  
2. The certifications in subparts 2, 3 and 4 concern:
  - the Disclosing Party;
  
  - any "Applicable Party" (meaning any party participating in the performance of the Matter, including but not limited to any persons or legal entities disclosed under Section IV, "Disclosure of Subcontractors and Other Retained Parties");
  
  - any "Affiliated Entity" (meaning a person or entity that, directly or indirectly: controls the Disclosing Party, is controlled by the Disclosing Party, or is, with the Disclosing Party, under common control of another person or entity. Indicia of control include, without limitation: interlocking management or ownership; identity of interests among family members, shared facilities and equipment; common use of employees; or organization of a business entity following the ineligibility of a business entity to do business with federal or state or local government, including the City, using substantially the same management, ownership, or principals as the ineligible entity); with respect to Applicable Parties, the term Affiliated Entity means a person or entity that directly or indirectly controls the Applicable Party, is controlled by it, or, with the

Applicable Party, is under common control of another person or entity;

- any responsible official of the Disclosing Party, any Applicable Party or any Affiliated Entity or any other official, agent or employee of the Disclosing Party, any Applicable Party or any Affiliated Entity, acting pursuant to the direction or authorization of a responsible official of the Disclosing Party, any Applicable Party or any Affiliated Entity (collectively "Agents").

Neither the Disclosing Party, nor any Applicable Party, nor any Affiliated Entity of either the Disclosing Party or any Applicable Party nor any Agents have, during the five years before the date this EDS is signed, or, with respect to an Applicable Party, an Affiliated Entity, or an Affiliated Entity of an Applicable Party during the five years before the date of such Applicable Party's or Affiliated Entity's contract or engagement in connection with the Matter:

- a. bribed or attempted to bribe, or been convicted or adjudged guilty of bribery or attempting to bribe, a public officer or employee of the City, the State of Illinois, or any agency of the federal government or of any state or local government in the United States of America, in that officer's or employee's official capacity;
  - b. agreed or colluded with other bidders or prospective bidders, or been a party to any such agreement, or been convicted or adjudged guilty of agreement or collusion among bidders or prospective bidders, in restraint of freedom of competition by agreement to bid a fixed price or otherwise; or
  - c. made an admission of such conduct described in a. or b. above that is a matter of record, but have not been prosecuted for such conduct; or
  - d. violated the provisions of Municipal Code Section 2-92-610 (Living Wage Ordinance).
3. Neither the Disclosing Party, Affiliated Entity or Applicable Party, or any of their employees, officials, agents or partners, is barred from contracting with any unit of state or local government as a result of engaging in or being convicted of (1) bid-rigging in violation of 720 ILCS 5/33E-3; (2) bid-rotating in violation of 720 ILCS 5/33E-4; or (3) any similar offense of any state or of the United States of America that contains the same elements as the offense of bid-rigging or bid-rotating.
  4. Neither the Disclosing Party nor any Affiliated Entity is listed on any of the following lists maintained by the Office of Foreign Assets Control of the U.S. Department of the Treasury or the Bureau of Industry and Security of the U.S. Department of Commerce or their successors: the Specially Designated Nationals List, the Denied Persons List, the Unverified List, the Entity List and the Debarred List.
  5. The Disclosing Party understands and shall comply with (1) the applicable requirements of the Governmental Ethics Ordinance of the City, Title 2, Chapter 2-156 of the Municipal Code; and (2) all the applicable provisions of Chapter 2-56 of the Municipal Code (Office of the Inspector General).

6. If the Disclosing Party is unable to certify to any of the above statements in this Part B (Further Certifications), the Disclosing Party must explain below:

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If the letters "NA," the word "None," or no response appears on the lines above, it will be conclusively presumed that the Disclosing Party certified to the above statements.

**C. CERTIFICATION OF STATUS AS FINANCIAL INSTITUTION**

For purposes of this Part C, under Municipal Code Section 2-32-455(b), the term "financial institution" means a bank, savings and loan association, thrift, credit union, mortgage banker, mortgage broker, trust company, savings bank, investment bank, securities broker, municipal securities broker, securities dealer, municipal securities dealer, securities underwriter, municipal securities underwriter, investment trust, venture capital company, bank holding company, financial services holding company, or any licensee under the Consumer Installment Loan Act, the Sales Finance Agency Act, or the Residential Mortgage Licensing Act. However, "financial institution" specifically shall not include any entity whose predominant business is the providing of tax deferred, defined contribution, pension plans to public employees in accordance with Sections 403(b) and 457 of the Internal Revenue Code. (Additional definitions may be found in Municipal Code Section 2-32-455(b).)

1. CERTIFICATION

The Disclosing Party certifies that the Disclosing Party (check one)

is  is not

a "financial institution" as defined in Section 2-32-455(b) of the Municipal Code.

2. If the Disclosing Party IS a financial institution, then the Disclosing Party pledges:

"We are not and will not become a predatory lender as defined in Chapter 2-32 of the Municipal Code. We further pledge that none of our affiliates is, and none of them will become, a predatory lender as defined in Chapter 2-32 of the Municipal Code. We understand that becoming a predatory lender or becoming an affiliate of a predatory lender may result in the loss of the privilege of doing business with the City."

If the Disclosing Party is unable to make this pledge because it or any of its affiliates (as defined in Section 2-32-455(b) of the Municipal Code) is a predatory lender within the meaning of Chapter 2-32 of the Municipal Code, explain here (attach additional pages if necessary):

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If the letters "NA," the word "None," or no response appears on the lines above, it will be conclusively presumed that the Disclosing Party certified to the above statements.

