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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: https://www.mass.gov/lists/osd-forms.

Forms are also posted at OSD Forms: https://www.mass	s.gov/lists/osd-forms.		Marin Professor
CONTRACTOR LEGAL NAME: TOWN OF OAKHAM (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): PO BOX 57, MA 01068-0057		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: LUCY TESSNAU Phone: 508-882-3358		Billing Address (if different):	
E-Mail: coa@oakham-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191927		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	СТ	CONTRACT AMEND	Access Application
PROCUREMENT OR EXCEPTION TYPE: (Check on	A00 00000	Enter Current Contract End Date <u>Prior</u> 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 d	
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach updat Interim Contract (Attach justification for Interim Contra	
Emergency Contract (Attach justification for emergency Contract)	gency, scope, budget)	Contract Employee (Attach any updates to scope or b	
Contract Employee (Attach Employment Status F _X_ Other Procurement Exception (Attach authorizi	orm, scope, budget)	Other Procurement Exception (Attach authorizing lar	nguage/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 Carrices Commonwealth IT Terms and Conditions	ONE option): Commonwealth T	lowing Commonwealth Terms and Conditions document ferms and Conditions X Commonwealth Terms and Condi	t are incorporated by reference 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 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).			er <u>815 CMR 9.00</u> .
		h EFT 45 days from invoice receipt. Contractors requesting a	accelerated payments must identify
a PPD as follows: Payment issued within 10 days	% PPD: Payment issued within 1:	5 days % PPD; Payment issued within 20 days % PF	PD; 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	NCE or DEASON FOR AMENDA	Prompt Pay Discounts Policy.) ENT: This 10-year contract will cover grant funds to municip	nal Councils on Aging (COA) of the
Commonwealth authorized through the annual GAA a	and other sources. The activity perf	formance period for year one of this contract is 7/1/2021-6/30	0/2022. The COAs established by
MGL provide social and support services to older adu	Its, their families and caregivers. T	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	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	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 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.	us Dete
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, and the parties agree that payments for any obligations i	nourred 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 of	f all 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.
amended provided that the terms of this Contract a	and performance expectations and	0 32 , with no new obligations being incurred after this of obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during a	resolving any claim or dispute, for
CERTIFICATIONS: Notwithstanding verbal or other	representations by the parties, the	e "Effective Date" of this Contract or Amendment shall be	the latest date that this Contract or
Amendment has been executed by an authorized significant	gnatory of the Contractor, the Department	artment, or a later Contract or Amendment Start Date spec	cified above, subject to any required
approvals. The Contractor certifies that they have accepting a window the Standard Contract Form Instruction	cessed and reviewed all documents	s incorporated by reference as electronically published and the der the pains and penalties of perjury, and further agrees to	provide any required documentation
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
berein according to the following hierarchy of document precedence, the applicable Con		mmonwealth Terms and Conditions, this Standard Contrac	t Form, the Standard Contract Form
Instructions and Contractor Certifications, the Request for Response (RFR) or other unacceptable, and additional negotiated terms, provided that additional negotiated terms.		solicitation, the Contractor's Response (excluding any lang s will take precedence over the relevant terms in the RFR at	nd the Contractor's Response only if
made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended Rf		any amended RFR or Response terms result in best value,	lower costs, or a more cost effective
Contract.		AUTHORIZING GIGNATURE FOR THE COMMONWE	ALTU.
AUTHORIZING SIGNATURE FOR THE CONTRACT		AUTHORIZING SIGNATURE FOR THE COMMONWE	ALIN: 13/12/2
X. Vonla Noom (Signature and Date Must Be Captured	. Date: <u>d/22/d/2</u> 22	X:	ate: // /// .
		X:	at raile of orginature)
Print Name: DONATO BY HANDAROS K Print Title: DICE CHAIR - BOARD	of Colodon	Print Title: Division of Junivaries	and According
Find title: Dice Citatio - 100kmb	O L Trans. A	THE THE PERSON OF COUNTY OF	



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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
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Forms are also posted at OSD Forms: https://www.mas	s.gov/lists/osd-forms.		
CONTRACTOR LEGAL NAME: TOWN OF ORANGE (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 6 PROSPECT ST, MA 01364-1133		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
		Billing Address (if different):	
E-Mail: tgaudet@townoforange.org	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191929		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 PROCUREMENT OR EXCEPTION TYPE: (Check or	ne option only)	CONTRACT AMENDMENT Enter Current Contract End Date <u>Prior</u> to Amendment:, 20 Enter Amendment Amount: \$ (or "no change")	
Statewide Contract (OSD or an OSD-designated Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procuremed Emergency Contract (Attach justification for emel Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizing specific exemption or earmark, and exception justification in the contract of the contract in the	e, budget) 15 CMR 2.00) (Solicitation ent supporting documentation) rgency, scope, budget) form, scope, budget) ing language, legislation with fication, scope and budget)	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	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 appropriat X Rate Contract. (No Maximum Obligation) Attact	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 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). \$_	re being amended.)
a PPD as follows: Payment issued within 10 days _ % PPD. If PPD percentages are left blank, identify (subsequent payments scheduled to support standard	_% PPD; Payment issued within 15 y reason: <u>X</u> agree to standard 45 d EFT 45 day payment cycle. See F	h EFT 45 days from invoice receipt. Contractors requesting a 5 days % PPD; Payment issued within 20 days % PF day cycle statutory/legal or Ready Payments (M.G.L. c. Prompt Pay Discounts Policy.)	29, § 23A); only initial payment
Commonwealth authorized through the annual GAA a MGL provide social and support services to older adu	and other sources. The activity perfo ilts, their families and caregivers. The contract will cover any rate adjustr I. All approved obligations incurred	ENT: This 10-year contract will cover grant funds to municipormance period for year one of this contract is 7/1/2021-6/30 the annual award is determined by the number of elders perment or increase during the 10-year period. Each municipal prior to the latest signature date are intended to be part of 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	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.	5.4
X 3. were incurred as of July 1, 20 21, a dat	e PRIOR to the Effective Date belo	vand <u>no</u> obligations have been incurred <u>prior</u> to the Effectiv 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 t	ncurred prior to the Effective Date fall 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 require approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certification 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 at 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. AUTHORIZING SIGNATURE FOR THE COMMONWEALTH: X: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH: X: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			
X: Walker A Date:		at Time of Signature)	



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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> for <u>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: https://www.macomptroller.org/forms.
Forms are also posted at OSD Forms: https://www.macomptroller.org/forms.

CONTRACTOR LEGAL NAME: TOWN OF ORLEANS		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs	
(and d/b/a):		MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 19 SCHOOL RD, MA 02653-3609		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: JUDI WILSON	Phone: 508-255-6333	Billing Address (if different):	Phone: 617-222-7419
E-Mail: jwilson@town.orleans.ma.us Contractor Vendor Code: VC6000191930	Fax:	Contract Manager: Stacey Anne O'Connell E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
MALE V. BAN FOR ANGELOW SHEET BY MAN SECTION FROM THE PARTY OF THE PAR		MMARS Doc ID(s): 02082200000000000000	Fax. 017-121-3300
Vendor Code Address ID (e.g. "AD001"): AD 001. (Note: The Address ID must be set up for EFT paym	nents.)		,
		RFR/Procurement or Other ID Number: MGL c. 40 s. 8E	
X NEW CONTRA PROCUREMENT OR EXCEPTION TYPE: (Check or		CONTRACT AMENDMENTED FOR CONTRACT AMENDMENTS FOR CONTRACT FO	
Statewide Contract (OSD or an OSD-designated	(#) <u>(</u> 1###)	Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attach de	
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 Contract 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 lang	
specific exemption or earmark, and exception justil	fication, scope and budget)	scope and budget)	
		lowing Commonwealth Terms and Conditions document	
Services Commonwealth IT Terms and Conditions		erms and Conditions X Commonwealth Terms and Conditi	Olis For Fluthan and Social
		norized performance accepted in accordance with the terms of	
		ds, subject to intercept for Commonwealth owed debts under ons, conditions or terms and any changes if rates or terms an	
		this contract (or <i>new</i> total if Contract is being amended). \$ _	·
PROMPT PAYMENT DISCOUNTS (PPD): Commonv	wealth payments are issued through	n EFT 45 days from invoice receipt. Contractors requesting ac	celerated payments must identify
a PPD as follows: Payment issued within 10 days _	_% PPD; Payment issued within 15	5 days % PPD; Payment issued within 20 days % PPI	D; Payment issued within 30 days
% PPD. If PPD percentages are left blank, identify (subsequent payments scheduled to support standard		day cycle statutory/legal or Ready Payments (M.G.L. c. 2 Prompt Pay Discounts Policy.)	29, § 23A); only initial payment
BRIEF DESCRIPTION OF CONTRACT PERFORMA	NCE or REASON FOR AMENDME	ENT: This 10-year contract will cover grant funds to municipa	
		ormance period for year one of this contract is 7/1/2021-6/30/ ne annual award is determined by the number of elders per m	
		nent or increase during the 10-year period. Each municipal C	
report describing how these grant funds were applied the prior obligation for year one is funded in the FY22		prior to the latest signature date are intended to be part of this	s agreement and the amount of
		actor certify for this Contract, or Contract Amendment, that C	ontract obligations:
	the state of the s	ations have been incurred prior to the Effective Date.	Security (Accessed to the Control of Control
		and \underline{no} obligations have been incurred \underline{prior} to the Effective	
		w, and the parties agree that payments for any obligations inc ement payments, and that the details and circumstances of a	
		releases the Commonwealth from further claims related to the	
CONTRACT END DATE: Contract performance sha	ıll terminate as of <u>June 30</u> , 20	32 , with no new obligations being incurred after this da	te unless the Contract is properly
amended, provided that the terms of this Contract a	nd performance expectations and	obligations shall survive its termination for the purpose of normance, reporting, invoicing or final payments, or during any	esolving any claim or dispute, for
		"Effective Date" of this Contract or Amendment shall be the artment, or a later Contract or Amendment Start Date specifi	
		incorporated by reference as electronically published and the	
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 Comr		nmonwealth Terms and Conditions, this Standard Contract F	Form, the Standard Contract Form
Instructions and Contractor Certifications, the Request for Response (RFR) or other so		olicitation, the Contractor's Response (excluding any langu- will take precedence over the relevant terms in the RFR and	age 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 of 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.		wer costs, or a more cost effective	
Contract.			I TU:
AUTHORIZING SIGNATURE FOR THE CONTRACT	2//	AUTHORIZING SIGNATURE FOR THE COMMONWEA	1 1
X: (Signature and Date Must Be Captured	At Time of Signature)	X:	e: UI VIVE.
Print Name: 3 8h 16/6	\ '		
Print Title: Town A Am aistrator.		Print Name: NWW 125 MMW	Alterorulay BOSA

