



Board of Commissioners:
Greg Hartmann, David Pepper, Todd Portune
County Administrator: Patrick J. Thompson
Director: Moira Weir

**REQUEST FOR PROPOSALS
FOR
2010 TANF Summer Youth Employment Program**

**RFP Bid # MB0210R
Issued by
Hamilton County Job and Family Services**

(April, 2010)

Due Date for Proposal Registration: May 6, 2010

Due Date for Proposal Submission: May 20, 2010

TABLE OF CONTENTS

1.0	REQUIREMENTS & SPECIFICATIONS	4
1.1	Introduction & Purpose of the Request for Proposal	4
1.2	Scope of Service	5
1.2.1	Population	5
1.2.2	Eligibility For Services	6
1.2.3	Service Components	6
1.2.4	Record Retention	8
1.2.5	Subrecipient	9
2.0	PROVIDER PROPOSAL	10
2.1	Provider Cover Sheet	10
2.1.2	Executive Summary	11
2.2	Service and Business Deliverables	11
2.2.1	Program Components	11
2.2.2	System and Fiscal Administration Components	12
2.3	Budget and Cost Considerations	14
2.4	Customer References	17
2.5	Personnel Qualifications	18
3.0	PROPOSAL GUIDELINES	19
3.1	Program Schedule	19
3.2	HCJFS Contact Person	19
3.3	Registration For RFP Process	20
3.4	Prohibited Contacts	20
3.5	Provider Disclosures	21
3.6	Provider Examination of the RFP	21
3.7	Addenda to RFP	22
3.8	Availability of Funds	22

4.0	SUBMISSION OF PROPOSAL.....	23
4.1	Preparation of Proposal.....	23
4.2	Cost of Developing Proposal.....	23
4.3	False or Misleading Statements	23
4.4	Delivery of Proposals	24
4.5	Acceptance & Rejection of Proposals	24
4.6	Evaluation & Award of Agreement.....	25
4.7	Proposal Selection	28
4.8	Post-Proposal Meeting.....	28
4.9	Public Records	29
5.0	TERMS & CONDITIONS.....	30
5.1	Type of Contract.....	30
5.2	Order of Precedence	30
5.3	Contract Period, Funding & Invoicing	30
5.4	Confidential Information	31
5.5	Non-Discrimination In The Performance Of Services.....	32
5.6	Insurance.....	32
5.7	Declaration of Property Tax Delinquency.....	36
5.8	Terrorist Declaration	36
5.9	Other Program Requirements	36

Attachment A	Minor Wage Agreement
Attachment B	Ohio Minor Labor Law
Attachment C	Summer Youth TANF Eligibility Information Form
Attachment D	Proposal Cover Sheet
Attachment E	HCJFS Contract Sample Contract
Attachment F	HCJFS Budget Form & Budget Guidelines
Attachment G	Declaration of Property Tax Delinquency
Attachment H	Terrorist Form
Attachment I	RFP Registration Form

**REQUEST FOR PROPOSAL (RFP)
FOR
2009 TANF SUMMER YOUTH EMPLOYMENT PROGRAM**

1.0 REQUIREMENTS & SPECIFICATIONS

1.1 Introduction & Purpose of the Request for Proposal

This RFP seeks proposals for subsidized Temporary Assistance for Needy Families (TANF) Summer Youth Employment Program who are eligible for Prevention, Retention and Contingency (PRC) funds to be delivered in the summer of 2010. HCJFS anticipates that funding for this service will be provided however, funding has not yet been authorized as of the printing of this RFP. Therefore, HCJFS can not be certain of the amount of funds to be made available for this RFP. The requirements attached to those dollars, or the date these dollars will be available or timeframes for delivery of service. This RFP represents our efforts to act proactively to both clear a path to make funds available for distribution in the summer of 2010 and to ensure that those funds are spent responsibly. HCJFS expects this RFP to be amended as further information is made available to us. The timeline for this RFP process will be aggressive due to the expedient nature of the anticipated funding distribution.

For this RFP, each Provider may submit a proposal or proposals to deliver one, or multiple separate scopes of services that satisfy the very general requirements identified in this RFP. HCJFS reserves the right to award multiple contracts for these services to any one or multiple Providers.

1.2 Scope of Services

Statement of Work:

Because of the short timeframe available for assessment of any summer youth activity, this RFP will not result in contracts with at risk or incentive funds. As such, HCJFS will have little opportunity to correct poor contract performance after contract awards are made. Due diligence in managing these dollars shall instead, be accomplished through a scrutiny of service proposals. Please provide evidence of past performance to support assertions of readiness to perform any of the service requirements in Section 1.2.3 Service Components. Tracking, reporting, eligibility, documentation, and required activities requirements beyond those identified are unknown at this time. Those requirements will be shared as they become known to HCJFS.

1.2.1 Population

For the purposes of this RFP, HCJFS is focusing primarily on serving several subpopulations of youth:

- Youth who are eligible for PRC - TANF services
- Youth who the Provider believes is suitable for, needs, and will benefit from the service
- Current or former foster care youth
- Youth with any connection to child welfare services
- Youth who are at risk of dropping out of high school
- Youth who have dropped out of high school and are disengaged from the educational system
- Youth who are offenders or court-involved

1.2.2 Eligibility for Services

We are not currently aware of the state/federal eligibility guidelines that will be attached to these dollars. However, we expect the funding to be constrained by the eligibility and other terms copied in the “**HAMILTON COUNTY PREVENTION, RETENTION AND CONTINGENCY PROGRAM AMENDMENT - SUMMER YOUTH EMPLOYMENT AND TRAINING**” document at the end of this document.

1.2.3 Service Components

Each proposal must specifically document each prospective service Provider’s capacity to:

A. Recruit, enroll, engage, and maximize a higher number of at-risk youth identified in section 1.2.1 “Population” above.

B. Serve youth at a low cost per youth.

C. Retain those youth through the life of the program.

D. In designing summer proposal(s), ensure that no less than fifty percent (50) of actual and budgeted program costs reflect monetary payments to youth for the hours documented that the youth participated in the value outputs identified in “H” below. These payments to youth must begin no more than thirty (30) days after enrollment. They must occur no less frequently than bi-weekly and final payments must be issued no more than thirty (30) days after termination of each program’s 2010 TANF Summer Youth Employment Program service components. HCJFS payments for costs incurred after 9/1/2010 shall be withheld from each Provider until HCJFS is able to document that actual total billable to HCJFS from that Provider included no less than fifty percent (50%) of costs reflecting actual monetary payments to participating youth.

E. Document youth eligibility/non eligibility prior to enrollment see **Attachment C 2010 Summer Youth TANF Eligibility Form**. No funding associated with this contract may be devoted to serve any youth who is not yet fully enrolled, and fully documented as eligible for TANF funding under this contract.

F. Provide monthly reports to HCJFS on current enrollment level, number enrolled, pending enrollments, number of worksites, and total number of youth placed and other program highlights.

G. Accurately bill for services within sixty (60) days of the end of each service month.

H. Demonstrate administrative capacity to accurately and completely document TANF eligibility. The particulars of this process are not known at the time of RFP printing but will be issued through an addendum as soon as state or federal guidance is provided to HCJFS.

I. Maintain eligibility documentation:

- Maintain individual youth files in accordance with the “TANF QA File Audit Checklist Form” in the outlined order. HCJFS will provide the “Youth QA File Audit Checklist Form” at the Post-Award Meeting.
- Names of youth determined eligible for 2010 TANF Summer Youth Employment Program.
- A copy of the work permit, or birth certificate if over 16, parental permissions and completed application for audit purposes in youth’s case file.
- For each youth enrolled in work activities, type of activity, dates and hours of participation.
- For each youth engaged in subsidized work, place of employment, position, dates and hours of employment.
- Time sheets, signed by each youth.
- Signature of each youth’s receipt of each paycheck.
- Work sites (name, location, types of work, hours, number of youth employed, youth evaluation) and submit to HCJFS by the requested timeframe to ensure the 100% monitoring of all sites within 60 days of start of traditional work experience.
- Document youth unsubsidized job placement, drop-out recovery, or entry into post-secondary education or other program outcomes.
- Maintain documentation, curricula, handouts of the Employer training provided to assist them with mentoring and understanding the youth population.

Each proposal must also specifically document each prospective service Provider's administrative capacity to provide the following without detracting from items A-I above.

As a result, the relative value of proposed scopes of services shall be judged in the following framework:

1. Is the bidding service Provider administratively immediately prepared to fulfill the **minimum contract requirements** provided in **Attachment E** of this RFP?
2. Is the scope permissible under the regulations outlined in this document and in any state or federal requirements tied to the provided funding?
3. Is the bidding service Provider administratively capable of managing these dollars as services as reflected in their responses to items A to I above?
4. Is the service an effective and efficient use of public funds as reflected in the prospective Providers response to items A-I above?
5. Is the Provider able to scale back or expand service delivery and capacity based upon the system's availability of funding and other factors?

1.2.4 Record Retention

Providers shall retain all records for the contract for a period of three (3) years after the youth has exited services. Records must be made available upon written request from HCJFS, or other relevant governmental entities including, but not limited to the Hamilton County Prosecuting Attorney, Ohio Department of Job and Family Services (ODJFS), the Auditor of the State of Ohio, the Inspector General of Ohio or any duly appointed law enforcement officials and the United States Department of Health and Human Services.

Data Tracking and Reporting

Providers will measure, document, and report, as required by the contract and per instructions from HCJFS.

1.2.5 Subrecipient

If awarded a contract through this RFP, the selected applicant(s) will be designated as a “subrecipient” as referenced by ODJFS’ rule OAC 5101:9-1-88. A subrecipient is defined as a non-federal entity that expends federal awards received from a pass-through entity to carry out a federal program, but does not include an individual that is a beneficiary of such a program. A subrecipient may also be a recipient of other federal awards directly from a federal awarding agency. The selected applicant will have some of the same restrictions and requirements as the federal, state, and local governments/organizations. The auditing standards set forth in Office of Management and Budget (OMB) Circular A-133 (210) (b) budgeting protocols, and federal budget/cost guidelines are all applicable to the successful applicant. Subrecipients will be monitored according to the Office of Management and Budget Circular A-133.400(d)(3) and Office of Management and Budget Circular A-102.40(a).

If awarded a Contract as a result of this RFP, Provider must agree to pay HCJFS for the full amount of any funds which HCJFS is required to repay to any federal or state entity due to Provider’s failure to properly perform its obligations consistent with the terms and conditions of Provider’s Contract.

1. Indications of a subrecipient relationship include:
 - a.** Provider determines who is eligible to receive federal financial assistance;
 - b.** Provider has performance measured against whether the objectives of the federal program is met;
 - c.** Provider has responsibility for programmatic decision making;
 - d.** Provider has responsibility for adherence to applicable federal program compliance requirements.
 - e.** Provider uses the federal funds to carry out its own program as compared to providing goods or services for a program of the pass-through entity.

2.0 Provider Proposal

It is required all proposals be submitted in the format as described in this section. Each submission must have one original proposal with ten (10) copies, using twelve (12) point Arial fonts when possible. Each Proposal section title must correspond to the format below. All proposal pages will be numbered sequentially throughout entire proposal beginning with – Section 2.1 – Cover Sheet and ending with Section 2.5 – Personnel Qualifications. Providers are encouraged, but not required, to use double sided copies in their proposal. Proposals must contain all the specified elements of information listed below **without exception, including all subsections therein:**

Section 2.1 - Cover Sheet

Section 2.1.2 Executive Summary

Section 2.2 - Service and Business Deliverables

Section 2.2.1 – Program Components

Section 2.2.2 – System and Fiscal Administration Components

Section 2.3 – Budgets and Cost Considerations

Section 2.4 - Customer References

Section 2.5 - Personnel Qualifications

2.1 Proposal Cover Sheet

Each provider must complete the Cover Sheet, **(Attachment D)**, and include such in its proposal. A Cover Sheet must be completed for each separate proposal being submitted. The Cover Sheet must be signed by an authorized representative, Chief Financial Officer of the provider and also include the names of individuals authorized to negotiate with HCJFS.. The signature line must indicate the title or position the individual holds in the company. Any and all unsigned proposals will be rejected.

The Cover Sheet must also include the Name of the Program, check youth served i.e. In School Youth or Out of School Youth. Total cost for contract period (excluding any leverage funds) proposed total number of youth to be served, and age group to be served. The total cost of each youth served must be supported by the budget.

2.1.2 Executive Summary

Provide an executive summary of the proposal to include

- scope of services,
- expected number of youth to be served,
- total budget requested,
- cost per youth,
- the percent of youth that will be served in high growth career track placement and industry recognized certificate,
- oversight responsibility of the program and vendor,
- as appropriate, lessons learned from previous summer youth employment experience programs and the improvements that will be incorporated in this year's program.

The executive summary should be no more than five pages in length.

2.2 Service and Business Deliverables

Provider should clearly state its competitive advantage and its ability to meet the terms, conditions, and requirements as defined in this RFP in responding to this section. Provider must describe in detail all information set forth in Section 2.2.1 Program Components and Section 2.2.2 System and Fiscal Administration Components.

2.2.1 Program Components

Service Information:

Providers shall respond to the following for all proposals submitted:

A. Describe in each proposal the nature of the service that you propose to provide. Provide any supporting documentation to reflect on the merits of the concept as a best practice or demonstrably effective concept.

B. Describe in each proposal how you will fulfill the service components requirements specified in Section 1.2.3 A-I. Provide supporting documentation of any cited past performance.

C. Identify your target population. Specify and explain why the age group and population identified is best suitable for, needs and will benefit from the program. Suitability presumes each youth is eligible and has appropriate documentation of eligibility on file. Suitability may speak to education or employment status, work history, barriers currently in place, and/or factors that will support a successful outcome for a prospective enrollee.

D. If your proposed target population covers a wide range of age groups in this 14 to 24 spectrum, please provide your plan for ensuring that peer appropriate age groups are served in times and settings that will minimize the likelihood of inappropriate contact.

2.2.2 System and Fiscal Administration Components

Please provide the following attached to the original proposal and all copies:

- A. Contact Information - Provide the address for the Provider's headquarters and service locations. Include a contact name, address, and phone number.
- B. Agency/Company History - Provide a brief history of Agency/Company's organization. Include the Agency/Company mission statement and philosophy of service.
- C. Subcontracts - Submit a letter of intent from each subcontractor indicating their commitment, the service(s) to be provided and three (3) references. All subcontractors must be approved by HCJFS and will be held to the same contract standards as the Agency/Company. (submit if applicable)
- D. Provider's Primary Business - State the agency's/company's primary line of business, the date established, the number of years of relevant experience, and the number of employees.
- E. Table of Organization - Clearly distinguish programs, channels of communication and the relationship of the proposed provision of services to the total company.
- F. Insurance and Worker's Compensation - A current certificate of insurance, current endorsements and Worker's Compensation certificate.

- G. Job Descriptions - For all positions in the program budget including positions not currently filled. The employees shall have experience with providing employment services to youth,
- H. Payroll Tracking - Include procedure on how your organization plans to track payroll, particularly for any dollars paid to youth. Provider will need to demonstrate in writing that they have a system in place by the start of the contract to both track payments, and to tie those to an hourly rate driven by tracked hours of participation.
- I. Agency's/Company's Brochures - A copy of the Agency's/Company's brochures which describe the services being proposed.
- J. Specifically affirm your organizations current readiness to comply with all minimum contractual requirements identified in the attached sample Provider contract (B).

Please provide the following attached only to the original proposal:

- K. Agency/Company Ownership - Describe how the agency/company is owned (include the form of business entity - i.e., corporation, partnership or sole proprietorship) and financed.
- L. Annual Report - A copy of Provider's most recent annual report, the most recent independent annual audit report, and a copy of all management letters related to the most recent independent annual audit report and the most recent Form 990. For a sole proprietor or for profit entities, include copies of the two (2) most recent year's federal income tax returns and the most recent year end balance sheet and income statement. If no audited statements are available, Provider must supply equivalent financial statements certified by Provider to fairly and accurately reflect the Provider's financial status. It is the responsibility of the Provider to redact tax identification numbers from all documents prior to submission to HCJFS.
- M. Articles of Incorporation or Other Formation Documents - Articles of Incorporation or other applicable organization documentation.
- N. Licensure - A copy of appropriate licensure from ODJFS, ODMH or other licensing agencies. Identify any actions to include any documentation of actions taken by ODJFS, ODMH or any other licensing body against your organization or any subsidiaries or business partners over the past ten (10) years including, but not limited to Corrective Action Plans, temporary licenses or revocations.
- O. Provide a description of your organization's employee screening and clearance policy.

2.3 Budget and Cost Considerations

In designing your subsidized 2010 TANF Summer Youth Employment Program proposal must ensure that no less than fifty percent (50%) of actual and budgeted program costs reflect monetary payments to youth for the hours you document they participated in the activities described in this RFP and resulting contract. These payments to youth must begin no more than thirty (30) days after enrollment. They must occur no less frequently than bi-weekly and final payments must be issued no more than thirty (30) days after termination of each program's 2010 WIA Summer Youth Employment Program service components.

