

# 1.0 General Program Information

Revised 1/25/2016

## EXHIBIT 1

### Milwaukee County Dept of Aging Descriptions of Proposed Programs and Services Funding Period 1/1/2015 to 12/31/2015

1.01 Program Title or Type of Service to be Provided: Specialized Elderly Transportation Services

1.02 Agency Name: Transit Express Inc.

1.03 Address of Primary Office: 424 W Cherry Street Milw., Wi 53212-3820

1.04 Phone: 414 264-7433

Fax: 414 264-7460

1.05 Admin Office Hours: 7:30 am-5:30 pm E Mail: jdoherly@transitexpress.com

1.06 Official(s) Authorized by the Board of Directors to Sign Contract/Reports for Agency:

Mary J Smarelli, President

Name, Title

  
Signature

John V Doherty, Vice President

Name, Title

  
Signature

1.07 Staff Contact for the Program: John Doherty – Vice President

1.08 Type of Agency: Proprietary

1.09 Federal ID No.: 39 -1336948

State Tax Exempt No. NA

1.10 Type of Request: New

1.11 Amount of Dept of Aging Request: \$ 1,420,164

1.12 Total Agency Budget: \$ 10,108,800

1.13 Proposed Cost per Unit of Service	\$ 21.48 Medical	22,308 Trips
	\$ 24.57 Non Medical	11,800 Trips
	\$ 12.36 Shared Ride	6245 Trips
	\$ 8.55 Group Grocery	22,980 Trips
	\$ 11.85 Meal Site	31,863 Trips

1.14 Proposed Units to be Provided 95,196



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/29/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> The Horton Group, Inc. - PEW www.thehortongroup.com N19W24101 North Riverwood Dr. Waukesha, WI 53188 Douglas R. Henderson	<b>CONTACT NAME:</b> <b>PHONE</b> (A/C, No, Ext): <b>FAX</b> (A/C, No): <b>E-MAIL ADDRESS:</b> <b>PRODUCER CUSTOMER ID #:</b> TRANS16														
<b>INSURED</b> Transit Express Inc. Transit Express Services, Inc. Meda-Care Vans of Waukesha, In Caravans, Inc. 424 W. Cherry Street Milwaukee, WI 53212	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td><b>INSURER A:</b> Hartford Fire Insurance</td> <td style="text-align: center;">19682</td> </tr> <tr> <td><b>INSURER B:</b> Continental Casualty Company</td> <td></td> </tr> <tr> <td><b>INSURER C:</b></td> <td></td> </tr> <tr> <td><b>INSURER D:</b></td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> Hartford Fire Insurance	19682	<b>INSURER B:</b> Continental Casualty Company		<b>INSURER C:</b>		<b>INSURER D:</b>		<b>INSURER E:</b>		<b>INSURER F:</b>	
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<b>INSURER D:</b>															
<b>INSURER E:</b>															
<b>INSURER F:</b>															

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	<b>GENERAL LIABILITY</b>			83UENOH3014	01/01/2016	01/01/2017	EACH OCCURRENCE	\$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	X	X				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	\$ 5,000	
							PERSONAL & ADV INJURY	\$ 1,000,000	
							GENERAL AGGREGATE	\$ 2,000,000	
							PRODUCTS - COMP/OP AGG	\$ 2,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC									
A	<b>AUTOMOBILE LIABILITY</b>	X	X	83UENOH3015	01/01/2016	01/01/2017	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$	
	<input checked="" type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (PER ACCIDENT)	\$	
	<input checked="" type="checkbox"/> HIRED AUTOS							\$	
<input checked="" type="checkbox"/> NON-OWNED AUTOS		\$							
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE	\$	
	<b>EXCESS LIAB</b>						AGGREGATE	\$	
	<b>DEDUCTIBLE</b>							\$	
	<b>RETENTION \$</b>							\$	
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	Y/N	N/A	X	83WBOH3016	01/01/2016	01/01/2017	WC STATUTORY LIMITS	\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)								\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below								\$ 1,000,000
									\$ 1,000,000
B	<b>Property</b>			5099153729	01/01/2016	01/01/2017			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Milwaukee County Department of Aging is an additional insured with respect to general liability and auto liability only when required by written contract. Waiver of subrogation is included. Employee Dishonesty Limit - \$150,000 Travelers Insurance Company Policy #105727847 Effective 1/1/16-1/1/17

## CERTIFICATE HOLDER

## CANCELLATION

<b>MILW953</b>  Milwaukee County Dept Of Aging ATTN: Gary Portenier 1220 West Vliet Street, #302 Milwaukee, WI 53205	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  <b>AUTHORIZED REPRESENTATIVE</b> 
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**CONTRACT FORM 1684 R4 (Refer to ADMINISTRATIVE MANUAL Section 1.13, for procedures)**

Mail to:		<b>CONTRACT TYPE</b>	
Preliminary: Office of the Comptroller, Contract Signatures, Room 301 Courthouse		Professional Service - Operating	
Final: Office of the Comptroller, Accounts Payable, Room 301 Courthouse		Professional Service - Capital	
Community Business Development Partners, 8th Floor City Campus		Purchase of Service XXXX	
		Preliminary	Final
DEPARTMENT NAME		AGENCY NO.	DEPARTMENT (HIGH) ORG
DEPARTMENT ON AGING		790	7900

**VENDOR INFORMATION**

VENDOR NO.	ORDER TYPE	NEW or AMEND	CONTRACT NO.	
90580		XXXX	415-415-13	
NAME OF VENDOR		ADDRESS		
Transit Express, Inc.		PO BOX 78564		
		Milwaukee WI 53212		
TAX I.D. NO.	EFFECTIVE DATES:	LENGTH OF CONTRACT	AMENDMENT ONLY: DOLLAR	TOTAL CONTRACT
	begin date end date	(IN MONTHS)	CHANGE	AMOUNT
	01/01/15 12/31/15	12	\$38,400.00	\$1,420,164.00

**ACCOUNTING INFORMATION**

Year to be Expended	Line No	Fund	Agency	Org Unit	Activity	Function	Object	Job Number	Report Cat	Units	Amount to be Expended/ Amendment
2015	01	0001	790	7931	0000		8123				\$578,045.00
2015	02	0001	790	7931	A5GT		8123				\$307,845.00
2015	03	0001	790	7931	A5AK		8123				\$534,274.00

**PURPOSE OF CONTRACT**

PURCHASE OF SERVICE CONTRACTS FOR ELDERLY SERVICES FOR TIME PERIOD 1/1/15 - 12/31/15

Was County Board approval received prior to contract execution or contract amendment or extension?

☒ XXXX If YES, give County Board File No. 14-934 Date Approved 11/17/14

☐ If NO, why is County Board approval not required?

Was Contract **fully** executed prior to work being performed (all signatures received)?XXX YES ☐ NO

Is Vendor a certified professional service DBE?

☐ YES ☒ XXX NO

WENDY WOODRUFF

1/21/2016

Prepared By

Date

1/21/2016

Signature of County Administrator

Date

ACCOUNTANT

Title

ASSISTANT DIRECTOR - FISCAL &amp; SUPPORT SERVICES

Title

## **Contract Amendment**

This agreement is made and entered into by and between Milwaukee County Department on Aging, 1220 West Vliet Street, Milwaukee, WI 53205, hereinafter referred to as COUNTY, and Transit Express, Inc., hereinafter referred to as CONTRACTOR, pursuant to Chapters 53 and 46.09 of the General Ordinances of Milwaukee County.

