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



Contract Number

22-1221 A-1

SAP Number 4400020768

Department of Behavioral Health

Department Contract Representative Nathaniel Rodriguez **Telephone Number** (909) 388-0861 Contractor Victor Community Support Services, Inc. **Contractor Representative Edward Hackett Telephone Number** (530) 893-0758 **Contract Term** January 1, 2023 through June 30, 2026 **Original Contract Amount** \$562,500 **Amendment Amount** \$225,000 **Total Contract Amount** \$787,500 9203282200 **Cost Center Grant Number (if applicable)** N/A

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO.1

IN THAT CERTAIN **Contract No. 22-1221** by and between San Bernardino County, a political subdivision of the State of California, (hereinafter referred to as County) and Victor Community Support Services, Inc. (hereinafter referred to as Contractor), which first became effective January 1, 2023, the following changes are hereby made and agreed to:

- I. ARTICLE V Funding and Budgetary Restrictions, paragraph H is hereby amended to read as follows:
 - H. The maximum financial obligation under this contract shall not exceed \$787,500 for the contract term.
- II. ARTICLE VI <u>Provisional Payment</u>, paragraph B.1 is hereby amended to read as follows:
 - B.1. For fiscal year period (FY 2022/23), no single monthly payment for any mode of service shall exceed one-sixth (1/6) of the maximum allocations for the mode of service unless there have been payments of less than one-sixth (1/6) of such amount for any prior month of the Agreement. For fiscal year periods (FYs 2023/24, 2024/25, and 2025/26), no single monthly payment for any mode

Revised 7/1/24 Page 1 of 3

of service shall exceed one-twelfth (1/12) of the maximum allocations for the mode of service unless there have been payments of less than one-twelfth (1/12) of such amount for any prior month of the Agreement. To the extent that there have been such lesser payments, then the remaining amount(s) may be used to pay monthly services claims which exceed one-twelfth (1/12) of the maximum for that mode of service. Each claim shall reflect the actual costs expended by the Contractor subject to the limitations and conditions specified in this Agreement.

- III. ARTICLE XVII <u>Personnel</u>, paragraph M is hereby added:
 - 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 Senate Bill (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 \$250 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 Contractor 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.

- IV. ARTICLE XIV Duration and Termination, paragraph A is hereby amended to read as follows:
 - A. The term of this Agreement shall be from January 1, 2023 through June 30, 2026 inclusive.
- V. ARTICLE XIX <u>Licensing</u>, <u>Certification and Accreditation</u> paragraph H.3.a is hereby amended to read as follows:
 - H.3.a S&I List can be accessed at https://mcweb.apps.prd.cammis.medi-cal.ca.gov/references/sandi.
- VI. This amendment hereby adds Schedules A and B for Fiscal Years 2025-26. All previously approved schedules remain in effect.
- VII. ATTACHMENT III <u>LEVINE ACT-CAMPAIGN CONTRIBUTION DISCLOSURE</u> (formerly referred to as SB 1439) is hereby added.

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VIII. All other terms and conditions 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 Contract. 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.

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

| SAN BERNARDINO COUNTY | | | Community Support Services, Inc. |
|---|------------------------|---------------------|--|
| • | | By _ | pe name of corporation, company, contractor, etc.) |
| Dawn Rowe, Chair, Board of Supe | rvisors | | (Authorized signature - sign in blue ink) |
| Dated: | 0000/05 71110 | Name E | Edward Hackett (Print or type name of person signing contract) |
| SIGNED AND CERTIFIED THAT A DOCUMENT HAS BEEN DELIVER CHAIRMAN OF THE BOARD | | _{Title} Ch | ief Financial Officer |
| Lynna Monell Clerk of the Boa San Bernarding | ard of Supervisors | | (Print or Type) |
| By | | Dated: | |
| Dep | uty | Address | 1360 East Lassen Avenue |
| | | | Chico, CA 95973 |
| FOR COUNTY USE ONLY | | | |
| Approved as to Legal Form | Reviewed for Contract | Compliance | Reviewed/Approved by Department |
| > | | | > |
| Dawn Martin, Deputy County Counsel | Michael Shin, Administ | trative Manager | Georgina Yoshioka, Director |
| Date | Date | | Date |

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SCHEDULE A - Planning Estimates

Prepared by: Title:

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Actual Cost Contract (cost reimbursement)