HCJFS payments for costs incurred after 9/1/10 shall be withheld from each Provider until HCJFS is able to document that actual total billable to HCJFS from that Provider included no less than fifty percent (50%) of costs reflecting actual monetary payments to participating youth.

HCJFS reserves the option to modify initial contract amounts as necessary. If additional funding becomes available and performance is on track, this contract may be increased in value through mutual consent at any point following contract initiation. The duration of this contract may be extended through mutual consent to provide any service specified under contract for as long as funding may continue to be available. Providers may not exceed any budget line item by any amount without prior written approval from HCJFS.

- A. It is anticipated that services to youth will begin no later than July 1, 2010. Selected Provider(s) may begin to deliver administrative services ten business days prior to the start date for services to youth. Provider shall demonstrate total project administrative costs not to exceed fifteen percent (15%) of the total contract amount. The definition of administrative costs includes general administrative functions, such as:
 - a. financial activities (accounting, budgeting, financial and cash management);
 - b. procurement and purchasing functions;
 - c. property management functions;
 - d. personnel management functions;
 - e. payroll functions;

- f. coordinating the resolution of findings arising from audits, reviews, investigations and incident reports audit functions;
- g. audit functions; and
- h. developing systems and procedures related to these general administrative functions.

These administrative costs can be both personnel and non-personnel, both direct and indirect.

One hundred percent (100%) of the total potential value of all contracts awarded as a result of this solicitation will be on a cost reimbursement agreement. The cost reimbursement agreement reimburses the Providers for actual costs, such as instructor salaries, supplies, space, payments to youth etc. Provider must submit a Budget and a calculation of the contract term that Provider understands will be used to compensate Provider for services provided. Budget must be submitted in the form provided as **Attachment F**. All registered Providers will be sent an electronic budget file in Excel format. All Providers submitting a proposal shall include a paper copy of the budget in the proposal and also submit the budget electronically to the contact person identified in Section 3.2 HCJFS Contact Person. If you are unable to submit an electronic copy of your budget, you shall include a statement in the budget narrative explaining the reason.

Note: The electronic copy of the budget for the contract period and your proposals must be received by the due date specified in the RFP. The electronic copy of budgets must match the paper copy in your proposal.

- B. Provider must warrant and represent the Budget is based upon current financial information and programs, and includes all costs relating to but not limited to provision of the services as described in 1.2.3.

All revenue sources (leveraged resources) available to Provider to serve eligible youth identified in the Scope of Services shall be listed in the Budget, and utilized, where permissible, to reduce the cost of each youth served. All costs must be specified for the various parts of the program. Cost must be broken down by type of work as well as classifications for staff.

- C. Provider must take note that “profit” will be a separately negotiated element of price pursuant to OAC 5101:9-4-07, if Provider is a for-profit organization.
- D. For the purposes of this RFP, “**unallowable**” program costs include:
1. The cost of equipment or facilities procured under a lease-purchase arrangement unless it is applicable to the cost of ownership such as depreciation, utilities, maintenance and repair;
 2. Bad debt or losses arising from uncorrectable accounts and other claims and related costs;
 3. Contributions to a contingency(ies) reserve or any similar provision for unforeseen events;
 4. Contributions, donations or any outlay of cash with no prospective benefit to the facility or program;
 5. Entertainment costs for amusements, social activities and related costs for staff only;
 6. Costs of alcoholic beverages;
 7. Goods or services for personal use;
 8. Fines, penalties or mischarging costs resulting from violations of, or failure to comply with, laws and regulations;
 9. Gains and losses on disposition or impairment of depreciable or capital assets;
 10. Cost of depreciation on idle facilities, except when necessary to meet Contract demands;
 11. Costs incurred for interest on borrowed capital or the use of a governmental unit’s own funds, except as provided in OAC 5101:2-47-25(n);
 12. Losses on other contracts’;
 13. Organizational costs such as incorporation, fees to attorneys, accountants and brokers in connection with establishment or reorganization;
 14. Costs related to legal and other proceedings;
 15. Goodwill;
 16. Asset valuations resulting from business combinations;
 17. Legislative lobbying costs;
 18. Cost of organized fund raising;

19. Cost of investment counsel and staff and similar expenses incurred solely to enhance income from investments;
20. Any costs specifically subsidized by federal monies with the exception of federal funds authorized by federal law to be used to match other federal funds;
21. Advertising costs with the exception of service-related recruitment needs, procurement of scarce items and disposal of scrap and surplus;
22. Cost of insurance on the life of any officer or employee for which the facility is beneficiary;
23. Major losses incurred through the lack of available insurance coverage; and
24. Cost of prohibited activities from section 501(c)(3) of the Internal Revenue Code.

If there is a dispute regarding whether a certain item of cost is allowable, HCJFS' decision is final.

2.4 Customer References

Provider must submit at least three (3) letters of reference for whom services were provided similar in nature and functionality to those requested by through this RFP. Reference letters from HCJFS or HCJFS employees will not be accepted. Each reference must include at a minimum:

- A. Company name;
- B. Address;
- C. Phone number;
- D. Fax number;
- E. Contact person;
- F. Nature of relationship and service performed; and,
- G. Time period during which services were performed.

If Provider is unable to submit at least three (3) letters of reference, Provider must submit a detailed explanation as to why.

2.5 Personnel Qualifications

For key program and business personnel, (i.e. agency director, program director, CFO, and any administrators) who will be working with the program, please submit resumes with the following:

- A. Proposed role;
- B. Industry certification(s), including any licenses or certifications and, if so, whether such licenses or certifications have been suspended or revoked at any time;
- C. Work history; and
- D. Personal reference (company name, contact name and phone number, scope and duration of program).

Provider's program manager must have a minimum of three (3) years experience as a program manager with a similar program.

3.0 PROPOSAL GUIDELINES

The RFP, the evaluation of responses, and the award of any resultant contract shall be made in conformance with current federal, state, and local laws and procedures.

3.1 PROGRAM SCHEDULE

ACTION ITEM	DELIVERY DATE
RFP ISSUED	April 20, 2010
Deadline for Receiving Final RFP Questions	April 22, 2010
Deadline for Issuing Final RFP Answers	April 23, 2010
Deadline for Registering for The RFP Process	May 6, 2010
Deadline for Proposals Received by HCJFS Contact Person	May 20, 2010
Proposal Review Completed	May 24, 2010

3.2 HCJFS Contact Person

HCJFS Contact Person and mailing address for questions about the proposal process, technical issues, the Scope of Service or to send a request for a post-proposal meeting is:

Maggie Barnett, Contract Services
Hamilton County Department of Job and Family Services
222 East Central Parkway, 3rd floor
Cincinnati, Ohio 45202
HCJFS_RFP_Communications@jfs.hamilton-co.org
Fax: (513) 946-2384

3.3 Registration for the RFP Process

EACH PROVIDER MUST REGISTER FOR AND RESPOND TO THIS RFP TO BE CONSIDERED. THE DEADLINE TO REGISTER FOR THE RFP IS May 6, 2010 (NO LATER THAN 2:00 P.M.).

All interested Providers must complete Registration form (**see Attachment I**) and fax or e-mail the **HCJFS Contact Person to register, leaving their name, company name, e-mail address, fax number and phone number.** The HCJFS contact person's fax number is (513) 946-2384 and their e-mail address is [HCJFS RFP Communications@jfs.hamilton-co.org](mailto:HCJFS_RFP_Communications@jfs.hamilton-co.org)

3.4 Prohibited Contacts

The integrity of the RFP process is very important to HCJFS in the administration of our business affairs, in our responsibility to the residents of Hamilton County, and to the Providers who participate in the process in good faith. Behavior by Providers which violates or attempts to manipulate the RFP process in any way is taken very seriously. Neither Provider nor their representatives should communicate with individuals associated with this program or RFP, during the RFP process. If the Provider attempts any unauthorized communication, HCJFS will reject the Provider's proposal.

Individuals associated with this program include, but are not limited to the following:

- A. Public officials;
- B. Any HCJFS employees, except for the HCJFS contact person.

Examples of unauthorized communications are:

- A. Prior to the award being made, telephone calls, letters and faxes regarding the program or its evaluation made to anyone other than the HCJFS Contact Person as listed in Section 3.2;
- B. Visits in person or through a third party attempting to obtain information regarding the RFP; and
- C. E-mail except to the HCJFS Contact Person, as listed in Section 3.2.

3.5 Provider Disclosures

Provider must disclose any pending or threatened court actions and claims brought by or against the Provider, its parent company or its subsidiaries. This information will not necessarily be cause for rejection of the proposal; however, withholding the information may be cause for rejection of the proposal.

3.6 Provider Examination of the RFP

Providers shall carefully examine the entire RFP and any addenda thereto, all related materials and data referenced in the RFP or otherwise available and shall become fully aware of the nature of the request and the conditions to be encountered in performing the requested services.

If Providers discover any ambiguity, conflict, discrepancy, omission or other error in this RFP, they shall immediately notify the HCJFS Contact Person of such error in writing and request clarification or modification of the document. Modifications shall be made by addenda issued pursuant to Section 3.7, Addenda to RFP. Clarification shall be given by fax or e-mail to all parties who registered for the RFP process, Section 3.3, without divulging the source of the request for same.

If a Provider fails to notify HCJFS prior to April 22, 2010 of an error in the RFP known to the Provider, or of an error which reasonably should have been known to the Provider, the Provider shall submit its proposal at the Provider's own risk. If awarded the contract, the Provider shall not be entitled to additional compensation or time by reason of the error or its later correction.

3.7 Addenda to RFP

HCJFS may modify this RFP at any time by issuance of one or more addenda to all parties who registered for the RFP, Section 3.3. In the event modifications, clarifications, or additions to the RFP become necessary, all Providers who registered for the RFP will be notified and will receive the addenda via fax or e-mail. In the unlikely event emergency addenda by telephone are necessary, the HCJFS Contact Person, or designee, will be responsible for contacting only those Providers who registered for the RFP. All addenda to the RFP will be posted to <http://www.hcjfs.hamilton-co.org>.

3.8 Availability of Funds

This program is conditioned upon the timely availability of federal, state, or local funds which are appropriated or allocated for payment of the proposed services. If, during any stage of this RFP process, funds are not allocated and available, or are allocated but for more restrictive purposes than are outlined in this RFP, the RFP process will be modified or canceled. HCJFS will notify Provider at the earliest possible time if this occurs. HCJFS is under no obligation to compensate Provider for any expenses incurred as a result of the RFP process.

4.0 Submission of Proposal

Provider must certify the proposal and pricing will remain in effect for 180 days after the proposal submission date.

4.1 Preparation of Proposal

Proposals must provide a straightforward, concise delineation of qualifications, capabilities, and experience to satisfy the requirements of the RFP. Expensive binding, colored displays, promotional materials, etc. are not necessary. Emphasis should be concentrated on conformance to the RFP instructions, responsiveness to the RFP requirements, completeness, and clarity of content. The proposal must include all costs relating to the services offered.

4.2 Cost of Developing Proposal

The cost of developing proposals is entirely the responsibility of the Provider and shall not be chargeable to HCJFS under any circumstances. All materials submitted in response to the RFP will become the property of HCJFS and may be returned only at HCJFS' option and at Provider's expense.

4.3 False or Misleading Statements

If, in the opinion of HCJFS and/or the evaluation team, such information was intended to mislead them in their evaluation of the proposal, the proposal will be rejected.

4.4 Delivery of Proposals

One (1) signed original proposal and ten (10) duplicates of the proposal must be received by the HCJFS Contact Person at the address listed in Section 3.2, HCJFS Contact Person, no later than **Thursday, May 20, 2010** no later than **11:00 a.m. EST**. ***Proposals received after this date and time will not be considered.*** If Provider is not submitting the proposal in person, Provider should use certified or registered mail, UPS, or Federal Express with return receipt requested and email the HCJFS Contact Person the method of delivery. A receipt will be issued for all proposals received. No e-mail, telegraphic, facsimile, or telephone proposals will be accepted.

It is absolutely essential that Providers carefully review all elements in their final proposals. Once received, proposals cannot be altered; however, HCJFS reserves the right to request additional information for clarification purposes only.

4.5 Acceptance and Rejection of Proposals

HCJFS reserves the right to:

- A. award a contract for one or more of the proposed services;
- B. award a contract for the entire list of proposed services;
- C. reject any proposal, or any part thereof; and
- D. waive any informality in the proposals.

The decision by HCJFS shall be final. Waiver of an immaterial defect in the proposal shall in no way modify the RFP documents or excuse the Provider from full compliance with its specifications if Provider is awarded the contract.

4.6 Evaluation and Award of Agreement

The review process shall be conducted in four stages. Although it is hoped and expected that a Provider will be selected as a result of this process, HCJFS reserves the right to discontinue the procurement process at any time.

Stage 1. Preliminary Review

A preliminary review of all proposals submitted by **11:00 a.m. on Thursday, May 20, 2010** to ensure the proposal materials adhere to the Mandatory Requirements specified in the RFP. Proposals which meet the Mandatory Requirements will be deemed Qualified. Those which do not, shall be deemed Non-Qualified. Non-Qualified proposals will be rejected.

Qualified proposals in response to the RFP must contain the following Mandatory Requirements:

- A. Timely Submission – The proposal is received at the address designated in Section 3.2 no later than **11:00 a.m. on Thursday, May 20, 2010** and according to instructions. Proposals mailed but not received at the designated location by the specified date shall be deemed Non-Qualified and shall be rejected.
- B. Signed and Completed Cover Sheet, Section 2.1;
- C. Responses to Program Components, Section 2.2.1;
- D. Responses to System and Fiscal Administration Components, Section 2.2.2;
- E. One (1) Completed Budget and one (1) Budget Narratives, (paper and electronic copies) Section 2.3;
- F. Three (3) Customer References or a written explanation, Section 2.4;
- G. Personnel Qualifications, Section 2.5; and
- H. Completed RFP Registration Form - **Attachment I.**

Stage 2. Evaluation Committee Review

All Qualified proposals shall be reviewed, evaluated, and rated by the Review Committee. Review Committee shall be comprised of HCJFS staff and may include other individuals designated by HCJFS. Review Committee shall evaluate each Provider's proposal. Ratings will be compiled using a Review Committee Rating Sheet. Responses to each question will be evaluated and ranked using the following scale:

Does Not Meet Requirements	A particular RFP requirement was not addressed in the Provider's proposal. (Rating: 0%)
Partially Meets Requirements	Provider's proposal demonstrates some attempt at meeting a particular RFP requirement, but that attempt falls below acceptable level. (Rating: 25%)
Meets Requirements	Provider fulfills a particular RFP requirement in all material respects, potentially with only minor, non-substantial deviation. (Rating: 75%)
Exceeds Requirements	Provider's proposal fulfills a particular RFP requirement in all material respects, and offers some additional level of quality in excess of HCJFS expectations. (Rating: 100%)

Stage 3 Other Materials

Review Committee members will determine what other information is required to complete the review process. All information obtained during Stage 3 will be evaluated using the scale set forth in Stage 2 Review. Review Committee may request information from sources other than the written proposal to evaluate Provider's programs or clarify Provider's proposal. Other sources of information, may include, but are not limited to, the following:

- A. Written responses from Provider to clarify questions posed by Review Committee. Such information requests by Review Committee and Provider's responses must always be in writing;
- B. Oral presentations. If HCJFS determines oral presentations are necessary, the presentations will be focused to ensure all HCJFS interests or concerns are adequately addressed. The primary presentation must include Provider's key program personnel. HCJFS reserves the right to video tape the presentations.

- C. Site visits will be conducted for all Providers as deemed necessary. Site visits will be held at the location where the services are to be provided.

Stage 4 Evaluation

Final scoring for each proposal will be calculated. For this RFP, the evaluation percentages assigned to each section are:

- A. Program Evaluation including responses to Section 2.2.1, Section 2.4 Customer References and Section 2.5 Personnel Qualifications are worth 50% of the total evaluation score.
- B. System Evaluation including responses to Section 2.2.2 is worth 10% of the total evaluation score.
- C. Fiscal Evaluation, including responses to Section 2.3 Budget and Cost Considerations including Cost and Price Analysis are worth 30% of the total evaluation score.
- D. Section 4.6. Stage 3, Other Materials considered is worth 10% of the total evaluation score.

If HCJFS determines that is not necessary to conduct a Stage 3 review, the evaluation percentages assigned to each section are:

- A. Program Evaluation including responses to Section 2.2.1 Program Components, Section 2.4 Customer References and Section 2.5 Personnel Qualifications are worth 60% of the total evaluation score.
- B. System Evaluation including responses to Section 2.2.2 System and Fiscal Administration Components are worth 10% of the total evaluation score.
- C. Fiscal Evaluation, including responses to Section 2.3 Budget and Cost Considerations including Cost and Price Analysis are worth 30% of the total evaluation score.

