



Contract Number

20-503 A-4

SAP Number

4400014304

Transitional Assistance Department

| | |
|--|--|
| Department Contract Representative Telephone Number | <u>Diane Ettari, Contract Analyst</u> <u>(909) 386-8313</u> |
| Contractor | <u>Housing Authority of the County of San Bernardino</u> |
| Contractor Representative Telephone Number | <u>Maria Razo, Executive Director</u> <u>(909) 890-0644</u> |
| Contract Term | <u>07/01/2020 through 06/30/2025</u> |
| Original Contract Amount | <u>46,194,219</u> |
| Amendment Amount | <u>1,619,261</u> |
| Total Contract Amount | <u>47,813,480</u> |
| Cost Center | <u>5017601000 and 5017611000</u> |
| Grant Number (if applicable) | <u></u> |

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 4

It is hereby agreed to amend Contract No. 20-503 as follows:

SECTION V. FISCAL PROVISIONS

Paragraph A. is amended to read as follows:

- A. The maximum amount of payment under this Contract shall not exceed \$47,813,480, which is 100% federally and state funded, and payment 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.

Paragraph G. is removed and replaced with Reserved.

ATTACHMENT C – PROGRAM BUDGET

Remove and replace Attachment C, CalWORKs Housing Support Program Budget effective July 1, 2023 through June 30, 2025, attached hereto and incorporated herein by this reference.

All other terms and conditions of Contract No. 20-503 remain in full force and effect.

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

HOUSING AUTHORITY OF THE COUNTY OF
SAN BERNARDINO

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

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

Name Maria Razo
(Print or type name of person signing contract)

Title Executive Director
(Print or Type)

Dated: _____

Address 715 East Brier Drive

_____ San Bernardino, CA 92408

FOR COUNTY USE ONLY

Approved as to Legal Form
►

Adam Ebright, Deputy County Counsel
Date _____

Reviewed for Contract Compliance
►

Patty Steven, Contracts Manager
Date _____

Reviewed/Approved by Department
►

James LoCurto, Director
Date _____

CalWORKs Housing Support Program Budget

| | 23/24 | 24/25 |
|--|---------------------|---------------------|
| <u>I. DIRECT FINANCIAL ASSISTANCE</u> | | |
| 1. PERM HOUSING | \$3,889,899 | \$5,263,990 |
| 2. INTERIM | \$1,734,603 | \$1,670,000 |
| 2. PREVENTION | \$474,428 | \$2,047,107 |
| <u>II. CASE MANAGEMENT</u> | | |
| 1. PERSONNEL | \$1,052,334 | \$1,254,581 |
| <u>III. ADMIN/SUPPORT EXPENSES</u> | | |
| 1. PROGRAM MANAGEMENT | \$669,357 | \$506,000 |
| 2. PERSONNEL OTHER | \$775,158 | \$1,418,638 |
| 3. DATA COLLECTION/TRACKING | \$195,530 | \$450,000 |
| Total | \$8,791,309 | \$12,610,316 |
| Current Budget | \$9,891,182 | \$9,891,182 |
| Difference | -\$1,099,873 | \$2,719,134 |