

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


Contract Number
 24-595 A-1

SAP Number
 4400025522

Department of Behavioral Health

Department Contract Representative	Shane Hibbard-Miller
Telephone Number	(909) 386-8264
Contractor	Rim Family Services, Inc.
Contractor Representative	Joscelyn Field
Telephone Number	(909) 336-1800
Contract Term	July 1, 2024 through December 31, 2027
Original Contract Amount	\$ 900,000
Amendment Amount	\$ 675,000
Total Contract Amount	\$1,575,000
Cost Center	9203352200
Grant Number (if applicable)	N/A

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 1:

San Bernardino County (County) and Rim Family Services, Inc. (Contractor) hereby agree to amend Contract No. 24-595 as follows:

- I. ARTICLE I Definition of Terminology, paragraph I, is hereby added to read as follows:
 - I. Behavioral Health Services Act (BHSA) - Proposition 1 Behavioral Health Services Act (BHSA): The BHSA, passed in 2024, replaces the Mental Health Services Act (MHSA) of 2004. The MHSA imposed a one percent (1%) tax on personal income over one million dollars (\$1,000,000) to serve individuals with serious mental illness (SMI) and individuals that may be at risk of developing serious mental health conditions. The BHSA reforms funding to prioritize services for people with the most significant mental health needs, while adding the treatment of substance use disorders (SUD), expanding housing interventions, and increasing the behavioral health workforce. It also enhances oversight, transparency, and accountability at the state and local levels.
- II. ARTICLE IV Performance, paragraph A.1, is hereby added and paragraph E, is hereby amended to read as follows:

1. National Curriculum and Training Institute (NCTI): DBH does not provide or fund the NCTI Crossroads Education program effective July 1, 2026. Providers who previously utilized NCTI due to a DBH program requirement may continue using NCTI at their own expense or may replace NCTI with a DBH approved, evidence based cognitive behavioral intervention practice.

E. Data Collection and Performance Outcome Requirements

Contractor shall comply with all local, State, and Federal regulations regarding local, State, and Federal Performance Outcomes measurement requirements and participate in the outcomes measurement process, as required by the State and/or DBH. For Mental Health Services Act (MHSA) programs and/or Behavioral Health Services Act (BHSA) programs, Contractor agrees to meet the goals and intention of the program as indicated in the related MHSA/BHSA Component Plan and most recent update.

Contractor shall comply with all requests regarding local, State, and Federal Performance Outcomes measurement requirements and participate in the outcomes measurement processes as requested.

MHSOAC, DHCS, OSHPD, DBH and other oversight agencies or their representatives have specific accountability and outcome requirements. Timely reporting is essential for meeting those expectations.

1. Contractor must collect, manage, maintain and update client, service and episode data as well as staffing data as required for local, State, and Federal reporting.
2. Contractor shall provide information by entering or uploading required data into:
 - a. County's billing and transactional database system.
 - b. DBH's client information system and, when available, its electronic health record system.
 - c. The "Data Collection and Reporting" (DCR) system, which collects and manages Full Service Partnership (FSP) information.
 - d. Individualized data collection applications as specified by DBH, such as Objective Arts and the Prevention and Early Intervention (PEI) Database.
 - e. Any other data or information collection system identified by DBH, the MHSOAC, OSHPD or DHCS.
3. Contractor shall comply with all requirements regarding paper or online forms:
 - a. Bi-Annual Client Perception Surveys (paper-based): twice annually, or as designated by DHCS. Contractor shall collect consumer perception data for clients served by the programs. The data to be collected includes, but not limited to, the client's perceptions of the quality and results of services provided by the Contractor.
 - b. Client preferred language survey (paper-based), if requested by DBH.
 - c. Intermittent services outcomes surveys.

- d. Surveys associated with services and/or evidence-based practices and programs intended to measure strategy, program, component, or system level outcomes and/or implementation fidelity.
 - e. Network Adequacy Certification Tool (NACT) as required by DHCS and per DBH instructions.
4. Data must be entered, submitted and/or updated in a timely manner for:
 - a. All FSP and non-FSP clients: this typically means that client, episode and service-related data shall be entered into the County's billing and transactional database system.
 - b. All service, program, and survey data will be provided in accordance with all DBH established timelines.
 - c. Required information about FSP clients, including assessment data, quarterly updates and key events shall be entered into the DCR online system by the due date or within 48 hours of the event or evaluation, whichever is sooner.
5. Contractor will ensure that data are consistent with DBH's specified operational definitions, that data are in the required format, that data is correct and complete at time of data entry, and that databases are updated when information changes.
6. Data collection requirements may be modified or expanded according to local, State, and/or Federal requirements.
7. Contractor shall submit, monthly, its own analyses of the data collected for the prior month, demonstrating how well the contracted services or functions provided satisfied the intent of the Contract, and indicating, where appropriate, changes in operations that will improve adherence to the intent of the Contract. The format for this reporting will be provided by DBH.
8. Independent research involving clients shall not be conducted without the prior written approval of the Director of DBH. Any approved research must follow the guidelines in the DBH Research Policy.

