

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



**Contract Number**  
21-474 A-2

**SAP Number**  
4400017305

## Department of Behavioral Health

<b>Department Contract Representative</b>	Shane Hibbard-Miller
<b>Telephone Number</b>	(909) 386-8264
<b>Contractor</b>	Victor Community Support Services, Inc.
<b>Contractor Representative</b>	Paula Quijano or Ed Hackett
<b>Telephone Number</b>	(909) 522-4656 or (530) 893-0758
<b>Contract Term</b>	July 1, 2021, through December 31, 2026
<b>Original Contract Amount</b>	\$ 9,100,000
<b>Amendment Amount</b>	\$ 1,950,000
<b>Total Contract Amount</b>	\$11,050,000
<b>Cost Center</b>	9206302200
<b>Grant Number (if applicable)</b>	N/A

### IT IS HEREBY AGREED AS FOLLOWS:

#### **AMENDMENT NO. 2:**

San Bernardino County (County) and Victor Community Support Services, Inc. (Contractor) hereby agree to amend Contract No. 21-474 as follows:

- I. ARTICLE V Funding and Budgetary Restrictions, paragraph I is hereby amended to read as follows:
  - I. The maximum financial obligation under this contract shall not exceed \$11,050,000 for the contract term.
  
- II. ARTICLE V Funding and Budgetary Restrictions, paragraph L is hereby added as follows:
  - L. Federal Contracting Provisions
    - This Agreement is federally funded and subject to the additional terms on Attachment IV

Federal Contracting Provisions.

III. ARTICLE XIV Duration and Termination, paragraph A, is hereby amended to read as follows:

A. The term of this Agreement shall be from July 1, 2021, through December 31, 2026, inclusive.

IV. ARTICLE XVII Personnel, paragraph M, is hereby amended to read as follows:

M. Levine Act Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439)

Contractor has disclosed to the County using Attachment III – Levine Act - Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439), whether it has made any campaign contributions of more than \$500 to any member of the Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, Auditor-Controller/Treasurer/Tax Collector and the District Attorney] within the earlier of: (1) the date of the submission of Contractor's proposal to the County, or (2) 12 months before the date this Contract was approved by the Board of Supervisors. Contractor acknowledges that under Government Code section 84308, Contractor is prohibited from making campaign contributions of more than \$500 to any member of the Board of Supervisors or other County elected officer for 12 months after the County's consideration of the Contract.

In the event of a proposed amendment to this Contract, the Consultant will provide the County a written statement disclosing any campaign contribution(s) of more than \$500 to any member of the Board of Supervisors or other County elected officer within the preceding 12 months of the date of the proposed amendment.

Campaign contributions include those made by any agent/person/entity on behalf of the Contractor or by a parent, subsidiary or otherwise related business entity of Contractor.

V. SCHEDULE A Planning Estimates and SCHEDULE B Program Budget for the remainder of FY 2025-26 and FY 2026-27, attached hereto, are hereby added to Contract No. 21-474.

VI. ATTACHMENT III Campaign Contributions Disclosure (SB1439) is hereby replaced in its entirety with Levine Act-Campaign Contribution Disclosure (formerly referred to as SB 1439) as attached.

VII. ATTACHMENT IV Federal Contracting Provisions is hereby added as attached.

VIII. All other terms, conditions and covenants in Contract No. 21-474 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.

[SIGNATURE PAGE FOLLOWS]

**IN WITNESS WHEREOF**, San Bernardino County and the Contractor have each caused this Amendment to be subscribed by its respective duly authorized officers, on its behalf.

SAN BERNARDINO COUNTY

► *Dawn Rowe*  
Dawn Rowe, Chair, Board of Supervisors

**MAR 10 2026**

Dated: \_\_\_\_\_  
SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

By: *Lynna Monell*  
Lynna Monell  
Clerk of the Board of Supervisors  
San Bernardino County

By: *[Signature]*  
Deputy



Victor Community Support Services, Inc.

