

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



Contract Number

22-472 A-2

SAP Number

4400019558 – Total Contract

4400014427 – CFS Aggregate

Department of Behavioral Health

| | |
|---|---|
| Department Contract Representative | Christopher Carso |
| Telephone Number | (909) 388-0856 |
| Contractor | Inland Behavioral and Health Services, Inc. |
| Contractor Representative | Dr. Christine Bierdrager-Salley |
| Telephone Number | (909) 881-0111 |
| Contract Term | July 1, 2022 through June 30, 2027 |
| Original Contract Amount | \$1,685,950 |
| Amendment Amount | \$0 |
| Total Contract Amount | \$1,685,950 |
| Total Aggregate Amount – For Clients Referred by CFS | July 1, 2022 through June 30, 2025 \$2,400,000 |
| Cost Center | 1018501000 |

THIS CONTRACT is entered into in the State of California by and between San Bernardino County, hereinafter called the County, and Inland Behavioral and Health Services, Inc. referenced above, hereinafter called Contractor.

IT IS HEREBY AGREED AS FOLLOWS:

WITNESSETH:

IN THAT CERTAIN **Contract No. 22-472** by and between San Bernardino County, a political subdivision of the State of California, and Contractor for Early Intervention, Outpatient Treatment, Intensive Outpatient Treatment, and Recovery Services, which Contract first became effective July 1, 2022, the following changes are hereby made and agreed to, effective July 1, 2024:

I. ARTICLE V FUNDING, paragraph K and L are hereby amended and paragraph M is hereby added to read as follows:

K. The maximum financial obligation under this contract shall not exceed \$1,685,950 for the contract term.

Separately, the contract amendment amount of \$800,000 shall increase the total additional aggregate funding amount from \$1,600,000 to \$2,400,000 that may be applied (but not necessarily ensured) for any client referred from San Bernardino County Children and Family Services for fiscal years 2022-23, 2023-24, and 2024-25.

L. This amendment hereby adds Schedules A and B for FY 2024-25 as set forth in Exhibit I. All previously approved schedules remain in effect.

M. The allowable funding sources for this Contract may include: 2011 Realignment, Substance Use Prevention, Treatment and Recovery Services Block Grant, Federal Financial Participation Drug Medi-Cal, California Work Opportunity and Responsibility to Kids, State Assembly Bill 109 and the Department of Children and Family Services, through a Memorandum of Understanding. Federal funds may not be used as match funds to draw down federal funds.

II. ARTICLE XX PERSONNEL, paragraphs M and N, are hereby added to read as follows:

M. Executive Order N-6-22 – Russia Sanctions

On March 4, 2022, Governor Gavin Newsom issued Executive Order N-6-22 (the EO) regarding Economic Sanctions against Russia and Russian entities and individuals. "Economic Sanctions" refers to sanctions imposed by the U.S. government in response to Russia's actions in Ukraine (<https://home.treasury.gov/policy-issues/financial-sanctions/sanctions-programs-and-country-information/ukraine-russia-related-sanctions>), as well as any sanctions imposed under state law (<https://www.dgs.ca.gov/OLS/Ukraine-Russia>). The EO directs state agencies and their contractors (including by agreement or receipt of a grant) to terminate contracts with, and to refrain from entering any new contracts with, individuals or entities that are determined to be a target of Economic Sanctions. Accordingly, should it be determined that Contractor is a target of Economic Sanctions or is conducting prohibited transactions with sanctioned individuals or entities, that shall be grounds for termination of this agreement. Contractor shall be provided advance written notice of such termination, allowing Contractor at least 30 calendar days to provide a written response. Termination shall be at the sole discretion of the County.

N. Campaign Contribution Disclosure (SB 1439)

Contractor has disclosed to the County using Attachment III - Campaign Contribution Disclosure Senate Bill 1439, whether it has made any campaign contributions of more than \$250 to any member of the Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, Auditor-Controller/Treasurer/Tax Collector and the District Attorney] within the earlier of: (1) the date of the submission of Contractor's proposal to the County, or (2) 12 months before the date this Contract was approved by the Board of Supervisors. Contractor acknowledges that under Government Code section 84308, Contractor is prohibited from making campaign contributions of more than \$250 to any member of the Board of Supervisors or other County elected officer for 12 months after the County's consideration of the Contract.

