



Contract Number
24-992 A-1

SAP Number

Department of Aging and Adult Services – Public Guardian

Department Contract Representative	Jammie Maalouf, Contract Analyst
Telephone Number	(909) 386-8395
Contractor	City of San Bernardino
Contractor Representative	Trudy Panowicz
Telephone Number	(909) 384-5434
Contract Term	October 22, 2024 through September 30, 2026
Original Contract Amount	\$99,900
Amendment Amount	\$90,000
Total Contract Amount	\$189,900
Cost Center	5292501036
Grant Number (if applicable)	800292

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

It is hereby agreed to amend Contract No. 24-992, as follows:

SECTION D. TERM OF CONTRACT

Amend Section D. Term of Contract to read as follows:

1. This Contract is effective as of October 22, 2024, and is extended from the previous expiration date of September 30, 2025 to expire on September 30, 2026 but may be terminated earlier in accordance with provisions of this Contract.

SECTION F. FISCAL PROVISIONS

Amend Section F. Fiscal Provisions to read as follows:

1. The maximum amount of reimbursement under this Contract shall not exceed \$189,900 and shall be subject to availability of other 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 Contracts No. 24-992 remain in full force and effect.

This 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 Contract. The parties shall be entitled to sign and transmit an electronic signature of this Contract (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 Contract 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

City of San Bernardino

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

By ► _____
(Authorized signature - sign in blue ink)

Name _____ Eric Levitt
(Print or type name of person signing contract)

Title _____ City Manager
(Print or Type)

Dated: _____

Address _____ 290 N. D Street

San Bernardino, CA 92401

FOR COUNTY USE ONLY

Approved as to Legal Form

► _____
Jacqueline Carey-Wilson, County Counsel

Date _____

Reviewed for Contract Compliance

► _____
Patty Steven, Contracts Manager

Date _____

Reviewed/Approved by Department

► _____
Sharon Nevins, Director

Date _____