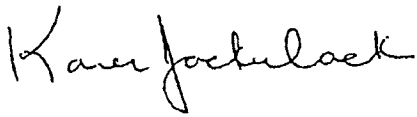


## NOTIFICATION OF GRANT AWARD UNDER THE CONGREGATE SERVICES INITIATIVE PROGRAM

Name and Address of Area Agency:  Albany County Department for Aging 162 Washington Avenue, 6th Floor Albany, NY 12210-2304	Name and Address of Sponsoring Agency/Payee:  Albany County																																																															
Program Year - Beginning: 4/1/2020 Ending: 3/31/2021																																																																
Fiscal Year from which funds are awarded: 2020	This award is New																																																															
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Remarks: In addition to the conditions contained in the Four Year Plan, Annual Implementation Plan and Application for Funding, the conditions checked below apply to this award:																																																																
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(XX) 3. The Area Agency agrees that the Congregate Services Initiative Program will be administered in accordance with the program and fiscal data included in the Application for Funding and the Standard Assurances included in the Annual Implementation Plan.																																																																
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(XX) 5. Area Agency administrative expenditures are limited to a maximum of 5% of the State Share and required local match.																																																																
(XX) 6. State Funds for congregate services and the required local match must be used for allowable congregate service activities as described in 94-PI-35.																																																																
Name and Title of Authorizing Official:  Karen Jackuback Deputy Director	Signature:  	Date:  July, 8, 2020																																																														