In the event of a proposed amendment to this Contract, the Contractor will provide the County a written statement disclosing any campaign contribution(s) of more than \$250 to any member of the Board of Supervisors or other County elected officer within the preceding 12 months of the date of the proposed amendment.

Campaign contributions include those made by any agent/person/entity on behalf of the Contractor or by a parent, subsidiary or otherwise related business entity of Contractor.

- III. ATTACHMENT V Campaign Contribution Disclosure (SB 1439) is hereby added.
- IV. Exhibit I Schedules A and B for FY 2024-25 are hereby added.



V. 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

► *Dawn Rowe*
Dawn Rowe, Chair, Board of Supervisors

Dated: JUN 11 2024
SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

By *Lynna Monell*
Lynna Monell
Clerk of the Board of Supervisors
of San Bernardino County
Deputy



Inland Behavioral and Health Services, Inc.

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

By *Dr. Temetry A. Lindsey*
(Authorized signature - sign in blue ink)

Name Dr. Temetry A. Lindsey
(Print or type name of person signing contract)

Title CEO/President
(Print or Type)

Dated: 5/28/2024

Address 1963 North E Street, San Bernardino,
CA 92405

FOR COUNTY USE ONLY

Approved by Legal Form
► *Dawn Martin*
Dawn Martin, Deputy County Counsel
Date 5/28/2024

Reviewed for Contract Compliance
► *Ellayna Hoatson*
Ellayna Hoatson, Contracts Supervisor
Date 5/28/2024

Reviewed/Approved by Department
► *Georgina Yoshioka*
Georgina Yoshioka, Director
Date 5/28/2024

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER RECOVERY SERVICES - OUTPATIENT CONTRACT
Personnel Expense Detail

BUDGET PERIOD: **FY 2024-2025**

| | | | |
|--------------------------|---|----------------|-------------------------|
| PROVIDER NAME: | <u>Inland Behavioral and Health Services, I</u> | PREPARER: | <u>for Peter De Mel</u> |
| FACILITY ADDRESS: | <u>1963 North E Street</u> | TITLE: | <u>CFO</u> |
| | <u>San Bernardino, CA 92405-3919</u> | DATE PREPARED: | <u>4/18/2024</u> |
| PROVIDER NUMBER : (36XX) | <u>38-3666</u> | | |

| Position Title | Full Time Annual Salary | Full Time Fringe Benefits | Total Full Time Salaries & Benefits | % / FTE of Total Salary & Benefits | Total Salaries and Benefits Charged to Contract Services |
|--------------------------------------|-------------------------|---------------------------|-------------------------------------|------------------------------------|--|
| Director of Behavioral Health | \$ 96,000 | \$ 12,048 | \$ 108,048 | 12.0% | \$ 12,966 |
| WCC Program Manager VD | \$ 54,122 | \$ 6,792 | \$ 60,914 | 100.0% | \$ 60,914 |
| AOD counselor I (EI/Youth focus) AM | \$ 53,664 | \$ 6,735 | \$ 60,399 | 100.0% | \$ 60,399 |
| AOD counselor II | \$ 49,920 | \$ 6,265 | \$ 56,185 | 100.0% | \$ 56,185 |
| AOD counselor I (Case Mgmt/RS focus) | \$ 43,660 | \$ 5,482 | \$ 49,142 | 50.0% | \$ 24,581 |
| MH intern (Family Therapy) | \$ 54,080 | \$ 6,787 | \$ 60,867 | 20.0% | \$ 12,173 |
| Receptionist | \$ 40,061 | \$ 5,028 | \$ 45,089 | 40.0% | \$ 18,035 |
| Billing Clerk | \$ 44,179 | \$ 5,544 | \$ 49,723 | 40.0% | \$ 19,889 |
| Driver | \$ 40,061 | \$ 5,028 | \$ 45,089 | 20.0% | \$ 9,018 |
| Maintenance | \$ 42,848 | \$ 5,377 | \$ 48,225 | 40.0% | \$ 19,290 |
| Security | \$ 40,061 | \$ 5,028 | \$ 45,089 | 40.0% | \$ 18,035 |
| | | | \$ - | | \$ - |
| | | | \$ - | | \$ - |
| | | | \$ - | | \$ - |

