



Contract Number

23-185 A-1

SAP Number

Children and Family Services

Department Contract Representative	<u>Gregory Ustaszewski</u>
Telephone Number	<u>(909) 388-0212</u>
Contractor	<u>Loma Linda University Children's Hospital</u>
Contractor Representative	<u>Brett Walls</u>
Telephone Number	<u>(909) 558-7496</u>
Contract Term	<u>March 14, 2023 through March 13, 2028</u>
Original Contract Amount	<u>N/A</u>
Amendment Amount	<u></u>
Total Contract Amount	<u></u>
Cost Center	<u></u>
Grant Number (if applicable)	<u></u>

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

It is hereby agreed to amend Contract No.23-185, effective March 10, 2026, as follows:

SECTION E. Term of Contract

Amend Paragraph 1 to read as follows:

1. This Contract is effective March 14, 2023 and is extended from its original expiration date of March 13, 2026, to expire on March 13, 2028, but may be terminated earlier in accordance with provisions of this Contract.

All other terms and conditions of Contract No. 23-185 remain in full force and effect.

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. The parties shall be entitled to sign and transmit an electronic signature of this Amendment (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 Amendment upon request.

SAN BERNARDINO COUNTY

Loma Linda University Children's Hospital

(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 Peter Baker
(Print or type name of person signing contract)

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

Title Senior Vice President and Administrator
(Print or Type)

By _____
Deputy

Dated: _____

Address 1234 Anderson Street, Suite 1816

Loma Linda, CA 92354

FOR COUNTY USE ONLY

Approved as to Legal Form
► _____
Daniella V. Hernandez, Deputy County Counsel
Date _____

Reviewed for Contract Compliance
► _____
Lisa Rivas-Ordaz, HS Contracts Manager
Date _____

Reviewed/Approved by Department
► _____
Jeany Glasgow, Director
Date _____