PALM BEACH COUNTY **BOARD OF COUNTY COMMISSIONERS**

AGENDA ITEM SUMMARY

Meeting Date:	November 21, 2017	[X]	Consent	[] Regular
_	·	[]	Ordinance	[] Public Hearing
Department				
Submitted By:	Community Servi	ces		
Submitted For	Division of Senio	r Servi	ces	
	I	. EXEC	UTIVE BRIEF	

Motion and Title: Staff recommends motion to:

A) approve:

- 1. Amendment 002 to Standard Agreement No. IU016-9500 (R2015-1608) for Nutrition Services Incentive Program (NSIP) with the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. (AAA), for the period January 1, 2017, through December 31, 2017, to revise, amend, and replace portions of the standard agreement and to decrease overall total funding by \$75,582.09, to provide effective delivery of nutritious meals to seniors;
- 2. Amendment 004 to Standard Agreement No. IA016-9500 (R2016-0321) for Older Americans Act (OAA) with AAA, for the period January 1, 2017, through December 31, 2017, to revise, amend, and replace portions of the standard agreement and increase overall total funding by \$12,600, to provide in-home and community based services to seniors:
- 3. Amendment 006 to Standard Agreement No. IP015-9500 (R2015-1449) for Emergency Home Energy Assistance Program (EHEAP) with AAA, for the period April 1, 2017. through March 31, 2018, to revise and replace portions of the standard agreement, to provide home energy assistance to seniors; and
- 4. Amendment 007 to Standard Agreement No. IP015-9500 (R2015-1449) for Emergency Home Energy Assistance Program (EHEAP) with AAA, for the period April 1, 2016. through March 31, 2017, to revise, amend, and replace portions of the standard agreement and decrease overall total spending authority by \$8,784.15,to provide home energy assistance to seniors.
- B) approve Downward Budget Amendment of \$62,982 in the Division of Senior Services Administration Fund to align the budget to the actual grant award.

Summary: Grant adjustments are made during the contract year to align services with need. These amendments are necessary to incorporate changes made to the standard agreements. No additional County funds are required for these amendments. The Division of Senior Services (DOSS) is responsible for providing services north of Hypoluxo Rd. The areas of service include all districts, excluding portions of Districts 3, 4, 5 and 7 south of Hypoluxo Road. The Mae Volen Senior Center, Inc. is responsible for providing services in the areas south of Hypoluxo Rd. Sufficient funding is included in the budget to meet County obligations. (Division of Senior Services) Countywide except for portions of Districts 3, 4, 5, and 7 south of Hypoluxo Rd (HH).

Background and Justification: Funds are used to provide various in-home and community based services to older adults in Palm Beach County, which preserves their independence and defers the need for more costly institution care.

Attachments:

1. Amendments (4)

2. Budget Amendment

Recommended By:		11-7-17
	Øepartment Director	Date
Approved By:	Nancy & Bolton	11-16-17
	Assistant County Administrator	Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Capital Expenditures Operating Costs (61,582) External Revenue 62,982 Program Income In-Kind Match (County) NET FISCAL IMPACT # ADDITIONAL FTE POSITIONS (Cumulative) Item Included In Current Budget: yes this item include the use of federal funds? Yes X No diget Account No: and 1006 Dept 144 Unit 1458/1459 Object 3419 Program Code/Period Var. Recommended Sources of Funds/Summary of Fiscal Impact: Funding source is the Federal Government and Palm Beach County. No additional County funds are required for these amendments. Total Funding 1458 1459 Total Funds C1 C2 Funds Grant (2,400) Match (10%) (267) Match (10%) (267) Match (10%) (267) Total (30,790) (44,792) (75,582) Total Departmental Fiscal Review: Julie Bowe, Director, Financial & Support Svcs. III. REVIEW COMMENTS OFMB Fiscal and/or Contract Development and Control Comments:	Five Year Summary	<u> </u>	·		T	
Operating Costs (61,582) External Revenue 62,982 Program Income In-Kind Match (County) NET FISCAL IMPACT 1,400 # ADDITIONAL FTE POSITIONS (Cumulative) Item Included In Current Budget: Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest this item include the use of federal funds? Yes X No Dest	Fiscal Years	2017	2018	2019	2020	2021
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Assistant County Attorney	Funding source is the County funds are required. Total Funding Funds Grant Match (10%) NSIP Total Departmental Fiscal OFMB Fiscal and/or OFMB Fiscal and/or	Review: Julie [1458 C1 (2,400) (267) (30,790) (33,457) Dowe, Directo EVIEW COMM	1459 C2 15,000 1,667 (44,792) (28,125) 7, Financial 8 MENTS d Control Co	Funds 12,600 1,400 (75,582) (61,582) Support Svo	cs.
Assistant County Attorney	Funding source is the County funds are required. Total Funding Funds Grant Match (10%) NSIP Total Departmental Fiscal OFMB Fiscal and/or OFMB Fiscal and/or	Review: Julie [1458 C1 (2,400) (267) (30,790) (33,457) Dowe, Directo EVIEW COMM	1459 C2 15,000 1,667 (44,792) (28,125) 7, Financial 8 MENTS d Control Co	Funds 12,600 1,400 (75,582) (61,582) Support Svo	cs.
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Other Department Review:	Total Funding Funds Grant Match (10%) NSIP Total Departmental Fiscal OFMB Fiscal and/or OFMB Summer County Assistant County Attor	Review: Julie [III. Ri Contract Deve	1458 C1 (2,400) (267) (30,790) (33,457) Dowe, Directo EVIEW COMM	1459 C2 15,000 1,667 (44,792) (28,125) 7, Financial 8 MENTS d Control Co	Funds 12,600 1,400 (75,582) (61,582) Support Svo	cs.

