



STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT

Contractor: Jewish Federation Association of Connecticut, Inc.
Contractor Address: 40 Woodland Street, Hartford, CT .06105
Contract Number: 16DSS4801OJ / 064-1OJ-RAP-01
Amendment Number: A1
Amount as Amended: \$130,029.00
Contract Term as Amended: 10/1/2016 to 9/30/2019

The contract between Jewish Federation Association of Connecticut, Inc. . (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and approved by the Commissioner on 12/9/16, is hereby further amended as follows:

1. Through this amendment the FFY2017 allocation is increased by \$5,000 from \$43,343 to \$48,343. This represents an increase to the allocation for the first year of this three year contract. This funding will be used by the Contractor to increase the level of services supported through this agreement.
2. The respective Composite and Refugee Social Services Formula budgets on pages 14 and 15 of the original contract are hereby deleted and replaced by the respective budgets on pages 2 and 3 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

PROGRAM NAME:
PROGRAM NUMBER:

Refugee Assistance Program
Contract Amendment #16DSS4801OJ-A1 (Composite Budget) FFY 2017

Contract Amount	Requested	Adjustments	Approved
		\$ -	\$ -
<i>For Amendments Only</i>			
Previously Approved Contract Amount	\$ 43,343	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
Adjustments & New Contract Amount	XXXXXXXXXXXXXXXXXX	\$ 5,000	\$ 48,343

Line #	Item	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	1,150		111	1,261
	2b. Legal	-		-	-
	2c. Independent Audit	1,250		148	1,398
	2d. Other Contractual Services	4,050		997	5,047
	TOTAL CONTRACTUAL SERVICES		6,450	1,256	7,706
3	<u>ADMINISTRATION</u>				
	3a. Admin. Salaries	5,000		738	5,738
	3b. Admin. Fringe Benefits	1,127		123	1,250
	3c. Admin. Overhead	2,150		369	2,519
	TOTAL ADMINISTRATION		8,277	1,230	9,507
4	<u>DIRECT PROGRAM STAFF</u>				
	4a. Program Salaries	21,100		1,624	22,724
	4b. Program Fringe Benefits	1,600		148	1,748
	TOTAL DIRECT PROGRAM		22,700	1,772	24,472
5	<u>OTHER COSTS</u>				
	5a. Program Rent	-		-	-
	5b. Consumable Supplies	600		74	674
	5c. Travel & Transportation	1,400		172	1,572
	5d. Utilities	950		148	1,098
	5e. Repairs & Maintenance	650		86	736
	5f. Insurance	1,100		123	1,223
	5g. Food & Related Costs	216		16	232
	5h. Other Project Expenses	1,000		123	1,123
	TOTAL OTHER COSTS		5,916	742	6,658
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)		\$ 43,343	\$ 5,000	\$ 48,343

PART I

PROGRAM NAME:
PROGRAM NUMBER:

Refugee Assistance Program
Contract Amendment #16DSS4801OJ-A1 (RSS Formula) FFY 2017

	Requested	Adjustments	Approved
Contract Amount		\$ -	\$ -
<i>For Amendments Only</i>			
Previously Approved Contract Amount	\$ 20,316	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX
Adjustments & New Contract Amount	XXXXXXXXXXXXXXXXXX	\$ 5,000	\$ 25,316

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	450		111	561
	2b. Legal	-		-	-
	2c. Independent Audit	600		148	748
	2d. Other Contractual Services	4,050		997	5,047
	TOTAL CONTRACTUAL SERVICES		5,100	1,256	6,356
3	ADMINISTRATION				
	3a. Admin. Salaries	3,000		738	3,738
	3b. Admin. Fringe Benefits	500		123	623
	3c. Admin. Overhead	1,500		369	1,869
	TOTAL ADMINISTRATION		5,000	1,230	6,230
4	DIRECT PROGRAM STAFF				
	4a. Program Salaries	6,600		1,624	8,224
	4b. Program Fringe Benefits	600		148	748
	TOTAL DIRECT PROGRAM		7,200	1,772	8,972
5	OTHER COSTS				
	5a. Program Rent	-		-	-
	5b. Consumable Supplies	300		74	374
	5c. Travel & Transportation	700		172	872
	5d. Utilities	600		148	748
	5e. Repairs & Maintenance	350		86	436
	5f. Insurance	500		123	623
	5g. Food & Related Costs	66		16	82
	5h. Other Project Expenses	500		123	623
	TOTAL OTHER COSTS		3,016	742	3,758
6	EQUIPMENT		-	-	
7	PROGRAM INCOME				
	7a. Fees				
	7b. Other Income				
	TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST		\$ 20,316	\$ 5,000	\$ 25,316
	(Sum of 1 through 6, minus Line 7)				

SIGNATURES AND APPROVALS

16DSS4801OJ/064-10J-RAP-01 A1

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

CONTRACTOR

Jewish Federation Association of Connecticut, Inc.



Michael Bloom, Executive Director

4 / 27 / 17
Date

DEPARTMENT OF SOCIAL SERVICES



RODERICK L. BREMBY, *Commissioner*

5 / 1 / 2017
Date

X *This contract does not require the approval of the Attorney General pursuant to an agreement between the Department and the Office of the Attorney General, dated 12/29/2015.*