



Contract Number

SAP Number
N/A

Department of Behavioral Health

Department Contract Representative	<u>Diana Barajas</u>
Telephone Number	<u>(909) 388-0862</u>
Contractor	<u>California Mental Health Services Authority Joint Exercise Power Authority</u>
Contractor Representative	<u>Holly Petrosyan</u>
Telephone Number	<u>(279) 234-0718</u>
Contract Term	<u>July 1, 2023 through June 30, 2025</u>
Original Contract Amount	<u>\$112,160</u>
Amendment Amount	<u>N/A</u>
Total Contract Amount	<u>\$112,160</u>
Cost Center	<u> </u>

Briefly describe the general nature of the contract:

Participation Agreement (Agreement No. 4634-SHB-2023-SBR) with California Mental Health Services Authority Joint Exercise Power Authority for the State Hospitals Program, including on standard terms, for the State Hospital Program in the amount of \$112,160, effective July 1, 2023 through June 30, 2025.

FOR COUNTY USE ONLY

Approved as to Legal Form ▶ _____ Dawn Martin, Deputy County Counsel Date _____	Reviewed for Contract Compliance ▶ _____ Ellayna Hoatson, Contracts Supervisor Date _____	Reviewed/Approved by Department ▶ _____ Georgina Yoshioka, Director Date _____
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