

Contract Number	
23-809 A1	
SAP Number	

Arrowhead Regional Medical Center

Department Contract Representative		
Telephone Number	909-580-6150	
Contractor	Loma Linda University Medical	
	Center	
Contractor Representative	Don Clapp	
Telephone Number		
Contract Term	August 5, 2023 – November 30,	
	2030	
Original Contract Amount		
Amendment Amount		
Total Contract Amount		
Cost Center		
Grant Number (if applicable)		

AMENDMENT NO. 1

WHEREAS, San Bernardino County ("County") and Loma Linda University Medical Center ("LLUMC") entered into an Inpatient Transfer Agreement ("Agreement") with a term of August 5, 2023 through August 4, 2026; and

WHEREAS, the parties desire to extend the term of the Agreement; and

NOW, THEREFORE, effective as of the date this Amendment is fully executed, the Agreement is amended as follows:

1. Section K of the Agreement is deleted in its entirety and replaced with the following:

K. TERM OF CONTRACT

This Agreement is effective as of August 5, 2023 through November 30, 2030, but may be terminated earlier in accordance with the provision of this Agreement.

2. All other terms and conditions of the Agreement remain in full force and effect.

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3. 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 mail 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.

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

SAN BERNARDINO COUNTY	LOMA LINDA UNIVERSITY MEDICAL CENTER
	(Print or type name of corporation, company, contractor, etc.)
>	Ву ▶
Dawn Rowe, Chair, Board of Supervisors	(Authorized signature - sign in blue ink)
Dated: SIGNED AND CERTIFIED THAT A COPY OF THIS	Name Antony Hillard, MD, FACC (Print or type name of person signing contract)
DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD	Title CEO
Lynna Monell Clerk of the Board of Supervisors of the San Bernardino County	(Print or Type)
Ву	Dated:
Deputy	Address
	By ►
	(Authorized signature - sign in blue ink) Name Angela Lalas (Print or type name of person signing contract)
	Title CFO (Print or Type)
	Dated:
	Address

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FOR	COU	NTY	USE	ONL	Y.
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Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
>	•	•
Charles Phan, Supervising Deputy County Counsel		Andrew Goldfrach, ARMC Chief Executive Officer
Date	Date	Date_

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