

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.macs.gov/lists/osd-forms.

Forms are also nosted at OSD Forms: https://www.macs.gov/lists/osd-forms.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.				
CONTRACTOR LEGAL NAME: CITY OF TAUNTON (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 15 SUMMER ST, TAUNTON, MA 02780-3430		Business Mailing Address: 1 Ashburton PI, Boston M	A 02108	
Contract Manager: CHARLENE BONENFANT	Phone: 508-821-1425	Billing Address (if different):		
E-Mail: bbonenfant@taunton-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192003		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000009		
(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	CT	CONTRACT AMENDA	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check on		Enter Current Contract End Date Prior to Amendment:		
Statewide Contract (OSD or an OSD-designated I		Enter Amendment Amount: \$ (or "no change")		
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8**)		AMENDMENT TYPE: (Check one option only. Attach de	3 3	
Notice or RFR, and Response or other procureme		Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contract		
Emergency Contract (Attach justification for emergency Contract Employee (Attach Employment Status Formatter)		Contract Employee (Attach any updates to scope or but		
X Other Procurement Exception (Attach authorizing		Other Procurement Exception (Attach authorizing lang		
specific exemption or earmark, and exception justifi		scope and budget)	Properties the William Control of State Assertion Community and I will be a substantial and the substantia	
The Standard Contract Form Instructions and Con into this Contract and are legally binding: (Check Carrices Commonwealth IT Terms and Conditions	tractor Certifications and the fol DNE option):Commonwealth T	lowing Commonwealth Terms and Conditions document forms and Conditions X Commonwealth Terms and Conditions	are incorporated by reference ons For Human and Social	
		horized 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). \$		
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.)			
Commonwealth authorized through the annual GAA an MGL provide social and support services to older adult census data, at a current rate of \$12 per person. This report describing how these grant funds were applied.	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 #4.			
	생리가 있다. 그 사이의 사는 시민이를 하면 하면 하고 있을까요 하는 것이다.	actor certify for this Contract, or Contract Amendment, that Co	ontract obligations:	
1. may be incurred as of the Effective Date (latest s		ations have been incurred <u>prior</u> to the Effective Date. and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	Date	
		w, and the parties agree that payments for any obligations inc		
are authorized to be made either as settlement pa	ayments or as authorized reimburs	ement payments, and that the details and circumstances of a	all obligations under this Contract	
		releases the Commonwealth from further claims related to the		
amended, provided that the terms of this Contract ar	nd performance expectations and	32 , with no new obligations being incurred after this da obligations shall survive its termination for the purpose of re ormance, reporting, invoicing or final payments, or during any	esolving any claim or dispute, for	
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only 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:				
Print Title: Nayor . Print Title: Niwetor of Contracts and Vector nay			MI ALCEANIST	



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

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.					
CONTRACTOR LEGAL NAME: TOWN OF TEMPLETON (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD			
Legal Address: (W-9, W-4): PO BOX 620, EAST TEMPLETON, MA 01438-0620		Business Mailing Address: 1 Ashburton PI, Boston N	IA 02108		
Contract Manager: CINDY SHEA Phone: 978-894-2780		Billing Address (if different):			
E-Mail: cshea@templetonma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419		
Contractor Vendor Code: VC6000192004		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368		
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 020822000000000000009			
(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	MENT		
PROCUREMENT OR EXCEPTION TYPE: (Check on	27 at 2	Enter Current Contract End Date <u>Prior</u> to Amendment:			
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change"			
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8		AMENDMENT TYPE: (Check one option only. Attach d			
Notice or RFR, and Response or other procurement		Amendment to Date, Scope or Budget (Attach updat Interim Contract (Attach justification for Interim Contra			
Emergency Contract (Attach justification for emer	0 , 1	Contract Employee (Attach any updates to scope or b			
Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authorizi		Other Procurement Exception (Attach authorizing lan			
specific exemption or earmark, and exception justif	ication, scope and budget)	scope and budget)			
	ONE option): Commonwealth T	lowing Commonwealth Terms and Conditions documen erms and Conditions X Commonwealth Terms and Condi			
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, 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 new total if Contract is being amended). \$	r <u>815 CMR 9.00</u> .		
		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 15 reason: X agree to standard 45	5 days % PPD; Payment issued within 20 days % PP day cycle statutory/legal or Ready Payments (<u>M.G.L. c.</u>	D; Payment issued within 30 days		
(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 #4.					
		actor certify for this Contract, or Contract Amendment, that C	Contract obligations:		
1. may be incurred as of the Effective Date (latest :			o Data		
		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			
are authorized to be made either as settlement p	ayments 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			
amended, provided that the terms of this Contract a	CONTRACT END DATE: Contract performance shall terminate as ofune 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 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 COMMONWEALTH: X: Date:					
Print Title: Town Always and M. Print Title:			M. Allovathy		