The purpose of this agreement is to amend the 2015 Purchase of Service contract between COUNTY and the CONTRACTOR to provide Specialized Elderly Transportation Services (Contract No. 415-415-13). It is expressly understood and agreed by COUNTY and CONTRACTOR that, unless otherwise provided below, all terms, conditions, and provisions of the contract remain unchanged and in effect for all services provided under the contract and this amendment.

## **PROVISIONS**

1. Effective upon execution of this amendment between COUNTY and CONTRACTOR, COUNTY shall increase the amount of the contract award by \$38,400 for a revised award of \$1,420,164; and
2. CONTRACTOR agrees to submit revised Exhibit I, page 1, 3.0 Program Staffing Information, 4.0 Budget Summary, and all financial and service reports, exhibits, or other documentation required by COUNTY for administration of this amendment.

## AUTHORIZATIONS

COUNTY enters into this Contract as authorized by the Milwaukee County Board of Supervisors and ratified by the Milwaukee County Executive. CONTRACTOR enters into this Contract pursuant to and by authority of its Board of Directors at its meeting on 1/29/2016

IN WITNESS WHEREOF, this agreement shall be effective upon the date of execution of this agreement by all parties as provided below:

*Approved as to Chapter 42 DBE Provision by Community Business Development Partners:*

DocuSigned by:  
Rick Norris  
By: \_\_\_\_\_ Date: 1/28/2016  
AD4C84D4023E450...  
Title: CBDP Director

*Reviewed by Risk Management:*

DocuSigned by:  
\_\_\_\_\_  
By: \_\_\_\_\_ Date: 1/28/2016  
E454E4CA2D21452...  
Title: Director of Risk Management

*Approved as to Execution:*

DocuSigned by:  
Mark A Grady  
By: \_\_\_\_\_ Date: 2/1/2016  
2BE87A71B2AE4E5...  
Title: Deputy Corporation Counsel

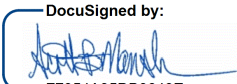
*Contractor Representative:*

DocuSigned by:  
Mary J Smarelli  
By: \_\_\_\_\_ Date: 2/2/2016  
84853A804290472...  
Title: President

*Milwaukee County Department on Aging:*

DocuSigned by:  
\_\_\_\_\_  
By: \_\_\_\_\_ Date: 2/2/2016  
FE851B0867464D9...  
Title: Interim Director

*Milwaukee County Comptroller:*

By:  Date: 2/3/2016  
F7354A95DB0043E...  
Scott Manske

*Milwaukee County Executive:*

By: \_\_\_\_\_ Date: \_\_\_\_\_  
Chris Abele

*Approved as to Wis. Stats. §59.42*

By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Contract No. 415-415-13

## RESOLUTION

WHEREAS, the Adopted Budget for the Milwaukee County Department on Aging allocates revenues and expenditures for the purchase of a variety of supportive programs and services for Milwaukee County seniors during 2015; and

WHEREAS, the Milwaukee County Commission on Aging was created by Chapter 53 of the General Ordinances of Milwaukee County as the designated Area Agency on Aging under the Older Americans Act; and

WHEREAS, consistent with Wisconsin Act 14, the Department on Aging must, on behalf of the Commission, bring purchase of service contracts at or above \$300,000 for authorization by the Milwaukee County Board of Supervisors; and

WHEREAS, at its meeting on November 15, 2013, the Commission on Aging recommended awarding the following purchase of service contract for the period January 1, through December 31, 2014, with a provision that, contingent upon satisfactory performance of the vendor and inclusion of sufficient funds in the annual County Budget, the contract may be renewed for up to two additional years without a Request for Proposal [File No. 98-197 (a)(a)]; and

WHEREAS, the existing vendor performed satisfactorily under requirements of the 2014 contract, and with sufficient funds included in the Adopted Budget for 2015, the Department recommends renewing the following contract for the period January 1, through December 31, 2015:

	<u>Provider Agency</u>	<u>Program/Service</u>	<u>Recommended Contract Award</u>
1.	Transit Express, Inc.	Specialized Elderly Transportation Services	\$ 1,381,764

; and

WHEREAS, the Specialized Elderly Transportation Services program provides rides to eligible seniors for such essential purposes as medical appointments, grocery shopping, senior meal program nutrition sites, and other trip needs; now, therefore,

BE IT RESOLVED, that Director, Milwaukee County Department on Aging, is hereby authorized to enter into a purchase of service contract totaling \$1,381,764 with Transit Express, Inc. to provide Specialized Elderly Transportation Services in 2015.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/27/13

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<b>PRODUCER</b> The Horton Group, Inc. - PEW www.thehortongroup.com N19W24101 North Riverwood Dr. Waukesha, WI 53188 Douglas R. Henderson	Phone: 262-347-2600 Fax: 262-347-2700	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: <b>TRANS16</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> <tr> <td>INSURER A : <b>Hartford Fire Insurance</b></td> <td></td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : <b>Hartford Fire Insurance</b>		INSURER B :		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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INSURER B :																
INSURER C :																
INSURER D :																
INSURER E :																
INSURER F :																
<b>INSURED</b> <b>Transit Express Inc.</b> <b>Transit Express Services, Inc.</b> <b>Meda-Care Vans of Waukesha, In</b> <b>Caravans, Inc.</b> <b>424 W. Cherry Street</b> <b>Milwaukee, WI 53212</b>																

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

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INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b>						EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>100,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b>
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	X	X	<b>83UENOH3014</b>	<b>01/01/14</b>	<b>01/01/15</b>	
	CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						
	GEN'L AGGREGATE LIMIT APPLIES PER:						
	POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
A	<b>AUTOMOBILE LIABILITY</b>	X	X	<b>83UENOH3015</b>	<b>01/01/14</b>	<b>01/01/15</b>	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
	<input checked="" type="checkbox"/> ANY AUTO						
	ALL OWNED AUTOS						
	<input checked="" type="checkbox"/> SCHEDULED AUTOS						
	<input checked="" type="checkbox"/> HIRED AUTOS						
	<input checked="" type="checkbox"/> NON-OWNED AUTOS						
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE \$
	<b>EXCESS LIAB</b>						AGGREGATE \$
	DEDUCTIBLE						\$
	RETENTION \$						\$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			<b>83WBOH3016</b>	<b>01/01/14</b>	<b>01/01/15</b>	WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input type="checkbox"/>	N/A				
	If yes, describe under DESCRIPTION OF OPERATIONS below						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Milwaukee County Department of Aging is an additional insured with respect to general liability and auto liability only when required by written contract. Waiver of subrogation is included. Employee Dishonesty Limit - \$150,000 Travelers Insurance Company Policy #105727847 Effective 1/1/14-1/1/15

**CERTIFICATE HOLDER****CANCELLATION**

<b>MILW953</b>  Milwaukee County Dept Of Aging ATTN: Gary Portenier 1220 West Vliet Street, #302 Milwaukee, WI 53205	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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**CONTRACT FORM 1684 R4 (Refer to ADMINISTRATIVE MANUAL Section 1.13, for procedures)**

