



Jeffrey A. Meyers  
Commissioner

Christine L. Santaniello  
Director

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF LONG TERM SUPPORTS AND SERVICES

**BUREAU OF ELDERLY & ADULT SERVICES**

105 PLEASANT STREET, CONCORD, NH 03301-3587  
603-271-9203 1-800-351-1888  
Fax: 603-271-4643 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

September 10, 2018

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, Division of Long Term Supports and Services, Bureau of Elderly & Adult Services, to **retroactively** exercise a renewal option and amend an existing **sole source** agreement with Community Action Program Belknap and Merrimack Counties, Inc., (Vendor #177203), 2 Industrial Park Drive, Concord, NH 03302, to continue to provide Senior Companion Services, by increasing the price limitation by \$60,000 from \$60,000 to \$120,000, and extending the completion date from September 30, 2018 to September 30, 2020, effective upon the date of Governor and Executive Council approval. 100% General Funds.

The original agreement was approved by Governor and Executive Council on October 26, 2016 (Item #16).

Funds are available in the following account for State Fiscal Year (SFY) 2019, and are expected to be available in SFY 2020 and SFY 2021, upon the availability and continued appropriation of funds with the authority to adjust amounts within the price limitation and adjust encumbrances between State Fiscal Years through the Budget Office without further approval from Governor and Executive Council.

**05-95-48-481010-9010 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, VOLUNTEER ACTIVITIES**

| State Fiscal Year | Class / Account | Class Title             | Current Modified Budget | Increased (Decreased) Amount | Revised Modified Budget |
|-------------------|-----------------|-------------------------|-------------------------|------------------------------|-------------------------|
| 2017              | 102-500731      | Contracts for Prog Svcs | \$22,500.00             | \$0.00                       | \$22,500.00             |
| 2018              | 102-500731      | Contracts for Prog Svcs | \$30,000.00             | \$0.00                       | \$30,000.00             |
| 2019              | 102-500731      | Contracts for Prog Svcs | \$7,500.00              | \$22,500.00                  | \$30,000.00             |
| 2020              | 102-500731      | Contracts for Prog Svcs | \$0.00                  | \$30,000.00                  | \$30,000.00             |
| 2021              | 102-500731      | Contracts for Prog Svcs | \$0.00                  | \$7,500.00                   | \$7,500.00              |
|                   |                 |                         | <b>\$60,000.00</b>      | <b>\$60,000.00</b>           | <b>\$120,000.00</b>     |

### **EXPLANATION**

This request is **retroactive** due to the fully executed contract documentation were not received with enough time to meet the September 19, 2018 Governor and Executive Council meeting.

The request is **sole source** as Community Action Program Belknap and Merrimack Counties, Inc., is the only sponsor and fiscal agent for the Senior Companion Program in New Hampshire, primarily funded and regulated by the Federal Corporation for National and Community Services to provide this program. The Corporation for National and Community Service has selected the Community Action Program Belknap and Merrimack Counties, Inc., as the sole agency in New Hampshire to sponsor the Senior Volunteer Grant Program, per RSA 161-F:40, within the limits of funds appropriated, to reimburse for covered expenses incurred by the Senior Companion Program.

The purpose of this amendment is to continue providing Senior Companion services by extending contracted services for two (2) years. The mission of the Senior Companion Program is to prevent institutionalization and to promote independence for vulnerable older individuals by supporting older adults in maintaining independent community living.

The Senior Companion Program provides the opportunity for low-income (200% of poverty or less) adults over the age of fifty-five (55) to serve as companions. Companions are matched with older adults who are homebound and provide supportive services. The companions benefit from participation in a rewarding and worthwhile experience and the older individuals who are served, benefit from regular companionship and reduced isolation.

The Contractor shall maintain compliance with for Senior Companion Program as established by the National Senior Corporation for National Community Services. The contractor shall report to the Bureau on a quarterly basis:

- The number of visits made;
- The number of Clients served;
- The number of Companions participating in the program; and
- The number of hours Companions spent with clients

As referenced in Exhibit C-1 of this contract, this agreement has the option to extend for up to two (2) additional years subject to continued availability of funds and satisfactory performance of services. The Department is satisfied with services provided by the Contractor and is in agreement with continuation of the contracted services.

Should the Governor and Executive Council not authorize this request, the Department will lack the resources to maintain federal designation or receive continued funding and seniors will be without companionship support and be at risk for increased isolation. This will also impact individuals who need long-term care, from being able maintain their independence in the community resulting in increased utilization of higher cost institutional services.

Area served: Belknap, Grafton, Hillsborough, Merrimack, Rockingham, Strafford and Sullivan Counties

Source of Funds: 05-95-48-481010-9010 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVS, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, VOLUNTEER ACTIVITIES (0% FEDERAL, 100% GENERAL).

Respectfully submitted,

  
Christine L. Santanillo,  
Director

Approved by:

  
Jeffrey A. Meyers  
Commissioner

**New Hampshire Department of Health and Human Services  
Senior Companion Program**



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**State of New Hampshire  
Department of Health and Human Services  
Amendment #1 to the  
Senior Companion Program Contract**

This 1<sup>st</sup> Amendment to the Senior Companion Program contract (hereinafter referred to as "Amendment #1") dated this 25<sup>th</sup> day of July, 2018, is by and between the State of New Hampshire, Department of Health and Human Services (hereinafter referred to as the "State" or "Department") and Community Action Program Belknap and Merrimack Counties, Inc. (hereinafter referred to as "the Contractor"), a corporation with a place of business at 2 Industrial Park Drive, Concord, NH 03302-1016.

WHEREAS, pursuant to an agreement (the "Contract") approved by the Governor and Executive Council on October 26, 2016, (Item # 16), the Contractor agreed to perform certain services based upon the terms and conditions specified in the Contract as amended and in consideration of certain sums specified; and

WHEREAS, the State and the Contractor have agreed to make changes to the payment schedules and terms and conditions of the contract; and

WHEREAS, pursuant to Form P-37, General Provisions, Paragraph 18 and Exhibit C-1, Revisions to General Provisions, Paragraph 3, the State may amend the contract and may renew contract services for up to two (2) years;

WHEREAS, the parties agree to extend the term of the agreement and increase the price limitation to support continued delivery of these services upon written agreement of both parties and approval from the Governor and Executive Council; 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, 2020.
2. Form P-37, General Provisions, Block 1.8, Price Limitation to read: \$120,000
3. Form P-37, General Provisions, Block 1.9, Contracting Officer for State Agency to read: E. Maria Reinemann, Esq., Director of Contracts and Procurement.
4. Form P-37, General Provisions, Block 1.10 State Agency Phone Number to read: 603-271-9330.
5. Delete Exhibit B-3 and replace with Exhibit B-3, Amendment 1
6. Add Exhibit B-4
7. Add Exhibit B-5
8. Add Exhibit K, DHHS Information Security Requirements

**New Hampshire Department of Health and Human Services  
Senior Companion Program**



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

9/11/18  
Date

*Christine Santamaria*  
Name: Christine Santamaria  
Title: Director, DSS

CONTRACTOR NAME  
Community Action Program Belknap-Merrimack Counties, Inc.

8/29/2018  
Date

*Jeanne Agri*  
Name: Jeanne Agri  
Title: Executive Director

Acknowledgement of Contractor's signature:

State of New Hampshire, County of Merrimack on 8/29/2018, before the undersigned officer, personally appeared the person identified directly above, or satisfactorily proven to be the person whose name is signed above, and acknowledged that s/he executed this document in the capacity indicated above.

*Kathy L. Howard*  
Signature of Notary Public or Justice of the Peace

Kathy L. Howard, Notary Public  
Name and Title of Notary or Justice of the Peace

My Commission Expires: KATHY L. HOWARD Notary Public, New Hampshire  
My Commission Expires October 16, 2018

**New Hampshire Department of Health and Human Services**  
**Senior Companion Program**



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

OFFICE OF THE ATTORNEY GENERAL

9/19/18  
Date

[Signature]  
Name: Megan A. L. Goff  
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-3, Amendment 1  
Budget

New Hampshire Department of Health and Human Services  
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Bidder/Program Name: Community Action Program Belknap-Merrimack Counties, Inc.

Budget Request for: Senior Companion Program  
(Name of RFP)

Budget Period: July 1, 2018 through June 30, 2019

| 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                   | \$ 12,750.00       | \$ -     | \$ 12,750.00 | \$ -                     | \$ -     | \$ -  | \$ 12,750.00                  | \$ -     | \$ 12,750.00 |
| 2. Employee Benefits                    | \$ 1,800.00        | \$ -     | \$ 1,800.00  | \$ -                     | \$ -     | \$ -  | \$ 1,800.00                   | \$ -     | \$ 1,800.00  |
| 3. Consultants                          | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 4. Equipment:                           | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Rental                                  | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Repair and Maintenance                  | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Purchase/Depreciation                   | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 5. Supplies:                            | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Educational                             | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Lab                                     | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Pharmacy                                | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Medical                                 | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Office                                  | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 6. Travel                               | \$ 100.00          | \$ -     | \$ 100.00    | \$ -                     | \$ -     | \$ -  | \$ 100.00                     | \$ -     | \$ 100.00    |
| 7. Occupancy                            | \$ 8,500.00        | \$ -     | \$ 8,500.00  | \$ -                     | \$ -     | \$ -  | \$ 8,500.00                   | \$ -     | \$ 8,500.00  |
| 8. Current Expenses                     | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Telephone                               | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Postage                                 | \$ 850.00          | \$ -     | \$ 850.00    | \$ -                     | \$ -     | \$ -  | \$ 850.00                     | \$ -     | \$ 850.00    |
| Subscriptions                           | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Audit and Legal                         | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Insurance                               | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Board Expenses                          | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 9. Software                             | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 10. Marketing/Communications            | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 11. Staff Education and Training        | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 12. Subcontracts/Agreements             | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 13. Other (specific details mandatory): | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Volunteer Travel                        | \$ 6,000.00        | \$ -     | \$ 6,000.00  | \$ -                     | \$ -     | \$ -  | \$ 6,000.00                   | \$ -     | \$ 6,000.00  |
|   | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| <b>TOTAL</b>                            | \$ 30,000.00       | \$ -     | \$ 30,000.00 | \$ -                     | \$ -     | \$ -  | \$ 30,000.00                  | \$ -     | \$ 30,000.00 |

Indirect As A Percent of Direct

0.0%

Exhibit B-4  
Budget

New Hampshire Department of Health and Human Services  
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Bidder/Program Name: Community Action Program Belknap-Merrimack Counties, Inc.

Budget Request for: Senior Companion Program  
(Name of RFP)

Budget Period: July 1, 2018 through June 30, 2020

| 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                   | \$ 12,750.00       | \$ -     | \$ 12,750.00 | \$ -                     | \$ -     | \$ -  | \$ 12,750.00                  | \$ -     | \$ 12,750.00 |
| 2. Employee Benefits                    | \$ 1,800.00        | \$ -     | \$ 1,800.00  | \$ -                     | \$ -     | \$ -  | \$ 1,800.00                   | \$ -     | \$ 1,800.00  |
| 3. Consultants                          | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 4. Equipment:                           | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Rental                                  | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Repair and Maintenance                  | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Purchase/Depreciation                   | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 5. Supplies:                            | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Educational                             | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Lab                                     | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Pharmacy                                | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Medical                                 | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Office                                  | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 6. Travel                               | \$ 100.00          | \$ -     | \$ 100.00    | \$ -                     | \$ -     | \$ -  | \$ 100.00                     | \$ -     | \$ 100.00    |
| 7. Occupancy                            | \$ 8,500.00        | \$ -     | \$ 8,500.00  | \$ -                     | \$ -     | \$ -  | \$ 8,500.00                   | \$ -     | \$ 8,500.00  |
| 8. Current Expenses                     | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Telephone                               | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Postage                                 | \$ 850.00          | \$ -     | \$ 850.00    | \$ -                     | \$ -     | \$ -  | \$ 850.00                     | \$ -     | \$ 850.00    |
| Subscriptions                           | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Audit and Legal                         | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Insurance                               | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Board Expenses                          | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 9. Software                             | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 10. Marketing/Communications            | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 11. Staff Education and Training        | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 12. Subcontracts/Agreements             | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| 13. Other (specific details mandatory): | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| Volunteer Travel                        | \$ 6,000.00        | \$ -     | \$ 6,000.00  | \$ -                     | \$ -     | \$ -  | \$ 6,000.00                   | \$ -     | \$ 6,000.00  |
|   | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
|   | \$ -               | \$ -     | \$ -         | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -         |
| <b>TOTAL</b>                            | \$ 30,000.00       | \$ -     | \$ 30,000.00 | \$ -                     | \$ -     | \$ -  | \$ 30,000.00                  | \$ -     | \$ 30,000.00 |

Indirect As A Percent of Direct

0.0%



Exhibit B-3, Amendment 1  
Budget

New Hampshire Department of Health and Human Services  
COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD

Bidder/Program Name: Community Action Program Belknap-Merrimack Counties, Inc.

Budget Request for: Senior Companion Program  
(Name of RFP)

Budget Period: July 1, 2020 through September 30, 2020

| 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                   | \$ 3,187.50        | \$ -     | \$ 3,187.50 | \$ -                     | \$ -     | \$ -  | \$ 3,187.50                   | \$ -     | \$ 3,187.50 |
| 2. Employee Benefits                    | \$ 450.00          | \$ -     | \$ 450.00   | \$ -                     | \$ -     | \$ -  | \$ 450.00                     | \$ -     | \$ 450.00   |
| 3. Consultants                          | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 4. Equipment:                           | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Rental                                  | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Repair and Maintenance                  | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Purchase/Depreciation                   | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 5. Supplies:                            | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Educational                             | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Lab                                     | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Pharmacy                                | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Medical                                 | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Office                                  | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 6. Travel                               | \$ 25.00           | \$ -     | \$ 25.00    | \$ -                     | \$ -     | \$ -  | \$ 25.00                      | \$ -     | \$ 25.00    |
| 7. Occupancy                            | \$ 2,125.00        | \$ -     | \$ 2,125.00 | \$ -                     | \$ -     | \$ -  | \$ 2,125.00                   | \$ -     | \$ 2,125.00 |
| 8. Current Expenses                     | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Telephone                               | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Postage                                 | \$ 212.50          | \$ -     | \$ 212.50   | \$ -                     | \$ -     | \$ -  | \$ 212.50                     | \$ -     | \$ 212.50   |
| Subscriptions                           | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Audit and Legal                         | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Insurance                               | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Board Expenses                          | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 9. Software                             | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 10. Marketing/Communications            | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 11. Staff Education and Training        | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 12. Subcontracts/Agreements             | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| 13. Other (specific details mandatory): | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| Volunteer Travel                        | \$ 1,500.00        | \$ -     | \$ 1,500.00 | \$ -                     | \$ -     | \$ -  | \$ 1,500.00                   | \$ -     | \$ 1,500.00 |
|   | \$ -               | \$ -     | \$ -        | \$ -                     | \$ -     | \$ -  | \$ -                          | \$ -     | \$ -        |
| <b>TOTAL</b>                            | \$ 7,500.00        | \$ -     | \$ 7,500.00 | \$ -                     | \$ -     | \$ -  | \$ 7,500.00                   | \$ -     | \$ 7,500.00 |

Indirect As A Percent of Direct

0.0%



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



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



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



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



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.).

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

**Exhibit K**

**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/doiit/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 additional email addresses provided in this section, of any security breach within two (2) hours of the time that the Contractor learns of its occurrence. 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.





- 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, Information Security Office and Program Manager of any Security Incidents and Breaches within two (2) hours of the time that the Contractor learns of their occurrence.

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



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 contact for Data Management or Data Exchange issues:

DHHSInformationSecurityOffice@dhhs.nh.gov

- B. DHHS contacts for Privacy issues:

DHHSPrivacyOfficer@dhhs.nh.gov

- C. DHHS contact for Information Security issues:

DHHSInformationSecurityOffice@dhhs.nh.gov

- D. DHHS contact for Breach notifications:

DHHSInformationSecurityOffice@dhhs.nh.gov

DHHSPrivacy.Officer@dhhs.nh.gov

# State of New Hampshire

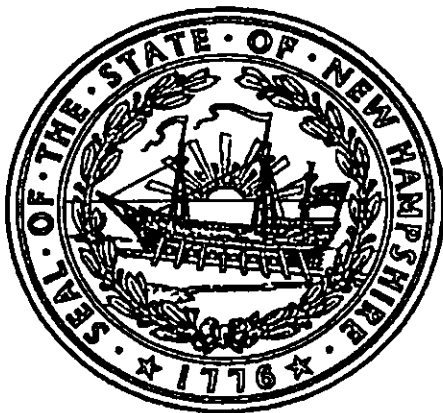
## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that COMMUNITY ACTION PROGRAM BELKNAP AND MERRIMACK COUNTIES, INC. is a New Hampshire Nonprofit Corporation registered to transact business in New Hampshire on May 28, 1965. 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: 63021

Certificate Number: 0004072372



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 2nd day of April A.D. 2018.

