

Date _____

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2022	2023	2024	2025	2026
Capital Expenditures					
Operating Costs	450000				
External Revenue	(450,000)				
Program Income (County)					
In-Kind Match (County)					
NET FISCAL IMPACT	0	0			

No. ADDITIONAL FTE POSITIONS (Cumulative)					
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Is Item Included In Current Budget? Yes X No
Does this item include the use of federal funds: Yes X No

Budget Account No.:
Fund 1003 Dept 145 Unit 1465 Object Var Program Code Var Program Period GY21

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

US Dept. of Health and Human Services, thru the Florida Department of Economic Opportunity

DocuSigned by:
Julie Dowe
05AC9C7CC5BC4A4...

C. Departmental Fiscal Review: _____
Julie Dowe, Director, Financial & Support Svcs.

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development and Control Comments:

Lisa M. Nantz 8/18/22
OFMB 8/18
JR 8/18

Ann G. Jacobson 8/23/22
Contract Development and Control
8-23-22 TL

B. Legal Sufficiency:

Deleue C. Dwyer 8-26-22
Assistant County Attorney

C. Other Department Review:

Department Director

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

AMENDMENT 1

FIRST AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES

THIS FIRST AMENDMENT TO THE CONTRACT FOR PROVISION OF SERVICES (R2022-0660) made and entered into in Palm Beach County Florida, on this ____ day of ____, 2022 by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of Commissioners, hereinafter referred to as the COUNTY, and **Palm Beach County Food Bank, Inc.**, hereinafter referred to as the AGENCY, a not-for-profit corporation authorized to do business in the State of Florida, whose Federal Tax I.D. is **90-0778707**.

WHEREAS, on July 12th, 2022, the parties entered into a Contract for Provision of Services (R2022-0660) (the Contract), in an amount not to exceed \$350,000.00 to provide Food Pantry services to low-income residents of Palm Beach County: and

WHEREAS, the need exists to amend the Contract with the AGENCY to increase the total amount to be paid by amending **ARTICLE 5 – PAYMENTS TO AGENCY**, and to replace **EXHIBIT A - SCOPE OF WORK** and **EXHIBIT B – PAYMENT SCHEDULE**.

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

- I. The foregoing recitals are true and correct and incorporated herein by reference and made a part of the parties' Contract.
- II. The first paragraph of **ARTICLE 5 – PAYMENTS TO AGENCY** shall be replaced with the following:

The total amount to be paid by the COUNTY under this Contract for all services and materials shall not exceed a total contract amount of **FOUR HUNDRED AND FIFTY THOUSAND DOLLARS AND ZERO CENTS (\$450,000.00)**.

- III. **Exhibit A** is hereby replaced in its entirety with **Exhibit A-1**, attached hereto and incorporated herein by reference.
- IV. **Exhibit B** is hereby replaced in its entirety with **Exhibit B-1**, attached hereto and incorporated herein by reference.
- V. All other provisions of the Contract not modified in this First Amendment are still in effect and are to be performed at the same level as specified in the Contract.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this First Amendment on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

**Joseph Abruzzo, Clerk of the Circuit
Court and Comptroller
Palm Beach County**

**PALM BEACH COUNTY, FLORIDA, a
Political Subdivision of the State of
Florida**

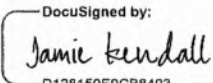
**BOARD OF COUNTY
COMMISSIONERS**

**BY: _____
Deputy Clerk**

**BY: _____
Robert S. Weinroth. Mayor**

AGENCY:

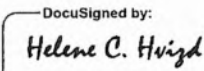
Palm Beach County Food Bank, Inc.

**BY:  _____
Agency's Signatory Name**
DocuSigned by:
D128150F9CB8403

**Jamie Kendall
AGENCY's Signatory Name Typed**

**APPROVED AS TO FORM AND
LEGAL SUFFICIENCY**

**APPROVED AS TO TERMS AND
CONDITIONS**

**BY:  _____
Assistant County Attorney**
DocuSigned by:
BF3DF20B2223413

**BY:  _____
Taruna Malhotra, Assistant Director
Community Services Department**
DocuSigned by:
1459E4103F4049C

EXHIBIT A-1

SCOPE OF WORK
FY 2022 COMMUNITY ACTION PROGRAM
COMMUNITY SERVICES BLOCK GRANT

Agency Name: Palm Beach Food Bank Inc., (PBCFB)
Program Name: Food Pantry
Target Audience: Low-Income Palm Beach County Residents at or Below 200% of the Federal Poverty Guideline (FPLG)

Overview:

Palm Beach County Food Bank Inc. (PBCFB) works with approximately 200 partner agencies throughout Palm Beach County, to assist pantries to meet the distribution needs with non-perishable food products in efforts to end food insecurity in communities the partner agencies serve.

(PBCFB) anticipates that demands for food assistance will rise during summer months when children are out of school where they normally receive breakfast and lunch, and their families/caregivers turn to food banks for food donations and food sources to bridge the gap to reduce food insecurity.

Services:

The funding will be used to assist with the purchase of non-perishable food items to meet the distribution needs of our community partner agencies to provide hunger relief to eligible low-income individual and family Palm Beach County residents. PBCFB will track the number of individuals and families who receive food items and will ensure that all food recipients meet the income eligibility requirements.

Services may be provided in four (4) stages during the term of the Agreement. However, Stage 2, 3, and 4 Services, and funding can only be utilized upon notice by Palm Beach County.

Reporting:

PBCFB is required to report on the following performance indicators on a quarterly basis:

Performance Indicator: Number of Clients Palm Beach County Food Pantry Served

Report Due Dates: July 10th and October 10th of the FY 2022 grant year.

Failure to submit the required report on the due dates may result in the withholding of payment.

EXHIBIT B-1

UNITS OF SERVICE RATE AND DEFINITION
FY 2022 COMMUNITY ACTION PROGRAM CONTRACT

Agency: Palm Beach County Food Bank, Inc. (PBCFB)
Service Description: Food Pantry

Service Name and Definition of Unit of Service	Stage 1	Stage 2	Stage 3	Stage 4	Total Contract Amount
Service: Food Bank Agency will submit itemized receipts for non-perishable food purchased along with proof of non-perishable items distributed to the clients for payment.	\$250,000	\$100,000	\$85,000	\$15,000	\$450,000

PBCFB will utilize Stage 1 funding up to \$250,000. Palm Beach County Community Action Program will further assess and determine if Stage 2 up to \$100,000, Stage 3, up to \$85,000, and Stage 4, up to \$15,000 will be available for use, otherwise Stages 2, 3, and 4 will not be expended.



Palm Beach County
Compliance Summary Report

Vendor Number	Vendor Name	AM Best Rating	Insurance Carrier	Policy #	Eff. Date	Exp. Date	Coverage	Contract Number	Contract Name
DX00001159	Palm Beach County Food Bank		Deficient					038-01	FAA
		A+p , XV	Nationwide Mutual Insurance Company	CMB00000029651R	7/1/2022	7/1/2023	Excess Liability		
		A+p , XV	Nationwide Mutual Insurance Company	GL00000029649R	7/1/2022	7/1/2023	General Liability		
		A+p , XV	Nationwide Mutual Insurance Company	PL00000029652R	7/1/2021	7/1/2022	Professional Liability		
		A+ , X	Bridgefield Casualty Insurance Company	19621609	7/1/2022	7/1/2023	Workers Comp		

Risk Profile : Standard - Professional Services
Required Additional Insured : Palm Beach County Board of County Commissioners
Ownership Entity :