

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	_____	_____	_____	_____	_____

ADDITIONAL FTE POSITIONS (CUMULATIVE)

Is Item Included in Current Budget? Yes X No _____
 Budget Account No.: Fund 1002 Dept. 147 Unit 1457 Object 3401
 Program Code EH16

B. Recommended Sources of Funds/Summary of Fiscal Impact:

No Fiscal Impact

C. Departmental Fiscal Review.

BEW

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

<p><i>[Signature]</i> 4-4-07 88 4/4/07 OFMB/Budget pm 04/04/07 - CN 4/3/07</p>	<p><i>[Signature]</i> 4/6/07 Contract Development and Control 4/5/07</p>	<p>This amendment complies with our review requirements.</p>
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B. Legal Sufficiency:

[Signature] 4/9/07
 Assistant County Attorney

C. Other Department Review:

 Department Director

This summary is not to be used as a basis for payment.

AMENDMENT 001 TO EARLY HEAD START CONTRACTED SERVICES AGREEMENT

THIS AMENDMENT 001 TO EARLY HEAD START CONTRACTED SERVICES AGREEMENT dated September 12, 2006 (Document No. R2006 1890), made and entered into at West Palm Beach, Florida, on this day of _____, by and between Palm Beach County, a political subdivision of the State of Florida herein referred to as the COUNTY, and **Family Central, Inc.** herein referred to as the CHILD CARE PROVIDER.

WITNESSETH:

WHEREAS, the need exists to amend the AGREEMENT to provide language to clarify terms for payment to CHILD CARE PROVIDER.

NOW, THEREFORE, the above named parties hereby mutually agree that the AGREEMENT is hereby amended as follows:

So much as Exhibit B 1(A) reads:

"The CHILD CARE PROVIDER will be reimbursed for the full month care days and children as stated above in "Exhibit B" when the monthly average daily attendance rate is at 85% or greater"; is amended to read:

"The CHILD CARE PROVIDER will be reimbursed for the full month care days and children as stated above in "Exhibit B" when the monthly average daily attendance rate is 85% or greater. A child is considered enrolled (slot filled) up to 21 calendar days after officially terminated and the slot is not filled by another eligible child".

So much as Exhibit B 1(B) reads:

"The above schedule of services represents the maximum monthly total for services to 16 children and their families. Services at a lesser per month level will result in a proportional reduction in the amount of the monthly payment and subsequence maximum total"; is amended to read:

"The above schedule of services represents the maximum monthly total for services to 16 children and their families. In the event that the average daily attendance falls below 85%, the CHILD CARE PROVIDER must evaluate the cause and submit an explanation with their monthly reimbursement. The explanation will be evaluated on a case by case basis. Services at a less per month level could result in a proportional reduction in the amount of the monthly payment and subsequence maximum total".

OTHER PROVISIONS

All provisions in the Agreement or exhibits to the AGREEMENT in conflict with this Amendment to the AGREEMENT shall be and are hereby changed to conform to this Amendment.

All provisions not in conflict with the Amendment are still in effect and are to be performed at the same level as specified in the AGREEMENT.

IN WITNESS WHEREOF, the parties hereto have caused this 1 page Amendment to be executed by their officials thereupon duly authorized.

ATTEST:
Sharon R. Bock, Clerk & Comptroller

PALM BEACH COUNTY, FLORIDA
BY ITS BOARD OF COUNTY
COMMISSIONERS

By: _____
Deputy Clerk

By: _____
Addie L. Greene, Chairperson

WITNESS:

CHILD CARE PROVIDER:
FAMILY CENTRAL, INC.

By: Carol B. Taylor

By: 
Signature

Carol B. Taylor
Witness Name

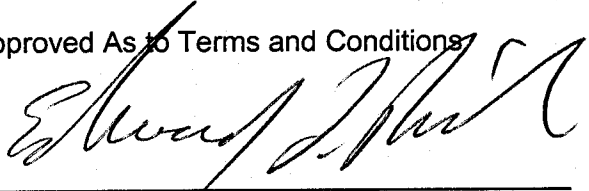
Title: CEO / president

Date: 3 / 24 / 07

Reviewed and Approved As to Form
and Legal Sufficiency

By: _____
County Attorney

Approved As to Terms and Conditions



Edward L. Rich, Department Head