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

William M. Gardner  
Secretary of State

**Community Action Program Belknap-Merrimack Counties, Inc.**

**CERTIFICATE OF VOTE**

I, Dennis T. Martino, Secretary-Clerk of Community Action Program Belknap-Merrimack Counties, Inc. (hereinafter the "Corporation"), a New Hampshire corporation, hereby certify that: (1) I am the duly elected and acting Secretary-Clerk of the Corporation; (2) I maintain and have custody and am familiar with the minute books of the Corporation; (3) I am duly authorized to issue certificates with respect to the contents of such books; (4) that the Board of Directors of the Corporation have authorized, on 01/18/2018, such authority to be in force and effect until 9/30/2020 (contract termination date). (see attached)

The person(s) holding the below listed position(s) are authorized to execute and deliver on behalf of the Corporation any contract or other instrument for the sale of products and services:

Jeanne Agri, Executive Director

(5) The meeting of the Board of Directors was held in accordance with New Hampshire, (state of incorporation) law and the by-laws of the Corporation; and (6) said authorization has not been modified, amended or rescinded and continues in full force and effect as of the date hereof. Excerpt of dated minutes or copy of article or section of authorizing by-law must be attached.

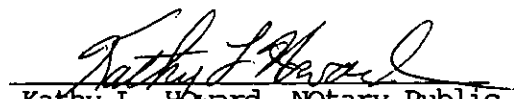
IN WITNESS WHEREOF, I have hereunto set my hand as the Clerk/Secretary of the corporation this 29th day of August, 2018.

  
Secretary-Clerk

STATE OF NEW HAMPSHIRE  
COUNTY OF MERRIMACK

On this 29th day of August, 2018, before me, Kathy L. Howard the undersigned Officer, personally appeared Dennis T. Martino who acknowledged her/himself to be the Secretary-Clerk of Community Action Program Belknap-Merrimack Counties, Inc., a corporation and that she/he as such Secretary-Clerk being authorized to do so, executed the foregoing instrument for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

  
Kathy L. Howard, Notary Public  
Notary Public/Justice of the Peace

Commission Expiration Date:

KATHY L. HOWARD Notary Public, New Hampshire  
My Commission Expires October 16, 2018

КНИГА ПЕРВАЯ ИЛИ О ПРАВЕ



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/3/2018

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 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).

|  |   |
|--|---|
| PRODUCER<br>FIAI/Cross Insurance<br>1100 Elm Street<br><br>Manchester NH 03101                                 | CONTACT NAME: Karen Shaughnessy   |
|  | PHONE (A/C No. Ext): (603) 669-3218 FAX (A/C No.): (603) 645-4331<br>E-MAIL ADDRESS: kshaughnessy@crossagency.com   |
| INSURED<br>Community Action Programs,<br>Belknap-Merrimack Counties Inc.<br>P. O. Box 1016<br>Concord NH 03302 | INSURER(S) AFFORDING COVERAGE<br>INSURER A: Illinois National Ins. Co.<br>INSURER B: National Union Fire Insurance<br>INSURER C: Granite State Health Care and Human<br>INSURER D: Hanover Ins Co.<br>INSURER E: Berkshire Hathaway, Inc.<br>INSURER F: |
|  | NAIC #<br>19445<br>22292  |

COVERAGES CERTIFICATE NUMBER: 17-18 All 18-19 WC/Crime 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<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><input checked="" type="checkbox"/> Including Professional                           |  |          | 06-LX-067991165-2                                    | 10/1/2017               | 10/1/2018               | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 3,000,000<br>PRODUCTS - COMPROP AGG \$ 3,000,000 |
| D        | GENL AGGREGATE LIMIT APPLIES PER:<br><input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br><input checked="" type="checkbox"/> OTHER:   |  |          | 82471794   | 4/1/2018                | 4/1/2019                | Directors & Officers Liability \$ 1,000,000  |
| B        | AUTOMOBILE LIABILITY<br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS |  |          | 29-CA-069971915-0                                    | 10/1/2017               | 10/1/2018               | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>Uninsured motorist combined \$ 1,000,000                                    |
| B        | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br>DED <input checked="" type="checkbox"/> RETENTION \$ 10,000    |  |          | 29-UD-016698260-2                                    | 10/1/2017               | 10/1/2018               | EACH OCCURRENCE \$ 5,000,000<br>AGGREGATE \$ 5,000,000   |
| C        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   | Y/N<br><input checked="" type="checkbox"/> N | N/A      | HCHS20180000011<br>(3a.) NH<br>All officers included | 2/1/2018                | 2/1/2019                | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                                |
| D        | Blanket Crime  |  |          | BDV1945863   | 3/27/2018               | 3/27/2019               | Limit 500,000  |
| E        | Professional/Malpractice   |  |          | HN020794   | 12/30/2017              | 12/30/2018              | Limit: 1,000,000 / 3,000,000   |

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

|   |  |
|---|--|
| CERTIFICATE HOLDER<br><br>NH Dept. of Health & Human Services<br>129 Pleasant Street<br>Concord, NH 03301 | CANCELLATION<br>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<br>T Franggos/JSC <i>Jali Ph...</i>  |

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Phone (603) 225-3295  
 (800) 856-5525  
 Fax (603) 228-1898  
 Web www.bm-cap.org



BELKNAP-MERRIMACK COUNTIES, INC.  
 EMPOWERING COMMUNITIES SINCE 1965

2 Industrial Park Drive  
 P.O. Box 1016  
 Concord, NH  
 03302-1016

**COMMUNITY ACTION PROGRAM  
 BELKNAP-MERRIMACK COUNTIES, INC.**

**STATEMENT OF PURPOSE**

The purpose the corporation includes providing assistance for the reduction of poverty, the revitalization of low-income communities, and the empowerment of low-income families and individuals to become fully self-sufficient through planning and coordinating the use of a broad range of federal, state, local, and other assistance (including private resources) related to the elimination of poverty; the organization of a range of services related to the needs of low-income families and individuals, so that these services may have a measurable and potentially major impact on the causes of poverty and may help the families and individuals to achieve self-sufficiency; the maximum participation of residents of the low-income communities and members of the groups served to empower such residents and members to respond to the unique problems and needs within their communities; and to secure a more active role in the provision of services for private, religious, charitable, and neighborhood-based organizations, individual citizens, and business, labor, and professional groups, who are able to influence the quantity and quality of opportunities and services for the poor.

(Approved by Agency Board of Directors on 02/24/05  
 as part of the Agency Bylaws.)

CAPBMCI Statement of Purpose

|  |   |  |  |  |  |  |   |  |  |  |   |
|--|---|--|--|--|--|--|---|--|--|--|---|
| <b>ALTON</b><br>Senior Center..... 875-7102<br>Prospect View Housing..... 875-3111 | <b>CONCORD</b><br>Area Center..... 225-6880<br>Head Start..... 224-6492<br>Early Head Start..... 224-6492<br>Concord Area<br>Meals on Wheels..... 225-9092<br>Concord Area Transit..... 225-1989<br>Horseshoe Pond Place..... 228-6956<br>WIC/CSFP..... 225-2050<br>Workplace Success..... 223-2305 | <b>EPSOM</b><br>Meadow Brook Housing..... 736-8250 | <b>FRANKLIN</b><br>Area Center..... 934-3444<br>Head Start..... 934-2161<br>Early Head Start..... 934-2161<br>Senior Center..... 934-4151<br>Riverside Housing..... 934-5340 | <b>LACONIA</b><br>Area Center..... 524-5512<br>Head Start..... 528-5334<br>Early Head Start..... 528-5334<br>Senior Center..... 524-7689<br>Family Planning..... 524-5453<br>Workplace Success..... 524-4367 | <b>MEREDITH</b><br>Area Center..... 279-4096 | <b>NEWBURY</b><br>Newbury Commons<br>Housing..... 763-0360 | <b>PEMBROKE</b><br>Village at Pembroke Farms<br>Housing..... 485-1842 | <b>PITTSFIELD</b><br>Senior Center..... 435-8482<br>Head Start..... 435-6618 | <b>SUNCOOK</b><br>Area Center..... 485-7824<br>Senior Center..... 485-4254 | <b>TILTON</b><br>Senior Center..... 527-8291 | <b>WARNER</b><br>Area Center..... 456-2207<br>Head Start..... 456-2208<br>North Ridge Housing..... 456-3398 |
|--|---|--|--|--|--|--|---|--|--|--|---|

*Financial Statements*

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**COMMUNITY ACTION PROGRAM BELKNAP-  
MERRIMACK COUNTIES, INC.**

**FINANCIAL STATEMENTS  
FOR THE YEARS ENDED FEBRUARY 28, 2017 AND FEBRUARY 29, 2016  
AND  
INDEPENDENT AUDITORS' REPORT**



**COMMUNITY ACTION PROGRAM BELKNAP – MERRIMACK COUNTIES, INC.**

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**FINANCIAL STATEMENTS**

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To the Board of Directors  
Community Action Program Belknap-Merrimack Counties, Inc.  
Concord, New Hampshire

## **INDEPENDENT AUDITORS' REPORT**

### **Report on the Financial Statements**

We have audited the accompanying financial statements of Community Action Program Belknap-Merrimack Counties, Inc. (a nonprofit organization), which comprise the statements of financial position as of February 28, 2017 and February 29, 2016, and the related statements of cash flows, and notes to the financial statements for the years then ended, and the related statements of activities and functional expenses for the year ended February 28, 2017.

### **Management's Responsibility for the Financial Statements**

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

### **Auditors' Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Community Action Program Belknap-Merrimack Counties, Inc. as of February 28, 2017 and February 29, 2016, and the changes in their net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

**Report on Summarized Comparative Information**

We have previously audited Community Action Program Belknap-Merrimack Counties, Inc.'s 2016 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated October 25, 2016. In our opinion, the summarized comparative information presented herein as of and for the year ended February 29, 2016, is consistent, in all material respects, with the audited financial statements from which it has been derived.

**Other Information**

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards*, the schedule of revenues and expenditures, and the schedule of refundable advances are presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

**Other Reporting Required by Government Auditing Standards**

In accordance with *Government Auditing Standards*, we have also issued our report dated October 30, 2017, on our consideration of Community Action Program Belknap-Merrimack Counties, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Community Action Program Belknap-Merrimack Counties, Inc.'s internal control over financial reporting and compliance.

*Leone McDonnell & Roberts  
Professional Association*

Concord, New Hampshire  
October 30, 2017

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**STATEMENTS OF FINANCIAL POSITION  
FEBRUARY 28, 2017 AND FEBRUARY 29, 2016**

|   | <u>2017</u>                | <u>2016</u>                |
|---|----------------------------|----------------------------|
| <b>ASSETS</b>                                   |                            |                            |
| <b>CURRENT ASSETS</b>                           |                            |                            |
| Cash  | \$ 1,732,344               | \$ 1,123,997               |
| Accounts receivable                             | 2,161,972                  | 2,643,755                  |
| Inventory                                       | 21,530                     | 29,923                     |
| Prepaid expenses                                | 94,315                     | 100,924                    |
| Investments                                     | 85,225                     | 72,306                     |
| Total current assets                            | <u>4,095,386</u>           | <u>3,970,905</u>           |
| <b>PROPERTY</b>                                 |                            |                            |
| Land, buildings and improvements                | 4,618,289                  | 4,618,289                  |
| Equipment, furniture and vehicles               | 5,838,444                  | 5,942,708                  |
| Total property                                  | 10,456,733                 | 10,560,997                 |
| Less accumulated depreciation                   | <u>6,818,622</u>           | <u>6,824,303</u>           |
| Property, net                                   | <u>3,638,111</u>           | <u>3,736,694</u>           |
| <b>OTHER ASSETS</b>                             |                            |                            |
| Due from related party                          | 139,441                    | 139,441                    |
| Total other assets                              | <u>139,441</u>             | <u>139,441</u>             |
| <b>TOTAL ASSETS</b>                             | <b><u>\$ 7,872,938</u></b> | <b><u>\$ 7,847,040</u></b> |
| <b><u>LIABILITIES AND NET ASSETS</u></b>        |                            |                            |
| <b>CURRENT LIABILITIES</b>                      |                            |                            |
| Current portion of notes payable                | \$ 163,753                 | \$ 154,380                 |
| Accounts payable                                | 847,707                    | 1,182,814                  |
| Accrued expenses                                | 1,019,426                  | 973,874                    |
| Refundable advances                             | 1,159,331                  | 1,122,035                  |
| Total current liabilities                       | 3,190,217                  | 3,432,903                  |
| <b>LONG TERM LIABILITIES</b>                    |                            |                            |
| Notes payable, less current portion shown above | <u>1,151,156</u>           | <u>1,312,780</u>           |
| Total liabilities                               | <u>4,341,373</u>           | <u>4,745,683</u>           |
| <b>NET ASSETS</b>                               |                            |                            |
| Unrestricted                                    | 2,887,454                  | 2,485,093                  |
| Temporarily restricted                          | 644,111                    | 616,264                    |
| Total net assets                                | <u>3,531,565</u>           | <u>3,101,357</u>           |
| <b>TOTAL LIABILITIES AND NET ASSETS</b>         | <b><u>\$ 7,872,938</u></b> | <b><u>\$ 7,847,040</u></b> |

See Notes to Financial Statements

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**STATEMENT OF ACTIVITIES  
FOR THE YEAR ENDED FEBRUARY 28, 2017  
WITH COMPARATIVE TOTALS FOR THE YEAR ENDED FEBRUARY 29, 2016**

|  | <u>Unrestricted</u> | <u>Temporarily<br/>Restricted</u> | <u>2017<br/>Total</u> | <u>2016<br/>Total</u> |
|--|---------------------|-----------------------------------|-----------------------|-----------------------|
| <b>REVENUES AND OTHER SUPPORT</b>                |                     |                                   |                       |                       |
| Grant awards                                     | \$ 15,822,185       |                                   | \$ 15,822,185         | \$ 16,076,420         |
| Other funds                                      | 2,384,071           | \$ 2,441,769                      | 4,825,840             | 4,822,670             |
| In-kind  | 1,100,528           |                                   | 1,100,528             | 906,423               |
| United Way                                       | 43,751              |                                   | 43,751                | 33,840                |
| Realized gain (loss) on sale of equipment        | 20,250              |                                   | 20,250                | (164)                 |
| Total revenues and other support                 | 19,370,785          | 2,441,769                         | 21,812,554            | 21,839,189            |
| <b>NET ASSETS RELEASED FROM<br/>RESTRICTIONS</b> |                     |                                   |                       |                       |
|  | 2,413,922           | (2,413,922)                       |                       |                       |
| Total  | 21,784,707          | 27,847                            | 21,812,554            | 21,839,189            |
| <b>EXPENSES</b>                                  |                     |                                   |                       |                       |
| Salaries and wages                               | 7,973,527           |                                   | 7,973,527             | 8,035,121             |
| Payroll taxes and benefits                       | 1,997,820           |                                   | 1,997,820             | 2,120,907             |
| Travel   | 277,832             |                                   | 277,832               | 289,250               |
| Occupancy  | 1,134,026           |                                   | 1,134,026             | 1,024,305             |
| Program services                                 | 7,104,507           |                                   | 7,104,507             | 7,324,464             |
| Other costs                                      | 1,568,475           |                                   | 1,568,475             | 1,590,710             |
| Depreciation                                     | 225,631             |                                   | 225,631               | 314,017               |
| In-kind  | 1,100,528           |                                   | 1,100,528             | 906,423               |
| Total expenses                                   | 21,382,346          |                                   | 21,382,346            | 21,605,197            |
| <b>CHANGE IN NET ASSETS</b>                      | 402,361             | 27,847                            | 430,208               | 233,992               |
| <b>NET ASSETS, BEGINNING OF YEAR</b>             | 2,485,093           | 616,264                           | 3,101,357             | 2,867,365             |
| <b>NET ASSETS, END OF YEAR</b>                   | <u>\$ 2,887,454</u> | <u>\$ 644,111</u>                 | <u>\$ 3,531,565</u>   | <u>\$ 3,101,357</u>   |

See Notes to Financial Statements

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**STATEMENTS OF CASH FLOWS**  
**FOR THE YEARS ENDED FEBRUARY 28, 2017 AND FEBRUARY 29, 2016**

|   | <u>2017</u>         | <u>2016</u>         |
|---|---------------------|---------------------|
| <b>CASH FLOWS FROM OPERATING ACTIVITIES</b>   |                     |                     |
| Change in net assets  | \$ 430,208          | \$ 233,992          |
| Adjustments to reconcile change in net assets to net cash provided by operating activities: |                     |                     |
| Depreciation  | 225,631             | 314,017             |
| (Gain) loss on sale of property   | (20,250)            | 164                 |
| Decrease in current assets:   |                     |                     |
| Accounts receivable   | 481,783             | 261,265             |
| Inventory   | 8,393               | 3,519               |
| Prepaid expenses  | 6,609               | 87,622              |
| (Decrease) increase in current liabilities:   |                     |                     |
| Accounts payable  | (335,107)           | (446,853)           |
| Accrued expenses  | 45,752              | (19,379)            |
| Refundable advances   | 37,296              | 205,532             |
| <b>NET CASH PROVIDED BY OPERATING ACTIVITIES</b>  | <u>880,315</u>      | <u>639,879</u>      |
| <b>CASH FLOWS FROM INVESTING ACTIVITIES</b>   |                     |                     |
| Additions to property   | (127,048)           | (34,749)            |
| Investment in partnership   | (12,919)            | (1,409)             |
| Proceeds from sale of property  | 20,250              | -                   |
| <b>NET CASH USED IN INVESTING ACTIVITIES</b>  | <u>(119,717)</u>    | <u>(36,158)</u>     |
| <b>CASH FLOWS FROM FINANCING ACTIVITIES</b>   |                     |                     |
| Repayment of long term debt   | (152,251)           | (143,670)           |
| <b>NET CASH USED IN FINANCING ACTIVITIES</b>  | <u>(152,251)</u>    | <u>(143,670)</u>    |
| <b>NET INCREASE IN CASH</b>   | 608,347             | 460,051             |
| <b>CASH BALANCE, BEGINNING OF YEAR</b>  | <u>1,123,997</u>    | <u>663,946</u>      |
| <b>CASH BALANCE, END OF YEAR</b>  | <u>\$ 1,732,344</u> | <u>\$ 1,123,997</u> |
| <b>SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION:</b>                                    |                     |                     |
| Cash paid during the year for interest  | <u>\$ 109,150</u>   | <u>\$ 121,170</u>   |

