



Lori A. Shibinette  
Commissioner

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF THE COMMISSIONER

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9200 1-800-852-3345 Ext. 9200  
Fax: 603-271-4912 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

August 18, 2020

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of the Commissioner, to amend an existing contract with Victory Women of Vision (VC#309757), Manchester, NH for refugee youth mentoring services, by exercising a renewal option by increasing the price limitation by \$168,750 from \$75,000 to \$243,750 and by extending the completion date from September 30, 2020 to September 30, 2022 effective upon Governor and Council approval. 100% Federal Funds.

The original contract was approved by Governor and Council on July 31, 2019, item #11.

Funds are available in the following account for State Fiscal Year 2021, and are anticipated to be available in State Fiscal Year 2022, upon the availability and continued appropriation of funds in the future operating budget, with the authority to adjust budget line items within the price limitation and encumbrances between state fiscal years through the Budget Office, if needed and justified.

**05-95-42-042-7922-7922 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES, Office of Health Equity, Refugee Services**

State Fiscal Year	Class / Account	Class Title	Job Number	Current Budget	Increased (Decreased) Amount	Revised Budget
2020	102-500731	Contracts for Prog Support	42200026	\$75,000	\$0	\$75,000
2021	102-500731	Contracts for Prog Support	42200026	\$0	\$75,000	\$75,000
2022	102-500731	Contracts for Prog Support	42200026	\$0	\$75,000	\$75,000
2023	102-500731	Contracts for Prog Support	42200026		\$18,750	\$18,750
			<b>Total</b>	<b>\$75,000</b>	<b>\$168,750</b>	<b>\$243,750</b>

**EXPLANATION**

The purpose of this request is to continue providing refugee youth mentoring services that match eligible youth with mentors and case management services in order to support successful integration into schools, communities and places of employment.

The vendor will continue providing social, academic, and vocational services to refugees and asylees between 15 and 24 years of age, statewide, who have been in the United States for less than five (5) years. The vendor will continue giving preference to youths who have been in the United States for one (1) year or less.

The program conducts an initial needs assessment that identifies the needs and goals of each youth in order to develop an individualized plan for services. The vendor recruits and trains mentors in order to match mentors to youths and optimize results. Mentors assist with developing of social and life skills; learning about American culture; and identifying opportunities to participate in civic and community service activities.

The Department will monitor contracted services using the following performance measures:

- 80% of youths identified as potentially eligible individuals shall be enrolled in the program within one (1) month of completing the needs assessment.
- 90% match of program participants with mentors.

As referenced in Exhibit C-1 of the original contract, the parties have the option to extend the agreement for up to three (3) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and Governor and Council approval. The Department is exercising its option to renew services for two (2) of the two (2) years available.

Should the Governor and Council not authorize this request, refugee youths may not receive the support necessary to navigate American culture and systems, and may not have access to educational and vocational support services provided by trained and dedicated mentors. Failure to have access to these services may result in a decrease in employment opportunities; poor academic performance; loss of housing and medical services; social isolation; and depression among the refugee youth population.

Area served: Statewide

Source of Funds: CFDA #93.566, FAIN #1801NHR SOC

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,



Lori A. Shabinette  
Commissioner

**New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services**



**State of New Hampshire  
Department of Health and Human Services  
Amendment #1 to the Refugee Youth Mentoring Program Services Contract**

This 1<sup>st</sup> Amendment to the Refugee Youth Mentoring Program Services contract (hereinafter referred to as "Amendment #1") is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Victory Women of Vision, (hereinafter referred to as "the Contractor"), a nonprofit corporation with a place of business at 25 Lowell St Suite 307, Manchester, NH, 03101.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on July 31, 2019, (Item #11), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract and in consideration of certain sums specified; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18, and Exhibit C-1, Revisions to General Provisions, Section 3 the Contract may be amended and extended upon written agreement of the parties and approval from the Governor and Executive Council; and

WHEREAS, the parties agree to extend the term of the agreement, increase the price limitation, or modify the scope of services to support continued delivery of these services; and

NOW THEREFORE, in consideration of the foregoing and the mutual covenants and conditions contained in the Contract and set forth herein, the parties hereto agree to amend as follows:

1. Form P-37 General Provisions, Block 1.7, Completion Date, to read:  
September 30, 2022.
2. Form P-37, General Provisions, Block 1.8, Price Limitation, to read:  
\$243,750.
3. Exhibit B, Methods and Conditions Precedent to Payment, Section 4, Subsection 4.1, to read:
  - 4.1 Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line item, as specified in Exhibits B-1, Budget through Exhibit B-4, Budget Amendment #1.
4. Modify Exhibit B-2, Budget by replacing in its entirety with Exhibit B-2, Budget Amendment #1, which is attached hereto and incorporated by reference herein.
5. Add Exhibit B-3, Budget Amendment #1, which is attached hereto and incorporated by reference herein.
6. Add Exhibit B-4, Budget Amendment #1, which is attached hereto and incorporated by reference herein.



**New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services**

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All terms and conditions of the Contract not inconsistent with this Amendment #1 remain in full force and effect. This amendment shall be effective upon the date of Governor and Executive Council approval.

IN WITNESS WHEREOF, the parties have set their hands as of the date written below,

State of New Hampshire  
Department of Health and Human Services

8/28/2020

\_\_\_\_\_  
Date

DocuSigned by:

**Ann H. N. Landry**

24BA837ED8EB488...

\_\_\_\_\_  
Name: Ann H. N. Landry

Title: Associate Commissioner

Victory Women of Vision

8/27/2020

\_\_\_\_\_  
Date

DocuSigned by:

*Mary Georges*

8A3258F1014844A...

\_\_\_\_\_  
Name: Mary Georges

Title: Mrs



**New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services**

The preceding Amendment, having been reviewed by this office, is approved as to form, substance, and execution.

OFFICE OF THE ATTORNEY GENERAL

9/3/2020

Date

DocuSigned by:

A handwritten signature in black ink, appearing to read "C. Pinos".

USCA8702E37C4AE

Name: Catherine Pinos

Title: Attorney

I hereby certify that the foregoing Amendment was approved by the Governor and Executive Council of the State of New Hampshire at the Meeting on: \_\_\_\_\_ (date of meeting)

OFFICE OF THE SECRETARY OF STATE

Date

Name:

Title:

## Exhibit B-2, Budget Amendment #1

## New Hampshire Department of Health and Human Services

Contractor Name: Victory Women of Vision

Budget Request for: Refugee Youth Mentoring Program Services

Budget Period: 07/01/2020-06/30/2021

Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHS contract share		
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total
1. Total Salary/Wages	\$ 38,600.00	\$ 2,700.00	\$ 38,600.00	\$ -	\$ 2,700.00	\$ 2,700.00	\$ 38,600.00	\$ -	\$ 38,600.00
2. Employee Benefits	\$ 3,900.00	\$ -	\$ 3,900.00	\$ -	\$ -	\$ -	\$ 3,900.00	\$ -	\$ 3,900.00
3. Consultants	\$ 14,200.00	\$ 300.00	\$ 14,500.00	\$ 5,000.00	\$ 300.00	\$ 5,300.00	\$ 9,200.00	\$ -	\$ 9,200.00
4. Equipment:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Rental	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Repair and Maintenance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Purchase/Depreciation	\$ 1,000.00	\$ -	\$ 1,000.00	\$ -	\$ -	\$ -	\$ 1,000.00	\$ -	\$ 1,000.00
5. Supplies:	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Educational	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Lab	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Pharmacy	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Medical	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Office	\$ 800.00	\$ 120.00	\$ 920.00	\$ -	\$ 120.00	\$ 120.00	\$ 800.00	\$ -	\$ 800.00
6. Travel	\$ 2,000.00	\$ 150.00	\$ 2,150.00	\$ -	\$ 150.00	\$ 150.00	\$ 2,000.00	\$ -	\$ 2,000.00
7. Occupancy	\$ -	\$ 2,000.00	\$ 2,000.00	\$ -	\$ 2,000.00	\$ 2,000.00	\$ -	\$ -	\$ -
8. Current Expenses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Telephone	\$ -	\$ 400.00	\$ 400.00	\$ -	\$ 400.00	\$ 400.00	\$ -	\$ -	\$ -
Postage	\$ -	\$ 50.00	\$ 50.00	\$ -	\$ 50.00	\$ 50.00	\$ -	\$ -	\$ -
Subscriptions	\$ 500.00	\$ -	\$ 500.00	\$ -	\$ -	\$ -	\$ 500.00	\$ -	\$ 500.00
Audit and Legal	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Insurance	\$ -	\$ 2,000.00	\$ 2,000.00	\$ -	\$ 2,000.00	\$ 2,000.00	\$ -	\$ -	\$ -
Board Expenses	\$ -	\$ 500.00	\$ 500.00	\$ -	\$ 500.00	\$ 500.00	\$ -	\$ -	\$ -
9. Software	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
10. Marketing/Communications	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
11. Staff Education and Training	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
12. Subcontracts/Agreements	\$ 7,700.00	\$ -	\$ 7,700.00	\$ -	\$ -	\$ -	\$ 7,700.00	\$ -	\$ 7,700.00
13. Other (specific details mandatory):	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Stipends to mentors who can interpret	\$ 5,800.00	\$ -	\$ 5,800.00	\$ -	\$ -	\$ -	\$ 5,800.00	\$ -	\$ 5,800.00
Incentives to mentees	\$ 8,450.00	\$ -	\$ 8,450.00	\$ 4,250.00	\$ -	\$ 4,250.00	\$ 4,200.00	\$ -	\$ 4,200.00
Group activities and meeting expenses	\$ 1,300.00	\$ 150.00	\$ 1,450.00	\$ -	\$ 150.00	\$ 150.00	\$ 1,300.00	\$ -	\$ 1,300.00
<b>TOTAL</b>	<b>\$ 84,250.00</b>	<b>\$ 8,370.00</b>	<b>\$ 89,920.00</b>	<b>\$ 6,250.00</b>	<b>\$ 8,370.00</b>	<b>\$ 17,820.00</b>	<b>\$ 75,000.00</b>	<b>\$ -</b>	<b>\$ 75,000.00</b>
Indirect As A Percent of Direct			9.9%						

New Hampshire Department of Health and Human Services											
Contractor Name: Victory Women of Vision											
Budget Request for: Refugee Youth Mentoring Program Services											
Budget Period: 8/1/2021-6/30/2022											
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHS contract share			Total	
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Travel/Out-of-State	35,800.00	2,700.00	38,500.00	-	2,700.00	2,700.00	35,800.00	-	2,700.00	38,500.00	
2. Employee Benefits	3,800.00	-	3,800.00	-	-	-	3,800.00	-	-	3,800.00	
3. Construction	14,200.00	300.00	14,500.00	8,000.00	300.00	8,300.00	6,200.00	-	-	6,200.00	
4. Equipment	-	-	-	-	-	-	-	-	-	-	
5. Rental	-	-	-	-	-	-	-	-	-	-	
6. Travel and Maintenance	-	-	-	-	-	-	-	-	-	-	
7. Purchase/Depreciation	1,000.00	-	1,000.00	-	-	-	1,000.00	-	-	1,000.00	
8. Supplies	-	-	-	-	-	-	-	-	-	-	
9. Educational	-	-	-	-	-	-	-	-	-	-	
10. Lab	-	-	-	-	-	-	-	-	-	-	
11. Pharmacy	-	-	-	-	-	-	-	-	-	-	
12. Medical	-	-	-	-	-	-	-	-	-	-	
13. Other	800.00	150.00	950.00	-	150.00	150.00	800.00	-	-	800.00	
14. Travel	2,000.00	150.00	2,150.00	-	150.00	150.00	2,000.00	-	-	2,000.00	
15. Outpatient	-	2,000.00	2,000.00	-	2,000.00	2,000.00	-	-	-	-	
16. Current Expenses	-	-	-	-	-	-	-	-	-	-	
17. Telephone	-	400.00	400.00	-	400.00	400.00	-	-	-	-	
18. Postage	-	50.00	50.00	-	50.00	50.00	-	-	-	-	
19. Subscriptions	500.00	-	500.00	-	-	-	500.00	-	-	500.00	
20. Audit and Legal	-	-	-	-	-	-	-	-	-	-	
21. Insurance	-	2,000.00	2,000.00	-	2,000.00	2,000.00	-	-	-	-	
22. Board Expenses	-	500.00	500.00	-	500.00	500.00	-	-	-	-	
23. Referrals	-	-	-	-	-	-	-	-	-	-	
24. Meetings/Communications	-	-	-	-	-	-	-	-	-	-	
25. Mail Services and Firms	-	-	-	-	-	-	-	-	-	-	
26. Administrative Expenses	7,700.00	-	7,700.00	-	-	-	7,700.00	-	-	7,700.00	
27. Other (Specify in detail, mandatory)	-	-	-	-	-	-	-	-	-	-	
28. Increase in monthly rate per contract	5,000.00	-	5,000.00	-	-	-	5,000.00	-	-	5,000.00	
29. Expenses to members	8,450.00	-	8,450.00	4,225.00	-	4,225.00	4,225.00	-	-	4,225.00	
30. Group activities and meeting expenses	1,500.00	150.00	1,650.00	-	150.00	150.00	1,500.00	-	-	1,500.00	
TOTAL	84,344.84	8,376.84	92,721.68	9,764.84	8,376.84	18,141.68	74,580.00	-	-	74,580.00	
Indirect As A Percent of Direct 8.9%											

New Hampshire Department of Health and Human Services											
Contractor Name: Victory Women of Vision											
Budget Request for: Refugee Youth Mentoring Program Services											
Budget Period: 8/18/2022-08/30/2022											
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHS contract share				
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Total Salary/Wages	\$ 8,000.00	-	\$ 8,000.00				\$ 8,000.00	-	\$ 8,000.00		
2. Contract Benefits	\$ 200.00	-	\$ 200.00				\$ 200.00	-	\$ 200.00		
3. Consultants	\$ 2,800.00	-	\$ 2,800.00				\$ 2,800.00	-	\$ 2,800.00		
4. Equipment	-	-	-				-	-	-		
5. Travel	-	-	-				-	-	-		
6. Rent and Maintenance	-	-	-				-	-	-		
7. Purchase/Depreciation	\$ 500.00	-	\$ 500.00				\$ 500.00	-	\$ 500.00		
8. Supplies	-	-	-				-	-	-		
9. Educational	-	-	-				-	-	-		
10. Mail	-	-	-				-	-	-		
11. Postage	-	-	-				-	-	-		
12. Medical	-	-	-				-	-	-		
13. Office	\$ 500.00	-	\$ 500.00				\$ 500.00	-	\$ 500.00		
14. Total	\$ 11,500.00	-	\$ 11,500.00				\$ 11,500.00	-	\$ 11,500.00		
15. Subcontract	-	-	-				-	-	-		
16. Current Expenses	-	-	-				-	-	-		
17. Telephone	-	-	-				-	-	-		
18. Postage	-	-	-				-	-	-		
19. Subscriptions	\$ 125.00	-	\$ 125.00				\$ 125.00	-	\$ 125.00		
20. Audit and Legal	-	-	-				-	-	-		
21. Insurance	-	-	-				-	-	-		
22. Report Expenses	-	-	-				-	-	-		
23. Software	-	-	-				-	-	-		
24. Marketing/Communications	-	-	-				-	-	-		
25. Staff Expenses and Training	-	-	-				-	-	-		
26. Subcontract/Agreements	\$ 2,175.00	-	\$ 2,175.00				\$ 2,175.00	-	\$ 2,175.00		
27. Other (specify details mandatory)	-	-	-				-	-	-		
28. Grants to members and non-intervent	\$ 1,450.00	-	\$ 1,450.00				\$ 1,450.00	-	\$ 1,450.00		
29. Expenses to members	\$ 1,000.00	-	\$ 1,000.00				\$ 1,000.00	-	\$ 1,000.00		
30. Group activities and meeting expenses	-	-	-				-	-	-		
TOTAL	\$ 16,750.00	-	\$ 16,750.00				\$ 16,750.00	-	\$ 16,750.00		
Indirect As A Percent of Direct 0.0%											

# State of New Hampshire

## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that VICTORY WOMEN OF VISION is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on February 14, 2003. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 427749

Certificate Number : 0004423386



IN TESTIMONY WHEREOF,  
I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 28th day of February A.D. 2019.

A handwritten signature in black ink, appearing to read "Wm Gardner".

William M. Gardner  
Secretary of State

Certificate of Authority # 1

(Corporation of LLC- Non-specific, open-ended)

Corporate Resolution

I, Mary Georges, hereby certify that I am duly elected Clerk/Secretary of  
(Name)

Victory women of vision. I hereby certify the following is a true copy of a  
(Name of Corporation or LLC)

vote taken at a meeting of the Board of Directors/shareholders, duly called and held on July  
(Month)

29th, 20 20 at which a quorum of the Directors/shareholders were present and voting.  
(Day) (Year)

VOTED: That Margaret Martens (may list more than one person) is duly authorized to  
(Name and Title)  
Elizabeth Clardy

enter into contracts or agreements on behalf of Victory women of vision with  
(Name of Corporation or LLC)

the State of New Hampshire and any of its agencies or departments and further is authorized to execute any documents which may in his/her judgment be desirable or necessary to effect the purpose of this vote.

I hereby certify that said vote has not been amended or repealed and remains in full force and effect as of the date of the contract to which this certificate is attached. I further certify that it is understood that the State of New Hampshire will rely on this certificate as evidence that the person(s) listed above currently occupy the position(s) indicated and that they have full authority to bind the corporation. To the extent that there are any limits on the authority of any listed individual to bind the corporation in contracts with the State of New Hampshire, all such limitations are expressly stated herein.

DATED: 7/29/2020

ATTEST: Mary Georges (Executive Director)  
(Name and Title)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/31/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101		<b>CONTACT NAME:</b> Sylvia Allard <b>PHONE (A/C, No, Ext):</b> (603) 669-3218 <b>FAX (A/C, No):</b> (603) 645-4331 <b>E-MAIL ADDRESS:</b> sallard@crossagency.com	
<b>INSURED</b> Victory Women of Vision 25 Lowell Street Ste 307  Manchester NH 03101		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Philadelphia Indemnity Ins Co <b>NAIC #</b> 18058 <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

COVERAGES CERTIFICATE NUMBER: 20-21 GL&Prof REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			PHPK2123820	06/19/2020	06/19/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Professional Liability \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liability			PHPK2123820	06/19/2020	06/19/2021	Each Prof Incident Limit \$1,000,000 Aggregate \$2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Confirmation of Coverages. \*\* PLEASE NOTE, WORK COMP INSURANCE HAS BEEN QUOTED THROUGH THE NATIONAL COUNCIL FOR COMPENSATION. COVERAGE WILL BE BOUND AND ISSUED ONCE INSURED HAS AN EMPLOYEE HIRED TO BE ON PAYROLL.\*\*

## CERTIFICATE HOLDER

## CANCELLATION

Department of Health & Human Services 129 Pleasant Street  Concord NH 03301	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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### **Victory Women of Vision Mission Statement**

The mission of Victory Women of Vision (VWV) is to encourage, empower, and nurture immigrant and refugee families to thrive by embracing their cultural heritage as they build their new lives. VWV fills a unique niche in the Manchester area as the only ECBO (Ethnic Community Based Organization) focused on family strengthening and led by an African woman. Our major programs focus on supporting elders in the immigrant and refugee community as well as mentoring youth to become successful community members.

## **Victory Women of Vision**

Internal Reports provided to management  
July 31, 2020

### **General Operating Reports**

Balance Sheet

Profit & Loss YTD

Profit & Loss YTD Detail

Accounts Receivable

Accounts Payable

Fund Summary

*See this report for all Fund Available Balances*

SBA PPP Loan Analysis

### **Operations Specific Reports**

Operations Summary

Operations Income and Expense YTD Detail

### **Fund Specific Reports**

DHHS Budget vs Actual

DHHS Grant Detail

Grassroots Budget vs Actual

Grassroots Grant Detail

NHCF COVID 19 Budget vs. Actual

NHCF COVID 19 Grant Detail

United Way/Census Budget vs Actual

United Way/Census Grant Detail

Easter Seals/Mary Gale Program Analysis

*Prepared by Freedom Accounting Services, LLC*

**Victory Women of Vision, Inc.**  
**Balance Sheet**  
**As of July 31, 2020**

Contents

	<u>Jul 31, 20</u>
<b>ASSETS</b>	
<b>Current Assets</b>	
<b>Checking/Savings</b>	
St Mary's Checking	7,709.73
SBA PPP Savings	3,613.75
<b>Total Checking/Savings</b>	<u>11,323.48</u>
<b>Accounts Receivable</b>	
Accounts Receivable	6,944.29
<b>Total Accounts Receivable</b>	<u>6,944.29</u>
<b>Total Current Assets</b>	<u>18,267.77</u>
<b>TOTAL ASSETS</b>	<u><u>18,267.77</u></u>
<b>LIABILITIES &amp; EQUITY</b>	
<b>Liabilities</b>	
<b>Current Liabilities</b>	
<b>Accounts Payable</b>	
Accounts Payable	1,764.12
<b>Total Accounts Payable</b>	<u>1,764.12</u>
<b>Other Current Liabilities</b>	
SBA PPP Loan	8,800.00
<b>Total Other Current Liabilities</b>	<u>8,800.00</u>
<b>Total Current Liabilities</b>	<u>10,564.12</u>
<b>Total Liabilities</b>	10,564.12
<b>Equity</b>	
Unrestricted Net Assets	3,167.44
Net Income	4,536.21
<b>Total Equity</b>	<u>7,703.65</u>
<b>TOTAL LIABILITIES &amp; EQUITY</b>	<u><u>18,267.77</u></u>

**Victory Women of Vision, Inc.**  
**Fund Summary**  
**As of 7/31/2020**

ContentsSBA Loan AnalysisSBA Loan Analysis

Opening Balance	\$8,800.00
Spending as of 7/31/20	-\$5,294.34
Current Available Balance	<b>\$3,505.66</b>

Operations Funds (beginning at 1/1/2019)Operations Analysis

Operations Income 1/1/2019 - 7/31/20	\$6,815.42
Operations Expenses 1/1/2019 - 7/31/20	\$7,551.15
Prior Years Surplus	\$8,412.01
Current Available Balance	<b>\$7,676.28</b>

DHHS Year 2 Grant SummaryDHHS Year 2 Analysis

Original Award Amount	\$75,000.00
Total Funds Received as of 7/31/20	\$0.00
Spending as of 7/31/20	\$6,944.29
Current Available Cash Balance	\$599.40
Current Available for Reimb	<b>\$68,055.71</b>

June exp reimb not disbursed as of 7/31/20

Grassroots Grant SummaryGrassroots Analysis

Original Award Amount	\$750.00
Total Funds Received as of 7/31/20	\$750.00
Spending as of 7/31/20	\$750.00
Current Available Balance	<b>\$0.00</b>

Fully Spent

NHCF COVID 19 Grant SummaryNHCF COVID 19 Analysis

Original Award Amount	\$5,000.00
Total Funds Received as of 7/31/20	\$5,000.00
Spending as of 7/31/20	\$446.69
Current Available Balance	<b>\$4,553.31</b>

United Way/Census SummaryUnited Way Analysis

Original Award Amount	\$1,500.00
Total Funds Received as of 7/31/20	\$1,500.00
Spending as of 7/31/20	\$1,374.97
Current Available Balance	<b>\$125.03</b>