Matt Jafari

Financial Analyst

PREVENTION AND EARLY INTERVENTION

Victor Community Support

Contractor Name: Services

Region Fort Irwin Barstow Region

Contract # RTP# 25-07

Address: 1360 E. Lassen Avenue

Chico, CA 95973

Date Form Completed: 3/26/25

FY 2024 - 2025 July 1, 2025 to June 30, 2026

Updated 4/11/25

| | PEI County Program: Military Services and Family Support Project State Defined Program: Prevention and Early Intervention | | | | | | | | | | | | |
|----|---|----|--------------------|-------|-----------------------------|----|-------------------------------------|------------|--------------------------------------|---|----|---------|--|
| _ | Distribution | _ | 5.00% | | 30.00% | , | 10.00% | 55.00% | | | | | |
| | | | Mod | le 15 | | | Mod | e 45 | | | | | |
| İ | | E | arly Interver | ntion | Services | | Prevention | n Services | | | | TOTAL | |
| # | COMPONENTS | Ma | Case Management | | Case Mental Health Services | | Mental Health Promotion 10-19 | | Community Client Service 20-29 | • | | | |
| 1 | EXPENSES | | | | | | | | | | | | |
| 2 | SALARIES | \$ | 6,339 | \$ | 38,034 | \$ | 12,678 | \$ 69,72 | 29 | | \$ | 126,780 | |
| 3 | BENEFITS | \$ | 1,784 | \$ | 10,702 | \$ | 3,567 | \$ 19,62 | 20 | | \$ | 35,673 | |
| 4 | (2+3 must equal total staffing costs) | \$ | 8,123 | \$ | 48,736 | \$ | 16,245 | \$ 89,34 | 19 | | \$ | 162,453 | |
| 5 | OPERATING EXPENSES | \$ | 3,127 | \$ | 18,764 | \$ | 6,255 | \$ 34,40 | 01 | | \$ | 62,547 | |
| 6 | TOTAL EXPENSES (2+3+5) | \$ | 11,250 | \$ | 67,500 | \$ | 22,500 | \$ 123,75 | 50 | | \$ | 225,000 | |
| 7 | AGENCY REVENUES | | | | | | | | | | | | |
| 8 | PATIENT FEES | | | | | | | | | | \$ | - | |
| 9 | PATIENT INSURANCE | | | | | | | | | | \$ | - | |
| 10 | GRANTS/OTHER | | | | | | | | | | \$ | - | |
| 11 | TOTAL AGENCY REVENUES (8+9+10) | \$ | - | \$ | - | \$ | - | \$ - | | | \$ | - | |
| 12 | CONTRACT AMOUNT (6-11) | \$ | 11,250 | \$ | 67,500 | \$ | 22,500 | \$ 123,75 | 50 | | \$ | 225,000 | |
| 13 | FUNDING | Т | | | | | | | | | | | |
| 14 | MHSA | \$ | 11,250 | \$ | 67,500 | \$ | 22,500 | \$ 123,75 | 50 | | \$ | 225,000 | |
| 15 | TOTAL FUNDING | \$ | 11,250 | \$ | 67,500 | \$ | 22,500 | \$ 123,75 | 50 | | \$ | 225,000 | |
| 16 | TARGET COST PER UNIT OF SERVICE (Minutes) | \$ | 0.60 | \$ | 0.60 | | | | | | | | |
| 17 | UNITS OF TIME (Minutes) | \$ | 18,842 | \$ | 113,054 | | | | | | | | |
| 18 | UNDUPLICATED PARTICIPANTS | | | | | | | | | | | | |
| 19 | TOTAL UNDUPLICATED PARTICIPANTS | | 25 | | 25 | | 107 | 25 | 53 | | | 409 | |
| 20 | COST PER UNDUPLICATED PARTICIPANT | \$ | 455.58 | \$ | 2,733.50 | \$ | 210.27 | \$ 489.7 | 71 | | \$ | 550.00 | |
| 21 | SERVICES | | | | • | | | | | | • | | |
| 22 | TOTAL SERVICES | | 49 | | 247 | | 115 | 72 | 24 | | | 1,136 | |
| 23 | COST PER TOTAL SERVICES | \$ | 227.80 | \$ | 273.35 | s | 195.26 | \$ 170.8 | 34 | | \$ | 198.08 | |

Angie Wieckert 04/15/2025 Thelma Rodriguez 04/15/2025 DATE DBH PROGRAM MANAGER DATE

