Human Services Department Community Support Services Division

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Community Services Block Grant (CSBG) Subgrantee Contract Amendment PY2016 – PY2017

Section I. Provisions

<u>PARTIES TO THIS Contract Amendment</u>: This Contract Amendment, dated this 27th day of October, 2016, by and between Adams County, a body politic and corporate, known hereafter as "COUNTY", and <u>Center for People with Disabilities</u> located at <u>1675 Range Street Boulder, Colorado 80301</u>, known hereafter as the "GRANTEE" is made for the purpose of extending the services set forth in the Community Services Block Grant ("CSBG") Agreement dated <u>March 1, 2015</u>.

The COUNTY requires the provision of certain services and products in connection with the program funded by grants from the CSBG and which must conform to the following:

(A) Scope of Service:

PY2016 and PY2017 award amounts are additional funding not to exceed an amount equal to the original amount of PY 2015 award to allow for continuation of GRANTEE services described in **PY 2015 Subgrantee Agreement Exhibit 1**.

(B) Payment Requests:

Payment Requests for reimbursement must be submitted **monthly** no later than the **10**th of the month for expenses incurred during the previous month. The submission of payment requests in a timely manner shall be the responsibility of the GRANTEE and failure to comply may result in a reduction of payment of funds or termination of this Agreement. Reduction of award amount will be in the amount remaining unspent by expenditure deadline.

(C) Reporting:

The GRANTEE shall provide to the COUNTY a CSBG Quarterly Performance Report summarizing the Services which includes activities, progress, outcomes, and number of clients served (report format will be provided). The GRANTEE shall provide the COUNTY a Final Report containing the **Section G** and **NPI Report** (report form to be provided) summarizing the Services which include activities, progress, outcomes, and number of clients served. The submission of reports in a timely manner shall be the

responsibility of the GRANTEE and failure to comply may result in a reduction of payment of funds or termination of this Agreement.

Section II. General Information

Case Management for Emn	Journant Counting		
Case Management for Emp	noyment Services		
Agency Name			
Center for People with Disa	bilities		
Contact Person	Phone	Email	Fax
Margaret Catterall	303-442-8662	Margaret@cpwd.org	
Project Manager	Phone	Email	Fax
Project Manager	Phone	Email	••••••

Check all that apply.			
☑ Project Start Date	☐ Project End Date	☐ Contract Amount	☐ Project Costs
☐ Project Scope	☐ Technology	Major Deliverables/ Outcomes	☐ Roles/Responsibilities

Section IV. Change Summary

Currently Recorded Dates/Costs		Requested Revisions to Dates/Costs N/A					
Start Date	End Date	Contract Amount	Project Cost	Start Date	End Date	Contract Amount	Project Cost
03/01/2016	12/31/2016	\$33,950				***************************************	
01/01/2017	12/31/2017	\$33,950					

Section V. Project Budget

Pgm Yr	Line-Item Name	Increase	Decrease	Expended	Balance
2016	Case management for Employment Services			\$8,899.94	\$25,050.06
2017	Case management for Employment Services			\$0	\$33,950

	Total				

Section VI. Justifi	cation Summary
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Article III. Section 2 of the PY 2015 Subgrantee Agreement dated March 1, 2015 allows for an additional funding award.
The agency has met the requirements of PY 2015 and recommendation has been made to provide an additional award
amount of \$33,950 for PY2016 and \$33,950 for PY2017 which will allow for continuation of GRANTEE services described
in Exhibit 1 of the executed contract. In addition to the terms listed herein, this option letter shall extend all terms and
conditions of the original agreement.

SIGNATURE PAGE

In Witness Whereof, the parties have caused this contract amendment to be duly executed as of the date first above written.

Adams County Board of County Commissioners Adams County, Colorado

By: Atensis 9 - Dousto

Board Chairman

By (Signature)

SubGrantee

Executive Director

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Boulder, CD 80301

City, State, Zip Code

APPROVED AS TO FORM
COUNTY ATTORNEY