

STATE OF CONNECTICUT  
DEPARTMENT OF SOCIAL SERVICES

**CONTRACT AMENDMENT**

**Contractor:** Junta for Progressive Action, Inc.  
**Contractor Address:** 169 Grand Avenue, New Haven, CT 06513  
**Contract Number:** 093JPA/14DSS1301OT  
**Amendment Number:** 1  
**Amount as Amended:** **295,370**  
**Contract Term as Amended:** 10/1/2014 – 9/30/2016

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The contract between **Junta for Progressive Action, Inc.** (the Contractor) and the Department of Social Services (the Department), which was last executed by the parties and signed by the by the Office of the Attorney General on 10 /21 /14, is hereby amended as follows:

1. The total maximum amount payable under this contract is increased by \$144,130.00 from \$151,240 to \$295,370.00. This increase is to continue to provide Hispanic Human Resources Development (HHD) services to residents in the New Haven area.
2. The Contractor shall adhere to the budget as modified on page 2 of this amendment.
3. The term of the contract is extended for an additional one (1) year and the end date of the contract is changed from 9/30/15 to 9/30/16.
4. During the contract period ending 9/30/16, Part I, Section A.1 Description of Services of the original contract shall include at least an additional 1,187 clients (individuals and/or families) receiving services.

This document constitutes an amendment to the above numbered contract. All provisions of that contract, except those explicitly changed above by this amendment, shall remain in full force and effect.

PART I

FINANCING SUMMARY

Junta for Progressive Action

PROGRAM NAME:

Hispanic Human Resource Development Programs (Oct. 2015-Sept. 2016)

PROGRAM NUMBER:

Contract Amount	Requested	Adjustments	Approved
<i>For Amendments Only</i>			
Previously Approved Contract Amount			
Amount of Amendment			\$

Line #	Item	Subcategory (a)	Line Item Total (b)	Adjustments (c)	Revised Total (d)
1	<b>UNIT RATE</b>				
	1a. Bed Days				
	1b. Client Advocate				
	1c. Security Deposit				
	1d. Other Unit Rate Costs				
	<b>TOTAL UNIT RATE</b>				
2	<b>CONTRACTUAL SERVICES</b>				
	2a. Accounting	3,000		3,000	6,000
	2b. Legal				
	2c. Independent Audit				
	2d. Other Contractual Services				
	<b>TOTAL CONTRACTUAL SERVICES</b>	<b>3,000</b>		<b>3,000</b>	<b>6,000</b>
3	<b>ADMINISTRATION</b>				
	3a. Admin. Salaries	19,500		16,390	35,890
	3b. Admin. Fringe Benefits	4,982		982	5,964
	3c. Admin. Overhead				
	<b>TOTAL ADMINISTRATION</b>	<b>24,482</b>		<b>17,372</b>	<b>41,854</b>
4	<b>DIRECT PROGRAM STAFF</b>				
	4a. Program Salaries	92,304		92,304	184,608
	4b. Program Fringe Benefits	23,584		23,584	47,168
	<b>TOTAL DIRECT PROGRAM</b>	<b>115,888</b>		<b>115,888</b>	<b>231,776</b>
5	<b>OTHER COSTS</b>				
	5a. Program Rent				
	5b. Consumable Supplies	2,732		2,732	5,464
	5c. Travel & Transportation				
	5d. Utilities	2,000		2,000	4,000
	5e. Repairs & Maintenance				
	5f. Insurance	2,838		2,838	5,676
	5g. Food & Related Costs				
	5h. Other Project Expenses	300		300	600
	<b>TOTAL OTHER COSTS</b>	<b>7,870</b>		<b>7,870</b>	<b>15,740</b>
6	<b>EQUIPMENT</b>				
7	<b>PROGRAM INCOME</b>				
	7a. Fees				
	7b. Other Income				
	<b>TOTAL PROGRAM INCOME</b>				
8	<b>TOTAL NET PROGRAM COST</b>	<b>151,240</b>		<b>144,130</b>	<b>295,370</b>

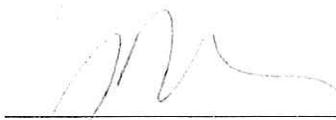
**SIGNATURES AND APPROVALS**

093JPA/14DSS1301OT

The Contractor IS NOT a Business Associate under the Health Insurance Portability and Accountability Act of 1996 as amended.

Documentation necessary to demonstrate the authorization to sign must be attached.

**CONTRACTOR – JUNTA FOR PROGRESSIVE ACTION, INC.**

  
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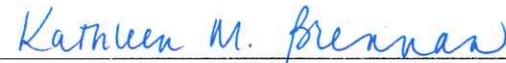
Sandra Trevino

9 / 30 / 2015

Date

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Executive Director

**DEPARTMENT OF SOCIAL SERVICES**

  
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KATHLEEN  
M. BRENNAN

Deputy Commissioner

Date

9 / 30 / 15

**OFFICE OF THE ATTORNEY GENERAL**

  
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ASST. / ASSOC. ATTORNEY GENERAL. (Approved as to form )

Joseph Rubin

10 / 21 / 15

Date