Note: Independent research means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes. For example, some demonstration and service programs may include research activities.

III. ARTICLE V Funding and Budgetary Restrictions, paragraphs G, I, are hereby amended to read as follows:

- G. The allowable funding sources for this Contract may include: Mental Health Services Act funds (MHSA), Behavioral Health Services Act funds (BHSA), and Federal funds used as match funds to draw down federal funds.
- I. The contract amendment amount of \$675,000 shall increase the total contract amount from \$900,000 to \$1,575,000 for the contract term.

- IV. ARTICLE XIV Duration and Termination, paragraph A, is hereby amended to read as follows:
- A. The term of this Agreement shall be from July 1, 2024, through December 31, 2027, inclusive.
- V. ARTICLE XVII Personnel, paragraph M, is hereby amended to read as follows:
- 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.
- VI. ARTICLE XIX Licensing, Certification and Accreditation, paragraph H.3.a is hereby amended to read as follows:
- a. S&I List can be accessed at <https://data.chhs.ca.gov/dataset/provider-suspended-and-ineligible-list-s-i-list>.
- VII. ADDENDUM I, ARTICLE III DESCRIPTION OF SPECIFIC SERVICES TO BE PROVIDED, paragraphs B.9., B.10., and B.10.e., are hereby amended to read as follows:
9. NCTI Crossroads Education and Training Institute (NCTI) may be offered to youth and TAY for providers who previously participated in providing NCTI.
10. Contract provider may provide cognitive behavioral change curriculum classes utilizing the National Curriculum and Training Institute® (NCTI®) Crossroads curriculum and Real Colors® Personality Instrument. Providers who previously utilized NCTI due to a DBH program requirement may continue using NCTI at their own expense or may replace NCTI with a DBH approved, evidence based cognitive behavioral intervention practice.
- e. The contract provider is responsible for the costs associated with delivering NCTI® services.
- VIII. SCHEDULE A Planning Estimates FY 2026-27 through 2027-28 and SCHEDULE B Program Budget FY 2026-27 through 2027-28 are hereby added as attached.
- IX. ATTACHMENT III Campaign Contribution Disclosure (SB 1439) is hereby removed and replaced with Levine Act – Campaign Contribution Disclosure (formerly referred to as Senate Bill 1439) as attached.

X. All other terms, conditions and covenants in the basic agreement 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 09 2026

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

By Wanda Mohr
Wanda Mohr, Clerk of the Board of Supervisors
of San Bernardino County

By [Signature]
Deputy



Rim Family Services, Inc.

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

Signed by:

By ►

Joscelyn Field

(Authorized signature - sign in blue ink)

Name Joscelyn Field

(Print or type name of person signing contract)

Title Executive Director

(Print or Type)

Dated: 5/19/2026

Address P.O. Box 578

Skyforest, CA 92385

FOR COUNTY USE ONLY

Approved as to Legal Form

► Dawn Martin

Dawn Martin, Deputy County Counsel

Date 5/19/2026

Reviewed for Contract Compliance

► Michael Shin

Michael Shin, Administrative Manager

Date 5/19/2026

Reviewed/Approved by Department

► Joshua Dugas

Joshua Dugas, Acting Director

Date 5/19/2026

SCHEDULES A & B

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Actual Cost Contract (cost reimbursement)

