

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



Contract Number
21-990 A-2

SAP Number
4400018182

Children and Family Services

Department Contract Representative Telephone Number Clinton Blankenship (909) 386-8304

Contractor Contractor Representative Telephone Number Contract Term Pacific Clinics Kim M. Wells (909) 266-2700 January 1, 2022 through December 31, 2026

Original Contract Amount Amendment Amount Total Contract Amount Cost Center Grant Number (if applicable) \$44,514,800 (\$11,000,000) \$33,514,800 501703100

IT IS HEREBY AGREED AS FOLLOWS:

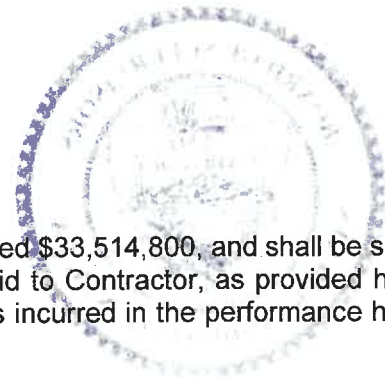
AMENDMENT NO. 2

It is hereby agreed to amend Contract No. 21-990, as follows:

SECTION V. FISCAL PROVISIONS

Amend Paragraph A to read as follows:

- A. The maximum amount payment under this Contract shall not exceed \$33,514,800, and shall be subject to availability of funds to the County. The consideration to be paid to Contractor, as provided herein, shall be in full payment for all Contractor's services and expenses incurred in the performance hereof, including travel and per diem.



All other terms and conditions of Contract No. 21-990 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 Amendment. 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.

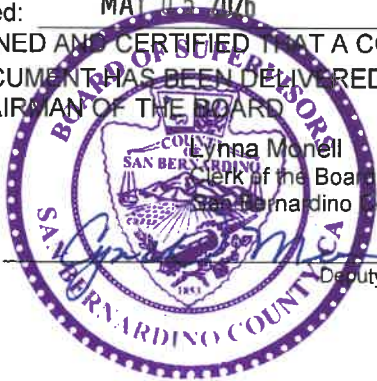
SAN BERNARDINO COUNTY

▶ *Dawn Rowe*

Dawn Rowe, Chair, Board of Supervisors

Dated: MAY 05 2026

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 *[Signature]*
Deputy

Pacific Clinics

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

Signed by:
By ▶ *[Signature]*

(Authorized signature - sign in blue ink)

Name Kim M. Wells

(Print or type name of person signing contract)

Title Chief Legal Officer

(Print or Type)

Dated: 4/21/2026

Address Street Address

City, State Zip Code

FOR COUNTY USE ONLY

Approved as to Legal Form
Signed by:
▶ *Daniella Hernandez*
Daniella V. Hernandez, County Counsel

Date 4/21/2026

Reviewed for Contract Compliance
Signed by:
▶ *Lisa Rivas-Ordaz*
Lisa Rivas-Ordaz, HS Contracts Manager

Date 4/22/2026

Reviewed/Approved by Department
Signed by:
▶ *Jeaney Glasgow*
Jeaney Glasgow, Director

Date 4/22/2026