

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services

Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions for Human and Social Services</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.
Forms are also posted at OSD Forms: https://www.maso.gov/lists/osd-forms

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.				
CONTRACTOR LEGAL NAME: TOWN OF NAHANT (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive O MMARS Department Code: ELD	ffice of Elder Affairs	
Legal Address: (W-9, W-4): 334 NAHANT RD, MA 01908-1469			Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: MARY MINER	Phone: 781-581-7557	Billing Address (if different):		
E-Mail: mminer@nahant.org	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191898		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 0208220000000000008		
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8E		
_X_ NEW CONTRAC	СТ	CONTRACT AMENDMENT		
PROCUREMENT OR EXCEPTION TYPE: (Check on	AND THE PERSON NAMED IN COLUMN TO TH	Enter Current Contract End Date <u>Prior</u> to Amendment:, 20		
Statewide Contract (OSD or an OSD-designated I	Department)	Enter Amendment Amount: \$ (or "no change")		
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8	), budget)	AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)		
Notice or RFR, and Response or other procureme	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach updated scope and budget) Interim Contract (Attach justification for Interim Contract and updated scope/budget)		
Emergency Contract (Attach justification for emergency Contract Employee (Attach Employment Status Fo	gency, scope, budget)	Contract Employee (Attach any updates to scope or bu		
X Other Procurement Exception (Attach authorizing	ng language, legislation with	Other Procurement Exception (Attach authorizing lang		
specific exemption or earmark, and exception justifi	ication, scope and budget)	scope and budget)	•	
into this Contract and are legally binding: (Check C Services Commonwealth IT Terms and Conditions	ONE option): Commonwealth T	llowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	ions For Human and Social	
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)  Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended).				
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: _X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)				
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.				
		actor certify for this Contract, or Contract Amendment, that Co	ontract obligations:	
1. may be incurred as of the Effective Date (latest s		ations have been incurred <u>prior</u> to the Effective Date.  and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	Data	
X 3. were incurred as of July 1, 20 21, a date	PRIOR to the Effective Date below	w, and the parties agree that payments for any obligations inc	Date.	
are authorized to be made either as settlement pa	ayments or as authorized reimburs	sement payments, and that the details and circumstances of a	Ill obligations under this Contract	
		releases the Commonwealth from further claims related to the		
CONTRACT END DATE: Contract performance shall terminate as of				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.				
AUTHORIZING SIGNATURE FOR THE CONTRACTO		AUTHORIZING SIGNATURE FOR THE COMMONWEAL	-11	
X: (Signature and Date Must Be Captured A	Date: 3/15/22 t Time of Signature)	X:	: 110002. Time of Signature)	
Print Title: New Admit Track. Print Title: Diwlor of Contracts and Miller When.			in Mouther	



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions for Human and Social Services</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment, Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms.">https://www.macomptroller.org/forms.</a>
Forms are also posted at OSD Forms: <a href="https://www.macomptroller.org/forms.">https://www.macomptroller.org/forms.</a>

Forms are also posted at OSD Forms: https://www.mas	s.gov/iists/osd-torms.			
CONTRACTOR LEGAL NAME: TOWN OF NANTUCKET (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 16 BROAD ST, MA 02554-3500		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: LAURA STEWART	Phone: 508-228-4490	Billing Address (if different):		
E-Mail: Istewart@nantucket-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191899		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008		
(Note: The Address ID must be set up for EFT paym	ients.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В	
X NEW CONTRA	СТ	CONTRACT AMENDI	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check or	79000	Enter Current Contract End Date <u>Prior</u> to Amendment:, 20		
Statewide Contract (OSD or an OSD-designated	Department)		Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scop Department Procurement (includes all Grants - 8		AMENDMENT TYPE: (Check one option only. Attach de	Section - Control of the Control of	
Notice or RFR, and Response or other procurement		Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra		
Emergency Contract (Attach justification for emer	rgency, scope, budget)	Contract Employee (Attach any updates to scope or b		
Contract Employee (Attach Employment Status F X_ Other Procurement Exception (Attach authorizi		Other Procurement Exception (Attach authorizing lan		
specific exemption or earmark, and exception justif		scope and budget)		
The Standard Contract Form Instructions and Corinto this Contract and are legally binding: (Check Services Commonwealth IT Terms and Conditions	The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and Conditions _ X _ Commonwealth Terms and Conditions For Human and Social			
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)				
Maximum Obligation Contract. Enter total maxir	num obligation for total duration of	this contract (or <i>new</i> total if Contract is being amended). \$ _		
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 days% PPD. If PPD percentages are left blank, identify reason: X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)				
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.				
		ractor certify for this Contract, or Contract Amendment, that C	Contract obligations:	
		pations have been incurred prior to the Effective Date.	- Data	
		vand no obligations have been incurred prior to the Effective w, and the parties agree that payments for any obligations in		
are authorized to be made either as settlement p	payments or as authorized reimburs	sement payments, and that the details and circumstances of	all obligations under this Contract	
		releases the Commonwealth from further claims related to the		
CONTRACT END DATE: Contract performance shall terminate as of <u>June 30</u> , 20 <u>32</u> , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:				
X: Can Love (Signature and Date Must Be Captured	Date: 7 9 7	X: Date Must Re Centured A	te: 10710C.	
Print Name: (12174200 676	At Time or Signature)	Print Name: Di Willy / / / / / / / / / / / / / / / / / /	MA Meuritus	
X: Classes Date: 3 9 22  (Signature and Date Must Be Captured At Time of Signature)  Print Name: Carracter Gross.  Print Title: To the analysis of the Contractors and New York and New Yor				



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u> and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: https://www.macomptroller.org/forms.

roinis are also posted at OSD roinis. https://www.mas	<u>5,g0v/lists/05u-1011115</u> .			
CONTRACTOR LEGAL NAME: TOWN OF NATICK (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 13 E CENTRAL ST, MA 01760-4629		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: SUSAN RAMSEY	Phone: 508-647-6544	Billing Address (if different):		
E-Mail: sramsey@natickma.org	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191900		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008		
(Note: The Address ID must be set up for EFT paym	ients.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 81	3	
_X_ NEW CONTRA	СТ	CONTRACT AMENDMENT		
PROCUREMENT OR EXCEPTION TYPE: (Check or	ne option only)	Enter Current Contract End Date Prior to Amendment:, 20		
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change")		
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8	e, budget)	AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)		
Notice or RFR, and Response or other procurement		Amendment to Date, Scope or Budget (Attach updated scope and budget)Interim Contract (Attach justification for Interim Contract and updated scope/budget)		
Emergency Contract (Attach justification for emer		Contract Employee (Attach any updates to scope or b		
Contract Employee (Attach Employment Status F _X_ Other Procurement Exception (Attach authorizing)		Other Procurement Exception (Attach authorizing lan		
specific exemption or earmark, and exception justif		scope and budget)		
The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and Conditions _ XCommonwealth Terms and Conditions For Human and Social ServicesCommonwealth   T Terms and ConditionsCommonwealth   T Terms and ConditionsCommonwealth   T Terms and ConditionsCommonwealth   T Terms and ConditionsCommonwealth				
		horized performance accepted in accordance with the terms		
in the state accounting system by sufficient appropriat	ions or other non-appropriated fundations of all rates units calculations	ds, subject to intercept for Commonwealth owed debts under ons, conditions or terms and any changes if rates or terms ar	r <u>815 CMR 9.00</u> .	
		this contract (or <b>new</b> total if Contract is being amended). \$	e being amended.)	
			acalerated payments must identify	
a PPD as follows: Payment issued within 10 days	% PPD; Payment issued within 15	h EFT 45 days from invoice receipt. Contractors requesting a 5 days % PPD; Payment issued within 20 days % PP	D; Payment issued within 30 days	
% PPD. If PPD percentages are left blank, identify	reason: X agree to standard 45	day cycle statutory/legal or Ready Payments (M.G.L. c.	29, § 23A); only initial payment	
(subsequent payments scheduled to support standard	The same of the sa	Prompt Pay Discounts Policy.)  ENT: This 10-year contract will cover grant funds to municip	al Councils on Aging (COA) of the	
		ormance period for year one of this contract is 7/1/2021-6/30		
MGL provide social and support services to older adu	Its, their families and caregivers. The	he annual award is determined by the number of elders per r	nunicipality as per the most recent	
census data, at a current rate of \$12 per person. This	contract will cover any rate adjustr	nent or increase during the 10-year period. Each municipal C prior to the latest signature date are intended to be part of th	is agreement and the amount of	
the prior obligation for year one is funded in the FY22	award. The deadline to submit the	e signed contract is 6/30/22. MA #3.		
		actor certify for this Contract, or Contract Amendment, that C	contract obligations:	
1, may be incurred as of the Effective Date (latest	signature date below) and no oblig	ations have been incurred prior to the Effective Date.	D 1	
		and no obligations have been incurred prior to the Effective w, and the parties agree that payments for any obligations in		
are authorized to be made either as settlement of	avments or as authorized reimburs	w, and the parties agree that payments for any obligations in sement payments, and that the details and circumstances of	all obligations under this Contract	
are attached and incorporated into this Contract.	Acceptance of payments forever	releases the Commonwealth from further claims related to the	ese obligations.	
CONTRACT END DATE: Contract performance shall terminate as of <u>June 30</u> , 20 32 , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:  X:				
X:			Augun Huz	

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

orms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.				
CONTRACTOR LEGAL NAME: TOWN OF NEEDHAM (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs  MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 1471 HIGHLAND AVE, MA 02492-2605		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: LATANYA STEELE	Phone: 781-455-7555	Billing Address (if different):		
E-Mail: Isteele@needhamma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191901		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 020822000000000000008		
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	BB	
X NEW CONTRACT  PROCUREMENT OR EXCEPTION TYPE: (Check one option only) Statewide Contract (OSD or an OSD-designated Department) Collective Purchase (Attach OSD approval, scope, budget) Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation		CONTRACT AMEND Enter Current Contract End Date <u>Prior</u> to Amendment: Enter Amendment Amount: \$ (or "no change AMENDMENT TYPE: (Check one option only. Attach of Amendment to Date, Scope or Budget (Attach update)	, 20  ")  details of amendment changes.)  ted scope and budget)	
Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)		<ul> <li>Interim Contract (Attach justification for Interim Contract and updated scope/budget)</li> <li>Contract Employee (Attach any updates to scope or budget)</li> <li>Other Procurement Exception (Attach authorizing language/justification and updated scope and budget)</li> </ul>		
into this Contract and are legally binding: (Check Services Commonwealth IT Terms and Conditions	The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and Conditions _X _Commonwealth Terms and Conditions For Human and Social Services _Commonwealth Terms and Conditions			
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under <a href="815 CMR 9.00">815 CMR 9.00</a> .  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)  Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended).				
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: _X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the				
Commonwealth authorized through the annual GAA a MGL provide social and support services to older adu	and other sources. The activity perf ults, their families and caregivers. T contract will cover any rate adjustr LAII approved obligations incurred	ormance period for year one of this contract is 7/1/2021-0/3 he annual award is determined by the number of elders per ment or increase during the 10-year period. Each municipal prior to the latest signature date are intended to be part of	r municipality as per the most recent  COA will complete an annual fiscal	
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contr	actor certify for this Contract, or Contract Amendment, that	Contract obligations:	
1 may be incurred as of the Effective Date (latest	signature date below) and no oblig	pations have been incurred <u>prior</u> to the Effective Date.		
X 3. were incurred as of July 1, 20 21, a da	te PRIOR to the Effective Date belo	wand <u>no</u> obligations have been incurred <u>prior</u> to the Effection, and the parties agree that payments for any obligations sement payments, and that the details and circumstances or releases the Commonwealth from further claims related to	incurred prior to the Effective Date of all obligations under this Contract	
CONTRACT END DATE: Contract performance sh amended, provided that the terms of this Contract completing any negotiated terms and warranties, to	all terminate as of <u>June 30</u> , 20 and performance expectations and allow any close out or transition per	0 32 , with no new obligations being incurred after this obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during	date unless the Contract is properly of resolving any claim or dispute, for any lapse between amendments.	
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:				
AUTHORIZING SIGNATORE FOR THE CONTRACTOR:  X:			At Time of Signature)  3 um Weldvuldny	