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

By:

► *Edward Hackett*  
Signed by: \_\_\_\_\_  
(Authorized signature - sign in blue ink)  
Name: Edward Hackett

(Print or type name of person signing contract)

Title: Chief Financial Officer

(Print or Type)

Dated: 3/2/2026

Address: 1360 E. Lassen Ave.  
Chico, CA 95973

**FOR COUNTY USE ONLY**

Approved as to Legal Form  
Signed by: *Charles Phan*  
Charles Phan, Supervising Deputy County Counsel  
Date 3/2/2026

Reviewed for Contract Compliance  
Signed by: *Michael Shin*  
Michael Shin, Administrative Manager  
Date 3/2/2026

Reviewed/Approved by Department  
Signed by: *Joshua Dugas*  
Joshua Dugas, Acting Director  
Date 3/2/2026

SCHEDULES A & B

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
Therapeutic Behavioral Services (TBS)

FY 2025-2026  
January 1, 2026 to March 31, 2026

Contractor Name:	Victor Community Support Services
RU #	Central/East Valley Region
Contract # / RFP #	20-48
Address:	1360 E Lassen Ave
City, State, Zip Code:	Chico CA 95973
Date Form Completed:	2/24/2026
Prepared by:	Matt Jafari
Title:	Financial Analysis Manager

LINE #	MODE OF SERVICE	Case Management & ICC (01-09)	Mental Health Services (10-50)	Intensive Home Based Services (67)	TBS (68)	Crisis Intervention (70)	TOTAL
1	Distribution %	3.00%	0.00%	8.00%	91.00%	0.01%	100.00%
<b>EXPENSES</b>							
2	SALARIES	0	0	0	0	0	0
3	BENEFITS	0	0	0	0	0	0
4	(2+3 must equal total staffing costs)	0	0	0	0	0	0
5	OPERATING EXPENSES	19,500	325	32,500	597,610	65	650,000
6	TOTAL EXPENSES (2+3+4)	19,500	325	32,500	597,610	65	650,000
<b>AGENCY REVENUES</b>							
7	PATIENT FEES						0
8	PATIENT INSURANCE						0
9	MEDI-CARE						0
10	GRANTS/OTHER						0
11	TOTAL AGENCY REVENUES (6+7+8+9)	0	0	0	0	0	0
12	CONTRACT AMOUNT (5-10)	19,500	325	32,500	597,610	65	650,000
<b>FUNDING</b>							
13	MEDI-CAL (FFP)	9,750	163	16,250	298,805	33	325,000
14	2011 Realignment	9,750	163	16,250	298,805	33	325,000
15	FUNDING TOTAL	19,500	325	32,500	597,610	65	650,000
16	NET COUNTY FUNDS (Local Cost) MUST = ZERO	0	0	0	0	0	0
17	STATE FUNDING (Including Realignment)	9,750	163	16,250	298,805	33	325,000
18	FEDERAL FUNDING	9,750	163	16,250	298,805	33	325,000
19	TOTAL FUNDING	19,500	325	32,500	597,610	65	650,000
20	TARGET COST PER UNIT OF SERVICE	\$4.41	\$4.41	\$4.41	\$4.41	\$4.41	\$4.41
21	UNITS OF SERVICE	4,419	74	7,365	135,421	15	147,293

APPROVED: Angie Wiechert Thelma Rodriguez Jill Smith **02/26/2026** **02/26/2026** **02/26/2026**

PROVIDER AUTHORIZED SIGNATURE: Angie Wiechert DBH PSAS Thelma Rodriguez DBH PROGRAM MANAGER Jill Smith DATE: \_\_\_\_\_ DATE: \_\_\_\_\_ DATE: \_\_\_\_\_

PROVIDER AUTHORIZED SIGNER (PRINT NAME): \_\_\_\_\_ DBH PSAS (PRINT NAME) \_\_\_\_\_ DBH PROGRAM MANAGER (PRINT NAME) \_\_\_\_\_





SCHEDULES A & B

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B

FY 2025-2026  
January 1, 2026 to March 31, 2026

Contractor Name: Victor Community Support Services  
RU # Central/East Valley Region  
Contract # / RFP # 20-48

Prepared by: Matt Jafari  
Title: Financial Analysis Manager

Address: 1360 E Laessen Ave  
City, State, Zip Code: Chico CA 95973  
Date Form Completed: 46077

Operating Expenses - Please list all operating costs charged to this program, including administrative support costs and management fees along with a detail explanation of the categories below.