Cash Proof - Ops Balance

Operations Available Cash	\$7,676.28	As shown above
DHHS Available Cash	\$599.40	As shown above
NHCF COVID 19 Available Cash	\$4,553.31	As shown above
United Way/Census Available Cash	\$125.03	As shown above
Subtract DHHS Prepaid Expenses	-\$5,244.29	July expenses paid prior to reimb

**\$7,709.73** Anticipated Cash Balance.

Actual Checking Cash Balance	<b>\$7,709.73</b>
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Variance	\$0.00
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**Victory Women of Vision, Inc.**  
**Profit & Loss**  
**January - July 2020**

Contents

Accrual Basis	Jan - Jul 20
<b>Ordinary Income/Expense</b>	
Income	
Direct Public Support	
Corporate Contributions	2,800.00
Individual Contributions	4,015.00
Total Direct Public Support	6,815.00
Awards & Grants Income	
DHHS Grant Income	55,442.86
Grassroots	750.00
NH Charitable - COVID 19	5,000.00
United Way - Census	1,500.00
Total Awards & Grants Income	62,692.86
Program Income	
Easter Seals/Mary Gale Income	3,700.52
Total Program Income	3,700.52
Total Income	73,304.36
Expense	
Payroll	
Payroll Wages	32,097.50
Payroll Taxes	3,033.57
Payroll Fees	1,037.00
Total Payroll	36,168.07
Awards & Grants Expenses	
DHHS Grant Expenses	
Consultants	8,804.84
Equipment	1,278.72
Office Supplies	905.39
Travel	278.48
Subscriptions	300.00
Subcontractors	2,327.50
Stipends	3,970.00
Incentives for Mentees	4,421.88
Total DHHS Grant Expenses	22,286.79
Grassroots Grant Expenses	
Gas & Mileage	35.65
Food & Supplies	244.35
Total Grassroots Grant Expenses	280.00
NH Charitable COVID 19	
Food & Supplies	217.93
Total NH Charitable COVID 19	217.93
United Way/Census Grant Exp	
Equipment	374.97
Total United Way/Census Grant Exp	374.97
Total Awards & Grants Expenses	23,159.69
Program Expenses	
Easter Seals/Mary Gale Expenses	2,559.81
Total Program Expenses	2,559.81
Operations	
Federal Taxes	675.00
Insurance	905.00
Rent	3,850.00
Supplies	44.75
Telephone/Internet	1,015.72
Travel	246.75
Total Operations	6,797.22
Professional Fees	
Stipend	84.00
Total Professional Fees	84.00
Total Expense	68,768.59
Net Ordinary Income	4,535.79
Other Income/Expense	
Other Income	
Interest Income	0.42
Total Other Income	0.42
Net Other Income	0.42
Net Income	4,536.21

**Victory Women of Vision, Inc.**  
**Profit & Loss Detail**  
**January - July 2020**

Contents

Accrual Basis

Type	Date	Num	Name	Memo	Class	Amount
<b>Income</b>						
<b>Direct Public Support</b>						
<b>Corporate Contributions</b>						
Deposit	01/31/2020		USAA	Deposit	Operations	460.00
Deposit	03/02/2020		USAA	Deposit	Operations	460.00
Deposit	04/29/2020			Donation	Operations	300.00
Deposit	04/29/2020			Donation	Operations	200.00
Deposit	04/30/2020		USAA	Deposit	Operations	460.00
Deposit	06/01/2020		USAA	Deposit	Operations	460.00
Deposit	06/30/2020		USAA	G Martens	Operations	460.00
<b>Total Corporate Contributions</b>						<b>2,800.00</b>
<b>Individual Contributions</b>						
Deposit	01/10/2020	7814	Lyman, Daniel & Martha	Deposit	Operations	100.00
Deposit	02/26/2020		ORIS	Operations Funds	Operations	3,915.00
<b>Total Individual Contributions</b>						<b>4,015.00</b>
<b>Total Direct Public Support</b>						<b>6,815.00</b>
<b>Awards &amp; Grants Income</b>						
<b>NH Charitable - COVID 19</b>						
Deposit	07/14/2020			NH Charitable Grant	NHCF-COVID19	5,000.00
<b>Total NH Charitable - COVID 19</b>						<b>5,000.00</b>
<b>DHHS Grant Income</b>						
Deposit	01/24/2020	3027793	DHHS	Dec Reimb	DHHS	4,185.80
Deposit	02/12/2020		DHHS	Jan Exp Reimb	DHHS	6,058.21
Deposit	03/20/2020		DHHS	Feb Reimb - short paid, add to March	DHHS	7,355.24
Invoice	03/31/2020	1	DHHS	March Exp Reimb	DHHS	7,702.36
Invoice	04/30/2020	2	DHHS	April Exp Reimb	DHHS	5,312.83
Invoice	05/31/2020	3	DHHS	May Exp Reimb	DHHS	8,129.50
Invoice	06/30/2020	4	DHHS	June Exp Reimb	DHHS	9,754.83
Invoice	07/31/2020	5	DHHS	July Exp Reimb	DHHS - Yr2	6,944.29
<b>Total DHHS Grant Income</b>						<b>55,442.86</b>
<b>Grassroots</b>						
Deposit	04/29/2020			Deposit	Grassroots	750.00
<b>Total Grassroots</b>						<b>750.00</b>
<b>United Way - Census</b>						
Deposit	04/29/2020		united Way	Need more info on this	Census - United Way	1,500.00
<b>Total United Way - Census</b>						<b>1,500.00</b>
<b>Total Awards &amp; Grants Income</b>						<b>62,692.86</b>
<b>Program Income</b>						
<b>Easter Seals/Mary Gale Income</b>						
Deposit	01/10/2020	148086		Deposit	MaryGale/Easter Seals	1,091.34
Deposit	01/10/2020	148085		Deposit	MaryGale/Easter Seals	1,439.27
Deposit	03/12/2020			Deposit	MaryGale/Easter Seals	1,265.91
<b>Total Easter Seals/Mary Gale Income</b>						<b>3,796.52</b>
<b>Total Program Income</b>						<b>3,796.52</b>
<b>Total Income</b>						<b>73,304.38</b>
<b>Expense</b>						
<b>Payroll</b>						
<b>Payroll Wages</b>						
Check	01/03/2020	10008	Junior Munzimi	WE 12/28/19 Payroll	DHHS	700.00
Check	01/03/2020	10008	Georges, Mary	WE 12/28/19 Payroll	DHHS	600.00
Check	01/16/2020	10010	Junior Munzimi	WE 1/11/20 Payroll	DHHS	0.00
Check	01/17/2020	2004	Junior Munzimi	WE 1/11/20 Payroll	DHHS	760.00
Check	01/31/2020	10012	Junior Munzimi	WE 1/25/20 Payroll	DHHS	920.00
Check	01/31/2020	10011	Georges, Mary	WE 1/11/20 & 1/25/20 Payroll	DHHS	1,320.00
Check	02/14/2020	10013	Georges, Mary	WE 2/8/20 Payroll	DHHS	690.00
Check	02/14/2020	10014	Junior Munzimi	WE 2/8/20 Payroll	DHHS	840.00

Check	02/27/2020	10018	Junior Munzimi	WE 2/22/20 Payroll	DHHS	880.00
Check	02/27/2020	10015	Georges, Mary	WE 2/22/20 Payroll	DHHS	780.00
Check	03/13/2020	10018	Georges, Mary	WE 3/7/20 Payroll	DHHS	600.00
Check	03/13/2020	10019	Junior Munzimi	WE 3/7/20 Payroll	DHHS	800.00
Check	03/13/2020	10017	Aziza Ali	WE 3/7/20 Payroll	Operations	300.00
Check	03/27/2020	10020	Georges, Mary	WE 3/21/20 Payroll	DHHS	600.00
Check	03/27/2020	10021	Junior Munzimi	WE 3/21/20 Payroll	DHHS	800.00
Check	04/07/2020	10024	Junior Munzimi	WE 4/4/20 Payroll	DHHS	800.00
Check	04/07/2020	10023	Georges, Mary	WE 4/4/20 Payroll	DHHS	600.00
Check	04/07/2020	10022	Aziza Ali	WE 4/4/20 Payroll	Operations	195.00
Check	04/23/2020	10026	Junior Munzimi	WE 4/18/20 Payroll	DHHS	800.00
Check	04/23/2020	10025	Georges, Mary	WE 4/18/20 Payroll	DHHS	600.00
Check	05/08/2020	10028	Georges, Mary	WE 5/2/20 Payroll	DHHS	600.00
Check	05/08/2020	10029	Junior Munzimi	WE 5/2/20 Payroll	DHHS	800.00
Check	05/08/2020	10027	Aziza Ali	WE 5/2/20 Payroll	Operations	150.00
Check	05/22/2020	10032	Junior Munzimi	WE 5/16/20 Payroll	DHHS	800.00
Check	05/22/2020	10031	Georges, Mary	WE 5/16/20 Payroll	DHHS	600.00
Check	05/22/2020	10030	Aziza Ali	WE 5/16/20 Payroll	Operations	150.00
Check	06/01/2020	10033	Aziza Ali	WE 5/30/20 Payroll	SBA PPP	180.00
Check	06/01/2020	10034	Georges, Mary	WE 5/30/20 Payroll	DHHS	600.00
Check	06/01/2020	10034	Georges, Mary	WE 5/30/20 Payroll	Grassroots	100.00
Check	06/01/2020	10034	Georges, Mary	WE 5/30/20 Payroll	Census - United Way	300.00
Check	06/01/2020	10035	Junior Munzimi	WE 5/30/20 Payroll	DHHS	800.00
Check	06/01/2020	10035	Junior Munzimi	WE 5/30/20 Payroll	Grassroots	120.00
Check	06/01/2020	10035	Junior Munzimi	WE 5/30/20 Payroll	Census - United Way	250.00
Check	06/16/2020	10036	Aziza Ali	WE 6/13/20 Payroll	SBA PPP	300.00
Check	06/19/2020	10038	Junior Munzimi	WE 6/13/20 Payroll	DHHS	900.00
Check	06/19/2020	10037	Georges, Mary	WE 6/13/20 Payroll	DHHS	1,200.00
Check	06/19/2020	10037	Georges, Mary	WE 6/13/20 Payroll	SBA PPP	300.00
Check	06/30/2020	10040	Georges, Mary	WE 6/27/20 Payroll	DHHS	600.00
Check	06/30/2020	10040	Georges, Mary	WE 6/27/20 Payroll	SBA PPP	300.00
Check	06/30/2020	10040	Georges, Mary	WE 6/27/20 Payroll	DHHS	1,300.00
Check	06/30/2020	10041	Junior Munzimi	WE 6/27/20 Payroll	DHHS	800.00
Check	06/30/2020	10041	Junior Munzimi	WE 6/27/20 Payroll	SBA PPP	456.01
Check	06/30/2020	10039	Aziza Ali	WE 6/27/20 Payroll	SBA PPP	300.00
Check	06/30/2020	10041	Junior Munzimi	WE 6/27/20 Payroll	DHHS	43.99
Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	DHHS - Yr2	800.00
Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	Census - United Way	200.00
Check	07/17/2020	10043	Georges, Mary	WE 7/11/20 Payroll	DHHS - Yr2	1,200.00
Check	07/17/2020	10043	Georges, Mary	WE 7/11/20 Payroll	SBA PPP	300.00
Check	07/17/2020	10043	Georges, Mary	WE 7/11/20 Payroll	Census - United Way	250.00
Check	07/17/2020	10042	Aziza Ali	WE 7/11/20 Payroll	SBA PPP	300.00
Check	07/17/2020	10045	Nyayoy Ojulu	WE 7/11/20 Payroll	Grassroots	250.00
Check	07/31/2020	10047	Georges, Mary	WE 7/25/20 Payroll	DHHS - Yr2	900.00
Check	07/31/2020	10047	Georges, Mary	WE 7/25/20 Payroll	SBA PPP	600.00
Check	07/31/2020	10049	Junior Munzimi	WE 7/25/20 Payroll	DHHS - Yr2	800.00
Check	07/31/2020	10050	Nyayoy Ojulu	WE 7/25/20 Payroll	NHCF-COVID19	212.50
Check	07/31/2020	10046	Aziza Ali	WE 7/25/20 Payroll	SBA PPP	300.00
Check	07/31/2020	10048	Gloria Mukendi	WE 7/25/20 Payroll	Operations	450.00
Total Payroll Wages						32,097.50
Payroll Taxes						
Check	01/03/2020	10009	Junior Munzimi	WE 12/28/19 Payroll	DHHS	-77.78
Check	01/03/2020	10008	Georges, Mary	WE 12/28/19 Payroll	DHHS	-92.77
Check	01/03/2020	ACH	Paychex	WE 12/28/19 Taxes	DHHS	293.40
Check	01/16/2020	10010	Junior Munzimi	WE 1/11/20 Payroll	DHHS	0.00
Check	01/16/2020	ACH	Paychex	WE 1/11/20 Payroll	DHHS	160.18
Check	01/17/2020	2004	Junior Munzimi	WE 1/11/20 Payroll	DHHS	-88.37
Check	01/31/2020	10012	Junior Munzimi	WE 1/25/20 Payroll	DHHS	-116.61
Check	01/31/2020	10011	Georges, Mary	WE 1/11/20 & 1/25/20 Payroll	DHHS	-234.25
Check	01/31/2020	ACH	Paychex	WE 1/25/20 Payroll Taxes	DHHS	562.54
Check	02/14/2020	10013	Georges, Mary	WE 2/8/20 Payroll	DHHS	-110.46
Check	02/14/2020	10014	Junior Munzimi	WE 2/8/20 Payroll	DHHS	-102.49
Check	02/14/2020	ACH	Paychex	WE 2/8/20 Payroll Taxes	DHHS	357.54
Check	02/27/2020	10016	Junior Munzimi	WE 2/22/20 Payroll	DHHS	-109.55

Check	02/27/2020	10015	Georges, Mary	WE 2/22/20 Payroll	DHHS	-128.14
Check	02/27/2020	ACH	Paychex	WE 2/22/20 Payroll	DHHS	394.56
Check	03/13/2020	10018	Georges, Mary	WE 3/7/20 Payroll	DHHS	-92.77
Check	03/13/2020	10019	Junior Munzimi	WE 3/7/20 Payroll	DHHS	-95.43
Check	03/13/2020	10017	Aziza Ali	WE 3/7/20 Payroll	Operations	-38.33
Check	03/13/2020	ACH	Paychex	WE 3/7/20 Payroll	DHHS	325.90
Check	03/13/2020	ACH	Paychex	WE 3/7/20 Payroll	Operations	61.28
Check	03/27/2020	10020	Georges, Mary	WE 3/21/20 Payroll	DHHS	-92.77
Check	03/27/2020	10021	Junior Munzimi	WE 3/21/20 Payroll	DHHS	-95.43
Check	03/27/2020	ACH	Paychex	WE 3/21/20 Payroll	DHHS	320.50
Check	04/07/2020	10024	Junior Munzimi	WE 4/4/20 Payroll	DHHS	-95.43
Check	04/07/2020	10023	Georges, Mary	WE 4/4/20 Payroll	DHHS	-92.77
Check	04/07/2020	10022	Aziza Ali	WE 4/4/20 Payroll	Operations	-19.80
Check	04/07/2020	ACH	Paychex	WE 4/4/20 Payroll	DHHS	358.73
Check	04/23/2020	10026	Junior Munzimi	WE 4/18/20 Payroll	DHHS	-95.43
Check	04/23/2020	10025	Georges, Mary	WE 4/18/20 Payroll	DHHS	-92.77
Check	04/23/2020	ACH	Paychex	WE 4/18/20 Payroll	DHHS	345.30
Check	05/08/2020	10028	Georges, Mary	WE 5/2/20 Payroll	DHHS	-92.77
Check	05/08/2020	10029	Junior Munzimi	WE 5/2/20 Payroll	DHHS	-95.43
Check	05/08/2020	10027	Aziza Ali	WE 5/2/20 Payroll	Operations	-11.85
Check	05/08/2020	ACH	Paychex	WE 5/2/20 Payroll	DHHS	371.18
Check	05/22/2020	10032	Junior Munzimi	WE 5/16/20 Payroll	DHHS	-95.43
Check	05/22/2020	10031	Georges, Mary	WE 5/16/20 Payroll	DHHS	-92.77
Check	05/22/2020	10030	Aziza Ali	WE 5/16/20 Payroll	Operations	-11.86
Check	05/22/2020	ACH	Paychex	WE 5/16/20 Payroll	DHHS	371.19
Check	06/01/2020	10033	Aziza Ali	WE 5/30/20 Payroll	Operations	-17.15
Check	06/01/2020	10034	Georges, Mary	WE 5/30/20 Payroll	DHHS	-171.37
Check	06/01/2020	10035	Junior Munzimi	WE 5/16/20 Payroll	DHHS	-160.74
Check	06/05/2020	ACH	Paychex	WE 5/30/20 Payroll	DHHS	603.03
Check	06/16/2020	10036	Aziza Ali	WE 6/13/20 Payroll	Operations	-38.33
Check	06/16/2020	10038	Junior Munzimi	WE 6/13/20 Payroll	DHHS	-113.08
Check	06/16/2020	10037	Georges, Mary	WE 6/13/20 Payroll	DHHS	-221.08
Check	06/16/2020	ACH	Paychex	WE 6/13/20 Payroll	DHHS	675.28
Check	06/16/2020	10037	Georges, Mary	WE 6/13/20 Payroll	Operations	-48.54
Check	06/30/2020	10040	Georges, Mary	WE 6/27/20 Payroll	DHHS	-361.99
Check	06/30/2020	10041	Junior Munzimi	WE 6/27/20 Payroll	DHHS	-178.73
Check	06/30/2020	ACH	Paychex	WE 6/27/20 Payroll	DHHS	1,038.98
Check	06/30/2020	10039	Aziza Ali	WE 6/27/20 Payroll	Operations	-38.33
Check	06/30/2020	10041	Junior Munzimi	WE 6/27/20 Payroll	Operations	-6.60
Check	06/30/2020	10040	Georges, Mary	WE 6/27/20 Payroll	Operations	-96.23
Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	DHHS - Yr2	-104.59
Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	Operations	-26.14
Check	07/17/2020	10043	Georges, Mary	WE 6/27/20 Payroll	DHHS - Yr2	-224.11
Check	07/17/2020	10043	Georges, Mary	WE 6/27/20 Payroll	Operations	-100.68
Check	07/17/2020	10042	Aziza Ali	WE 7/11/20 Payroll	Operations	-38.33
Check	07/17/2020	10045	Nyayoy Ojulu	WE 7/11/20 Payroll	Operations	-29.51
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll	DHHS - Yr2	593.93
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll	Operations	143.85
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll (Grossroots taxes)	Operations	48.64
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll (Census payroll taxes)	Operations	48.80
Deposit	07/18/2020		Paychex	refund of payroll taxes	Operations	-87.92
Check	07/31/2020	10047	Georges, Mary	WE 6/27/20 Payroll	DHHS - Yr2	-161.78
Check	07/31/2020	10047	Georges, Mary	WE 6/27/20 Payroll	Operations	-107.84
Check	07/31/2020	10049	Junior Munzimi	WE 7/25/20 Payroll	DHHS - Yr2	-95.43
Check	07/31/2020	10050	Nyayoy Ojulu	WE 7/25/20 Payroll	NHCF-COVID19	-22.89
Check	07/31/2020	10046	Aziza Ali	WE 7/25/20 Payroll	Operations	-38.33
Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	DHHS - Yr2	431.32
Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	Operations	283.89
Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	NHCF-COVID19	39.15
Check	07/31/2020	10048	Gloria Mukendi	WE 7/25/20 Payroll	Operations	-34.43
Total Payroll Taxes						3,033.57
Payroll Fees						
Check	01/03/2020	ACH	Paychex	December Payroll fee	Operations	75.30
Check	01/10/2020	ACH	Paychex	January Payroll fee	Operations	6.75

Check	01/17/2020	ACH	Paychex	Monthly fee includes YE work	Operations	175.35
Check	01/30/2020	ACH	Paychex	Payroll fee	Operations	50.30
Check	02/14/2020	ACH	Paychex		Operations	75.30
Check	02/27/2020	ACH	Paychex		Operations	50.30
Check	03/13/2020	ACH	Paychex	WE 3/7/20 Payroll	Operations	52.50
Check	03/27/2020	ACH	Paychex	WE 3/21/20 Payroll	Operations	50.30
Check	04/07/2020	ACH	Paychex	WE 4/4/20 Payroll	Operations	64.50
Check	04/23/2020	ACH	Paychex	WE 4/18/20 Payroll	Operations	50.30
Check	05/08/2020	ACH	Paychex	WE 5/2/20 Payroll	Operations	52.50
Check	05/22/2020	ACH	Paychex	WE 5/16/20 Payroll	Operations	52.50
Check	06/05/2020	ACH	Paychex	WE 5/16/20 Payroll	Operations	52.50
Check	06/19/2020	ACH	Paychex	WE 6/13/20 Payroll	Operations	52.50
Check	06/30/2020	ACH	Paychex	WE 6/27/20 Payroll	Operations	52.50
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll	Operations	66.70
Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	Operations	56.90
Total Payroll Fees						1,037.00
Total Payroll						36,168.07
Awards & Grants Expenses						
DHHS Grant Expenses						
Consultants						
Check	01/31/2020	2007	Wilson, Monica	Mentoring program stipend	DHHS	150.00
Check	01/31/2020	2008	Haarlander, Tara	Mentoring program stipend	DHHS	25.00
Check	01/31/2020	2009	Bourassa, Angelli	Mentoring program stipend	DHHS	100.00
Check	02/28/2020	2018	Excel Connect LLC	Dec - Feb work Central HS	DHHS	600.00
Check	02/28/2020	2019	Big Brothers Big Sisters of NH	Mentor Training 2/25/20 Inv	DHHS	1,000.00
Check	03/01/2020	2027	Peter Cooke		DHHS	100.00
Check	03/01/2020	2028	Hilda Suazo Salgado		DHHS	100.00
Check	03/01/2020	2029	Junior Munzimi		DHHS	600.00
Check	03/01/2020	2030	Georges, Mary		DHHS	600.00
Bill	03/31/2020		Georges, Mary	teacher/consultant	DHHS	500.00
Bill	03/31/2020		Junior Munzimi	Teacher/Consultant	DHHS	500.00
Bill	03/31/2020		Excel Connect LLC	interpretation work	DHHS	485.00
Bill	04/30/2020		Haarlander, Tara		DHHS	150.00
Bill	04/30/2020		Georges, Mary	Teaching	DHHS	400.00
Bill	04/30/2020		Junior Munzimi	Teaching	DHHS	250.00
Check	05/08/2020	2038	Haarlander, Tara		DHHS	75.00
Bill	05/31/2020		Peter Cooke		DHHS	250.00
Bill	05/31/2020		Haarlander, Tara		DHHS	200.00
Bill	05/31/2020		Freedom Accounting Services, LLC	Inv 12520 - May bookkeeping	DHHS	163.59
Bill	05/31/2020		Georges, Mary	Teaching	DHHS	400.00
Bill	05/31/2020		Valere Mangituka	drivers ed program	DHHS	1,000.00
Bill	06/30/2020		Bourassa, Angelli		DHHS	250.00
Bill	06/30/2020		State of NH	background checks on mentees	DHHS	106.25
Bill	07/01/2020	Inv 12540	Freedom Accounting Services, LLC	June bookkeeping	DHHS - Yr2	400.00
Bill	07/31/2020	12569	Freedom Accounting Services, LLC	July bookkeeping	DHHS - Yr2	400.00
Total Consultants						8,804.84
Equipment						
Check	03/06/2020	Debit	Staples		DHHS	109.89
Check	04/30/2020	Debit	Cellular Freedom	program cell phone	DHHS	410.00
Check	06/10/2020	Debit	Staples	per Junior	DHHS	273.87
Check	07/26/2020	Debit	Best Buy	Camara purchase - mary thinks this amount is an error, possi	DHHS - Yr2	484.96
Total Equipment						1,278.72
Office Supplies						
Check	01/28/2020	1373	State of NH	Criminal Background Checks	DHHS	63.75
Check	02/05/2020	Debit	BJ's Wholesale		DHHS	57.92
Check	02/21/2020	Debit	Staples		DHHS	82.96
Check	02/26/2020	Debit	Staples		DHHS	2.00
Check	02/26/2020	Debit	Staples		DHHS	154.19
Check	03/19/2020	Debit	Staples		DHHS	32.99
Check	05/23/2020	Debit	Staples	printer	DHHS	191.94
Check	05/31/2020	dEBIT	Staples	printer	DHHS	148.01
Deposit	05/31/2020		Staples	Staples Return - printer	DHHS	-191.94
Check	06/22/2020	Debit	NH Women's Foundation		DHHS	50.00
Bill	06/30/2020		Unknown Vendor - Need info	Mary to get me receipt after she uses these funds	DHHS	0.00

