THIRD AMENDATORY AGREEMENT

This **THIRD AMENDATORY AGREEMENT** is made between the **CITY AND COUNTY OF DENVER**, a municipal corporation of the State of Colorado (the "City") and **JEFFERSON COUNTY PUBLIC HEALTH**, doing business at 645 Parfet Street, Lakewood, Colorado 80215 (the "Contractor"), jointly ("the Parties").

RECITALS:

- A. The Parties entered into an Agreement dated July 30, 2018, an Amendatory Agreement dated May 24, 2019 and Second Amendment dated December 13, 2019 (collectively, the "Agreement") to provide the services described in the scope of work.
- **B.** The Parties wish to amend the Agreement to extend the term, increase the maximum contract amount, and amend the budget.

NOW THEREFORE, in consideration of the premises and the Parties' mutual covenants and obligations, the Parties agree as follows:

- 1. Section 3 of the Agreement entitled "**TERM**" is hereby deleted in its entirety and replaced with:
 - "3. <u>TERM</u>: The Agreement will commence on July 1, 2018, and will expire on June 30, 2021 unless extended in accordance with the terms of the Agreement (the "Term"). The term of this Agreement may be extended by the City up to and including five (5) years from the date of final execution under the same terms and conditions by a written amendment to this Agreement. Subject to the Executive Director's prior written authorization, the Consultant shall complete any work in progress as of the expiration date and the Term of the Agreement will extend until the work is completed or earlier terminated by the Executive Director."
- 2. Section 4 of the Agreement entitled "<u>Compensation and Payment</u>" Sub-section d. (1) entitled "<u>Maximum Contract Amount:</u>" is hereby deleted in its entirety and replaced with:

"d. Maximum Contract Amount:

(1) Notwithstanding any other provision of the Agreement, the City's maximum payment obligation will not exceed FIVE HUNDRED SIXTY-SIX THOUSAND SIX HUNDRED FIFTY-THREE DOLLARS AND SIXTY-FOUR CENTS (\$566,653.64) (the "Maximum Contract Amount"). The City is not obligated to execute an Agreement or any amendments for any further services, including any services performed by consultant beyond that specifically described in Exhibit A. Any services performed beyond those in Exhibit A are performed at Consultant's risk and without authorization under the Agreement."

- 3. **Exhibit A, Exhibit A-1,** and **Exhibit A-2,** are hereby deleted in their entirety and replaced with **Exhibit A-3 Budget**, attached and incorporated by reference herein. All references in the original Agreement to Exhibit A, Exhibit A-1 and Exhibit A-2 are changed to Exhibit A-3.
- 4. As herein amended, the Agreement is affirmed and ratified in each and every particular.
- 5. This Third Amendatory Agreement will not be effective or binding on the City until it has been fully executed by all required signatories of the City and County of Denver, and if required by Charter, approved by the City Council.

[THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK.]

Contract Control Number:

Contractor Name:	JEFFERSON COUNTY PUBLIC HEALTH			
IN WITNESS WHEREOF, the par Denver, Colorado as of:	rties have set their hands and affixed their seals at			
SEAL	CITY AND COUNTY OF DENVER:			
ATTEST:	By:			
APPROVED AS TO FORM:	REGISTERED AND COUNTERSIGNED:			
Attorney for the City and County of	Denver			
By:	By:			
	By:			

ENVHL-202055646-03/201842561-03

Contract Control Number: Contractor Name:

ENVHL-202055646-03/ALF 201842561-03 JEFFERSON COUNTY PUBLIC HEALTH

DocuSigned by:			
Ву:	Greg Deranleau		
•	AEA5ABF4778A461		
Name	(please print)		
	(please print)		
Title:	Board of Health President		
	(please print)		
ATTE	ST: [if required]		
By:			
-			
Name	:		
1 vario	(please print)		
	(pieuse print)		
Title:			
Title.	(please print)		
	(picase print)		



Contractor Name Jefferson County Public Health Budget Period July 1, 2020 - June 30, 2021			

Program Contact Name, Title, Phone and Email		
Fiscal Contact Name, Title,	Salma Jakane, Sr.Financial	
Phone and Email	Analyst, 303-271-5775,	
	sjakane@jeffco.us	

