

### STATE OF CONNECTICUT **DEPARTMENT OF SOCIAL SERVICES**

# CONTRACT AMENDMENT

Contractor:

SENIOR SERVICES COORDINATING COUNCIL

Contractor Address:

11 ALLEN ROAD, ROOM 8, NORWALK, CT 06851

Contract Number:

103-SBG-02 / 14DSS5013FE

Amendment Number:

A<sub>1</sub>

Amount as Amended:

\$39,285

Contract Term as Amended: 10/01/14 - 03/31/16

The contract between Senior Services Coordinating Council and the Department of Social Services, which was last executed by the parties and signed by the Commissioner on 12/17/14, is hereby amended as follows:

- The total maximum amount payable under this contract is increased by \$13,095 from \$26,190 to \$39,285.
- The budget on page 11 of the original contract is deleted and replaced in its entirety by the budget on page 2 of this amendment.
- 3. The term of the contract is extended for an additional six months and the end date of the contract is changed from 9/30/15 to 3/31/16.

### PART I

FINANCIAL SUMMARY

PROGRAM NAME: PROGRAM NUMBER

SENIOR SERVICES COORDINATING COUNCIL

PROGRAM NUMBER:		103-SBG-02/14DSS5013FE A1			
			Requested	Adjustments	Approved
	Contract Amount				
	For Amendments On	•	\$ 26,190	13,095	39,285
	Previously Approved Contract Amount Amount of Amendment				\$ 39,285
ine i	# Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1	UNIT RATE			*	
	1a. Bed Days			4	
	1b. Client Advocate			*	
	1c. Security Deposit	-			
	1d. Other Unit Rate Costs				
	TOTAL UNIT RATE	23			
2	CONTRACTUAL SERVICES				
	2a. Accounting	300		150	45
	2b. Legal				
	2c. Independent Audit	1,000		<u>.</u>	1,00
	2d. Other Contractual Services	1,800		900	2,70
	TOTAL CONTRACTUAL SERVICES		3,100	1,050	4,15
		-			· ·
3	ADMINISTRATION				a
	3a. Admin. Salaries				
	3b. Admin. Fringe Benefits				
	3c. Admin. Overhead				
	TOTAL ADMINISTRATION				
4	DIRECT PROGRAM STAFF				
	4a. Program Salaries	18,150		9,075	27,225
	4b. Program Fringe Benefits	3,404		1,702	5,100
	TOTAL DIRECT PROGRAM		21,554	10,777	32,33
5	OTHER COSTS				
	5a. Program Rent				
	5b. Consumable Supplies	720		360	1,080
	5c. Travel & Transportation	600		300	900
	5d. Utilities	216		108	324
	5e. Repairs & Maintenance			100	
	5f. Insurance	=		500	500
	5g. Food & Related Costs				
	5h. Other Project Expenses				
	TOTAL OTHER COSTS		1,536	1,268	2,804
	-	7			
6	EQUIPMENT				5
	PROGRAM INCOME				
	7a. Fees	1.5			()
	7b. Other Income		920		
	TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST		26,190	13,095	39,285

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.

# SIGNATURES AND APPROVALS 103-SBG-02 / 14DSS5013FE A1

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

Documentation necessary to demonstrate the authorization to sign must be attached.

CONTRACTOR - SENIOR SERVICES COORDINATING CO	UNCIL
Laura Epstein, Executive Director	9/29/15 Date
DEPARTMENT OF SOCIAL SERVICES	
Roderick L. Bremby, Complissioner	9/30/2015 Date

#### OFFICE OF THE ATTORNEY GENERAL

This Contract Amendment template having been reviewed and approved by the OAG, it is exempt from review pursuant a Memorandum of Agreement between the Agency and the OAG dated March 19, 2009.