OAG Template 18



STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor:

San Juan Center, Inc.

Contractor Address:

1283 Main Street, Hartford, CT 06103

Contract Number:

14SS1301WU / 064SJC-HHD-11-A1

Amendment Number:

One

Amount as Amended:

164,332

Contract Term as Amended: 10/01/14-9/30/16

The contract between San Juan Center and the Department of Social Services, which was executed by the parties and signed by the Office of the Attorney General on 10/22/14, is hereby amended as follows:

- 1. The total maximum amount payable under this contract is increased by \$80,188 from \$84,144 to \$164,332, which shall allow the Contractor to continue to HHD provide services during Federal Fiscal Year 2016.
- 2. The budget on page 11 of the original contract is deleted and replaced in its entirety by the budget on page 2 of this amendment.
- 3. The term of the contract is extended for an additional year and the end date of the contract is changed from 9/30/15 to 9/30/16.
- 4. With this funding, the Contractor shall provide education and training, employment, and information and referral services to an additional nine-hundred and fifty (950) clients.

This document constitutes an amendment to the above numbered contract. All provisions of that contract, except those explicitly changed above by this amendment, shall remain in full force and effect.

FINANCIAL SUMMARY

PROGRAM NAME: PROGRAM NUMBER:

SAN JUAN CEN	ER, INC.	
14DSS1301WU/064S.	IC-HHD-11 A1	_

	Requested		Adjustments		Approved
Contract Amount	\$	84,144			2
For Amendments Only					
Previously Approved Contract Amount					
Amount of Amendment			\$	80,188	-

Line #	ltem	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 2c. Independent Audit 2d. Other Contractual Services TOTAL CONTRACTUAL SERVICES				
3	ADMINISTRATION 3a. Admin. Salaries 3b. Admin. Fringe Benefits 3c. Admin. Overhead TOTAL ADMINISTRATION		,	- - - -	8
4	DIRECT PROGRAM STAFF 4a. Program Salaries 4b. Program Fringe Benefits TOTAL DIRECT PROGRAM	63,180 6,584	69,764	58,500 6,078 64,578	
5	OTHER COSTS 5a. Program Rent 5b. Consumable Supplies 5c. Travel & Transportation 5d. Utilities 5e. Repairs & Maintenance 5f. Insurance 5g. Food & Related Costs 5h. Other Project Expenses TOTAL OTHER COSTS	- 2,940 1,200 7,020 900 2,320 - -	14,380	2,940 1,200 8,250 900 2,320 0 - 15,610	
6	EQUIPMENT	-	-	2)	
	PROGRAM INCOME 7a. Fees 7b. Other Income TOTAL PROGRAM INCOME		y =		
	TOTAL NET PROGRAM COST (Sum of 1 through 6, minus Line 7)		84,144	80,188	164,332

ACCEPTANCES AND APPROVALS

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

CONTRACTOR			8
San Juan Center, Inc.		**************************************	me hannes
Contractor (Corporate/Legal Name of Contractor)			
Femals Beton	z ³ 6		9 129,15
Authorized Official (Signature)	8	**************************************	Date
Fernando Betancourt, Executive Director Name/Title	ALEXE CONTRACTOR OF THE	· .	E E
		*	
DEPARTMENT OF SOCIAL SERVICES	g g		* * * * * * * * * * * * * * * * * * *
RODERICK L. BREMBY Commissioner	Da	ute:	09/30/2005
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a e	¥:	EL.	a
OFFICE OF THE ATTORNEY GENERAL			*** *** ***
	· III II S S I I I I I I I I I I I I I I		10/21/15
ASST. ASSOC ATTORNEY GENERAL (Approved as	s to form & legal	sufficiency)	Date
V. *			260
This contract does not require the sign agreement between the Department and the	nature of the	e Attorney General,	l pursuant to an