



Contract Number

21-489 A-2

SAP Number

4400017106

Children and Family Services

Department Contract Representative	Clinton Blankenship
Telephone Number	(909) 386-8304
Contractor	Professional Tutors of America, Inc.
Contractor Representative	Robert Gordon
Telephone Number	(714) 784-3454
Contract Term	July 1, 2021 through December 31, 2026
Original Contract Amount	\$875,000 Aggregate
Amendment Amount	N/A
Total Contract Amount	\$875,000 Aggregate
Cost Center	5017031000
Grant Number (if applicable)	N/A

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 2

It is hereby agreed to amend Contract No. 21-489, as follows:

SECTION VIII. TERM

Amend Section VIII to read as follows:

This Contract is effective as of July 1, 2021, and is extended from its amended expiration date of June 30, 2026, to expire on December 31, 2026, but may be terminated earlier in accordance with provisions of Section IX of the Contract.

All other terms and conditions of Contract No. 21-489 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.

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

Professional Tutors of America, Inc.

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

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

Name Robert Gordon
(Print or type name of person signing contract)

Title Chief Executive Officer
(Print or Type)

Dated: _____

Address 3350 E. Birch St., Suite 201
Brea, CA 92821

FOR COUNTY USE ONLY

Approved as to Legal Form
►
Daniella V. Hernandez, Deputy County Counsel
Date _____

Reviewed for Contract Compliance
►
Lisa Rivas-Ordaz, Contracts Manager
Date _____

Reviewed/Approved by Department
►
Jeany Glasgow, Director
Date _____