



Contract Number

22-88 A-2

SAP Number

Children and Family Services

Department Contract Representative Telephone Number	Jose Arriola, Contract Analyst (909) 388-0320
Contractor	Family Assistance Program
Contractor Representative Telephone Number	Darryl Evey (760) 843-0701
Contract Term	February 9, 2022, through August 31, 2025
Original Contract Amount	\$4,420,248
Amendment Amount	\$2,258,328
Total Contract Amount	\$6,678,576
Cost Center	5017031000
Grant Number (if applicable)	

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 2:

It is hereby agreed to amend Contract No. 22-88, effective immediately upon execution, as follows:

SECTION V. FISCAL PROVISIONS

Amend Paragraph A to read as follows:

The maximum amount of reimbursement shall not exceed \$6,678,576 and shall be subject to availability of funds to the County. The Consideration to be paid to Contractor, as provided herein, shall be in full payment for all Contractor's services and expenses incurred in the performance, hereof, including travel and per diem.

SECTION VIII. TERM

Amend Section VIII. TERM to read as follows:

This Contract is effective as of February 9, 2022 and is extended from its amended expiration date of August 31, 2024, to expire on August 31, 2025, but may be terminated earlier in accordance with provisions of Section IX of the Contract. The Contract term may be extended for one (1) additional one (1) year period by mutual agreement of the parties.

ATTACHMENTS

Amend Attachment C –

Add Program Budget for the period September 1, 2024 through August 31, 2025, which is attached to this Amendment No. 2 and incorporated by reference.

All other terms and conditions of Contract No. 22-88 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.

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

Family Assistance Program

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

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

Name Darryl Evey
(Print or type name of person signing contract)

Title Executive Director
(Print or Type)

Dated: _____

Address 15075 7th Street
Victorville, CA 92395

FOR COUNTY USE ONLY

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

Reviewed for Contract Compliance
►
Patty Steven, Contracts Manager
Date _____

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

PROGRAM BUDGET				
FAMILY ASSISTANCE PROGRAM				
Youth Shelter for Children and Family Services				
September 1, 2024 - August 31, 2025				
SALARY AND BENEFITS				
Description	Total FTEs	Total Cost to the Organization	Percent Charged to Program	Proposed Budget Amounts
Job Title: Shelter Manager	2.00			
Salary @ \$32 per hour	2.00	\$ 176,640.00	100.00%	\$ 176,640.00
Benefits	2.00	\$ 52,992.00	100.00%	\$ 52,992.00
Job Title: Social Worker	1.00			
Salary @ \$35 per hour	1.00	\$ 96,600.00	100.00%	\$ 96,600.00
Benefits	1.00	\$ 28,980.00	100.00%	\$ 28,980.00
Job Title: Lead Staff	6.00			
Salary @ \$25 per hour	6.00	\$ 414,000.00	100.00%	\$ 414,000.00
Benefits	6.00	\$ 124,200.00	100.00%	\$ 124,200.00
Job Title: Shelter Staff	12.00			
Salary @ \$20 per hour	12.00	\$ 662,400.00	100.00%	\$ 662,400.00
Benefits	12.00	\$ 165,600.00	100.00%	\$ 165,600.00
Job Title: Crisis Intervention Counselor	1.00			
Salary @ \$32 per hour	1.00	\$ 88,320.00	100.00%	\$ 88,320.00
Benefits	1.00	\$ 26,496.00	100.00%	\$ 26,496.00
Subtotals:		\$ 1,836,228.00		\$ 1,836,228.00
OPERATIONAL				
Description		Total Cost to the Organization	Percent Charged to Program	Proposed Budget Amounts
Transportation		\$ 18,000.00	100.00%	\$ 18,000.00
Liability Insurance		\$ 96,000.00	20.00%	\$ 19,200.00
Facility Charges		\$ 120,000.00	100.00%	\$ 120,000.00
Office Supplies		\$ 24,000.00	100.00%	\$ 24,000.00
Maintenance and Repairs		\$ 48,000.00	100.00%	\$ 48,000.00
Staff Training		\$ 12,000.00	100.00%	\$ 12,000.00
Utilities and Telephone		\$ 36,000.00	100.00%	\$ 36,000.00
Client Expenditures - Activities		\$ 36,000.00	100.00%	\$ 36,000.00
Client Expenditures - Clothing		\$ 43,200.00	100.00%	\$ 43,200.00
Client Expenditures - Consumable		\$ 65,700.00	100.00%	\$ 65,700.00
				\$ 422,100.00
		TOTAL ANNUAL BUDGET:		\$ 2,258,328.00