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.maccomptroller.org/forms.">https://www.maccomptroller.org/forms.</a>

Forms are also posted at OSD Forms: https://www.mass	gov/lists/osd-forms.		
CONTRACTOR LEGAL NAME: TOWN OF NEW ASHFORD		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs	
(and d/b/a):		MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 188 MALLERY RD, MA 01237-9611		Business Mailing Address: 1 Ashburton PI, Boston M	A 02108
Contract Manager: SHERRY YOUNGKIN	Phone: 413-822-3576	Billing Address (if different):	
E-Mail: COA @ New ashford-ma, us	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191903		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001 .	Į.	MMARS Doc ID(s): 02082200000000000000	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В
X NEW CONTRA	СТ	CONTRACT AMENDI	
PROCUREMENT OR EXCEPTION TYPE: (Check on		Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated I	Department)	Enter Amendment Amount: \$ (or "no change")  AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)	
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8	15 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach updated scope and budget)	
Notice or RFR, and Response or other procureme	ent supporting documentation)	Interim Contract (Attach justification for Interim Contract and updated scope/budget)	
Emergency Contract (Attach justification for emer Contract Employee (Attach Employment Status F	orm, scope, budget)	Contract Employee (Attach any updates to scope or b	oudget)
X Other Procurement Exception (Attach authorizi	ng language, legislation with	Other Procurement Exception (Attach authorizing lar scope and budget)	iguage/justification and updated
specific exemption or earmark, and exception justif	tractor Certifications and the fall	owing Commonwealth Terms and Conditions documen	t are incorporated by reference
into this Contract and are legally binding: (Check of ServicesCommonwealth IT Terms and Conditions	ONE option):Commonwealth 16	erms and Conditions X Commonwealth Terms and Condi	IIIONS FOI MUNIAN AND SOCIAL
COMPENSATION: (Check ONE option): The Departm	nent certifies that payments for auth	norized performance accepted in accordance with the terms	of this Contract will be supported
in the state accounting system by sufficient appropriate	ions or other non-appropriated fund details of all rates, units, calculation	ds, subject to intercept for Commonwealth owed debts unde ons, conditions or terms and any changes if rates or terms a	re being amended.)
Maximum Obligation Contract. Enter total maxim	num obligation for total duration of	this contract (or <b>new</b> total if Contract is being amended). \$	
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 days			
% PPD_If PPD percentages are left blank, identify reason: X agree to standard 45 day cyclestatutory/legal or Ready Payments (M.G.L.C. 29, § 25A), only initial payment			
(subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)			
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by			
MCL provide cocial and curport convices to older adu	ilts their families and caregivers. The	ne annual award is determined by the number of elders per	municipality as per the most recent
census data, at a current rate of \$12 per person. This	contract will cover any rate adjustn  All approved obligations incurred t	nent or increase during the 10-year period. Each municipal orior to the latest signature date are intended to be part of the	nis agreement and the amount of
the prior obligation for year one is funded in the FY22	award. The deadline to submit the	e signed contract is 6/30/22. MA #3.	
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contra	actor certify for this Contract, or Contract Amendment, that	Contract obligations:
1. may be incurred as of the Effective Date (latest	signature date below) and <b>no</b> oblig	ations have been incurred <u>prior</u> to the Effective Date. and <u>no</u> obligations have been incurred <u>prior</u> to the Effectiv	ve Date.
V 2 were insurred as of July 1 20 21 a dat	a PRIOR to the Effective Date held	w and the parties agree that payments for any obligations i	ncurred prior to the Effective Date
are authorized to be made either as settlement to	payments or as authorized reimburs	sement payments, and that the details and circumstances o	all obligations under this contract
are attached and incorporated into this Contract	<ul> <li>Acceptance of payments forever in</li> </ul>	releases the Commonwealth from further claims related to t	riese obligations.
CONTRACT END DATE: Contract performance sh	all terminate as of <u>June 30</u> , 20	0.32, with no new obligations being incurred after this obligations shall survive its termination for the purpose of	f resolving any claim or dispute, for
completing any negotiated terms and warranties, to a	allow any close out or transition perf	formance, reporting, invoicing or final payments, or during a	ny lapse between amendments.
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form, the Standard Contract Form, and Contract Form, the Standard Contract Form, the Standard Contract Form, the Standard Contract Form, the Standard Contract Form, and Contract Form, the Standard Contract Form is standard Con			
unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.			nd the Contractor's Response only in
AUTHORIZING SIGNATURE FOR THE CONTRAC	TOR:	AUTHORIZING SIGNATURE FOR THE COMMONWE	EALTH:
X of by ho	_ Date: 3/2/2022	X: //w /	Date: 3/30/22.
(Signature and Date Must Be Captured	At Time of Signature)	(Signature and Date Must Be Captured	At Time of Signature)
Print Name:	KO.	Print Name: Norn Print Mane: Diveller of Court o	Wirdinaltus
Print Title: Select 1386 Pel) (	- Muil	Print Title: Divicity of Countries and	- ILL



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions for Human and Social Services</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms.">https://www.macomptroller.org/forms.</a>
Forms are also posted at OSD Forms: <a href="https://www.mass.gov/lists/osd-forms.">https://www.mass.gov/lists/osd-forms.</a>

Forms are also posted at OSD Forms. https://www.mas	5.g0v/ii5ts/03u-i0i1113.		
CONTRACTOR LEGAL NAME: CITY OF NEW BEDFORD (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 133 WILLIAM ST, MA 02740-6132		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: DEBRA LEE	Phone: 508-991-6251	Billing Address (if different):	
E-Mail: Debra.Lee@newbedford-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192118		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008	
(Note: The Address ID must be set up for EFT payn	nents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 81	3
X NEW CONTRA		CONTRACT AMENDI	
PROCUREMENT OR EXCEPTION TYPE: (Check or		Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scop	e, budget)	AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)	
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurem	15 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach updated scope and budget)	
Emergency Contract (Attach justification for eme	rgency, scope, budget)	Interim Contract (Attach justification for Interim Contra Contract Employee (Attach any updates to scope or b	ct and updated scope/budget)
Contract Employee (Attach Employment Status F	Form, scope, budget)	Contract Employee (Attach any updates to scope of b     Other Procurement Exception (Attach authorizing lan	guage/justification and updated
X Other Procurement Exception (Attach authoriz specific exemption or earmark, and exception justi	ing language, legislation with fication, scope and budget)	scope and budget)	gaago/jaoanoado/rana apaatea
The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and ConditionsXCommonwealth Terms and Conditions For Human and Social Services Commonwealth IT Terms and Conditions			
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X. Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)			
		this contract (or <i>new</i> total if Contract is being amended). \$ _	
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 day% PPD. If PPD percentages are left blank, identify reason: X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial paymer (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recencensus data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of			
the prior obligation for year one is funded in the FY22  ANTICIPATED START DATE: (Complete ONE opti-	on only) The Department and Conti	ractor certify for this Contract, or Contract Amendment, that C	Contract obligations:
		pations have been incurred <u>prior</u> to the Effective Date.	and a second Astronomy in the control of the contro
2, may be incurred as of , 20 , a date L/	ATER than the Effective Date below	and no obligations have been incurred prior to the Effective	e Date.
X 3. were incurred as of July 1, 20 21, a data are authorized to be made either as settlement are attached and incorporated into this Contract	e PRIOR to the Effective Date belo payments or as authorized reimbur . Acceptance of payments forever	w, and the parties agree that payments for any obligations in sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to the	ncurred prior to the Effective Date all obligations under this Contract nese obligations.
amended, provided that the terms of this Contract a	and performance expectations and	0.32 , with no new obligations being incurred after this d obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during ar	resolving any claim or dispute, for
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any require approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference in according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department of unacceptable, and additional negotiated terms, provided that additional pegotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only made using the process outlined in 100 100 100 100 100 100 100 100 100 10			

NO

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions for Human and Social Services</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.maccomptroller.org/forms.">https://www.maccomptroller.org/forms.</a>

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.			
CONTRACTOR LEGAL NAME: TOWN OF NEW BRAINTREE (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs  MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 20 MEMORIAL DR, MA 0	1531-1743	Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: JOANNE THOMPSON	Phone: 508-867-9910	Billing Address (if different):	
E-Mail: councilonaging@newbraintree.org	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191904		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 020822000000000000008	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В
X NEW CONTRAI  PROCUREMENT OR EXCEPTION TYPE: (Check on  Statewide Contract (OSD or an OSD-designated of Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8  Notice or RFR, and Response or other procureme Emergency Contract (Attach justification for emer Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizi specific exemption or earmark, and exception justification for exemption or earmark, and exception is the Standard Contract Exemplosary Contr			MENT, 20  ) etails of amendment changes.) ed scope and budget) ict and updated scope/budget) iudget) iudget) iguage/justification and updated t are incorporated by reference
Services Commonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)  Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended). \$			
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: _X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30//2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.			
ANTICIPATED START DATE: (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations: 1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date. 2. may be incurred as of, 20, a date LATER than the Effective Date below and no obligations have been incurred prior to the Effective Date. X3. were incurred as of, 20, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further daims related to these obligations.			
CONTRACT END DATE: Contract performance shall terminate as of <u>June 30</u> , 20 <u>32</u> , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.			
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  Authorizing Signature For the Contractor:  X:			

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the Standard Contract Form Instructions
and Contractor Certifications, the Commonwealth Terms and Conditions for Human and Social Services or the Commonwealth IT Terms and Conditions which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: https://www.macomptroller.org/forms.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms. COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs CONTRACTOR LEGAL NAME: TOWN OF NEW MARLBOROUGH MMARS Department Code: ELD (and d/b/a): Business Mailing Address: 1 Ashburton PI, Boston MA 02108 Legal Address: (W-9, W-4): 807 MILL RIVER SOUTHFIELD RD, MA 01970-1322 Contract Manager: PRUDENCE SPAULDING Billing Address (if different): Phone: 413-229-8278 Contract Manager: Stacey Anne O'Connell Phone: 617-222-7419 E-Mail: prudencespaulding@hotmail.com Fax: 617-727-9368 E-Mail: Stacey.oconnell@mass.gov Contractor Vendor Code: VC6000191905 MMARS Doc ID(s): 02082200000000000008 Vendor Code Address ID (e.g. "AD001"): AD 001. (Note: The Address ID must be set up for EFT payments.) RFR/Procurement or Other ID Number: MGL c. 40 s. 8B CONTRACT AMENDMENT X NEW CONTRACT Enter Current Contract End Date Prior to Amendment: PROCUREMENT OR EXCEPTION TYPE: (Check one option only) Enter Amendment Amount: \$ \_\_\_\_\_. (or "no change") Statewide Contract (OSD or an OSD-designated Department) AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.) Collective Purchase (Attach OSD approval, scope, budget) Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Amendment to Date, Scope or Budget (Attach updated scope and budget) Notice or RFR, and Response or other procurement supporting documentation) Interim Contract (Attach justification for Interim Contract and updated scope/budget) Emergency Contract (Attach justification for emergency, scope, budget) Contract Employee (Attach any updates to scope or budget) Contract Employee (Attach Employment Status Form, scope, budget) Other Procurement Exception (Attach authorizing language/justification and updated X Other Procurement Exception (Attach authorizing language, legislation with scope and budget) specific exemption or earmark, and exception justification, scope and budget) The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option): \_\_\_ Commonwealth Terms and Conditions \_X \_ Commonwealth Terms and Conditions For Human and Social Commonwealth IT Terms and Conditions COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00 X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.) Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended). \$ PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days \_\_% PPD; Payment issued within 15 days \_\_ % PPD; Payment issued within 20 days \_\_ % PPD; Payment issued within 30 days \_\_% PPD. If PPD percentages are left blank, identify reason: X agree to standard 45 day cycle \_\_ statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); \_\_ only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.) BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3. ANTICIPATED START DATE: (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations: \_\_ 1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date. \_\_\_\_2. may be incurred as of \_\_\_\_\_\_, 20\_\_\_\_, a date LATER than the Effective Date below and no obligations have been incurred prior to the Effective Date. X 3. were incurred as of July 1, 20 21, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations. amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments. CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract. AUTHORIZING SIGNATURE FOR THE COMMONWEALTH AUTHORIZING SIGNATURE FOR THE CONTRACTOR: (Signature and Date Must Be Captured At Time of Signature)

