THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY

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16-490 A-3

**SAP Number** 

## San Bernardino County Fire Protection District

Department Contract Representative Telephone Number

Dan Munsey 387-5779

Contractor
Contractor Representative
Telephone Number
Contract Term
Original Contract Amount
Amendment Amount
Total Contract Amount
Cost Center

7/1/2016 through 12/31/2026 Not to Exceed \$696,000 \$755,040 Not to Exceed \$1,451,040

Arrowhead Regional Medical Center

## AMENDMENT NO. 3

The San Bernardino County Fire Protection District ("SBCFPD") and San Bernardino County, on behalf of Arrowhead Regional Medical Center ("ARMC") agree to amend the terms of the Medical Director Agreement (the "Agreement") fully executed between the parties on June 28, 2016, as previously amended on December 19, 2017, and December 15, 2020, as follows, effective January 1, 2024:

- 1. Section 2 of the Agreement is deleted in its entirety and replaced with the following:
  - 2. ARMC shall cause the Medical Director to devote up to 1,144 hours per year providing the services described in Section 5 of this Agreement. Any changes to this Agreement shall be in the form of a written amendment signed by both parties.
- 2. Section 6 of the Agreement is deleted in its entirety and replaced with the following:
  - 6. SBCFPD agrees to pay, and ARMC agrees to accept, payment of \$220 per hour, not-to-exceed 1,144 hours per year, up to \$251,680 per year, for services performed hereunder.
- 3. Section 8 of the Agreement is deleted in its entirety and replaced with the following:

- 8. This Agreement shall be effective July 1, 2016, and shall remain in effect through December 31, 2026, unless terminated by either party at any time with or without cause upon sixty (60) days written notice to the other party. The Fire Chief for SBCFPD shall have the right to exercise SBCFPD's authority under this Agreement including the right to give notice of termination on behalf of SBCFPD at his/her sole discretion. The Director of ARMC shall have the right to exercise ARMC's authority under this Agreement including the right to give notice of termination on behalf of ARMC at his/her sole discretion.
- 4. All other terms and conditions of the Agreement shall remain in full force and effect.
- 5. This Amendment may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Amendment No. 3. The parties shall be entitled to sign and transmit an electronic signature of this Amendment No. 3 (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained herein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Amendment No. 3 upon request.

WITNESS WHEREOF, this Amendment No. 3 has been fully executed on behalf of SBCFPD and ARMC by their duly authorized representatives.

SAN BERNARDINO COUNTY FIRE PROTE	AR	AN BERNARDINO COUNTY ON BEHALF OF RROWHEAD REGIONAL MEDICAL CENTER	
- Daum Rowe	(P:	(Print or type name of corporation, company, contractor, etc.)	
Dawn Rowe, Chair, Board of Directors		(Authorized signature - sign in blue ink)	
DEC 19 2023  Dated: DEC 19 2023  SIGNED AND CERTIFIED THAT A COPY C		ame Dawn Rowe (Print or type name of person signing contract)	
DOCUMENT HAS BEEN DELIVERED TO T		(i min or type name or person organing contractly	
CHAIR OF THE BOARD		Title Chair, Board of Supervisors	
Secritive Board of Sup San Bernarding County	retary pervisors	(Print or Type)	
By Deputy	Dat	ated:	
Of The Control of the	Add	SIGN TO AND CERTIFIED THAT A COPY OF THE DOCUMENT WAS BEEN DELIVERED TO THE CHAIR MAN OF THE BOARD	
POTECTION OF		LANNA MONSIBERNARDING	
The state of the s		Clerk of the Baard of Stloery sors of the General dan Bernarding	
		Ins deputy of	
FOR COUNTY USE ONLY		RNARDINO COUT	
	eviewed for Contract Compliance		
Scott Runyan, Assistant Principal County Counsel	•	<u> </u>	
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Date   Da	ate	Date	