

Amendment 001

Contract JH116-15-2017

THIS AMENDMENT is entered into between the Areawide Council on Aging of Broward County, Inc., hereinafter referred to as the "Council," and Broward County, hereinafter referred to as the "Contractor," and collectively referred to as the "Parties," to amend Contract JH116-15-2017.

The purpose of this amendment is to increase the contract amount by \$10,000.00; increase the level of services; change the total contract funding from \$185,375.00 to \$195,375.00; amend language and replace attachments.

(1) Section 4 is hereby amended to read as follows:

4. Contract Amount:

The Council agrees to pay for contracted services according to the terms and conditions of this contract in an amount not to exceed **\$195,375.00** or the rate schedule, subject to the availability of funds. Any costs or services paid for under any other contract or from any other source are not eligible for payment under this contract.

(2) Section 5.5. is hereby amended to read as follows:

5. The name, address, and telephone number of the Contract Manager for the Council for this contract is:

Marion Connor
Areawide Council on Aging of Broward County, Inc.
5300 Hiatus Road
Sunrise, FL 33351
(954) 745-9567

(2) Attachment II is hereby replaced with the revised Attachment II.

(3) Attachment IV is hereby replaced with the revised Attachment IV.

(4) Attachment VI is hereby replaced with the revised Attachment VI.

This amendment will be effective on the last date that this amendment has been signed by both Parties.

All provisions in the contract and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform to this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the contract.

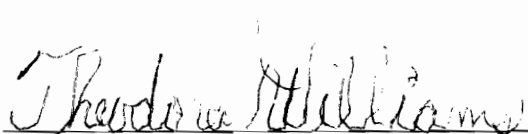
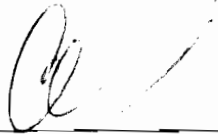
This amendment and all of its attachments are hereby made a part of the contract.

IN WITNESS THEREOF, the Parties hereto have caused this ^{5th} page amendment to be executed by their undersigned officials as duly authorized.

CONTRACTOR: Broward County

Areawide Council on Aging of Broward County, Inc.

BOARD PRESIDENT OR AUTHORIZED DESIGNEE



SIGNED BY:

SIGNED BY:

For. Alphonso Jefferson, Jr.
Bertha Henry

THEODORA WILLIAMS

NAME: Assistant County Administrator

NAME:

County Administrator

PRESIDENT

TITLE:

TITLE:

6/30/17

06-30-2017

DATE:

DATE:

FEDERAL ID NUMBER: 59-6000531

FISCAL YEAR-END DATE: September 30

Reviewed and approved as to form:
Joni Armstrong Coffey, County Attorney

By Karen S. Gordon
Karen S. Gordon, Assistant County Attorney



ATTACHMENT II

1. FEDERAL RESOURCES AWARDED TO THE SUBRECIPIENT PURSUANT TO THIS AGREEMENT CONSISTS OF THE FOLLOWING:

Program Title	Year	Funding Source	CFDA/ CSFA #	Amount
TOTAL FUNDS CONTAINED IN THIS CONTRACT:				

COMPLIANCE REQUIREMENTS APPLICABLE TO THE FEDERAL RESOURCES AWARDED PURSUANT TO THIS AGREEMENT ARE AS FOLLOWS:

2. STATE RESOURCES AWARDED TO THE RECIPIENT PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

MATCHING RESOURCES FOR FEDERAL PROGRAMS

PROGRAM TITLE	FUNDING SOURCE	CFDA	AMOUNT
TOTAL STATE AWARD			\$0

STATE FINANCIAL ASSISTANCE SUBJECT TO Sec. 215.97, F.S.

PROGRAM TITLE	FUNDING SOURCE	CSFA	AMOUNT
Home Care for the Elderly	General Revenue	65001	\$195,375.00
TOTAL AWARD			\$195,375.00

COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT TO THIS AGREEMENT ARE AS FOLLOWS:

STATE FINANCIAL ASSISTANCE
 Section 215.97, F.S.
 Chapter 69I-5, FL Admin Code

ATTACHMENT IV

HOME CARE FOR THE ELDERLY PROGRAM

BUDGET SUMMARY

FIXED SERVICES	TOTAL UNITS	UNIT RATE	TOTAL REIMBURSEMENT
HCE Case Management	3,227.25	\$ 60.54	\$ 195,375.00
TOTAL AGREEMENT AMOUNT			\$ 195,375.00

ATTACHMENT VI

**MEMORANDUM OF AGREEMENT
BETWEEN
AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.
AND BROWARD COUNTY
PERTAINING TO
HOME CARE FOR THE ELDERLY SUBSIDY SPENDING AUTHORITY**

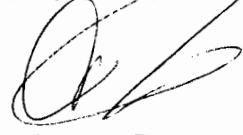
1. This Memorandum of Agreement replaces all prior agreements bearing on Home Care for the Elderly (HCE) spending authority.
2. HCE Spending Authority for the Areawide Council on Aging of Broward County, Inc., (the "Council") is **\$400,869.00** for the period beginning July 1, 2016 and ending June 30, 2017. The Council hereby delegates responsibility for the management of this spending authority to Broward County (the Contractor).
3. All expenditures authorized in excess of this spending authority will become the financial responsibility of the Contractor.
4. The Home Care for the Elderly program will pay basic and special subsidies in accordance with the guidelines outlined in the Department of Elder Affairs Programs and Services Manual.

This Memorandum of Agreement will be in effect on July 1, 2016 through June 30, 2017, or until otherwise revised or terminated.

CONTRACTOR: Broward County

**Areawide Council on Aging of
Broward County, Inc.**

BOARD PRESIDENT OR AUTHORIZED
DESIGNEE



SIGNED BY:

Alphonso Jefferson, Jr.

For Bertha Henry

NAME: Assistant County Administrator

County Administrator

TITLE:

6/30/17

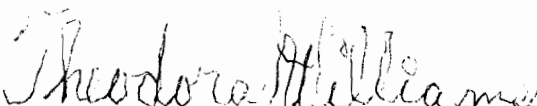
DATE:

FEDERAL ID NUMBER: 59-6000531

FISCAL YEAR END DATE: September 30

Reviewed and approved as to form:
Joni Armstrong Coffey, County Attorney

By 
Karen S. Gordon, Assistant County Attorney



SIGNED BY:

THEODORA WILLIAMS

NAME:

PRESIDENT

TITLE:

06-30-2017

DATE:

