



MARGARET WOOD HASSAN  
GOVERNOR

**STATE OF NEW HAMPSHIRE**  
**OFFICE OF ENERGY AND PLANNING**  
107 Pleasant Street, Johnson Hall  
Concord, NH 03301-3834  
Telephone: (603) 271-2155  
Fax: (603) 271-2615



www.nh.gov/oep

September 1, 2015

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

### REQUESTED ACTION

1) Authorize the Office of Energy and Planning (OEP) to enter into a **SOLE SOURCE** contract with Southern New Hampshire Services, Inc., (VC #177198), Manchester, NH, in the amount of \$10,955,842.00 for the Fuel Assistance Program effective October 1, 2015 through September 30, 2016, upon approval of Governor and Executive Council. 100% Federal Funds.

Funding is available in the following account, with the authority to adjust encumbrances in each of the State fiscal years through the Budget Office, if needed and justified:

	<u>FY 2016</u>	<u>FY 2017</u>
<u>Office of Energy &amp; Planning, Fuel Assistance</u>		
01-02-02-024010-77050000	\$6,573,505.00	\$4,382,337.00
074-500587 Grants for Pub Assist & Relief		

2) Further request authorization to advance Southern New Hampshire Services, Inc. \$1,012,611.00 from the above-referenced contract amount.

### EXPLANATION

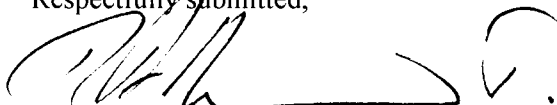
This contract is **SOLE SOURCE** based on the historical performance of the Community Action Agencies (CAA) in the New Hampshire Fuel Assistance Program (FAP), their outreach and client service capabilities, the synergies that benefit the FAP as a result of the five statewide CAAs' implementation of several other federal assistance programs, and the infrastructure that is already in place to deliver FAP services. OEP proposes to continue to subcontract with the five CAAs who have successfully provided FAP services at the local level for more than three decades. The CAAs work closely with the OEP FAP Director in the implementation of the program.

FAP is a statewide program, funded by a Federal Low Income Home Energy Assistance Program (LIHEAP) Block Grant, and works to make home energy more affordable for income-qualified New Hampshire families, including those who are elderly or disabled. Program funds are targeted to low income households with high energy burdens. The current maximum income level is 200% of Federal Poverty Guidelines (FPG), which is \$48,500.00 for a family of four. The average FAP benefit during the last program year was \$662.92.

The LIHEAP program operates on an October 1, 2015 to September 30, 2016 program year, but at this time Congress has not finalized appropriations for the Federal fiscal year 2016. Therefore, the contract amount for each of the Community Action Agencies is based on OEP's best estimate of anticipated Federal funding, including carryover funds from the prior program year. No funds will be obligated under this contract unless federal monies are available to be expended. The proposed advance of funds will enable the CAA to operate the program between monthly reimbursements from the State.

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

Respectfully submitted,



for Meredith A. Hatfield  
Director

Richard Minard

MAH/CML

Enclosure

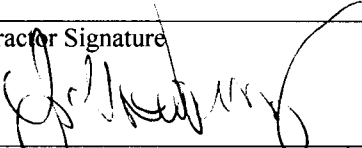
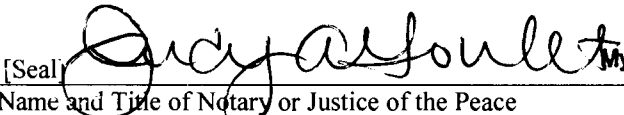
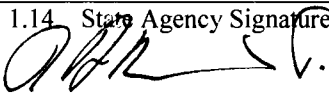
Notice: This agreement and all of its attachments shall become public upon submission to Governor and Executive Council for approval. Any information that is private, confidential or proprietary must be clearly identified to the agency and agreed to in writing prior to signing the contract.

**AGREEMENT**

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

**GENERAL PROVISIONS**

**1. IDENTIFICATION.**

1.1 State Agency Name Office of Energy and Planning		1.2 State Agency Address 107 Pleasant Street, Johnson Hall Concord, New Hampshire 03301-8501	
1.3 Contractor Name Southern New Hampshire Services, Inc.		1.4 Contractor Address PO Box 5040 Manchester, NH 03108	
1.5 Contractor Phone Number (603) 668-8010	1.6 Account Number 01-02-02-024010-77050000 074-500587 Posting Activity # 02E16A	1.7 Completion Date September 30, 2016	1.8 Price Limitation \$10,955,842
1.9 Contracting Officer for State Agency Celeste Lovett, Fuel Assistance Program Manager		1.10 State Agency Telephone Number (603) 271-2155	
1.11 Contractor Signature 		1.12 Name and Title of Contractor Signatory Gale F. Hennessy, Executive Director	
1.13 Acknowledgement: State of <u>NH</u> , County of <u>Hillsborough</u> On <u>August 26, 2015</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  <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;">  <p>[Seal]</p> </div> <div style="text-align: center;"> <p><b>JUDY A. GOULET</b> Notary Public - New Hampshire My Commission Expires May 8, 2019</p> </div> </div>			
1.13.2 Name and Title of Notary or Justice of the Peace <u>Judy A Goulet Bookkeeper</u>			
1.14 State Agency Signature 		1.15 Name and Title of State Agency Signatory <u>Richard Minard, Dept Director</u>	
1.16 Approval by the N.H. Department of Administration, Division of Personnel (if applicable)  By: _____ Director, On: _____			
1.17 Approval by the Attorney General (Form, Substance and Execution) (if applicable)  By: <u>Ch. G. Co.</u> On: <u>8/31/15</u>			
1.18 Approval by the Governor and Executive Council (if applicable)  By: _____ On: _____			

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

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

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

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

**4. CONDITIONAL NATURE OF AGREEMENT.**

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

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

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

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

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

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

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

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

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

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

**7. PERSONNEL.**

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

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

Agreement. This provision shall survive termination of this Agreement.

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

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

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

8.1.1 failure to perform the Services satisfactorily or on schedule;

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

#### **14. INSURANCE.**

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

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

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

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

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.

**EXHIBIT A**  
**SCOPE OF SERVICES**

The Contractor agrees to provide Fuel Assistance Program Services to qualified low income individuals, and agrees to perform all such Services and other work necessary to operate the Program in accordance with the requirements of this contract, the principles and objectives set forth in the Fuel Assistance Program Procedures Manual and other guidance as determined by OEP.

Fuel Assistance Program (FAP) Services will be defined to include the following categories:

1. Outreach, eligibility, determination and certification of FAP applicants.
2. Payments directly to energy vendors:
  - a. Reimbursement for goods and services delivered
  - b. Lines of credit
  - c. Budget plan payments
3. Payments directly to landlords, via vouchers, for renters who pay their energy costs as undefined portions of their rent.
4. Payments directly to clients only when deemed appropriate and necessary as defined in the Procedures Manual.
5. Emergency Assistance in the form of reimbursement for goods or services delivered in accordance with paragraphs 3 and 4 above.

**EXHIBIT B  
CONTRACT PRICE**

In consideration of the satisfactory performance of the services as determined by the State, the State agrees to pay over to the Contractor the sum of \$10,955,842 (which hereinafter is referred to as the "Grant").

Upon the State's receipt of the 2016 Low Income Home Energy Assistance Program grant from the US Department of Health and Human Services, the following funds will be authorized:

\$900,884 for administrative costs, of which \$112,611 will be issued as a cash advance,  
\$9,692,303 for program costs, of which \$900,000 will be issued as a cash advance,  
\$362,655 for Assurance 16.

The dates for this contract are October 1, 2015 through September 30, 2016.

Approval to obligate (Exhibit I) the above awarded funds will be provided in writing by the Office of Energy and Planning to the Contractor as the Federal funds become available. Drawdowns from the balance of funds will be made to the Contractor only after written documentation of cash need is submitted to the State. Disbursement of the Grant shall be in accordance with procedures established by the State as detailed in the Fuel Assistance Program Procedures Manual.