**D. CERTIFICATION REGARDING INTEREST IN CITY BUSINESS**

Any words or terms that are defined in Chapter 2-156 of the Municipal Code have the same meanings when used in this Part D.

1. In accordance with Section 2-156-110 of the Municipal Code: Does any official or employee of the City have a financial interest in his or her own name or in the name of any other person or entity in the Matter?

Yes  No

**NOTE:** If you checked "Yes" to Item D.1., proceed to Items D.2. and D.3. If you checked "No" to Item D.1., proceed to Part E.

2. Unless sold pursuant to a process of competitive bidding, or otherwise permitted, no City elected official or employee shall have a financial interest in his or her own name or in the name of any other person or entity in the purchase of any property that (i) belongs to the City, or (ii) is sold for taxes or assessments, or (iii) is sold by virtue of legal process at the suit of the City (collectively, "City Property Sale"). Compensation for property taken pursuant to the City's eminent domain power does not constitute a financial interest within the meaning of this Part D.

Does the Matter involve a City Property Sale?

Yes  No

3. If you checked "Yes" to Item D.1., provide the names and business addresses of the City officials or employees having such interest and identify the nature of such interest:

Name	Business Address	Nature of Interest
<hr/>		
<hr/>		
<hr/>		

4. The Disclosing Party further certifies that no prohibited financial interest in the Matter will be acquired by any City official or employee.



E. CERTIFICATION REGARDING SLAVERY ERA BUSINESS

The Disclosing Party has searched any and all records of the Disclosing Party and any and all predecessor entities for records of investments or profits from slavery, the slave industry, or slaveholder insurance policies from the slavery era (including insurance policies issued to slaveholders that provided coverage for damage to or injury or death of their slaves) and has disclosed in this EDS any and all such records to the City. In addition, the Disclosing Party must disclose the names of any and all slaves or slaveholders described in those records. Failure to comply with these disclosure requirements may make the Matter to which this EDS pertains voidable by the City.

Please check either 1. or 2. below. If the Disclosing Party checks 2., the Disclosing Party must disclose below or in an attachment to this EDS all requisite information as set forth in that paragraph 2.

  X   1. The Disclosing Party verifies that (a) the Disclosing Party has searched any and all records of the Disclosing Party and any and all predecessor entities for records of investments or profits from slavery, the slave industry, or slaveholder insurance policies, and (b) the Disclosing Party has found no records of investments or profits from slavery, the slave industry, or slaveholder insurance policies and no records of names of any slaves or slaveholders.

       2. The Disclosing Party verifies that, as a result of conducting the search in step 1(a) above, the Disclosing Party has found records relating to investments or profits from slavery, the slave industry, or slaveholder insurance policies and/or the names of any slaves or slaveholders. The Disclosing Party verifies that the following constitutes full disclosure of all such records:

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**SECTION VI -- CERTIFICATIONS FOR FEDERALLY-FUNDED MATTERS**

**NOTE:** If the Matter is federally funded, complete this Section VI. If the Matter is not federally funded, proceed to Section VII.

A. CERTIFICATION REGARDING LOBBYING

1. List below the names of all persons or entities registered under the federal Lobbying Disclosure Act of 1995 who have made lobbying contacts on behalf of the Disclosing Party with respect to the Matter: (Begin list here, add sheets as necessary):

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(If no explanation appears or begins on the lines above, or if the letters "NA" or if the word "None" appear, it will be conclusively presumed that the Disclosing Party means that NO persons or entities registered under the Lobbying Disclosure Act of 1995 have made lobbying contacts on behalf of the Disclosing Party with respect to the Matter.)

2. The Disclosing Party has not spent and will not expend any federally appropriated funds to pay any person or entity listed in Paragraph A.1. above for his or her lobbying activities or to pay any person or entity to influence or attempt to influence an officer or employee of any agency, as defined by applicable federal law, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress, in connection with the award of any federally funded contract, making any federally funded grant or loan, entering into any cooperative agreement, or to extend, continue, renew, amend, or modify any federally funded contract, grant, loan, or cooperative agreement.
3. The Disclosing Party will submit an updated certification at the end of each calendar quarter in which there occurs any event that materially affects the accuracy of the statements and information set forth in paragraphs A.1. and A.2. above.

If the Matter is federally funded and any funds other than federally appropriated funds have been or will be paid to any person or entity for influencing or attempting to influence an officer or employee of any agency (as defined by applicable federal law), a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the Matter, the Disclosing Party must complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. The form may be obtained online from the federal Office of Management and Budget (OMB) web site at <http://www.whitehouse.gov/omb/grants/sfillin.pdf>, linked on the page [http://www.whitehouse.gov/omb/grants/grants\\_forms.html](http://www.whitehouse.gov/omb/grants/grants_forms.html).

4. The Disclosing Party certifies that either: (i) it is not an organization described in section 501(c)(4) of the Internal Revenue Code of 1986; or (ii) it is an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 but has not engaged and will not engage in "Lobbying Activities".
5. If the Disclosing Party is the Applicant, the Disclosing Party must obtain certifications equal in form and substance to paragraphs A.1. through A.4. above from all subcontractors before it awards any subcontract and the Disclosing Party must maintain all such subcontractors' certifications for the duration of the Matter and must make such certifications promptly available to the City upon request.

#### B. CERTIFICATION REGARDING EQUAL EMPLOYMENT OPPORTUNITY

If the Matter is federally funded, federal regulations require the Applicant and all proposed subcontractors to submit the following information with their bids or in writing at the outset of negotiations.