4.7 Proposal Selection

Proposal selection does not guarantee a contract for services will be awarded. The selection process includes:

- A. All proposals will be evaluated in accordance with Section 4.6 Evaluation & Award of Agreement.
- B. Based upon the results of the evaluation, HCJFS will select Provider(s) for the services who it determines to be the responsible agency/company(s) whose proposal(s) is (are) most advantageous to the program, with price and other factors considered.
- C. HCJFS will work with selected Provider to finalize details of the Contract using **Attachment E, Contract Sample**, to be executed between the BOCC and Provider.
- D. If HCJFS and Provider are able to successfully finalize an agreement, the BOCC may award a Contract.
- E. If HCJFS and successful bidder are unable to come to terms regarding the Agreement, in a timely manner as determined by HCJFS, HCJFS will terminate the Agreement discussions with Provider. In such event, HCJFS reserves the right to select another Provider from the RFP process, cancel the RFP or reissue the RFP as deemed necessary.

4.8 Post-Proposal Meeting

The post-proposal meeting process may be utilized only by Qualified Providers passing the preliminary Stage 1 Review, who wish to obtain clarifying information regarding their non-selection. If a Provider wishes to discuss the selection process, the request for an informal meeting and the explanation for it must be submitted in writing and received by HCJFS within fourteen (14) business days after the date of notification of the decision. All requests must be signed by an individual authorized to represent the Provider and be addressed to the HCJFS Contact Person at the address listed in Section 3.2. Certified or registered mail must be used unless the request is delivered in person, in which case the Provider should obtain a delivery receipt. A meeting will be scheduled

within 21 calendar days of receipt of the request and will be for the purpose of discussing a Provider's non-selection.

4.9 Public Records

Hamilton County is a governmental agency required to comply with the Ohio Public Records Act as set forth in ORC 149.43. Any material, documents or information which Provider deems to be subject to exemption under the Ohio Public Records Act shall clearly be identified and marked as such before submission to Hamilton County. If Hamilton County is requested by a third party to disclose those documents which are identified and marked as exempt for disclosure under Ohio law, Hamilton County will notify Provider of that fact. Provider shall promptly notify Hamilton County, in writing, that either a) Hamilton County is permitted to release these documents, or b) Provider intends to take immediate legal action to prevent its release to a third party. A failure of Provider to respond within five (5) business days shall be deemed permission for Hamilton County to release such documents.

5.0 Terms and Conditions

The contents of this RFP and the commitments set forth in the selected proposals shall be considered contractual obligations, if a contract ensues. Failure to accept these obligations may result in cancellation of the award. All legally required terms and conditions shall be incorporated into final contract agreements with the selected Providers.

5.1 Type of Contract

The evaluation of proposals submitted in response to this RFP may result in the issuance of a contract. The contract shall incorporate the terms, conditions and requirements of the RFP, the Provider's proposal, and any other mutually agreed upon terms.

5.2 Order of Precedence

The successful Provider's proposal, this RFP, and other applicable addenda will become part of the final contract. This RFP and all attachments are intended to supplement and complement each other and shall where permissible be so interpreted. However, if any provision of this RFP or the attachments conflict, this RFP takes precedence.

5.3 Contract Period, Funding & Invoicing

The period of this contract shall be determined by funding availability and provider service design. Direct services to youth are not expected to begin before 7/1/10. Funding will be determined based on available funding, the volume and type of proposals selected, their associated budgets and subsequent budget negotiations. Funding is contingent on timely availability and state/federal restrictions on funding. All

contracts awarded as a result of this solicitation will be on a cost reimbursement agreement for authorized services already provided. HCJFS will use its best efforts to make payment within thirty (30) days of receipt of timely and accurate invoices and required documentation. **See Attachment B for a sample Provider Contract for minimum contractual requirements of all HCJFS Providers. Provider is encouraged to carefully review attachment B, and submit terms their organization has conflict with or inability to meet. This is to assist with expedient contract development and identify non-negotiation terms. HCJFS reserves the right to add or delete contract language to meet program needs.**

5.4 Confidential Information

HCJFS is required to maintain the confidentiality of consumer information. The sharing of consumer information with HCJFS business partners and service Providers is governed by numerous laws, regulations, policies and procedures. The governing requirements were developed to ensure that confidentiality is maintained and that appropriate security procedures are implemented and followed to address the exchange of information. Any Provider engaging in any service for HCJFS will be required to hold confidential consumer information.

As a means of ensuring the confidentiality of consumer information, all data exchanged by e-mail that is outside of the HCJFS e-mail network will be transmitted as an attached WORD or Excel document that has been encrypted and password protected. The sender and receiver of confidential consumer information are required to initiate the use of new passwords on the first day of each quarter. The passwords will be established by HCJFS and given to the selected Provider(s). Non-encrypted information must be sent to HCJFS via fax, in person, or regular or certified mail on a disk or flash drive.

5.5 Non-Discrimination In The Performance Of Services

Provider agrees to comply with the non-discrimination requirements of Title VI of the Civil rights Act of 1964, 42 USC Section 2000d, and any regulations promulgated there under. Provider further agrees that it shall not exclude from participation in, deny the benefits of, or otherwise subject to discrimination any consumer in its performance of this Contract on the basis of race, color, religion, sex, national origin, ancestry, disability, Vietnam-era veteran status, age, political belief, or place of birth.

Provider further agrees to comply with OAC 5101:9-02-05, as applicable, which require that contractors and sub-grantees receiving federal funds must assure that persons with limited English proficiency (LEP) can meaningfully access services at their own expense. To the extent Provider provides assistance to LEP individuals through the use of an oral or written translator or interpretation services, in compliance with this requirement, customers shall not be required to pay for such assistance.

5.6 Insurance

Provider agrees to procure and maintain for the duration of this Contract the following insurance: insurance against claims for injuries to persons or damages to property which may arise from or in connection with Provider's products or services as described in this Contract; auto liability; professional liability (errors and omissions) and umbrella/excess insurance. Further, Provider agrees to procure and maintain for the duration of this Contract Workers' Compensation. The cost of all insurance shall be borne by Provider. Insurance shall be purchased from a company licensed to provide insurance in Ohio. Insurance is to be placed with an insurer provided an A.M. Best rating of no less than A:VII. Provider shall purchase the following coverage and minimum limits;

Commercial general liability insurance policy with coverage contained in the most current Insurance Services Office Occurrence Form CG 00 01 or equivalent with limits of at least One Million Dollars (\$1,000,000.00) per occurrence and One Million Dollars (\$1,000,000.00) in the aggregate and at least One Hundred Thousand Dollars (\$100,000.00) coverage in legal liability fire damage. Coverage will include:

Additional insured endorsement;
Product liability;
Blanket contractual liability;
Broad form property damage;
Severability of interests;
Personal injury; and
Joint venture as named insured (if applicable).

Endorsements for physical abuse claims and for sexual molestation claims must be a minimum of Three Hundred Thousand Dollars (\$300,000.00) per occurrence and Three Hundred Thousand Dollars (\$300,000.00) in the aggregate.

Business auto liability insurance of at least One Million Dollars (\$1,000,000.00) combined single limit, on all owned, non-owned, leased and hired automobiles. If the Contract contemplates the transportation of the users of Hamilton County services (such as but not limited to HCJFS clients) "Clients" and the Provider provides this service through the use of its employees' privately owned vehicles "POV", then the Provider's Business Auto Liability insurance shall sit excess to the employees POV insurance and provide coverage above its employee's POV coverage. The Provider agrees the business auto liability policy will be endorsed to provide this coverage.

Professional liability (errors and omission) insurance of at least One Million Dollars (\$1,000,000.00) per claim and in the aggregate.

Umbrella and excess liability insurance policy with limits of at least One Million Dollars (\$1,000,000.00) per occurrence and in the aggregate, above the commercial general, professional liability and business auto primary policies and containing the following coverage:

Additional insured endorsement;
Pay on behalf of wording;
Concurrency of effective dates with primary;
Blanket contractual liability;
Punitive damages coverage (where not prohibited by law);
Aggregates: apply where applicable in primary;
Care, custody and control – follow form primary; and
Drop down feature.

Workers' Compensation insurance at the statutory limits required by Ohio Revised Code.

The Provider further agrees with the following provisions:

The insurance endorsement form and the certificate of insurance form will be sent to: Risk Manager, Hamilton County, room 607, 138 East Court Street, Cincinnati, Ohio 45202; and to HCJFS, Contract Services, 3rd floor, 222 East Central Parkway, Cincinnati, Ohio 45202; Risk Manager, City of Cincinnati, 100 Centennial Plaza, Central Avenue; Cincinnati, Ohio 45202. The forms must state the following: "Board of County Commissioners of Hamilton, County, Ohio, Hamilton County Department of Job & Family Services, City of Cincinnati and their respective officials, employees, agents, and volunteers are endorsed as additional insured as required by Contract on the commercial general, business auto and umbrella/excess liability policies."

Each policy required by this clause shall be endorsed to state that coverage shall not be canceled or materially changed except after thirty (30) days prior written notice given to: Risk Manager, Hamilton County, room 607, 138 East Court Street, Cincinnati, Ohio 45202; HCJFS, Contract Services, 3rd floor, 222 East Central Parkway, Cincinnati, Ohio 45202; and to Risk Manager, City of Cincinnati, 100 Centennial Plaza, Central Avenue, Cincinnati, Ohio 45202.

Provider shall furnish the Hamilton County Risk Manager, HCJFS and City of Cincinnati Risk Manager with original certificates and amendatory endorsements effecting coverage required by this clause. All certificates and endorsements are to be received by Hamilton County before the Contract commences. Hamilton County reserves the right at any time to require complete, certified copies of all required insurance policies, including endorsements affecting the coverage required by these specifications.

Provider shall declare any self-insured retention to Hamilton County pertaining to liability insurance. Provider shall provide a financial guarantee satisfactory to Hamilton County and HCJFS guaranteeing payment of losses and related investigations, claims administration and defense expenses for any self-insured retention.

If Provider provides insurance coverage under a "claims-made" basis, Provider shall provide evidence of either of the following for each type of insurance which is provided on a claims-made basis: unlimited extended reporting period coverage which allows for an unlimited period of time to report claims from incidents that occurred after the policy's retroactive date and before the end of the policy period (tail coverage), or; continuous

coverage from the original retroactive date of coverage. The original retroactive date of coverage means original effective date of the first claim-made policy issued for a similar coverage while Provider was under Contract with Hamilton County..

Provider will require all insurance policies in any way related to the work and secured and maintained by Provider to include endorsements stating each underwriter will waive all rights of recovery, under subrogation or otherwise, against Hamilton County, HCJFS and the City of Cincinnati. Provider will require of subcontractors, by appropriate written agreements, similar waivers each in favor of all parties enumerated in this section.

Provider, Hamilton County, HCJFS, and the City of Cincinnati agree to fully cooperate, participate, and comply with all reasonable requirements and recommendations of the insurers and insurance brokers issuing or arranging for issuance of the policies required here, in all areas of safety, insurance program administration, claim reporting and investigating and audit procedures.

Provider's insurance coverage shall be primary insurance with respect to Hamilton County, HCJFS, the City of Cincinnati, and their officials, and their respective employees, agents, and volunteers. Any insurance maintained by Hamilton County, HCJFS, or the City of Cincinnati shall be in excess of Provider's insurance and shall not contribute to it.

Maintenance of the proper insurance for the duration of the Contract is a material element of the Contract. Material changes in the required coverage or cancellation of the coverage shall constitute a material breach of the Contract.

If any of the work or services contemplated by this Contract is subcontracted, Provider will ensure that any and all subcontractors comply with all insurance requirements contained herein.

5.7 Declaration of Property Tax Delinquency

As part of the submitted proposal, Provider will include a **notarized** Declaration of Property Tax Delinquency form, **Attachment G**, which states the Provider was not charged with any delinquent personal property taxes on the general tax list of personal property for Hamilton County, Ohio or that the Provider was charged with delinquent personal property taxes on said list, in which case the statement shall set forth the amount of such due and unpaid delinquent taxes as well as any due and unpaid penalties and interest thereon. If the form indicates any delinquent taxes, a copy of the notarized form will be transmitted to the county treasurer within thirty (30) days of the date it is submitted. A copy of the notarized form shall also be incorporated into the contract, and no payment shall be made with respect to the contract, unless the notarized form has been incorporated.

5.8 Terrorist Declaration

In accordance with ORC 2909.32(A)(2)(b), Provider agrees to complete the Declaration Regarding Material Assistance/Non-Assistance to a Terrorist Organization, **Attachment H**. Any material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List is a felony of the fifth degree. A purchase order for services rendered will not be issued for payment if this form is not completed and returned with the submitted proposal.

5.9 Other Program Requirements

Provider(s) must review and familiarize themselves with the Hamilton County Prevention, Retention and Contingency Program Amendment – Summer Youth Employment and Training requirements that follow on the next page. Provider(s) will be responsible for implanting these procedures for eligibility requirements.

HAMILTON COUNTY PREVENTION, RETENTION AND CONTINGENCY PROGRAM AMENDMENT - SUMMER YOUTH EMPLOYMENT AND TRAINING

Effective 1 April 2000

The Prevention, Retention and Contingency (PRC) Plan for Hamilton County is amended to facilitate programs providing training and/or employment experience for youths during school summer recess. These services are delivered either directly by the Hamilton County Department of Human Services (HCDHS) or through contracts with other public entities and/or local community service providers. This amendment does not affect this County's currently approved PRC Plan. Participation through this program will not bar individuals from receiving PRC assistance for any other services available under the County's PRC Plan or any other amendment To the Plan.

PURPOSE

This amendment is adopted to offer youths an experience that will encourage the development of a work ethic and work history. The intent is to enhance their long term prospects for self-sufficiency. It is also hoped that this positive utilization of time during summer recess will provide an alternative to activity which might compromise future prospects for self-sufficiency.

ELIGIBILITY CRITERIA

The applicant must be an adult or legally emancipated minor residing in Hamilton County.

The assistance group (AG) is defined as the custodial parent or caretaker relative and their children under the age of 18 (or under age 19 but still enrolled in high school). The caretaker may be related naturally or by adoption and must be a father, mother, brother, sister, aunt, uncle, first cousin or from an earlier generation denoted with the prefix "great" or "grand."

Ineligible individuals (as defined in the Hamilton County PRC Plan Section 6142) are not eligible for services from PRC nor are they included in calculating the AG size (however their income is counted). The current total gross monthly income of all AG members is compared with a need standard of 300% of the Federal Poverty Guideline appropriate to the size of the AG. If the income is less than the need standard, the AG is eligible for this program. Liquid resources are not included in the calculation.

Once determined eligible, the family will remain eligible for the duration of the program.

APPLICATION PROCESSING

The application process will be administered by HCDHS or, where applicable, the contracted public entity or community service provider. The determination and documentation of eligibility will be the responsibility of HCDHS, or as specified in the contract with other parties. The application format to be employed is attached herewith as a part of this amendment (providers may augment this format to serve their purposes but must not delete any required information).

The PRC applicant must complete, sign and date the application form.

The verification of all eligibility factors is accomplished through the written declaration of the applicant.

HCDHS staff or, if applicable, the contracted public entity or community service provider makes the eligibility determination and records it on the Application Form.

HCDHS or, if applicable, the contracted public entity or community service provider retains the application for audit purposes and is responsible for any findings.

SERVICES PROVIDED

Services will be in support of the purposes of this amendment (as cited above) and as specified in the contract between HCDHS and the provider. Services may include (but are not limited to):

- orientations for both work-site personnel and program participants;
- work-site placement;
- provision of access to transportation, as required;
- work skills training and/or work experience with positive reinforcement through the earning of nominal wages or incentive payments;
- mid-term and final work evaluations;
- program counselors; and
- program monitoring and reporting.

ATTACHMENT A
MINOR WAGE
AGREEMENT

To: All Employers in the State of Ohio
From: Ohio Department of Commerce, Wage and Hour Bureau
Subject: Minor Wage Agreement

Section 4109.10 of the Ohio Revised Code reads as follows:

"No employer shall give employment to a minor without agreeing with him as to the wages or compensation he shall receive for each day, week, month, or year; or per piece, for work performed. The employer shall furnish the minor with written evidence of the agreement and on or before each payday, with a statement of the earnings due and the amount to be paid to him. **No employer shall reduce the wages or compensation of any minor without giving him notice at least twenty-four hours previous to the reduction, at which time a written agreement shall be entered into with the minor as in the case of original employment.**"

The following form is furnished as a guide or sample, and may be reproduced by any employer. This form should be prepared in duplicate and signed by both the employer and the minor. One copy to be given to the minor and the other copy to be retained by the employer in the personnel file of the minor.

MINOR AGREEMENT

Employer _____

Date ____/____/____ has employed

_____,
a minor who is under 18 years of age and agree that minor shall be paid at the rate of \$
_____ per hour. We also have on file a working certificate for said minor, unless otherwise
exempt under Chapter 4109.

Date of Birth ____/____/____

Minor's Signature _____

Owner or Official Signature _____

ATTACHMENT B
Ohio Minor Labor Law
ORC Chapter 4109: Employment Of Minors

"Minor" Any person less than 18 years of age who has not obtained a high school diploma or its equivalence and/or individuals subject to the exemptions contained within section 4109.06.

"Record Requirements" Every employer shall post in a conspicuous place frequented by minors a printed abstract of the minor labor laws, furnished by the Wage and Hour Division, and a complete listing of all minors employees which shall contain at a minimum the minors name, age, date of birth and occupation. Ohio Board of Education authorizing the minor to be employed by a particular establishment. Minors must be at least 14 years of age to obtain a work permit. Work permits can be deemed by the school superintendent. A new work permit must be issued each time the minor changes employment. Within 3 days of termination of employment the work permit shall be returned to the issuing authority. Also upon termination, payment for any and all wages must be received by the minor by the next regularly scheduled pay period.

During summer months when school is not in session, 16 and 17 year old minors are not required to obtain work permits, provided that the employer maintains proof of age and a signed statement from their parent or guardian consent to their proposed employment.

"Minor Wage Agreement" An agreement, prepared in duplicate, as to the wages and or compensation the minor shall receive for each day, week, month, year, or per piece. Sample agreements are available from the Bureau, upon request. No employer shall reduce the wage of any minor without giving him written notice of at least 24 hours prior to the reduction. Copies of the Minor Wage Agreement are available here.

"Wage Withholding" No employer shall retain or withhold wages or any part thereof because of presumed negligence, failure to comply with rules, breakage of machinery, or alleged incompetence to produce any standard of merit.

"Break Requirement"All minors are required to have a 30 minute uninterrupted break when working more than 5 consecutive hours which must be documented as stated above.

"Employment Hours"

Minors 14 and 15

When school is IN session minors 14 & 15 cannot be employed before 7:00 a.m. or after 7:00 p.m.; work more than 3 hours on any School Day; work more than 18 hours in any School Week; work during school hours, unless employment is incidental to bona fide vocational training program.

When school is NOT in session minors 14 & 15 cannot be employed before 7:00 a.m. or after 9:00 p.m.; work more than 8 hours per day; work more than 40 hours per week.

Minors 16 and 17

When school is IN session minors 16 & 17 cannot be employed before 7:00 a.m. or 6:00 a.m. if not employed after 8:00 p.m. the previous night; or after 11:00 p.m. Sunday through Thursday. There is no limitation in hours per day or week.

When school is NOT in session minors 16 & 17 have no limitation as to the starting and ending time and no limitation in hours per day or week.

Prohibited Occupations

Certain occupations are considered hazardous to minors and minors are prohibited from working in those occupations. For further information on Prohibited Occupations for Minors.

The above is a summary of ORC Chapter 4109. This summary does not include all of the requirements of Ohio's minor labor laws. Persons should refer to Chapter 4109 for specific requirements applicable to them, or contact the Division of Industrial Compliance & Labor, Wage and Hour Bureau. information on this site is believed to be accurate but is not guaranteed. The State of Ohio disclaims any liability for any errors or omissions.

If you would like to reach us, you may contact us at:

Division of Industrial Compliance & Labor, Wage and Hour Bureau,
6606 Tussing Road, P.O. Box 4009
Reynoldsburg, Ohio 43068-9009, (614) 644-2239

or you may E-Mail your query to:

WageHourWebmaster

ATTACHMENT C

2010 Summer Youth TANF Eligibility information

Youth Name (Applicant)	Date
Address	Telephone Number
City, State, ZIP	SSN

If the applicant (youth) needing transportation assistance is under 18 (ages 14-17) a parent or guardian must answer all of the questions (A-I below) and complete and sign this form.

- A. Yes No I am an adult or legally emancipated minor.
- B. Yes No I live in Hamilton County.
- C. Yes No The child(ren) listed below are younger than 18 (or younger than 19 but still in HS) or I am at least 6 months pregnant.
- D. Yes No All individuals listed below are citizens or lawful resident aliens
- E. Yes No No one listed below is in debt to the Hamilton County Job and Family Services for an OWF overpayment due to fraud.
- F. Yes No All individuals listed below who are unmarried custodial parents under 18 and not attending school are pursuing employment/training.
- G. Yes No No individual listed below is a fleeing felon or probation/parole violator.
- H. Yes No No individual listed below has failed to cooperate in establishing paternity or securing support.
- I. Yes No No individual listed below has been found to have fraudulently misrepresented their residence to obtain benefits in two or more states (within the last ten years).

List applicant (youth), parents/guardians, and all dependent children under age 18 (or younger than age 19 if still in High School) residing in the household:

Name	Relationship to Applicant	Age	Source of Income	Monthly Income
1.				
2.				
3.				
4.				
5.				
6.				
7.				
			Total	

In order to preserve or improve my family's prospects for self-sufficiency, I am applying for services from the 2010 Hamilton County Summer Youth Program. The information provided above is completed and correct to the best of my knowledge and belief.

Signature of Parent/Guardian (if youth applicant is age 14-17), or applicant if age 18+, or HCJFS Caseworker if child is in Foster Care or Residential Treatment	Date
---	-------------

**ATTACHMENT D
PROPOSAL COVER SHEET FOR
2010 TANF SUMMER YOUTH EMPLOYMENT PROGRAM
Bid No: RFP MB0210R**

Name of Provider : _____

Provider Address: _____
Include city, state and zip code

Contact Person : _____
(Please Print or type name) Title

Phone Number: _____ Fax Number: _____ E-Mail: _____

Additional Names: Provider must include the names of individuals authorized to negotiate with HCJFS

Person(s) authorized to negotiate with HCJFS:

(1) Name: _____ Title: _____
(Please Print) (Please Print)

Phone Number: _____ Fax Number _____ E-Mail: _____

(2) Name: _____ Title: _____
(Please Print) (Please Print)

Phone Number: _____ Fax Number: _____ E-Mail: _____

Name of Program: 2010 Summer Youth Employment In School ____ Out of School ____

Total Cost for Four and half Months 5/17/10 - 9/30/10	Total Number of Youth to be Served	Age Group to be Served
\$ _____ (Do not include any leverage funds)	_____	_____

Certification: I hereby certify the information and data contained in this proposal are true and correct. The Provider's governing body has authorized this application and document.

Signature - Authorized Representative Title Date

Signature – Financial Officer Title Date

++Please see back of form for checklist to verify everything required to be submitted is included.
Proposal Submission Checklist

For
2010 TANF SUMMER YOUTH EMPLOYMENT PROGRAM
Bid No: RFP MB0210R

Please use the checklist below to ensure all items and actions necessary to have your proposal accepted are completed.

- _____ A) Registered for RFP Process on or before May 6, 2010 by 2:00 p.m.
- _____ B) Proposal is to be submitted by 11:00 a.m. on May 20, 2010
- _____ C) Cover sheet is to be signed and all sections are to be completed in full, Section 2.1
- _____ D) Responses to Program Components, Section 2.2.1 are included
- _____ E) Responses to System and Fiscal Administration components, Section 2.2.2 are included
- _____ F) Budget completed correctly, Section 2.3 (hard copy included with proposals)
- _____ G) Electronic copy of the budget sent to the Contact Person on or before due date of proposals (May 20, 2010). Electronic copy completed in Excel format, Section 2.3
- _____ H) Budget Narrative explains the cost and their relationship to proposed services. It must justify cost and give the formula by which they were derived. All costs in the narrative should match the line items in the budget, budget narrative must be completed for initial contract term. Section 2.3
- _____ I) Customer Reference Letters are included, Section 2.4 (Do not include any HCJFS Personnel)
- _____ J) Personnel Qualifications and Resumes are included, Section 2.5

ATTACHMENT E
HAMILTON COUNTY
DEPARTMENT OF JOB & FAMILY SERVICES
PURCHASE OF SERVICE CONTRACT

Contract # _____

This Contract is entered into on _____ between the Board of County Commissioners of Hamilton County, Ohio on behalf of the Hamilton County Department of Job & Family (hereinafter "HCJFS") and XXXXXXXXXXXXXXXXXXXX, (hereinafter "Provider"), with an office at XXXXXXXXXXXXXXXXXXXX, whose telephone number is (513) XXXXXX for the purchase of the 2010 Summer Youth Activity Program.

1. TERM

This Contract will be effective from XXXXX 2010 through XXXXX, 2010 inclusive, unless otherwise terminated or extended by formal amendment.

The total amount of the Contract can not exceed \$XXXXXXXX over the life of this Contract.

This Contract is awarded as a result of RFP # XXXXXX, Request for Proposals for 2010 Summer Activity Programs funded through Temporary Assistance to Needy Families (TANF) Prevention Retention and Contingency (PRC), (Exhibit I – Request for Proposals).

2. SCOPE OF SERVICE

A. EXHIBITS

Subject to terms and conditions set forth in this Contract and the attached exhibits (such exhibits are deemed to be a part of this Contract as fully as if set forth herein), Provider agrees to perform the Summer Youth Activity as more particularly described in Exhibit I – Request for Proposals, Exhibit II - Provider's Proposal, and Exhibit III – Provider's Budget.

Exhibits for this Contract are as follows:

1. Exhibit I -Request for Proposals;
2. Exhibit II – Provider's Proposal;
3. Exhibit III – Budget; and
4. Exhibit IV – Release of Personnel Records and Criminal Records Check

B. ORDER OF PRECEDENCE

This Contract is based upon Exhibits I through IV as defined in 2.A. EXHIBITS above. This Contract and all exhibits are intended to supplement and compliment each other and shall, where possible, be so interpreted. However, if any provisions of this Contract irreconcilably conflict with an exhibit, this Contract takes precedence over the exhibits. In the event there is an inconsistency between the exhibits, the inconsistency will be resolved in the following order:

1. Exhibit I - Request for Proposal;
2. Exhibit II– Provider’s Proposal; then
3. Exhibit III – Budget.

C. PROVIDER RESPONSIBILITY

1. Required Documentation and Reporting: Records of all service provided to all individuals in the contracted program(s) (whether reimbursed by this Contract or not) and all the expenses incurred in the operation of the programs must be maintained. Service and expenses for which there is no proper documentation will not be reimbursed, or will be recovered through the audit process.

Provider agrees that it will not be paid/reimbursed for any service or expenses for which Provider has not maintained the proper records and documentation. Provider agrees that this provision also applies to records and documentation which are the subject of any audit. For purposes of this Contract “Proper” documentation of service provided is as follows:

If the program is such that service is provided on a one-to-one basis, as in counseling, the documentation must be maintained by the counselor by means of a personal record of service which details the service provided to, or on behalf of a recipient, with the beginning and ending date of the service.

2. HCJFS reserves the right to request additional reports at any time during the Contract period. It is the responsibility of Provider to furnish HCJFS with reports as requested. HCJFS may exercise this right without a Contract amendment. HCJFS reserves the right to withhold payment until such time as the requested and/or required reports are received.
3. Provider must report financial, Consumer, and performance data in accordance with instructions supplied by HCJFS. Financial reports must include any income or profits earned, including such income or profits earned by subrecipients, and any costs incurred (such as stand-in costs) that are otherwise allowable except for funding limitations.
4. Provider must report expenditures and program income, including any profits earned, on the accrual basis of accounting and cumulative by fiscal year of appropriation. If the Provider’s accounting records are not normally kept on the accrual basis of accounting, the Provider must develop accrual information through analysis of the documentation on hand.
5. The Provider agrees that the compensation amount in Section 3, BILLING AND PAYMENT is the full payment for service. No fees or additional cost shall be charged to any TANF youth for the Contract service without the express approval of HCJFS. Such approval must be made by way of a Contract amendment.

D. SUBRECIPIENT

Provider is designated as a “subrecipient” as referenced by ODJFS’ rule OAC 5101:9-1-88. As such, Provider will have some of the same restrictions and requirements as the federal, state, and local government/organizations. The auditing standards set forth in Office of Management and Budget Circular A-133.210(b) budgeting protocols, and federal budget/cost guidelines are all applicable to the subrecipient entity. Subrecipients will be monitored according to Office of Management and Budget Circular A-133.400(d)(3) and Office of Management and Budget Circular A-102.40 (a).

Provider agrees that it will pay HCJFS the full amount of any funds which HCJFS is required to repay to any federal or state entity due to Provider’s failure to properly perform its obligations consistent with the terms and conditions of this Contract.

3. BILLING AND PAYMENT

- A. Expense Reimbursement – For services rendered during this Contract, Provider shall be reimbursed for One Hundred Percent (100%) of its incurred and allowable expenses. Notwithstanding the above, such expense reimbursement shall be limited to those expenses set forth in Exhibit III– Budget, for which Provider has submitted proper verification as a part of its invoice. In no event, however, shall reimbursement to Provider exceed \$XXXXXXXX. Provider agrees that it will not be reimbursed for any expense in an amount greater than set forth in Exhibit III – Budget for such expense or time period set forth on such exhibit.
- B. Billing and Payment – Original invoices, signed by Provider, will be sent each month (or more frequently) to HCJFS, within thirty (30) days of the end of the service month. Provider shall make all reasonable efforts to include all service provided during the service month on the invoice.

HCJFS reserves the right to withhold payment until such time as requested and/or required reports are received.

- 1. HCJFS will not make payment for any service, either an initial invoice or a supplemental invoice, which is submitted to HCJFS more than sixty (60) calendar days from the end of the service month. The HCJFS Fiscal Department has the final authority in determining if an invoice is received timely and accurately. For invoices which are received timely but are not accurate, there will be no extension of the time limitations.
- 2. For accurate invoices which are received timely, HCJFS, will make payment within thirty (30) calendar days after receipt of the invoice for all invoices received in accordance with the terms of this Contract. HCJFS will only pay for those services authorized and referred.
- 3. Invoices are to be submitted each month with only one (1) month of service being recorded on each invoice. All invoices must contain backup documentation to allow HCJFS to verify all expenses set forth on such invoice.

Proper expense documentation includes copies of all invoices, payroll registers, etc. used to generate a dollar amount of expense for each line set forth on the invoice.

- C. Provider will indicate the purchase order and vendor number on all invoices submitted for payment.

- D. Provider warrants that the following unallowable costs were not included in Exhibit III – Budget and that these costs will not be included in any invoice submitted for payment. For this project, unallowable costs are:
 - 1. bad debt or losses arising from uncollectible accounts and other claims and related costs;
 - 2. bonding costs;
 - 3. contributions to a contingency(ies) reserve or any similar provision for unforeseen events;
 - 4. contributions, donations or any outlay of cash with no prospective benefit to the facility or program;
 - 5. entertainment costs for amusements, social activities and related costs;
 - 6. costs of alcoholic beverages;
 - 7. goods or services for personal use;
 - 8. fines, penalties or mischarging costs resulting from violations of, or failure to comply with, laws and regulations;
 - 9. gains and losses on disposition or impairment of depreciable or capital assets;
 - 10. cost of depreciation on idle facilities, except when necessary to meet Contract demands;
 - 11. costs incurred for interest on borrowed capital or the use of a governmental unit's own funds, except as provided in rule 5101:2-47-26.2 of the Administrative Code;
 - 12. losses on other contracts;
 - 13. organizational costs such as incorporation, fees to attorneys, accountants and brokers in connection with establishment or reorganization;
 - 14. costs related to legal and other proceedings;
 - 15. goodwill;
 - 16. asset valuations resulting from business combinations;
 - 17. legislative lobbying costs;
 - 18. cost of organized fund raising;
 - 19. cost of investment counsel and staff and similar expenses incurred solely to enhance income from investments;
 - 20. any costs specifically subsidized by federal monies with the exception of federal funds authorized by federal law to be used to match other federal funds;
 - 21. advertising costs with the exception of service-related recruitment needs, procurement of scarce items and disposal of scrap and surplus;
 - 22. cost of insurance on the life of any officer or employee for which the facility is beneficiary;
 - 23. major losses incurred through the lack of available insurance coverage; and
 - 24. cost of prohibited activities from section 501(C)(3) of the Internal Revenue Code.

- E. Provider warrants that a separate General Ledger account has been established and will be maintained for the revenue and expenses of this contracted program. Provider further understands and agrees that any funds received pursuant to this Contract must be tracked and reported separately from any other TANF PRC funds received by Provider.
- F. Provider warrants that claims made for payment for services provided shall be for actual services rendered to eligible individuals and do not duplicate claims made by the Provider to other sources of public funds for the same service.

