

**NORTH CENTRAL NEW MEXICO ECONOMIC DEVELOPMENT DISTRICT
NON-METRO AREA AGENCY ON AGING
NOTIFICATION OF GRANT AWARD (NGA)**

TITLE III

GRANTEE: Santa Fe County ADDRESS: PHONE:				APPROVED BUDGET PERIOD FROM: 7/1/2013 TO: 6/30/2014		Grant/Action New/Cont: <input checked="" type="checkbox"/> Revision: <input type="checkbox"/> BAR: <input type="checkbox"/> Other: <input type="checkbox"/>		NGA DATE 1.30.14	
DESCRIPTION		FEDERAL	STATE	LOCAL	Fundraising- Foundations	PROJ. INC.	TOTAL		
Title IIIB	Access	\$ 16,472	\$ 20,192	\$ 140,394	\$ -	\$ 5,000	\$ 182,058		
	In-Home	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Community All Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Subtotal	\$ 16,472	\$ 20,192	\$ 140,394	\$ -	\$ 5,000	\$ 182,058		
Title IIIC1	Meal Costs	\$ 52,145	\$ 107,209	\$ 89,578	\$ -	\$ 32,000	\$ 280,932		
	Subtotal	\$ 52,145	\$ 107,209	\$ 89,578	\$ -	\$ 32,000	\$ 280,932		
Title IIIC2	Meal Costs	\$ 22,191	\$ 163,051	\$ 99,546	\$ -	\$ 7,500	\$ 292,288		
	SubTotal	\$ 22,191	\$ 163,051	\$ 99,546	\$ -	\$ 7,500	\$ 292,288		
Title IIID	Health Promotion	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Sub Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Title IIIE	Care Giver Support	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Sub Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
DEMONSTRATION GRANT									
ALZHEIMER	Respite Care	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Sub Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
ALL STATE OTHER		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Sub Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
SUB TOTALS									
	Title IIIB	\$ 16,472	\$ 20,192	\$ 140,394	\$ -	\$ 5,000	\$ 182,058		
	Title IIIC1	\$ 52,145	\$ 107,209	\$ 89,578	\$ -	\$ 32,000	\$ 280,932		
	Title IIIC2	\$ 22,191	\$ 163,051	\$ 99,546	\$ -	\$ 7,500	\$ 292,288		
	Title IIID	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Title IIIE	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	Alzheimer Respite Care	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
	All State Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
GRAND TOTAL		\$ 90,808	\$ 290,452	\$ 329,518	\$ -	\$ 44,500	\$ 755,278		
COMPUTATION OF GRANT		6. Federal/State Shares will be comprised of:							
1. Estimated Total Cost.....	\$ 755,278	a. Federal/State		FY 20 ____	Federal				
2. LESS Anticipated Proj. Inc.	\$ 44,500	grant unearned			State				
3. Estimated Net Cost.....	\$ 710,778	in previous project year(s)							
4. Non-federal and Non-state Share of Net Cost.....		b. Carry Over		FY 20 ____	Federal				
5. Proj. Inc. (Used as Match).....	\$ 44,500				State				
6. Federal Share of Net Cost.....	\$ 90,808								
7. State Share of Net Cost....	\$ 290,452	c. New Obligational		FY-	Federal	\$ 16,472			
		Authority Herein Awarded			State	\$ (16,472)			

NOTIFICATION OF GRANT AWARD

REMARKS: In addition to the conditions contained in the agreement on the application form, the conditions below apply to this grant.

- X 1. Unless revised, the amount of lines 6 and 7 (Computation of Grant) will constitute a ceiling for federal and/or state participation in the approved cost.
- X 2. The federal and/or state share of the project cost is earned only when the cost is accrued and the non-federal and/or non-state share of the cost has been contributed. Receipt of federal and/or state funds (either through advance or reimbursement) does not constitute earning of these funds.
- X 3. If the actual net cost is less than the amount on line 3 (Computation of Grant) the non-federal and/or non-state share, the federal share, and the state share will meet the percentages indicated on Page 1 of the NGA.
- X 4. As shown in the Computation of Grant (assuming satisfactory progress, adequate justification and the availability of funds), the federal and state shares shall meet the amounts shown on lines 6 and 7 of the estimated net project cost shown on line 3.
- X 5. Funds herein awarded will remain available during the length of the project period, however, state and/or federal funds are dependent upon availability.
- X 6. Percentages indicated on this Notification of Grant Award are adjustable at year end based on the amount of program income earned and expended. All program income must be expended within the program period indicated on page 1.
- X 7. Programs must meet the units of services projected in order to be reimbursed or submit a recalculation of service costs request detailing reasons approved units are not being met. Amendments must be approved by the Area Agency on Aging.