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

Department Director

IU016-9500



THIS AMENDMENT, entered into between the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "Agency", and Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners hereinafter referred to as the "Provider", amends Agreement IU016-9500.

The purpose of this amendment is to decrease the overall total funding for the period January 1, 2017 through December 31, 2017 by \$75,582.09. Additionally, this amendment (1) amends paragraph 4 of the Standard Agreement; and (2) revises and replaces Attachment II.

STANDARD AGREEMENT:

(1) Paragraph 4 of the Standard Agreement is hereby amended to read:

4. Agreement Amount

The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed the Total Agreement Amount per funding year outlined below or the rate schedule, with expenditures to be based upon an approved annual budget, subject to adjustment in accordance with Attachment II and subject to the availability of funds. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this Agreement.

These funds are allocated for the period October 1, 2015 – December 31, 2016.

	Funding Allocation						
Pı	ogram Titl	е	Year	Funding Sources	CSFA	Amount	
Nutrition	Services	Incentive	2015-	Older Americans Act	93.053	\$251,931.27	
Program 2016							
TOTAL AC	GREEMEN	T AMOUN	T:			\$251,931.27	

These funds are allocated for the period January 1, 2017 through December 31, 2017.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Nutrition Services Incentive	2017	Older Americans Act	93.053	\$209,691.91
Program				
TOTAL AGREEMENT AMOU	ЛNT:			\$209,691.91

TOTAL AGREEMENT AMOUNT FOR FUNDING YEARS 2015-2016 AND	\$461,623.18
2017:	·

Amendment 002 IU016-9500

Service to be		Unit		Maximum
<u>Provided</u>	Units of Services	Rate	Maximum Units	Reimbursement
Eligible				
Congregate And	1 unit = 1 meal	0.72	349,905	\$251,931.27
Home Delivered				
Meals				
(10/1/15 -				
12/31/16)				

Service to be		<u>Unit</u>			<u>Maximum</u>
<u>Provided</u>	Units of Services	Rate	Maximum Units	_	Reimbursement
Eligible					
Congregate And	1 unit = 1 meal	0.72	291,240	*	\$209,691.91
Home Delivered					
Meals					
(1/1/17 - 12/31/17)					

 $^{{}^{*}}$ The .xx maximum reimbursement is the difference between the two rates using 12/31/16 YTD meals.

Amendment 002 IU016-9500

(2) Attachment II is revised and replaced with the following Attachment II.

ATTACHMENT II

 $1.\ FEDERAL\ RESOURCES\ AWARDED\ TO\ THE\ PROVIDER\ PURSUANT\ TO\ THIS\ AGREEMENT\ CONSIST\ OF$

THE FOLLOWING:

PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Nutrition Services Incentive Program	2016	FGTF	93.053	\$251,931.27
PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Nutrition Services Incentive Program	2017	FGTF	93.053	\$209,691.91

TOTAL FEDERAL AWARD FOR FUNDING YEARS 2015-2016 AND 2017:	\$461,623.18
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Amendment 002 IU016-9500

This Amendment shall be effective on the last date that the Amendment has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this Amendment shall be and are hereby changed to conform with this Amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the level specified in the Agreement.

