

### STATE OF CONNECTICUT

### DEPARTMENT OF SOCIAL SERVICES

55 FARMINGTON AVENUE - HARTFORD, CONNECTICUT 06105-5033

8-8-16

Bernard Beaudreau President/CEO Connecticut Food Bank, Inc. 2 Research Parkway Wallingford, CT .06492

CONTRACT #: 15DSS4501FS / 093CFB-EFP-12 PERIOD: 2/1/2015 To 9/30/2017

AMOUNT: \$198,206.00 AMENDMENT: A1

Dear Mr. Beaudreau:

I am pleased to inform you that the above referenced amendment has been fully executed and approved. Attached is a scanned copy of the amendment for your files.

Requests for Payment should be completed and directed to the program contact identified below. The Department will process requests for payment in accordance with the terms of the contract. Your receipt of payment is contingent upon the continued availability of funds and your agency's compliance with the terms of the contract.

For issues or concerns related to the Program please direct your inquiries to:

### **PROGRAM**

Jana Engle (860) 424-5429 jana.engle@ct.gov

### CONTRACT

Tina McGill (860) 424-5082 tina.mcgill@ct.gov

Sincerely,

Roderick L. Bremby Commissioner

C: Jana Engle

Marc Shok

Contract file



# STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

### **CONTRACT AMENDMENT**

Contractor: Connecticut Food Bank, Inc.

Contractor Address: P.O. Box 8686, New Haven, CT 06531

Contract Number: 093CFB-EFP-12/15DSS4501FS

Amendment Number: A1

**Amount as Amended:** \$198,206.00

Contract Term as Amended: 2/1/2015 9/30/2017

The contract between Connecticut Food Bank, Inc. ("Contractor") and the Connecticut Department of Social Services "Department", which was last executed by the parties on 4/22/15 is hereby amended as follows:

- 1. Part I, Section I. 1. Budget and Payment Provisions of the original contract is amended because the total maximum amount payable under this contract has increased by \$114,253.00 from \$83,953.00 to \$198,206.00. The increase is due to the receipt of additional federal funding through the Commodity Supplemental Food Program (CSFP) for federal fiscal year 2016.
- 2. The budget on page 13 of the original contract is deleted and replaced by the budget on page 2 of this amendment.

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.

### PART I

### FINANCIAL SUMMARY: CONNECTICUT FOOD BANK

PROGRAM NAME:	Commodity Supplemental Food Program (CSFP)
PROGRAM NUMBER:	#093-EFP-12/15DSS4501FS A1

•		Requested	Adjustments	Approved
Contract Amount	tract Amount ACTUAL \$83,953			\$
For Amendmer	For Amendments Only		IC	
Previously Approved Co	ontract Amount			
Amount of Amendment		·	\$114,253 \$198,20	
				•
ine <sup>L</sup> Item	Subcategory (a)	FY2015 (b)	FY2016 (c)	Total Contract (d)
1 <u>UNIT RATE</u>			, .	
1a. Bed Days			,,	\$ -
1b. Client Advocate				\$ -
1c. Security Deposit				

#	Item	Subcategory (a)	FY2015 (b)	FY2016 (c)	Total Contract (d)
1	UNIT RATE				
	1a. Bed Days				\$ -
	1b. Client Advocate				\$ -
	1c. Security Deposit				\$ -
	1d. Other Unit Rate Costs				\$ -
	TOTAL UNIT RATE		\$ -	\$ -	\$ -
2	CONTRACTUAL SERVICES				,
	2a. Accounting				\$ -
	2b. Legal				\$ -
	2c. Independent Audit		\$ 1,329.00	\$ 2,215.00	\$ 3,544.00
	2d. Other Contractual Services				\$ -
	TOTAL CONTRACTUAL SERVICES		\$1,329.00	\$2,215.00	\$ 3,544.00
3	<u>ADMINISTRATION</u>		3		
	3a. Admin. Salaries		\$ 8,386.89	\$ 12,163.80	\$ 20,550.69
	3b. Admin. Fringe Benefits		\$ 1,056.40	\$ 1,110.36	\$ 2,166.76
	3c. Admin. Overhead		\$ 2,360.11	\$ 4,101.40	\$ 6,461.51
	TOTAL ADMINISTRATION		\$11,803.40	\$17,375.56	\$ 29,178.96
4	DIRECT PROGRAM STAFF				
	4a. Program Salaries		\$ 27,668.54	\$ 37,606.65	\$ 65,275.19
	4b. Program Fringe Benefits		\$ 7,040.36	\$ 9,284.26	\$ 16,324.62
	TOTAL DIRECT PROGRAM		\$34,708.90	\$46,890.91	\$ 81,599.81
5	OTHER COSTS				
	5a. Program Rent				\$ -
	5b. Consumable Supplies		\$ 7,200.00	\$ 10,282.50	\$ 17,482.50
	5c. Travel & Transportation		\$ 8,275.20	\$ 11,585.28	\$ 19,860.48
	5d. Utilities		\$ 8,772.00	\$ 11,403.60	\$ 20,175.60
	5e. Repairs & Maintenance		\$ 7,364.50	\$ 8,830.30	\$ 16,194.80
	5f. Insurance		\$ 4,500.00	\$ 5,670.00	\$ 10,170.00
	5g. Food & Related Costs				\$ - \$ -
	5h. Other Project Expenses TOTAL OTHER COSTS		\$36,111.70	\$47,771.68	\$ 83,883.38
^					
6	EQUIPMENT				\$ -
7	PROGRAM INCOME				
	7a. Fees				\$ -
	7b. Other Income				\$ -
	TOTAL PROGRAM INCOME		0		\$ -
		1	i	1	