4. ELIGIBILITY FOR SERVICES

- A. PRC Eligibility Criteria:
 - 1. The assistance group (AG) is defined as a parent or parents and their children under the age of 18 (or under age 19 but still enrolled in high school). There must be at least one (1) such child. AG members must reside together and all must be residents of Hamilton County.
 - 2. Ineligible individuals (as defined in County PRC plan section 6142) are not included in calculating the AG size but their income is counted.
 - 3. The total gross monthly income of all AG members is compared with a need standard as indicated on the **Application – Prevention, Retention and Contingency (PRC) Program (Exhibit ?)**. If the income is less than the need standard, the AG is eligible for this program.
 - 4. Liquid resources are not included in the calculation.
- B. Application processing: The application process will be administered by the Provider and documentation of eligibility will be the Provider’s responsibility. In order to be determined PRC eligible, the applicant must have answered “yes” to all application questions and fall within the appropriated federal poverty guidelines.
 - 1. The PRC applicant must complete, sign and date the application form **(Exhibit ?)**.
 - 2. The verification of all eligibility factors is accomplished through the written declaration of the applicant.
 - 3. The Provider makes the eligibility determination and records it on the application form.
 - 4. Applicants denied service through the PRC application process will be issued a written statement by Provider indicating the reason for the denial of service.

5. AVAILABILITY AND RETENTION OF RECORDS

- A. Provider agrees that all records, documents, writing or other information, including but not limited to, financial records, census records, client records and documentation of compliance with Ohio Administrative Code rules, produced by Provider under this Contract, and all records, documents, writings or other information, including but not limited to financial, census and client records used by Provider in the performance of this Contract are treated according to the following terms:

All records relating to costs, work performed and supporting documentation for invoices submitted to HCJFS by Provider, along with copies of all deliverables submitted to HCJFS pursuant to this Contract, will be retained and made available by the Provider for inspection and audit by HCJFS, or other relevant governmental entities including, but not limited to the Hamilton County Prosecuting Attorney, Ohio Department of Job and Family Services (ODJFS), the Auditor of the State of Ohio, the Inspector General of Ohio or any duly appointed law enforcement officials and the United States Department of Health and Human Services for a minimum of three (3) years after reimbursement for services rendered under this Contract. If an audit, litigation or other action is initiated during the time period of the Contract, the Provider shall retain such records until the action is concluded and all issues resolved or the three (3) years have expired, whichever is later.

- B. Provider agrees that it will not use any information, systems or records made available to it for any purpose other than to fulfill the contractual duties specified herein, without permission of HCJFS. Provider further agrees to maintain the confidentiality of all Consumers and families served. No information on Consumers served will be released for research or other publication without the express written consent of HCJFS.
- C. Provider agrees to keep all financial records in a manner consistent with generally accepted accounting principles.
- D. Provider agrees that each financial transaction shall be fully supported by appropriate documentation. Provider further agrees that such documentation shall be available for examination.

6. NO ASSURANCES

Provider acknowledges that, by entering into this Contract, HCJFS is not making any guarantees or other assurances as to the extent, if any, that HCJFS will utilize Provider's services or purchase its goods. In this same regard, this Contract in no way precludes, prevents, or restricts Provider from obtaining and working under additional contractual arrangement(s) with other parties, assuming the contractual work in no way impedes Provider's ability to perform the services required under this Contract. Provider warrants that at the time of entering into this Contract, it has no interest in nor shall it acquire any interest, direct or indirect, in any contract that will impede its ability to provide the goods or perform the services under this Contract.

7. NON-EXCLUSIVE

This is a non-exclusive Contract, and HCJFS may purchase the same or similar item(s) from other Providers at any time during the term of this Contract.

8. CONFLICT OF INTEREST

This Contract in no way precludes, prevents, or restricts Provider from obtaining and working under an additional contractual arrangement(s) with other parties aside from HCJFS, assuming that the contractual work in no way impedes Provider's ability to perform the services required under this Contract. Provider warrants that at the time of entering into this Contract, it has no interest in nor shall it acquire any interest, direct or indirect, in any contract that will impede its ability to perform the services under this Contract.

Provider further agrees that there is no financial interest involved on the part of any HCJFS, Board of County Commissioners or employees involved in the development of the specifications or the negotiation of this Contract. Provider has no knowledge of any situation that would be a conflict of interest. It is understood that a conflict of interest occurs when an HCJFS employee will gain financially or receive personal favors as a result of the signing or implementation of this Contract. Provider will report the discovery of any potential conflict of interest to HCJFS. Should a conflict of interest be discovered during the term of this Contract, HCJFS may exercise any right under the Contract including termination of the Contract.

Provider further agrees to comply with Ohio ethics laws as listed in the Ohio Revised Code Chapters 102 and 2921, and the Ohio Administrative Code Chapter 5101. Provider certifies that by executing this Contract, it has reviewed, knows, and understands the State of Ohio's ethics and conflict of interest laws, which includes the Governor's Executive Order 2007-01S pertaining to ethics. Provider further agrees that it will not engage in any action(s) inconsistent with Ohio ethics laws or the aforementioned Executive Order.

9. ASSIGNMENT AND SUBCONTRACTING

The parties expressly agree that this Contract shall not be assigned by the Provider without the prior written approval of HCJFS. Provider may not subcontract any of the services agreed to in this Contract without the express written consent of HCJFS. At the time of Contract signing, Provider warrants that Provider has a signed Contract with all approved subcontractors or will execute a signed Contract with all approved subcontractors within thirty (30) days of execution of Provider's Contract with HCJFS. All subcontracts are subject to the same terms, conditions, and covenants contained within this Contract, including the insurance requirement in which Hamilton County, Board of County Commissioners, Hamilton County, Ohio, and HCJFS are listed as additional insured. Provider agrees it will remain primarily liable for the provision of all deliverables under this Contract and it will monitor any approved subcontractors to assure all requirements under this Contract are being met.

Notwithstanding any other provisions of this Contract that would afford Provider an opportunity to cure a breach, Provider agrees the assignment of any portion of this Contract or use of any subcontractor, without HCJFS prior written consent, is grounds for HCJFS to

terminate this Contract with one (1) day prior written notice. Provider must notify HCJFS within one (1) business day when Provider knows or should have known that the subcontractor is out of compliance or unable to meet Contract requirements. Should this occur, Provider will immediately implement a process whereby subcontractor is immediately brought into compliance or the subcontractor's Contract with Provider is terminated. Provider shall provide HCJFS with written documentation regarding how compliance will be achieved. Under such circumstances, Provider shall notify HCJFS of subcontractor's termination and shall make recommendations to HCJFS of a replacement subcontractor. All replacement subcontractors are subject to the prior written consent of HCJFS. Provider is responsible for making direct payment to all subcontractors for any and all services provided by such contractor.

10. GOVERNING LAW

This Contract and any modifications, amendments, or alterations, shall be governed, construed, and enforced under the laws of Ohio.

11. INTEGRATION AND MODIFICATION

This instrument embodies the entire Contract of the parties. There are no promises, terms, conditions or obligations other than those contained herein; and this Contract shall supersede all previous communications, representations or contracts, either written or oral, between the parties to this Contract. This Contract shall not be modified in any manner except by an instrument, in writing, executed by the parties to this Contract.

Provider acknowledges and agrees that only staff from the Contract Services Section of HCJFS may implement contract changes. In no event will an oral agreement with HCJFS be recognized as a legal and binding change to the Contract.

12. SEVERABILITY

If any term or provision of this Contract or the application thereof to any person or circumstance shall, to any extent be held invalid or unenforceable, the remainder of this Contract or the application of such term or provision to persons or circumstances other than those to which it is held invalid or unenforceable, shall not be affected thereby and each term and provision of this Contract shall be valid and enforced to the fullest extent permitted by law.

13. TERMINATION

A. Termination for Convenience

This Contract may be terminated by HCJFS upon notice, in writing, delivered upon Provider thirty (30) calendar days prior to the effective date of termination.

B. Termination for Cause by HCJFS

If Provider fails to provide the Services as provided in this Contract for any reason other than Force Majeure, or if Provider otherwise materially breaches this Contract, HCJFS may consider Provider in default. HCJFS agrees to give Provider thirty (30) days written notice specifying the nature of the default. Provider shall have seven (7) calendar days from receipt of such notice to provide a written plan of action to HCJFS to cure such default. HCJFS is required to approve or disapprove such plan within five (5) calendar days of receipt. In the event Provider fails to submit such plan or HCJFS disapproves such plan, HCJFS has the option to immediately terminate this Contract upon written notice to Provider.

If Provider fails to cure the default in accordance with an approved plan, then HCJFS may terminate this Contract at the end of the thirty (30) day notice period. Any extension of the time periods set forth above shall not be construed as a waiver of any rights or remedies the HCJFS may have under this Contract.

For purposes of the Contract, material breach shall mean an act or omission that violates or contravenes an obligation required under the Agreement and which, by itself or together with one or more other breaches, has a negative effect on, or thwarts the purpose of the Agreement as stated herein. A material breach shall not include an act or omission, which has a trivial or negligible effect on the quality, quantity, or delivery of the goods and services to be provided under the Contract.

Notwithstanding the above, in cases of substantiated allegations of: i) improper or inappropriate activities, ii) loss of required licenses iii) actions, inactions or behaviors that may result in harm, injury or neglect or a Consumer, iv) unethical business practices or procedures; and v) any other event that HCJFS deems harmful to the well being of a Consumer; HCJFS may immediately terminate this Contract upon delivery of a written notice of termination to Provider.

C. Effect of Termination

1. Upon any termination of this Contract, Provider shall be compensated for (i) any outstanding invoices that have been issued in accordance with this Contract; and (ii) services satisfactorily performed in accordance with the terms and conditions of this Contract up to the date of termination. In addition, HCJFS shall receive credit for reimbursement made, as of the date of termination, when determining any amount owed to Provider.
2. Provider, upon receipt of notice of termination, shall take all necessary or appropriate steps to limit disbursements and minimize costs and furnish a report, as of the date of receipt of notice of termination, describing the status of all work under this Contract, including without limitation, results accomplished, conclusions resulting therefrom and any other matters as HCJFS may require.

Provider shall not be relieved of liability to HCJFS for damages sustained by HCJFS by virtue of any breach of the Contract by Provider. HCJFS may withhold any compensation to Provider for the purpose of off-set until such time as the amount of damages due HCJFS from Provider is agreed upon or otherwise determined.

14. COMPLIANCE

Provider certifies that Provider and all subcontractors who provide direct or indirect services under this Contract will comply with all requirements of federal laws and regulations, applicable Code of Federal Regulations cites including, but not limited to 2CFR Part 215 (OMB A-110), 2CFR Part 225 (OMB A-87), 2CFR Part 230 (OMB A-122), and 2CFR Part 220 (OMB A-21), state statutes and Ohio Administrative Code rules in the conduct of work hereunder. The Provider accepts full responsibility for payment of any and all unemployment compensation premiums, all income tax deductions, pension deductions, and any and all other taxes or payroll deductions required for the performance of the work by the Provider's employees.

15. NON-DISCRIMINATION AND EQUAL EMPLOYMENT OPPORTUNITY

- A. In carrying out this Contract, Provider and its officers, employees, members, and subcontractors hereby affirm current and ongoing compliance with 29 CFR Part 37, Title VII of the Civil Rights Act of 1964, The Americans With Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972, and all other nondiscrimination and equal employment opportunity statutes, laws, and regulations. Provider agrees not discriminate against any employee or applicant for employment because of race, religion, national origin, ancestry, color, gender, gender identity, sexual orientation, age, disability, political affiliation or belief, or veteran status. Provider will ensure that all qualified applicants are hired, and all employees are considered for promotion, demotion, transfer; recruitment or recruitment advertising, layoff, termination, rates of pay, other forms of compensation, selection for training (including apprenticeship), or any other employment-related opportunities, without regard to race, religion, national origin, ancestry, color, gender, gender identity, sexual orientation, age, disability, political affiliation or belief, or veteran status.
- B. Provider agrees to post notices affirming compliance with all applicable federal and state non-discrimination laws in conspicuous places accessible to all employees and applicants for employment. Provider will affirm that all qualified applicants will receive consideration for employment without regard to race, religion, national origin, ancestry, color, gender, gender identity, sexual orientation, age, disability, political affiliation or belief, or veteran status in all solicitations or advertisements for employees placed by or on behalf of Provider.
- C. Provider will incorporate the foregoing requirements of this Section in all of its subcontracts.
- D. Provider agrees to collect and maintain data necessary to show compliance with the nondiscrimination provisions of this section.

16. NON-DISCRIMINATION IN THE PERFORMANCE OF SERVICES

Provider agrees to comply with the non-discrimination requirements of Title VI of the Civil Rights Act of 1964, 42 USC Section 2000d, and any regulations promulgated thereunder. Provider further agrees that it shall not exclude from participation in, deny the benefits of, or otherwise subject to discrimination any HCJFS consumer in its performance of this Contract on the basis of race, color, sex, national origin, ancestry, disability, Vietnam-era veteran status, age, political belief, or place of birth.

Provider further agrees to comply with OAC 5151:9-02-01 and OAC 5101:9-02-05, as applicable, which require that contractors and sub-grantees receiving federal funds must assure that persons with limited English proficiency (LEP) can meaningfully access services. To the extent Provider provides assistance to LEP individuals through the use of an oral or written translator or interpretation services, in compliance with this requirement, Consumers shall not be required to pay for such assistance.

17. PROVIDER SOLICITATION OF HCJFS EMPLOYEES

Provider warrants that for one (1) calendar year from the beginning date of this Contract with HCJFS, Provider will not solicit HCJFS employees to work for Provider. The term "Provider" includes all Provider staff.

18. RELATIONSHIP

Nothing in this Contract is intended to, or shall be deemed to constitute a partnership, association or joint venture with Provider in the conduct of the provisions of this Contract. Provider shall at all times have the status of an independent contractor without the right or authority to impose tort, contractual or any other liability on the Board of County Commissioners, Hamilton County, Ohio; or HCJFS.

19. DISCLOSURE

Provider hereby covenants that it has disclosed any information that it possesses about any business relationship or financial interest that said Provider has with a county employee, employee's business, or any business relationship or financial interest that a county employee has with Provider or in Provider's business.

20. WAIVER

Any waiver by either party of any provision or condition of this Contract shall not be construed or deemed to be a waiver of any other provision or condition of this Contract, nor a waiver of a subsequent breach of the same provision or condition.

21. NO ADDITIONAL WAIVER IMPLIED

If HCJFS or Provider fails to perform any obligations under this Contract and thereafter such failure is waived by the other party, such waiver shall be limited to the particular matter waived and shall not be deemed to waive any other failure hereunder. Waivers shall not be effective unless in writing.

22. CONFIDENTIALITY

Provider agrees to comply with all federal and state laws applicable to HCJFS and/or Consumers of HCJFS concerning the confidentiality of such Consumers. Provider understands that any access to the identities of any such Consumers shall only be as necessary for the purpose of performing its responsibilities under this Contract. Provider agrees that the use or disclosure of information concerning Consumers for any purpose not directly related to the administration of this Contract is prohibited. Provider will ensure that all Consumer documentation is protected and maintained in a secure and safe manner whether located in Provider's office or taken out of Provider's office.

23. AUDIT RESPONSIBILITY

- A. Provider agrees to accept responsibility for receiving, replying to and/or complying with any audit exception by appropriate federal, state or local audit directly related to the provision of this Contract.

Audits will be conducted using a "sampling" method. Depending on the type of audit conducted, the areas to be reviewed using the sampling method may include but are not limited to months, expenses, total units, and billable units. If errors are found, the error rate of the sample period will be applied to the entire audit period.

Provider agrees to repay HCJFS the full amount of payment received for duplicate billings, erroneous billings, or false or deceptive claims. Provider recognizes and agrees that HCJFS may withhold any money due and recover through any appropriate method any money erroneously paid under this Contract if evidence exists of less than full compliance with this Contract. When an overpayment is identified and the overpayment cannot be repaid in one month, Provider will be asked to sign a REPAYMENT OF FUNDS AGREEMENT (the "Repayment Agreement"). If payments are not made according to the agreed upon terms, future checks may be held until the repayment of funds is current. Checks held more than sixty (60) days will be cancelled and will not be re-issued. HCJFS also reserves the right to not increase the rate(s) of payment or the overall Contract amount for services purchased under this Contract if there is any outstanding or unresolved issue related to an audit finding.

HCJFS may allow a change in the terms of the Repayment Agreement. Any change will require a formal amendment to the Repayment Agreement that will be signed by all parties. An amendment to the Repayment Agreement may also be processed if any additional changes or issues develop or need to be addressed.

- B. Provider shall cause to be conducted an annual independent audit. Within fifteen (15) days of receipt of the audit report, Provider agrees to give HCJFS a copy of Provider's most recent annual report, most recent annual independent audit report and any report associated management letters.
- C. HCJFS reserve the right to evaluate programs of contracted providers. Evaluation activities may include, but are not limited to reviewing records, observing programs, and interviewing program employees and consumers. Such evaluations will be conducted at Provider's own time and expense.
- D. To the extent applicable, Provider will cause a single or program-specific audit to be conducted in accordance with OMB Circular A-133. Provider should submit a copy of the completed audit report to HCJFS within forty-five (45) days after receipt from the accounting firm performing such audit.