CFDA Title: Low Income Home Energy Assistance Program  
CFDA No: 93.568  
Award Name: Low Income Home Energy Assistance Program  
Federal Agency: Health & Human Services  
Administration for Children and Families  
Office of Community Services



## EXHIBIT C

### SPECIAL PROVISIONS

1. Subparagraph 1.16 of the General Provisions, shall not apply to this agreement.
2. On or before the date set forth in Block 1.7 of the General Provisions the Contractor shall deliver to the state an independent audit of the Contractor's entire agency by a qualified independent auditor in good standing with the state and federal government.
3. This audit shall be conducted in accordance with the audit requirements of Office of Management and Budget (OMB) Circular A-133 Audits of Institutions of Higher Education, and other Non-profit Organizations, and the Fuel Assistance Program shall be considered a "major program" for purposes of this audit.
4. This audit report shall include a schedule of revenues and expenditures by contract or grant number of all expenditures during the Contractor's fiscal year. The Contractor shall utilize a competitive bidding process to choose a qualified financial auditor at least every four years.
5. The audit report shall include a schedule of prior years' questioned costs along with an agency response to the current status of the prior years' questioned costs. Copies of all OMB letters written as a result of audits shall be forwarded to OEP. The audit shall be forwarded to OEP within one month of the time of receipt by the agency accompanied by an action plan for each finding or questioned cost.
6. Delete the following from paragraph 10 of the General Provisions, "To the extent possible, the form, subject matter, content, and number of copies of the Termination Report shall be identical to those of any Final Report described in Exhibit A."
7. The costs charged under this contract shall be determined as allowable under the cost principles detailed in 10 CFR 600.103 and OMB Circular A-122.
8. Program and financial records pertaining to this contract shall be retained by the agency for 3 (three) years from the date of submission of the final expenditure report or until all audit findings have been resolved.
9. In accordance with Public Law 103-333, the "Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act of 1995", the following provisions are applicable to this grant award:
  - a) Section 507: "Purchase of American –Made Equipment and Products-It is the sense of the Congress that, to the greatest extent practicable, all equipment and products purchased with funds made available in this Act should be American-made."

- b) Section 508: “ When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all States receiving Federal funds, including but not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.”

10. CLOSE OUT OF CONTRACT. All final required reports and reimbursement requests shall be submitted to the State within sixty (60) days of the completion date (Agreement Block 1.6).

11. ADVANCES. Advance funds must be used solely for appropriate Fuel Assistance Program expenditures. Advance program funds are to be used only for Fuel Assistance Program vendor payments. All Fuel Assistance Program payments, including Advance program payments, must be transferred from the Community Action Agency’s general operating account into a specific Fuel Assistance Program account within 48 hours after being received electronically from the State. CAAs must submit the bank account number of the designated bank account for the advance funds to OEP prior to the electronic submission of the funds to the CAA. Unspent advance program funds must remain in the FAP dedicated account at all times and cannot be comingled with any other CAA funds. CAAs are required to submit a complete electronic copy of the FAP dedicated account bank statement to OEP on a monthly basis.

# New Hampshire Office of Energy and Planning

## STANDARD EXHIBIT D

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:

### **CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS 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 US DEPARTMENT OF LABOR US DEPARTMENT OF ENERGY**

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:

Director, New Hampshire Office of Energy and Planning,  
107 Pleasant Street, Johnson Hall, Concord, NH 03301

- (A) The grantee certifies that it will or will continue to provide a drug-free workplace by:
- (a) 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;
  - (b) Establishing an ongoing drug-free awareness program to inform employees about—
    - (1) The dangers of drug abuse in the workplace;
    - (2) The grantee's policy of maintaining a drug-free workplace;
    - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
    - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - (c) 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);
  - (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will—
    - (1) Abide by the terms of the statement; and

(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;

**CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS  
ALTERNATIVE I - FOR GRANTEES OTHER THAN INDIVIDUALS, cont'd**

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

- (e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(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 has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted—
- (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
  - (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;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).
- (B) 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)

40 Pine Street  
Manchester, NH 03103

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

Southern New Hampshire Services, Inc.

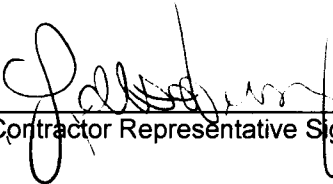
October 1, 2015 to September 30, 2016


Contractor Name

Period Covered by this Certification

Gale F. Hennessy, Executive Director

Name and Title of Authorized Contractor Representative

  
Contractor Representative Signature

  
Date

**New Hampshire Office of Energy and Planning**

**STANDARD EXHIBIT E**

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:

**CERTIFICATION REGARDING LOBBYING**

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

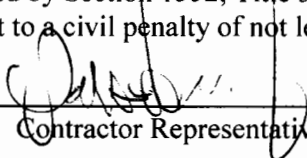
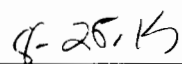
Programs (indicate applicable program covered):  
LIHEAP

Contract Period: October 1, 2015 to September 30, 2016

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.

	Gale F. Hennessy, Executive Director
Contractor Representative Signature	Contractor's Representative Title
Southern New Hampshire Services, Inc.	
Contractor Name	Date

# New Hampshire Office of Energy and Planning

## STANDARD EXHIBIT F

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:

### **CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS - PRIMARY COVERED TRANSACTIONS**

#### *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 Office of Energy and Planning's (OEP) 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 OEP 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, OEP may terminate this transaction for cause or default.
- (4) The prospective primary participant shall provide immediate written notice to the OEP 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 OEP.
- (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 OEP, 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 Non-procurement 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 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.
- (9) 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, OEP may terminate this transaction for cause or default.

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER  
RESPONSIBILITY MATTERS - PRIMARY COVERED TRANSACTIONS, cont'd**

*Certification Regarding Debarment, Suspension, and Other  
Responsibility Matters - Primary Covered Transactions*

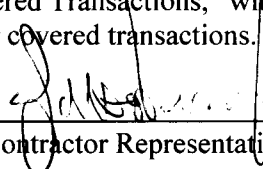
- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
  - (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - (b) 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;
  - (c) are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification; and
  - (d) 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.
  
- (2) 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).

***Certification Regarding Debarment, Suspension, Ineligibility and  
Voluntary Exclusion - Lower Tier Covered Transactions***  
(To Be Supplied to Lower Tier Participants)

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:

- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
  
- (b) 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).

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 Representative Signature	Gale F. Hennessy, Executive Director _____ Contractor's Representative Title
Southern New Hampshire Services, Inc. _____ Contractor Name	8-26-16 _____ Date

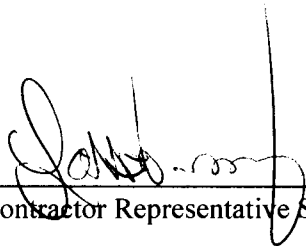
**New Hampshire Office of Energy and Planning**

**STANDARD EXHIBIT G**

**CERTIFICATION REGARDING THE  
AMERICANS WITH DISABILITIES ACT COMPLIANCE**

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:

By signing and submitting this proposal (contract) the Contractor agrees to make reasonable efforts to comply with all applicable provisions of the Americans with Disabilities Act of 1990.



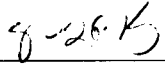
Contractor Representative Signature

Gale F. Hennessy, Executive Director

Contractor's Representative Title

Southern New Hampshire Services, Inc.

Contractor Name



Date



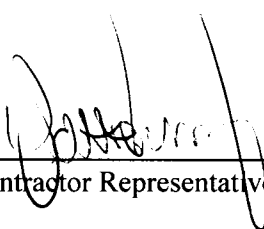
**New Hampshire Office of Energy and Planning**

**STANDARD EXHIBIT H**

**CERTIFICATION  
Public Law 103-227, Part C  
ENVIRONMENTAL TOBACCO SMOKE**

In accordance with Part C of Public Law 103-227, the "Pro-Children Act of 1994", smoking may not be permitted in any portion of any indoor facility owned or regularly used 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. Federal programs include grants, cooperative agreements, loans and loan guarantees, and contracts. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions or facilities and used for inpatient drug or alcohol treatment.

The above language must be included in any sub-awards that contain provisions for children's services and that all sub-grantees shall certify compliance accordingly. Failure to comply with the provisions of this law may result in the imposition of a civil monetary penalty of up to \$1,000 per day.