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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 nosted at OSD Forms: https://www.maccomptroller.org/forms.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.					
CONTRACTOR LEGAL NAME: TOWN OF TEWKSBURY (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD			
Legal Address: (W-9, W-4): 1009 MAIN ST, TEWKSBURY, MA 01876-4726		Business Mailing Address: 1 Ashburton Pl, Boston M			
Contract Manager: JAN CONOLE	Phone: 978-640-4482	Billing Address (if different):			
E-Mail: jconole@tewksbury-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419		
Contractor Vendor Code: VC6000192005		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368		
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000009			
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 88	2		
X NEW CONTRA	CT	CONTRACT AMENDA			
PROCUREMENT OR EXCEPTION TYPE: (Check or		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 de	etails of amendment changes.)		
Department Procurement (includes all Grants - 8 Notice or RFR, and Response or other procurement	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach update			
Emergency Contract (Attach justification for emer	gency, scope, budget)	Interim Contract (Attach justification for Interim Contract			
Contract Employee (Attach Employment Status FX_ Other Procurement Exception (Attach authorizing the contract Employee (Attach Employment Status FX)	orm, scope, budget)	Contract Employee (Attach any updates to scope or bu Other Procurement Exception (Attach authorizing language)			
specific exemption or earmark, and exception justif	ication, scope and budget)	scope and budget)	guagorjustinoation and apuated		
The Standard Contract Form Instructions and Con into this Contract and are legally binding: (Check C ServicesCommonwealth IT Terms and Conditions	tractor Certifications and the fol ONE option):Commonwealth T	Illowing Commonwealth Terms and Conditions document Terms and Conditions X Commonwealth Terms and Conditions	are incorporated by reference ions For Human and Social		
COMPENSATION: (Check ONE option): The Departm	ent certifies that payments for aut	thorized performance accepted in accordance with the terms of	of this Contract will be supported		
In the state accounting system by sufficient appropriat	ions or other non-appropriated fun	ids, subject to intercept for Commonwealth owed debts under	815 CMR 9 00		
Maximum Obligation Contract Enter total maxim	details of all rates, units, calculation of	ons, conditions or terms and any changes if rates or terms and this contract (or <i>new</i> total if Contract is being amended). \$	e being amended.)		
					
a PPD as follows: Payment issued within 10 days	% PPD; Payment issued within 1	h EFT 45 days from invoice receipt. Contractors requesting ac 5 days % PPD; Payment issued within 20 days % PPI	celerated payments must identify 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	LF 1 45 day payment cycle. See F	Prompt Pay Discounts Policy.) ENT: This 10-year contract will cover grant funds to municipa	Councils on Asing (COA) of the		
Commonwealth authorized through the annual GAA ar	nd other sources. The activity perfe	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 adult	ts, their families and caregivers. Th	he annual award is determined by the number of elders per m	nunicipality 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 C prior to the latest signature date are intended to be part of this	OA will complete an annual fiscal sareement 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 #4.	X -2 .		
ANTICIPATED START DATE: (Complete ONE option	only) The Department and Contra	actor certify for this Contract, or Contract Amendment, that Co	ontract obligations:		
1. may be incurred as of the Effective Date (latest s	ignature 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	Data		
X 3, were incurred as of July 1, 20 21, a date	PRIOR to the Effective Date below	w, and the parties agree that payments for any obligations inc	Date.		
are authorized to be made either as settlement pa	ayments or as authorized reimburs	sement payments, and that the details and circumstances of a	Il obligations under this Contract		
		releases the Commonwealth from further claims related to the			
CONTRACT END DATE: Contract performance shall amended provided that the terms of this Contract and	terminate as of <u>June 30</u> , 20	32 , with no new obligations being incurred after this day obligations shall survive its termination for the purpose of re	te unless the Contract is properly		
completing any negotiated terms and warranties, to all	ow any close out or transition perf	omance, reporting, invoicing or final payments, or during any	esolving any claim or dispute, for lapse between amendments.		
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	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 a					
unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's 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 CONTRACTO	R:	AUTHORIZING SIGNATURE FOR THE COMMONWEAR	LTH: , ,		
x: pyffilloning.	Date:				
(Signature and Date Must Be Captured A	t Time of Signature)	(Signature and Date Must Be Captured At	Time of Signature)		
Print Name: Richard Montuor	<u>1 .</u>	X:			
Print Title: Town manager. Print Title: Prin			Haritry		