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO PROGRAM	TOTAL COST TO PROGRAM
1 External Database Fee (.26% of Contract)		100%	\$0		\$0
2 Total Contract Amount	\$650,000	0%	\$0	100%	\$650,000
3		100%	\$0		\$0
4		100%	\$0		\$0
<b>SUBTOTAL B:</b>	\$650,000		\$0		\$650,000
<b>GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:</b>					
					\$650,000

SCHEDULES A & B

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B  
BUDGET NARRATIVE

FY 2025-2026  
January 1, 2026 to March 31, 2026

Victor Community Support  
Contractor Name: Services  
RU # Central/East Valley Region  
Contract # / RFP # 20-48

Prepared by: Matt Jafari  
Title: Financial Analysis Manager

Address: 1360 E Lassen Ave  
City, State, Zip Code: Chico CA 95973  
Date Form Completed: 46077

Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures ( rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.

ITEM	Justification of Cost
1 External Database Fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment services and reporting of outcomes.
2 Total Contract Amount	Total Contract Amount
3	
4	

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B  
FY 2025-2026  
January 1, 2025 to March 31, 2026

Mode 15					
C/M&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)
Weighted Rate	Weighted Rate	Weighted Rate	Weighted Rate	Weighted Rate	Weighted Rate
\$ 4.41	\$ 4.41	\$ 4.41	\$ 4.41	\$ -	\$ 4.41

40.02%  
Rate Per Minute

Contractor Name: Victor Community Support Services  
RU #: Central/East Valley Region  
Contract # / RFP #: 20-48  
Address: 1960 E Lassen Ave  
City, State, Zip Code: Chico CA 95973  
Date Form Completed: 46077

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Projected Revenue Generated by Service Type					Clients Served						
			C/M&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)	Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census			
Jul-25														
Aug-25														
Sep-25														
Oct-25														
Nov-25														
Dec-25														
Jan-26	49,098	3.63	6,500	108	10,833	199,203	199,203	-	22	10	8	35		
Feb-26	49,098	3.63	6,500	108	10,833	199,203	199,203	-	22	10	8	35		
Mar-26	49,098	3.63	6,500	108	10,833	199,203	199,203	-	22	10	8	35		
Apr-26														
May-26														
Jun-26														
<b>TOTAL</b>	147,293		19,500	325	32,500	597,610	597,610	0	65	30	24	65	65	65
<b>Total Revenue</b>										<b>859,000.00</b>		<b>Unduplicated Clients Served</b>		<b>\$10,000</b>
										<b>Estimated Cost Per Client:</b>				

SCHEDULES A & B

<b>Mode 15</b>							
	CM&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)	TOTAL
Total Minutes of Services	4419	74	7365	135421	0	14.73	147283
Total Monthly Minutes of Services (Average)	368	6	614	11285	0	1.23	12274
Dosage (minutes) per client per month	10	0	16	301	0	0.03	327
Dosage (hours) per client per month	0.16	0.00	0.27	5.02	0.00	0.00	5.46

Total Hours Per Unduplicated Client for Duration of the Program: 19.09

Avg Monthly Census	38
Expected Length of Program (months)	3.50

SCHEDULE A - Planning Estimates

CalAIM/Fee for Service

Contractor Name:	Victor Community Support Services
RU #	Central/East Valley Region
Contract # / RFP #	20-48
Address:	1360 E Lassen Ave
City, State, Zip Code:	Chico CA 95973
Date Form Completed:	2/24/2026
Prepared by:	Matt Jafari
Title:	Financial Analysis Manager

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
Therapeutic Behavioral Services (TBS)