  
\_\_\_\_\_  
Contractor Representative Signature

Gale F. Hennessy, Executive Director  
\_\_\_\_\_  
Contractor's Representative Title

Southern New Hampshire Services, Inc.  
\_\_\_\_\_  
Contractor Name

  
\_\_\_\_\_  
Date

FAP Approval to Obligate  
Date

Example Only

Exhibit I

	ADMIN.	FA PROGRAM	ELDERLY	HHS-WAP	TOTAL
<b>CONTRACTED BUDGET</b>	<b>553,035.00</b>	<b>9,576,150.00</b>	<b>5,250.00</b>	<b>500,001.00</b>	<b>10,634,436.00</b>
EXPECTED BUDGET	553,035.00	7,422,150.00	5,250.00	500,001.00	8,480,436.00
PREVIOUSLY OBLIGATED	0.00	0.00	0.00	0.00	0.00
<b>THIS APPROVAL TO OBLIGATE</b>	<b>553,035.00</b>	<b>7,422,150.00</b>	<b>5,250.00</b>	<b>500,001.00</b>	<b>8,480,436.00</b>
TOTAL AVAILABLE TO OBLIGATE	553,035.00	7,422,150.00	5,250.00	500,001.00	8,480,436.00
<b>NOT AUTHORIZED TO OBLIGATE</b>	<b>0.00</b>	<b>2,154,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,154,000.00</b>

BMCA  
Date

	ADMIN.	FA PROGRAM	ELDERLY	HHS-WAP	TOTAL
<b>CONTRACTED BUDGET</b>	<b>81,401.00</b>	<b>1,412,466.00</b>	<b>1,000.00</b>	<b>75,618.00</b>	<b>1,570,485.00</b>
EXPECTED BUDGET	81,401.00	1,092,466.00	1,000.00	75,618.00	1,250,485.00
PREVIOUSLY OBLIGATED	0.00	0.00	0.00	0.00	0.00
<b>THIS APPROVAL TO OBLIGATE</b>	<b>81,401.00</b>	<b>1,092,466.00</b>	<b>1,000.00</b>	<b>75,618.00</b>	<b>1,250,485.00</b>
TOTAL AVAILABLE TO OBLIGATE	81,401.00	1,092,466.00	1,000.00	75,618.00	1,250,485.00
<b>NOT AUTHORIZED TO OBLIGATE</b>	<b>0.00</b>	<b>320,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>320,000.00</b>

RCCA  
Date

	ADMIN.	FA PROGRAM	ELDERLY	HHS-WAP	TOTAL
<b>CONTRACTED BUDGET</b>	<b>79,023.00</b>	<b>1,402,551.00</b>	<b>750.00</b>	<b>76,444.00</b>	<b>1,558,768.00</b>
EXPECTED BUDGET	79,023.00	1,060,551.00	750.00	76,444.00	1,216,768.00
PREVIOUSLY OBLIGATED	0.00	0.00	0.00	0.00	0.00
<b>THIS APPROVAL TO OBLIGATE</b>	<b>79,023.00</b>	<b>1,060,551.00</b>	<b>750.00</b>	<b>76,444.00</b>	<b>1,216,768.00</b>
TOTAL AVAILABLE TO OBLIGATE	79,023.00	1,060,551.00	750.00	76,444.00	1,216,768.00
<b>NOT AUTHORIZED TO OBLIGATE</b>	<b>0.00</b>	<b>342,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>342,000.00</b>

SNHS  
Date

	ADMIN.	FA PROGRAM	ELDERLY	HHS-WAP	TOTAL
<b>CONTRACTED BUDGET</b>	<b>135,549.00</b>	<b>2,179,169.00</b>	<b>1,000.00</b>	<b>122,070.00</b>	<b>2,437,788.00</b>
EXPECTED BUDGET	135,549.00	1,819,169.00	1,000.00	122,070.00	2,077,788.00
PREVIOUSLY OBLIGATED	0.00	0.00	0.00	0.00	0.00
<b>THIS APPROVAL TO OBLIGATE</b>	<b>135,549.00</b>	<b>1,819,169.00</b>	<b>1,000.00</b>	<b>122,070.00</b>	<b>2,077,788.00</b>
TOTAL AVAILABLE TO OBLIGATE	135,549.00	1,819,169.00	1,000.00	122,070.00	2,077,788.00
<b>NOT AUTHORIZED TO OBLIGATE</b>	<b>0.00</b>	<b>360,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>360,000.00</b>

SWCS  
Date

	ADMIN.	FA PROGRAM	ELDERLY	HHS-WAP	TOTAL
<b>CONTRACTED BUDGET</b>	<b>70,689.00</b>	<b>1,248,699.00</b>	<b>750.00</b>	<b>63,621.00</b>	<b>1,383,759.00</b>
EXPECTED BUDGET	70,689.00	948,699.00	750.00	63,621.00	1,083,759.00
PREVIOUSLY OBLIGATED	0.00	0.00	0.00	0.00	0.00
<b>THIS APPROVAL TO OBLIGATE</b>	<b>70,689.00</b>	<b>948,699.00</b>	<b>750.00</b>	<b>63,621.00</b>	<b>1,083,759.00</b>
TOTAL AVAILABLE TO OBLIGATE	70,689.00	948,699.00	750.00	63,621.00	1,083,759.00
<b>NOT AUTHORIZED TO OBLIGATE</b>	<b>0.00</b>	<b>300,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>300,000.00</b>

CAPSC  
Date

	ADMIN.	FA PROGRAM	ELDERLY	HHS-WAP	TOTAL
<b>CONTRACTED BUDGET</b>	<b>55,182.00</b>	<b>1,085,582.00</b>	<b>750.00</b>	<b>48,635.00</b>	<b>1,190,149.00</b>
EXPECTED BUDGET	55,182.00	740,582.00	750.00	48,635.00	845,149.00
PREVIOUSLY OBLIGATED	0.00	0.00	0.00	0.00	0.00
<b>THIS APPROVAL TO OBLIGATE</b>	<b>55,182.00</b>	<b>740,582.00</b>	<b>750.00</b>	<b>48,635.00</b>	<b>845,149.00</b>
TOTAL AVAILABLE TO OBLIGATE	55,182.00	740,582.00	750.00	48,635.00	845,149.00
<b>NOT AUTHORIZED TO OBLIGATE</b>	<b>0.00</b>	<b>345,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>345,000.00</b>

TCCA  
Date

	ADMIN.	FA PROGRAM	ELDERLY	HHS-WAP	TOTAL
<b>CONTRACTED BUDGET</b>	<b>131,191.00</b>	<b>2,247,683.00</b>	<b>1,000.00</b>	<b>113,613.00</b>	<b>2,493,487.00</b>
EXPECTED BUDGET	131,191.00	1,760,683.00	1,000.00	113,613.00	2,006,487.00
PREVIOUSLY OBLIGATED	0.00	0.00	0.00	0.00	0.00
<b>THIS APPROVAL TO OBLIGATE</b>	<b>131,191.00</b>	<b>1,760,683.00</b>	<b>1,000.00</b>	<b>113,613.00</b>	<b>2,006,487.00</b>
TOTAL AVAILABLE TO OBLIGATE	131,191.00	1,760,683.00	1,000.00	113,613.00	2,006,487.00
<b>NOT AUTHORIZED TO OBLIGATE</b>	<b>0.00</b>	<b>487,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>487,000.00</b>

New Hampshire Office of Energy and Planning

STANDARD EXHIBIT J

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

The Federal Funding Accountability and Transparency Act (FFATA) requires prime awardees of individual Federal grants equal to or greater than \$25,000 and awarded on or after October 1, 2010, to report on data related to executive compensation and associated first-tier sub-grants of \$25,000 or more. If the initial award is below \$25,000 but subsequent grant modifications result in a total award equal to or over \$25,000, the award is subject to the FFATA reporting requirements, as of the date of the award.