Expenditure Categories						
	Personal Services Salaried Employee	s				
Position Title	Description of Work	Budget Item Supports SOW (Yes/No)	Gross or Annual Salary	Fringe	Percent of Time on Project	Total Amount Requested from CDPHE
Food Systems Coordinator1	Facilitates the Food Policy Council; supports the successful completion of the Statement of Work; responsible for the complete neighborhood food environment program; provides technical assistance upon request; maintains and develops strategic partnerships including participating in regional and statewide networks and coalitions; works to align efforts with the Healthy Jeffco Network and Community Health Improvement Plan; responsible for report compilation and submission; other duties upon request.	Yes	\$73,267.90	\$26,329.11	89%	\$88,641.34
Community Engagement Specialist Allyson	Work at the neighborhood level to help identify participating neighborhoods, conduct community assessments, facilitate food systems work, reports to the neighborhoods, Food System Coordinator, and Food Policy Council. Maintain coalition database(s), support the staff with data tracking and reporting; conducts research and policy analysis; supports coalition facilitation activities; supports implementation of communication strategies; other duties upon request	Yes	\$50,784.00	\$15,355.68	60%	\$39,683.81
Personal Services Hourly Employees						
Budget Item Total # of Supports SOW Hourly Hours on Position Title Description of Work (Yes/No) Hourly Wage Fringe Project				Total Amount Requested from CDPHE		
Temp - 1			\$25.00	\$5.00	300	\$9,000.00
Total Personal Services (including fringe benefits)				\$137,325.14		
Supplies & Operating Expenses						

Contractor Name				
Budget Period				
Project Name	CCPD Food Policy Council			

	Program Contact Name, Title, Phone and Email			
Fiscal Contact Name, Title,	Salma Jakane, Sr.Financial			
	Phone and Email	Analyst, 303-271-5775,		
		sjakane@jeffco.us		

ltem	Description of Item	Budget Item Supports SOW (Yes/No)	Rate	Quantity	Total Amount Requested from CDPHE
Incentives	Purchase of Gift cards	Yes			\$50.00
Media and Communications	Purchase of media related to program priorities and goals	Yes			\$20.00
Phone	Cell Phone charges	Yes	\$54.00	12.00	\$648.00
Printing	External vendor layout and printing for reports or maps to be	Yes			\$50.00
Office/general supplies	General office and program supplies	Yes			\$500.00
Meetings	Facilitates the Food Policy Council, helps organize neighborhood	Yes			\$3,000.00
					\$0.00
			To	tal Supplies	
			& Operation	ng Expenses	\$4,268.00

Contractor Name				
Budget Period				
Project Name	CCPD Food Policy Council			

	Program Contact Name, Title, Phone and Email			
Fiscal Contact Name, Title,	Salma Jakane, Sr.Financial			
	Phone and Email	Analyst, 303-271-5775,		
		sjakane@jeffco.us		

	Travel				
ltem	Description of Item	Budget Item Supports SOW (Yes/No)	Rate	Quantity	Total Amount Requested from CDPHE
Out of state travel	Two conferences for staff based on current needs of coalitions. Estimated cost per conference: registration (approx. \$650 per conference), hotel (4 nights approx. \$820), flights (approx. \$600), per diem (approx. \$70/day) and transportation (approx. \$120)	Yes			\$200.00
Mileage	Mileage for staff to attend meetings around the region to successfully implement the Statement of Work and support neighborhood and coalition activities, and attend meetings with local, regional and statewide partners (@ \$.58)	Yes	\$0.58	1109.92	\$643.75
Instate Travel	Three instate conferences for staff based on current needs of coalitions and neighborhoods. Estimated cost per conference: registration (approx. \$300 per conference), hotel (1 night approx. \$170), per diem (approx. \$55/day) mileage included above.	Yes			\$303.53
				Total Travel	\$1,147.28
	Contractual				
Subcontractor Name	Description of Item	Budget Item Supports SOW (Yes/No)	Rate	Quantity	Total Amount Requested from CDPHE
TBD - Eric Ross					\$4,000.00 \$0.00
Total Contractual			\$4,000.00		
SUB-TOTAL BEFORE INDIRECT			\$146,740.43		

Contractor Name Jefferson County Public Health Budget Period July 1, 2020 - June 30, 2021			

Program Contact Name, Title, Phone and Email	
Fiscal Contact Name, Title, Phone and Email	Salma Jakane, Sr.Financial
	Analyst, 303-271-5775,
	sjakane@jeffco.us

Indirect		
		Total Amount Requested from
Item	Description of Item	CDPHE
CDPHE-approved indirect cost rate	2020 Approved indirect cost rate =30.6%	\$44,902.57
	Total Indirect	\$44,902.57
	TOTAL	\$191,643.00