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Forms are also posted at OSD Forms: https://www.m CONTRACTOR LEGAL NAME: TOWN OF TISBU		COMMONWEALTH DEPARTMENT NAME: Executive	Office of Elder Affairs
(and d/b/a):		MMARS Department Code: ELD	
Legal Address: (W-9, W-4): PO BOX 2147, VINEY			
Contract Manager: JOYCE STILES-TUCKER	Phone: 508-696-4205	Billing Address (if different):	1
E-Mail: jstucker@tisburyma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192006	143,23	E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
/endor Code Address ID (e.g. "AD001"): AD 00		MMARS Doc ID(s): 02082200000000000009	
(Note: The Address ID must be set up for EFT pa	yments.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	
into this Contract and are legally binding: (Chec Services Commonwealth IT Terms and Condition COMPENSATION: (Check ONE option): The Department of the Contract of the Contrac	one option only) ed Department) ope, budget) - 815 CMR 2.00) (Solicitation ement supporting documentation) mergency, scope, budget) rizing language, legislation with stification, scope and budget) contractor Certifications and the fock ONE option):	Enter Current Contract End Date <u>Prior</u> to Amendment: Enter Amendment Amount: \$ (or "no change AMENDMENT TYPE: (Check one option only. Attach of Amendment to Date, Scope or Budget (Attach updated of Interim Contract (Attach justification for Interim Contract Employee (Attach any updates to scope or Other Procurement Exception (Attach authorizing lascope and budget) Dilowing Commonwealth Terms and Conditions document Terms and ConditionsX Commonwealth Terms and Conditions uthorized performance accepted in accordance with the terms	details of amendment changes.) ted scope and budget) act and updated scope/budget) budget) nguage/justification and updated are incorporated by reference itions For Human and Social s of this Contract will be supported
in the state accounting system by sufficient approp X Rate Contract. (No Maximum Obligation) Att Maximum Obligation Contract. Enter total maximum Contract.	riations or other non-appropriated fu ach details of all rates, units, calcula eximum obligation for total duration o	nds, subject to intercept for Commonwealth owed debts unde tions, conditions or terms and any changes if rates or terms a of 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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ANTICIPATED START DATE: (Complete ONE of	otion only) The Department and Con	tractor certify for this Contract, or Contract Amendment, that igations have been incurred prior to the Effective Date.	Contract obligations:
2. may be incurred as of the Elective Date (late	LATER than the Effective Date belo	w and <u>no</u> obligations have been incurred <u>prior</u> to the Effectiv	ve Date.
X 3. were incurred as of July 1, 20 21, a care authorized to be made either as settlement	late PRIOR to the Effective Date bel	ow, and the parties agree that payments for any obligations i rsement payments, and that the details and circumstances or r releases the Commonwealth from further claims related to t	ncurred prior to the Effective Date f all obligations under this Contract
amended provided that the terms of this Contract	t and performance expectations and	10 32, with no new obligations being incurred after this of dobligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during a	resolving any claim or dispute, to
Amendment has been executed by an authorized approvals. The Contractor certifies that they have a required under the Standard Contract Form Instruction upon request to support compliance, and agrees therein according to the following hierarchy of documentarious and Contractor Certifications, the Recupacceptable, and additional negotiated terms, pro-	signatory of the Contractor, the Department of the Contractor Certifications unat all terms governing performance ment precedence, the applicable Couest for Response (RFR) or other vided that additional negotiated term of the contractor of the Couest for Response (RFR) and the contractor of the contractor of the country	ne "Effective Date" of this Contract or Amendment shall be partment, or a later Contract or Amendment Start Date specis incorporated by reference as electronically published and the order the pains and penalties of perjury, and further agrees to of this Contract and doing business in Massachusetts are attempted to the contract and Conditions, this Standard Contract solicitation, the Contractor's Response (excluding any language any amended RFR or Response terms result in best value, AUTHORIZING SIGNATURE FOR THE COMMONWE X: (Signature and Date Must Be Captured Authorization of the RFR of the Commonweaper of the RFR of the R	ified above, subject to any required to contractor makes all certifications provide any required documentation tached or incorporated by reference to Form, the Standard Contract Form guage stricken by a Department and the Contractor's Response only illower costs, or a more cost effective talt.
Print Title: Town Adminis	tratuo	Print Name: Away Beltway Print Title: Aredor of Contracts A	M Heavily
	// Indated 7/2	2/2021) Page 1 of 94	F.H



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

			and the second s
CONTRACTOR LEGAL NAME: TOWN OF TOLLAND		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs	
(and d/b/a):		MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 241 W GRANVILLE RD, TOLLAND, MA 01034-9543		Business Mailing Address: 1 Ashburton PI, Boston M	A 02108
Contract Manager: JEAN ARMITAGE	Phone: 413-258-4794	Billing Address (if different):	
E-Mail: councilonaging@tolland-ma.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192007		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Dec ID(s): 02082200000000000009	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 85	3
X NEW CONTRA	СТ	CONTRACT AMENDA	MENT
PROCUREMENT OR EXCEPTION TYPE: (Check on	e option only)	Enter Current Contract End Date Prior to Amendment:	
Statewide Contract (OSD or an OSD-designated Collective Purchase (Altach OSD approval, scope Department Procurement (includes all Grants - 8: Notice or RFR, and Response or other procureme Emergency Contract (Attach justification for emer Contract Employee (Attach Employment Status F-X Other Procurement Exception (Attach authoriz) X Other Procurement Exception (Attach authoriz) Specific exemption or earmark, and exception justifi	s, budget) 15 CMR 2.00) (Solicitation It supporting documentation) gency, scope, budget) orm, scope, budget) ng language, legislation with	Enter Amendment Amount: \$	etails of amendment changes.) ed scope and budget) ct and updated scope/budget) udget)
The Standard Contract Form Instructions and Con	tractor Certifications and the fol	lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditi	
in the state accounting system by sufficient appropriate X Rate Contract. (No Maximum Obligation) Attach	ons or other non-appropriated fun- details of all rates, units, calculation	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 and this contract (or new total if Contract is being amended). \$	815 CMR 9.00.
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 1st reason: _X_agree to standard 45 EFT 45 day payment cycle. See F		D; Payment issued within 30 days 29, § 23A); only initial payment
Commonwealth authorized through the annual GAA are MGL provide social and support services to older adult census data, at a current rate of \$12 per person. This report describing how these grant funds were applied, the prior obligation for year one is funded in the FY22.	nd other sources. The activity performs, their families and caregivers. The contract will cover any rate adjustrous and approved obligations incurred paward. The deadline to submit the		2022. The COAs established by nunicipality as per the most recent OA will complete an annual fiscal s agreement and the amount of
		actor certify for this Contract, or Contract Amendment, that Co	ontract obligations:
1. may be incurred as of the Effective Date (latest s		ations have been incurred <u>prior</u> to the Effective Date. and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	Data
X 3. were incurred as of <u>July 1</u> , 20 21 , a date are authorized to be made either as settlement page.	PRIOR to the Effective Date below ayments or as authorized reimburs	w, and the parties agree that payments for any obligations incored payments, and that the details and circumstances of a eleases the Commonwealth from further claims related to the	curred prior to the Effective Date all obligations under this Contract
amended, provided that the terms of this Contract ar	d performance expectations and	32 , with no new obligations being incurred after this da obligations shall survive its termination for the purpose of re ormance, reporting, invoicing or final payments, or during any	esolving any claim or dispute, for
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only in made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract. AUTHORIZING SIGNATURE FOR THE COMMONWEALTH: X:			
(Signature and Date Must Be Captured A		(Signature and Date Must Be Captured At	Time of Signature)
Print Title Chair - Band of Saletmen		Print Title: D.W. L. A. / In Valls And	Krondon