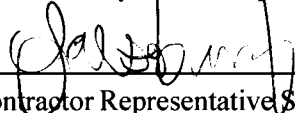
In accordance with 2 CFR Part 170 (*Reporting Subaward and Executive Compensation Information*), the Office of Energy and Planning (OEP) must report the following information for any subaward or contract award subject to the FFATA reporting requirements:


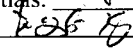
- 1) Name of entity
- 2) Amount of award
- 3) Funding agency
- 4) NAICS code for contracts / CFDA program number for grants
- 5) Program source
- 6) Award title descriptive of the purpose of the funding action
- 7) Location of the entity
- 8) Principle place of performance
- 9) Unique identifier of the entity (DUNS #)
- 10) Total compensation and names of the top five executives if:
  - a. More than 80% of annual gross revenues are from the Federal government, and those revenues are greater than \$25M annually and
  - b. 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 Office of Energy and Planning and to comply with all applicable provisions of the Federal Financial Accountability and Transparency Act.

	Gale F. Hennessy, Executive Director
(Contractor Representative Signature)	(Authorized Contractor Representative Name & Title)
Southern New Hampshire Services, Inc.	8-26-10
(Contractor Name)	(Date)

Contractor initials:   
Date:   
Page 1 of 2

NH Department of Health and Human Services

STANDARD EXHIBIT J

FORM A

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

1. The DUNS number for your entity is: 088584065

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: \_\_\_\_\_

Contractor initials:     

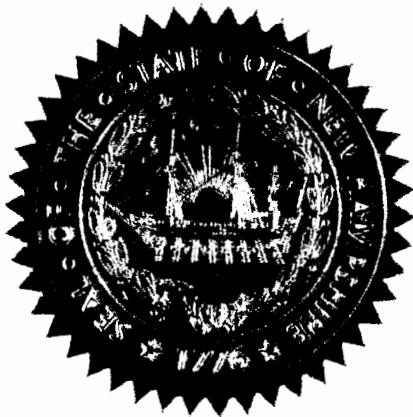
Date: 8-20-19

Page 2 of 2

# 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 SOUTHERN NEW HAMPSHIRE SERVICES INC. is a New Hampshire nonprofit corporation formed May 28, 1965. I further certify that it is in good standing as far as this office is concerned, having filed the return(s) and paid the fees required by law.



In TESTIMONY WHEREOF, I hereto  
set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 3<sup>rd</sup> day of April, A.D. 2015

A handwritten signature in cursive script, appearing to read "Wm Gardner".

William M. Gardner  
Secretary of State

**CERTIFICATE OF VOTES**

**(Corporate Authority)**

I, Jill Jamro, Clerk/Secretary of Southern New Hampshire Services, Inc.  
(name) (Corporation name)

(hereinafter the "Corporation"), a New Hampshire corporation, hereby certify that: (1) I am the duly  
(state)  
elected and acting Clerk/Secretary 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 September 22, 2014, such authority  
(date)  
to be in force and effect until September 30, 2016  
(contract termination date)

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:

<u>Gale F. Hennessy</u> (name)	<u>Executive Director</u> (position)
<u>Michael O'Shea</u> (name)	<u>Fiscal Officer</u> (position)

(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.

IN WITNESS WHEREOF, I have hereunto set my hand as the Clerk/Secretary of the corporation this  
26<sup>th</sup> day of August, 2015.

Jill Jamro  
Clerk/Secretary

STATE OF NEW HAMPSHIRE  
COUNTY OF HILLSBOROUGH

On this 26<sup>th</sup> day of August, 2015, before me, Judy Goulet the  
undersigned Officer, personally appeared Jill Jamro who acknowledged her/himself to be  
the Secretary of Southern New Hampshire Services, Inc., a corporation and that  
she/he as such Secretary 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.

Judy Goulet  
Notary Public

Commission Expiration Date:

**JUDY A. GOULET**  
Notary Public - New Hampshire  
My Commission Expires May 8, 2019



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
1/22/2015

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).

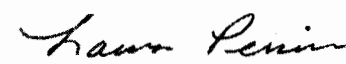
<b>PRODUCER</b> FIAI/Cross Insurance 1100 Elm Street  Manchester NH 03101		<b>CONTACT NAME:</b> Karen Shaughnessy <b>PHONE (A/C, No, Ext):</b> (603) 669-3218 <b>FAX (A/C, No):</b> (603) 645-4331 <b>E-MAIL ADDRESS:</b> kshaughnessy@crossagency.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
		<b>INSURER A:</b> Philadelphia Ins Co	
<b>INSURED</b> Southern NH Services P.O. Box 5040  Manchester NH 03108		<b>INSURER B:</b> MEMIC Indemnity Company	11030
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	
		<b>INSURER F:</b>	

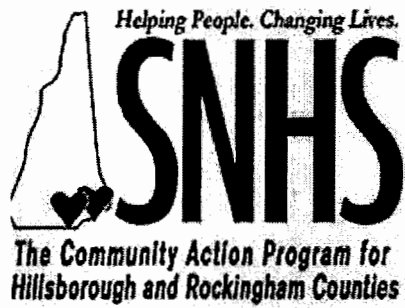
**COVERAGES** **CERTIFICATE NUMBER:** CL14122326339 **REVISION NUMBER:**

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b>			PHPK1273501	12/31/2014	12/31/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
	<input checked="" type="checkbox"/> <b>Employee Benefits</b>						PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> <b>Professional Liab</b>						GENERAL AGGREGATE \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						\$
A	<b>AUTOMOBILE LIABILITY</b>			PHPK1273501	12/31/2014	12/31/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							Undersured motorist \$ 1,000,000
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b>			PHUB484756	12/31/2014	12/31/2015	EACH OCCURRENCE \$ 5,000,000
	<input type="checkbox"/> <b>EXCESS LIAB</b>	<input checked="" type="checkbox"/> OCCUR					AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	<input type="checkbox"/> CLAIMS-MADE					\$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			3102801290			<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A	(3a.) ME & NE	12/31/2014	12/31/2015	E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below			All officers included			E.L. DISEASE - EA EMPLOYEE \$ 500,000
A	<b>Crime</b>			PHPK1273501	12/31/2014	12/31/2015	Fidelity: \$250,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Refer to policy for exclusionary endorsements and special provisions.

<b>CERTIFICATE HOLDER</b>  NH Office of Energy & Planning Johnson Hall 107 Pleasant Street Concord, NH 03301	<b>CANCELLATION</b>  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  Laura Perrin/KS5 
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**SOUTHERN NEW HAMPSHIRE SERVICES, INC.**

**COMBINED FINANCIAL STATEMENTS AND  
SUPPLEMENTARY INFORMATION**

**FOR THE YEARS ENDED JULY 31, 2014 AND 2013**



SOUTHERN NEW HAMPSHIRE SERVICES, INC.

FINANCIAL STATEMENTS

JULY 31, 2014 AND 2013

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*C O N T E N T S*

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**OUELLETTE & ASSOCIATES, P.A.**  
CERTIFIED PUBLIC ACCOUNTANTS

Keith H. Allen, C.P.A., M.S.T.  
Mark R. Carrier, C.P.A.  
Steven R. Lamontagne, C.P.A.

George A. Roberge, C.P.A.  
Gary A. Wigant, C.P.A.  
C. Joseph Wolverton, C.P.A., C.V.A.

**Independent Auditor's Report**

To the Board of Directors  
Southern New Hampshire Services, Inc.  
Manchester, New Hampshire

**Report on the Financial Statements**

We have audited the accompanying combined financial statements of Southern New Hampshire Services, Inc. (a nonprofit organization) and affiliates, which comprise the combined statements of financial position as of July 31, 2014 and 2013, and the related combined statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the combined financial statements.

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

Management is responsible for the preparation and fair presentation of these combined 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 the combined financial statements that are free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to express an opinion on these combined financial statements based on our audits. We conducted our audits 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 audits to obtain reasonable assurance about whether the combined financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the combined financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the combined financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Organization's preparation and fair presentation of the combined 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 Organization'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 combined financial statements.

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

1111 Lisbon Street • Lewiston, Maine 04240 • Telephone: (207) 786-0328 • FAX: (207) 783-9377 • [www.oacpas.net](http://www.oacpas.net)

### ***Opinion***

In our opinion, the combined financial statements referred to above present fairly, in all material respects, the financial position of Southern New Hampshire Services, Inc. and affiliates, as of July 31, 2014 and 2013, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### ***Other Matters***

#### ***Other Information***

Our audit was conducted for the purpose of forming an opinion on the combined financial statements as a whole. The combining schedule of financial position and the combining schedule of activities are presented for purposes of additional analysis and are not a required part of the combined 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 combined financial statements. The information has been subjected to the auditing procedures applied in the audit of the combined financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the combined financial statements or to the combined 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 combined financial statements as a whole.