Print Name: ADNE MAKE ENOUGH Print Title: TOWN ADMINISTRATOR



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the Standard Contract Form Instructions and Contractor Certifications, the Commonwealth Terms and Conditions for Human and Social Services or the Commonwealth IT Terms and Conditions which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: https://www.macomptroller.org/forms.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.				
CONTRACTOR LEGAL NAME: TOWN OF NEW SALEM (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive C MMARS Department Code: ELD	office of Elder Affairs	
Legal Address: (W-9, W-4): 15 SOUTH ST, MA 01235-9329		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: HENDRA REIDY	Phone: 978-544-2293	Billing Address (if different):		
E-Mail: newsalemcoa@yahoo.com;	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191906	1.400	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008		
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В	
X NEW CONTRA	CT	CONTRACT AMENDI		
PROCUREMENT OR EXCEPTION TYPE: (Check on	10	Enter Current Contract End Date Prior to Amendment:		
Statewide Contract (OSD or an OSD-designated	Department)	Enter Amendment Amount: \$ (or "no change")		
Collective Purchase (Attach OSD approval, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)		
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach updated scope and budget) Interim Contract (Attach justification for Interim Contract and updated scope/budget)		
Emergency Contract (Attach justification for emer	gency, scope, budget)	Interim Contract (Attach justification for interim Contract and updated scope/budget) Contract Employee (Attach any updates to scope or budget)		
Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizi	orm, scope, budget) ng language, legislation with	Other Procurement Exception (Attach authorizing lar	iguage/justification and updated	
specific exemption or earmark, and exception justif	fication, scope and budget)	scope and budget)		
The Standard Contract Form Instructions and Con into this Contract and are legally binding: (Check Contracts Commonwealth IT Terms and Conditions	ONE option): Commonwealth 1	Illowing Commonwealth Terms and Conditions documen Ferms and Conditions X Commonwealth Terms and Condi	t are incorporated by reference tions For Human and Social	
COMPENSATION: (Check ONE antion): The Departm	nent certifies that payments for aut	thorized performance accepted in accordance with the terms	of this Contract will be supported	
is the state accounting system by sufficient appropriate	tions or other non-appropriated tun	ids subject to intercept for Commonwealth owed debts unde	1 013 CIVIN 3.00.	
X Rate Contract. (No Maximum Obligation) Attach	n details of all rates, units, calculation of	ions, conditions or terms and any changes if rates or terms a this contract (or <i>new</i> total if Contract is being amended). \$	to boiling amonados,	
a DDD as follows: Payment issued within 10 days	% PPD: Payment issued within 1:	h EFT 45 days from invoice receipt. Contractors requesting a 5 days % PPD; Payment issued within 20 days % PF	D, Fayinein issued within 50 days	
% PPD If PPD percentages are left blank, identify	reason: X agree to standard 45	day cycle statutory/legal of Ready Payments (IVI.G.L. C.	29, § 23A); only initial payment	
(subsequent payments scheduled to support standard	I EFT 45 day payment cycle. See F	ENT: This 10-year contract will cover grant funds to municip	nal Councils on Aging (COA) of the	
O the authorized through the appual GAA a	and other cources. The activity nert	formance period for year one of this contract is // 1/2021-0/30	JIZUZZ, THE COMS established by	
I MOI it is a sist and aumment consiscents older adu	the their families and caregivers	he annual award is determined by the number of clucks bei	illullicipality as per the most recent	
census data, at a current rate of \$12 per person. This	All approved obligations incurred	ment or increase during the 10-year period. Each municipal prior to the latest signature date are intended to be part of the latest in 6/30/03. MA #3	nis agreement and the amount of	
the prior obligation for year one is funded in the FY22	award. The deadline to submit the	e signed contract is 6/30/22. IVIA #3.		
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contr	ractor certify for this Contract, or Contract Amendment, that	Contract obligations:	
1. may be incurred as of the Effective Date (latest	signature date below) and no oblig	gations have been incurred <u>prior</u> to the Effective Date.	ve Date.	
V 0	a DDIOD to the Effective Date held	w and <u>no</u> obligations have been incurred <u>prior</u> to the Effective ow, and the parties agree that payments for any obligations in	ncurred prior to the Ellective Date	
and a the size of the bar made aither as settlement r	asymptote or ac authorized reimbur	sement navments, and that the details and circumstances of	all obligations under the contract	
are attached and incorporated into this Contract	. Acceptance of payments forever	releases the Commonwealth from further claims related to t	nese obligations.	
CONTRACT END DATE: Contract performance sha	all terminate as of <u>June 30</u> , 20	0 32 , with no new obligations being incurred after this of dobligations shall survive its termination for the purpose of	late unless the Contract is properly resolving any claim or dispute, for	
amended, provided that the terms of this Contract a	and performance expectations and	formance, reporting, invoicing or final payments, or during a	ny lapse between amendments.	
ACCUSED A TIONS A Net ville standing worked as other	representations by the parties the	e "Effective Date" of this Contract or Amendment shall be	the latest date that this Contract or	
A Land bar a superisted by an outborized air	anaton, of the Contractor the Den	arment of a later Contract of Amendment Start Date Spec	alled above, subject to diff required	
I The Control of the thet they have see	page of and reviewed all decliments	is incorporated by reference as electronically published and the order the pains and penalties of perjury, and further agrees to	ie Contractor marco an ocranoarone	
I to the second services that	all forms governing partormance	of this Contract and doing business in Massachuseus are at	lacified of incorporated by following	
I the first that the first term is the second to the first and the second	ant propodonce the applicable ( )	mmonwealth Terms and Conditions, this alditudity Contract	i olili, tile otalidala oolitiaati olili	
Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (RFR) or other solicitation (RFR)		nd the Contractor's Response only if		
made using the process outlined in 801 CMR 21.07,	incorporated herein, provided that	any amended RFR or Response terms result in best value,	lower costs, or a more cost effective	
Contract.		AUTHORIZING SIGNATURE FOR THE COMMONWE		
AUTHORIZING SIGNATURE FOR THE CONTRACT	\ / /	1 11	011100	
X:(Signature and Date/Must Be Captured	Date: 0/29/d	X: Signature and Date Must Be Captured	At Time of Signature)	
0 1 6 1	At time of Signature)	Print Name: Awan Peliman		
Print Title: Shit board Chair	<del>.</del>	Print Title: Wineter of Contracts	w. Hewrotry	
Print Title: Stit board (noir				



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-confidence means may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.				
CONTRACTOR LEGAL NAME: TOWN OF NEWBURY (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 12 KENT WAY,STE10, MA 01922-1221		Business Mailing Address: 1 Ashburton PI, Boston M		
Contract Manager: CINDY CURRIER	Phone: 978-462-8114	Billing Address (if different):		
E-Mail: coa@townofnewbury.org	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191908		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008		
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 88	3	
X NEW CONTRA	CT	CONTRACT AMENDMENT		
PROCUREMENT OR EXCEPTION TYPE: (Check on	CATALO .	Enter Current Contract End Date <u>Prior</u> to Amendment:	Contra	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change")		
Collective Purchase (Attach OSD approval, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)		
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement		Amendment to Date, Scope or Budget (Attach update		
Emergency Contract (Attach justification for emer	gency, scope, budget)	Interim Contract (Attach justification for Interim Contra Contract Employee (Attach any updates to scope or but		
Contract Employee (Attach Employment Status F X_ Other Procurement Exception (Attach authorizi		Other Procurement Exception (Attach authorizing language)		
specific exemption or earmark, and exception justif		scope and budget)	5gj	
into this Contract and are legally binding: (Check C	The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and Conditions X Commonwealth Terms and Conditions For Human and Social Services Commonwealth IT Terms and Conditions			
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)				
Maximum Obligation Contract. Enter total maxir	num obligation for total duration of	this contract (or <b>new</b> total if Contract is being amended). \$ _		
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 days% PPD. If PPD percentages are left blank, identify reason: X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.				
		actor certify for this Contract, or Contract Amendment, that C	contract obligations:	
		ations have been incurred <u>prior</u> to the Effective Date.		
X 3, were incurred as of July 1, 20 21, a date are authorized to be made either as settlement p	e PRIOR to the Effective Date below ayments or as authorized reimburs	and <u>no</u> obligations have been incurred <u>prior</u> to the Effective w, and the parties agree that payments for any obligations in sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to the	curred prior to the Effective Date all obligations under this Contract	
CONTRACT END DATE: Contract performance shall terminate as ofJune 30_, 20_32, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  X:				
Print Title: Takk I ADMINISTRATE Print Title: What was up I wanten				



