



Contract Number

18-234-A3

SAP Number

4400008164

Department of Aging and Adult Services – Public Guardian

Department Contract Representative	Raul Gudino
Telephone Number	909-388-0320
Contractor	S.H. Spectrum, Inc.
Contractor Representative	Shawn Cam Luong
Telephone Number	951-230-8328
Contract Term	July 1, 2018 through September 30, 2023
Original Contract Amount	N/A
Amendment Amount	N/A
Total Contract Amount	N/A
Cost Center	5360001000

IT IS HEREBY AGREED AS FOLLOWS:

Amendment No. 3

It is hereby agreed to amend Contract No. 18-234, effective July 1, 2023, as follows:

VIII. TERM

Section VIII. Term is amended to read as follows:

This Contract is effective as of July 1, 2018 and is extended from its amended expiration date of June 30, 2023, to expire on September 30, 2023, but may be terminated earlier in accordance with provisions of Section IX of the Contract.

All other terms and conditions of Contract No. 18-234 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 Contract. 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

S.H. Spectrum, Inc

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



Dawn Rowe, Chair, Board of Supervisors

By

(Authorized signature - sign in blue ink)

Dated: _____

Name Shawn Cam Luong

(Print or type name of person signing contract)

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

Title Broker

(Print or Type)

Lynna Monell
Clerk of the Board of Supervisors
San Bernardino County

By _____
Deputy

Dated: _____

Address 2138 Cameo Vista Drive

West Covina, CA 91791

FOR COUNTY USE ONLY

Approved as to Legal Form

Reviewed for Contract Compliance

Reviewed/Approved by Department

Ramona Verduzco, Deputy County Counsel on
Behalf of Jacqueline Carey-Wilson, Deputy
County Counsel

Patty Steven, Contracts Manager

Sharon Nevins, Director,
Department of Aging and Adult Services

Date _____

Date _____

Date _____