Angie Wiechert Thelma Rodriguez Jeanine Wymer

PROVIDER AUTHORIZED SIGNER (PRINT NAME) DBH FISCAL SERVICES (PRINT NAME) DBH PROGRAM MANAGER (PRINT NAME)

Director of Financial Analysis

Administrative Supervisor I

DBH FISCAL

Roger Ma

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B STAFFING DETAIL FY 2024 - 2025

July 1, 2025 to June 30, 2026 (12 months)

Contract # RTP# 25-07

Contractor Name: Victor Community Support Services

Staffing Detail - Personnel (Includes Personal Services Contracts for Professional Services)

CONTRACTOR NAME: Victor Community Support Services

| Name | Degree/ License | Position Title | Full Time Annual Salary | Full Time Fringe Benefits | Total Full Time Salaries & Benefits | % Time Spent on Contract Services | Total Salaries and Benefits Charged to Contract Services | Service Hours of Contract Services | Total Salaries Charged to Contract Services | Total Benefits Charged to Contract Services |
|--------------------|--------------------|--|-------------------------------|---------------------------------|---|--|---|--|--|---|
| Denice Hutner | LMFT-MA | Executive Director | 105,070 | 29,564 | 134,634 | 2.52% | 3,393 | 52 | 2,648 | 745 |
| Multiple Staff | | Program Support Team (OSM, HRM, OSS, Accountant, Fiscal Oversight, Tech, QA, Regional Director Support) | 76,669 | 21,573 | 98,242 | 25.44% | 24,993 | 529 | 19,505 | 5,488 |
| Sarah Knadler | LCSW-MA | CQI Supervisor | 90,702 | 25,521 | 116,223 | 4.00% | 4,649 | 83 | 3,628 | 1,021 |
| Dessarina Mulitalo | LMFT-MA | Clinical Supervisor | 90,702 | 25,521 | 116,223 | 20.00% | 23,245 | 416 | 18,140 | 5,105 |
| Katrina Gonzalez | AMFT-MA | Clinician | 76,337 | 21,479 | 97,817 | 50.00% | 48,908 | 1,040 | 38,169 | 10,739 |
| Nekole Paschal | None | Peer Family Advocate Mental Health Worker | 39,490 | 11,112 | 50,602 | 100.00% | 50,602 | 2,080 | 39,490 | 11,112 |
| On Call | | Various | 5,200 | 1,463 | 6,663 | 100.00% | 6,663 | 2,080 | 5,200 | 1,463 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | 0 | 0.00% | 0 | 0 | 0 | 0 |
| | | | | | | ΤΟΤΔΙ | | | 126,780 | 35,673 |

TOTAL COST A: 162,453 6,281

Detail of Fringe Benefits: Employer FICA/Medicare, Workers Compensation, Unemployment, Vacation Pay, Sick Pay, Pension and Health Benefits

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SCHEDULE B

FY 2024 - 2025

Prepared by: Matt Jafari

Title: Financial Analyst

Contractor Name: Victor Community Support Services

Region Fort Irwin Barstow Region

Contract # RTP# 25-07

Address: 1360 E. Lassen Avenue

Chico, CA 95973

Date Form Completed: 3/26/25

Updated 4/11/25

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.

July 1, 2025 to June 30, 2026

| | | | | | | Budget F | Revision |
|--------------------------------------|----------------------------|---|------------------------------------|--------------------------------|------------------------|-------------------|-------------------|
| ITEM | TOTAL COST TO ORGANIZATION | % CHARGED TO OTHER FUNDING SOURCE | TOTAL COST TO OTHER FUNDING SOURCE | PERCENT CHARGED TO CONTRACT | TOTAL COST TO CONTRACT | Request Change | Revised Budget |
| 1 Professional Fees | \$514 | 0% | \$0 | 100% | \$514 | 0 | 514 |
| 2 Software Maintenance | \$3,623 | 0% | \$0 | 100% | \$3,623 | | 3,623 |
| 3 Employment Expenses | \$803 | 0% | \$0 | 100% | \$803 | | 803 |
| 4 Office Supplies | \$606 | 0% | \$0 | 100% | \$606 | | 606 |
| 5 Program Supplies | \$2,034 | 0% | \$0 | 100% | \$2,034 | | 2,034 |
| 6 Rent | \$6,863 | 0% | \$0 | 100% | \$6,863 | | 6,863 |
| 7 Utilities | \$4,799 | 0% | \$0 | 100% | \$4,799 | | 4,799 |
| 8 Building Maintenance | \$1,798 | 0% | \$0 | 100% | \$1,798 | | 1,798 |
| 9 Equipment Expense | \$4,607 | 0% | \$0 | 100% | \$4,607 | | 4,607 |
| 10 Transportation | \$8,004 | 0% | \$0 | 100% | \$8,004 | | 8,004 |
| 11 General & Administrative Costs | \$276 | 0% | \$0 | 100% | \$276 | | 276 |
| 12 Conferences & Meetings | \$3,777 | 0% | \$0 | 100% | \$3,777 | | 3,777 |
| 13 Taxes & Insurance | \$736 | 0% | \$0 | 100% | \$736 | | 736 |
| 14 Indirect Expense | \$24,107 | 0% | \$0 | 100% | \$24,107 | | 24,107 |
| SUBTOTAL B: | \$62,547 | | \$0 | | \$62,547 | 0 | 62,547 |
| GROSS TOTAL STAFFING AN | OPERATING COST | s | | | \$225,000 | | |