See Notes to Financial Statements

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**STATEMENT OF FUNCTIONAL EXPENSES  
FOR THE YEAR ENDED FEBRUARY 28, 2017  
WITH COMPARATIVE TOTALS FOR THE YEAR ENDED FEBRUARY 29, 2016**

|                                       | <u>Program</u>       | <u>Management</u> | <u>2017<br/>Total</u> | <u>2016<br/>Total</u> |
|---------------------------------------|----------------------|-------------------|-----------------------|-----------------------|
| Salaries and wages                    | \$ 7,698,893         | \$ 274,634        | \$ 7,973,527          | \$ 8,035,121          |
| Payroll taxes and benefits            | 1,876,786            | 121,034           | 1,997,820             | 2,120,907             |
| Travel                                | 276,033              | 1,799             | 277,832               | 289,250               |
| Occupancy                             | 1,018,340            | 115,686           | 1,134,026             | 1,024,305             |
| Program Services                      | 7,104,507            | -                 | 7,104,507             | 7,324,464             |
| Other costs:                          |                      |                   |                       |                       |
| Accounting fees                       | 9,371                | 39,517            | 48,888                | 47,150                |
| Legal fees                            | 45,214               | 233               | 45,447                | 17,957                |
| Supplies                              | 226,486              | 32,705            | 259,191               | 259,621               |
| Postage and shipping                  | 53,947               | 1,153             | 55,100                | 58,272                |
| Equipment rental and maintenance      | 5,118                | 385               | 5,503                 | 3,525                 |
| Printing and publications             | 4,278                | 9,689             | 13,967                | 2,757                 |
| Conferences, conventions and meetings | 15,331               | 12,297            | 27,628                | 30,932                |
| Interest                              | 103,199              | 5,951             | 109,150               | 121,170               |
| Insurance                             | 118,050              | 39,980            | 158,030               | 193,894               |
| Membership fees                       | 12,119               | 7,553             | 19,672                | 30,505                |
| Utility and maintenance               | 67,380               | 56,036            | 123,416               | 140,087               |
| Computer services                     | 10,611               | 26,067            | 36,678                | 38,069                |
| Other                                 | 646,214              | 19,591            | 665,805               | 646,771               |
| Depreciation<br>In kind               | 220,884<br>1,100,528 | 4,747<br>-        | 225,631<br>1,100,528  | 314,017<br>906,423    |
| Total functional expenses             | <u>\$ 20,613,289</u> | <u>\$ 769,057</u> | <u>\$ 21,382,346</u>  | <u>\$ 21,605,197</u>  |

See Notes to Financial Statements

**COMMUNITY ACTION PROGRAM BELKNAP – MERRIMACK COUNTIES, INC.**

**NOTES TO FINANCIAL STATEMENTS  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

**1. ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**Nature of Organization**

Community Action Program Belknap – Merrimack Counties, Inc. (the Organization) is a New Hampshire nonprofit organization that serves nutritional, health, living and support needs of the low income and elderly clients in the two county service areas, as well as state wide. These services are provided with the financial support of various federal, state, county and local organizations.

**Basis of Accounting**

The financial statements are prepared on the accrual basis of accounting in accordance with Generally Accepted Accounting Principles (GAAP) of the United States.

**Financial Statement Presentation**

Financial statement presentation follows the recommendations of the FASB in its Accounting Standard Codification No. 958 *Financial Statements of Not-For-Profit Organizations*. Under FASB ASC No. 958, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. The classes of net assets are determined by the presence or absence of donor restrictions. As of February 28, 2017 the Organization had no permanently restricted net assets and had temporarily restricted net assets of \$644,111.

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended February 29, 2016, from which the summarized information was derived.

**Income Taxes**

The Organization is organized as a nonprofit corporation and is exempt from federal income taxes under Internal Revenue Code Section 501(c)(3). The Internal Revenue Service has determined them to be other than a private foundation.

The Organization files information returns in the United States and the State of New Hampshire. The Organization is no longer subject to examinations by tax authorities for years before 2013.



Accounting Standard Codification No. 740 (ASC 740), *Accounting for Income Taxes*, established the minimum threshold for recognizing, and a system for measuring, the benefits of tax return positions in financial statements. The Organization has analyzed its tax position taken on its information returns for the years (2013 through 2016), and has concluded that no additional provision for income taxes is necessary in the Organization's financial statements.

### **Property**

Property and equipment is recorded at cost or, if donated, at the approximate fair value at the date of the donation. Assets purchased with a useful life in excess of one year and exceeding \$5,000 are capitalized unless a lower threshold is required by certain funding sources. Depreciation is computed on the straight-line basis over the estimated useful lives of the related assets as follows:

|                                   |             |
|-----------------------------------|-------------|
| Buildings and improvements        | 40 years    |
| Equipment, furniture and vehicles | 3 - 7 years |

### **Use of Estimates**

The preparation of financial statements in conformity with United States generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### **Cash and Cash Equivalents**

For purposes of the statement of cash flows, the Organization considers all liquid investments purchased with original maturities of three months or less to be cash equivalents. The Organization maintains its cash in bank deposit accounts, which at times may exceed federally insured limits. The Organization has not experienced any losses in such accounts and believes it is not exposed to any significant risk with respect to these accounts.

### **Contributions**

All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are restricted by the donor for future periods or for specific purposes are reported as temporarily restricted or permanently restricted support, depending on the nature of the restriction. However, if a restriction is fulfilled in the same period in which the contribution is received, the Organization reports the support as unrestricted.

### **Contributed Services**

Donated services are recognized as contributions in accordance with FASB ASC No. 958, *Accounting for Contributions Received and Contributions Made*, if the services (a) create or enhance non-financial assets or (b) require specialized skills, and would otherwise be purchased by the Agency.

Volunteers provided various services throughout the year that are not recognized as contributions in the financial statements since the recognition criteria under FASB ASC No. 958 were not met.

### **In-Kind Donations / Noncash Transactions**

Donated facilities, services and supplies are reflected as revenue and expense in the accompanying financial statements, if the criteria for recognition is met. This represents the estimated fair value for the service, supplies and space that the Organization might incur under normal operating activities. The Organization received \$1,100,528 in donated facilities, services and supplies for the year ended February 28, 2017 as follows:

The Organization receives contributed professional services that are required to be recorded in accordance with FASB ASC No. 958. The estimated fair value of these services was determined to be \$200,362 for the year ended February 28, 2017.

The Organization also receives contributed food commodities and other goods that are required to be recorded in accordance with FASB ASC No. 958. The estimated fair value of these food commodities and goods was determined to be \$898,566 for the year ended February 28, 2017.

The Agency pays below-market rent for the use of certain facilities. In accordance with generally accepted accounting principles, the difference between amounts paid for the use of the facilities and the fair market value of the rental space has been recorded as an in-kind donation and as an in-kind expense in the accompanying financial statements. The estimated fair value of the donation was determined to be \$1,600 for the year ended February 28, 2017.

### **Advertising**

The Organization expenses advertising costs as they are incurred. Total advertising costs for the year ended February 28, 2017 amounted to \$46,709.

## **2. ACCOUNTS RECEIVABLE**

Accounts receivable are stated at the amount management expects to collect from balances outstanding at year end. Balances that are still outstanding after management has used reasonable collection efforts are written off through a charge to the valuation allowance and a credit to accounts receivable. The allowance for uncollectible accounts was estimated to be zero at February 28, 2017. The Organization has no policy for charging interest on overdue accounts.

## **3. REFUNDABLE ADVANCES**

Grants received in advance are recorded as refundable advances and recognized as revenue in the period in which the related services or expenditures are performed or incurred. Funds received in advance of grantor conditions being met aggregated \$1,159,331 as of February 28, 2017.

## **4. RETIREMENT PLAN**

The Organization has a qualified contributory pension plan which covers substantially all employees. The cost of the plan is charged to programs administered by the Organization. The expense of the plan for the year ended February 28, 2017 totaled \$207,607.

5. **LEASED FACILITIES**

Facilities occupied by the Organization for its community service programs are leased under various operating leases. The lease terms range from month to month to twenty years. For the year ended February 28, 2017, the annual lease expense for the leased facilities was \$464,831.

The approximate future minimum lease payments on the above leases are as follows:

| <u>Year Ended<br/>February 28</u> | <u>Amount</u>       |
|-----------------------------------|---------------------|
| 2018                              | \$ 336,450          |
| 2019                              | 107,326             |
| 2020                              | 94,916              |
| 2021                              | 88,762              |
| 2022                              | 88,762              |
| Thereafter                        | <u>1,142,527</u>    |
| Total                             | <u>\$ 1,858,743</u> |

6. **ACCRUED EARNED TIME**

The Organization has accrued a liability for future annual leave time that its employees have earned and vested with the employees in the amount of \$403,742 at February 28, 2017.

7. **BANK LINE OF CREDIT**

The Organization has a \$200,000 revolving line of credit agreement (the line) with a bank that is due on demand. The line calls for monthly variable interest payments based on the Wall Street Journal Prime Rate (3.75% for the year ended February 28, 2017) plus 1%, but not less than 6% per annum. The line is secured by all the Organization's assets. There was no outstanding balance on the line at February 28, 2017.

8. **LONG TERM DEBT**

Long term debt consisted of the following as of February 28, 2017:

5.75% note payable to a financial institution in monthly installments for principal and interest of \$12,373 through July, 2023. The note is secured by property of the Organization for Lakes Region Family Center. \$ 891,657

3% note payable to the City of Concord for leasehold improvements in monthly installments for principal and interest of \$747 through May, 2027. The note is secured by property of the Organization for the agency administrative building renovations. 78,987

Note payable to a bank in monthly installments for principal and interest of \$4,842 through May, 2023. Interest is stated at 1% above the prime rate as published by the Wall Street Journal, which resulted in an interest rate of 4.75% at February 28, 2017. The note is secured by a first real estate mortgage and assignment of rents and leases on property located in Concord, New Hampshire for Early Head Start.

325,825

4.75% note payable to Rural Development in monthly installments for principal and interest of \$148 per month through June, 2031. The note is secured by property of the Organization for the Franklin Community Services building.

18,440

Total 1,314,909

Less amounts due within one year 163,753

Long term portion \$ 1,151,156

The scheduled maturities of long term debt as of February 28, 2017 were as follows:

| <u>Year Ending<br/>February 28</u> | <u>Amount</u>       |
|------------------------------------|---------------------|
| 2018                               | \$ 163,753          |
| 2019                               | 173,709             |
| 2020                               | 184,280             |
| 2021                               | 195,505             |
| 2022                               | 207,428             |
| Thereafter                         | <u>390,234</u>      |
|                                    | <u>\$ 1,314,909</u> |

9. **PROPERTY AND EQUIPMENT**

Property and equipment consisted of the following as of February 29, 2017:

|                               |                     |
|-------------------------------|---------------------|
| Land                          | \$ 168,676          |
| Building and improvements     | 4,449,613           |
| Equipment and vehicles        | <u>5,838,444</u>    |
|                               | 10,456,733          |
| Less accumulated depreciation | <u>6,818,622</u>    |
| Property and equipment, net   | <u>\$ 3,638,111</u> |

Depreciation expense for the year ended February 28, 2017 was \$225,631.

10. **CONTINGENCIES**

The Organization receives grant funding from various sources. Under the terms of these agreements, the Organization is required to use the funds within a certain period and for purposes specified by the governing laws and regulations. If expenditures were found not to have been made in compliance with the laws and regulations, the Organization might be required to repay the funds. No provisions have been made for this contingency because specific amounts, if any, have not been determined or assessed as of February 28, 2017. Monitoring has not indicated any discrepancies.

11. **CONCENTRATION OF RISK**

For the year ended February 28, 2017, approximately \$9,500,000 (44%) of the Organization's total revenue was received from the Department of Health and Human Services. The future scale and nature of the Organization is dependent upon continued support from this department.

12. **TEMPORARILY RESTRICTED NET ASSETS**

At February 28, 2017, temporarily restricted net assets consisted of the following unexpended, purpose restricted donations:

**Restricted Purpose**

|                                     |    |                |
|-------------------------------------|----|----------------|
| Senior Center                       | \$ | 128,333        |
| Elder Services                      |    | 297,725        |
| NH Charitable Foundation, Mary Gale |    | 22,064         |
| NH Rotary Food Challenge            |    | 5,067          |
| Common Pantry                       |    | 6,472          |
| Community Crisis                    |    | 3,578          |
| Caring Fund                         |    | 16,090         |
| Agency-FAP                          |    | 12,793         |
| Agency-H/S                          |    | 149,305        |
| FGP/SCP Assoc. Region 1             |    | 157            |
| Agency-WIC/CSFP                     |    | 1,864          |
| Other Programs                      |    | 663            |
|                                     | \$ | <u>644,111</u> |

13. **RELATED PARTY TRANSACTIONS**

The Organization is related to the following corporation as a result of common management:

**Related Party**

**Function**

CAPBMC Development Corporation

Real Estate Development

There was \$139,441 due from CAPBMC Development Corporation at February 28, 2017.

The Organization serves as the management agent for the following organizations:

| <u>Related Party</u>                   | <u>Function</u>                        |
|--|--|
| Belmont Elderly Housing, Inc.          | HUD Property                           |
| Epsom Elderly Housing, Inc.            | HUD Property                           |
| Alton Housing for the Elderly, Inc.    | HUD Property                           |
| Pembroke Housing for the Elderly, Inc. | HUD Property                           |
| Newbury Elderly Housing, Inc.          | HUD Property                           |
| Kearsarge Elderly Housing, Inc.        | HUD Property                           |
| Riverside Housing Corporation          | HUD Property                           |
| Sandy Ledge Limited Partnership        | Low Income Housing Tax Credit Property |
| Twin Rivers Community Corporation      | Property Development                   |
| Ozanam Place, Inc.                     | Transitional Supportive Services       |
| TRCC Housing Limited Partnership I     | Low Income Housing Tax Credit Property |

The services performed by the Organization included, marketing, accounting, tenant selection (for the HUD properties), HUD compliance (for the HUD properties), and maintenance of property.

The total amount due from the related parties (collectively) at February 28, 2017 was \$88,933 and is included in accounts receivables.

**14. RECLASSIFICATION**

Certain amounts and accounts from the prior year financial statements have been reclassified to enhance the comparability with the presentation of the current year.

**15. FAIR VALUE OF FINANCIAL INSTRUMENTS**

Community Action Program Belknap-Merrimack Counties, Inc. has also invested money relating to its Fix-it program in certain mutual funds. The fair value of the mutual funds totaled \$84,225 at February 28, 2017.

ASC Topic No. 825-10, Financial Instruments, provides a definition of fair value which focuses on an exit price rather than an entry price, establishes a framework in generally accepted accounting principles for measuring fair value which emphasizes that fair value is a market-based measurement, not an entity-specific measurement, and requires expanded disclosures about fair value measurements. In accordance with FASB ASC 820, the Organization may use valuation techniques consistent with market, income and cost approaches to measure fair value. As a basis for considering market participant assumptions in fair value measurements, FASB ASC 820 establishes a fair value hierarchy, which prioritizes the inputs used in measuring fair values. The hierarchy gives the highest priority to Level 1 measurements and the lowest priority to Level 3 measurements. The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 - Inputs to the valuation methodology are quoted prices available in active markets for identical investments as of the reporting date.

Level 2 - Inputs to the valuation methodology are other than quoted market prices in active markets, which are either directly or indirectly observable as of the reporting date, and fair value can be determined through the use of models or other valuation methodologies.

Level 3 - Inputs to the valuation methodology are unobservable inputs in situations where there is little or no market activity for the asset or liability and the reporting entity makes estimates and assumptions related to the pricing of the asset or liability including assumptions regarding risk.

At February 28, 2017, the Organization's investments were classified as Level 1 and were based on fair value.

Fair Value Measurements using Significant Observable Inputs (Level 1)

|   |                  |
|---|------------------|
| Beginning balance – mutual funds            | \$ 72,306        |
| Total gains (losses) - realized /unrealized | 11,443           |
| Purchases                                   | <u>476</u>       |
| Ending Balance – mutual funds               | <u>\$ 84,225</u> |

The carrying amount of cash, current assets, other assets and current liabilities, approximates fair value because of the short maturity of those instruments.

The Organization invested \$1,000 during the year ended February 28, 2017 in a Partnership, The Lakes Region Partnership for Public Health.