<b>Mail to:</b>		<b>CONTRACT TYPE</b>	
Preliminary: Office of the Comptroller, Contract Signatures, Room 301 Courthouse		Professional Service - Operating	
Final: Office of the Comptroller, Accounts Payable, Room 301 Courthouse		Professional Service - Capital	
Community Business Development Partners, 8th Floor City Campus		Purchase of Service XXX	
		Preliminary XXXX	Final
DEPARTMENT NAME		AGENCY NO.	DEPARTMENT (HIGH) ORG
DEPARTMENT ON AGING		790	7900

**VENDOR INFORMATION**

VENDOR NO.		ORDER TYPE	NEW or AMEND	CONTRACT NO.	
90580			X	415-415-13	
NAME OF VENDOR			ADDRESS		
Transit Express, Inc.			424 W Cherry Street		
			Milwaukee WI 53212		
TAX I.D. NO.	EFFECTIVE DATES: begin date      end date		LENGTH OF CONTRACT (IN MONTHS)	AMENDMENT ONLY: DOLLAR CHANGE	TOTAL CONTRACT AMOUNT
	01/01/15      12/31/15		12		\$1,381,764.00

**ACCOUNTING INFORMATION**

Year to be Expended	Line No	Fund	Agency	Org Unit	Activity	Function	Object	Job Number	Report Cat	Units	Amount to be Expended/ Amendment
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2015	02	0001	790	7931	A5GT		8123				\$269,445.00
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**PURPOSE OF CONTRACT**

PURCHASE OF SERVICE CONTRACTS FOR ELDERLY SERVICES FOR TIME PERIOD 1/1/15 - 12/31/15

Was County Board approval received prior to contract execution or contract amendment or extension?

XXXX

If YES, give County Board File No. \_\_\_\_\_

Date Approved \_\_\_\_\_

If NO, why is County Board approval not required? \_\_\_\_\_

Was Contract fully executed prior to work being performed (all signatures received)?

XXX

YES

NO

Is Vendor a certified professional service DBE?

YES

XXX

NO

WENDY WOODRUFF

11/12/2014

Prepared By

Date

11/12/2014

Signature of County Administrator

Date

ACCOUNTANT

Title

ASSISTANT DIRECTOR - FISCAL &amp; SUPPORT SERVICES

Title

**1.0 General Program Information**

Revised 11/13/14

**EXHIBIT 1**

**Milwaukee County Dept of Aging  
Descriptions of Proposed Programs and Services  
Funding Period 1/1/2015 to 12/31/2015**

1.01 Program Title or Type of Service to be Provided: Specialized Elderly Transportation Services

1.02 Agency Name: Transit Express Inc.

1.03 Address of Primary Office: 424 W Cherry Street Milw., Wi 53212-3820

1.04 Phone: 414 264-7433

Fax: 414 264-7460

1.05 Admin Office Hours: 7:30 am-5:30 pm E Mail: jdoherthy@transitexpress.com

1.06 Official(s) Authorized by the Board of Directors to Sign Contract/Reports for Agency:

Mary J Smarelli, President  
Name, Title

  
Signature

John V Doherty, Vice President  
Name, Title

  
Signature

1.07 Staff Contact for the Program: John Doherty – Vice President

1.08 Type of Agency: Proprietary

1.09 Federal ID No.: 39 -1336948

State Tax Exempt No. NA

1.10 Type of Request: New

1.11 Amount of Dept of Aging Request: \$ 1,381,764.00

1.12 Total Agency Budget: \$ 10,108,800

1.13 Proposed Cost per Unit of Service	\$ 21.48 Medical	21,396 Trips
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	\$ 12.36 Shared Ride	4,492 Trips
	\$ 8.55 Group Grocery	22,603 Trips
	\$ 11.85 Meal Site	34,021 Trips

1.14 Proposed Units to be Provided 93,512

**Milwaukee County Department on Aging  
2015 Purchase of Service Contract  
Transportation Services**

Contract Number     415-415-13

Service               Specialized Elderly Transportation Services

This Contract is made and entered between Milwaukee County, a Wisconsin municipal body corporate represented by the Milwaukee County Department on Aging, 1220 West Vliet Street Suite 302, Milwaukee, WI 53205 (hereinafter called County) and Transit Express, Inc., (hereinafter called Contractor), and whose primary business address for the purposes of this Contract is:

Transit Express Inc

424 W Cherry St

Milwaukee, WI 53212

**1.     Dates of Performance**

This Contract is for the period of January 1, 2015 through December 31, 2015, or until such time as provided herein.

**2.     Scope of Service**

Contractor shall specifically perform all of the services and achieve the objectives as set forth in the proposal submitted by Contractor to County, which is attached hereto as Exhibit I, Description of Proposed Programs and Services, and incorporated by reference. Contractor shall perform all services provided under this Contract in the manner prescribed by the relevant Program/Service Guidelines or Specifications, which are herein incorporated by reference and made a part of this Contract as if physically attached hereto.

**3.     Staffing and Delivery of Services**

- A. Contractor shall provide all personnel required to perform the services under this Contract. Such personnel shall not be employees of, or have any other contractual relationships with, County. Any replacement of personnel listed in Contractor's proposal shall be by persons of like qualifications, which shall be attested to by Contractor. Whenever possible, notification of replacement of personnel shall be provided to County prior to replacement.
- B. Contractor will provide proper supervision to all employees providing services under this Contract. Current job descriptions shall be kept on file for positions funded under this Contract, and each employee will be given a job description at the time of employment and whenever the job description is amended.

- C. Except as provided herein and relevant Program/Service Guidelines or Specifications, Contractor shall determine the methods, procedures, and personnel policies to be used in providing services to eligible clients.
- D. This Contract in its entirety is at all times subject to such local, state, and federal laws and administrative regulations as exist at the time this Contract is executed and as shall become effective after execution but prior to termination of this Contract. Contractor shall comply with all federal, state, and local laws and regulations and shall maintain in good standing all licenses, permits, and certifications relating to the programs and services referred to herein.
- E. All clients served by Contractor under this Contract must meet County's eligibility requirements. The responsibility for determining client eligibility rests with County and Contractor will not be reimbursed for services provided to clients who have not been certified as eligible by County.
- F. Contractor agrees that the programs and services described in Exhibit I will be available to eligible clients throughout the period of this Contract and to accept all clients referred by County as long as funds made possible through this Contract are available.
- G. Contractor shall maintain a log of complaints and provide County a copy of any written complaint made to Contractor regarding any of the services furnished hereunder and will inform County in writing of the actions taken by Contractor to resolve such complaints.

#### **4. Fiscal Administration**

Contractor shall observe the following policies and practices with regard to all funds received from County pursuant to this agreement:

- A. Contractor agrees to identify the total cost of the program or service funded under this Contract.
- B. Contractor shall provide to County an agency-wide budget, disclosing all of Contractor's anticipated revenues and expenditures for the period of this Contract.
- C. Funds received by the Contractor under this Contract may not be co-mingled with funds from other sources.
- D. Contractor shall maintain a uniform double entry accounting system and a management information system compatible with cost accounting and control systems.
- E. Contractor shall comply with allowable cost policies and procedures established by the Wisconsin Department of Health Services.

