

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



**Contract Number**

**20-367 A-1**

**SAP Number**

**4400014194**

## Department of Behavioral Health

<b>Department Contract Representative</b>	Christopher Carso
<b>Telephone Number</b>	(909) 388-0856
<b>Contractor</b>	Victor Community Support Services, Inc.
<b>Contractor Representative</b>	Janis Graybill
<b>Telephone Number</b>	(760) 617-3789
<b>Contract Term</b>	July 1, 2020 through December 31, 2025
<b>Original Contract Amount</b>	\$7,569,485
<b>Amendment Amount</b>	\$756,949
<b>Total Contract Amount</b>	\$8,326,434
<b>Cost Center</b>	9206372200
<b>Grant Number (If applicable)</b>	N/A

### AMENDMENT NO. 1

#### IT IS HEREBY AGREED AS FOLLOWS:

It is hereby agreed to amend Contract No. 20-367, by and between San Bernardino County, a political subdivision of the State of California (hereinafter called the County), and Victor Community Services Support Services, Inc. (hereinafter called Contractor) as follows:

- I. ARTICLE IV FUNDING AND BUDGETARY RESTRICTIONS, paragraph I is hereby amended to read as follows:
  - I. The maximum financial obligation under this contract shall not exceed \$8,326,434 for the contract term.
- II. ARTICLE XIII DURATION AND TERMINATION, paragraph A is hereby amended to read as follows:
  - A. The term of this Agreement shall be from July 1, 2020 through December 31, 2025 inclusive.
- III. ARTICLE XVI PERSONNEL, paragraphs L and M are hereby added to read as follows:
  - L. Executive Order N-6-22 Russia Sanctions

On March 4, 2022, Governor Gavin Newsom issued Executive Order N-6-22 (the EO) regarding Economic Sanctions against Russia and Russian entities and individuals. "Economic Sanctions" refers to sanctions imposed by the U.S. government in response to Russia's actions in Ukraine (<https://home.treasury.gov/policy-issues/financial-sanctions/sanctions-programs-and-country-information/ukraine-russia-related-sanctions>), as well as any sanctions imposed under state law (<https://www.dgs.ca.gov/OLS/Ukraine-Russia>). The EO directs state agencies and their contractors (including by agreement or receipt of a grant) to terminate contracts with, and to refrain from entering any new contracts with, individuals or entities that are determined to be a target of Economic Sanctions. Accordingly, should it be determined that Contractor is a target of Economic Sanctions or is conducting prohibited transactions with sanctioned individuals or entities, that shall be grounds for termination of this agreement. Contractor shall be provided advance written notice of such termination, allowing Contractor at least 30 calendar days to provide a written response. Termination shall be at the sole discretion of the County.

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 (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 \$500 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. ATTACHMENT III Levine Act-Campaign Contribution Disclosure (formerly referred to as SB 1439) is hereby added.
- V. Exhibit I Schedules A and B for FY 2025-26 are hereby added.

VI. 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

▶ *Dawn Rowe*  
Dawn Rowe, Chair, Board of Supervisors

Dated: JUN 10 2025

SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

*Lynna Mone*  
Clerk of the Board of Supervisors of San Bernardino County

By *[Signature]*  
Deputy



Victor Community Support Services, Inc.

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

By *Edward E. Hackett*  
8638AF-957A-46A1-3  
(Authorized signature - sign in blue ink)

Name Ed Hackett  
(Print or type name of person signing contract)

Title Chief Financial Officer  
(Print or Type)

Dated: 5/19/2025

Address 1360 E. Lassen Ave. Chico, CA  
95973

**FOR COUNTY USE ONLY**

Approved as to Legal Form  
*Dawn Martin*  
8ED744A7897047B  
Dawn Martin, Deputy County Counsel  
Date 5/20/2025

Reviewed for Contract Compliance  
*Michael Shin*  
6D60C011AC2C487  
Michael Shin, Contracts Manager  
Date 5/20/2025

Reviewed/Approved by Department  
*Georgina Yoshioka*  
7DE607EEA674B2  
Georgina Yoshioka, Director  
Date 5/20/2025

EXHIBIT I

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY

Revised

DEPARTMENT OF BEHAVIORAL HEALTH

Victor Community Support Services, Inc.