### ***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued a report dated April 30, 2015 on our consideration of Southern New Hampshire Services, Inc.'s internal control over financial reporting and on our tests on its compliance with certain provisions of laws, regulations, contracts, grant agreements, and other matters. The purpose of this 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 the internal control over financial reporting or on compliance. The report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Southern New Hampshire Services, Inc.'s internal control over financial reporting and compliance.

***Ouellette & Associates, P.A.***

Certified Public Accountants

April 30, 2015  
Lewiston, Maine

SOUTHERN NEW HAMPSHIRE SERVICES, INC.  
COMBINED STATEMENTS OF FINANCIAL POSITION

JULY 31, 2014 AND 2013

<b>ASSETS</b>		
	<i>2014</i>	<i>2013</i>
<b>CURRENT ASSETS</b>		
Cash	\$ 6,846,352	\$ 5,903,425
Investments	5,840,831	5,132,222
Contracts receivable	4,116,247	3,267,955
Accounts receivable	205,118	171,722
Prepaid expenses	212,989	156,403
Under applied overhead	179,371	-
Total current assets	17,400,908	14,631,727
<b>FIXED ASSETS</b>		
Land	6,689,735	6,174,907
Buildings and improvements	75,198,005	74,682,375
Vehicles and equipment	2,279,784	2,266,784
Total fixed assets	84,167,524	83,124,066
Less - accumulated depreciation	(22,775,015)	(20,615,347)
Net fixed assets	61,392,509	62,508,719
<b>OTHER ASSETS</b>		
Restricted cash	3,993,067	3,949,332
Miscellaneous other assets	418,455	428,401
Total other assets	4,411,522	4,377,733
<b>TOTAL ASSETS</b>	<b>\$ 83,204,939</b>	<b>\$ 81,518,179</b>
<b>LIABILITIES AND NET ASSETS</b>		
<b>CURRENT LIABILITIES</b>		
Accounts payable	\$ 453,138	\$ 357,265
Accrued payroll and payroll taxes	966,976	725,726
Accrued compensated absences	622,124	623,845
Accrued other liabilities	1,056,004	588,848
Refundable advances	2,005,560	2,036,804
Over applied overhead	-	115,916
Tenant security deposits	294,450	283,074
Current portion of long-term debt	174,392	288,892
Total current liabilities	5,572,644	5,020,370
<b>LONG-TERM LIABILITIES</b>		
Long-term debt, less current portion	5,479,703	5,522,103
Capital advances	66,333,341	66,264,647
Total long-term liabilities	71,813,044	71,786,750
<b>TOTAL LIABILITIES</b>	<b>77,385,688</b>	<b>76,807,120</b>
<b>NET ASSETS</b>		
Unrestricted	5,819,251	4,711,059
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$ 83,204,939</b>	<b>\$ 81,518,179</b>

See independent auditor's report and accompanying notes to the financial statements.

## SOUTHERN NEW HAMPSHIRE SERVICES, INC.

## COMBINED STATEMENTS OF ACTIVITIES

FOR THE YEARS ENDED JULY 31, 2014 AND 2013

	<u>2014</u>	<u>2013</u>
<b>REVENUES, GAINS AND OTHER SUPPORT</b>		
Grant and contract revenue	\$ 35,622,242	\$ 35,821,702
Program service fees	883,208	658,277
Local funding	341,237	380,790
Rental income	7,472,423	6,979,990
Gifts and contributions	361,142	387,790
Interest and dividend income	177,318	65,515
Unrealized gain on investments	532,490	506,268
Miscellaneous	936,178	2,142,561
<b>TOTAL REVENUES, GAINS AND OTHER SUPPORT</b>	<u>46,326,238</u>	<u>46,942,893</u>
<b>EXPENSES AND LOSSES</b>		
Program services:		
Child Development	6,554,799	6,673,078
Community Services	1,157,420	1,244,487
Economic and Workforce Development	10,023,206	7,883,459
Energy	11,525,400	13,577,165
Hispanic-Latino Community Services	441,488	657,522
Housing and Homeless	232,904	234,137
Nutrition and Health	2,328,252	2,245,555
Special Projects	1,908,834	1,745,817
Volunteer Services	144,840	142,073
SNHS Management Corporation	1,794,558	2,181,224
Housing Corporations	7,576,354	7,424,231
Total program services	<u>43,688,055</u>	<u>44,008,748</u>
Support services:		
Management and general	1,529,991	1,550,463
<b>TOTAL EXPENSES AND LOSSES</b>	<u>45,218,046</u>	<u>45,559,211</u>
<b>CHANGE IN NET ASSETS</b>	<b>1,108,192</b>	<b>1,383,682</b>
<b>NET ASSETS - BEGINNING OF YEAR</b>	<u><b>4,711,059</b></u>	<u><b>3,327,377</b></u>
<b>NET ASSETS - END OF YEAR</b>	<u><u><b>\$ 5,819,251</b></u></u>	<u><u><b>\$ 4,711,059</b></u></u>

See independent auditor's report and accompanying notes to the financial statements.

SOUTHERN NEW HAMPSHIRE SERVICES, INC.  
 COMBINED STATEMENT OF FUNCTIONAL EXPENSES  
 FOR THE YEAR ENDED JULY 31, 2014

	Program Services						
	Child Development	Community Services	Economic Workforce Development	Energy	Hispanic-Lat. Community Services	Housing and Homeless	Nutrition and Health
Payroll	\$ 3,864,148	\$ 700,374	\$ 2,895,686	\$ 1,449,702	\$ 233,653	\$ 105,322	\$ 953,076
Payroll taxes	395,305	61,655	275,772	148,585	25,636	10,332	95,561
Fringe benefits	863,709	82,932	398,583	249,569	7,921	14,384	157,183
Workers comp. insurance	26,718	3,371	9,020	6,650	910	1,090	11,753
Retirement benefits	217,571	57,720	126,494	77,118	4,809	5,247	51,862
Consultant and contractual	83,438	36,693	2,191,823	812,241	103,902	350	17,396
Travel and transportation	86,086	19,645	95,347	39,934	1,318	6,146	54,187
Conferences and meetings	548	16,528	4,157	8,275	50	150	1,485
Occupancy	500,684	55,692	736,716	110,320	19,656	-	102,561
Advertising	2,348	-	11,460	1,064	-	-	2,259
Supplies	190,204	17,754	47,368	83,966	3,897	226	73,514
Equip. rentals and maintenance	13,824	11,046	93,520	16,060	5,461	-	10,371
Insurance	15,915	35,466	6,965	9,092	55	-	6,144
Telephone	58,546	17,936	53,595	34,927	2,711	534	32,976
Postage	5,077	1,272	2,502	37,431	490	32	7,294
Printing and publications	4,161	406	1,452	1,192	841	-	-
Subscriptions	68	2,209	-	148	-	-	-
Program support	-	18,177	32,724	-	4,740	-	-
Interest	14,637	-	-	-	-	-	-
Depreciation	41,435	2,708	6,533	13,356	5,621	-	13,885
Assistance to clients	12,113	-	2,278,443	8,415,746	300	87,361	437,046
Other direct expense	119,771	5,095	754,374	8,636	-	-	284,680
Miscellaneous	38,493	10,741	672	1,388	19,517	1,730	15,019
In-kind	1,506,701	-	152,686	-	-	-	-
Loss on disposal of assets	-	-	-	-	-	-	-
<b>SUBTOTAL</b>	<b>\$ 8,061,500</b>	<b>\$ 1,157,420</b>	<b>\$ 10,175,892</b>	<b>\$ 11,525,400</b>	<b>\$ 441,488</b>	<b>\$ 232,904</b>	<b>\$ 2,328,252</b>
Over applied indirect costs	-	-	-	-	-	-	-
Eliminations	(1,506,701)	-	(152,686)	-	-	-	-
<b>TOTAL</b>	<b>\$ 6,554,799</b>	<b>\$ 1,157,420</b>	<b>\$ 10,023,206</b>	<b>\$ 11,525,400</b>	<b>\$ 441,488</b>	<b>\$ 232,904</b>	<b>\$ 2,328,252</b>

See independent auditor's report and accompanying notes to the financial statements.

