

# THE PUTNAM COUNTY LEGISLATURE

40 Gleneida Avenue  
Carmel, New York 10512  
(845) 808-1020 Fax (845) 808-1933

Amy E. Sayegh *Chairwoman*  
Greg E. Ellner *Deputy Chair*  
Diane Schonfeld *Clerk*



Nancy Montgomery	Dist. 1
William Gouldman	Dist. 2
Toni E. Addonizio	Dist. 3
Laura E. Russo	Dist. 4
Greg E. Ellner	Dist. 5
Paul E. Jonke	Dist. 6
Daniel G. Birmingham	Dist. 7
Amy E. Sayegh	Dist. 8
Erin L. Crowley	Dist. 9

## AGENDA

### HEALTH, SOCIAL, EDUCATIONAL & ENVIRONMENTAL COMMITTEE MEETING TO BE HELD IN ROOM 318 PUTNAM COUNTY OFFICE BUILDING CARMEL, NEW YORK 10512

Chairwoman Addonizio, Legislators Ellner & Russo

**Monday**

**May 19, 2025**

**(Immediately Following the Special Full and Physical Mtgs at 6PM)**

1. Pledge of Allegiance
2. Roll Call
3. Approval – Office for Senior Resources – New York State Contract for Grants – Social Adult Daycare Services Program
4. Approval – Office for Senior Resources – Field Hall Foundation Grant Application – Home Safety and Environmental Support Program
5. Discussion – Update – Mental Health – Stabilization Center and Mobile Crisis Team – Social Services Commissioner Sara Servadio
6. Approval – Budgetary Amendment 25A041 – Social Services – State Aid for Mobile Crisis Unit
7. Approval – Appointment – East of Hudson Sporting Advisory Committee - Ruthven
8. Other Business
9. Adjournment



cc All  
Health

#3


Reso

## MEMORANDUM

DATE: April 14, 2025

TO: Amy Sayegh, Chairwoman  
Putnam County Legislature

CC: Diane Schoenfeld, Clerk  
Putnam County Legislature

FROM: Marlene Barrett   
Director

RE: Contract Approval  
State of New York Contract for Grants  
Social Adult Daycare Services Program (SADS)

2025 APR 15 PM 3:41  
LEGISLATURE  
PUTNAM COUNTY  
CARMEL, NY

May we respectfully request that the enclosed State of New York Contract for Grants be submitted before the appropriate Legislative Committee for approval? The grant monies received will be used for the operations and expenditures of the Office for Senior Resources Social Adult Daycare Services Program (SADS). This program provides a variety of long-term care services to functionally impaired individuals, whether due to physical or cognitive impairments, in a congregate community, and pursuant to a person-centered service plan (PCSP). SADS core services include socialization, supervision and monitoring, personal care, and nutrition in a protective setting. The goal of a SADS program is to prevent or delay institutional care, improve the quality of life functionally and/or cognitively impaired adults, and provide respite for informal caregivers.

This is a new five-year cycle contract of a grant that the Office for Senior Resources has received multiple times. The yearly amount of the grant is \$105,007.00 for a total of \$525,035.00 over the five-year period. As well, this grant requires a County match of 25% therefore requiring Legislative approval pursuant to Section 5-1(D)(1) of the Putnam County Code.

Thank you for your attention to this request.

MB/sg  
encl.

**STATE OF NEW YORK CONTRACT FOR GRANTS FACE PAGE**

<p>STATE AGENCY (Name &amp; Address): Office for the Aging</p> <p>2 Empire State Plaza Albany, NY 12223-1251</p>	<p>BUSINESS UNIT/DEPT ID: OFA01 1010000</p> <p>CONTRACT NUMBER: OFA01-C240035GM-1010000</p> <p>CONTRACT TYPE (select one):  <input checked="" type="checkbox"/> Multi-Year Agreement  <input type="checkbox"/> Simplified Renewal Agreement  <input type="checkbox"/> Fixed Term Agreement         </p>
<p>CONTRACTOR NAME: PUTNAM COUNTY OF</p>	<p>TRANSACTION TYPE:  <input checked="" type="checkbox"/> New  <input type="checkbox"/> Renewal (list periods) :  <input type="checkbox"/> Amendment (list periods) :         </p>
<p>CONTRACTOR IDENTIFICATION NUMBERS:</p> <p>NYS Vendor ID Number: 1000002443</p> <p>Federal Tax ID Number: 146002759</p>	<p>PROJECT NAME: SADS Lump Sum</p> <p>ASSISTANCE LISTINGS (formerly CFDA) NUMBER (ALN) (Federally Funded Grants Only):</p>
<p>CONTRACTOR PRIMARY MAILING ADDRESS: ATTN COUNTY CLERK 40 GLENEIDA AVE RM 100 CARMEL, NY 10512</p> <p>CONTRACTOR PAYMENT ADDRESS: 40 GLENEIDA AVE CARMEL, NY 10512</p> <p><input type="checkbox"/> Check if same as primary mailing address</p> <p>CONTRACTOR MAILING ADDRESS: 40 GLENEIDA AVE CARMEL, NY 10512</p> <p><input type="checkbox"/> Check if same as primary mailing address</p> <p>CONTRACTOR PRIMARY E-MAIL ADDRESS: sheila.barrett2@putnamcountyny.gov</p>	<p>CONTRACTOR STATUS:  <input type="checkbox"/> For Profit  <input checked="" type="checkbox"/> Municipality  <input type="checkbox"/> Tribal Nation  <input type="checkbox"/> Individual  <input type="checkbox"/> Not-For- Profit         </p> <p>Charities Registration Number:</p> <p>Exemption Status/Code: N/A</p> <p><input type="checkbox"/> Sectarian Entity</p>
<p>CURRENT CONTRACT TERM: From: 02/01/2025 To: 01/31/2030</p> <p>AMENDED TERM: From: To:</p>	<p>CONTRACT FUNDING AMOUNT (Fixed Term – enter current period amount; Simplified Renewal – enter cumulative amount to date; Multi-year – enter total projected amount of the contract):</p> <p>CURRENT: \$525,035.00</p> <p>AMENDED: \$0.00</p> <p>FUNDING SOURCE(S)  <input checked="" type="checkbox"/> State  <input type="checkbox"/> Federal  <input type="checkbox"/> Other         </p>

STATE OF NEW YORK CONTRACT FOR GRANTS FACE PAGE

ATTACHMENTS INCLUDED AS PART OF THIS AGREEMENT (select all that apply):

- ☒ Appendix A
- ☒ Attachment A:
  - ☒ A-1 Agency Specific Terms and Conditions
  - ☒ A-2 Program Specific Terms and Conditions
  - ☐ A-3 Federally Funded Grants and Requirements Mandated by Federal Laws
- ☒ Attachment B:
  - ☒ B-1 Expenditure Based Budget
  - ☐ B-2 Performance Based Budget
  - ☐ B-3 Capital Budget
  - ☐ B-4 Net Deficit Budget
  - ☐ B-1(A) Expenditure Based Budget (Amendment)
  - ☐ B-2(A) Performance Based Budget (Amendment)
  - ☐ B-3(A) Capital Budget (Amendment)
  - ☐ B-4(A) Net Deficit Budget (Amendment)
- ☒ Attachment C: Work Plan
- ☒ Attachment D: Payment and Reporting
- ☒ Other:
  - Attachment E-Budget
  - Attachment M-MWBE
  - Attachment W-Workplan



**STATE OF NEW YORK CONTRACT FOR GRANTS SIGNATURE PAGE**

<p>IN WITNESS THEREOF, the parties hereto have electronically signed and agreed to this Contract, or approved this Contract on the dates below their signatures.</p>	
<p>In addition, I, acting in the capacity as Contractor, certify that I am the signing authority, or have been delegated or designated formally as the signing authority by the appropriate authority or official, and as such I do agree, and I have the authority to agree, to all of the terms and conditions set forth in the Contract, including all appendices and attachments. I understand that (i) payment of a claim on this Contract is conditioned upon the Contractor's compliance with all applicable conditions of participation in this program and if applicable, the accuracy and completeness of information submitted to the State of New York through the New York State prequalification process and (ii) by electronically indicating my acceptance of the terms and conditions of the Contract, I certify that (a) to the extent that the Contractor is required to register and/or file reports with the Office of the Attorney General's Charities Bureau ("Charities Bureau"), the Contractor's registration is current, all applicable reports have been filed, and the Contractor has no outstanding requests from the Charities Bureau relating to its filings and (b) all data and response in the application submitted by the Contractor are true, complete and accurate. I also understand that use of my assigned User ID and Password on the State's contract management system is equivalent to having placed my signature on the Contract and that I am responsible for any activity attributable to the user of my User ID and Password. Additionally, any information entered will be considered to have been entered and provided at my direction. I further certify and agree that the Contractor agrees to waive any claim that this electronic record or signature is inadmissible in court, notwithstanding the choice of law provisions.</p> <p>CONTRACTOR: PUTNAM COUNTY OF _____</p> <p>By: _____  <div style="text-align: center;">Printed Name</div></p> <p>Title: _____</p> <p>Date: _____</p>	<p>In addition, the party below certifies that it has verified the electronic signature of the Contractor to this Contract.</p> <p>STATE AGENCY: _____          _____</p> <p>By: _____  <div style="text-align: center;">Printed Name</div></p> <p>Title: _____</p> <p>Date: _____</p>
<p><b>ATTORNEY GENERAL'S SIGNATURE APPROVED AS TO FORM</b></p> <p>By: _____  <div style="text-align: center;">Printed Name</div></p> <p>Title: _____</p> <p>Date: _____</p>	<p><b>STATE COMPTROLLER'S SIGNATURE</b></p> <p>By: _____  <div style="text-align: center;">Printed Name</div></p> <p>Title: _____</p> <p>Date: _____</p>

## STATE OF NEW YORK CONTRACT FOR GRANTS

This State of New York Contract for Grants, including all attachments and appendices (hereinafter referred to as 'Contract' or 'Agreement'), is hereby made by and between the State of New York acting by and through the applicable State Agency (State or Agency) and the public or private entity (Contractor) identified on the face page hereof (Face Page).

### WITNESSETH:

**WHEREAS**, the State has the authority to regulate and provide funding for the operation of a program or performance of a service; and desires to contract with a responsive and responsible Contractor possessing the necessary resources to provide such services or work; and

**WHEREAS**, the Contractor is ready, willing, and able to provide such services or work and possesses or can make available all necessary qualified personnel, licenses, facilities and expertise to perform or have performed the services or work, as applicable, required pursuant to and in compliance with the terms of the Contract, specifications outlined in the grant solicitation, resulting award, and other associated documents comprising the Agreement.

**NOW THEREFORE**, in consideration of the promises, responsibilities, and covenants herein, the State and the Contractor agree to as follows:

### STANDARD TERMS AND CONDITIONS

#### I. GENERAL PROVISIONS

**A. Order of Precedence:** In the event of a conflict among (i) the terms of the Contract or (ii) between the terms of the Contract and the original request for proposal, solicitation document, the program application or other documentation that was completed and executed by the Contractor in connection with the grant award, the order of precedence is as follows:

1. Appendix A -- Standard Clauses for New York State Contracts
2. Contract for Grants Standard Terms and Conditions
3. Modifications to the Face Page
4. Modifications to Attachment A-2: Program Specific Terms and Conditions; Attachment A-3: Federally Funded Grants and Requirements Mandated by Federal Laws (modifications not required by the Federal government)<sup>1</sup>, Attachment B: Budget, Attachment C: Work Plan, and Attachment D: Payment and Reporting
5. The Face Page
6. Attachment A-2: Program Specific Terms and Conditions, Attachment A-3: Federally Funded Grants and Requirements Mandated by Federal Laws, Attachment B: Budget, Attachment C: Work Plan; and Attachment D: Payment and Reporting
7. Modifications to Attachment A-1: Agency Specific Terms and Conditions
8. Attachment A-1: Agency Specific Terms and Conditions
9. Other attachments, including, but not limited to, the request for proposal or program application, if incorporated by reference on the Face Page

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<sup>1</sup> For modifications required by the Federal government see Section I(M)

The documents above, collectively, comprise the entire Agreement and govern the

program for the entirety of the term of the Contract and any resulting renewals.

**B. Funding:** Funding for the term of the Contract shall not exceed the amount specified as "Contract Funding Amount" on the Face Page or as subsequently revised to reflect an approved renewal or cost amendment. Funding for the initial and subsequent periods of the Contract shall not exceed the applicable amounts specified in the applicable Attachment B form (Budget).

**C. Contract Performance:** The Contractor shall perform all services or work, as applicable, and comply with all provisions of the Contract to the satisfaction of the State. The Contractor shall provide services or work, as applicable, and meet the program objectives summarized in Attachment C (Work Plan) in accordance with the provisions of the Contract, relevant laws, rules and regulations, administrative, program and fiscal guidelines, and where applicable, operating certificate for facilities or licenses for an activity or program.

**D. Modifications:** Any modifications to this Agreement, including any budgetary changes, must be mutually agreed to in writing by both parties and be reflected on the Face Page where such terms are modified. Modifications may be subject to the approval of the AG and OSC in accordance with Appendix A, Section 3, Comptroller's Approval. A modification that would result in a transfer of funds among program activities or budget cost categories that does not affect the amount, consideration, scope or other terms of such Contract may be subject to the approval of the AG and OSC where the amount of such modification is, as a proportion of the total value of the Contract, equal to or greater than ten percent for contracts of five million dollars or less, or five percent for contracts of more than five million dollars. Modifications that are not subject to the AG and OSC approval shall be processed in accordance with the guidelines stated in the Contract.

**E. Severability:** Any provision of the Contract that is held to be invalid, illegal or unenforceable in any respect by a court of competent jurisdiction, shall be ineffective only to the extent of such invalidity, illegality or unenforceability, without affecting in any way the remaining provisions hereof; provided, however, that the parties to the Contract shall attempt in good faith to reform the Contract in a manner consistent with the intent of any such ineffective provision for the purpose of carrying out such intent. If any provision is held void, invalid or unenforceable with respect to particular circumstances, it shall nevertheless remain in full force and effect in all other circumstances.

**F. Interpretation:** The headings in the Contract are inserted for convenience and reference only and do not modify or restrict any of the provisions herein. All personal pronouns used herein shall be considered gender neutral. The Contract has been made under the laws of the State of New York, and the venue for resolving any disputes hereunder shall be in a court of competent jurisdiction of the State of New York.

**G. Notice:** All Notices under this Contract, including termination notices, shall be made in writing and directed to the representatives identified herein, or their designees and shall be transmitted by: a) certified or registered United States mail, return receipt requested; b) facsimile transmission; c) personal delivery; d) expedited delivery service; and/or e) e-mail. Notice shall be deemed to have been given either at the time of personal delivery or, in the case of expedited delivery service or certified or registered United States mail, as of the date of first attempted delivery at the address and in the manner provided herein, or in the case of facsimile transmission or e-mail, upon receipt.

The parties may, on written notice, designate other individuals as their representatives. Such representatives shall request, oversee, supervise, and accept performance of services provided by the Contractor and shall receive any required submissions. Whenever an action is to be taken, or approval for services given by the Agency, such action or approval may be given only by the representatives designated pursuant to this Section.

**H. Indemnification:** The Contractor shall be solely responsible and answerable in damages for all accidents, incidents, and/or injuries to persons (including death) or property arising out of or related to the services to be rendered by the Contractor or its subcontractors pursuant to this Contract. The Contractor shall indemnify and hold harmless the State and its officers and employees from claims, suits, actions, damages, and cost of every nature arising out of the provision of services pursuant

to the Contract.

- I. Legal Action:** No litigation or regulatory action shall be brought against the State of New York, the State Agency, or against any county or other local government entity with funds provided under the Contract. The term "litigation" shall include commencing or threatening to commence a lawsuit, joining, or threatening to join as a party to ongoing litigation, or requesting any relief from the State of New York, the State Agency, or any county, or other local government entity. The term "regulatory action" shall include commencing or threatening to commence a regulatory proceeding or requesting any regulatory relief from the State of New York, the State Agency, or any county, or other local government entity.
- J. Partisan Political Activity and Lobbying:** Funds provided pursuant to the Contract shall not be used for any partisan political activity, or for activities that attempt to influence legislation or election or defeat of any candidate for public office.
- K. Reporting Fraud and Abuse:** Contractor acknowledges that it has reviewed information on how to prevent, detect, and report fraud, waste, and abuse of public funds, including information about the Federal False Claims Act, the New York State False Claims Act, and whistleblower protections and will comply with requirements therein.
- L. Reporting Risks to Performance:** If any specific event, conjunction of circumstances, or any occurrence involving the staff, volunteers, directors, officers, subcontractors, or program participants of the Contractor threatens the successful completion of this project, in whole or in part, the Contractor agrees to notify the State Agency within three (3) calendar days of becoming aware of the occurrence describing the occurrence and the risk it poses to performance under the Contract. The Contractor's notice shall include a written description of the event and a recommended solution. Such events may include, but not be limited to, death or serious injury, an arrest or possible criminal activity.
- M. Federally Funded Grants and Requirements Mandated by Federal Laws:** All the Specific Federal requirements that are applicable to the Contract are identified in Attachment A-3 (Federally Funded Grants and Requirements Mandated by Federal Laws), attached hereto. To the extent that the Contract is funded, in whole or part, with Federal funds or mandated by Federal laws, (i) the provisions of the Contract that conflict with Federal rules, Federal regulations, or Federal program specific requirements shall not apply and (ii) to the extent that the modifications to Attachment A-3 are required by Federal requirements and conflict with other provisions of the Contract, the modifications to Attachment A-3 shall supersede all other provisions of this Contract; and (iii) the Contractor agrees to comply with all applicable Federal rules, regulations and program specific requirements including, but not limited to, those provisions that are set forth in Attachment A-3 (Federally Funded Grants and Requirements Mandated by Federal Laws), attached hereto.
- N. Renewal:**
- 1. General Renewal:** The Contract may consist of successive periods on the same terms and conditions, as specified within the Contract (a "Simplified Renewal Contract"). Each additional or superseding period shall be on the forms specified by the State and shall be incorporated in the Contract.
  - 2. Renewal Notice to Not-for-Profit Contractors:** The Contract, as specified herein, may consist of successive periods on the same terms and condition referred to as a "Simplified Renewal Contract." Each additional or superseding period shall be on the forms specified by the State and shall be incorporated into the Contract. Pursuant to State Finance Law §179-t, if the Contract is with a not-for-profit Contractor and provides for a renewal option, the State shall notify the Contractor of the State's intent to renew or not to renew the Contract no later than ninety (90) calendar days prior to the end of the term of the Contract, unless funding for the renewal is contingent upon enactment of an appropriation, than thirty (30) calendar days after the appropriation becomes law, whichever is later. Notwithstanding the foregoing, in the event the State is unable to comply with the time frames set forth in this paragraph due to unusual circumstances beyond the control of the State ("Unusual Circumstances"), no payment of interest shall be due to the Contractor. For purposes of State Finance Law §179-t, "Unusual Circumstances" shall not mean the failure by the State to (i) plan for

implementation of a program, (ii) assign sufficient staff resources to implement a program, (iii) establish a schedule for the implementation of a program or (iv) anticipate any other reasonably foreseeable circumstance. Notification to the Contractor of the State's intent to not renew the Contract must be in writing in the form of a letter, with the reason(s) for the non-renewal included. If the State does not provide notice to the Contractor of its intent not to renew the Contract as required in this Section and State Finance Law §179-t, the Contract shall be deemed continued until the date the State provides the necessary notice to the Contractor, in accordance with State Finance Law §179-t. Expenses incurred by the not-for-profit Contractor during such extension shall be reimbursable under the terms of the Contract.

## **II. TERMINATION AND SUSPENSION**

### **A. Termination:**

#### **1. Grounds:**

- a) Mutual Consent: The Contract may be terminated at any time upon mutual written consent of the State and the Contractor.
- b) Cause: The State may terminate the Contract immediately, upon written notice of termination to the Contractor, if the Contractor fails to comply with any of the terms and conditions of the Contract and/or with any applicable laws, rules, regulations, policies, or procedures. If the termination for cause results from unsatisfactory performance by the Contractor, the value of the work performed by the Contractor prior to termination shall be established by the State.
- c) Non-Responsibility: Upon written notice to the Contractor, and a reasonable opportunity to be heard by the appropriate State officials or staff, this Contract may be terminated by the State at the Contractor's expense where the Contractor is determined by the State to be non-responsible. In such event, the State may complete contractual requirements in any manner it deems advisable and pursue available legal or equitable remedies for breach.
- d) Convenience: The State may terminate the Contract in its sole discretion upon thirty (30) calendar days prior written notice.
- e) Lack of Funds: If for any reason the State or the Federal government terminates or reduces its appropriation to the applicable State Agency or entity entering into the Contract or fails to pay the full amount of the allocation for the operation of one or more programs funded under this Contract, the Contract may be terminated or reduced at the State Agency's discretion. No reduction or termination shall apply to allowable costs already incurred by the Contractor whereby funds are available to the State Agency for payment of such costs. Upon termination or reduction of the Contract, all remaining funds paid to the Contractor that are not subject to allowable costs already incurred by the Contractor shall be returned to the State Agency. In any event, no liability shall be incurred by the State (including the State Agency) beyond monies available for the purposes of the Contract. The Contractor acknowledges that any funds due to the State Agency or the State of New York because of disallowed expenditures after audit shall be the Contractor's responsibility.
- f) Force Majeure: Performance under the Contract may be terminated or suspended by the State immediately upon the occurrence of a "force majeure" event. For purposes of the Contract, "Force majeure" shall include, but not be limited to, natural disasters, war, rebellion, declared pandemics, insurrection, riot, strikes, lockout, and any unforeseen circumstances and acts beyond the control of the parties which render the performance of contractual obligations impossible.

#### **2. Effect of Notice and Termination on State's Payment Obligations:**

Upon receipt of notice of termination provided pursuant to the notice requirements prescribed in this Agreement, the Contractor shall stop work immediately and complete only those specific assignments and/or obligations, if any, subsequently approved by the State. In the event of termination other than for cause, the Contractor shall be entitled to compensation for services performed through the date of termination that are accepted by the State, and for any subsequent services that are accepted by the State, rendered in connection with any successor consultants

and contractors, including transfer of records, briefing and any other services deemed necessary or desirable by the State. The Contractor agrees to cooperate to the fullest respect with any successor consultants and contractors.

**3. Effect of Termination Based on Misuse or Conversion of State or Federal Property:**

Where the Contract is terminated for cause based on Contractor's failure to use some or all of the real property or equipment purchased pursuant to the Contract for the purposes set forth herein, the State may, at its option, require: a) repayment to the State of any monies previously paid to the Contractor; b) return of any real property or equipment purchased under the terms of the Contract; or c) an appropriate combination of clauses (a) and (b) herein.

Nothing herein shall be intended to limit the State's ability to pursue such other legal or equitable remedies as may be available.

**4. Suspension:**

The State may, in its discretion, order the Contractor to suspend performance for a reasonable period of time. In the event of such suspension, the Contractor shall be given formal written notice outlining the specific details of such suspension. Upon issuance of such notice, the Contractor shall comply with the particulars of the notice. The State shall have no obligation to reimburse Contractor's expenses during such suspension period. Activities may resume at such time as the State issues a formal written notice authorizing a resumption of performance under the Contract.

**III. ADDITIONAL OBLIGATIONS, REPRESENTATIONS AND WARRANTIES**

**A. Contractor as an Independent Contractor/Employees:**

1. The State and the Contractor agree that the Contractor is an independent contractor, and not an employee of the State and may neither hold itself out nor claim to be an officer, employee, or subdivision of the State nor make any claim, demand, or application to or for any right based upon any different status. Notwithstanding the foregoing, the State and the Contractor agree that if the Contractor is a New York State municipality, the Contractor shall be permitted to hold itself out, and claim, to be a subdivision of the State.

The Contractor shall be solely responsible for the recruitment, hiring, provision of employment benefits, payment of salaries and management of its project personnel. These functions shall be carried out in accordance with the provisions of the Contract, and all applicable Federal and State laws and regulations.

2. The Contractor warrants that it, its staff, and any and all subcontractors have all the necessary licenses, approvals, and certifications currently required by the laws of any applicable local, state, or Federal government to perform the services or work, as applicable, pursuant to the Contract and/or any subcontract entered into under the Contract. The Contractor further agrees that such required licenses, approvals, and certificates shall be kept in full force and effect during the term of the Contract, or any extension thereof, and to secure any new licenses, approvals, or certificates within the required time frames and/or to require its staff and subcontractors to obtain the requisite licenses, approvals, or certificates. In the event the Contractor, its staff, and/or subcontractors are notified of a denial or revocation of any license, approval, or certification to perform the services or work, as applicable, under the Contract, Contractor shall immediately notify the State.

**B. Subcontractors:**

1. If the Contractor enters into subcontracts for the performance of work pursuant to the Contract, the Contractor shall take full responsibility for the acts and omissions of its subcontractors. Nothing in the subcontract shall impair the rights of the State under the Contract. No contractual relationship shall be deemed to exist between the subcontractor and the State.
2. If requested by the State, the Contractor agrees not to enter into any

subcontracts, or revisions to subcontracts, that are in excess of \$100,000 for the performance of the obligations contained herein until it has received the prior written permission of the State, which shall have the right to review and approve each and every subcontract in excess of \$100,000 prior to giving written permission to the Contractor to enter into the subcontract. All agreements between the Contractor and subcontractors shall be by written contract, signed by individuals authorized to bind the parties. All such subcontracts shall contain provisions for specifying (1) that the work performed by the subcontractor must be in accordance with the terms of the Contract, (2) that nothing contained in the subcontract shall impair the rights of the State under the Contract, and (3) that nothing contained in the subcontract, nor under the Contract, shall be deemed to create any contractual relationship between the subcontractor and the State. In addition, subcontracts shall contain any other provisions which are required to be included in subcontracts pursuant to the terms herein.

3. If requested by the State, the Contractor agrees to require the subcontractor to provide to the State the information the State needs to determine whether a proposed subcontractor is a responsible vendor.
4. When a subcontract equals or exceeds \$100,000, the subcontractor shall submit a Vendor Responsibility Questionnaire (Questionnaire).
5. If requested by the State, upon the execution of a subcontract, the Contractor shall provide detailed subcontract information (a copy of subcontract will suffice) to the State within fifteen (15) calendar days after execution. The State may request from the Contractor copies of subcontracts between a subcontractor and its subcontractor.
6. The Contractor shall require any and all subcontractors to submit to the Contractor all financial claims for Services or work to the State agency, as applicable, rendered and required supporting documentation and reports as necessary to permit Contractor to meet claim deadlines and documentation requirements as established in Attachment D (Payment and Reporting). Subcontractors shall be paid by the Contractor on a timely basis after submitting the required reports and vouchers for reimbursement of services or work, as applicable. Subcontractors shall be informed by the Contractor of the possibility of non-payment or rejection by the Contractor of claims that do not contain the required information, and/or are not received by the Contractor by said due date.

**C. Use of Material, Equipment, Or Personnel:**

1. The Contractor shall not use materials, equipment, or personnel paid for under the Contract for any activity other than those provided for under the Contract, except with the State's prior written permission.
2. Any interest accrued on funds paid to the Contractor by the State shall be deemed to be the property of the State and shall either be credited to the State at the close-out of the Contract or, upon the written permission of the State, shall be expended on additional services or work, as applicable, provided for under the Contract.

**D. Property:**

1. For the purposes of the Contract, "Property" is defined as real property, equipment, or tangible personal property having a useful life of more than one year and an acquisition cost of \$1,000 or more per unit. For Federally funded contracts, if there is any conflict in the definition of "Property" the federal awarding Agency definitions will apply.
  - a) If an item of Property required by the Contractor is available as surplus to the State, the State at its sole discretion, may arrange to provide such Property to the Contractor in lieu of the purchase of such Property. Such Property shall be returned to the State at the Contractor's cost and expense upon the expiration of the Contract unless the State consents in writing to the Contractor retaining possession of the Property to use for similar purposes.
  - b) In addition, the Contractor agrees to permit the State to inspect the Property and to monitor its use at reasonable intervals during the Contractor's regular business hours.



- c) The Contractor shall be responsible for maintaining and repairing Property purchased or procured under the Contract at its own cost and expense. The Contractor shall procure and maintain insurance at its own cost and expense in an amount satisfactory to the State Agency, naming the State Agency as an additional insured, covering the loss, theft, or destruction of such equipment. The Contractor may not charge rental or use fees under this contract for use or acquisition of Property to carry out its obligations under the Contract.
  - d) The State has the right to review and approve in writing any new contract for the purchase of or lease for rental of Property (Purchase/Lease Contract) operated in connection with the provision of the services or work as specified in the Contract, if applicable, and any modifications, amendments, or extensions of an existing lease or purchase prior to its execution. If, in its discretion, the State disapproves of any Purchase/Lease Contract, then the State shall not be obligated to make any payments for such Property.
  - e) No member, officer, director, or employee of the Contractor shall retain or acquire any interest, direct or indirect, in any Property, paid for with funds under the Contract, nor retain any interest, direct or indirect, in such, without full and complete prior disclosure of such interest and the date of acquisition thereof, in writing to the Contractor and the State.
2. For non-Federally funded contracts, unless otherwise provided herein, the State shall have the following rights to Property purchased with funds provided under the Contract:
    - a) For cost-reimbursable contracts, all right, title and interest in Property with a remaining useful life shall belong to the State unless otherwise agreed to, in writing, by the State and the Contractor. However, upon agreement by the State, title shall pass to Contractor upon the end of the Property's useful life (as the phrase "useful life" is defined in Internal Revenue Code § 1.169-2).
    - b) For performance-based contracts, all right, title and interest in such Property shall belong to the Contractor.
  3. For Federally funded contracts, title to Property whose requisition cost is borne in whole or in part by monies provided under the Contract shall be governed by the terms and conditions of Attachment A-3 (Federally Funded Grants and Requirements Mandated by Federal Laws).
  4. The Contractor shall maintain an inventory of all Property that is owned by the State and obtained by the Contractor under this Agreement.
  5. The Contractor shall execute any documents which the State may reasonably require to effectuate the provisions of this section.

#### **E. Records and Audits:**

##### **1. General:**

- a) The Contractor shall establish and maintain, in paper or electronic format, complete and accurate books, records, documents, receipts, accounts, and other evidence directly pertinent to its performance under the Contract (collectively, Records).
- b) The Contractor agrees to produce and retain for the balance of the term of the Contract, and for a period of six years from the later of the date of (i) the Contract and (ii) the most recent renewal of the Contract, any and all Records necessary to substantiate upon audit, the proper deposit and expenditure of funds received under the Contract. Such Records may include, but not be limited to, original books of entry (e.g., cash disbursements and cash receipts journal), and the following specific records (as applicable) to substantiate the types of expenditures noted:
  - i. personal service expenditures: cancelled checks and the related bank statements, time and attendance records, payroll journals,

cash and check disbursement records including copies of money orders and the like, vouchers and invoices, records of contract labor, any and all records listing payroll and the money value of non-cash advantages provided to employees, time cards, work schedules and logs, employee personal history folders, detailed and general ledgers, sales records, miscellaneous reports and returns (tax and otherwise), and cost allocation plans, if applicable.

- ii. payroll taxes and fringe benefits: cancelled checks, copies of related bank statements, cash and check disbursement records including copies of money orders and the like, invoices for fringe benefit expenses, miscellaneous reports and returns (tax and otherwise), and cost allocation plans, if applicable.
  - iii. non-personal services expenditures: original invoices/receipts, cancelled checks and related bank statements, consultant agreements, leases, and cost allocation plans, if applicable.
  - iv. receipt and deposit of advance and reimbursements: itemized bank stamped deposit slips, and a copy of the related bank statements.
- c) The OSC, AG and any other person or entity authorized to conduct an examination, as well as the State Agency or State Agencies involved in the Contract that provided funding, shall have access to the Records during the hours of 9:00 a.m. until 5:00 p.m., Monday through Friday (excluding State recognized holidays), at an office of the Contractor within the State of New York or, if no such office is available, at a mutually agreeable and reasonable venue within the State, for the term specified above for the purposes of inspection, auditing and copying.
- d) The State shall protect from public disclosure any of the Records which are exempt from disclosure under Section 87 of the Public Officers Law provided that: (i) the Contractor shall timely inform an appropriate State official, in writing, that said records should not be disclosed; and (ii) said records shall be sufficiently identified; and (iii) designation of said records, as exempt under Section 87 of the Public Officers Law, is reasonable.
- e) Nothing contained herein shall diminish, or in any way adversely affect, the State's rights in connection with its audit and investigatory authority or the State's rights in connection with discovery in any pending or future litigation.

## **F. Confidentiality**

1. Contractor agrees that it will not use confidential, personally identifiable information relating to individuals who may receive services, or proprietary information disclosed to Contractor in connection with the services or work ("Confidential Information") for any purpose other than in connection with the services or work and in compliance with all applicable provisions of State and federal law. The Contractor is fully responsible for its staff, its subcontractor(s), and any subcontractor's staff with regard to Confidential Information and shall ensure that they meet all obligations with respect to maintaining the confidentiality and security of any information deemed confidential.
2. Information which falls into any of the following categories shall not be considered Confidential Information: a) information that is previously rightfully known to the Contractor without restriction on disclosure; b) information that becomes, from no breach of the Contract on the part of the Contractor, generally known in the relevant industry, or is otherwise publicly available; and c) information that is independently developed by Contractor without use of the Confidential Information.
3. Except as specifically permitted in this Agreement, Contractor shall not, at any time, in any fashion, form or manner, divulge, disclose, communicate, or use, any Confidential Information other than in connection with the services or as otherwise provided herein.
4. Contractor may disclose Confidential Information if such information is required

to be disclosed by Contractor by any law, rule, regulation, judicial or administrative process or applicable professional standards, provided that, to the extent permitted by applicable law or regulation, the Contractor notifies the State prior to any such required disclosure.

5. Where allowable by law and agreed to by the State, Contractor may retain one copy of the Confidential Information and any summaries, analyses, notes, or extracts prepared by Contractor which are based on or contain portions of the Confidential Information evidencing its services or work for the State as required by law, regulation, professional standards, or reasonable business practice.
6. In protecting the Confidential Information, Contractor shall exercise the same standard of care used by Contractor to protect its own confidential and proprietary information, to prevent the disclosure of Confidential Information to any third party. Contractor shall not use Confidential Information for any purpose other than in furtherance of its services or work for the State.

#### **G. Publicity:**

1. Publicity regarding the work, services, performance, and/or project governed by this Agreement may not be released without prior written approval from the State. For the purposes of this Agreement, "Publicity" includes, but is not limited to: news conferences; news releases; public announcements; advertising; brochures; reports; discussions or presentations at conferences or meetings; and/or the inclusion of State materials, the State's name, or other such references to the State in any document or forum.
2. Any Publicity, publications, presentations or announcements of conferences, meetings or trainings which are funded in whole or in part through any activity supported under the Contract may not be published, presented or announced without prior approval of the State. Any such publication, presentation or announcement shall:
  - a) Acknowledge the support of the State of New York and, if funded with Federal funds, the applicable Federal funding agency; and
  - b) State that the opinions, results, findings and/or interpretations of data contained therein are the responsibility of the Contractor and do not necessarily represent the opinions, interpretations, or policy of the State or if funded with Federal funds, the State and the applicable Federal funding agency.
3. Notwithstanding the above, (i) if the Contractor is an educational research institution, the Contractor may, for scholarly or academic purposes, use, present, discuss, report or publish any material, data or analyses, other than Confidential Information, that derives from activity under the Contract and the Contractor agrees to use best efforts to provide copies of any manuscripts arising from Contractor's performance under this Contract, or if requested by the State, the Contractor shall provide the State with a thirty (30) day period in which to review each manuscript for compliance with Confidential Information requirements prior to publication; or (ii) if the Contractor is not an educational research institution, the Contractor may submit for publication, scholarly or academic publications that derive from activity under the Contract (but are not deliverable under the Contract), provided that the Contractor first submits such manuscripts to the State forty-five (45) calendar days prior to submission for consideration by a publisher in order for the State to review the manuscript for compliance with confidentiality requirements and restrictions and to make such other comments as the State deems appropriate. All derivative publications shall follow the same acknowledgments and disclaimer as described in Section III(F)(2) (Publicity) hereof.

#### **H. Web-Based Applications-Accessibility:**

Any network-based information and applications development, or programming delivered to or by the State pursuant to this contract or procurement, will comply with Section 508 of the Rehabilitation Act of 1973, as amended, and be consistent with New York State Enterprise IT Policy NYS-P08-005, Accessibility of Information Communication Technology, as such policy may be amended, modified, or superseded (the "Accessibility Policy"). The Accessibility Policy requires that State Entity Information

Communication Technology shall be accessible to persons with disabilities as determined by accessibility compliance testing. Such accessibility compliance testing will be conducted by (State Entity name, contractor or other) and any report on the results of such testing must be satisfactory to (State Entity name).

**I. Unemployment Insurance Compliance:**

The Contractor shall remain current in both its quarterly reporting and payment of contributions or payments in lieu of contributions, as applicable, to the State Unemployment Insurance system as a condition of maintaining this grant.

1. The Contractor hereby authorizes the State Department of Labor to disclose to the State Agency staff only such information as is necessary to determine the Contractor's compliance with the State Unemployment Insurance Law. This includes, but is not limited to, the following: a) any records of unemployment insurance (UI) contributions, interest, and/or penalty payment arrears or reporting delinquency; b) any debts owed for UI contributions, interest, and/or penalties; c) the history and results of any audit or investigation; and d) copies of wage reporting information.
2. Such disclosures are protected under Section 537 of the State Labor Law, which makes it a misdemeanor for the recipient of such information to use or disclose the information for any purpose other than the performing due diligence as a part of the approval process for the Contract.

**J. Charities Registration:**

If applicable, the Contractor agrees to (i) obtain not-for-profit status, a Federal identification number, and a charitable registration number (or a declaration of exemption) and to furnish the State Agency with this information as soon as it is available, (ii) be in compliance with the OAG charities registration requirements at the time of the awarding of this Contract by the State and (iii) remain in compliance with the OAG charities registration requirements throughout the term of the Contract.

**K. Vendor Responsibility:**

The Contractor hereby acknowledges that the State Vendor Responsibility Questionnaire (Questionnaire) and certification are made part of this Contract and that any misrepresentation of fact in the Questionnaire and attachments, or in any Contractor responsibility information that may be requested by the State, may result in termination of this Contract.

The Contractor shall at all times during the contract term remain responsible. During the term of this Contract, any changes in the provided Questionnaire shall be disclosed to the State Agency, in writing, in a timely manner. Failure to make such disclosure may result in a determination of non-responsibility and termination of this Contract. Furthermore, the Contractor agrees, if requested by the State, it must present evidence of its continuing legal authority to do business in New York State, its integrity, experience, ability, prior performance, and organizational and financial capacity.

The State, in its sole discretion, reserves the right to make a final determination of non-responsibility at any time during the term of the Contract, based on any information provided in the Questionnaire and/or any updates, clarifications, or amendments thereof; and/or when it discovers information that calls into question the responsibility of the Contractor. Prior to making a final determination of non-responsibility, the State shall provide written notice to the Contractor that it has made a preliminary determination of non-responsibility. The State shall detail the reason(s) for the preliminary determination, and shall provide the Contractor with an opportunity to be heard.

The State reserves the right to suspend any or all activities under this Contract, upon discovery of such information warranting review of responsibility. In the event of such suspension, the Contractor will be given written notice outlining the particulars of such suspension. Upon issuance of such notice, the Contractor must comply with the terms of the suspension order. Contract activity may resume at such time as the State issues a written notice authorizing a resumption of performance under this Contract.

**L. Workers' Compensation Benefits:**

1. In accordance with Section 142 of the State Finance Law, the Contract shall be void and of no force and effect unless the Contractor shall provide and maintain

coverage during the life of the Contract for the benefit of such employees as are required to be covered by the provisions of the Workers' Compensation Law.

2. If a Contractor believes they are exempt from the Workers Compensation insurance requirement they must apply for an exemption.

**APPENDIX A**

**STANDARD CLAUSES FOR NEW YORK STATE CONTRACTS**

**PLEASE RETAIN THIS DOCUMENT  
FOR FUTURE REFERENCE.**

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**STANDARD CLAUSES FOR NYS CONTRACTS**

The parties to the attached contract, license, lease, amendment or other agreement of any kind (hereinafter, "the contract" or "this contract") agree to be bound by the following clauses which are hereby made a part of the contract (the word "Contractor" herein refers to any party other than the State, whether a contractor, licensor, licensee, lessor, lessee or any other party):

**1. EXECUTORY CLAUSE.** In accordance with Section 41 of the State Finance Law, the State shall have no liability under this contract to the Contractor or to anyone else beyond funds appropriated and available for this contract.

**2. NON-ASSIGNMENT CLAUSE.** In accordance with Section 138 of the State Finance Law, this contract may not be assigned by the Contractor or its right, title or interest therein assigned, transferred, conveyed, sublet or otherwise disposed of without the State's previous written consent, and attempts to do so are null and void. Notwithstanding the foregoing, such prior written consent of an assignment of a contract let pursuant to Article XI of the State Finance Law may be waived at the discretion of the contracting agency and with the concurrence of the State Comptroller where the original contract was subject to the State Comptroller's approval, where the assignment is due to a reorganization, merger or consolidation of the Contractor's business entity or enterprise. The State retains its right to approve an assignment and to require that any Contractor demonstrates its responsibility to do business with the State. The Contractor may, however, assign its right to receive payments without the State's prior written consent unless this contract concerns Certificates of Participation pursuant to Article 5-A of the State Finance Law.

**3. COMPTROLLER'S APPROVAL.** In accordance with Section 112 of the State Finance Law, if this contract exceeds \$50,000 (or \$75,000 for State University of New York or City University of New York contracts for goods, services, construction and printing, and \$150,000 for State University Health Care Facilities) or if this is an amendment for any amount to a contract which, as so amended, exceeds said statutory amount, or if, by this contract, the State agrees to give

something other than money when the value or reasonably estimated value of such consideration exceeds \$25,000, it shall not be valid, effective or binding upon the State until it has been approved by the State Comptroller and filed in his office. Comptroller's approval of contracts let by the Office of General Services, either for itself or its customer agencies by the Office of General Services Business Services Center, is required when such contracts exceed \$85,000. Comptroller's approval of contracts established as centralized contracts through the Office of General Services is required when such contracts exceed \$125,000, and when a purchase order or other procurement transaction issued under such centralized contract exceeds \$200,000.

**4. WORKERS' COMPENSATION BENEFITS.** In accordance with Section 142 of the State Finance Law, this contract shall be void and of no force and effect unless the Contractor shall provide and maintain coverage during the life of this contract for the benefit of such employees as are required to be covered by the provisions of the Workers' Compensation Law.

**5. NON-DISCRIMINATION REQUIREMENTS.** To the extent required by Article 15 of the Executive Law (also known as the Human Rights Law) and all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor will not discriminate against any employee or applicant for employment, nor subject any individual to harassment, because of age, race, creed, color, national origin, citizenship or immigration status, sexual orientation, gender identity or expression, military status, sex, disability, predisposing genetic characteristics, familial status, marital status, or domestic violence victim status or because the individual has opposed any practices forbidden under the Human Rights Law or has filed a complaint, testified, or assisted in any proceeding under the Human Rights Law. Furthermore, in accordance with Section 220-e of the Labor Law, if this is a contract for the construction, alteration or repair of any public building or public work or for the manufacture, sale or distribution of materials, equipment or supplies, and to the extent that this contract shall be performed within the State

of New York, Contractor agrees that neither it nor its subcontractors shall, by reason of race, creed, color, disability, sex, or national origin: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. If this is a building service contract as defined in Section 230 of the Labor Law, then, in accordance with Section 239 thereof, Contractor agrees that neither it nor its subcontractors shall by reason of race, creed, color, national origin, age, sex or disability: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. Contractor is subject to fines of \$50.00 per person per day for any violation of Section 220-e or Section 239 as well as possible termination of this contract and forfeiture of all moneys due hereunder for a second or subsequent violation.

**6. WAGE AND HOURS PROVISIONS.** If this is a public work contract covered by Article 8 of the Labor Law or a building service contract covered by Article 9 thereof, neither Contractor's employees nor the employees of its subcontractors may be required or permitted to work more than the number of hours or days stated in said statutes, except as otherwise provided in the Labor Law and as set forth in prevailing wage and supplement schedules issued by the State Labor Department. Furthermore, Contractor and its subcontractors must pay at least the prevailing wage rate and pay or provide the prevailing supplements, including the premium rates for overtime pay, as determined by the State Labor Department in accordance with the Labor Law. Additionally, effective April 28, 2008, if this is a public work contract covered by Article 8 of the Labor Law, the Contractor understands and agrees that the filing of payrolls in a manner consistent with Subdivision 3-a of Section 220 of the Labor Law shall be a condition precedent to payment by the State of any State approved sums due and owing for work done upon the project.

**7. NON-COLLUSIVE BIDDING CERTIFICATION.** In accordance with Section 139-d of the State Finance Law, if this contract was awarded based upon the submission of bids, Contractor affirms, under penalty of perjury, that its bid was arrived at independently

and without collusion aimed at restricting competition. Contractor further affirms that, at the time Contractor submitted its bid, an authorized and responsible person executed and delivered to the State a non-collusive bidding certification on Contractor's behalf.

**8. INTERNATIONAL BOYCOTT PROHIBITION.** In accordance with Section 220-f of the Labor Law and Section 139-h of the State Finance Law, if this contract exceeds \$5,000, the Contractor agrees, as a material condition of the contract, that neither the Contractor nor any substantially owned or affiliated person, firm, partnership or corporation has participated, is participating, or shall participate in an international boycott in violation of the federal Export Administration Act of 1979 (50 USC App. Sections 2401 et seq.) or regulations thereunder. If such Contractor, or any of the aforesaid affiliates of Contractor, is convicted or is otherwise found to have violated said laws or regulations upon the final determination of the United States Commerce Department or any other appropriate agency of the United States subsequent to the contract's execution, such contract, amendment or modification thereto shall be rendered forfeit and void. The Contractor shall so notify the State Comptroller within five (5) business days of such conviction, determination or disposition of appeal (2 NYCRR § 105.4).

**9. SET-OFF RIGHTS.** The State shall have all of its common law, equitable and statutory rights of set-off. These rights shall include, but not be limited to, the State's option to withhold for the purposes of set-off any moneys due to the Contractor under this contract up to any amounts due and owing to the State with regard to this contract, any other contract with any State department or agency, including any contract for a term commencing prior to the term of this contract, plus any amounts due and owing to the State for any other reason including, without limitation, tax delinquencies, fee delinquencies or monetary penalties relative thereto. The State shall exercise its set-off rights in accordance with normal State practices including, in cases of set-off pursuant to an audit, the finalization of such audit by the State agency, its representatives, or the State Comptroller.

**10. RECORDS.** The Contractor shall establish and maintain complete and accurate books, records, documents, accounts and other evidence directly pertinent to performance under this contract (hereinafter, collectively, the "Records"). The Records must be kept for the balance of the calendar year in which they were made and for six (6) additional years thereafter. The State Comptroller, the Attorney General and any other person or entity authorized to conduct an examination, as well as the agency or agencies involved in this contract, shall have access to the Records during normal business hours at an office of the Contractor within the State of New York or, if no such office is available, at a mutually agreeable and reasonable venue within the State, for the term specified above for the purposes of inspection, auditing and copying. The State shall take reasonable steps to protect from public disclosure any of the Records which are exempt from disclosure under Section 87 of the Public Officers Law (the "Statute") provided that: (i) the Contractor shall timely inform an appropriate State official, in writing, that said records should not be disclosed; and (ii) said records shall be sufficiently identified; and (iii) designation of said records as exempt under the Statute is reasonable. Nothing contained herein shall diminish, or in any way adversely affect, the State's right to discovery in any pending or future litigation.

**11. IDENTIFYING INFORMATION AND PRIVACY NOTIFICATION.** (a) Identification Number(s). Every invoice or New York State Claim for Payment submitted to a New York State agency by a payee, for payment for the sale of goods or services or for transactions (e.g., leases, easements, licenses, etc.) related to real or personal property must include the payee's identification number. The number is any or all of the following: (i) the payee's Federal employer identification number, (ii) the payee's Federal social security number, and/or (iii) the payee's Vendor Identification Number assigned by the Statewide Financial System. Failure to include such number or numbers may delay payment. Where the payee does not have such number or numbers, the payee, on its invoice or Claim for Payment, must give the reason or reasons why the payee does not have such number or numbers.

(b) Privacy Notification. (1) The authority to request the above personal information from a seller of goods or services or a lessor of real or personal property, and the authority to maintain such information, is found in Section 5 of the State Tax Law. Disclosure of this information by the seller or lessor to the State is mandatory. The principal purpose for which the information is collected is to enable the State to identify individuals, businesses and others who have been delinquent in filing tax returns or may have understated their tax liabilities and to generally identify persons affected by the taxes administered by the Commissioner of Taxation and Finance. The information will be used for tax administration purposes and for any other purpose authorized by law. (2) The personal information is requested by the purchasing unit of the agency contracting to purchase the goods or services or lease the real or personal property covered by this contract or lease. The information is maintained in the Statewide Financial System by the Vendor Management Unit within the Bureau of State Expenditures, Office of the State Comptroller, 110 State Street, Albany, New York 12236.

**12. EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITIES AND WOMEN.**

In accordance with Section 312 of the Executive Law and 5 NYCRR Part 143, if this contract is: (i) a written agreement or purchase order instrument, providing for a total expenditure in excess of \$25,000.00, whereby a contracting agency is committed to expend or does expend funds in return for labor, services, supplies, equipment, materials or any combination of the foregoing, to be performed for, or rendered or furnished to the contracting agency; or (ii) a written agreement in excess of \$100,000.00 whereby a contracting agency is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon; or (iii) a written agreement in excess of \$100,000.00 whereby the owner of a State assisted housing project is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon for such project, then the following shall

apply and by signing this agreement the Contractor certifies and affirms that it is Contractor's equal employment opportunity policy that:

(a) The Contractor will not discriminate against employees or applicants for employment because of race, creed, color, national origin, sex, age, disability or marital status, shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force on State contracts and will undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination. Affirmative action shall mean recruitment, employment, job assignment, promotion, upgradings, demotion, transfer, layoff, or termination and rates of pay or other forms of compensation;

(b) at the request of the contracting agency, the Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, labor union or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability or marital status and that such union or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein; and

(c) the Contractor shall state, in all solicitations or advertisements for employees, that, in the performance of the State contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.

Contractor will include the provisions of "(a), (b) and (c)" above, in every subcontract over \$25,000.00 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work") except where the Work is for the beneficial use of the Contractor. Section 312 does not apply to: (i) work, goods or services unrelated to this contract; or (ii) employment outside New

York State. The State shall consider compliance by a contractor or subcontractor with the requirements of any federal law concerning equal employment opportunity which effectuates the purpose of this clause. The contracting agency shall determine whether the imposition of the requirements of the provisions hereof duplicate or conflict with any such federal law and if such duplication or conflict exists, the contracting agency shall waive the applicability of Section 312 to the extent of such duplication or conflict. Contractor will comply with all duly promulgated and lawful rules and regulations of the Department of Economic Development's Division of Minority and Women's Business Development pertaining hereto.

**13. CONFLICTING TERMS.** In the event of a conflict between the terms of the contract (including any and all attachments thereto and amendments thereof) and the terms of this Appendix A, the terms of this Appendix A shall control.

**14. GOVERNING LAW.** This contract shall be governed by the laws of the State of New York except where the Federal supremacy clause requires otherwise.

**15. LATE PAYMENT.** Timeliness of payment and any interest to be paid to Contractor for late payment shall be governed by Article 11-A of the State Finance Law to the extent required by law.

**16. NO ARBITRATION.** Disputes involving this contract, including the breach or alleged breach thereof, may not be submitted to binding arbitration (except where statutorily authorized), but must, instead, be heard in a court of competent jurisdiction of the State of New York.

**17. SERVICE OF PROCESS.** In addition to the methods of service allowed by the State Civil Practice Law & Rules ("CPLR"), Contractor hereby consents to service of process upon it by registered or certified mail, return receipt requested. Service hereunder shall be complete upon Contractor's actual receipt of process or upon the State's receipt of the return thereof by the United States Postal Service as refused or undeliverable. Contractor must promptly notify

the State, in writing, of each and every change of address to which service of process can be made. Service by the State to the last known address shall be sufficient. Contractor will have thirty (30) calendar days after service hereunder is complete in which to respond.

**18. PROHIBITION ON PURCHASE OF TROPICAL HARDWOODS.** The Contractor certifies and warrants that all wood products to be used under this contract award will be in accordance with, but not limited to, the specifications and provisions of Section 165 of the State Finance Law, (Use of Tropical Hardwoods) which prohibits purchase and use of tropical hardwoods, unless specifically exempted, by the State or any governmental agency or political subdivision or public benefit corporation. Qualification for an exemption under this law will be the responsibility of the contractor to establish to meet with the approval of the State.

In addition, when any portion of this contract involving the use of woods, whether supply or installation, is to be performed by any subcontractor, the prime Contractor will indicate and certify in the submitted bid proposal that the subcontractor has been informed and is in compliance with specifications and provisions regarding use of tropical hardwoods as detailed in § 165 State Finance Law. Any such use must meet with the approval of the State; otherwise, the bid may not be considered responsive. Under bidder certifications, proof of qualification for exemption will be the responsibility of the Contractor to meet with the approval of the State.

**19. MACBRIDE FAIR EMPLOYMENT PRINCIPLES.** In accordance with the MacBride Fair Employment Principles (Chapter 807 of the Laws of 1992), the Contractor hereby stipulates that the Contractor either (a) has no business operations in Northern Ireland, or (b) shall take lawful steps in good faith to conduct any business operations in Northern Ireland in accordance with the MacBride Fair Employment Principles (as described in Section 165 of the New York State Finance Law), and shall permit independent monitoring of compliance with such principles.

**20. OMNIBUS PROCUREMENT ACT OF 1992.** It is the policy of New York State to maximize opportunities for the participation of New York State business enterprises, including minority- and women-owned business enterprises as bidders, subcontractors and suppliers on its procurement contracts.

Information on the availability of New York State subcontractors and suppliers is available from:

NYS Department of Economic  
Development  
Division for Small Business and  
Technology Development  
625 Broadway  
Albany, New York 12245  
Telephone: 518-292-5100

A directory of certified minority- and women-owned business enterprises is available from:

NYS Department of Economic  
Development  
Division of Minority and Women's  
Business Development  
633 Third Avenue 33rd Floor  
New York, NY 10017  
646-846-7364  
Email: <mailto:mwbebusinessdev@esd.ny.gov>  
<https://ny.newnycontracts.com/FrontEnd/searchcertifieddirectory.asp>

[com/FrontEnd/  
searchcertifieddirectory.asp](https://ny.newnycontracts.com/FrontEnd/searchcertifieddirectory.asp)

The Omnibus Procurement Act of 1992 (Chapter 844 of the Laws of 1992, codified in State Finance Law § 139-i and Public Authorities Law § 2879(3)(n)-(p)) requires that by signing this bid proposal or contract, as applicable, Contractors certify that whenever the total bid amount is greater than \$1 million:

(a) The Contractor has made reasonable efforts to encourage the participation of New York State Business Enterprises as suppliers and subcontractors, including certified minority- and women-owned business enterprises, on this project, and has retained the documentation of these efforts to be provided upon request to the State;



(b) The Contractor has complied with the Federal Equal Opportunity Act of 1972 (P.L. 92-261), as amended;

(c) The Contractor agrees to make reasonable efforts to provide notification to New York State residents of employment opportunities on this project through listing any such positions with the Job Service Division of the New York State Department of Labor, or providing such notification in such manner as is consistent with existing collective bargaining contracts or agreements. The Contractor agrees to document these efforts and to provide said documentation to the State upon request; and

(d) The Contractor acknowledges notice that the State may seek to obtain offset credits from foreign countries as a result of this contract and agrees to cooperate with the State in these efforts.

**21. RECIPROCITY AND SANCTIONS PROVISIONS.** Bidders are hereby notified that if their principal place of business is located in a country, nation, province, state or political subdivision that penalizes New York State vendors, and if the goods or services they offer will be substantially produced or performed outside New York State, the Omnibus Procurement Act 1994 and 2000 amendments (Chapter 684 and Chapter 383, respectively, codified in State Finance Law § 165(6) and Public Authorities Law § 2879(5)) require that they be denied contracts which they would otherwise obtain. NOTE: As of May 2023, the list of discriminatory jurisdictions subject to this provision includes the states of South Carolina, Alaska, West Virginia, Wyoming, Louisiana and Hawaii.

**22. COMPLIANCE WITH BREACH NOTIFICATION AND DATA SECURITY LAWS.** Contractor shall comply with the provisions of the New York State Information Security Breach and Notification Act (General Business Law §§ 899-aa and 899-bb and State Technology Law § 208).

**23. COMPLIANCE WITH CONSULTANT DISCLOSURE LAW.** If this is a contract for consulting services, defined for purposes of this requirement to include analysis, evaluation, research, training, data processing, computer programming, engineering, environmental, health, and mental health services, accounting, auditing,

paralegal, legal or similar services, then, in accordance with Section 163 (4)(g) of the State Finance Law (as amended by Chapter 10 of the Laws of 2006), the Contractor shall timely, accurately and properly comply with the requirement to submit an annual employment report for the contract to the agency that awarded the contract, the Department of Civil Service and the State Comptroller.

**24. PROCUREMENT LOBBYING.** To the extent this agreement is a "procurement contract" as defined by State Finance Law §§ 139-j and 139-k, by signing this agreement the contractor certifies and affirms that all disclosures made in accordance with State Finance Law §§ 139-j and 139-k are complete, true and accurate. In the event such certification is found to be intentionally false or intentionally incomplete, the State may terminate the agreement by providing written notification to the Contractor in accordance with the terms of the agreement.

**25. CERTIFICATION OF REGISTRATION TO COLLECT SALES AND COMPENSATING USE TAX BY CERTAIN STATE CONTRACTORS, AFFILIATES AND SUBCONTRACTORS.**

To the extent this agreement is a contract as defined by Tax Law § 5-a, if the contractor fails to make the certification required by Tax Law § 5-a or if during the term of the contract, the Department of Taxation and Finance or the covered agency, as defined by Tax Law § 5-a, discovers that the certification, made under penalty of perjury, is false, then such failure to file or false certification shall be a material breach of this contract and this contract may be terminated, by providing written notification to the Contractor in accordance with the terms of the agreement, if the covered agency determines that such action is in the best interest of the State.

**26. IRAN DIVESTMENT ACT.** By entering into this Agreement, Contractor certifies in accordance with State Finance Law § 165-a that it is not on the "Entities Determined to be Non-Responsive Bidders/Offerers pursuant to the New York State Iran Divestment Act of 2012"

("Prohibited Entities List") posted at:  
<https://ogs.ny.gov/iran-divestment-act-2012>

Contractor further certifies that it will not utilize on this Contract any subcontractor that is identified on the Prohibited Entities List. Contractor agrees that should it seek to renew or extend this Contract, it must provide the same certification at the time the Contract is renewed or extended. Contractor also agrees that any proposed Assignee of this Contract will be required to certify that it is not on the Prohibited Entities List before the contract assignment will be approved by the State.

During the term of the Contract, should the state agency receive information that a person (as defined in State Finance Law § 165-a) is in violation of the above-referenced certifications, the state agency will review such information and offer the person an opportunity to respond. If the person fails to demonstrate that it has ceased its engagement in the investment activity which is in violation of the Act within 90 days after the determination of such violation, then the state agency

shall take such action as may be appropriate and provided for by law, rule, or contract, including, but not limited to, imposing sanctions, seeking compliance, recovering damages, or declaring the Contractor in default.

The state agency reserves the right to reject any bid, request for assignment, renewal or extension for an entity that appears on the Prohibited Entities List prior to the award, assignment, renewal or extension of a contract, and to pursue a responsibility review with respect to any entity that is awarded a contract and appears on the Prohibited Entities list after contract award.

**27. ADMISSIBILITY OF REPRODUCTION OF CONTRACT.**

Notwithstanding the best evidence rule or any other legal principle or rule of evidence to the contrary, the Contractor acknowledges and agrees that it waives any and all objections to the admissibility into evidence at any court proceeding or to the use at any examination before trial of an electronic reproduction of this contract, in the form approved by the State Comptroller, if such approval was required, regardless of whether the original of said contract is in existence.



## ATTACHMENT A-1 AGENCY CLAUSES

The provisions of this Attachment A-1 apply to all New York State Office for the Aging (NYSOFA) grant contracts. Program specific clauses, if any, are contained in Attachment A-2.

### **I. General Provisions**

- A. **Laws, Rules, Regulations:** The Contractor shall comply with all applicable New York State Laws, including the State Finance Law and Article II, Title I of the Elder Law, and with all applicable rules and regulations of the State and the Office of the State Comptroller which are in effect or become effective during the term of this Agreement.
- B. **Non-Discrimination Statutes:** The Contractor agrees to comply with all federal and State non-discrimination laws and regulations affecting this agreement, including the Age Discrimination in Employment Act of 1975, as amended (29 U.S.C. § 621, *et seq.*), Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), the Americans with Disabilities Act of 1990, as amended (42 U.S.C. § 12101, *et seq.*), the Civil Rights Act of 1964, as amended, (42 U.S.C. Chapter 21), the Equal Pay Act of 1963, as amended (29 U.S.C. § 206(d)), the New York State Human Rights Law, as amended (Article 15 of the Executive Law), and all rules and regulations pertaining thereto which are in effect or become effective during the term of this Agreement.
- C. **Language Accessibility:** The Contractor agrees to examine the services it provides and develop and implement a system so that persons with limited English proficiency can have meaningful access to those services.
- D. **State Monitoring:** The Contractor agrees to and shall cooperate with all efforts by the State to monitor activities under this Agreement, including but not limited to announced and unannounced on-site visits by State staff, disclosure of all program files and related fiscal records, and development of a corrective action plan if required by the State.
- E. **Program Changes:** The Program Work Plan (Attachment C) shall not be modified without approval from the State. If modification to the Program Work Plan is necessary, the Contractor must submit a written request to the State and await State approval before implementing such changes.
- F. **Budget Changes:** The Contractor shall make expenditures only for authorized items of expense contained in the Budget (Attachment B). Cost overruns of up to \$1,000 or 10% (whichever is greater) for an individual budget category for authorized

items of expense will be allowed as long as the total costs do not exceed the total amount of the contract. If expenditures for other than authorized items become necessary, the Contractor shall submit a written request for approval from the State and await State approval before incurring such expenditures. Also, if costs for an individual budget category will exceed the budgeted amount by more than \$1,000 or 10%, whichever is greater, a budget modification must be approved in writing by the State before these costs will be reimbursed. Budget modifications shall not result in an increase in the amount made available under this Agreement unless the State gives its express written consent.

**G. Notice:**

1. Notices to the State shall be addressed to the New York State Office for the Aging at the address identified on the face page of this Master Contract and shall include the Project Name and Contract Number.
2. Notices to the Contractor shall be addressed to the Contractor's designee identified in Attachment C, the Work Plan.

**H. Subcontracts:** The Contractor may enter into subcontracts for the provision of the services under this Agreement. All such subcontracts shall be written according to State and local standards and a copy of each executed subcontract shall be forwarded to the State prior to payment by the State for expenditures incurred under such subcontract. All applicable grant provisions contained in this contract and agreed to by the contractor must be extended to each subcontractor and included in the contract with the subcontractor. It shall be the responsibility of the Contractor to monitor and assess the activities performed under such subcontracts, and to ensure that these activities are provided in accordance with all applicable requirements contained in this Agreement.

**I. Aging Network Cooperation:** The Contractor shall work cooperatively with and consult with the Area Agencies on Aging in the region to be served by this Agreement.

**J. Community Cooperation:** The Contractor shall work cooperatively with public and private agencies, institutions, organizations, and associations within New York State and, where appropriate, with national organizations in the development of activities under this Agreement.

**K. Contract Personnel:** The Contractor is solely responsible for recruitment, hiring, and retention, of all personnel to be employed in the conduct of this Agreement. The Contractor shall ensure that the personnel hired are qualified to carry out the activities outlined in this Agreement.

**L. Supplement of Existing Funding:** The Contractor agrees that these funds shall be used to supplement, and not supplant, any existing public or private funding.

**M. Indemnification Claims or Lawsuits:** The Contractor, solely at its expense, shall defend any claim or suit which may be brought against the State for the infringement of United States patents, copyrights, or trademarks arising from the Contractor's or the State's use of any equipment, materials or information prepared, developed, or furnished by the Contractor in connection with the performance of this contract, and in any such suit shall satisfy any final judgment for such infringement. The State will give the Contractor written notice of such claim or suit and full right and opportunity to conduct the defense thereof, together with full information and all reasonable cooperation. If principles of governmental or public law are involved, the State may participate in the defense of any action identified but no costs or expenses shall be incurred upon the account of the Contractor without the Contractor's written consent. If, in the Contractor's opinion, the equipment, materials, or information mentioned above is likely to or does become the subject of a claim of infringement of a United States patent, trademark, or copyright, then, without diminishing the Contractor's obligation to satisfy any final award, the Contractor may substitute other suitable equipment, materials and information, or at the Contractor's option and expense, obtain the right for the Contractor and the State to continue the use of such equipment, materials and information. If the Contractor wishes to use copyrighted, patented, or trademarked material it shall be responsible to obtain such rights to reproduction and use of the materials so that the State can use it in any way it deems necessary, including all rights to copy and reproduce such materials it sees fit. This will not be at any additional expense to the State beyond the amount of the contract.

## **II. Term, Termination and Suspension**

[Reserved]

## **III. Payment and Reporting**

[Reserved]

## **IV. Additional Contractor Obligations, Representations and Warranties**

### **A. Property:**

1. The Contractor agrees that all rights and title to any materials (manuals, tests, guides, audio or visual materials or devices) developed with funds under this Agreement shall become the property of the State. Reproduction, distribution, sale, release or other use of such material by the Contractor must be specifically requested in writing by the Contractor and must receive prior approval by the State.

2. The Contractor agrees that any public information materials or other printed or published materials will:

a) Give due recognition to the fact that the program is supported with State Funds and, if funded with Federal funds, the applicable Federal funding agency. Such recognition shall be in a form prescribed by the State; and

b) State that the opinions, results, findings, and/or interpretations of data contained therein are the responsibility of the Contractor and do not necessarily represent the opinions, interpretations, or policy of the State and, if funded with Federal funds, the applicable Federal funding agency. Such statement shall be in a form prescribed by the State.

3. Equipment (those items having an acquisition cost of \$1,000 or more per unit and a useful life of at least one year) purchased under this Agreement shall be the property of the Contractor and shall be used by the Contractor in the program for which it was acquired as long as needed, whether or not the Contractor continues to receive State funds. The State reserves the right to require the transfer of the equipment purchased under this Agreement if it is no longer needed in the program for which it was acquired.

**B. Confidentiality:** The Contractor agrees to maintain the confidentiality of all personal information collected in its performance of this Agreement.

**C. Participation Opportunities for New York State Certified Service-Disabled Veteran-Owned Businesses:** Article 17-B of the New York State Executive Law provides for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Businesses ("SDVOBs"), thereby further integrating such businesses into New York State's economy. NYSOFA recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of NYSOFA contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Bidders/Contractors are strongly encouraged and expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as subcontractors or suppliers, as protégés, or in other partnering or supporting roles. The directory of New York State Certified SDVOBs can be viewed at: <https://ogs.ny.gov/veterans/>

Bidder/Contractor is encouraged to contact the Office of General Services' Division of Service-Disabled Veteran's Business Development at 518-474-2015 or [VeteransDevelopment@ogs.ny.gov](mailto:VeteransDevelopment@ogs.ny.gov) to discuss methods of maximizing participation by SDVOBs on the Contract.



## **ATTACHMENT A-2 PROGRAM SPECIFIC CLAUSES**

NYSOFA SADS programs must meet or exceed the NYSOFA regulation for social adult day care NYCRR Subtitle Y Part 6654.20 Services – Social Adult Day Care Programs. Contractor agrees to meet the three Objectives specified in the Work Plan (Attachment W) to meet the Goal.

## ATTACHMENT B - BUDGET

### Contract Periods

Contract Type: Multi Year  
Contract Term: 02/01/2025 - 01/31/2030  
Contract Amount: \$525,035.00

### Contract Period Information Details

For Fixed Terms contracts, only Period 1 in the chart below is completed.

For Simplified Renewal contracts, Period 1 in the chart below is completed initially and additional periods are added incrementally as they are awarded.

For Multi-Year Contracts, all defined contract periods will be displayed. Out years represent projected funding amounts.

For all contracts, the Budget and Workplan Indicator is provided to represent whether these details are included on the following pages.

### Contract Period Information

Number	Dates	Amount	Amended Dates	Amended Amount	Budget Indicator	Workplan Indicator
1	02/01/2025 - 01/31/2026	\$105,007.00			Y	Y
2	02/01/2026 - 01/31/2027	\$105,007.00			Y	N
3	02/01/2027 - 01/31/2028	\$105,007.00			Y	N
4	02/01/2028 - 10/31/2029	\$105,007.00			Y	N
5	02/01/2029 - 01/31/2030	\$105,007.00			Y	N



# ATTACHMENT B-1 - EXPENDITURE BASED BUDGET SUMMARY

PROJECT NAME: SADS Lump Sum  
 CONTRACTOR NAME: PUTNAM COUNTY OF  
 CONTRACT PERIOD NUMBER: 1  
 CONTRACT PERIOD: From: 02/01/2025  
 To: 01/31/2026

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1) Personal Services					
a) SALARY	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) FRINGE	\$0.00	\$0.00	0%	\$0.00	\$0.00
<b>Subtotal</b>	\$0.00	\$0.00	0%	\$0.00	\$0.00
2) Non Personal Services					
a) CONTRACTUAL	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) TRAVEL	\$0.00	\$0.00	0%	\$0.00	\$0.00
c) EQUIPMENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
d) SPACE/PROPERTY RENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
e) SPACE/PROPERTY OWN	\$0.00	\$0.00	0%	\$0.00	\$0.00
f) UTILITIES	\$0.00	\$0.00	0%	\$0.00	\$0.00
g) OPERATING EXPENSES	\$0.00	\$0.00	0%	\$0.00	\$0.00
h) OTHER	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Subtotal</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET  
NON-PERSONAL SERVICES DETAIL WORKSHEET – OTHER**

OTHER TYPE/DESCRIPTION	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1. see attachment E -Budget	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**OTHER NARRATIVE**

see attachment E -Budget

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET SUMMARY**

PROJECT NAME: SADS Lump Sum  
 CONTRACTOR NAME: PUTNAM COUNTY OF  
 CONTRACT PERIOD NUMBER: 2  
 CONTRACT PERIOD: From: 02/01/2026  
 To: 01/31/2027

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1) Personal Services					
a) SALARY	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) FRINGE	\$0.00	\$0.00	0%	\$0.00	\$0.00
<b>Subtotal</b>	\$0.00	\$0.00	0%	\$0.00	\$0.00
2) Non Personal Services					
a) CONTRACTUAL	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) TRAVEL	\$0.00	\$0.00	0%	\$0.00	\$0.00
c) EQUIPMENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
d) SPACE/PROPERTY RENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
e) SPACE/PROPERTY OWN	\$0.00	\$0.00	0%	\$0.00	\$0.00
f) UTILITIES	\$0.00	\$0.00	0%	\$0.00	\$0.00
g) OPERATING EXPENSES	\$0.00	\$0.00	0%	\$0.00	\$0.00
h) OTHER	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Subtotal</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET**  
**NON-PERSONAL SERVICES DETAIL WORKSHEET – OTHER**

OTHER TYPE/DESCRIPTION	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1. See attachment E-Budget	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

OTHER NARRATIVE
See attachment E-Budget

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET SUMMARY**

PROJECT NAME: SADS Lump Sum  
CONTRACTOR NAME: PUTNAM COUNTY OF  
CONTRACT PERIOD NUMBER: 3  
CONTRACT PERIOD: From: 02/01/2027  
To: 01/31/2028

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1) Personal Services					
a) SALARY	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) FRINGE	\$0.00	\$0.00	0%	\$0.00	\$0.00
<b>Subtotal</b>	\$0.00	\$0.00	0%	\$0.00	\$0.00
2) Non Personal Services					
a) CONTRACTUAL	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) TRAVEL	\$0.00	\$0.00	0%	\$0.00	\$0.00
c) EQUIPMENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
d) SPACE/PROPERTY RENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
e) SPACE/PROPERTY OWN	\$0.00	\$0.00	0%	\$0.00	\$0.00
f) UTILITIES	\$0.00	\$0.00	0%	\$0.00	\$0.00
g) OPERATING EXPENSES	\$0.00	\$0.00	0%	\$0.00	\$0.00
h) OTHER	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Subtotal</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET  
NON-PERSONAL SERVICES DETAIL WORKSHEET – OTHER**

OTHER TYPE/DESCRIPTION	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1. See attachment E-Budget	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**OTHER NARRATIVE**

See attachment E-Budget

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET SUMMARY**

PROJECT NAME: SADS Lump Sum  
 CONTRACTOR NAME: PUTNAM COUNTY OF  
 CONTRACT PERIOD NUMBER: 4  
 CONTRACT PERIOD: From: 02/01/2028  
 To: 10/31/2029

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1) Personal Services					
a) SALARY	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) FRINGE	\$0.00	\$0.00	0%	\$0.00	\$0.00
<b>Subtotal</b>	\$0.00	\$0.00	0%	\$0.00	\$0.00
2) Non Personal Services					
a) CONTRACTUAL	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) TRAVEL	\$0.00	\$0.00	0%	\$0.00	\$0.00
c) EQUIPMENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
d) SPACE/PROPERTY RENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
e) SPACE/PROPERTY OWN	\$0.00	\$0.00	0%	\$0.00	\$0.00
f) UTILITIES	\$0.00	\$0.00	0%	\$0.00	\$0.00
g) OPERATING EXPENSES	\$0.00	\$0.00	0%	\$0.00	\$0.00
h) OTHER	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Subtotal</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET**  
**NON-PERSONAL SERVICES DETAIL WORKSHEET – OTHER**

OTHER TYPE/DESCRIPTION	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1. See attachment E-Budget	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

OTHER NARRATIVE
See attachment E-Budget

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET SUMMARY**

PROJECT NAME: SADS Lump Sum  
CONTRACTOR NAME: PUTNAM COUNTY OF  
CONTRACT PERIOD NUMBER: 5  
CONTRACT PERIOD: From: 02/01/2029  
To: 01/31/2030

CATEGORY OF EXPENSE	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1) Personal Services					
a) SALARY	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) FRINGE	\$0.00	\$0.00	0%	\$0.00	\$0.00
<b>Subtotal</b>	\$0.00	\$0.00	0%	\$0.00	\$0.00
2) Non Personal Services					
a) CONTRACTUAL	\$0.00	\$0.00	0%	\$0.00	\$0.00
b) TRAVEL	\$0.00	\$0.00	0%	\$0.00	\$0.00
c) EQUIPMENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
d) SPACE/PROPERTY RENT	\$0.00	\$0.00	0%	\$0.00	\$0.00
e) SPACE/PROPERTY OWN	\$0.00	\$0.00	0%	\$0.00	\$0.00
f) UTILITIES	\$0.00	\$0.00	0%	\$0.00	\$0.00
g) OPERATING EXPENSES	\$0.00	\$0.00	0%	\$0.00	\$0.00
h) OTHER	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Subtotal</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**ATTACHMENT B-1 - EXPENDITURE BASED BUDGET**  
**NON-PERSONAL SERVICES DETAIL WORKSHEET – OTHER**

OTHER TYPE/DESCRIPTION	GRANT FUNDS	MATCH FUNDS	MATCH PERCENTAGE	OTHER FUNDS	TOTAL FUNDS
1. See attachment E-Budget	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00
<b>Total</b>	\$105,007.00	\$0.00	0%	\$0.00	\$105,007.00

**OTHER NARRATIVE**

See attachment E-Budget

## ATTACHMENT C – WORK PLAN

### ***SUMMARY***

PROJECT NAME: SADS Lump Sum  
CONTRACTOR NAME: PUTNAM COUNTY OF  
CONTRACT PERIOD NUMBER: 1  
CONTRACT PERIOD: From: 02/01/2025  
To: 01/31/2026

See attachment W- Workplan

**ATTACHMENT C – WORK PLAN**  
***DETAIL***

<b>Objective</b>	
I See attachment W- Workplan -	See attachment W- Workplan
<b>Task</b>	
<b>Performance Measures</b>	



**ATTACHMENT D**  
**PAYMENT AND REPORTING**

**A. General Terms and Conditions:**

1. In full consideration of contract performance, the State Agency agrees to pay, and the Contractor agrees to accept a sum not to exceed the amount noted on the Face Page.
2. The State has no obligation to make payment until all required approvals, including the approval of the AG and OSC, if required, have been obtained and the contract is fully executed. Contractor obligations or expenditures that precede the start date of the Contract shall not be reimbursed.
3. Article 11-B of the State Finance Law sets forth certain time frames for the Full Execution of contracts or renewal contracts with not-for-profit organizations and the implementation of any program plan associated with such contract. For purposes of this section, "Full Execution" shall mean that the contract has been signed by all parties thereto and has obtained the approval of the AG and OSC. Any interest to be paid on a missed payment to the Contractor based on a delay in the Full Execution of the Contract shall be governed by Article 11-B of the State Finance Law.
4. Contractor must provide complete and accurate billing invoices to the State in order to receive payment. However, the State may, in its discretion, automatically generate a voucher in accordance with an approved contract payment schedule. The State may require the Contractor to submit billing invoices electronically.
5. The Contractor shall submit documentation to support its claims for payment pursuant to this Contract. All supporting documentation must be completed and provided in a manner satisfactory and acceptable to the State Agency in order for the Contractor to be eligible for payment.
6. Payment for invoices submitted by the Contractor shall be rendered electronically in accordance with OSC's procedures and practices governing electronic payment unless payment by paper check is expressly authorized by the head of the State Agency, in his or her sole discretion after the Contractor establishes extenuating circumstances requiring payment by paper check.
7. If travel expenses are an approved expenditure under the Contract, travel expenses shall be reimbursed at the lesser of the rates set forth in the written standard travel policy of the Contractor, the OSC guidelines, or United States General Services Administration rates. No out-of-state travel costs shall be permitted unless specifically detailed and pre-approved by the State.
8. The State reserves the right to withhold up to fifteen percent (15%) of the total amount of the Contract as security for the faithful completion of services or work, as applicable, under the Contract. This amount may be withheld in whole or in part from any single payment or combination of payments otherwise due under the Contract. In the event that such withheld funds are insufficient to satisfy Contractor's obligations to the State, the State may pursue all available remedies, including the right of setoff and recoupment.
9. All vouchers must be submitted by the Contractor no later than thirty (30) calendar days after the end date of the period for which reimbursement is claimed. In no event shall the amount received by the Contractor exceed the budget amount approved by the State Agency, and, if actual expenditures by the Contractor are less than such sum, the amount payable by the State Agency to the Contractor shall not exceed the amount of actual expenditures.
10. All obligations must be incurred prior to the end date of the contract. The final claim of the contract term shall be submitted to the State Agency up to ninety (90) calendar days after the contract end date to make final expenditures if this contract is State Funded. However, if this contract is funded, in whole or in part, with Federal funds, the Contractor shall have up to sixty (60) calendar days after the contract end date to make expenditures and submit the claim to the State Agency.
11. The State shall not be liable for payments on the Contract if it is made pursuant to a

Community Projects Fund appropriation if insufficient monies are available pursuant to Section 99-d of the State Finance Law.

12. The Contractor may be required to submit a Consolidated Fiscal Reporting System ("CFR"). The CFR is a standardized electronic reporting method accepted by State agencies, consisting of schedules which, in different combinations, capture financial information for budgets, quarterly and/or mid-year claims, an annual cost report, and a final claim. The CFR, which must be submitted annually, is both a year-end cost report and a year-end claiming document. For New York City contractors, the due date shall be May 1 of each year; for Upstate and Long Island contractors, the due date shall be November 1 of each year.

**B. Advance Payments and Claiming Requirements:**

1. Advance payments, which the State in its sole discretion may make to not-for-profit grant recipients, shall be made and recouped in accordance with State Finance Law Section 179-u for both multiyear and renewal contracts and the provisions of this contract. Federally funded contract advances will be made as set forth by the Federal grant award requirements and applicable Federal regulations and this contract.
2. For simplified renewals, the payment schedule will be modified as part of the renewal process. For subsequent contract years in multi-year contracts, Contractor will be notified of the scheduled advance payments for the upcoming contract year no later than 90 days prior to the commencement of the contract year.
3. Recoupment of any advance payment(s) shall be recovered by crediting the percentage of subsequent claims and such claims shall be reduced until the advance is fully recovered within the Contract Term. Any unexpended advance balance at the end of the Contract Term shall be refunded by the Contractor to the State.
4. All Claim Submissions including Advance Payments, Initial Payments, and Reimbursements shall be made in accordance with the State Agency approved Schedule A: Claiming Requirements below.

**Schedule A: Claiming Requirement**

Period 1: 02/01/2025 - 01/31/2026			
Claim Number	Claim Type	Claim Period	Due Date
1	Advance(25%)	02/01/2025 - 01/31/2026	02/01/2025
2	Quarterly Reimbursement	02/01/2025 - 04/30/2025	05/30/2025
3	Quarterly Reimbursement	05/01/2025 - 07/31/2025	08/30/2025
4	Quarterly Reimbursement	08/01/2025 - 10/31/2025	11/30/2025
5	Quarterly Reimbursement	11/01/2025 - 01/31/2026	03/02/2026

5. Milestone/Performance Reimbursement is based upon the Contractor satisfactorily meeting specified and meaningful events or milestones in performance of duties under this Contract. Requests for such payments be severable or cumulative. A severable event/milestone is independent of accomplishment of any other event. If the event is cumulative, the successful completion of an event or milestone is dependent on the previous completion of another event.
  - For non-performance based contracts, the Contractor's costs must be allocated pursuant to a plan that meets the requirements of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) at 2 CFR Part 200. Methods used to determine and assign costs shall conform to generally accepted accounting practices and shall be consistent with the method(s) used by the Contractor to determine costs for other operations or programs. Such accounting standards and practices shall be subject to approval of the State.
  - For performance-based milestone contracts, or for the portion of the contract amount paid on a performance basis, the Contractor shall maintain documentation demonstrating that milestones were attained.

6. Fee for Service Reimbursement is based upon a rate established by the Contractor for a service or services rendered. Payment shall be limited to only those fees specifically agreed upon in the Contract and shall be payable in accordance with the State Agency approved Schedule A: Claiming Requirements.
7. Rate Based Reimbursement is based upon an established rate per unit at defined intervals to be paid to the Contractor in accordance with the State Agency approved Schedule A: Claiming Requirements. Payment shall be limited to rate(s) established in the Contract and may be requested no more frequently than monthly.
8. Fifth Quarter Payments occur when there are scheduled payments and an expectation that services will be continued through renewals or subsequent contracts. Fifth quarter payment shall be paid to the Contractor at the conclusion of the final scheduled payment period of the preceding contract period. The State Agency shall generate a voucher in the fourth quarter of the current contract year to pay the scheduled payment for the next contract year.
9. If the Expenditure Based Budget is used in Attachment B-1 and the Expenditure Report is selected below, the Contractor shall submit, not later than the time period listed in the State Agency approved Schedule A: Claiming Requirements above, a detailed expenditure report, by object of expense. This report shall accompany the voucher submitted for such period.

☐ Expenditure Report Required

#### **C. Refunds:**

1. In the event that the Contractor must refund the State for Contract-related activities, including repayment of an advance or an audit disallowance, the refund must be made payable as set forth by the State Agency, must reference the contract number with its payment, and include a brief explanation of why the refund is being made.
2. If at the end or termination of the Contract there remains any unexpended balance of the monies advanced under the Contract in the possession of the Contractor, the Contractor shall make payment within forty-five (45) calendar days of the end or termination of the Contract. In the event that the Contractor fails to refund such balance the State may pursue all available remedies.

#### **D. Progress Reporting Requirements:**

If the State Agency determines that Work Plan Based Reporting is required to summarize the progress made on the performance measures established in the Contract, such reporting shall be made online as directed by the State Agency.

If Work Plan Based Reporting is not required, the Contractor shall comply with the following applicable provisions and the Contractor shall provide the State Agency with one or more of the following reports as required by the State Agency:

1. *Narrative/Qualitative Report:* The Contractor shall submit no later than the time period identified in Schedule B: Progress Reporting Requirements, below, a report, in narrative form, summarizing the services rendered during the quarter. This report shall detail how the Contractor has progressed toward attaining the qualitative goals enumerated in the Work Plan. This report should address all goals and objectives of the project and include a discussion of problems encountered and steps taken to solve them.
2. *Statistical/Quantitative Report:* The Contractor shall submit, on a quarterly basis, no later than the time period listed in Schedule B: Progress Reporting Requirements, below, a detailed report analyzing the quantitative aspects of the program plan, as appropriate (e. g., number of meals served, clients transported, patient/client encounters, procedures performed, training sessions conducted, etc.)
3. *Final Report:* The Contractor shall submit a final report as required by the Contract, not later than the time period listed in Schedule B: Progress Reporting Requirements, below, which reports on all aspects of the program and detailing how the use of funds were utilized in achieving the goals set forth in Attachment C (Work Plan).

4. *Consolidated Fiscal Report:* The Contractor shall submit a consolidated fiscal report, which includes a year-end cost report and final claim not later than the time period listed in Schedule B: Progress Reporting Requirements below.

**Schedule B: Progress Reporting Requirements**

Period 0: –			
Progress Report	Report Type	Report Period	Due Date
0		-	

**E. Special Payment and Reporting Provisions:**

**Period 1:**

# **ATTACHMENT E** **BUDGET SUMMARY**

Contractor: Putnam County Office for Senior Resources

Contract: C240035

Contract Period: 2/1/25 - 1/31/26

Budget Category	Administration	Services Costs	Total Costs
1. Personnel	\$ -	\$ 145,557	\$ 145,557
2. Fringe Benefits	-	87,334	87,334
3. Equipment	-	-	-
4. Travel	-	-	-
5. Maintenance & Operations	-	1,350	1,350
6. Other Expenses	-	-	-
7. Subcontractors/Consultants	-	-	-
8. Total Budget (sum of Lines 1 - 7)	-	234,241	234,241
9. Less: Program Income/Contributions	\$ -	\$ -	\$ -
10. Net Budget (Line 8 minus Line 9)	\$ -	\$ 234,241	\$ 234,241
11. Less: Matching Funds	\$ -	\$ 129,234	\$ 129,234
12. State Funds Requested	\$ -	\$ 105,007	\$ 105,007

Contract Number: C240035

Page 1 of 6: Attachment E- Budget

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

1. Personnel					
Complete for Each Position Name and Title	Annual Salary or Hourly Rate	Admin	Services	Charged to Program	
N Kennedy, Frances (35 hrs)	86,626		43,313	43,313	
T Case Manager/RN					
N Mayer, Kim (35 hrs)	82,499		41,250	41,250	
T Caseworker					
N Connolly, Kathleen (25 hrs)	27,308		8,192	8,192	
T Daycare Helper					
N Cole, Rita (35 hrs)	48,930		14,679	14,679	
T Daycare Helper					
N Hartnett, Patricia (35 hrs)	42,267		12,680	12,680	
T Daycare Helper					
N Redner, Linda (25 hrs)	30,191		9,057	9,057	
T Daycare Helper					
N Gilroy, Michele (25 hrs.)	27,308		8,192	8,192	
T Daycare Helper					
N Zallo, Susan (25 hrs.)	27,308		8,192	8,192	
T Daycare Helper					
N			-	-	
T					
N			-	-	
T					
NOTE: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget.					
TOTAL		\$ -	\$ 145,557	\$ 145,557	

<b>2. Fringe Benefits - List the Total Fringe Benefits in the space provided</b>				
<b>TOTAL</b>		\$ 87,334	\$ 87,334	

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

**3. Equipment:** List only items having a unit cost of \$1,000 or more, and a useful life of one year or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment.

Item and Description	Quantity	P=Purchase L=Lease/Rental	Purchase or Rental Price	Amount Chargeable to Program
	Miscellaneous Equipment - List Items			
			<b>TOTAL</b>	\$ -

**Amount of Equipment Costs Charged to:**  
**Administration** \_\_\_\_\_ **Services** \_\_\_\_\_

<b>4. Travel</b>			
Mileage - indicate the rate per mile-->			
Lodging & Meals			
Public Transportation, Parking and Tolls			
Vehicle Insurance			
Vehicle Maintenance & Repairs, Gasoline			
Other Travel Costs - specify:			
Other Travel Costs - specify:			
			<b>TOTAL</b> \$ -

**Amount of Travel Costs Charged to:**  
**Administration** \_\_\_\_\_ **Services** \_\_\_\_\_

# ATTACHMENT E

Contractor: Putnam County Office for Senior Resources

<b>5. Maintenance and Operations</b>		
Rent/Utilities: Include information below for rental property		
Location/Address: _____		Owner: _____
Monthly Rental:	_____ x _____ x _____ = \$ -	
	amt. % chargeable # months	
Utilities:	_____	
Janitorial Services:	1,350	
Facility Maintenance & Minor Repairs:	_____	
	<b>Sub-Total</b>	1,350
Telephone:	<b>Sub-Total</b>	
Postage:	<b>Sub-Total</b>	
Supplies:	<b>Sub-Total</b>	
(Supplies may include office, program and maintenance supplies)		
Printing & Photocopying	<b>Sub-Total</b>	
Meals, Food, Snacks	<b>Sub-Total</b>	
Equipment Maintenance & Repair: (describe equipment and list amount)		
_____	_____	
_____	_____	
_____	_____	
	<b>Sub-Total</b>	-
	<b>TOTAL</b>	1,350

Amount of Maintenance and Operations Charged to:

Administration \_\_\_\_\_

Services \_\_\_\_\_

<b>6. Other Expenses:</b> List only those items which do not fit under other budget categories. Include item and amount.	
<b>TOTAL</b>	\$ -

Amount of Other Expenses Charged to:

Administration \_\_\_\_\_

Services \_\_\_\_\_

Contract Number: C240035

Page 4 of 6: Attachment E - Budget



**ATTACHMENT E**

**Contractor: Putnam County Office for Senior Resources**

**7. Subcontractors/Consultants:** A copy of each subcontract or consultant agreement must be submitted to NYSOFA before reimbursement will be made. Complete and submit a subcontractor budget for each subcontractor that is paid and/or providing matching funds of \$5,000 or more. If payment is based on a unit rate (e.g., \$50 per hour), include the rate and number of units in the column provided.

Provider/Type of Service	Unit Rate	Amt Paid to	Amt Used	Total (A+B)
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
			<b>TOTAL</b>	<b>\$0</b>

**Amount of Subcontractors/Consultants Charged to:**

**Administration** \_\_\_\_\_

**Services** \_\_\_\_\_

<b>8. Total Budget (sum of Lines 1 - 8)</b>		<b>\$234,241</b>
<b>9. Program Income:</b> List total amounts anticipated		
Participant Contributions:	<u>\$0</u>	
Participant Fees:	_____	
Other Income (specify source):	_____	
	_____	
	<u>\$</u> _____	
<b>TOTAL</b>		<b>\$0</b>
<b>LESS: PROGRAM INCOME USED AS MATCH</b>		
<b>Amount of Program Income/Contributions used as:</b>		
<b>Administration</b>	<b>Services</b>	
<b>NET TOTAL</b>		<b>\$0</b>

<b>10. Net Budget (Line 8 minus Line 9)</b>	<b>\$234,241</b>
---------------------------------------------	------------------

Contract Number: C240035

Page 5 of 6: Attachment E - Budget

# **ATTACHMENT E - SADS Supporting Budget Schedule**

<b>11. LOCAL MATCHING FUNDS</b> - List the source of funds and the amount from each source,		
<b>Note: All match needs to be reflected in this section as well as the expense detail of the budget (e.g., the value of in-kind space should be included in section 5. Maintenance and Operations)</b>		
<b>SOURCE</b>	<b>Check [ X ] If In Kind</b>	<b>TOTAL AMOUNT</b>
PUTNAM COUNTY LOCAL TAX DOLLARS	[   ]	\$129,234
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	<b>TOTAL MATCH</b>	\$129,234
<p align="center"><b>Amount of Local Matching Funds Charged to:</b></p> <p> <b>Administration</b> _____ <b>Services</b> _____ </p>		
<b>12. State Funds Requested (Line 10 minus Line 11)</b>		\$105,007

# **ATTACHMENT E** **BUDGET SUMMARY**

Contractor: Putnam County Office for Senior Resources

Contract: C240035

Contract Period: 2/1/26 - 1/31/27

Budget Category	Administration	Services Costs	Total Costs
1. Personnel	\$ -	\$ 149,560	\$ 149,560
2. Fringe Benefits	-	90,858	90,858
3. Equipment	-	-	-
4. Travel	-	-	-
5. Maintenance & Operations	-	1,450	1,450
6. Other Expenses	-	-	-
7. Subcontractors/Consultants	-	-	-
8. Total Budget (sum of Lines 1 - 7)	-	241,868	241,868
9. Less: Program Income/Contributions	\$ -	\$ -	\$ -
10. Net Budget (Line 8 minus Line 9)	\$ -	\$ 241,868	\$ 241,868
11. Less: Matching Funds	\$ -	\$ 136,861	\$ 136,861
12. State Funds Requested	\$ -	\$ 105,007	\$ 105,007

Contract Number: C240035

Page 1 of 6: Attachment E- Budget

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

<b>1. Personnel</b>					
Complete for Each Position Name and Title	Annual Salary or Hourly Rate	Admin	Services	Charged to Program	
N Kennedy, Frances (35 hrs)					
T Case Manager/RN	89,009		44,505	44,505	
N Mayer, Kim (35 hrs)					
T Caseworker	84,768		42,384	42,384	
N Connolly, Kathleen (25 hrs)					
T Daycare Helper	28,059		8,418	8,418	
N Cole, Rita (35 hrs)					
T Daycare Helper	50,275		15,083	15,083	
N Hartnett, Patricia (35 hrs)					
T Daycare Helper	43,430		13,029	13,029	
N Redner, Linda (25 hrs)					
T Daycare Helper	31,021		9,306	9,306	
N Gilroy, Michele (25 hrs.)					
T Daycare Helper	28,059		8,418	8,418	
N Zallo, Susan (25 hrs.)					
T Daycare Helper	28,059		8,418	8,418	
N					
T			-	-	
N					
T			-	-	
NOTE: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget.					
<b>TOTAL</b>	\$	-	\$ 149,560	\$ 149,560	

<b>2. Fringe Benefits</b> - List the Total Fringe Benefits in the space provided				
<b>TOTAL</b>		\$ 90,858	\$ 90,858	

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

**3. Equipment:** List only items having a unit cost of \$1,000 or more, and a useful life of one year or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment.

Item and Description	Quantity	P=Purchase L=Lease/Rental	Purchase or Rental Price	Amount Chargeable to Program
	Miscellaneous Equipment - List Items			
			<b>TOTAL</b>	\$ -

**Amount of Equipment Costs Charged to:**

Administration                     

Services                     

<b>4. Travel</b>			
Mileage - indicate the rate per mile-->			
Lodging & Meals			
Public Transportation, Parking and Tolls			
Vehicle Insurance			
Vehicle Maintenance & Repairs, Gasoline			
Other Travel Costs - specify:			
Other Travel Costs - specify:			
			<b>TOTAL</b>
			\$ -

**Amount of Travel Costs Charged to:**

Administration                     

Services

# ATTACHMENT E

Contractor: Putnam County Office for Senior Resources

<b>5. Maintenance and Operations</b>		
Rent/Utilities: Include information below for rental property		
Location/Address: _____ Owner: _____		
Monthly Rental: _____ x _____ x _____ = \$ -	amt. % chargeable # months	
Utilities: _____		
Janitorial Services: _____ 1,450		
Facility Maintenance & Minor Repairs: _____		
	<b>Sub-Total</b>	1,450
Telephone: _____	<b>Sub-Total</b>	
Postage: _____	<b>Sub-Total</b>	
Supplies: _____ (Supplies may include office, program and maintenance supplies)	<b>Sub-Total</b>	
Printing & Photocopying _____	<b>Sub-Total</b>	
Meals, Food, Snacks _____	<b>Sub-Total</b>	
Equipment Maintenance & Repair: (describe equipment and list amount)		
_____	_____	
_____	_____	
_____	_____	
	<b>Sub-Total</b>	-
	<b>TOTAL</b>	1,450

Amount of Maintenance and Operations Charged to:

Administration

Services

<b>6. Other Expenses:</b> List only those items which do not fit under other budget categories. Include item and amount.	
_____	_____
_____	_____
_____	_____
_____	_____
<b>TOTAL</b>	\$ -

Amount of Other Expenses Charged to:

Administration

Services

Contract Number: C240035

Page 4 of 6: Attachment E - Budget



# ATTACHMENT E

Contractor: Putnam County Office for Senior Resources

**7. Subcontractors/Consultants:** A copy of each subcontract or consultant agreement must be submitted to NYSOFA before reimbursement will be made. Complete and submit a subcontractor budget for each subcontractor that is paid and/or providing matching funds of \$5,000 or more. If payment is based on a unit rate (e.g., \$50 per hour), include the rate and number of units in the column provided.

Provider/Type of Service	Unit Rate	Amt Paid to	Amt Used	Total (A+B)
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
			<b>TOTAL</b>	<b>\$0</b>

Amount of Subcontractors/Consultants Charged to:

Administration \_\_\_\_\_

Services \_\_\_\_\_

<b>8. Total Budget (sum of Lines 1 - 8)</b>		<b>\$241,868</b>
<b>9. Program Income:</b> List total amounts anticipated		
Participant Contributions:	<u>\$0</u>	
Participant Fees:	_____	
Other Income (specify source):	_____	
	_____	
	<u>\$</u> _____	
<b>TOTAL</b>		<b>\$0</b>
<b>LESS: PROGRAM INCOME USED AS MATCH</b>		
Amount of Program Income/Contributions used as:		
Administration	Services	
<b>NET TOTAL</b>		<b>\$0</b>

<b>10. Net Budget (Line 8 minus Line 9)</b>	<b>\$241,868</b>
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Contract Number: C240035

Page 5 of 6: Attachment E - Budget

**ATTACHMENT E - SADS Supporting Budget Schedule**

<b>11. LOCAL MATCHING FUNDS</b> - List the source of funds and the amount from each source,		
<b>Note: All match needs to be reflected in this section as well as the expense detail of the budget (e.g., the value of in-kind space should be included in section 5. Maintenance and Operations)</b>		
<b>SOURCE</b>	<b>Check [ X ] If In Kind</b>	<b>TOTAL AMOUNT</b>
PUTNAM COUNTY LOCAL TAX DOLLARS	[   ]	\$136,861
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	<b>TOTAL MATCH</b>	\$136,861
<p align="center"><b>Amount of Local Matching Funds Charged to:</b></p> <p> <span style="margin-right: 150px;"><b>Administration</b> _____</span> <b>Services</b> _____ </p>		
<b>12. State Funds Requested (Line 10 minus Line 11)</b>		\$105,007



# ATTACHMENT E BUDGET SUMMARY

Contractor: Putnam County Office for Senior Resources

Contract: C240035

Contract Period: 2/1/27 - 1/31/28

Budget Category	Administration	Services Costs	Total Costs
1. Personnel	\$ -	\$ 153,671	\$ 153,671
2. Fringe Benefits	-	94,508	94,508
3. Equipment	-	-	-
4. Travel	-	-	-
5. Maintenance & Operations	-	1,557	1,557
6. Other Expenses	-	-	-
7. Subcontractors/Consultants	-	-	-
8. Total Budget (sum of Lines 1 - 7)	-	249,736	249,736
9. Less: Program Income/Contributions	\$ -	\$ -	\$ -
10. Net Budget (Line 8 minus Line 9)	\$ -	\$ 249,736	\$ 249,736
11. Less: Matching Funds	\$ -	\$ 144,729	\$ 144,729
12. State Funds Requested	\$ -	\$ 105,007	\$ 105,007

Contract Number: C240035

Page 1 of 6: Attachment E- Budget

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

1. Personnel					
Complete for Each Position Name and Title	Annual Salary or Hourly Rate	Admin	Services	Charged to Program	
N Kennedy, Frances (35 hrs)					
T Case Manager/RN	91,456		45,728	45,728	
N Mayer, Kim (35 hrs)					
T Caseworker	87,099		43,550	43,550	
N Connolly, Kathleen (25 hrs)					
T Daycare Helper	28,830		8,649	8,649	
N Cole, Rita (35 hrs)					
T Daycare Helper	51,658		15,497	15,497	
N Hartnett, Patricia (35 hrs)					
T Daycare Helper	44,624		13,387	13,387	
N Redner, Linda (25 hrs)					
T Daycare Helper	31,874		9,562	9,562	
N Gilroy, Michele (25 hrs.)					
T Daycare Helper	28,830		8,649	8,649	
N Zallo, Susan (25 hrs.)					
T Daycare Helper	28,830		8,649	8,649	
N					
T			-	-	
N					
T			-	-	
<b>TOTAL</b>		\$ -	\$ 153,671	\$ 153,671	

**NOTE:** If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget.

2. Fringe Benefits - List the Total Fringe Benefits in the space provided				
<b>TOTAL</b>			\$ 94,508	\$ 94,508

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

**3. Equipment:** List only items having a unit cost of \$1,000 or more, and a useful life of one year or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment.

Item and Description	Quantity	P=Purchase L=Lease/Rental	Purchase or Rental Price	Amount Chargeable to Program
	Miscellaneous Equipment - List Items			
			<b>TOTAL</b>	\$ -

**Amount of Equipment Costs Charged to:**

**Administration** \_\_\_\_\_

**Services** \_\_\_\_\_

**4. Travel**

Mileage - indicate the rate per mile-->		
Lodging & Meals		
Public Transportation, Parking and Tolls		
Vehicle Insurance		
Vehicle Maintenance & Repairs, Gasoline		
Other Travel Costs - specify:		
Other Travel Costs - specify:		
		<b>TOTAL</b>
		\$ -

**Amount of Travel Costs Charged to:**

**Administration** \_\_\_\_\_

**Services** \_\_\_\_\_

**Contractor:** Putnam County Office for Senior Resources

**Amount of Maintenance and Operations Charged to:**

**Amount of Other Expenses Charged to:**

Contract Number: C240035  
Page 4 of 6: Attachment B - Budget

# **ATTACHMENT E**

**Contractor: Putnam County Office for Senior Resources**

**7. Subcontractors/Consultants:** A copy of each subcontract or consultant agreement must be submitted to NYSOFA before reimbursement will be made. Complete and submit a subcontractor budget for each subcontractor that is paid and/or providing matching funds of \$5,000 or more. If payment is based on a unit rate (e.g., \$50 per hour), include the rate and number of units in the column provided.

Provider/Type of Service	Unit Rate	Amt Paid to	Amt Used	Total (A+B)
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
			<b>TOTAL</b>	\$0

**Amount of Subcontractors/Consultants Charged to:**

**Administration** \_\_\_\_\_

**Services** \_\_\_\_\_

<b>8. Total Budget (sum of Lines 1 - 8)</b>		<b>\$249,736</b>
<b>9. Program Income:</b> List total amounts anticipated		
Participant Contributions:	<u>\$0</u>	
Participant Fees:	_____	
Other Income (specify source):	_____	
	_____	
	<u>\$</u> _____	
<b>TOTAL</b>		\$0
<b>LESS: PROGRAM INCOME USED AS MATCH</b>		
<b>Amount of Program Income/Contributions used as:</b>		
<b>Administration</b>	<b>Services</b>	
<b>NET TOTAL</b>		<b>\$0</b>

<b>10. Net Budget (Line 8 minus Line 9)</b>	<b>\$249,736</b>
---------------------------------------------	------------------

Contract Number: C240035

Page 5 of 6: Attachment E - Budget

# **ATTACHMENT E - SADS Supporting Budget Schedule**

## **11. LOCAL MATCHING FUNDS** - List the source of funds and the amount from each source,

**Note: All match needs to be reflected in this section as well as the expense detail of the budget (e.g., the value of in-kind space should be included in section 5. Maintenance and Operations)**

SOURCE	Check [ X ] If In Kind	TOTAL AMOUNT
PUTNAM COUNTY LOCAL TAX DOLLARS	[   ]	\$144,729
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	<b>TOTAL MATCH</b>	\$144,729

### **Amount of Local Matching Funds Charged to:**

**Administration** \_\_\_\_\_

**Services** \_\_\_\_\_

## **12. State Funds Requested (Line 10 minus Line 11)**

**\$105,007**

Contract Number: C240035

Page 6 of 6: Attachment E - Budget

# **ATTACHMENT E** **BUDGET SUMMARY**

Contractor: Putnam County Office for Senior Resources

Contract: C240035

Contract Period: 2/1/28 - 1/31/29

Budget Category	Administration	Services Costs	Total Costs
1. Personnel	\$ -	\$ 157,897	\$ 157,897
2. Fringe Benefits	-	98,291	98,291
3. Equipment	-	-	-
4. Travel	-	-	-
5. Maintenance & Operations	-	1,672	1,672
6. Other Expenses	-	-	-
7. Subcontractors/Consultants	-	-	-
8. Total Budget (sum of Lines 1 - 7)	-	257,860	257,860
9. Less: Program Income/Contributions	\$ -	\$ -	\$ -
10. Net Budget (Line 8 minus Line 9)	\$ -	\$ 257,860	\$ 257,860
11. Less: Matching Funds	\$ -	\$ 152,853	\$ 152,853
12. State Funds Requested	\$ -	\$ 105,007	\$ 105,007

Contract Number: C240035

Page 1 of 6: Attachment E- Budget

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

1. Personnel					
Complete for Each Position Name and Title	Annual Salary or Hourly Rate	Admin	Services	Charged to Program	
N Kennedy, Frances (35 hrs)	93,971		46,986	46,986	
T Case Manager/RN					
N Mayer, Kim (35 hrs)	89,494		44,747	44,747	
T Caseworker					
N Connolly, Kathleen (25 hrs)	29,623		8,887	8,887	
T Daycare Helper					
N Cole, Rita (35 hrs)	53,078		15,923	15,923	
T Daycare Helper					
N Hartnett, Patricia (35 hrs)	45,851		13,755	13,755	
T Daycare Helper					
N Redner, Linda (25 hrs)	32,751		9,825	9,825	
T Daycare Helper					
N Gilroy, Michele (25 hrs.)	29,623		8,887	8,887	
T Daycare Helper					
N Zallo, Susan (25 hrs.)	29,623		8,887	8,887	
T Daycare Helper					
N			-	-	
T					
N			-	-	
T					
NOTE: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget.					
TOTAL		\$ -	\$ 157,897	\$ 157,897	

<b>2. Fringe Benefits - List the Total Fringe Benefits in the space provided</b>				
<b>TOTAL</b>		\$ 98,291	\$ 98,291	



**ATTACHMENT E**

**Contractor:** Putnam County Office for Senior Resources

<b>3. Equipment:</b> List only items having a unit cost of \$1,000 or more, and a useful life of one year or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment.				
Item and Description	Quantity	P=Purchase L=Lease/Rental	Purchase or Rental Price	Amount Chargeable to Program
	<b>Miscellaneous Equipment - List Items</b>			
			<b>TOTAL</b>	\$ -

**Amount of Equipment Costs Charged to:**  
**Administration** \_\_\_\_\_ **Services** \_\_\_\_\_

<b>4. Travel</b>			
Mileage - indicate the rate per mile-->			
Lodging & Meals			
Public Transportation, Parking and Tolls			
Vehicle Insurance			
Vehicle Maintenance & Repairs, Gasoline			
Other Travel Costs - specify:			
Other Travel Costs - specify:			
			<b>TOTAL</b> \$ -

**Amount of Travel Costs Charged to:**  
**Administration** \_\_\_\_\_ **Services** \_\_\_\_\_

# ATTACHMENT E

Contractor: Putnam County Office for Senior Resources

<b>5. Maintenance and Operations</b>		
Rent/Utilities: Include information below for rental property		
Location/Address: _____ Owner: _____		
Monthly Rental: _____ x _____ x _____ = \$ -	amt. % chargeable # months	
Utilities: _____		
Janitorial Services: _____	1,672	
Facility Maintenance & Minor Repairs: _____		
	<b>Sub-Total</b>	1,672
Telephone: _____	<b>Sub-Total</b>	
Postage: _____	<b>Sub-Total</b>	
Supplies: _____ (Supplies may include office, program and maintenance supplies)	<b>Sub-Total</b>	
Printing & Photocopying _____	<b>Sub-Total</b>	
Meals, Food, Snacks _____	<b>Sub-Total</b>	
Equipment Maintenance & Repair: (describe equipment and list amount)		
_____	_____	
_____	_____	
_____	_____	
	<b>Sub-Total</b>	-
	<b>TOTAL</b>	1,672

Amount of Maintenance and Operations Charged to:

Administration

Services

<b>6. Other Expenses:</b> List only those items which do not fit under other budget categories. Include item and amount.	
_____	_____
_____	_____
_____	_____
_____	_____
<b>TOTAL</b>	\$ -

Amount of Other Expenses Charged to:

Administration

Services

Contract Number: C240035

Page 4 of 6: Attachment E - Budget

# **ATTACHMENT E**

**Contractor: Putnam County Office for Senior Resources**

**7. Subcontractors/Consultants:** A copy of each subcontract or consultant agreement must be submitted to NYSOFA before reimbursement will be made. Complete and submit a subcontractor budget for each subcontractor that is paid and/or providing matching funds of \$5,000 or more. If payment is based on a unit rate (e.g., \$50 per hour), include the rate and number of units in the column provided.

Provider/Type of Service	Unit Rate	Amt Paid to	Amt Used	Total (A+B)
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
			<b>TOTAL</b>	<b>\$0</b>

**Amount of Subcontractors/Consultants Charged to:**

**Administration** \_\_\_\_\_

**Services** \_\_\_\_\_

<b>8. Total Budget (sum of Lines 1 - 8)</b>		<b>\$257,860</b>
<b>9. Program Income:</b> List total amounts anticipated		
Participant Contributions:	<u>\$0</u>	
Participant Fees:	_____	
Other Income (specify source):	_____	
	_____	
	<u>\$</u>	
<b>TOTAL</b>		<b>\$0</b>
<b>LESS: PROGRAM INCOME USED AS MATCH</b>		
<b>Amount of Program Income/Contributions used as:</b>		
<b>Administration</b>	<b>Services</b>	
<b>NET TOTAL</b>		<b>\$0</b>

<b>10. Net Budget (Line 8 minus Line 9)</b>	<b>\$257,860</b>
---------------------------------------------	------------------

Contract Number: C240035

Page 5 of 6: Attachment E - Budget

**ATTACHMENT E - SADS Supporting Budget Schedule**

<b>11. LOCAL MATCHING FUNDS</b> - List the source of funds and the amount from each source,		
<b>Note: All match needs to be reflected in this section as well as the expense detail of the budget (e.g., the value of in-kind space should be included in section 5. Maintenance and Operations)</b>		
<b>SOURCE</b>	<b>Check [ X ] If In Kind</b>	<b>TOTAL AMOUNT</b>
PUTNAM COUNTY LOCAL TAX DOLLARS	[   ]	\$152,853
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	<b>TOTAL MATCH</b>	\$152,853
<p align="center"><b>Amount of Local Matching Funds Charged to:</b></p> <p> <b>Administration</b> _____ <b>Services</b> _____ </p>		
<b>12. State Funds Requested (Line 10 minus Line 11)</b>		\$105,007

# **ATTACHMENT E** **BUDGET SUMMARY**

Contractor: Putnam County Office for Senior Resources

Contract: C240035

Contract Period: 2/1/29 - 1/31/30

<b>Budget Category</b>	<b>Administration</b>	<b>Services Costs</b>	<b>Total Costs</b>
1. Personnel	\$ -	\$ 162,240	\$ 162,240
2. Fringe Benefits	-	102,211	102,211
3. Equipment	-	-	-
4. Travel	-	-	-
5. Maintenance & Operations	-	1,911	1,911
6. Other Expenses	-	-	-
7. Subcontractors/Consultants	-	-	-
8. Total Budget (sum of Lines 1 - 7)	-	266,362	266,362
9. Less: Program Income/Contributions	\$ -	\$ -	\$ -
10. Net Budget (Line 8 minus Line 9)	\$ -	\$ 266,362	\$ 266,362
11. Less: Matching Funds	\$ -	\$ 161,355	\$ 161,355
12. State Funds Requested	\$ -	\$ 105,007	\$ 105,007

Contract Number: C240035

Page 1 of 6: Attachment E- Budget

**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

<b>1. Personnel</b>					
Complete for Each Position Name and Title	Annual Salary or Hourly Rate	Admin	Services	Charged to Program	
N Kennedy, Frances (35 hrs)					
T Case Manager/RN	96,556		48,278	48,278	
N Mayer, Kim (35 hrs)					
T Caseworker	91,955		45,978	45,978	
N Connolly, Kathleen (25 hrs)					
T Daycare Helper	30,438		9,131	9,131	
N Cole, Rita (35 hrs)					
T Daycare Helper	54,538		16,361	16,361	
N Hartnett, Patricia (35 hrs)					
T Daycare Helper	47,112		14,134	14,134	
N Redner, Linda (25 hrs)					
T Daycare Helper	33,652		10,096	10,096	
N Gilroy, Michele (25 hrs.)					
T Daycare Helper	30,438		9,131	9,131	
N Zallo, Susan (25 hrs.)					
T Daycare Helper	30,438		9,131	9,131	
N					
T			-	-	
N					
T			-	-	
NOTE: If employee is paid a salary, then list the annual salary. If employee is not on salary, then list the hourly rate. When reporting the rate of pay on vouchering forms, the format (i.e., salary or hourly rate) must match this budget.					
<b>TOTAL</b>		\$ -	\$ 162,240	\$ 162,240	

<b>2. Fringe Benefits</b> - List the Total Fringe Benefits in the space provided				
<b>TOTAL</b>			\$ 102,211	\$ 102,211



**ATTACHMENT E**

Contractor: Putnam County Office for Senior Resources

**3. Equipment:** List only items having a unit cost of \$1,000 or more, and a useful life of one year or more. For equipment with a unit cost of less than \$1,000, list the items and the total for these items under Miscellaneous Equipment.

Item and Description	Quantity	P=Purchase L=Lease/Rental	Purchase or Rental Price	Amount Chargeable to Program
	Miscellaneous Equipment - List Items			
			<b>TOTAL</b>	\$ -

**Amount of Equipment Costs Charged to:**

Administration \_\_\_\_\_ Services \_\_\_\_\_

<b>4. Travel</b>			
Mileage - indicate the rate per mile-->			
Lodging & Meals			
Public Transportation, Parking and Tolls			
Vehicle Insurance			
Vehicle Maintenance & Repairs, Gasoline			
Other Travel Costs - specify:			
Other Travel Costs - specify:			
			<b>TOTAL</b>
			\$ -

**Amount of Travel Costs Charged to:**

Administration \_\_\_\_\_ Services \_\_\_\_\_

# ATTACHMENT E

Contractor: Putnam County Office for Senior Resources

<b>5. Maintenance and Operations</b>		
Rent/Utilities: Include information below for rental property		
Location/Address: _____ Owner: _____		
Monthly Rental: _____ x _____ x _____ = \$ -	amt. % chargeable # months	
Utilities: _____		
Janitorial Services: _____	1,911	
Facility Maintenance & Minor Repairs: _____		
	<b>Sub-Total</b>	1,911
Telephone: _____	<b>Sub-Total</b>	
Postage: _____	<b>Sub-Total</b>	
Supplies: _____ (Supplies may include office, program and maintenance supplies)	<b>Sub-Total</b>	
Printing & Photocopying _____	<b>Sub-Total</b>	
Meals, Food, Snacks _____	<b>Sub-Total</b>	
Equipment Maintenance & Repair: (describe equipment and list amount)		
_____	_____	
_____	_____	
_____	_____	
	<b>Sub-Total</b>	-
	<b>TOTAL</b>	1,911

Amount of Maintenance and Operations Charged to:

Administration

Services

<b>6. Other Expenses:</b> List only those items which do not fit under other budget categories. Include item and amount.	
_____	_____
_____	_____
_____	_____
_____	_____
<b>TOTAL</b>	\$ -

Amount of Other Expenses Charged to:

Administration

Services

Contract Number: C240035

Page 4 of 6: Attachment E - Budget



# **ATTACHMENT E**

**Contractor: Putnam County Office for Senior Resources**

**7. Subcontractors/Consultants:** A copy of each subcontract or consultant agreement must be submitted to NYSOFA before reimbursement will be made. Complete and submit a subcontractor budget for each subcontractor that is paid and/or providing matching funds of \$5,000 or more. If payment is based on a unit rate (e.g., \$50 per hour), include the rate and number of units in the column provided.

Provider/Type of Service	Unit Rate	Amt Paid to	Amt Used	Total (A+B)
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
				\$0
			<b>TOTAL</b>	<b>\$0</b>

**Amount of Subcontractors/Consultants Charged to:**

**Administration** \_\_\_\_\_

**Services** \_\_\_\_\_

<b>8. Total Budget (sum of Lines 1 - 8)</b>		<b>\$266,362</b>
<b>9. Program Income:</b> List total amounts anticipated		
Participant Contributions:	<u>\$0</u>	
Participant Fees:	_____	
Other Income (specify source):	_____	
	_____	
	<u>\$</u> _____	
<b>TOTAL</b>		<b>\$0</b>
<b>LESS: PROGRAM INCOME USED AS MATCH</b>		
<b>Amount of Program Income/Contributions used as:</b>		
<b>Administration</b>	<b>Services</b>	
<b>NET TOTAL</b>		<b>\$0</b>

<b>10. Net Budget (Line 8 minus Line 9)</b>	<b>\$266,362</b>
---------------------------------------------	------------------

Contract Number: C240035

Page 5 of 6: Attachment E - Budget

**Attachment E - SADS Supporting Budget Schedule**

<b>11. LOCAL MATCHING FUNDS</b> - List the source of funds and the amount from each source,		
<b>Note:</b> All match needs to be reflected in this section as well as the expense detail of the budget (e.g., the value of in-kind space should be included in section 5. Maintenance and Operations)		
<b>SOURCE</b>	<b>Check [ X ] If In Kind</b>	<b>TOTAL AMOUNT</b>
PUTNAM COUNTY LOCAL TAX DOLLARS	[   ]	\$161,355
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	[   ]	
	<b>TOTAL MATCH</b>	\$161,355
<p align="center"><b>Amount of Local Matching Funds Charged to:</b></p> <p> <b>Administration</b> _____ <b>Services</b> _____ </p>		
<b>12. State Funds Requested (Line 10 minus Line 11)</b>		\$105,007

**PARTICIPATION BY MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISES:  
REQUIREMENTS AND PROCEDURES**

**I. General Provisions**

- A. The New York State Office for the Aging (NYSOFA) is required to implement the provisions of New York State Executive Law Article 15-A and Parts 140-145 of Title 5 of the New York Codes, Rules and Regulations ("NYCRR") for all State contracts, as defined therein, with a value (1) in excess of \$25,000 for labor, services, equipment, materials, or any combination of the foregoing or (2) in excess of \$100,000 for real property renovations and construction.
- B. The contractor to the subject contract (the "Contractor" and the "Contract," respectively) agrees, in addition to any other nondiscrimination provision of the Contract and at no additional cost to NYSOFA, to fully comply and cooperate with NYSOFA in the implementation of New York State Executive Law Article 15-A and the regulations promulgated thereunder. These requirements include equal employment opportunities for minority group members and women ("EEO") and contracting opportunities for New York State-certified minority and women-owned business enterprises ("MWBEs"). The Contractor's demonstration of "good faith efforts" pursuant to 5 NYCRR § 142.8 shall be a part of these requirements. These provisions shall be deemed supplementary to, and not in lieu of, the nondiscrimination provisions required by New York State Executive Law Article 15 (the "Human Rights Law") and other applicable federal, state, and local laws.
- C. Failure to comply with all of the requirements herein may result in a finding of non-responsiveness, non-responsibility and/or a breach of contract, leading to the assessment of liquidated damages pursuant to Section VII of this Attachment and such other remedies are available to NYSOFA pursuant to the Contract and applicable law.

**II. Contract Goals**

- A. For purposes of this Contract, NYSOFA hereby establishes an overall goal of 30% for MWBE participation, 15% for New York State-certified minority-owned business enterprise ("MBE") participation and 15% for New York State-certified women-owned business enterprise ("WBE") participation (collectively, "MWBE Contract Goals") based on the current availability of MBEs and WBEs. Contractors are encouraged to fulfill the suggested 15% goal for both MBE and WBE vendors; however, strict adherence to the suggested MBE and WBE percentages is not mandatory as long as the overall 30% goal is met.
- B. For purposes of providing meaningful participation by MWBEs on the Contract and achieving the MWBE Contract Goals established in Section II-A hereof, the

## Attachment M

Contractor should reference the directory of MWBEs at the following internet address: <https://ny.newnycontracts.com>.

Additionally, the Contractor is encouraged to contact the Division of Minority and Women's Business Development at (212) 803-2414 to discuss additional methods of maximizing participation by MWBEs on the Contract.

- C. The Contractor understands that only sums paid to MWBEs for the performance of a commercially useful function, as that term is defined in 5 NYCRR § 140.1, may be applied towards the achievement of the applicable MWBE participation goal. The portion of a contract with an MWBE serving as a broker that shall be deemed to represent the commercially useful function performed by the MWBE shall be 25% of the total value of the contract.
- D. The Contractor must document "good faith efforts," pursuant to 5 NYCRR § 142.8, to provide meaningful participation by MWBEs as subcontractors and suppliers in the performance of the Contract. Such documentation shall include, but not necessarily be limited to:
  - 1. Evidence of outreach to MWBEs;
  - 2. Any responses by MWBEs to the Contractor's outreach;
  - 3. Copies of advertisements for participation by MWBEs in appropriate general circulation, trade, and minority or women-oriented publications;
  - 4. The dates of attendance at any pre-bid, pre-award, or other meetings, if any, scheduled by NYSOFA with MWBEs; and,
  - 5. Information describing specific steps undertaken by the Contractor to reasonably structure the Contract scope of work to maximize opportunities for MWBE participation.

### III. Equal Employment Opportunity ("EEO")

- A. The provisions of Article 15-A of the Executive Law and the rules and regulations promulgated thereunder pertaining to equal employment opportunities for minority group members and women shall apply to the Contract.
- B. In performing the Contract, the Contractor shall:
  - 1. Ensure that each contractor and subcontractor performing work on the Contract shall undertake or continue existing EEO programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, EEO shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, or termination and rates of pay or other forms of compensation.

## Attachment M

2. The Contractor shall submit an EEO policy statement to NYSOFA within seventy-two (72) hours after the date of the notice by NYSOFA to award the Contract to the Contractor.
3. If the Contractor, or any of its subcontractors, does not have an existing EEO policy statement, NYSOFA may require the Contractor or subcontractor to adopt a model statement (see Form MWBE 100 – Minority and Women-Owned Business Enterprises Equal Employment Opportunity Policy Statement).
4. The Contractor's EEO policy statement shall include the following language:
  - a. The Contractor will not discriminate against any employee or applicant for employment because of race, creed, color, national origin, sex, age, disability, or marital status, will undertake or continue existing EEO programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination, and shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force.
  - b. The Contractor shall state in all solicitations or advertisements for employees that, in the performance of the contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.
  - c. The Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, labor union, or representative will not discriminate on the basis of race, creed, color, national origin, sex age, disability or marital status and that such union or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.
  - d. The Contractor will include the provisions of Subdivisions (a) through (c) of this Subsection 4 and Paragraph "D" of this Section III, which provides for relevant provisions of the Human Rights Law, in every subcontract in such a manner that the requirements of the subdivisions will be binding upon each subcontractor as to work in connection with the Contract.

### C. Form MWBE 101- Staffing Plan

To ensure compliance with this Section, the Contractor shall submit a staffing plan to document the composition of the proposed workforce to be utilized in the performance of the Contract by the specified categories listed, including ethnic background, gender, and Federal occupational categories. The Contractor shall complete the staffing plan form and submit it as part of their bid or proposal or within a reasonable time, as directed by NYSOFA.

- D. The Contractor shall comply with the provisions of the Human Rights Law, and all other State and Federal statutory and constitutional non-discrimination provisions.



## Attachment M

The Contractor and its subcontractors shall not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

### IV. MWBE Utilization Plan

- A. The Contractor represents and warrants that the Contractor has submitted an MWBE Utilization Plan, or shall submit an MWBE Utilization Plan at such time as shall be required by NYSOFA, through the New York State Contract System ("NYSCS"), which can be viewed at <https://ny.newnycontracts.com>, provided, however, that the Contractor may arrange to provide such evidence via a non-electronic method to NYSOFA, either prior to, or at the time of, the execution of the contract.
- B. The Contractor agrees to adhere to such MWBE Utilization Plan in the performance of the Contract.
- C. The Contractor further agrees that failure to submit and/or adhere to such MWBE Utilization Plan shall constitute a material breach of the terms of the Contract. Upon the occurrence of such a material breach, NYSOFA shall be entitled to any remedy provided herein, including but not limited to, a finding that the Contractor is non-responsive.

### V. Waivers

- A. If the Contractor, after making good faith efforts, is unable to achieve the MWBE Contract Goals stated herein, the Contractor may submit a request for a waiver through the NYSCS, or a non-electronic method provided by NYSOFA. Such waiver request must be supported by evidence of the Contractor's good faith efforts to achieve the maximum feasible MWBE participation towards the applicable MWBE Contract Goals. If the documentation included with the waiver request is complete, NYSOFA shall evaluate the request and issue a written notice of approval or denial within twenty (20) business days of receipt.
- B. If NYSOFA, upon review of the MWBE Utilization Plan, quarterly MWBE Contractor Compliance Reports described in Section VI, or any other relevant information, determines that the Contractor is failing or refusing to comply with the MWBE Contract Goals, and no waiver has been issued in regards to such non-compliance, NYSOFA may issue a notice of deficiency to the Contractor. The Contractor must respond to the notice of deficiency within seven (7) business days of receipt. Such response may include a request for partial or total waiver of MWBE Contract Goals.

## **VI. Quarterly MWBE Contractor Compliance Report**

The Contractor is required to submit a quarterly MWBE Contractor Compliance Report through the NYSCS, provided, however, that the Contractor may arrange to provide such report via a non-electronic method to NYSOFA by the 10<sup>th</sup> day following the end of each quarter during the term of the Contract.

## **VII. Liquidated Damages - MWBE Participation**

- A. Where NYSOFA determines that the Contractor is not in compliance with the requirements of this Attachment and the Contractor refuses to comply with such requirements, or if the Contractor is found to have willfully and intentionally failed to comply with the MWBE participation goals, the Contractor shall be obligated to pay to NYSOFA liquidated damages.
- B. Such liquidated damages shall be calculated as an amount equaling the difference between:
  - 1. All sums identified for payment to MWBEs had the Contractor achieved the contractual MWBE goals; and
  - 2. All sums actually paid to MWBEs for work performed or materials supplied under the Contract.
- C. In the event a determination has been made which requires the payment of liquidated damages and such identified sums have not been withheld by NYSOFA, the Contractor shall pay such liquidated damages to NYSOFA within sixty (60) days after they are assessed. Provided, however, that if the Contractor has filed a complaint with the Director of the Division of Minority and Women's Business Development pursuant to 5 NYCRR § 142.12, liquidated damages shall be payable only in the event of a determination adverse to the Contractor following the complaint process.

January, 2018

### Attachment W – Work Plan

<b>Social Adult Day Services (SADS)</b>									
<b>Designee to Receive Notice:</b>	Name: Marlene Barrett  Address: 110 Old Route 6, bldg. 3 Carmel, New York 10512  Phone: 845-808-1700 x 47121  Email: Marlene.Barrett@putnamcountyny.gov								
<b>Contract Amount:</b>	\$105,007 annually								
<b>Contract Term:</b>	02/01/2025 – 01/31/2030								
<b>Goal</b>	<p>Social Adult Day Services (SADS) programs provide a variety of long-term care services to functionally impaired individuals, whether due to physical or cognitive impairments, in a congregate, community, or home-based setting and pursuant to a person-centered service plan (PCSP). SADS core services include socialization, supervision and monitoring, personal care, and nutrition in a protective setting during any part of the day, but for less than a 24-hour period. The goal of SADS programs is to prevent or delay institutional care, improve the quality of life of functionally and/or cognitively impaired adults, and provide respite for informal caregivers.</p> <p>SADS service planning and the delivery must comply with all NYSOFA and New York State Department of Health (DOH) policy, regulation, and issuances, including 9 NYCRR Part 6654.20 and 15-PI-12.</p>								
<b>Administrative</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%; text-align: center; padding: 5px;">Reporting Periods</th> <th style="width: 50%; text-align: center; padding: 5px;">Report Due</th> </tr> <tr> <td style="text-align: center; padding: 5px;">April - June</td> <td style="text-align: center; padding: 5px;">July 31<sup>st</sup></td> </tr> <tr> <td style="text-align: center; padding: 5px;">July - September</td> <td style="text-align: center; padding: 5px;">October 31<sup>st</sup></td> </tr> <tr> <td style="text-align: center; padding: 5px;">October - December</td> <td style="text-align: center; padding: 5px;">January 31<sup>st</sup></td> </tr> </table>	Reporting Periods	Report Due	April - June	July 31 <sup>st</sup>	July - September	October 31 <sup>st</sup>	October - December	January 31 <sup>st</sup>
Reporting Periods	Report Due								
April - June	July 31 <sup>st</sup>								
July - September	October 31 <sup>st</sup>								
October - December	January 31 <sup>st</sup>								



### Attachment W – Work Plan

	January - March	April 30 <sup>th</sup>
<b>Objective 1:</b>  <b>Program administration and service delivery</b>	<b>To prevent or delay institutional care.</b>	
	<b>Deliverable</b>	<b>Measurable Outcomes</b>
	SADS policies and procedures must be current and compliant with all NYSOFA and DOH policy, regulation, and issuances, including 9 NYCRR Part 6654.20 and 15-PI-12.	The SADS program will review, and update policies and procedures at least annually and as needed.
	SADS policies and procedures must include processes for emergency preparedness, fire safety, accessing participant information in the event of an emergency, and communicating with the local fire department.	<p>The SADS program will conduct and document at least two fire drills per year.</p> <p>The SADS program will store participant information in an area that can be easily accessed in the event of an emergency.</p> <p>The SADS program will send a letter to the local fire department at least annually notifying them of the SADS program's existence.</p>
	SADS programs must conduct an annual self-evaluation.	<p>The SADS program will conduct an annual self-evaluation which will include a review of SADS administrative, fiscal, and program operations.</p> <p>The SADS program will provide NYSOFA with a written summary of findings from the annual self-evaluation.</p>
	SADS programs are required to use the COMPASS, or comparable assessment tool, to assess the eligibility of prospective participants prior to admission into the SADS program.	The SADS program will complete eligibility assessments for prospective participants prior to admission into the SADS program.