This Amendment and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the Parties hereto have caused this 5 page Amendment to be executed by their officials there unto duly authorized.

Provider:

Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County

Commissioners

AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.

SIGNED BY: Mayor	SIGNED BY:
Mayor	
SHARON R. BOCK, Clerk and Comptroller	NAME:
BY: Deputy Clerk	TITLE:
DATE:	DATE:
Federal Tax ID: 59-6000785	
Fiscal Year Ending Date:	
Approved As To Form And Legal Sufficiency	
Assistant County Attorney	
Approved as to terms and conditions	
James E. Lien	-
Department Director	

Attestation Statement

Agreement/Contract Number: <u>IU016-9500</u>	
Amendment Number: <u>002</u>	
I,, Mayor, attest that no changes (Provider Representative)	s or revisions have been made to the
content of the above referenced agreement/contract or	amendment between the Area Agency on Aging
and Palm Beach County, a political subdivision of the	State of Florida by and through its Board of
County Commissioners. The only exception to this sta	tement would be for changes in
page formatting, due to the differences in electronic da	ata processing media, which has no effect on the
agreement/contract content.	
Signature of Provider Representative Mayor	Date
Approved As To Form And Legal Sufficiency	Attest: Sharon R. Bock Clerk and Comptroller
By:Assistant County Attorney	By: Deputy Clerk

IA016-9500

A-2

This AMENDMENT entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. hereinafter referred to as the "Agency", and Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners hereinafter referred to as the "Provider", and collectively referred to as "Parties" amends Agreement IA016-9500.

The purpose of this amendment is to increase the overall total funding for the period of January 1, 2017 through December 31, 2017 by \$12,600.00. Additionally, this amendment amends Paragraph 4, of the Standard Agreement; (2) amends Attachment II, Funding Source; and (3) amends Attachment IV, Budget Summary.

(1) Paragraph 4 of the Standard Agreement is hereby amended to read:

4. Agreement Amount

The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed the Total Agreement Amount per funding year outlined below or the rate schedule, with expenditures to be based upon an approved annual budget, subject to adjustment in accordance with Attachment IV and subject to the availability of funds. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this agreement.

These funds are allocated for the period January 1, 2016 - December 31, 2016

	Fundir	ig Allocation	And the state of	
Program Title	Year	Funding Sources	CFDA	Amount
Older Americans Act Title IIIB	2016	U.S. Dept. of	93.044	\$698,000.00
Support Services		Health and Human		
		Services		
Older Americans Act Title IIIB	2016	U.S. Dept. of	93.044	\$0.00
Transportation		Health and Human		
	,	Services		
Older Americans Act Title	2016	U.S. Dept. of	93.045	\$468,239.00
IIIC1 Congregate Meals		Health and Human		
		Services		
Older Americans Act Title	2016	U.S. Dept. of	93.045	\$581,107.00
IIIC2 Home Delivered Meals		Health and Human		
		Services		
Older Americans Act Title IIIE	2016	U.S. Dept. of	93.052	\$119,000.00
Caregiver Support Services		Health and Human		
·		Services		
Older Americans Act Title	2016	U.S. Dept. of	93.052	\$26,000.00
IIIES Caregiver Supplemental		Health and Human		
Services		Services		
Older Americans Act Title	2016	U.S. Dept. of	93.052	\$0.00
IIIEG Grandparent or Non-		Health and Human		
Parent Relative Support		Services		
Services				
TOTAL FUNDS CONTAINED	IN THIS A	GREEMENT:		\$1,892,346.00

AMENDMENT 004 IA016-9500

These funds are allocated for the period January 1, 2017 through December 31, 2017.