SOUTHERN NEW HAMPSHIRE SERVICES, INC.  
 COMBINED STATEMENT OF FUNCTIONAL EXPENSES (Continued)  
 FOR THE YEAR ENDED JULY 31, 2014

	Program Services					Support	Total Expenses
	Special Projects	Volunteer Services	SNHS Management Corporation	Housing Corporations	Total Program Services	Management and General	
Payroll	\$ 74,950	\$ 105,532	\$ 449,408	\$ 1,499,878	\$ 12,331,729	\$ 1,227,044	\$ 13,558,773
Payroll taxes	7,604	10,005	40,264	149,748	1,220,467	103,548	1,324,015
Fringe benefits	6,675	8,491	78,392	274,272	2,142,111	136,341	2,278,452
Workers comp. insurance	1,052	222	5,051	44,377	110,214	7,424	117,638
Retirement benefits	4,447	4,405	26,855	100,405	676,933	110,699	787,632
Consultant and contractual	1,715,102	280	55,960	625,090	5,642,275	109,769	5,752,044
Travel and transportation	5,837	1,213	109,351	20,299	439,363	13,900	453,263
Conferences and meetings	3,593	149	39,689	2,076	76,700	2,106	78,806
Occupancy	8,666	-	188,787	2,665,157	4,388,239	41,455	4,429,694
Advertising	729	-	-	1,456	19,316	-	19,316
Supplies	3,104	3,561	7,292	48,475	479,361	40,496	519,857
Equip. rentals and maintenance	3,317	201	11,730	1,298	166,828	1,088	167,916
Insurance	-	977	31,264	291,351	397,229	10,651	407,880
Telephone	2,044	1,921	7,883	71,645	284,718	16,682	301,400
Postage	127	719	2,188	7,849	64,981	22,424	87,405
Printing and publications	-	195	5,216	620	14,083	1,576	15,659
Subscriptions	-	-	22	-	2,447	907	3,354
Program support	-	-	342,892	-	398,533	-	398,533
Interest	-	-	42,046	177,740	234,423	-	234,423
Depreciation	3,000	-	254,069	1,966,799	2,307,406	-	2,307,406
Assistance to clients	52,068	-	47,643	-	11,330,720	-	11,330,720
Other direct expense	15,753	610	418	5,625	1,194,962	712	1,195,674
Miscellaneous	766	6,359	14,647	12,840	122,172	1,514	123,686
In-kind	-	-	-	-	1,659,387	-	1,659,387
Loss on disposal of assets	-	-	10,433	114,585	125,018	-	125,018
<b>SUBTOTAL</b>	<b>\$ 1,908,834</b>	<b>\$ 144,840</b>	<b>\$ 1,771,500</b>	<b>\$ 8,081,585</b>	<b>\$ 45,829,615</b>	<b>\$ 1,848,336</b>	<b>\$ 47,677,951</b>
Over applied indirect costs	-	-	23,058	-	23,058	(318,345)	(295,287)
Eliminations	-	-	-	(505,231)	(2,164,618)	-	(2,164,618)
<b>TOTAL</b>	<b>\$ 1,908,834</b>	<b>\$ 144,840</b>	<b>\$ 1,794,558</b>	<b>\$ 7,576,354</b>	<b>\$ 43,688,055</b>	<b>\$ 1,529,991</b>	<b>\$ 45,218,046</b>

See independent auditor's report and accompanying notes to the financial statements.

SOUTHERN NEW HAMPSHIRE SERVICES, INC.  
 COMBINED STATEMENT OF FUNCTIONAL EXPENSES  
 FOR THE YEAR ENDED JULY 31, 2013

	Program Services						
	Child Development	Community Services	Economic Workforce Development	Energy	Hispanic-Lat. Community Services	Housing and Homeless	Nutrition and Health
Payroll	\$ 3,959,212	\$ 745,436	\$ 2,428,233	\$ 1,454,628	\$ 374,012	\$ 103,890	\$ 985,597
Payroll taxes	409,538	66,982	233,804	148,681	41,032	10,520	96,576
Fringe benefits	929,261	84,874	354,882	284,221	37,199	11,809	165,184
Workers comp. insurance	29,186	3,579	6,678	7,088	2,433	1,232	12,529
Retirement benefits	207,343	55,452	116,693	71,561	7,150	4,306	53,826
Consultant and contractual	32,008	9,131	1,293,726	1,332,302	41,041	25,847	15,658
Travel and transportation	73,072	22,397	68,873	47,847	16,937	6,337	56,221
Conferences and meetings	596	15,498	4,700	6,102	4,106	150	690
Occupancy	471,197	27,029	839,883	109,710	49,206	-	113,483
Advertising	1,791	-	6,932	344	-	-	5,489
Supplies	200,700	56,561	52,798	62,897	5,989	43	63,751
Equip. rentals and maintenance	10,853	5,861	185,691	19,483	12,643	-	19,503
Insurance	12,655	30,155	4,322	11,262	1,485	-	5,314
Telephone	57,564	29,411	40,062	45,013	8,102	766	35,554
Postage	4,667	423	2,529	35,357	212	-	7,118
Printing and publications	7,554	3,319	479	1,258	1,156	-	8
Subscriptions	35	1,839	109	54	-	-	-
Program support	-	33,080	8,558	-	4,475	4,050	-
Interest	15,521	-	-	-	-	-	-
Depreciation	58,851	2,708	6,533	13,116	5,643	-	14,631
Assistance to clients	12,535	4,952	1,688,804	9,923,493	8,342	64,900	279,547
Other direct expense	124,642	32,107	538,091	1,906	-	280	312,319
Miscellaneous	53,561	13,693	1,079	842	36,359	7	2,557
In-kind	1,477,987	-	-	-	-	-	-
Loss on disposal of assets	736	-	-	-	-	-	-
<b>SUBTOTAL</b>	<b>\$ 8,151,065</b>	<b>\$ 1,244,487</b>	<b>\$ 7,883,459</b>	<b>\$13,577,165</b>	<b>\$ 657,522</b>	<b>\$ 234,137</b>	<b>\$ 2,245,555</b>
Over applied indirect costs	-	-	-	-	-	-	-
Eliminations	(1,477,987)	-	-	-	-	-	-
<b>TOTAL</b>	<b>\$ 6,673,078</b>	<b>\$ 1,244,487</b>	<b>\$ 7,883,459</b>	<b>\$13,577,165</b>	<b>\$ 657,522</b>	<b>\$ 234,137</b>	<b>\$ 2,245,555</b>

See independent auditor's report and accompanying notes to the financial statements.



SOUTHERN NEW HAMPSHIRE SERVICES, INC.  
 COMBINED STATEMENT OF FUNCTIONAL EXPENSES (Continued)  
 FOR THE YEAR ENDED JULY 31, 2013