Is the Disclosing Party the Applicant?

Yes

No

If "Yes," answer the three questions below:

1. Have you developed and do you have on file affirmative action programs pursuant to applicable federal regulations? (See 41 CFR Part 60-2.)

Yes  No

2. Have you filed with the Joint Reporting Committee, the Director of the Office of Federal Contract Compliance Programs, or the Equal Employment Opportunity Commission all reports due under the applicable filing requirements?

Yes  No

3. Have you participated in any previous contracts or subcontracts subject to the equal opportunity clause?

Yes  No

If you checked "No" to question 1. or 2. above, please provide an explanation:

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**SECTION VII -- ACKNOWLEDGMENTS, CONTRACT INCORPORATION, COMPLIANCE, PENALTIES, DISCLOSURE**

The Disclosing Party understands and agrees that:

- A. By completing and filing this EDS, the Disclosing Party acknowledges and agrees, on behalf of itself and the persons or entities named in this EDS, that the City may investigate the creditworthiness of some or all of the persons or entities named in this EDS.
- B. The certifications, disclosures, and acknowledgments contained in this EDS will become part of any contract or other agreement between the Applicant and the City in connection with the Matter, whether procurement, City assistance, or other City action, and are material inducements to the City's execution of any contract or taking other action with respect to the Matter. The Disclosing Party understands that it must comply with all statutes, ordinances, and regulations on which this EDS is based.
- C. The City's Governmental Ethics and Campaign Financing Ordinances, Chapters 2-156 and 2-164 of the Municipal Code, impose certain duties and obligations on persons or entities seeking City contracts, work, business, or transactions. The full text of these ordinances and a training program is available on line at [www.cityofchicago.org/Ethics](http://www.cityofchicago.org/Ethics), and may also be obtained from the City's Board of Ethics, 740 N. Sedgwick St., Suite 500, Chicago, IL 60610, (312) 744-9660. The Disclosing Party must comply fully with the applicable ordinances.

- D. If the City determines that any information provided in this EDS is false, incomplete or inaccurate, any contract or other agreement in connection with which it is submitted may be rescinded or be void or voidable, and the City may pursue any remedies under the contract or agreement (if not rescinded, void or voidable), at law, or in equity, including terminating the Disclosing Party's participation in the Matter and/or declining to allow the Disclosing Party to participate in other transactions with the City. Remedies at law for a false statement of material fact may include incarceration and an award to the City of treble damages.
- E. It is the City's policy to make this document available to the public on its Internet site and/or upon request. Some or all of the information provided on this EDS and any attachments to this EDS may be made available to the public on the Internet, in response to a Freedom of Information Act request, or otherwise. By completing and signing this EDS, the Disclosing Party waives and releases any possible rights or claims which it may have against the City in connection with the public release of information contained in this EDS and also authorizes the City to verify the accuracy of any information submitted in this EDS.
- F. The information provided in this EDS must be kept current. In the event of changes, the Disclosing Party must supplement this EDS up to the time the City takes action on the Matter. If the Matter is a contract being handled by the City's Department of Procurement Services, the Disclosing Party must update this EDS as the contract requires.

The Disclosing Party represents and warrants that:

- G. The Disclosing Party has not withheld or reserved any disclosures as to economic interests in the Disclosing Party, or as to the Matter, or any information, data or plan as to the intended use or purpose for which the Applicant seeks City Council or other City agency action.

For purposes of the certifications in H.1. and H.2. below, the term "affiliate" means any person or entity that, directly or indirectly: controls the Disclosing Party, is controlled by the Disclosing Party, or is, with the Disclosing Party, under common control of another person or entity. Indicia of control include, without limitation: interlocking management or ownership; identity of interests among family members; shared facilities and equipment; common use of employees, or organization of a business entity following the ineligibility of a business entity to do business with the federal government or a state or local government, including the City, using substantially the same management, ownership, or principals as the ineligible entity.

- H.1. The Disclosing Party is not delinquent in the payment of any tax administered by the Illinois Department of Revenue, nor are the Disclosing Party or its affiliates delinquent in paying any fine, fee, tax or other charge owed to the City. This includes, but is not limited to, all water charges, sewer charges, license fees, parking tickets, property taxes or sales taxes.
- H.2. If the Disclosing Party is the Applicant, the Disclosing Party and its affiliates will not use, nor permit their subcontractors to use, any facility on the U.S. EPA's List of Violating Facilities in connection with the Matter for the duration of time that such facility remains on the list.
- H.3. If the Disclosing Party is the Applicant, the Disclosing Party will obtain from any contractors/subcontractors hired or to be hired in connection with the Matter certifications equal in form and substance to those in H.1. and H.2. above and will not, without the prior written consent of the City, use any such contractor/subcontractor that does not provide such certifications or that the Disclosing Party has reason to believe has not provided or cannot provide truthful certifications.

NOTE: If the Disclosing Party cannot certify as to any of the items in H.1., H.2. or H.3. above, an explanatory statement must be attached to this EDS.

**CERTIFICATION**

Under penalty of perjury, the person signing below: (1) warrants that he/she is authorized to execute this EDS on behalf of the Disclosing Party, and (2) warrants that all certifications and statements contained in this EDS are true, accurate and complete as of the date furnished to the City.