#### **5. Compensation**

- A. Contractor shall be compensated based on agreed upon unit rates shown in Exhibit I, Description of Proposed Programs and Services, and includes a fuel price escalator provision (see section 31 on page 16).
- B. Contractor recognizes that the total service needs of the community may not be met and shall provide services within the specific amounts stated in Exhibit I. County is unable to

guarantee the volume of requests funded by this Contract. Under no circumstances shall payments made under this Contract exceed the amount(s) authorized by the Milwaukee County Board of Supervisors. The parties agree that section 66.0135, Wisconsin Statutes, Prompt Pay Law, shall not apply to payment for programs and services provided hereunder.

- C. Funds may be advanced to Contractor as set forth in section 46.036 (3) (f) Wisconsin Statutes. The advance payment provision applies only when requested by Contractor. The advance payment shall be repaid to County upon demand. If Contractor fails to repay the advance as described, County shall have the right to withhold any payments due Contractor from County sufficient to cover the amount of the advance payment.
- D. Advance payments by County shall not exceed two twelfths (2/12ths) of the Contract award. If advance payments exceed \$10,000, Contractor shall provide County with a surety bond for an amount equal to the amount of the advance payment requests as provided by section 46.036 (3) (f) Wisconsin Statutes.
- E. Unless waived in writing by County, payments made by County to Contractor by the end of any month shall not exceed one-twelfth (1/12) of the annualized contract amount multiplied by the number of contract months elapsed plus any advance payments made by County to Contractor.
- F. County shall recover from Contractor money paid in excess of the conditions of this Contract. Repayment shall be made in full within thirty (30) days after County has made written demand to Contractor for repayment. County may recover repayments due from any subsequent payments due Contractor now, or from future contracts, or any other service agreement with County. County shall charge interest on any outstanding repayments as set forth in section 46.09 (4) (d) (8) General Ordinances of Milwaukee County.
- G. No funds within this Contract may be used to supplant Medical Assistance, Health Maintenance Organization (HMO), or Preferred Provider Organization (PPO) funded services.
- H. County and Contractor acknowledge that funding of this Contract is completely dependent upon state and federal grants and contracts. The obligation of County to purchase the services described herein is contingent upon present state and federal grants and contracts continuing at their present levels. Should such funding sources terminate or be reduced, County reserves the right, in its sole discretion, either to terminate this agreement or revise the scope of services being purchased to reflect any reduction in such funding. It is further recognized and agreed by County and Contractor that the programs and services provided under this Contract are subject to all provisions of said federal and state grants and contracts, and Contractor agrees to comply with all such provisions for the period of this Contract, including all applicable provisions of the standard State/County contract.

## **6. Billing and Reporting**

- A. Contractor shall provide County with monthly billings and reports for services provided under this Contract by the fifth (5th) working day of the month following the month in which services are provided. Contractor shall submit billings and reports on the forms and according to the manner specified by County.

- B. Within thirty (30) days of the receipt of all required billings and reports, County shall make payment to Contractor of the net amount due.

**7. Record Keeping and Access to Records**

- A. Contractor shall maintain and, upon request, furnish to County, at no cost to County, any and all information requested by County relating to the quality, quantity, and cost of services covered by this Contract and shall allow authorized representatives of County and County's funding sources to have access to all records necessary to confirm Contractor's compliance with law and the Program/Service Guidelines or Specifications for this Contract. Access to information shall include computerized data and/or other electronic information used by the Contractor, made available in formats suitable for data analysis, such as queries, using conventional software programs.
- B. Contractor shall maintain written verification of programs and services provided under this Contract, including the dates of programs and services performed for all of the purchased programs and services rendered, as specified by County. Contractor shall maintain clearly identified and readily accessible documentation of costs supported by properly executed payrolls, time records, invoices, contracts, vouchers, or other official documentation evidencing in proper detail the nature and propriety of the programs and services provided. The Contractor shall maintain all such records for a period of at least four (4) years from the date of issuance of the certified financial and compliance audit. Records shall be maintained beyond the four-year requirement if an audit is in progress or exceptions identified in prior audits have not been resolved.
- C. It is agreed that County representatives, including representatives of the Department on Aging and the Office of the Comptroller, or representatives of appropriate state or federal agencies, including the Wisconsin Department of Health Services and the Wisconsin Department of Transportation, shall have the right of access to program, financial, and such other records of Contractor or Contractor's subcontractors as may be necessary to evaluate or confirm Contractor's cost estimates, rates, and charges for the programs and services provided under this Contract or as may be necessary to evaluate or confirm Contractor's delivery of the programs and services in compliance with the Program/Service Guidelines or Specifications for this Contract.

**8. Inspection of Premises**

Contractor shall allow visual inspection of Contractor premises to County representatives and to authorized representatives of any other local, state or federal government unit. Inspection shall be permitted without formal notice at any time care and services are being furnished.

**9. Audit Requirements**

- A. Unless waived by County, Contractor shall submit to County, on or before **June 30, 2016**, or such later date that is mutually acceptable to Contractor and County, two (2) original copies of a certified financial and compliance audit for calendar year 2015 performed by an independent certified public accountant (CPA) licensed to practice by the State of Wisconsin. Certified financial and compliance audit reports are required under section 46.036 (4) (c) Wisconsin Statutes. Requests for waiver and/or extension must be in writing and submitted before the original due date of the audit. Contractor's audit report will comply with the following conditions and requirements:

Non-profit Contractors who received aggregate federal financial assistance of \$500,000 or more, either directly or indirectly, shall submit to County two (2) original copies of a certified audit for calendar year 2015 performed in accordance with the Office of Management and Budget (OMB) Circular A-133, Audits of States, Local Governments and Non-Profit Organizations. The audit submitted by Contractor shall be conducted in conformance with the following standards:

- (a) Wisconsin Department of Health Services DHS Audit Guide, 2012 Update (or later);
- (b) Standards applicable to financial audits contained in Government Auditing Standards (GAS) promulgated by the Comptroller General of the United States; and
- (c) Generally Accepted Auditing Standards (GAAS) adopted by the American Institute of Certified Public Accountants (AICPA).

**Contractor shall also submit to County, on or before June 30, 2016, a statement acknowledging that Contractor received aggregate federal funding of \$500,000 or more for calendar year 2015.**

For-profit Contractors who received \$25,000 or more of aggregate federal financial assistance, either directly or indirectly, and non-profit Contractors who received \$25,000 or more of aggregate federal financial assistance, either directly or indirectly, but less than \$500,000 of aggregate federal financial assistance, either directly or indirectly, for calendar year 2015, shall submit to County, two (2) original copies of a certified audit for calendar year 2015 conducted in accordance with the following standards:

- (d) Wisconsin Department of Health Services DHS Audit Guide, 2012 Update (or later);
- (e) Standards applicable to financial audits contained in Government Auditing Standards (GAS) promulgated by the Comptroller General of the United States; and
- (f) Generally Accepted Auditing Standards (GAAS) adopted by the American Institute of Certified Public Accountants (AICPA).

**Contractor shall also submit to County, on or before June 30, 2016 a statement acknowledging that Contractor did not receive aggregate federal funding of \$500,000 or more for calendar year 2015.**

Regardless of status or format, all CPA audits and reports referenced above shall contain the following Financial Statements, Schedules, and Auditor's Reports:

**(1) Financial Statements for the Entire Organization**

- a. Comparative Balance Sheet for Total Agency.
- b. Comparative Statement of Operations for Total Agency.