| | |
|------------|------------|
| TOTAL COST | \$ 311,486 |
|------------|------------|

EXHIBIT I

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER RECOVERY SERVICES - OUTPATIENT CONTRACT

Budget Detail

BUDGET PERIOD: FY 2015-2016
PROVIDER NAME: United Behavioral Health Services, Inc. (UBHS)

| *Provide each expense by line item. Provide an explanation for the allocation of all figures (rate, quantity, benefit, FTE, etc.). For example, show how indirect costs are calculated when not stated. | | |
|---|----------|--|
| 011 | 021 | 031 |
| Schedule of Indirect Costs | LOAD | LOAD Allocation Explanation |
| TOTAL SALARIES AND BENEFITS | 3 | 311,436 |
| Equipment, Materials and Supplies | | |
| Depreciation - Equipment | 3,076 | Depreciation for equipment @ 300 per month |
| Maintenance - Equipment | 3,074 | Maintenance @ 307 per month |
| Medical, Dental and Laboratory Supplies | | |
| Personnel Costs | | |
| Rent and Lease Equipment | 31,540 | Copier and Telephone lease @ 3045 per month |
| Clothing and Personal Supplies | | |
| Food | | |
| Laundry Services and Supplies | | |
| Small Tools and Instruments | | |
| Training | | |
| Blackboard Supplies | | |
| Operational Expenses | | |
| Communications | 35,500 | Telephone services and internet services @ 3450 per month |
| Depreciation - Structures and Improvements | 38,000 | Depreciation for building structure @ 3160 per month |
| Household Expenses | | |
| Insurance | 38,500 | Auto, General Cyber liability Insurance @ 3750 per month |
| Printing Expense | 33,000 | Printing expense @ 3750 per month |
| Lease Property, Maintenance, Structures, Improvements, and grounds | | |
| Maintenance - Structures, Improvements, and grounds | 3400 | Maintenance & Janitor @ 300 per month |
| Miscellaneous Expense | | |
| Office Expense | 31,004 | Office supplies, postage @ 3100 per month |
| Proscriptions and legal notices | | |
| Rent & Lease - Land, Structure, and Improvements | | |
| Taxes and Licenses | 3700 | Licenses and Fees per year |
| Drug Screening and Drug Testing | 38,000 | Referred Therapy for drug testing |
| UTILITIES | 311,451 | Electricity, water and gas services @ 3410 per month |
| OPER | 38,000 | Required transportation (gas, toll, oil changes and repairs to the vehicles) |
| Professional and Special Services | | |
| Pharmaceutical | | |
| Professional and Special Services | 31,544 | Medical Director, Insurance, and Independent CPA services |
| Transportation | | |
| Transportation | | |
| Tolls | | |
| Gas, Oil & Maintenance - Vehicles | | |
| Rent & Lease - Vehicles | | |
| Depreciation - Vehicles | | |
| Other Costs | | |
| Administrative Indirect Costs | 310,004 | Unrecovered time for audits, report writing, and other administrative duties, executive management oversight |
| OTHER | | |
| TOTAL OPERATING EXPENSES | 3 | 17,278 |
| PROFIT/OTHER AGENCY REVENUE | | |
| | | |
| TOTAL EXPENDITURES | 3 | 308,662 |

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SUBSTANCE USE DISORDER RECOVERY SERVICES - OUTPATIENT CONTRACT
SCHEDULE A - Proposed Budget**