8 <u>TOTAL NET PROGRAM COST</u> (Sum of 1 through 6, minus Line 7) 83,953

114,253

198,206

### ACCEPTANCES AND APPROVALS

14DSS4501FS/ 093CFB-EFP-11 A1

CONTRACTOR Connecticut Food Bank, Inc.	
Mund Bluke	_ 5 / 31 / 2016
Bernard Beaudreau, President and CEO	Date
DEPARTMENT OF SOCIAL SERVICES	
Hum X Ba	7,26,16
RODERICK L. BREMBY, Commissioner	Date
OFFICE OF THE ATTORNEY GENERAL	
	8/8/16
ASST. / ASSOC. ATTORNEY GENERAL (Approved as to form)	Date



## STATE OF CONNECTICUT

### NONDISCRIMINATION CERTIFICATION — Affidavit

By Entity

For Contracts Valued at \$50,000 or More

Documentation in the form of an <u>affidavit signed under penalty of false statement by a chief executive officer, president, chairperson, member, or other corporate officer duly authorized to adopt corporate, company, or partnership policy that certifies the contractor complies with the nondiscrimination agreements and warranties under Connecticut General Statutes §§ 4a-60(a)(1) and 4a-60a(a)(1), as amended</u>

	certifies the contractor complies with the nondiscrimination agreements and warranties $eral\ Statutes\ \S\S\ 4a-60(a)(1)\ and\ 4a-60a(a)(1),\ as\ amended$	
INSTRUCTIONS:		
the State of Connecticut	poration, limited liability company, or partnership) when entering into any contract type w valued at \$50,000 or more for any year of the contract. Complete all sections of the form e of a Commissioner of Superior Court or Notary Public. Submit to the awarding State age on.	١.
AFFIDAVIT:		
I, the undersigned, am o	over the age of eighteen (18) and understand and appreciate the obligations of	
an oath. I am Bernard B	Beaudreau, President/CEO of Connecticut Food Bank an entity	
duly formed and existing	under the laws of <u>Connecticut</u> .	
I certify that I am author	rized to execute and deliver this affidavit on behalf of	
Connecticut Food Bank	and that Connecticut Food Bank has a policy in place that complies with the	
nondiscrimination agreer	ments and warranties of Connecticut	
General Statutes §§ 4a-6	50(a)(1)and 4a-60a(a)(1), as amended.	
Bund 115	and	
Authorized Signatory		
Bernard Beaudreau Printed Name		
Sworn and subscribed	to before me on this <u>31</u> day of <u>May</u> , 20 <u>16</u> .	
AVHR A	A- 5.21.30/2	
Commissioner of the S Notary Public	Superior Court/ Commission Expiration Date	



### STATE OF CONNECTICUT GIFT AND CAMPAIGN CONTRIBUTION CERTIFICATION

Written or electronic certification to accompany a State contract with a value of \$50,000 or more, pursuant to C.G.S. §§ 4-250, 4-252(c) and 9-612(f)(2) and Governor Dannel P. Malloy's Executive Order 49.

#### INSTRUCTIONS:

Complete all sections of the form. Attach additional pages, if necessary, to provide full disclosure about any lawful campaign contributions made to campaigns of candidates for statewide public office or the General Assembly, as described herein. Sign and date the form, under oath, in the presence of a Commissioner of the Superior Court or Notary Public. Submit the completed form to the awarding State agency at the time of initial contract execution and if there is a change in the information contained in the most recently filed certification, such person shall submit an updated certification either (i) not later than thirty (30) days after the effective date of such change or (ii) upon the submittal of any new bid or proposal for a contract, whichever is earlier. Such person shall also submit an accurate, updated certification not later than fourteen days after the twelve-month anniversary of the most recently filed certification or updated certification.

