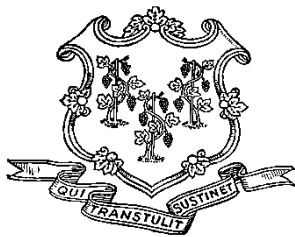


STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES



CONTRACT AMENDMENT

Contractor: Foodshare, Inc.
Contractor Address: 450 Woodland Avenue, Bloomfield, CT .06002
Contract Number: 15DSS4501KL / 011FS-EFP-12
Amendment Number: A2
Amount as Amended: \$169,114.00
Contract Term as Amended: 2/1/2015- 9/30/2017

The contract between Foodshare, Inc. (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved by the Office of the Attorney General on 3/17/2016, is hereby further amended as follows:

1. The total maximum amount payable under this contract is increased by \$70,646.00 from \$98,468.00 to \$169,114.00. The increase is due to receipt of increased federal funding through the Commodity Supplemental Food program for federal fiscal year 2017.
2. Part I, Section A.1. and D.1. in the original contract shall be amended to reflect an increase in the amount of low-income residents served from 800 to 1,000 effective 10/01/2016.
3. The budget on page 2 of amendment A1 is deleted and replaced in its entirety 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

PROGRAM NAME:
PROGRAM NUMBER:

CSFP October 1, 2016-September 30, 2017
011F-EPP-12/15DSS4501KL A2

| Contract Amount | Requested | Adjustments | Approved |
|--|------------------|--------------------|-------------------|
| <i>For Amendments Only</i> | | | |
| Previously Approved Contract Amount | \$ 98,468 | \$ 70,646 | |
| Amount of Amendment | | | \$ 169,114 |

| <i>Line #</i> | <i>Item</i> | Subcategory (a) | Line Item Total (b) | Adjustments (c) | Revised Total (d) |
|---------------|--|------------------------|----------------------------|------------------------|--------------------------|
| 1 | <u>UNIT RATE</u> | | | | |
| | 1a. Bed Days | | | | |
| | 1b. Client Advocate | | | | |
| | 1c. Security Deposit | | | | |
| | 1d. Other Unit Rate Costs | | | | |
| | TOTAL UNIT RATE | | | | |
| 2 | <u>CONTRACTUAL SERVICES</u> | | | | |
| | 2a. Accounting | 1,000 | | 500 | 1,500 |
| | 2b. Legal | | | | |
| | 2c. Independent Audit | | | | |
| | 2d. Other Contractual Services | | | | |
| | TOTAL CONTRACTUAL SERVICES | 1,000 | | 500 | 1,500 |
| 3 | <u>ADMINISTRATION</u> | | | | |
| | 3a. Admin. Salaries | 11,807 | | 10,297 | 22,104 |
| | 3b. Admin. Fringe Benefits | 2,674 | | 2,605 | 5,279 |
| | 3c. Admin. Overhead | | | | |
| | TOTAL ADMINISTRATION | 14,481 | | 12,902 | 27,383 |
| 4 | <u>DIRECT PROGRAM STAFF</u> | | | | |
| | 4a. Program Salaries | 48,909 | | 30,870 | 79,779 |
| | 4b. Program Fringe Benefits | 11,078 | | 9,939 | 21,017 |
| | TOTAL DIRECT PROGRAM | 59,987 | | 40,809 | 100,796 |
| 5 | <u>OTHER COSTS</u> | | | | |
| | 5a. Program Rent | | | | |
| | 5b. Consumable Supplies | 12,190 | | 8,341 | 20,532 |
| | 5c. Travel & Transportation | 1,862 | | 1,597 | 3,459 |
| | 5d. Utilities | 3,576 | | 2,821 | 6,397 |
| | 5e. Repairs & Maintenance | 4,172 | | 2,756 | 6,928 |
| | 5f. Insurance | 1,199 | | 920 | 2,119 |
| | 5g. Food & Related Costs | | | | |
| | 5h. Other Project Expenses | | | | |
| | TOTAL OTHER COSTS | 23,000 | | 16,435 | 39,435 |
| 6 | <u>EQUIPMENT</u> | | | | |
| 7 | <u>PROGRAM INCOME</u> | | | | |
| | 7a. Fees | | | | |
| | 7b. Other Income | | | | |
| | TOTAL PROGRAM INCOME | | | | |
| 8 | <u>TOTAL NET PROGRAM COST</u> (Sum of 1 through 6, minus Line 7) | \$ 98,468 | | \$ 70,646 | \$ 169,114 |

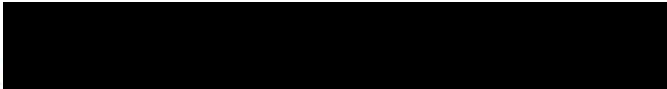
SIGNATURES AND APPROVALS

15DSS4501KL/011FS-EFP-12 A2

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

CONTRACTOR

Foodshare, Inc.



John J Hackendorn, Interim CEO and President

3 / 1 / 17

Date

DEPARTMENT OF SOCIAL SERVICES



RODERICK L. BREMBY, Commissioner

3 / 6 / 2017

Date

OFFICE OF THE ATTORNEY GENERAL



ASST / ASSOC. ATTORNEY GENERAL (Approved as to form)

Robert W Clark

3 / 03 / 17

Date