**16. FISCAL AGENT**

Community Action Program Belknap-Merrimack Counties, Inc. acts as the fiscal agent for the following community organizations: Franklin Community Services Building (Franklin), the Common Pantry (Laconia), the Caring Fund (Meredith), the NH Food Pantry Coalition, the NH Rotary Food Challenge and FGP/SCP Association Region 1. The Agency provides the management and oversight of the revenues received (donations) and the expenses (utilities, food and emergency services).

**17. SUBSEQUENT EVENTS**

Subsequent events are events or transactions that occur after the statement of financial position date, but before the financial statements are available to be issued. Recognized subsequent events are events or transactions that provide additional evidence about conditions that existed at the statement of financial position date, including the estimates inherent in the process of preparing financial statements. Nonrecognized subsequent events are events that provide evidence about conditions that did not exist at the statement of financial position date, but arose after that date. Management has evaluated subsequent events through October 30, 2017, the date the financial statements were available to be issued.

**SUPPLEMENTAL INFORMATION**

**(See Independent Auditors' Report)**



COMMUNITY ACTION PROGRAM MERKAP, MERRIMACK COUNTIES, INC.

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
FOR THE YEAR ENDED FEBRUARY 29, 2011

| FEDERAL GRANTOR<br>PROGRAM TITLE  | CFDA<br>NUMBER | PASS THROUGH NAME                                   | IDENTIFYING NUMBER              | EXPENDITURES | PASSED THROUGH<br>TO SUB-RECIPIENTS |
|---|----------------|---|---------------------------------|--------------|-------------------------------------|
| <b>US DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>                       |                |   |                                 |              |                                     |
| Head Start  | 93.600         |   | 01CH2002-03-01                  | \$ 3,619,459 |                                     |
| Low Income Home Energy Assistance Program                               | 93.668         | State of New Hampshire                              | 17B1NHLEA                       | 3,340,799    |                                     |
| Low Income Home Energy Assistance Program-WX                            | 93.668         | State of New Hampshire                              | O-17B1NHLEA                     | 48,248       |                                     |
| Low Income Home Energy Assistance Program-HRRP                          | 93.668         | State of New Hampshire                              | O-16B1NHLEA                     | 97,640       |                                     |
|   |                |   | TOTAL                           | 3,486,684    |                                     |
| Community Services Block Grant  | 93.689         | State of New Hampshire                              | O-16B1NHCOBR                    | 369,818      |                                     |
| Social Services Block Grant-Home Delivered & Congregate                 | 93.867         | State of New Hampshire                              | 06-65-48-481010-8265            | 271,378      |                                     |
| Social Services Block Grant-Service Link                                | 93.867         | State of New Hampshire                              | 90AM221202                      | 67,873       |                                     |
|   |                |   | TOTAL                           | 329,691      |                                     |
| <b>TANF CLUSTER</b>   |                |   |                                 |              |                                     |
| Temporary Assistance for Needy Families-Family Planning                 | 93.658         | State of New Hampshire                              | 1602NH-TANF                     | 21,825       |                                     |
| Temporary Assistance for Needy Families-Workforce Success               | 93.658         | Southern New Hampshire Services                     | 06-96-48-480010-61270000        | 182,036      |                                     |
|   |                |   | CLUSTER TOTAL                   | 203,861      |                                     |
| <b>AGING CLUSTER</b>  |                |   |                                 |              |                                     |
| Title II, Part B-Senior Transportation                                  | 93.044         | State of New Hampshire                              | 17AAN-IT388                     | 112,235      |                                     |
| Title II, Part B-REAS   | 93.044         | State of New Hampshire                              | 17AAN-IT38P                     | 924          |                                     |
| Title II, Part C-Congregate Meals                                       | 93.045         | State of New Hampshire                              | 17AAN-IT3CM                     | 180,121      |                                     |
| Title II, Part C-Home Delivered   | 93.045         | State of New Hampshire                              | 17AAN-IT3HD                     | 362,990      |                                     |
| NBIF  | 93.063         | State of New Hampshire                              | 1056477                         | 214,890      |                                     |
|   |                |   | CLUSTER TOTAL                   | 871,310      |                                     |
| <b>CHILD CARE AND DEVELOPMENT FUND CLUSTER</b>                          |                |   |                                 |              |                                     |
| Child Care & Development Block Grant                                    | 93.575         | State of New Hampshire                              |                                 | 73,939       |                                     |
| Child Care Mandatory & Matching Funds of the CCDF                       | 93.590         | State of New Hampshire                              |                                 | 89,859       |                                     |
|   |                |   | CLUSTER TOTAL                   | 160,598      |                                     |
| <b>MEDICAID CLUSTER</b>   |                |   |                                 |              |                                     |
| Medical Assistance Program-Service Link                                 | 93.778         | State of New Hampshire                              | 90NHYPG0008-01-00               | 8,717        |                                     |
| Medical Assistance Program-Veterans Independent Program                 | 93.778         | Gateways Community Services                         |                                 | 18,949       |                                     |
| Medical Assistance Program-Veterans Program                             | 93.778         | Easter Seal of NH, Inc.                             |                                 | 8,784        |                                     |
|   |                |   | CLUSTER TOTAL                   | 34,460       |                                     |
| Family Planning - Services  | 93.217         | State of New Hampshire                              | FPHFA018063                     | 99,536       |                                     |
| HIV Preventative Activities - Health Dept. Based-Family Planning        | 93.940         | State of New Hampshire                              | US2P8003855                     | 5,383        |                                     |
| ACA - Maternal, Infant, & Early Childhood Home Visiting Program         | 93.205         | State of New Hampshire                              | 05-65-80-802010-0631            | 95,168       |                                     |
| Maternal & Child Health Services Block Grant to the States              | 93.984         | State of New Hampshire                              | 804MC28113                      | 21,618       |                                     |
| State Health Insurance Assistance Program-Service Link                  | 93.324         | State of New Hampshire                              | 90BA0003-02-00                  | 22,121       |                                     |
| National Family Caregiver Support, Title III, Part E-Service Link       | 93.052         | State of New Hampshire                              | 17AAN-IT3FC                     | 32,295       |                                     |
| Special Programs for Aging, Title IV-Service Link                       | 93.048         | State of New Hampshire                              | 90AMP024102                     | 79,488       |                                     |
| CMS Research Demonstrations & Evaluations                               | 93.779         | State of New Hampshire                              | 90BA0003-02-00                  | 1,346        |                                     |
| Medicare Enrollment Assistance Program                                  | 93.071         | State of New Hampshire                              | 14AAN-IMADR                     | 22,189       |                                     |
|   |                |   | HHS TOTAL                       | \$ 9,453,998 |                                     |
| <b>US DEPARTMENT OF AGRICULTURE</b>                                     |                |   |                                 |              |                                     |
| Special Suppl. Nutrition Program for Women, Infants & Children          | 10.557         | State of New Hampshire                              | 15154NH703W1003                 | 688,034      |                                     |
| Special Suppl. Nutrition Program for Women, Infants & Children          | 10.557         | State of New Hampshire                              | 15154NH743W5000                 | 26,400       |                                     |
|   |                |   | TOTAL                           | 712,434      |                                     |
| Senior Farmers Market   | 10.578         | State of New Hampshire                              | 15154NH063Y8304                 | 8,578        |                                     |
| Senior Farmers Market   | 10.578         | State of New Hampshire                              | 15154NH063Y8300                 | 71,802       |                                     |
|   |                |   | TOTAL                           | 80,381       |                                     |
| Child & Adult Care Food Program   | 10.558         | State of New Hampshire                              | NONE                            | 228,948      |                                     |
| <b>CHILD NUTRITION CLUSTER</b>  |                |   |                                 |              |                                     |
| Summer Food Service Program For Children                                | 10.569         | State of New Hampshire                              | NONE PROVIDED                   | 170,176      |                                     |
| <b>FOOD DISTRIBUTION CLUSTER</b>  |                |   |                                 |              |                                     |
| Commodity Supplemental Food Program                                     | 10.565         | State of New Hampshire                              | 15154NH14Y8005                  | 728,388      | \$ 665,063                          |
| Emergency Food Assistance Program-Administration                        | 10.598         | State of New Hampshire                              | 81750000                        | 184,836      |                                     |
| Emergency Food Assistance Program                                       | 10.598         | State of New Hampshire                              | 81750000                        | 1,872,859    | 1,672,658                           |
|   |                |   | CLUSTER TOTAL                   | 2,566,784    | \$ 2,227,861                        |
| Rural Housing Preservation Grants                                       | 10.433         | Rural Development                                   | 0348-0004                       | 320          |                                     |
|   |                |   | USDA TOTAL                      | \$ 3,787,942 |                                     |
| <b>CORPORATION FOR NATIONAL &amp; COMMUNITY SERVICES</b>                |                |   |                                 |              |                                     |
| <b>FOSTER GRANDPARENTS/SENIOR COMPANION CLUSTER</b>                     |                |   |                                 |              |                                     |
| Senior Companion Program  | 94.018         |   | 189CAN8001                      | \$ 539,872   |                                     |
| <b>US DEPARTMENT OF TRANSPORTATION</b>                                  |                |   |                                 |              |                                     |
| Formula Grants for Rural Areas-Concord Transit                          | 20.509         | State of New Hampshire-Department of Transportation | NH-18-X048                      | 651,303      |                                     |
| Formula Grants for Rural Areas-Windsor/Dorset Transit                   | 20.509         | State of New Hampshire-Department of Transportation | NH-18-X046                      | 59,587       |                                     |
|   |                |   | TOTAL                           | 710,890      |                                     |
| <b>TRANSIT SERVICES PROGRAMS CLUSTER</b>                                |                |   |                                 |              |                                     |
| Enhanced Mobility of Seniors & Ind. W/Disabilities-CAT                  | 20.813         | State of New Hampshire-Department of Transportation | NH-18-X043                      | 23,186       |                                     |
| Enhanced Mobility of Seniors & Ind. W/Disabilities-Rural Transportation | 20.813         | State of New Hampshire-Department of Transportation | NH-18-X043                      | 123,778      |                                     |
| Enhanced Mobility of Seniors & Ind. W/Disabilities-Volunteer Drivers    | 20.813         | Merrimack County                                    | NH-05-X001                      | 71,600       |                                     |
|   |                |   | CLUSTER TOTAL                   | 218,573      |                                     |
|   |                |   | DOT TOTAL                       | \$ 829,463   |                                     |
| <b>US DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT</b>                   |                |   |                                 |              |                                     |
| Supportive Housing Program-Outreach                                     | 14.236         | State of New Hampshire                              | NONE PROVIDED                   | 18,749       |                                     |
| Supportive Housing Program-Homeless                                     | 14.235         | State of New Hampshire                              | NONE PROVIDED                   | 11,438       |                                     |
| Supportive Housing Program  | 14.235         | State of New Hampshire                              | 06-95-42-423010-7927-102-800731 | 88,608       |                                     |
|   |                |   | TOTAL                           | 88,695       |                                     |
| Emergency Solutions Grant   | 14.231         | State of New Hampshire                              | 05-96-42-423010-7927-102-600731 | 14,635       |                                     |

|  |        |                                     |                                 |  |
|--|--------|-------------------------------------|---------------------------------|--|
| Continuum of Care Program                            | 14,287 | State of New Hampshire              | 06-05-42-423010-7827-102-500731 | 54,887                                   |
| Healthy Homes Technical Studies Grants-Radon Program | 14,906 | National Center for Healthy Housing | NCHH-14-1233                    | <u>2,245</u>                             |
|  |        |                                     | HUD TOTAL                       | <u>\$ 160,382</u>                        |
| <b>US DEPARTMENT OF ENERGY</b>                       |        |                                     |                                 |  |
| Weatherization Assistance for Low Income Persons     | 51,042 | State of New Hampshire              | EE0000189                       | <u>\$ 168,100</u>                        |
| <b>US DEPARTMENT OF LABOR</b>                        |        |                                     |                                 |  |
| Senior Community Service Employment Program          | 17,235 | State of New Hampshire              | 1044701                         | 471,106                                  |
| <b>WIA/WIOA CLUSTER</b>                              |        |                                     |                                 |  |
| WIA/WIOA - Adult Program                             | 17,258 | Southern New Hampshire Services     | 0510-53360000-102-500731        | 81,977                                   |
| WIA/WIOA - Dislocated Worker Formula Grants          | 17,278 | Southern New Hampshire Services     | 0510-53360000-102-500731        | <u>89,104</u>                            |
|  |        |                                     | CLUSTER TOTAL                   | <u>120,081</u>                           |
|  |        |                                     | DOL TOTAL                       | <u>\$ 899,187</u>                        |
|  |        |                                     | TOTAL                           | <u>\$ 16,332,722</u> <u>\$ 2,227,681</u> |

**COMMUNITY ACTION PROGRAM BELKNAP-MERRIMACK COUNTIES, INC.**

**NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

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**NOTE 1 BASIS OF PRESENTATION**

The accompanying schedule of expenditures of Federal Awards (the Schedule) includes the federal award activity of Community Action Program Belknap-Merrimack Counties, Inc. under programs of the federal government for the year ended February 28, 2017. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of Community Action Program Belknap-Merrimack Counties, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Organization.

**NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years.

**NOTE 3 INDIRECT COST RATE**

Community Action Program Belknap-Merrimack Counties, Inc. has elected not to use the ten percent de minimis indirect cost rate allowed under the Uniform Guidance.

**NOTE 4 FOOD COMMODITIES**

Nonmonetary assistance is reported in the Schedule at the fair value of the commodities received and disbursed.

**COMMUNITY ACTION PROGRAM BELKNAP-MERRIMACK COUNTIES, INC.**

**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL  
REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON  
AN AUDIT OF FINANCIAL STATEMENTS PERFORMED  
IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS**

To the Board of Directors  
Community Action Program Belknap-Merrimack Counties, Inc.  
Concord, New Hampshire

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Community Action Program Belknap-Merrimack Counties, Inc. (a nonprofit organization), which comprise the statement of financial position as of February 28, 2017, and the related statements of activities, cash flows, and functional expenses for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated October 30, 2017.

**Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered Community Action Program Belknap-Merrimack Counties, Inc.'s internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Community Action Program Belknap-Merrimack Counties, Inc.'s internal control. Accordingly, we do not express an opinion on the effectiveness of Community Action Program Belknap-Merrimack Counties, Inc.'s internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

**Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Community Action Program Belknap-Merrimack Counties, Inc.'s financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

**Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Leone McDonnell & Roberts*  
*Professional Association*

Concord, New Hampshire  
October 30, 2017

**COMMUNITY ACTION PROGRAM BELKNAP-MERRIMACK COUNTIES, INC.**

**INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR EACH  
MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE  
REQUIRED BY THE UNIFORM GUIDANCE**

To the Board of Directors  
Community Action Program Belknap-Merrimack Counties, Inc.  
Concord, New Hampshire

**Report on Compliance for Each Major Federal Program**

We have audited Community Action Program Belknap-Merrimack Counties, Inc.'s compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Community Action Program Belknap-Merrimack Counties, Inc.'s major federal programs for the year ended February 28, 2017. Community Action Program Belknap-Merrimack Counties, Inc.'s major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

**Management's Responsibility**

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

**Auditors' Responsibility**

Our responsibility is to express an opinion on compliance for each of Community Action Program Belknap-Merrimack Counties, Inc.'s major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Community Action Program Belknap-Merrimack Counties, Inc.'s compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of Community Action Program Belknap-Merrimack Counties, Inc.'s compliance.

**Opinion on Each Major Federal Program**

In our opinion, Community Action Program Belknap-Merrimack Counties, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended February 28, 2017.

**Report on Internal Control Over Compliance**

Management of Community Action Program Belknap-Merrimack Counties, Inc. is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Community Action Program Belknap-Merrimack Counties, Inc.'s internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Community Action Program Belknap-Merrimack Counties, Inc.'s internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

*Leone McDonnell & Roberts  
Professional Association*

Concord, New Hampshire  
October 30, 2017

COMMUNITY ACTION PROGRAM BELKNAP-MERRIMACK COUNTIES, INC.

SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
FOR THE YEAR ENDED FEBRUARY 28, 2017

SUMMARY OF AUDITORS' RESULTS

1. The auditors' report expresses an unmodified opinion on whether the financial statements of Community Action Program Belknap-Merrimack Counties, Inc. were prepared in accordance with generally accepted accounting principles.
2. No significant deficiencies relating to the audit of the financial statements are reported in the *Independent Auditors' Report on Internal Control Over Financial Reporting and on Compliance and other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards*. No material weaknesses are reported.
3. No instances of noncompliance material to the financial statements of Community Action Program Belknap-Merrimack Counties, Inc., which would be required to be reported in accordance with *Government Auditing Standards* were disclosed during the audit.
4. No significant deficiencies in internal control over major federal award programs are reported in the *Independent Auditors' Report on Compliance for Each Major Program and On Internal Control Over Compliance Required by the Uniform Guidance*. No material weaknesses are reported.
5. The auditors' report on compliance for the major federal award programs for Community Action Program Belknap-Merrimack Counties, Inc. expresses an unmodified opinion on all major programs.
6. There were no audit findings that are required to be reported in accordance with 2 CFR section 200.516(a).
7. The programs tested as major programs include:
  - 93.568 Low-Income Home Energy Assistance
  - 17.235 Senior Community Service Employment Program
  - FOOD DISTRIBUTION CLUSTER**
  - 10.565 Commodity Supplemental Food Program
  - 10.568 Emergency Food Assistance Program (Administrative Costs)
  - 10.569 Emergency Food Assistance Program (Food Commodities)
  - NON-FEDERAL**
  - NEW HAMPSHIRE PUBLIC UTILITIES COMMISSION, Electric Assistance Program
8. The threshold for distinguishing Type A and B programs was \$750,000.
9. Community Action Program Belknap-Merrimack Counties, Inc. was determined to be a low-risk auditee.