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions and Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Legal Address: (W-9, W-4): PO BOX 550, MA 01950-0650  Busi Contract Manager: PAULA BURKE Phone: 978-462-8650 Billin E-Mail: pburke@cityofnewburyport.com Fax: Contractor Vendor Code: VC6000192119  Vendor Code Address ID (e.g. "AD001"): AD 001. (Note: The Address ID must be set up for EFT payments.)  RFR  X NEW CONTRACT PROCUREMENT OR EXCEPTION TYPE: (Check one option only) Statewide Contract (OSD or an OSD-designated Department) Collective Purchase (Attach OSD approval, scope, budget) Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation) Emergency Contract (Attach justification for emergency, scope, budget) Contract Employee (Attach Employment Status Form, scope, budget) X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option): Commonwealth Terms as Services Commonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, suffin	s and Conditions X Commonwealth Terms and Condit	Phone: 617-222-7419  Fax: 617-727-9368  MENT, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Legal Address: (W-9, W-4): PO BOX 550, MA 01950-0650  Busi  Contract Manager: PAULA BURKE Phone: 978-462-8650  Billing  E-Mail: pburke@cityofnewburyport.com Fax: Commonwealth Terms and Conditions  Contractor Vendor Code: VC6000192119  Vendor Code Address ID (e.g. "AD001"): AD 001.  (Note: The Address ID must be set up for EFT payments.)  RFR  X NEW CONTRACT  PROCUREMENT OR EXCEPTION TYPE: (Check one option only)  Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sufficient appropriations o	Iling Address (if different): Intract Manager: Stacey Anne O'Connell  Mail: Stacey.oconnell@mass.gov  MARS Doc ID(s): 02082200000000000008  R/Procurement or Other ID Number: MGL c. 40 s. 88  CONTRACT AMENDM Iter Current Contract End Date Prior to Amendment: Iter Amendment Amount: \$ (or "no change") MENDMENT TYPE: (Check one option only. Attach def. Amendment to Date, Scope or Budget (Attach update. Interim Contract (Attach justification for Interim Contract Contract Employee (Attach any updates to scope or bid.) Other Procurement Exception (Attach authorizing lan scope and budget) Integration of the commonwealth Terms and Conditions documents and Conditions X_Commonwealth Terms and Conditions documents.	Phone: 617-222-7419  Fax: 617-727-9368  MENT, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Contract Manager: PAULA BURKE Phone: 978-462-8650 Billing E-Mail: pburke@cityofnewburyport.com Fax: Contractor Vendor Code: VC6000192119  Vendor Code Address ID (e.g. "AD001"): AD 001. (Note: The Address ID must be set up for EFT payments.)  X NEW CONTRACT  PROCUREMENT OR EXCEPTION TYPE: (Check one option only)  Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):Commonwealth Terms as ServicesCommonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sufX Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, commonwealth payments are issued through EFT.	mail: Stacey.oconnell@mass.gov  MARS Doc ID(s): 02082200000000000008  ER/Procurement or Other ID Number: MGL c. 40 s. 8E	Fax: 617-727-9368  MENT, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
E-Mail: pburke@cityofnewburyport.com  Contractor Vendor Code: VC6000192119  Vendor Code Address ID (e.g. "AD001"): AD 001.  (Note: The Address ID must be set up for EFT payments.)  X NEW CONTRACT  PROCUREMENT OR EXCEPTION TYPE: (Check one option only)  Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sull X. Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, orMaximum Obligation Contract. Enter total maximum obligation for total duration of this components are issued through EFT.	Mail: Stacey.oconnell@mass.gov  MARS Doc ID(s): 02082200000000000008  ER/Procurement or Other ID Number: MGL c. 40 s. 8E	Fax: 617-727-9368  MENT, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Vendor Code Address ID (e.g. "AD001"): AD 001.  (Note: The Address ID must be set up for EFT payments.)  X NEW CONTRACT  PROCUREMENT OR EXCEPTION TYPE: (Check one option only)  Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation  Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sull X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, companyments are issued through EFT.	MARS Doc ID(s): 02082200000000000008  R/Procurement or Other ID Number: MGL c. 40 s. 8E  CONTRACT AMENDM ter Current Contract End Date Prior to Amendment: (or "no change") MENDMENT TYPE: (Check one option only. Attach de Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra Contract Employee (Attach any updates to scope or be Other Procurement Exception (Attach authorizing lan scope and budget) ing Commonwealth Terms and Conditions documents s and Conditions X Commonwealth Terms and Conditions	MENT, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Vendor Code Address ID (e.g. "AD001"): AD 001.  (Note: The Address ID must be set up for EFT payments.)  X NEW CONTRACT  PROCUREMENT OR EXCEPTION TYPE: (Check one option only)  Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):  Commonwealth Terms as Services  Commonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sull X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, commonwealth Department Contracts. Enter total maximum obligation for total duration of this commonwealth payments are issued through EFT.	MARS Doc ID(s): 02082200000000000008  R/Procurement or Other ID Number: MGL c. 40 s. 8E  CONTRACT AMENDM ter Current Contract End Date Prior to Amendment: (or "no change") MENDMENT TYPE: (Check one option only. Attach de Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra Contract Employee (Attach any updates to scope or be Other Procurement Exception (Attach authorizing lan scope and budget) ing Commonwealth Terms and Conditions documents s and Conditions X Commonwealth Terms and Conditions	mENT, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Note: The Address ID must be set up for EFT payments.)    X NEW CONTRACT	CONTRACT AMENDM ter Current Contract End Date Prior to Amendment: ter Amendment Amount: \$\( \) (or "no change") MENDMENT TYPE: (Check one option only. Attach de Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contract Contract Employee (Attach any updates to scope or budget) Other Procurement Exception (Attach authorizing lan scope and budget) Ing Commonwealth Terms and Conditions documents and Conditions X Commonwealth Terms and Conditions	mENT, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
PROCUREMENT OR EXCEPTION TYPE: (Check one option only)  Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):  Commonwealth Terms as Services  Commonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sufficient appropriatio	ter Current Contract End Date <u>Prior</u> to Amendment: (or "no change"), ter Amendment Amount: \$ (or "no change"), MENDMENT TYPE: (Check one option only. Attach de Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contract Contract Employee (Attach any updates to scope or bit Other Procurement Exception (Attach authorizing lan scope and budget)  Ing Commonwealth Terms and Conditions documents and Conditions X_Commonwealth Terms and Conditions	, 20 ) etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):  Commonwealth Terms as Services  Commonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sufficient appropriations of all rates, units, calculations, or Maximum Obligation Contract. Enter total maximum obligation for total duration of this components are issued through EFT.	ter Amendment Amount: \$ (or "no change") MENDMENT TYPE: (Check one option only. Attach de Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra Contract Employee (Attach any updates to scope or be Other Procurement Exception (Attach authorizing lan scope and budget) ing Commonwealth Terms and Conditions document s and Conditions X Commonwealth Terms and Conditions	etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Collective Purchase (Attach OSD approval, scope, budget) Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation) Emergency Contract (Attach justification for emergency, scope, budget) Contract Employee (Attach Employment Status Form, scope, budget) X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option): Commonwealth Terms as Services Commonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sultar Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, or Maximum Obligation Contract. Enter total maximum obligation for total duration of this components are issued through EFT.	MENDMENT TYPE: (Check one option only. Attach de Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contract Contract Employee (Attach any updates to scope or but Other Procurement Exception (Attach authorizing lan scope and budget)  Ing Commonwealth Terms and Conditions documents and Conditions  X. Commonwealth Terms and Conditions	etails of amendment changes.) ed scope and budget) ict and updated scope/budget) udget) guage/justification and updated		
Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):  Commonwealth Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sultance in the state accounting system by sufficient appropriations or other non-appropriated funds, sultance in the state accounting system by sufficient appropriations of all rates, units, calculations, or Maximum Obligation Contract. Enter total maximum obligation for total duration of this components are issued through EFT.	Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contrac Contract Employee (Attach any updates to scope or be Other Procurement Exception (Attach authorizing lan scope and budget)  Ing Commonwealth Terms and Conditions documents and Conditions  X Commonwealth Terms and Conditions	ed scope and budget) ct and updated scope/budget) udget) guage/justification and updated		
Notice or RFR, and Response or other procurement supporting documentation) Emergency Contract (Attach justification for emergency, scope, budget)Contract Employee (Attach Employment Status Form, scope, budget)X_Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):Commonwealth Terms as ServicesCommonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sulX_Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, orMaximum Obligation Contract. Enter total maximum obligation for total duration of this commonwealth payments are issued through EFT.	Interim Contract (Attach justification for Interim Contract Contract Employee (Attach any updates to scope or bit Other Procurement Exception (Attach authorizing lan scope and budget)  Ing Commonwealth Terms and Conditions documents and Conditions X Commonwealth Terms and Conditions	ct and updated scope/budget) udget) guage/justification and updated		
Emergency Contract (Attach justification for emergency, scope, budget)Contract Employee (Attach Employment Status Form, scope, budget)X_Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):Commonwealth Terms as ServicesCommonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sullX_Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, orMaximum Obligation Contract. Enter total maximum obligation for total duration of this components are issued through EFT.	Contract Employee (Attach any updates to scope or be Other Procurement Exception (Attach authorizing lan scope and budget) ing Commonwealth Terms and Conditions documents and Conditions X Commonwealth Terms and Conditions	udget) guage/justification and updated		
X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option): Commonwealth Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sulthX Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, orMaximum Obligation Contract. Enter total maximum obligation for total duration of this components are issued through EFT.	Other Procurement Exception (Attach authorizing lan scope and budget) ing Commonwealth Terms and Conditions documents and Conditions X Commonwealth Terms and Conditions	guage/justification and updated		
The Standard Contract Form Instructions and Contractor Certifications and the following into this Contract and are legally binding: (Check ONE option):	ing Commonwealth Terms and Conditions documents and Conditions X Commonwealth Terms and Conditions			
into this Contract and are legally binding: (Check ONE option):Commonwealth Terms at ServicesCommonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department certifies that payments for authorized in the state accounting system by sufficient appropriations or other non-appropriated funds, sulX_ Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, commonwealth payments are issued through EFT.	s and Conditions X Commonwealth Terms and Condit	10 PM		
in the state accounting system by sufficient appropriations or other non-appropriated funds, sul  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, co Maximum Obligation Contract. Enter total maximum obligation for total duration of this co		lions For Human and Social		
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT	COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)			
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT	Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended). \$			
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: _X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)				
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.				
ANTICIPATED START DATE: (Complete ONE option only) The Department and Contractor of	or certify for this Contract, or Contract Amendment, that C	Contract obligations:		
1. may be incurred as of the Effective Date (latest signature date below) and no obligations	ns have been incurred prior to the Effective Date.			
2. may be incurred as of, 20, a date LATER than the Effective Date below and r	d <u>no</u> obligations have been incurred <u>prior</u> to the Effective	e Date.		
X 3. were incurred as of July 1, 20 21, a date PRIOR to the Effective Date below, and are authorized to be made either as settlement payments or as authorized reimbursemen are attached and incorporated into this Contract. Acceptance of payments forever release	ent payments, and that the details and circumstances of	all obligations under this Contract		
CONTRACT END DATE: Contract performance shall terminate as of				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE CONTRACTOR:  X:  Signature and Date Must Be Captured At Time of Signature)  Print Name:  Print Title:  WWW C. Contracts AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:  X:  Signature and Date Must Be Captured At Time of Signature)  Print Title:  Print Title:  Print Title:				



