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**Contract Number**

**18-382 A-6**

**SAP Number**

**4400008766**

## Department of Behavioral Health

<b>Department Contract Representative</b>	Tamela Hutchinson
<b>Telephone Number</b>	909-388-0861
<b>Contractor</b>	Desert/Mountain Children's Center
<b>Contractor Representative</b>	Pamela Bender
<b>Telephone Number</b>	760-955-3555
<b>Contract Term</b>	July 1, 2018 through March 31, 2025
<b>Original Contract Amount</b>	\$85,683,756
<b>Amendment Amount</b>	\$3,624,819
<b>Total Contract Amount</b>	\$89,308,575
<b>Cost Center</b>	SAP 9203242200; SATS 9207091000

THIS CONTRACT is entered into in the State of California by and between San Bernardino County, hereinafter called the County, and Desert/Mountain Children's Center referenced above, hereinafter called Contractor.

### IT IS HEREBY AGREED AS FOLLOWS:

#### WITNESSETH:

IN THAT CERTAIN **Contract No. 18-382** by and between San Bernardino County, a political subdivision of the State of California, and Contractor for Comprehensive Treatment Services: Student Assistance Program (SAP) and School-Aged Treatment Services (SATS), which Contract first became effective July 1, 2018, the following changes are hereby made and agreed to:

- I. ARTICLE V FUNDING and BUDGETARY RESTRICTIONS, paragraph I is hereby amended to read as follows:

- I. The contract amendment amount of \$3,624,819 shall increase the total contract amount from \$85,683,756 to \$89,308,575 for the contract term.
- II. ARTICLE XIV DURATION and TERMINATION, paragraph A is hereby amended to read as follows:
  - A. The term of this Agreement shall be from July 1, 2018 through March 31, 2025 inclusive.

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

ADMINISTRATIVE AGENT REVIEW AND ACCEPTANCE

Date: \_\_\_\_\_

By: \_\_\_\_\_

Rich De Nava (Authorized signature - sign in blue ink)


SAN BERNARDINO COUNTY SUPERINTENDENT OF SCHOOLS, Administrative Agent for the California Association of Health and Education Linked Professions Joint Powers Authority (CALHELP JPA)

SAN BERNARDINO COUNTY

Desert/Mountain Children's Center

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

\_\_\_\_\_  
Dawn Rowe, Chair, Board of Supervisors

By  \_\_\_\_\_  
(Authorized signature - sign in blue ink)

Dated: \_\_\_\_\_

Name Pamela Bender  
(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 Chief Executive Officer  
(Print or Type)

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




By \_\_\_\_\_  
Deputy

Dated: \_\_\_\_\_

Address 17800 Highway 18

Apple Valley, CA 92307

**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 _____