STATE OF NEW JERSEY

DEPARTMENT OF CHILDREN AND FAMILIES

THIRD PARTY CONTRACT REFORMS
ATTESTATION

1. I, (Name)_____, am the
(Title)_____of the (Name of Provider Agency)
_____.

2. I have all necessary authority to execute contracts between my Agency and the Department of Children and Families (DCF).

3. I am aware that on June 21,2010, DCF issued a letter to its providers notifying them of Amendments to DCF's Third Party Contract Language, and those Amendments took effect for contracts entered into on or after July 1, 2010. The Amendments include provision limiting DCF's participation in contract costs and are referenced below:

- Limitations on the total aggregate amount of DCF contract monies with my Agency that may be allocated towards the salaries of all employees, including officers of my Agency;
- Limitations on the use of DCF contract monies towards agency Severance Agreements;
- Limitations on the use of DCF contract monies for Employee Travel Expenses;
- Limitations on the use of DCF contract monies for Employee Tuition Reimbursement;
- Limitations on the use of DCF contract monies for Agency Sponsored Events; and
- Criteria for and Processing Vehicle Requests.

4. I am aware that the DCF Business Office(s) which is assigned to administer my contract(s) is available to answer any questions about the specific monetary limitations and how they apply to my Agency's contract prior to my execution of this certification.

5. By my signature below, I hereby certify that:

A. I have read and understand the limitations imposed regarding the total amount of aggregate contract monies from **all** DCF cost reimbursement contracts entered into with my Agency that may be allocated towards those contracts.

B. I understand that the limitations apply to any and all future contracts that my Agency enters into with the Department of Children and Families, any of its divisions, as well as any contracts that are renewed therewith after June 30, 2010.

C. Failure to abide by the terms of this attestation may be viewed as a grounds for contract default.

_____   _____
Signature   Date

_____
Printed Name