FY 2025-2026  
April 1 to June 30, 2026

LINE	MODE OF SERVICE	Share %	Case Management & I.C.C. (01-08)	Mental Health Services (10-50)	Intensive Home Based Services (57)	TBS (68)	Crisis Intervention (70)	TOTAL
#	<b>SERVICE FUNCTION</b>							
1	Distribution %	100.00%	3.00%	0.00%	6.00%	91.04%	0.01%	100.00%
<b>EXPENSES</b>								
2	SALARIES		0	0	0	0	0	0
3	BENEFITS		0	0	0	0	0	0
(2+3 must equal total staffing costs)								
4	OPERATING EXPENSES		19,500	325	32,500	597,610	65	650,000
5	TOTAL EXPENSES (2+3+4)		19,500	325	32,500	597,610	65	650,000
<b>AGENCY REVENUES</b>								
6	PATIENT FEES							0
7	PATIENT INSURANCE							0
8	MEDI-CARE							0
9	GRANTS/OTHER							0
10	TOTAL AGENCY REVENUES (6+7+8+9)		0	0	0	0	0	0
11	CONTRACT AMOUNT (5-10)		19,500	325	32,500	597,610	65	650,000
<b>FUNDING</b>								
12	MEDI-CAL (FFP)	50.00%	9,750	163	16,250	298,805	33	325,000
13	2011 Realignment	50.00%	9,750	163	16,250	298,805	33	325,000
FUNDING TOTAL								
14	NET COUNTY FUNDS (Local Cost) MUST = ZERO		19,500	325	32,500	597,610	65	650,000
15	STATE FUNDING (including Realignment)		0	0	0	0	0	0
16	FEDERAL FUNDING		9,750	163	16,250	298,805	33	325,000
TOTAL FUNDING								
17	TARGET COST PER UNIT OF SERVICE		19,500	325	32,500	597,610	65	650,000
18	UNITS OF SERVICE		\$4.41	\$4.41	\$4.41	\$4.41	\$4.41	\$4.41
						135,421	15	147,293

APPROVED: Angie Wiechert Supervisor of Behavioral Health Services DATE: 02/26/2026

PROVIDER AUTHORIZED SIGNATURE: Thelma Rodriguez DATE: 02/26/2026

PROVIDER AUTHORIZED SIGNER (PRINT NAME): Thelma Rodriguez DBH PSAS (PRINT NAME): Thelma Rodriguez DATE: 02/26/2026

DBH PROGRAM MANAGER (PRINT NAME): Jill Smith DATE: 02/26/2026





SCHEDULES A & B

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B

FY 2025-2026  
April 1 to June 30, 2026

Victor Community Support  
Contractor Name: Sarvicaa  
RU # Central/East Valley Region  
Contract # / RFP # 20-48  
Address: 1360 E Lassen Ave  
City, State, Zip Code: Chico CA 95973  
Date Form Completed: 48077

Prepared by: Matt Jafari  
Title: Financial Analysis Manager

Operating Expenses - Please list all operating costs charged to this program, including administrative support costs and management fees along with a detail explanation of the categories below.

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT CHARGED TO PROGRAM	TOTAL COST TO PROGRAM
1 External Database Fee (.26% of Contract)		100%	\$0		\$0
2 Total Contract Amount	\$650,000	0%	\$0	100%	\$650,000
3		100%	\$0		\$0
4		100%	\$0		\$0
<b>SUBTOTAL B:</b>	\$650,000		\$0		\$650,000
<b>GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:</b>					
					\$650,000

SCHEDULES A & B

SAN BERNARDINO COUNTY  
 DEPARTMENT OF BEHAVIORAL HEALTH  
 SCHEDULE B  
 BUDGET NARRATIVE

FY 2025-2026  
 April 1 to June 30, 2026

Victor Community Support  
 Contractor Name: Services  
 RU # Central/East Valley Region  
 Contract # / RFP # 20-48  
 Address: 1360 E Lassen Ave  
 City, State, Zip Code: Chico CA 95973  
 Date Form Completed: 4/6/27

Prepared by: Matt Jafari  
 Title: Financial Analysis Manager

**Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures ( rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.**

ITEM	Justification of Cost
1 External Database Fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment services and reporting of outcomes.
2 Total Contract Amount	Total Contract Amount
3	
4	

SCHEDULES A & B

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B  
FY 2025-2026  
April 1 to June 30, 2026

Mode 1s					
CM&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)
Weighted Rate	4.41	4.41	4.41	4.41	4.41
\$	4.41	4.41	4.41	4.41	4.41

Contractor Name: Victor Community Support Services  
RU # Central/East Valley Region  
Contract # / RFP # 20-48  
Address: 1360 E Lassen Ave  
City, State, Zip Code Chico CA 95973  
Date Form Completed: 4/6/27