Family Resource Center

Contractor Name: Rim Family Services

Region Mountain Region

Contract # 24-585

Address: 28545 Highway 18
Skyforest, CA 92385

FY 2026 - 2027

Date Form Completed: 5/5/2026

Updated

Prepared by: Michele Hunt
Title: Finance Director

Family Resource Center									
#	COMONENTS	Distribution				TOTAL			
		Mode 15				Mode 45			
		Early Intervention Services				Prevention Services			
		Case Management 01-09	Mental Health Services 10- 19; 30-38; 40-48; 50-57	Mental Health Promotion 10-19	Community Client Services 20-29				
1	EXPENSES								
2	SALARIES	\$ 10,081	\$ 55,445	\$ 32,763	\$ 153,735	\$		\$	252,024
3	BENEFITS	\$ 2,621	\$ 14,416	\$ 8,519	\$ 39,971	\$		\$	65,527
4	(2+3 must equal total staffing costs)	\$ 12,702	\$ 69,861	\$ 41,282	\$ 193,706	\$		\$	317,551
5	OPERATING EXPENSES	\$ 3,298	\$ 68,139	\$ 10,718	\$ 50,284	\$		\$	132,449
6	TOTAL EXPENSES (2+3+5)	\$ 16,000	\$ 138,000	\$ 52,000	\$ 244,000	\$		\$	450,000
7	AGENCY REVENUES								
8	PATIENT FEES							\$	-
9	PATIENT INSURANCE							\$	-
10	GRANTS/OTHER							\$	-
11	TOTAL AGENCY REVENUES (8+9+10)	\$ -	\$ -	\$ -	\$ -	\$		\$	-
12	CONTRACT AMOUNT (6-11)	\$ 16,000	\$ 138,000	\$ 52,000	\$ 244,000	\$		\$	450,000
13	FUNDING								
14	MHSA	\$ 16,000	\$ 138,000	\$ 52,000	\$ 244,000	\$		\$	450,000
15	TOTAL FUNDING	\$ 16,000	\$ 138,000	\$ 52,000	\$ 244,000	\$		\$	450,000
16	TARGET COST PER UNIT OF SERVICE (Minutes)	\$ 0.67	\$ 1.05						
17	UNITS OF TIME (Minutes)	23,962	131,789						
18	UNDUPLICATED PARTICIPANTS								
19	TOTAL UNDUPLICATED PARTICIPANTS	48	50	260	1,892				2,250
20	COST PER UNDUPLICATED PARTICIPANT	\$ 333.33	\$ 2,760.00	\$ 200.00	\$ 128.96	\$		\$	200.00
21	SERVICES								
22	TOTAL SERVICES	144	500	504	4,464				5,812
23	COST PER TOTAL SERVICES	\$ 141.11	\$ 276.00	\$ 103.17	\$ 54.66	\$		\$	80.19

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**

Contractor Name: Rim Family Services
Region Mountain Region
Contract # 24-595
Address: 28545 Highway 18
Skyforest, CA 92385
Date Form Completed: 5/5/2026
Updated

July 1, 2026 - June 30, 2027

Prepared by: Michele Hunt
Title: Finance Director

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.

0

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT (%) CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1 ProWellness Subcontract	\$50,000	0%	\$0	100%	\$50,000
2 Education/Training	\$5,753	0%	\$0	100%	\$5,753
3 Mileage	\$7,000	0%	\$0	100%	\$7,000
4 Office Supplies	\$1,000	0%	\$0	100%	\$1,000
5 Utilities	\$4,500	0%	\$0	100%	\$4,500
6 Program Supplies	\$4,000	0%	\$0	100%	\$4,000
7 Food	\$1,500	0%	\$0	100%	\$1,500
8 Indirect Admin.	\$58,696	0%	\$0	100%	\$58,696
9		100%	\$0		\$0
10		100%	\$0		\$0
11		100%	\$0		\$0
12		100%	\$0		\$0
13		100%	\$0		\$0
14		100%	\$0		\$0
15		100%	\$0		\$0
SUBTOTAL B:	\$132,449		\$0		\$132,449
GROSS TOTAL STAFFING AND OPERATING COSTS					\$450,000

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE

July 1, 2026 - June 30, 2027

Contractor Name: Rlm Family Services

Region Mountain Region

Contract # 24-595

Address: 28545 Highway 18

Skyforest, CA 92385

Date Form Completed: 5/5/2028

Updated

Prepared by: Michele Hunt
Title: Finance Director

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.

0

ITEM	Justification of Cost
1 ProWellness Subcontract	These costs include services provided by ProWellness subcontract. Billed at \$100.00 per session.
2 Education/Training	These costs include initial and ongoing training of staff, MHFA Training, SafeTalk, Assist, etc.
3 Mileage	Mileage reimbursement for working with clients and attending meetings. Reimbursement rate according to the IRS guidelines.
4 Office Supplies	Office supplies purchased specifically for the program. i.e. Binders, folders, pens, business cards, stationary, postage, etc.
5 Utilities	Costs to reimburse employee usage of personal cell phones at set rate per Agency policies approved by RFS Board of Directors. Also include costs to launder RFS shirts employees are required to wear at specific client groups, events, etc.
6 Program Supplies	Costs include manuals, activity supplies, materials specific to the program, etc.
7 Food	Costs include food for program groups, events, etc.
8 Indirect Admin.	Costs include indirect administrative costs not identified by any one program. These costs include such expenses as: Accounting, maintenance, utilities, insurance, indirect administrative payroll costs, etc.
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SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B

