

STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor:

END HUNGER CONNECTICUT INC.

Contractor Address:

65 HUNGERFORD STREET, HARTFORD, CT 06106

Contract Number:

064EHC-FSP-11/14DSS4711JF

Amendment Number:

A 21

Amount as Amended:

\$76,611.50

Contract Term as Amended:

10/01/14 - 03/31/16

The contract between End Hunger Connecticut Inc. (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved the office of the Attorney General on 01/20/2015 is hereby further amended as follows:

The total maximum amount payable under this contract is increased by \$23,708.00 from \$52,903.00 to \$76,611.00 for the period 04/01/2015 through 09/30/2015 due to the receipt of additional SNAP outreach funding.

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The contract term is increased extended from 09/30/2015 to 03/31/20156.

The budget on page 11 of original contract is deleted in its entirety and replaced by the budget on page 2 of this amendment.

10/9/2015 FINANCIAL JIMMARY

PROGRAM NAME: PROGRAM NUMBER:

End Hunger Connecticut, Inc. SNAP Outreach
064EHC-FSP-11 / 14DSS4711JF

	Requested		Adjustments		Approved
Contract Amount	\$	52,903	\$	23,708	\$
For Amendments Only					
Previously Approved Contract Amount			\$	23,709	
Amount of Amendment					

Line #	Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (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	1,050.00		5	1,050.00
	2c. Independent Audit	1,875.00			1,875.00
	2d. Other Contractual Services	594.00			594.00
	TOTAL CONTRACTUAL SERVICES		3,519.00		3,519.00
3	ADMINISTRATION 3a. Admin. Salaries	3,475.00	n -	2,812.40	6,287.40
	3b. Admin. Fringe Benefits	1,263.17		881.71	2,144.88
	3c. Admin. Overhead	¥			
	TOTAL ADMINISTRATION		4,738.17	3,694.11	8,432.28
4	DIRECT PROGRAM STAFF 4a. Program Salaries 4b. Program Fringe Benefits	23,644.38 7,412.10		12,903.34 4,045.35	36,547.72 11,457.45
	TOTAL DIRECT PROGRAM		31,056.48	16,948.69	48,005.17
5	OTHER COSTS			4.055.00	2 022 20
	5a. Program Rent	2,568.00	-	1,255.20	3,823.20 1,868.75
	5b. Consumable Supplies	1,868.75 4,989.60	}		4,989.60
	5c. Travel & Transportation 5d. Utilities	2,934.00	 	1,810.00	4,744.00
	5e. Repairs & Maintenance	2,004.00		1,010100	
	5f. Insurance	500.00		Y .	500.00
	5g. Food & Related Costs				
	5h. Other Project Expenses	729.00			729.00
	TOTAL OTHER COSTS		13,589.35	3,065.20	16,654.55
6	EQUIPMENT				
7	PROGRAM INCOME 7a. Fees 7b. Other Income TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST	52,903.00	\$ 52,903.00	23,708.00	\$ 76,611.00
	(Sum of 1 through 6, minus Line 7)				

(Sum of 1 through 6, minus Line 7)

SIGNATURES AND APPROVALS 064EHC-FSP-11 / 14DSS4711JF A1

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

Documentation necessary to demonstrate the authorization to sign must be attached.

CONTRACTOR - END HUNGER CONNECTICUT INC.	
Lucy P. Nolan, Executive Director	9/28/2015 Date
DEPARTMENT OF SOCIAL SERVICES	
KATHLEEN M. BRENNAN, DEPUTY COMMISSIONER	09/30/15 Date
OFFICE OF THE ATTORNEY GENERAL	
Men Male	1929/15
ASST. / ASSOC. ATTORNEY GENERAL (Approved as to form)	Date (