The University of Chicago  
(Print or type name of Disclosing Party)

Date: 8/29/08

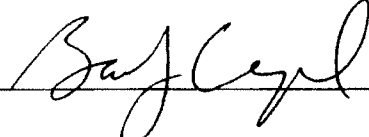
By:   
(sign here)

Glenn McKeown  
(Print or type name of person signing)

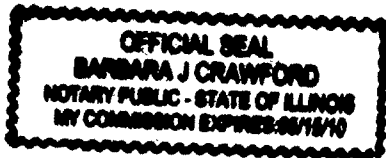
Associate General Counsel  
(Print or type title of person signing)

Signed and sworn to before me on (date) 8/29/08, by Glenn McKeown, at Chicago

Cook County, Illinois (state).

 Notary Public.

Commission expires: 5/15/10.



## **Attachment A**

# **OFFICERS AND TRUSTEES OF THE UNIVERSITY OF CHICAGO**

### **Officers**

Robert J. Zimmer, President and Trustee of the University  
Thomas F. Rosenbaum, Provost of the University  
Nim Chinniah, Vice-President for Administration and Chief Financial Officer  
Michael C. Behnke, Vice-President and Dean of College Enrollment  
Kermit E. Daniel, Vice President for Financial Strategy and Budget (effective 9/15/08)  
David B. Fithian, Secretary of the University  
Kimberly Goff-Crews, Vice-President and Dean of Students in the University  
David A. Greene, Vice-President for Strategic Initiatives  
Beth A. Harris, Vice-President and General Counsel, Office of Legal Counsel  
Gregory A. Jackson, Vice-President and Chief Information Officer of the University  
Donald Levy, Vice-President for Research and for National Laboratories  
Ann Marie Lipinski, Vice President for Civic Engagement (effective 10/1/08)  
James L. Madara, Dean of Biological Sciences Division and the Pritzker School of Medicine, University  
Vice-President for Medical Affairs, CEO, University Medical Center  
Julie Peterson, Vice-President for Communications  
Ronald J. Schiller, Vice-President for Development and Alumni Relations  
Peter D.A. Stein, Vice-President and Chief Investment Officer

### **Board of Trustees**

Andrew M. Alper Vice-Chair of the Board	Erroll B. Davis, Jr.	Kathryn C. Gould
David G. Booth	Craig J. Duchossois	King W. Harris
Thomas A. Cole	James S. Frank	Kenneth M. Jacobs
E. David Coolidge III	Jack W. Fuller	Valerie B. Jarrett Vice-Chair of the Board
James S. Crown Chair of the Board	Rodney L. Goldstein	Karen L. Katen
Katharine P. Darrow	Mary Louise Gorno	Dennis J. Keller
	Sanford J. Grossman	

Steven A. Kersten

James M. Kilts

Michael J. Klingensmith

Michael L. Klowden

Robert W. Lane

Sherry L. Lansing

Charles A. Lewis

Peter W. May

Joseph Neubauer

Emily Nicklin

Harvey B. Plotnick

Michael P. Polsky

Thomas J. Pritzker

George A. Ranney, Jr.

John W. Rogers, Jr.

Andrew M. Rosenfield

David M. Rubenstein

Richard P. Strubel

Byron D. Trott

Marshall I. Wais, Jr.

Gregory W. Wendt

Jon Winkelried

Paula Wolff

Paul G. Yovovich

Francis T. F. Yuen

Robert J. Zimmer



**Grant Number:** 5U90TP517008-09

**Principal Investigator(s):**  
CHRISTINE KOSMOS

**Project Title:** PUBLIC HEALTH PREPAREDNESS AND RESPONSE FOR BIOTERRORISM

333 SOUTH STATE STREET, ROOM 200

CHICAGO, IL 606043972

**Budget Period:** 08/10/2008 – 08/09/2009

**Project Period:** 08/31/2005 – 08/09/2010

Dear Business Official:

The Centers for Disease Control hereby awards a grant in the amount of \$11,382,673 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to CHICAGO CITY DEPARTMENT OF PUBLIC HEALTH in support of the above referenced project. This award is pursuant to the authority of SEC391(A)317(K)OFPHS42U.S.C.SEC241A 247B and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact the individual(s) referenced in Section IV.

Sincerely yours,

Nealean K. Austin  
Grants Management Officer  
Centers for Disease Control

Additional information follows



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**SECTION I – AWARD DATA – 5U90TP517008-09****Award Calculation (U.S. Dollars)**

Salaries and Wages	\$4,228,846
Fringe Benefits	\$1,275,423
Personnel Costs (Subtotal)	\$5,504,269
Equipment	\$298,160
Supplies	\$42,500
Travel Costs	\$46,202
Other Costs	\$1,097,640
Consortium/Contractual Cost	\$3,421,827

Federal Direct Costs	\$10,410,598
Federal F&A Costs	\$1,086,075
Approved Budget	\$11,496,673
Federal Share	\$11,496,673
Less Unobligated Balance	\$114,000
<b>TOTAL FEDERAL AWARD AMOUNT</b>	<b>\$11,382,673</b>

**AMOUNT OF THIS ACTION (FEDERAL SHARE)** \$11,382,673

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

10 \$15,703,041

**Fiscal Information:**

CFDA Number: 93.069  
EIN: 1366005820A4  
Document Number: OCCU517008

IC	CAN	2008	2009
TP	92100D3		\$15,703,041
TP	921027R	\$2,150,000	
TP	9213367	\$9,232,673	

SUMMARY TOTALS FOR ALL YEARS		
YR	THIS AWARD	CUMULATIVE TOTALS
9	\$11,382,673	\$11,382,673
10	\$15,703,041	\$15,703,041

Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project

**CDC Administrative Data:**

PCC: N / OC: 4151

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**SECTION II – PAYMENT/HOTLINE INFORMATION – 5U90TP517008-09**

For payment information see Payment Information section in Additional Terms and Conditions.