Contractor Name: Rim Family Services
Region Mountain Region
Contract # 24-595
Address: 28545 Highway 18
Skyforest, CA 92386
Date Form Completed: 5/5/2026
Updated

FY 2026 - 2027
July 1, 2026 - June 30, 2027

Year to Date Unduplicated Participant Count				
Early Intervention		Mental Health Promotion	Comm. Client Services	Program
Case Management	MHS	50	1,892	2,250
48				

Family Resource Center

0

Service Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	12	12	12	12	12	12	12	12	12	12	12	12	144
	Mental Health Services	41	41	41	41	42	42	42	42	42	42	42	42	500
Mental Health Promotion		42	42	42	42	42	42	42	42	42	42	42	42	504
Community Client Services		372	372	372	372	372	372	372	372	372	372	372	372	4464
TOTAL		467	467	467	467	468	468	468	468	468	468	468	468	5612

Hours Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	33	33	33	33	33	33	33	33	33	33	33	33	389
	Mental Health Services	183	183	183	183	183	183	183	183	183	183	183	183	2,196
Mental Health Promotion		108	108	108	108	108	108	108	108	108	108	108	108	1,296
Community Client Services		508	508	508	508	508	508	508	508	508	508	508	508	6,090
TOTAL		832	832	832	832	832	832	832	832	832	832	832	832	9,964

Cost Projections for:		Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Jan-27	Feb-27	Mar-27	Apr-27	May-27	Jun-27	TOTAL
Early Intervention Services	Case Management	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 16,000
	Mental Health Services	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 138,000
Mental Health Promotion		\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 52,000
Community Client Services		\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 244,000
TOTAL		\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 450,000

SCHEDULE A - Planning Estimates

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH

Actual Cost Contract (cost reimbursement)

Family Resource Center

Contractor Name: Rim Family Services

Region Mountain Region

Contract # 24-595

Address: 28545 Highway 18

Skyforest, CA 92385

Date Form Completed: 5/5/2026

Updated

Prepared by:

Michele Hunt

Title:

Finance Director

FY 2027 - 2028

July 1, 2027 - December 31, 2027

Family Resource Center											
		Distribution									
		Mode 15			Mode 45						
		4.00%			22.00%			13.00%		61.00%	
		Early Intervention Services			Prevention Services						
		Case Management 01-09			Mental Health Services 10-19; 30-38; 40-48; 50-57			Mental Health Promotion 10-19		Community Client Services 20-29	

SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH

Schedule B

STAFFING DETAIL
FY 2027 - 2028
July 1, 2027 - December 31, 2027

Contractor Name: Rim Family Services
Contract # 24595

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

CONTRACTOR NAME: Rlm Family Services

[illegible]

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

Contractor Name: Rim Family Services
Region Mountain Region
Contract # 24-595
Address: 28545 Highway 18
Skyforest, CA. 92385
Date Form Completed: 5/5/2026
Updated

July 1, 2027 - December 31, 2027

Prepared by: Michele Hunt
Title: Finance Director

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.

0

ITEM	TOTAL COST TO ORGANIZATION	% CHARGED TO OTHER FUNDING SOURCE	TOTAL COST TO OTHER FUNDING SOURCE	PERCENT (%) CHARGED TO CONTRACT	TOTAL COST TO CONTRACT
1 ProWellness Subcontract	\$25,000	0%	\$0	100%	\$25,000
2 Education/Training	\$508	0%	\$0	100%	\$508
3 Mileage	\$3,500	0%	\$0	100%	\$3,500
4 Office Supplies	\$500	0%	\$0	100%	\$500
5 Utilities	\$2,250	0%	\$0	100%	\$2,250
6 Program Supplies	\$2,000	0%	\$0	100%	\$2,000
7 Food	\$750	0%	\$0	100%	\$750
8 Indirect Admin.	\$29,348	0%	\$0	100%	\$29,348
9		100%	\$0		\$0
10		100%	\$0		\$0
11		100%	\$0		\$0
12		100%	\$0		\$0
13		100%	\$0		\$0
14		100%	\$0		\$0
15		100%	\$0		\$0
SUBTOTAL B:	\$63,856		\$0		\$63,856
GROSS TOTAL STAFFING AND OPERATING COSTS					\$225,000

SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
BUDGET NARRATIVE

July 1, 2027 - December 31, 2027

Contractor Name: Rim Family Services
Region Mountain Region
Contract # 24-595
Address: 28545 Highway 18
Skyforest, CA, 92385
Date Form Completed: 5/5/2026
Updated

Prepared by: Michele Hunt
Title: Finance Director

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.