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SCHEDULE B BUDGET NARRATIVE

FY 2024 - 2025

Contractor Name: Victor Community Support Services

Region Fort Irwin Barstow Region

Contract # RTP# 25-07 Address: 1360 E. Lassen Avenue

OL: CASSEII AV

Chico, CA 95973

Date Form Completed: 3/26/25

Updated 4/11/25

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.

Prepared by: Matt Jafari

Title: Financial Analyst

July 1, 2025 to June 30, 2026

| ITEM | Justification of Cost |
|-----------------------------------|---|
| 1 Professional Fees | Direct costs associated with contract support, interpreter services, staff training materials, and guest speakers for training. |
| 2 Software Maintenance | Direct costs associated with technical support services as well as annual software licenses and maintenance costs; software maintenance includes correcting, updating and enhancing current company software. |
| 3 Employment Expenses | Direct cost associated with recruiting, advertising, completion of 3rd party physical, drug testing, fingerprinting, clinical license renewals, and continuing education. |
| 4 Office Supplies | Direct costs associated with general office supplies, such as paper, pens, pencils, envelopes, folders, tape, printed brochures, checks, business cards, kitchen supplies, toner for copier, fax machine, paper for fax machine, copier and computer printers, postage and shipping costs, PPEmasks, disinfectant wipes, Covid testing and subscription expense. |
| 5 Program Supplies | Direct costs associated with general program support supplies. Which may include curriculums, ESL materials, orientation and treatment packets, tutoring materials, craft supplies, therapeutic toys, snack packs, videos, games, nonprescription drugs, instructional supplies, and food provided to clients. |
| 6 Rent | Direct costs associated with facility rental, the rental cost of a leased building and costs related to leasehold improvements. Rent for this site's facity is \$12,739 per month and allocated to each program based on relative percentage of compensation. |
| 7 Utilities | Direct costs associated with general utility costs, such as telephone, water, natural gas, electricity, cable television, internet, and garbage. |
| 8 Building Maintenance | Direct costs associated with janitorial, maintenance, building and ground supplies, licenses and permits. |
| 9 Equipment Expense | Direct costs associated with equipment leases, equipment maintenance, office equipment, furnishing, and computer equipment. |
| 10 Transportation | Direct costs associated with staff mileage reimbursements as well as agency vehicle operating, repair, maintenance, and licensing costs. This is budgeted to cover the cost of staff travel related to service delivery, training, and meetings. The mileage reimbursement rate is reviewed and set by management annually. The annual rate will not exceed the IRS mileage reimbursement rate. |
| 11 General & Administrative Costs | Direct costs associated with miscellaneous charges, bank fees, interest expense, dues and membership. |
| 12 Conferences & Meetings | Direct costs associated with meetings, staff events, and conferences, such as airfare, food and lodging to attend conferences and training. |
| 13 Taxes & Insurance | Direct costs associated with property tax as well as property, liability, and vehicle insurance expense. |
| 14 Indirect Expense | Indirect operating costs that support our administrative services which include, but are not limited to, Agency Leadership, Agency Human Resource functions, Agency-wide Administrative and Executive support functions, Agency-wide Technology services, Agency-wide Fiscal and Accounting functions including payroll, accounting, and financial management. This is based on an estimated calculation of 12% of total costs. |

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH SCHEDULE B FY 2024 - 2025

112021 2020

July 1, 2025 to June 30, 2026

Contractor Name: Victor Community Support Services Region Fort Irwin Barstow Region Contract # RTP# 25-07

