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

SAN BERNARDINO COUNTY

Contract Number

SAP Number

Arrowhead Regional Medical Center

Department Contract Representative	William L. Gilbert
Telephone Number	(909) 580-6150
Contractor	The Center for Comprehensive Care & Diagnosis of Inherited Blood Disorders DBA The Center for Inherited Blood Disorders
Contractor Representative	Diane J. Nugent, MD
Telephone Number	(949) 338-9630
Contract Term	Effective on the latter of (1) July 1, 2022 or (2) date on which ARMC is notified that the State has allocated funds for the project, through June 30, 2025
Original Contract Amount	
Amendment Amount	
Total Contract Amount	
Cost Center	9110004100

Briefly describe the general nature of the contract:

This agreement will establish a sickle cell disease center at Arrowhead Regional Medical Center.

FOR COUNTY USE ONLY

Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
►	►	►
Charles Phan, Deputy County Counsel		William L. Gilbert, Director
Date	Date	Date