

SIGNATURE PAGE

CC-1-2022

To the Monmouth County Board of County Commissioners:

**THE UNDERSIGNED HEREBY DECLARES THAT
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE
WITH YOUR REQUIREMENTS.**

Company Name: Interfaith Neighbors, Inc.
(PRINT)

Preparer's Name: Kelly Aioperti
(PRINT)

Signature: Kelly Aioperti 8/12/21
(DATE)

Address: 810 Fourth Ave
Asbury Park, NJ 07712

Telephone No.: 732-775-0525

Fax No.: 732-775-5422

E-Mail Address: Kellua@interfaithneighbors.org
*****(This should be the email where contracts would be sent)*****

Contact Person: Kelly Aioperti

FEIN: [REDACTED]
(Federal Employee ID)

(Revised 2/2017)

APPENDIX B TO GRANT AGREEMENT NUMBER _____
DETAILED TITLE III/SSBG/SHTP/APS/SWHDM GRANT SUMMARY

County of Monmouth
Department of Human Services
Office on Aging

1. Title of Project: Interfaith Neighbors, Inc. - SASS Home Delivered Meals				
2. Type of Application: (Check one) New <input checked="" type="checkbox"/> Continuation Revision Supplement				
3. Project Director (Name, Title, Department & Address, Street, City, State, Zip Code): Paul L. McEvily, Executive Director Interfaith Neighbors, Inc. 810 Fourth Avenue Asbury Park, NJ 07712	6. Dates	From	Thru	Amount
	Project Period	01/01/22	12/31/22	\$208,582
	Budget Year	01/01/22	12/31/22	\$208,582
	7. Type of Organization: (Check one) Public Agency <input checked="" type="checkbox"/> Private Non-Profit Agency			
4. Applicant Agency (Name and Address): Interfaith Neighbors, Inc. 810 Fourth Avenue Asbury Park, NJ 07712	8. Payee (Specify to whom checks should be sent: Name, Title, Address): Paul L. McEvily, Executive Director Interfaith Neighbors, Inc. 810 Fourth Avenue Asbury Park, NJ 07712			
5. Name, Title, Address of Official authorized to sign for applicant agency: Paul L. McEvily, Executive Director Interfaith Neighbors, Inc. 810 Fourth Avenue Asbury Park, NJ 07712	9. (For State Agency Use):			
	%	\$		
A. Total Project Costs	XXXXXX	208,582		
B. Estimated Project Income	XXXXXX	42,513		
C. Project Net Costs (Line A Less Line B)	XXXXXX	166,069		
D. Local Non-Federal Participation	30.22%	50,190		
E. Funds Requested (Line C Less Line D)	69.78%	\$115,879		

**ATTACHMENT B
ESTIMATED COST FOR PROJECT**

CATEGORIES			CASH	IN-KIND	TOTAL
1. Personnel					
Title	#	%			
Total Personnel Costs					
2. Consultants and Contract Services					
Meals			\$208,582		\$208,582
(40,000 meals)					
Total Consultants & Contract Services			\$208,582		\$208,582
3. Travel (Staff only - include training mileage)					
Total Travel					

ATTACHMENT B
ESTIMATED COST FOR PROJECT (Continued)

CATEGORIES	CASH	IN-KIND	TOTAL
4. Food (allowable for Nutrition Program only)			
Total Food			
5. Building Space			
Total Building Space			
6. Printing & Office Supplies			
Total Printing & Office Supplies			
7. Equipment			
Total Equipment			

**ATTACHMENT B
ESTIMATED COST FOR PROJECT (Continued)**

CATEGORIES		CASH	IN-KIND	TOTAL
8. Other Costs				
Total Other Costs				
TOTAL DIRECT COSTS (Categories 1-8)		\$208,582		\$208,582
Indirect Costs				
- Rate (Indirect Cost %) :				
- Base (Total Personnel Costs) :				
Total Indirect Costs		XXXXXXXXXX		
TOTAL PROJECT COSTS		\$208,582		\$208,582

**ATTACHMENT B
SUPPORTING BUDGET SCHEDULE
LOCAL NON-FEDERAL PARTICIPATION**

SOURCE	AMOUNT
Cash Resources	
County of Monmouth Matching Funds	\$30,190
COLA	20,000
Cash Resources Sub-Total	\$50,190

In-Kind Resources	
In-Kind Resources Sub-Total	

TOTAL LOCAL NON-FEDERAL PARTICIPATION	\$50,190
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