40.02%  
Rate Per Minute

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Projected Revenue Generated by Service Type					Clients Served							
			CM&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)	Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census				
Jul-25															
Aug-25															
Sep-25															
Oct-25															
Nov-25															
Dec-25															
Jan-26															
Feb-26															
Mar-26															
Apr-26	49,098	3.63	6,500	108	10,833	189,203	189,203	189,203	189,203	189,203	10	8	35	37	
May-26	49,098	3.63	6,500	108	10,833	189,203	189,203	189,203	189,203	189,203	10	8	35	39	
Jun-26	49,098	3.63	6,500	108	10,833	189,203	189,203	189,203	189,203	189,203	10	8	35	41	
TOTAL	147,293		19,500	325	32,500	587,610	587,610	587,610	587,610	587,610	30	24	35	65	
Total Revenue										650,000.00	Unduplicated Clients Served		65	Estimated Cost Per Client:	\$10,000

SCHEDULES A & B

<b>Mode 15</b>							
	CM&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)	TOTAL
<b>Total Minutes of Services</b>	4419	74	7365	135421	0	14.73	147293
<b>Total Monthly Minutes of Services (Average)</b>	368	6	614	11285	0	1.23	12274
<b>Dosage (minutes) per client per month</b>	10	0	17	313	0	0.03	341
<b>Dosage (hours) per client per month</b>	0.17	0.00	0.28	5.22	0.00	0.00	5.68

**Total Hours Per Unduplicated Client for Duration of the Program: 19.89**

Avg Monthly Census	36
Expected Length of Program (months)	3.50

SCHEDULES A & B

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY

Cal/Am/Fee for Service

DEPARTMENT OF BEHAVIORAL HEALTH  
Therapeutic Behavioral Services (TBS)

Contractor Name: Victor Community Support Services  
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 Prepared by: Matt Jafari  
 Title: Financial Analysis Manager

FY 2026-2027

July 1, 2026 to December 31, 2026

LINE	MODE OF SERVICE	Case Management & ICC (01-09)	Mental Health Services (10-50)	Intensive Home Based Services (67)	TBS (66)	Crisis Intervention (70)	TOTAL
#	Distribution %	3.00%	0.00%	6.00%	91.94%	0.01%	100.00%
1	EXPENSES	100.00%					
2	SALARIES	0	0	0	0	0	0
3	BENEFITS	0	0	0	0	0	0
	(2+3 must equal total staffing costs)						
4	OPERATING EXPENSES	39,000	650	65,000	1,195,220	130	1,300,000
5	TOTAL EXPENSES (2+3+4)	39,000	650	65,000	1,195,220	130	1,300,000
6	AGENCY REVENUES						
7	PATIENT FEES						
8	PATIENT INSURANCE						
9	MEDI-CARE						
10	GRANTS/OTHER						
11	TOTAL AGENCY REVENUES (6+7+8+9)	0	0	0	0	0	0
11	CONTRACT AMOUNT (5-10)	39,000	650	65,000	1,195,220	130	1,300,000
	FUNDING						
12	MEDI-CAL (FFP)	19,500	325	32,500	597,610	65	650,000
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	FUNDING TOTAL	39,000	650	65,000	1,195,220	130	1,300,000
14	NET COUNTY FUNDS (Local Cost) MUST = ZERO	0	0	0	0	0	0
15	STATE FUNDING (including Realignment)	19,500	325	32,500	597,610	65	650,000
16	FEDERAL FUNDING	19,500	325	32,500	597,610	65	650,000
	TOTAL FUNDING	39,000	650	65,000	1,195,220	130	1,300,000
17	TARGET COST PER UNIT OF SERVICE	\$4.41	\$4.41	\$4.41	\$4.41	\$4.41	\$4.41
18	UNITS OF SERVICE	8,838	147	14,729	270,842	29	294,585

APPROVED: *Angie Wiechert*  
 PROVIDER AUTHORIZED SIGNATURE: *Thelma Rodriguez*  
 PROVIDER AUTHORIZED SIGNER (PRINT NAME): Thelma Rodriguez

DATE: 02/26/2026  
 DATE: 02/26/2026  
 DATE: 02/26/2026  
 DBH PSAS: Jill Smith  
 DBH PROGRAM MANAGER: Jill Smith  
 DATE: 02/26/2026  
 DBH PSAS: Thelma Rodriguez  
 DBH PROGRAM MANAGER (PRINT NAME): Thelma Rodriguez





