

DAVID R. MARTIN
MAYOR
CITY OF STAMFORD, CONNECTICUT



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August 31, 2018

To: Members of the Board of Representatives

Re: Resolution Authorizing an Agreement with the State Department of Public Health Regarding a Childhood Immunization Program

Dear Board Members:

Attached is a resolution authorizing my signature on the Immunization Action Program grant contract with the CT Department of Public Health (DPH). The program helps to fund immunization services for children up to two years of age.

The grant award for 2018-2019 from the State is anticipated to be \$91,406. The funds will support salary and benefits costs for the Public Health Nurse who coordinates the program and administers the immunization registry for children 0-2 years of age. Funds for training and program supplies are also included in the budget. The City's contribution is anticipated to be approximately \$55,952.

Please consider this item at your next regular Board meeting. Questions about the program may be addressed to Dr. Jennifer Calder, Director of Health at (203) 977-4396.

Sincerely,

A handwritten signature in blue ink that reads "David R. Martin". The signature is written in a cursive, flowing style.

David R. Martin
Mayor

DRM:jwh
Enclosure

cc: Dr. Jennifer Calder, Director of Health
Karen Cammarota, Grants Officer

**RESOLUTION AUTHORIZING THE MAYOR TO ENTER INTO AN
AGREEMENT WITH THE STATE OF CONNECTICUT DEPARTMENT OF HEALTH
SERVICES REGARDING AN IMMUNIZATION ACTION PROGRAM GRANT**

I, Lyda Ruijter, City and Town Clerk of the City of Stamford, a corporation organized and existing under the laws of the State of Connecticut, hereby certify that that following is a true copy of a resolution adopted at a meeting of the 30th Board of Representatives of the City of Stamford, duly held ____ day of _____ 2018.

RESOLVED that David R. Martin, Mayor, is empowered to sign, enter into, and amend Contractual instruments in the name of and on behalf of the City of Stamford, between the City of Stamford and the Department of Public Health or its successor agency to conduct an infant immunization program.

IN WITNESS WHEREOF, I have hereunto set my hand and the corporate seal of the City of Stamford this ____ day of _____, 2018.

Lyda Ruijter
City and Town Clerk