
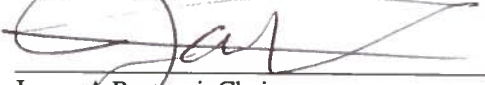


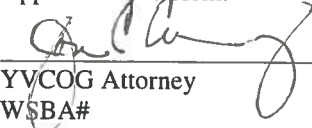


CONSOLIDATED HOMELESS GRANT PROGRAM CONTRACT

FACE SHEET

CONTRACTOR IS A <input checked="" type="checkbox"/> SUBRECIPIENT <input type="checkbox"/> VENDOR		CONTRACT NUMBER: 2016-17 CHG YNHS (mod 1)
1. NAME/ADDRESS: Anita Monoian, CEO Yakima Neighborhood Health Svcs PO BOX 2605 Yakima WA 98907-2605	2. ORIGINAL CONTRACT AMOUNT: \$1,000	5. PREVIOUS CONTRACT AMOUNT: \$1000.00
	3. CASH MATCH REQUIREMENT: \$0.00	6. MODIFICATION AMOUNT: \$312,862.61
	4. TOTAL CONTRACT AMOUNT: \$1000.00	7. NEW TOTAL CONTRACT AMOUNT: \$313,862.61
8. CONTACT INFO: Rhonda Hauff, COO/Dep CEO 509-574-5552 rhonda.hauff@ynhs.org	9. YVCOG PROGRAM CONTACT INFO: Crystal Testerman, Program Mgr 311 N 4 th Street, Suite 204 Yakima WA 98901 509-759-7987 crystal.testerman@yvcog.org	10. YVCOG FISCAL CONTACT INFO: Christina Wickenhagen 311 N 4 th St, Suite 204 Yakima WA 98901 509-759-7986 chris.wickenhagen@yvcog.org
11. CONTRACT START DATE: January 1, 2017		12. CONTRACT END DATE: June 30, 2017
13. FUNDING AUTHORITY: Washington State Dept of Commerce Consolidated Homeless Grant (CHG)		
14. STATE AND FEDERAL "BARS" CODE: N/A		15. CFDA NUMBER(S): N/A
16. PURPOSE: This contract provides resources to address the needs of people who are homeless or at-risk of homelessness, as described in the YVCOG Local Homeless Plan in the county of Yakima where Grantee will provide services. CHG funds and supports a variety of activities, including: operation of facility-based support, rental assistance, data collection and reporting.		
EXHIBITS: When the box below is marked with an X, the following Exhibits are attached and are incorporated into this Contract by reference: <input checked="" type="checkbox"/> Exhibits (specify): Exhibit A – Special Terms and Conditions Exhibit B – Scope of Work Exhibit C - Budget		
This Contract contains all of the terms and conditions agreed upon by the parties and all documents attached or incorporated by reference, include Basic Interagency Agreement or its successor. No other understandings or representations, oral or otherwise, regarding the subject matter of this Contract shall be deemed to exist or bind the parties. The parties signing below warrant that they have read and understand this Contract and have authority to enter into this Contract.		
YAKIMA NEIGHBORHOOD HEALTH SVS  _____ Anita Monoian, CEO		YAKIMA VALLEY CONFERENCE OF GOVERNMENT  _____ James A Restucci, Chairman
_____ Date 2-7-17		 _____ Lauris C Mattson, Executive Director
Attest:  _____ Jessica Hansen, Office & Comm. Specialist		Approved as to form:  _____ YVCOG Attorney WSBA#

BUDGET

YAKIMA NEIGHBORHOOD HEALTH SERVICES (YNHS)

CHG							
Project	Admin	Rent Assist. (for profit)	Facility Support (for profit)	Operations	TANF FP Rent	TANF Operations	CHG Total
YNH RRH	\$2,393.25	\$58,706.09	\$0	\$7,239.86	\$26,372.00	\$9,037.00	\$103,748.20
YNH Respite	\$0	\$0	\$9,948.00	\$0	\$0	\$0	\$9,948.00
	\$2,393.25	\$58,706.09	\$9,948.00	\$7,239.86	\$26,372.00	\$9,037.00	\$113,696.20

HEN FY17				
Project	Admin	Rent/Utilities /EN	Operations	HEN Total
YNH HEN	\$2,075.56	\$165,263.75	\$32,827.10	\$200,166.41

Invoicing Provisions:

A. Monthly invoices and documentation must be submitted in both the following two ways:

- Electronically: Submitted electronic invoices must be provided concurrently to the program manager and to your fiscal contact. Electronic invoices must be submitted no later than the 8th of the month. If the 8th falls on a Saturday or Sunday, invoices must be received by close of business the following Monday.
- Original invoice via delivery: A signed original hard copy of the invoice must be submitted to Yakima Valley Conference of Governments Financial Services. The signed original invoice must be received no later than the 10th of the month to be paid on the next scheduled payable date at the following address:

Yakima Valley Conference of Governments
311 N 4th Street, Suite 204
Yakima, WA 98901

- B. Under "General Terms and Conditions," documentation of Insurance as reflected section 16. Must accompany the first invoice before payment will be made.
- C. All late invoices will not be paid until the following month; the decision to approve or deny payment of claims for services submitted more than 45 days after the end of the end