SCHEDULES A & B

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B

FY 2026-2027  
July 1, 2026 to December 31, 2026

Victor Community Support  
Contractor Name: Sarvias  
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1 External Database Fee (.26% of Contract)		100%	\$0		\$0
2 Total Contract Amount	\$1,300,000	0%	\$0	100%	\$1,300,000
3		100%	\$0		\$0
4		100%	\$0		\$0
<b>SUBTOTAL B:</b>	\$1,300,000		\$0		\$1,300,000
<b>GROSS COSTS TOTAL STAFFING AND OPERATING EXPENSES:</b>					
					\$1,300,000

SCHEDULES A & B

SAN BERNARDINO COUNTY  
 DEPARTMENT OF BEHAVIORAL HEALTH  
 SCHEDULE B  
 BUDGET NARRATIVE  
 FY 2026-2027

July 1, 2026 to December 31, 2026

Victor Community Support  
 Contractor Name: Services  
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**Budget Narrative for Operating Expenses. Explain each expense by line item. Provide an explanation for determination of all figures ( rate, duration, quantity, Benefits, FTE's, etc.) for example explain how overhead or indirect cost were calculated.**

ITEM	Justification of Cost
1 External Database Fee (.26% of Contract)	Participation in external database is a required aspect of program to facilitate focus of treatment services and reporting of outcomes.
2 Total Contract Amount	Total Contract Amount
3	
4	

SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B  
FY 2026-2027  
July 1, 2026 to December 31, 2026

Mode 15					
CM&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)
Weighted Rate	Weighted Rate	Weighted Rate	Weighted Rate	Weighted Rate	Weighted Rate
\$ 4.41	\$ 4.41	\$ 4.41	\$ 4.41	\$ -	\$ 4.41

40.02%  
Rate Per Minute

Contractor Name: Victor Community Support Services  
RU # Central/East Valley Region  
Contract # / RFP # 20-48  
Address: 1360 E Lassen Ave  
City, State, Zip Code Chico CA 95973  
Date Form Completed 46077

MONTH	Estimated Units of Service (Minutes)	Planned Clinical FTE's	Projected Revenue Generated by Service Type					Clients Served				
			CM&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)	Admissions (Episodes Opened)	Discharges (Episodes Closed)	Monthly Census	
Jul-26	48,088	7.25	6,500	108	10,833	199,203	-	22	10	8	72	
Aug-26	48,088	7.25	6,500	108	10,833	199,203	-	22	10	8	74	
Sep-26	48,088	7.25	6,500	108	10,833	199,203	-	22	10	8	76	
Oct-26	48,088	7.25	6,500	108	10,833	199,203	-	22	10	8	78	
Nov-26	48,088	7.25	6,500	108	10,833	199,203	-	22	10	8	80	
Dec-26	48,088	7.25	6,500	108	10,833	199,203	-	22	10	8	82	
Jan-27											82	
Feb-27											82	
Mar-27											82	
Apr-27											82	
May-27											82	
Jun-27											82	
<b>TOTAL</b>	294,585		38,000	650	65,000	1,195,220	0	130	60	48	130	
<b>Total Revenue</b>										1,300,000.00	<b>Unduplicated Clients Served</b>	130
<b>Estimated Cost Per Client:</b>											<b>Estimated Cost Per Client:</b>	\$10,000

SCHEDULES A & B

Mode 15							
	CM&ICC (01-09)	MHS (10-50)	IHBS (57)	TBS (58)	MSS (60-69)	CI (70)	TOTAL
Total Minutes of Services	8838	147	14729	270842	0	29.46	294585
Total Monthly Minutes of Services (Average)	736	12	1227	22570	0	2.45	24549
Dosage (minutes) per client per month	9	0	15	284	0	0.03	309
Dosage (hours) per client per month	0.15	0.00	0.26	4.73	0.00	0.00	5.15

Total Hours Per Unduplicated Client for Duration of the Program: 18.01

Avg Monthly Census	80
Expected Length of Program (months)	3.50



## Levine Act – Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439)

The following is a list of items that are not covered by the Levine Act. A Campaign Contribution Disclosure Form will not be required for the following:

- Contracts that are competitively bid and awarded as required by law or County policy
- Contracts with labor unions regarding employee salaries and benefits
- Personal employment contracts
- Contracts under \$50,000
- Contracts where no party receives financial compensation
- Contracts between two or more public agencies
- The review or renewal of development agreements unless there is a material modification or amendment to the agreement
- The review or renewal of competitively bid contracts unless there is a material modification or amendment to the agreement that is worth more than 10% of the value of the contract or \$50,000, whichever is less
- Any modification or amendment to a matter listed above, except for competitively bid contracts.