INSPECTOR GENERAL: The HHS Office Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to [hstips@oig.hhs.gov](mailto:hstips@oig.hhs.gov) or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous. This note replaces the Inspector General contact information cited in previous notice of award.

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**SECTION III – TERMS AND CONDITIONS – 5U90TP517008-09**

This award is based on the application submitted to, and as approved by, CDC on the above-titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 74 or 45 CFR Part 92 as applicable.
- d. The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

This award is funded by the following list of institutes. Any papers published under the auspices of this award must cite the funding support of all institutes.

Coordinating Office For Terrorism Preparedness And Emergency Response (CTPER)

**Treatment of Program Income:**  
Additional Costs

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#### **SECTION IV – TP Special Terms and Conditions – 5U90TP517008-09**

##### **TERMS AND CONDITIONS OF THIS AWARD**

**INCORPORATION:** RFA Number AA154 and the application dated July 3, 2008, are made a part of this award by reference.

**INDIRECT COSTS:** Indirect costs are approved based on the Indirect Cost Proposal Agreement dated May 6, 2008, at a rate of 10.74 percent.

**FUNDING:** Attached is a spreadsheet that reflects the total funding (financial assistance and direct assistance (if applicable) for your budget period 09 award.

**CARRYOVER OF ESTIMATED UNOBLIGATED BALANCES FOR PAN FLU AND/OR RTDD ACTIVITIES:** A total of \$114,000 of estimated BP08 unobligated funds were used to fund the continuation of RTDD activities.

**Cities Readiness Initiative (CRI) -** This award includes \$2,150,000 to ensure that selected cities are prepared to provide oral medications during an event to 100 percent of their affected populations. This generally will entail enhancing each city's capability to establish a network of points of dispensing (POD) staffed with trained/exercised paid and/or volunteer staff. In the wake of a catastrophic bioterrorism event, even the largest POD network that the jurisdiction is capable of mounting on its own may be insufficient to protect its citizens, in which case the grantee may elect to request staff and other resources from the Federal Government to augment the POD network or to deploy elements of the United States Postal Service to complement the POD network with direct delivery of antibiotics to residences.

**REVIEW SUMMARY:** Please see the Review Summary included with the Notice of Award for any specific weaknesses, recommendations, or items requiring additional information. A response to all weaknesses must be submitted through via DSLR PERFORMS by October 10, 2008.

**CANCELLING FUNDS:** FY 03 funds will cancel on October 1, 2008. All FY 03 funds should be drawn down and reported on the 272 Report by September 30, 2008. All unliquidated FY 03 obligations as of October 1, 2008 will be deobligated and funds returned to Treasury.

##### **REPORTING REQUIREMENTS:**

**Semi-annual Progress Report -** A semi-annual progress report for activities undertaken in the first six months of this budget period (August 10, 2008 through February 10, 2009), as well as special topics related to the goals and objectives, is due with the next budget period's continuation application. This report must be submitted via DSLR PERFORMS. CDC will provide templates for these reports to assess program outcomes related to activities undertaken in this budget period. In

addition, you may be required to submit information upon request based on changing threat status or national security priorities.

Estimated Financial Status Report (FSR) - An estimated FSR for the period August 10, 2008 through August 9, 2009 is due with the next budget period's continuation application.

Final Reports- An original and two copies of the final FSR is due to the Grants Management Officer named below by November 10, 2009. Final project reports (summarizing activities from August 10, 2008 through August 9, 2009, with emphasis on barriers encountered and accomplishments since February 11, 2009) must be submitted via DSLR PERFORMS by November 10, 2009.

**PROGRAM REQUIREMENTS:** The following two requirements are new for BP9:

1. Maintenance of Funding (MOF). Complete the MOF requirement that will calculate the amount of MOF you should be prepared to document during BP9. According to PL 109-417, any funds withheld from the PHEP cooperative agreement program or the Hospital Preparedness Program will be reallocated to the healthcare Facilities Partnership program in the same state.
2. Match. Documentation of a plan to identify and accumulate the 5% match required to obtain a BP10 award will be a component of your IPR submission in spring 2009.

**CORRESPONDENCE:** All correspondence regarding this award must be identified with the award number.

**PRIOR APPROVAL:** All requests which require the prior approval of the Grants Management Officer as noted in 45 CFR 74 and 92 (as applicable) must bear the signature of an authorized official of the business office of the grantee organization as well as the principal investigator or program or project director. Any requests received, which reflect only one signature, will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include a new proposed budget, and a narrative justification of the requested changes.

**SUB-GRANTEE AND CONTRACT FUNCTIONALITY:** Ensure that grant recipients understand the difference between a sub-grantee and a contractor and appropriately apply them when Federal financial assistance is used in award documents.

The determinate of a sub-grantee or contractor should not be based on the title of the instrument selected but on the true function of work undertaken by the agreement.

A sub-award is financial assistance, therefore the term that apply to recipients/grantees generally apply to sub-grantee/sub-recipient as well.

Sub-grantee is involved in the financial assistance activities, i.e., to help fulfill their statement of work. Characteristics indicative of a sub-award received by a sub-recipient are when the organization:

1. determines who is eligible to receive what Federal financial assistance;
2. has its performance measured against whether the objective of the Federal program are met;
3. has responsibility for programmatic decision making;
4. has responsibility for adherence to applicable Federal program compliance requirements; and
5. uses Federal funds to carry out a program of the organization as compared to providing goods or services for a program of the pass-through entity.

Thus, the laws that apply to the recipient generally apply to a sub-recipient.