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forms are also posted at OSD Forms: https://www.mas	s.gov/lists/osd-forms.		
CONTRACTOR LEGAL NAME: TOWN OF OTIS (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 1 N MAIN RD, MA 01253-9800		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: RALPH GLEASON	Phone: 413-269-0100	Billing Address (if different):	
E-Mail: seniorsotisma@gmail.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191931		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
RFR/Procurement or Other ID Number: MGL c. 40 s. 8B X NEW CONTRACT		ment, 20) etails of amendment changes.) ed scope and budget) act and updated scope/budget) sudget) sudget) sudget/justification and updated trace incorporated by reference tions For Human and Social of this Contract will be supported	
PROMPT PAYMENT DISCOUNTS (PPD): Common 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 Commonwealth authorized through the annual GAA and MGL provide social and support services to older addresses to day at a current rate of \$12 per person. This	wealth payments are issued through _% PPD; Payment issued within 15 y reason: X_agree to standard 45 d EFT 45 day payment cycle. See PANCE or REASON FOR AMENDME and other sources. The activity perfoults, their families and caregivers. The contract will cover any rate adjustred. All approved obligations incurred page 1.	ENT: This 10-year contract will cover grant funds to municip ormance period for year one of this contract is 7/1/2021-6/30 ne annual award is determined by the number of elders per in ment or increase during the 10-year period. Each municipal of the orior to the latest signature date are intended to be part of the	29, § 23A); only initial payment ball Councils on Aging (COA) of the D/2022. The COAs established by municipality as per the most recent COA will complete an annual fiscal
ANTICIPATED START DATE: (Complete ONE opti1. may be incurred as of the Effective Date (latest2. may be incurred as of, 20, a date L	on only) The Department and Control signature date below) and <u>no</u> obligant that the Effective Date below the PRIOR to the Effective Date below payments or as authorized reimburs. Acceptance of payments forever that terminate as of the June 30 20	actor certify for this Contract, or Contract Amendment, that of ations have been incurred <u>prior</u> to the Effective Date. I and <u>no</u> obligations have been incurred <u>prior</u> to the Effective, and the parties agree that payments for any obligations in the payments, and that the details and circumstances of the releases the Commonwealth from further claims related to the commonwealth of the prior of the payments.	re Date. ncurred prior to the Effective Date f all obligations under this Contract hese obligations. late 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 X: 10 and 10 age (Signature and Date Must Be Captured Print Name: Brand J. Page Print Title: Town Haminist	_ Date: <u>3</u> .2.2022 At Time of Signature)	AUTHORIZING SIGNATURE FOR THE COMMONWE X:	ate: <u>3/9/22</u> .



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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>
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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.macomptroller.org/forms.

CONTRACTOR LEGAL NAME: TOWN OF OXFORD		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs		
(and d/b/a):		MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 181 MAIN ST, MA 01540-2352		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: LAURA WILSON	Phone: 508-987-6000	Billing Address (if different):		
E-Mail: lwilson@oxfordma.us	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191932		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	nents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8E	3	
X NEW CONTRA PROCUREMENT OR EXCEPTION TYPE: (Check or	ne option only)	CONTRACT AMENDMENT CONTRACT AMENDMENT CONTRACT End Date Prior to Amendment: (or "no change")	, 20_ <u></u> .	
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)		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)		
The Standard Contract Form Instructions and Con	ntractor Certifications and the follows option):Commonwealth To	owing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Condit	are incorporated by reference ions For Human and Social	
in the state accounting system by sufficient appropria 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 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).			
a PPD as follows: Payment issued within 10 days % PPD, If PPD percentages are left blank, identify	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 PERFORMA Commonwealth authorized through the annual GAA a MGL provide social and support services to older adu census data at a current rate of \$12 per person. This	NCE or REASON FOR AMENDME and other sources. The activity perfults, their families and caregivers. The contract will cover any rate adjustner. All approved obligations incurred	ENT: This 10-year contract will cover grant funds to municip ormance period for year one of this contract is 7/1/2021-6/30 ne annual award is determined by the number of elders per re- nent or increase during the 10-year period. Each municipal Corior to the latest signature date are intended to be part of this	/2022. The COAs established by municipality as per the most recent COA will complete an annual fiscal	
ANTICIPATED START DATE: (Complete ONE option 1. may be incurred as of the Effective Date (latest	on only) The Department and Contra signature date below) and <u>no</u> oblig	actor certify for this Contract, or Contract Amendment, that C ations have been incurred prior to the Effective Date.		
X 3, were incurred as of July 1, 20 21, a dat	e PRIOR to the Effective Date below	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 the ement 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. AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:				
X:			tte: 110 1100 . t Time of Signature)	

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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.

Forms are also posted at OSD Forms: https://www.mass	s.gov/iists/osa-torms.		
CONTRACTOR LEGAL NAME: TOWN OF PALMER (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 4417 MAIN ST, MA 01069-6901		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: MARLENE JOHNSON	Phone: 413-283-2670	Billing Address (if different):	
E-Mail: mjohnson@townofpalmer.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191934		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	В
X NEW CONTRA		CONTRACT AMEND	
PROCUREMENT OR EXCEPTION TYPE: (Check or	and the state of t	Enter Current Contract End Date Prior to Amendment:	, 20 <u>.</u>
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 de	
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra	act and updated scope/budget)
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	orm, scope, budget) ng language, legislation with	Other Procurement Exception (Attach authorizing lan	iguage/justification and updated
specific exemption or earmark, and exception justing	fication, scope and budget)	scope and budget)	
The Standard Contract Form Instructions and Cor into this Contract and are legally binding: (Check ServicesCommonwealth IT Terms and Conditions	ONE option): <u>Commonwealth T</u>	lowing Commonwealth Terms and Conditions document forms and Conditions _X _Commonwealth Terms and Conditions	t are incorporated by reference tions For Human and Social
COMPENSATION: (Check ONE option): The Departr	ment certifies that payments for aut	horized performance accepted in accordance with the terms	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 unde	r 815 CMR 9.00.
X Rate Contract. (No Maximum Obligation) Attack	n details of all rates, units, calculation of	ons, conditions or terms and any changes if rates or terms a this contract (or <i>new</i> total if Contract is being amended). \$	re being amended.)
			ccelerated payments must identify
a DDD on follower Dayment 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 % PP	D; Payment issued within 30 days
% PPD If PPD percentages are left blank, identify	v reason: X agree to standard 45	day cycle statutory/legal or Ready Payments (IVI.G.L. C.	29, § 23A); only initial payment
(subsequent payments scheduled to support standard	d EFT 45 day payment cycle. See l	Prompt Pay Discounts Policy.) ENT: This 10-year contract will cover grant funds to municip	
Commonwealth authorized through the annual GAA a	and other sources. The activity per	formance period for year one of this contract is 7/1/2021-6/30	1/2022. The COAs established by
MOIid- social and support convices to older adu	Ite their families and caregivers I	he annual award is determined by the number of elders per	municipality as per the most recent
report describing how these grant funds were applied	. All approved obligations incurred	ment or increase during the 10-year period. Each municipal or prior 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 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 oblig	gations have been incurred <u>prior</u> to the Effective Date.	e Date
V 2 insurred as of July 1 20 21 a dat	a PRIOR to the Effective Date belo	v and <u>no</u> obligations have been incurred <u>prior</u> to the Effectiv bw, and the parties agree that payments for any obligations in	ncurred prior to the Effective Date
are authorized to be made either as settlement to	navments or as authorized reimbur	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 tr	nese obligations.
CONTRACT END DATE: Contract performance sh	all terminate as of <u>June 30</u> , 2	0_32, with no new obligations being incurred after this d	tate unless the Contract is properly resolving any claim or dispute for
amended, provided that the terms of this Contract a	and performance expectations and allow any close out or transition per	l obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during a	ny lapse between amendments.
completing any negotiated terms and warranties, to a CERTIFICATIONS: Notwithstanding verbal or other	r representations by the parties, the	formance, reporting, invoicing or final payments, or during all e "Effective Date" of this Contract or Amendment shall be partment, or a later Contract or Amendment Start Date speci	the latest date that this Contract or ified 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	provide any required documentation
the summent committees and agrees the	t all tarme governing performance	of this Contract and doing business in Massachusells are all	lacilled of illicorporated by reference
herein according to the following hierarchy of document precedence, the applicable Commo Instructions and Contractor Certifications, the Request for Response (RFR) or other solicities.		ommonwealth Terms and Conditions, this Standard Contract solicitation, the Contractor's Response (excluding any language)	quage stricken by a Department as
A to the state of		is will take precedence over the relevant terms in the KFK at	in the contractors 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 costs.		lower costs, or a more cost effective	
Contract.	TOP:	AUTHORIZING SIGNATURE FOR THE COMMONWE	ALTH: , ,
AUTHORIZING SIGNATURE FOR THE CONTRAC	2/22/2002	v. Ma In	ate: 9/9/22
X: (Signature and Date Must Be Captured	At Time of/Signature)	X:	At Time of Signature)
Print Name:	#	Print Name: AWM Bellman	
Print Title:	2 0	Print Title: Prince law of contracts a	MACUNATA
10WH Munice		· •	