- c. Statement of Changes in Financial Position or Statement of Cash Flows for Total Agency.
- d. Supplemental schedules of program revenues and expenses identified by funding source for each program or service referenced in Exhibit I, including non-federal matching share, if required, and client contributions.
- e. Notes to financial statements, including units of service, if applicable, provided by contract (if not disclosed on the face of the financial statements), and disclosure of related party transactions, if any, and the source of the non-federal matching share, if such matching share is required.

## **(2) Auditor's Reports**

- a. Report on the financial position, results of operations, and changes in the financial position or Statement of Cash Flows for the entire agency.
- b. Report on Compliance, including compliance with applicable laws and regulations, and any subsequent revisions, and compliance with material financial terms and conditions of this Contract, including allowability of program costs.
- c. Report on Evaluation of Internal Accounting Controls. A copy of any management letter or equivalent document issued in conjunction with the audit shall be provided to County.
- d. Findings of non-compliance.
- e. Schedule of questioned costs and the potential amount of repayment prior to offsetting any unrelated items.
- f. Schedule of Federal and State Awards broken down by contract year. The schedule shall identify the contract number and program name from Exhibit I of the contract. Each program or service under County Contract must be reported as a separate item by contract year.
- g. A report on the status of action(s) taken on prior audit findings.

## **(3) General**

The following is a summary of the general laws; rules and regulations with which the auditor should be familiar in order to satisfactorily complete the audit.

- a. GAO, Standards for Audit of Governmental Organizations, Programs, Activities and Functions
- b. AICPA, Generally Accepted Auditing Standards
- c. OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations
- d. OMB Circular A-133, 2013 Compliance Supplement

- e. OMB Circular A-122, Cost Principles For Nonprofit Organizations
  - f. OMB Circular A-87, Cost Principles for State, Local and Indian Tribal Governments
  - g. Wisconsin State Statutes, Section 46.036, Purchase of Care and Services
  - h. Wisconsin Department of Administration, State Single Audit Guidelines, Current Revision
  - i. Wisconsin Department of Health Services, DHS Audit Guide, 2012 Update (or later)
  - j. Wisconsin Department of Health Services, Allowable Cost Policy Manual - Current Revision
- B. Contractor hereby authorizes and directs its Certified Public Accountant, if requested, to share all work papers, reports, and other materials generated during the audit with County, including the Department on Aging and the Department of Audit, or their designees, and with representatives of Federal and State funding agencies, including the Wisconsin Department of Health Services and Wisconsin Department of Transportation. Such access shall include the right to obtain copies of the work papers and computer disks, or other electronic media that document the audit work. Contractor shall require its CPA to retain work papers for a period of at least four (4) years following the latter of contract termination or receipt, by County, of the certified audit report.
- C. Contractor and County mutually agree that the County Director of Audits, as well as state and federal officials, reserve the right to review certified audit reports or financial statements, including supporting work papers or financial statements, and perform additional audit work as deemed necessary and appropriate, it being understood that additional overpayment refund claims or adjustments to prior claims may result from such reviews.
- D. Contractor agrees that County is entitled to repayment of amounts identified as a result of the audit required under this section, and acknowledges that failure to repay such amounts may result in legal action as determined by Milwaukee County Corporation Counsel. County shall charge interest on any outstanding repayments as set forth in section 46.09 (4) (d) (8) General Ordinances of Milwaukee County.
- E. Contractor's reporting on a fiscal year other than a calendar year shall be considered in compliance with audit requirements upon submittal of the following:
- (1) Filing of contractor's fiscal year audit, meeting the audit requirements in Sections 9 A. (1) (2) and (3) above within 180 calendar days of the fiscal year closing.
  - (2) Schedules of revenues and expenses identified by funding source for each program or activity referenced in Exhibit I of the Contract. The schedules shall be reviewed and compiled by Contractor's auditor(s) with all information required in Section 9 A. (2) a. above for the period from the close of Contractor's fiscal year through the end of the calendar year, on or before June 30, 2016, or such later date that is mutually acceptable to Contractor and County.

- F. Contractor agrees to submit to County plans for correcting weaknesses identified in Contractor's audit.
- G. Contractor agrees to cooperate with County in the implementation of County's Audit Fraud Hotline by posting notices to be provided by County in areas where all employees, including those employed by subcontractor, associated with this Contract will have access to the notices for the duration of this Contract.
- H. Contractor, and its CPA, shall maintain records for audit purposes for a period of at least four (4) years following the latter of contract termination or receipt, by County, of the certified audit report. Records shall be maintained beyond the minimum requirement if an audit is in progress or exceptions identified in prior audits have not been resolved.
- I. Contractors who subcontract with other providers for the provision of care and services are required by federal and state regulations to monitor their subrecipients.

Contractors shall have on file, and available for review by County, copies of subrecipient's CPA audit reports and financial statements. The Contractor shall maintain all such records for a period of at least four (4) years following the latter of contract termination or submission of the certified audit report. The records shall be retained beyond the four-year period if an audit is in progress or exceptions have not been resolved.

Subrecipient shall maintain and, upon request, furnish to County, at no cost to County, any and all information requested by County relating to the quality, quantity, or cost of services covered by the subcontract and shall allow authorized representatives of County and County's funding sources to have access to all records necessary to confirm subrecipient's compliance with law and the program/service guidelines or specifications for this contract and the subcontract. Access to information shall include computerized data and/or other electronic information used by the Contractor, made available in formats suitable for data analysis, such as queries, using conventional software programs

It is agreed that County representatives, including representatives of the Department on Aging and the Office of the Comptroller, or representatives of appropriate state or federal agencies, including the Wisconsin Department of Health Services and Wisconsin Department of Transportation, shall have the right of access to program, financial, and such other records of subrecipients as may be requested to evaluate or confirm subrecipient's cost estimates, rates, and charges for the care and service, or as may be necessary to evaluate or confirm subrecipient's delivery of the care and service in compliance with the Program/Service Guidelines or Specifications for this contract and the subcontract.

Subrecipient shall maintain written verification of care and service provided under the subcontract, including the dates of services performed for all of the purchased services rendered, as specified by County. The subrecipient shall maintain clearly identified and readily accessible documentation of costs supported by properly executed payrolls, time records, invoices, contracts, vouchers, or other official documentation evidencing in proper detail the nature and propriety of the service provided. The subrecipient shall maintain all such records for a period of at least four years following the latter of contract termination or submission of the certified audit report. The records shall be retained

beyond the four-year period if an audit is in progress or exceptions from prior audits have not been resolved.

Subrecipient shall allow visual inspection of subrecipient's premises to County representatives and to representatives of any other unit of local, state, or federal government. Inspection shall be permitted without formal notice at any time care and services are being furnished.

- J. Failure on the part of the Contractor to comply with these requirements shall result in withholding of any payments otherwise due Contractor from County and ineligibility for future contracts with County until such time as these requirements are met.

**10. Non-Discrimination and Equal Employment Opportunity**

- A. Contractor agrees to comply with Title VI of the Civil Rights Act of 1964 (P. L. 88-352), and that no eligible client shall be unlawfully denied services or be subjected to discrimination because of age, race, religion, color, national origin, sex, sexual orientation, location, handicap, physical condition, or developmental disability as defined in section 51.01 (5) Wisconsin Statutes.
- B. Contractor agrees not to unlawfully discriminate against any employee or applicant for employment because of age, race, religion, color, national origin, sex, sexual orientation, location, handicap, physical condition, or developmental disability as defined in section 51.01 (5) Wisconsin Statutes. Contractor agrees to comply with the relevant provisions of section 56.17 of the General Ordinances of Milwaukee County and which is hereby incorporated by reference as though fully set forth herein.

