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STATE OF NEW HAMPSHIRE

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC HEALTH

Lori A. Weaver
Commissioner

Iain N. Watt
Director

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December 15, 2025

Her Excellency, Governor Kelly A. Ayotte
and the Honorable Council
State House
Concord, New Hampshire 03301

REQUESTED ACTION

Authorize the Department of Health and Human Services, Division of Public Health, to accept and expend $25,270 from the United States Food and Drug Administration (USFDA) to fund the Grade A Milk program effective upon Governor and Executive Council approval through June 30, 2026, and authorize the allocation of these funds in the accounts below. 100% Federal Funds.

05-95-90-903010-79660000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: DIVISION OF PUBLIC HEALTH, BUREAU OF LABORATORY SERVICES, PUBLIC HEALTH LABORATORIES

Class-Account	Class Description	FY26 Current Adjusted Authorized	Requested Action	FY26 Revised Adjusted Authorized
Revenue				
000-404972-16	Federal Funds	$ 223,334	$ 25,270	$ 248,604
001-405833-68	Transfers from other Agency	$ 332,215	$ -	$ 332,215
009-405921-68	Agency Income	$ 41,354	$ -	$ 41,354
	General Funds	$ 4,619,979	$ -	$ 4,619,979
	Total Revenue	**$ 5,216,881**	**$ 25,270**	**$ 5,242,151**
Expense				
010-500100	Personnel Services Perm Class	$ 2,578,599	$ -	$ 2,578,599
018-500106	Overtime	$ 31,361	$ -	$ 31,361
019-500105	Holiday Pay	$ 500	$ -	$ 500
020-500200	Current Expenses	$ 249,936	$ -	$ 249,936
022-500258	Rent-Leases Other Than State	$ 4,000	$ -	$ 4,000
024-500225	Maint Other than Build-Grn	$ 79,470	$ -	$ 79,470
026-500251	Organizational Dues	$ 10,210	$ -	$ 10,210
030-500302	Equipment New Replacement	$ 116,686	$ 25,270	$ 141,956
037-500173	Technology-Hardware	$ 10,000	$ -	$ 10,000
038-500175	Technology-Software	$ 19,179	$ -	$ 19,179
039-500188	Telecommunications	$ 1,600	$ -	$ 1,600
041-500801	Audit Fund Set Aside	$ 412	$ -	$ 412

042-500620	Additional Fringe Benefits		$ -	$ -
050-500109	Personal Service Temp	$ 159,660	$ -	$ 159,660
057-500531	Books Periodicals Subscriptions	$ 300	$ -	$ 300
059-500117	Temp Full Time	$ 95,220	$ -	$ 95,220
060-500601	Benefits	$ 1,317,536	$ -	$ 1,317,536
066-500544	Employee Training	$ 5,000	$ -	$ 5,000
070-500704	In State Travel Reimbursement	$ 2,900	$ -	$ 2,900
080-500710	Out of State Travel Reimbursement	$ 10,462	$ -	$ 10,462
102-500731	Contracts for Program Services	$ 45,429	$ -	$ 45,429
548-500396	Reagents	$ 478,421	$ -	$ 478,421
	Total Expense:	**$ 5,216,881**	**$ 25,270**	**$ 5,242,151**

EXPLANATION

The New Hampshire Public Health Laboratories (NH PHL) was awarded funding to purchase a LactoScope 300 System laboratory instrument. Dairy farms and plants that maintain a dairy license with the State of New Hampshire provide samples of their products to the Department on a monthly schedule to demonstrate they are safe for consumers. A variety of tests are performed as part of this program, including determining butterfat (the fat percentage in the product). The LactoScope will improve the accuracy of measuring butterfat content reported in dairy products as part of the State's Grade A milk program. This instrument will allow farms and plants to optimize their production process based on the results, to meet labeling specifications (e.g., 1% milk, 2% milk). The new equipment will replace a legacy instrument utilized by the NH PHL and improve timeliness and accuracy in State reporting to New Hampshire dairy farms.

Funds will be budgeted as follows:

- Class 030 – Equipment - Funds will be used to purchase a LactoScope 300 System. This instrument will replace the older mixing analyzer with an upgraded model to improve testing accuracy and efficiency.

Area served: Statewide

Source of Funds: 100% Federal from the United States Food and Drug Administration.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully Submitted,

for:

Lori A. Weaver
Commissioner

INSTRUCTIONS
Click on the **Edit** button to edit the form. Click the **Save** button to ensure your data will not be lost before navigating away from the form. When you have completed the form, click **Submit.**

Grade "A" Milk Equipment - Granted

New Hampshire Public Health Laboratories
G-ME-2405-04571 | $25,270.00 | Grant Year: Year 8 - 2024
Accurately measure dairy quality

FDA AWARD LETTER COMMENTS

To the grantee–below are comments from the FDA about the award.

10/7/2025- Funds have become available allowing the purchase of the equipment requested in this application.

ADDITIONAL INFORMATION REQUESTED - APPLICANT

Responses from Applicant:

ORGANIZATION INFORMATION

Organization :	New Hampshire Public Health Laboratories
Primary Contact:	Stephanie Clark
Additional Person if Applicable:	Stephanie Clark

AUTHORIZING OFFICIAL INFORMATION

The Authorizing Official is the person in your organization who provides supervisory oversight for this grant opportunity (often an organization's Financial or Grants Management Official).