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: https://www.maccomptroller.org/forms.

Forms are also posted at OSD Forms: https://www.mass	s.gov/iists/osd-torms.		erati Talandari aran a
CONTRACTOR LEGAL NAME: TOWN OF PAXTON (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 697 PLEASANT ST, MA 01612-1082		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: CINDY LOVE	Phone: 508-756-2833	Billing Address (if different):	
E-Mail: clove@townofpaxton.net	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191936		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 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 Commonwealth Terms and Conditions Services Commonwealth IT Terms and Conditions Commonwealth Terms and Conditions Services Commonwealth IT Terms and Conditions Enter Current Contract End Date Prior to Amendment:		MENT	
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).			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 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, 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 claims related to these obligations.			e Date. ncurred prior to the Effective Date all obligations under this Contract nese 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 certifications 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 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:			



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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.maccomptroller.org/forms.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.			
CONTRACTOR LEGAL NAME: CITY OF PEABODY (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 24 LOWELL ST, MA 01960-5440		Business Mailing Address: 1 Ashburton PI, Boston	MA 02108
Contract Manager: CAROLYN WYNN Phone: 978-531-2254		Billing Address (if different):	
E-Mail: cwynn@peabodycoa.org	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192125		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.	8B
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into this Contract and are legally binding: (Check C Services Commonwealth IT Terms and Conditions COMPENSATION: (Check ONE option): The Departn	ONE option):Commonwealth T	erms and Conditions X Commonwealth Terms and Conditions X Commonwealth Terms and Conditions are controlled in accordance with the terms.	s of this Contract will be supported
in the state accounting system by sufficient appropriat X Rate Contract. (No Maximum Obligation) Attach	ions or other non-appropriated fund details of all rates, units, calculation	ds, subject to intercept for Commonwealth owed debts und ons, conditions or terms and any changes if rates or terms this contract (or <i>new</i> total if Contract is being amended). \$	er <u>815 CMR 9.00</u> . are being amended.)
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		actor certify for this Contract, or Contract Amendment, that	Contract obligations:
		ations have been incurred <u>prior</u> to the Effective Date.	va Data
X 3. were incurred as of July 1, 2021, 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 Effecti w, and the parties agree that payments for any obligations sement payments, and that the details and circumstances of 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 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.			
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Forms are also posted at OSD Forms: https://www.macomptroller.org/forms.

CONTRACTOR LEGAL NAME: TOWN OF PELHAM		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs	
and d/b/a):		MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 351 AMHERST RD, MA 01002-9714		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: TRACY OSBAHER	Phone: 413-253-0512	Billing Address (if different):	
E-Mail: tosbahr7@gmail.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191937		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. 8E	3
X NEW CONTRA	СТ	CONTRACT AMENDA	MENT
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Statewide Contract (OSD or an OSD-designated	Department)	Enter Amendment Amount: \$ (or "no change")	
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Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizi	ng language, legislation with	Other Procurement Exception (Attach authorizing language)	
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Services Commonwealth IT Terms and Conditions	ONE option)Commonwealth re	Oomitionwealth Terms and Condition	To the figure of the control of the
COMPENSATION: (Check ONE option): The Departr	nent certifies that payments for auth	orized performance accepted in accordance with the terms	of this Contract will be supported
in the state accounting system by sufficient approprial	tions or other non-appropriated fund	ls, subject to intercept for Commonwealth owed debts under ons, conditions or terms and any changes if rates or terms are	815 CMR 9.00.
		his contract (or new total if Contract is being amended). \$_	
		EFT 45 days from invoice receipt. Contractors requesting a	ccelerated payments must identify
a PPD as follows: Payment issued within 10 days	% PPD: Payment issued within 15	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	NCE or REASON FOR AMENDME	NT: This 10-year contract will cover grant funds to municip	al Councils on Aging (COA) of the
Commonwealth authorized through the annual GAA a	and other sources. The activity perfo	rmance period for year one of this contract is 7/1/2021-6/30	/2022. The COAs established by
MGI provide social and support services to older adu	Its, their families and caregivers. The	e annual award is determined by the number of elders per renent or increase during the 10-year period. Each municipal C	nunicipality as per the most recent
report describing how these grant funds were applied	. All approved obligations incurred p	prior to the latest signature date are intended to be part of the	is 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:
1. may be incurred as of the Effective Date (latest	signature date below) and <u>no</u> obligi ATER than the Effective Date below	and <u>no</u> obligations have been incurred <u>prior</u> to the Effective Date.	e Date.
X 3 were incurred as of July 1 . 20 21 . a dat	e PRIOR to the Effective Date below	w, and the parties agree that payments for any obligations in	curred prior to the Effective Date
are authorized to be made either as settlement r	payments or as authorized reimburs	ement payments, and that the details and circumstances of	all obligations under this Contract
		eleases the Commonwealth from further claims related to the	
CONTRACT END DATE: Contract performance shamended, provided that the terms of this Contract a	all terminate as of <u>June 30</u> , 20 and performance expectations and	32 , with no new obligations being incurred after this diobligations shall survive its termination for the purpose of	resolving any claim or dispute, for
completing any negotiated terms and warranties, to a	illow any close out or transition perf	ormance, reporting, invoicing or final payments, or during an	y 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 significant	gnatory of the Contractor, the Depa	rtment, or a later Contract or Amendment Start Date speci-	fied above, subject to any required
required under the Standard Contract Form Instruction	ns and Contractor Certifications und	incorporated by reference as electronically published and the der the pains and penalties of perjury, and further agrees to p	rovide any required documentation
required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required docur 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		ached or incorporated by reference	
herein according to the following hierarchy of document precedence, the applicable Co Instructions and Contractor Certifications, the Request for Response (RFR) or other		mmonwealth Terms and Conditions, this Standard Contract	Form, the Standard Contract Form uage 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 an	d the Contractor's Response only if
made using the process outlined in 801 CMR 21.07,	incorporated herein, provided that a	any amended RFR or Response terms result in best value, le	ower costs, or a more cost effective
Contract. AUTHORIZING SIGNATURE FOR THE CONTRACT	TOR: 1 1	AUTHORIZING SIGNATURE FOR THE COMMONWE	ALTH:
1 //\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	- 8/10/33	Man Ma	3/2/1100
X: (Signature and Date Must Be Captured	Date: 7707 9 At Time of Signature)	(Signature and Date Must Be Captured A	t Time of Signature)
Print Name: Robert Agoglia		Print Name: Amon Bei hum	
Print Title: Select Board Chair		Print Title: Nuclear of Contracts	and Accounting



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: https://www.maccomptroller.org/forms.

.gov/lists/osd-torms.			
CONTRACTOR LEGAL NAME: TOWN OF PEMBROKE (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 100 CENTER ST, MA 02359-2207		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: GRETCHEN EMMETTS Phone: 781-294-8220		Billing Address (if different):	
Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
	MMARS Doc ID(s): 02082200000000000008		
ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В	
X NEW CONTRACT CONTRACT AMENDMENT		etails of amendment changes.) ed scope and budget) act and updated scope/budget) sudget) aguage/justification and updated t are incorporated by reference	
Into this Contract and are legally binding: (Check ONE option):Commonwealth Terms and Conditions _X_ Commonwealth Terms and Conditions 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 at 5 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			
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, 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 sulfpoized to be made either as settlement payments or as authorized reimbursement 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: Date: 1			
	Phone: 781-294-8220 Fax: ents.) CT e option only) Department) , budget) 15 CMR 2.00) (Solicitation in tsupporting documentation) gency, scope, budget) orm, scope, budget, orm, scope, budget, bradet, brade	COMMONWEALTH DEPARTMENT NAME: Executive O MMARS Department Code: ELD Business Mailing Address: 1 Ashburton PI, Boston M Billing Address (if different): Exa: Contract Manager: Stacey Anne O'Connell E-Mail: Stacey.oconnell@mass.gov MMARS Doc ID(s): 020822000000000000000 RFR/Procurement or Other ID Number: MGL c. 40 s. 81 CONTRACT AMENDI Enter Current Contract End Date *Prior* to Amendment*. Enter Amendment Amount: \$	



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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.

