

### Board Member Contact Information

Marvin J. Southard, D.S.W., Director of Mental Health

Member's Name/Title (including professional initials)  
Los Angeles

County

msouthard@dmh.lacounty.gov

Email

Physical Address:

550 S. Vermont Avenue

Street Name

12<sup>th</sup> Floor

Suite / Mail Stop / Floor

Los Angeles CA 90020

City State Zip Code

213-738-4601 213-386-1297

Telephone Facsimile

### Alternate Contact Information

William Arroyo, M.D., Regional Medical Director

Alternate Name/Title (including professional initials)

Physical Address:

550 S. Vermont Avenue

Street Name

10<sup>th</sup> Floor

Suite / Mail Stop / Floor

Los Angeles CA 90020

City State Zip Code

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Telephone Facsimile

Email: [warroyo@dmh.lacounty.gov](mailto:warroyo@dmh.lacounty.gov)

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*Executive Assistant*

*Contact Information*

Name: Barbara Johnson

Title Executive Secretary

Address 550 S. Vermont Avenue,  
12<sup>th</sup> Floor, Los Angeles, CA  
90020

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Support Person For:

Marvin J. Southard, D.S.W.

*Executive Assistant*

*Contact Information*

Name: Pauline J. Flores

Title: Management Secretary

Address: 550 S. Vermont Avenue,  
10<sup>th</sup> Floor, Los Angeles, CA  
90020

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Support Person For:

William Arroyo, M.D.



*Please complete form and submit via email to [kim.santin@georgehills.com](mailto:kim.santin@georgehills.com).  
Print and/or save completed form for your records.*

County Information

2010

Estimated 2011

I. Population Information:

approx. 10,000,000

10,000,000 plus \_\_\_\_\_

II. **Application Fee Schedule (Based on 2008 population)**

- Population greater than 10 million: \$1,000
- Population 1 million to 10 million: \$ 750
- Population 100,000 to 1 million: \$ 500
- Population less than 100,000: \$ 250

Please issue warrant to California Mental Health Services Authority \$ \_\_\_\_\_

OR

Application Fee will be paid upon the first reassignment of program funds to CMHSA

III. Requested Date of Membership: 6/1/10

Marvin J. Southard, D.S.W.

Printed Name

Signature



May 18, 2010

Date



*Please complete form and submit via email to [kim.santin@georgehills.com](mailto:kim.santin@georgehills.com). Print and/or save completed form for your records.*

**SUPPLEMENTAL MHSA PEI STATEWIDE PROGRAMS ASSIGNMENT AGREEMENT**

Los Angeles (Name of County<sup>1</sup>)

Los Angeles (Name of County) (the County) agrees to participate in the Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) Statewide Programs funded from the PEI Component of the MHSA Three-Year Program and Expenditure Plan. The three Statewide Programs intended to be funded by this agreement are: Suicide Prevention, Student Mental Health Initiative, and Stigma and Discrimination Reduction.

The County agrees that upon its execution of this Agreement, the following amounts will be assigned to DMH concurrent with the start of the State Fiscal Year (SFY) for which they are made available subject to the effective conditions specified below:

\$ ( 11,678,400 ) of the County's SFY 08/09 PEI Statewide Program Component Allocation  
\$ ( 11,678,400 ) of the County's SFY 09/10 PEI Statewide Program Component Allocation  
\$ ( 11,678,400 ) of the County's SFY 10/11 PEI Statewide Program Component Allocation  
\$ ( 11,678,400 ) of the County's SFY 11/12 PEI Statewide Program Component Allocation

**Assignment to the Department of Mental Health**

Funds in the amount specified will be transferred from the Mental Health Services Fund Local Assistance portion of the DMH state budget, item 4440-601-3085 to the DMH state budget, item 4440-101-3085, Program 10, Local Assistance.

The County makes the assignment to (please check one):

- Fund DMH administration of these programs.  
 Fund a contract pursuant to WIC 5897 (a) between DMH and California Mental Health Services Authority (CalMHSA) to support CalMHSA administration of these programs.

Assignment shall be effective only upon:

- review and comment by DMH and approval by Mental Health Services Oversight and Accountability Commission (MHSOAC);
- a fully executed County MHSA Agreement with DMH; and
- appropriation of sufficient funds in the State Budget Act to allow DMH to expend the funds assigned by counties to support the PEI Statewide Programs outlined above.

Pursuant to WIC 5892(a)(3) assigned funds intended to fund a contract between DMH and CalMHSA may be distributed to CalMHSA only after a PEI Statewide Program and Expenditure Plan or update has been approved by the MHSOAC.

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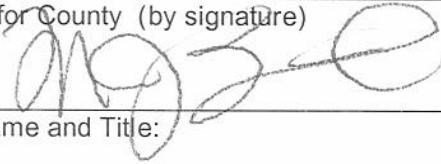
<sup>1</sup> "County" may be a county mental health program, two or more counties acting jointly, or a city-operated mental health program pursuant to Welfare & Institutions Code Section 5701.5.

**Release of Planning Funds**

The County may request funds for the purpose of conducting the Community Program Planning and Local Review Processes, for preparing, drafting and submitting Plan/updates and for other planning activities be distributed to the JPA.

- Pursuant to its Assignment above to fund a contract pursuant to WIC 5897 (a) between DMH and California Mental Health Services Authority (CalMHSA) to support CalMHSA administration of these programs, the County authorizes the release of Planning funds under this contract to the JPA in the following amounts:

- \$ ( 583,920 ) of the County's SFY 08/09 PEI Statewide Program Component Allocation
- \$ ( 583,920 ) of the County's SFY 09/10 PEI Statewide Program Component Allocation
- \$ ( 583,920 ) of the County's SFY 10/11 PEI Statewide Program Component Allocation

Approved for County (by signature) 	Date: May 18, 2010
Printed Name and Title: Marvin J. Southard, D.S.W., Director of Mental Health	