



Contract Number

22-578 A-1

SAP Number

4400019547

Department of Behavioral Health

Department Contract Representative	Nathaniel Rodriguez
Telephone Number	(909) 388-0861
Contractor	Riverside-San Bernardino County Indian Health, Inc.
Contractor Representative	Vernon Motschman
Telephone Number	(909) 864-1097 ext. 4795
Contract Term	July 1, 2022 through June 30, 2026
Original Contract Amount	\$1,092,000
Amendment Amount	\$364,000
Total Contract Amount	\$1,456,000
Cost Center	9203342200
Grant Number (If applicable)	N/A

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

IN THAT CERTAIN **Contract No. 22-578** by and between San Bernardino County, a political subdivision of the State of California, (hereinafter referred to as County) and Riverside-San Bernardino County Indian Health, Inc. (hereinafter referred to as Contractor) for Promotores de Salud/Community Health Worker program services, which first became effective July 1, 2022, the following changes are hereby made and agreed to:

- I. ARTICLE V FUNDING AND BUDGETARY RESTRICTIONS, paragraph H and I are hereby amended to read as follows:
 - H. The maximum financial obligation under this contract shall not exceed \$1,456,000 for the contract term.

- I. This amendment hereby adds Schedules A and B for FY 2025-26 as set forth in Exhibit I. All previously approved schedules remain in effect.
- II. ARTICLE XIV DURATION AND TERMINATION, paragraph A is hereby amended to read as follows:

The term of this agreement shall be from July 1, 2022 through June 30, 2026 inclusive. The County may, but is not obligated to, extend awarded contract(s) for up to one (1) additional one-year period contingent on the availability of funds and Contractor performance.
- III. ARTICLE XVII PERSONNEL, paragraph L is hereby added:
 - L. Levine Act Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439)

Contractor has disclosed to the County using Attachment III – Levine Act Campaign Contribution Disclosure Senate Bill (formerly referred to as Senate Bill 1439), whether it has made any campaign contributions of more than \$500 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 \$500 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.
- IV. ATTACHMENT IV LEVINE ACT-CAMPAIGN CONTRIBUTION DISCLOSURE (formerly referred to as SB 1439) is hereby added.
- V. EXHIBIT I is hereby added to include Schedules A and B for FY 2025-26.

VI. All other terms and conditions 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.

IN WITNESS WHEREOF, the San Bernardino County and the Contractor have each caused this Contract Amendment to be subscribed by its respective duly authorized officers, on its behalf.

SAN BERNARDINO COUNTY

Riverside-San Bernardino County Indian Health, 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 Bill Thomsen
(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 11980 Mount Vernon Avenue

Grand Terrace, CA 92313

FOR COUNTY USE ONLY

Approved as to Legal Form

Reviewed for Contract Compliance

Reviewed/Approved by Department

►

Dawn Martin, Deputy County Counsel

►

Michael Shin, Administrative Manager

►

Georgina Yoshioka, Director

Date _____

Date _____

Date _____

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
PREVENTION AND EARLY INTERVENTION

Actual Cost Contract (cost reimbursement)

(PEI)

Promotores de Salud/Community Health Workers

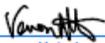
Contractor Name: **Riverside-San Bernardino County Indian Health, Inc.**
Region: **Central/Desert/Mount./West Valley**
Contract #/REF #: **21-114**
Address: **11980 Mt. Vernon Avenue
Grand Terrace, Ca. 92313**
Date Form Completed: **April 2025**
Updated: **April 2025**

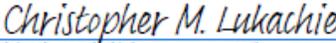
Prepared by: **Vernon Motschman**
Title: **Program Coordinator**

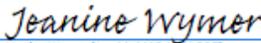
FY 2025 - 2026
July 1, 2025 to June 30, 2026