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

also posted at OSD Forms: https://www.mass.gov/lists/d	osd-forms.			
CONTRACTOR LEGAL NAME: TOWN OF TOPSFIELD (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 8 W COMMON ST, TOPSFIELD, MA 01983-1425		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: KATHLEEN BARBARISI	Phone: 978-887-1523	Billing Address (if different):		
E-Mail: kbarbarisi@topsfield-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192008		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000009		
(Note: The Address ID must be set up for EFT paym	nents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В	
X NEW CONTRA	СТ	CONTRACT AMEND	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check or		Enter Current Contract End Date Prior to Amendment:	, 20_ <u></u> .	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change	THE	
Collective Purchase (Attach OSD approval, scop	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 upda Interim Contract (Attach justification for Interim Contra		
Emergency Contract (Attach justification for eme	rgency, scope, budget)	Contract Employee (Attach any updates to scope or I	oudget)	
Contract Employee (Attach Employment Status F X Other Procurement Exception (Attach authoriz	ing language, legislation with	Other Procurement Exception (Attach authorizing la	nguage/justification and updated	
specific exemption or earmark, and exception justi	fication, scope and budget)	scope and budget)		
into this Contract and are legally binding: (Check Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth T	lowing Commonwealth Terms and Conditions documer erms and Conditions X Commonwealth Terms and Cond	itions For Human and Social	
in the state accounting system by sufficient appropria X Rate Contract. (No Maximum Obligation) Attact	itions or other non-appropriated fun- h details of all rates, units, calculation	horized performance accepted in accordance with the terms ds, subject to intercept for Commonwealth owed debts undo ons, conditions or terms and any changes if rates or terms at this contract (or new total if Contract is being amended).	er 815 CMR 9.00.	
PROMPT PAYMENT DISCOUNTS (PPD): Common	wealth payments are issued through	h EFT 45 days from invoice receipt. Contractors requesting 5 days % PPD; Payment issued within 20 days % P	accelerated payments must identify PD; Payment issued within 30 days	
% PPD. If PPD percentages are left blank, identif	y reason: X agree to standard 45	day cycle <u> </u>	. 29, § 23A); only initial payment	
(subsequent payments scheduled to support standar	d EFT 45 day payment cycle. See F	Prompt Pay Discounts Policy.) ENT: This 10-year contract will cover grant funds to munici	nal Councils on Aging (COA) of the	
Commonwealth authorized through the annual GAA	and other sources. The activity perf	formance period for year one of this contract is 7/1/2021-6/3	0/2022. The COAs established by	
MGI provide social and support services to older adu	ults their families and caregivers. T	he annual award is determined by the number of elders per ment or increase during the 10-year period. Each municipal	municipality as per the most recent	
report describing how these grant funds were applied	d. All approved obligations incurred	prior to the latest signature date are intended to be part of the	his 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 #4.		
ANTICIPATED START DATE: (Complete ONE option	on only) The Department and Contracture date below) and no oblic	ractor certify for this Contract, or Contract Amendment, that pations have been incurred <u>prior</u> to the Effective Date.	Contract obligations.	
2 may be incurred as of the Ellective Date (latest	ATER than the Effective Date below	v and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	ve Date.	
V 3 were incurred as of July 1 20 21 a dat	te PRIOR to the Effective Date belo	ow, and the parties agree that payments for any obligations i	incurred 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 o releases the Commonwealth from further claims related to	f all obligations under this Contract	
are attached and incorporated into this Contract	Acceptance of payments forever	D 32 , with no new obligations being incurred after this	date unless the Contract is properly	
amended provided that the terms of this Contract a	and performance expectations and	obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during a	resolving any claim or dispute, for	
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Contrions, 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 CIGNATURE FOR THE CONTRACTOR.			ALTH:	
X:			late: <u>5/24/22</u> . At Time of Signature)	
Print Name: Lynne Bermu		Print Name: Warn Vellman Print Title: DM LLOV IF CONVENTS	<u> </u>	
Print Title: (KAIC - SPIRC+	BOXX	Print Title: DIMILLO IF TONIVATS	AW! MILLIVE MAY	



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> 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.

Forms are also posted at OSD Forms: https://www.mass	s,gov/lists/osd-torms.			
CONTRACTOR LEGAL NAME: TOWN OF TOWNSEND (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD		
Legal Address: (W-9, W-4): 272 MAIN ST, TOWNSEND, MA 01469-1510		Business Malling Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: KARIN C. MOORE	Phone: 978-597-1710	Billing Address (if different):		
E-Mail: coa@townsend.ma.us	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192009		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000009		
(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 CONTRAC	CT	CONTRACT AMENDI	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check on	ne option only)	Enter Current Contract End Date Prior to Amendment:	, 20	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change"		
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8		AMENDMENT TYPE: (Check one option only. Attach de		
Notice or RFR, and Response or other procureme	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra		
Emergency Contract (Attach justification for emer		Contract Employee (Attach any updates to scope or b		
Contract Employee (Attach Employment Status F- X_ Other Procurement Exception (Attach authorizing		Other Procurement Exception (Attach authorizing lan		
specific exemption or earmark, and exception justif	fication, scope and budget)	scope and budget)		
into this Contract and are legally binding: (Check C Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth T	llowing Commonwealth Terms and Conditions document ferms and Conditions X Commonwealth Terms and Conditions	tions For Human and Social	
in the state accounting system by sufficient appropriat X Rate Contract. (No Maximum Obligation) Attach	tions or other non-appropriated fun h details of all rates, units, calculati	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 and this contract (or new total if Contract is being amended).	r 815 CMR 9.00	
		h EFT 45 days from invoice receipt. Contractors requesting a	ecologistad 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 day cycle statutory/legal or Ready Payments (M.G.L. c.	PD; Payment issued within 30 days	
(subsequent payments scheduled to support standard	d 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 adul census data, at a current rate of \$12 per person. This	and other sources. The activity perfults, their families and caregivers. The contract will cover any rate adjustres. 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 he annual award is determined by the number of elders per re ment or increase during the 10-year period. Each municipal of prior to the latest signature date are intended to be part of the e signed contract is 6/30/22. MA #4.	0/2022. The COAs established by municipality as per the most recent COA will complete an annual fiscal	
		actor certify for this Contract, or Contract Amendment, that C	Contract obligations:	
		pations have been incurred prior to the Effective Date.	2.7	
		y and no obligations have been incurred prior to the Effective w, and the parties agree that payments for any obligations in		
are authorized to be made either as settlement p	payments or as authorized reimburs	sement payments, and that the details and circumstances of releases the Commonwealth from further claims related to the	all obligations under this Contract	
		0.32 , with no new obligations being incurred after this de		
amended, provided that the terms of this Contract a	and performance expectations and	obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during 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 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 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:				
X: Van Deury Date: 33.93 (Signature and Date Must Be Captured At Time of Signature) Print Name: Poss Porny Print Title: Entering Town Administration Print Title: Print Tit				