24. WARRANTIES AND REPRESENTATIONS

Provider warrants and represents that its services shall be performed in a professional and work like manner in accordance with applicable professional standards.

Provider warrants and represents that at all times during the contract term, Provider shall maintain in good standing, any license or certification required for Provider's performance in carrying out the terms of this Contract. Additionally, Provider shall immediately notify HCJFS of any action, modification or issue relating to said licensure or certification.

Provider warrants that separate books and records, including, but not limited to the general ledger account journals and profit/loss statements have been established and will be maintained for the revenue and expenses of this program.

Provider warrants and represents that they have followed the procurement and bidding practices set forth in the Administrative Procedure Manual ("APM"), Chapter 4000, Ohio Administrative Code Sections 5101:9-4-01, 5101:9-4-02, 5101:9-4-04, 5101:9-4-06, 5101:9-4-07, and 45 CFR part 92.

25. AVAILABILITY OF FUNDS

This Contract is conditioned upon the availability of federal, state, or local funds that are appropriated or allocated for payment of this Contract. If funds are not allocated and available for the continuance of the function performed by the Provider hereunder, the products or services directly involved in the performance of that function might be terminated by HCJFS at the end of the period for which funds are available.

HCJFS will notify the Provider at the earliest possible time of any products or services that will or may be affected by a shortage of funds. No penalty shall accrue to HCJFS in the event this provision is exercised, and HCJFS shall not be obligated or liable for any future payments due or for any damages as a result of termination under this section.

26. FORCE MAJEURE

If by reason of force majeure, the parties are unable in whole or in part to act in accordance with this Contract, the parties shall not be deemed in default during the continuance of such inability provided, however, that Provider shall only be entitled to the benefit of this paragraph for fourteen (14) days if the event of force majeure does not affect HCJFS' property or employees which are necessary to Provider's ability to perform.

The term "Force Majeure" as used herein shall mean without limitation: acts of God; strikes or lockout; acts of public enemies; insurrections; riots; epidemics; lightning; earthquakes; fire; storms; flood; washouts; droughts; arrests; restraint of government and people; civil disturbances; and explosions.

Provider shall, however, remedy with all reasonable dispatch any such cause to the extent within its reasonable control, which prevents Provider from carrying out its obligations contained herein.

27. COORDINATION

Provider will advise HCJFS of any significant fund raising campaigns contemplated by the Provider within Cincinnati and Hamilton County for supplementary operating or capital funds during the term of this Contract so that the same may be coordinated with any planned promotion of public or private funds by HCJFS for the benefit of this and other agencies within the community.

28. LEGAL ACTION

Any legal action brought pursuant to the Contract will be filed in the courts located in Hamilton County, Ohio and Ohio law will apply.

29. PUBLIC RECORDS

This Contract is a matter of public record under the laws of the State of Ohio. Provider agrees to make copies of this Contract promptly available to any requesting party. Upon request made pursuant to Ohio law, HCJFS shall make available the Contract and all public records generated as a result of this Contract.

By entering into this Contract, Provider acknowledges and understands that records maintained by Provider pursuant to this Contract may be deemed public records and subject to disclosure under Ohio law. Provider shall comply with the Ohio public records law.

30. DRUG-FREE WORKPLACE

Provider certifies and affirms that Provider will comply with all applicable state and federal laws regarding a drug-free workplace as outlined in 45 CFR Part 76, Subpart F (or other applicable federal or state law, rule or regulation). Provider will make a good faith effort to ensure that all employees performing duties or responsibilities under this Contract, while working on state, county or private property, will not purchase, transfer, use or possess illegal drugs or alcohol, or abuse prescription drugs in any way.

31. PUBLIC ASSISTANCE WORK PROGRAM PARTICIPANTS

Pursuant to Chapter 5107 of the Ohio Revised Code and Prevention, Retention, and Contingency Program established under Chapter 5108 of the Revised Code, Provider agrees to not discriminate in hiring and promoting against applicants for and participants for the Ohio Works Program. Provider also agrees to include such provision in any such contract, subcontract, grant or procedure with any other party which will be providing services, whether directly or indirectly to Consumers.

32. MEDIA RELATIONS, PUBLIC INFORMATION, AND OUTREACH

Although information about and generated under this Contract may fall within the public domain, Provider will not release information about or related to this Contract to the general public or media verbally, in writing, or by any electronic means without prior approval from HCJFS, unless Provider is required to release requested information by law. HCJFS reserves the right to announce to the general public and media: award of the Contract, Contract terms and conditions, scope of work under the Contract, deliverables and results obtained under the Contract, impact of Contract activities, and assessment of Provider's performance under the Contract. Except where the HCJFS approval has been granted in advance, the Provider will not seek to publicize and will not respond to unsolicited media queries requesting: announcement of Contract award, Contract terms and conditions, Contract scope of work, government-furnished documents HCJFS may provide to Provider to fulfill the Contract scope of work, deliverables required under the Contract, results obtained under the Contract, and impact of Contract activities.

If contacted by the media about this Contract, Provider agrees to notify HCJFS in lieu of responding immediately to media queries. Nothing in this section is meant to restrict Provider from using contract information and results to market to specific clients or prospects.

33. AMENDMENTS

This writing constitutes the entire agreement between Provider and HCJFS with respect to all matters herein. This Contract may be amended only in writing and signed by Provider and HCJFS; however, it is agreed by Provider and HCJFS that any amendments to laws or regulations cited herein will result in the correlative modification of this Contract, without the necessity for executing written amendments. The impact of any applicable law, statute, or regulation not cited herein and enacted after the date of execution of this Contract will be incorporated into this Contract by written amendment signed by Provider and HCJFS and

effective as of the date of enactment of the law, statute, or regulation. Any other written amendment to this Contract is prospective in nature.

34. INSURANCE

Provider agrees to procure and maintain for the duration of this Contract the following insurance: insurance against claims for injuries to persons or damages to property which may arise from or in connection with Provider's products or services as described in this Contract; auto liability; professional liability (errors and omissions) and umbrella/excess insurance. Further, Provider agrees to procure and maintain for the duration of this Contract Workers' Compensation Insurance. The cost of all insurance shall be borne by Provider. Insurance shall be purchased from a company licensed to provide insurance in Ohio. Insurance is to be placed with an insurer provided an A.M. Best rating of no less than A;VII. Provider shall purchase the following coverage and minimum limits;

- A. Commercial general liability insurance policy with coverage contained in the most current Insurance Services Office Occurrence Form CG 00 01 or equivalent with limits of at least One Million Dollars (\$1,000,000.00) per occurrence and One Million Dollars (\$1,000,000.00) in the aggregate and at least One Hundred Thousand Dollars (\$100,000.00) coverage in legal liability fire damage. Coverage will include:
1. Additional insured endorsement;
 2. Product liability;
 3. Blanket contractual liability;
 4. Broad form property damage;
 5. Severability of interests;
 6. Personal injury; and
 7. Joint venture as named insured (if applicable).

Endorsements for physical abuse claims and for sexual molestation claims must be a minimum of Three Hundred Thousand Dollars (\$300,000.00) per occurrence and Three Hundred Thousand Dollars (\$300,000.00) in the aggregate.

Business auto liability insurance of at least One Million Dollars (\$1,000,000.00), combined single limit, on all owned, non-owned, leased and hired automobiles. If the Contract contemplates the transportation of the users of Hamilton County services (such as but not limited to HCJFS clients) "Clients" and the Provider provides this service through the use of its employees' privately owned vehicles "POV", then the Provider's Business Auto Liability insurance shall sit excess to the employees POV insurance and provide coverage above its employee's POV coverage. The Provider agrees the business auto liability policy will be endorsed to provide this coverage.

- B. Professional liability (errors and omission) insurance of at least One Million Dollars (\$1,000,000.00) per claim and in the aggregate.
- C. Umbrella and excess liability insurance policy with limits of at least One Million Dollars (\$1,000,000.00) per occurrence and in the aggregate, above the commercial general, professional liability and business auto primary policies and containing the following coverage:

1. Additional insured endorsement;
 2. Pay on behalf of wording;
 3. Concurrency of effective dates with primary;
 4. Blanket contractual liability;
 5. Punitive damages coverage (where not prohibited by law);
 6. Aggregates: apply where applicable in primary;
 7. Care, custody and control – follow form primary; and
 8. Drop down feature.
- D. Workers' Compensation insurance at the statutory limits required by Ohio Revised Code.
- E. The Provider further agrees with the following provisions:
1. The insurance endorsement form and the certificate of insurance form will be sent to: Risk Manager, Hamilton County, Room 607, 138 East Court Street, Cincinnati, Ohio 45202; and to HCJFS, Contract Services, 3rd floor, 222 East Central Parkway, Cincinnati, Ohio 45202. The forms must state the following: "Board of County Commissioners of Hamilton, County, Ohio, Hamilton County Department of Job & Family Services, and their respective officials, employees, agents, and volunteers are endorsed as additional insured as required by Contract on the commercial general, business auto and umbrella/excess liability policies."
 2. Each policy required by this clause shall be endorsed to state that coverage shall not be canceled or materially changed except after thirty (30) days' prior written notice given to: Risk Manager, Hamilton County, Room 607, 138 East Court Street, Cincinnati, Ohio 45202; and to HCJFS, Contract Services, 3rd floor, 222 East Central Parkway, Cincinnati, Ohio 45202.
 3. Provider shall furnish the Hamilton County Risk Manager and HCJFS with original certificates and amendatory endorsements effecting coverage required by this clause. All certificates and endorsements are to be received by the above described entities before the Contract commences. Each entity reserves the right at any time to require complete, certified copies of all required insurance policies, including endorsements affecting the coverage required by these specifications.
 4. Provider shall declare any self-insured retention to Hamilton County pertaining to liability insurance. Provider shall provide a financial guarantee satisfactory to Hamilton County and HCJFS guaranteeing payment of losses and related investigations, claims administration and defense expenses for any self-insured retention.
 5. If Provider provides insurance coverage under a "claims-made" basis, Provider shall provide evidence of either of the following for each type of insurance which is provided on a claims-made basis: unlimited extended reporting period coverage which allows for an unlimited period of time to report claims from incidents that occurred after the policy's retroactive date and before the end of the policy period (tail coverage), or; continuous coverage from the original retroactive date of coverage. The original retroactive date of coverage means original effective date of

the first claim-made policy issued for a similar coverage while Provider was under Contract with Hamilton County.

6. Provider will require all insurance policies in any way related to the work and secured and maintained by Provider to include endorsements stating each underwriter will waive all rights of recovery, under subrogation or otherwise, against Hamilton County and HCJFS. Provider will require of subcontractors, by appropriate written agreements, similar waivers each in favor of all parties enumerated in this section.
7. Provider, Hamilton County, and HCJFS agree to fully cooperate, participate, and comply with all reasonable requirements and recommendations of the insurers and insurance brokers issuing or arranging for issuance of the policies required here, in all areas of safety, insurance program administration, claim reporting and investigating and audit procedures.
8. Provider's insurance coverage shall be primary insurance with respect to the Hamilton County, and HCJFS, and their respective officials, employees, agents, and volunteers. Any insurance maintained by Hamilton County and HCJFS, shall be in excess of Provider's insurance and shall not contribute to it.
9. Maintenance of the proper insurance for the duration of the Contract is a material element of the Contract. Material changes in the required coverage or cancellation of the coverage shall constitute a material breach of the Contract.
10. If any of the work or services contemplated by this Contract is subcontracted, Provider will ensure that any and all subcontractors comply with all insurance requirements contained herein.

35. INDEMNIFICATION & HOLD HARMLESS

To the fullest extent permitted by and in compliance with applicable law, Provider agrees to protect, defend, indemnify and hold harmless the Board of County Commissioners, Hamilton County, Ohio, HCJFS and their respective members, officials, employees, agents, and volunteers (the Indemnified Parties) from and against all damages, liability, losses, claims, suits, actions, administrative proceedings, regulatory proceedings/hearings, judgments and expenses, subrogation's (of any party involved in the subject of this Contract), attorneys' fees, court costs, defense costs or other injury or damage (collectively "Damages"), whether actual, alleged or threatened, resulting from injury or damages of any kind whatsoever to any business, entity or person (including death), or damage to property (including destruction, loss of, loss of use of resulting without injury damage or destruction) of whatsoever nature, arising out of or incident to in any way, performance of the terms of this Contract including, without limitation, by Provider, its subcontractor(s), Provider's or its subcontractor's (s') employees and agents, assigns, and those designated by Provider to perform the work or services encompassed by the Contract. Provider agrees to pay all damages, costs and expenses of the Indemnified Parties in defending any action arising out of the aforementioned acts or omissions.

36. SCREENING AND SELECTION

A. Criminal Record Check:

Provider warrants and represents it will comply with ORC 2151.86 and will annually complete criminal record checks on all individuals assigned to work with, volunteer with or transport Consumers. Provider will obtain a statewide conviction record check through the Bureau of Criminal Identification and Investigation ("BCII") and obtain a criminal record transcript from the Cincinnati Police Department, the Hamilton County Sheriff's Office and any law enforcement or police department necessary to conduct a complete criminal record check of each individual providing services. Provider shall insure that every above described individual will sign a release of information, attached hereto and incorporated herein as Exhibit IV, to allow inspection and audit of the above criminal records transcripts or reports by HCJFS or a private vendor hired by HCJFS to conduct compliance reviews on their behalf.

Provider shall not assign any individual to work with or transport Consumers until a BCII report and a criminal record transcript has been obtained. A BCII report must be dated within six (6) months of the date an employee or volunteer is hired.

Provider shall not utilize any individual who has been convicted or plead guilty to any violations contained in ORC 5153.111(B)(1), ORC 2919.24, and OAC Chapters 5101:2-5, 5101:2-7, 5101:2-48.

B. Bureau of Motor Vehicle Transcript

Any individual transporting Consumers shall possess the following qualifications:

1. an annual satisfactory Bureau of Motor Vehicle ("BMV") transcript from the State of Ohio;
2. an annual satisfactory BMV transcript from the individual's state of residence; and
3. a current and valid driver's license.

In addition to the requirements set forth above, Provider will not permit any individual to transport a Consumer if:

1. the individual has a condition which would affect safe operation of a motor vehicle;
2. the individual has five (5) or more points on his/her driver's license; or
3. the individual has been convicted of driving while under the influence of alcohol or drugs.

C. Verification of Job or Volunteer Application

Provider will check and document each applicant's personal and employment references, general work history, relevant experience, and training information. Provider further agrees it will not employ an individual to provide services in relation to this Contract unless it has received satisfactory employment references, work history, relevant experience, and training information.

37. LOBBYING RESTRICTIONS

- A. Provider affirms that no federal funds paid to Provider by HCJFS through this Contract or any other agreement has been or will be used to influence, attempt to influence, or otherwise lobby Congress or any federal agency in connection with any contract, grant, cooperative agreement, or loan. Provider further certifies compliance with all lobbying restrictions, including Title 13, Section 1352 of the United States Code (USC), 2 USC 1601, 29 CFR 93, and any other federal law or rule pertaining to lobbying.
- B. If this Contract exceeds One Hundred Thousand Dollars (\$100,000.00), Provider affirms that it has executed and filed Standard Form-LLL, "Disclosure Form to Report Lobbying, in accordance with its instructions, if required by federal regulations.
- C. Provider agrees to include the language of this certification in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
- D. Provider certifies compliance with the Ohio executive agency lobbying restrictions contained in ORC 121.60 to 121.69.

Provider further warrants that Provider shall disclose any lobbying with any non-Federal funds that takes place in connection with obtaining any Federal award. Upon receipt of notice, HCJFS will issue a termination notice in accordance with the terms of this Contract. If Provider fails to notify HCJFS, HCJFS reserves the right to immediately suspend payment and terminate the Contract.

38. MAINTENANCE OF SERVICE

Provider certifies the services being reimbursed are not available from the Provider on a non-reimbursable basis.

Provider further certifies that Federal funds will not be used to supplant non-federal funds for the same service.

39. DISPUTE RESOLUTION

Both HCJFS and Provider agree to make every reasonable effort to resolve any dispute. Any dispute may be brought forward by either party to the other in the form of a written Notice of Dispute. Such notice shall state the facts surrounding the claim in sufficient detail to identify the claim, together with its character and scope. Such notice shall also include any proof to substantiate any dispute and a means by which to resolve the dispute in the best interest of both parties. Such Notice of Dispute shall be forwarded in writing to the following representatives of the parties as follows.

A maximum of twenty (20) working days is allowed at each of Step 1 and Step 2 (unless extended in writing by both parties) before the dispute resolution procedure is automatically elevated to the next higher step.

Step 1

Representative for HCJFS: HCJFS's Project Manager

Representative for Provider: Provider's Project Manager.

If an agreement cannot be reached during Step 1, the grieving party may elevate the dispute to Step 2.

Step 2

Representative for HCJFS: Unit Supervisor for Contract Services)??).

Representative for Provider:

If an agreement cannot be reached during Step 2, the grieving party may elevate the dispute to Step 3.