CHECK ONE:	☑ Initial Certification	☐ 12 Month Anniversary Update (Multi-year contracts only
		because of change of information contained in the most certification or twelve-month anniversary update.

#### **GIFT CERTIFICATION:**

As used in this certification, the following terms have the meaning set forth below:

- 1) "Contract" means that contract between the State of Connecticut (and/or one or more of it agencies or instrumentalities) and the Contractor, attached hereto, or as otherwise described by the awarding State agency below;
- 2) If this is an Initial Certification, "Execution Date" means the date the Contract is fully executed by, and becomes effective between, the parties; if this is a twelve-month anniversary update, "Execution Date" means the date this certification is signed by the Contractor;
- "Contractor" means the person, firm or corporation named as the contactor below;
  "Applicable Public Official or State Employee" means any public official or state employee described in C.G.S.  $\S4-252(c)(1)(i)$  or (ii); "Gift" has the same meaning given that term in C.G.S.  $\S$  4-250(1);
- "Principals or Key Personnel" means and refers to those principals and key personnel of the Contractor, and Its or their agents, as described in C.G.S. §§ 4-250(5) and 4-252(c)(1)(B) and (C).

I, the undersigned, am a Principal or Key Personnel of the person, firm or corporation authorized to execute this certification on behalf of the Contractor. I hereby certify that, no gifts were made by (A) such person, firm, corporation, (B) any principals and key personnel of the person firm or corporation who participate substantially in preparing bids, proposals or negotiating state contracts or (C) any agent of such, firm, corporation, or principals or key personnel who participates substantially in preparing bids, proposals or negotiating state contracts, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for state contracts who participates substantially in the preparation of bid solicitations or request for proposals for state contracts or the negotiation or award of state contracts or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency.

I further certify that no Principals or Key Personnel know of any action by the Contractor to circumvent (or which would result in the circumvention of) the above certification regarding Gifts by providing for any other Principals, Key Personnel, officials, or employees of the Contractor, or its or their agents, to make a Gift to any Applicable Public Official or State Employee. I further certify that the Contractor made the bid or proposal for the Contract without fraud or collusion with any person.

#### **CAMPAIGN CONTRIBUTION CERTIFICATION:**

I further certify that, on or after January 1, 2011, neither the Contractor nor any of its principals, as defined in C.G.S. § 9-612(f)(1), has made any **campaign contributions** to, or solicited any contributions on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support, any candidate for <u>statewide public office</u>, in violation of C.G.S. § 9-612(f)(2)(A). I further certify that **all lawful campaign contributions** that have been made on or after January 1, 2011 by the Contractor or any of its principals, as defined in C.G.S. § 9-612(f)(1), to, or solicited on behalf of, any exploratory committee, candidate committee, political committee, or party committee established by, or supporting or authorized to support any candidates for <u>statewide public office</u> or the <u>General Assembly</u>, are listed below:

Lawful Cam	paign Contributions to Candid	lates for Statewide Public	c Office:		
Contribution Date N	ame of Contributor	Recipient	<u>Value</u>	Description	
N/A					
Lawful Cam	paign Contributions to Candid	lates for the General Ass	embly:		
Contribution					
<u>Date</u>	Name of Contributor F	Recipient	Value	Description	
N/A					
	e to the best of my knowledge ar		,		
	eau, President and CEO		Beaudreau,		
Printed Contractor  Man A  Signature of Auth	Sum	Printed N	lame of Autho	orized Offici	al
		T.			
Subscribed and acknowledged before me this 31 day of May, 2016					
		Commissioner of the Si	uperior Court	(or Notary	Public)
		5/13/19			
		My Commission Expires	3		



### STATE OF CONNECTICUT CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a bid or proposal for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b). For sole source or no bid contracts the form is submitted at time of contract execution.

#### INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of

the Superior Court or Notary Public. Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution. This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier. [Number of Affidavits Sworn and Subscribed On This Day: \_\_\_ AFFIDAVIT: I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, except for the agreement listed below: Name of Firm (if applicable) Consultant's Name and Title Cost **End Date** Start Date Description of Services Provided: □ NO Is the consultant a former State employee or former public official? ☐ YES If YES: Name of Former State Agency Termination Date of Employment Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement. Signature of Principal or Key Personnel Printed Name of Bidder or Contractor Bernard Beaudreau, President and CEO Awarding State Agency Printed Name (of above)

Sworn and subscribed before me on this \_\_\_31 Commissioner of the Superior Court or Notary Public

My Commission Expires



STATE OF CONNECTICUT

Written or electronic PDF copy of the written certification to accompany a large state contract pursuant to P.A. No. 13-162 (Prohibiting State Contracts With Entities Making Certain Investments In Iran)

