



AGREEMENT SUMMARY

1. Other Contracting Party:
FLORIDA NETWORK OF CHILDREN'S ADVOCACY CENTERS (FNCAC)

2. Proposed Action:
[X] New Contract [ ] Amendment, Number [ ] Renewal [ ] Extension

3. Document Type (select one):
License Plate and Voluntary Contributions Award

4. Purpose/Description:
Provides funding to train staff in support of services for child abuse victims and/or their non-offending family members at the Nancy J. Cotterman Center (NJCC).

5. Special Provisions (select if applicable):
[ ] Living Wage Program [ ] SBE Sheltered Market Program
[ ] Workforce Investment Pilot Program [ ] M/WBE Program
[ ] Federal DBE/ACDBE program [ ] In-Kind Match Required: \$ \_\_\_\_ or \_\_\_\_ %
[ ] CBE Program [ ] Cash Match Required: \$ \_\_\_\_ or \_\_\_\_ %

6.a. Effective Dates (for new agreements only):

Start : July 1, 2017
End: June 30, 2018

6.b. Effective Dates (amendments only):

[ ] No Change
[ ] End date has changed from \_\_\_\_ to \_\_\_\_
[ ] Term has from to

7. Contract Administrator:

Name: Mandy Wells
Phone: 954-357-6398

8. Contract Type:

[ ] Cost reimbursement [ ] Open-end
[X] Firm fixed price [ ] Time and materials
[ ] Performance-based [ ] Other

9.a. Contract Value (new contracts)

Table with 2 columns: Description, Amount. Includes Actual/Estimated checkboxes and rows for Base amount, Reimbursables, Optional Services, Total contract value.

9.b. Contract Value (amendments only)

Table with 2 columns: Description, Amount. Includes No change/Actual/Estimated checkboxes and rows for Original approved contract value, Approved previous adjustments, Value of this action, Amended total contract value.

10. Payment Method

[X] Lump Sum Payment
[ ] Milestone or Progress-Based
[ ] Scheduled or Time-Based
[ ] Other

11. Payment Terms

Payment under the terms of this agreement is made upon execution of the agreement for the full amount.

12. Cost Adjustment

[X] Not Applicable [ ] Fixed Percentage - \_\_\_\_% [ ] Actual Cost
[ ] CPI or other Index [ ] Fixed Amount - \$ \_\_\_\_ [ ] Other:

13. Equity Program Participation Summary

a. County established M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal for this action or project: NA
b. Contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: NA
c. M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: NA

14. Renewal or Extension Terms:

NONE

15. Termination and Cancellation Provisions

For Cause: NONE SPECIFIED
For Convenience: NONE SPECIFIED

16. Deliverables, milestones or scope of this action:

Training of staff.

17. List terms, considerations or deviations from standard county form.

None