

STATE OF VERMONT CONTRACT SUMMARY AND CERTIFICATION ----- Form AA-14 (1/8/2019)

Note: All sections must be completed. Incomplete forms will be returned to the originating department.

I. CONTRACT INFORMATION:

Agency/Department: Green Mountain Care Board/ Contract #: 36369 Amendment #: 1
 Vendor Name: Initiate Government Solutions, LLC VISION Vendor No: 302865
 Vendor Address: 378 Northlake Blvd. No.258, North Palm Beach, FL 33408
 Starting Date: 06/01/18 Ending Date: 5/31/2021 Amendment Date: 05/31/2020
 Summary of agreement or amendment:

II. FINANCIAL & ACCOUNTING INFORMATION

Maximum Payable: \$60,000.00 Prior Maximum: \$ 60,000.00 Prior Contract # (If Renewal):
 Current Amendment: \$0.00 Cumulative amendments: \$ 0.00 % Cumulative Change: 0.00
 Business Unit(s): 3330; ; - [notes:] VISION Account(s): ;
 Estimated Funding Split:

| | | | | |
|----------------|---------------------------|---------------------------|---------------------------|------------------------------|
| Estimated | <input type="text"/> % GF | <input type="text"/> % SF | <input type="text"/> % EF | <input type="text"/> % Other |
| Funding Split: | <input type="text"/> % TF | <input type="text"/> % GC | <input type="text"/> % FF | (name) |

III. PROCUREMENT & PERFORMANCE INFORMATION

A. Identify applicable procurement process utilized.
 Standard Bid/RFP Simplified Sole Source (See B.) Qualification Based Selection Statutory
 B. If Sole Source Contract, contract form includes self-certification language? Yes N/A
 C. Contract includes performance measures/guarantees to ensure the quality and/or results of the service? Yes No

IV. TYPE OF AGREEMENT (select all that apply)

Personal Service Construction Arch/Eng. Marketing Info. Tech. Prof. Service
 Non-Personal Service
 Commodity Retiree/Former SOV EE Financial Trans Zero-Dollar Privatization Other

V. SUITABILITY FOR CONTRACT FOR SERVICE

Yes No n/a Does this contract meet the determination of an Independent Contractor? If "NO", the contractor must be set up and paid on payroll through the VTHR system.

VI. CONTRACTING PLAN APPLICABLE

Is any element of this contract subject to a pre-approved Agency/Dept. Contracting Waiver Plan? Yes No

VII. CONFLICT OF INTEREST

By signing below, I (Agency/Dept. Head) certify that no person able to control or influence award of this contract had a pecuniary interest in its award or performance, either personally or through a member of his or her household, family, or business.

Yes No Is there an "appearance" of a conflict of interest so that a reasonable person may conclude that this party was selected for improper reasons: (If yes, explain)

VIII. PRIOR APPROVALS REQUIRED OR REQUESTED

Yes No Agreement must be Certified by the Attorney General under 3 V.S.A. § 342 (sign line #4 below)
 Yes No Attorney General review As To Form is required (\$25,000 and above) or otherwise requested: _____ (AAG initial)
 Yes No Agreement must be approved by the Secretary of ADS/CIO
 Yes No Agreement must be approved by the CMO: for Marketing services over \$25,000
 Yes No Agreement must be approved by Comm. Human Resources: for Privatization, Retirees, Former Employees, & if a Contract fails the IRS test.
 Yes No Agreement must be approved by the Secretary of Administration

IX. AGENCY/DEPARTMENT HEAD CERTIFICATION; APPROVAL

I have made reasonable inquiry as to the accuracy of the above information (sign in order):

| | | | | | |
|----------------|---------------------------------|----------------|---------------|----------------|---|
| 1-Date | 1-Agency/Department Head | | | 2-Date | 2-Agency Secretary (if required) |
| | | | | | |
| 3a-Date | 3a-CIO | 3b-Date | 3b-CMO | 3c-Date | 3c-Commissioner DHR |
| | | | | | |
| 4-Date | 4-Attorney General | | | 5-Date | 5-Secretary of Administration |
| | | | | | |

STATE OF VERMONT
CONTRACT AMENDMENT

It is hereby agreed by and between the State of Vermont, Green Mountain Care Board (the "State") and Initiate Government Solutions, LLC, with a principal place of business in North Palm Beach, Florida (the "Contractor") that the contract between them originally dated as of June 1, 2018, Contract # 36369, as amended to date, (the "Contract") is hereby amended as follows:

- I. **Contract Term.** The Contract end date, wherever such reference appears in the Contract, shall be changed from 05/31/2020 to 05/31/2021. The Contract Term may be renewed for one additional one-year period at the discretion of the State.

Taxes Due to the State. Contractor certifies under the pains and penalties of perjury that, as of the date this contract amendment is signed, the Contractor is in good standing with respect to, or in full compliance with a plan to pay, any and all taxes due the State of Vermont.

Child Support (Applicable to natural persons only; not applicable to corporations, partnerships or LLCs). Contractor is under no obligation to pay child support or is in good standing with respect to or in full compliance with a plan to pay any and all child support payable under a support order as of the date of this amendment.

Certification Regarding Suspension or Debarment. Contractor certifies under the pains and penalties of perjury that, as of the date this contract amendment is signed, neither Contractor nor Contractor's principals (officers, directors, owners, or partners) are presently debarred, suspended, proposed for debarment, declared ineligible or excluded from participation in federal programs, or programs supported in whole or in part by federal funds.

Contractor further certifies under pains and penalties of perjury that, as of the date this contract amendment is signed, Contractor is not presently debarred, suspended, nor named on the State's debarment list at: <http://bgs.vermont.gov/purchasing-contracting/debarment>

This document consists of two pages. Except as modified by this Amendment No. 1, all provisions of the Contract remain in full force and effect.

[Remainder of Page Intentionally Left Blank]

The signatures of the undersigned indicate that each has read and agrees to be bound by this Amendment to the Contract.

STATE OF VERMONT

INITIATE GOVERNMENT SOLUTIONS, LLC

By: _____

By: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____