**Pima County Community & Workforce Development Department** 

Program: Pima Early Education Program

IGA: Pima County Amphitheater Schools dba Amphitheater Public Schools

**Amount:** \$158,400.00

**IGA No:** CT-CR-21-416

Funding: City of Tucson

**Contract Amendment No.: 01** 

Orig. Contract Term: 08/01/2021-05/31/2023
Termination Date Prior Amendment: N/A

**Termination Date This Amendment:** 05/31/2022

**Orig. Amount:** \$792,000.00

Prior Amendment Amount: \$0.00 This Amendment Amount: (\$633,600.00) Revised Total Amount: \$158,400.00

#### AMENDMENT ONE

### 1. Background and Purpose.

- 1.1. Background. On May 18, 2021, Pima County ("County") and Amphitheater Public Schools ("District"), entered into the above-referenced Intergovernmental Agreement ("Agreement") to provide high quality preschool classes at a District site without cost to low-income families. County determined that funding preschool expansion for low-income families that wish to enroll their preschool-age children in high quality preschools will improve the economic health and welfare of those children, their parents, employers, and taxpayers.
- **1.2. Purpose.** The Parties want to decrease the overall funding, decrease the number of classes from three classes to the two classes located within the City of Tucson, and change the funding source from the Pima County General Funds to the City of Tucson grant.
- **2. Term.** The parties agree to change the termination date in Section 2.0 from May 31, 2023 to May 31, 2022.
- 3. Party Responsibilities.
  - 3.1. Exhibit A Section 3, Program Locations, is replaced in its entirely with the following:

**Program Locations:** District shall provide the Program at the following locations:

3.1 Amphitheater High School, 125 W. Yavapai Rd., Tucson AZ 85705 – 1 new class

3.2 Holaway Elementary School, 3500 N. Cherry Ave., Tucson, AZ 85719 – 1 new class

#### 4. Financing.

- **4.1.** The maximum allocated amount in Section 7.1 is decreased by \$633,600.00. County's total payments to District under this Agreement will not exceed \$158,400.00.
- **4.2.** Paragraph 7.6 is deleted in its entirety and replaced with the following:
  - 7.6 Timing of Invoices.
    - 7.6.1 District will submit invoices and performance reports to County on a monthly basis as set forth in **Exhibit B-1** (1 page). County must receive invoices no more than 30 days after the end of the billing period in which District delivered the invoiced services to County.
    - 7.6.2 Content of Invoices and Performance Reports. Each monthly request for reimbursement must be completed on the form provided by County similar to the form in **Exhibit B-1**. It must include a unique invoice identifier and this Agreement number. The person(s) that prepared the invoice and an authorized manager, supervisor or executive of the District must approve and sign each invoice to insure proper internal financial controls. The invoice must include (1) number of new classes in operation under this Agreement multiplied by the per class base reimbursement rate for that age group and divided by 10, (2) the dollar amount of the other financial assistance received by the school district that month for the children in the class(es), (3) the dollar amount received by the school district that month for private-pay children in the class(es), and (4) the total reimbursable amount for that month. The performance report must include (1) the total number of children enrolled per class for that month as of the last day of the month, (2) number of children receiving other financial assistance that month to attend class(es), (3) number of children funded under private pay to attend class(es), and (4) report race/ethnicity per child quarterly. County may refuse to pay for any service for which District does not timely invoice the County.
    - 7.6.2 District must provide the following documentation with each invoice:
      - 7.6.2.1 Copies of timesheets that account for 100% of each employee's time and effort, that are signed by the employee and by a supervisor with direct knowledge of the employee's work effort for all personnel expenditures.
      - 7.6.2.2 Copies of DES childcare subsidy billing forms, Quality First scholarship billing forms, or private pay billing forms, if applicable for that month.
      - 7.6.2.3 Any other documentation requested by County.
- **4.3.** Paragraph 7.7 is deleted in its entirety and replaced with the following:
  - 7.7 Because of continuing impacts from the COVID-19 public health emergency, County will reimburse District at the per class base reimbursement rate regardless of

enrollment, less other financial assistance, and less private pay received for children in the class(es).

**5. Counterparts.** This Amendment No. 01 may be executed in any number of counterparts, each counterpart is considered an original, and together the counterparts constitute one and the same instrument.

All other provisions of the IGA not specifically changed by this Amendment remain in effect and are binding upon the parties.