Charge	,	
Respondent N	ame: Connecticut Food Bank	
INSTRUCTIONS:		
CHECK ONE:	Initial Certification. Amendment or renewal.	
contract, as defined in se	<b>e and submit this form.</b> Effective October 1, 2013, this form <u>must</u> be submitted for any ection 4-250 of the Connecticut General Statutes. This form must always be submitted with no bid process, with the resulting contract, regardless of where the principal place of busin	the bid or
form must be complet nonprofit organization of United States subsidiarie	162, upon submission of a bid or prior to executing a large state contract, <b>the certification ed</b> by any corporation, general partnership, limited partnership, limited liability partnership other business organization <b>whose principal place of business is located outside of t</b> is of foreign corporations are exempt. For purposes of this form, a "foreign corporation" is ced outside the United States of America.	joint venture, ne United States.
Check applicable box:		
corporation, Respon	cipal place of business is within the United States or Respondent is a United States subsidia dents who check this box <b>are not required to complete the certification portion of thi</b> h its Invitation to Bid ("ITB"), Request for Proposal ("RFP") or contract package if there was	s form, but must
corporation. CERTI	cipal place of business is outside the United States and it is not a United States subsidiary FICATION required. Please complete the certification portion of this form and submit it will package if there was no bid process.	
B. Additional definitio	ns.	
2) "Respondent" means	" has the same meaning as defined in section 4-250 of the Connecticut General Statutes; the person whose name is set forth at the beginning of this form; and quasi-public agency" have the same meanings as provided in section 1-79 of the Connecticu	t General Statutes.
C. Certification requir	ements.	
Respondent whose princ	-public agency shall enter into any large state contract, or amend or renew any such contra pal place of business is located outside the United States and is not a United States subsidi espondent has submitted this certification.	act with any ary of a foreign
	this certification and sign and date it, under oath, in the presence of a Commissioner of the authorized to take an oath in another state.	e Superior Court, a
CERTIFICATION:		
I, the undersigned, am	he official authorized to execute contracts on behalf of the Respondent. I certify that:	
	le no direct investments of twenty million dollars or more in the energy sector of Iran on ction 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 2010	or after October 1,
2013, as described in S	made direct investments of twenty million dollars or more in the energy sector of Iran on ection 202 of the Comprehensive Iran Sanctions, Accountability and Divestment Act of 20 t prior to October 1, 2013 and has now increased or renewed such an investment on or after	10, or Respondent
Sworn as true to the bes	t of my knowledge and belief, subject to the penalties of false statement.	
Connecticut Food Bank Printed Respondent N	Bernard Beaudreau, President and CEO  Printed Name of Authorized Offi	cial
18 und St	Chur-	
Signature of Authoriz	ed Official	•
Subscribed and acknowledge	wledged before me this <u>31</u> day of <u>May</u> , 20 <u>16</u> .	
Commissioner of the	Superior Court (or Notary Public)	
5-31-19		
My Commission Expi	re	

#### **WORKFORCE ANALYSIS** Contractor Connecticut Food Bank, Inc. Number of Connecticut Employees Part-time: Full-time: Address P.O. Box 8686, New Haven, CT .06531 Employment figures obtained from Employment Records Visual Check Contractor «ContractorOrg»¶ Number Other WHITE BLACK AMER. INDIAN PERSON WITH ASIAN OR **JOB PACIFIC** OR ALASKAN DISABILITIES CATEGORIES HISPANIC TOTALS (Not of Hispanic (Not of Hispanic NATIVE ISLANDER Origin) Origin) Female Male Male Female Male Female Male Female Officials & 18 10 Managers Professionals × 6 1 Technicians Service Workers Ì Office & Clerical 2 Craft Workers (Skilled) Operators (Semi-6 6 1 Skilled) Laborers (Unskilled) **TOTALS** 3 7 58 14 23 8 Totals One Year Ago FORMAL ON-THE-JOB-TRAINEES Apprentices Trainees 1. Have you successfully implemented an Affirmative Action Plan? If yes, date of implementation Do you promise to develop and implement a successful Affirmative Action Plan? N/A Explain: No 🗌 Yes 🔲 2. Have you successfully developed an apprenticeship program complying with Sec. 46a-68-1 to 46a-68-17 of the Connecticut Department of Labor Regulations, inclusive: N/A 🔲 Explain: Yes No No 3. According to EEO-1 data, is the composition of your work force at or near parity when compared with the racial and sexual composition of the work force in the relevant labor market area? Explain: Yes No

Authorized Signature: Date: 5/31/2016

4. If you plan to subcontract, will you set aside a portion of the contract for legitimate minority business enterprises?