

EXHIBIT D

Rev. 9-24-19

**CSOC Post-Award Documents
Required to be Submitted for Contract Formation
if the Response to the SUMMER CAMP 1 to 1 RFQ Results in an Award**

▶ CONTRACT DOCUMENTS TO BE SUBMITTED AFTER AWARD WITH THE INITIAL CONTRACT:	
1	<input type="checkbox"/> Acknowledgement of Receipt of NJ State Policy & Procedures returned to the DCF Office of EEO/AA (signed/dated) Form: https://www.nj.gov/dcf/documents/contract/forms/DiscriminationAcknowReceipt.pdf Policy: https://www.nj.gov/dcf/documents/contract/forms/AntiDiscriminationPolicy.pdf
2	<input type="checkbox"/> Chapter 271/Vendor Certification and Political Contribution Disclosure Form (signed/dated) [Rev 7/10/17] Website: https://www.nj.gov/treasury/purchase/forms.shtml Form: https://www.nj.gov/treasury/purchase/forms/CertandDisc2706.pdf
3	<input type="checkbox"/> Document showing NJSTART Vendor ID Number (NJ's eProcurement system) Website: https://www.njstart.gov/ Help Desk: Call 609-341-3500 -or- Email njstart@treas.nj.gov
4	<input type="checkbox"/> For Programs without an Annex A: Standardized Board Resolution Form (signed/dated) Form: https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p1_board.pdf
▶ CONTRACT DOCUMENTS TO BE SUBMITTED AFTER AWARD & <u>ANNUALLY</u> UPDATED THEREAFTER:	
5	<input type="checkbox"/> Annual Report to Secretary of State Website: https://www.njportal.com/dor/annualreports
6	<input type="checkbox"/> Employee Fidelity Bond Certificate (commercial blanket bond for crime/theft/dishonest acts) Refer to policy for Minimum Standards for Insurance: https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_insurance.pdf Bond must be at least 15% of the full dollar amount of all State of NJ contracts for the current year when the combined dollar amount exceeds \$50,000. If not applicable, include a signed/dated note, on agency letterhead, stating the bond certificate is not required as your agency will not exceed \$50,000 in combined State of NJ contracts for the current year. <u>Note</u> : The \$50,000 threshold includes fee-for-service reimbursements made via Medicaid.
7	<input type="checkbox"/> Liability Insurance (Declaration Page/Malpractice Insurance) <u>Note</u> : Policy must show two items... 1. List DCF as the certificate holder - NJDCF, 50 East State St, Floor 3, POB 717, Trenton, NJ 08625 2. Contain language stating DCF is an additional insured Refer to policy for Minimum Standards for Insurance: https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_insurance.pdf
8	<input type="checkbox"/> DCF Notification of Licensed Public Accountant Form (NLPA) [Rev. 7-15-19] -and- copy of Non-Expired Accountant's Certification [Ensure DCF form is used and 2 signatures are provided] Form: https://www.nj.gov/dcf/providers/contracting/forms/NLPA.docx Not required for agencies expending under \$100,000 in combined federal/state awards or contracts. If not applicable, submit a signed/dated note, on agency letterhead, stating the NLPA form and accountant's certificate are not required as you will not exceed \$100,000 in combined federal/state awards or contracts. <u>Note</u> : The \$100,000 threshold includes fee-for-service reimbursements made via Medicaid. Also, the NLPA is a State of NJ form and need only list federal/state funds received via contracts with the State of NJ.

EXHIBIT D: POST AWARD

9	<input type="checkbox"/>	<p>Most recent Audit -or- Financial Statement (certified by accountant or accounting firm) <u>Audit</u>: For agencies expending over \$100,000 in combined federal/state awards/contracts -or- <u>Financial Statement</u>: For agencies expending under \$100,000 Policy: https://www.state.nj.us/dcf/policy_manuals/CON-I-A-7-7.06.2007_issuance.shtml [Policy Rev. 7/15/19]</p>
<p>▶ CONTRACT DOCUMENTS TO BE MAINTAINED <u>ONSITE</u> BY PROVIDER:</p>		
10	<input type="checkbox"/>	<p>Agency Organizational Chart</p>
11	<input type="checkbox"/>	<p>Copy of Most Recently Approved Board Minutes</p>
12	<input type="checkbox"/>	<p>Personnel Manual and Employee Handbook (include staff job descriptions)</p>
13	<input type="checkbox"/>	<p>Affirmative Action Policy/Plan</p>
14	<input type="checkbox"/>	<p>Conflict of Interest Policy/Attestation https://www.nj.gov/dcf/documents/contract/manuals/CPIM_p8_conflict.pdf</p>
15	<input type="checkbox"/>	<p>Procurement Policy https://www.nj.gov/dcf/documents/contract/manuals/CRM2.pdf</p>