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

Torris are also posted at OOD Torris. https://www.mass	J.govilistorosu forms.			
CONTRACTOR LEGAL NAME: TOWN OF TRURO		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs		
(and d/b/a):		MMARS Department Code: ELD		
Legal Address: (W-9, W-4): PO BOX 2030, TRURO, MA 02666-2030		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: DAMION CLEMENTS	Phone: 508-487-2462	Billing Address (if different):		
E-Mail: dclements@truro-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192010		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD <u>001.</u>		MMARS Doc ID(s): 02082200000000000009		
(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	СТ	CONTRACT AMENDM		
PROCUREMENT OR EXCEPTION TYPE: (Check on	e option only)	Enter Current Contract End Date <u>Prior</u> to Amendment:		
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	5, budget) 15 CMR 2.00) (Solicitation	AMENDMENT TYPE: (Check one option only. Attach deAmendment to Date, Scope or Budget (Attach update		
Notice or RFR, and Response or other procureme	ent supporting documentation)	Interim Contract (Attach justification for Interim Contra		
Emergency Contract (Attach justification for emer Contract Employee (Attach Employment Status F	gency, scope, budget)	Contract Employee (Attach any updates to scope or be		
X Other Procurement Exception (Attach authorizing	ng language, legislation with	Other Procurement Exception (Attach authorizing lan		
specific exemption or earmark, and exception justif		scope and budget)		
into this Contract and are legally binding: (Check C Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth Te	owing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	ions For Human and Social	
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% PPD. If PPD percentages are left blank, identify (subsequent payments scheduled to support standard BRIEF DESCRIPTION OF CONTRACT PERFORMAL Commonwealth authorized through the annual GAA a MGL provide social and support services to older adult census data, at a current rate of \$12 per person. This	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 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			
		actor certify for this Contract, or Contract Amendment, that C	contract obligations:	
		ations have been incurred prior 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 p	ayments or as authorized reimburs	 and the parties agree that payments for any obligations in ement payments, and that the details and circumstances of eleases the Commonwealth from further claims related to th 	all obligations under this Contract	
amended, provided that the terms of this Contract at	nd performance expectations and	32 , with no new obligations being incurred after this da obligations shall survive its termination for the purpose of o ormance, reporting, invoicing or final payments, or during an	resolving any claim or dispute, for	
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(Signature and Date Must Be Cantured	At Time of Signature)	(Signature and Date Must Be Captured At	Time of Signature)	
Print Name: Davrin K. Tanac	Mater	Print Name: Waren Brilman		
Dulat Titles		Print Title: Divalet of Carolinet & and	TIA 11de catives	

1/2

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 Departments when another form is not prescribed by regulation or policy. The Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth Terms of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the <u>Standard Contract Form Instructions and Contractor Certifications</u>, the <u>Commonwealth Terms and Conditions 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.macomptroller.org/forms. Forms are also posted at OSD Forms: https://www.macomptroller.org/forms.