BUDGET PERIOD: FY 2024-2025

Contract Name: Integrated Behavioral and Health Services, Inc. (IBHS) Prepared by: for Peter DeMaio
 Facility Address: 1903 North F Street Title: CFO
San Bernardino, CA 92410-3819 Date Prepared: 4/18/2024
 Provider Number (28 cc): 30-3600

| FUNDING SOURCE | Drug Medi-Cal | CaWORKs | Alt-199 | Youth | Block Grant | CPS | TOTAL |
|---|---------------|----------|----------|-----------|-------------|-----------|------------|
| Outpatient Treatment (OOP) | | | | | | | |
| Cost - Individual Counseling | \$ 70,000 | \$ 300 | \$ 300 | \$ 3,000 | \$ 6,000 | \$ 10,000 | \$ 103,420 |
| Units of Service (15 minute increment) | 3,500 | 12 | 12 | 150 | 300 | 500 | 5,484 |
| Item Rate | \$ 20.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30 |
| Cost - Group Counseling | \$ 110,000 | \$ 700 | \$ 700 | \$ 7,000 | \$ 12,000 | \$ 21,000 | \$ 158,400 |
| Units of Service (15 minute increment) | 3,500 | 24 | 24 | 240 | 400 | 700 | 6,512 |
| Item Rate | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30 |
| Intensive Outpatient Treatment (IOT) | | | | | | | |
| Cost - Individual Counseling | \$ 2,100 | \$ 100 | \$ 100 | \$ 400 | \$ 700 | \$ 600 | \$ 4,200 |
| Units of Service (15 minute increment) | 70 | 4 | 4 | 133 | 233 | 200 | 544 |
| Item Rate | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30 |
| Cost - Group Counseling | \$ 5,000 | \$ 300 | \$ 300 | \$ 1,000 | \$ 2,100 | \$ 2,100 | \$ 12,400 |
| Units of Service (15 minute increment) | 166 | 12 | 12 | 60 | 70 | 70 | 416 |
| Item Rate | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30.00 | \$ 30 |
| Family Intervention Treatment (FIT) | | | | | | | |
| Cost - Individual Counseling | | | | \$ 2,000 | | \$ 600 | \$ 4,200 |
| Units of Service (15 minute increment) | | | | 100 | | 20 | 140 |
| Item Rate | | | | \$ 30.00 | | \$ 30.00 | \$ 30 |
| Cost - Group Counseling | | | | \$ 7,200 | | \$ 1,600 | \$ 9,000 |
| Units of Service (15 minute increment) | | | | 240 | | 60 | 300 |
| Item Rate | | | | \$ 30.00 | | \$ 30.00 | \$ 30 |
| Recovery Services (RS) | | | | | | | |
| Cost - Individual Counseling | \$ 4,000 | | | | \$ 1,200 | \$ 1,200 | \$ 7,200 |
| Units of Service (15 minute increment) | 133 | | | | 40 | 40 | 213 |
| Item Rate | \$ 30.00 | | | | \$ 30.00 | \$ 30.00 | \$ 30 |
| Cost - Group Counseling | \$ 7,200 | | | | \$ 1,000 | \$ 1,000 | \$ 10,200 |
| Units of Service (15 minute increment) | 240 | | | | 60 | 60 | 360 |
| Item Rate | \$ 30.00 | | | | \$ 30.00 | \$ 30.00 | \$ 30 |
| Cost - Family Therapy | \$ 20,400 | | | | \$ 6,000 | \$ 5,500 | \$ 38,500 |
| Units of Service (15 minute increment) | 680 | | | | 200 | 110 | 1,010 |
| Item Rate | \$ 30.00 | | | | \$ 30.00 | \$ 30.00 | \$ 30 |
| Cost - Recovery Monitoring | \$ 4,000 | | | | \$ 1,200 | \$ 600 | \$ 6,200 |
| Units of Service (15 minute increment) | 133 | | | | 40 | 20 | 233 |
| Item Rate | \$ 30.00 | | | | \$ 30.00 | \$ 30.00 | \$ 30 |
| Case Management (ODF/OT/EMS) | | | | | | | |
| Cost - ODF Case Management | \$ 6,700 | \$ 90 | \$ 90 | \$ 4,000 | \$ 2,600 | \$ 2,000 | \$ 18,420 |
| Units of Service (15 minute increment) | 223 | 4 | 4 | 200 | 180 | 120 | 731 |
| Item Rate | \$ 30.00 | \$ 24.00 | \$ 24.00 | \$ 24.00 | \$ 24.00 | \$ 24.00 | \$ 24 |
| Cost - OT Case Management | \$ 1,900 | \$ 40 | \$ 40 | \$ 700 | \$ 1,400 | \$ 1,100 | \$ 6,510 |
| Units of Service (15 minute increment) | 63 | 2 | 2 | 233 | 46 | 40 | 386 |
| Item Rate | \$ 30.00 | \$ 24.00 | \$ 24.00 | \$ 30.00 | \$ 24.00 | \$ 24.00 | \$ 24 |
| Cost - EI Case Management | | | | \$ 2,400 | | \$ 1,100 | \$ 3,500 |
| Units of Service (15 minute increment) | | | | 80 | | 46 | 126 |
| Item Rate | | | | \$ 30.00 | | \$ 24.00 | \$ 24 |
| Cost - RS Case Management | \$ 4,000 | | | | \$ 900 | \$ 2,000 | \$ 6,900 |
| Units of Service (15 minute increment) | 133 | | | | 30 | 120 | 283 |
| Item Rate | \$ 30.00 | | | | \$ 24.00 | \$ 24.00 | \$ 24 |
| Physician Consultation | | | | | | | |
| Cost | | | | | | | \$ 0 |
| Units of Service (15 minute increment) | | | | | | | \$ 0 |
| Item Rate | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0 |
| Medication Assisted Treatment (MAT) | | | | | | | |
| Cost | | | | | | | \$ 0 |
| Units of Service (15 minute increment) | | | | | | | \$ 0 |
| Item Rate | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0.00 | \$ 0 |
| SUMMARY OF ALL SERVICES | | | | | | | |
| Total Costs | \$ 292,200 | \$ 1,700 | \$ 1,700 | \$ 21,800 | \$ 42,700 | \$ 51,270 | \$ 411,570 |
| Units of Service (15 minute increment) | 9,750 | 58 | 58 | 1,520 | 1,250 | 1,770 | 14,356 |