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.maccomptroller.org/forms">https://www.maccomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.				
CONTRACTOR LEGAL NAME: CITY OF NORTH ADAMS		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs		
(and d/b/a):		MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 10 MAIN ST, MA 01247-3419		Business Mailing Address: 1 Ashburton PI, Boston M	IA 02108	
Contract Manager: SANDRA LAMB	Phone: 413-662-3125	Billing Address (if different):		
E-Mail: spitzercntr@yahoo.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192121		E-Mail: <u>Stacey.oconnell@mass.gov</u>	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008		
(Note: The Address ID must be set up for EFT paym	ients.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8B		
X NEW CONTRA	СТ	CONTRACT AMEND		
PROCUREMENT OR EXCEPTION TYPE: (Check or		Enter Current Contract End Date <u>Prior</u> to Amendment:  Enter Amendment Amount: \$ (or "no change"		
— Statewide Contract (OSD or an OSD-designated — Collective Purchase (Attach OSD approval, scope	Department)	AMENDMENT TYPE: (Check one option only. Attach d		
Department Procurement (includes all Grants - 8	15 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach updated scope and budget)		
Notice or RFR, and Response or other procureme Emergency Contract (Attach justification for emer	ent supporting documentation)	Interim Contract (Attach justification for Interim Contra	act and updated scope/budget)	
Contract Employee (Attach Employment Status F	orm, scope, budget)	Contract Employee (Attach any updates to scope or b	oudget)	
X Other Procurement Exception (Attach authorizi	ng language, legislation with	Other Procurement Exception (Attach authorizing lar scope and budget)	nguage/justification and updated	
specific exemption or earmark, and exception justif	tractor Certifications and the foll	lowing Commonwealth Terms and Conditions documen	t are incorporated by reference	
into this Contract and are legally binding: (Check (	ONE option): <u>Commonwealth To</u>	erms and Conditions X Commonwealth Terms and Condi	tions For Human and Social	
Services Commonwealth IT Terms and Conditions		1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	of this Contract will be connected	
compensation: (Check ONE option): The Departr	nent certifies that payments for auth	norized performance accepted in accordance with the terms ds, subject to intercept for Commonwealth owed debts unde	er 815 CMR 9.00.	
X Rate Contract. (No Maximum Obligation) Attack	n details of all rates, units, calculation	ons, conditions or terms and any changes if rates or terms a	re being amended.)	
Maximum Obligation Contract. Enter total maxi	mum obligation for total duration of	this contract (or <i>new</i> total if Contract is being amended). \$	•	
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 days				
a PPD as follows: Payment issued within 10 days	_% PPD; Payment issued within 15 v reason: X agree to standard 45	days % PPD; Payment issued within 20 days % Production of the day cycle statutory/legal or Ready Payments (M.G.L. c.	29, § 23A); only initial payment	
(subsequent payments scheduled to support standard	d EFT 45 day payment cycle. See F	Prompt Pay Discounts Policy.)		
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by				
MGL provide social and support services to older adu	Its, their families and caregivers, TI	he annual award is determined by the number of elders per	municipality as per the most recent	
census data, at a current rate of \$12 per person. This	contract will cover any rate adjustr	ment or increase during the 10-year period. Each municipal prior to the latest signature date are intended to be part of the	COA will complete an annual fiscal	
the prior obligation for year one is funded in the FY22	award. The deadline to submit the	e signed contract is 6/30/22. MA #3.	ils agreement and the amount of	
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contr	actor certify for this Contract, or Contract Amendment, that	Contract obligations:	
1. may be incurred as of the Effective Date (latest	signature date below) and no oblig	ations have been incurred prior to the Effective Date.		
2. may be incurred as of, 20, a date LA	ATER than the Effective Date below	y and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	e Date.	
are authorized to be made either as settlement of	payments or as authorized reimburs	w, and the parties agree that payments for any obligations i sement payments, and that the details and circumstances of	fall obligations under this Contract	
are attached and incorporated into this Contract	. Acceptance of payments forever	releases the Commonwealth from further claims related to t	hese obligations.	
CONTRACT END DATE: Contract performance sha	all terminate as of <u>June 30</u> , 20	0.32 , with no new obligations being incurred after this o	date unless the Contract is properly	
amended, provided that the terms of this Contract a completing any negotiated terms and warranties, to a	and performance expectations and allow any close out or transition perf	obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during a	ny lapse between amendments.	
		"Effective Date" of this Contract or Amendment shall be		
Amendment has been executed by an authorized significant control of the control o	gnatory of the Contractor, the Department	artment, or a later Contract or Amendment Start Date spec	ified above, subject to any required	
approvals. The Contractor certifies that they have acc	cessed and reviewed all documents	incorporated by reference as electronically published and the der the pains and penalties of perjury, and further agrees to	ne Contractor makes all certifications	
upon request to support compliance, and agrees that	t all terms governing performance of	of this Contract and doing business in Massachusetts are at	tached or incorporated by reference	
herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract F			t Form, the Standard Contract Form	
Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's R		nd the Contractor's Response only if		
made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective				
Contract.  AUTHORIZING SIGNATURE FOR THE CONTRACT	TOR:	AUTHORIZING SIGNATURE FOR THE COMMONWE	ALTH:	
1 1	<b>~</b> :		2/22/22	
X: (Signature and Date Must Be Captured	At Time of Signature)	(Signature and Date Must Be Captured A	ate: <u>7000</u> . At Time of Signature)	
Print Name: SENDIFLE A. M	ackles			
Print Title: Walson		Print Title: Director of lumbracks	and 4-100 why	



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.
Forms are also nosted at OSD Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mass	s.gov/lists/osd-forms.		Approach to the company to the control	
CONTRACTOR LEGAL NAME: TOWN OF NORTH ANDOVER		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs		
(and d/b/a):		MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 400 OSGOOD ST, MA 01		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: KATHY SHELP	Phone: 978-688-9560	Billing Address (if different):	Phono: 647 222 7440	
E-Mail: kshelp@northandoverma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191910		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 020822000000000000008		
(Note: The Address ID must be set up for EFT paym	the state of the s	RFR/Procurement or Other ID Number: MGL c. 40 s. 8		
X NEW CONTRA		CONTRACT AMENDMENT		
PROCUREMENT OR EXCEPTION TYPE: (Check or		Enter Current Contract End Date <u>Prior</u> to Amendment.  Enter Amendment Amount: \$ (or "no change	Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated Collective Purchase (Attach OSD approval, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)		
Department Procurement (includes all Grants - 8	15 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach upda	ated scope and budget)	
Notice or RFR, and Response or other procureme Emergency Contract (Attach justification for emer	ent supporting documentation)	Interim Contract (Attach justification for Interim Contr	ract and updated scope/budget)	
Contract Employee (Attach Employment Status F	orm, scope, budget)	Contract Employee (Attach any updates to scope or Other Procurement Exception (Attach authorizing la	anguage/justification and updated	
X Other Procurement Exception (Attach authorizi	ication, scope and budget)	scope and budget)		
The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and Conditions _ X _ Commonwealth Terms and Conditions For Human and Social			nt are incorporated by reference ditions For Human and Social	
Services Commonwealth IT Terms and Conditions  COMPENSATION: (Check ONE option): The Department of the Compensation of the Com	nent certifies that payments for aut	horized performance accepted in accordance with the term	s of this Contract will be supported	
in the state accounting eyetem by sufficient appropria	tions or other non-appropriated tun	ids, subject to intercept for Commonwealth owed debts und	lei 613 CIVIN 9.00.	
X Rate Contract, (No Maximum Obligation) Attac	n details of all rates, units, calculati	ions, conditions or terms and any changes if rates or terms this contract (or <i>new</i> total if Contract is being amended). \$	are being amended.)	
DDD f-ll Decement issued within 10 days	0/ DDD: Dayment icclied within 1	h EFT 45 days from invoice receipt. Contractors requesting 5 days % PPD; Payment issued within 20 days % F	FD, Fayinein issued within 50 days	
% PPD If PPD percentages are left blank, identify	v reason: X agree to standard 45	day cycle statutory/legal or Ready Payments (M.G.L. C	5. 29, § 23A); only initial payment	
(subsequent payments scheduled to support standard	NCE OF REASON FOR AMENDM	FNT: This 10-year contract will cover grant funds to munic	ipal Councils on Aging (COA) of the	
O atthe authorized through the appual GAA	and other courses. The activity ner	formance period for year one of this contract is //1/2021-b/s	30/2022. The COAS established by	
MGL provide social and support services to older adu	Its, their families and caregivers. T	The annual award is determined by the number of elders per ment or increase during the 10-year period. Each municipa	I COA will complete an annual fiscal	
report describing how these grant funds were applied	. All approved obligations incurred	prior to the latest signature date are intended to be part of	this agreement and the amount of	
the prior obligation for year one is funded in the FY22	award. The deadline to submit th	e signed contract is 6/30/22. MA #3.		
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Cont signature date below) and <b>no</b> oblid	ractor certify for this Contract, or Contract Amendment, that gations have been incurred prior to the Effective Date.	, contact congations	
2 may be incurred as of 20 a date La	ATER than the Effective Date below	w and <b>no</b> obligations have been incurred <u>prior</u> to the Effect	ive Date.	
V 0 in summed as of July 1 20 21 and of	a DDIOD to the Effective Date held	ow, and the parties agree that payments for any obligations	incurred prior to the Effective Date	
are authorized to be made either as settlement	navments or as authorized reimbur	releases the Commonwealth from further claims related to	of all obligations under this contract	
CONTRACT END DATE: Contract performance sh	all terminate as of June 30 2	0.32 with no new obligations being incurred after this	date unless the Contract is properly	
and a service of the Contract	and northromance evnectations and	nominations shall stirvive its termination for the purpose of	of resolving arry claim of dispute, for	
completing any negotiated terms and warranties, to a	allow any close out or transition per	rformance, reporting, invoicing or final payments, or during	arry lapse between amendments.	
CERTIFICATIONS: Notwithstanding verbal or other	representations by the parties, the	ne "Effective Date" of this Contract or Amendment shall be partment, or a later Contract or Amendment Start Date specially and the contract of Amendment Start Date specially and the contract of the contract	e the latest date that this Contract or ecified above, subject to any required	
approvale. The Contractor cortifies that they have ac	cassed and reviewed all documents	s incorporated by reference as electronically published and	THE CONTRACTOR MAKES AN CERTIFICATIONS	
approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certific required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documents incorporated by reference as electronically published and the Contractor makes all certifications under the pains and penalties of perjury, and further agrees to provide any required documents.			o provide any required documentation	
upon required under the Standard Contract Form instructions and Contractor Contract and doing business in Massachusetts are attached or incorporated by relative to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by relative to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by relative to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by relative to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by relative to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by relative to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by relative to the support compliance, and agrees that all terms governing performance of this Contract Form, the Standard			CL FOITH, the Standard Contract i only	
Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitumacceptable, and additional negotiated terms, provided that additional negotiated terms will transceptable.		solicitation the Contractor's Response (excluding any idi	ilduade stricker by a pehartilient as	
unacceptable, and additional negotiated terms, proving the process outlined in 801 CMR 21.07.	ded that additional negotiated term incorporated herein, provided that	any amended RFR or Response terms result in best value	, lower costs, or a more cost effective	
Contract.				
AUTHORIZING SIGNATURE FOR THE CONTRAC		AUTHORIZING SIGNATURE FOR THE COMMONW	8/2//27	
X:(Signature and Date Must Be Captured Print Name: MC11550 RDC110	. Date: 3/1/2C.	X:	Date: // 90/	
(Signature and Date Must Be Captured	At Time of Signature)	Print Name: Aum Print Name:	A 11	
Print Title: TOWN MANAGER	Ju-	X:	and Hecoverting	
Print lide: ICINIT , CITACIO				



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the Standard Contract Form Instructions and Contractor Certifications, the Commonwealth Terms and Conditions for Human and Social Services or the Commonwealth IT Terms and Conditions which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mass	s.gov/lists/osd-forms.			
CONTRACTOR LEGAL NAME: TOWN OF NORTH ATTLEBOROUGH (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 43 S WASHINGTON ST, MA 02760-1642		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: PAMELA HUNT	Phone: 508-699-0131	Billing Address (if different):		
E-Mail: phunt@nattleboro.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191912		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 020822000000000000008		
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В	
X NEW CONTRACT  PROCUREMENT OR EXCEPTION TYPE: (Check one option only)  Statewide Contract (OSD or an OSD-designated Department)  Collective Purchase (Attach OSD approval, scope, budget)  Department Procurement (includes all Grants - 815 CMR 2.00) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)  Emergency Contract (Attach justification for emergency, scope, budget)  Contract Employee (Attach Employment Status Form, scope, budget)  X Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)		CONTRACT AMENDMENT  Enter Current Contract End Date <u>Prior</u> to Amendment:, 20  Enter Amendment Amount: \$ (or "no change")  AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)  Amendment to Date, Scope or Budget (Attach updated scope and budget)  Interim Contract (Attach justification for Interim Contract and updated scope/budget)  Contract Employee (Attach any updates to scope or budget)  Other Procurement Exception (Attach authorizing language/justification and updated scope and budget)		
into this Contract and are legally binding: (Check of Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth T	llowing Commonwealth Terms and Conditions document forms and Conditions X Commonwealth Terms and Conditions	tions For Human and Social	
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)  Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended).				
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD percentages are left blank, identify reason: X agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)				
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recencensus data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.			0/2022. The COAs established by municipality as per the most recent COA will complete an annual fiscal	
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contr	ractor certify for this Contract, or Contract Amendment, that C	Contract obligations:	
1, may be incurred as of the Effective Date (latest	signature date below) and no oblig	pations have been incurred <u>prior</u> to the Effective Date.	o Dete	
X 3, were incurred as of July 1, 20 21, a date are authorized to be made either as settlement p	e PRIOR to the Effective Date belo payments or as authorized reimburs	wand no obligations have been incurred prior to the Effective, and the parties agree that payments for any obligations in sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to the	ncurred prior to the Effective Date all obligations under this Contract	
CONTRACT END DATE: Contract performance sha amended, provided that the terms of this Contract a	CONTRACT END DATE: Contract performance shall terminate as ofJune 30_, 20_32, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.			
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:  X:  Signature and Date Must Be Captured At Time of Signature)  Print Name:  Print Name:  Print Title:  Print Ti				
Print Title: TOWN Manag-	410.	Print litie: Viva(100 01 COM104(1) 40	THE COURT OF	