FY 2025/2026

Actual Cost Contract (cost reimbursement)

Transitional Age Youth One Stop  
July 1, 2025 to December 31, 2025

Contract # RTP#25-44  
Address: 1360 E. Lassen Ave  
Chico, CA 95973  
Date Form Completed: 3/31/25  
Date Form Revised: 4/1/2025

Prepared by: Matt Jafari  
Title: Senior Financial Analyst

LINE #	MODE OF SERVICE	SERVICE FUNCTION	Distribution % (100% must equal total staffing costs)										TOTAL
			14.00%	15 - Outpatient (01-09)	15 - Outpatient (10-18, 30-57)	15 - Outpatient (60-69)	15 - Outpatient (70-79)	15 - Outpatient (70-79)	45 - Outreach (10-19)	46 - Outreach (20-29)	60 - Support (70-72)	60 - Support (78)	
1	SALARIES		40,897	255,152	4,090	16,359	4,090	16,359	4,090	16,359	81,795	81,795	408,374
2	BENEFITS		12,005	74,896	1,200	1,935	1,200	4,802	1,200	4,802	24,010	24,010	120,048
3	OPERATING EXPENSES		52,902	330,048	8,527	8,527	5,290	21,161	5,290	21,161	105,805	105,805	529,022
4	TOTAL EXPENSES (1+2+3)		75,695	472,247	12,201	12,201	7,569	30,278	7,569	30,278	148,390	148,390	756,949
5	PATIENT FEES												0
6	PATIENT INSURANCE												0
7	MEDICARE												0
8	GRANTS/OTHER												0
9	TOTAL AGENCY REVENUES (5+6+7+8)		0	0	0	0	0	0	0	0	0	0	0
10	CONTRACT AMOUNT (4-9)		75,695	472,247	12,201	12,201	7,569	30,278	7,569	30,278	148,390	148,390	756,949
11	MEDICAL (PPP)		30,278	188,899	4,880	4,880	3,028	3,028	3,028	3,028	163,637	163,637	227,085
12	EPSDT (2011 Realignment)		21,818	136,120	3,517	3,517	2,182	2,182	2,182	2,182	105,805	105,805	163,637
13	HEALTHY FAMILIES MEDICAL		0	0	0	0	0	0	0	0	0	0	0
14	MHSA MATCH		8,460	52,779	1,364	1,364	845	845	845	845	4,126	4,126	63,448
15	MHSA		15,139	94,449	2,440	2,440	1,514	1,514	1,514	1,514	7,569	7,569	302,779
16													0
17													0
18													0
19	REALIGNMENT (Net County)												0
20	REALIGNMENT -MATCH												0
21	FUNDING TOTAL		75,695	472,247	12,201	12,201	7,569	30,278	7,569	30,278	148,390	148,390	756,949
22	NET COUNTY FUNDS (Local Cost) MUST = ZERO		0	0	0	0	0	0	0	0	0	0	0
23	STATE FUNDING (Including Realignment)		45,417	283,348	7,321	7,321	4,541	4,541	4,541	4,541	22,779	22,779	529,864
24	FEDERAL FUNDING		30,278	188,899	4,880	4,880	3,028	3,028	3,028	3,028	148,390	148,390	227,085
25	TOTAL FUNDING		75,695	472,247	12,201	12,201	7,569	30,278	7,569	30,278	148,390	148,390	756,949
26	UNITS OF TIME (MINUTES)		40,805	187,882	2,607	2,607	2,143	2,143	2,143	2,143	10,516	10,516	233,536
27	COUNTY CONTRACT RATE		2.20	2.99	5.56	5.56	4.20	4.20	4.20	4.20	3.63	3.63	3,892
28	COST PER UNIT OF TIME		1.85	2.51	4.68	4.68	3.63	3.63	3.63	3.63	3.63	3.63	3,892
29	UNITS OF SERVICE -Hours		682	3,131	43	43	36	36	36	36	36	36	3,892