Forms are also posted at OSD Forms: https://www.mass.gov/lists/osd-forms.				
CONTRACTOR LEGAL NAME: TOWN OF TYNGSBOROUGH (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive O MMARS Department Code: ELD	ffice of Elder Affairs	
Legal Address: (W-9, W-4): 10 KENDALL RD, TYNG	SBOROUGH, MA 01879-1013	Business Mailing Address: 1 Ashburton Pl, Boston M.	A 02108	
Contract Manager: BARBARA ROCHE	Phone: 978-649-9211	Billing Address (if different):		
E-Mail: broche@tyngsboroughma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192011		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
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Notice or RFR, and Response or other procureme	ent supporting documentation)	Amendment to Date, Scope or Budget (Attach update	ed scope and budget)	
Emergency Contract (Attach justification for emergency)	gency, scope, budget)	Interim Contract (Attach justification for Interim Contract Contract Employee (Attach any updates to scope or but		
Contract Employee (Attach Employment Status Fo _X_ Other Procurement Exception (Attach authorizing	ng language, legislation with	Other Procurement Exception (Attach authorizing lang		
specific exemption or earmark, and exception justifi	ication, scope and budget)	scope and budget)		
Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth Te	llowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	ions For Human and Social	
in the state accounting system by sufficient appropriati X Rate Contract. (No Maximum Obligation) Attach	ions or other non-appropriated fund details of all rates, units, calculation	horized 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 and this contract (or <i>new</i> total if Contract is being amended). \$	815 CMR 9 00	
% PPD. If PPD percentages are left blank, identify	% PPD; Payment issued within 15 reason: X agree to standard 45	h EFT 45 days from invoice receipt. Contractors requesting ac 5 days % PPD; Payment issued within 20 days % PPI day cycle statutory/legal or Ready Payments (<u>M.G.L. c. 2</u> Prompt Pay Discounts Policy.)	D. Payment issued within 30 days	
BRIEF DESCRIPTION OF CONTRACT PERFORMAN Commonwealth authorized through the annual GAA ar MGL provide social and support services to older adult census data, at a current rate of \$12 per person. This of report describing how these grant funds were applied. the prior obligation for year one is funded in the FY22 a	(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 #4.			
ANTICIPATED START DATE: (Complete ONE option	only) The Department and Contra	actor certify for this Contract, or Contract Amendment, that Co	ontract obligations:	
1. may be incurred as of the Effective Date (latest s	ignature date below) and no obliga	ations have been incurred <u>prior</u> to the Effective Date. or and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	5.7	
X 3. were incurred as of July 1, 20 21, a date	PRIOR to the Effective Date below	w, and the parties agree that payments for any obligations inc	curred prior to the Effective Date	
are authorized to be made either as settlement pa are attached and incorporated into this Contract.	ayments or as authorized reimburs Acceptance of payments forever re	sement payments, and that the details and circumstances of a releases the Commonwealth from further claims related to the	all obligations under this Contract ese obligations.	
completing any negotiated terms and warranties, to all	CONTRACT END DATE: Contract performance shall terminate as of, 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: AUTHORIZING SIGNATURE FOR THE COMMONWEALTH: X:				
Print Name: Wathraw Parker. Print Title: War Adwards and Melevatra			1 Million Hiz	



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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.macomptroller.org/forms.
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Forms are also posted at OSD Forms, https://www.mas	S.QUV/IISIS/USU-IUIIIIS.		
CONTRACTOR LEGAL NAME: TOWN OF TYRINGHAM (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 116 MAIN RD, TYRINGHAM, MA 01264-9700		Business Mailing Address: 1 Ashburton Pl, Boston MA 02108	
Contract Manager: TIM TAYLOR	Phone: 413-243-1749	Billing Address (if different):	
E-Mail: tyringham.coa@gmail.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192012		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000000	
(Note: The Address ID must be set up for EFT paym	ients.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	8
X NEW CONTRA	CT	CONTRACT AMENDI	
PROCUREMENT OR EXCEPTION TYPE: (Check or	. X	Enter Current Contract End Date <u>Prior</u> to Amendment:	
Statewide Contract (OSD or an OSD-designated		Enter Amendment Amount: \$ (or "no change"	
Collective Purchase (Attach OSD approval, scope	e, budget)	AMENDMENT TYPE: (Check one option only. Attach d	
Department Procurement (includes all Grants - 8		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 eme		Interim Contract (Attach justification for Interim Contra	
Contract Employee (Attach Employment Status F	orm, scope, budget)	Contract Employee (Attach any updates to scope or b	
X Other Procurement Exception (Attach authorized specific exemption or earmark, and exception justice)		Other Procurement Exception (Attach authorizing lan scope and budget)	guage/justification and updated
		llowing Commonwealth Terms and Conditions document	are incomprated by reference
into this Contract and are legally binding: (Check of Services Commonwealth IT Terms and Conditions	ONE option):Commonwealth T	Ferms and Conditions X Commonwealth Terms and Conditions	tions For Human and Social
COMPENSATION: (Check ONE option): The Department	nent certifies that payments for aut	thorized performance accepted in accordance with the terms	of this Contract will be supported
in the state accounting system by sufficient appropriat X. Rate Contract (No Maximum Obligation). Attack	ions or other non-appropriated fun	ids, subject to intercept for Commonwealth owed debts under ions, conditions or terms and any changes if rates or terms a	r <u>815 CMR 9.00</u> .
		this contract (or new total if Contract is being amended). \$	to being amended.)
The second secon	- Neuron	h EFT 45 days from invoice receipt. Contractors requesting a	easlessind normants 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	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		ENT: This 10-year contract will cover grant funds to municip	ol Councils on Asing (COA) of the
Commonwealth authorized through the annual GAA a	nd other sources. The activity perf	formance period for year one of this contract is 7/1/2021-6/30	/2022. The COAs established by
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report describing how these grant funds were applied.	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	OA will complete an annual fiscal
the prior obligation for year one is funded in the FY22	award. The deadline to submit the	e signed contract is 6/30/22. MA #4.	
		actor certify for this Contract, or Contract Amendment, that C	Contract obligations:
		pations have been incurred prior to the Effective Date.	
	I EK than the Effective Date below	v and <u>no</u> obligations have been incurred <u>prior</u> to the Effective	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	curred prior to the Effective Date
are attached and incorporated into this Contract.	Acceptance of payments forever	releases the Commonwealth from further claims related to th	ese obligations.
CONTRACT END DATE: Contract performance sha	Il terminate as ofJune 30_, 20	0_32, with no new obligations being incurred after this da	ate unless the Contract is properly
		obligations shall survive its termination for the purpose of a formance, reporting, invoicing or final payments, or during an	
Amendment has been executed by an authorized sign	representations by the parties, the natury of the Contractor, the Deo:	e "Effective Date" of this Contract or Amendment shall be tartment, or a later Contract or Amendment Start Date specif	he latest date that this Contract or
approvals. The Contractor certifies that they have acc	essed and reviewed all documents	incorporated by reference as electronically published and the	Contractor makes all certifications
required under the Standard Contract Form Instruction	is and Contractor Certifications und	der the pains and penalties of perjury, and further agrees to p	rovide any required documentation
herein according to the following hierarchy of docume	an terms governing performance of ent precedence, the applicable Cor	of this Contract and doing business in Massachusetts are atta rimonwealth Terms and Conditions, this Standard Contract I	Form, the Standard Contract Form
Instructions and Contractor Certifications, the Reque	est for Response (RFR) or other s	solicitation, the Contractor's Response (excluding any langu	age stricken by a Department as
		s will take precedence over the relevant terms in the RFR and any amended RFR or Response terms result in best value, lo	
Contract.	Temporary more many provided unan	any amended for it of itemporate terms result in best value, to	wer costs, or a more cost enective
AUTHORIZING SIGNATURE BY THE COUTPAGE		AUTHORIZING SIGNATURE FOR THE COMMONWEA	LTH:
X: Panel	Date: 6/30/20	X: /// . Vm . Da	te: 0 30 122
(Signature and Date Must Be Captured At Time of Signature)		(Signature and Date Must Be Captured At	Time of Signature)
Print Name: James Consolati.			and the second s
	tr.	Print Name: Aaven Beitman Print Title: Director of Contracts and	



