

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor: Person-To-Person, Inc.
Contractor Address: 1864 Post Road, Darien, CT .06820
Contract Number: 15DSS6102LN / 035-PTP-CSV-01
Amendment Number: A1
Amount as Amended: \$236,509.00
Contract Term as Amended: 10/1/2015 to 6/30/2017

The contract between Person-To-Person, Inc.(the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved by the Office of the Attorney General on 2/17/2016 , is hereby further amended as follows:

1. The total maximum amount payable under this contract has decreased by \$- 13,491.00 from \$250,000.00 to **\$236,509.00**. This decrease is due to the under expenditure of funds in Budget Year 1 and reductions to State Fiscal Year (SFY) 2017 Budget Year 2 revisions. Budget Year 1 shall not exceed \$115,259.00 and Budget Year 2 shall not exceed \$121,250.00
2. For SFY 2017, the Contractor shall adhere to the budget identified on page 2.

All terms and conditions of the original Contract, and any subsequent amendments thereto, which were not modified by this Amendment remain in full force and effect.

Effective Date: 11/29/2016

CONTRACT NUMBER: 15DSS6102LN

CONTRACT PERIOD: 10/01/2015 through 06/30/2017

ST FISCAL YR (SFY): 2017

PROVIDER: Person-to-Person, Inc.

Approved by: LoCurtoD

4000 INCOME		CSV			
		<u>07/01/2016</u>	<u>Contract Total</u>	<u>Other Funding</u>	<u>Total Income</u>
Program Funding Period:		<u>through</u>			
		<u>06/30/2017</u>			
<u>4100 CONTRACT FUNDING</u>	<u>SID</u>	\$ 121,250	\$ 121,250	\$ -	\$ 121,250
4101 State Funds	16160	\$ 121,250	\$ 121,250	\$ -	\$ 121,250
<u>TOTAL INCOME</u>		<u>\$ 121,250</u>	<u>\$ 121,250</u>	<u>\$ -</u>	<u>\$ 121,250</u>
5000 DIRECT EXPENSES		CSV	<u>Contract Total</u>		<u>Total Expenses</u>
<u>5100 SALARIES</u>		\$ 34,450	\$ 34,450	\$ -	\$ 34,450
5101 Staff Salaries & Wages		\$ 34,450	\$ 34,450	\$ -	\$ 34,450
<u>5200 FRINGE BENEFITS</u>		\$ 7,841	\$ 7,841	\$ -	\$ 7,841
<u>5900 CLIENT SUBSIDIES</u>		\$ 78,959	\$ 78,959	\$ -	\$ 78,959
5906 Other Client Subsidies (specify in narrative)		\$ 78,959	\$ 78,959	\$ -	\$ 78,959
<u>TOTAL DIRECT EXPENSES</u>		<u>\$ 121,250</u>	<u>\$ 121,250</u>	<u>\$ -</u>	<u>\$ 121,250</u>
7000 INDIRECT EXPENSES		CSV	<u>Contract Total</u>		<u>Total Expenses</u>
<u>TOTAL INDIRECT EXPENSES</u>		\$ -	\$ -	\$ -	\$ -
<u>TOTAL EXPENSES</u>		<u>\$ 121,250</u>	<u>\$ 121,250</u>	<u>\$ -</u>	<u>\$ 121,250</u>
INCOME/EXPENSE SUMMARY		CSV	<u>Contract Total</u>		<u>Total</u>
TOTAL INCOME		\$ 121,250	\$ 121,250	\$ -	\$ 121,250
TOTAL EXPENSES		\$ 121,250	\$ 121,250	\$ -	\$ 121,250
<u>EXCESS/(SHORTAGE)</u>		<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

SIGNATURES AND APPROVALS

15DSS6102LN/035-PTP-CSV-01 A1

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

CONTRACTOR

Person-To-Person, Inc.

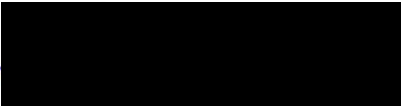


Ceci Maher, Executive Director

5/11/17

Date

DEPARTMENT OF SOCIAL SERVICES



Roderick L. Bremby, Commissioner

5/12/17

Date

OFFICE OF THE ATTORNEY GENERAL



~~ASST.~~ ASSOC. ATTORNEY GENERAL (*Approved as to form*)

Joseph Rubin

5/30/17

Date



STATE OF CONNECTICUT
NONDISCRIMINATION CERTIFICATION – Affidavit
By Entity
For Contracts Valued at \$50,000 or More

Documentation in the form of an affidavit signed under penalty of false statement by a chief executive officer, president, chairperson, member, or other corporate officer duly authorized to adopt corporate, company, or partnership policy that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended

INSTRUCTIONS:

For use by an entity (corporation, limited liability company, or partnership) when entering into any contract type with the State of Connecticut valued at \$50,000 or more for any year of the contract. Complete all sections of the form. Sign form in the presence of a Commissioner of Superior Court or Notary Public. Submit to the awarding State agency prior to contract execution.

AFFIDAVIT:

I, the undersigned, am over the age of eighteen (18) and understand and appreciate the obligations of

an oath. I am Executive Director of Peresm-to-Peresm, Inc, an entity
Signatory's Title Name of Entity

duly formed and existing under the laws of Connecticut.
Name of State or Commonwealth

I certify that I am authorized to execute and deliver this affidavit on behalf of

Peresm-to-Peresm, Inc and that Peresm-to-Peresm, Inc
Name of Entity Name of Entity

has a policy in place that complies with the nondiscrimination agreements and warranties of Connecticut

General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended.