Program Title	Year	Funding Sources	CFDA	Amount
Older Americans Act Title IIIB	2017	U.S. Dept. of	93.044	\$698,000.00
Support Services		Health and Human		
		Services		
Older Americans Act Title IIIB	2017	U.S. Dept. of	93.044	\$0.00
Transportation		Health and Human		
		Services		
Older Americans Act Title	2017	U.S. Dept. of	93.045	\$465,839.00
IIIC1 Congregate Meals		Health and Human		
		Services		
Older Americans Act Title	2017	U.S. Dept. of	93.045	\$596,107.00
IIIC2 Home Delivered Meals		Health and Human		
		Services		
Older Americans Act Title IIIE	2017	U.S. Dept. of	93.052	\$119,000.00
Caregiver Support Services		Health and Human		
		Services		
Older Americans Act Title	2017	U.S. Dept. of	93.052	\$26,000.00
IIIES Caregiver Supplemental		Health and Human		
Services		Services		
Older Americans Act Title	2017	U.S. Dept. of	93.052	\$0.00
IIIEG Grandparent or Non-		Health and Human		
Parent Relative Support		Services		
Services				
TOTAL FUNDS CONTAINED	IN THIS A	GREEMENT.		\$1,904,946,00

TOTAL AGREEMENT AMO	OUNT FOR FUNDING YEARS 2016 AND	\$3,797,292.00
2017:		

(2) ATTACHMENT II of the Standard Agreement, Funding Source, is hereby replaced with the following ATTACHMENT II.

ATTACHMENT II

1. FEDERAL RESOURCES AWARDED TO THE PROVIDER PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

PROGRAM TITLE	YEAR	FUNDING	CFDA	AMOUNT
		SOURCE		
Older Americans Act	2016	U.S. Health and	93.044	\$1,892,346.00
Program Title III		Human Services	93.045	
			93.052	
PROGRAM TITLE	YEAR	FUNDING	CFDA	AMOUNT
		SOURCE		
Older Americans Act	2017	U.S. Health and	93.044	\$1,904,946.00
Program Title III		Human Services	93.045	
			93.052	
TOTAL FEDERAL AWARI	FOR FUNDIN	G YEARS 2016-2017,	and 2017-	\$3,797,292.00
2018:				

COMPLIANCE REQUIREMENTS APPLICABLE TO THE FEDERAL RESOURCES AWARDED PURSUANT TO THIS AGREEMENT ARE AS FOLLOWS:

FEDERAL FUNDS:

 $2\ CFR\ Part\ 200\ Uniform\ Administrative\ Requirements,\ Cost\ Principles,\ and\ Audit\ Requirement\ for\ Federal\ Awards.$

OMB Circular A-133 – Audit Requirements

Reference Guide for State Expenditures

2. STATE RESOURCES AWARDED TO THE PROVIDER PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

MATCHING RESOURCES FOR FEDERAL PROGRAMS

PROGRAM TITLE	FUNDING SOURCE	CFDA	AMOUNT
TOTAL STATE AWARD			

STATE FINANCIAL ASSISTANCE SUBJECT TO Sec. 215.97, F.S.

1	i

COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT TO THIS AGREEMENT ARE AS FOLLOWS:

STATE FINANCIAL ASSISTANCE

Section 215.97, Fla. Stat.

Chapter 69I-5, Fla. Admin. Code

(3) ATTACHMENT IV of the Standard Agreement, Budget Summary, is hereby replaced with the following ATTACHMENT IV

ATTACHMENT IV

BUDGET SUMMARY 2016

PSA: 9	Original
Provider: Palm Beach County, a political subdivision of the State of Florida	Amendment <u>004</u>
by and through its Roard of County Commissioners	

1.	IIIB Support Services	\$698,000.00
2.	IIIB Transportation	\$0.00
3.	IIIC1 Congregate Meals	\$468,239.00
4.	IIIC2 Home Delivered Meals	\$581,107.00
5.	IIIE Caregiver Support Services	\$119,000.00
6.	HIES Caregiver Supplemental Services	\$26,000.00
7.	HIEG Grandparent or Non-Parent Relative Support Services	\$0.00
8.	Total	\$1,892,346.00

BUDGET SUMMARY 2017

1.	IIIB Support Services	\$698,000.00
2.	IIIB Transportation	\$0.00
3.	IIIC1 Congregate Meals	\$465,839.00
4.	IIIC2 Home Delivered Meals	\$596,107.00
5.	IIIE Caregiver Support Services	\$119,000.00
6.	IIIES Caregiver Supplemental Services	\$26,000.00
7.	HIEG Grandparent or Non-Parent Relative Support Services	\$0.00
8.	Total	\$1,904,946.00

AMENDMENT 004 IA016-9500

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the Agreement.

This amendment and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the Parties hereto have caused this 8 page amendment to be executed by their officials there unto duly authorized.

Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners

AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.