Check	07/15/2020	debit	Walmart	DHHS June surplus - on June DHHS report	DHHS	133.00
Check	07/15/2020	debit	Walmart	June surplus DHHS - already on DHHS June reimb	DHHS	65.91
Check	07/19/2020	Debit	AT&T	Phone Bill	DHHS	54.25
Check	07/30/2020	Debit	Rite Aid	printer paper	DHHS	5.43
Check	07/30/2020	Debit	Staples	hand safety	DHHS	54.98
<b>Total Office Supplies</b>						<b>905.39</b>
<b>Travel</b>						
Check	01/31/2020	2012	Simwerayi, Batyo	Mentoring program Travel (13.3 Miles @ .575 rate)	DHHS	7.85
Check	01/31/2020	2010	Kekumba, Mathilda	Mentoring program mileage (21 @ .575)	DHHS	12.08
Check	02/28/2020	2026	Georges, Mary	450 miles for travel for Mary	DHHS	258.75
<b>Total Travel</b>						<b>278.48</b>
<b>Subscriptions</b>						
Bill	07/30/2020		KrisCorp	Website Maintenance	DHHS - Yr2	300.00
<b>Total Subscriptions</b>						<b>300.00</b>
<b>Subcontractors</b>						
Check	01/14/2020	2002	Freedom Accounting Services, LLC	December Bookkeeping	DHHS	400.00
Check	02/24/2020	2016	Freedom Accounting Services, LLC	January bookkeeping	DHHS	491.09
Check	02/28/2020	2025	Freedom Accounting Services, LLC	Feb bookkeeping	DHHS	400.00
Bill	03/31/2020		Freedom Accounting Services, LLC	March Bookkeeping	DHHS	400.00
Bill	04/30/2020		Freedom Accounting Services, LLC	April Bookkeeping	DHHS	400.00
Bill	05/31/2020		Freedom Accounting Services, LLC	Inv 12520 - May bookkeeping	DHHS	236.41
<b>Total Subcontractors</b>						<b>2,327.50</b>
<b>Stipends</b>						
Check	02/28/2020	2020	Bourassa, Angeliki	Feb Stipend	DHHS	100.00
Check	02/28/2020	2021	Simwerayi, Batyo	Feb stipend	DHHS	280.00
Check	02/28/2020	2022	Kekumba, Mathilda	Feb stipend	DHHS	260.00
Check	02/28/2020	2023	Haarlander, Tara	Feb Stipend	DHHS	50.00
Check	02/28/2020	2024	Wilson, Monica	Feb stipend	DHHS	50.00
Bill	03/31/2020		Simwerayi, Batyo	Mentor stipend	DHHS	250.00
Bill	03/31/2020		Kekumba, Mathilda	mentor stipend	DHHS	250.00
Bill	03/31/2020		Peter Cooke	stipend for consultant	DHHS	150.00
Bill	03/31/2020		Hulda Suazo Salgado	stipend for consultant	DHHS	100.00
Bill	03/31/2020		Junior Munzimi	Interpretation services	DHHS	200.00
Bill	04/30/2020		Junior Munzimi	Interpreting	DHHS	200.00
Bill	05/31/2020		Junior Munzimi	Interpreting	DHHS	300.00
Bill	05/31/2020		Kekumba, Mathilda	mentor stipend	DHHS	150.00
Bill	05/31/2020		Simwerayi, Batyo	mentor stipend	DHHS	150.00
Bill	06/30/2020		Willie Miles	mentor stipend	DHHS	100.00
Bill	06/30/2020		Gloria Mukendi	mentor stipend	DHHS	100.00
Bill	06/30/2020		Sarah Georges	mentor stipend	DHHS	100.00
Bill	06/30/2020		Aguot A Wany	mentor stipend	DHHS	100.00
Bill	06/30/2020		Juniel Brown	mentor stipend	DHHS	100.00
Bill	07/30/2020		Gloria Mukendi	July Stipend for Mentee (4 wks @ \$100/wk)	DHHS - Yr2	200.00
Bill	07/30/2020		Juniel Brown	July Stipend for Mentee (4 wks @ \$100/wk)	DHHS - Yr2	200.00
Bill	07/30/2020		Sarah Georges	July Stipend for Mentee (4 wks @ \$100/wk)	DHHS - Yr2	200.00
Bill	07/30/2020		Aguot A Wany	July Stipend for Mentee (4 wks @ \$100/wk)	DHHS - Yr2	200.00
Bill	07/31/2020		Willie Miles	July Stipend for Mentee (4 wks @ \$100/wk)	DHHS - Yr2	200.00
<b>Total Stipends</b>						<b>3,970.00</b>
<b>Incentives for Mentees</b>						
Check	01/31/2020	2010	Kekumba, Mathilda	Mentoring program stipend	DHHS	210.00
Check	01/31/2020	2011	Mikolo, Arnold	Mentoring program stipend	DHHS	45.00
Check	01/31/2020	2012	Simwerayi, Batyo	Mentoring program stipend	DHHS	210.00
Check	01/31/2020	2013	Simwerayi, Ndoole Sandra	Mentoring program stipend	DHHS	120.00
Check	02/06/2020	Debit	Pizza Hut	after school program food for kids	DHHS	21.79
Check	02/13/2020	Debit	Domino's	after school program food	DHHS	29.40
Check	02/20/2020	Debit	Little Caesars	after school program food for kids	DHHS	17.46
Check	02/27/2020	1375	Georges, Mary	Reimb for pizza for mentees	DHHS	28.22
Check	03/02/2020	Debit	Walmart		DHHS	94.96
Check	03/06/2020	Debit	Little Caesars		DHHS	27.26
Check	03/11/2020	Debit	Walmart		DHHS	5.00
Check	03/11/2020	Debit	Little Caesars		DHHS	27.26
Bill	04/30/2020		Kekumba, Mathilda	mentor	DHHS	150.00
Bill	04/30/2020		Simwerayi, Batyo	mentor	DHHS	150.00
Check	05/02/2020	Debit	Walmart		DHHS	5.76

Check	05/09/2020 Debit	USPS		DHHS	52.36
Check	05/12/2020 Debit	The UPS Store		DHHS	129.55
Check	05/20/2020 Debit	Staples		DHHS	38.99
Check	05/23/2020 Debit	Staples		DHHS	32.99
Check	05/23/2020 Debit	Staples		DHHS	56.03
Check	05/27/2020 Debit	Staples		DHHS	305.92
Check	05/27/2020 Debit	Staples		DHHS	99.99
Check	05/29/2020 Debit	Domino's		DHHS	27.84
Check	05/29/2020 Debit	Domino's		DHHS	14.22
Check	05/29/2020 Debit	Domino's		DHHS	20.42
Check	05/29/2020 Debit	Domino's		DHHS	23.42
Check	05/29/2020 Debit	Domino's		DHHS	14.44
Check	05/29/2020 Debit	Domino's		DHHS	19.06
Check	05/29/2020 Debit	Domino's		DHHS	25.43
Check	05/29/2020 Debit	Domino's		DHHS	22.00
Check	05/29/2020 Debit	Domino's		DHHS	16.06
Check	05/29/2020 Debit	Domino's		DHHS	17.22
Check	05/29/2020 Debit	Domino's		DHHS	27.76
Check	05/30/2020 Debit	Domino's		DHHS	16.06
Bill	05/31/2020	Valere Mangituka	Drivers Education	DHHS	1,000.00
Bill	06/30/2020	Valere Mangituka	remaining bal of \$1700 (\$1K requested in May) needed to pay	DHHS	700.00
Bill	06/30/2020	Unknown Vendor - Need info	4 \$100 giftcards for students not taking drivers ed	DHHS	400.00
Check	07/22/2020 Debit	Market Basket		DHHS - Yr2	219.99
Total Incentives for Mentees					4,421.86
Total DHHS Grant Expenses					22,286.79
Grassroots Grant Expenses					
Gas & Mileage					
Bill	06/01/2020	Junior Munzimi	62 Miles for Grassroots Grant work	Grassroots	35.65
Total Gas & Mileage					35.65
Food & Supplies					
Check	06/04/2020 Debit	Market Basket		Grassroots	100.00
Check	06/18/2020 Debit	Market Basket		Grassroots	97.83
Check	07/25/2020 1379		Food	Grassroots	46.52
Total Food & Supplies					244.35
Total Grassroots Grant Expenses					280.00
NH Charitable COVID 19					
Food & Supplies					
Check	07/10/2020 1378	Nhiyobuh	African Veggies	NHCF-COVID19	132.00
Check	07/25/2020 Debit	Market Basket	food	NHCF-COVID19	32.45
Check	07/25/2020 1379		originally total to grassroots, due to overspend move part to NHCF-COVID19		53.48
Total Food & Supplies					217.93
Total NH Charitable COVID 19					217.93
United Way/Census Grant Exp					
Equipment					
Check	07/29/2020 Debit	Best Buy	Laptop	Census - United Way	374.97
Total Equipment					374.97
Total United Way/Census Grant Exp					374.97
Total Awards & Grants Expenses					23,159.69
Program Expenses					
Easter Seals/Mary Gale Expenses					
Check	01/14/2020 1370	Margarita Jlo	?? Med Reimb	MaryGale/Easter Seals	160.00
Check	01/14/2020 1369	Rosa Gusho	two month reimb	MaryGale/Easter Seals	150.00
Check	01/15/2020 Debit	Market Basket		MaryGale/Easter Seals	250.00
Check	01/16/2020 1372	Aziza Ali	Elderly needs	MaryGale/Easter Seals	120.00
Check	01/28/2020 Debit	Market Basket		MaryGale/Easter Seals	100.00
Check	02/05/2020 Debit	Burlington Coat Factory		MaryGale/Easter Seals	141.91
Check	02/05/2020 Debit	BJ's Wholesale		MaryGale/Easter Seals	20.56
Check	02/10/2020 Debit	Market Basket		MaryGale/Easter Seals	70.88
Check	02/11/2020 Debit	Market Basket		MaryGale/Easter Seals	100.00
Check	02/14/2020 Debit	A L Prime		MaryGale/Easter Seals	28.21
Check	02/17/2020 Debit	Walmart		MaryGale/Easter Seals	50.00
Check	02/22/2020 Debit	Speedway		MaryGale/Easter Seals	30.03
Check	02/22/2020 Debit	Home Depot		MaryGale/Easter Seals	23.41

Check	03/05/2020	Debit	A L Prime		MaryGale/Easter Seals	32.80
Check	03/28/2020	Debit	Market Basket		MaryGale/Easter Seals	600.00
Check	03/28/2020	Debit	A L Prime		MaryGale/Easter Seals	20.00
Check	04/10/2020	Debit	Market Basket	Elder giftcards	MaryGale/Easter Seals	230.00
Check	05/03/2020	Debit	Walgreens		MaryGale/Easter Seals	7.99
Check	05/27/2020	Debit	Rite Aid		MaryGale/Easter Seals	11.82
Check	06/01/2020	Debit	Budget Gas		MaryGale/Easter Seals	25.00
Check	06/16/2020	2054	Georges, Mary	mary paid for elder electric bill - this is to reimb her (approved)	MaryGale/Easter Seals	186.00
Check	07/30/2020	Debit	Walmart		MaryGale/Easter Seals	201.00
Total Easter Seals/Mary Gale Expenses						2,559.61
Total Program Expenses						2,559.61
Operations						
Federal Taxes						
Check	01/24/2020	2005	United States Treasury	Check mailed directly to Lawyer - Sheehan Phinney Bass & C	Operations	600.00
Check	05/27/2020	1377	NH Charitable Trusts	Extension	Operations	75.00
Total Federal Taxes						675.00
Insurance						
Bill	06/30/2020	Acct# 836	Philadelphia Insurance	Acct #83632674	Operations	965.00
Total Insurance						965.00
Rent						
Check	01/23/2020	2006	Wellington Trade Center	January 2020 Rent	Operations	550.00
Check	02/12/2020	2014	Wellington Trade Center	February 2020 Rent	Operations	550.00
Check	03/03/2020	2017	Wellington Trade Center	March 2020 Rent	Operations	550.00
Bill	04/01/2020		Wellington Trade Center	April Rent	Operations	550.00
Bill	05/01/2020		Wellington Trade Center	May Rent	Operations	550.00
Bill	06/01/2020		Wellington Trade Center	June Rent	SBA PPP	550.00
Bill	06/30/2020		Wellington Trade Center	Jul Rent	SBA PPP	550.00
Total Rent						3,850.00
Supplies						
Check	01/27/2020	ACH	Formswift.com		Operations	8.95
Check	02/27/2020	Debit	Formswift.com		Operations	8.95
Check	03/28/2020	Debit	Formswift.com		Operations	8.95
Check	04/29/2020	ACH	Formswift.com		Operations	8.95
Check	05/28/2020	Debit	Formswift.com		Operations	8.95
Total Supplies						44.75
Telephone/Internet						
Check	01/15/2020	2003	Consolidated Communications	12/30/19 Notice	Operations	97.74
Check	01/21/2020	ACH	Consolidated Communications	Dup payment - Mary called in and we send check - put toward	Operations	97.74
Check	02/24/2020	2015	Consolidated Communications	1/27/20 Billing (and past due balance)	Operations	190.92
Bill	04/07/2020		Consolidated Communications	3/37/20 Billing	Operations	214.74
Bill	04/27/2020		Consolidated Communications	4/27/20 Billing	Operations	106.25
Bill	06/01/2020		Consolidated Communications	5/27/20 Billing (recieved 6/24/20)	SBA PPP	100.23
Bill	06/27/2020		Consolidated Communications	6/27/20 Billing	SBA PPP	100.23
Bill	07/31/2020		Consolidated Communications	7/27/20 Billing	SBA PPP	107.87
Total Telephone/Internet						1,015.72
Travel						
Check	03/19/2020	2031	Junior Munzimi	Mileage Reimb for Feb 2020	Operations	103.00
Check	05/06/2020	2045	Junior Munzimi		Operations	143.75
Total Travel						246.75
Total Operations						6,797.22
Professional Fees						
Stipend						
Check	02/27/2020	1376	Nagat Elmahdi	For elders work	Operations	84.00
Total Stipend						84.00
Total Professional Fees						84.00
Total Expense						88,768.59
Net Ordinary Income						4,535.79
Other Income/Expense						
Other Income						
Interest Income						
Deposit	06/30/2020		St. Mary's Bank	June Interest on SBA acct		0.20
Deposit	07/31/2020			Interest	Operations	0.22
Total Interest Income						0.42

Total Other Income	0.42
Net Other Income	0.42
Net Income	4,536.21

Victory Women of Vision, Inc.  
Accounts Receivable  
7/31/2020

Contents

	Current	1 - 30	31 - 60	61 - 90	> 90	TOTAL
DHHS	6,944.29	0.00	0.00	0.00	0.00	6,944.29
TOTAL	6,944.29	0.00	0.00	0.00	0.00	6,944.29

July Expenses due for reimbursement

**Victory Women of Vision, Inc.**  
**Accounts Payable**  
**7/31/2020**

Contents

	Current	1 - 30	31 - 60	61 - 90	> 90	TOTAL
Aguot A Wany	200.00	0.00	0.00	0.00	0.00	200.00
Consolidated Communications	107.87	0.00	0.00	0.00	0.00	107.87
Freedom Accounting Services, LLC	400.00	0.00	0.00	0.00	0.00	400.00
Gloria Mukendi	200.00	0.00	0.00	0.00	0.00	200.00
Juniel Brown	200.00	0.00	0.00	0.00	0.00	200.00
KrisCorp	300.00	0.00	0.00	0.00	0.00	300.00
Sarah Georges	200.00	0.00	0.00	0.00	0.00	200.00
State of NH	0.00	106.25	0.00	0.00	0.00	106.25
Unknown Vendor - Need info	0.00	400.00	0.00	0.00	0.00	400.00
Wellington Trade Center	0.00	-550.00	0.00	0.00	0.00	-550.00
Willie Miles	200.00	0.00	0.00	0.00	0.00	200.00
<b>TOTAL</b>	<b>1,807.87</b>	<b>-43.75</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,764.12</b>

June exp for background checks. Do not have actual request to cut check  
 4 \$100 Gift cards for Mentees - waiting for Mary to purchase and provide me info  
 Prepaid August Rent

\*will be paid with June DHHS Reimb

**Victory Woman of Vision  
Restricted Fund SBA PPP Loan Summary  
May 27, 2020 - June 15, 2020**

Contents  
Accrual Basis

Cash Basis

Loan	Amount
SBA PPP Loan	\$8,800.00
<b>Total SSA PPP Loan Income</b>	<b>\$8,800.00</b>

Expense	Amount	Billing Date	Vendor	Cash Transfer Date
Payroll Wages - Ali Aziza	\$180.00	WE 5/30/20	Paychex	6/16/2020
Payroll Wages - Ali Aziza	\$300.00	WE 6/13/20	Paychex	6/16/2020
Payroll Wages - Mary Georges	\$300.00	WE 6/13/20	Paychex	6/16/2020
Payroll Wages - Ali Aziza	\$300.00	WE 6/27/20	Paychex	6/30/2020 Temp Loan offset
Payroll Wages - Mary Georges	\$300.00	WE 6/27/20	Paychex	6/30/2020 Temp Loan offset
Payroll Wages - Junior Munzimi	\$456.01	WE 6/27/20	Paychex	6/30/2020 Temp Loan offset
Payroll Wages - Ali Aziza	\$300.00	WE 7/11/20	Paychex	7/15/2020
Payroll Wages - Mary Georges	\$300.00	WE 7/11/20	Paychex	7/15/2020
Payroll Wages - Ali Aziza	\$300.00	WE 7/25/20	Paychex	7/28/2020
Payroll Wages - Mary Georges	\$600.00	WE 7/25/20	Paychex	7/28/2020
<b>Total Wages</b>	<b>\$3,336.01</b>			
Rent	\$550.00	June Rent	Wellington	6/16/2020
Rent	\$550.00	July Rent	Wellington	6/30/2020 Temp Loan offset
Rent	\$550.00	Aug Rent	Wellington	7/28/2020
Telephone/Internet	\$100.23	5/27/2020	Consolidated Comm.	6/30/2020 Temp Loan offset
Telephone/Internet	\$100.23	6/27/2020	Consolidated Comm.	6/30/2020 Temp Loan offset
Telephone/Internet	\$107.87	7/31/2020	Consolidated Comm.	7/10/2020
<b>Total Rent &amp; Utilities</b>	<b>\$1,958.33</b>			
<b>Total Expenses</b>	<b>\$5,294.34</b>			
Interest Earned	\$0.22	7/31/2020		
<b>Available Bal</b>	<b>\$3,505.88</b>			

**Wages** 63%  
**Rent & Utilities** 37%

**Restricted to:**

Payroll Wages (not to include payroll taxes or Stipends)  
Rent & Utilities (up to 40% of loan)

\*if these guidelines are met and all reporting is completed as requested loan will be 100% forgiven.