**11. Indemnity**

- A. The Contractor agrees to the fullest extent permitted by law, to indemnify, defend, and hold harmless, the County, and its agents, officers, and employees, from and against all loss or expense including costs and attorney's fees by reason of liability for damages including statutory benefits under Workers' Compensation laws, suits at law or in equity, caused by any wrongful, intentional, or negligent act or omission of the Contractor, or its (their) agents which may arise out of or are connected with the activities covered by this Contract.
- B. Contractor shall indemnify and save County harmless from any award of damages and costs against County for any action based on U. S. patent and copyright infringement regarding computer programs involved in the performance of the tasks and services covered by this Contract.
- C. Contractor agrees to indemnify County for any amount County may be required to repay to the Wisconsin Department of Health Services or the Wisconsin Department of Transportation by virtue of payments made to Contractor by County under this Contract that the Department of Health Services or the Department of Transportation determine to be overpayments or inappropriate payment.

**12. Insurance**

- A. Contractor agrees to provide and maintain proof of financial responsibility to cover costs as may arise from claims of tort and/or vicarious liability due to its actions or omissions

or the actions or omissions of its employees. Such evidence shall include coverage for Worker's Compensation claims, as required by the State of Wisconsin, Employers Liability, General and Automobile Liability, and Comprehensive Crime Coverage in the following minimum amounts:

<b><u>Type of Coverage</u></b>	<b><u>Minimum Limits</u></b>
<b>Wisconsin Worker's Compensation</b> or Proof of All States coverage	Statutory
<b>Employers Liability</b>	\$100,000/\$500,000/\$100,000
<b>Commercial General Liability</b> Bodily Injury & Property Damage (Incl. Personal Injury, Fire, Legal, Contractual & Products/Completed Operations)	\$1,000,000 per Occurrence \$1,000,000 General Aggregate
<b>Automobile Liability</b>	
Bodily Injury & Property Damage All Autos-Owned, non-owned and/or hired Uninsured Motorists	\$1,000,000 per Accident  per Wisconsin Requirements
<b>Comprehensive Crime Coverage</b> To include Fidelity, Theft, Money & Securities, Inside & Outside to protect the loss of funds by embezzlement, theft, fire, etc.	Fidelity per Occurrence: Fidelity coverage consistent with require- ments under 13. below. \$5,000 Money and Securities, Inside and Outside.

- B. County, As Its Interests May Appear, shall be named as Additional Insured for General and Automobile Liability and be afforded a thirty (30) day written notice of cancellation or non-renewal. Disclosure must be made of any non-standard or restrictive additional insured endorsement, and any use of non-standard or restrictive additional insured endorsement will not be acceptable. Contractor shall submit a certificate of insurance indicating the above coverage for the duration of this Contract and for review and approval by County. Contractor shall provide an updated certificate to County when changes occur in agents or coverage during the duration of this Contract.**
- C. A Waiver of Subrogation for Workers Compensation by endorsement in favor of Milwaukee County is required to be furnished. Additional insured endorsements (for General and Auto Liability), the endorsement for the Waiver of Subrogation for Workers Compensation and the insurance certificate indicating the above coverage are all required to be submitted for review and approval of the County. Coverage shall be placed with an insurance company approved by the State of Wisconsin and rated "A" per Best's Key Rating Guide.
- D. Additional information as to policy form, retroactive date, discovery provisions and applicable retentions, shall be submitted to County if requested, to obtain approval of

insurance requirements. Any deviations, including use of purchasing groups, risk retention groups, etc., or requests for waiver from the above requirements shall be submitted in writing to the County for approval prior to the commencement of activities under this Contract.

- E. Contractor shall notify County immediately upon the commencement of any litigation against the Contractor where there is any possibility that County may be made a party thereto.

**13. Bonding Requirement**

- A. A Fidelity bond covering employee dishonesty shall be evidenced covering every officer, director, agent, or employee of the Contractor who is authorized to receive or deposit funds under this Contract or who is authorized to issue financial documents, checks or other instruments of payment for costs related to the programs and services provided under this Contract.
- B. The bond form shall be on a commercial blanket basis in the minimum occurrence amount of \$10,000, or 10% of the total amount of the contract award, whichever is greater. A Contractor who provides services under multiple contracts with the Department on Aging shall evidence the Fidelity bond in the occurrence amount applicable to the dollar amount of the largest single contract with the Department. The period of coverage shall be no less than for the period of this Contract, if not on a continuous basis, with a discovery period of not less than one year subsequent to cancellation or termination of the bond. The bond shall stipulate that the Contractor be given thirty (30) days advance notice by the surety prior to making any material change in, or cancellation of, the bond. The advance notice shall be by certified mail. The Contractor may procure fidelity coverage in a comprehensive crime policy, including money and security coverage(s) as outlined in Section 12 A. above.

**14. Withholding of Payments**

Failure of Contractor to comply with Contract requirements may result in withholding or forfeiture of any payments otherwise due Contractor from County by virtue of any County obligation to Contractor until such time as the Contract requirements are met.

**15. Contract Termination**

- A. County or Contractor may terminate this contract for any reason, with or without cause, following thirty (30) days written notice, unless an earlier date is determined by County to be essential to the safety and well-being of the clients covered by this Contract with the exception of those facilities which must meet the notification requirements as applicable in Chapter 50 licensing. Failure to comply with any part of this Contract may be considered cause for early termination by the offended party. In the event of termination, the County will only be liable for services rendered through the date of termination and not for the uncompleted portion or any materials or services purchased or paid for by Contractor for use in completing this Contract.
- B. Contractor shall notify County, in writing, whenever it is unable to provide the required quality or quantity of programs and services. Upon such notification, County and Contractor shall determine whether such inability to provide the required quality and

quantity of programs and services will require a revision or early termination of this Contract.

- C. Notwithstanding any other right of termination, County reserves the right to immediately terminate, or reduce in scope, its obligations under this contract in the event that the sources of funding to the County derived through State or Federal grants or contracts is terminated or reduced. This right of immediate termination for loss of funding applies even if Contractor has not been paid for services previously rendered.
- D. County reserves the right to withdraw any qualified recipient from the program, service, institution, or facility of the Contractor at any time when in the judgment of County it is in the best interest of County or the qualified recipient to do so.

**16. Advertising**

Contractor shall not publicly advertise through any media during the course of this Contract for the purpose of soliciting eligible persons to be recipients of services provided through this Contract without the advance written consent of County. All brochures, announcements, press releases, and other items used to promote services provided through this Contract must acknowledge that Milwaukee County funds these services.

