SIGNATURE PAGE

CC-6-2027

To the Monmouth County Board of County Commissioners:

**THE UNDERSIGNED HEREBY DECLARES THAT
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE
WITH YOUR REQUIREMENTS.**

Company Name: CPC Integrated Health
(PRINT)

Preparer's Name: Vera Sansone
(PRINT)

Signature: [signature] 8/19/26
(DATE)

Address: 10 Industrial Way East, Suite 108
Eatontown, NJ 07724

Telephone No.: 732-935-2220

Fax No.: 732-389-3207

E-Mail Address: vsansone@cpcih.org
(This should be the email where Contracts would be sent)

Contact Person: Vera Sansone

FEIN: [redacted]
(Federal Employee ID)

BRC: [redacted]
(Business Registration Certificate)

(Revised 2/2017)

MONMOUTH COUNTY DIVISION ON AGING, DISABILITIES AND VETERANS SERVICES

REQUEST FOR PROPOSAL COVER PAGE

A completed 'RFP Contents Check-off List' for the proposed project must follow this coversheet

Date: 8/19/2026

Name of Agency: CPC Integrated Health
Address of Agency: 10 Industrial Way East, Suite 108, Eatontown, NJ 07724
Telephone Number: 732-935-2220
FAX: 732-389-3207
E-mail: vsansone@cpcih.org

Type of Organization: _____ Public Agency X Private Non-Profit _____ For Profit

NAME OF PROPOSED PROJECT: Monmouth County Adult Protective Services for Vulnerable Adults Age 18 and Over

Total Grant Request: $ 653,923 (Grand total of all grants from Funding Allocation Chart)

If the project is located at a different address than above, provide the address:
N/A

Days and hours of operation of proposed project:
Monday through Friday, 8:30 a.m. to 4:30 p.m., with 24/7 coverage through the call center

Project will start:
January 1, 2027

AGENCY PERSONNEL:

Agency Director	Vera Sansone
Project Director	Dana Hilton
Fiscal Contact	Daniel Burns
Contact Person	Vera Sansone