



STATE OF CONNECTICUT

DEPARTMENT OF SOCIAL SERVICES

55 FARMINGTON AVENUE – HARTFORD, CONNECTICUT 06105-5033

March 24, 2016

Toni Harp
Mayor
City of New Haven
165 Church Street
New Haven, CT .06510

Contract #: 093-SBG-59/14DSS5011TG
Period: 10/01/14 - 6/30/2016

Amount: \$315,014.00

Dear Mayor Harp:

I am pleased to inform you that the above referenced contract has been fully executed and approved. Attached is a scanned copy of the amended contract for your files.

Requests for Payment should be completed and directed to the program contact identified below. The Department will process requests for payment in accordance with the terms of the contract. Your receipt of payment is contingent upon the continued availability of funds and your agency's compliance with the terms of the contract.

For issues or concerns related to the Program please direct your inquiries to:

PROGRAM

Dennis Nesta
(860) 424-5892
Dennis.nesta@ct.gov

CONTRACT

Marlene Hamilton
(860) 424-5778
marlene.hamilton@ct.gov

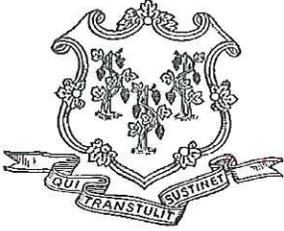
Sincerely,

Kathleen M. Brennan
Deputy Commissioner for
Roderick L. Brembly
Commissioner

C: Carlene Taylor
Contract file

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES

CONTRACT AMENDMENT



Contractor: City of New Haven
Contractor Address: 165 Church Street, New Haven, CT .06510
Contract Number: 093-SBG-59/ 14DSS5011TG
Amendment Number: A2
Amount as Amended: \$315,014.00
Contract Term as Amended: 10/1/2014 6/30/2016

The contract between the City of New Haven and the Department of Social Services, which was executed by the parties and signed by the Department's Commissioner on 9/25/14, and previously amended on 9/25/15 is hereby further amended as follows:

1. The term of the contract is extended three (3) months and the end date of the contract is changed from 3/31/2016 to 6/30/2016.
2. Section 1 of Amendment 1 is amended because the total maximum amount payable under this contract has **increased** by \$45,002 from \$270,012 to \$315,014 in lieu of a 3 month extension.
3. The budget on page 2 of Amendment 1 is hereby deleted and replaced in its entirety by the budget on page 2 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

FINANCIAL SUMMARY

PROGRAM NAME:	City of New Haven DCFS-SAGA Support Services
PROGRAM NUMBER:	# 093-SBG-59 A2 / 14DSS5001TG A2

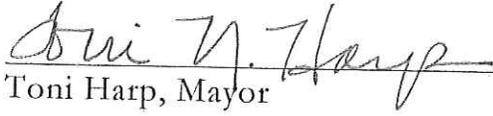
Contract Amount	Requested	Adjustments	Approved
<i>For Amendments Only</i>			
Previously Approved Contract Amount	\$ 270,012		\$ 270,012
Amount of Amendment		\$ 45,002	\$ 315,014

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				
	2b. Legal				
	2c. Independent Audit				
	2d. Other Contractual Services				
	TOTAL CONTRACTUAL SERVICES				
3	ADMINISTRATION				
	3a. Admin. Salaries	37,817		8,511	46,328
	3b. Admin. Fringe Benefits	20,091		4,510	24,601
	3c. Admin. Overhead	18,900		3,150	22,050
	TOTAL ADMINISTRATION		76,808		92,979
4	DIRECT PROGRAM STAFF				
	4a. Program Salaries	89,180		15,209	104,389
	4b. Program Fringe Benefits	53,762		8,782	62,544
	TOTAL DIRECT PROGRAM		142,942		166,933
5	OTHER COSTS				
	5a. Program Rent				
	5b. Consumable Supplies	4,776		680	5,456
	5c. Travel & Transportation	27,100		2,750	29,850
	5d. Utilities	4,062		705	4,767
	5e. Repairs & Maintenance	4,062		705	4,767
	5f. Insurance				
	5g. Food & Related Costs				
	5h. Other Project Expenses	10,262			10,262
	TOTAL OTHER COSTS		50,262		55,102
6	EQUIPMENT				
7	PROGRAM INCOME				
	7a. Fees				
	7b. Other Income				
	TOTAL PROGRAM INCOME				
8	TOTAL NET PROGRAM COST (Sum of 1 through 6, minus Line 7)		270,012	45,002	315,014

ACCEPTANCES AND APPROVALS

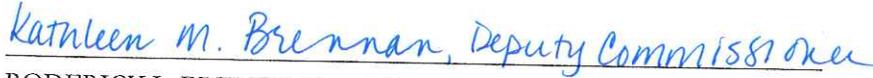
14DSS5011TG A2/ 093-SBG-59 A2

CONTRACTOR City of New Haven


Toni Harp, Mayor

3/21/16
Date

DEPARTMENT OF SOCIAL SERVICES

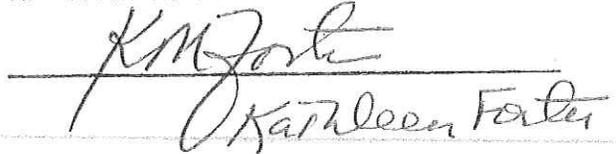

RODERICK L. BREMBY, *Commissioner*

3/24/16
Date

OFFICE OF THE ATTORNEY GENERAL

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.

CITY OF NEW HAVEN
OFFICE OF THE CORPORATION COUNSEL
APPROVED AS TO FORM AND CORRECTNESS


Kathleen Foster