

Agreement Amount: \$35,782 Agreement Term Period: **10/01/2021 to 09/30/2023** CARS Pre-Packet No: 23572

DPH Contract No.: 52874-7

DHS Division: Division of Public Health DHS Grant Administrator: Anna Benton DHS Email: <u>DHSGACMail@dhs.wisconsin.gov</u> Grantee Grant Administrator: Ms Treemanisha Stewart Grantee Address: 505 BROADWAY STREET, BARABOO, WI, 53913 Grantee Email: treemanisha.stewart@saukcountywi.gov

Modification Description: We are adding funding for the SNAP-Ed Nutritional Grant (Profile 154661). Final reports are due 45 days from the end of the designated contract period for any included profiles.

This is a Modification of an existing Agreement, as specified above. This Modification of Agreement encompasses both Amendments and Addendums to an existing Grant Agreement. This Modification is entered into by and between the State of Wisconsin Department of Health Services (DHS) and the Grantee listed above. With the exception of the terms being modified by this Grant Agreement Modification, ALL OTHER TERMS AND CONDITIONS OF THE EXISTING AGREEMENT, INCLUDING FUNDING, REMAIN IN FULL FORCE AND EFFECT. This Modification, including any and all attachments herein and the existing agreement, collectively, are the complete agreement of the parties and supersede any prior agreements or representations. DHS and the Grantee acknowledge that they have read the Modification and understand and agree to be bound by the terms and conditions of the existing agreement as modified by this action. This Modification becomes null and void if the time between the earlier dated signature and the later dated signature exceeds sixty (60) days, unless waived by DHS.

State of Wi Departmen	isconsin at of Health Services	Grantee Entity Name:	County of Sauk
Authorized Representative		Authorized Representative	
Name:	Anna Benton	Name:	Brent Miller
Title:	Assistant Administrator, Division of Public Health	Title:	Administrator
Signature:	DocuSigned by: Inna Burton AF2CECDAF36A431	Signature:	DocuSigned by: Brent Miller 0A0B3AC690D7404
Date:	6/19/2023	Date:	6/16/2023

CIVIL RIGHTS COMPLIANCE ATTACHMENT

The Wisconsin Department of Health Services and Grantee agree to the below change to the agreement. The below enumerated agreement revision is hereby incorporated by reference into the agreement and is enforceable as if restated therein in its entirety.

Section 10 of the Agreement ("CIVIL RIGHTS COMPLIANCE") is hereby amended by inserting the following:

In accordance with the provisions of Section 1557 of the Patient Protection and Affordable Care Act of 2010 (42 U.S.C. § 18116), Title VI of the Civil Rights Act of 1964 (42 U.S.C. § 2000d et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 701 et seq.), the Age Discrimination Act of 1975 (42 U.S.C. § 6101 et seq.), and regulations implementing these Acts, found at 45 C.F.R. Parts 80, 84, and 91 and 92, the Grantee shall not exclude, deny benefits to, or otherwise discriminate against any person on the basis of sex, race, color, national origin, disability, or age in admission to, participation in, in aid of, or in receipt of services and benefits under any of its programs and activities, and in staff and employee assignments to patients, whether carried out by the Grantee directly or through a Sub-contractor or any other entity with which the Grantee arranges to carry out its programs and activities.

In accordance with the provisions of Section 11 of the Food and Nutrition Act of 2008 (7 U.S.C. § 2020), the Age Discrimination Act of 1975 (42 U.S.C. § 6101 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 701 et seq.), the Americans with Disabilities Act of 1990 (42 U.S.C. § 12101 et seq.), and Title VI of the Civil Rights Act of 1964 (42 U.S.C. § 2000d et seq.), and the regulations implementing these Acts, found at 7 C.F.R. Parts 15, 15a, and 15b, and Part 16, 28 C.F.R. Part 35, and 45 C.F.R. Part 91, the Grantee shall not discriminate based on race, color, national origin, sex, religious creed, disability, age, or political beliefs or engage in reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by the United States Department of Agriculture.

HIGH-RISK IT REVIEW

Pursuant to Wis. Stat. 16.973(13), Contractor is required to submit, via the contracting agency, to the Department of Administration for approval any order or amendment that would change the scope of the contract and have the effect of increasing the contract price. The Department of Administration shall be authorized to review the original contract and the order or amendment to determine whether the work proposed in the order or amendment is within the scope of the original contract and whether the work proposed in the order or amendment is necessary. The Department of Administration may assist the contracting agency in negotiations regarding any change to the original contract price.

CARS PAYMENT INFORMATION

DHS CARS STAFF INTERNAL USE ONLY CARS PAYMENT INFORMATION

The information below is used by the DHS Bureau of Fiscal Services, CARS Unit, to facilitate the processing and recording of payments made under this Agreement.

Agency #:	Agency Name:	Agency Type:	CARS Contract Start Date	CARS Contract End Date	Program Total Contract:	
56	SAUK CO PHD	330	10/1/2022	9/30/2023	\$35,782	
Profile	Duefile Nome	Duefie Nete	Profile Current	Profile Change	Profile Total	Enn din a Controla
ID#	Profile Name	Profile Note	Amount	Amount	Amount	Funding Controls
154661	SNAP NUTR		\$34,282	\$1,500	\$35,782	N/A
	ED GRANT					
					\$35,782	

CARS FEDERAL AWARD INFORMATION

DHS Profile Number	154661		
FAIN	232WI126Q3903		
Federal Award Date	9/28/2022		
Sub-award period of Performance Start Date	10/1/2022		
Sub-award period of Performance End Date	9/30/2023		
Amount of Federal Funds obligated (committed) by this action	\$1,500		
Total Amount of Federal Funds obligated (committed)	\$35,782		
Federal Award Project Description	Supplemental Nutrition Assistance Program - Education		
Federal Awarding Agency Name (Department)	United States Department of Agriculture (USDA)		
DHS Awarding Official Name	Debra K. Standridge		
DHS Awarding Official Contact Information	608-266-9622		
Assistance Listing (formerly CFDA) Number	10.561		
Assistance Listing (formerly CFDA) Name	State Administrative Matching Grants for the Supplemental Nutrition Assistance Program		
Total made available under each Federal award at the time of disbursement	\$11,561,164		
R&D?	No		
Indirect Cost Rate	6.9%		