The Grantee organization is responsible for retaining records of all federal and/or state accounts as follows:

All accounting records are to be kept in accordance with federal and state policy and readily available for examination by Area Agency on Aging personnel or other federal and/or state officials authorized to examine any or all financial and programmatic records. Such records shall be retained in accordance with the following:

1. Keep adequate and complete financial records, and to report promptly and fully to the Area Agency on Aging on a monthly basis.
2. If a federal and/or state audit has not been made within three (3) years after project termination, project records may then be destroyed, on approval of the Area Agency on Aging.
3. In all cases, an over-riding requirement exists to retain records until resolution of any audit questions relating to individual grants.
4. Non-federal resources must be contributed equally to the percentage of the non-federal share of actual net costs for a project year. If a Grantee reports federal and/or state cash received but unearned on the final project report for a project year, the Grantee then owes the Area Agency on Aging this amount. This amount may constitute a cash advance on any funds awarded to the Grantee by the Area Agency on Aging for the following project year.
5. The disposition of unearned portions of federal and/or state funds at the end of the project year shall be made in accordance with current state policies.
6. Unearned federal and/or state cash at the time the project is terminated shall be returned in full to the Area Agency on Aging.
7. All obligations will be liquidated within 30 days after the end of the project year and before final program and financial reports are submitted.
8. Inventory of project equipment will be maintained and submitted as requested.

Project records will be preserved and kept available to federal and state auditors at the following address:

NCNMEDD Non-Metro Area Agency on Aging
Authorizing Official:

Tim Armer
Signature:
Tim Armer, Executive Director

2/3/14
Date:

We, the undersigned officers of the Grantee organization, certify that we are in agreement with the terms and conditions of this award.

Signature: *Heatherine Miller*

Date: *5-21-14*

Signature:

Date:

Approved as to form
Santa Fe County Attorney

By: *[Signature]*

Date: *5/14/14*
Jim 5/17/14

**North Central New Mexico Economic Development District
Non-Metro Area Agency on Aging**

**DIRECT PURCHASE OF SERVICES
VENDOR AGREEMENT
AMENDMENT NO. 2**

This Amendment is made and entered into this 1st day of February, 2014, by and between the North Central New Mexico Economic Development District, Non-Metro Area Agency on Aging hereinafter referred to as the "Agency" and Santa Fe County, hereinafter referred to as the "Contractor".

1. Purpose of Amendment. The purpose of the Amendment is to:

Reclassify funds.

2. Changes to Contract. The following changes are amendments to the contract:

Paragraph I.B. Payment for Services is amended to read: For the services by the Agency to be satisfactorily provided by Vendor hereunder, the Agency shall pay the vendor during the Term an aggregate amount, not to exceed **(\$381,260)** said aggregate amount to be derived from the following sources, when units are met.

1. (\$16,472) from Title III-B of the OAA;
2. (\$52,145) from Title III-C1 of the OAA;
3. (\$22,191) from Title III-C2 of the OAA;
4. (\$0) from Title III-D of the OAA;
5. (\$0) from Title III-E of the OAA; and
6. (\$290,452) from the NMGAA-State/HB-2.

3. All other clauses in the original Agreement will remain unchanged and together with this Agreement constitute the entire Agreement between the Contractor and NCNMEDD, Non-Metro AAA.
4. For the faithful performance of the terms of this agreement, the parties affix their signatures and bind themselves effective July 1, 2013.

Santa Fe County

Legal Name of Vendor/Contractor

Katherine Miller
Signature

Katherine Miller
Printed/Typed Name of Signatory

5.21.14
Date

NCNMEDD Non-Metro Area Agency on Aging
Name of Area Agency on Aging

Tim Armer
Signature

Tim Armer, Executive Director
Printed/Typed Name of Signatory

2/3/14
Date

Approved as to form
Santa Fe County Attorney

By: [Signature]

Date: 5/14/14
[Signature] 5/12/14



PO Box 5115, Santa Fe, New Mexico 87502

MEMORANDUM

To: Santa Fe County

From: Nancy M. Arias, Deputy Director

Date: January 30, 2014

Re: Vendor Agreement/Contract Amendment

Enclosed you will find two signed Contract Amendment and Notification of Grant Awards for fiscal year 2013/2014. Please ensure both contracts and notification of grant award documents are signed by the appropriate individual(s). Keep one set for your records and return one for full execution to:

**NCNMEDD Non-Metro Area Agency on Aging
P.O. Box 5115
Santa Fe, NM 87502**

The purpose of the Amendment:

- ☒ is to reclassify Federal and/or State funds
- ☐ is to adjust Local funds according to Letter of Commitment
- ☐ is a result of Recalculation of Service Cost submitted to Non-Metro AAA
- ☐ is a result of Recalculation of Service Cost and/or change to Units of Service as determined by review of financial and performance information submitted to Non-Metro AAA.
- ☐ is a result of a re-submitted budget file per May 2013 Advisory Council Meeting.
- ☐ is to reduce or **increase** Federal and/or State funds for **increased Respite and Homemaker programming.**
- ☐ is to reduce or increase Local and/or Program Income funds

You will also find enclosed a copy of the Amended Summary of Budgeted Revenues for your records.

Please do not hesitate to call me at 575-769-1613 or 1-877-762-6228 or via email at narias@ncnmedd.com if you have questions.