PEI County Program: Promotores de Salud / Community Health Workers								TOTAL
State Defined Program: Outreach for Increasing Recognition of Early Signs of Mental Illness								
#	COMPONENTS	Distribution		Mental Health Promotion (10)	Community Client Services (20)			
		0.00% Mode 15	90.00% Mode 45					10.00%
1	EXPENSES							
2	SALARIES	\$ -	\$ 181,800	\$ 20,200				\$ 202,000
3	BENEFITS	\$ -	\$ 54,540	\$ 6,060				\$ 60,600
4	(2+3 must equal total staffing costs)	\$ -	\$ 236,340	\$ 26,260				\$ 262,600
5	OPERATING EXPENSES	\$ -	\$ 91,260	\$ 10,140				\$ 101,400
6	TOTAL EXPENSES (2+3+5)	\$ -	\$ 327,600	\$ 36,400				\$ 364,000
7	AGENCY REVENUES							
8	PATIENT FEES							\$ -
9	PATIENT INSURANCE							\$ -
10	GRANTS/OTHER							\$ -
11	TOTAL AGENCY REVENUES (8+9+10)	\$ -	\$ -	\$ -				\$ -
12	CONTRACT AMOUNT (6-11)	\$ -	\$ 327,600	\$ 36,400				\$ 364,000
13	FUNDING							
14	MHSA	\$ -	\$ 327,600	\$ 36,400				\$ 364,000
15	TOTAL FUNDING	\$ -	\$ 327,600	\$ 36,400				\$ 364,000
16	UNDUPLICATED PARTICIPANTS		10,423	1,152				
17	TOTAL UNDUPLICATED PARTICIPANTS	0	10,423	1,152				11,575
18	COST PER UNDUPLICATED PARTICIPANT	\$ -	\$ 31.43	\$ 31.60				\$ 31.45
19	SERVICES							
20	TOTAL SERVICES	0	10,423	1,152				11,575
21	COST PER TOTAL SERVICES	\$ -	\$ 31.43	\$ 31.60				\$ 31.45

APPROVED:


Vernon Motschman (Apr 28, 2025 13:23 PDT)

Apr 28, 2025 
Christopher M. Lukachie (Apr 28, 2025 13:47 PDT)

Apr 28, 2025 
Jeanine Wymer (Apr 28, 2025 13:52 PDT)

Apr 28, 2025

PROVIDER AUTHORIZED SIGNATURE

DATE

DBH FISCAL SERVICES

DATE

DBH PROGRAM MANAGER

DATE

Vernon Motschman

Christopher M. Lukachie

Jeanine Wymer

PROVIDER AUTHORIZED SIGNER (PRINT NAME)

DBH FISCAL SERVICES (PRINT NAME)

DBH PROGRAM MANAGER (PRINT NAME)

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

FY 2025 - 2026

Prepared by: Vernon Motschman
Title: Program Coordinator

Riverside-San Bernardino County Indian
Contractor Name: Health, Inc.
Region Central/Desert/Mount./West Valley
Contract #/RFP # 21-114
Address: 11980 Mt.Vernon Avenue
Grand Terrace, Ca. 92313
Date Form Completed: _____
Updated April 2025

Operating Expenses - Please list all operating costs charged to this program, including administrative support costs and management fees along with a detail explanation of the categories below.

July 1, 2025 to June 30, 2026

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1 Office Supplies	\$3,000	0%	\$0	100%	\$3,000
2 Education Supplies	\$7,000	0%	\$0	100%	\$7,000
3 Promotional Supplies	\$13,809	0%	\$0	100%	\$13,809
4 Transportation	\$10,000	0%	\$0	100%	\$10,000
5 Staff Training	\$4,000	0%	\$0	100%	\$4,000
6 Duplication/Software	\$3,000	0%	\$0	100%	\$3,000
7 Peer Support Stipends	\$25,000	0%	\$0	100%	\$25,000
8 Consultants	\$2,500	0%	\$0	100%	\$2,500
9 Indirect Cost	\$33,091	0%	\$0	100%	\$33,091
10		0%	\$0	100%	\$0
11		0%	\$0	100%	\$0
12		0%	\$0	100%	\$0
SUBTOTAL B:	\$101,400		\$0		\$101,400
GROSS TOTAL STAFFING AND OPERATING COSTS					\$364,000