APPROVED: *Angie Wiechert* 04/14/2025 DATE: *Heather Louer* 04/15/2025 DATE

PROVIDER AUTHORIZED SIGNATURE: *Angie Wiechert* DATE: 04/14/2025  
 DBH FISCAL SERVICES: *Heather Louer* DATE: 04/15/2025  
 PROVIDER AUTHORIZED SIGNER (PRINT NAME): **Angie Wiechert** DBH SENIOR PROGRAM MANAGER (PRINT NAME): **Heather Louer**  
 Director of Financial Analysis Prepared by: DBH Fiscal Roger Ma

**EXHIBIT I**

**SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH  
STAFFING DETAIL**

Schedule B

FY 2025/2026

July 1, 2025 to December 31, 2025

(6 months)

**Staffing Detail - Personnel (Include: Personal Services; Contracts for Professional Services)**

**CONTRACTOR NAME: Victor Community Support Services, Inc.**

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	Total Salaries Charged to Contract Services	Total Benefits Charged to Contract Services
Denise Huber		Executive Director	92,700	27,809	120,509	23%	27,199	20,924	6,275
Jessie Bliss	MS/LMFT	CQI Supervisor	89,309	26,792	116,100	11%	13,103	10,079	3,024
Mark Callaban	MS/AMFT	Clinical Supervisor	80,479	24,143	104,622	43%	44,464	34,204	10,260
Vacant		Clinical Supervisor	79,300	23,789	103,089	25%	25,772	19,825	5,947
Synthia Gonzales		Personal Services Coordinator	70,611	18,540	89,151	50%	44,579	35,308	9,271
Jorge Berumen		Personal Services Coordinator	61,696	15,865	77,561	50%	38,780	30,848	7,932
Paula Espinoza Shaw		Personal Services Coordinator	61,696	18,508	80,204	26%	21,177	16,290	4,887
Enrique Ceballos		Family Support Counselor (Case Manager)	37,045	11,113	48,158	50%	24,079	18,522	5,557
Alejandro Castro		Family Support Counselor (Case Manager)	37,045	11,113	48,158	50%	24,079	18,522	5,557
Tesorero Lopez		Family Support Counselor (Case Manager)	37,045	11,113	48,158	50%	24,079	18,522	5,557
Bryson Anderik		Family Support Counselor (Case Manager)	37,045	11,113	48,158	50%	24,079	18,522	5,557
Vacant		Family Support Counselor (Case Manager)	37,045	11,113	48,158	33%	15,651	12,040	3,611
Vacant		Family Parent Partner	37,045	11,113	48,158	50%	24,079	18,522	5,557
Vacant		Family Parent Partner	37,045	11,113	48,158	38%	18,059	13,892	4,167
Innocent Odimgwe		Vocational Specialist	51,917	15,575	67,491	50%	33,746	25,958	7,788
Vacant		Peer Counselor	29,050	8,715	37,765	50%	18,883	14,525	4,358
Multiple Staff		Program Support (Tech Support, Quality)	65,949	19,784	85,733	16%	13,746	10,574	3,172
Multiple Staff		Program Support Team (OSM, HRM, OSS, Accountant, Fiscal Oversight, Regional Support)	49,008	14,702	63,710	147%	93,471	71,897	21,571
Telepsychiatrist	MD	Psychiatrist	416,000	0	416,000	5%	0	0	0
					0		0	0	0
					0		0	0	0
<b>Total Program</b>						<b>8.15 COST:</b>	<b>529,022</b>	<b>408,974</b>	<b>120,048</b>

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

\* = Sub-Contracted Person listed on Schedule "A" Planning as operating expenses, not salaries & benefits.