Contractor is involved in procurement, i.e., a vendor providing goods or services to directly benefit the recipient, does not seek to accomplish a public benefit, and does not perform substantive work on the project. Characteristics indicative of a payment for goods and services received by a vendor are when the organization:

1. provides the goods and services within normal business operations;
2. provides similar goods or services to many different purchasers;
3. operates in a competitive environment;
4. provides goods or services that are ancillary to the operation of the Federal program; and
5. is not subject to compliance requirements of the Federal program.

**INVENTIONS:** Acceptance of grant funds obligated recipients to comply with the standard patent rights clauses in 37 CFR 401.14.

**PUBLICATIONS:** Publications, journal articles, etc. produced under a CDC grant support project must bear an acknowledgement and disclaimer, as appropriate, such as: This publication (journal article, etc.) was supported by Grant/Cooperative Agreement Number (insert award number) from CDC. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.

**PURCHASING AMERICAN-MADE EQUIPMENT AND PRODUCTS:** To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made.

**ACKNOWLEDGMENT OF FEDERAL SUPPORT:** When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.

**FRAUD, WASTE OR ABUSE HOTLINE:** For your information, the United States Department of Health and Human Services Inspector General maintains a toll-free telephone number, 800-368-5779, for receiving information concerning fraud, waste or abuse under grants and cooperative agreements. Such reports are kept confidential, and callers may decline to give their names if they choose to remain anonymous.

**PAYMENT INFORMATION:** Payment under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). The Division of Payment Management, Program Support Center, HHS administers PMS. PMS will forward the DHHS Manual for Recipients Financed Under the Payment Management System (PMS), PMS-270 and PMS-272 forms.

PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, P. O. Box 6021, Rockville, MD 20852.

If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows: Division of Payment Management, FMS/PSC/HHS, Rockwall Building #1, Suite 700, 11400 Rockville Pike, Rockville, MD 20852.

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.

Posting of Funds in the Payment Management System - Funds awarded for budget period 09 PHEP activities have been placed in a separate sub-account in PMS. The account number is BIOT-08. Expenditures must be reported on the 272 under the appropriate sub-account.

**AUDIT REQUIREMENT:** You must comply with the audit requirements of OMB Circular A-133, Audits of State, Local Governments and Non-Profit Organizations, revised June 30, 1997, which rescinded OMB Circular A-128 Audits of State and Local Governments. Please send a courtesy copy of completed audits and any management letters on a voluntary basis to the following:

Centers for Disease Control and Prevention (CDC)  
Attention: Head, Acquisition Assistance Oversight and Evaluation  
2920 Brandywine Road, NE  
Atlanta, Georgia 30341

You are required to ensure that subrecipients receiving CDC funds also meet the requirements of OMB A-133 (total Federal grant or cooperative agreement funds received exceed \$500,000). Additionally, you must also ensure that appropriate corrective action is taken within six months after receipt of the subrecipient audit report in instances of non-compliance with Federal laws and regulations. You are to consider whether subrecipient audits necessitate adjustment of your own records. If a subrecipient is not required to have an OMB A-133 audit, you are still required by OMB A-133 to perform adequate monitoring of subrecipient activities. You should require each subrecipient to permit independent auditors to have access to the subrecipient's records and

financial statements. YOU SHOULD INCLUDE THESE REQUIREMENTS IN SUBRECIPIENT CONTRACTS.

**TRAFFICKING IN PERSONS:** This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term and condition, go to:  
[http://www.cdc.gov/od/pgo/funding/grants/Award\\_Term\\_and\\_Condition\\_for\\_Trafficking\\_in\\_Persons.shtm](http://www.cdc.gov/od/pgo/funding/grants/Award_Term_and_Condition_for_Trafficking_in_Persons.shtm).

**CDC CONTACT NAMES:**

**Business and Grants Policy Contact:**  
Angela R. Webb, Grants Management Specialist  
Acquisition and Assistance, Branch VI  
Procurement and Grants Office  
Centers for Disease Control and Prevention (CDC)  
2920 Brandywine Road, MS K69  
Atlanta, GA 30341-4146  
Telephone: 770-488-2784; Fax: 770-488-2670  
Email: [aqw6@cdc.gov](mailto:aqw6@cdc.gov)

**Programmatic Contact:**  
Kevin Griffy, Project Officer  
Division Office of State & Local Readiness  
Office of terrorism Preparedness and response  
Centers for Disease Control & Prevention (CDC)  
1600 Clifton Road, NE, Mailstop D-29  
Telephone: 404-639-7744  
Email: [kwg2@cdc.gov](mailto:kwg2@cdc.gov)

**STAFF CONTACTS**

**Grants Management Specialist:** Angela Webb  
Centers for Disease Control and Prevention  
Atlanta, GA 30333

**Grants Management Officer:** Nealean K. Austin  
Centers for Disease Control and Prevention  
Procurement and Grants Office  
1600 Clifton Rd., Mail Stop K14  
Atlanta, GA 30333  
**Email:** [nea1@cdc.gov](mailto:nea1@cdc.gov) **Phone:** 770-488-2754 **Fax:** 770-488-2777