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions and Contractor</u>

Certifications, the <u>Commonwealth Terms and Conditions for Human and Social Services</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.maccomptroller.org/forms">https://www.maccomptroller.org/forms</a>. Forms are

also posted at OSD Forms; https://www.mass.gov/iists/	JSU-IOITIS.		
CONTRACTOR LEGAL NAME: TOWN OF NORTH BROOKFIELD (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 185 N MAIN ST, MA 01535-1531		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: Michelle Thayer	Phone: 508-867-0220	Billing Address (if different):	
E-Mail: coadirector@northbrookfield.net	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191913		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001 .		MMARS Doc ID(s): 02082200000000000000	
(Note: The Address ID must be set up for EFT payn	nents.)	RFR/Procurement or Other ID Number: MGL c. 40 s.	8B
X NEW CONTRA	CT	CONTRACT AMEN	DMENT
PROCUREMENT OR EXCEPTION TYPE: (Check or		Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated	Department)	Enter Amendment Amount: \$, (or "no change")	
Collective Purchase (Atlach OSD approval, scop	e, budget)	AMENDMENT TYPE: (Check one option only. Attach	details of amendment changes.)
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurem	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach upo Interim Contract (Attach justification for Interim Con	tract and undated scope/budget)
Emergency Contract (Attach justification for eme	rgency, scope, budget)	Contract Employee (Attach any updates to scope o	r budget)
Contract Employee (Attach Employment Status F	Form, scope, budget)	Other Procurement Exception (Attach authorizing	anguage/justification and updated
X Other Procurement Exception (Attach authoriz specific exemption or earmark, and exception justi	fication, scope and budget)	scope and budget)	
The Standard Contract Form Instructions and Con	ntractor Certifications and the fol ONE option): <u>Commonwealth T</u>	llowing Commonwealth Terms and Conditions docum erms and Conditions X Commonwealth Terms and Con	ent are incorporated by reference additions For Human and Social
COMPENSATION: (Check ONE antion): The Departs	ment certifies that navments for aut	horized performance accepted in accordance with the terr	ns of this Contract will be supported
in the state accounting system by sufficient appropria	tions or other non-appropriated fun	ids, subject to intercept for Commonwealth owed debts un	der 815 CMR 9.00.
X Rate Contract, (No Maximum Obligation) Attac	h details of all rates, units, calculati	ons, conditions or terms and any changes it rates or terms	s are being amended.)
		this contract (or new total if Contract is being amended).	
PROMPT PAYMENT DISCOUNTS (PPD): Common	wealth payments are issued throug	h EFT 45 days from invoice receipt, Contractors requesting 5 days % PPD; Payment issued within 20 days %	g accelerated payments must identify PPD: Payment issued within 30 days
% PPD If PPD percentages are left blank, identif	v reason: X agree to standard 45	day cycle statutory/legal of Ready Payments (M.G.L.	c. 29, § 23A); _ only initial payment
(subsequent payments scheduled to support standar	d EFT 45 day payment cycle. See	Prompt Pay Discounts Policy.)	
BRIEF DESCRIPTION OF CONTRACT PERFORMA	NCE or REASON FOR AMENDM	ENT: This 10-year contract will cover grant funds to muniformance period for year one of this contract is 7/1/2021-6	/30/2022. The COAs established by
NOIide anciel and aumort conjugat to older adu	ille their families and caregivers T	he annual award is determined by the number of elders b	er municipality as per the most recent
acroup data at a current rate of \$12 per person. This	contract will cover any rate adjust	ment or increase during the 10-year period. Each municip	al COA will complete an annual listal
report describing how these grant funds were applied the prior obligation for year one is funded in the FY22	a. All approved obligations incurred a award. The deadline to submit th	prior to the latest signature date are intended to be part o e signed contract is 6/30/22. MA #3.	tills agreement and the amount of
ANTICIPATED START DATE: (Complete ONE opti	on only) The Department and Cont	ractor certify for this Contract, or Contract Amendment, the	at Contract obligations:
1 may be incurred as of the Effective Date (latest	signature date below) and no oblig	gations have been incurred prior to the Effective Date.	
2 may be incurred as of . 20 . a date L.	ATER than the Effective Date below	wand no obligations have been incurred <u>prior</u> to the Effec	clive Date.
X 3. were incurred as of July 1, 20 21, a da	te PRIOR to the Effective Date belo	ow, and the parties agree that payments for any obligations incurred prior to the Effective Date rement payments, and that the details and circumstances of all obligations under this Contract	
are attached and incorporated into this Contract	t. Acceptance of payments forever	releases the Commonwealth from further claims related to	o these obligations.
CONTRACT END DATE: Contract performance sh	all terminate as of June 30 2	0.32 with no new obligations being incurred after thi	s date unless the Contract is properly
amonded provided that the terms of this Contract	and performance expectations and	obligations shall survive its termination for the purpose	of testiving any claim of dispute, for
		formance, reporting, invoicing or final payments, or during	
CERTIFICATIONS: Notwithstanding verbal or othe	r representations by the parties, the	e "Effective Date" of this Contract or Amendment shall artment, or a later Contract or Amendment Start Date sp	be the latest date that this Contract or ecified above, subject to any required
approvale. The Contractor cortifies that they have ac	cessed and reviewed all documents	s incomprated by reference as electronically published and	the Contractor makes all certifications
required under the Standard Contract Form Instructive	one and Contractor Certifications un	nder the nains and penalties of periury, and further agrees	to provide any required documentation
upon request to support compliance, and agrees that	upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by refer herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract		
Instructions and Contractor Cortifications, the Regulast for Response (RFR) or other so		solicitation, the Contractor's Response (excluding any language stricken by a Department as	
unaccentable and additional pagatiated terms prov	ided that additional negotiated term	is will take precedence over the relevant terms in the RFR any amended RFR or Response terms result in best valu	and the Contractor's Response only it
made using the process outlined in 801 CMR 21.07, Contract,	incorporated nerein, provided that	any affericed KFK of Kesponse terms result in best valu	of lotter cooled or a more seen small
AUTHORIZING SIGNATURE FOR THE CONTRAC	TOR:	AUTHORIZING SIGNATURE FOR THE COMMON	NEALTH:
Allechi Mith Ackel	Date: 6/29/22	X:	Date: 6/30/22.
(Signature and Date Must Be Captured At Time of Signature)		(Signature and Date Must Be Capture	d At Time of Signature)
Print Name: Michelle Thayer	<u></u>	Print Name: Haven Beitman	and Warristown
Print Title: Interim Director. Print Title: Director of Contracts			and Allounting

2/1



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mass		ioro dio rodanoa lo dococo pasione a la come a	
CONTRACTOR LEGAL NAME: TOWN OF NORTH READING (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs  MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 235 NORTH ST, MA 01864-1258		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: SHERRI GREER	Phone: 978-664-5600	Billing Address (if different):	
E-Mail: sgreer@northreadingma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191915		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 88	3
_X_ NEW CONTRA	CT	CONTRACT AMEND	MENT
PROCUREMENT OR EXCEPTION TYPE: (Check on	And Arthurson	Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attach de	
	15 CMR 2.00) (Solicitation ent supporting documentation)	Amendment to Date, Scope or Budget (Attach update	ed scope and budget)
Emergency Contract (Attach justification for emer	gency, scope, budget)	Interim Contract (Attach justification for Interim Contra Contract Employee (Attach any updates to scope or b	udget)
Contract Employee (Attach Employment Status F	orm, scope, budget)	Other Procurement Exception (Attach authorizing lan	guage/justification and updated
X Other Procurement Exception (Attach authorizi specific exemption or earmark, and exception justif		scope and budget)	3
The Standard Contract Form Instructions and Con	tractor Certifications and the fol ONE option):Commonwealth T	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	are incorporated by reference iions For Human and Social
COMPENSATION: (Check ONE option): The Departri in the state accounting system by sufficient appropriat X Rate Contract. (No Maximum Obligation) Attact	COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)  Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended).\$		
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 days% PPD. If PPD percentages are left blank, identify reason: X agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of			
the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.  ANTICIPATED START DATE: (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:			
1. may be incurred as of the Effective Date (latest	signature date below) and no oblig	gations have been incurred prior to the Effective Date.	eran varav
2. may be incurred as of, 20, a date LA	TER than the Effective Date below	v and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	e Date.
are authorized to be made either as settlement pare attached and incorporated into this Contract	payments or as authorized reimburs . Acceptance of payments forever	ow, and the parties agree that payments for any obligations in sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to the	all obligations under this Contract nese obligations.
CONTRACT END DATE: Contract performance shall terminate as ofJune 30, 20_32, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.			
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only in made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:  X:			
Print Title: Take ADMINITED TO		Limit line. Av.off. a. at (h.de. off.) had.	/

4



This form is jointly issued and published by the Orfice of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services

Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mas	s.gov/iists/osu-ioritis.			
CONTRACTOR LEGAL NAME: CITY OF NORTHAMPTON (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 210 MAIN ST, MA 01060-3196		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: MARIE WESTBURG	Phone: 413-587-1228	Billing Address (if different):		
E-Mail: mwestburg@northamptonma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192124		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008		
(Note: The Address ID must be set up for EFT payn	nents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В	
X NEW CONTRA	CT	CONTRACT AMEND	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check or	Account of the second of the s	Enter Current Contract End Date Prior to Amendment:, 20		
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change")		
Collective Purchase (Attach OSD approval, scop		AMENDMENT TYPE: (Check one option only. Attach d		
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurem		Amendment to Date, Scope or Budget (Attach updat Interim Contract (Attach justification for Interim Contra		
Emergency Contract (Attach justification for eme	rgency, scope, budget)			
Contract Employee (Attach Employment Status F X_ Other Procurement Exception (Attach authoriz		Other Procurement Exception (Attach authorizing lan	equage/justification and updated	
specific exemption or earmark, and exception justi	fication, scope and budget)	scope and budget)	O and O and a second second second per second second	
The Standard Contract Form Instructions and Corinto this Contract and are legally binding: (Check Services Commonwealth IT Terms and Conditions	ntractor Certifications and the foll ONE option):Commonwealth To	lowing Commonwealth Terms and Conditions documen erms and Conditions X Commonwealth Terms and Condi	tions For Human and Social	
in the state accounting system by sufficient appropria  X Rate Contract. (No Maximum Obligation) Attac	tions or other non-appropriated fund h details of all rates, units, calculation	norized performance accepted in accordance with the terms ds, subject to intercept for Commonwealth owed debts unde ons, conditions or terms and any changes if rates or terms a this contract (or <i>new</i> total if Contract is being amended). \$	er <u>815 CMR 9.00</u> .	
a PPD as follows: Payment issued within 10 days% PPD. If PPD percentages are left blank, identif (subsequent payments scheduled to support standar BRIEF DESCRIPTION OF CONTRACT PERFORMA	PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: _X agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by			
MGL provide social and support services to older add	ults, their families and caregivers. The contract will cover any rate adjustred. All approved obligations incurred	he annual award is determined by the number of elders per ment or increase during the 10-year period. Each municipal of prior to the latest signature date are intended to be part of the	municipality as per the most recent COA will complete an annual fiscal	
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contr	actor certify for this Contract, or Contract Amendment, that	Contract obligations:	
1. may be incurred as of the Effective Date (latest	signature date below) and no oblig	ations have been incurred prior to the Effective Date.		
2. may be incurred as of, 20, a date Li	ATER than the Effective Date below	and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	e Date.	
are authorized to be made either as settlement	payments or as authorized reimburs	w, and the parties agree that payments for any obligations in sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to the	f all obligations under this Contract	
CONTRACT END DATE: Contract performance sh amended, provided that the terms of this Contract a completing any negotiated terms and warranties, to a	CONTRACT END DATE: Contract performance shall terminate as of			
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference, herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only it made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.				
AUTHORIZING SIGNATURE FOR THE CONTRACTOR:		AUTHORIZING SIGNATURE FOR THE COMMONWE		
X:(Signature and Date Must Be Captured	Date: 3-3-22	X: D  (Signature and Date Must Be Captured A	ate:	
(Signature and Date Must Be Captured	At Time of Signature)	Control State Control of the Control		
Print Name: Sinc - Louise Scie	JYC.	Print Name:	<del></del>	
Print Title:		Print Title:		

N-19



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services

Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u> and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macs.nov/lipsc/sord-forms">https://www.macs.nov/lipsc/sord-forms</a>.

Forms are also posted at OSD Forms: https://www.mass				
CONTRACTOR LEGAL NAME: TOWN OF NORTHBOROUGH (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 63 MAIN ST, MA 01532-1937		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: ADRIENNE COST	Phone: 508-393-5035	Billing Address (if different):		
E-Mail: COA@TOWN.NORTHBOROUGH.MA.US	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191917	(40)	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001 .		MMARS Doc ID(s): 02082200000000000008		
(Note: The Address ID must be set up for EFT paym	ients.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 86	В	
_X_ NEW CONTRA	СТ	CONTRACT AMEND	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check or		Enter Current Contract End Date Prior to Amendment:	, 20 <u>.</u>	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change"		
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8		AMENDMENT TYPE: (Check one option only. Attach de		
Notice or RFR, and Response or other procureme		Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra		
Emergency Contract (Attach justification for emer		Contract Employee (Attach any updates to scope or b		
Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizing)		Other Procurement Exception (Attach authorizing lan		
specific exemption or earmark, and exception justif	fication, scope and budget)	scope and budget)		
into this Contract and are legally binding: (Check of Services Commonwealth IT Terms and Conditions	ONE option): Commonwealth Te	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Condit	tions For Human and Social	
in the state accounting system by sufficient appropria  X Rate Contract. (No Maximum Obligation) Attact	tions or other non-appropriated fund h details of all rates, units, calculation	norized performance accepted in accordance with the terms ds, subject to intercept for Commonwealth owed debts unde ons, conditions or terms and any changes if rates or terms at	r <u>815 CMR 9.00</u> . re being amended.)	
	THE RESIDENCE OF THE PERSON OF	this contract (or <i>new</i> total if Contract is being amended). \$ _		
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: _X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)				
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.				
		actor certify for this Contract, or Contract Amendment, that C	Contract obligations:	
		ations have been incurred <u>prior</u> to the Effective Date.	o Dato	
		and no obligations have been incurred prior to the Effective w, and the parties agree that payments for any obligations in		
are authorized to be made either as settlement to	payments or as authorized reimburs	sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to the	all obligations under this Contract	
amended, provided that the terms of this Contract a	CONTRACT END DATE: Contract performance shall terminate as of <u>June 30</u> , 20 <u>32</u> , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.			
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only it made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.				
AUTHORIZING SIGNATURE FOR THE CONTRACT		AUTHORIZING SIGNATURE FOR THE COMMONWE	ALTH:	
X: La Maria	Date: 2/17/22	X: /// Da	ate: 7/7/02.	
X:		(Signature and Date Must be Captured A	t time of Signature)	
Print Name: John W. Coderre		Print Title: What was at land one of	M Kernerthan	
X:				

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.mascomptroller.org/forms">https://www.mascomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mass	s.gov/lists/osd-forms.		ne oder i Bernatter i Washer
CONTRACTOR LEGAL NAME: TOWN OF NORTHBRIDGE (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 7 MAIN ST, MA 01588-2247		Business Mailing Address: 1 Ashburton PI, Boston	MA 02108
Contract Manager: KELLY BOL	Phone: 508-234-2002	Billing Address (if different):	
E-Mail: kbol@northbridgemass.org	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191919		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008	
(Note: The Address ID must be set up for EFT paym	ients.)	RFR/Procurement or Other ID Number: MGL c. 40 s.	8B
X NEW CONTRA	СТ	CONTRACT AMENI	OMENT
PROCUREMENT OR EXCEPTION TYPE: (Check or	Vanc 46 Va	Enter Current Contract End Date <u>Prior</u> to Amendment:	Section 1997
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scop Department Procurement (includes all Grants - 8	e, budget) 15 CMR 2 00) (Solicitation	AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.) Amendment to Date, Scope or Budget (Attach updated scope and budget)	
Notice or RFR, and Response or other procureme	ent supporting documentation)	Interim Contract (Attach justification for Interim Cont	
Emergency Contract (Attach justification for emer		Contract Employee (Attach any updates to scope or	
Contract Employee (Attach Employment Status F X_ Other Procurement Exception (Attach authorize	ing language, legislation with	Other Procurement Exception (Attach authorizing la	anguage/justification and updated
specific exemption or earmark, and exception justi	fication, scope and budget)	scope and budget)	
The Standard Contract Form Instructions and Cor into this Contract and are legally binding: (Check Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth T	Ilowing Commonwealth Terms and Conditions docume erms and Conditions X Commonwealth Terms and Con	nt are incorporated by reference ditions For Human and Social
COMPENSATION: (Check ONE option): The Departr	nent certifies that payments for aut	horized performance accepted in accordance with the term	s of this Contract will be supported
in the state accounting system by sufficient appropria	tions or other non-appropriated fun	ds, subject to intercept for Commonwealth owed debts uncons, conditions or terms and any changes if rates or terms	ler 815 CMR 9.00.
Maximum Obligation Contract Enter total maxim	mum obligation for total duration of	this contract (or <b>new</b> total if Contract is being amended). \$	in boing amonasa.
		h EFT 45 days from invoice receipt. Contractors requesting	
a PPD as follows: Payment issued within 10 days	% PPD: Payment issued within 1:	5 days % PPD; Payment issued within 20 days % F	PPD; Payment issued within 30 days
% PPD. If PPD percentages are left blank, identify reason: X agree to standard 45 day cyclestatutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment			
(subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the			
Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent			
MGL provide social and support services to older adu	ilts, their families and caregivers, T	he annual award is determined by the number of elders pe ment or increase during the 10-year period. Each municipa	r municipality as per the most recent
report describing how these grant funds were applied	. All approved obligations incurred	prior to the latest signature date are intended to be part of	this agreement and the amount of
the prior obligation for year one is funded in the FY22	award. The deadline to submit the	e signed contract is 6/30/22. MA #3.	
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contr	ractor certify for this Contract, or Contract Amendment, tha	t Contract obligations:
1. may be incurred as of the Effective Date (latest	signature date below) and <u>no</u> oblig	gations have been incurred <u>prior</u> to the Effective Date. v and <u>no</u> obligations have been incurred <u>prior</u> to the Effect	tive Date
Z. may be incurred as of, 20, a date L/	re PRIOR to the Effective Date below	ow, and the parties agree that payments for any obligations	incurred prior to the Effective Date
are authorized to be made either as settlement to	payments or as authorized reimburg	sement payments, and that the details and circumstances releases the Commonwealth from further claims related to	of all obligations under this Contract
CONTRACT END DATE: Contract performance sh	all terminate as of <u>June 30</u> , 20	0 32 , with no new obligations being incurred after this	date unless the Contract is properly
amended, provided that the terms of this Contract a	and performance expectations and	obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during	of resolving any claim or dispute, for any lapse between amendments.
1 0 1			
CERTIFICATIONS: Notwithstanding verbal or other	representations by the parties, the quatory of the Contractor, the Dep	e "Effective Date" of this Contract or Amendment shall b artment, or a later Contract or Amendment Start Date spe	ecified above, subject to any required
approvals. The Contractor certifies that they have ac	cessed and reviewed all documents	s incorporated by reference as electronically published and	the Contractor makes all certifications
required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference			
berein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form			
Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department a			nguage stricken by a Department as
unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 SMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective			
Contract.			
AUTHORIZING SIGNATURE FOR THE CONTRACTOR:  AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			EALTH:
X:	. Date: 3/1/22	X:	Date: 9/0402
X:		(Signature and Date Must Be Captured	At Time of Signature)
Print Name: HAAM COULDETTE	<u> </u>	Print Name: 1791 Market	- 1 / / / / / / / / / / / / / / / / / /
X:			



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions for Human and Social Services</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.maccomptroller.org/forms.">https://www.maccomptroller.org/forms.</a>
Forms are also posted at OSD Forms: <a href="https://www.maccomptroller.org/forms.">https://www.maccomptroller.org/forms.</a>

Forms are also posted at OSD Forms: https://www.mas	s.gov/lists/osd-forms.		
CONTRACTOR LEGAL NAME: TOWN OF NORTHFI (and d/b/a):	ELD	COMMONWEALTH DEPARTMENT NAME: Executive OMMARS Department Code: ELD	Office of Elder Affairs
Legal Address: (W-9, W-4): 69 MAIN ST, MA 01360-1017		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: COLLEEN LETOURNEAU	Phone: 413-498-2901	Billing Address (if different):	Total Company
E-Mail: SeniorCenter@northfieldma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191921	1.500	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008	1 Million and the second
(Note: The Address ID must be set up for EFT paym	nents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 88	B
_X_ NEW CONTRA	СТ	CONTRACT AMENDA	
PROCUREMENT OR EXCEPTION TYPE: (Check on		Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scope		AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)	
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement		Amendment to Date, Scope or Budget (Attach update	
Emergency Contract (Attach justification for emer	rgency, scope, budget)	Interim Contract (Attach justification for Interim Contra Contract Employee (Attach any updates to scope or but	
Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizi		Other Procurement Exception (Attach authorizing language)	
specific exemption or earmark, and exception justif		scope and budget)	guagorjasanseensa
into this Contract and are legally binding: (Check C Services Commonwealth IT Terms and Conditions	ONE option): <u>Commonwealth To</u>	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	tions For Human and Social
in the state accounting system by sufficient appropriat X Rate Contract. (No Maximum Obligation) Attach	tions or other non-appropriated fund h details of all rates, units, calculation	horized performance accepted in accordance with the terms ds, subject to intercept for Commonwealth owed debts under ons, conditions or terms and any changes if rates or terms are this contract (or <b>new</b> total if Contract is being amended). \$_	r <u>815 CMR 9.00.</u>
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: _X_agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.			
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contra	actor certify for this Contract, or Contract Amendment, that C	Contract obligations:
1. may be incurred as of the Effective Date (latest s			= <b>E</b>
		r and <u>no</u> obligations have been incurred <u>prior</u> to the Effective w, and the parties agree that payments for any obligations in	1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 ( 1 (
are authorized to be made either as settlement p	payments or as authorized reimburs	sement payments, and that the details and circumstances of	all obligations under this Contract
		releases the Commonwealth from further claims related to the	AND THE THE PERSON OF THE PERS
CONTRACT END DATE: Contract performance shall terminate as of <u>June 30</u> , 20 <u>32</u> , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.			
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, he Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.			
AUTHORIZING SIGNATURE FOR THE CONTRACT	7 1	AUTHORIZING SIGNATURE FOR THE COMMONWEA	ALTH: mk/22
x: Choples Remy	Date: 217/2022	X: Dai  (Signature and Date Must Be Captured At	te: 1/9/0C
(Signature and Date Must Be Captured At Time of Signature)		Print Name:	Time of Signature)
1,30,4,000,3,000,000,000,000		Print Title: Whelevet lands m	J. Meworthy