**FINDINGS - FINANCIAL STATEMENTS AUDIT**

None

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**FINDINGS AND QUESTIONED COSTS - MAJOR FEDERAL PROGRAMS AUDIT**

None

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**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**SCHEDULE OF REVENUES AND EXPENSES  
FOR THE LOW INCOME HOME ENERGY ASSISTANCE PROGRAM - CFDA 93.568  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

|                             | <u>Grant Period</u><br><u>10/1/15-9/30/16</u> | <u>Grant Period</u><br><u>10/1/16-9/30/17</u> | <u>Total</u>        |
|-----------------------------|---|---|---------------------|
| <b>Revenues</b>             |   |   |                     |
| Division of Human Resources | \$ 840,711                                    | \$ 2,500,088                                  | \$ 3,340,799        |
| Agency support              | <u>36,288</u>                                 | <u>-</u>                                      | <u>36,288</u>       |
|                             | <u>\$ 876,999</u>                             | <u>\$ 2,500,088</u>                           | <u>\$ 3,377,087</u> |
| <b>Expenditures</b>         |   |   |                     |
| Personnel                   | \$ 153,685                                    | \$ 196,427                                    | \$ 350,112          |
| Fringe benefits             | 18,011  | 37,936  | 55,947              |
| Travel                      | 3,783   | 2,213   | 5,996               |
| Occupancy                   | 29,956  | 25,603  | 55,559              |
| Direct program costs        | 635,259                                       | 2,213,931                                     | 2,849,190           |
| Other costs                 | <u>36,305</u>                                 | <u>23,978</u>                                 | <u>60,283</u>       |
|                             | <u>\$ 876,999</u>                             | <u>\$ 2,500,088</u>                           | <u>\$ 3,377,087</u> |

See Independent Auditors' Report

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**SCHEDULE OF REVENUES AND EXPENSES  
FOR THE SENIOR COMPANION PROGRAM - CFDA 94.016  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

|                                   | <u>Grant Period</u><br><u>7/1/15 - 6/30/16</u> | <u>Grant Period</u><br><u>7/1/16 - 6/30/17</u> | <u>Total</u>      |
|-----------------------------------|--|--|-------------------|
| <b>Revenues</b>                   |  |  |                   |
| Corporation for National Services | <u>\$ 130,956</u>                              | <u>\$ 202,716</u>                              | <u>\$ 333,672</u> |
| <b>Expenditures</b>               |  |  |                   |
| Personnel                         | \$ 97,392                                      | \$ 154,275                                     | \$ 251,667        |
| Fringe benefits                   | (8,582)  | 19,414   | 10,832            |
| Travel                            | 29,917   | 27,146   | 57,063            |
| Other costs                       | <u>12,229</u>                                  | <u>1,881</u>                                   | <u>14,110</u>     |
|                                   | <u>\$ 130,956</u>                              | <u>\$ 202,716</u>                              | <u>\$ 333,672</u> |

See Independent Auditors' report

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**SCHEDULE OF REVENUES AND EXPENSES  
FOR THE HEAD START PROGRAM - CFDA 93.600  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

|  | <u>Grant Period</u><br><u>1/1/16-12/31/16</u> | <u>Grant Period</u><br><u>1/1/17-12/31/17</u> | <u>Total</u>        |
|--|---|---|---------------------|
| <b>Revenues</b>                              |   |   |                     |
| U.S. Department of Health and Human Services | \$ 3,014,211                                  | \$ 605,248                                    | \$ 3,619,459        |
| In-Kind                                      | 430,127                                       | 130,994                                       | 561,121             |
| Other  | <u>21,022</u>                                 | <u>-</u>                                      | <u>21,022</u>       |
|  | <u>\$ 3,465,360</u>                           | <u>\$ 736,242</u>                             | <u>\$ 4,201,602</u> |
| <b>Expenditures</b>                          |   |   |                     |
| Personnel                                    | \$ 1,919,792                                  | \$ 421,587                                    | \$ 2,341,379        |
| Fringe benefits                              | 307,344                                       | 32,948  | 340,292             |
| Travel                                       | 36,960  | 7,205   | 44,165              |
| Occupancy                                    | 295,062                                       | 63,268  | 358,330             |
| In-Kind                                      | 430,127                                       | 130,994                                       | 561,121             |
| Other costs                                  | <u>476,113</u>                                | <u>80,240</u>                                 | <u>556,353</u>      |
|  | <u>\$ 3,465,398</u>                           | <u>\$ 736,242</u>                             | <u>\$ 4,201,640</u> |

See Independent Auditors' Report

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**SCHEDULE OF REVENUES AND EXPENSES  
FOR THE NUTRITION AND ELDER SERVICES PROGRAM -  
CFDA 93.045, 93.667 and 93.053  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

|  | <u>Grant Period</u><br><u>7/1/15 - 6/30/16</u> | <u>Grant Period</u><br><u>7/1/16 - 6/30/17</u> | <u>Total</u>        |
|--|--|--|---------------------|
| <b>Revenues</b>                                  |  |  |                     |
| NH Department of Health and Human Services       |  |  |                     |
| - Title XX                                       | \$ 150,685                                     | \$ 325,417                                     | \$ 476,102          |
| Title III Part C                                 | 300,912  | 652,003  | 952,915             |
| NH Department of Health and Human Services, NSIP | 104,603  | 110,386  | 214,989             |
| Other  | 224,628  | 448,066  | 672,694             |
|  | <u>\$ 780,828</u>                              | <u>\$ 1,535,872</u>                            | <u>\$ 2,316,700</u> |
| <b>Expenditures</b>                              |  |  |                     |
| Personnel  | \$ 354,050                                     | \$ 692,468                                     | \$ 1,046,518        |
| Fringe benefits                                  | 42,442   | 86,697   | 129,139             |
| Occupancy  | 60,226   | 130,123  | 190,349             |
| Travel   | 45,584   | 82,183   | 127,767             |
| Other costs                                      | 258,931  | 503,842  | 762,773             |
|  | <u>\$ 761,233</u>                              | <u>\$ 1,495,313</u>                            | <u>\$ 2,256,546</u> |

See Independent Auditors' Report

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**SCHEDULE OF REVENUES AND EXPENSES  
FOR THE ELECTRIC ASSISTANCE PROGRAM  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

|                     | <u>Grant Period</u><br><u>10/1/15-9/30/16</u> | <u>Grant Period</u><br><u>10/1/16-9/30/17</u> | <u>Total</u>        |
|---------------------|---|---|---------------------|
| <b>Revenues</b>     | <u>\$ 875,325</u>                             | <u>\$ 1,063,733</u>                           | <u>\$ 1,939,058</u> |
| <b>Expenditures</b> |   |   |                     |
| Personnel           | \$ 162,337                                    | \$ 134,123                                    | \$ 296,460          |
| Fringe benefits     | 24,448  | 23,884  | 48,332              |
| Travel              | 3,020   | 1,958   | 4,978               |
| Occupancy           | 14,738  | 13,333  | 28,071              |
| Other costs         | <u>670,432</u>                                | <u>890,435</u>                                | <u>1,560,867</u>    |
|                     | <u>\$ 874,975</u>                             | <u>\$ 1,063,733</u>                           | <u>\$ 1,938,708</u> |

**Note:**

Tested as a major program for the year ended February 28, 2017. See Schedule of Findings and Questioned Costs on page 22.

**See Independent Auditors' Report**

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**SCHEDULE OF REVENUES AND EXPENSES - BY PROGRAM  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

|   | <b><u>Revenues</u></b> | <b><u>Expenditures</u></b> |
|---|------------------------|----------------------------|
| Twin River Community Corp (055 & 056)               | 38,416                 | 42,468                     |
| Cottage Hotel (066 & 067)                           | 10,567                 | 10,567                     |
| Sandy Ledge (095 & 096)                             | 8,786                  | 24,981                     |
| Ozanam (106 & 107)                                  | 12,000                 | 18,697                     |
| Food Pantry (131)                                   | 21,075                 | 15,533                     |
| Senior Center Program (138)                         | 28,594                 | 26,409                     |
| Franklin Intergenerational (186 & 187)              | 13,959                 | 760                        |
| Mary Gale (207)                                     | 25,000                 | 2,936                      |
| Senior Companion Program - Non Federal (225 & 226)  | 45,482                 | 77,986                     |
| Senior Companion Program - State (235 & 236)        | 15,832                 | 15,832                     |
| Franklin Community Services (295 & 296)             | 22,510                 | 27,405                     |
| Head Start - Childcare (355 & 356)                  | 1,097,490              | 797,744                    |
| Lakes Region Family Center (385 & 386)              | 158,231                | 158,231                    |
| NH Modular Ramp (434 & 435)                         | 1,195                  | 3,633                      |
| New Hampshire Housing Guarantee Program (495 & 496) | 194,402                | 194,402                    |
| Core Program (505 & 506)                            | 614,981                | 579,366                    |
| Common Pantry (555 & 556)                           | 50                     | 113                        |
| Oral Health WIC (600)                               | 13,133                 | 1,418                      |
| Epsom Elderly Housing (645 & 646)                   | 63,640                 | 63,640                     |

See Independent Auditors' Report

**COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.**

**SCHEDULE OF REVENUES AND EXPENSES - BY PROGRAM  
FOR THE YEAR ENDED FEBRUARY 28, 2017**

|                                     | <u>Revenues</u> | <u>Expenditures</u> |
|-------------------------------------|-----------------|---------------------|
| Belmont Housing (656 & 657)         | 63,054          | 63,054              |
| Alton Housing (666 & 667)           | 60,766          | 60,766              |
| Kearsarge Housing (676 & 677)       | 69,648          | 67,831              |
| Riverside Housing (686 & 687)       | 69,801          | 68,026              |
| Pembroke Housing (701 & 702)        | 58,762          | 58,762              |
| Homeless Revolving Loan (728)       | 5,909           | 5,909               |
| Area Centers (766 & 767)            | 193,542         | 267,685             |
| THE FIXIT Program (836 & 837)       | -               | 1,185               |
| Loan Guarantee Program (847)        | 34,483          | 34,483              |
| MC Loan Guarantee Program (848)     | 3,283           | 3,283               |
| The Caring Fund (866 & 867)         | 324             | 2,751               |
| FGP/SCP Association Region 1 (875)  | -               | 875                 |
| Agency WIC/CSFP (883)               | 4,417           | 1,306               |
| Newbury Elderly Housing (885 & 886) | 38,637          | 38,637              |
| Housing Futures (897)               | 12,000          | 12,000              |
| Agency Account (911 & 980)          | 145,341         | 147,450             |
| Agency Account FAP (922)            | 83,987          | 97,662              |
| Agency Account SCP (935 & 936)      | 9,751           | 3,589               |
| H/S Agency (946 & 947)              | 22,692          | 25,330              |
| Agency Development Fund (981)       | 27,351          | 37,305              |

See Independent Auditors' Report



COMMUNITY ACTION PROGRAM BELKNAP - MERRIMACK COUNTIES, INC.

SCHEDULE OF REFUNDABLE ADVANCES  
FOR THE YEAR ENDED FEBRUARY 28, 2017

| <u>FUND #</u> | <u>FUND NAME</u>                              | <u>HHS PROGRAM CFDA#</u>                         | <u>AMOUNT</u>      |
|---------------|---|--|--------------------|
| 128           | EAP-Lead Agency                               |  | \$ 18,203          |
| 147           | Merrimack County Service Link                 | 93.778   | 114,553            |
| 198           | Electric Assistance Program                   |  | 49,915             |
| 497           | NH Housing Guarantee Program                  |  | 88,811             |
| 548           | Summer Feeding                                |  | 49,271             |
| 577           | Fuel Assistance Program                       | 93.568 (3,041 of deferred amount is not federal) | 232,180            |
| 595           | Homeless Prevention                           |  | 222,363            |
| 717           | Concord Area Transit                          |  | 47,146             |
| 728           | Homeless Revolving Loan Fund-Belknap County   |  | 30,407             |
| 729           | Homeless Revolving Loan Fund-Merrimack County |  | 8,179              |
| 737           | Winnipisaukee Transit                         |  | 18,892             |
| 837           | FixIt Program                                 |  | 84,540             |
| 858           | New Start Program                             |  | 113,347            |
| 876           | Emergency Solutions Grant                     |  | 1,694              |
| 883           | Agency Account-WIC/CSFP                       |  | 1,250              |
| 908           | Community Services Block Grant                | 93.569   | 72,913             |
| 947           | Agency Account-Head Start                     |  | 5,667              |
|               |   | <b>TOTAL</b>                                     | <b>\$1,159,331</b> |

See Independent Auditors' Report

COMMUNITY ACTION PROGRAM  
BELKNAP-MERRIMACK COUNTIES, INC.

**BOARD OF DIRECTORS**

|   |                     |
|---|---------------------|
| Sara A. Lewko, <i>President</i>         | Theresa M. Cromwell |
| David Siff, Esq., <i>Vice President</i> | Susan Koerber       |
| Dennis Martino, <i>Secretary-Clerk</i>  | Christine Averill   |
| Kathy Goode, <i>Treasurer</i>           | Safiya Wazir        |
| Heather Brown                           | Kathryn Hans        |
| Nicolette Clark                         |                     |

Current fiscal year (3/1/18 – 2/28/19) board meetings – 3/15/17, 5/3/18, 9/13/18, 11/8/18, 1/10/19

# Jeanne Agri

## PROFESSIONAL PROFILE

Versatile and experienced leader with highly developed communication skills: written, verbal and presentational. Adept in coaching and mentoring employees and colleagues as evidenced by my selection by the National Office of Head Start to serve as a mentor for new Head Start Directors. Committed to continuous improvement of activities to ensure they meet outcomes approved by the board through strategic planning, creating goal-oriented systems and conformance with all local, state and federal guidance.

## WORK EXPERIENCE

### Community Action Program Belknap-Merrimack Counties, Concord, NH

#### *Executive Director*

2018-present

- Assures the organization has long-range strategy which makes consistent and timely progress towards meeting the Agencies overall mission
- Responsible for the general supervision of all grant awards, ensuring that all statutory, regulatory, and /or program and financial requirements are met, that generally accepted accounting principles are applied, and that all program and financial policies and procedures are adhered to.
- Provide leadership in developing programs, organizational structures and financial systems that carry out the instructions and policies authorized by the Board
- Establish sound working relationships and cooperative arrangements with community groups, organizations and all funding sources important to the development of the agency and programs.
- See that the Board Director is kept fully informed and up to date on the condition of the organization and all important Federal, State or local requirements impacting on the Agency and/or its programs.

### Southern New Hampshire Services, Manchester, NH

#### *Education and Nutrition Operations Director*

2016 - 2018

- Coordinate, manage and monitor workings of Child Development, Women Infant and Children, and Literacy Programs, as well as development of an agency wide Two-Generational Approach to services
- Formulate, improve and implement departmental and organizational policies and procedures to maximize output. Monitor adherence to rules, regulations, and procedures
- Assist in the recruitment and placement of required staff; establishment of organizational structure; delegation of tasks and accountabilities
- Supervise staff, including establishment of work schedules and monitoring and evaluating performance in partnership with Executive Director
- Assist in development of strategic plans for operational activity; implement and manage operational plans

#### *Director of Child Development Programs*

2001-2016

- Hire, coach and evaluate the performance of Program Managers, Specialists, Coordinators, Center Directors, Teachers and Head Start support staff
- Provide coaching, and learning opportunities for all employees focused on promoting, supporting and improving early development of children from the prenatal stage to five years of age using research-based practices
- Plan and implement strategic interventions with Program Managers, Specialists, Coordinators and Center Directors for sites needing administrative support and direction
- Plan, coordinate and facilitate regular leadership meetings for evaluating and strengthening systems to maintain the highest quality of services in compliance with Head Start Performance Standards
- Develop internal structures, systems, and policies supporting major content areas of Head Start program including education, health, mental health, social services, parent involvement, nutrition, disabilities, and transportation

- Collaborate with managers and internal fiscal department in the monitoring and control of component budgets; identification and interpretation of Head Start and community needs; conformance to the Performance Standards and other regulatory requirements
- Work in partnership with internal departments to support project goals and meet customer expectations
- Establish and maintain relationships and collaborations with public school districts, systems of higher education, and other community agencies and partners
- Ensure adequate systems in place to maintain the highest quality of services to children and families in compliance with Head Start Performance Standards
- Ensure consistency in service delivery across the program with attention to inclusive practices and integration of component areas; encourage continuous improvement of systems.

*Quality Assurance Director/Co-Director for Child Development Programs* 1999-2001

- Established and managed a robust monitoring, analysis and evaluation system with well-defined results, milestones, and targets inclusive of Continuous Quality Improvement practices
- Monitored for quality and compliance at Grantee and Delegate level
- Worked closely with program Director to review, track and assess monitoring compliance throughout program operations
- Developed and implements a written quality assurance and performance evaluation plan in conjunction with Governing Board, Policy Council
- Interpreted and evaluated a variety of information to present it in meaningful oral or written form for varied audiences and provide reliable analysis leading to sound decision-making

*Area Manager/Education Manager* 1997-1999

- Supervision of various Child Care sites including direct supervision of Center Directors/Site Managers
- Coordinate personal and professional development and training plans for staff and ensure teaching staff progress towards educational requirements as supported by the Performance Standards
- Documented and administered both positive and negative feedback and utilize Performance Improvement Plans when warranted.

