

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



Contract Number

16-705 A2

SAP Number

4400010023

Sheriff/Coroner/Public Administrator

Department Contract Representative	John Ades, Captain
Telephone Number	(909) 387-0640
Contractor	National Medical Services, Inc.
Contractor Representative	Pierre G. Cassigneul
Telephone Number	(215) 657-4900
Contract Term	10/1/2016 – 09/30/2021
Original Contract Amount	\$1,600,000
Amendment Amount	\$400,000
Total Contract Amount	\$2,000,000
Cost Center	4436501000

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 2

Effective August 26, 2020, Contract No. 16-705 with National Medical Services, Inc. to provide forensic toxicology services, is hereby amended as follows:

- (1) To update Forensic Toxicology Fee Schedule – Attachment A, including Sections A and B, referred to in Section B.33.b.i with the Attachment A, including Sections A, B, and C, attached hereto and incorporated by reference.
- (2) To replace Section C – TERM OF CONTRACT AND TERMINATION in its entirety with:

C. TERM OF CONTRACT AND TERMINATION

This Contract shall be for a term of five (5) years commencing on October 1, 2016 (“Effective Date”) through September 30, 2021 (“Termination Date”).

The County and the Contractor each reserve the right to terminate the Contract, for any reason, with a thirty (30) day written notice of termination. Such termination may include all or part of the services described herein. Upon such termination, payment will be made to the Contractor for services rendered and expenses reasonably incurred prior to the effective date of termination. Upon receipt of termination notice Contractor shall promptly discontinue services unless the notice directs otherwise. Contractor shall deliver promptly to the County and transfer title (if necessary) all completed work, and work in progress, including drafts, documents, plans, forms, data, products,

graphics, computer programs and reports. Contractor will return any specimens as directed by the County.

Except as amended, all other terms and conditions of this contract remain as stated therein.

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

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

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

Name _____
(Print or type name of person signing contract)

Title _____
(Print or Type)

Dated: _____

Address _____

FOR COUNTY USE ONLY

Approved as to Legal Form
►
Richard D. Luczak, Deputy County Counsel
Date _____

Reviewed for Contract Compliance
►
Date _____

Reviewed/Approved by Department
►
John Ades, Captain
Date _____