Step 3

Representative for HCJFS: Section Chief for Contract Services (??)

Representative for Provider:

All representatives shall communicate with each other to readily resolve items in dispute. Nothing herein shall preclude either party from pursuing its remedies available at law or in equity.

40. GRIEVANCE PROCESS

Provider will notify HCJFS, in writing, on a monthly basis of all grievances initiated by Consumers that involve the services provided through this Contract. Provider shall submit any and all facts pertaining to the grievance and the resolution of the grievance. The monthly report will be submitted to the assigned HCJFS Contract Manager.

Provider will post the grievance policy and procedure in a public or common area at each contracted site so all Consumers are aware of the process.

41. PROPERTY OF HAMILTON COUNTY

Any Deliverable provided or produced by Provider under this Contract or with funds hereunder, including any documents, data, photographs and negatives, electronic reports/records, or other media, are the property of HCJFS which has an unrestricted right to reproduce, distribute, modify, maintain, and use the Deliverables. Provider will not obtain copyright, patent, or other proprietary protection for the Deliverables. Provider will not include in any Deliverable any copyrighted matter, unless the copyright owner gives prior written approval for HCJFS and Provider to use such copyrighted matter in the manner provided herein. Provider agrees that all Deliverables will be made freely available to the general public unless HCJFS determines that, pursuant to state or federal law; such materials are confidential or otherwise exempted from disclosure.

The Deliverable(s) and any item(s) provided or produced pursuant to this Contract (collectively “Deliverables”) shall be considered “works made for hire” within the meaning of copyright laws of the United States of America and the State of Ohio. HCJFS is and shall be deemed the sole author of the Deliverable(s) and sole owner of all rights therein. If any portion of the Deliverable(s) is/are deemed not to be a “work made for hire,” or if there are any rights in the Deliverable(s) not so conveyed to HCJFS, then Provider agrees to and by executing this Agreement hereby does assign to HCJFS all worldwide rights, title, and interest in and to the Deliverables. HCJFS acknowledges that its sole ownership of the Deliverable(s) under this Agreement does not affect Provider’s right to use general concepts, algorithms, programming techniques, methodologies, or technology that have been developed by Provider prior to or as a result of this Contract or that are generally known and available.

42. DEBARMENT AND SUSPENSION

- A. Provider certifies that neither Provider nor any of its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in covered transactions by any Federal department or agency, as set forth in 29 CFR Part 98. Provider also affirms that within three (3) years preceding this agreement neither Provider nor any of its principals:
1. Have been convicted of, or had a civil judgment rendered against them for commission of fraud or other criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; for violation of federal or state antitrust statutes; for commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements; or for receiving stolen property;
 2. Are presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) for the commission of any of the offenses listed in this Section and have not had any public transactions (Federal, State, or local) terminated for cause or default.

- B. Provider will, upon notification by any federal, state, or local government agency, immediately notify HCJFS of any debarment or suspension of the Provider being imposed or contemplated by the federal, state or local government agency. Provider will immediately notify HCJFS if it is currently under debarment or suspension by any federal, state, or local government agency.

43. DEBT CHECK PROVISION

Ohio Revised Code Section 9.24 prohibits public agencies from awarding a contract for goods, services, or construction, paid for in whole or in part from state funds, to a person or entity against who a finding for recovery has been issued by the Ohio Auditor of State, if the finding for recovery is unresolved. By entering into this Contract, Provider warrants that a finding for recovery has not been issued to Provider by the Ohio Auditor of State. Provider further warrants and represents that Provider shall notify HCJFS within one (1) business day should a finding for recovery occur during the Contract term.

44. FAITH BASED ORGANIZATIONS

Provider agrees that it will perform the duties under this Contract in compliance with section 104 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 and in a manner that will ensure that the religious freedom of Consumers is not diminished and that it will not discriminate against any Consumer based on religion, religious belief, or refusal to participate in a religious activity. No funds provided under this Contract will be used to promote the religious character and activities of Provider. If any Consumer objects to the religious character of the organization, Provider will immediately refer the individual back to HCJFS for an alternative Provider.

45. CHILD SUPPORT ENFORCEMENT

Provider agrees to cooperate with HCJFS, ODJFS and any other Child Support Enforcement Agency in ensuring that Provider’s employees meet child support obligations established under state law. Further, by executing this Contract, Provider certifies present and future compliance with any order for the withholding of support that is issued pursuant to sections 3113.21 and 3113.214 of the Ohio Revised Code.

46. HCJFS CONTACT INFORMATION

NAME	PHONE #	DEPARTMENT	RESPONSIBILITY
XXXXXX	946-XXXX	Contract Services	Contract changes, Contract language, Contract budget, audits
XXXXXX	946-XXXX	Fiscal	billing and payment
XXXXXX	946-XXXX	Workforce Development	Scope of service, service eligibility, program outcomes

47. CLEAN AIR AND FEDERAL WATER POLLUTION CONTROL ACT

Provider agrees to comply with all applicable standards, orders or regulations issued pursuant to section 306 of the Clean Air Act (42 U.S.C. 7606), section 508 of the Clean Water Act (33 U.S.C. 1368), Executive Order 11738, and applicable environmental protection agency regulations. Provider understands that all violations shall be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).

48. ENERGY POLICY AND CONSERVATION ACT

Provider agrees to comply with all applicable standards, orders or regulations issued relating to energy efficiency which is contained in the state energy conservation plan issued in compliance with the Energy Policy and Conservation Act (Pub. L. 94-163, 89 Stat. 871).

49. CONTRACT CLOSEOUT

At the discretion of HCJFS, a Contract Closeout may occur within ninety (90) days after the completion of all contractual terms and conditions. The purpose of the Contract Closeout is to verify there are no outstanding claims or disputes and to ensure all required forms; reports and deliverables were submitted to and accepted by HCJFS in accordance with Contract requirements.

51. MATERIAL ASSISTANCE/NONASSISTANCE TO A TERRORIST ORGANIZATION

Provider affirms that Provider its principals, affiliated groups, or persons with a controlling interest in Provider's organization are in compliance with ORC 2909.33 in that none of the aforementioned have provided Material Assistance to a Terrorist Organization.

As part of its submitted Proposal and in accordance with ORC 2909.32(A)(2)(b), Provider completed the Declaration Regarding Material Assistance/Non-Assistance to a Terrorist Organization, attached hereto and incorporated herein as Attachment R to Exhibit II, Provider's Proposal. Any material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List is considered a Material Breach of this Contract and a felony of the fifth degree.

Provider further agrees it will complete a notarized Declaration Regarding Material Assistance/Non-Assistance to a Terrorist Organization prior to the commencement of any renewal term. Provider understands and agrees that payment will be withheld for any Services rendered during such renewal term until this requirement has been met.

52. DECLARATION OF PROPERTY TAX DELINQUENCY

As part of its submitted proposal, Provider completed a notarized Declaration of Property Tax Delinquency form, which states the Provider was not charged with any delinquent personal property taxes on the general tax list of personal property for Hamilton County, Ohio or that the Provider was charged with delinquent personal property taxes on said list, in which case the statement shall set forth the amount of such due and unpaid delinquent taxes as well as any due and unpaid penalties and interest thereon. If the form indicated any delinquent taxes, a copy of

the notarized form has been transmitted to the county treasurer within thirty (30) days of the date it was submitted. A copy of the notarized form shall be attached hereto and incorporated herein by reference as Attachment Q to Exhibit II - Provider's Proposal.

Provider further agrees it will complete a notarized Declaration of Property Tax Delinquency form prior to the commencement of any renewal term. Provider understands and agrees that payment will be withheld for any Services rendered during such renewal term until this requirement has been met.

55. QUALIFICATIONS TO CONDUCT BUSINESS

Provider affirms that it has all of the approvals, licenses, or other qualifications needed to conduct business in Ohio and all are current. If at any time during the Contract period Provider, for any reason, becomes disqualified from conducting business in Ohio, Provider will immediately notify HCJFS in writing and will immediately cease performance of the activities set forth in the Contract.

56. UNFAIR LABOR PRACTICES

Provider affirms that neither Provider nor its principals are on the most recent list established by the Ohio Secretary of State, pursuant to ORC 121.23, which would identify Provider as having more than one (1) unfair labor practice contempt of court finding.

The terms of this Contract are hereby agreed to by both parties, as shown by the signatures of representatives of each.

SIGNATURES

In witness whereof, the parties have hereunto set their hands on this ____ day of _____, 2010.

Provider or Authorized Representative: _____

Title: _____ Date: _____

By: _____
County Administrator
Hamilton County, Ohio

Date: _____

Recommended By:

Moir Weir, Director
Hamilton County Department of Job & Family Services

Date: _____

PREPARED BY _____
CHECKED BY _____
APPROVED BY _____

ATTACHMENT F

HCJFS CONTRACT BUDGET

AGENCY:

CONTRACT # _____

BUDGET PREPARED FOR PERIOD

NAME OF CONTRACT PROGRAM:

_____ **TO** _____

INDICATE NAME OF SERVICE IN APPROPRIATE COLUMN BELOW

EXPENSES BY PROGRAM SERVICES			MGMT INDIRECT	REQUESTED FUNDS	LEVERAGE FUNDS	TOTAL EXPENSE
A. STAFF SALARIES	0.00	0.00	0.00	0.00	0.00	0.00
B. EMPLOYEE PAYROLL TAXES & BENEFITS	0.00	0.00	0.00	0.00	0.00	0.00
C. PROFESSIONAL & CONTRACTED SERVICES	0.00	0.00	0.00	0.00	0.00	0.00
D. CONSUMABLE SUPPLIES	0.00	0.00	0.00	0.00	0.00	0.00
E. OCCUPANCY	0.00	0.00	0.00	0.00	0.00	0.00
F. TRAVEL	0.00	0.00	0.00	0.00	0.00	0.00
G. INSURANCE	0.00	0.00	0.00	0.00	0.00	0.00
H. EQUIPMENT	0.00	0.00	0.00	0.00	0.00	0.00
I. MISCELLANEOUS (Explain)	0.00	0.00	0.00	0.00	0.00	0.00
J. YOUTH PARTICIPANT EXPENSES	0.00	0.00	0.00	0.00	0.00	0.00
K. PROFIT MARGIN	0.00	0.00	0.00	0.00	0.00	0.00
SUB-TOTAL OF EACH COLUMN	0.00	0.00	0.00	0.00	0.00	0.00
ALLOCATION OF MGT/INDIRECT COSTS						0.00
TOTAL PROGRAM EXPENSES	0.00	0.00	0.00	0.00	0.00	0.00

ESTIMATED TOTAL UNITS OF SERVICE

TO BE PROVIDED:
HCDHS

UNIT =
Page 1

TOTAL PROGRAM COST/TOTAL UNITS OF SERVICE=UNIT \$ _____ \$ _____ \$ _____

ATTACHMENT F

HCJFS CONTRACT BUDGET USER GUIDE

SUMMER YOUTH

When contracting with the Hamilton County Department of Job & Family Services (HCJFS), it is required that a budget be completed for each program being proposed. In order to facilitate the process, we request that the attached budget be used. This budget consists of two parts: the User Guide to assist in the completion of the budget, and the budget itself.

This guide is designed to assist the user in completing the budget. In some instances field definitions and other information will be given. If possible, examples will be provided. Definitions and examples will occasionally not be provided. Should you have a question regarding that particular area, contact the HCJFS Contract Services Section.

Page 1 is a summary of expenses. It should be completed after all other budget pages are finalized. The totals from the information supplied on pages 2 through 9 are used to complete this page. Information at the bottom of the page should be completed regarding the total units and the cost of the service. Pages 2 through 9 should be prepared itemizing each line item.

There are three columns without a column header or title. These columns have been purposely left blank in order for each Provider to enter the type of service being proposed. When completing the budget, it will be important to provide a header for each column being used. These columns are to be used to record the direct costs for the contracted program(s). If the program offers supportive services such as transportation, those costs should be broken out and entered in one of the other Contract Program columns. Costs for all other direct services of the agency should be combined and entered in the column titled "Other Direct Services".

Management, administrative, and indirect costs should be entered in the column entitled "MGMT/Indirect". Indirect costs are those costs incurred for a common or joint purpose benefiting more than one service area or cost center. Allowable indirect costs for the indirect cost column include, but are not limited to, the accounting and budgeting functions, disbursing services, personnel & procurement functions, and other agency administration.

INSTRUCTIONS FOR SUMMARY PAGE – PAGE 1

Page 1 of the budget is a summary of expenses. It should be completed after all other budget pages are finalized. Information at the bottom of the page should be completed regarding the total units and the cost of the service.

AGENCY NAME: The legal, and if applicable, incorporated name of the Provider agency.

NAME OF CONTRACT PROGRAM: The name of the program being purchased.

BUDGET PERIOD: The specific time period for the budget completed.

ACTUAL BUDGET AREA: A total of all the figures carried over from the previous pages. This gives an overview of the budget for which the proposal is being submitted, as well as, an overall picture of the agency costs. The total figures given for each of these areas should match the same figures indicated in each of the appropriate sections.

For a more detailed explanation of each of the areas, use the instructions in each specific section. Once all totals have been carried to this section be sure to double check the figures to make sure all columns and rows balance.

EXPENSES BY SERVICES COLUMN: Each column header from pages 2 through 9 are listed in this column so that the totals for each of these items can be listed in each of the specific columns.

EXPENSES BY PROGRAM SERVICES: The horizontal row is used to define the column header. “MGMT Indirect, Other Direct Ser and TOTAL Expense” fields are already defined. The first three column headers have been purposely left blank in order to indicate the name of the program being purchased.

If a proposal includes more than one service within the program, then an additional column would be completed for the additional service. For example, the proposal being submitted is for employment development. The services included in this proposal are skill training, and employment retention. In this instance, one column would be completed for skill training and the other for employment retention.

If for example, a proposal is being submitted for an offender program, the header for that column would be titled “Offender Program”. In this instance, the other two column headers would be left blank.

If a proposal is being submitted for workforce development and transportation and case management are two components of the program, then the first column header would indicate “Transportation” and the second column would indicate “Case Management”. In this instance, the third column would be left blank.

MGMT INDIRECT: The totals entered per line item for each item on the other pages.

CONTRACT PROGRAM: The totals entered per line for each item on the other pages.

OTHER DIRECT SERVICES: The figures entered here should represent the total calculations based on the figures and percentages entered for each item on the other pages.

TOTAL EXPENSES: The totals for all figures entered on this page. They are also the totals of all of the three previous fields (MGMT Indirect, Contract Program and Other Direct Services) as well as the programs being purchased.

TOTAL UNITS: The number of units that the program being purchased is planning to provide. Depending on the contract, a unit could be considered an hour, a session, a trip, etc.

UNIT COST: The total expenses divided by the total units.

UNIT =: Indicate whether the unit is an hour, trip, session, etc.

INSTRUCTIONS FOR BUDGET SECTION A - PAGE 2; STAFF POSITIONS
--

This section is used to list all positions that are included in the contracted program. This page will also capture the financial information needed on the rest of the agency. If a proposal is being submitted for one service being offered within a program, one column would be completed for the contracted program, one for the management indirect services and one for other direct services. Should a proposal being submitted include more than one service within the program, an additional column would be completed for the additional service. For example, the proposal being submitted is for employment development. The services included in this proposal are skill training, and employment retention. In this instance one column would be completed for skill training and another for employment retention.

SALARIES: List all position titles of staff who work for the Agency. If Provider agency is extremely large, Provider may list salary amounts for staff in other direct service programs by program total or by one total for all other programs. However, in order to complete the budget in this manner, Provider must obtain permission from a Contract Services Supervisor or Section Chief. All staff who work in any capacity in the program or programs to be contracted, plus all management and administrative staff, must be listed separately with the specific amounts paid to each. In the second column, indicate the number of staff who have the same job title, i.e. teachers, and who earn the same annual wage. Indicate the number of staff and the annual cost - this is the amount paid annually to each of the teachers. If some teachers work more or less hours, and/or earn more, then a second, separate listing should be made. If the program has quite a number of staff then Provider may want to copy the Salaries page, to be able to list all the variations. Total all Salaries at the bottom of each column. Make sure this page "balances" - each column adds across and down, to the sum listed in the total sections.

POSITION TITLE: Indicate the titles of the individuals **presently** working in the program being contracted. If the Provider has an individual that has a percentage of time dedicated to the contracted program & another percentage dedicated to other areas, list this individual separately as well.

For EXAMPLE: The agency has three social workers. In this instance, two of those employees are dedicated full time to the program being contracted however, the other only spends 60% of their time on this project and 40% of their time on another project. Given this example, then all three social workers would be listed and the actual weekly number of hours worked in the program area would be entered in the HRS Week field..

The “other” field represents all staff employed by the agency that **do not** work in the contracted program.

For EXAMPLE: There is the Director and three social workers for the contracted program, then another four social workers that report to the same director but work in another program area. In this instance, the Director and the three social workers are listed as program personnel and the four social workers are then listed as “Others” because they work for the same agency but do not have anything to do with the program being contracted.

