

BOARD OF COUNTY COMMISSIONERS, BROWARD COUNTY, FLORIDA

AGREEMENT SUMMARY

EXHIBIT 1

1. Other Contracting Party: AREAWIDE COUNCIL ON AGING OF BRO	WARD COUNTY, INC.				
2. Proposed Action:		3. Document Type (select one):			
□ New Contract] Renewal	Grant Agreement Alzheir	ner's Disease Initiative		
☐ Extension		Program			
4. Purpose/Description:					
To update contract language and intr	oducing new attachme	ent about co-payr	ments for the administrat	ion of the Alzheimer's	
Disease Initiative (ADI) Program.	!: - -\				
5. Special Provisions (<i>select if apple</i>	iicabie):	CDE CL. II	LM L . D		
Living Wage Program		SBE Sheltered Market Program			
Workforce Investment Pilot Progr		M/WBE Program			
Federal DBE/ACDBE program		☐ In-Kind Match Required: \$ or % ☐ Cash Match Required: \$ or %			
CBE Program			or%		
6.a. Effective Dates (for new agree		e Dates (<i>amendments d</i>	oniy):		
Start :			⊠ No Change — — — — — — — — — — — — — — — — —		
End:		☐ End date	☐ End date has changed from to		
		☐ Term ha	s from to		
7. Contract Administrator:		8. Contract	Туре:		
Name: Andrea Busada					
Phone: <u>954-357-6622</u>					
		☐ Performa	ance-based 🔲 🤇	Other	
9.a. Contract Value (new contracts)		9.b. Contract	t Value (<i>amendments o</i>	only)	
☐ Actual ☐ Estimated			ge 🗌 Actual	Estimated	
Base amount		Original a	pproved contract value		
Reimbursables		Approve	d previous adjustments		
Optional Services			Value of this action		
Total contract value		Ameno	ded total contract value		
10. Payment Method	11. Payment Terms	1			
Lump Sum Payment	COUNTY BILLS AREAWIDE COUNCIL ON AGING OF BROWARD COUNTY, INC.				
☐ Milestone or Progress-	MONTHLY FOR SERVICES PROVIDED.				
Based					
Scheduled or Time-Based					
Other					
12. Cost Adjustment					
Not Applicable ■	☐ Fixed Percentage% ☐ Actual Cost				
CPI or other Index Fixed Amount - \$ Other:					
13. Equity Program Participation S		π Ψ	other.		
. , , , .	•	RF participation	goal for this action or pro	niect: N/A	
 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: 15. Termination and Cancellation Provisions				isions	
		or Cause: The Council by written notice may terminate agreement			
UPO		PON NO LESS THAN TWENTY FOUR (24) HOURS' NOTICE.			
			or Convenience: By either party upon no less than thirty (30) LENDAR DAYS' NOTICE, WITHOUT CAUSE, UNLESS A LESSER TIME IS		
			PON BY BOTH PARTIES IN WRIT		
16. Deliverables, milestones or sco		unty is reimbursed for providing services to clients within the			
io. Deliverables, fillestolles of sco		heimer's Disease Initiative (ADI) which links clients suffering			

	from memory disorders with needed assistance by way of respite care and support services to their caregivers.
17. List terms, considerations or deviations from standard county form.	This Amendment is the in the State of Florida standard contract format. Areawide Council on Aging, acting on behalf of the State of Florida, will sign last following County's signature.

Rev. 1/1/15