**SPREADSHEET SUMMARY**

**GRANT NUMBER:** 5U90TP517008-09

**INSTITUTION:** CHICAGO DEPARTMENT OF PUBLIC HEALTH

<i><b>Budget</b></i>	<i><b>Year 9</b></i>	<i><b>Year 10</b></i>
Salaries and Wages	\$4,228,846	
Fringe Benefits	\$1,275,423	
Personnel Costs (Subtotal)	\$5,504,269	
Equipment	\$298,160	
Supplies	\$42,500	
Travel Costs	\$46,202	
Other Costs	\$1,097,640	\$15,703,041
Consortium/Contractual Cost	\$3,421,827	
<b>TOTAL FEDERAL DC</b>	<b>\$10,410,598</b>	<b>\$15,703,041</b>
<b>TOTAL FEDERAL F&amp;A</b>	<b>\$1,086,075</b>	<b>\$0</b>
<b>TOTAL COST</b>	<b>\$11,382,673</b>	<b>\$15,703,041</b>

**Chicago**

**Public Health Emergency Preparedness--Program Announcement TPAA-154 - Budget Period 09**

	BASE	EWIDS	CRI	Level 1 Lab	PAN FLU	RTDD	Total
<b>Financial Assistance</b>							
Personnel	\$ 3,535,656	\$ -	\$ 693,190	-	-	\$ -	\$4,228,846
Fringe	\$ 1,066,356	\$ -	\$ 209,067	-	-	\$ -	1,275,423
Consultant	\$ -	\$ -	\$ -	-	-	\$ -	-
Equipment	\$ 298,160	\$ -	\$ -	-	-	\$ -	298,160
Supplies	\$ 42,500	\$ -	\$ -	-	-	\$ -	42,500
Travel	\$ 46,202	\$ -	\$ -	-	-	\$ -	46,202
Other	\$ 553,912	\$ -	\$ 543,728	-	-	\$ -	1,097,640
Contracts	\$ 2,823,383	\$ -	\$ 495,500	-	-	\$ 102,944	3,421,827
Total Direct Cost	\$ 8,366,169	\$ -	\$ 1,941,485	-	-	\$ 102,944	10,410,598
Total Indirect Cost	\$ 866,504	\$ -	\$ 208,515	-	-	\$ 11,056	1,086,075
<b>TOTAL--FA</b>	\$ 9,232,673	\$ -	\$ 2,150,000	-	-	\$ 114,000	11,496,673
<b>Direct Assistance</b>							
Personnel	\$ -	\$ -	\$ -	-	-	\$ -	-
Travel	\$ -	\$ -	\$ -	-	-	\$ -	-
Other	\$ -	\$ -	\$ -	-	-	\$ -	-
<b>TOTAL--DA</b>	\$ -	\$ -	\$ -	-	-	\$ -	-
<b>TOTAL AWARD</b>	\$ 9,232,673	\$ -	\$ 2,150,000	-	-	\$ 114,000	11,496,673

2008 Technical Review Summary & Budget Exception Review  
**Privileged Communication**  
**Centers for Disease Control and Prevention**  
**Public Health Emergency Preparedness**  
**Program Announcement #: AA154**  
**Report Date: 7/23/2008**  
**Grantee: Chicago**

Workplan Technical Review Summary (TRS)

TRS related to Overall Program

<b>TR (ID#: 19003) - Recommendation</b>
PER SNS SME: CDPH needs to address the plans and actions they will take to complete at least one full scale or functional mass prophylaxis dispensing exercise conducted in each CRI MSA in which each planning jurisdiction within that MSA participated (One full-scale exercise and 3 POD drills).

<b>TR (ID#: 19011) - Recommendation</b>
CDPH needs to address the plans and actions they will take to complete at least one full scale or functional mass prophylaxis dispensing exercise conducted in each CRI MSA in which each planning jurisdiction within that MSA participated (One full-scale exercise and 3 POD drills).

Other TRS

<b>TR (ID#: 18510) - Strength</b>	
Will enhance First Responders Prophylaxis Plans and other public safety issues.	
<b>Related to:</b>	<ul style="list-style-type: none"> <li>• 20080001- Responder Safety and Health</li> <li>• Ongoing Or New</li> </ul>

<b>TR (ID#: 19008) - Recommendation</b>	
Not sure what the focus is for this project. I would recommend revising the "How" section and the outputs to focus specifically on what you are trying to accomplish. Also, outputs should have a timeline linked to them so that progress can be accurately monitored.	
<b>Related to:</b>	<ul style="list-style-type: none"> <li>• 20080004- CBRN Detection</li> <li>• What</li> <li>• How</li> </ul>

<b>TR (ID#: 19009) - Recommendation</b>	
This project is of value to CDPH to keep informed of events worldwide, nationally, regionally, and locally, that could impact their city. Some proposed deadlines are included in a few of the outputs, but would recommend that CDPH deadlines for all major milestones to ensure that project is completed in an agreed-upon time frame. The budget for the project (Argonne Contract) was reviewed and approved for this budget period.	
<b>Related to:</b>	<ul style="list-style-type: none"> <li>• 20080011- Chicago Department of Public Health Fusion/Analysis Cell</li> <li>• How</li> <li>• Outputs</li> </ul>

<b>TR (ID#: 19010) - Recommendation</b>	
Operationally, this is important project for CDPH. It is recommended the CDPH provide milestones for the estimated completion of the system being operational at each hospital in the outputs section. This will ensure that project is completed in an agreed-upon time frame.	
<b>Related to:</b>	<ul style="list-style-type: none"> <li>• 20080016- Electronic Laboratory Reporting (ELR)</li> <li>• Outputs</li> </ul>

Budget Exception Review (BER)