	Program Services				Total Program Services	Support Services	Total Expenses
	Special Projects	Volunteer Services	SNHS Management Corporation	Housing Corporations		Management and General	
Payroll	\$ 90,034	\$ 88,776	\$ 358,451	\$ 1,414,854	\$12,003,123	\$ 1,184,977	\$13,188,100
Payroll taxes	8,512	8,490	40,498	140,825	1,205,458	100,143	1,305,601
Fringe benefits	11,949	11,655	75,199	253,502	2,219,735	149,888	2,369,623
Workers comp. insurance	1,121	187	35,530	41,374	140,937	7,348	148,285
Retirement benefits	6,649	4,203	23,391	94,275	644,849	100,709	745,558
Consultant and contractual	1,539,448	239	285,309	634,971	5,209,680	170,886	5,380,566
Travel and transportation	3,614	935	109,805	17,981	424,019	14,729	438,748
Conferences and meetings	8,369	1,630	45,009	2,097	88,947	2,450	91,397
Occupancy	7,235	-	148,955	2,493,111	4,259,809	64,516	4,324,325
Advertising	-	-	-	2,676	17,232	-	17,232
Supplies	488	13,248	8,361	49,437	514,273	38,454	552,727
Equip. rentals and maintenance	789	152	11,607	3,886	270,468	912	271,380
Insurance	101	977	17,162	356,154	439,587	6,102	445,689
Telephone	2,011	1,738	8,011	70,962	299,194	16,273	315,467
Postage	1	1,172	3,853	6,807	62,139	23,270	85,409
Printing and publications	4,950	1,343	1,064	-	21,131	7	21,138
Subscriptions	-	-	24	-	2,061	27	2,088
Program support	-	-	609,817	-	659,980	-	659,980
Interest	-	-	47,574	180,614	243,709	-	243,709
Depreciation	6,000	-	248,100	1,962,663	2,318,245	3	2,318,248
Assistance to clients	51,389	1,032	51,616	-	12,086,610	-	12,086,610
Other direct expense	2,761	689	300	11,454	1,024,549	684	1,025,233
Miscellaneous	396	5,607	15,749	9,155	139,005	1,027	140,032
In-kind	-	-	-	-	1,477,987	-	1,477,987
Loss on disposal of assets	-	-	12,920	134,657	148,313	-	148,313
<b>SUBTOTAL</b>	<b>\$ 1,745,817</b>	<b>\$ 142,073</b>	<b>\$ 2,158,305</b>	<b>\$ 7,881,455</b>	<b>\$45,921,040</b>	<b>\$ 1,882,405</b>	<b>\$47,803,445</b>
Over applied indirect costs	-	-	22,919	-	22,919	(331,942)	(309,023)
Eliminations	-	-	-	(457,224)	(1,935,211)	-	(1,935,211)
<b>TOTAL</b>	<b>\$ 1,745,817</b>	<b>\$ 142,073</b>	<b>\$ 2,181,224</b>	<b>\$ 7,424,231</b>	<b>\$44,008,748</b>	<b>\$ 1,550,463</b>	<b>\$45,559,211</b>

See independent auditor's report and accompanying notes to the financial statements.

## SOUTHERN NEW HAMPSHIRE SERVICES, INC.

## COMBINED STATEMENTS OF CASH FLOWS

FOR THE YEARS ENDED JULY 31, 2014 AND 2013

	<u>2014</u>	<u>2013</u>
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Change in net assets	\$ 1,108,192	\$ 1,383,682
Adjustments to reconcile change in net assets to net cash flows from operating activities:		
Depreciation	2,307,406	2,318,248
Loss on disposal of assets	125,018	148,313
Unrealized gain on investments	(532,490)	(506,268)
(Increase) decrease operating assets:		
Contracts receivable (net)	(848,292)	276,600
Accounts receivable (net)	(33,396)	(132,761)
Prepaid expenses	(56,586)	129,619
Under applied overhead	(179,371)	-
Increase (decrease) in operating liabilities:		
Accounts payable	95,873	(177,107)
Accrued payroll and payroll taxes	241,250	236,075
Accrued comp. absences	(1,721)	(76,575)
Accrued other liabilities	467,156	49,858
Deferred revenue	(31,244)	(918,912)
Over applied overhead	(115,916)	(286,842)
Tenant security deposits	11,376	10,642
Total adjustments	1,449,063	1,070,890
<b>NET CASH FLOWS FROM OPERATING ACTIVITIES</b>	<u>2,557,255</u>	<u>2,454,572</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Purchase of fixed assets	(1,324,214)	(7,229,165)
Proceeds from sale of fixed assets	8,000	-
Purchase of investments	(2,176,119)	(2,065,154)
Proceeds from sale of investments	2,000,000	-
Deposit to restricted cash accounts	(43,735)	(258,995)
Other financing activities	9,946	9,947
<b>NET CASH FLOWS FROM INVESTING ACTIVITIES</b>	<u>(1,526,122)</u>	<u>(9,543,367)</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Payments on long-term debt	(156,900)	(187,105)
Net proceeds from capital advances	68,694	6,900,704
<b>NET CASH FLOWS FROM FINANCING ACTIVITIES</b>	<u>(88,206)</u>	<u>6,713,599</u>
<b>CHANGE IN CASH AND CASH EQUIVALENTS</b>	942,927	(375,196)
<b>CASH AND CASH EQUIVALENTS - BEGINNING OF YEAR</b>	<u>5,903,425</u>	<u>6,278,621</u>
<b>CASH AND CASH EQUIVALENTS - END OF YEAR</b>	<u>\$ 6,846,352</u>	<u>\$ 5,903,425</u>
<b>SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION</b>		
Cash paid during the year for:		
Interest	<u>\$ 234,423</u>	<u>\$ 243,709</u>

See independent auditor's report and accompanying notes to the financial statements.

**SOUTHERN NEW HAMPSHIRE SERVICES, INC.**

PO Box 5040, Manchester, NH 03108 - (603)668-8010

*The Community Action Agency for Hillsborough and Rockingham Counties*

**BOARD OF DIRECTORS ~ MAY 2015**

Public Sector	Private Sector	Low-Income Sector	HS Policy Council
<p><u>Representing Manchester</u>                      Lou D'Allesandro                      Joseph Lachance</p>	<p><u>Representing Manchester</u>                      German J. Ortiz  <i>Term: 9/12-9/15</i></p> <p><b>Sarah Jacobs</b>  <i>Term: 9/14-9/17</i></p>	<p><u>Representing Manchester</u>                      James Brown  <i>Term: 9/12-9/15</i></p> <p><b>Vacant</b></p>	<p><b>Tori Olszewski</b>  <i>Term: 12/14-12/16</i></p>
<p><u>Representing Nashua</u>                      Constance J. Erickson, <i>Treasurer</i></p> <p><b>Vacant</b></p>	<p><u>Representing Nashua</u>                      Dolores Bellavance, <i>Vice-Chairman</i></p> <p><i>Term: 9/12-9/15</i></p> <p><b>Wayne R. Johnson</b>  <i>Term: 9/12-9/15</i></p>	<p><u>Representing Nashua</u>                      Bonnie Henault  <i>Term: 9/14-9/17</i></p> <p><b>Shirley Pelletier</b>  <i>Term: 9/14-9/17</i></p>	
<p><u>Representing Towns</u>                      Thomas Mullins                      Linda T. Foster</p>	<p><u>Representing Towns</u>                      Richard Delay, Sr., <i>Chairman</i></p> <p><i>Term: 9/12-9/15</i></p> <p><b>Mary M. Moriarty</b>  <i>Term: 9/12-9/15</i></p>	<p><u>Representing Towns</u>                      Martha Verville  <i>Term: 9/13-9/16</i></p> <p><b>Deidre O'Malley</b>  <i>Term: 9/13-9/16</i></p>	
<p><u>Representing Rockingham County</u>                      Jill Jamro, <i>Secretary</i></p> <p><b>Vacant</b></p>	<p><u>Representing Rockingham County</u>                      Dan McKenna  <i>Term: 9/14-9/17</i></p> <p><b>Carrie Marshall Gross</b>  <i>Term: 12/14-9/17</i></p>	<p><u>Representing Rockingham County</u>                      Patti Ott  <i>Term: 9/13-9/16</i></p> <p><b>Alicia Salisbury</b>  <i>Term: 12/13-9/16</i></p>	



**SOUTHERN NEW HAMPSHIRE SERVICES, INC.**  
*The Community Action Agency for Hillsborough and Rockingham Counties*

Mailing Address: PO Box 5040, Manchester, NH 03108  
40 Pine Street, Manchester, NH 03103  
Telephone: (603) 668-8010 Fax: (603) 645-6734  
[www.snhs.org](http://www.snhs.org)

**SNHS Key Administrative 2015 Personnel Salaries ~ Fuel Assistance Program**

<u>Name</u>	<u>Title</u>	<u>Annual Salary</u>
Gale F. Hennessy	Executive Director	\$191,009.00
Ryan Clouthier	Energy Director	\$ 86,869.00

## GALE F. HENNESSY

### EXPERIENCE

January 1976 - Present

**CEO & Executive Director - Southern New Hampshire Services, Inc.  
Community Action Agency for Hillsborough County, NH**

Responsible for overall Agency administration, including fiscal, program development and implementation, evaluation, grants development, public relations coordination, liaison with community groups, public and private agencies as well as interaction with advisory committees and the Board of Directors.