\*Starting 5/27/20, there is an 24 week period to spend the funds

**Victory Women of Vision, Inc.**  
**Operations Summary**  
**All - July 2020**

Contents

Accrual Basis

Contents

<b>Operations Income</b>	<b>2020 YTD</b>
Direct Public Support	\$6,815.00

<b>Operations Spending</b>	<b>2020 YTD</b>
----------------------------	-----------------

Expense

Payroll

Payroll Wages	\$1,245.00
Payroll Taxes	-\$203.74
Payroll Fees	\$1,037.00
<b>Total Payroll</b>	<b>\$2,078.26</b>

Operations

Bank Fees	\$0.00
Business Licenses & Fees	\$0.00
Conference & Meeting Expenses	\$0.00
Federal Taxes	\$675.00
Insurance	\$965.00
Postage & PO Box	\$0.00
Rent	\$2,750.00
Supplies	\$44.75
Telephone/Internet	\$707.39
Travel	\$246.75
<b>Total Operations</b>	<b>\$5,388.89</b>

Professional Fees

Stipend	\$84.00
Accounting Fees	\$0.00
<b>Total Professional Fees</b>	<b>\$84.00</b>

**Total Expense** **\$7,551.15**

Interest Income \$0.42

Welcoming Manchester Overspend **\$59.00**

Prior Years Operations Surplus **\$8,471.01** \*combo of all funds surplus outside of DHHS

**Total Available Operations Funds** **\$7,676.28**

**Victory Women of Vision, Inc.**  
**Profit & Loss Detail - Operations**  
**January - July 2020**

Contents

## Accrual Basis

Type	Date	Num	Name	Memo	Class	Amount
<b>Income</b>						
Direct Public Support						
Corporate Contributions						
Deposit	01/31/2020		USAA	Deposit	Operations	460.00
Deposit	03/02/2020		USAA	Deposit	Operations	460.00
Deposit	04/29/2020			Donation	Operations	300.00
Deposit	04/29/2020			Donation	Operations	200.00
Deposit	04/30/2020		USAA	Deposit	Operations	460.00
Deposit	06/01/2020		USAA	Deposit	Operations	460.00
Deposit	06/30/2020		USAA	G Martens	Operations	460.00
Total Corporate Contributions						2,800.00
Individual Contributions						
Deposit	01/10/2020	7814	Lyman, Daniel & Martha	Deposit	Operations	100.00
Deposit	02/26/2020		ORIS	Operations Funds	Operations	3,915.00
Total Individual Contributions						4,015.00
Total Direct Public Support						6,815.00
<b>Total Income</b>						<b>6,815.00</b>
<b>Expense</b>						
Payroll						
Payroll Wages						
Check	03/13/2020		Aziza Ali	WE 3/7/20 Payroll	Operations	300.00
Check	04/07/2020	10022	Aziza Ali	WE 4/4/20 Payroll	Operations	195.00
Check	05/08/2020	10030	Aziza Ali	WE 5/2/20 Payroll	Operations	150.00
Check	05/22/2020	10033	Aziza Ali	WE 5/16/20 Payroll	Operations	150.00
Check	07/31/2020	10048	Gloria Mukendi	WE 7/25/20 Payroll	Operations	450.00
Total Payroll Wages						1,245.00
Payroll Taxes						
Check	03/13/2020	10017	Aziza Ali	WE 3/7/20 Payroll	Operations	-38.33
Check	03/13/2020	ACH	Paychex	WE 3/7/20 Payroll	Operations	61.28
Check	04/07/2020	10022	Aziza Ali	WE 4/4/20 Payroll	Operations	-19.80
Check	05/08/2020	10027	Aziza Ali	WE 5/2/20 Payroll	Operations	-11.85
Check	05/22/2020	10030	Aziza Ali	WE 5/16/20 Payroll	Operations	-11.86
Check	06/01/2020	10033	Aziza Ali	WE 5/30/20 Payroll	Operations	-17.15
Check	06/16/2020	10036	Aziza Ali	WE 6/13/20 Payroll	Operations	-38.33
Check	06/19/2020	10037	Georges, Mary	WE 6/13/20 Payroll	Operations	-48.54
Check	06/30/2020	10039	Aziza Ali	WE 6/27/20 Payroll	Operations	-38.33
Check	06/30/2020	10041	Junior Munzimi	WE 6/27/20 Payroll	Operations	-6.60
Check	06/30/2020	10040	Georges, Mary	WE 6/27/20 Payroll	Operations	-96.23
Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	Operations	-26.14
Check	07/17/2020	10043	Georges, Mary	WE 6/27/20 Payroll	Operations	-100.68
Check	07/17/2020	10042	Aziza Ali	WE 7/11/20 Payroll	Operations	-38.33
Check	07/17/2020	10045	Nyayoy Ojulu	WE 7/11/20 Payroll	Operations	-29.51
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll	Operations	143.85
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll (Grassroots taxes)	Operations	48.64
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll (Census payroll taxes)	Operations	48.80
Deposit	07/18/2020		Paychex	refund of payroll taxes	Operations	-87.92
Check	07/31/2020	10047	Georges, Mary	WE 6/27/20 Payroll	Operations	-107.84
Check	07/31/2020	10046	Aziza Ali	WE 7/25/20 Payroll	Operations	-38.33

Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	Operations	283.89
Check	07/31/2020	10048	Gloria Mukendi	WE 7/25/20 Payroll	Operations	-34.43
Total Payroll Taxes						-203.74
<b>Payroll Fees</b>						
Check	01/03/2020	ACH	Paychex	December Payroll fee	Operations	75.30
Check	01/10/2020	ACH	Paychex	January Payroll fee	Operations	6.75
Check	01/17/2020	ACH	Paychex	Monthly fee includes YE work	Operations	175.35
Check	01/30/2020	ACH	Paychex	Payroll fee	Operations	50.30
Check	02/14/2020	ACH	Paychex		Operations	75.30
Check	02/27/2020	ACH	Paychex		Operations	50.30
Check	03/13/2020	ACH	Paychex	WE 3/7/20 Payroll	Operations	52.50
Check	03/27/2020	ACH	Paychex	WE 3/21/20 Payroll	Operations	50.30
Check	04/07/2020	ACH	Paychex	WE 4/4/20 Payroll	Operations	64.50
Check	04/23/2020	ACH	Paychex	WE 4/18/20 Payroll	Operations	50.30
Check	05/08/2020	ACH	Paychex	WE 5/2/20 Payroll	Operations	52.50
Check	05/22/2020	ACH	Paychex	WE 5/16/20 Payroll	Operations	52.50
Check	06/05/2020	ACH	Paychex	WE 5/16/20 Payroll	Operations	52.50
Check	06/19/2020	ACH	Paychex	WE 6/13/20 Payroll	Operations	52.50
Check	06/30/2020	ACH	Paychex	WE 6/27/20 Payroll	Operations	52.50
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll	Operations	66.70
Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	Operations	56.90
Total Payroll Fees						1,037.00
Total Payroll						2,078.26
<b>Operations</b>						
<b>Federal Taxes</b>						
Check	01/24/2020	2005	United States Treasury	Check mailed directly to Lawyer - Sheehan Phinney Bass & C	Operations	600.00
Check	05/27/2020	1377	NH Charitable Trusts	Extension	Operations	75.00
Total Federal Taxes						675.00
<b>Insurance</b>						
Bill	06/30/2020	Acct# 836	Philadelphia Insurance	Acct #83632674	Operations	965.00
Total Insurance						965.00
<b>Rent</b>						
Check	01/23/2020	2006	Wellington Trade Center	January 2020 Rent	Operations	550.00
Check	02/12/2020	2014	Wellington Trade Center	February 2020 Rent	Operations	550.00
Check	03/03/2020	2017	Wellington Trade Center	March 2020 Rent	Operations	550.00
Bill	04/01/2020		Wellington Trade Center	April Rent	Operations	550.00
Bill	05/01/2020		Wellington Trade Center	May Rent	Operations	550.00
Total Rent						2,750.00
<b>Supplies</b>						
Check	01/27/2020	ACH	Formswift.com		Operations	8.95
Check	02/27/2020	Debit	Formswift.com		Operations	8.95
Check	03/28/2020	Debit	Formswift.com		Operations	8.95
Check	04/29/2020	ACH	Formswift.com		Operations	8.95
Check	05/28/2020	Debit	Formswift.com		Operations	8.95
Total Supplies						44.75
<b>Telephone/Internet</b>						
Check	01/15/2020	2003	Consolidated Communications	12/30/19 Notice	Operations	97.74
Check	01/21/2020	ACH	Consolidated Communications	Dup payment - Mary called in and we send check - put toward	Operations	97.74
Check	02/24/2020	2015	Consolidated Communications	1/27/20 Billing (and past due balance)	Operations	190.92
Bill	04/07/2020		Consolidated Communications	3/37/20 Billing	Operations	214.74
Bill	04/27/2020		Consolidated Communications	4/27/20 Billing	Operations	106.25
Total Telephone/Internet						707.39
<b>Travel</b>						
Check	03/19/2020	2031	Junior Munzimi	Mileage Reimb for Feb 2020	Operations	103.00
Check	05/06/2020	2045	Junior Munzimi		Operations	143.75
Total Travel						246.75
Total Operations						5,388.89

Professional Fees

Stipend

Check	02/27/2020	1378	Nagat Elmahdi	For elders work	Operations	84.00
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Total Stipend						84.00
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Total Professional Fees						84.00
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Total Expense						7,551.15
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Net Income						-738.15
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**Victory Women of Vision, Inc.**  
**Budget vs Actual - DHHS Grant Year 2**  
**All Dates thru July 2020**

Contents

Need new year's budget

Accrual Basis

<b>DHHS Grant Year 2</b>			
	<b>Alt - Jul 20</b>	<b>Jul 19 - Jul 20</b>	<b>\$ Over Budget</b>
	<b>Actual</b>	<b>Budget</b>	
<b>Income</b>			
<b>Awards &amp; Grants Income</b>			
DHHS Grant Income	6,944.29	75,000.00	-68,055.71
<b>Total Awards &amp; Grants Income</b>	6,944.29	75,000.00	-68,055.71
<b>Total Income</b>	6,944.29	75,000.00	-68,055.71
<b>Expense</b>			
<b>Payroll</b>			
Payroll Wages	3,700.00	0.00	3,700.00
Payroll Taxes	439.34	0.00	439.34
<b>Total Payroll</b>	4,139.34	0.00	4,139.34
<b>Awards &amp; Grants Expenses</b>			
DHHS Grant Expenses			
Consultants	800.00	0.00	800.00
Equipment	484.96	0.00	484.96
Office Supplies	0.00	0.00	0.00
Travel	0.00	0.00	0.00
Subscriptions	300.00	0.00	300.00
Subcontractors	0.00	0.00	0.00
Stipends	1,000.00	0.00	1,000.00
Incentives for Mentees	219.99	0.00	219.99
<b>Total DHHS Grant Expenses</b>	2,804.95	0.00	2,804.95
<b>Total Awards &amp; Grants Expenses</b>	2,804.95	0.00	2,804.95
<b>Total Expense</b>	6,944.29	0.00	6,944.29
<b>Net Income</b>	0.00	75,000.00	-75,000.00

Original Award      \$75,000.00  
Total Expenses      \$6,944.29  
Available Balance    \$68,055.71

<b>Current Year Award Period Budget</b>	<b>\$75,000.00 7/1/19 - 9/30/20</b>	<b>CLOSED</b>
<b>Prior Year Award Period Budget</b>	<b>\$56,250.00 7/1/19 - 6/30/20</b>	

**Victory Women of Vision, Inc.**  
**Profit & Loss Detail - DHHS Grant**  
**All Dates thru July 2020**

Contents

## Accrual Basis

Type	Date	Num	Name	Memo	Class	Amount
<b>DHHS Grant Income</b>						
Invoice	07/31/2020	DHHS		July Exp Reimb	DHHS - Yr2	6,944.29

<b>Total Income</b>						<b>6,944.29</b>
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## Expense

## Payroll Wages

Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	DHHS - Yr2	800.00
Check	07/17/2020	10043	Georges, Mary	WE 7/11/20 Payroll	DHHS - Yr2	1,200.00
Check	07/31/2020	10047	Georges, Mary	WE 7/25/20 Payroll	DHHS - Yr2	900.00
Check	07/31/2020	10049	Junior Munzimi	WE 7/25/20 Payroll	DHHS - Yr2	800.00

## Total Payroll Wages

3,700.00

## Payroll Taxes

Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	DHHS - Yr2	-104.59
Check	07/17/2020	10043	Georges, Mary	WE 6/27/20 Payroll	DHHS - Yr2	-224.11
Check	07/17/2020	ACH	Paychex	WE 7/11/20 Payroll	DHHS - Yr2	593.93
Check	07/31/2020	10047	Georges, Mary	WE 6/27/20 Payroll	DHHS - Yr2	-161.78
Check	07/31/2020	10049	Junior Munzimi	WE 7/25/20 Payroll	DHHS - Yr2	-95.43
Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	DHHS - Yr2	431.32

## Total Payroll Taxes

439.34

## Consultants

Bill	07/01/2020	Inv 12540	Freedom Accounting Services, LLC	June bookkeeping	DHHS - Yr2	400.00
Bill	07/31/2020	12569	Freedom Accounting Services, LLC	July bookkeeping	DHHS - Yr2	400.00

## Total Consultants

800.00

## Equipment

Check	07/26/2020	Debit	Best Buy	Camara purchase - mary thinks	DHHS - Yr2	484.96
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## Total Equipment

484.96

## Office Supplies

## Total Office Supplies

0.00

## Travel

## Total Travel

0.00

**Subscriptions**

Bill	07/30/2020	KrisCorp	Website Maintenance	DHHS - Yr2	<u>300.00</u>
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Total Subscriptions

300.00**Subcontractors**

Total Subcontractors

0.00**Stipends**

Bill	07/30/2020	Gloria Mukendi	July Stipend for Mentee (4 wks ( DHHS - Yr2	200.00
Bill	07/30/2020	Juniel Brown	July Stipend for Mentee (4 wks ( DHHS - Yr2	200.00
Bill	07/30/2020	Sarah Georges	July Stipend for Mentee (4 wks ( DHHS - Yr2	200.00
Bill	07/30/2020	Willie Miles	July Stipend for Mentee (4 wks ( DHHS - Yr2	200.00
Bill	07/30/2020	Aguot A Wany	July Stipend for Mentee (4 wks ( DHHS - Yr2	<u>200.00</u>

Total Stipends

1,000.00**Incentives for Mentees**

Check	07/22/2020 Debit	Market Basket	DHHS - Yr2	219.99
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Total Incentives for Mentees

219.99**Total Expense****6,944.29**

**Victory Women of Vision, Inc.**  
**Budget vs Actual - Grassroots Grant**  
**All Dates thru July 2020**

Contents**Accrual Basis**

<b>Grassroots Grant</b>			
	<b>All - Jul 20</b>	<b>Total</b>	<b>\$ Over Budget</b>
	<b>Actual</b>	<b>Budget</b>	
<b>Income</b>			
Grassroots Grant Income	750.00	750.00	0.00
<b>Total Grassroots Income</b>	<b>750.00</b>	<b>750.00</b>	<b>0.00</b>
<b>Expense</b>			
Grassroots Grant Expenses			
Gas & Mileage	35.65	161.00	-125.35
Stipends	470.00	400.00	70.00
Food & Supplies	244.35	439.00	-194.65
<b>Total Grassroots Grant Expenses</b>	<b>750.00</b>	<b>1,000.00</b>	<b>-250.00</b>
<b>Net Income</b>	<b>0.00</b>	<b>-250.00</b>	<b>250.00</b>

Original Award	\$750.00
Total Expenses	\$750.00
Available Balance	\$0.00

**Total Award Amount      \$750.00**

**Victory Women of Vision, Inc.**  
**Profit & Loss Detail - Grassroots Grant**  
**All Dates thru July 2020**

Contents

## Accrual Basis

Type	Date	Num	Name	Memo	Class	Amount
<b>Grassroots Grant Income</b>						
Deposit	04/29/2020				Grassroots	750.00
<b>Total Income</b>						<b>750.00</b>
<b>Expense</b>						
<b>Grassroots Grant Expenses</b>						
<b>Gas &amp; Mileage</b>						
Bill	06/01/2020		Junior Munzimi	.62 Miles for Grassroots Grant work	Grassroots	35.65
<b>Total Gas &amp; Mileage</b>						<b>35.65</b>
<b>Food &amp; Supplies</b>						
Check	06/04/2020	Debit	Market Basket		Grassroots	100.00
Check	06/18/2020	Debit	Market Basket		Grassroots	97.83
Check	07/25/2020	1379		Food	Grassroots	46.52
<b>Total Food &amp; Supplies</b>						<b>244.35</b>
<b>Stipends</b>						
Check	06/01/2020	10034	Georges, Mary	WE 5/30/20 Payroll	Grassroots	100.00
Check	06/01/2020	10035	Junior Munzimi	WE 5/30/20 Payroll	Grassroots	120.00
Check	07/17/2020	10045	Nyayoy Ojulu	WE 7/11/20 Payroll	Grassroots	250.00
<b>Total Stipends</b>						<b>470.00</b>
<b>Total Expense</b>						<b>750.00</b>

**Victory Women of Vision, Inc.**  
**Budget vs Actual - NHCF COVID 19 Grant**  
**All Dates thru July 2020**

Contents

Accrual Basis

<b>NHCF COVID 19 Grant</b>			
	<b>All - Jul 20</b>	<b>Total</b>	<b>\$ Over Budget</b>
	<b>Actual</b>	<b>Budget</b>	
<b>Income</b>			
NH Charitable - COVID 19 Grant Income	5,000.00	5,000.00	0.00
<b>Total Grassroots Income</b>	5,000.00	5,000.00	0.00
<b>Expense</b>			
NH Charitable COVID 19 Grant Expenses			
Food & Supplies	217.93	1,000.00	-782.07
Gas & Mileage	0.00	443.00	-443.00
Indirect/Admin	0.00	257.00	-257.00
Stipends	228.76	3,300.00	-3,071.24
<b>Total Grassroots Grant Expenses</b>	446.69	5,000.00	-4,553.31
<b>Net Income</b>	4,553.31	0.00	4,553.31

Original Award	\$5,000.00
Total Expenses	\$446.69
Available Balance	\$4,553.31

**Total Award Amount      \$5,000.00**

**Victory Women of Vision, Inc.**  
**Profit & Loss Detail - NHCF COVID 19 Grant**  
**All Dates thru July 2020**

Contents

## Accrual Basis

Type	Date	Num	Name	Memo	Class	Amount
<b>NH Charitable - COVID 19 Grant Income</b>						
Deposit	07/14/2020				NHCF-COVID19	5,000.00
<b>Total Income</b>						<b>5,000.00</b>
<b>Expense</b>						
<b>NH Charitable COVID 19 Expenses</b>						
<b>Food &amp; Supplies</b>						
Check	07/25/2020	Debit	Market Basket	food	NHCF-COVID19	32.45
<b>Total Food &amp; Supplies</b>						<b>32.45</b>
<b>Gas &amp; Mileage</b>						
<b>Total Gas &amp; Mileage</b>						<b>0.00</b>
<b>Indirect/Admin</b>						
<b>Total Indirect/Admin</b>						<b>0.00</b>
<b>Stipends</b>						
Check	07/31/2020	10050	Nyayoy Ojulu	WE 7/25/20 Payroll	NHCF-COVID19	212.50
Check	07/31/2020	10050	Nyayoy Ojulu	WE 7/25/20 Payroll	NHCF-COVID19	-22.89
Check	07/31/2020	ACH	Paychex	WE 7/25/20 Payroll	NHCF-COVID19	39.15
<b>Total Stipends</b>						<b>228.76</b>
<b>Total Expense</b>						<b>261.21</b>

**Victory Women of Vision, Inc.**  
**Budget vs Actual - United Way/Census Grant**  
**All Dates thru July 2020**

Contents

**Accrual Basis**

<b>United Way/Census Grant</b>			
	<b>All - Jul 20</b>	<b>Total</b>	<b>\$ Over Budget</b>
	<b>Actual</b>	<b>Budget</b>	
<b>Income</b>			
United Way Grant Income	1,500.00	1,500.00	0.00
<b>Total Grassroots Income</b>	1,500.00	1,500.00	0.00
<b>Expense</b>			
Grassroots Grant Expenses			
Equipment	374.97	0.00	374.97
Stipends	1,000.00	376.00	624.00
Telecom & Supplies	0.00	1,124.00	-1,124.00
<b>Total Grassroots Grant Expenses</b>	1,374.97	1,500.00	-125.03
<b>Net Income</b>	125.03	0.00	125.03

<b>Original Award</b>	<b>\$1,500.00</b>
<b>Total Expenses</b>	<b>\$1,374.97</b>
<b>Available Balance</b>	<b>\$125.03</b>

**Total Award Amount      \$1,500.00**

### Accrual Basis

Type	Date	Num	Name	Memo	Class	Amount
<b>United Way/Census Grant Income</b>						
Deposit	04/29/2020				United Way	1,500.00
<b>Total Income</b>						<b>1,500.00</b>
<b>Expense</b>						
<b>United Way/Census Grant Expenses</b>						
<b>Stipends</b>						
Check	06/01/2020	10034	Georges, Mary	WE 5/30/20 Payroll	Cencus - United Way	300.00
Check	06/01/2020	10035	Junior Munzimi	WE 5/30/20 Payroll	Cencus - United Way	250.00
Check	07/17/2020	10044	Junior Munzimi	WE 7/11/20 Payroll	Cencus - United Way	200.00
Check	07/17/2020	10043	Georges, Mary	WE 7/11/20 Payroll	Cencus - United Way	250.00
Total Stipends						1,000.00
<b>Telecom &amp; Supplies</b>						
Total Telecom & Supplies						0.00
<b>Equipment</b>						
Check	07/29/2020	Debit	Best Buy	Laptop	Cencus - United Way	374.97
Total Equipment						374.97
<b>Total Expense</b>						<b>1,374.97</b>

**Victory Women of Vision, Inc.**  
**Profit & Loss Detail - Easter Seals/Mary Gale**  
**All - Jun 2020**

Contents

Max Reimb Mthly \$2,500.00

Accrual Basis

Type	Date	Num	Name	Memo	Class	Amount
<b>Income</b>						
<b>Easter Seals/Mary Gale Income</b>						
<b>2019 Income</b>						<b>10,068.61</b>
Deposit	01/10/2020	148086		Oct/Nov Reimb	Easter Seals	1,091.34
Deposit	01/10/2020	148085		December Reimb	Easter Seals	1,439.27
Deposit	03/12/2020			Deposit	MaryGale/East	1,285.91
<b>Total Easter Seals/Mary Gale Income</b>						<b>13,865.13</b>

**Expense**

<b>Easter Seals/Mary Gale Expenses</b>						
<b>2019 Expenses</b>						<b>11,621.26</b>
Check	01/14/2020	1370	Margarita Jlo	Med Reimb	MaryGale/East	160.00
Check	01/14/2020	1369	Rosa Gusho	two month reimb	MaryGale/East	150.00
Check	01/15/2020	Debit	Market Basket		MaryGale/East	250.00
Check	01/16/2020	1372	Aziza Ali	Elderly needs	MaryGale/East	120.00
Check	01/28/2020	Debit	Market Basket		MaryGale/East	100.00
Check	02/05/2020	Debit	Burlington Coat Factory		MaryGale/East	141.91
Check	02/05/2020	Debit	BJ's Wholesale		MaryGale/East	20.56
Check	02/10/2020	Debit	Market Basket		MaryGale/East	70.88
Check	02/11/2020	Debit	Market Basket		MaryGale/East	100.00
Check	02/14/2020	Debit	A L Prime		MaryGale/East	28.21
Check	02/17/2020	Debit	Walmart		MaryGale/East	50.00
Check	02/22/2020	Debit	Speedway		MaryGale/East	30.03
Check	02/22/2020	Debit	Home Depot		MaryGale/East	23.41
Check	03/05/2020	Debit	A L Prime		MaryGale/East	32.80
Check	03/28/2020	Debit	Market Basket		MaryGale/East	600.00
Check	03/28/2020	Debit	A L Prime		MaryGale/East	20.00
Check	04/10/2020	Debit	Market Basket		MaryGale/East	230.00
Check	05/03/2020	Debit	Walgreens		MaryGale/East	7.99
Check	05/27/2020	Debit	Rite Aid		MaryGale/East	11.82
Check	06/01/2020	Debit	Budget Gas		MaryGale/East	25.00
Check	06/16/2020	2054	Georges, Mary	mary paid for elder electric bill - this is to reimb	MaryGale/East	186.00
Check	07/30/2020	Debit	Walmart		MaryGale/East	201.00
<b>Total Easter Seals/Mary Gale Expenses</b>						<b>14,180.87</b>

All Dates -315.74 Reimb Due

\*Total Red items seem to still be outstanding for Reimb **\$1,314.61**



## **VICTORY WOMEN OF VISION**

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### **Board of Directors**

*Margaret H. Martens: Board Chair*  
*Consultant, Inclusive Development LLC*  
*Phone: 617-733-1014*

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*603-225-0001*

*Shirley Tomlinson: Board Member*  
*Program Director, Boys and Girls Club*  
*Phone: 603-341-1167*

*Charlotte Laza Ndombe: Board Member*  
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*Phone 603-6574276*

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*Clinical Social Worker, Mental Health Center of Greater Manchester*  
*Phone: 603-966-0664*

*Isabelle Valmont: Board Member*  
*Office of Minority Health and Refugees Affairs*  
*Phone: 603-271-8557*

*Patrick Mukuba: Board Member*  
*Senior Accountant, Single Digit Inc*  
*Phone: 603-271-8557*

# Mary Ngwanda Georges

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18 Blodget Street, Manchester, NH, 03104\* (603) 264-7083\*victorywomen@msn.com

## SUMMARY

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**Advocate, Community Organizer, Liaison**

- **Innovator in human services to empower citizens at risk**
- **Fluent in English, French, and Creole and other (DRC Multi-lingual)**

## EDUCATION

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**Master of Science, Organizational Management and Leadership**

Springfield College, Manchester, New Hampshire

**Bachelor of Human Services**

Springfield College, Manchester, New Hampshire

**Certificate, for Emerging Leadership Community of Color (ELCC)**

## PROFESSIONAL EXPERIENCE & TRAININGS

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**Former Boards of School Committee Members' Manchester ward 3 & Selectman**

**Founder, of Victory Women of Vision** Focus to empower and encourage women to thrive and strengthen newly arrived immigrant and refugee families by assisting them with adapting to the new culture in which they find themselves.