Forms are also posted at OSD Forms. https://www.n	ilass,gov/ilsis/usu-ioritis		
CONTRACTOR LEGAL NAME: TOWN OF PEPPERELL (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 1 MAIN ST, MA 01238-1612		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: SUSAN MCCARTHY	Phone: 978-433-0326	Billing Address (if different):	
E-Mail: coa@town.pepperell.ma.us	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191939	T CAL	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 00	1	MMARS Doc ID(s): 020822000000000000008	
(Note: The Address ID must be set up for EFT pa		RFR/Procurement or Other ID Number: MGL c. 40 s	. 8B
X NEW CONT	DANGER OF THE PROPERTY OF THE	CONTRACT AMEN	PERSONAL PROPERTY AND PROPERTY AND
PROCUREMENT OR EXCEPTION TYPE: (Checl		Enter Current Contract End Date <u>Prior</u> to Amendmen	
Statewide Contract (OSD or an OSD-designal	(V) (1 (V)	Enter Amendment Amount: \$ (or "no chan	
Collective Purchase (Attach OSD approval, so	cope, budget)	AMENDMENT TYPE: (Check one option only. Attack	
Department Procurement (includes all Grants Notice or RFR, and Response or other procur	ement supporting documentation	Amendment to Date, Scope or Budget (Altach up	dated scope and budget)
Emergency Contract (Attach justification for e	mergency, scope, budget)	Interim Contract (Attach justification for Interim Col Contract Employee (Attach any updates to scope of	
Contract Employee (Attach Employment Statu X_Other Procurement Exception (Attach author)	us Form, scope, budget)	Other Procurement Exception (Attach authorizing	
specific exemption or earmark, and exception ju		scope and budget)	
The Standard Contract Form Instructions and into this Contract and are legally binding: (Che Services Commonwealth IT Terms and Condition of the Services Commonwealth IT Term	ck ONE option):Commonwealth T	Ilowing Commonwealth Terms and Conditions documerms and Conditions X Commonwealth Terms and Co	ent are incorporated by reference nditions For Human and Social
COMPENSATION: (Check ONE option): The Dep	artment certifies that payments for aut	horized performance accepted in accordance with the ter	ms of this Contract will be supported
in the state accounting system by sufficient approx	oriations or other non-appropriated fun	ds, subject to intercept for Commonwealth owed debts ur ons, conditions or terms and any changes if rates or term	nder <u>815 CMR 9.00</u> .
Maximum Obligation Contract Enter total m	tach details of all rates, units, calculation of	this contract (or new total if Contract is being amended).	\$.
	THE RESERVE OF THE PERSON NAMED IN COLUMN 2 IN COLUMN	h EFT 45 days from invoice receipt. Contractors requesting	TO SECURE A SECURITION OF THE PROPERTY OF THE
a PPD as follows: Payment issued within 10 day	s % PPD: Payment issued within 1	5 days % PPD; Payment issued within 20 days %	PPD; Payment issued within 30 days
% PPD. If PPD percentages are left blank, ide (subsequent payments scheduled to support stand	ntify reason: X agree to standard 45	i day cycle statutory/legal or Ready Payments (M.G.L.	c. 29, § 23A); only initial payment
BRIEF DESCRIPTION OF CONTRACT PERFOR	MANCE or REASON FOR AMENDM	ENT: This 10-year contract will cover grant funds to mun	icipal Councils on Aging (COA) of the
Commonwealth authorized through the annual GA	AA and other sources. The activity perf	formance period for year one of this contract is 7/1/2021-6	5/30/2022. The COAs established by
MGL provide social and support services to older	adults, their families and caregivers. This contract will cover any rate adjust.	he annual award is determined by the number of elders p ment or increase during the 10-year period. Each municip	er municipality as per the most recent al COA will complete an annual fiscal
report describing how these grant funds were app	lied. All approved obligations incurred	prior to the latest signature date are intended to be part of	f this agreement and the amount of
the prior obligation for year one is funded in the F	Y22 award. The deadline to submit the	e signed contract is 6/30/22. MA #3.	at Contract obligations:
ANTICIPATED START DATE: (Complete ONE of	option only) The Department and Conti	ractor certify for this Contract, or Contract Amendment, th gations have been incurred <u>prior</u> to the Effective Date.	at Contract obligations.
2 may be incurred as of	ELATER than the Effective Date below	v and <u>no</u> obligations have been incurred <u>prior</u> to the Effe	ctive Date.
X 3 were incurred as of July 1 20 21 a	date PRIOR to the Effective Date belo	ow, and the parties agree that payments for any obligation	s incurred prior to the Effective Date
are authorized to be made either as settleme	ent payments or as authorized reimbur	sement payments, and that the details and circumstances releases the Commonwealth from further claims related t	of all obligations under this Contract
		0_32, with no new obligations being incurred after thi	
amended, provided that the terms of this Contra	ct 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 per	formance, reporting, invoicing or final payments, or during	g any lapse between amendments.
Amendment has been executed by an authorized approvals. The Contractor certifies that they have required under the Standard Contract Form Instruutupon request to support compliance, and agrees herein according to the following hierarchy of doc Instructions and Contractor Certifications, the Runacceptable, and additional negotiated terms, primade using the process outlined in 801 CMR 21.1	d signatory of the Contractor, the Dep accessed and reviewed all documents ctions and Contractor Certifications un that all terms governing performance cument precedence, the applicable Co- equest for Response (RFR) or other revided that additional negotiated term		pecified above, subject to any required if the Contractor makes all certifications to provide any required documentation attached or incorporated by reference act Form, the Standard Contract Form anguage stricken by a Department as and the Contractor's Response only if e, lower costs, or a more cost effective
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 of Contract. AUTHORIZING SIGNATURE FOR THE CONTRACTOR: X:			NEALTH: Date: 2/23/22 . d At Time of Signature) M. ALUVARY, GUM



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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.

Forms are also nosted at OSD Forms: https://www.macomptroller.org/forms.

Forms are also posted at OoD Forms. https://www.mass	a.govinatarodu torrita.		
CONTRACTOR LEGAL NAME: TOWN OF PERU (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): P.O. Box 516, MA 01235-9513		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: JESSICA GANCARZ	Phone: 413-446-9628	Billing Address (if different):	
E-Mail: townadmin@townofperuma.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191940		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. 8E	3
X NEW CONTRA	СТ	CONTRACT AMENDA	MENT
PROCUREMENT OR EXCEPTION TYPE: (Check on		Enter Current Contract End Date <u>Prior</u> to Amendment:	C20-14-04-07
Statewide Contract (OSD or an OSD-designated	Department)	Enter Amendment Amount: \$ (or "no change")	The service of the control of the co
Collective Purchase (Attach OSD approval, scope Department Procurement (includes ali Grants - 8	e, budget)	AMENDMENT TYPE: (Check one option only. Attach de	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Notice or RFR, and Response or other procurement	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra	M
Emergency Contract (Attach justification for emer	gency, scope, budget)	Contract Employee (Attach any updates to scope or bu	
Contract Employee (Attach Employment Status F _X_ Other Procurement Exception (Attach authorizi	orm, scope, buaget) ng language, legislation with	Other Procurement Exception (Attach authorizing lan	
specific exemption or earmark, and exception justif	ication, scope and budget)	scope and budget)	
The Standard Contract Form Instructions and Con into this Contract and are legally binding: (Check Contract Commonwealth IT Terms and Conditions	ONE option): Commonwealth T	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Condit	are incorporated by reference ions For Human and Social
COMPENSATION: (Check ONE option): The Departm	nent certifies that payments for auti	norized performance accepted in accordance with the terms ds, subject to intercept for Commonwealth owed debts under	of this Contract will be supported 815 CMR 9.00.
X Rate Contract. (No Maximum Obligation) Attach	n details of all rates, units, calculation	ons, conditions or terms and any changes if rates or terms ar	e 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): Commonv	vealth payments are issued through	n EFT 45 days from invoice receipt. Contractors requesting a	ccelerated payments must identify
a PPD as follows: Payment issued within 10 days	_% PPD; Payment issued within 15	5 days % PPD; Payment issued within 20 days % PP day cycle statutory/legal or Ready Payments (M.G.L. c.	D; Payment issued within 30 days 29 & 23A): only initial payment
(subsequent payments scheduled to support standard	l EFT 45 day payment cycle. See F	Prompt Pay Discounts Policy.)	
Commonwealth authorized through the annual GAA a MGL provide social and support services to older adu census data at a current rate of \$12 per person. This	nd other sources. The activity perfolits, their families and caregivers. The contract will cover any rate adjustred. All approved obligations incurred	ENT: This 10-year contract will cover grant funds to municip primance period for year one of this contract is 7/1/2021-6/30 ne annual award is determined by the number of elders per innent or increase during the 10-year period. Each municipal Coprior to the latest signature date are intended to be part of this exigned contract is 6/30/22. MA #3.	/2022. The COAs established by nunicipality as per the most recent COA will complete an annual fiscal
ANTICIPATED START DATE: (Complete ONE option	n only) The Department and Contr	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 <u>no</u> 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 p	ayments 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 th	all obligations under this Contract
amended provided that the terms of this Contract a	nd performance expectations and	. 32 , with no new obligations being incurred after this depositions shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during an	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 of 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 documentatic 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 at 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. AUTHORIZING SIGNATURE FOR THE COMMONWEALTH: X:			
Time the Total Texts I Texts II Total			