### Attachment W – Work Plan

		The SADS program will keep eligibility assessments in the participant's file.
	The PCSP will be developed within 30 days of program admission and signed by the participant and/or caregiver.	<p>The SADS will use the PCSP template prescribed by the state for person-centered planning processes.</p> <p>The SADS program will update the PCSP annually and as needed.</p> <p>The SADS program will maintain the PCSP in the participant file.</p>
	SADS core services must be delivered in compliance with 9 NYCRR Part 6654.20 and NYSOFA's 15-PI-12.	The SADS program will perform monitoring activities annually and as needed.
	SADS programs must document optional services (e.g., transportation and case management) in the participant file.	The SADS program will include optional services in the participant's file.
	SADS programs must work with the participant and caregiver to develop an attendance schedule that will provide respite for the caregiver.	The SADS program will document the attendance schedule in the participant's file.
	SADS programs must submit reports in NYSOFA's Reporting System quarterly and as needed.	The SADS program will report participant demographic information, caregiver information, program update, and discharge data, including the participant's length of enrollment, on a quarterly basis and as needed, in NYSOFA's SADS Reporting System.
	SADS programming must include social, intellectual/cognitive, cultural, education and physical group activities that allow participants to communicate and collaborate with peers.	The SADS program will create monthly activity calendars which include social, intellectual/cognitive, cultural, educational, and physical activities.

## Attachment W – Work Plan

<b>Objective 2:</b>  <b>Program Information and participant feedback</b>	<b>To ensure that participants and caregivers provide feedback on SADS program operations.</b>	
	SADS programs must share participant rights with the participant and caregiver. A copy of these rights must be posted in program area.	<p>The SADS program will post a copy of participant rights in the program area.</p> <p>The SADS program will obtain signature from the participant, and when appropriate, the caregiver, to acknowledge and document receipt of participant rights. The SADS program will indicate in the participant file if they are unable to obtain signature.</p> <p>The SADS program will maintain a signed copy of participant rights in participant files.</p>
	SADS programs must distribute, collect, and summarize satisfaction surveys completed by participants and caregivers at least annually and upon discharge	<p>The SADS program will review satisfaction survey results and if needed, make updates to processes and policies and procedures.</p> <p>The SADS program will include the results of the satisfaction surveys in the written annual self-evaluation summary provided to NYSOFA.</p>
<b>Objective 3:</b>  <b>Staff training and health requirements</b>	<b>To ensure all employees are compliant with health and safety and training requirements.</b>	
	<b>Deliverable</b>	<b>Measurable Outcomes</b>
	All employees of the SADS program must have a PPD test performed every two years.	The SADS program will maintain the results of the employee's PPD results in the employee's file.
	All employees of the SADS program must have an annual health assessment clearing them to work in the program.	The SADS program will maintain a copy of the employee's annual health assessment in the employee's file.

### Attachment W – Work Plan

	<p>The SADS program must provide all employees with training upon hire, prior to working with SADS participants, and/or as needed.</p>	<p>The SADS program will provide all employees with:</p> <ul style="list-style-type: none"><li>• An orientation which includes information on the SADS program and local community, training on working with older adults, information on participant rights, and safety and accident prevention. The SADS program will complete this orientation upon hire.</li><li>• Training on personal care, body mechanics, and behavior management. The SADS program will provide this training for employees prior to them working with SADS participants.</li><li>• At least 6 hours of in-service training annually to develop review or expand skills or knowledge.</li><li>• Annual training on the use of fire extinguishers, written procedures concerning evacuation and emergency situations, and emergency telephone numbers.</li></ul> <p>The SADS program will record all training activities in the employee's file.</p>
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### Attachment W – Work Plan

	<p>All service staff including volunteer service staff must complete additional training requirements or have equivalent knowledge / skills as described in 9 NYCRR Part 6654.20</p>	<p>Within 3 months of hire, service staff assigned to provide social adult day services will complete the following training:</p> <ul style="list-style-type: none"> <li>At least 20 hours of group, individual and / or on the job training, including personal care skill, socialization and activities, supervision and monitoring, CPR, family relations, and mental health.</li> </ul> <p>Or meet the equivalent knowledge or skills section as described in 9 NYCRR Part 6654.20</p> <p>The SADS program will record all training activities in the employee's file.</p>
<p><b>Objective 4:</b></p> <p><b>Community outreach and public education</b></p>	<p><b>To expand education and outreach areas to increase participation in SADS programs</b></p>	
	<p><b>Deliverable</b></p>	<p><b>Measurable Outcomes</b></p>
	<p>SADS will increase the number of SADS participants.</p>	<p>The SADS program by sharing outreach and education materials with public and partner agencies for distribution and awareness.</p> <p>Contractor provides information on outreach efforts as a component of the quarterly reporting in the online data reporting system.</p>

MARLENE G. BARRETT  
DIRECTOR



cc:all Health  
Reso #4

KEVIN M. BYRNE  
PUTNAM COUNTY EXECUTIVE

## MEMORANDUM

DATE: May 12, 2025

TO: Honorable Toni Addonizio  
Chairwoman, Health, Social, Educational & Environmental Committee

CC: Diane Schonfeld  
Clerk to the Legislature

FROM: Marlene Barrett  
Director

RE: OSR 2025 Grant Application for Field Hall Foundation

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The Office for Senior Resources (OSR) is seeking approval from the Legislature to apply for a grant to provide funding through the Field Hall Foundation for Home Safety and Environmental Support Program. It is our intent to apply for funding in order to deliver safety-focused home modifications and supportive services that enable older adults in Putnam County to live independently and safely in their homes for as long as possible. We anticipate serving approximately 30 unduplicated older adults with the requested funding, based on an average project cost of \$500; the actual number served may vary depending on the specific needs of each individual and cost per service. There is no county match. A draft copy of the grant application is attached for your review.

It is respectfully requested that this matter be placed on the agenda for the meeting of the Health, Social, Educational, & Environmental Committee to be held on May 19, 2025.

Thank you for your consideration.

2025 MAY 12 PM 1:24  
LEGISLATURE  
PUTNAM COUNTY  
CARMEL, NY

Field Hall Foundation  
**Fall 2025—Small Grant LOI Cover Sheet**

**Date:** May 2025

**Name of Organization:** Putnam County Office for Senior Resources

**Organization's Executive Director:** Marlene Barrett

**Contact Person and Title** (*if not the Executive Director*):

Telephone Number: (845) 808-1700

E-mail: marlene.barrett@putnamcountyny.gov

Address: 110 Old Route 6, Bld. 3, Carmel, New York 10512

Type of Organization: \_\_\_\_\_ 501(c)(3) Not-for-Profit    **X** Local Unit of Government

Federal Tax Identification #: 14-6002759

Organization's Operating Budget: \$6,501,755.00

Dates Covered by the Operating Budget (mo/day/year): 1/1/2025- 12/31/2025

**Proposed Program/Project Name:** Home Safety and Environmental Support Program

**Purpose of Program/Project** (*one sentence*): To deliver safety-focused home modifications and supportive services that enable older adults in Putnam County to live independently and safely in their homes for as long as possible.

**Focus Area(s) Addressed:**    \_\_\_\_\_ Food Insecurity                      \_\_\_\_\_ Home-based Care Services  
                                 \_\_\_\_\_ Respite/Support Services for Caregivers                      **X** Safety/Security/Older Adult Abuse  
                                 \_\_\_\_\_ Social Work/Case Management                      \_\_\_\_\_ Transportation  
                                 \_\_\_\_\_ Other; *Specify*:

**County(ies) Impacted:**    \_\_\_\_\_ Dutchess    **X** Putnam    \_\_\_\_\_ Westchester

**Proposed Program/Project's Total Budget:** \$15,000

**Grant Amount Requested from Field Hall Foundation** (*up to \$15,000*): \$15,000

**Number of Unduplicated Older Adults/Caregivers Impacted by the Requested Funding:** We anticipate serving approximately 30 unduplicated older adults with the requested funding, based on an average project cost of \$500; the actual number served may vary depending on the specific needs of each individual and cost per service.

Field Hall Foundation  
**Small Grant Letter of Inquiry**

**A. Introduction to Organization** *(one half page maximum)*

The Putnam County Office for Senior Resources (formerly the Office for Aging) has been serving older adults since 1969, initially funded through the Older Americans Act and the Putnam County Board of Directors. Established to develop services, opportunities, and facilities for older adults, we have grown into the primary planner, coordinator, and direct service provider for individuals aged 60 and over in Putnam County.

Over the past five decades, our offerings have expanded in response to the evolving needs of our aging population. In addition to foundational programs such as Information and Referral, Legal Services, and Congregate Meals, we now provide Home Delivered Meals, Social Model Adult Day Services, four Friendship Centers, EISEP, HEAP, HIICAP, Medical Transportation, and Caregiver Resource Centers.

Our mission is to stimulate, promote, coordinate, and administer programs that enhance the quality of life for older adults and their caregivers. We place special emphasis on long-term care services and ensure equitable access to high-quality support, especially for those who are frail, economically disadvantaged, or part of underserved populations.

With a dedicated team of 70 staff members and over 400 SeniorCorps volunteers, we are proud to have been recognized with a 2023 Aging Achievement Award from USAging for our innovative Helping Hands Program, which addresses the growing gap in home care services amid a home health aide shortage. Our continued commitment to creative, responsive, and compassionate service sets us apart as a leader in aging services in Putnam County.

**B. The Need and The Solution** *(one page maximum)*

In Putnam County, the aging population is rapidly increasing, with over 26,000 adults aged 60 and older—many of whom face mounting challenges to safely age in place. The majority (over 85%) of these older adults are homeowners, a rate significantly higher than both neighboring counties and the New York State average of 66%. While homeownership provides stability, many of these homes are aging and were not designed with the safety or environmental needs of older residents in mind.

Our proposed program specifically targets low-income homeowners aged 60 and older, defined as those earning no more than 300% of the federal poverty level. This population often lacks the financial resources and physical support to make even minor improvements that can drastically reduce health and safety risks. Falls, infestations, and mobility limitations are among the top issues that lead to premature institutionalization, increased healthcare costs, and reduced quality of life for seniors.

The Putnam County Office for Senior Resources proposes a Home Safety and Environmental Support Program to address this growing need. The program will provide critical services including minor home modifications—such as grab bar installation, improved lighting, and entryway adaptations—as well as basic pest control interventions to eliminate environmental health hazards. These services help create safer, healthier living conditions that allow older adults to remain in their homes with dignity and reduced risk.

Priority will be given to those who are very low-income and have no other means or opportunities to receive these essential modifications or services. We aim to serve as many vulnerable older adults as possible. With the Foundation's support, we anticipate directly serving approximately 30 older adults during the grant period, based on an average project cost of \$500. The actual number served may vary depending on individual needs and the type of intervention required.



Our organization is primarily funded through federal, state, and county allocations, including the Older Americans Act, the New York State Office for the Aging, and the Putnam County government. We also receive contributions and income from cost shares, which are reinvested into program operations to enhance service delivery and reach.

The total cost of the proposed program is \$15,000, with 100% of the funds dedicated to serving older adults. The requested grant will be used to cover the direct costs of safety modifications, pest control services, necessary materials, and labor.

We plan to implement this program within the Foundation's designated grant period of November 2025 through October 2026 and do not require an alternate timeline.

By addressing both structural safety and environmental hazards, this program offers a comprehensive, cost-effective solution to help older adults in Putnam County remain safe, stable, and independent in their own homes.

### **C. The Goal and Evaluation** *(one half page maximum)*

Program success will be defined by our ability to enhance the safety, accessibility, and environmental health of the homes of low-income older adults in Putnam County, enabling them to remain in their homes with improved stability and reduced risk of injury or displacement. Success will also be reflected in positive participant feedback, increased confidence in home safety, and reduced reliance on emergency interventions or institutional care.

We will evaluate the program by using the following measures:

#### **Quantitative Evaluation:**

- **Number of unduplicated older adults served** through safety modifications and/or pest control services
- **Type and number of services provided**, such as grab bar installations, lighting upgrades, and pest control treatments
- **Average cost per project** and comparison against projected budget
- **Geographic distribution** of service recipients across Putnam County to ensure equitable reach
- **Timeliness** of service delivery from referral to completion

#### **Qualitative Evaluation:**

- **Client satisfaction surveys** will be conducted following each completed service to gather feedback on perceived improvements in home safety and overall well-being
- **Follow-up phone interviews** with a sample of participants to assess changes in confidence, mobility, and feelings of independence within their homes
- **Staff and vendor observations** will be documented to evaluate challenges encountered and best practices in service delivery

This combination of data-driven analysis and personal feedback will allow us to continuously monitor program effectiveness, make real-time adjustments, and report meaningful outcomes to the Foundation. Our ultimate goal is to demonstrate not only the number of individuals served, but also the real impact on their quality of life and ability to age safely in place.

KEVIN BYRNE  
*County Executive*

SARA SERVADIO  
*Commissioner*

NICOLLE MCGUIRE  
*Deputy Commissioner*



#5

**DEPARTMENTS OF MENTAL HEALTH  
SOCIAL SERVICES AND YOUTH BUREAU**

**MEMORANDUM**

May 13, 2025

TO: Chairwoman Toni Addonizio, Health Committee

FROM: Sara Servadio, Commissioner, Departments of Mental Health, Social Services & Youth Bureau

SUBJECT: Updates to Health Committee

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The Department of Mental Health would like to give the Committee an overall update on mental health in Putnam County, including the Stabilization Center and the Mobile Crisis Team. Please see the attached informational flyer regarding the Mobile Crisis Outreach Team (MCOT).

Thank you for your time and consideration of this request.

2025 MAY 13 PM 1:56  
LEGISLATURE  
PUTNAM COUNTY  
CARMEL, NY





## Mobile Crisis Outreach Team

**The Mobile Crisis Outreach Team (MCOT), available Monday-Friday 12pm-8pm, provides community-based crisis response and interventions for individuals of any age.**

### SERVICES

MCOT Services can be accessed by calling the Mobile Crisis Outreach Team directly.

- The team will respond to any setting where a crisis is occurring immediately upon determination of need
- Services can be provided face-to-face or telephonically by a Peer Specialist and Licensed Behavioral Health Clinician
- Standard follow-up occurs in the days after the initial response to mitigate potential future crises.
- Services include engagement, peer support, care collaboration, and linkage to resources

### COST

No out of pocket costs

### LOCATION

Putnam County, NY

### CONTACT

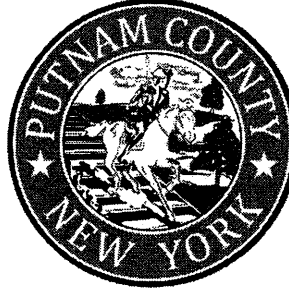
845-379-2463

### REFERRAL

Referrals can be made by any source, including an individual, community providers, school personnel, and Law Enforcement.



MICHAEL J. LEWIS  
Commissioner of Finance



SHEILA BARRETT  
First Deputy Commissioner of Finance

ALEXANDRA GORDON  
Deputy Commissioner of Finance

DEPARTMENT OF FINANCE

**MEMORANDUM**

TO: Diane Schonfeld, Legislative Clerk

FROM: Michael J. Lewis, Commissioner of Finance – MJL

RE: **Budgetary Amendment – 25A041**

DATE: May 12, 2025

2025 MAY 13 PM 12:21  
LEGISLATURE  
PUTNAM COUNTY  
CARMEL, NY

At the request of the Fiscal Manager at DSS and Mental Health, the following budgetary amendment is required.

**GENERAL FUND:**

**INCREASE APPROPRIATIONS:**

10051460 54647	SUB CONTRACTORS - MOBILE CRISIS	\$	150,000.00
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**INCREASE ESTIMATED REVENUES:**

10051460 434981	MH ST AID - MOBILE CRISIS	\$	150,000.00
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2025 Fiscal Impact \$0

2026 Fiscal Impact \$0

Please refer to the attached memorandum from Fiscal Manager Wunner regarding this budgetary amendment.

KEVIN BYRNE  
County Executive

SARA SERVADIO  
Commissioner

NICOLLE MCGUIRE  
Deputy Commissioner




DEPARTMENTS OF MENTAL HEALTH  
SOCIAL SERVICES AND YOUTH BUREAU

MEMORANDUM

May 9, 2025

TO: Michael Lewis, Commissioner of Finance

FROM:  Kristen Wunner, Fiscal Manager of Department of Mental Health, Social Services, and Youth Bureau

SUBJECT: Mental Health 2025 Budgetary Amendment

Your approval is requested to amend the 2025 Mental Health budget to reflect an extension of 2023 State Aid levels regarding funding code 164 **Suicide Prevention & Crisis Services** to be passed through to provider agencies in accordance with field office and central office approval for undistributed funds. Supporting documentation attached.

**Increase Estimated Revenues:**

10051460	CONTR. MH SVCS MOBILE CRISIS	
434981	MH ST AID	\$150,000
	Total Revenue	\$150,000

**Increase Appropriations:**

10051460	CONTR. MH SVCS MOBILE CRISIS	
54647	SUB CONTRACTORS	\$150,000
	Total Appropriations	\$150,000
	Fiscal Impact (25)	- 0 -
	Fiscal Impact (26)	- 0 -

Thank you for your time and consideration of this request.

Attachments:

CENTRAL OFFICE APPROVAL CORESPONDENCE

FIELD OFFICE APPROVAL CORESPONDENCE

OMH Attachment A – Funding Source Allocation Table – 2023 Amendment 14 – 6/17/2024

cc: 

Sara Servadio, Commissioner of Department of Mental Health, Social Services, and Youth Bureau

## Huang, Songyun (OMH)

---

**From:** Wojtkiewicz, April A (OMH)  
**Sent:** Wednesday, December 11, 2024 1:49 PM  
**To:** Huang, Songyun (OMH)  
**Cc:** Brandow, Theresa (OMH); McCormick, Edward (OMH); Milham, Melissa (OMH)  
**Subject:** RE: NCE- SAL 2023 & 2024 - Mobile Crisis Unit Funding FC 164 (\$300K/yr), Putnam

Yes, I approve.

**From:** Huang, Songyun (OMH) <Songyun.Huang@omh.ny.gov>  
**Sent:** Wednesday, December 11, 2024 1:09 PM  
**To:** Wojtkiewicz, April A (OMH) <April.Wojtkiewicz@omh.ny.gov>  
**Cc:** Brandow, Theresa (OMH) <Theresa.Brandow@omh.ny.gov>; McCormick, Edward (OMH) <Edward.McCormick@omh.ny.gov>; Milham, Melissa (OMH) <Melissa.Milham@omh.ny.gov>  
**Subject:** FW: NCE- SAL 2023 & 2024 - Mobile Crisis Unit Funding FC 164 (\$300K/yr), Putnam

Hi April,

Following your guidance during our last meeting on 11/27/24, I am resending this email to reaffirm what we have approved for Putnam County to extend the Mobile Crisis Start-Up Funding (\$300K per year for two years, effective July 1, 2023). The \$450K allocated to the county's SAL in **FC 164** for 2023 and 2024 will now be extended through 2025. Our field office fully supports this extension to provide the county with sufficient time to secure an appropriate service provider.

I assume the close-out team will need to conduct a multi-year close-out process for the years 2023, 2024, and 2025.

Putnam County has requested written confirmation of this approval. Please let me know if you agree to provide a confirmation response of "YES."

Thank you.

## SongYun Huang

Fiscal Unit, Hudson River Field Office

### NYS Office of Mental Health

- Hudson River Field Office  
10 Ross Circle, Suite 5N  
Poughkeepsie, NY 12601  
Tel: (845)483-3570 | Fax: (845)454-8218

*\*Counties in the region:* Albany, Columbia, Dutchess, Greene, Orange, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Schoharie, Sullivan, Ulster, Warren, Washington and Westchester

**From:** Huang, Songyun (OMH)  
**Sent:** Thursday, November 21, 2024 3:20 PM  
**To:** Wojtkiewicz, April A (OMH) <April.Wojtkiewicz@omh.ny.gov>; Blakley, Kristyn (OMH) <Kristyn.Blakley@omh.ny.gov>; Milham, Melissa (OMH) <Melissa.Milham@omh.ny.gov>



## Wunner, Kristen (DFA)

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**From:** Huang, Songyun (OMH)  
**Sent:** Wednesday, December 11, 2024 2:12 PM  
**To:** Wunner, Kristen (DFA); Servadio, Sara (DFA)  
**Cc:** Brandow, Theresa (OMH); Messmer, MaryKaye (OMH)  
**Subject:** RE: Mobile Crisis Unit Funding  
**Attachments:** Approved - Putnam Mobile Crisis StartUp Extension FC 164 2023 to 2025.pdf

Hi Sara and Kristen,

Please keep the attached PDF file as a record of our central office's approval to extend the Mobile Crisis Start-Up Funding allocated in 2023 and 2024 under FC 164 through 2025.