* Round Costs to nearest dollar

| | |
|---|--|
| Signature:  Dr. Temetry A. Lindsey Dr. Temetry A. Lindsey, MD (Psychiatry) (CA 2014) | PRINTED NAME: Dr. Temetry A. Lindsey DATE: Apr 22, 2024 |
| PROVIDER AUTHORIZED SIGNATURE:  Anthony Altamirano Anthony Altamirano, MD (Psychiatry) (CA 2014) | PRINTED NAME: Anthony Altamirano DATE: Apr 23, 2024 |
| PHYSICIAN SERVICES AUTHORIZED SIGNATURE:  Michael Sweitzer Michael Sweitzer, MD (Psychiatry) (CA 2014) | PRINTED NAME: Michael Sweitzer DATE: Apr 25, 2024 |
| DBP PROGRAM MANAGER OR DESIGNEE SIGNATURE: | PRINTED NAME: |

| Provider Name | CAPIA No. | Area of Interest | Specialty Area | State Board License |
|-----------------|-----------|------------------|----------------|---------------------|
| Substance Abuse | 20 000 | SMHO | SMHO/SA | State (CPCO) |
| Psychiatry, I | 20 170 | DMC | DMC/SA | State (CPCO) |



ATTACHMENT V

Campaign Contribution Disclosure (SB 1439)

DEFINITIONS

Actively supporting the matter: (a) Communicate directly with a member of the Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, District Attorney, Auditor-Controller/Treasurer/Tax Collector] for the purpose of influencing the decision on the matter; or (b) testifies or makes an oral statement before the County in a proceeding on the matter for the purpose of influencing the County's decision on the matter; or (c) communicates with County employees, for the purpose of influencing the County's decision on the matter; or (d) when the person/company's agent lobbies in person, testifies in person or otherwise communicates with the Board or County employees for purposes of influencing the County's decision in a matter.