### **DEFINITIONS**

**Actively supporting or opposing the matter:** (a) Communicate directly with a member of the Board of Supervisors or other County elected officer [Sheriff, Assessor-Recorder-Clerk, District Attorney, Auditor-Controller/Treasurer/Tax Collector] for the purpose of influencing the decision on the matter; or (b) testifies or makes an oral statement before the County in a proceeding on the matter for the purpose of influencing the County's decision on the matter; or (c) communicates with County employees, for the purpose of influencing the County's decision on the matter; or (d) when the person/company's agent lobbies in person, testifies in person or otherwise communicates with the Board or County employees for purposes of influencing the County's decision in a matter.

**Agent:** A third-party individual or firm who, for compensation, is representing a party or a participant in the matter submitted to the Board of Supervisors. If an agent is an employee or member of a third-party law, architectural, engineering or consulting firm, or a similar entity, both the entity and the individual are considered agents.

**Otherwise related entity:** An otherwise related entity is any for-profit organization/company which does not have a parent-subsidary relationship but meets one of the following criteria:

- (1) One business entity has a controlling ownership interest in the other business entity;
- (2) there is shared management and control between the entities; or
- (3) a controlling owner (50% or greater interest as a shareholder or as a general partner) in one entity also is a controlling owner in the other entity.

For purposes of (2), "shared management and control" can be found when the same person or substantially the same persons own and manage the two entities; there are common or commingled funds or assets; the business entities share the use of the same offices or employees, or otherwise share activities, resources or personnel on a regular basis; or there is otherwise a regular and close working relationship between the entities.

**Parent-Subsidiary Relationship:** A parent-subsidiary relationship exists when one corporation has more than 50 percent of the voting power of another corporation.

**Contractors must respond to the questions on the following pages. If a question does not apply respond N/A or Not Applicable.**

ATTACHMENT III

1. Name of Contractor: Victor Community Support Services, Inc.
2. Is the entity listed in Question No.1 a nonprofit organization under Internal Revenue Code section 501(c)(3)?  
 Yes  If yes, skip Question Nos. 3-4 and go to Question No. 5      No
3. Name of Principal (i.e., CEO/President) of entity listed in Question No. 1, if the individual actively supports the matter and has a financial interest in the decision: N/A
4. If the entity identified in Question No.1 is a corporation held by 35 or less shareholders, and not publicly traded ("closed corporation"), identify the major shareholder(s):  
N/A

5. Name of any parent, subsidiary, or otherwise related entity for the entity listed in Question No. 1 (see definitions above):

Company Name	Relationship
Victor Treatment Centers, Inc. (VCSS)	Shared Management

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
VCSS	None	

7. Name of Subcontractor(s) (including Principal and Agent(s)) that will be providing services/work under the awarded contract if the subcontractor (1) actively supports the matter and (2) has a financial interest in the decision and (3) will be possibly identified in the contract with the County or board governed special district.

Company Name	Subcontractor(s):	Principal and//or Agent(s):
VCSS	None	

8. Name of any known individuals/companies who are not listed in Questions 1-7, but who may (1) actively support or oppose the matter submitted to the Board and (2) have a financial interest in the outcome of the decision:

Company Name	Individual(s) Name
N/A	

9. Was a campaign contribution, of more than \$500, made to any member of the San Bernardino County Board of Supervisors or other County elected officer within the prior 12 months, by any of the individuals or entities listed in Question Nos. 1-8?

No  If **no**, please skip Question No. 10.

Yes  If **yes**, please continue to complete this form.

10. Name of Board of Supervisor Member or other County elected officer: \_\_\_\_\_

Name of Contributor: \_\_\_\_\_

Date(s) of Contribution(s): \_\_\_\_\_

Amount(s): \_\_\_\_\_

Please add an additional sheet(s) to identify additional Board Members or other County elected officers to whom anyone listed made campaign contributions.

By signing the Contract, Contractor certifies that the statements made herein are true and correct. Contractor understands that the individuals and entities listed in Question Nos. 1-8 are prohibited from making campaign contributions of more than \$500 to any member of the Board of Supervisors or other County elected officer while award of this Contract is being considered and for 12 months after a final decision by the County.