SIGNATURE PAGE TO FOLLOW

PIMA COUNTY:	DISTRICT:
Chair, Board of Supervisors	Superintendent, District
ATTEST	ATTEST
Clerk of the Board	Clerk, District
Approval	
The foregoing Intergovernmental Agre he undersigned and is hereby approve	ement between County and District has been reviewed by ed as to content.
Jan Lesher, Acting Pima County Admi	nistrator
Intergovernm	ental Agreement Determination
reviewed by the undersigned, each of	ement between County and the District has been whom has determined that it is in proper form and is d under the laws of the State of Arizona to the party he or
PIMA COUNTY:	DISTRICT
Deputy County Attorney	Associate to the Superintendents and General Council

## EXHIBIT B-1 (1 page)

# District will submit monthly financial reports for reimbursement using the following reporting template:

				ment/Initials	Date rv⊮d & submitted for payment/Initials	Date rvwd & sul		FOR PIMA COUNTY USE ONLY	FOR PI ections/Initials	Date rtnd for corrections/Initials			Date bill rov'd/Initials
	sign	ease print & sign	Signature – pl	zed Approver	Agency Authorized Approver Signature - please			ne Num/Ext	Contact Phone Num/Ext	Date		ign	Agency Preparer Signature - please print & sign
on of any material	e omission	nation, or th	udulent inforn	ictitious, or fra	hat any false, f	i. I am aware t	rederal award	onditions of the	he terms and or	ves set forth in t	ses and objecti	pts are for the purpo	expenditures, disbursements and cash receipts BEQUIRED SUBBECIPIENT SIGNATURES
for management and d accurate, and the	reement fo	rith the agu	accordance v	n incurred in audit; and (2	iich have beei	penditures wh	and actual ex	nth. ctual receipts cuments which	d represents a	y billing forms, if app rmation reporte	ort. forms, or private pa lge: (1) the info fficial account	nthly invoice: employee's time and eff y First scholarship billing best of my knowled and are based on o	Documentation to be submitted with each monthly invoice:  1. Copies of impelhest that account for 100% of each employee's time and effort.  2. Copies of IEC children exhaults (Direct accounting the populations) or private pay billing forms, if applicable for that month.  2. Copies of IEC children exhaults (Direct accounting the populations) or private pay billing forms, if applicable for that month.  By signing this report. I certify that to the best of my knowledge: (1) the information reported represents actual receipts and actual expenditures which have been incurred in accordance with the agreement for management and the implementation of the contracted program and are based on official accounting records and supporting documents which will be maintained by us for purposes of audit; and (2) the report is true, complete and accounting records and supporting documents which will be maintained by us for purposes of audit; and (2) the report is true, complete and accounting records and supporting documents which will be maintained by us for purposes of audit; and (2) the report is true, complete and accounting records and supporting documents which will be maintained by us for purposes of audit; and (2) the report is true, complete and accounting records and supporting documents which will be maintained by us for purposes of audit; and (2) the report is true, complete and accounting the purpose of the records and accounting the records and support and accounting the records and support accounting the records are accounted to the records and accounting the records and ac
													Number of Other Non-Hispanic Children
													Number of Native American Non-Hispanic Children Number of AsianiPacific Islander Non-Hispanic Childr
													Number of White Non-Hispanic Children Number of Black Non-Hispanic Children
													Number of dual language learners Number of Hispanic Children
													Number of children receiving other financial assistand Number of children funded by Private Pay
			May-22	Apr-22	Mar-ZZ	Feb-22	Jan-22	Uec-21	Nov-21	Uct-21	Sep-21	Aug-21	Demographics Total number of children enrolled in classes
_				1			/22)	21 - 06/30	रा (07/01/:	PERFORMANCE REPORT (07/01/21 - 06/30/22)	PERFORMA		TOTAL CONTRACT EXPENSES
•													
													Minus Private Pay for Children in class(es)
													Number of 20-Student Classes x \$132,000/10
AR TO DATE BALANCE TOTALS REMAINING	YEAR TO DA TOTALS	May-22 Exp. Amt	Apr-22 Exp. Amt	Mar-22 Exp. Amt	Feb-22 Exp. Amt	Jan-22 Exp. Amt	Dec-21 Exp. Amt	Nov-21 Exp. Amt	Oct-21 Exp. Amt	Sep-21 Exp. Amt	Aug-21 Exp. Amt	APPROVED BUDGET	EXPENSES
				-	30/22)	1/21 - 06/	AILS (07/0	PENSE DET	OGET & EXP	APPROVED BUDGET & EXPENSE DETAILS (07/01/21 - 06/30/22)	APP		
			CFDA *			REPORT *						City, State, Zip Code:	Tucson, AZ 85713 CMD Fiscal@pima.gov. nicole.scott@pima.gov
being reported)	being r	on Classes	PEEP School District Expansion Classes	PEEP Schoo	PROGRAM NAME	PRO						Agency Address:	2797 E Ajo Way
A REPORT DATE IN SPACE L10	A REP						:					Attn	
BLEASE MAKE SLIBE YOU ENTER	PI FA					BEDORT DATE						School District Name	Community & Workforce Development
					FORMATION	FEDERAL FUNDING INFORMATION	FEDER.				FORMATION	AGENCY INVOICE IN	PLEASE SEND INOVICE TO THE ATTENTION AGENCY INVOICE INFORMATION
,2021		Month Of	eport For The	Invoice and Performace Report For The Month Of	Invoice and								
			rant	f Tucson G	ent-City of	Developm	Vorkforce	munty & V	ent of Com	Pima County Department of Communty & Workforce Development-City of Tucson Grant	Pima Count		
				Š	NCE KE	OKIVIA	VD TEXT	OICE AI	VIYINV	PIMA COUNTY INVOICE AND PERFORMANCE REPORT	3		
				1	;	;	;	)		;	2		

**END OF EXHIBIT B-1**