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by reference herein. Additional non-conflicting terms may Forms are also posted at OSD Forms: https://www.mass	s.gov/lists/osd-forms.	es environtenano Popo visita esta esta esta esta en esta esta e	
CONTRACTOR LEGAL NAME: TOWN OF PETERSH		COMMONWEALTH DEPARTMENT NAME: Executive	e Office of Elder Affairs
(and d/b/a):		MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 3 S MAIN ST, MA 01463-1647		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: KAY BERRY	Phone: 978-724-6610	Billing Address (if different):	
E-Mail: pshamcoa@gmail.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191941		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	s. 8B
X NEW CONTRA		CONTRACT AMEN	
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)	Fnter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scop	e, budget)	AMENDMENT TYPE: (Check one option only. Attac	h details of amendment changes.)
Department Procurement (includes all Grants -	315 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach up Interim Contract (Attach justification for Interim Co	nated scope and budger)
Notice or RFR, and Response or other procurem Emergency Contract (Attach justification for eme	rgency, scope, budget)		or budget)
Contract Employee (Attach Employment Status	orm, scope, budget)	Other Procurement Exception (Attach authorizing	language/justification and updated
X Other Procurement Exception (Attach authoriz	ing language, legislation with	scope and budget)	
		lowing Commonwealth Terms and Conditions docum	nent are incorporated by reference
into this Contract and are legally binding: (Check	ONE option):Commonwealth to	A Comments	
	. UT II - t to for outl	norized performance accepted in accordance with the te	rms of this Contract will be supported
in the state accounting system by sufficient appropria	ations or other non-appropriated fund	ds, subject to intercept for Commonwealth owed debts u	nder 815 CMR 9.00.
to the Alexander Obligation Attac	n details of all fales Titlis, Calculati	us, subject to intercept for commonwealth of the constant of the constant of the constant (or <i>new</i> total if Contract is being amended)	
Maximum Obligation Contract. Enter total max	mum obligation for total duration of	FET 45 Law from invoice require Contractors requesti	ng accelerated payments must identify
PROMPT PAYMENT DISCOUNTS (PPD): Common	wealth payments are issued through	h EFT 45 days from invoice receipt. Contractors requesti 5 days % PPD; Payment issued within 20 days %	6 PPD; Payment issued within 30 days
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a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days % PPD; Payment issued within 20 days virily 10 days % PPD; Payment issued within 20 days virily 10 days % PPD; Payment issued within 20 days virily 20 days			picinal Councils on Aging (COA) of the
BRIEF DESCRIPTION OF CONTRACT PERFORM	ANCE or REASON FOR AMENUM	ormance period for year one of this contract is 7/1/2021-	-6/30/2022. The COAs established by
MGI provide social and support services to older ad	ults, their families and caregivers. T	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. The	s contract will cover any rate adjust	ne annual award is determined by the miniber of elastic ment or increase during the 10-year period. Each munici prior to the latest signature date are intended to be part a signed contract is 6/30/22. MA #3.	of this agreement and the amount of
ANTICIDATED CTART DATE: (Complete ONE ont	ion only) The Department and Conti	ractor certily for this contract, or contract Amendment, t	hat Contract obligations:
The state of the s	total and no oblid	rations have neen inclined bill to the Liberty Date.	
			one incurred prior to the Effective Date
X 3. were incurred as of July 1, 20 21, a da	ate PRIOR to the Effective Date belo	coment navments, and that the details and circumstance	es of all obligations under this Contract
	and the second s	a se	nic nate liniess life Cultifact is biopeny
amended, provided that the terms of this Contract	and performance expectations and	o 32 , with no new obligations being incurred arter of the buryos and statement of the purpos formance, reporting invoicing or final payments, or during the statement of the purpose formance, reporting invoicing or final payments, or during the statement of the purpose formance are provided in the statement of	e of resolving any claim or dispute, for
completing any pegotiated terms and warranties, to	allow any close out of transition per	ioinlance, reporting, invoicing or inter payment,	
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 CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment Start Date specified above, subject to any required			
Amendment has been executed by an authorized signatory of the Contractor, the Department, of a third software and the Contractor makes all certifications			
approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and they have accessed and reviewed all documents incorporated by reference as electronically published and they are accessed and reviewed all documents incorporated by reference as electronically published and further agrees to provide any required documentation 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 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 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 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 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 periorinance of this contract and conditions, this Standard Contract Form the Standard Contract Form			
herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Contractor's Response (excluding any language stricken by a Departm Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Departm Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Departm			language stricken by a Department as
Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language statement of the Contractor's Response of 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 unacceptable, and additional negotiated terms, provided that additional negotiated terms are not add that any amended RFR or Response terms result in best value, lower costs, or a more cost effective terms.			R and the Contractor's Response only in
made using the process outlined in 801 CMR 21.07, incorporated fieldin, provided that any american transfer of the second			
Contract. AUTHORIZING SIGNATURE FOR THE CONTRACTOR: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			NWEALTH:
AUTHORIZING SIGNATURE FOR THE CONTRA	7 7/1/2022	y Mm	. Date: 3/9/22 .
X: (Signature and Date Must Be Capture		X: (Signature and Date Must Be Captu	red At Time of Signature)
Print Name:	ALLEN.	Print Name: Amin 301mm	
(Signature and Date Must Be Captured At Time of Signature) Print Name: And Share Sh			MI HUCOUNTING



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.

also posted at OSD Forms: https://www.mass.gov/lists/o	sd-forms.	W		
CONTRACTOR LEGAL NAME: TOWN OF PHILLIPSTON		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs		
(and d/b/a):		MMARS Department Code: ELD Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Legal Address: (W-9, W-4): 50 THE CMN, MA 01331-9736 Contract Manager: PAULA HALEY Phone: 978-939-4086		Billing Address (if different):		
Contract Manager: PAULA HALEY		Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
E-Mail: phaleyhr@gmail.com	Fax:	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Contractor Vendor Code: VC6000191942		MMARS Doc ID(s): 02082200000000000008	1,444	
Vendor Code Address ID (e.g. "AD001"): AD 001. (Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s	s. 8B	
M25			CONTRACT AMENDMENT	
X NEW CONTRA 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, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attac	h 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 up Interim Contract (Attach justification for Interim Co	dated scope and budget)	
Emergency Contract (Attach justification for emer	gency, scope, budget)	Contract Employee (Attach any updates to scope of	or budget)	
Contract Employee (Attach Employment Status F X_ Other Procurement Exception (Attach authorizing	orm, scope, budget)	Other Procurement Exception (Attach authorizing	language/justification and updated	
specific exemption or earmark, and exception justit	ication, scope and budget)	scope and budget)		
10	tractor Certifications and the fo ONE option):Commonwealth 1	llowing Commonwealth Terms and Conditions docun Terms and Conditions X Commonwealth Terms and Co	nent are incorporated by reference anditions For Human and Social	
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t u t t the surface by sufficient enprenrie	tions or other non-appropriated fill	nas suniect to intercent for Communication owed debis d	ildel dis civil s.oo.	
X Rate Contract. (No Maximum Obligation) Attact	n details of all rates, units, calculat	ions, conditions or terms and any changes if rates or term f this contract (or <i>new</i> total if Contract is being amended)	.\$.	
Maximum Obligation Contract. Enter total maxi	muni obligation for total duration of	the FFT 45 days from invoice require Contractors requesti	ng accelerated payments must identify	
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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				
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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	ne signed contract is 6/30/22. IVIA #3.		
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Cont	tractor certify for this Contract, or Contract Amendment, the	nat Contract obligations.	
1. may be incurred as of the Effective Date (latest	signature date below) and <u>no</u> obli	gations have been incurred <u>prior</u> to the Effective Date. w and <u>no</u> obligations have been incurred <u>prior</u> to the Effe	ective Date.	
V 0	to DDIOD to the Effective Date hel	ow and the parties agree that payments for any obligation	ins incurred prior to the Effective Date	
are authorized to be made aither as caltiament	navments or as authorized follmout	rsement payments, and that the details and circumstance	3 of all obligations under the contract	
are attached and incorporated into this Contract	. Acceptance of payments forever	r releases the Commonwealth from further claims related	nis date unless the Contract is properly	
I down alded that the towns of this Contract	and portormance evacations and	20 32, with no new obligations being incurred after the dobligations shall survive its termination for the purpose	e of tesofying any claim of dispute, for	
completing any negotiated terms and warranties, to	allow any close out or transition pe	rformance, reporting, invoicing or final payments, or duff	ig any lapse between amendments.	
CERTIFICATIONS: Notwithstanding verbal or othe	r representations by the parties, th	ne "Effective Date" of this Contract or Amendment shall	I 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				
to the dead Contract Form Instructions and Contractor Certifications under the pains and penalties of periuly, and further agrees to provide any required documentation				
and careed the suppliance and careed that all terms governing performance of this Contract and doing pusiness in Massachuseus are attached of incorporated by referen				
upon request to support compilative, and agrees that all terms governing performance of this contract constructions, this Standard Contract Form, the Standard Contract Form, the Standard Contractor certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Depart Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Depart Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Depart Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Depart Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Depart Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Depart Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Depart Instructions and Contractor Certifications).		language stricker by a Department as		
and additional pagetiated torms, provided that additional pagetiated terms will take precedence over the relevant terms in the KFK and the contractor's Response on				
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 enecured				
Contract. AUTHORIZING SIGNATURE FOR THE CONTRACTOR: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:				
	Date: 4/29/22	x: M.2. Vm	. Date: 6/30/22	
X: Signature and Date Must Be Captured	At Time of Signature)	X:	ed At Time of Signature)	
Print Name: Malaric Jadon		Print Name:		
Print Title: 1205 Admin. Asst Transition Print Title: Pri			ow. vellowning	



