

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



Contract Number

21-185 A-4

SAP Number

4400016248

Department of Behavioral Health

Department Contract Representative Telephone Number	Jesus Maciel (909) 388-0887
Contractor	Inland Valley Drug and Alcohol Recovery Services dba Inland Valley Recovery Services
Contractor Representative Telephone Number	Tina Hughes (909) 932-1069
Contract Term	April 1, 2021 through June 30, 2027
Original Contract Amount	\$822,885
Amendment Amount	\$973,121
Total Contract Amount	\$1,796,006
Cost Center	
Grant Number (If applicable)	

THIS CONTRACT is entered into in the State of California by and between San Bernardino County, hereinafter called the County, and Inland Valley Drug and Alcohol Recovery Services dba Inland Valley Recovery Services, referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 21-185** by and between San Bernardino County, a political subdivision of the State of California, and Contractor for Substance Use Disorder and Recovery Services Recovery Residences, which Contract first became effective April 1, 2021, the following changes are hereby made and agreed to:

I. ARTICLE IV FUNDING, paragraph I and J are hereby amended to read as follows:

I. The contract amendment amount of \$973,121 shall increase the total contract amount from \$822,885 to \$1,796,006 for the contract term.

- J. The Schedules A and B for FY 2024-2025, 2025-26 and 2026-27 will be submitted to, and approved by, the Director or designee at a later date. All previously approved Budget Schedules remain in effect.
- II. ARTICLE XV. DURATION AND TERMINATION, paragraph A is hereby amended to read as follows:
 - A. The term of this Agreement shall be from April 1, 2021, through June 30, 2027 inclusive.

III. All other terms, conditions and covenants in the basic agreement remain in full force and effect.

This Agreement 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 Agreement. The parties shall be entitled to sign and transmit an electronic signature of this Agreement (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Agreement upon request.

SAN BERNARDINO COUNTY

Inland Valley Drug and Alcohol Recovery Services
dba Inland Valley Recovery Services

(Print or type name of corporation, company, contractor, etc.)

►

Dawn Rowe, Chair, Board of Supervisors

By _____
(Authorized signature - sign in blue ink)

Dated: _____
SIGNED AND CERTIFIED THAT A COPY OF THIS
DOCUMENT HAS BEEN DELIVERED TO THE
CHAIRMAN OF THE BOARD

Name _____
(Print or type name of person signing contract)

Lynna Monell
Clerk of the Board of Supervisors
of San Bernardino County

Title _____
(Print or Type)

By _____
Deputy

Dated: _____

Address 1260 East Arrow Highway, Building E
Upland, CA. 91786

FOR COUNTY USE ONLY

Approved as to Legal Form

Reviewed for Contract Compliance

Reviewed/Approved by Department

►
Dawn Martin, Deputy County Counsel

►
Ellayna Hoatson, Contracts Supervisor

►
Georgina Yoshioka, Director

Date _____

Date _____

Date _____