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE
FY 2025 - 2026**

PREVENTION AND EARLY INTERVENTION

Riverside-San Bernardino County
 Contractor Name: Indian Health, Inc.
 Region Central/Desert/Mount./West Valley
 Contract #/RFP # 21-114
 Address: 11980 Mt.Vernon Avenue
Grand Terrace, Ca. 92313
 Date Form Completed: _____
 Updated April 2025

Prepared by: Vernon Motschman
 Title: Program Coordinator

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures (rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

July 1, 2025 to June 30, 2026

ITEM	Justification of Cost
1 Office Supplies	Purchase of office materials, ink, planners, sticky pads, etc. is \$3000 for 4 regions per year.
2 Education Supplies	Mental Health & Substance Abuse materials to meet needs of LGBTQ, African American, Native American populations in the 4 regions is \$7000 per year.
3 Promotional Supplies	Supplies to promote program pens, cups, shirts, etc for service 4 regions is \$13,809 per year.
4 Transportation	GSA lease vehicles and gas for 12 months to provide service in 4 regions is \$10,000 per year.
5 Staff Training	Staff and peer support training to assist improving meeting the needs of underserved populations in 4 regions is \$4000 per year.
6 Duplication/Software	Cost for software, computer, printer, and/or phone for program to meet the needs of 4 regions is \$3000 per year.
7 Peer Support Stipends	2-4 peers support staff for LGBTQ, African American, Native American to promote program in the 4 regions is \$25,000 per fiscal year.
8 Consultants	Cosultants for promote wellness events to meet program needs for target population events is \$2,500 per year in 4 regions.
9 Indirect Cost	Annual indirect cost of contract amount awarded of \$364,000.00 /1.10= \$33,091.00 per year. Indirect rate is based on Administration cost to assist with meeting contract/program needs.
10	
11	
12	

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
PREVENTION AND EARLY INTERVENTION

FY 2025 - 2026

July 1, 2025 to June 30, 2026

Native American

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.

Region Central/Desert/Mount./West Valley

Contract #/ RFP # 21-114

Address: 11980 Mt.Vernon Avenue
Grand Terrace, Ca. 92313

Date Form Completed:

Updated April 2025

Year to Date Unduplicated Participant Count			
Early Intervention	Mental Health Promotion	Community Client Svcs	Program
	2,191	240	2,431

PEI County Program: Promotores de Salud / Community Health Workers Program
State Defined Program: Outreach for Increasing Recognition of Early Signs of Mental Illness

Service Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)													0
Mental Health Promotion (10)	182	182	184	184	184	182	182	183	182	182	182	182	2191
Community Client Services (20)	20	20	20	20	20	20	20	20	20	20	20	20	240
TOTAL	202	202	204	204	204	202	202	203	202	202	202	202	2431
Hours Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)	0	0	0	0	0	0	0	0	0	0	0	0	0
Mental Health Promotion (10)	131	131	131	131	131	131	131	131	131	131	131	131	1,572
Community Client Services (20)	15	15	15	15	15	15	15	15	15	15	15	15	175
TOTAL	146	1,747											
Cost Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Mental Health Promotion (10)	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 5,733	\$ 68,796
Community Client Services (20)	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 637	\$ 7,644
TOTAL	\$ 6,370	\$ 76,440											

**SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
PREVENTION AND EARLY INTERVENTION
FY 2025 - 2026**

July 1, 2025 to June 30, 2026

African American

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.

