



AGREEMENT SUMMARY

1. Other Contracting Party:

AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.

2. Proposed Action:

- New Contract, Amendment, Number 1, Renewal, Extension

3. Document Type (select one):

Grant Agreement

4. Purpose/Description:

Amendment 1 to expand available funds by \$332,175, from \$5,806,272 to \$6,138,447, for the administration of the Community Care for the Elderly (CCE) Program...

5. Special Provisions (select if applicable):

- Living Wage Program, Workforce Investment Pilot Program, Federal DBE/ACDBE program, CBE Program, SBE Sheltered Market Program, M/WBE Program, In-Kind Match Required, Cash Match Required: \$682,050

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

Start: End:

6.b. Effective Dates (amendments only):

- No Change, End date has changed from, Term has from to

7. Contract Administrator:

Name: Andrea Busada, Phone: 954-357-6622

8. Contract Type:

- Cost reimbursement, Firm fixed price, Performance-based, Open-end, Time and materials, Other

9.a. Contract Value (new contracts)

- Actual, Estimated

Table with 2 columns: Description, Value. Rows: Base amount, Reimbursables, Optional Services, Total contract value

9.b. Contract Value (amendments only)

- No change, Actual, Estimated

Table with 2 columns: Description, Value. Rows: Original approved contract value (\$5,806,272), Approved previous adjustments, Value of this action (\$332,175), Amended total contract value (\$6,138,447)

10. Payment Method

- Lump Sum Payment, Milestone or Progress-Based, Scheduled or Time-Based, Other

11. Payment Terms

County submits monthly invoices for reimbursement of fixed rate services, and invoices for "cost reimbursement" designated services.

12. Cost Adjustment

- Not Applicable, CPI or other Index, Fixed Percentage, Fixed Amount, Actual Cost, Other

13. Equity Program Participation Summary

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

14. Renewal or Extension Terms:

RENEWABLE

15. Termination and Cancellation Provisions

For Cause: THE COUNCIL BY WRITTEN NOTICE MAY TERMINATE AGREEMENT UPON NO LESS THAN TWENTY-FOUR (24) HOURS NOTICE.
For Convenience: BY EITHER PARTY UPON NO LESS THAN THIRTY (30) CALENDAR DAYS NOTICE, WITHOUT CAUSE, UNLESS A LESSER TIME IS MUTUALLY AGREED BY BOTH PARTIES IN WRITING.

16. Deliverables, milestones or scope of this action:	County is reimbursed for the provision of services within the Community Care for the Elderly Program.
17. List terms, considerations or deviations from standard county form.	This Amendment is in the State of Florida's standard contract format. Areawide Council on Aging of Broward County, Inc., acting on behalf of the State of Florida will sign last, following County's signature.