



**Contract Number**

23-09 A2

**SAP Number**

## Board of Supervisors

<b>Department Contract Representative</b>	Penelope Chang
<b>Telephone Number</b>	909-387-4886
<b>Contractor</b>	Priscilla Bugayong
<b>Contractor Representative</b>	N/A
<b>Telephone Number</b>	On File
<b>Contract Term</b>	
<b>Original Contract Amount</b>	
<b>Amendment Amount</b>	
<b>Total Contract Amount</b>	
<b>Cost Center</b>	1002001000
<b>Grant Number (if applicable)</b>	

**IT IS HEREBY AGREED AS FOLLOWS:**

**AMENDMENT NO. 2 TO EMPLOYMENT CONTRACT NO. 23-09**

**WHEREAS**, San Bernardino County (County) and Priscilla Bugayong (Contractor) have previously entered into Employment Contract No. 23-09 (Contract) in which Contractor provides services to the County as a Field Representative I; and

**WHEREAS**, County and Contractor desire to amend the Contract as described in this Amendment No. 2 to the Contract.

**NOW THEREFORE**, County and Contractor agree that effective May 2, 2026, the Contract is hereby amended (“this Amendment”) as follows:

1. All paragraphs under Section IV. COMPENSATION OF CONTRACTOR, identified as follows, are hereby deleted in their entirety and shall be replaced with “RESERVED.”

- B. OVERTIME**
- D. MEDICAL AND DENTAL COVERAGE**
- E. VISION CARE INSURANCE**
- F. AUTO ALLOWANCE**
- G. PORTABLE COMMUNICATION DEVICE ALLOWANCE**
- J. SALARY SAVINGS PLAN**
- K. RETIREMENT MEDICAL TRUST (“Trust”)**
- L. LIFE INSURANCE**
- M. DEPENDENT CARE ASSISTANCE PLAN (DCAP) AND FLEXIBLE SPENDING ACCOUNT (FSA) PLAN FOR MEDICAL EXPENSE REIMBURSEMENT**
- N. SHORT-TERM DISABILITY**
- O. LONG-TERM DISABILITY**
- Q. OTHER BENEFITS**
- T. SPECIAL ASSIGNMENT COMPENSATION**

2. Paragraph C, LEAVE PROVISIONS, and Paragraph I, RETIREMENT PLAN, both of which are under Section IV. COMPENSATION OF CONTRACTOR, are hereby DELETED and a new Paragraph C, LEAVE PROVISIONS, and a new Paragraph I, RETIREMENT PLAN, both of which are under Section IV. COMPENSATION OF CONTRACTOR, are ADDED to read as follows:

**C. LEAVE PROVISIONS**

Contractor shall receive, or be subject to, the following Leave Provisions in the same manner and amount as part-time employees in the Exempt Compensation Plan, Group C: Bereavement, Vacation, Administrative, Holiday, and Sick (Sick leave shall be in an amount no less than required by the California Labor Code). Contractor shall not receive Perfect Attendance Leave.

**I. RETIREMENT PLAN**

If Contractor is regularly scheduled for and regularly works a minimum of 40 hours per pay period, Contractor shall participate in the County’s general retirement system, i.e., San Bernardino County Employees Retirement Association (SBCERA), during the term of this contract pursuant to the Exempt Group Working Conditions Ordinance as modified by, and in accordance with, the applicable terms of the California Public Employees’ Pension Reform Act of 2013 (Gov’t Code section 7522 et seq.).

If Contractor regularly works less than 40 hours per pay period, or otherwise does not meet the definition of a member of the retirement system, Contractor shall instead participate in the County’s PST Deferred Compensation Retirement Plan.

If Contractor is first hired at age 60 or over, Contractor may choose not to become a member of the SBCERA at the time of hire, pursuant to the terms and conditions San Bernardino County Exempt Group Working Conditions Ordinance. If Contractor chooses not to become a member of SBCERA, Contractor shall be enrolled in the County’s 401(k) plan pursuant to the terms and conditions of the San Bernardino County Exempt Group Working Conditions Ordinance.

3. Section V., GENERAL PROVISIONS RELATING TO CONTRACTOR, Paragraph A, TOUR OF DUTY, is DELETED and a new Section V., GENERAL PROVISIONS RELATING TO CONTRACTOR, Paragraph A, TOUR OF DUTY, is ADDED to read as follows:

**A. TOUR OF DUTY**

Contractor’s standard tour of duty (regularly scheduled work week) shall be established by the Second District Supervisor of San Bernardino County, or designee. Contractor shall be required

to work during such hours as necessary to carry out the duties of his position, as designated by the Second District Supervisor or designee, and such hours may be varied so long as the work requirements and efficient operations of the County are assured. Contractor shall not work more than thirty-nine (39) hours per pay period without prior approval from the Second District Supervisor or designee. The Second District Supervisor or designee shall have the right to direct Contractor to take such time off as is necessary to ensure that Contractor's actual time worked does not exceed thirty-nine (39) hours within any given pay period.

Except as amended, all other terms and conditions of the Contract and all amendments shall remain unchanged and are incorporated herein by this reference.

County and Contractor agree that this Amendment to the Contract 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 mail 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

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

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

Lynna Monell  
 Clerk of the Board of Supervisors  
 San Bernardino County

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

Priscilla Bugayong  
 \_\_\_\_\_  
 (Print or type name of corporation, company, contractor, etc.)

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

Name Priscilla Bugayong  
 \_\_\_\_\_  
 (Print or type name of person signing contract)

Title Field Representative I – Second District  
 \_\_\_\_\_  
 (Print or Type)

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

Address On File  
 \_\_\_\_\_

**FOR COUNTY USE ONLY**

Approved as to Legal Form ► Scott Runyan, Principal Assistant County Counsel Date _____	Reviewed for Contract Compliance ► Date _____	Reviewed/Approved by Department ► Date _____
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