**EXHIBIT I**

**SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B**

**Contractor Name:** Victor Community Support Services, Inc.  
**Contract #** RTP#25-44  
**Address:** 1360 E. Lassen Ave  
Chico, CA 95973  
**Date Form Completed:** 3/31/25  
Updated 4/1/25

**FY 2025/2026**

**Prepared by:** Matt Jafari  
**Title:** Senior Financial Analyst

**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.**

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	% CHARGED TO CONTRACT	TOTAL COST TO CONTRACT	Budget Revision	
						Request Change	Revised Budget
1 Professional Fees	\$2,312	0%	\$1,156	50%	\$1,156	0	1,156
2 Software Maintenance	\$17,128	0%	\$8,564	50%	\$8,564		8,564
3 Employment Expenses	\$3,944	0%	\$1,972	50%	\$1,972		1,972
4 Office Supplies	\$7,975	0%	\$3,988	50%	\$3,988		3,988
5 Program Supplies	\$7,887	0%	\$3,944	50%	\$3,944		3,944
6 Rent	\$61,503	0%	\$30,752	50%	\$30,752		30,752
7 Utilities	\$27,340	0%	\$13,670	50%	\$13,670		13,670
8 Building Maintenance	\$23,903	0%	\$11,951	50%	\$11,951		11,951
9 Equipment Expense	\$38,996	0%	\$19,498	50%	\$19,498		19,498
10 Transportation	\$17,397	0%	\$8,699	50%	\$8,699		8,699
11 General & Administrative Costs	\$3,104	0%	\$1,552	50%	\$1,552		1,552
12 Conference & Meetings	\$32,002	0%	\$16,001	50%	\$16,001		16,001
13 Client Assistance	\$6,000	0%	\$3,000	50%	\$3,000		3,000
14 Taxes & Insurance	\$5,757	0%	\$2,878	50%	\$2,878		2,878
15 Psychiatrist Contractor	\$19,200	0%	\$0	100%	\$19,200		19,200
16 Indirect Costs	\$162,203	0%	\$81,102	50%	\$81,102		81,102
<b>SUBTOTAL B:</b>	<b>\$436,652</b>				<b>\$227,926</b>	<b>0</b>	<b>227,926</b>
<b>GROSS COSTS TOTAL A + B:</b>	<b>\$965,674</b>				<b>\$756,948</b>		

**EXHIBIT I**

**SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B  
BUDGET NARRATIVE  
FY 2025/2026**

**Contractor Name:** Victor Community Support Services, Inc.  
**Contract #** RTP#25-44  
**Address:** 1360 E. Lassen Ave  
Chico, CA 95973  
**Date Form Completed:** 3/31/25  
**Updated:** 4/1/25

Prepared by: Matt Jafari  
Title: Senior Financial Analyst

**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.**

**July 1, 2025 to December 31, 2025**

ITEM	Justification of Cost
1 Professional Fees	Direct costs associated with any professional service needs associated with program operations, 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 costs associated with our EHR, as well as correcting, updating and enhancing our other agency 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, and subscription expense.
5 Program Supplies	Direct costs associated with general program support supplies. Which may include threshold language materials, orientation and treatment packets, tutoring materials, craft supplies, therapeutic materials, snack packs, videos, games, hygiene supplies, instructional supplies, and food provided to clients. This also includes but is not limited to the following curriculums and required assessment measures such as: Matrix, ART, NCTI, Co-Occurring Disorders Program and other EBP materials.
6 Rent	Direct costs associated with facility rental, the rental cost of leased building and costs related to leasehold improvements. Facility rent is captured monthly in a directly allocable cost pool and allocated out to the service cost centers based on % of direct service compensation.
7 Utilities	Direct costs associated with general utility costs, such as telephone, water, natural gas, electricity, cable, internet, and garbage service.
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 Conference & Meetings	Direct costs associated with meetings, staff events, and conferences, such as airfare, food and lodging to attend conferences and training.
13 Client Assistance	Funds to assist TAY participants and their families in receiving services/supports and assistance with strategies and activities focused on recovery, wellness, and resilience. Some examples may include: training materials for parenting resources/skills, maintenance and recovery services, substance abuse services, assistance with GED classes and testing, assistance with transportation, childcare as well as for emergency stop gap supplies such as food, and shelter with immediate linkage to community resources for increased sustainability.
14 Taxes & Insurance	Direct costs associated with property tax as well as property, liability, and vehicle insurance expense.
15 Psychiatrist Contractor	Direct Costs associated with contractors providing direct service to clients. Includes: Psychiatrist (Tele Psych @ \$200 an hour not to exceed \$19,200).
16 Indirect Costs	Indirect costs that support our administrative services which include, but are not limited to, fiscal oversight, accounting, payroll, insurance oversight, legal, human resources, risk management, quality assurance, HIPAA regulation, contract monitoring, and executive oversight. This is based on an estimated calculation of 12% of total direct costs.