**Co-owner, at L&G Cleaning Business, Manchester, NH:** Owner-operated Cleaning Business: managed finances, inventories, and all employees

**Day Program Associate, Granite Bay Connection Inc., Concord NH, and Provider Home Care:** for patients and mentally disabled people in their homes by teaching independent living skills

**Organizational Management Experience in Non-Profits:** Community of Practice, Statewide systems Change, Multi-sector strategies and Community Intervention/ Integration Pathways

**Founder/former President of Congolese Community in New Hampshire (CCNH)**

**Founder/ Women & Youth Commissioner of Congolese Community of Unite -State (CCUS)**

## REFERENCES

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- **Elizabeth Clardy MD:** Capital Region Health Care, Family Physician  
Telephone: (603)225-0001
- **Councilor Theodore L. Gatsas:** Executive Council  
Telephone: (603)2713632
- **Leslie Want, Vice Chair:** Manchester Board of School Committee  
Telephone: (603)438-9682



Jeffrey A. Meyers  
Commissioner

STATE OF NEW HAMPSHIRE  
JUL 03 19 AM 11:52 DAS  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF THE COMMISSIONER

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9389 1-800-852-3345 Ext. 9389  
Fax: 603-271-4332 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

June 20, 2019

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Office of the Commissioner, to enter into an agreement with Victory Women of Vision (Vendor # TBD), 25 Lowell St. Suite 307, Manchester, NH 03101, to provide refugee youth mentoring services in an amount not to exceed \$75,000, effective upon Governor and Executive Council approval through September 30, 2020. 100% Federal Funds.

Funds are anticipated to be available in State Fiscal Year 2020 upon availability and continued appropriation of funds in the future operating budget, with authority to adjust budget line items within the price limitation and adjust encumbrances between state fiscal years through the Budget Office, if needed and justified.

05-95-42-042/7922-79220000/500731 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: HUMAN SERVICES, Office of Health Equity, Refugee Services

State Fiscal Year	Class/Account	Class Title	Job Number	Total Amount
2020	102-500731	Contracts for Prog Support	42200026	\$75,000
			<b>Total</b>	<b>\$75,000</b>

**EXPLANATION**

The purpose of this request is to provide refugee youth mentoring services that will match eligible youth with mentors and case management services in order to support successful integration into schools, communities and places of employment.

Approximately sixty (60) youths and family members will receive services provided by this contract from August 1, 2019 through September 30, 2020.

Some refugee youths arrive to the United States after protracted periods of displacement in conflict zones. They have often been victims of violence, and have experienced separation or loss of family members. Without adequate social and educational support to encourage integration into their new communities, and to advance their educational and vocational goals,

some refugee youths may become disillusioned about their futures, and miss opportunities to integrate into American society as they grow into adults.

Services include, but are not limited to, social, academic, and vocational services for refugees and asylees statewide who have been in the United States for less than five (5) years and are between fifteen (15) and twenty-four (24) years of age, with preference given to youths who have been in the United States for one year or less.

The goals of the refugee youth mentoring program are to promote positive civic and social engagement, and support individual educational and vocational advancement. To accomplish these goals, the Contractor will ensure that youths who are enrolled in the refugee youth mentoring program are matched with positive adult mentors who will provide the youths with personalized interaction.

Refugee youth mentoring program services include, but are not limited to, an initial needs assessment that identifies the needs and goals for each youth, an individual plan for each youth, and recruiting and training of mentors.

Mentors will provide support for youths enrolled in the program that include assisting with development of social and life skills, learning about American culture, and identifying opportunities to participate in civic and community service activities.

The Department will monitor the effectiveness of the Contractor and the delivery of services required under this agreement using the following contract management measures:

- Narrative reports including a summary of project outcomes every 120 days which will include:
  - Number of youths served.
  - Types of services provide for each youth
- Periodic meetings with the Contractor to be scheduled at the request of the Department.

Victory Women of Vision was selected for this project through a competitive bid process. A Request for Proposals was published on the Department of Health and Human Services website from February 14, 2019 through March 20, 2019. The Department received four (4) proposals. The proposals were reviewed and scored by a team of individuals with program-specific knowledge. The Score Summary Sheet is attached.

As referenced in the Request for Proposals and in Exhibit C-1 of this contract, the parties have the option to extend contract services for up to three (3) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties, and approval of the Governor and Executive Council.

Should the Governor and Executive Council not authorize this request, refugee youths may not receive the support necessary to navigate American culture and systems, and may not have access to educational and vocational support services provided by trained and dedicated mentors. Failure to have access to these services may result in a decrease in employment opportunities, poor academic performance, loss of housing and medical services, social isolation, and depression among the refugee youth population.

Area served: Statewide.

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
Page 3 of 3

Source of Funds: 100% Federal Funds from Department of Health and Human Services, Administration for Children and Families, Refugee Social Services Program, CFDA #93.566, FAIN #1801NHRSOC.

In the event that the Federal Funds become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Jeffrey A. Meyers", written in a cursive style.

Jeffrey A. Meyers  
Commissioner



**New Hampshire Department of Health and Human Services  
Office of Business Operations  
Contracts & Procurement Unit  
Summary Scoring Sheet**

**Refugee Youth Mentoring Program  
Services**

RFP Name

**RFP-2019-OHE-02-YOUTH**

RFP Number

**Reviewer Names**

**Bidder Name**

1. Victory Women of Vision (VWV)
2. BRING IT!
3. Building Community In New Hampshire
4. ASPIR INTERNATIONAL

Pass/Fail	Maximum Points	Actual Points
	400	342
	400	170
	400	196
	400	102

1. Trinidad Tellez, Director of Health Equity
2. Barbara Seebart, Program Specialist IV
3. Laura McGlashan, Program Specialist III
4. Shawn Barry, Program Specialist III

FORM NUMBER P-37 (version 5/8/15)

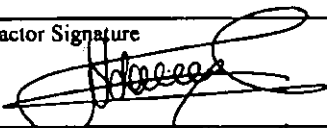

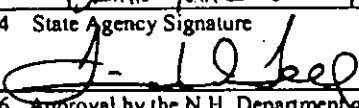
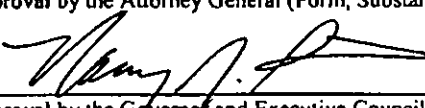
Subject: Refugee Youth Mentoring Program Services (RFP-2019-OHE-02-YOUTH)

**Notice:** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

The State of New Hampshire and the Contractor hereby mutually agree as follows:

**GENERAL PROVISIONS****1. IDENTIFICATION.**

1.1 State Agency Name NH Department of Health and Human Services		1.2 State Agency Address 129 Pleasant Street Concord, NH 03301-3857	
1.3 Contractor Name Victory Women of Vision.		1.4 Contractor Address 25 Lowell St Suite 307, Manchester, NH, 03101	
1.5 Contractor Phone Number 603-264-7083	1.6 Account Number 05-095-042-42200026-79220000-500731	1.7 Completion Date September 30, 2020	1.8 Price Limitation \$75,000
1.9 Contracting Officer for State Agency Nathan D. White, Director		1.10 State Agency Telephone Number 603-271-9631	
1.11 Contractor Signature 		1.12 Name and Title of Contractor Signatory MARY NGWANDA Georges EXECUTIVE DIRECTOR	
1.13 Acknowledgement: State of <u>NEW HAMPSHIRE</u> County of <u>Hillsborough</u> On <u>6/12/2019</u> , before the undersigned officer, personally appeared the person identified in block 1.12, or satisfactorily proven to be the person whose name is signed in block 1.11, and acknowledged that s/he executed this document in the capacity indicated in block 1.12.			
1.13.1 Signature of Notary Public or Justice of the Peace Notary Public, State of New Hampshire My Commission Expires Feb. 10, 2021  (Seal)			
1.13.2 Name and Title of Notary or Justice of the Peace <u>BRIAN MOORE</u> NOTARY			
1.14 State Agency Signature  Date: <u>6/17/19</u>		1.15 Name and Title of State Agency Signatory <u>Trinidad Teller, Director, Office of Health Equity</u>	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable) By: _____ Director, On: _____			
1.17 Approval by the Attorney General (Form, Substance and Execution) (if applicable) By:  On: <u>6/27/2019</u>			
1.18 Approval by the Governor and Executive Council (if applicable) By: _____ On: _____			

**2. EMPLOYMENT OF CONTRACTOR/SERVICES TO BE PERFORMED.** The State of New Hampshire, acting through the agency identified in block 1.1 ("State"), engages contractor identified in block 1.3 ("Contractor") to perform, and the Contractor shall perform, the work or sale of goods, or both, identified and more particularly described in the attached EXHIBIT A which is incorporated herein by reference ("Services").

**3. EFFECTIVE DATE/COMPLETION OF SERVICES.**

3.1 Notwithstanding any provision of this Agreement to the contrary, and subject to the approval of the Governor and Executive Council of the State of New Hampshire, if applicable, this Agreement, and all obligations of the parties hereunder, shall become effective on the date the Governor and Executive Council approve this Agreement as indicated in block 1.18, unless no such approval is required, in which case the Agreement shall become effective on the date the Agreement is signed by the State Agency as shown in block 1.14 ("Effective Date").

3.2 If the Contractor commences the Services prior to the Effective Date, all Services performed by the Contractor prior to the Effective Date shall be performed at the sole risk of the Contractor, and in the event that this Agreement does not become effective, the State shall have no liability to the Contractor, including without limitation, any obligation to pay the Contractor for any costs incurred or Services performed. Contractor must complete all Services by the Completion Date specified in block 1.7.

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including, without limitation, the continuance of payments hereunder, are contingent upon the availability and continued appropriation of funds, and in no event shall the State be liable for any payments hereunder in excess of such available appropriated funds. In the event of a reduction or termination of appropriated funds, the State shall have the right to withhold payment until such funds become available, if ever, and shall have the right to terminate this Agreement immediately upon giving the Contractor notice of such termination. The State shall not be required to transfer funds from any other account to the Account identified in block 1.6 in the event funds in that Account are reduced or unavailable.

**5. CONTRACT PRICE/PRICE LIMITATION/ PAYMENT.**

5.1 The contract price, method of payment, and terms of payment are identified and more particularly described in EXHIBIT B which is incorporated herein by reference.

5.2 The payment by the State of the contract price shall be the only and the complete reimbursement to the Contractor for all expenses, of whatever nature incurred by the Contractor in the performance hereof, and shall be the only and the complete compensation to the Contractor for the Services. The State shall have no liability to the Contractor other than the contract price.

5.3 The State reserves the right to offset from any amounts otherwise payable to the Contractor under this Agreement those liquidated amounts required or permitted by N.H. RSA 80:7 through RSA 80:7-c or any other provision of law.

5.4 Notwithstanding any provision in this Agreement to the contrary, and notwithstanding unexpected circumstances, in no event shall the total of all payments authorized, or actually made hereunder, exceed the Price Limitation set forth in block 1.8.

**6. COMPLIANCE BY CONTRACTOR WITH LAWS AND REGULATIONS/ EQUAL EMPLOYMENT OPPORTUNITY.**

6.1 In connection with the performance of the Services, the Contractor shall comply with all statutes, laws, regulations, and orders of federal, state, county or municipal authorities which impose any obligation or duty upon the Contractor, including, but not limited to, civil rights and equal opportunity laws. This may include the requirement to utilize auxiliary aids and services to ensure that persons with communication disabilities, including vision, hearing and speech, can communicate with, receive information from, and convey information to the Contractor. In addition, the Contractor shall comply with all applicable copyright laws.

6.2 During the term of this Agreement, the Contractor shall not discriminate against employees or applicants for employment because of race, color, religion, creed, age, sex, handicap, sexual orientation, or national origin and will take affirmative action to prevent such discrimination.

6.3 If this Agreement is funded in any part by monies of the United States, the Contractor shall comply with all the provisions of Executive Order No. 11246 ("Equal Employment Opportunity"), as supplemented by the regulations of the United States Department of Labor (41 C.F.R. Part 60), and with any rules, regulations and guidelines as the State of New Hampshire or the United States issue to implement these regulations. The Contractor further agrees to permit the State or United States access to any of the Contractor's books, records and accounts for the purpose of ascertaining compliance with all rules, regulations and orders, and the covenants, terms and conditions of this Agreement.

**7. PERSONNEL.**

7.1 The Contractor shall at its own expense provide all personnel necessary to perform the Services. The Contractor warrants that all personnel engaged in the Services shall be qualified to perform the Services, and shall be properly licensed and otherwise authorized to do so under all applicable laws.

7.2 Unless otherwise authorized in writing, during the term of this Agreement, and for a period of six (6) months after the Completion Date in block 1.7, the Contractor shall not hire, and shall not permit any subcontractor or other person, firm or corporation with whom it is engaged in a combined effort to perform the Services to hire, any person who is a State employee or official, who is materially involved in the procurement, administration or performance of this

Agreement. This provision shall survive termination of this Agreement.

7.3 The Contracting Officer specified in block 1.9, or his or her successor, shall be the State's representative. In the event of any dispute concerning the interpretation of this Agreement, the Contracting Officer's decision shall be final for the State.

#### 8. EVENT OF DEFAULT/REMEDIES.

8.1 Any one or more of the following acts or omissions of the Contractor shall constitute an event of default hereunder ("Event of Default"):

8.1.1 failure to perform the Services satisfactorily or on schedule;

8.1.2 failure to submit any report required hereunder; and/or

8.1.3 failure to perform any other covenant, term or condition of this Agreement.

8.2 Upon the occurrence of any Event of Default, the State may take any one, or more, or all, of the following actions:

8.2.1 give the Contractor a written notice specifying the Event of Default and requiring it to be remedied within, in the absence of a greater or lesser specification of time, thirty (30) days from the date of the notice; and if the Event of Default is not timely remedied; terminate this Agreement, effective two (2) days after giving the Contractor notice of termination;

8.2.2 give the Contractor a written notice specifying the Event of Default and suspending all payments to be made under this Agreement and ordering that the portion of the contract price which would otherwise accrue to the Contractor during the period from the date of such notice until such time as the State determines that the Contractor has cured the Event of Default shall never be paid to the Contractor;

8.2.3 set off against any other obligations the State may owe to the Contractor any damages the State suffers by reason of any Event of Default; and/or

8.2.4 treat the Agreement as breached and pursue any of its remedies at law or in equity, or both.

#### 9. DATA/ACCESS/CONFIDENTIALITY/PRESERVATION.

9.1 As used in this Agreement, the word "data" shall mean all information and things developed or obtained during the performance of, or acquired or developed by reason of, this Agreement, including, but not limited to, all studies, reports, files, formulae, surveys, maps, charts, sound recordings, video recordings, pictorial reproductions, drawings, analyses, graphic representations, computer programs, computer printouts, notes, letters, memoranda, papers, and documents, all whether finished or unfinished.

9.2 All data and any property which has been received from the State or purchased with funds provided for that purpose under this Agreement, shall be the property of the State, and shall be returned to the State upon demand or upon termination of this Agreement for any reason.

9.3 Confidentiality of data shall be governed by N.H. RSA chapter 91-A or other existing law. Disclosure of data requires prior written approval of the State.

10. **TERMINATION.** In the event of an early termination of this Agreement for any reason other than the completion of the Services, the Contractor shall deliver to the Contracting Officer, not later than fifteen (15) days after the date of termination, a report ("Termination Report") describing in detail all Services performed, and the contract price earned, to and including the date of termination. The form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in the attached EXHIBIT A.

11. **CONTRACTOR'S RELATION TO THE STATE.** In the performance of this Agreement the Contractor is in all respects an independent contractor, and is neither an agent nor an employee of the State. Neither the Contractor nor any of its officers, employees, agents or members shall have authority to bind the State or receive any benefits, workers' compensation or other emoluments provided by the State to its employees.

#### 12. ASSIGNMENT/DELEGATION/SUBCONTRACTS.

The Contractor shall not assign, or otherwise transfer any interest in this Agreement without the prior written notice and consent of the State. None of the Services shall be subcontracted by the Contractor without the prior written notice and consent of the State.

13. **INDEMNIFICATION.** The Contractor shall defend, indemnify and hold harmless the State, its officers and employees, from and against any and all losses suffered by the State, its officers and employees, and any and all claims, liabilities or penalties asserted against the State, its officers and employees, by or on behalf of any person, on account of, based or resulting from, arising out of (or which may be claimed to arise out of) the acts or omissions of the Contractor. Notwithstanding the foregoing, nothing herein contained shall be deemed to constitute a waiver of the sovereign immunity of the State, which immunity is hereby reserved to the State. This covenant in paragraph 13 shall survive the termination of this Agreement.

#### 14. INSURANCE.

14.1 The Contractor shall, at its sole expense, obtain and maintain in force, and shall require any subcontractor or assignee to obtain and maintain in force, the following insurance:

14.1.1 comprehensive general liability insurance against all claims of bodily injury, death or property damage, in amounts of not less than \$1,000,000 per occurrence and \$2,000,000 aggregate; and

14.1.2 special cause of loss coverage form covering all property subject to subparagraph 9.2 herein, in an amount not less than 80% of the whole replacement value of the property.

14.2 The policies described in subparagraph 14.1 herein shall be on policy forms and endorsements approved for use in the State of New Hampshire by the N.H. Department of Insurance, and issued by insurers licensed in the State of New Hampshire.

Contractor Initials MG  
Date 6/12/19

14.3 The Contractor shall furnish to the Contracting Officer identified in block 1.9, or his or her successor, a certificate(s) of insurance for all insurance required under this Agreement. Contractor shall also furnish to the Contracting Officer identified in block 1.9, or his or her successor, certificate(s) of insurance for all renewal(s) of insurance required under this Agreement no later than thirty (30) days prior to the expiration date of each of the insurance policies. The certificate(s) of insurance and any renewals thereof shall be attached and are incorporated herein by reference. Each certificate(s) of insurance shall contain a clause requiring the insurer to provide the Contracting Officer identified in block 1.9, or his or her successor, no less than thirty (30) days prior written notice of cancellation or modification of the policy.

**15. WORKERS' COMPENSATION.**

15.1 By signing this agreement, the Contractor agrees, certifies and warrants that the Contractor is in compliance with or exempt from, the requirements of N.H. RSA chapter 281-A ("*Workers' Compensation*").

15.2 To the extent the Contractor is subject to the requirements of N.H. RSA chapter 281-A, Contractor shall maintain, and require any subcontractor or assignee to secure and maintain, payment of Workers' Compensation in connection with activities which the person proposes to undertake pursuant to this Agreement. Contractor shall furnish the Contracting Officer identified in block 1.9, or his or her successor, proof of Workers' Compensation in the manner described in N.H. RSA chapter 281-A and any applicable renewal(s) thereof, which shall be attached and are incorporated herein by reference. The State shall not be responsible for payment of any Workers' Compensation premiums or for any other claim or benefit for Contractor, or any subcontractor or employee of Contractor, which might arise under applicable State of New Hampshire Workers' Compensation laws in connection with the performance of the Services under this Agreement.

**16. WAIVER OF BREACH.** No failure by the State to enforce any provisions hereof after any Event of Default shall be deemed a waiver of its rights with regard to that Event of Default, or any subsequent Event of Default. No express failure to enforce any Event of Default shall be deemed a waiver of the right of the State to enforce each and all of the provisions hereof upon any further or other Event of Default on the part of the Contractor.

**17. NOTICE.** Any notice by a party hereto to the other party shall be deemed to have been duly delivered or given at the time of mailing by certified mail, postage prepaid, in a United States Post Office addressed to the parties at the addresses given in blocks 1.2 and 1.4, herein.

**18. AMENDMENT.** This Agreement may be amended, waived or discharged only by an instrument in writing signed by the parties hereto and only after approval of such amendment, waiver or discharge by the Governor and Executive Council of the State of New Hampshire unless no

such approval is required under the circumstances pursuant to State law, rule or policy.

**19. CONSTRUCTION OF AGREEMENT AND TERMS.**

This Agreement shall be construed in accordance with the laws of the State of New Hampshire, and is binding upon and inures to the benefit of the parties and their respective successors and assigns. The wording used in this Agreement is the wording chosen by the parties to express their mutual intent, and no rule of construction shall be applied against or in favor of any party.

**20. THIRD PARTIES.** The parties hereto do not intend to benefit any third parties and this Agreement shall not be construed to confer any such benefit.

**21. HEADINGS.** The headings throughout the Agreement are for reference purposes only, and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this Agreement.

**22. SPECIAL PROVISIONS.** Additional provisions set forth in the attached EXHIBIT C are incorporated herein by reference.

**23. SEVERABILITY.** In the event any of the provisions of this Agreement are held by a court of competent jurisdiction to be contrary to any state or federal law, the remaining provisions of this Agreement will remain in full force and effect.

**24. ENTIRE AGREEMENT.** This Agreement, which may be executed in a number of counterparts, each of which shall be deemed an original, constitutes the entire Agreement and understanding between the parties, and supersedes all prior Agreements and understandings relating hereto.

New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services



Exhibit A

**Scope of Services**

**1. Provisions Applicable to All Services**

- 1.1. The Contractor shall submit a detailed description of the language assistance services they will provide to persons with limited English proficiency to ensure meaningful access to their programs and/or services within ten (10) days of the contract effective date.
- 1.2. The Contractor agrees that, to the extent future legislative action by the New Hampshire General Court or federal or state court orders may have an impact on the Services described herein, the State Agency has the right to modify Service priorities and expenditure requirements under this Agreement so as to achieve compliance therewith.
- 1.3. The Contractor shall provide translation and interpretation services for refugee youth in languages that include, but are not limited to:
  - 1.3.1. Arabic.
  - 1.3.2. French.
  - 1.3.3. Hindi.
  - 1.3.4. Kiswahili.
  - 1.3.5. Nepali.
  - 1.3.6. Swahili.

**2. Scope of Services**

- 2.1. The Contractor shall provide services to refugees and asylees statewide who have been in the United States for less than five (5) years and are between fifteen (15) and twenty-four (24) years of age (refugee youths), who need social, academic, vocational or emotional support with preference given to youth who have been in the United States for one year or less, including, but not limited to:
  - 2.1.1. Asylees.
  - 2.1.2. Individuals who have special immigrant visas (SIVs).
  - 2.1.3. Other Office of Refugee Resettlement (ORR) defined eligible immigrants.
  - 2.1.4. Secondary migrants who re-locate to New Hampshire.
- 2.2. The Contractor shall provide services to a minimum of thirty (30) refugee youths.
- 2.3. The Contractor shall develop a Refugee Youth Mentoring (RYM) program that includes, but is not limited to:
  - 2.3.1. An initial needs assessment that identifies the needs and goals of each youth in the program.

**New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services**



**Exhibit A**

- 2.3.2. An individual plan for each youth in the program, based on the initial needs assessment.
- 2.3.3. Case management for each youth enrolled in the program, which includes, but is not limited to:
  - 2.3.3.1. Documenting and reporting the services that are provided to youth to the Department.
  - 2.3.3.2. Tracking and reporting the progress towards meeting each youth's identified needs and goals to the Department.
- 2.3.4. Recruiting and training mentors to provide support for each youth enrolled in the program.
- 2.4. The Contractor shall match each enrolled youth with a positive adult mentor who will provide personalized support to the youth.
- 2.5. The Contractor shall recruit and train adults to act as mentors for youth in the program, which includes, but is not limited to:
  - 2.5.1. Performing a background check on each prospective mentor, which includes, but is not limited to:
    - 2.5.1.1. A criminal history check.
    - 2.5.1.2. A check for complaints of child abuse.
  - 2.5.2. Training mentors on best practices and techniques to support refugee youth program participants, including cultural competence using guidance provided by the Office of Health Equity (OHE).
- 2.6. The Contractor shall proactively identify eligible youth age through referrals and other means.
- 2.7. The Contractor shall ensure that each mentor completes a New Hampshire Department of Safety Criminal Record Release Authorization (Form ID#DSSP256).
- 2.8. The Contractor shall ensure mentorship activities focus on successful integration into the community, school and work. Activities may include but are not limited to:
  - 2.8.1. Assisting with development of social and life skills.
  - 2.8.2. Assisting youth with learning American culture
  - 2.8.3. Supporting the youth's cultural heritage.
  - 2.8.4. Providing opportunities for social engagement with peers.
  - 2.8.5. Providing information about opportunities to participate in civic and community services activities.
  - 2.8.6. Supporting youth in learning English, math, and other skills.

