



Contract Number

20-304 A-1

SAP Number

4400014275

Transitional Assistance Department

Department Contract Representative	John Greswit, Contract Analyst
Telephone Number	(909) 388-0255
Contractor	Chaturvedi Enterprises, Inc. dba AGI Technology Institute
Contractor Representative	Gopal Chaturvedi, Owner
Telephone Number	(909) 466-5617
Contract Term	07/01/20 through 06/30/22
Original Contract Amount	NTE \$2,500,000
Amendment Amount	NTE \$2,500,000
Total Contract Amount	NTE \$5,000,000
Cost Center	5017601000

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1

It is hereby agreed to amend Contract No. 20-304, effective July 1, 2021, as follows:

SECTION V. FISCAL PROVISIONS, amend Paragraph A to read as follows:

- A. The aggregate amount of payment under this Contract is a combined total for all CalWORKs Vocational Education and Training Services. Contractors identified in the corresponding Board Agenda item and together shall not exceed \$5,000,000, of which \$5,000,000 may be federally funded, 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.

SECTION VIII. TERM is amended to read as follows:

This Contract is effective as of July 1, 2020, and is extended from its original expiration date of June 30, 2021, to expire on June 30, 2022, but may be terminated earlier in accordance with provisions of Section IX of the Contract.

All other terms and conditions of Contract No. 20-304 remain in full force and effect.

COUNTY OF SAN BERNARDINO

►

Curt Hagman, Chairman, 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
of the County of San Bernardino

By _____
Deputy

AGI TECHNOLOGY INSTITUTE

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

By ►

(Authorized signature - sign in blue ink)

Name Gopal Chaturvedi
(Print or type name of person signing contract)

Title Owner
(Print or Type)

Dated: _____

Address 9087 Arrow Route, Suite 100

Rancho Cucamonga, CA 91730

FOR COUNTY USE ONLY

Approved as to Legal Form

►

Adam Ebright, Deputy County Counsel

Date _____

Reviewed for Contract Compliance

►

Jennifer Mulhall-Daudel, HS Contracts

Date _____

Reviewed/Approved by Department

►

Gilbert Ramos, Director

Date _____