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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
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 TYRINGHAM		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs	
(and d/b/a):		MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 116 MAIN RD, TYRINGHAM, MA 01264-9700		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: TIM TAYLOR	Phone: 413-243-1749	Billing Address (if different):	
E-Mail: tyringham.coa@gmail.com	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192012		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001 .		MMARS Doc ID(s): 02082200000000000009	
(Note: The Address ID must be set up for EFT paym	ents.)	RFR/Procurement or Other ID Number: MGL c. 40 s. 85	3
X NEW CONTRAC	CT	CONTRACT AMENDA	/ENT
PROCUREMENT OR EXCEPTION TYPE: (Check on	road seators	Enter Current Contract End Date <u>Prior</u> to Amendment:	AND
Statewide Contract (OSD or an OSD-designated I	Department)	Enter Amendment Amount: \$ (or "no change")	for the second to the second t
Collective Purchase (Attach OSD approval, scope Department Procurement (includes all Grants - 8*		AMENDMENT TYPE: (Check one option only. Attach de	
Notice or RFR, and Response or other procureme		Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra	
Emergency Contract (Attach justification for emergency Contract)	gency, scope, budget)	Contract Employee (Attach any updates to scope or but	
Contract Employee (Attach Employment Status For X Other Procurement Exception (Attach authorizing X Other Procurement Exception (Attach authorizing X Other Procurement Exception (Attach Employment Status For X Other Procurement Exception (Attach Employment Exception (Attach Employm		Other Procurement Exception (Attach authorizing lang	
specific exemption or earmark, and exception justifi		scope and budget)	
		lowing Commonwealth Terms and Conditions document erms and Conditions X Commonwealth Terms and Conditions	
		norized performance accepted in accordance with the terms	
in the state accounting system by sufficient appropriati	ons or other non-appropriated fun-	ds, subject to intercept for Commonwealth owed debts under ons, conditions or terms and any changes if rates or terms ar	815 CMR 9.00.
		this contract (or new total if Contract is being amended). \$_	e being amended.)
PROMPT PAYMENT DISCOUNTS (PPD): Commonwa PPD as follows: Payment issued within 10 days	realth payments are issued through % PPD; Payment issued within 19 reason: X agree to standard 45	n EFT 45 days from invoice receipt. Contractors requesting ac 5 days % PPD; Payment issued within 20 days % PPI day cycle statutory/legal or Ready Payments (<u>M.G.L. c. </u>	D; Payment issued within 30 days
Commonwealth authorized through the annual GAA an MGL provide social and support services to older adul census data, at a current rate of \$12 per person. This	nd other sources. The activity perficis, 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 municiper 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 nent or increase during the 10-year period. Each municipal C prior to the latest signature date are intended to be part of this e signed contract is 6/30/22. MA #4.	/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	ontract obligations:
1. may be incurred as of the Effective Date (latest s			Data
		and <u>no</u> obligations have been incurred <u>prior</u> to the Effective w, and the parties agree that payments for any obligations inc	
are authorized to be made either as settlement pa	ayments or as authorized reimburs	ement payments, and that the details and circumstances of a	all obligations under this Contract
		releases the Commonwealth from further claims related to the	and the second s
amended, provided that the terms of this Contract ar	nd performance expectations and	32 , with no new obligations being incurred after this da obligations shall survive its termination for the purpose of r ormance, reporting, invoicing or final payments, or during any	resolving any claim or dispute, for
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any required documentations under the pains and penalties of perjury, and further agrees to provide any territorial further agrees to provide any further agrees to provide			