**New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services**



**Exhibit A**

- 2.8.7. Facilitating academic support that includes but is not limited to:
  - 2.8.7.1. Assistance with homework.
  - 2.8.7.2. Assistance with transitions in school, including but not limited to:
    - 2.8.7.2.1. Transition between middle school and high school.
    - 2.8.7.2.2. Transition between high school and post-secondary education.
- 2.8.8. Assisting youth with career development including but not limited to:
  - 2.8.8.1. Skill building.
  - 2.8.8.2. Resume drafting.
  - 2.8.8.3. Worker's rights.
  - 2.8.8.4. Training opportunities.
- 2.8.9. Supporting youth in developing health and financial literacy.
- 2.8.10. Addressing mental health or adjustment concerns through supports and referrals.
- 2.8.11. Providing culturally informed education and orientation to parents of participants.
- 2.9. The Contractor shall develop an incentive program that encourages youth to participate in the RYM program, which may include, but is not limited to:
  - 2.9.1. Paying for registration fees or tuition costs for educational opportunities or vocational apprenticeships.
  - 2.9.2. Providing career development activities.
  - 2.9.3. Providing donated goods, which may include computers.
- 2.10. The Contractor shall document RYM incentive program policy and ensure the program is implemented in a manner that is consistent, and fair to each youth enrolled in the program.
- 2.11. The Contractor shall meet with the Department at regular intervals, as requested by the Department.

**3. Staffing**

- 3.1. The Contractor shall maintain a diverse staff that reflects the demographics of the population served.
- 3.2. The Contractor shall ensure staff is trained in federal civil rights laws compliance, including, but not limited to, policies and procedures for handling discrimination complaints.

**New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services**



**Exhibit A**

3.3. The Contractor shall ensure each employee, volunteer and mentor providing services to youths in the program completes the forms as follows:

3.3.1. The State of NH Criminal Background Check form. The Contractor shall:

3.3.1.1. Ensure the form and payments of associated fees are submitted to the Department of Safety for processing.

3.3.1.2. Ensure results received from the Department of Safety are on file, on premises and available to the Department upon request.

**4. Reporting**

4.1. The Contractor shall provide narrative reports with a summary of project outcomes to the Department by the Trimester Report Due Dates as listed in Subsection 4.2, Table 1.

4.2. Table 1

Reporting Period	Trimester Report Due Date
02/1/2019 – 05/31/2019	06/30/2019
06/1/2019 – 09/30/2019	10/31/2019
10/1/2019 – 1/31/2020	03/1/2020
02/1/2020 – 05/31/2020	06/30/2020
06/1/2020 – 09/30/2020	10/31/2020

**5. Performance Measures**

5.1. The Contractor shall enroll a minimum of 80% of youth identified as potentially eligible individuals within one (1) month of completing the needs assessment.

5.2. The selected vendor(s) shall match 90% of program participants with mentors.

**6. Deliverables**

6.1. The Contractor shall begin to provide services beginning no later than ten (10) days after the contract effective date.

6.2. The Contractor shall provide services to a minimum of one hundred fifty (150) youth and their families.

6.3. The Contractor shall recruit and train no less than twelve (12) mentors to participate in the program.

6.4. The Contractor shall develop and submit a corrective action plan for any performance measure not achieved on a monthly basis.



New Hampshire Department of Health and Human Services  
Refugee Youth Services

**Exhibit B**

**Method and Conditions Precedent to Payment**

1. The State shall pay the Contractor an amount not to exceed the Form P-37, Block 1.8, Price Limitation for the services provided pursuant to Exhibit A, Scope of Services.
2. This contract is funded with funds from the US Department of Health and Human Services, Federal Office of Refugee Resettlement, Administration for Families and Children, CFDA #93.566, FAIN #1801NHR SOC.
3. Failure to meet the scope of services may jeopardize the funded Contractor's current and/or future funding.
4. Payment for said services shall be made monthly as follows:
  - 4.1. Payment shall be on a cost reimbursement basis for actual expenditures incurred in the fulfillment of this Agreement, and shall be in accordance with the approved line item, as specified in Exhibits B-1, Budget through Exhibit B-2, Budget..
  - 4.2. The Contractor shall submit an invoice in a form satisfactory to the State by the twentieth working day of each month, which identifies and requests reimbursement for authorized expenses incurred in the prior month.
  - 4.3. The Contractor shall ensure the invoice is completed, signed, dated and returned to the Department in order to initiate payment.
  - 4.4. The State shall make payment to the Contractor within thirty (30) days of receipt of each invoice, subsequent to approval of the submitted invoice and if sufficient funds are available.
5. The Contractor shall keep detailed records of their activities related to Department-funded programs and services and have records available for Department review, as requested.
6. The Contractor shall submit a final invoice to the State no later than forty (40) days after the contract completion date identified in Form P-37, Block 1.7 Completion Date.
7. In lieu of hard copies, all invoices may be assigned an electronic signature and emailed to: Barbara.Seebart@dhhs.nh.gov, or invoices may be mailed to:  

Department of Health and Human Services  
Office of Health Equity  
97 Pleasant Street  
Concord, NH 03301
8. Payments may be withheld pending receipt of required reports or documentation as identified in Exhibit A, Scope of Services and in this Exhibit B.
9. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this agreement may be withheld, in whole or in part, in the event of non-compliance with any Federal or State law, rule or regulation applicable to the services provided, or if the said services or products have not been satisfactorily completed in accordance with the terms and conditions of this agreement.



**New Hampshire Department of Health and Human Services  
Refugee Youth Services**

**Exhibit B**

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10. Notwithstanding paragraph 18 of the General Provisions P-37, changes limited to adjusting amounts between budget line items, related items, amendments of related budget exhibits within the price limitation, and to adjusting encumbrances between State Fiscal Years, may be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

Religion Youth Mentoring Program Services

Budget 5-1 Budget

New Hampshire Department of Health and Human Services											
Contractor Name: Victory Women of Valor											
Budget Request for: 800-CHS-0016-00-000000											
Budget Period: July 1, 2019-June 30, 2020											
Line Item	Total Program Cost			Contractor Share / Match			Funded by CHS contract share				
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Total Salary/Wages	27,000.00	-	27,000.00	-	-	-	27,000.00	-	27,000.00		
2. Employee Benefits	2,700.00	-	2,700.00	-	-	-	2,700.00	-	2,700.00		
3. Consultants	8,400.00	-	8,400.00	-	-	-	8,400.00	-	8,400.00		
4. Equipment	-	-	-	-	-	-	-	-	-		
Recall	-	-	-	-	-	-	-	-	-		
Rent and Maintenance	-	-	-	-	-	-	-	-	-		
Purchase/Depreciation	1,800.00	-	1,800.00	-	-	-	1,800.00	-	1,800.00		
5. Supplies	-	-	-	-	-	-	-	-	-		
Educational	-	-	-	-	-	-	-	-	-		
Lab	-	-	-	-	-	-	-	-	-		
Pharmacy	-	-	-	-	-	-	-	-	-		
Medical	-	-	-	-	-	-	-	-	-		
Office	1,800.00	-	1,800.00	-	-	-	1,800.00	-	1,800.00		
6. Travel	750.00	-	750.00	-	-	-	750.00	-	750.00		
7. Contingency	-	-	-	-	-	-	-	-	-		
8. Current Expenses	-	-	-	-	-	-	-	-	-		
Telephone	-	-	-	-	-	-	-	-	-		
Postage	-	-	-	-	-	-	-	-	-		
Subscriptions	375.00	-	375.00	-	-	-	375.00	-	375.00		
Audit and Legal	-	-	-	-	-	-	-	-	-		
Insurance	-	-	-	-	-	-	-	-	-		
Board Expenses	-	-	-	-	-	-	-	-	-		
9. Software	-	-	-	-	-	-	-	-	-		
10. Information/Communications	-	-	-	-	-	-	-	-	-		
11. Staff Education and Training	-	-	-	-	-	-	-	-	-		
12. Subcontract/Agreements	6,625.00	-	6,625.00	-	-	-	6,625.00	-	6,625.00		
13. Other (describe details mandatory)	-	-	-	-	-	-	-	-	-		
Stipends to members	4,350.00	-	4,350.00	-	-	-	4,350.00	-	4,350.00		
Unstipends to members	2,275.00	-	2,275.00	-	-	-	2,275.00	-	2,275.00		
TOTAL	44,250.00	-	44,250.00	-	-	-	44,250.00	-	44,250.00		
Indirect As A Percent of Direct 0.00											

Victory Women of Valor  
800-CHS-0016-00-000000

Page 5-1  
Page 1 of 1

Contractor Initial: *MG*  
Date: *6/12/2019*

Budgetary Youth Mentoring Program Services

Budget 5-2 Budget

New Hampshire Department of Health and Human Services SFY 2021 Budget Comptroller name: Victoria Watson of Maine Budget Request for: SFY 2021-2022-23-24-25-26-27-28 Budget Period: July 1, 2020-Aug. 31, 2022											
Line Item	Total Program Cost			Contractor Share / Match			Funded by DHHHS contract share				
	Direct	Indirect	Total	Direct	Indirect	Total	Direct	Indirect	Total		
1. Total Salary/Wages	9,000.00	-	9,000.00	-	-	-	9,000.00	-	9,000.00	-	-
2. Employee Benefits	800.00	-	800.00	-	-	-	800.00	-	800.00	-	-
3. Consultants	2,800.00	-	2,800.00	-	-	-	2,800.00	-	2,800.00	-	-
4. Endowment	-	-	-	-	-	-	-	-	-	-	-
Rental	-	-	-	-	-	-	-	-	-	-	-
Realty and Maintenance	-	-	-	-	-	-	-	-	-	-	-
Purchase/Depreciation	800.00	-	800.00	-	-	-	800.00	-	800.00	-	-
A. Supplies	-	-	-	-	-	-	-	-	-	-	-
Educational	-	-	-	-	-	-	-	-	-	-	-
Lab	-	-	-	-	-	-	-	-	-	-	-
Pharmacy	-	-	-	-	-	-	-	-	-	-	-
Medical	-	-	-	-	-	-	-	-	-	-	-
Office	800.00	-	800.00	-	-	-	800.00	-	800.00	-	-
B. Travel	750.00	-	750.00	-	-	-	750.00	-	750.00	-	-
7. Contingency	-	-	-	-	-	-	-	-	-	-	-
8. Capital Expenses	-	-	-	-	-	-	-	-	-	-	-
Telephone	-	-	-	-	-	-	-	-	-	-	-
Postage	-	-	-	-	-	-	-	-	-	-	-
Subscriptions	125.00	-	125.00	-	-	-	125.00	-	125.00	-	-
Auto and Local	-	-	-	-	-	-	-	-	-	-	-
Insurance	-	-	-	-	-	-	-	-	-	-	-
Board Expenses	-	-	-	-	-	-	-	-	-	-	-
9. Software	-	-	-	-	-	-	-	-	-	-	-
10. Information/Communication	-	-	-	-	-	-	-	-	-	-	-
11. Staff Education and Training	-	-	-	-	-	-	-	-	-	-	-
12. Subcontract/Agreements	2,175.00	-	2,175.00	-	-	-	2,175.00	-	2,175.00	-	-
13. Other (Specify details in worksheet)	-	-	-	-	-	-	-	-	-	-	-
Stipends to members	1,450.00	-	1,450.00	-	-	-	1,450.00	-	1,450.00	-	-
Incentives to members	1,050.00	-	1,050.00	-	-	-	1,050.00	-	1,050.00	-	-
<b>TOTAL</b>	<b>16,750.00</b>	<b>-</b>	<b>16,750.00</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>16,750.00</b>	<b>-</b>	<b>16,750.00</b>	<b>-</b>	<b>-</b>

New Hampshire Department of Health and Human Services  
Exhibit C



**SPECIAL PROVISIONS**

**Contractors Obligations:** The Contractor covenants and agrees that all funds received by the Contractor under the Contract shall be used only as payment to the Contractor for services provided to eligible individuals and, in the furtherance of the aforesaid covenants, the Contractor hereby covenants and agrees as follows:

1. **Compliance with Federal and State Laws:** If the Contractor is permitted to determine the eligibility of individuals such eligibility determination shall be made in accordance with applicable federal and state laws, regulations, orders, guidelines, policies and procedures.
2. **Time and Manner of Determination:** Eligibility determinations shall be made on forms provided by the Department for that purpose and shall be made and remade at such times as are prescribed by the Department.
3. **Documentation:** In addition to the determination forms required by the Department, the Contractor shall maintain a data file on each recipient of services hereunder, which file shall include all information necessary to support an eligibility determination and such other information as the Department requests. The Contractor shall furnish the Department with all forms and documentation regarding eligibility determinations that the Department may request or require.
4. **Fair Hearings:** The Contractor understands that all applicants for services hereunder, as well as individuals declared ineligible have a right to a fair hearing regarding that determination. The Contractor hereby covenants and agrees that all applicants for services shall be permitted to fill out an application form and that each applicant or re-applicant shall be informed of his/her right to a fair hearing in accordance with Department regulations.
5. **Gratuities or Kickbacks:** The Contractor agrees that it is a breach of this Contract to accept or make a payment, gratuity or offer of employment on behalf of the Contractor, any Sub-Contractor or the State in order to influence the performance of the Scope of Work detailed in Exhibit A of this Contract. The State may terminate this Contract and any sub-contract or sub-agreement if it is determined that payments, gratuities or offers of employment of any kind were offered or received by any officials, officers, employees or agents of the Contractor or Sub-Contractor.
6. **Retroactive Payments:** Notwithstanding anything to the contrary contained in the Contract or in any other document, contract or understanding, it is expressly understood and agreed by the parties hereto, that no payments will be made hereunder to reimburse the Contractor for costs incurred for any purpose or for any services provided to any individual prior to the Effective Date of the Contract and no payments shall be made for expenses incurred by the Contractor for any services provided prior to the date on which the individual applies for services or (except as otherwise provided by the federal regulations) prior to a determination that the individual is eligible for such services.
7. **Conditions of Purchase:** Notwithstanding anything to the contrary contained in the Contract, nothing herein contained shall be deemed to obligate or require the Department to purchase services hereunder at a rate which reimburses the Contractor in excess of the Contractors costs, at a rate which exceeds the amounts reasonable and necessary to assure the quality of such service, or at a rate which exceeds the rate charged by the Contractor to ineligible individuals or other third party funders for such service. If at any time during the term of this Contract or after receipt of the Final Expenditure Report hereunder, the Department shall determine that the Contractor has used payments hereunder to reimburse items of expense other than such costs, or has received payment in excess of such costs or in excess of such rates charged by the Contractor to ineligible individuals or other third party funders, the Department may elect to:
  - 7.1. Renegotiate the rates for payment hereunder, in which event new rates shall be established;
  - 7.2. Deduct from any future payment to the Contractor the amount of any prior reimbursement in excess of costs;

**New Hampshire Department of Health and Human Services  
Exhibit C**



- 7.3. Demand repayment of the excess payment by the Contractor in which event failure to make such repayment shall constitute an Event of Default hereunder. When the Contractor is permitted to determine the eligibility of individuals for services, the Contractor agrees to reimburse the Department for all funds paid by the Department to the Contractor for services provided to any individual who is found by the Department to be ineligible for such services at any time during the period of retention of records established herein.

**RECORDS: MAINTENANCE, RETENTION, AUDIT, DISCLOSURE AND CONFIDENTIALITY:**

8. **Maintenance of Records:** In addition to the eligibility records specified above, the Contractor covenants and agrees to maintain the following records during the Contract Period:
- 8.1. **Fiscal Records:** books, records, documents and other data evidencing and reflecting all costs and other expenses incurred by the Contractor in the performance of the Contract, and all income received or collected by the Contractor during the Contract Period, said records to be maintained in accordance with accounting procedures and practices which sufficiently and properly reflect all such costs and expenses, and which are acceptable to the Department, and to include, without limitation, all ledgers, books, records, and original evidence of costs such as purchase requisitions and orders, vouchers, requisitions for materials, inventories, valuations of in-kind contributions, labor time cards, payrolls, and other records requested or required by the Department.
  - 8.2. **Statistical Records:** Statistical, enrollment, attendance or visit records for each recipient of services during the Contract Period, which records shall include all records of application and eligibility (including all forms required to determine eligibility for each such recipient), records regarding the provision of services and all invoices submitted to the Department to obtain payment for such services.
  - 8.3. **Medical Records:** Where appropriate and as prescribed by the Department regulations, the Contractor shall retain medical records on each patient/recipient of services.
9. **Audit:** Contractor shall submit an annual audit to the Department within 60 days after the close of the agency fiscal year. It is recommended that the report be prepared in accordance with the provision of Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non Profit Organizations" and the provisions of Standards for Audit of Governmental Organizations, Programs, Activities and Functions, issued by the US General Accounting Office (GAO standards) as they pertain to financial compliance audits.
- 9.1. **Audit and Review:** During the term of this Contract and the period for retention hereunder, the Department, the United States Department of Health and Human Services, and any of their designated representatives shall have access to all reports and records maintained pursuant to the Contract for purposes of audit, examination, excerpts and transcripts.
  - 9.2. **Audit Liabilities:** In addition to and not in any way in limitation of obligations of the Contract, it is understood and agreed by the Contractor that the Contractor shall be held liable for any state or federal audit exceptions and shall return to the Department, all payments made under the Contract to which exception has been taken or which have been disallowed because of such an exception.
10. **Confidentiality of Records:** All information, reports, and records maintained hereunder or collected in connection with the performance of the services and the Contract shall be confidential and shall not be disclosed by the Contractor, provided however, that pursuant to state laws and the regulations of the Department regarding the use and disclosure of such information, disclosure may be made to public officials requiring such information in connection with their official duties and for purposes directly connected to the administration of the services and the Contract; and provided further, that the use or disclosure by any party of any information concerning a recipient for any purpose not directly connected with the administration of the Department or the Contractor's responsibilities with respect to purchased services hereunder is prohibited except on written consent of the recipient, his attorney or guardian.

**New Hampshire Department of Health and Human Services**  
**Exhibit C**



Notwithstanding anything to the contrary contained herein the covenants and conditions contained in the Paragraph shall survive the termination of the Contract for any reason whatsoever.

11. **Reports: Fiscal and Statistical:** The Contractor agrees to submit the following reports at the following times if requested by the Department.
  - 11.1. **Interim Financial Reports:** Written interim financial reports containing a detailed description of all costs and non-allowable expenses incurred by the Contractor to the date of the report and containing such other information as shall be deemed satisfactory by the Department to justify the rate of payment hereunder. Such Financial Reports shall be submitted on the form designated by the Department or deemed satisfactory by the Department.
  - 11.2. **Final Report:** A final report shall be submitted within thirty (30) days after the end of the term of this Contract. The Final Report shall be in a form satisfactory to the Department and shall contain a summary statement of progress toward goals and objectives stated in the Proposal and other information required by the Department.
12. **Completion of Services: Disallowance of Costs:** Upon the purchase by the Department of the maximum number of units provided for in the Contract and upon payment of the price limitation hereunder, the Contract and all the obligations of the parties hereunder (except such obligations as, by the terms of the Contract are to be performed after the end of the term of this Contract and/or survive the termination of the Contract) shall terminate, provided however, that if, upon review of the Final Expenditure Report the Department shall disallow any expenses claimed by the Contractor as costs hereunder the Department shall retain the right, at its discretion, to deduct the amount of such expenses as are disallowed or to recover such sums from the Contractor.
13. **Credits:** All documents, notices, press releases, research reports and other materials prepared during or resulting from the performance of the services of the Contract shall include the following statement:
  - 13.1. The preparation of this (report, document etc.) was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.
14. **Prior Approval and Copyright Ownership:** All materials (written, video, audio) produced or purchased under the contract shall have prior approval from DHHS before printing, production, distribution or use. The DHHS will retain copyright ownership for any and all original materials produced, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports. Contractor shall not reproduce any materials produced under the contract without prior written approval from DHHS.
15. **Operation of Facilities: Compliance with Laws and Regulations:** In the operation of any facilities for providing services, the Contractor shall comply with all laws, orders and regulations of federal, state, county and municipal authorities and with any direction of any Public Officer or officers pursuant to laws which shall impose an order or duty upon the contractor with respect to the operation of the facility or the provision of the services at such facility. If any governmental license or permit shall be required for the operation of the said facility or the performance of the said services, the Contractor will procure said license or permit, and will at all times comply with the terms and conditions of each such license or permit. In connection with the foregoing requirements, the Contractor hereby covenants and agrees that, during the term of this Contract the facilities shall comply with all rules, orders, regulations, and requirements of the State Office of the Fire Marshal and the local fire protection agency, and shall be in conformance with local building and zoning codes, by-laws and regulations.
16. **Equal Employment Opportunity Plan (EEOP):** The Contractor will provide an Equal Employment Opportunity Plan (EEOP) to the Office for Civil Rights, Office of Justice Programs (OCR), if it has received a single award of \$500,000 or more. If the recipient receives \$25,000 or more and has 50 or

Exhibit C – Special Provisions

Contractor Initials

M.B.

06/27/14

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Date

6/12/2019

**New Hampshire Department of Health and Human Services  
Exhibit C**



more employees, it will maintain a current EEOP on file and submit an EEOP Certification Form to the OCR, certifying that its EEOP is on file. For recipients receiving less than \$25,000, or public grantees with fewer than 50 employees, regardless of the amount of the award, the recipient will provide an EEOP Certification Form to the OCR certifying it is not required to submit or maintain an EEOP. Non-profit organizations, Indian Tribes, and medical and educational institutions are exempt from the EEOP requirement, but are required to submit a certification form to the OCR to claim the exemption. EEOP Certification Forms are available at: <http://www.ojp.usdoj/about/ocr/pdfs/cert.pdf>.

17. **Limited English Proficiency (LEP):** As clarified by Executive Order 13166, Improving Access to Services for persons with Limited English Proficiency, and resulting agency guidance, national origin discrimination includes discrimination on the basis of limited English proficiency (LEP). To ensure compliance with the Omnibus Crime Control and Safe Streets Act of 1968 and Title VI of the Civil Rights Act of 1964, Contractors must take reasonable steps to ensure that LEP persons have meaningful access to its programs.
18. **Pilot Program for Enhancement of Contractor Employee Whistleblower Protections:** The following shall apply to all contracts that exceed the Simplified Acquisition Threshold as defined in 48 CFR 2.101 (currently, \$150,000)

**CONTRACTOR EMPLOYEE WHISTLEBLOWER RIGHTS AND REQUIREMENT TO INFORM EMPLOYEES OF  
WHISTLEBLOWER RIGHTS (SEP 2013)**

(a) This contract and employees working on this contract will be subject to the whistleblower rights and remedies in the pilot program on Contractor employee whistleblower protections established at 41 U.S.C. 4712 by section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239) and FAR 3.908.

(b) The Contractor shall inform its employees in writing, in the predominant language of the workforce, of employee whistleblower rights and protections under 41 U.S.C. 4712, as described in section 3.908 of the Federal Acquisition Regulation.