STAFF: This field must indicate the number of staff that hold the title listed in the “Position Title” field. However, in the “other: field, this number will be the total number of individuals employed by Provider company that do not have anything to do with the contracted program. Remember, if an employee works in the contracted program for any percentage of time then that person would be counted separately.

HRS WEEK: Indicate the number of hours worked each week in the contracted program area, for each employee.

ANNUAL COST: This is the annual salary for each individual listed in the contracted program area. The first block will contain the total of all the salaries for those individuals counted as “Others”.

For example: There is the Director and three social workers for the contracted program, then another four social workers that report to the same director but work in another program area. In this instance, the Director and the three social workers are listed as program personnel and the four social workers are then listed as “Others” because they work for the same agency but do not have anything to do with the program being contracted.

CONTRACT PROGRAM: Enter the salary for the amount of time spent in the contracted program. There are three columns to indicate amounts for each program in which a proposal is being written. For vacant positions that will be filled during the contract year, prorate the salary to reflect the anticipated start date.

MGT INDIRECT: This field should only be completed if the position title of an individual is in a management position. Duties performed that would be included in the “Percent to Mgt. Indirect” would include evaluations, writing checks, dealing with personnel issues, building management or other non-program issues.

OTHER DIRECT SERVICES: Enter the total salaries for each of the staff employed by the agency that is not related to the program being contracted.

TOTAL EXPENSES: This is the total of the Contracted Programs, Management Indirect, and any Other Direct Services.

**INSTRUCTIONS FOR BUDGET SECTION B - PAGE 3;
PAYROLL RELATED EXPENSES**

PAYROLL TAXES: Enter the percentage used in calculating the amount withheld in each of the categories listed. The amounts figured using this percentage should be listed on the appropriate line under the “Expenses by Program Services” column.

UNEMPLOYMENT %: When computing unemployment taxes, the percentage of time the staff devotes to the contracted program should be used to calculate the amount of unemployment taxes attributed to the contracted program for that staff person up to the first \$9,000.00 per employee wages, per year.

BENEFITS: The amounts charged to each column should be based on the staff and salaries shown in that column on page 2. Enter the totals in the spaces provided. The percentage used to calculate the retirement should be entered on the line indicated. The “OTHER” section should list all other deductions that are taken, listing each one separately.

TOTAL EMPLOYEE BENEFITS & PAYROLL TAXES: Indicate the total for the amounts indicated above.

**INSTRUCTIONS FOR BUDGET SECTION C - PAGE 3; PROFESSIONAL FEES &
CONTRACTED SERVICES**

PROFESSIONAL FEES & CONTRACTED SERVICES: Contracted services are items such as janitorial, pest control, security, etc. Professional fees are when the Provider pays for auditors, accountants, payroll processors, program consultants, etc. These costs are used to pay for services from a company or individual who is not an employee of the agency, but who performs a service for which he/she is paid. Show the amounts related to each column heading.

Each service that has been purchased (contract or professional) should be listed in this field, individually. For example, if the Provider has a contract with Terminix to provide bug control then that would be one item. The accountant would be another item.

TOTAL PROFESSIONAL FEES AND CONTRACTED SERVICES: Indicate the totals for the amounts entered above.

INSTRUCTIONS FOR SECTION D - PAGE 4; CONSUMABLE SUPPLIES

CONSUMABLE SUPPLIES: Enter amounts for items used or consumed by the respective programs per the column heading. Generally supplies are items such as stationary, paper, pens, file folders, and envelopes. Other types of supplies are items such as cleaning supplies, toilet paper, mops, brooms, paper towels and floor cleaner. Program and other supplies would also be included in this section such as printed pamphlets, text books and/or computer software. These items must be used or consumed within one year or less. List each item under "OTHER" separately and be specific.

INSTRUCTIONS FOR SECTION E - PAGE 4; OCCUPANCY COSTS

OCCUPANCY COSTS: Enter amounts in the proper column based on a proration of space used by the programs under the column headings. It may be necessary to actually measure the space used by the various programs to achieve a proper proration of these costs. Some Provider's choose to put building and other occupancy costs in their Management and Indirect Costs column, and allocate them along with other "shared" types of costs. Telephone costs should be allocated or prorated based on actual usage, that is the number of phones used by Contract Program, and amount of long distance calls, rather than combined with other occupancy costs.

The occupancy cost includes a usage allowance that is similar to depreciation when the building is owned. In order to calculate the cost, the historical cost of the building must be used. The Provider must calculate the percentage that is to be used by the contracted program. Once both figures are obtained, the cost of the building is multiplied by the percentage of space used to determine the dollar amount to be charged to the program. For example, the actual cost of the building was \$150,000.00. The building is 3 stories and each story is 1000 square feet. The third floor is the management, the second floor is another program and the first floor is the contracted program. In this case, the first floor or 1000 square feet would be charged to the program or 33%. Therefore, \$150,000.00 divided by the 37.5 year life (life span per the IRS) of the building times 33% (program utilization) = \$1,320.00 per year. This amount can be charged to the program.

RENTAL @ PER SQ. FT.: Indicate the unit amount per square foot. For example, the rent is \$1000.00 per month for 100 square feet, however the unit amount is \$10.00. Indicate the total dollar amount in the block for the budget period. For example, the rent is \$1000.00 per month. The contract is for 10 months. The total dollar amount entered should be \$10,000.00.

HEAT & ELECTRICITY: If taking a straight line percentage of the total electric for the agency, identify the percentage used on the line indicated. If this is included in the rent, write the word "included" on this line.

WATER: If taking a straight line percentage of the total water for the agency, identify the percentage used on the line indicated. If this is included in the rent, write the word "included" on this line.

TELEPHONE: If taking a straight line percentage of the total phone cost for the agency, identify the percentage used on the line indicated.

OTHER: List all other deductions for occupancy costs separately and be specific.

INSTRUCTIONS FOR SECTION F - PAGE 5; TRAVEL COSTS

TRAVEL COSTS: The costs entered into each column should be based on a review of actual travel costs incurred by the respective programs. A study of past years records should be completed before this section of the budget is prepared. Enter the figure used to calculate the reimbursement rate on the line provided.

TOTAL TRAVEL COSTS: Enter the amount for each column on this line. Be sure the totals balance for all columns.

INSTRUCTIONS FOR SECTION G - PAGE 5; INSURANCE COSTS

INSURANCE: Some agencies allocate all insurance costs to the Management and Indirect column of their budgets, and then allocate them along with all the other shared type of costs. If one program operated by the agency has disproportionate insurance costs (either higher or lower) than the other agency programs, then a more appropriate method would be to show that program's insurance costs in the column for that program.

INSTRUCTIONS FOR SECTION H - PAGES 6 & 7; EQUIPMENT COSTS

EQUIPMENT COSTS: There are some directions listed on the budget pages for completing the four areas of this section. Any individual equipment item costing less than \$5,000 should be included as equipment cost. The exception to the "individual equipment cost" is for computer components which are purchased as a group, i.e. hard drive, monitor, keyboard, printer, etc. While these components may individually cost less than \$5,000, the entire group is to be depreciated if the purchase price is \$5,000 or greater. For equipment items used for more than one program,

show the percentage of time the contract program expects to use them and compute the amount based on that percentage. The large equipment items used by the Management and Indirect activities of the agency should also be listed, with the percentage used by both programs, i.e. the Contract Program and MGT/Indirect, computed.

INSTRUCTIONS FOR SECTION I - PAGE 8; MISCELLANEOUS COSTS

MISCELLANEOUS COSTS: Enter any expense items, and the amount which Provider expects to spend for them, that Provider has not entered elsewhere in this document. Examples of miscellaneous costs are printing, advertising, and postage.

TOTAL MISCELLANEOUS COSTS: Enter the total of all miscellaneous costs in this section in the appropriate columns.

YOUTH PARTICIPANT EXPENSES: Enter any expenses that Provider expects to spend directly on the youth in the program, that Provider has not entered elsewhere in this document. Examples of youth participant costs are wages, stipends, transportation, etc.

TOTAL YOUTH PARTICIPANT EXPENSES: Enter the total of all youth participant expense costs in this section in the appropriate columns.

PROFIT MARGIN: For profit entities only - Enter the amount of profit being charged to the contract program.

TOTAL OF ALL EXPENSES: The total of all expenses should be calculated from the sub-totals of sections D through I.

EXPLANATION: Be sure to pay special attention to this section. It is important to note the rationale or basis for the figures used in the proration of MGT/INDIRECT costs. Specific instructions have been included on the budget to be followed.

<p style="text-align: center;">INSTRUCTIONS FOR SECTION G - PAGE 9; INSTRUCTIONS FOR REVENUES BY PROGRAM SERVICES SECTION</p>
--

Revenues of the Agency should also be completed for the same time period for which the budget expenses are detailed. Please use the "Explanation" section and attach extra pages if needed. Be specific and list each funding separately. Government contracts, including the revenues expected to be received from the contract with HCJFS, should be listed separately (i.e., Hamilton County \$nnn,nnn.nn, Butler County \$nnn,nnn.nn). Donations from individual benefactors need not be listed separately unless they represent a significant proportion or amount of donated funds. Fees from clients do not mean fees paid by third parties (insurance, Medicaid, contracts), and should only represent monies gained directly from clients.

FINAL REVIEW

1. Before submitting the budget, make a final check that each column of each page is correctly added, and that all figures are legible.
2. Review the Revenue page and make sure all revenue sources are listed. The total revenues shown MUST equal or exceed the total expenses shown in pages 1-8.
3. Please review Equipment section to make sure that all equipment purchases have been listed in proper section.

ATTACHMENT G
Declaration of Property Tax Delinquency
(ORC 5719.042)

I, _____, hereby affirm that the Proposing Organization herein, _____, is ____ / is not ____ (**check one**) charged at the time of submitting this proposal with any delinquent property taxes on the general tax list of personal property of the County of Hamilton.

If the Proposing Organization is delinquent in the payment of property tax, the amount of such due and unpaid delinquent tax and any due and unpaid interest is \$_____.

State of Ohio
County of Hamilton

Before me, a notary public in and for said County, personally appeared _____, authorized signatory for the Proposing Organization, who acknowledges that he/she has read the foregoing and that the information provided therein is true to the best of his/her knowledge and belief.

IN TESTIMONY WHEREOF, I have affixed my hand and seal of my office at _____, Ohio this ____ day of _____ 20____.

Notary Public

ATTACHMENT H

Ohio Department of Public Safety

Division of Homeland Security

<http://www.homelandsecurity.ohio.gov>

GOVERNMENT BUSINESS AND FUNDING CONTRACTS

In accordance with section 2909.33 of the Ohio Revised Code

DECLARATION REGARDING MATERIAL ASSISTANCE/NONASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division website for a reference copy of the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

LAST NAME		FIRST NAME		MIDDLE INITIAL
HOME ADDRESS				
CITY	STATE	ZIP	COUNTY	
HOME PHONE		WORK PHONE		

COMPLETE THIS SECTION ONLY IF YOU ARE A COMPANY, BUSINESS OR ORGANIZATION

BUSINESS/ORGANIZATION NAME				
BUSINESS ADDRESS				
CITY	STATE	ZIP	COUNTY	
PHONE NUMBER				

ATTACHMENT H

DECLARATION

In accordance with division (A)(2)(b) of section 2909.32 of the Ohio Revised Code

For each question, indicate either "yes" or "no" in the space provided. Responses must be truthful to the best of your knowledge.

1. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List?

YES NO

2. Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List?

YES NO

3. Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List?

YES NO

4. Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List?

YES NO

5. Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List?

YES NO

6. Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism?

YES NO

In the event of a denial of a government contract or government funding due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division website.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization. If I am signing this on behalf of a company, business or organization, I hereby acknowledge that I have the authority to make this certification on behalf of the company, business or organization referenced on page 1 of this declaration.

X

Signature

Date

REGISTRATION FORM

PLEASE READ AND ACKNOWLEDGE RECEIPT OF THIS DOCUMENT

RFP# MB0210R: For 2010 TANF SUMMER YOUTH EMPLOYMENT PROGRAM
All inquiries regarding this RFP are to be in writing and are to be mailed or faxed to:

**Maggie Barnett, Contract Services
Hamilton County Job and Family Services
222 E. Central Parkway Contract Services, 3rd Floor
Cincinnati, OH 45202
Fax#: (513) 946-2384**

The Hamilton County Job and Family Services **will not** entertain any oral questions regarding this **RFP**. Other than specified above, no bidder may contact any county official, employee, project team member or evaluation team member. Providers are not to schedule appointments or have contact with any of the individuals connected to or having decision-making authority regarding the award of this **RFP**. **Inappropriate contact may result in rejecting of the Provider's Proposal, including attempts to influence the RFP process, evaluation process or the award process by Providers who have submitted bids or by others on their behalf.**

The only appropriate contact is with the contact person listed above.
Have you been banned from doing business with the State of Ohio? _____.

Please fax this completed page to HCJFS Contracting Department at (513) 946- 2384.

By faxing this completed page to the HCJFS Contracting Department you will be registering your company's interest in this RFP and all ensuing addenda. Your signature is an acknowledgement that you have read and understand the information contained on this page.

DATE:	
COMPANY NAME:	
ADDRESS:	
REPRESENTATIVE'S NAME:	
TELEPHONE NUMBER:	
FACSIMILE NUMBER:	
EMAIL ADDRESS:	
NUMBER OF PEOPLE AUTHORIZED TO NEGOTIATE CONTRACT:	
SIGNATURE:	

Registration helps insure that Providers will receive any addenda to or correspondence regarding this RFP in a timely manner. The Hamilton County Department of Job & Family Services will not be responsible for the timeliness of delivery via the U.S. Mail.



Board of Commissioners:

Greg Hartmann, David Pepper, Todd Portune

County Administrator: Patrick J. Thompson

Director: Moira Weir

General Information: (513) 946-1000

General Information TDD: (513) 946-1295

www.hcjfs.org

222 East Central Parkway • Cincinnati, Ohio 45202
(513) 946- • Fax: (513) 946-2384
Email:HCJFS_RFP_ Communications@jfs.hamilton-co.org

May 4, 2010

Addendum I
RFP MB0210R
2010 TANF Summer Youth Employment Program

To All Potential Bidders:

The following language is being removed from the RFP:

Page 14, Section 2.3 Budget and Cost considerations –

- A. It is anticipated that services to youth will begin no later than July 1, 2010. Selected Provider(s) may begin to deliver administrative services ten business days prior to the start date for services to youth.

Replace with the following language:

- A. HCJFS will only consider proposals that result in youth and employer services beginning on or before June 1, 2010 and ending September 30, 2010. Selected Provider(s) may not begin to incur any costs prior to June 1, 2010. On June 1, 2010 services to youth and employers must be in place. Those services must include wage subsidies from at least one employer to at least one youth as well as coherent plan to competently and aggressively expand that population...

The following language is being removed from the RFP:

Page 30, Section 5.3 Contract Period, Funding & Invoicing –

Direct services to youth are not expected to begin before July 1, 2010.

Replace with the following language:

The contract period is June 1, 2010 through September 30, 2010.



Page 31 - Add the following language before **“See Attachment B...:**

Full and final billings for proposed services must be received by HCJFS Workforce Development staff no later than July 23, 2010. Any bills received after that date will be rejected and will be the sole responsibility of the Provider to pay. These requirements remain in effect regardless of the status of the contract on June 1, 2010. If the contract is not ultimately executed on or before July 23, 2010 any costs incurred in delivery of these proposed services shall be non-reimbursable. **See attachment for cost included and excluded for this contract.**



**2010 TANF Summer Youth Employment Program
RFP MB0210R
Addendum I - Attachment**

Currently pending state policy related to management of these TANF Summer Youth dollars includes the following items.

- (2) The CDJFS may not claim the following activities for reimbursement under this allocation.
- (c) TANF administration, as defined in rule 5101:9-6-08.8 of the Ohio Administrative Code.

Excluded costs:

- (1) Salaries and benefits of staff performing administrative and coordination functions;
- (2) Costs associated with eligibility determination activities;
- (3) Preparation of program plans, budgets, reports and schedules, and the monitoring of program and projects;
- (4) Fraud and abuse units;
- (5) Services related to accounting, litigation, audits, management property, payroll, personnel, procurement, and public relations;
- (6) Costs of goods and services and travel costs required for official business and the administration of the program unless excluded under paragraph (A) of this rule; and, (7) Management information systems not related to the tracking and monitoring of the program.

Included costs:

- Case management;
- Screening and assessments;
- Providing diversion benefits and services;
- Providing program information to clients; and (5) Development of employability plans, work activities, work supports, and post- employment services.
- Payments to employers for wages (at no higher than state minimum wage) and fringe benefits (excluding health benefits);

- Work related items such as uniforms, tools, licenses or certifications;
- Case management activities related to the program; or
- Job coaches and mentors.