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

roinis are also posted at OSD i offis. https://www.irias	a.gov/iiata/oau-ioriiia.			
CONTRACTOR LEGAL NAME: TOWN OF UPTON (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, UPTON, MA 01568-1619		Business Mailing Address: 1 Ashburton PI, Boston MA 02108		
Contract Manager: JANICE NOWICKI	Phone: 508-529-4558	Billing Address (if different):		
E-Mail: jnowicki@uptonma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419	
Contractor Vendor Code: VC6000192013		E-Mail: Stacey.oconnell@mass.gov	Fax: 617-727-9368	
Vendor Code Address ID (e.g. "AD001"): AD 001.		MMARS Doc ID(s): 02082200000000000000		
(Note: The Address ID must be set up for EFT paym	61 1001	RFR/Procurement or Other ID Number: MGL c. 40 s. 8	В	
X NEW CONTRA	CT	CONTRACT AMENDI	MENT	
PROCUREMENT OR EXCEPTION TYPE: (Check or	MSS 18 (b)	Enter Current Contract End Date <u>Prior</u> to Amendment:		
Statewide Contract (OSD or an OSD-designated	2.0 ASS	Enter Amendment Amount: \$ (or "no change")	
Collective Purchase (Attach OSD approval, scop Department Procurement (includes all Grants - 8		AMENDMENT TYPE: (Check one option only. Attach d		
Notice or RFR, and Response or other procurement		Amendment to Date, Scope or Budget (Attach update Interim Contract (Attach justification for Interim Contra		
Emergency Contract (Attach justification for emer		Contract Employee (Attach any updates to scope or b		
Contract Employee (Attach Employment Status F X_Other Procurement Exception (Attach authorizing		Other Procurement Exception (Attach authorizing lan		
specific exemption or earmark, and exception justi		scope and budget)		
	ONE option): Commonwealth T	Ilowing Commonwealth Terms and Conditions document ferms and Conditions X Commonwealth Terms and Conditions		
in the state accounting system by sufficient appropria	tions or other non-appropriated fun	horized performance accepted in accordance with the terms ds, subject to intercept for Commonwealth owed debts unde	r <u>815 CMR 9.00</u> .	
		ons, conditions or terms and any changes if rates or terms at this contract (or <i>new</i> total if Contract is being amended). \$_	re being amended.)	
a PPD as follows: Payment issued within 10 days	wealth payments are issued through % 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: Pavment issued within 30 days	
% PPD. If PPD percentages are left blank, identify	y reason: X agree to standard 45	day cycle statutory/legal or Ready Payments (M.G.L. c.		
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		ormance period for year one of this contract is 7/1/2021-6/30		
		he annual award is determined by the number of elders per r		
		nent or increase during the 10-year period. Each municipal 0 prior to the latest signature date are intended to be part of th		
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 #4.		
		ractor certify for this Contract, or Contract Amendment, that C	Contract obligations:	
		pations have been incurred prior to the Effective Date.	- D-I-	
		r and <u>no</u> obligations have been incurred <u>prior</u> to the Effective w, and the parties agree that payments for any obligations in		
		sement payments, and that the details and circumstances of all obligations under this Contract		
		releases the Commonwealth from further claims related to the		
		0_32, with no new obligations being incurred after this da		
	점하다 내 내내 내내 내내 내내 내내 내내 내내 내내내 내내내내내내내내내내	obligations shall survive its termination for the purpose of formance, reporting, invoicing or final payments, or during an	• .	
CERTIFICATIONS: Notwithstanding verbal or other	representations by the parties, the	e "Effective Date" of this Contract or Amendment shall be tartment, or a later Contract or Amendment Start Date speci	the latest date that this Contract or	
approvals. The Contractor certifies that they have account	cessed and reviewed all documents	incorporated by reference as electronically published and the	e 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 document upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by refer				
herein according to the following hierarchy of document precedence, the applicable Com		mmonwealth Terms and Conditions, this Standard Contract	Form, the Standard Contract Form	
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made using the process outlined in 801 CMR 21.07, incorporated herein, provided that a				
Contract.				
AUTHORIZING SIGNATURE FOR THE CONTRACT	OR: 2/1/11	AUTHORIZING SIGNATURE FOR THE COMMONWEA	ALTH: U/4/22	
X	Date: S/d/JJ	X:	te: 9(0100.	
(Signature and Date Must Be Captured Print Name: DELEK BRIDES	At time of Signature)	X:	t time of Signature)	
Print Title: Tolen manaka		Print Name: VALTIV SPIMMIN Print Title: DIWCHUY JE (JUNULES MA)	12 complying	
Time file.		Time this. process of posterior pay	_pr(com. s)	

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CONTRACTOR LEGAL NAME: TOWN OF UXBRIDGE (and d/b/a):		COMMONWEALTH DEPARTMENT NAME: Executive Office of Elder Affairs MMARS Department Code: ELD	
Legal Address: (W-9, W-4): 21 S MAIN ST, UXBRIDGE, MA 01569-1851		Business Mailing Address: 1 Ashburton PI, Boston MA 02108	
Contract Manager: LISA BERNARD ,	Phone: 508-2/8-8622	Billing Address (if different):	
E-Mail: Ibernard@uxbridge-ma.gov	Fax:	Contract Manager: Stacey Anne O'Connell	Phone: 617-222-7419
Contractor Vendor Code: VC6000192014		E-Mail: Stacey.oconneli@mass.gov	Fax: 617-727-9368
Vendor Code Address ID (e.g. "AD001"): AD 001 .		MMARS Doc ID(s): 02082200000000000009	
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PROCUREMENT OR EXCEPTION TYPE: (Check one option unity)		Enter Current Contract End Date Prior to Amendment:, 20	
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Collective Purchase (Attach OSD approval, scope, bi aget)		AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)	
Department Procurement (includes all Grants - <u>\$15 OMR 2.00</u>) (Scheltation Notice or RFR, and Response or other procurement supporting documentation)		Amendment to Date Scope or Budget (Attach updated scope and budget)	
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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 signed contract is 6/30/22. MA #4.			
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 <u>no</u> obligations have been incurred <u>prior</u> to the Effective Date2. may be incurred as of, 20, a date LATER than the Effective Date below and <u>no</u> obligations have been incurred <u>prior</u> to the Effective Date.			
X 3. were incurred as of July 1, 20 21, a date LATER than the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date.			
are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract			
are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.			
CONTRACT END DATE: Contract performance shall terminate as of <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 Centract 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:			
/0' / ID / 11 ' ID A / I / IT / CAY / I			
Print Name: Name: Note The Print Name: Note The Print Name:			
Print Title: Divictor of Contracts and Miller of the Print Title: Divictor of Contracts and Miller of the Print Title:			