**17. Client Contributions**

- A. Where required by the relevant Program/Service Guidelines or Specifications, Contractor shall provide clients receiving services under this Contract the opportunity to voluntarily and confidentially contribute toward the cost of the services they receive. All solicitations to contribute must be approved in advance by County. Under no circumstances shall any otherwise eligible client be denied service under this Contract because of a failure to contribute toward the cost of the services provided.
- B. The Contractor agrees to report to County all funds contributed by clients and to record and document such contributions consistent with the accounting requirements for other funds received and expended under this Contract.
- C. Contractor agrees that any and all client contributions may, at County's discretion, be used as an offset to County's reimbursement of Contractor for services rendered or to purchase additional units of service for eligible clients authorized and designated by County. Contractor further agrees that all units of service purchased with client contributions shall be provided in the same manner and at the same unit cost as such services are purchased through this Contract.
- D. Contractor agrees that all units of service provided with client contributions collected under this Contract will be provided over and above those units for which County compensates Contractor. Contractor further agrees that all funds earned through client contributions that remain unspent at the end of this Contract must be spent in a manner specified by County or reimbursed to County.

**18. Modifications**

Contractor recognizes the right of County to make reasonable modifications in the delivery of programs and services purchased under this Contract. Contractor shall be notified in writing two weeks prior to any such modifications.

**19. Contract Renegotiation and Revision**

- A. This Contract may be renegotiated in the event of changes required by law, regulations, court action, or inability of either party to perform as committed in this Contract.
- B. This Contract may be revised in a written amendment signed by the authorized representatives of both parties.

**20. Independent Contractor**

Nothing contained in this Contract shall constitute or be construed to create a partnership, joint venture, or employer-employee relationship between County or its successors or assigns and Contractor or its successors or assigns. In entering into this Contract and in acting in compliance herewith, Contractor is at all times acting and performing as an independent contractor, duly authorized to perform the acts required of it hereunder.

**21. Subcontracts**

Assignment of any portion of the services by subcontract is prohibited except upon prior written approval of County.

**22. Assignment Limitation**

This Contract shall be binding upon and inure to the benefit of the parties and their successors and assigns provided, however, that neither party could assign its obligations hereunder without the prior written consent of the other.

**23. Resolution of Disputes**

Contractor may appeal the decisions of County in accordance with section 46.036 (7) Wisconsin Statutes.

**24. Prohibited Practices**

- A. During the period of this Contract, Contractor shall not hire, retain, or utilize for compensation, any member, officer, or employee of the Department of Aging representing County or any person who to the knowledge of the Contractor has a conflict of interest. No employee of the Department on Aging representing County shall be an officer, member of the Board of Directors, or have a proprietary interest in Contractor's business.
- B. Contractor shall furnish County with written disclosure of any financial interest, purchase or lease agreements, employment relationship, or professional services/consultant relationship which any of Contractor's employees, officers, board members, stockholders, or members of their immediate family may have with respect to any supplier to Contractor of goods and services under this Contract.
- C. Contractor attests that it is familiar with Milwaukee County's Code of Ethics (Chapter 9 of General Ordinances of Milwaukee County) which states in part, "No person shall offer or give to any public official or employee, directly or indirectly, and no public official or employee shall solicit or accept from any person, directly or indirectly, anything of value if it could reasonably be expected to influence the public official's or employee's vote,



official actions or judgment, or could reasonably be considered as a reward for any official action or inaction or omission by of the public official or employee.”

- D. The use or disclosure by any party of any information concerning eligible clients who receive services from Contractor for any purpose not connected with the administration of Contractor's or County's responsibilities under this Contract is prohibited, except with the informed written consent of the eligible client or the guardian of the client.

**25. Political Activity of Employees**

Where applicable, Contractor shall comply with the provisions of the Hatch Act, which limit the political activity of employees who work in federally funded programs.

**26. Certification Regarding Contractor Debarment or Suspension**

Contractor certifies to the best of its knowledge and belief, that it and its principals; (1) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency; (2) have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification, or destruction of records, making false statements, or receiving stolen property; (3) are not presently indicted for or otherwise criminally charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in (2) of this certification; and (4) have not within a three-year period preceding this contract had one or more public transactions (Federal, state or local) terminated for cause or default.

By:   
84853A804290472...  
(Signature of Official Authorized to Sign Contract)

Date: 11/18/2014

**27. Certification Regarding Lobbying**

Contractor certifies, to the best of his or her knowledge and belief, that:

- 1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan or cooperative agreement.
- 2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, land, or cooperative

agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

- 3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U. S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By: Mary J Smarelli Date: 11/18/2014  
DocuSigned by: 84853A804290472  
 (Signature of Official Authorized to Sign Contract)

For: Transit Express Inc  
 (Name of Grantee)

Specialized Elderly Transportation Services  
 (Title of Grant Program)

## 28. Notices

Notices to County provided for in this Contract shall be sufficient if sent by certified or registered mail, postage prepaid and notices to Contractor shall be sufficient if sent by certified or registered mail, postage prepaid to the respective addresses stated in this Contract or to such other respective addresses as the parties may designate to each other in writing. Contractor agrees, that in conduct of its meetings, it will be guided by Wisconsin Statutes 19.81 et. seq.

## 29. Health Insurance Portability and Accountability Act of 1996

County and Contractor agree to comply with the provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and shall undertake any actions needed to protect individually identifiable health information (45 C.F.R. 164.501) as required under current or future HIPAA regulations as determined by the U.S. Department of Health and Human Services and the Wisconsin Department of Health Services.

County and Contractor agree that changes to the Contract that would be necessary for one or both parties to meet the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) shall be made upon discussion and execution of a Contract amendment containing the necessary changes. Neither party shall withhold agreement to modifications to the Contract necessary for one or both parties to comply with HIPAA.

**30. Contract Content**

The entire Contract of the parties, with all attached exhibits and assurances, together with the relevant Program/Service Guidelines or Specifications and Exhibit I as negotiated is contained herein. This Contract supersedes all oral agreements and negotiations and all writings not herein referred to and incorporated. This Contract may be executed in two or more counterparts, each of which shall be deemed as original.

**31. Fuel Price Escalator Provision**

The compensation provisions of this Contract include a fuel price escalator provision tied to Midwest Diesel Fuel Prices maintained by the Energy Information Administration (EIA) of the U.S. Department of Energy. Unit rates will be adjusted based on a formula contained within relevant Program/Services Guidelines or Specifications.

**32. Approval**

It is expressly understood and agreed that the parties' obligations hereunder are subject to state approval and federal concurrence with this Contract.

County enters into this Contract as authorized by the Milwaukee County Board of Supervisors and ratified by the Milwaukee County Executive. Contractor enters into this Contract pursuant to and by authority of its Board of Directors at its meeting on 11/17/2014.

In witness whereof, this agreement shall be effective as of the 1st day of January, 2015, or such other date as may be provided on page 1, upon the execution of this agreement as provided below.