## ATTACHMENT IV

### FEDERAL CONTRACTING PROVISIONS

Contractor shall comply with the following additional terms:

**A. Clean Air Act and the Federal Water Pollution Control Act (42 USC §§ 7401-7671q, 33 USC §§ 1251-1387.)**

Clean Air Act

1. Contractor agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act, as amended, 42 U.S.C. § 7401 et seq.
2. Contractor agrees to report each violation to the County and understands and agrees that the County will, in turn, report each violation as required to assure notification to the federal funding source, and the appropriate Environmental Protection Agency Regional Office.
3. Contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance.

Federal Water Pollution Control Act

1. Contractor agrees to comply with all applicable standards, orders, or regulations issued pursuant to the Federal Water Pollution Control Act, as amended, 33 U.S.C. 1251 et seq.
2. Contractor agrees to report each violation to the County and understands and agrees that the County will, in turn, report each violation as required to assure notification to the federal funding source, and the appropriate Environmental Protection Agency Regional Office.
3. Contractor agrees to include these requirements in each subcontract exceeding \$150,000 financed in whole or in part with Federal assistance.

**B. Procurement of Recovered Materials (45 CFR § 75.331)**

1. Contractor shall comply with the provisions of section 6002 of the Federal Solid Waste Disposal Act, as amended by the federal Resource conservation and Recovery Act, as the same may be amended, which include (but are not necessarily limited to): procuring only items designated in guidelines of the Environmental Protection Agency at 40 CFR Part 247 (as the same may be amended) that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds \$10,000 or the value of the quantity acquired by the preceding fiscal year exceeded \$10,000; procuring solid waste management services in a manner that maximizes energy and resource recovery; and establishing an affirmative procurement program for procurement of recovered materials identified in the Environmental Protection Agency guidelines.
2. This provision does not apply if the items cannot be acquired—
  - a. Competitively within a timeframe providing compliance with the contract performance schedule.
  - b. Meeting contract performance requirements; or
  - c. At a reasonable price.
3. Information about this requirement, along with the list of EPA- designated items, is available at EPA's Comprehensive Procurement Guidelines web site, <https://www.epa.gov/smm/comprehensive-procurement-guideline-cpg-program>.

4. The Contractor also agrees to comply with all other applicable requirements of Section 6002 of the Solid Waste Disposal Act.

**C. Prohibited Telecommunications and Video Surveillance Equipment and Services (2 C.F.R. §200.216)**

Contractor certifies that it will not use contract funds to:

- (1) Procure or obtain covered telecommunications equipment or services;
- (2) Extend or renew a contract to procure or obtain covered telecommunications equipment or services; or
- (3) Enter into a contract (or extend or renew a contract) to procure or obtain covered telecommunications equipment or services.

“Covered telecommunications equipment or services” means those equipment and services defined at 2 C.F.R. §200.16(b).

**D. Domestic Preference for Procurements (2 C.F.R. § 200.322)**

Contractor should, to the greatest extent practicable and consistent with law, provide a preference for the purchase, acquisition, or use of goods, products, or materials produced in the United States (including but not limited to iron, aluminum, steel, cement, and other manufactured products). “Produced in the United States” means, for iron and steel products, that all manufacturing processes, from the initial melting stage through the application of coatings, occurred in the United States. “Manufactured products” means items and construction materials composed in whole or in part of non-ferrous metals such as aluminum; plastics and polymer-based products such as polyvinyl chloride pipe; aggregates such as concrete; glass, including optical fiber; and lumber.

**E. Byrd Anti-Lobbying Amendment (31 U.S.C. § 1352 (as amended))**

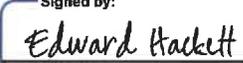
Contractor certifies that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 USC 1352. Contractor shall also disclose to the County any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

*[certification continued on next page]*

**ANTI- LOBBYING CERTIFICATION**

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
4. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
5. The Contractor, Victor Community Support Services, Inc., certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. Chap. 38, Administrative Remedies for False Claims and Statements, apply to this certification and disclosure, if any.

Signed by:  
  
 \_\_\_\_\_  
 Signature of Contractor's Authorized Official

Edward Hackett, Chief Financial Officer  
 Name and Title of Contractor's Authorized Official

3/2/2026  
 \_\_\_\_\_  
 Date