*Child Care Center Director/Site Manager* 1995-1997

- Supervised, mentored, coach and administered work plans and directives to staff
- Communicated areas of performance improvement to staff and promote training that reflected individual needs of staff members and the team as a whole
- Ensure program compliance with codes of state and local licensing agencies and grant requirements

**New Hampshire Technical College, Nashua, NH**

*Instructor* 1995-1997

- Taught Child Growth & Development and assisted in curriculum development for Early Childhood Education Program.
- Planned and organized instruction to maximize documented student learning
- Employed appropriate teaching and learning strategies to communicate subject matter to students
- Modified, where applicable, instructional methods and strategies to meet diverse student needs

**EDUCATION**

**Southern New Hampshire University, Manchester, NH**  
Master's in Business Administration

June 2017

**Notre Dame College, Manchester, NH**  
Bachelors of Arts in Elementary Education

1981

## KATHRYN R. LAVIGNE

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### WORK EXPERIENCE

- July 1993-Present      CHIEF ACCOUNTANT  
Community Action Program Belknap-Merrimack Counties, Inc.  
P.O. Box 1016, Concord, New Hampshire 03302-1016
- November 1992-  
June 1993      SENIOR ACCOUNTANT  
John Killion & Co., Concord, New Hampshire  
Responsible for compilations and reviews of commercial accounts, preparation of financial statements and tax returns. Auditing at junior level for nonprofit organizations. Preparation of weekly payrolls, quarterly payroll tax returns and year-end W-2's for service bureau accounts. Installation of accounting software. Set-up of clients chart of accounts and trial balance. Software used: Real World, Word Perfect, Cougar Mountain, Accountants Trial Balance, Fixed Assets Management and Tax Machine.
- January 1989-  
November 1992      OFFICE MANAGER  
Rudolph Electrical Co., Inc., Concord, New Hampshire  
Supervise staff of three. Responsible for implementing computerized accounting system. Handle all aspects of accounting, i.e. accounts receivable, accounts payable, payroll, general ledger and job cost. Responsible for preparation of weekly payroll, monthly financial statements and quarterly payroll tax returns. Collect overdue accounts.
- October 1979-  
September 1988      Rivco, Penacook, New Hampshire
- June 1986-  
September 1988      ACCOUNTING MANAGER  
Supervise staff of seven. Responsible for hiring, assigning, appraising performance and directing department personnel, including recommending compensation changes and promotions. Participant in audit preparation. Administrator of profit sharing plan and trip promotion program.
- August 1984-  
September 1988      CREDIT MANAGER  
Monitor all accounts and collect overdue accounts. Determine credit rating of prospective customers. Open accounts. Consult with lawyers, salesmen and sales manager. Represent company in court. Handle customer correspondence and telephone calls. Train and supervise credit personnel.
- October 1979-  
August 1984      ACCOUNTS RECEIVABLE CLERK  
Handle all aspects of accounts receivable and billing. Reconcile accounts. Prepare monthly sales reports and aged trial balance by customer and by salesmen.

### EDUCATION

- 1982-1989      Franklin Pierce College, Concord, New Hampshire  
Bachelor's Degree in Accounting and Business Management  
May 1989, Graduated Magna Cum Laude
- 1963-1967      Franklin High School, Franklin, New Hampshire  
Business-Secretarial, Graduated with high honors

### REFERENCES

Available upon request.

# SUZANNE L. SINGER, MBA

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## Director of Business Development

Growth Catalyst - Powerful Sales Strategist - Market Expansion  
Top-performing Business Development & Sales Director who builds high-performance sales teams to develop new markets resulting in higher-margin sales

Consistent Revenue Growth - Valued Mentor & Leader

Business Development strategist who builds strong, dedicated client relationships and partnerships that are built on trust. Executive with an entrepreneurial spirit who leads companies to growth and market differentiation with a record of generating new business opportunities and developing lucrative partnerships. Proven track record of implementing the necessary business development strategies to accomplish breakthrough sales objectives while creating unique market-entry strategies, managing business relationships, building credibility, and establishing immediate rapport with potential clients.

Contract Negotiations

Business Leadership

Cross-Functional Leadership

Strategic Planning

Account Management

Market Expansion

Market Penetration

Strategic Alliances

Resource Management

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## Executive Highlights

-Led sales efforts and cultivated business relationships to drive 30%-40% new client revenue annually, with emphasis on creative marketing strategies and rebranding services.

-Trusted and highly-respected Sales Management leader and Mentor during change management resulting in company growth of \$2-million.

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## Executive Performance

Community Action Program-Belknap-Merrimack County

Director of Elder Services (2018-present)

Scott Farrar at Peterborough (2016-2018)

### MARKETING DIRECTOR

Manage Market Sales process of the community to achieve and maintain 100% occupancy for the community. Managed internal and external events and trainings. Organized and attended networking opportunities building a strong reputation.

American Red Cross, Massachusetts (2015- 2016)

### District Manager

Led a team of 10 Account Managers to achieve second place in the Nation for Blood Collection for 2015 with Operating efficiency of 95%. Recruited to lead sales and drive accelerated growth of Red Cross blood services donor recruitment while managing 10 staff in two offices; increased advisor appointment ratios from 0.9% to 2% and sales conversion ratio from 1.5% to 3% by communicating sales opportunities and coaching advisor on marketing best practices. Researched market penetration and viability, developed strategies and coinciding reports to track results; trends, profitability, and areas of opportunity, then adjusted strategies as needed.

Developed and led monthly meetings with COO, CEO and Executive Directors to build One Red Cross brand.

American Red Cross, Massachusetts (2013-2015)

**Business Development Manager**

Aggressively identified, recruited and developed new and lapsed business development resulting in exceeding annual goal for blood collection for the State of Massachusetts. Achieved 110% of goal with operating efficiency of 94% annually. Research targeted accounts and individuals for strategic growth opportunities. Responsible for directing business development for large business, military and educational accounts; acted as the key person for negotiation of issues with Executive levels with high profile accounts. Created, developed and implemented National training for Account Managers with new branding material of One Red Cross. Recruited, hired and training new Business Development Managers for Massachusetts.

Catholic Charities (2006-2012)

**Director of Marketing/Social Worker/Admission**

Established and maintained strong relationship with critical referral organizations; increase therapy services for higher billable hours. Assisted community non-profit organization Monadnock At Home with startup. Key role of securing new customers and working with key department heads to ensure a smooth transition for residents and families for optimal satisfaction. Train and mentor staff in areas of customer service. Act as the Ethics Officer to ensure all rights are maintained.

North Shore Arc (2012-2009)

**Program Director**

**ORGANIZATIONAL LEADERSHIP**

- Valued mentor and leader-provides employees with the autonomy to do their work well while building strong, personal relationships to improve communication as well as advance business development efforts.
- Experiences, results-driven leader who accelerates customer success, delivers implementation results, and champions adoption; record of accomplishments with high client satisfaction and a showcase of successful project delivery.
- Managed top-performing team including 10 staff; optimized organizational operations, staffing and succession plans, hired resources conducted performance reviews, and ensured compliance with company policies.
- Led and monitored complex projects and worked cross-functionally with various internal groups to determine project scope, requirements, and resources; managed RFP's and determined best practices while ensuring project activities aligned with business objectives.

**BUSINESS DEVELOPMENT**

- Built and nurtured C-Level relationships through many varied engagements, successfully implementing solutions, quickly resolving issues, and closing new business opportunities.
- Evolved selling strategy across a new portfolio of sales opportunities by introducing solutions for Donor Recruitment in the blood industry.
- Developed and maintained strong partnerships with in specific vertical markets with increased growth by 40% monthly
- Maintained 100% of new business monthly goal with an average of 90% operating efficiency

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**WORKSHOPS, TRAINING, AND SEMINARS**

- Created training module for on boarding Red Cross employees with vision of One Red Cross
- Staff Trainer and safety officer; train and retrain staff to maintain a safe work environment reduce injury
- Ethic's officer in Long Term, Assisted Living and Residential program
- Developed client orientated operations manual with detailed staff functions
- Staff Trainer for Self Determination in focused area of Developmental Disability, Elderly and Traumatic Brain Injury
- Staff trainer of Learning Styles with staff – increase connectivity with clients and co-worker

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**EDUCATION**

**MASTER OF BUSINESS ADMINISTRATION, 2001**

Franklin Pierce University, NH

**BACHELOR OF SCIENCE, 1995**

Keene State College, NH

**ASSOCIATE DEGREE CHEMICAL DEPENDENCY 1995**

Keene State College, NH

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**AFFILIATIONS**

Board of Directors Red Cross NH/VT 2017-Present

Red Cross Bio-Med Chair 2017-Present

Chamber of Commerce Peterborough/Jaffrey/Rindge 2016-Present

Peterborough Woman's Club 2017-Present

Eastern Star 2015

Children's Friends, 2014-2016

Monadnock At Home 2011-2013

Board of Directors: New Hampshire Dance Institute 2006-2008

Grand Circle Community Resource Team 2002-2003



## Michele Cronin Lapierre

### SUMMARY OF QUALIFICATIONS:

Dedicated worker with responsibility for recruiting, training, supervising and retaining a team. Proven analytical and strategic thinker having researched and recommended action plans for hundreds of beneficiaries. Passionate advocate, having created and developed marketing materials to ensure successful outcomes.

### PROFESSIONAL EXPERIENCE:

**Community Action Program- Belknap & Merrimack Counties, Inc., Concord, NH 03302** July 2018- Present

*Program Manager of Senior Companion Program:* As Program Manager, responsible for the daily management of the Senior Companion Program. Actively involved with community organizations, volunteers, and volunteer stations, the representative of the sponsor in signing and approving official project documentation, including project reports, memoranda of understanding, and/or letters of agreement for in-home assignments.

- Plan and develop all phases of SCP operations; Ensure national service National Service Criminal History Check are completed for all covered staff and volunteers in accordance with CNCS requirements and agency policy; Assist with hiring, training, and supervising adequate staff to efficiently carry out, maintain and develop operations of the Senior Companion Program; Provide support, information and materials for coordinators and appraise staff performance. Recruit, select, orient and place volunteers with volunteer stations; Develop and maintain appropriate fiscal, personnel, program and volunteer records and reports;
- Enhance the total efforts of SCP through active involvement with community organizations, other national service programs, where appropriate; Implement agreed upon performance measure and other FGP/SCP grant requirements; Keep Senior Corps Advisory Council members informed and solicit their participation and advice on matters affecting program operations;
- Work in cooperation with CAP Non-Profit staff, Advisory Council members and volunteer station staff to obtain resources for programs; Plan, develop, and implement ongoing public relations opportunities, including social media, in cooperation with CAP; Arrange for formal and regular recognition of volunteers, organizations and individuals who have contributed to the support of SCP;
- Assure volunteer orientation, in conjunction with volunteer work stations and staff; In conjunction with SCP staff, develop and maintain close coordination and relationships with volunteer stations, including development of volunteer assignment plans; Provide ongoing support to volunteers; In conjunction with SCP staff, appraise volunteer performance; Assess appropriateness and/or performance of volunteer stations; Attend training conferences conducted or authorized

**Goodwill Industries NNE, Manchester, NH 03103**

September 2016- March 2018

*Intake Specialist/ Career Advisor, Job Connection:* Assist with the facilitation of supports and services that promote greater independence and skill development.

- Perform assessment of individuals via need for change and intake with Families in Transition participants to determine skills, needs and goals for employment.
- Assist participants with State, Federal and local benefit issues. Provide support with applications, redeterminations and referral.
- Refer to outside agencies or within Job Connection to achieve desired goals. Utilize grants, participant funds, vouchers and other means to help participants with financial hurdles.
- Complete data entry, update spreadsheets and accurately record participant information.

Alltran Health (formerly Financial Health Strategies), Manchester, NH 03102

April 2016- July 2016

**Community Benefits Specialist:** Work with on-site hospital to complete screenings of uninsured patients for potential Medicaid and other available resources.

- Assist patients in gathering documentation- including applications, releases, and receipts obtained and filed timely.
- Coordinate with local Department of Health and Human Services in an effort to determine program eligibility.
- Enter clear, concise notes in patient accounting systems.

Granite State Independent Living, Manchester, NH 03103

February 2009- March 2016

**Work Incentive Coordinator:** Provide work incentive planning, assistance and outreach services to Social Security beneficiaries and people with disabilities who want to return to work.

- Selected to serve as BOND specialist for NH, an SSA pilot program giving beneficiaries the opportunity to work at higher rates.
- Assist people with disabilities to successfully enter the workforce and increase their self-sufficiency by providing clear, accurate and credible information about the impact of work on benefits
- Provide access to work incentives; provide referrals to other supports such as employment networks and the state vocational rehabilitation program; and assist with problems related to benefits that may arise as the individual begins working.

Staples, Hooksett, NH 03106

May 2008- February 2009

**Sales Manager:** Managed sales of the company's products and services. Ensured consistent, profitable growth in sales revenues through positive planning and management of sales personnel. Identified objectives, strategies and action plans to improve short and long term sales and earning goals.

- Improved operations by developing and implementing best practices and individualized strategies;
- Consistently completed projects and met sales goals.

Muscular Dystrophy Association, Bedford, NH 03110

December 2000- May 2008

**Fundraising Coordinator:** Created fundraising opportunities through various business development techniques including prospecting, and targeted follow-up and new lead generation.

- Selected to lead difficult and experimental projects. Executed individual business plans to exceed goals.
  - Recognized as Lock-Up program leader and commissioned/ sent into failing offices to assist in redeveloping their program structure.
  - Consistently met and exceeded budgeted goals for all core programs (ie: Shamrocks Against Dystrophy, Fill The Boot, Executive Lock-Ups, Jerry Lewis Telethon).
  - Delivered organized, structured and persuasive presentations using effective written and verbal communication.
- Assisted in identifying, recruiting, training and managing temporary coordinators and volunteers. Managed fiscal accountability for significant income requirements.

#### TRAINING & EDUCATION:

B.A. University of New Hampshire, Durham, NH 03824

Certified Work Incentive Coordinator and Work Incentive Coordinator

## Kathleen Stuart

**Objective**-To secure a position in which I can explore and build experience/skills.

**Qualifications**-I have over 15 years of management experience in the field of human services. My experience includes working with various adult populations.

### Work History

January 2016-Present

Program Coordinator-Senior Companion Program of New Hampshire

- Provide oversight of 40 volunteers over the age of 55.
- Schedule and facilitate in home introductory visits and assignment plans with volunteers and frail, homebound seniors
- Coordinate monthly inservices and annual volunteer appreciation events
- Recruit, enroll and train volunteers in Hillsborough County and the Seacoast region
- Process biweekly timesheets (volunteers are stipended) for volunteers

February 2015-January 2016

Assisted Living Manager, Brightview Senior Living Billerica, MA

- Provide oversight of over 20 Certified Nurse Assistants
- Responsible for scheduling, completion of service plans, QA, ALFA and MA regulation compliance.

December 2009-January 2015

Easter Seals NH Care Coordinator,

Caring Companions

- Administrative oversight of 20 or so staff providing in home services to the elderly, chronically ill and disabled.
- Maintenance of records for a caseload of over 90 consumers.
- Intake, assessment and care plan development for over 90 consumers.
- Recruitment, hiring, training and supervision of staff providing in home services.

April 2008-December 2009

Easter Seals NH

Family Resource Worker/Recruiter, Harbor Schools (*left due to company dissolution*)

- Recruitment of foster parents to provide homes to emotionally troubled kids.
- Completion of all state regulated assessments in the licensure of prospective foster homes.
- Coordination of annual foster parent appreciation events and quarterly newsletter for foster parents.
- Conducted quarterly, state regulated MAPP training to foster parents for licensure.

August 2004-2007

Program Manager, North Suffolk Mental Health Inc.

- Managed a group home for developmentally disabled men.
- Completed all JSP's, trained staff in the implementation of behavior plans and maintained the health and safety of all residents.
- Complied with dietary, budgetary and behavioral methods necessary.

### **Education**

Southern Connecticut State University

Conferred January 2002 with Departmental Honors BA Mental Health

Psychology GPA 3.84

### **Awards**

Recipient of the SCSU Service Award 2001

Recipient of the National Italian American Foundation Scholarship Recipient of the Henry Barnard Distinguished Student Award Recipient of the State of Connecticut Distinguished Student Award Recipient of SCSU Alumni Scholarship

Nominated for the Who's Who Among College Students Award President of the SCSU

CIAO Italian Club

## BECKY NELSON

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### Professional Experience

8/2017- Current    Community Action Program Belknap-Merrimack Counties, Inc.  
                          **Senior Companion Program Coordinator**

- Supervise senior companions ensuring they provide the best care to Visitees they volunteer with.