(c) The Contractor shall insert the substance of this clause, including this paragraph (c), in all subcontracts over the simplified acquisition threshold.

19. **Subcontractors:** DHHS recognizes that the Contractor may choose to use subcontractors with greater expertise to perform certain health care services or functions for efficiency or convenience, but the Contractor shall retain the responsibility and accountability for the function(s). Prior to subcontracting, the Contractor shall evaluate the subcontractor's ability to perform the delegated function(s). This is accomplished through a written agreement that specifies activities and reporting responsibilities of the subcontractor and provides for revoking the delegation or imposing sanctions if the subcontractor's performance is not adequate. Subcontractors are subject to the same contractual conditions as the Contractor and the Contractor is responsible to ensure subcontractor compliance with those conditions.  
When the Contractor delegates a function to a subcontractor, the Contractor shall do the following:
  - 19.1. Evaluate the prospective subcontractor's ability to perform the activities, before delegating the function
  - 19.2. Have a written agreement with the subcontractor that specifies activities and reporting responsibilities and how sanctions/revocation will be managed if the subcontractor's performance is not adequate
  - 19.3. Monitor the subcontractor's performance on an ongoing basis

**New Hampshire Department of Health and Human Services  
Exhibit C**



- 19.4. Provide to DHHS an annual schedule identifying all subcontractors, delegated functions and responsibilities, and when the subcontractor's performance will be reviewed
- 19.5. DHHS shall, at its discretion, review and approve all subcontracts.

If the Contractor identifies deficiencies or areas for improvement are identified, the Contractor shall take corrective action.

**DEFINITIONS**

As used in the Contract, the following terms shall have the following meanings:

**COSTS:** Shall mean those direct and indirect items of expense determined by the Department to be allowable and reimbursable in accordance with cost and accounting principles established in accordance with state and federal laws, regulations, rules and orders.

**DEPARTMENT:** NH Department of Health and Human Services.

**FINANCIAL MANAGEMENT GUIDELINES:** Shall mean that section of the Contractor Manual which is entitled "Financial Management Guidelines" and which contains the regulations governing the financial activities of contractor agencies which have contracted with the State of NH to receive funds.

**PROPOSAL:** If applicable, shall mean the document submitted by the Contractor on a form or forms required by the Department and containing a description of the Services to be provided to eligible individuals by the Contractor in accordance with the terms and conditions of the Contract and setting forth the total cost and sources of revenue for each service to be provided under the Contract.

**UNIT:** For each service that the Contractor is to provide to eligible individuals hereunder, shall mean that period of time or that specified activity determined by the Department and specified in Exhibit B of the Contract.

**FEDERAL/STATE LAW:** Wherever federal or state laws, regulations, rules, orders, and policies, etc. are referred to in the Contract, the said reference shall be deemed to mean all such laws, regulations, etc. as they may be amended or revised from the time to time.

**CONTRACTOR MANUAL:** Shall mean that document prepared by the NH Department of Administrative Services containing a compilation of all regulations promulgated pursuant to the New Hampshire Administrative Procedures Act, NH RSA Ch 541-A, for the purpose of implementing State of NH and federal regulations promulgated thereunder.

**SUPPLANTING OTHER FEDERAL FUNDS:** The Contractor guarantees that funds provided under this Contract will not supplant any existing federal funds available for these services.

**New Hampshire Department of Health and Human Services  
Refugee Youth Mentoring Program Services  
Exhibit C-1**



**REVISIONS TO GENERAL PROVISIONS**

1. Subparagraph 4 of the General Provisions of this contract, Conditional Nature of Agreement, is replaced as follows:

**4. CONDITIONAL NATURE OF AGREEMENT.**

Notwithstanding any provision of this Agreement to the contrary, all obligations of the State hereunder, including without limitation, the continuance of payments, in whole or in part, under this Agreement are contingent upon continued appropriation or availability of funds, including any subsequent changes to the appropriation or availability of funds affected by any state or federal legislative or executive action that reduces, eliminates, or otherwise modifies the appropriation or availability of funding for this Agreement and the Scope of Services provided in Exhibit A, Scope of Services, in whole or in part. In no event shall the State be liable for any payments hereunder in excess of appropriated or available funds. In the event of a reduction, termination or modification of appropriated or available funds, the State shall have the right to withhold payment until such funds become available, if ever. The State shall have the right to reduce, terminate or modify services under this Agreement immediately upon giving the Contractor notice of such reduction, termination or modification. The State shall not be required to transfer funds from any other source or account into the Account(s) identified in block 1.6 of the General Provisions, Account Number, or any other account, in the event funds are reduced or unavailable.

2. Subparagraph 10 of the General Provisions of this contract, Termination, is amended by adding the following language:

10.1 The State may terminate the Agreement at any time for any reason, at the sole discretion of the State, 30 days after giving the Contractor written notice that the State is exercising its option to terminate the Agreement.

10.2 In the event of early termination, the Contractor shall, within 15 days of notice of early termination, develop and submit to the State a Transition Plan for services under the Agreement, including but not limited to, identifying the present and future needs of clients receiving services under the Agreement and establishes a process to meet those needs.

10.3 The Contractor shall fully cooperate with the State and shall promptly provide detailed information to support the Transition Plan including, but not limited to, any information or data requested by the State related to the termination of the Agreement and Transition Plan and shall provide ongoing communication and revisions of the Transition Plan to the State as requested.

10.4 In the event that services under the Agreement, including but not limited to clients receiving services under the Agreement are transitioned to having services delivered by another entity including contracted providers or the State, the Contractor shall provide a process for uninterrupted delivery of services in the Transition Plan.

10.5 The Contractor shall establish a method of notifying clients and other affected individuals about the transition. The Contractor shall include the proposed communications in its Transition Plan submitted to the State as described above.

3. The Department reserves the right to renew the Contract for up to three (3) additional years, subject to the continued availability of funds, satisfactory performance of services and approval by the Governor and Executive Council.

Exhibit C-1 – Revisions to General Provisions

Contractor Initials

MG

CU/DHHS/011414

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Date 6/12/2019

New Hampshire Department of Health and Human Services  
Exhibit D



**CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS**

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

**ALTERNATIVE I - FOR GRANTEEES OTHER THAN INDIVIDUALS**

**US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS  
US DEPARTMENT OF EDUCATION - CONTRACTORS  
US DEPARTMENT OF AGRICULTURE - CONTRACTORS**

This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.). The January 31, 1989 regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691), and require certification by grantees (and by inference, sub-grantees and sub-contractors), prior to award, that they will maintain a drug-free workplace. Section 3017.630(c) of the regulation provides that a grantee (and by inference, sub-grantees and sub-contractors) that is a State may elect to make one certification to the Department in each federal fiscal year in lieu of certificates for each grant during the federal fiscal year covered by the certification. The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment. Contractors using this form should send it to:

Commissioner  
NH Department of Health and Human Services  
129 Pleasant Street,  
Concord, NH 03301-6505

1. The grantee certifies that it will or will continue to provide a drug-free workplace by:
  - 1.1. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - 1.2. Establishing an ongoing drug-free awareness program to inform employees about
    - 1.2.1. The dangers of drug abuse in the workplace;
    - 1.2.2. The grantee's policy of maintaining a drug-free workplace;
    - 1.2.3. Any available drug counseling, rehabilitation, and employee assistance programs; and
    - 1.2.4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - 1.3. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
  - 1.4. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
    - 1.4.1. Abide by the terms of the statement; and
    - 1.4.2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
  - 1.5. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph 1.4.2 from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency

New Hampshire Department of Health and Human Services  
Exhibit D



- has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- 1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted
    - 1.6.1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
    - 1.6.2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
  - 1.7. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs 1.1, 1.2, 1.3, 1.4, 1.5, and 1.6.
2. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant.

Place of Performance (street address, city, county, state, zip code) (list each location)

Check ☐ if there are workplaces on file that are not identified here.

Contractor Name:

MARY N. GEORGES  
EXECUTIVE DIRECTOR  
Name: \_\_\_\_\_  
Title: \_\_\_\_\_

6/12/2019  
Date

New Hampshire Department of Health and Human Services  
Exhibit E



**CERTIFICATION REGARDING LOBBYING**

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Section 319 of Public Law 101-121, Government wide Guidance for New Restrictions on Lobbying, and 31 U.S.C. 1352, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

US DEPARTMENT OF HEALTH AND HUMAN SERVICES - CONTRACTORS  
US DEPARTMENT OF EDUCATION - CONTRACTORS  
US DEPARTMENT OF AGRICULTURE - CONTRACTORS

Programs (indicate applicable program covered):

- \*Temporary Assistance to Needy Families under Title IV-A
- \*Child Support Enforcement Program under Title IV-D
- \*Social Services Block Grant Program under Title XX
- \*Medicaid Program under Title XIX
- \*Community Services Block Grant under Title VI
- \*Child Care Development Block Grant under Title IV

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor).
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement (and by specific mention sub-grantee or sub-contractor), the undersigned shall complete and submit Standard Form LLL, (Disclosure Form to Report Lobbying, in accordance with its instructions, attached and identified as Standard Exhibit E-1.)
3. The undersigned shall require that the language of this certification be included in the award document for sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Contractor Name:

6/12/2019  
Date

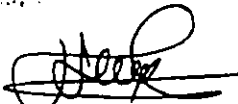
  
Name: Mary N. Georges  
Title: Executive Director

Exhibit E - Certification Regarding Lobbying

Contractor Initials MG

New Hampshire Department of Health and Human Services  
Exhibit F



**CERTIFICATION REGARDING DEBARMENT, SUSPENSION  
AND OTHER RESPONSIBILITY MATTERS**

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of Executive Office of the President, Executive Order 12549 and 45 CFR Part 76 regarding Debarment, Suspension, and Other Responsibility Matters, and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

**INSTRUCTIONS FOR CERTIFICATION**

1. By signing and submitting this proposal (contract), the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. If necessary, the prospective participant shall submit an explanation of why it cannot provide the certification. The certification or explanation will be considered in connection with the NH Department of Health and Human Services' (DHHS) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when DHHS determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, DHHS may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the DHHS agency to whom this proposal (contract) is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549: 45 CFR Part 76. See the attached definitions.
6. The prospective primary participant agrees by submitting this proposal (contract) that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by DHHS.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by DHHS, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or involuntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List (of excluded parties).
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and

New Hampshire Department of Health and Human Services  
Exhibit F



information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, DHHS may terminate this transaction for cause or default.

PRIMARY COVERED TRANSACTIONS


11. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- 11.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - 11.2. have not within a three-year period preceding this proposal (contract) been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or a contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - 11.3. are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - 11.4. have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
12. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal (contract).

LOWER TIER COVERED TRANSACTIONS

13. By signing and submitting this lower tier proposal (contract), the prospective lower tier participant, as defined in 45 CFR Part 76, certifies to the best of its knowledge and belief that it and its principals:
- 13.1. are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
  - 13.2. where the prospective lower tier participant is unable to certify to any of the above, such prospective participant shall attach an explanation to this proposal (contract).
14. The prospective lower tier participant further agrees by submitting this proposal (contract) that it will include this clause entitled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion - Lower Tier Covered Transactions," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Contractor Name:

6/12/2019  
Date:

  
Name: MARY N. Georges  
Title: Executive Director

New Hampshire Department of Health and Human Services  
Exhibit G



**CERTIFICATION OF COMPLIANCE WITH REQUIREMENTS PERTAINING TO  
FEDERAL NONDISCRIMINATION, EQUAL TREATMENT OF FAITH-BASED ORGANIZATIONS AND  
WHISTLEBLOWER PROTECTIONS**

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

Contractor will comply, and will require any subgrantees or subcontractors to comply, with any applicable federal nondiscrimination requirements, which may include:

- the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. Section 3789d) which prohibits recipients of federal funding under this statute from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act requires certain recipients to produce an Equal Employment Opportunity Plan;
- the Juvenile Justice Delinquency Prevention Act of 2002 (42 U.S.C. Section 5672(b)) which adopts by reference, the civil rights obligations of the Safe Streets Act. Recipients of federal funding under this statute are prohibited from discriminating, either in employment practices or in the delivery of services or benefits, on the basis of race, color, religion, national origin, and sex. The Act includes Equal Employment Opportunity Plan requirements;
- the Civil Rights Act of 1964 (42 U.S.C. Section 2000d, which prohibits recipients of federal financial assistance from discriminating on the basis of race, color, or national origin in any program or activity);
- the Rehabilitation Act of 1973 (29 U.S.C. Section 794), which prohibits recipients of Federal financial assistance from discriminating on the basis of disability, in regard to employment and the delivery of services or benefits, in any program or activity;
- the Americans with Disabilities Act of 1990 (42 U.S.C. Sections 12131-34), which prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, State and local government services, public accommodations, commercial facilities, and transportation;
- the Education Amendments of 1972 (20 U.S.C. Sections 1681, 1683, 1685-86), which prohibits discrimination on the basis of sex in federally assisted education programs;
- the Age Discrimination Act of 1975 (42 U.S.C. Sections 6106-07), which prohibits discrimination on the basis of age in programs or activities receiving Federal financial assistance. It does not include employment discrimination;
- 28 C.F.R. pt. 31 (U.S. Department of Justice Regulations – OJJDP Grant Programs); 28 C.F.R. pt. 42 (U.S. Department of Justice Regulations – Nondiscrimination; Equal Employment Opportunity; Policies and Procedures); Executive Order No. 13279 (equal protection of the laws for faith-based and community organizations); Executive Order No. 13559, which provide fundamental principles and policy-making criteria for partnerships with faith-based and neighborhood organizations;
- 28 C.F.R. pt. 38 (U.S. Department of Justice Regulations – Equal Treatment for Faith-Based Organizations); and Whistleblower protections 41 U.S.C. §4712 and The National Defense Authorization Act (NDAA) for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013) the Pilot Program for Enhancement of Contract Employee Whistleblower Protections, which protects employees against reprisal for certain whistle blowing activities in connection with federal grants and contracts.

The certificate set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government wide suspension or debarment.

Exhibit G

Contractor Initials

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Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower protections

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Date 6/18/2019

New Hampshire Department of Health and Human Services  
Exhibit G



In the event a Federal or State court or Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office for Civil Rights, to the applicable contracting agency or division within the Department of Health and Human Services, and to the Department of Health and Human Services Office of the Ombudsman.

The Contractor identified in Section 1.3 of the General Provisions agrees by signature of the Contractor's representative as identified in Sections 1.11 and 1.12 of the General Provisions, to execute the following certification:

- I. By signing and submitting this proposal (contract) the Contractor agrees to comply with the provisions indicated above.

Contractor Name:

6/12/2019  
Date

[Signature]  
Name: Mary N. Georges  
Title: Executive Director

Exhibit G

Certification of Compliance with requirements pertaining to Federal Nondiscrimination, Equal Treatment of Faith-Based Organizations and Whistleblower protections

Contractor Initials MG

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Rev. 10/21/14

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Date 6/12/2019

New Hampshire Department of Health and Human Services  
Exhibit H



**CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE**


Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity.

The Contractor identified in Section 1.3 of the General Provisions agrees, by signature of the Contractor's representative as identified in Section 1.11 and 1.12 of the General Provisions, to execute the following certification:

1. By signing and submitting this contract, the Contractor agrees to make reasonable efforts to comply with all applicable provisions of Public Law 103-227, Part C, known as the Pro-Children Act of 1994.

Contractor Name:

6/12/2019  
Date

  
Name: MARY N GEORGES  
Title: Executive Director

New Hampshire Department of Health and Human Services



Exhibit I

**HEALTH INSURANCE PORTABILITY ACT  
BUSINESS ASSOCIATE AGREEMENT**

The Contractor identified in Section 1.3 of the General Provisions of the Agreement agrees to comply with the Health Insurance Portability and Accountability Act, Public Law 104-191 and with the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160 and 164 applicable to business associates. As defined herein, "Business Associate" shall mean the Contractor and subcontractors and agents of the Contractor that receive, use or have access to protected health information under this Agreement and "Covered Entity" shall mean the State of New Hampshire, Department of Health and Human Services.

(1) **Definitions.**

- a. **"Breach"** shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
- b. **"Business Associate"** has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- c. **"Covered Entity"** has the meaning given such term in section 160.103 of Title 45, Code of Federal Regulations.
- d. **"Designated Record Set"** shall have the same meaning as the term "designated record set" in 45 CFR Section 164.501.
- e. **"Data Aggregation"** shall have the same meaning as the term "data aggregation" in 45 CFR Section 164.501.
- f. **"Health Care Operations"** shall have the same meaning as the term "health care operations" in 45 CFR Section 164.501.
- g. **"HITECH Act"** means the Health Information Technology for Economic and Clinical Health Act, Title XIII, Subtitle D, Part 1 & 2 of the American Recovery and Reinvestment Act of 2009.
- h. **"HIPAA"** means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and the Standards for Privacy and Security of Individually Identifiable Health Information, 45 CFR Parts 160, 162 and 164 and amendments thereto.
- i. **"Individual"** shall have the same meaning as the term "individual" in 45 CFR Section 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 CFR Section 164.501(g).
- j. **"Privacy Rule"** shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.
- k. **"Protected Health Information"** shall have the same meaning as the term "protected health information" in 45 CFR Section 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

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Exhibit I  
Health Insurance Portability Act  
Business Associate Agreement  
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Date

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Exhibit I

- l. "Required by Law" shall have the same meaning as the term "required by law" in 45 CFR Section 164.103.
- m. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his/her designee.
- n. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 164, Subpart C, and amendments thereto.
- o. "Unsecured Protected Health Information" means protected health information that is not secured by a technology standard that renders protected health information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.
- p. Other Definitions - All terms not otherwise defined herein shall have the meaning established under 45 C.F.R. Parts 160, 162 and 164, as amended from time to time, and the HITECH Act.

(2) Business Associate Use and Disclosure of Protected Health Information.

- a. Business Associate shall not use, disclose, maintain or transmit Protected Health Information (PHI) except as reasonably necessary to provide the services outlined under Exhibit A of the Agreement. Further, Business Associate, including but not limited to all its directors, officers, employees and agents, shall not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.
- b. Business Associate may use or disclose PHI:
  - I. For the proper management and administration of the Business Associate;
  - II. As required by law, pursuant to the terms set forth in paragraph d. below; or
  - III. For data aggregation purposes for the health care operations of Covered Entity.
- c. To the extent Business Associate is permitted under the Agreement to disclose PHI to a third party, Business Associate must obtain, prior to making any such disclosure, (i) reasonable assurances from the third party that such PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party; and (ii) an agreement from such third party to notify Business Associate, in accordance with the HIPAA Privacy, Security, and Breach Notification Rules of any breaches of the confidentiality of the PHI, to the extent it has obtained knowledge of such breach.
- d. The Business Associate shall not, unless such disclosure is reasonably necessary to provide services under Exhibit A of the Agreement, disclose any PHI in response to a request for disclosure on the basis that it is required by law, without first notifying Covered Entity so that Covered Entity has an opportunity to object to the disclosure and to seek appropriate relief. If Covered Entity objects to such disclosure, the Business

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Exhibit I  
Health Insurance Portability Act  
Business Associate Agreement  
Page 2 of 6

Contractor Initials MG

Date 6/18/2019

New Hampshire Department of Health and Human Services



Exhibit I

Associate shall refrain from disclosing the PHI until Covered Entity has exhausted all remedies.

- e. If the Covered Entity notifies the Business Associate that Covered Entity has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Business Associate shall be bound by such additional restrictions and shall not disclose PHI in violation of such additional restrictions and shall abide by any additional security safeguards.

(3) **Obligations and Activities of Business Associate.**

- a. The Business Associate shall notify the Covered Entity's Privacy Officer immediately after the Business Associate becomes aware of any use or disclosure of protected health information not provided for by the Agreement including breaches of unsecured protected health information and/or any security incident that may have an impact on the protected health information of the Covered Entity.
- b. The Business Associate shall immediately perform a risk assessment when it becomes aware of any of the above situations. The risk assessment shall include, but not be limited to:
  - o The nature and extent of the protected health information involved, including the types of identifiers and the likelihood of re-identification;
  - o The unauthorized person used the protected health information or to whom the disclosure was made;
  - o Whether the protected health information was actually acquired or viewed
  - o The extent to which the risk to the protected health information has been mitigated.

The Business Associate shall complete the risk assessment within 48 hours of the breach and immediately report the findings of the risk assessment in writing to the Covered Entity.

- c. The Business Associate shall comply with all sections of the Privacy, Security, and Breach Notification Rule.
- d. Business Associate shall make available all of its internal policies and procedures, books and records relating to the use and disclosure of PHI received from, or created or received by the Business Associate on behalf of Covered Entity to the Secretary for purposes of determining Covered Entity's compliance with HIPAA and the Privacy and Security Rule.
- e. Business Associate shall require all of its business associates that receive, use or have access to PHI under the Agreement, to agree in writing to adhere to the same restrictions and conditions on the use and disclosure of PHI contained herein, including the duty to return or destroy the PHI as provided under Section 3 (I). The Covered Entity shall be considered a direct third party beneficiary of the Contractor's business associate agreements with Contractor's intended business associates, who will be receiving PHI

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Date 6/12/2019

New Hampshire Department of Health and Human Services



Exhibit I

pursuant to this Agreement, with rights of enforcement and indemnification from such business associates who shall be governed by standard Paragraph #13 of the standard contract provisions (P-37) of this Agreement for the purpose of use and disclosure of protected health information.

- f. Within five (5) business days of receipt of a written request from Covered Entity, Business Associate shall make available during normal business hours at its offices all records, books, agreements, policies and procedures relating to the use and disclosure of PHI to the Covered Entity, for purposes of enabling Covered Entity to determine Business Associate's compliance with the terms of the Agreement.
- g. Within ten (10) business days of receiving a written request from Covered Entity, Business Associate shall provide access to PHI in a Designated Record Set to the Covered Entity, or as directed by Covered Entity, to an individual in order to meet the requirements under 45 CFR Section 164.524.
- h. Within ten (10) business days of receiving a written request from Covered Entity for an amendment of PHI or a record about an individual contained in a Designated Record Set, the Business Associate shall make such PHI available to Covered Entity for amendment and incorporate any such amendment to enable Covered Entity to fulfill its obligations under 45 CFR Section 164.526.
- i. Business Associate shall document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR Section 164.528.
- j. Within ten (10) business days of receiving a written request from Covered Entity for a request for an accounting of disclosures of PHI, Business Associate shall make available to Covered Entity such information as Covered Entity may require to fulfill its obligations to provide an accounting of disclosures with respect to PHI in accordance with 45 CFR Section 164.528.
- k. In the event any individual requests access to, amendment of, or accounting of PHI directly from the Business Associate, the Business Associate shall within two (2) business days forward such request to Covered Entity. Covered Entity shall have the responsibility of responding to forwarded requests. However, if forwarding the individual's request to Covered Entity would cause Covered Entity or the Business Associate to violate HIPAA and the Privacy and Security Rule, the Business Associate shall instead respond to the individual's request as required by such law and notify Covered Entity of such response as soon as practicable.
- l. Within ten (10) business days of termination of the Agreement, for any reason, the Business Associate shall return or destroy, as specified by Covered Entity, all PHI received from, or created or received by the Business Associate in connection with the Agreement, and shall not retain any copies or back-up tapes of such PHI. If return or destruction is not feasible, or the disposition of the PHI has been otherwise agreed to in the Agreement, Business Associate shall continue to extend the protections of the Agreement, to such PHI and limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Business

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Exhibit I  
Health Insurance Portability Act  
Business Associate Agreement  
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Date 6/10/2019

New Hampshire Department of Health and Human Services



Exhibit I

Associate maintains such PHI. If Covered Entity, in its sole discretion, requires that the Business Associate destroy any or all PHI, the Business Associate shall certify to Covered Entity that the PHI has been destroyed.