0

ITEM	Justification of Cost
1 ProWellness Subcontract	These costs include services provided by ProWellness subcontract. Billed at \$100.00 per session
2 Education/Training	These costs include initial and ongoing training of staff, MHFA Training, SafeTalk, Assist, etc.
3 Mileage	Mileage reimbursement for working with clients and attending meetings. Reimbursement rate according to the IRS guidelines.
4 Office Supplies	Office supplies purchased specifically for the program. i.e. Binders, folders, pens, business cards, stationary, postage, etc.
5 Utilities	Costs to reimburse employee usage of personal cell phones at set rate per Agency policies approved by RFS Board of Directors. Also include costs to launder RFS shirts employees are required to wear at specific client groups, events, etc.
6 Program Supplies	Costs include manuals, activity supplies, materials specific to the program, etc.
7 Food	Costs include food for program groups, events, etc.
8 Indirect Admin.	Costs include indirect administrative costs not identified by any one program. These costs include such expenses as: Accounting, maintenance, utilities, insurance, indirect administrative payroll costs, etc.
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SAN BERNARDINO COUNTY
DEPARTMENT OF BEHAVIORAL HEALTH
SCHEDULE B
FY 2027 - 2028

July 1, 2027 - December 31, 2027

Contractor Name: Rim Family Services
Region Mountain Region
Contract # 24-695
Address: 28545 Highway 18
Skyforest, CA, 92385
Date Form Completed: 5/5/2026
Updated

Year to Date Unduplicated Participant Count			
Case Management	MHS	Mental Health Promotion	Comm. Client Services
24	26	130	946
			1,125

Family Resource Center

0

Service Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	12	12	12	12	12	12							72
	Mental Health Services	41	41	42	42	42	42							250
Mental Health Promotion		42	42	42	42	42	42							252
Community Client Services		372	372	372	372	372	372							2232
TOTAL		467	467	468	468	468	468	0	0	0	0	0	0	2806

Hours Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	33	33	33	33	33	33							198
	Mental Health Services	182	182	182	182	182	182							1,089
Mental Health Promotion		107	107	107	107	107	107							844
Community Client Services		503	503	503	503	503	503							3,020
TOTAL		825	825	825	825	825	825	0	0	0	0	0	0	4,950

Cost Projections for:		Jul-27	Aug-27	Sep-27	Oct-27	Nov-27	Dec-27	Jan-28	Feb-28	Mar-28	Apr-28	May-28	Jun-28	TOTAL
Early Intervention Services	Case Management	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333	\$ 1,333							\$ 8,001
	Mental Health Services	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500	\$ 11,500							\$ 89,000
Mental Health Promotion		\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333	\$ 4,333							\$ 26,000
Community Client Services		\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333	\$ 20,333							\$ 122,000
TOTAL		\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ 37,500	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 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-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 pages. If a question does not apply respond N/A or Not Applicable.

1. Name of Contractor: Rim Family 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: _____
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):

5. Name of any parent, subsidiary, or otherwise related entity for the entity listed in Question No. 1 (see definitions above):

Company Name	Relationship
N/A	

6. Name of agent(s) of Contractor:

Company Name	Agent(s)	Date Agent Retained (if less than 12 months prior)
Rim Family Services	Joscelyn Field	
Rim Family Services	Michele Hunt	

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):
ProWellness Academy	ProWellness Academy	Cynthia Kiefer

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
N/A	

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 ☒

Yes ☐ If **yes**, please provide the contribution information in Question 11.

10. Has an agent of Contractor made a campaign contribution of any amount to any member of the San Bernardino County Board of Supervisors or other elected officer involved with this Contract while award of this Contract is being considered?

No ☒

Yes ☐ If **yes**, please provide the contribution information in Question 11.

11. Name of Board of Supervisor Member or other County elected officer: N/A

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 acknowledges that agents are prohibited from making any campaign contributions, regardless of amount, to any member of the Board of Supervisors or other County elected officer involved with this Contract, while award of this Contract is being considered and for 12 months after a final decision by the County. Contractor understands that the other individuals and entities (excluding agents) 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 involved with this Contract, while award of this Contract is being considered and for 12 months after a final decision by the County.