Authorizing Official Title:	Finance Administrator
Authorizing Official First Name:	Amy
Authorizing Official Last Name:	Bergquist
Authorizing Official Email:	amy.e.bergquist@dhhs.nh.gov
Authorizing Official Phone:	603-271-0183

EQUIPMENT PURCHASES

Project Title:	Accurately measure dairy quality

*Provide a **brief description of the project.** Remember to review the program grant guidance for allowed/non-allowed equipment found here: **grant guidelines.***

Project Summary:

The goal of applying for this funding opportunity is to replace our existing milk analyzer with an upgraded model with more capabilities and improve our testing accuracy and precision.

I verify I have read and understand the Allowable/Non-Allowable Cost Document.	Yes

*Provide a brief **description of the equipment** your program would like to purchase and describe how the equipment will help your program meet the objectives or maintain substantial compliance*

with the Grade "A" Milk program. The description should include the make, model, and purpose or use of each item.

Equipment Description:

We intend to purchase the LactoScope 33 system, which uses Fourier-transform infrared spectroscopy to quantify the fat, protein, lactose, solids, and solids-nonfat in any pasteurized or non-pasteurized liquid milk or cream sample in under 45 seconds.

*List one to three **program objectives** of the Grade "A" Milk program that will be met with the equipment the program plans to purchase.*

If any of the requested equipment is required to address program non-compliance or required to allow your program to maintain compliance, provide details below from the most current State Performance Evaluation (SPE) .

Program Objectives:

Improve the accuracy of the butterfat content and total solids results reported to farmers and plants, allowing them to optimize their process based on those results, and that they meet the labeling specifications.

*List one to three expected **program outcomes** (results from the successful implementation of the project) that illustrate how this equipment will allow your program to improve the safety of Grade "A" milk and milk products and/or increase the efficiency / effectiveness of your regulatory program.*

Examples:

An expected Program Outcome from requesting funding for Luminite testers is to maintain substantial compliance with the equipment testing requirements of the Pasteurized Milk Ordinance.

An expected Program Outcome from requesting funding for ice chest, thermometers, sampling bags and sample dippers is to maintain substantial compliance with the Sampling Surveillance Program of the Pasteurized Milk Program.

An expected Program Outcome from requesting funds for boots, and coveralls will assist us in equipping our farm inspectors with the items they need to conduct inspections of Grade A Dairy Farms in order to maintain substantial compliance.

An expected Program Outcome from requesting funds for laboratory refrigerator, incubator, and pipets will assist us in conducting all of the required testing outline in the Pasteurized Milk Ordinance.

Program Outcomes:

An expected Program Outcome for requesting funding for the LactoScope 300 system is to improve laboratory testing accuracy, efficiency, and NH milk quality by producing quality results.

Additional Information:

The NH Public Health Laboratory utilizes state tax-dollars (general funds) to purchase supplies, reagents, and equipment for dairy testing. There is a cap on these funds per fiscal year, and there are many areas of the laboratory that rely on these funds.

Project Start Date:	10/7/2025
Project End Date:	6/30/2026

BUDGET INFORMATION

INSTRUCTIONS

1. Click the plus sign to open the **Budget Worksheet**.
2. Provide start and end dates for the budget--*these should align with the Project Start and End Dates provided on the request form above*.
3. Fill in cost item descriptions in the Item column.
4. Fill in cost item amounts in the Budgeted column.
5. Click Save to save the **Budget Worksheet**.
6. To edit the **Budget Worksheet,** click the edit icon to open the form.
7. The portal forms do not auto-save. You must click the **Save** button to ensure your data will not be lost.

Budget Worksheet

Budget Period	Budget	Actual
Equipment Budget: 8/1/2024 to 3/31/2025	25,270	0
Total	25,270	0

Budget Snapshot

	Equipment Budget 8/1/2024 to 3/31/2025	
	Budget	Actual
Equipment	25,270	
Supplies		
Installation		
Shipping		
Custom: 1		
Custom: 2		
Custom: 3		
Total	25,270	0

Please enter the total costs for all of your requests in the **Amount Requested** field below: **This amount should match the sum total listed on all of your submitted Budget Worksheet(s).**
Amount Requested: $25,269.59

Budget Narrative:

We were quoted $25,269.59 to purchase the LactoScope 300 by Fisher Scientific. This does not include warranty, install, training, or any other component such as a computer.

VERIFICATIONS
You must create and save a **Budget Worksheet** before you can submit the form. After saving the Budget Worksheet:

1. Click the checkbox below to verify you completed the **Budget Worksheet**.
2. A pop-up box will appear.
3. Optional: the pop-up box has a Note field. Leaving a note here is optional.
4. Click the **Save** button to save your checkmark--*once checked, these cannot be unchecked.*

☐ I confirm that I have completed the Budget Worksheet.

▼ DOCUMENTS

REQUEST DOCUMENTS

MS - Equipment Award Letter Milk
MS - Equipment Award Letter Milk
Added at 4:39 AM on October 8, 2025

INSTRUCTIONS
Click on the **Edit** button to edit the form. Click the **Save** button to ensure your data will not be lost before navigating away from the form. When you have completed the form, click **Submit.**