Region: Central/Desert/Mount./West Valley

Contract # / RFP #: 21-114

Address: 11980 Mt.Vernon Avenue
Grand Terrace, Ca. 92313

Date Form Completed:

Updated April 2025

Year to Date Unduplicated Participant Count			
Early Intervention	Mental Health Promotion	Community Client Svcs	Program
	5,419	600	6,019

**PEI County Program: Promotores de Salud / Community Health Workers Program
State Defined Program: Outreach for Increasing Recognition of Early Signs of Mental Illness**

Service Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)													0
Mental Health Promotion (10)	450	450	450	450	450	450	453	453	453	453	453	454	5419
Community Client Services (20)	50	50	50	50	50	50	50	50	50	50	50	50	600
TOTAL	500	500	500	500	500	500	503	503	503	503	503	504	6019

Hours Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)	0	0	0	0	0	0	0	0	0	0	0	0	0
Mental Health Promotion (10)	324	324	324	324	324	324	324	324	324	324	324	324	3,894
Community Client Services (20)	36	36	36	36	36	36	36	36	36	36	36	36	433
TOTAL	361	361	361	361	361	361	361	361	361	361	361	361	4,326

Cost Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Mental Health Promotion (10)	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 14,196	\$ 170,352
Community Client Services (20)	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 1,577	\$ 18,928
TOTAL	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 15,773	\$ 189,280

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
PREVENTION AND EARLY INTERVENTION

FY 2025 - 2026

July 1, 2025 to June 30, 2026

LGBTQ

Contractor Name: Riverside-San Bernardino County Indian Health, Inc.
Region: Central/Desert/Mount./West Valley
Contract # RFP # 21-114
Address: 11980 Mt.Vernon Avenue
Grand Terrace, Ca. 92313

Date Form Completed:
Updated: April 2025

Year to Date Unduplicated Participant Count			
Early Intervention	Mental Health Promotion	Community Client Svcs	Program
	2,813	312	3,125

PEI County Program: Promotores de Salud / Community Health Workers Program
State Defined Program: Outreach for Increasing Recognition of Early Signs of Mental Illness

Service Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)													0
Mental Health Promotion (10)	234	234	234	234	234	234	235	235	235	235	235	234	2813
Community Client Services (20)	26	26	26	26	26	26	26	26	26	26	26	26	312
TOTAL	260	260	260	260	260	260	261	261	261	261	261	260	3125
Hours Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)	0	0	0	0	0	0	0	0	0	0	0	0	0
Mental Health Promotion (10)	168	168	168	168	168	168	168	168	168	168	168	168	2,022
Community Client Services (20)	19	19	19	19	19	19	19	19	19	19	19	19	225
TOTAL	187	187	187	187	187	187	187	187	187	187	187	187	2,246
Cost Projections for:	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	TOTAL
Early Intervention Services (01-57)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Mental Health Promotion (10)	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 7,371	\$ 88,452
Community Client Services (20)	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 819	\$ 9,828
TOTAL	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 8,190	\$ 98,280



Levine Act – Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439)

The following is a list of items that are not covered by the Levine Act. A Campaign Contribution Disclosure Form will not be required for the following:

- Contracts that are competitively bid and awarded as required by law or County policy
- Contracts with labor unions regarding employee salaries and benefits
- Personal employment contracts
- Contracts under \$50,000
- Contracts where no party receives financial compensation
- Contracts between two or more public agencies
- The review or renewal of development agreements unless there is a material modification or amendment to the agreement
- The review or renewal of competitively bid contracts unless there is a material modification or amendment to the agreement that is worth more than 10% of the value of the contract or \$50,000, whichever is less
- Any modification or amendment to a matter listed above, except for competitively bid contracts.

DEFINITIONS

Actively supporting or opposing 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-subsidiary 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: Riverside-San Bernardino County Indian Health, 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: Bill Thomsen

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):

Federally Funded By Indian Health Services (IHS)

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

Company Name	Relationship
Not Applicable	

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
Not Applicable		

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):
Not Applicable		

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
Not Applicable	

9. Was a campaign contribution, of more than \$500, 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 \$500 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.