PROJECT REPRESENTATIVES. The Project Representatives during the term of this Grant will be:

Grantee: [County of Monterey]

Name: Christabelle Oropeza

Address:1441 Schilling Pl. 1st FL South Public Health

City, ZIP: Salinas, CA 93901

Phone:831-755-4572

E-mail: oropezacz@co.monterey.ca.us

Direct all inquiries to the following representatives:

Grantee: [County of Monterey]

Attention: Michelle House

Address: 1441 Schilling Pl. 1st FL South Public Health

City, Zip: Salinas, CA 93901

Phone: 831-755-4607

E-mail: housem@co.monterey.ca.us

All payments from CDPH to the Grantee; shall be sent to the following address:

Remittance Address
Grantee: [County of Monterey]
Attention "Cashier": Joseph L. Ripley
Address 1270 Natividad Rd
City, Zip Salinas, CA 93906
Phone (831)796-1250
E-mail RipleyJL@co.monterey.ca.us