SIGNED BY:	SIGNED BY:
Mayor XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
SHARON R. BOCK, Clerk and Comptroller	NAME:
BY:	TITLE:
DATE:	DATE:
Federal Tax ID: <u>59-6000785</u>	
Fiscal Year Ending Date:	Attest: Sharon R. Bock
Approved As To Form And Legal Sufficiency	Clerk and Comptroller
By: Assistant County Attorney	By: Deputy Clerk
Assistant County Attorney	OICIN

APPROVED AS TO TERMS AND CONDITIONS

Y: 1 TO THE DEPARTMENT HEAD

Attestation Statement

Amendment	t Number <u>004</u>	
I,	Mayor	, attest that no changes or revisions have
(Provider R	Pepresentative)	
been made t	to the content of the above reference	ed agreement/contract or amendment between the Area Agency
Aging of Pa	alm Beach/Treasure Coast, Inc. and I	Palm Beach County, a political subdivision of the State of Florida, by
		only exception to this statement would be for changes in page
		data processing media, which has no effect on the
agreement/c	contract content.	
agreement/c	contract content.	
agreement/o	contract content.	
agreement/o	contract content.	
C		 Date
C	f Provider Representative	 Date
C		 Date
Ç	f Provider Representative	
Signature o	f Provider Representative Mayor	Date Attest: Sharon R. Bock
Signature o	f Provider Representative Mayor d As To Form	Attest:
Signature o	f Provider Representative Mayor	Attest: Sharon R. Bock
Signature o Approved And Lega	f Provider Representative Mayor d As To Form	Attest: Sharon R. Bock

(A-3)

AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC. STANDARD AGREEMENT

EMERGENCY HOME ENERGY ASSISTANCE PROGRAM (EHEAP)

This AMENDMENT entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. hereinafter referred to as the "Agency" and Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as "Provider," and collectively referred to as the "Parties", amends Agreement IP015-9500.

The purpose of this amendment is to (1) revise and replace ATTACHMENT IX-A.

(1) ATTACHMENT IX-A is hereby replaced with the following ATTACHMENT IX-A.

ATTACHMENT IX-A

EHEAP 20XX-20XX		Provider Name	1		Month Inve	oice	
Prepared by:			Date:			-	
***	en e						
Program Code	Service Code	Current Month Request	YTD Requested	Contract Amount	Contract Balance	Percentage of Contract	:
Eheap XX/XX	Admin	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	
Eheap XX/XX	Outreach	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	
Eheap XX/XX	Crisis	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	
Eheap XX/XX	Weather Related	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!	
		\$0.00	\$0.00	\$0.00	\$0.00		

Number of individuals (units) served with crisis energy assistance during the report month: Number of individuals ineligible or denied assistance during the report month:	
Number of individuals served by referral to other community resources for energy assistance during the report month:	

This Amendment shall be effective on the last date that the Amendment has been signed by both Parties. All provisions in the Agreement and any attachments thereto in conflict with this Amendment shall be and are hereby changed to conform with this Amendment. All provisions not in conflict with this Amendment are still in effect and are to be performed at the level specified in the Agreement. This Amendment and all of its attachments are hereby made a part of this Agreement.

IN WITNESS THEREOF, the Parties hereto have caused this 3 page Amendment, to be executed by their undersigned officials as duly authorized.

Palm Beach County, a political subdivision Provider: of the State of Florida by and through its Board of County Commissioners	AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.
SIGNED BY:	SIGNED BY:
Mayor Mayor	NAME:
SHARON R. BOCK, Clerk and Comptroller	TITLE:
BY: Deputy Clerk	DATE:
Federal Tax ID: 59-6000785 Fiscal Year Ending Date:	
Approved As To Form And Legal Sufficiency	
Assistant County Attorney	
Approved as to terms and conditions Department Director	

Attestation Statement

Agreement Number <u>IP015-9500</u>	
Amendment Number <u>006</u>	
I, Mayor	, attest that no changes or revisions have been made to
(Provider Representative)	
the content of the above referenced agreement	contract or amendment between the Area Agency on
Aging of Palm Beach/Treasure Coast, Inc. and	Palm Beach County, a political subdivision of the State of
Florida, by and through its Board of County C	ommissioners.
The only exception to this statement would be	for changes in page formatting, due to the differences in
electronic data processing media, which has no	effect on the agreement/contract content.
Signature of Provider Representative	Date
Mayor	
	Attest:
Approved As To Form	Sharon R. Bock
And Legal Sufficiency	Clerk and Comptroller
Ву:	D
Assistant County Attorney	By: Deputy Clerk
	Deputy Clerk

Attachment

This AMENDMENT entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc. hereinafter referred to as the "Agency" and Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as "Provider," and collectively referred to as the "Parties", amends Agreement IP015-9500.