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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: https://www.macs.gov/lists/ord-forms.

forms are also posted at OSD Forms: https://www.mas	s.gov/iists/osd-iorms.			
CONTRACTOR LEGAL NAME: CITY OF PITTSFIELD (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 70 ALLEN ST, MA 01201-6250		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: JIM CLARK	Phone: 413-499-9346	Billing Address (if different):		
E-Mail: jclark@pittsfieldch.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192128		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. 88	3	
X NEW CONTRA	ст	CONTRACT AMENDA	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check of	A. 81 W	Enter Current Contract End Date <u>Prior</u> to Amendment:	, 20_ <u></u> .	
 Statewide Contract (OSD or an OSD-designated Collective Purchase (Attach OSD approval, scop Department Procurement (includes all Grants - § Notice or RFR, and Response or other procurem 	e, budget) 315 CMR 2.00) (Solicitation	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)		
Emergency Contract (Attach justification for eme	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 authoriz		Other Procurement Exception (Attach authorizing language		
specific exemption or earmark, and exception justi		scope and budget)		
The Standard Contract Form Instructions and Cointo this Contract and are legally binding: (Check Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth To	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Condit	are incorporated by reference ions For Human and Social	
in the state accounting system by sufficient appropria	tions or other non-appropriated fund	norized 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	815 CMR 9.00.	
Maximum Obligation Contract. Enter total maxi	mum 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 receivensus 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	ontract obligations:	
1. may be incurred as of the Effective Date (latest	signature date below) and no obligation	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		
are authorized to be made either as settlement are attached and incorporated into this Contract	payments or as authorized reimburs . Acceptance of payments forever r	 w, and the parties agree that payments for any obligations in sement payments, and that the details and circumstances of seleases the Commonwealth from further claims related to the 	all obligations under this Contract ese obligations.	
amended, provided that the terms of this Contract a	and performance expectations and	32 , with no new obligations being incurred after this da obligations shall survive its termination for the purpose of ormance, reporting, invoicing or final payments, or during an	resolving any claim or dispute, for	
Amendment has been executed by an authorized significant approvals. The Contractor certifies that they have accrequired under the Standard Contract Form Instruction upon request to support compliance, and agrees that herein according to the following hierarchy of documents and Contractor Certifications, the Requestionary and Contractor Certifications, the Requestionary and additional negotiated terms, proving the proving the support of the proving the support of the	gnatory of the Contractor, the Depa cessed and reviewed all documents ns and Contractor Certifications und t all terms governing performance o ent precedence, the applicable Cor est for Response (RFR) or other s ded that additional negotiated terms incorporated herein, provided that a	"Effective Date" of this Contract or Amendment shall be to priment, or a later Contract or Amendment Start Date specific incorporated by reference as electronically published and the der the pains and penalties of perjury, and further agrees to p if this Contract and doing business in Massachusetts are attainmonwealth Terms and Conditions, this Standard Contract is collicitation, the Contractor's Response (excluding any languation will take precedence over the relevant terms in the RFR and any amended RFR or Response terms result in best value, to a Contractor's Response terms result in best value, to a Contractor's Response terms result in best value, to a Contractor's Response terms result in best value. The Commonweal Contractor's Response terms result in best value, to a Contractor's Response terms result in best value. The Commonweal Contractor's Response terms result in best value, to a Contractor's Response terms result in best value. The Commonweal Contractor's Response terms result in best value. The Commonweal Response terms result in best value. The Commonweal Response terms result in best value and Response terms result in best value. The Commonweal Response terms result in best value. The Commonweal Response terms result in best value. The Response terms result in best value. The Response terms result in best value. The Response terms result in best value and Response terms result in best value. The Response terms result in best value and Response terms result in best value. The Response terms result in best value and Response terms result in best value. The Response terms result in best value and Response terms result in best value. The Response terms result in best value and Response terms result in the Resp	ied above, subject to any required contractor makes all certifications rovide any required documentation ached or incorporated by reference Form, the Standard Contract Form lage stricken by a Department as it the Contractor's Response only if over costs, or a more cost effective LLTH:	
Print Name: Linda Matter		Print Name: Away Beilmun		
Print Name:			Mounty	



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Forms are also posted at OSD Forms: https://www.mas	s.gov/lists/osd-torms.		
CONTRACTOR LEGAL NAME: TOWN OF PLAINFIELD (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 344 MAIN ST, MA 01070-9795		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: SUSAN LAROCK	Phone: 413-743-5345	Billing Address (if different):	
E-Mail: pking@town.plainfield.ma.us	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191943	L	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
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X NEW CONTRA		CONTRACT AMEND	
PROCUREMENT OR EXCEPTION TYPE: (Check or	PARTIE .	Enter Current Contract End Date Prior to Amendment:, 20	
Statewide Contract (OSD or an OSD-designated	The same of the sa	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	315 CMR 2.00) (Solicitation	Amendment to Date, Scope or Budget (Attach update	ed scope and budget)
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X Other Procurement Exception (Attach authoriz specific exemption or earmark, and exception justi	fication, scope and budget)	scope and budget)	33,
The Standard Contract Form Instructions and Col	ntractor Certifications and the fo	llowing Commonwealth Terms and Conditions document	t are incorporated by reference
into this Contract and are legally binding: (Check	ONE option):Commonwealth 1	Ferms and Conditions X Commonwealth Terms and Condit	tions For Human and Social
Services Commonwealth IT Terms and Conditions		a to the form	of this Contract will be supported
compensation: (Check ONE option): The Departi	nent certifies that payments for autions or other non-appropriated fur	thorized performance accepted in accordance with the terms ids, subject to intercept for Commonwealth owed debts unde	r 815 CMR 9.00.
X Rate Contract. (No Maximum Obligation) Attac	h details of all rates, units, calculat	ions, 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	f this contract (or <i>new</i> total if Contract is being amended). \$ _	
PROMPT PAYMENT DISCOUNTS (PPD): Common	wealth payments are issued through	h EFT 45 days from invoice receipt. Contractors requesting a	ccelerated payments must identify
a PPD as follows: Payment issued within 10 days	_% PPD; Payment issued within 1	5 days % PPD; Payment issued within 20 days % PP 5 day cycle statutory/legal or 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.)	<u></u>
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the prior obligation for year one is funded in the FY2.	award. The Department and Cont	ractor certify for this Contract, or Contract Amendment, that 0	Contract obligations:
1 may be incurred as of the Effective Date (lates)	signature date below) and no obli	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	w and <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 3503	PKIOR to the Effective Date held	ow, and the parties agree that payments for any obligations in	1
are detricized to be made chile as settlement	payments or as authorized reimbur	Sement navments, and that the details and circumstances of	all obligations under this Centeral
are attached and incorporated into this Contract	. Acceptance of payments forever	releases the Commonwealth from further claims related to the	nese obligations.
CONTRACT END DATE: Contract performance shamended provided that the terms of this Contract	all terminate as of <u>June 30</u> , 2	0.32 , with no new obligations being incurred after this d	ate unless the Contract is properly
		obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during an	
		e "Effective Date" of this Contract or Amendment shall be t	
Amendment has been executed by an authorized si	unatory of the Contractor, the Den	artment or a later Contract or Amondment Start Date and it	5-d-b
approvide. The contractor contines that they have act	cessed and reviewed all documents	Incomorated by reterance as electromically published and the	Contractor males all and Cart
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Print Name: Hary Weeks	At time of Signature)	(Signature and Date Must Be Captured At	Time of Signature)
Calandor and Alice			
- The state of the		Print Title: INCAY of Contract	Som Holovally

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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.

