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**EDUCATIONAL TRAINING VOUCHER SERVICES SUBGRANT**

**BETWEEN THE  
NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF CHILDREN AND FAMILY SERVICES  
AND  
CENTRAL PLAINS CENTER FOR SERVICES**

**AMENDMENT ONE, FEBRUARY 2015**

This agreement is entered into by and between the Nebraska Department of Health and Human Services, **DIVISION OF CHILDREN AND FAMILY SERVICES** (hereinafter "DHHS"), and **CENTRAL PLAINS CENTER FOR SERVICES** (hereinafter "Subrecipient").

The agreement between the parties dated October 23, 2014 is amended as follows:

Article II. Paragraph A. is amended to read:

A. TOTAL SUBGRANT. DHHS shall pay the Subrecipient a total amount, not to exceed \$590,600 (five hundred ninety thousand six hundred dollars) for the activities specified.

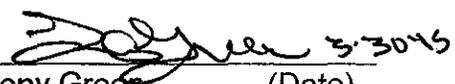
The original subgrant attachment 2 is revised and attached.

All other terms and conditions remain in full force and effect.

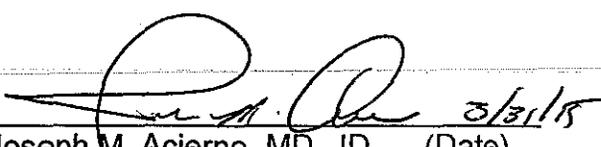
**IN WITNESS THEREOF**, the parties have duly executed this subgrant hereto, and each party acknowledges the receipt of a duly executed copy of this subgrant with original signatures.

FOR DHHS:

FOR SUBRECIPIENT:

  
\_\_\_\_\_  
Tony Green (Date)  
Acting Director  
Department of Health and Human Services  
Division of Children and Family Services

  
\_\_\_\_\_  
Nancy Ferguson (Date)  
Executive Director  
Central Plains Center for Services

  
\_\_\_\_\_  
Joseph M. Acierno, MD, JD (Date)  
Acting Chief Executive Officer  
Chief Medical Officer  
Director, Division of Public Health  
Department of Health and Human Services

## Subrecipient Reporting Worksheet

**Section A – Federal Award Information**Federal Award Identifier Number (FAIN) G-1401NECETVFederal Awarding Agency Name Administration for Children and FamiliesAward Date 4/1/14CFDA Program Number 93.599

Subgrant Amount From This

Award: \$548,950.00*\*See instructions if the subgrant is funded from more than one funding source***Section B – Subrecipient Information**Subrecipient DUNS 947662151Subrecipient Name Central Plains Center for ServicesSubrecipient Address: Street 908 South E StreetCity Broken Bow State NECountry USA Zip Code + 4 68822-2464Congressional District 2Amount of Subgrant \$ 590,600.00 Subgrant Date 10/1/14 to 9/30/15

Subrecipient Principal City \_\_\_\_\_ State \_\_\_\_\_

Place of Performance: Country \_\_\_\_\_ Zip Code + 4 \_\_\_\_\_

Congressional District \_\_\_\_\_

Subgrant Number \_\_\_\_\_ (Will be completed by Support Services)

Subgrant Project Description This program provides vouchers for postsecondary training and education for youth who have aged out of foster care or who have been adopted or left for kinship guardianship from the public foster care system after age 16.

**Section C – Officer Compensation**

1. In your business or organization's previous fiscal year, did your business organization (including parent organization, all branches, and all affiliates worldwide) receive 80% or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements AND \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

Yes – answer Question 2

No – not required to provide officer compensation

2. Does the public have access to information about the compensation of the senior executives in your business or organization (including parent organization, all branches, and all affiliates worldwide) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986?

Yes – not required to provide officer compensation

No – provide the names and total compensation of the five most highly compensated officers of the entity below

1.	_____	\$ _____
	Name	Compensation
2.	_____	\$ _____
	Name	Compensation
3.	_____	\$ _____
	Name	Compensation
4.	_____	\$ _____
	Name	Compensation
5.	_____	\$ _____
	Name	Compensation

**Section A – Federal Award Information (Continuation)**

*Use this page only if the subgrant is being funded by multiple sources (multiple federal grants or a combination of federal and state funds)*

Federal Award Identifier Number (FAIN) _____	
Federal Awarding Agency Name _____	Award Date _____
CFDA Program Number _____	Subgrant Amount From This Award: \$ _____

Federal Award Identifier Number (FAIN) _____	
Federal Awarding Agency Name _____	Award Date _____
CFDA Program Number _____	Subgrant Amount From This Award: \$ _____

Federal Award Identifier Number (FAIN) _____	
Federal Awarding Agency Name _____	Award Date _____
CFDA Program Number _____	Subgrant Amount From This Award: \$ _____

Amount funded from Federal Grants	<u>\$548,950.00</u>	total of grants in Section A
Amount funded from State General Funds	<u>\$ 41,650.00</u>	
Amount funded from State Cash Funds	<u>\$ _____</u>	
Amount funded from Federal Cash Funds	<u>\$ _____</u>	fed sources other than grants
<b>Total amount funded from all sources</b>	<b><u>\$590,600.00</u></b>	<b>should equal total of subgrant</b>