

## Addendum 2 to Service Agreement # Q141018

This Addendum 2 (this "Addendum") is made by and between County of San Bernardino on behalf of Arrowhead Regional Medical Center ("Customer") and Agiliti Imaging, Inc. fka Radiographic Equipment Services ("Agiliti") and modifies the terms of Service Agreement #Q141018 (the "Agreement") between the parties as follows:

1. Effective as of August 26, 2020, amend the Equipment List (Schedule B) of the Agreement to <u>remove</u> the following:

Location	Room	Manufac turer	Description	BEIC	RES	Coverage	Annual Amount
Arrowhead Regional Medical Center ("ARMC")	IR	Siemens	Siemens Polystar IR Room	B001262	16253	System Removal	\$50,900.00

Agiliti Imaging, Inc.

8320 Juniper Creek Lane • San Diego, CA • 92126 • (858) 586-9375 ph • (858) 586-9380 fax www.agilitihealth.com



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- 2. Effective as of August 26, 2020, amend Section B of the Agreement to remove the following: "Siemens Polystar IR System"
- 3. Any work to be performed on the equipment set forth in this Addendum by Agiliti, outside the scope of the Agreement, will be based on the rates established for "Diagnostic-Xray" as set forth in the section entitled "Outside Agreement Pricing" in the Agreement.
- 4. **Payment Terms:** System Removal, decrease of \$4,241.66 per month.
- 5. **Full Force and Effect**. The Agreement, as amended by this Addendum, remains in full force and effect.
- 6. **Capitalized Terms.** Any capitalized term used but not defined in this Addendum shall have the meaning given to it in the Agreement.



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7. **Counterparts.** This Addendum 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 Addendum. The Parties shall be entitled to sign and transmit an electronic signature of this Addendum (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 Addendum upon request.

IN WITNESS WHEREOF, the County of San Bernardino on behalf of Arrowhead Regional Medical Center and Agiliti have each caused this Addendum to be subscribed by its respective duly authorized officers, on its behalf.



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Customer:	County of San Bernardino on behalf of Arrowhead Regional Medical Center	Agiliti			
Author	zed Agent	Authorized A	gent		
Curt Hagm	an				
Signer's Nam	e, Typed or Printed	Signer's Name, Type	Signer's Name, Typed or Printed		
Chairman, Board of St	upervisors				
Signer's Title	Date	Signer's Title	Date		

Agiliti Imaging, Inc.