Forms are also posted at OSD Forms: https://www.mas	s.gov/iists/osd-forms.		
CONTRACTOR LEGAL NAME: TOWN OF PLAINVILLE (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 142 SOUTH ST, MA 02762-1917		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: LIGA-COGLIANO	Phone: 508-699-7384	Billing Address (if different):	
E-Mail: lcogliano@plainville.ma.us	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
	hristine HIGGINS	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	nents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 88	3
X NEW CONTRA	СТ	CONTRACT AMEND	MENT
PROCUREMENT OR EXCEPTION TYPE: (Check or		Enter Current Contract End Date Prior 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	e, budget)	AMENDMENT TYPE: (Check one option only. Attach deAmendment to Date, Scope or Budget (Attach update	atalis of amendment changes.)
Notice or RFR, and Response or other procureme	ent supporting documentation)	Interim Contract (Attach justification for Interim Contra	act and updated scope/budget)
Emergency Contract (Attach justification for emergency Contract Employee (Attach Employment Status F	rgency, scope, budget)	Contract Employee (Attach any updates to scope or b	udget)
X Other Procurement Exception (Attach authorize	ing language, legislation with	Other Procurement Exception (Attach authorizing lan	guage/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 ServicesCommonwealth IT Terms and Conditions	ONE option):Commonwealth To	owing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	: are incorporated by reference ions For Human and Social
COMPENSATION: (Check ONE option): The Departr	ment 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 appropria	tions or other non-appropriated fund	is, subject to intercept for Commonwealth owed debts under	r 815 CMR 9.00.
X Rate Contract. (No Maximum Obligation) Attac	n details of all rates, units, calculate mum obligation for total duration of	ons, conditions or terms and any changes if rates or terms a this contract (or new total if Contract is being amended). \$ _	
		EFT 45 days from invoice receipt. Contractors requesting a	ccelerated payments must identify
a DDD as follows: Payment issued within 10 days	% PPD: Payment issued within 15	days % PPD: Payment issued within 20 days % PF	D; Payment issued within 30 days
% PPD. If PPD percentages are left blank, identif	y 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 standar	d EFT 45 day payment cycle. See F	FORT: This 10-year contract will cover grant funds to municip	nal Councils on Aging (COA) of the
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report describing how these grant funds were applied	I. All approved obligations incurred	orior 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	2 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	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 <u>no</u> 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	e Date.
X 3 were incurred as of July 1 2021 a dat	te PRIOR to the Effective Date belo	w, and the parties agree that payments for any obligations in	ncurred prior to the Effective Date
are authorized to be made either as settlement	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 sh	all terminate as of <u>June 30</u> , 20	32 , with no new obligations being incurred after this dobligations shall survive its termination for the purpose of	resolving any claim or dispute, for
completing any negotiated terms and warranties, to a	allow any close out or transition per	formance, reporting, invoicing or final payments, or during an	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 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: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			
220 11	2/2/20	1// 2 -	41.100
X: Signature and Date Must Be Captured	At Time of Signature)	X: D D Signature and Date Must Be Captured A	At Time of Signature)
Print Name: BRIAN NOBLE .		Print Name: Non Spilmun	<u> </u>
Print Title: Town Administration of Signature of Signature) Print Title: Town Administration of Signature of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature and Date Must be captured at Time of Signature of Signature of Signature and Date Must be captured at Time of Signature of Signatu			NINTERNATION



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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-conditions the added by Attachment. Contractors are required to access published forms at CTR Forms: https://www.maccomptroller.org/forms.

Forms are also posted at OSD Forms: https://www.mas	s.gov/lists/osd-forms.		2
CONTRACTOR LEGAL NAME: TOWN OF PLYMOUTH (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 11 LINCOLN ST, MA 02360-3325		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: MICHELE BRATTI	Phone: 508-830-4230	Billing Address (if different):	
E-Mail: mbratti@townhall.plymouth.ma.us	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000191945		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	ients.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В
X NEW CONTRA	СТ	CONTRACT AMENDMENT	
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Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8	e, budget) 15 CMR 2 00) (Solicitation	Amendment to Date, Scope or Budget (Attach updat	
Notice or RFR, and Response or other procureme	ent supporting documentation)	Interim Contract (Attach justification for Interim Contra	act and updated scope/budget)
Emergency Contract (Attach justification for emergency Contract)	rgency, scope, budget)	Contract Employee (Attach any updates to scope or b	oudget)
Contract Employee (Attach Employment Status F X_ Other Procurement Exception (Attach authorizing	ing language, legislation with	Other Procurement Exception (Attach authorizing lan	
specific exemption or earmark, and exception justil	fication, scope and budget)	scope and budget)	
The Standard Contract Form Instructions and Controt this Contract and are legally binding: (Check Services Commonwealth IT Terms and Conditions	ONE option): Commonwealth To	lowing Commonwealth Terms and Conditions documenterms and Conditions X Commonwealth Terms and Conditions	t are incorporated by reference tions For Human and Social
COMPENSATION: (Check ONE option): The Departr	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 appropriation. Attack	tions or other non-appropriated fund	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	mum 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			
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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	signature date below) and no oblig	ations have been incurred prior to the Effective Date.	2
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 pare attached and incorporated into this Contract.	payments or as authorized reimburs Acceptance of payments forever r	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 th	all obligations under this Contract nese obligations.
amended provided that the terms of this Contract a	and performance expectations and	32 , with no new obligations being incurred after this dobligations shall survive its termination for the purpose of ormance, reporting, invoicing or final payments, or during an	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 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 at 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. AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			
	1 1	X:	ate: 3/9/22
X: (Signature and Date Must Be Captured	At Time of Signature)	X: Da (Signature and Date Must Be Captured A	t Time of Signature)
Print Name: Lee Hartmann		Print Name: Mavin 13/1 mus	1 h 1.15
Print Title: Ninelly of 19 Manager . Print Title: Winelly of 19 Macks and Melo Juffer			W THUNNING
			/ L E 3



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CONTRACTOR LEGAL NAME: TOWN OF PLYMPTON		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs	
(and d/b/a): Legal Address: (W-9, W-4): 5 PALMER RD, MA 02367-1110		MMARS Department Code: ELD	
		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: COLLEEN THOMPSON	Fax:	Billing Address (if different): Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
E-Mail: coadirector@plymptontown.org	rax:		Fax: 617-727-9368
Contractor Vendor Code: VC6000191947		E-Mail: Stacey.oconnell@mass.gov	Fax: 017-727-9300
Vendor Code Address ID (e.g. "AD001"): AD 001. (Note: The Address ID must be set up for EFT paym	ente l	MMARS Doc ID(s): 02082200000000000000	
		RFR/Procurement or Other ID Number: MGL c. 40 s. 88	
X NEW CONTRACT PROCUREMENT OR EXCEPTION TYPE: (Check on		CONTRACT AMENDMENT Enter Current Contract End Date <u>Prior</u> to Amendment:, 20	
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)		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)	
The Standard Contract Form Instructions and Con into this Contract and are legally binding: (Check C Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth T	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Condit	are incorporated by reference ions For Human and Social
in the state accounting system by sufficient appropriat X Rate Contract. (No Maximum Obligation) Attach	ions or other non-appropriated fun n details of all rates, units, calculati	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 <i>new</i> total if Contract is being amended). \$_	r <u>815 CMR 9.00</u> .
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ANTICIPATED START DATE: (Complete ONE optio1, may be incurred as of the Effective Date (latest		actor certify for this Contract, or Contract Amendment, that C	Contract obligations:
		y and <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 are authorized to be made either as settlement p	e PRIOR to the Effective Date belo ayments 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 th	ncurred prior to the Effective Date all obligations under this Contract
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X: College & Thompson . Date: 3-31-33 . (Signature and Date Must Be Captured At Time of Signature) X: (Signature and Date Must Be Captured At Time of Signature) X: (Signature and Date Must Be Captured At Time of Signature)		t Time of Signature)	
Print Name: Colleen E. Thompson. Print Title: Divertor of Elder Affaus.		Print Name: Navan Mellman Print Title: Diw Chv St (univers and	1A conventiges
FILL LINE: I NOWE TO COL > MEY ALLENTS	327	FIREILLE VITLING (VITLING)	VILIU - //

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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 Contractor 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: https://www.masc.gov/lists/osd-forms.