*Approved as to Chapter 42 DBE Provision by Community Business Development Partners:*

DocuSigned by:  
By: Rick Norris Date: 11/17/2014  
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Title: CBDP Director

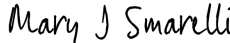
*Reviewed by Risk Management:*

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By: AGC Risk Date: 11/17/2014  
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Title: Director of Risk Management


*Approved as to Execution:*

DocuSigned by:  
By: Mark A Grady Date: 11/17/2014  
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Title: Deputy Corporation Counsel

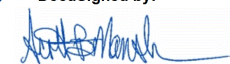
*Contractor Representative:*

By: DocuSigned by:  
 Date: 11/18/2014  
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Title: President

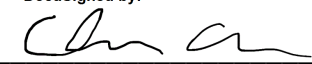
*Milwaukee County Department on Aging:*

By: DocuSigned by:  
 Date: 11/18/2014  
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Title: Director of Aging

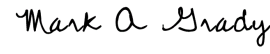
*Milwaukee County Comptroller:*

By: DocuSigned by:  
 Date: 11/20/2014  
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Scott Manske

*Milwaukee County Executive:*

By: DocuSigned by:  
 Date: 11/22/2014  
2E580B33A2CC443...  
Chris Abele

*Approved as to Wis. Stats. §59.42*

By: DocuSigned by:  
 Date: 12/18/2014  
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Title: Deputy Corporation Counsel

Contract No. 415-415-13

## Certificate of Completion

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Status: Completed

Subject: Please DocuSign these documents: Specialized Elderly Transportation Services

Source Envelope:

Document Pages: 22

Signatures: 10

Envelope Originator:

Certificate Pages: 6

Initials: 0

Gary Portenier

AutoNav: Enabled

gary.portenier@milwaukeecountywi.gov

Envelopeld Stamping: Enabled

IP Address: 204.194.251.5

## Record Tracking

Status: Original

Holder: Gary Portenier

Location: DocuSign

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gary.portenier@milwaukeecountywi.gov

## Signer Events

Rick Norris

rick.norris@milwaukeecountywi.gov

CBDP Director

Milwaukee County

Security Level: Email, Account Authentication  
(None)Electronic Record and Signature Disclosure:  
Not Offered  
ID:

## Signature

DocuSigned by:



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Amy Pechacek

amy.pechacek@milwaukeecountywi.gov

Director of Risk Management

Milwaukee County

Security Level: Email, Account Authentication  
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Mark A Grady

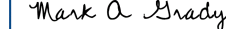
corpcounselsignature@milwcnty.com

Deputy Corporation Counsel

Milwaukee County

Security Level: Email, Account Authentication  
(None)Electronic Record and Signature Disclosure:  
Not Offered  
ID:

DocuSigned by:



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Signed: 11/17/2014 2:30:31 PM CT

Using IP Address: 204.194.251.5

Mary J Smarelli

msmarelli@tranexpress.com

President

Jan 22, 2014

Security Level: Email, Account Authentication  
(None)Electronic Record and Signature Disclosure:  
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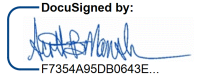
**Signer Events****Signature****Timestamp**

Stephanie Stein  
 sstein@milwcnty.com  
 Director of Aging  
 Milwaukee County  
 Security Level: Email, Account Authentication  
 (None)  
 Electronic Record and Signature Disclosure:  
 Not Offered  
 ID:

DocuSigned by:  
  
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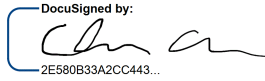
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 Signed: 11/18/2014 4:00:09 PM CT

Scott B. Manske  
 comptrollersignature@milwcnty.com  
 Comptroller  
 Milwaukee County  
 Security Level: Email, Account Authentication  
 (None)  
 Electronic Record and Signature Disclosure:  
 Not Offered  
 ID:

DocuSigned by:  
  
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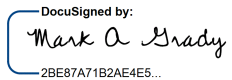
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Chris Abele  
 cable@milwcnty.com  
 County Executive  
 Milwaukee County  
 Security Level: Email, Account Authentication  
 (None)  
 Electronic Record and Signature Disclosure:  
 Not Offered  
 ID:

DocuSigned by:  
  
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 Freeform Signing

Mark A Grady  
 corpcounselsignature@milwcnty.com  
 Deputy Corporation Counsel  
 Milwaukee County  
 Security Level: Email, Account Authentication  
 (None)  
 Electronic Record and Signature Disclosure:  
 Not Offered  
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Gary Portenier  
 gary.portenier@milwaukeecountywi.gov  
 Program Planning Coordinator  
 Milwaukee County Department on Aging  
 Security Level: Email, Account Authentication  
 (None)  
 Electronic Record and Signature Disclosure:  
 Not Offered  
 ID:

**COPIED**

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Completed	Security Checked	12/18/2014 3:47:29 PM CT
Electronic Record and Signature Disclosure		

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- ii. send us an e-mail to [plee@milwcnty.com](mailto:plee@milwcnty.com) and in the body of such request you must state your e-mail, full name, IS Postal Address, telephone number, and account number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

#### **Required hardware and software**

Operating Systems:	Windows2000? or WindowsXP?
Browsers (for SENDERS):	Internet Explorer 6.0? or above
Browsers (for SIGNERS):	Internet Explorer 6.0?, Mozilla FireFox 1.0, NetScape 7.2 (or above)
Email:	Access to a valid email account
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	<ul style="list-style-type: none"> <li>• Allow per session cookies</li> <li>• Users accessing the internet behind a Proxy Server must enable HTTP</li> </ul>

	1.1 settings via proxy connection
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\*\* These minimum requirements are subject to change. If these requirements change, we will provide you with an email message at the email address we have on file for you at that time providing you with the revised hardware and software requirements, at which time you will have the right to withdraw your consent.

**Acknowledging your access and consent to receive materials electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the 'I agree' button below.

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## Certificate Of Completion

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Status: Sent

Subject: Please DocuSign: Amend 2015 Specialized Elderly Transportation Services

Source Envelope:

Document Pages: 34

Signatures: 8

Envelope Originator:

Certificate Pages: 6

Initials: 0

Gary Portenier

AutoNav: Enabled

901 N 9th St

Enveloped Stamping: Enabled

Ste 301

Time Zone: (UTC-06:00) Central Time (US & Canada)

Milwaukee, WI 53233

gary.portenier@milwaukeecountywi.gov

IP Address: 204.194.251.5

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Location: DocuSign

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gary.portenier@milwaukeecountywi.gov

## Signer Events

### Signature

### Timestamp

Rick Norris

rick.norris@milwaukeecountywi.gov

CBDP Director

Milwaukee County

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:  
Not Offered  
ID:

DocuSigned by:

*Rick Norris*

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Amy Pechacek

amy.pechacek@milwaukeecountywi.gov

Director of Risk Management

Milwaukee County

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:  
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Mark A Grady

corpcounselsignature@milwcnty.com

Deputy Corporation Counsel

Milwaukee County

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:  
Not Offered  
ID:

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Mary J Smarelli

msmarelli@tranexpress.com

President

Jan 22, 2014

Security Level: Email, Account Authentication (None)

Electronic Record and Signature Disclosure:  
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*Mary J Smarelli*

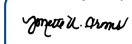

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<p>Mark A Grady corpcounselsignature@milwcnty.com Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered ID:</p>		
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Editor Delivery Events	Status	Timestamp
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Electronic Record and Signature Disclosure		

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#### **Required hardware and software**

Operating Systems:	Windows2000? or WindowsXP?
Browsers (for SENDERS):	Internet Explorer 6.0? or above
Browsers (for SIGNERS):	Internet Explorer 6.0?, Mozilla FireFox 1.0, NetScape 7.2 (or above)
Email:	Access to a valid email account
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	<ul style="list-style-type: none"><li>• Allow per session cookies</li><li>• Users accessing the internet behind a Proxy Server must enable HTTP</li></ul>

	1.1 settings via proxy connection
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\*\* These minimum requirements are subject to change. If these requirements change, we will provide you with an email message at the email address we have on file for you at that time providing you with the revised hardware and software requirements, at which time you will have the right to withdraw your consent.

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