



Contract Number

SAP Number

Arrowhead Regional Medical Center

Department Contract Representative	<u>William L. Gilbert</u>
Telephone Number	<u>(909) 580-6150</u>
Contractor	<u>Children and Families Commission</u>
Contractor Representative	<u>Mercedes Logans</u>
Telephone Number	<u>909-386-7706</u>
Contract Term	<u>August 25, 2020 through June 30, 2023</u>
Original Contract Amount	<u>Revenue</u>
Amendment Amount	<u> </u>
Total Contract Amount	<u>Revenue</u>
Cost Center	<u> </u>

Briefly describe the general nature of the contract: Funding agreement with the Children and Families Commission for San Bernardino County, for the Arrowhead Regional Medical Center Breathmobile® Program, in the amount of \$1,086,537, for the period of August 25, 2020 through June 30, 2023.

FOR COUNTY USE ONLY

Approved as to Legal Form ▶ _____ Michael Markel, Principal Assistant County Counsel Date _____	Reviewed for Contract Compliance ▶ _____ Date _____	Reviewed/Approved by Department ▶ _____ William L. Gilbert, Director Date _____
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