(4) Obligations of Covered Entity

- a. Covered Entity shall notify Business Associate of any changes or limitation(s) in its Notice of Privacy Practices provided to individuals in accordance with 45 CFR Section 164.520, to the extent that such change or limitation may affect Business Associate's use or disclosure of PHI.
- b. Covered Entity shall promptly notify Business Associate of any changes in, or revocation of permission provided to Covered Entity by individuals whose PHI may be used or disclosed by Business Associate under this Agreement, pursuant to 45 CFR Section 164.506 or 45 CFR Section 164.508.
- c. Covered entity shall promptly notify Business Associate of any restrictions on the use or disclosure of PHI that Covered Entity has agreed to in accordance with 45 CFR 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of PHI.

(5) Termination for Cause

In addition to Paragraph 10 of the standard terms and conditions (P-37) of this Agreement the Covered Entity may immediately terminate the Agreement upon Covered Entity's knowledge of a breach by Business Associate of the Business Associate Agreement set forth herein as Exhibit I. The Covered Entity may either immediately terminate the Agreement or provide an opportunity for Business Associate to cure the alleged breach within a timeframe specified by Covered Entity. If Covered Entity determines that neither termination nor cure is feasible, Covered Entity shall report the violation to the Secretary.

(6) Miscellaneous

- a. Definitions and Regulatory References. All terms used, but not otherwise defined herein, shall have the same meaning as those terms in the Privacy and Security Rule, amended from time to time. A reference in the Agreement, as amended to include this Exhibit I, to a Section in the Privacy and Security Rule means the Section as in effect or as amended.
- b. Amendment. Covered Entity and Business Associate agree to take such action as is necessary to amend the Agreement, from time to time as is necessary for Covered Entity to comply with the changes in the requirements of HIPAA, the Privacy and Security Rule, and applicable federal and state law.
- c. Data Ownership. The Business Associate acknowledges that it has no ownership rights with respect to the PHI provided by or created on behalf of Covered Entity.
- d. Interpretation. The parties agree that any ambiguity in the Agreement shall be resolved to permit Covered Entity to comply with HIPAA, the Privacy and Security Rule.

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Contractor Initials

MG

Date 6/12/2019

## New Hampshire Department of Health and Human Services



## Exhibit I

- e. Segregation. If any term or condition of this Exhibit I or the application thereof to any person(s) or circumstance is held invalid, such invalidity shall not affect other terms or conditions which can be given effect without the invalid term or condition; to this end the terms and conditions of this Exhibit I are declared severable.
- f. Survival. Provisions in this Exhibit I regarding the use and disclosure of PHI, return or destruction of PHI, extensions of the protections of the Agreement in section (3) l, the defense and indemnification provisions of section (3) e and Paragraph 13 of the standard terms and conditions (P-37); shall survive the termination of the Agreement.

IN WITNESS WHEREOF, the parties hereto have duly executed this Exhibit I.

Department of Health and Human Services

The State

[Signature]  
Signature of Authorized Representative

Trinidad Teller  
Name of Authorized Representative

Director, Office of Health Equity  
Title of Authorized Representative

6/17/19  
Date

Victory Women of Vision  
Name of the Contractor

[Signature]  
Signature of Authorized Representative

MARY N. Georges  
Name of Authorized Representative

EXECUTIVE DIRECTOR  
Title of Authorized Representative

6/12/2019  
Date

New Hampshire Department of Health and Human Services  
Exhibit J



**CERTIFICATION REGARDING THE FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY  
ACT (FFATA) COMPLIANCE**

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than \$25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of \$25,000 or more. If the initial award is below \$25,000 but subsequent grant modifications result in a total award equal to or over \$25,000, the award is subject to the FFATA reporting requirements, as of the date of the award. In accordance with 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), the Department of Health and Human Services (DHHS) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:

1. Name of entity
2. Amount of award
3. Funding agency
4. NAICS code for contracts / CFDA program number for grants
5. Program source
6. Award title descriptive of the purpose of the funding action
7. Location of the entity
8. Principle place of performance
9. Unique identifier of the entity (OUNS #)
10. Total compensation and names of the top five executives if:
  - 10.1. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than \$25M annually and
  - 10.2. Compensation information is not already available through reporting to the SEC.

Prime grant recipients must submit FFATA required data by the end of the month, plus 30 days, in which the award or award amendment is made.

The Contractor identified in Section 1.3 of the General Provisions agrees to comply with the provisions of The Federal Funding Accountability and Transparency Act, Public Law 109-282 and Public Law 110-252, and 2 CFR Part 170 (Reporting Subaward and Executive Compensation Information), and further agrees to have the Contractor's representative, as identified in Sections 1.11 and 1.12 of the General Provisions execute the following Certification:

The below named Contractor agrees to provide needed information as outlined above to the NH Department of Health and Human Services and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

Contractor Name:

6/12/2019  
Date

MARY N. GEORGES  
Name:  
Title: Executive Director

New Hampshire Department of Health and Human Services  
Exhibit J



**FORM A**

As the Contractor identified in Section 1.3 of the General Provisions, I certify that the responses to the below listed questions are true and accurate.

1. The DUNS number for your entity is: 063354099
2. In your business or organization's preceding completed fiscal year, did your business or organization receive (1) 80 percent or more of your annual gross revenue in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; and (2) \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

X NO \_\_\_\_\_ YES

If the answer to #2 above is NO, stop here

If the answer to #2 above is YES, please answer the following:

3. Does the public have access to information about the compensation of the executives in your business or organization through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

X NO \_\_\_\_\_ YES

If the answer to #3 above is YES, stop here

If the answer to #3 above is NO, please answer the following:

4. The names and compensation of the five most highly compensated officers in your business or organization are as follows:

Name: <u>Mary Georges</u>	Amount: _____
Name: <u>AZIZA ALI</u>	Amount: _____
Name: <u>Margaret Elorady</u>	Amount: _____
Name: <u>OSCAR MUKTOR</u>	Amount: _____
Name: _____	Amount: _____

**New Hampshire Department of Health and Human Services**

**Exhibit K**

**DHHS Information Security Requirements**



**A. Definitions**

The following terms may be reflected and have the described meaning in this document:

1. "Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, unauthorized access, or any similar term referring to situations where persons other than authorized users and for an other than authorized purpose have access or potential access to personally identifiable information, whether physical or electronic. With regard to Protected Health Information, "Breach" shall have the same meaning as the term "Breach" in section 164.402 of Title 45, Code of Federal Regulations.
2. "Computer Security Incident" shall have the same meaning "Computer Security Incident" in section two (2) of NIST Publication 800-61, Computer Security Incident Handling Guide, National Institute of Standards and Technology, U.S. Department of Commerce.
3. "Confidential Information" or "Confidential Data" means all confidential information disclosed by one party to the other such as all medical, health, financial, public assistance benefits and personal information including without limitation, Substance Abuse Treatment Records, Case Records, Protected Health Information and Personally Identifiable Information.

Confidential Information also includes any and all information owned or managed by the State of NH - created, received from or on behalf of the Department of Health and Human Services (DHHS) or accessed in the course of performing contracted services - of which collection, disclosure, protection, and disposition is governed by state or federal law or regulation. This information includes, but is not limited to Protected Health Information (PHI), Personal Information (PI), Personal Financial Information (PFI), Federal Tax Information (FTI), Social Security Numbers (SSN), Payment Card Industry (PCI), and or other sensitive and confidential information.

4. "End User" means any person or entity (e.g., contractor, contractor's employee, business associate, subcontractor, other downstream user, etc.) that receives DHHS data or derivative data in accordance with the terms of this Contract.
5. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996 and the regulations promulgated thereunder.
6. "Incident" means an act that potentially violates an explicit or implied security policy, which includes attempts (either failed or successful) to gain unauthorized access to a system or its data, unwanted disruption or denial of service, the unauthorized use of a system for the processing or storage of data; and changes to system hardware, firmware, or software characteristics without the owner's knowledge, instruction, or consent. Incidents include the loss of data through theft or device misplacement, loss or misplacement of hardcopy documents, and misrouting of physical or electronic

**New Hampshire Department of Health and Human Services**

**Exhibit K**

**DHHS Information Security Requirements**



mail, all of which may have the potential to put the data at risk of unauthorized access, use, disclosure, modification or destruction.

7. "Open Wireless Network" means any network or segment of a network that is not designated by the State of New Hampshire's Department of Information Technology or delegate as a protected network (designed, tested, and approved, by means of the State, to transmit) will be considered an open network and not adequately secure for the transmission of unencrypted PI, PFI, PHI or confidential DHHS data.
8. "Personal Information" (or "PI") means information which can be used to distinguish or trace an individual's identity, such as their name, social security number, personal information as defined in New Hampshire RSA 359-C:19, biometric records, etc., alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.
9. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 C.F.R. Parts 160 and 164, promulgated under HIPAA by the United States Department of Health and Human Services.
10. "Protected Health Information" (or "PHI") has the same meaning as provided in the definition of "Protected Health Information" in the HIPAA Privacy Rule at 45 C.F.R. § 160.103.
11. "Security Rule" shall mean the Security Standards for the Protection of Electronic Protected Health Information at 45 C.F.R. Part 164, Subpart C, and amendments thereto.
12. "Unsecured Protected Health Information" means Protected Health Information that is not secured by a technology standard that renders Protected Health Information unusable, unreadable, or indecipherable to unauthorized individuals and is developed or endorsed by a standards developing organization that is accredited by the American National Standards Institute.

**I. RESPONSIBILITIES OF DHHS AND THE CONTRACTOR**

**A. Business Use and Disclosure of Confidential Information.**

1. The Contractor must not use, disclose, maintain or transmit Confidential Information except as reasonably necessary as outlined under this Contract. Further, Contractor, including but not limited to all its directors, officers, employees and agents, must not use, disclose, maintain or transmit PHI in any manner that would constitute a violation of the Privacy and Security Rule.
2. The Contractor must not disclose any Confidential Information in response to a

**New Hampshire Department of Health and Human Services**

**Exhibit K**

**DHHS Information Security Requirements**



request for disclosure on the basis that it is required by law, in response to a subpoena, etc., without first notifying DHHS so that DHHS has an opportunity to consent or object to the disclosure.

3. If DHHS notifies the Contractor that DHHS has agreed to be bound by additional restrictions over and above those uses or disclosures or security safeguards of PHI pursuant to the Privacy and Security Rule, the Contractor must be bound by such additional restrictions and must not disclose PHI in violation of such additional restrictions and must abide by any additional security safeguards.
4. The Contractor agrees that DHHS Data or derivative there from disclosed to an End User must only be used pursuant to the terms of this Contract.
5. The Contractor agrees DHHS Data obtained under this Contract may not be used for any other purposes that are not indicated in this Contract.
6. The Contractor agrees to grant access to the data to the authorized representatives of DHHS for the purpose of inspecting to confirm compliance with the terms of this Contract.

**II. METHODS OF SECURE TRANSMISSION OF DATA**

1. Application Encryption. If End User is transmitting DHHS data containing Confidential Data between applications, the Contractor attests the applications have been evaluated by an expert knowledgeable in cyber security and that said application's encryption capabilities ensure secure transmission via the internet.
2. Computer Disks and Portable Storage Devices. End User may not use computer disks or portable storage devices, such as a thumb drive, as a method of transmitting DHHS data.
3. Encrypted Email. End User may only employ email to transmit Confidential Data if email is encrypted and being sent to and being received by email addresses of persons authorized to receive such information.
4. Encrypted Web Site. If End User is employing the Web to transmit Confidential Data, the secure socket layers (SSL) must be used and the web site must be secure. SSL encrypts data transmitted via a Web site.
5. File Hosting Services, also known as File Sharing Sites. End User may not use file hosting services, such as Dropbox or Google Cloud Storage, to transmit Confidential Data.
6. Ground Mail Service. End User may only transmit Confidential Data via *certified* ground mail within the continental U.S. and when sent to a named individual.
7. Laptops and PDA. If End User is employing portable devices to transmit Confidential Data said devices must be encrypted and password-protected.
8. Open Wireless Networks. End User may not transmit Confidential Data via an open

**New Hampshire Department of Health and Human Services**

**Exhibit K**

**DHHS Information Security Requirements**



wireless network. End User must employ a virtual private network (VPN) when remotely transmitting via an open wireless network.

9. Remote User Communication. If End User is employing remote communication to access or transmit Confidential Data, a virtual private network (VPN) must be installed on the End User's mobile device(s) or laptop from which information will be transmitted or accessed.
10. SSH File Transfer Protocol (SFTP), also known as Secure File Transfer Protocol. If End User is employing an SFTP to transmit Confidential Data, End User will structure the Folder and access privileges to prevent inappropriate disclosure of information. SFTP folders and sub-folders used for transmitting Confidential Data will be coded for 24-hour auto-deletion cycle (i.e. Confidential Data will be deleted every 24 hours).
11. Wireless Devices. If End User is transmitting Confidential Data via wireless devices, all data must be encrypted to prevent inappropriate disclosure of information.

**III. RETENTION AND DISPOSITION OF IDENTIFIABLE RECORDS**

The Contractor will only retain the data and any derivative of the data for the duration of this Contract. After such time, the Contractor will have 30 days to destroy the data and any derivative in whatever form it may exist, unless, otherwise required by law or permitted under this Contract. To this end, the parties must:

**A. Retention**

1. The Contractor agrees it will not store, transfer or process data collected in connection with the services rendered under this Contract outside of the United States. This physical location requirement shall also apply in the implementation of cloud computing, cloud service or cloud storage capabilities, and includes backup data and Disaster Recovery locations.
2. The Contractor agrees to ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.
3. The Contractor agrees to provide security awareness and education for its End Users in support of protecting Department confidential information.
4. The Contractor agrees to retain all electronic and hard copies of Confidential Data in a secure location and identified in section IV. A.2
5. The Contractor agrees Confidential Data stored in a Cloud must be in a FedRAMP/HITECH compliant solution and comply with all applicable statutes and regulations regarding the privacy and security. All servers and devices must have currently-supported and hardened operating systems, the latest anti-viral, anti-hacker, anti-spam, anti-spyware, and anti-malware utilities. The environment, as a

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**New Hampshire Department of Health and Human Services**

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**DHHS Information Security Requirements**



whole, must have aggressive intrusion-detection and firewall protection.

6. The Contractor agrees to and ensures its complete cooperation with the State's Chief Information Officer in the detection of any security vulnerability of the hosting infrastructure.

**B. Disposition**

1. If the Contractor will maintain any Confidential Information on its systems (or its sub-contractor systems), the Contractor will maintain a documented process for securely disposing of such data upon request or contract termination; and will obtain written certification for any State of New Hampshire data destroyed by the Contractor or any subcontractors as a part of ongoing, emergency, and or disaster recovery operations. When no longer in use, electronic media containing State of New Hampshire data shall be rendered unrecoverable via a secure wipe program in accordance with industry-accepted standards for secure deletion and media sanitization, or otherwise physically destroying the media (for example, degaussing) as described in NIST Special Publication 800-88, Rev 1, Guidelines for Media Sanitization, National Institute of Standards and Technology, U. S. Department of Commerce. The Contractor will document and certify in writing at time of the data destruction, and will provide written certification to the Department upon request. The written certification will include all details necessary to demonstrate data has been properly destroyed and validated. Where applicable, regulatory and professional standards for retention requirements will be jointly evaluated by the State and Contractor prior to destruction.
2. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to destroy all hard copies of Confidential Data using a secure method such as shredding.
3. Unless otherwise specified, within thirty (30) days of the termination of this Contract, Contractor agrees to completely destroy all electronic Confidential Data by means of data erasure, also known as secure data wiping.

**IV. PROCEDURES FOR SECURITY**

- A. Contractor agrees to safeguard the DHHS Data received under this Contract, and any derivative data or files, as follows:
  1. The Contractor will maintain proper security controls to protect Department confidential information collected, processed, managed, and/or stored in the delivery of contracted services.
  2. The Contractor will maintain policies and procedures to protect Department confidential information throughout the information lifecycle, where applicable, (from creation, transformation, use, storage and secure destruction) regardless of the media used to store the data (i.e., tape, disk, paper, etc.).

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**DHHS Information Security Requirements**



3. The Contractor will maintain appropriate authentication and access controls to contractor systems that collect, transmit, or store Department confidential information where applicable.
4. The Contractor will ensure proper security monitoring capabilities are in place to detect potential security events that can impact State of NH systems and/or Department confidential information for contractor provided systems.
5. The Contractor will provide regular security awareness and education for its End Users in support of protecting Department confidential information.
6. If the Contractor will be sub-contracting any core functions of the engagement supporting the services for State of New Hampshire, the Contractor will maintain a program of an internal process or processes that defines specific security expectations, and monitoring compliance to security requirements that at a minimum match those for the Contractor, including breach notification requirements.
7. The Contractor will work with the Department to sign and comply with all applicable State of New Hampshire and Department system access and authorization policies and procedures, systems access forms, and computer use agreements as part of obtaining and maintaining access to any Department system(s). Agreements will be completed and signed by the Contractor and any applicable sub-contractors prior to system access being authorized.
8. If the Department determines the Contractor is a Business Associate pursuant to 45 CFR 160.103, the Contractor will execute a HIPAA Business Associate Agreement (BAA) with the Department and is responsible for maintaining compliance with the agreement.
9. The Contractor will work with the Department at its request to complete a System Management Survey. The purpose of the survey is to enable the Department and Contractor to monitor for any changes in risks, threats, and vulnerabilities that may occur over the life of the Contractor engagement. The survey will be completed annually, or an alternate time frame at the Departments discretion with agreement by the Contractor, or the Department may request the survey be completed when the scope of the engagement between the Department and the Contractor changes.
10. The Contractor will not store, knowingly or unknowingly, any State of New Hampshire or Department data offshore or outside the boundaries of the United States unless prior express written consent is obtained from the Information Security Office leadership member within the Department.
11. Data Security Breach Liability. In the event of any security breach Contractor shall make efforts to investigate the causes of the breach, promptly take measures to prevent future breach and minimize any damage or loss resulting from the breach. The State shall recover from the Contractor all costs of response and recovery from

**New Hampshire Department of Health and Human Services**

**Exhibit K**

**DHHS Information Security Requirements**



the breach, including but not limited to: credit monitoring services, mailing costs and costs associated with website and telephone call center services necessary due to the breach.

12. Contractor must, comply with all applicable statutes and regulations regarding the privacy and security of Confidential Information, and must in all other respects maintain the privacy and security of PI and PHI at a level and scope that is not less than the level and scope of requirements applicable to federal agencies, including, but not limited to, provisions of the Privacy Act of 1974 (5 U.S.C. § 552a), DHHS Privacy Act Regulations (45 C.F.R. §5b), HIPAA Privacy and Security Rules (45 C.F.R. Parts 160 and 164) that govern protections for individually identifiable health information and as applicable under State law.
13. Contractor agrees to establish and maintain appropriate administrative, technical, and physical safeguards to protect the confidentiality of the Confidential Data and to prevent unauthorized use or access to it. The safeguards must provide a level and scope of security that is not less than the level and scope of security requirements established by the State of New Hampshire, Department of Information Technology. Refer to Vendor Resources/Procurement at <https://www.nh.gov/doit/vendor/index.htm> for the Department of Information Technology policies, guidelines, standards, and procurement information relating to vendors.
14. Contractor agrees to maintain a documented breach notification and incident response process. The Contractor will notify the State's Privacy Officer and the State's Security Officer of any security breach immediately, at the email addresses provided in Section VI. This includes a confidential information breach, computer security incident, or suspected breach which affects or includes any State of New Hampshire systems that connect to the State of New Hampshire network.
15. Contractor must restrict access to the Confidential Data obtained under this Contract to only those authorized End Users who need such DHHS Data to perform their official duties in connection with purposes identified in this Contract.
16. The Contractor must ensure that all End Users:
  - a. comply with such safeguards as referenced in Section IV A. above, implemented to protect Confidential Information that is furnished by DHHS under this Contract from loss, theft or inadvertent disclosure.
  - b. safeguard this information at all times.
  - c. ensure that laptops and other electronic devices/media containing PHI, PI, or PFI are encrypted and password-protected.
  - d. send emails containing Confidential Information only if encrypted and being sent to and being received by email addresses of persons authorized to receive such information.

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*6/12/2019*

**New Hampshire Department of Health and Human Services**

**Exhibit K**

**DHHS Information Security Requirements**



- e. limit disclosure of the Confidential Information to the extent permitted by law.
- f. Confidential Information received under this Contract and individually identifiable data derived from DHHS Data, must be stored in an area that is physically and technologically secure from access by unauthorized persons during duty hours as well as non-duty hours (e.g., door locks, card keys, biometric identifiers, etc.).
- g. only authorized End Users may transmit the Confidential Data, including any derivative files containing personally identifiable information, and in all cases, such data must be encrypted at all times when in transit, at rest, or when stored on portable media as required in section IV above.
- h. in all other instances Confidential Data must be maintained, used and disclosed using appropriate safeguards, as determined by a risk-based assessment of the circumstances involved.
- i. understand that their user credentials (user name and password) must not be shared with anyone. End Users will keep their credential information secure. This applies to credentials used to access the site directly or indirectly through a third party application.

Contractor is responsible for oversight and compliance of their End Users. DHHS reserves the right to conduct onsite inspections to monitor compliance with this Contract, including the privacy and security requirements provided in herein, HIPAA, and other applicable laws and Federal regulations until such time the Confidential Data is disposed of in accordance with this Contract.

**V. LOSS REPORTING**

The Contractor must notify the State's Privacy Officer and Security Officer of any Security Incidents and Breaches immediately, at the email addresses provided in Section VI.

The Contractor must further handle and report Incidents and Breaches involving PHI in accordance with the agency's documented Incident Handling and Breach Notification procedures and in accordance with 42 C.F.R. §§ 431.300 - 306. In addition to, and notwithstanding, Contractor's compliance with all applicable obligations and procedures, Contractor's procedures must also address how the Contractor will:

- 1. Identify Incidents;
- 2. Determine if personally identifiable information is involved in Incidents;
- 3. Report suspected or confirmed Incidents as required in this Exhibit or P-37;
- 4. Identify and convene a core response group to determine the risk level of Incidents and determine risk-based responses to Incidents; and

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*6/12/2019*

**New Hampshire Department of Health and Human Services**  
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**DHHS Information Security Requirements**

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5. Determine whether Breach notification is required, and, if so, identify appropriate Breach notification methods, timing, source, and contents from among different options, and bear costs associated with the Breach notice as well as any mitigation measures.

Incidents and/or Breaches that implicate PI must be addressed and reported, as applicable, in accordance with NH RSA 359-C:20.

**VI. PERSONS TO CONTACT**

**A. DHHS Privacy Officer:**

DHHSPrivacyOfficer@dhhs.nh.gov

**B. DHHS Security Officer:**

DHHSInformationSecurityOffice@dhhs.nh.gov

**CONTRACTOR NAME**Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Mary N. Georges	Executive Director	15,600	100%	15,600
To Be Hired	Case Manager	20,400	100%	20,400

**CONTRACTOR NAME**

Key Personnel

Name	Job Title	Salary	% Paid from this Contract	Amount Paid from this Contract
Mary N. Georges	Executive Director	15,600	100%	15,600
To Be Hired	Case Manager	20,400	100%	20,400