The purpose of this amendment is to decrease the funding allocation for the 2016-2017 Agreement period by \$8,784.15. Additionally, this amendment (1) amends paragraph 4 of the Standard Agreement; (2) revises and replaces Attachment III, Exhibit – 1; and (3) revises and replaces Attachment VII Budget Summary.

STANDARD AGREEMENT:

(1) Paragraph 4 of the Standard Agreement is hereby amended to read:

4. Agreement Amount

The Agency awards the Provider for services in accordance with the conditions of this Agreement in an amount not to exceed \$8,240.00, subject to the availability of funds. The Agency will provide a spending authority in the amount of \$120,897.70 for client services. Any costs or services paid for under any other contract and/or agreement from any other source are not eligible for payment under this Agreement.

These funds are allocated for the period April 1, 2015 – March 31, 2016

	Funding	Alloc	ation			
Program Title	Year	Fun	ding Sou	rces	CFDA	Amount
Emergency Home Energy	2015-2016	U.S.	Health	and	93.568	\$8,021.00
Assistance Program		Hum	an Service	2\$		
TOTA	L AGREEMENT A	MOUN	IT:			\$8,021.00

These funds are allocated for the period April 1, 2016 - March 31, 2017

Funding Allocation						
Program Title	Year	Fun	ding Sou	rces	CFDA	Amount
Emergency Home Energy	2016-2017	U.S.	Health	and	93.568	\$8,240.00
Assistance Program		Hum	an Service	es		
TOTAL AGREEMENT AMOUNT:					\$8,240.00	

These funds are allocated for the period April 1, 2017 – March 31, 2018

Funding Allocation						
Program Title	Year	Fun	ding Sou	rces	CFDA	Amount
Emergency Home Energy	2017-2018	U.S.	Health	and	93.568	\$20,328.00
Assistance Program		Hum	an Service	es		
TOTAL	. AGREEMENT A	MOUN	IT:			\$20,328.00

TOTAL FEDERAL AWARD FOR FUNDING YEARS 2015-2016, 2016-2017 AND	\$36,589.00
2017-2018:	

(2) Attachment III, Exhibit-1 is replaced with the following Attachment III:

ATTACHMENT III

Note: Title 2 CFR § 200.331, as revised, and section 215.97(5) Florida Statutes, require that the information about Federal programs and State projects included in Attachment III be provided to the recipient. Information contained herein is a prediction of funding sources and related amounts based on the Agreement budget.

1. FEDERAL RESOURCES AWARDED TO THE PROVIDER PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Emergency Home Energy Assistance Program	2015-2016	U.S. Health and Human Services	93.568	\$8,021.00
PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Emergency Home Energy Assistance Program	2016-2017	U.S. Health and Human Services	93.568	\$8,240.00
PROGRAM TITLE	YEAR	FUNDING SOURCE	CFDA	AMOUNT
Emergency Home Energy Assistance Program	2017-2018	U.S. Health and Human Services	93.568	\$20,328.00

TOTAL FEDERAL AWARD FOR FUNDING YEARS 2015-2016, 2016-2017 AND	\$36,589.00	
2017-2018:		

FEDERAL FUNDS

2 CFR Part 200 - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. OMB Circular A-133 – Audits of States, Local Governments, and Non-Profit Organizations.

(3) Attachment VII Budget Summary is replaced with the following Attachment VII:

ATTACHMENT VII

EMERGENCY HOME ENERGY ASSISTANCE FOR THE ELDERLY PROGRAM BUDGET SUMMARY

PSA: 9

Original ____ Amendment <u>007</u>

PROVIDER:

Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County

Commissioners

2015-2016 FUNDING YEAR

1.	Administration*	\$1,200.00
2.	Outreach*	\$6,821.00
3.	EHEAP Benefits (Crisis)	\$127,179.00
4.	Weather-Related/Supply-Shortage	\$0.00
5.	Total	\$135,200.00
6.	Projected minimum number of Consumers to be served (Crisis):	212
7.	Projected minimum number of Consumers to be served (Weather-Related/Supply Shortage):	0