## SongYun Huang

Fiscal Unit, Hudson River Field Office

## NYS Office of Mental Health

- Hudson River Field Office

10 Ross Circle, Suite 5N

Poughkeepsie, NY 12601

Tel: (845)483-3570 | Fax: (845)454-8218

*\*Counties in the region:* Albany, Columbia, Dutchess, Greene, Orange, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Schoharie, Sullivan, Ulster, Warren, Washington and Westchester

**From:** Wunner, Kristen (DFA) <Kristen.Wunner@dfa.state.ny.us>  
**Sent:** Wednesday, December 11, 2024 9:48 AM  
**To:** Servadio, Sara (DFA) <Sara.Servadio@dfa.state.ny.us>; Huang, Songyun (OMH) <Songyun.Huang@omh.ny.gov>  
**Cc:** Brandow, Theresa (OMH) <Theresa.Brandow@omh.ny.gov>; Messmer, MaryKaye (OMH) <MaryKaye.Messmer@omh.ny.gov>  
**Subject:** RE: Mobile Crisis Unit Funding

Thank you, Song. Did you receive written approval (mentioned below) from your field office that you can forward for our records?

Thank you,  
Kristen



### Kristen Wunner

FISCAL MANAGER • Mental Health, Social Services & Youth Bureau

PHONE | 845.808.1500, ext 45210 • WEBSITE | [PUTNAMCOUNTYNY.COM](http://PUTNAMCOUNTYNY.COM)

PUTNAM COUNTY GOVERNMENT NEW YORK

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**From:** Servadio, Sara (DFA) <Sara.Servadio@dfa.state.ny.us>  
**Sent:** Wednesday, December 11, 2024 9:20 AM

**To:** Huang, Songyun (OMH) <[Songyun.Huang@omh.ny.gov](mailto:Songyun.Huang@omh.ny.gov)>; Wunner, Kristen (DFA) <[Kristen.Wunner@dfa.state.ny.us](mailto:Kristen.Wunner@dfa.state.ny.us)>  
**Cc:** Brandow, Theresa (OMH) <[Theresa.Brandow@omh.ny.gov](mailto:Theresa.Brandow@omh.ny.gov)>; Messmer, MaryKaye (OMH) <[MaryKaye.Messmer@omh.ny.gov](mailto:MaryKaye.Messmer@omh.ny.gov)>  
**Subject:** RE: Mobile Crisis Unit Funding

Excellent, thank you.



## Sara Servadio

COMMISSIONER • Mental Health, Social Services & Youth Bureau  
PHONE | 845.808.1500, ext 45200 • WEBSITE | [PUTNAMCOUNTYNY.COM](http://PUTNAMCOUNTYNY.COM)  
PUTNAM COUNTY GOVERNMENT NEW YORK

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**From:** Huang, Songyun (OMH) <[Songyun.Huang@omh.ny.gov](mailto:Songyun.Huang@omh.ny.gov)>  
**Sent:** Thursday, November 21, 2024 4:24 PM  
**To:** Wunner, Kristen (DFA) <[Kristen.Wunner@dfa.state.ny.us](mailto:Kristen.Wunner@dfa.state.ny.us)>  
**Cc:** Servadio, Sara (DFA) <[Sara.Servadio@dfa.state.ny.us](mailto:Sara.Servadio@dfa.state.ny.us)>; Brandow, Theresa (OMH) <[Theresa.Brandow@omh.ny.gov](mailto:Theresa.Brandow@omh.ny.gov)>; Messmer, MaryKaye (OMH) <[MaryKaye.Messmer@omh.ny.gov](mailto:MaryKaye.Messmer@omh.ny.gov)>  
**Subject:** RE: Mobile Crisis Unit Funding

Hi Sara and Kristen,

As discussed in the last meeting, I have received verbal approval from our central office to extend the Mobile Crisis Start-Up funding you received for 2023 and 2024 until December 31, 2025.

2023 SAL \$75,000 x 2qts = 150,000

2024 SAL \$75,000 x 4qts = 300,000

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\$450,000 (To extend to 12/31/2025)

Please note that the state aid letters (SALs) for 2023 and 2024 will not be reissued. Instead, we will conduct a multi-year close-out for the related funding code and program code combination. This will ensure that your CAT allocation to FC 164/PC 0680 is not recovered at the annual close-out until 12/31/2025.

If you notice any discrepancies related to this matter during the SAL close-out, please bring them to our attention. I will forward the written approval once I receive it.

**SongYun Huang**

Fiscal Unit, Hudson River Field Office

**NYS Office of Mental Health**

- Hudson River Field Office

10 Ross Circle, Suite 5N

Poughkeepsie, NY 12601



Tel: (845)483-3570 | Fax: (845)454-8218

*\*Counties in the region:* Albany, Columbia, Dutchess, Greene, Orange, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Schoharie, Sullivan, Ulster, Warren, Washington and Westchester

**From:** Wunner, Kristen (DFA) <[Kristen.Wunner@dfa.state.ny.us](mailto:Kristen.Wunner@dfa.state.ny.us)>

**Sent:** Monday, October 21, 2024 3:24 PM

**To:** Huang, Songyun (OMH) <[Songyun.Huang@omh.ny.gov](mailto:Songyun.Huang@omh.ny.gov)>

**Cc:** Servadio, Sara (DFA) <[Sara.Servadio@dfa.state.ny.us](mailto:Sara.Servadio@dfa.state.ny.us)>

**Subject:** Mobile Crisis Unit Funding

Hi Song,

As a follow up to our 3pm call, we are inquiring on the use of the \$150k that was allocated to 164 - Suicide Prevention & Crisis Services on our 2023 State Aid letter. I have attached a copy of the Funding Source Allocation Table Amendment 14 and highlighted the funding source in question. As this is a new initiative, we are hoping this can be carried forward into 2024 and even 2025 as the project continues to get off the ground (same for any unspent funds allocated on the 2024 state aid letter). We appreciate your guidance and looking into this.

Thank you,  
Kristen



**Kristen Wunner**

FISCAL MANAGER • Mental Health, Social Services & Youth Bureau

PHONE | 845.808.1500, ext 45210 • WEBSITE | [PUTNAMCOUNTYNY.COM](http://PUTNAMCOUNTYNY.COM)

PUTNAM COUNTY GOVERNMENT NEW YORK

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Are you in crisis, experiencing emotional distress, or worried about someone you know? Call or text 988 or chat at

[988lifeline.org](http://988lifeline.org)

24 hours a day, 7 days a week.

**IMPORTANT NOTICE:**

This e-mail is meant only for the use of the intended recipient. It may contain confidential information which is legally privileged or otherwise protected by law. If you received this e-mail in error or from someone who was not authorized to send it to you, you are strictly prohibited from reviewing, using, disseminating, distributing or copying the e-mail. PLEASE NOTIFY US IMMEDIATELY OF THE ERROR BY RETURN E-MAIL AND DELETE THIS MESSAGE FROM YOUR SYSTEM. Thank you for your cooperation.



Attachment A  
Funding Source Allocation Table  
County Code: 40 County Name: Putnam  
Year: 2023 Amendment: 14 - 6/17/2024 3:57:01 PM

Print Date : 05/09/2025 10:52 AM  
Printed By : L6884KNW  
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Funding Source	Code	Type	Prior Letter Allocation	Allocation Changes Since Prior Letter	Revised Current Fiscal Year Allocation	Annualized Value from Prior Letter	Annualized Value Changes from Prior Letter	Fiscal Year Revised Annualized Value	Beds
Local Assistance	001A	GS	\$59,906	\$0	\$59,906	\$60,488	\$0	\$60,488	
<b>Remarks</b> An increase of \$1,746 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$2,328.									
Community Support Services	014	GS	\$110,495	\$0	\$110,495	\$111,568	\$0	\$111,568	
<b>Remarks</b> An increase of \$3,219 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$4,292.									
Adult ACT State Aid	034J	GS	\$317,342	\$0	\$317,342	\$321,766	\$0	\$321,766	
<b>Remarks</b> Effective 4/1/23, increase of \$13,272 (FAV:\$17,696) represents the 4/1/23 - 12/31/23 value of the 4% COLA funding increase (effective 4/1/23) for program code 2720 (Non-Medicaid Coordination).									
Integrated Supp Emp	037	GS	\$51,825	\$0	\$51,825	\$52,328	\$0	\$52,328	
<b>Remarks</b> An increase of \$1,508 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$2,012. Allocation adjustment made to 4/1/23 and AVs to correctly reflect 4/1/22 5.4% COLA increase.									
PROS State Aid	037P	GS	\$95,476	\$0	\$95,476	\$95,476	\$(5,840)	\$89,636	



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Remarks

Effective 04/01/2023, PROS Residual State Aid and PROS Vocational Initiative funding is being increased based upon the 4% COLA effective 04/01/2023. CY 2023 funding increases PFCS PROSper SA \$1,088 Voc \$1,696.  
Effective 1/1/2023, PROS Residual State Aid and PROS Vocational Initiative funding recalculated based upon monthly census data reported in CAIRS. CY 23 funding amounts are : PI PROSper SA \$36,232 Voc \$56,460.  
Quarterly increase of \$311 (retro to 1/1/23) as a result of a recalculation of the UDC Funding.

Dwyer Veteran P2P

038F	GS	\$192,400	\$0	\$192,400	\$7,400	\$40,700	\$48,100
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Remarks

Adjusting AVs to 4/1/2024 LP

An increase of \$7,400 represents the 4/1/23 - 3/31/24 value of a 4% COLA, effective 4/1/23. The full annual value is \$7,400.

Funding in the amount of \$185,000 in the SFY 23-24 Enacted Budget for the period of 4/1/2023-3/31/2024, will be used for the Veteran Peer to Peer Support Service Program for veteran suffering from post-traumatic stress syndrome, other related combat stress disorders, or having counseling needs, using individual and small group peer to peer counseling methods. The provider should use the program code 0690 on all OMH financial reporting documents.

Clinical Infrastructure-Adult

039P	GS	\$61,957	\$0	\$61,957	\$62,560	\$0	\$62,560
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Remarks

An increase of \$1,805 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$2,408.

CMHS Kids COVID Relief Funds  
Clinical Infrastructure-C&F

044C	F	\$0	\$0	\$0	\$0	\$0	\$0
046A	GS	\$77,167	\$0	\$77,167	\$77,916	\$0	\$77,916

Remarks

An increase of \$2,247 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$2,996.

Community Support Programs-C&F

046L	GS	\$319,809	\$0	\$319,809	\$322,914	\$0	\$322,914
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<u>Funding Source</u>	<u>Code</u>	<u>Type</u>	<u>Prior Letter Allocation</u>	<u>Allocation Changes Since Prior Letter</u>	<u>Revised Current Fiscal Year Allocation</u>	<u>Annualized Value from Prior Letter</u>	<u>Annualized Value Changes from Prior Letter</u>	<u>Fiscal Year Revised Annualized Value</u>	<u>Beds</u>
Supported Housing	078	GS	\$2,188,926	\$0	\$2,188,926	\$2,228,621	\$0	\$2,228,621	76
<b>Remarks</b> An increase of \$9,315 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$12,420.									
<b>Remarks</b> Effective 4/1/23, a \$930 per bed COLA and a \$1,812 per bed stipend increase are being allocated for 76 SH beds. The first year value of this increase is \$156,294. The full annual value is \$208,392. Effective 4/1/2023, an FMR stipend increase of \$1,392 per bed is being added to 76 SH beds. The first year value of this increase is \$79,344. The full annual value of this increase is \$105,792. Effective 1/1/23, a \$1,200 per bed stipend increase is being added for 78 Supportive Housing beds enrolled to participate in the SH SPA roll out. The first year value of this increase is \$187,200 and includes \$93,600 for start-up. The ongoing (full annual) value of this increase is \$93,600. Effective 4/1/22, a \$3,312 per bed stipend increase is being allocated for 76 SH beds. The first year value (2022) of this increase is \$188,784 and has been allocated in 122P. The FAU (2023) of this increase is \$251,712.									
Prior Year Liability	122P	GS	\$193,752	\$0	\$193,752	\$0	\$0	\$0	
<b>Remarks</b> See remark(s) in FSC(s) 078 and 200C.									
Expanded Community Support Adult	142A	GS	\$273,659	\$0	\$273,659	\$276,316	\$0	\$276,316	



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Funding Source	Code	Type	Prior Letter Allocation	Allocation Changes Since Prior Letter	Revised Current Fiscal Year Allocation	Annualized Value from Prior Letter	Annualized Value Changes from Prior Letter		Fiscal Year Revised Annualized Value	Beds
							Annualized Value	Letter		

Remarks

Allocation supports Advocacy/Support services (\$23,000 annualized) and a Self-Help program (\$215,000 annualized), effective 7/1/2014. The advocacy program code to be included on OMH's financial reports is Advocacy/Support Services (1760). The self-help program code to be included on OMH's financial reports is Self Help Programs (2770). These funds are part of the System Transformation Plan initiative which is intended to reduce the need for and length of costly psychiatric hospitalizations. These funds must be reported separately on all OMH financial reports and must not be commingled with existing programs and OMH funding sources. The LGU is required to provide the OMH with monthly reports concerning the number of individuals and new individuals served by age group and county, month and year. Allocations may be adjusted based upon actual program performance.

An increase of \$7,971 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$10,628.

Allocation supports Advocacy/Support services (\$23,000 annualized) and a Self-Help program (\$215,000 annualized), effective 7/1/2014; plus 4/1/16 COLA 0.2% (\$476); 1/1/18 & 4/1/20 Workforce Enhancements (\$6,648); 1/1/20 & 4/1/20 Workforce Enhancements (\$4,500); and 4/1/21 COLA 1% (\$2,452). The advocacy program code to be included on OMH's financial reports is Advocacy/Support Services (1760). The self-help program code to be included on OMH's financial reports is Self Help Programs (2770). These funds are part of the System Transformation Plan initiative which is intended to reduce the need for and length of costly psychiatric hospitalizations. These funds must be reported separately on all OMH financial reports and must not be commingled with existing programs and OMH funding sources. The LGU is required to provide the OMH with monthly reports concerning the number of individuals and new individuals served by age group and county, month and year. Allocations may be adjusted based upon actual program performance.

Suicide Prevention & Crisis Services	164	GS	\$150,000	\$0	\$150,000	\$150,000	\$0		\$150,000	
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Remarks

Effective 7/1/2023, quarterly allocation of \$75,000 to provide one-time start-up funding to help support the development of behavioral health Mobile Crisis services. Program code 0680 should be used on all OMH financial reporting documents.

Trans. Mgmt. Kendra's	1708	GS	\$7,626	\$0	\$7,626	\$7,700	\$0		\$7,700	
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Remarks

An increase of \$222 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$296.

MGP Admin Kendra's	170C	GS	\$2,509	\$0	\$2,509	\$2,532	\$0		\$2,532	
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Aid to Localities Financial System

Attachment A

Funding Source Allocation Table

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<b>Remarks</b>									
An increase of \$73 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$96.									
Article 28&31 Closure Re-Invest. (Adult)	175A	GS	\$27,472	\$0	\$27,472	\$27,740	\$0	\$27,740	
<b>Remarks</b>									
The State aid allocation includes \$27,740 (annualized) for a respite services program. The program code to be included on OMH's financial reports is Respite Services (0650). These funds are pursuant to the approved Article 28 closure reinvestment plans (Stony Lodge/Rye Hospitals). These funds must be reported separately on all OMH financial reports and must not be commingled with existing programs and OMH funding sources. The LGU is required to provide the OMH with monthly reports concerning the number of individuals and new individuals served by age group and county, month and year. Allocations may be adjusted based upon actual program performance.									
An increase of \$800 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$1,068.									
The State aid allocation includes \$25,000 (annualized) for a respite services program, effective January 1, 2015; plus 4/1/16 COLA 0.2% (\$52); and 4/1/21 COLA 1% (\$252). The program code to be included on OMH's financial reports is Respite Services (0650). These funds are pursuant to the approved Article 28 closure reinvestment plans (Stony Lodge/Rye Hospital). These funds must be reported separately on all OMH financial reports and must not be commingled with existing programs and OMH funding sources. The LGU is required to provide OMH with monthly reports concerning the number of individuals and new individuals served by age group and county, month and year. Allocations may be adjusted based upon actual program performance.									
Com. Reinvestment	200	GS	\$786,776	\$0	\$786,776	\$794,416	\$0	\$794,416	
<b>Remarks</b>									
An increase of \$22,916 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$30,556.									
Supported Housing - Workforce RIV	200C	GS	\$52,682	\$0	\$52,682	\$0	\$0	\$0	2



## Attachment A

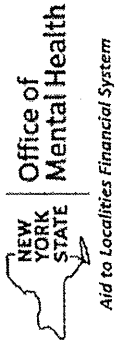
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Personnel Services Enhancements	9655	GS	\$73,538	\$0	\$73,538	\$74,252	\$4,282	\$78,534	
<b>Remarks</b>									
An increase of \$2,142 represents the 4/1/23 - 12/31/23 value of a 4% COLA, effective 4/1/23. The full annual value is \$2,856.									
The SFY 23 Enacted Budget included funding for increases to minimum wage, effective 1/1/2023.									
Grand Total:			\$5,193,302	\$0	\$5,193,302	\$4,825,433	\$39,142	\$4,864,575	





PUTNAM COUNTY EXECUTIVE  
KEVIN M. BYRNE

2025 MAY -6 PM 1:11  
LEGISLATURE  
PUTNAM COUNTY  
CARMEL, NY

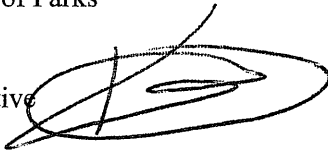
MEMORANDUM

Date: May 6, 2025

To: Amy Sayegh  
Chair, Putnam County Legislature

Cc: Toni Addonizio  
Chair, Health, Social, Educational and Environmental Committee

Chris Ruthven  
Deputy Commissioner of Parks

From: Kevin Byrne  
Putnam County Executive 

Re: East of Hudson Sporting Advisory Committee Appointment

Enclosure: Resolution #258

Pursuant to the 1997 New York City Watershed Agreement, Putnam County is a member of the East of Hudson Sporting Advisory Committee (EOHSAC) of the Watershed Protection and Partnership Council, a body charged with maintaining local, recreational uses on lands purchased by New York City for East of Hudson (Croton) Watershed protection. As you may know, the County is currently without an EOHSAC appointment due to the retirement of former representative Vincent Tamagna, whose appointment Resolution I enclose herein.

Therefore, it is with great enthusiasm that I appoint Parks and Recreation Deputy Commissioner Chris Ruthven to succeed Mr. Tamagna on EOHSAC. I respectfully ask that the Legislature approve this appointment with all deliberate speed. Deputy Commissioner Ruthven will be an effective representative for Putnam County at the Committee's annual meetings and advocate on behalf of all residents' interests. I fully endorse his appointment.

Thank you for your timely attention to this matter and your continued support for local outdoor recreation. Please do not hesitate to contact my office with any questions or concerns.

DP:lr  
Enclosure

PUTNAM COUNTY LEGISLATURE

Resolution #258

Introduced by Legislator: William Gouldman on behalf of the Health, Social Educational & Environmental Committee at a Regular Meeting held on December 5, 2017.

page 1

**APPROVAL/CONFIRMATION/ APPOINTMENT/ EAST OF HUDSON SPORTING  
ADVISORY COMMITTEE (EOHSAC) OF THE WATERSHED PROTECTION AND  
PARTNERSHIP COUNCIL**

**RESOLVED**, that the Putnam County Legislature confirms the appointment by the County Executive of Vincent Tamagna to the East of Hudson Sporting Advisory Committee (EOHSAC) of the Watershed Protection and Partnership Council.

**BY POLL VOTE: ALL AYES. LEGISLATOR SCUCCIMARRA WAS ABSENT. MOTION CARRIES.**



**Vote:**  
**State Of New York**

ss:

**County of Putnam**

**I hereby certify that the above is a true and exact copy of a resolution  
passed by the Putnam County Legislature while in session on December 5, 2017.**

Dated: December 6, 2017

Signed: *Diane Schonfeld*

**Diane Schonfeld**  
Clerk Of The Legislature Of Putnam County

5/6/2025

Dear County Executive Byrne

Thank you for the opportunity to represent Putnam County on the East-of-Hudson Sporting Advisory Council (EOHSAC). I have been employed by Putnam County since 1998 managing the County Parks and Conservation Areas first as Putnam County Park Superintendent and currently as Deputy Commissioner of Parks. My role in providing passive recreational opportunities in a safe and responsible way for all our residents and guests has been very rewarding. Over the years the number of acres and venues have increased greatly. When I first started the County had the Veterans Memorial Park and about half of what is now the Micheal Ciaola Conservation Area (known as Merrit Park in 1998). Today proudly it has grown to over 3000 acres. Tilly Foster Farm, Putnam Golf Course, Fred Dill Wildlife Sanctuary and the Putnam Trailway are just a few of the more popular properties that I have been a part of developing. I have maintained a good working relationship with the NYC DEP over the years. We have worked on several joint projects together that were deemed mutually beneficial to both of our agency's missions.

I hope by serving on the EOHSAC that I can continue to foster that relationship to ensure that Putnam County's interests are fully and adequately represented, as recreational determinations are formulated by NYC DEP on their lands.

Sincerely

Chris Ruthven

Deputy Commissioner of Parks

845-808-1994

[Chris.ruthven@putnamcountyny.gov](mailto:Chris.ruthven@putnamcountyny.gov)