*State, Regional and National Activities:*

President – NH Community Action Association – 1981 - Present

Representative of the State of New Hampshire on the Executive Committee of the New England Community Action Association – 1976 - Present

Representative of the New England Community Action Association to the Board of Directors of the National Community Action Partnership -- 1978 - Present

Chairman of the New England Community Action Association Conference Committee – 1975 - 1988

Member - Board of Directors, CAPLAW -- 1994 - Present

January 1968 - 1976

**Deputy Director - Southern New Hampshire Services, Inc.**

Responsible for overall Agency administration, including fiscal, program development and implementation, evaluation, grants development, public relations coordination, liaison with community groups, public and private agencies as well as interaction with advisory committees and the Board of Directors.

March 1967 - 1968

**Operation HELP Director**

Responsible for operating the largest self-help, information referral and direct service program funded by OEO in Hillsborough County, Operation HELP including staff direction, program implementation and development, grants development, and coordination of Board of Directors as well as evaluation of the needs of the poor of Hillsborough County.

- 1967      **Acting Director Operation HELP**  
Responsible for implementation of the first OEO funded local initiative program in Hillsborough County, Operation HELP. Participated in the concept, design and implementation of this first anti-poverty activity. Established the first outreach office in Milford, followed by a second office in Nashua. Participated in the recruitment, selection and training of the original Operation HELP staff. Supervised the staff in contacting of local officials, OEO outreach activities as well as establishing mini-offices in the twenty-nine towns of Hillsborough County.
- 1964 - 1965      **Assistant Principal, Wilton High School**  
Responsible for the administration of a medium size New Hampshire high school including scheduling, curriculum development, audio-visual program development, and overall educational administration.
- 1962 -1966      **Chairman, Social Studies Department, Wilton High School**  
Responsible for the overall supervision of the Social Studies Department including curriculum design and implementation of modern educational techniques, staff coordination and evaluation of the entire social studies department.
- Teacher-Coach, Wilton High School**  
Responsible for developing social studies curriculum grades 8 - 12 as well as implementation of modern educational techniques. Served as coach for baseball and basketball teams as well as coordination and scheduling of those and other athletic events.
- 1961-1962      **Teacher and Assistant Principal, Cornish School**  
Responsible for school administration, recreation and athletic programs, discipline throughout the educational complex, class scheduling and supervision of staff members. Worked with staff and local school board on updating curriculum, evaluation and assessing current staff.

## EDUCATION

Graduated Peterborough, NH High School 1956  
BA Degree in Government, University of New Hampshire 1961  
Graduate Work: University of New Hampshire and Keene State College  
Certified Community Action Professional – Community Action Partnership 1993

## AFFILIATIONS

New England Community Action Association - Member, Board of Directors  
Community Action Partnership – Member, Board of Directors  
New Hampshire Community Action Association - President  
CAPLAW, Inc. - Member, Board of Directors

# Ryan Clouthier

## **OBJECTIVE**

Seeking a position which will allow me the opportunity to utilize and build upon my analytical, technical, construction, management and customer service skills, while at the same time allowing me to further my education.

## **WORK HISTORY**

### *2013-Present Southern New Hampshire Services*

*Energy Director* - Responsible for coordination, implementation, budgeting, overall supervision and management of the Fuel and Electric Assistance Programs, Crisis Programs, Weatherization Program, Lead Hazard Control Program, and YouthBuild Program for Hillsborough and Rockingham Counties. Developed and Maintain relationships with federal, state and local grantors. Intervened on behalf of the Community Action Association pertaining to the Core Energy Efficiency Programs. Maintains a strong working relationships with OCA, NH Legal Assistance, Office of Energy and Planning, DOE, Liberty Energy, PSNH, NHEC, Unutil, NHHFA, NREL, Apprise and other local non-profit and private companies in the industry. Participates in multiple Healthy Home strategic planning committees.

### *2006-2013 New Hampshire Services*

*Weatherization Director*: Responsible for coordination, implementation, budgeting, overall supervision and management of the Weatherization, Lead Abatement, and YouthBuild Programs for Hillsborough and Rockingham Counties. Developed and Maintain relationships with federal, state and local grantors. Intervened on behalf of the Community Action Association during the merge of Liberty Energy and National Grid Gas along with filings pertaining to the Core Energy Efficiency Programs. Developed strong working relationships with OCA, NH Legal Assistance, Office of Energy and Planning, DOE, Liberty Energy, PSNH, NHEC, Unutil, NHHFA, NREL, Apprise and other local non-profit and private companies in the industry. Served on the Department of Energy special task force designed to implement a National Best Practices Manual for Weatherization Energy Auditor. Participated in a "One Touch" pilot effort which became a statewide practice and has received national recognition.

### *2004-2006 Southern New Hampshire Services*

*Energy Auditor*: Responsible for performing field energy audits of low income residential properties; record the data in written and computerized formats to determine cost effectiveness of conservation measures needed; generate work order specs for the contractors. Conduct proper follow through and field inspections to assure quality installations and client satisfaction.

### *July 2002-August 2003: Genuity*

*Network Analyst*: Responsible for monitoring the Genuity Dial up network Supporting AOL Domestic and International subscribers. Responsibilities include isolating and troubleshooting problems and configuration issues, on different types of Cisco routers, Lucent APX's, MAX's, and Nortel CVX's. Troubleshooting consists of isolating problems through head to head testing with different Telco's. Also responsible for creating, troubleshooting, and closing tickets in a group ticketing queue.

Demonstrated strengths in the area of interpersonal skills and negotiation.

### *January 2000-July 2002: Genuity*

*Telco Analyst for ADSL backbone provisioning*: Responsible for processing clean accurate orders in a timely fashion. Also responsible for meeting circuit delivery dates dependent upon market focus, and providing email notification to my group from other organizations mailing lists, if information pertains to my group. Also responsible for maintaining and updating multiple databases prior to handoff of individual orders.

### *February 2000-January 2001: Genuity*

*Data Analyst for Layer 3 Provisioning*: Responsible for providing clean information to other organizations with emphasis on data integrity. Also for ensuring all data in multiple databases are accurate as well as complete. Create and generate reports from CTS, Magma, Vantive, and Access. Other tasks included cleanup of mismatched circuits, reporting on missing information, and tracking and receiving retro for disconnected circuits. Proficient in the use of BRIO as a query tool. Correspond with Vendors to resolve data integrity and/or Order issues.

### *1997-2000: MVP Sports*

*Sales Associate*: Responsible for shipping and receiving, inventory, customer sales, mechanical repair on specific lines of sports equipment, customer order tracking, consulting with customer and advising of most cost effective product to meet customer needs. Also serve on MVP Sports Safety Committee.

*July 1997-Sept. 1997: Mark One Services*

Trouble shoot, repair, refurbish, and test a wide variety of life support medical equipment to ensure published performance and safety specifications are met or exceeded. Other responsibilities included shipping and receiving, grounds maintenance, and other duties as assigned.

### **EDUCATION**

2000 - NH Community Technical College (Evening classes)

1994-1998: Dover High School

1989-1994: Barrington Middle School

1985-1989: Barrington Elementary School

*Other:* Weatherization written and field certification, multiple national and regional weatherization best practices trainings. Intro to Cisco routers, T1 and T3 design and troubleshooting training, ATM and Frame Relay network design training, LAN and WAN training, OC3, OC48, and OC192 design and troubleshooting training, BPI Energy Analyst. Lead contractor abatement.

### **COMPUTER SKILLS**

Vantive ticket database, Remedy ticketing, Intro to Cisco Routers, Netcool, Unix, HPOV, TBS, TREAT, NEAT, MS Vista, OTTER, CTS, CSST, MS Word, MS Works, Power point, Excel, Access, BRIO, DOL MIS, Windows World Wide Web.

### **AWARDS/SPECIAL ACCOMPLISHMENTS**

Numerous press articles related to Weatherization including visits from the Assistant Secretary of Energy Efficiency from the Department of Energy and Vice President Joe Biden.

Member of the City of Nashua Healthy Homes Strategic Planning Committee.

Member of the City of Manchester Healthy Homes Strategic Planning Committee.

Certified Weatherization Auditor NH, VT, ME.

Numerous Sales Awards.