Budget Exceptions for Base Funding Source

Type	Category	Description	Requested	Approved	Exception
			\$	\$	Text

Needs More Info	Personnel	Medical Director (Personnel: \$131,000 / Fringe: \$39,510 )	\$170,510	\$170,510	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	Epidemiologist - II (Personnel: \$64,704 / Fringe: \$19,515 )	\$84,219	\$84,219	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	Epidemiologist - III (Personnel: \$77,148 / Fringe: \$23,268 )	\$100,416	\$100,416	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	Senior Emergency Management Coordinator (Personnel: \$64,620 / Fringe: \$19,489 )	\$84,109	\$84,109	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	***Senior Emergency Management Coordinator (Personnel: \$58,812 / Fringe: \$17,738 )	\$76,550	\$76,550	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	***Industrial Hygenist/Safety Officer (Personnel: \$67,748 / Fringe: \$20,433 )	\$88,181	\$88,181	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	***Veterinarian (Personnel: \$70,000 / Fringe: \$21,112 )	\$91,112	\$91,112	Provide name of person selected to fill this position when position is filled.
Needs More Info	Travel	Trip to National Biowatch Meeting	\$2,550	\$2,550	Provide verification of the numbers of nights and days. (Generally, the number of



Needs More Info	Other	Training Materials	\$8,000	\$8,000	days exceeds the number of nights by one. Therefore, one night equals two days of travel.) Provide information on how these costs were determined (e.g., items to be purchased and cost per item, etc.).
Needs More Info	Other	Emergency University(CPR training - \$9,000 \$9,000 Blood Borne Pathogen training)	\$18,000	\$18,000	Provide information on how these costs were determined (e.g., items to be purchased and cost per item, etc.).
Needs More Info	Other	CBRNE training - \$15,000 (Courses and seminars for PHEP management staff)	\$15,000	\$15,000	Provide information on how these costs were determined (e.g., items to be purchased and cost per item, etc.).
Needs More Info	Other	Interwise Charges @ \$1,500/month	\$18,000	\$18,000	Other: Provide justification for Interwise monthly charges. Provide information on how these costs were determined (e.g., items to be purchased and cost per item, etc.).
Needs More Info	Other	ATC Site Survey	\$14,453	\$14,453	Provide information on how these costs were determined (e.g., items to be purchased and cost per item, etc.).

**Budget Exceptions for CRI Funding Source**

Type	Category	Description	Requested	Approved	Exception
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			\$	\$	Text
Needs More Info	Personnel	Training Director- Education Coordinator (Personnel: \$65,912 / Fringe: \$19,879 )	\$85,791	\$85,791	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	***Project Administrator/Grant Monitoring: (TBD) (Personnel: \$62,581 / Fringe: \$18,874 )	\$81,455	\$81,455	Provide name of person selected to fill this position when position is filled.
Needs More Info	Personnel	***Project Manager (Personnel: \$34,960 / Fringe: \$10,544 )	\$45,504	\$45,504	Provide name of person selected to fill this position when position is filled.
Needs More Info	Other	Fit Testing and medical evaluation for CDPH responders using N-95's and PAPR's- ongoing \$61,250	\$61,250	\$61,250	Provide information on how these costs were determined (e.g., items to be purchased and cost per item, etc.).

**Budget Exceptions for PanFlu Funding Source**

No Exceptions

**Budget Exceptions for Real-Time Disease Detection Funding Source**

No Exceptions

**CITY OF CHICAGO  
PURCHASE REQUISITION**

**Original (DPS)**

<b>DELIVER TO:</b>  041- DEPAUL 2FL 333 S. STATE ST. 2ND FLOOR Chicago, IL 60604	<b>REQUISITION:</b> 40983  <b>PAGE:</b> 1 <b>DEPARTMENT:</b> 41 - DEPARTMENT OF HEALTH <b>PREPARER:</b> Richard W Rzeszutko <b>NEEDED:</b>
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**REQUISITION DESCRIPTION**

SPECIFICATION NUMBER: 70310

**COMMODITY INFORMATION**

LINE	ITEM	QUANTITY	UOM	UNIT COST	TOTAL COST						
1	99029	416,037	USD	0.00	0.00						
PLAN CHICAGO DISEASE OUTBREAK DISTANCE TABLETOP EXERCISES FACILITATE EXERCISES AND COORDINATE EXERCISE CONTENT											
<b>SUGGESTED VENDOR:</b> ARGONNE NATIONAL LABORATORY											
<b>REQUESTED BY:</b> Richard W Rzeszutko											
DIST	BFY	FUND	COST CTR	APPR	ACCNT	ACTV	PROJECT	RPT CAT	GENRL	FUTR	TOTAL COST
1	008	0847	0413320	0140	220140	0000	00000000	08FG60	00000	0000	0.00
<b>LINE TOTAL:</b>											<b>0.00</b>
2	99029	180,000	USD	0.00	0.00						
PLAN CHICAGO DISEASE OUTBREAK DISTANCE TABLETOP EXERCISES FACILITATE EXERCISES AND COORDINATE EXERCISE CONTENT											
<b>SUGGESTED VENDOR:</b> ARGONNE NATIONAL LABORATORY											
<b>REQUESTED BY:</b> Richard W Rzeszutko											
DIST	BFY	FUND	COST CTR	APPR	ACCNT	ACTV	PROJECT	RPT CAT	GENRL	FUTR	TOTAL COST
1	008	0847	0413320	0140	220140	0000	00000000	08FG70	00000	0000	0.00
<b>LINE TOTAL:</b>											<b>0.00</b>
<b>REQUISITION TOTAL:</b>											<b>0.00</b>

Where a commodity is for a particular or unique use other than standard quality, grades, color, size or other characteristics, give details of how it will be and for what purpose. Requisitions prepared incorrectly will be returned to the using department.