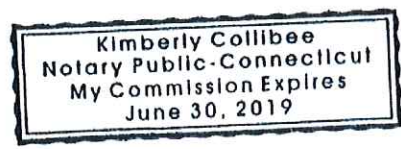
[Signature]
Authorized Signatory

C. MAHER
Printed Name

Sworn and subscribed to before me on this 11 day of May, 2017.

[Signature]
Commissioner of the Superior Court/
Notary Public

6/30/19
Commission Expiration Date





STATE OF CONNECTICUT
GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION

Written or electronic certification to accompany a State contract with a value of \$50,000 or more, pursuant to C.G.S. §§ 4-250, 4-252(c) and 9-612(f)(2) and Governor Dannel P. Malloy's Executive Order 49.

INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (i) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

CHECK ONE: Initial Certification 12 Month Anniversary Update (Multi-year contracts only.)

Updated Certification because of change of information contained in the most recently filed certification or twelve-month anniversary update.

GIFT CERTIFICATION:

As used in this certification, the following terms have the meaning set forth below:

- 1) "Contract" means that contract between the State of Connecticut (and/or one or more of its agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State agency below;
- 2) If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;
- 3) "Contractor" means the person, firm or corporation named as the contractor below;
- 4) "Applicable Public Official or State Employee" means any public official or state employee described in C.G.S. §4-252(c)(1)(i) or (ii);
- 5) "Gift" has the same meaning given that term in C.G.S. § 4-250(1);
- 6) "Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(B) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (B) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding **Gifts** by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a **Gift** to any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

CAMPAIGN CONTRIBUTION CERTIFICATION:

I further certify that, on or after January 1, 2011, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(f)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support, any candidate for statewide public office, in violation of C.G.S. § 9-612(f)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after January 1, 2011 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(f)(1), to, or solicited on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support any candidates for statewide public office or the General Assembly, are listed below:

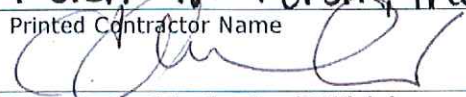
Lawful Campaign Contributions to Candidates for Statewide Public Office:

Contribution Date	Name of Contributor	Recipient	Value	Description
2014	CECI MAHER	BOB DUFF	\$100.00	CAMPAIGN DONATION

Lawful Campaign Contributions to Candidates for the General Assembly:

Contribution Date	Name of Contributor	Recipient	Value	Description

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

Person-to-Person, Inc
 Printed Contractor Name

 Signature of Authorized Official

Ceci maher
 Printed Name of Authorized Official

Subscribed and acknowledged before me this 11 day of May, 2017

Kimberly Collibee
 Notary Public-Connecticut
 My Commission Expires
 June 30, 2019


 Commissioner of the Superior Court (or Notary Public)

6/30/19
 My Commission Expires



STATE OF CONNECTICUT
CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: ____]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, except for the agreement listed below:

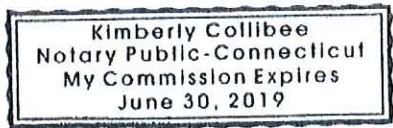
Form fields for Consultant's Name and Title, Name of Firm (if applicable), Start Date, End Date, Cost, and Description of Services Provided.

Is the consultant a former State employee or former public official? [] YES [] NO

If YES: Name of Former State Agency, Termination Date of Employment

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement. Includes fields for Printed Name of Bidder or Contractor, Signature of Principal or Key Personnel, Date, and Awarding State Agency.

Sworn and subscribed before me on this 11 day of May, 2017.



Commissioner of the Superior Court or Notary Public, My Commission Expires 6/30/19

WORKFORCE ANALYSIS

Contractor Person-To-Person, Inc.

Address 1864 Post Road,
Darien, CT .06820

Number of Connecticut Employees	
Full-time: <u>17</u>	Part-time: <u>4</u>
Employment figures obtained from	
Visual Check <input checked="" type="checkbox"/>	Employment Records <input type="checkbox"/>
Other <input type="checkbox"/>	Contractor «ContractorOrg» Number

JOB CATEGORIES	TOTALS	WHITE (Not of Hispanic Origin)		BLACK (Not of Hispanic Origin)		HISPANIC		ASIAN OR PACIFIC ISLANDER		AMER. INDIAN OR ALASKAN NATIVE		PERSON WITH DISABILITIES	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Officials & Managers	5		5										
Professionals	13		6	1	5	1							
Technicians													
Service Workers													
Office & Clerical	3		1				1		1				
Craft Workers (Skilled)													
Operators (Semi-Skilled)													
Laborers (Unskilled)													
TOTALS													
Totals One Year Ago													

FORMAL ON-THE-JOB-TRAINEES

Apprentices													
Trainees													

1. Have you successfully implemented an Affirmative Action Plan?

Yes No If yes, date of implementation 1/1/2013; If no, explain _____
Do you promise to develop and implement a successful Affirmative Action Plan?

Yes No N/A Explain: _____

2. Have you successfully developed an apprenticeship program complying with Sec. 46a-68-1 to 46a-68-17 of the Connecticut Department of Labor Regulations, inclusive:

Yes No N/A Explain: _____

3. According to EEO-1 data, is the composition of your work force at or near parity when compared with the racial and sexual composition of the work force in the relevant labor market area?

Yes No Explain: We have fewer than 50 employees

4. If you plan to subcontract, will you set aside a portion of the contract for legitimate minority business enterprises?

Yes No Explain: _____

Authorized Signature: [Signature] Date: 5/11/17