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mas	s.gov/lists/osd-forms.		
CONTRACTOR LEGAL NAME: TOWN OF NORTON (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 70 E MAIN ST, MA 02766-2310		Business Mailing Address: 1 Ashburton PI, Boston	MA 02108
Contract Manager: ELIZABETH ROSSI Phone: 508-285-0235		Billing Address (if different):	
E-Mail: ETaylorRossi@nortonmaus.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191922		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s.	8B
X NEW CONTRA	СТ	CONTRACT AMENI	DMENT
PROCUREMENT OR EXCEPTION TYPE: (Check or	1.002 2.0000	Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated	7.00	Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8		AMENDMENT TYPE: (Check one option only. Attach	
Notice or RFR, and Response or other procureme		Amendment to Date, Scope or Budget (Attach upd Interim Contract (Attach justification for Interim Cont	
Emergency Contract (Attach justification for emer		Contract Employee (Attach any updates to scope or	
Contract Employee (Attach Employment Status F _X_ Other Procurement Exception (Attach authorizi		Other Procurement Exception (Attach authorizing la	
specific exemption or earmark, and exception justif	ication, scope and budget)	scope and budget)	
The Standard Contract Form Instructions and Coninto this Contract and are legally binding: (Check Contracts Commonwealth IT Terms and Conditions	ONE option): Commonwealth T	llowing Commonwealth Terms and Conditions docume erms and Conditions X Commonwealth Terms and Con	nt are incorporated by reference ditions For Human and Social
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be support in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.  X Rate Contract. (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)  Maximum Obligation Contract. Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended).			der <u>815 CMR 9.00</u> . are being amended.)
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: X agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)			
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of to Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most reconcurs data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fish report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.			
		ractor certify for this Contract, or Contract Amendment, that gations have been incurred prior to the Effective Date.	t Contract obligations:
		v and <u>no</u> obligations have been incurred <u>prior</u> to the Effect	
are authorized to be made either as settlement p	payments or as authorized reimburs	ow, and the parties agree that payments for any obligations sement payments, and that the details and circumstances releases the Commonwealth from further claims related to	of all obligations under this Contract
amended, provided that the terms of this Contract a	and performance expectations and	0_32, with no new obligations being incurred after this obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during	of resolving any claim or dispute, for
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only it made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE CONTRACTOR:  AUTHORIZING SIGNATURE FOR THE CONTRACTOR:			
X:		Date: <u>3/9/27</u> . At Time of Signature)	
			/

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> or the <u>Commonwealth IT Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.macomptroller.org/forms">https://www.macomptroller.org/forms</a>.

Forms are also posted at OSD Forms: https://www.mas.	s.gov/lists/osd-forms.			
CONTRACTOR LEGAL NAME: TOWN OF NORWELL		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
(and d/b/a);		Business Mailing Address: 1 Ashburton PI, Boston M	IA 02108	
Legal Address: (W-9, W-4): 345 MAIN ST, MA 02061 Contract Manager: SUSAN CURTIN	Phone: 781-659-7878	Billing Address (if different):		
E-Mail: scurtin@townofnorwell.net	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191923	I dx.	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 020822000000000000008	TAN ON THE STATE	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	R	
		CONTRACT AMEND	ALIGNIC MODELLA CONTROL CONTRO	
_X_ NEW CONTRA PROCUREMENT OR EXCEPTION TYPE: (Check or	9400	Enter Current Contract End Date <u>Prior</u> to Amendment:, 20		
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change"		
Collective Purchase (Attach OSD approval, scope	e, budget)		AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)	
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement	15 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach updat	ed scope and budget)	
Emergency Contract (Attach justification for emergency Contract)	rgency, scope, budget)	Interim Contract (Attach justification for Interim Contra	act and updated scope/budget)	
Contract Employee (Attach Employment Status F	orm, scope, budget)	Contract Employee (Attach any updates to scope or b Other Procurement Exception (Attach authorizing lar	nguage()	
X Other Procurement Exception (Attach authorizing specific exemption or earmark, and exception justice)	fication, scope and budget)	scope and budget)	igaago/jaosiiioaiio/i ana apasica	
The Standard Contract Form Instructions and Con	ntractor Certifications and the fol ONE option):Commonwealth T	llowing Commonwealth Terms and Conditions documen Ferms and Conditions X Commonwealth Terms and Condi	t are incorporated by reference tions For Human and Social	
COMPENSATION: (Check ONE option): The Departr in the state accounting system by sufficient appropria X Rate Contract. (No Maximum Obligation) Attact	ment certifies that payments for aut tions or other non-appropriated fun n details of all rates, units, calculati	thorized performance accepted in accordance with the terms nds, subject to intercept for Commonwealth owed debts unde ions, conditions or terms and any changes if rates or terms a	er <u>815 CMR 9.00</u> . are being amended.)	
		this contract (or <i>new</i> total if Contract is being amended). \$		
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days % PPD; Payment issued within 15 days % PPD; Payment issued within 20 days % PPD; Payment issued within 30 days % PPD. If PPD percentages are left blank, identify reason: X agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)				
BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA) of the Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs established by MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most recent census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual fiscal report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the prior obligation for year one is funded in the FY22 award. The deadline to submit the signed contract is 6/30/22. MA #3.				
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Cont	ractor certify for this Contract, or Contract Amendment, that	Contract obligations:	
1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date.				
2. may be incurred as of, 20, a date LATER than the Effective Date below and <u>no</u> obligations have been incurred <u>prior</u> to the Effective Date.  X 3. were incurred as of, 201, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.				
CONTRACT END DATE: Contract performance shall terminate as of June 30, 20, 32, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contract Form Instructions and grees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.  AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:  X:  Date:  Signature and Date Must Be Captured At Time of Signature)  Print Name:  Print Title:  Print Title:				
Peter J. Mo	CIETYV (Updated 7/22	2/2021) Page 1 of 92	N. 154	

This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services
Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made
on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions</u>
and <u>Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions</u> which are incorporated
by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <a href="https://www.maccomptroller.org/forms">https://www.maccomptroller.org/forms</a>.

Forms: are also posted at OSD Forms: <a href="https://www.maccomptroller.org/forms">https://www.maccomptroller.org/forms</a>.

by reference herein. Additional non-conflicting terms may Forms are also posted at OSD Forms: https://www.mass	y be added by Attachment. Contracts.gov/lists/osd-forms.	tors are required to access published forms at CTR Forms: n	ttps://www.macomptroller.org/forms.
CONTRACTOR LEGAL NAME: TOWN OF NORWOOD (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 566 WASHINGTON ST, MA 02062-2203		Business Mailing Address: 1 Ashburton PI, Boston M	IA 02108
Contract Manager: KERRI MCCARTHY	Phone: 781-762-1201	Billing Address (if different):	
E-Mail: kmccarthy@norwoodma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191924	Tuki	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000008	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	R
Market Control of the		CONTRACT AMENDMENT	
_X_ NEW CONTRA PROCUREMENT OR EXCEPTION TYPE: (Check or	T-D HORSES I	Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$, (or "no change")	
Collective Purchase (Attach OSD approval, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attach d	etails of amendment changes.)
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement)	15 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach update	ed scope and budget)
Emergency Contract (Attach justification for emer	gency, scope, budget)	Interim Contract (Attach justification for Interim Contra	act and updated scope/budget)
Contract Employee (Attach Employment Status F	orm, scope, budget)	Contract Employee (Attach any updates to scope or b Other Procurement Exception (Attach authorizing lar	nuaget)
X Other Procurement Exception (Attach authorizi		scope and budget)	iguago/jaosilloasion ana apaasoa
The Standard Contract Form Instructions and Con	tractor Certifications and the fol DNE option):Commonwealth T	lowing Commonwealth Terms and Conditions documen erms and Conditions X Commonwealth Terms and Condi	t are incorporated by reference tions For Human and Social
COMPENSATION: (Check ONE option): The Departr	nent certifies that payments for aut	norized performance accepted in accordance with the terms	of this Contract will be supported
X Rate Contract. (No Maximum Obligation) Attact	n details of all rates, units, calculation	ds, subject to intercept for Commonwealth owed debts unde ons, conditions or terms and any changes if rates or terms a	re being amended.)
	The second secon	this contract (or <i>new</i> total if Contract is being amended). \$	
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments mus a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days% PPD; Payment issued within 20 days% PPD; Payment issued within% PPD. If PPD percentages are left blank, identify reason: _X_ agree to standard 45 day cycle statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)  BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT: This 10-year contract will cover grant funds to municipal Councils on Aging (COA Commonwealth authorized through the annual GAA and other sources. The activity performance period for year one of this contract is 7/1/2021-6/30/2022. The COAs establist MGL provide social and support services to older adults, their families and caregivers. The annual award is determined by the number of elders per municipality as per the most census data, at a current rate of \$12 per person. This contract will cover any rate adjustment or increase during the 10-year period. Each municipal COA will complete an annual report describing how these grant funds were applied. All approved obligations incurred prior to the latest signature date are intended to be part of this agreement and the amount of the part of this agreement and the amount of the part of this agreement and the amount of the part of this agreement and the amount of the part of this agreement and the amount of the part of this agreement and the amount of the part of this agreement and the amount of the part of this agreement and the amount of the part of this agreement and the amount of the part of the part of this agreement and the amount of the part of			29, § 23A); only initial payment pal Councils on Aging (COA) of the 0/2022. The COAs established by municipality as per the most recent COA will complete an annual fiscal
the prior obligation for year one is funded in the FY22  ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contr	actor certify for this Contract, or Contract Amendment, that	Contract obligations:
1, may be incurred as of the Effective Date (latest	signature date below) and no oblig	ations have been incurred prior to the Effective Date.	
2. may be incurred as of, 20, a date LA	TER than the Effective Date below	and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	e Date.
are authorized to be made either as settlement r	payments or as authorized reimburs	w, and the parties agree that payments for any obligations is sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to t	fall obligations under this Contract
CONTRACT END DATE: Contract performance shall terminate as of			ny lapse between amendments.
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject any req approvals. The Contractor certifices that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certificar required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required document upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by refer herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response of Contract.  AUTHORIZING SIGNATURE-FOR THE CONTRACTOR:  AUTHORIZING SIGNATURE-FOR THE CONTRACTOR:			ifled above, subject to any required the Contractor makes all certifications provide any required documentation tached or incorporated by reference to Form, the Standard Contract Form guage stricken by a Department as and the Contractor's Response only if lower costs, or a more cost effective
X:		X:	
Print Title: Gerew Mwall.		Print Title: Netter of runwalts un	1 December 5084