2016-2017 FUNDING YEAR

1.	Administration*	\$1,200.00
2.	Outreach*	\$7,040.00
3.	EHEAP Benefits (Crisis)	\$120,897.70
4.	Weather-Related/Supply-Shortage**	\$0.00
5.	Total	129,137.70
6.	Projected minimum number of consumers to be served (Crisis):	216
7.	Projected minimum number of consumers to be served (Weather-Related/Supply Shortage):	0

2017-2018 FUNDING YEAR

1.	Administration*	\$1,200.00
2.	Outreach*	\$19,128.00
3.	EHEAP Benefits (Crisis)	\$117,174.00
4.	Weather-Related/Supply-Shortage**	\$0.00
5.	Total	\$137,502.00
6.	Projected minimum number of consumers to be served (Crisis):	195
.7.	Projected minimum number of consumers to be served (Weather-Related/Supply Shortage):	0

NOTE: Eligible households may be provided with one benefit per season up to six hundred dollars per benefit. The minimum number of consumers may reflect duplicated consumers if a consumer received a benefit in both seasons.

*Allowable administrative and outreach funds may be used for emergency energy assistance benefits upon approval of the transfer by the Agency.

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the Agreement.

This amendment and all of its attachments are hereby made a part of this Agreement.

By signing this Agreement, the Parties agree that they have read and agree to the entire Agreement.

IN WITNESS THEREOF, the Parties hereto have caused this 7 page Agreement, to be executed by their undersigned officials as duly authorized.

Provider:	Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners	AREA AGENCY ON AGING OF PALM BEACH/TREASURE COAST, INC.
SIGNED BY:	Mayor	SIGNED BY:
SHARON R.	BOCK, Clerk and Comptroller	NAME:
BY:		TITLE:
DATE:	Deputy Clerk	DATE:
Federal Tax Fiscal Year F	ID: <u>59-6000785</u> Ending Date:	
Approved As To	o Form and Legal Sufficiency	
Assistant County	y Attorney	
Approved as to t	terms and conditions	
James E.	Green.	
epartment Dire	ector	

Attestation Statement

Amendment Number <u>007</u>	
I, Paulette Burdick, Mayor	, attest that no changes or revisions have been made to
(Provider Representative)	
the content of the above referenced agreement/co	ntract or amendment between the Area Agency on
through its Board of County Commissioners. The	alm Beach County, a political subdivision of the State of Florida by and conly exception to this statement would be for changes in page at a processing media, which has no effect on the agreement/contract
Signature of Provider Representative Ma	Date

STATE OF THE PARTY		623	
<u>a</u>	4		

BOARD OF COUNTY COMMISSIONERS PALM BEACH COUNTY, FLORIDA BUDGET AMENDMENT____

Page 1 of 1

BGEX - 144 - 092617*1853 BGRV - 144 - 092617*515

FUND (1006) - DOSS - Administration

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUN	o provide budget for items not anticipated in the bi	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED AS OF 09/26/2017	REMAINING BALANCE
REVENU	IE							
DOSS-C1	<u>, </u>							
144 1458	3162 Physical Health & Nutrition	140,888	159,542		30,790	128,752		
144 1458	3168 Fed Grant Indirect - Human Services	432,000	669,112	•	2,400	666,712		
DOSS-C2								
144 1459	3162 Physical Health & Nutrition	136,912	213,675		44,792	168,883		
144 1459	3168 Fed Grant Indirect - Human Services	557,943 8,961,940	858,497	15,000		873,497		
Total Re	Total Revenue		11,965,256	15,000	77,982	11,902,274		
EXPENI DOSS-C1 144 1458	OITURE 3419 Contracted Food	456,459	604,285	0	33,190	571,095	521,970	49,125
DOSS-C2 144 1459	3419 Contracted Food	598,507	892,131	15,000	44,792	862,339	645,361	216,978
	spenditures	8,961,940	11,965,256	15,000	77,982	11,902,274	1,167,331	10,734,943
					,			
		Signatures		Date			nty Commissioners November 21, 2017	
COMMUNITY SERVICES INITIATING DEPARTMENT/DIVISION James Green Administration/Budget Department Approval OFMB Department - Posted		1 Mal		11/7/17				
					D	eputy Clerk to tl	ne	
					В	oard of County	Commissioners	
C. MD Dehaiti	HUIII - I OOIGU					· · · · · · · · · · · · · · · · · · ·		