

JOIN Contract No.: JOIN-\_\_\_\_\_

FEIN No.: \_\_\_\_\_

Workers Comp. No.: \_\_\_\_\_

**JOINT OPPORTUNITIES FOR INDEPENDENCE (JOIN) CONTRACT  
BETWEEN  
WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
AND**

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**Addendum/Renewal**

This JOIN Contract between the West Virginia Department of Health and Human Resources, Division of Family Assistance and/or \_\_\_\_\_ County Office, referred to as the "Department" and \_\_\_\_\_ referred to as the "Contractor" is hereby revised effective as of \_\_\_\_\_ to continue through June 30, \_\_\_\_\_.

The revisions are as follows: (Indicate revisions and/or renewal of Contract in the space provided.)

Please indicate your acceptance by signing in the space provided below.

Department of Health and Human Resources  
\_\_\_\_\_ County Office

Contractor

By: \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Title  
\_\_\_\_\_  
Date

By: \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Title  
\_\_\_\_\_  
Date

Union Representative (If applicable)

By: \_\_\_\_\_  
Signature  
\_\_\_\_\_  
Union and Title  
\_\_\_\_\_  
Date

This addendum shall be incorporated as part of the original Contract. All other aspects of original Contract shall remain in effect.