9/2011-3/2016    Granite State Independent Living Coordinator Concord, NH

#### **Long Term Services Coordinator/IL Services Coordinator**

- Managed and Maintained a caseload of 30-45 consumers assisting them with developing and maintaining their Independent Living Goals
- Trained and supervised attendant care workers on specific processes
- Maintained a caseload within the NFTRAN program; a program that assists individuals who are currently living in a Nursing Home and would like to become an integral part of the community again
- Exercised computer skills in documentation and data entry
- Executed administrative activities including department production reports; logs, quality control reports, as well as time and attendance of attendant care workers
- Assisted consumers and families with providing information and referral, advocacy, and promoted Independent Living within their community
- Assisted consumers seeking benefits whether it be for equipment or modifications to their home as well as locate funding options to assist with this.
- Acted as liaison between consumer and state agencies, voc rehab as well as maintained contact with case managers when required.
- Proficient in Medical Terminology
- Obtained Notary Public obtained 2013

10/2008-7/2011    Moore Center Services Provider Manchester, NH 4/2008-7/2011  
                          Healthmasters **Paramedical Examiner** Boston, MA

9/2007-7/2011    Superior Mobile Medic **Paramedical Examiner** San Diego, CA 2/2007-7/2011  
                          Exam One **Paramedical Examiner** Bedford, NH

12/2006-7/2011    APPS **Paramedical Examiner** Bow, NH

4/2006-2007        NH Oncology & Hematology **Phlebotomist** Hooksett, NH 12/2005-3/2007  
                          CMC Mom's Place **Prenatal Tech/ICU Critical Care Tech.** 2003-2004  
                          Home Health & Hospice    **LNA**    Nashua, NH

1999-2000         NH Medical Labs        **Phlebotomist**        Manchester, NH 1996-1996  
                          Ridgewood Health Care Center **LNA** Manchester, NH

### Education

1992-1996         Memorial High School Diploma Manchester, NH

1999- Current    NH Community Technical College: I am currently two credits away from obtaining my Associates Degree in Human Science.

References available upon request

## KEY ADMINISTRATIVE PERSONNEL

### NH Department of Health and Human Services

**Vendor Name:** Community Action Program Belknap-Merrimack Counties, Inc.

**Name of Program/Service:** Senior Companion Program (SCP)

**Contract Period:** 7/1/2018 - 9/30/2020

| BUDGET PERIOD   | Annual Salary of Key Administrative Personnel | Percentage of Salary Paid by Contract | Total Salary Amount Paid by Contract |
|---|---|---------------------------------------|--------------------------------------|
| Name & Title Key Administrative Personnel   |   |                                       |                                      |
| Jeanne Agri, Executive Director   | \$140,639                                     | 0.00%                                 | \$0:00                               |
| Kathy Lavigne, Chief Accountant   | \$70,941                                      | 0.00%                                 | \$0:00                               |
| Suzanne Singer, Director, Elder Services  | \$69,517                                      | 0.00%                                 | \$0:00                               |
| Michele Lapierre, Senior Companion Program Manager                                      | \$37,518                                      | 0.00%                                 | \$0:00                               |
| Becky Nelson, Senior Companion Coordinator  | \$23,296                                      | 40.00%                                | \$9,318:40                           |
| Kathleen Stuart, Senior Companion Coordinator   | \$33,150                                      | 0.00%                                 | \$0:00                               |
|   | \$0   | 0.00%                                 | \$0:00                               |
|   | \$0   | 0.00%                                 | \$0:00                               |
|   | \$0   | 0.00%                                 | \$0:00                               |
|   | \$0   | 0.00%                                 | \$0:00                               |
|   | \$0   | 0.00%                                 | \$0:00                               |
|   | \$0   | 0.00%                                 | \$0:00                               |
|   | \$0   | 0.00%                                 | \$0:00                               |
| <b>TOTAL SALARIES (Not to exceed Total/Salary Wages, Line Item 1 of Budget request)</b> |   |                                       | <b>\$9,318:40</b>                    |

Key Administrative Personnel are top-level agency leadership (Executive Director, CEO, CFO, etc.). These personnel **MUST** be listed, even if no salary is paid from the contract. Provide their name, title, annual salary and percentage of annual salary paid from the agreement.



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STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF COMMUNITY BASED CARE SERVICES

*BUREAU OF ELDERLY & ADULT SERVICES*

Jeffrey A. Meyers  
Commissioner

129 PLEASANT STREET, CONCORD, NH 03301-3857

603-271-9203 1-800-351-1888

Maureen Ryan, Director

Fax: 603-271-4643 TDD Access: 1-800-735-2964 www.dhhs.nh.gov

September 21, 2016

Her Excellency, Governor Margaret Wood Hassan  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

**REQUESTED ACTION**

Authorize the Department of Health and Human Services, Division of Community Based Care Services, Bureau of Elderly and Adult Services to enter into a **retroactive, sole source** agreement with Community Action Program Belknap and Merrimack Counties, Inc., (Vendor # 177203), of 2 Industrial Park Drive, Concord, NH 03302 in an amount not to exceed \$60,000 to provide Senior Companion services, effective October 1, 2016 through September 30, 2018. Funds are 100% General Funds.

Funds are available in the following account for State Fiscal Year 2017, and are anticipated to be available in State Fiscal Years 2018 and 2019, upon the availability and continued appropriation of funds in the future operating budgets, with authority to adjust encumbrances between State Fiscal Years through the Budget Office if needed and justified, without further approval from the Governor and Executive Council.

**05-95-48-481010-9010 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: ELDERLY AND ADULT SERVICES, GRANTS TO LOCALS, VOLUNTEER ACTIVITIES**

| State Fiscal Year | Class/Account | Class Title                    | Job Number   | Total Amount    |
|-------------------|---------------|--------------------------------|--------------|-----------------|
| 2017              | 102-500731    | Contracts for Program Services | 90080013     | \$22,500        |
| 2018              | 102-500731    | Contracts for Program Services | 90080013     | \$30,000        |
| 2019              | 102-500731    | Contracts for Program Services | 90080013     | \$ 7,500        |
|                   |               |                                | <b>Total</b> | <b>\$60,000</b> |

### EXPLANATION

This request is **retroactive** due to unexpected processing delays. Procurement for the services was delayed due to staffing unavailability; this request is **sole source** because Community Action Program Belknap and Merrimack Counties, Inc., is the only sponsor and fiscal agent for the Senior Companion Program in New Hampshire, primarily funded and regulated by the Federal Corporation for National and Community Services to provide this program. The Corporation for National and Community Service has selected Community Action Program Belknap and Merrimack Counties, Inc., is the only agency in New Hampshire to sponsor the Senior Companion Program. The Bureau of Elderly and Adult Services is required under the Senior Volunteer Grant Program, RSA 161-F:40, within the limits of funds appropriated, to reimburse for covered expenses incurred by the Senior Companion Program.

The purpose of this request is to obtain Senior Companion services. The mission of the Senior Companion Program is to prevent institutionalization and promote independence for frail elderly adults by supporting older adults in maintaining independent community living.

The Senior Companion Program provides the opportunity for low-income (200% of poverty or less) adults over the age of fifty-five (55) to serve as companions. Companions are matched with homebound older adults and provide supportive services such as companionship, assistance with ancillary household tasks, and socialization. The companions benefit from participation in a rewarding and worthwhile experience and receive a nontaxable stipend and mileage reimbursement. The homebound older adults who are served benefit from regular companionship and reduced isolation.

The Program currently has volunteers placed throughout seven (7) counties in New Hampshire. Additional funding for administrative staff, volunteer coordination management and an increase in the number of volunteers, would be needed from the State of New Hampshire and the Corporation for National and Community Service to allow for expansion of the program statewide. This contract will serve approximately seventy (70) companions per contract year.

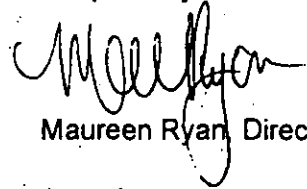
The contractor will conduct surveys of clients, companions and station supervisors on the quality of services to ensure that services are delivered satisfactorily or better. Additionally, the contractor will be collecting and reporting data on the number of volunteers in the program, number of volunteer hours served, number of clients and the number of visits, in order for the Department to understand potential gaps in service delivery.

As referenced in Exhibit C-1 of this contract, this Agreement has the option to extend for up to two (2) additional years, contingent upon satisfactory delivery of services, available funding, agreement of the parties and further approval of the Governor and Executive Council.

Should the Governor and Executive Council not approve this request, the contractor's ability to maintain federal designation and funding support and continue to operate the program may be in serious jeopardy and companions and clients may not be able to continue to be served.

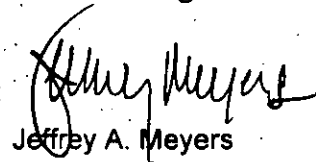
Area served: Belknap, Grafton, Hillsborough, Merrimack, Rockingham, Strafford and Sullivan counties  
Source of Funds is 100% General Funds, Grants to Locals, Volunteer Activities.

Respectfully Submitted,



Maureen Ryan, Director

Approved by:



Jeffrey A. Meyers

Commissioner



Subject:

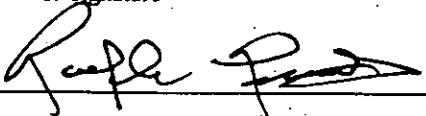
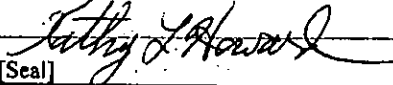
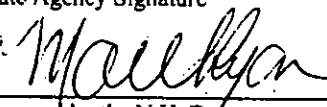
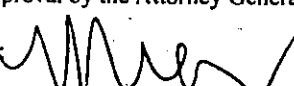
**Notice.** This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

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

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

|   |  |   |                                  |
|---|--|---|----------------------------------|
| 1.1 State Agency Name<br>Department of Health and Human Services  |  | 1.2 State Agency Address<br>129 Pleasant Street, Concord, NH 03301                                  |                                  |
| 1.3 Contractor Name<br>Community Action Program Belknap and Merrimack Counties, Inc.  |  | 1.4 Contractor Address<br>2 Industrial Park Drive<br>Concord, NH 03302-1016                         |                                  |
| 1.5 Contractor Phone Number<br>(603) 225-3295   | 1.6 Account Number:<br>05-95-48-481010-90100000-102-500731 | 1.7 Completion Date<br>September 30, 2018   | 1.8 Price Limitation<br>\$60,000 |
| 1.9 Contracting Officer for State Agency<br>Eric D. Borrin  |  | 1.10 State Agency Telephone Number<br>603-271-9558  |                                  |
| 1.11 Contractor Signature<br>   |  | 1.12 Name and Title of Contractor Signatory<br>Ralph Littlefield, Executive Director                |                                  |
| 1.13 Acknowledgement: State of <u>New Hampshire</u> , County of <u>Merrimack</u><br>On <u>9/12/2016</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<br><br>[Seal] <span style="float: right;">KATHY L. HOWARD Notary Public, New Hampshire<br/>My Commission Expires October 16, 2018</span>   |  |   |                                  |
| 1.13.2 Name and Title of Notary or Justice of the Peace<br>Kathy L. Howard, Notary  |  |   |                                  |
| 1.14 State Agency Signature<br>  |  | 1.15 Name and Title of State Agency Signatory<br>Maureen Ryan<br>Director, Office of Human Services |                                  |
| 1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable)<br>By: _____ Director, On: _____  |  |   |                                  |
| 1.17 Approval by the Attorney General (Form, Substance and Execution)<br>By:  On: <u>9/16/16</u><br>_____  |  |   |                                  |
| 1.18 Approval by the Governor and Executive Council<br>By: _____ On: _____  |  |   |                                  |

*R-L*  
9/16/16

**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 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.

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.

*RL*  
3/12/16



## 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 agrees that the services in this contract are for low-income (200% of poverty or less) adults over the age of 55 who work as volunteers providing supportive services such as assistance with daily living tasks, respite and socialization to homebound elderly and disabled adults who benefit from these services.
- 1.4. The Contractor shall provide and ensure delivery of Senior Companion Services in the counties listed in paragraph 1.4.1. below. However, nothing in this Agreement shall be construed to limit the ability of the Contractor to provide said services in a town/city/county not listed in paragraph 1.4.1. below:
  - 1.4.1. The Contractor shall provide Senior Companion Services in the following geographic areas: Belknap, Merrimack, Grafton, Hillsborough, Rockingham, Strafford and Sullivan Counties.
- 1.5. The Contractor shall use BEAS' E-Studio electronic information system which is BEAS' primary vehicle for uploading important information concerning time-sensitive announcements, policy releases, administrative rule adoptions, and other critical information. The Contractor shall:
  - 1.5.1. Identify all of the key personnel who need to have E-Studio accounts to ensure that information from BEAS can be shared with the necessary agency staff, at no cost to the Contractor.
  - 1.5.2. Ensure that E-Studio account(s) are kept current and that BEAS is notified when a staff member is no longer working in the program so his/her account can be terminated.
- 1.6. The Contractor shall ensure all staff and volunteers and prospective staff and volunteers:
  - 1.6.1. Pursuant to RSA 161-F:49, complete a BEAS State Registry check before the staff member or Companion begins providing direct services to Clients.
  - 1.6.2. Undergo a New Hampshire Criminal Records Background check.

AG  
9/12/16



## 2. Scope of Services

The Contractor shall provide Senior Companion Services as follows:

- 2.1. Maintain designation by the Corporation for National and Community Service (Corporation) established under the National and Community Service Trust Act of 1993 to administer the Senior Companion Services Program (Program).
- 2.2. Link low-income seniors, referred to as Companions, to Clients who are socially isolated due to physical or emotional frailties, as follows:
  - 2.2.1. Provide services in a manner that improves the quality of life for both Companions and Clients;
  - 2.2.2. Design the Companion's visits so as to encourage independence of the Client by providing assistance with daily living tasks, respite, and socialization;
  - 2.2.3. Assign each Companion a minimum of two (2) Clients;
  - 2.2.4. Require each Companion to provide a minimum of fifteen (15) hours of service per week, as assigned by the Contractor;
  - 2.2.5. Provide each Companion with a stipend as established by CFR Title 45, Subtitle B, Chapter XXV, Part 2551, Subparts A-L;
  - 2.2.6. Ensure that Companions participate in educational programs as well as supervisory meetings with program supervisors, as needed;
  - 2.2.7. Ensure that Clients not incur any fees for services provided through the Program;
  - 2.2.8. Comply with specific program requirements and complete specific program measures and reporting requirements as required by CFR Title 45, Subtitle B, Chapter XXV, Part 2551, Subparts A-L;
  - 2.2.9. Maintain the designated number of volunteer station agencies as specified under CFR Title 45, Subtitle B, Chapter XXV, Part 2551, Subparts A-L; and
  - 2.2.10. Provide direct supervision to Companions and assign the placement of Companions and ongoing services to Clients.

## 3. Service Compliance Requirements

- 3.1. The Contractor shall comply with the requirements as defined in CFR Title 45, Subtitle B, Chapter XXV, Part 2551, Subparts A-L, governing the management and operation of the Senior Companion Program.

## 4. Performance Measures

- 4.1. The Contractor shall comply with the following requirements and reporting requirements:
  - 4.1.1. Completion of specific program measures and reporting requirements as required by CFR Title 45, Subtitle B, Chapter XXV, Part 2551, Subparts A-L.
  - 4.1.2. Maintain the designated number of volunteer station agencies specified under CFR Title 45, Subtitle B, Chapter XXV, Part 2551, Subparts A-L.

*[Handwritten Signature]*  
9/13/16



- 4.1.3. Report the number of visits, individuals being visited, and the number of Companions participating in the Program to the Department.
- 4.1.4. Conduct Annual Surveys of Clients, Companions and Station Supervisors to indicate levels of satisfaction with the Program.

## 5. Reporting Requirements/Deliverables

### 5.1. Privacy and Security of Client Information

The Department is the designated owner of all data and shall approve all access to that data. The Contractor shall not have ownership of State data at any time. The Contractor shall be in compliance with privacy policies established by governmental agencies or by state or federal law. Privacy policy statements may be developed and amended from time to time by the State and will be appropriately displayed on the State portal. The Contractor shall provide sufficient security to protect the State and Department data in network, transit, storage and cache. In the event of breach, the Contractor shall notify the Department within one day from the date of breach.

### 5.2. Notice of Failure to Meet Service Obligations

- 5.2.1. In the event that the Contractor, for any reason, is unable to meet any service obligations prior to the completion date, the Contractor shall give at least a ninety (90) day prior written notice addressed to the Bureau Director, Bureau of Elderly and Adult Services, of such inability to meet service obligations.
- 5.2.2. Examples of failure to meet service obligations may include, but are not limited to:
  - 5.2.2.1. Reducing hours of operation
  - 5.2.2.2. Changing a geographic service area
  - 5.2.2.3. Closing or opening a site
- 5.2.3. The written notification shall include the following:
  - 5.2.3.1. ~~The reasons for the inability to deliver services;~~
  - 5.2.3.2. How service recipients and the community will be impacted if the Contractor is unable to provide services;
  - 5.2.3.3. How service recipients and the community will be notified; and
  - 5.2.3.4. The Contractor's plan to transition Companions and/or Clients into other services or refer the Companions and/or Clients to other agencies.
- 5.2.4. The Contractor shall maintain a plan that addresses the present and future needs of Companion and/or Clients receiving services in the event that:
  - 5.2.4.1. Service(s) are terminated or planned to be terminated prior to the termination date of the contract;
  - 5.2.4.2. The contract is terminated or is planned to be terminated prior to the termination date of the contract by the Contractor or the Department;
  - 5.2.4.3. The Contractor terminates a service or services for any reason;
  - 5.2.4.4. The Contractor cannot carry out all or a portion of the services terms or conditions outlined in the contract or sub-contracts.