Forms are also posted at OSD Forms: <a 001.<="" ad="" ad001"):="" href="https://www.mass.ntm.ntm.ntm.ntm.ntm.ntm.ntm.ntm.ntm.ntm</th><th>s.gov/lists/osd-forms.</th><th></th><th></th></tr><tr><td colspan=2>CONTRACTOR LEGAL NAME: TOWN OF PRINCETON (and d/b/a):</td><td colspan=2>COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD</td></tr><tr><td colspan=2>Legal Address: (W-9, W-4): 6 TOWN HALL DR, MA 01541-1138</td><td colspan=2>Business Mailing Address: 1 Ashburton PI, Boston MA 02108</td></tr><tr><td>Contract Manager: JUDITH WEBSTER</td><td>Phone: 978-464-5977</td><td>Billing Address (if different):</td><td></td></tr><tr><td>E-Mail: coa@town.princeton.ma.us</td><td>Fax:</td><td>Contract Manager: Stacey Anne O'Connell</td><td>Phone: 617-222-7419</td></tr><tr><td>Contractor Vendor Code: VC6000191949</td><td></td><td>E-Mail: Stacey.oconnell@mass.gov</td><td>Fax: 617-727-9368</td></tr><tr><td>Vendor Code Address ID (e.g. " td=""><td></td><td>MMARS Doc ID(s): 020822000000000000008</td><td></td>		MMARS Doc ID(s): 020822000000000000008	
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X NEW CONTRAC	CT	CONTRACT AMEND	MENT
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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 b	
Contract Employee (Attach Employment Status Fi X_ Other Procurement Exception (Attach authorizing		Other Procurement Exception (Attach authorizing lan	
specific exemption or earmark, and exception justifi		scope and budget)	gaago/jaoanoado/r ana apaacoa
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in the state accounting system by sufficient appropriat X Rate Contract. (No Maximum Obligation) Attach	ions or other non-appropriated fun details of all rates, units, calculati	norized 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 at this contract (or <i>new</i> total if Contract is being amended). \$_	r <u>815 CMR 9.00</u> .
a PPD as follows: Payment issued within 10 days	% PPD; Payment issued within 1 reason: X agree to standard 45 EFT 45 day payment cycle. See F		D; Payment issued within 30 days 29, § 23A); only initial payment
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X 3. were incurred as of July 1 , 20 21 , a date are authorized to be made either as settlement p	PRIOR to the Effective Date belo ayments 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 th	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. AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			
Ad Thorizing Signature For the commonwealth. X: Joint Will Y. Date: 4/29/22 (Signature and Date Must Be Captured At Time of Signature) Print Name: Train Webser Print Etc. Con Print Title: Director Print Signature You Solly Market Signature Por the commonwealth. X: M 3. V Date: 6/30/27. (Signature and Date Must Be Captured At Time of Signature) Print Name: Print Name: Print Title: Print T			



ELD

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.macomptroller.org/forms.

CONTRACTOR LEGAL NAME: TOWN OF PROVINCETOWN		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs		
(and d/b/a):		MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 260 COMMERCIAL ST, MA 02657-2213		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: CHRIS HOTTLE	Phone: 508-487-7080	Billing Address (if different):		
E-Mail: chottle@provincetown-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000191950		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		· · · · · · · · · · · · · · · · · · ·	CONTRACT AMENDMENT	
PROCUREMENT OR EXCEPTION TYPE: (Check on		Enter Current Contract End Date <u>Prior</u> to Amendment:, 20 Enter Amendment Amount: \$ (or "no change")		
Statewide Contract (OSD or an OSD-designated Collective Purchase (Attach OSD approval, scope	Department) 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 update	ed 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	ct and updated scope/budget)	
Contract Employee (Attach Employment Status F	orm, scope, budget)	Contract Employee (Attach any updates to scope or be	udget)	
X Other Procurement Exception (Attach authorizi	ng language, legislation with	Other Procurement Exception (Attach authorizing lan scope and budget)	guage/justification and updated	
specific exemption or earmark, and exception justif	ication, scope and budget)	lowing Commonwealth Terms and Conditions document	are incorporated by reference	
The Standard Contract Form Instructions and Con into this Contract and are legally binding: (Check (ServicesCommonwealth IT Terms and Conditions	ONE option): Commonwealth T	erms and Conditions X Commonwealth Terms and Conditions	ions For Human and Social	
COMPENSATION: (Check ONE option): The Departm	nent certifies that payments for aut	horized performance accepted in accordance with the terms	of this Contract will be supported	
in the state accounting system by sufficient appropriat	tions or other non-appropriated fun-	ds, subject to intercept for Commonwealth owed debts under	815 CMR 9.00.	
X Rate Contract. (No Maximum Obligation) Attach	num obligation for total duration of	ons, conditions or terms and any changes if rates or terms ar this contract (or new total if Contract is being amended). \$ _	e being amended.)	
			colorated navments must identify	
a DDD as follows: Payment issued within 10 days	% PPD: Payment issued within 15	h EFT 45 days from invoice receipt. Contractors requesting at 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	EFT 45 day payment cycle. See F	Prompt Pay Discounts Policy.)	ol Councils on Aging (COA) of the	
Commonwealth authorized through the annual GAA a	and other sources. The activity perfe	ENT: This 10-year contract will cover grant funds to municipal ormance 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 adul	Its, their families and caregivers. The	he annual award is determined by the number of elders per n	nunicipality 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 C prior to the latest signature date are intended to be part of thi	s 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	n only) The Department and Contr	actor certify for this Contract, or Contract Amendment, that C	ontract 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-	
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	Date.	
X 3, were incurred as of July 1, 20 21, a date	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 i	releases the Commonwealth from further claims related to the	ese obligations.	
CONTRACT END DATE: Contract performance sha	all terminate as ofJune 30_, 20	32 , with no new obligations being incurred after this da	ite unless the Contract is properly	
amended provided that the terms of this Contract a	nd performance expectations and	obligations shall survive its termination for the purpose of romance, reporting, invoicing or final payments, or during an	esolving any claim or dispute, for	
30 150 150 150 150				
CERTIFICATIONS: Notwithstanding verbal or other	representations by the parties, the	"Effective Date" of this Contract or Amendment shall be the artment, or a later Contract or Amendment Start Date specification.	ne latest date that this Contract or ied above, subject to any required	
approvals. The Contractor certifies that they have acco	essed 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			rovide 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 reherein 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	
Instructions and Contractor Certifications, the Request for Response (RFR) or other so		colicitation, the Contractor's Response (excluding any language	lage 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 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 eff			the Contractor's Response only if	
made using the process outlined in 801 CMR 21.07, incorporated neteril, provided that any amended KFK of Response terms result in best value, lower costs, or a more cost chosens.				
AUTHORIZING SIGNATURE FOR THE CONTRACTOR: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH: / /				
		X: Da (Signature and Date Must Be Captured At	te: 31 WIZZ.	
X:		(Signature and Date Must Be Captured At	Time of Signature)	
Print Name: ALEX MORSE.		Print Name:		
Print Title: TOWN MANAGER.		Print Title:	AM OF COUNTRY	

P.10



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.macs.gov/lists/opd-forms.

Forms are also posted at OSD Forms: https://www.mass	s.gov/lists/osd-forms.		
CONTRACTOR LEGAL NAME: CITY OF QUINCY (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 1305 HANCOCK ST, MA 02169-5119		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: THOMAS F. CLASBY, JR.	Phone: 617-376-1244	Billing Address (if different):	
E-Mail: tclasby@quincyma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192132		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	СТ	CONTRACT AMENDMENT	
PROCUREMENT OR EXCEPTION TYPE: (Check on	VC-0 VC-164	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 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	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra	ect and undated scope/budget)
Emergency Contract (Attach justification for emergency Contract)	gency, scope, budget)	Contract Employee (Attach any updates to scope or b	
Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizi	orm, scope, budget) ng language, legislation with	Other Procurement Exception (Attach authorizing lan	guage/justification and updated
specific exemption or earmark, and exception justif	fication, scope and budget)	scope and budget)	
The Standard Contract Form Instructions and Coninto this Contract and are legally binding: (Check Contract Commonwealth IT Terms and Conditions	ONE option): Commonwealth T	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	t are incorporated by reference tions For Human and Social
COMPENSATION: (Check ONE option): The Departm	nent certifies that payments for auti	horized performance accepted in accordance with the terms	of this Contract will be supported
in the state accounting system by sufficient appropriate	tions or other non-appropriated fun-	ds, subject to intercept for Commonwealth owed debts unde	r <u>815 CMR 9.00</u> .
X Rate Contract. (No Maximum Obligation) Attack	num obligation for total duration of	ons, conditions or terms and any changes if rates or terms a this contract (or <i>new</i> total if Contract is being amended). \$ _	e 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 cyclestatutory/legal or Ready Payments (M.G.L. c. 29, § 23A); only initial payment			
(subsequent payments scheduled to support standard			al Councils on Aging (COA) of the
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. The	he annual award is determined by the number of elders per nent or increase during the 10-year period. Each municipal 0	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 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.	
ANTICIPATED START DATE: (Complete ONE option	n only) The Department and Contr	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 <u>no</u> 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 Effective	e Date.
X 3 were incurred as of July 1 20 21 a date	e PRIOR to the Effective Date below	w, and the parties agree that payments for any obligations in	ncurred prior to the Effective Date
are authorized to be made either as settlement r	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 sha	all terminate as of <u>June 30</u> , 20	0.32, with no new obligations being incurred after this d obligations shall survive its termination for the purpose of	ate unless the Contract is properly
completing any negotiated terms and warranties, to a	llow any close out or transition per	formance, reporting, invoicing or final payments, or during ar	ny lapse between amendments.
		e "Effective Date" of this Contract or Amendment shall be	
Amendment has been executed by an authorized sign	anatory of the Contractor, the Department	artment, or a later Contract or Amendment Start Date speci	ified 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			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 Departure 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			id 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: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			And the second s
X: (Signature and Date Must Be Captured	Date: 2-/6-22	X:	ate: Olo // OC.
		Print Name: Marker Bellman	
Print Title:			Recordery 606A
Print Title: Print			