Agent: A third-party individual or firm who, for compensation, is representing a party or a participant in the matter submitted to the Board of Supervisors. If an agent is an employee or member of a third-party law, architectural, engineering or consulting firm, or a similar entity, both the entity and the individual are considered agents.

Otherwise related entity: An otherwise related entity is any for-profit organization/company which does not have a parent-subsidary relationship but meets one of the following criteria:

- (1) One business entity has a controlling ownership interest in the other business entity;
- (2) there is shared management and control between the entities; or
- (3) a controlling owner (50% or greater interest as a shareholder or as a general partner) in one entity also is a controlling owner in the other entity.

For purposes of (2), "shared management and control" can be found when the same person or substantially the same persons own and manage the two entities; there are common or commingled funds or assets; the business entities share the use of the same offices or employees, or otherwise share activities, resources or personnel on a regular basis; or there is otherwise a regular and close working relationship between the entities.

Parent-Subsidiary Relationship: A parent-subsidiary relationship exists when one corporation has more than 50 percent of the voting power of another corporation.

Contractors must respond to the questions on the following page. If a question does not apply respond N/A or Not Applicable.

1. Name of Contractor: Inland Behavioral and Health Services Inc.
2. Is the entity listed in Question No.1 a nonprofit organization under Internal Revenue Code section 501(c)(3)?
 Yes If yes, skip Question Nos. 3-4 and go to Question No. 5 No
3. Name of Principal (i.e., CEO/President) of entity listed in Question No. 1, if the individual actively supports the matter and has a financial interest in the decision: _____
4. If the entity identified in Question No.1 is a corporation held by 35 or less shareholders, and not publicly traded ("closed corporation"), identify the major shareholder(s):

5. Name of any parent, subsidiary, or otherwise related entity for the entity listed in Question No. 1 (see definitions above):

| Company Name | Relationship |
|--------------|--------------|
| N/A | |
| | |

6. Name of agent(s) of Contractor:

| Company Name | Agent(s) | Date Agent Retained (if less than 12 months prior) |
|--------------|----------|---|
| N/A | | |
| | | |

7. Name of Subcontractor(s) (including Principal and Agent(s)) that will be providing services/work under the awarded contract if the subcontractor (1) actively supports the matter and (2) has a financial interest in the decision and (3) will be possibly identified in the contract with the County or board governed special district.

| Company Name | Subcontractor(s): | Principal and//or Agent(s): |
|--------------|-------------------|-----------------------------|
| N/A | | |
| | | |

8. Name of any known individuals/companies who are not listed in Questions 1-7, but who may (1) actively support or oppose the matter submitted to the Board and (2) have a financial interest in the outcome of the decision:

| Company Name | Individual(s) Name |
|--------------|--------------------|
| N/A | |
| | |

9. Was a campaign contribution, of more than \$250, made to any member of the San Bernardino County Board of Supervisors or other County elected officer within the prior 12 months, by any of the individuals or entities listed in Question Nos. 1-8?

No If **no**, please skip Question No. 10.

Yes If **yes**, please continue to complete this form.

10. Name of Board of Supervisor Member or other County elected officer: _____

Name of Contributor: _____

Date(s) of Contribution(s): _____

Amount(s): _____

Please add an additional sheet(s) to identify additional Board Members or other County elected officers to whom anyone listed made campaign contributions.

By signing the Contract, Contractor certifies that the statements made herein are true and correct. Contractor understands that the individuals and entities listed in Question Nos. 1-8 are prohibited from making campaign contributions of more than \$250 to any member of the Board of Supervisors or other County elected officer while award of this Contract is being considered and for 12 months after a final decision by the County.