**EXHIBIT I**

**SAN BERNARDINO COUNTY  
DEPARTMENT OF BEHAVIORAL HEALTH  
SCHEDULE B  
FY 2025/2026**

**Contractor Name:** Victor Community Support Services, Inc.  
**Contract #** RTP#25-44  
**Address:** 1360 E. Lassen Ave  
 Chico, CA 95973  
**Date Form Completed:** 3/31/25  
**Updated** 4/1/2025

**Client Service Projections for Mode 15 Services:**

	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
<i>Units of service (Minutes)</i>	38,923	38,923	38,923	38,923	38,923	38,923							233,536
<i>Projected Cost</i>													
Case Management	\$12,616	\$12,616	\$12,616	\$12,616	\$12,616	\$12,615							\$75,695
Mental Health Services	\$78,708	\$78,708	\$78,708	\$78,708	\$78,708	\$78,707							\$472,247
Medication Support	\$2,034	\$2,034	\$2,034	\$2,034	\$2,034	\$2,031							\$12,201
Crisis	\$1,262	\$1,262	\$1,262	\$1,262	\$1,262	\$1,259							\$7,569
													<b>Total budget amount \$567,712</b>

**Number of Unduplicated Clients Served Under All Modes of Services**

Number of Unduplicated Clients Served Under All Modes of Services	57	58	57	58	57	58							345
Mode 15 - FSP Unduplicated clients	12	13	13	12	13	13							76
Mode 45/60 - Unduplicated Clients	50	49	50	49	50	49							297

**Cost per Unduplicated Client (Mode 15 and Mode 45/60)**

	Cost per Unduplicated Client												
Cost per Unduplicated Client (Mode 15 and Mode 45/60)													Cost per Unduplicated client
Mode 15 - Cost per Unduplicated client	\$ 7,885	\$ 7,278	\$ 7,278	\$ 7,985	\$ 7,453	\$ 7,278							\$ 7,500
Mode 45/60 - Cost per Unduplicated Client	\$ 315	\$ 322	\$ 315	\$ 322	\$ 315	\$ 322							\$ 637



## 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-subsidary 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.

Parent-Subsidiary Relationship: 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)?  
 Yes  If yes, skip Question Nos. 3-4 and go to Question No. 5      No
3. Name of Principal (i.e., CEO/President) of entity listed in Question No. 1, if the individual actively supports the matter and has a financial interest in the decision: n/a
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): n/a
5. Name of any parent, subsidiary, or otherwise related entity for the entity listed in Question No. 1 (see definitions above): n/a

Company Name	Relationship
Victor Treatment Centers, Inc.	Shared Management

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
Not Applicable		

7. Name of Subcontractor(s) (including Principal and Agent(s)) that will be providing services/work under the awarded contract if the subcontractor (1) actively supports the matter and (2) has a financial interest in the decision and (3) will be possibly identified in the contract with the County or board governed special district.

Company Name	Subcontractor(s):	Principal and/or Agent(s):
Not Applicable		

8. Name of any known individuals/companies who are not listed in Questions 1-7, but who may (1) actively support or oppose the matter submitted to the Board and (2) have a financial interest in the outcome of the decision:

Company Name	Individual(s) Name
Not Applicable	

9. Was a campaign contribution, of more than \$500, made to any member of the San Bernardino County 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 Question No. 10.

Yes  If yes, please continue to complete this form.

10. Name of Board of Supervisor Member or other County elected officer: Not Applicable

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.



\_\_\_\_\_  
Signature

Edward Hackett, Chief Financial Officer

\_\_\_\_\_  
Print Name

4/15/2025

\_\_\_\_\_  
Date

Victor Community Support Services, Inc.

\_\_\_\_\_  
Print Entity Name, if applicable

Not Applicable