Address: 1360 E. Lassen Avenue Chico, CA 95973

Date Form Completed: 3/26/25 Updated 4/11/25

| Yea | ar to Date Unduplicated P | articipant C | ount | | |
|-----------------|---------------------------|------------------|-----------------|---------|--|
| Early Int | ervention | Mental Health | Comm. Client | Program | |
| Case Management | MHS | Promotion | Services | riogram | |
| 25 | 25 | 107 | 253 | 409 | |

PEI County Program: Military Services and Family Support Project

State Defined Program: Prevention and Early Intervention

| | State Defined Program. Prevention and Early Intervention | | | | | | | | | | | | | |
|--------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|
| Service Projections for: | | Jul-25 | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 | Apr-26 | May-26 | Jun-26 | TOTAL |
| Early Intervention | Case Management | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 49 |
| Services | Mental Health Services | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 21 | 247 |
| Mental Health Promotion | | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 115 |
| Community Client Service | es . | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 60 | 724 |
| TOTAL | | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 95 | 1136 |
| | | | | | | | | | | | | | | |
| Hours Projections for: | | Jul-25 | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 | Apr-26 | May-26 | Jun-26 | TOTAL |
| Early Intervention | Case Management | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 26 | 314 |
| Services | Mental Health Services | 157 | 157 | 157 | 157 | 157 | 157 | 157 | 157 | 157 | 157 | 157 | 157 | 1,884 |
| Mental Health Promotion | | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 52 | 628 |
| Community Client Service | es . | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 288 | 3,454 |
| TOTAL | | 523 | 523 | 523 | 523 | 523 | 523 | 523 | 523 | 523 | 523 | 523 | 523 | 6,281 |
| | | - | | | | - | | | | - | | _ | - | |
| Cost Projections for: | | Jul-25 | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 | Apr-26 | May-26 | Jun-26 | TOTAL |
| Early Intervention | Case Management | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 938 | \$ 11,250 |
| Services | Mental Health Services | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 5,625 | \$ 67,500 |
| Mental Health Promotion | | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 1,875 | \$ 22,500 |
| Community Client Service | 25 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 10,313 | \$ 123,750 |
| TOTAL | | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 18,750 | \$ 225,000 |



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-subsidiary 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.

<u>Parent-Subsidiary Relationship:</u> 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 page. If a question does not apply respond N/A or Not Applicable.

| 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)?

| | | | | | | ATTACHMENT III | | | |
|--|--|---------------------------------------|---------------------|--------------------------------|--|--|--|--|--|
| | Yes ☑ If yes, skip Question | Nos. 3-4 and g | o to Qı | uestion No. 5 | No □ | | | | |
| 3. | Name of Principal (i.e., CEO/President) of entity listed in Question No. 1, <u>if</u> the individual actively supports the matter <u>and</u> has a financial interest in the decision: <u>Not Applicable</u> | | | | | | | | |
| 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): | | | | | | | | |
| | Not Applicable | | | | | | | | |
| 5. | Name of any parent, subsidiary, or otherwise related entity for the entity listed in Question No. 1 definitions above): | | | | | | | | |
| | Company Name | | | Relationshi | p | | | | |
| | Victor Treatment Centers, Inc. | | | Shared Man | agement | | | | |
| | | | | | | | | | |
| 6. | Name of agent(s) of Contracto | or: | | | | | | | |
| | Company Name | Agent(s) |) | | Date Agent Re | | | | |
| | Victor Community Support | None | | | | | | | |
| | Services, Inc. | | | | | | | | |
| | | | | | | | | | |
| 7. | Name of Subcontractor(s) (income the awarded contract if the suin the decision and (3) will be publication. | bcontractor (1) possibly identifie | activel ed in th | y supports the e contract with | e matter <u>and</u> (2) has n the County or board | a financial interest d governed special | | | |
| | Company Name | Subcontr | actor(| s): | Principal and | //or Agent(s): | | | |
| | Victor Community Support Services, Inc. | None | | | | | | | |
| 8. | Name of any known individual support or oppose the matter the decision: | | | | | | | | |
| | Company Name | | Ir | ndividual(s) N | lame | | | | |
| | None | | | | | | | | |
| | | | | | | | | | |
| 9. Was a campaign contribution, of more than \$500, made to any member of the San Bernardino C 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 Q | uestion No. 10. | | | | | | | |
| | Yes ☐ If yes , please contin | ue to complete | this fo | rm. | | | | | |
| 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.