



Contract Number

SAP Number

Department of Public Health

Department Contract Representative	<u>Samantha Padilla</u>
Telephone Number	<u>(909) 677-3929</u>
Contractor	<u>Ontario – Montclair School District</u>
Contractor Representative	<u>Brenda Rios</u>
Telephone Number	<u>(909) 418-6428</u>
Contract Term	<u>Upon execution through September 30, 2028</u>
Original Contract Amount	<u>Not-to-exceed \$189,000</u>
Amendment Amount	<u></u>
Total Contract Amount	<u>Not-to-exceed \$189,000</u>
Cost Center	<u></u>
Grant Number (if applicable)	<u></u>

Briefly describe the general nature of the contract:

Revenue Memorandum of Understanding with Ontario-Montclair School District, including a non-standard term, to provide QuantiFERON tuberculosis testing to school volunteers, for a reimbursement amount not to exceed \$189,000 per year, effective upon execution through September 30, 2028.

FOR COUNTY USE ONLY

Approved as to Legal Form

►
Daniel Pasek, Deputy County Counsel

Date _____

Reviewed for Contract Compliance

►

Date _____

Reviewed/Approved by Department

►
Joshua Dugas, Director

Date _____