### 5.3. Transition Process

5.3.1. The Contractor shall have a transition process for Companions and/or Clients in the event that they may be transitioned between Department-contracted providers and shall submit their written transition process to the Department within thirty (30) days of approval of the Contract Agreement. The process shall ensure:

- 5.3.1.1. Uninterrupted delivery of services for Companions and/or Clients;
- 5.3.1.2. A method of notifying Companions and/or Clients and/or the community about the transition.
- 5.3.1.3. A staff member shall be available to address questions about the transition.

### 5.4. Contract Monitoring

5.4.1. The Contractor shall:

- 5.4.1.1. Ensure the Department has access sufficient for monitoring of contract compliance requirements as identified in OMB Circular A-133.
- 5.4.1.2. Ensure the Department is provided with access that includes, but is not limited to:
  - 5.5.1.2.1.1 Data;
  - 5.5.1.2.1.2 Financial records;
  - 5.5.1.2.1.3 Scheduled access to Contractor work sites/locations/work spaces and associated facilities;
  - 5.5.1.2.1.4 Unannounced access to Contractor work sites/locations/work spaces and associated facilities;
  - 5.5.1.2.1.5 Scheduled phone access to Contractor principals and staff; and
  - 5.5.1.2.1.6 Timely unscheduled phone response by Contractor principals and staff.

### 5.5. Quarterly Reports

The Contractor shall, on a quarterly basis, provide copies of program reports and statistics, to the Department including, but not limited to:

- 5.5.1. The number of visits made;
- 5.5.2. The number of Clients being visited;
- 5.5.3. The number of Companions participating in the program; and
- 5.5.4. The number of hours Companions spend with Clients.

### 5.6. Program Plans

The Contractor shall submit the following to the Department within thirty (30) days of approval of the Contract Agreement:

- 5.6.1. Qualifications for the Senior Companion Program as established by the Corporation;





- 
- 5.6.2. Program Measures and Reporting Requirements as established by the Corporation;
  - 5.6.3. Staffing Plan;
  - 5.6.4. Transition plan;
  - 5.6.5. Quality Assurance Plan and describe your method/process for obtaining quality satisfaction data from volunteers and other recipients of services;
  - 5.6.6. Sample of the Annual Survey used to determine the program satisfaction;
  - 5.6.7. Plan for Equal Access to Services;
  - 5.6.8. Termination Plan/Assurance; and
  - 5.6.9. Consumer Grievance Process.
- 
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*[Handwritten Signature]*  
*[Handwritten Date: 9/2/16]*



**Exhibit B**

**Method and Conditions Precedent to Payment**

1. The Department shall pay the Contractor an amount not to exceed the Price limitation on Form P-37, Block 1.8, General Provisions, for the services provided by the Contractor pursuant to Exhibit A, Scope of Services.
2. The funding source for this Contract is 100% General Funds.
3. The Contractor shall comply with the necessary steps established by the Department for making payments to vendors using Electronic Funds Transfer (EFT).
4. The Department may require certain payments returned to the State if:
  - 4.1. The final reconciliation of the payments made by the Department under this contract show that the payments exceed the actual units served;
  - 4.2. Services are not being provided in accordance with the requirements and scope of services outlined in Exhibit A; or
  - 4.3. Should the Department choose to execute the right to terminate the contract as stated in Exhibit C-1, Additional Special Provisions.
5. Review of the State Disallowance of Costs: At any time during the performance of the services, and upon receipt of required reports, or Contractor Site Review Reports, the Department may review costs incurred by the Contractor and all payments made to date. Upon such review, the Department shall disallow any costs incurred that are determined to not be allowable or are determined to be for services to ineligible clients and shall, by written notice specifying the disallowed costs, inform the contractor of any such disallowance. If the Department disallows costs for which payment has not yet been made, it shall refuse to pay such costs.
6. Payment for Services shall be made as follows:
  - 6.1. The Contractor shall file a monthly, completed and signed Senior Companion Invoice with the Department.
  - 6.2. Expenses shall be reported for reimbursement by budget line item in Exhibits B-1 through B-3.
  - 6.3. The Department shall make payment to the Contractor within thirty (30) days of receipt of each Invoice submitted pursuant to this Agreement.

*DE*

9/12/16



**Exhibit B**

6.4. Invoices identified in Section 4.1 shall be submitted to:

Department of Health and Human Services

Shawn Martin

Financial Management

Bureau of Elderly and Adult Services

129 Pleasant Street, Brown Building

Concord, NH 03301

Shawn.Martin@dhhs.nh.gov

7. A final payment request shall be submitted no later than forty (40) days after the end of the Contract.
8. Notwithstanding anything to the contrary herein, the Contractor agrees that funding under this Contract may be withheld, in whole or in part, in the event of noncompliance with any State or Federal law, rule, or regulation applicable to the services provided, or if the said services have not been completed in accordance with the terms and conditions of this Contract.
9. Notwithstanding paragraph 18 of the Form P-37, General Provisions, an amendment limited to transfer the funds within the budget and within the price limitation, can be made by written agreement of both parties and may be made without obtaining approval of the Governor and Executive Council.

*RM*  
*6/12/10*

**Exhibit B-1/BUDGET**  
**October 1, 2016 - June 30, 2017**

**New Hampshire Department of Health and Human Services**  
**COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Contractor Name: Community Action Program Belknap-Merrimack Counties, Inc.

Budget Request for: Senior Companion Program

Budget Period: October 1, 2016 through June 30, 2017

| Line Item                               | Direct Incremental  | Indirect Fixed | Total               | Allocation Method for Indirect Fixed Cost |
|---|---------------------|----------------|---------------------|---|
| 1. Total Salary/Wages                   | \$ 8,517.00         | \$ -           | \$ 8,517.00         |   |
| 2. Employee Benefits                    | \$ 1,992.00         | \$ -           | \$ 1,992.00         |   |
| 3. Consultants                          | \$ -                | \$ -           | \$ -                |   |
| 4. Equipment:                           | \$ -                | \$ -           | \$ -                |   |
| Rental                                  | \$ -                | \$ -           | \$ -                |   |
| Repair and Maintenance                  | \$ -                | \$ -           | \$ -                |   |
| Purchase/Depreciation                   | \$ -                | \$ -           | \$ -                |   |
| 5. Supplies:                            | \$ -                | \$ -           | \$ -                |   |
| Educational                             | \$ -                | \$ -           | \$ -                |   |
| Lab                                     | \$ -                | \$ -           | \$ -                |   |
| Pharmacy                                | \$ -                | \$ -           | \$ -                |   |
| Medical                                 | \$ -                | \$ -           | \$ -                |   |
| Office                                  | \$ -                | \$ -           | \$ -                |   |
| 6. Travel                               | \$ -                | \$ -           | \$ -                |   |
| 7. Occupancy                            | \$ -                | \$ -           | \$ -                |   |
| 8. Current Expenses                     | \$ -                | \$ -           | \$ -                |   |
| Telephone                               | \$ -                | \$ -           | \$ -                |   |
| Postage                                 | \$ -                | \$ -           | \$ -                |   |
| Subscriptions                           | \$ -                | \$ -           | \$ -                |   |
| Audit and Legal                         | \$ -                | \$ -           | \$ -                |   |
| Insurance                               | \$ -                | \$ -           | \$ -                |   |
| Board Expenses                          | \$ -                | \$ -           | \$ -                |   |
| 9. Software                             | \$ -                | \$ -           | \$ -                |   |
| 10. Marketing/Communications            | \$ -                | \$ -           | \$ -                |   |
| 11. Staff Education and Training        | \$ -                | \$ -           | \$ -                |   |
| 12. Subcontracts/Agreements             | \$ -                | \$ -           | \$ -                |   |
| 13. Other (specific details mandatory): | \$ -                | \$ -           | \$ -                |   |
| Volunteer Travel                        | \$ 11,991.00        | \$ -           | \$ 11,991.00        |   |
|   | \$ -                | \$ -           | \$ -                |   |
|   | \$ -                | \$ -           | \$ -                |   |
| <b>TOTAL</b>                            | <b>\$ 22,500.00</b> | <b>\$ -</b>    | <b>\$ 22,500.00</b> |   |

Indirect As A Percent of Direct

0.0%

**Exhibit B-2/BUDGET**  
**July 1, 2017 - June 30, 2018**

**New Hampshire Department of Health and Human Services**  
**COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Contractor Name: Community Action Program Belknap-Merrimack Counties, Inc.

Budget Request for: Senior Companion Program

Budget Period: July 1, 2017 through June 30, 2018

| Line Item                               | Direct Incremental  | Indirect Allocated | Total               | Allocation Method for Indirect Costs |
|---|---------------------|--------------------|---------------------|--------------------------------------|
| 1. Total Salary/Wages                   | \$ 11,357.00        | \$ -               | \$ 11,357.00        |                                      |
| 2. Employee Benefits                    | \$ 2,654.00         | \$ -               | \$ 2,654.00         |                                      |
| 3. Consultants                          | \$ -                | \$ -               | \$ -                |                                      |
| 4. Equipment:                           | \$ -                | \$ -               | \$ -                |                                      |
| Rental                                  | \$ -                | \$ -               | \$ -                |                                      |
| Repair and Maintenance                  | \$ -                | \$ -               | \$ -                |                                      |
| Purchase/Depreciation                   | \$ -                | \$ -               | \$ -                |                                      |
| 5. Supplies:                            | \$ -                | \$ -               | \$ -                |                                      |
| Educational                             | \$ -                | \$ -               | \$ -                |                                      |
| Lab                                     | \$ -                | \$ -               | \$ -                |                                      |
| Pharmacy                                | \$ -                | \$ -               | \$ -                |                                      |
| Medical                                 | \$ -                | \$ -               | \$ -                |                                      |
| Office                                  | \$ -                | \$ -               | \$ -                |                                      |
| 6. Travel                               | \$ -                | \$ -               | \$ -                |                                      |
| 7. Occupancy                            | \$ -                | \$ -               | \$ -                |                                      |
| 8. Current Expenses                     | \$ -                | \$ -               | \$ -                |                                      |
| Telephone                               | \$ -                | \$ -               | \$ -                |                                      |
| Postage                                 | \$ -                | \$ -               | \$ -                |                                      |
| Subscriptions                           | \$ -                | \$ -               | \$ -                |                                      |
| Audit and Legal                         | \$ -                | \$ -               | \$ -                |                                      |
| Insurance                               | \$ -                | \$ -               | \$ -                |                                      |
| Board Expenses                          | \$ -                | \$ -               | \$ -                |                                      |
| 9. Software                             | \$ -                | \$ -               | \$ -                |                                      |
| 10. Marketing/Communications            | \$ -                | \$ -               | \$ -                |                                      |
| 11. Staff Education and Training        | \$ -                | \$ -               | \$ -                |                                      |
| 12. Subcontracts/Agreements             | \$ -                | \$ -               | \$ -                |                                      |
| 13. Other (specific details mandatory): | \$ -                | \$ -               | \$ -                |                                      |
| Volunteer Travel                        | \$ 15,989.00        | \$ -               | \$ 15,989.00        |                                      |
|   | \$ -                | \$ -               | \$ -                |                                      |
|   | \$ -                | \$ -               | \$ -                |                                      |
| <b>TOTAL</b>                            | <b>\$ 30,000.00</b> | <b>\$ -</b>        | <b>\$ 30,000.00</b> |                                      |

Indirect As A Percent of Direct

0.0%

**Exhibit B-3/BUDGET**  
**July 1, 2018 - September 30, 2018**

**New Hampshire Department of Health and Human Services**  
**COMPLETE ONE BUDGET FORM FOR EACH BUDGET PERIOD**

Contractor Name: Community Action Program Belknap-Merrimack Counties, Inc.

Budget Request for: Senior Companion Program

Budget Period: July 1, 2018 through September 30, 2018

| Line Item                               | Direct Incremental | Indirect Fixed | Total              | Allocation Method for Indirect Fixed Cost |
|---|--------------------|----------------|--------------------|---|
| 1. Total Salary/Wages                   | \$ 2,839.00        | \$ -           | \$ 2,839.00        |   |
| 2. Employee Benefits                    | \$ 664.00          | \$ -           | \$ 664.00          |   |
| 3. Consultants                          | \$ -               | \$ -           | \$ -               |   |
| 4. Equipment:                           | \$ -               | \$ -           | \$ -               |   |
| Rental                                  | \$ -               | \$ -           | \$ -               |   |
| Repair and Maintenance                  | \$ -               | \$ -           | \$ -               |   |
| Purchase/Depreciation                   | \$ -               | \$ -           | \$ -               |   |
| 5. Supplies:                            | \$ -               | \$ -           | \$ -               |   |
| Educational                             | \$ -               | \$ -           | \$ -               |   |
| Lab                                     | \$ -               | \$ -           | \$ -               |   |
| Pharmacy                                | \$ -               | \$ -           | \$ -               |   |
| Medical                                 | \$ -               | \$ -           | \$ -               |   |
| Office                                  | \$ -               | \$ -           | \$ -               |   |
| 6. Travel                               | \$ -               | \$ -           | \$ -               |   |
| 7. Occupancy                            | \$ -               | \$ -           | \$ -               |   |
| 8. Current Expenses                     | \$ -               | \$ -           | \$ -               |   |
| Telephone                               | \$ -               | \$ -           | \$ -               |   |
| Postage                                 | \$ -               | \$ -           | \$ -               |   |
| Subscriptions                           | \$ -               | \$ -           | \$ -               |   |
| Audit and Legal                         | \$ -               | \$ -           | \$ -               |   |
| Insurance                               | \$ -               | \$ -           | \$ -               |   |
| Board Expenses                          | \$ -               | \$ -           | \$ -               |   |
| 9. Software                             | \$ -               | \$ -           | \$ -               |   |
| 10. Marketing/Communications            | \$ -               | \$ -           | \$ -               |   |
| 11. Staff Education and Training        | \$ -               | \$ -           | \$ -               |   |
| 12. Subcontracts/Agreements             | \$ -               | \$ -           | \$ -               |   |
| 13. Other (specific details mandatory): | \$ -               | \$ -           | \$ -               |   |
| Volunteer Travel                        | \$ 3,997.00        | \$ -           | \$ 3,997.00        |   |
|   | \$ -               | \$ -           | \$ -               |   |
|   | \$ -               | \$ -           | \$ -               |   |
| <b>TOTAL</b>                            | <b>\$ 7,500.00</b> | <b>\$ -</b>    | <b>\$ 7,500.00</b> |   |

Indirect As A Percent of Direct

0.0%



**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;

*[Handwritten Signature]*  
Date *9/12/16*



- 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.

*[Handwritten Signature]*  
Date *9/12/16*



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 (EEO):** The Contractor will provide an Equal Employment Opportunity Plan (EEO) 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



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.



**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 two (2) additional years, subject to the continued availability of funds, satisfactory performance of services and approval by the Governor and Executive Council.

*R-C*

*9/12/15*



**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 GRANTEES 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

A-E  
9/12/16

New Hampshire Department of Health and Human Services  
Exhibit D



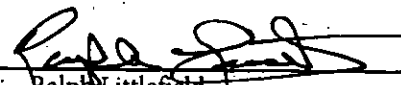
- has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- 1.6. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph 1.4.2, with respect to any employee who is so convicted
    - 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:  
Community Action Program Belknap-Merrimack Counties, Inc.

9/12/2016  
Date

  
Name: Ralph Littlefield  
Title: Executive Director



**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:  
Community Action Program Belknap-Merrimack Counties, Inc.

9/12/2016  
Date

  
Name: Ralph Littlefield  
Title: Executive Director



**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

*[Handwritten Signature]*  
*[Handwritten Date: 9/13/16]*





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 (l)(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:  
Community Action Program Belknap-Merrimack Counties, Inc.

9/12/2016  
Date

  
Name: Ralph Littlefield  
Title: Executive Director

Contractor Initials RL  
Date 9/12/16



**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

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

Contractor Initials

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9/12/10

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:

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

Contractor Name:  
Community Action Program Belknap-Merrimack Counties, Inc.

9/12/2016  
Date

  
Name: Ralph Littlefield  
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 RL



**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:  
Community Action Program Belknap-Merrimack Counties, Inc.

9/12/2016  
Date

  
Name: Ralph Littlefield  
Title: Executive Director



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

- 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

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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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

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

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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) I, 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.

\_\_\_\_\_  
The State

Maurice Ryan  
Signature of Authorized Representative

Maurice Ryan  
Name of Authorized Representative

Director, Office of Human Services  
Title of Authorized Representative

9/14/16  
Date

Community Action Program  
Belknap-Merrimack Counties, Inc.  
\_\_\_\_\_  
Name of the Contractor

Ralph Littlefield  
Signature of Authorized Representative

Ralph Littlefield  
Name of Authorized Representative

Executive Director  
Title of Authorized Representative

9/12/2016  
Date

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9/12/16



**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 (DUNS #)
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:  
Community Action Program Belknap-Merrimack Counties, Inc.

9/12/2016  
Date

  
Name: > Ralph Littlefield  
Title: Executive Director



**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: 07-399-7504
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?

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?

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: _____ | Amount: _____ |
| Name: _____ | Amount: _____ |
| Name: _____ | Amount: _____ |
| Name: _____ | Amount: _____ |
| Name: _____ | Amount: _____ |