

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



Contract Number
19-611 A1

SAP Number
N/A

Department of Aging and Adult Services

Department Contract Representative	<u>Sharon Nevins</u>
Telephone Number	<u>909.891.3917</u>
Contractor	<u>California Department of Aging</u>
Contractor Representative	<u>Nate Gillen, Manager</u>
Telephone Number	<u>916.419.7556</u>
Contract Term	<u>July 1, 2019 – September 30, 2020</u>
Original Contract Amount	<u>\$92,071</u>
Amendment Amount	<u>n/a</u>
Total Contract Amount	<u>\$92,071</u>
Cost Center	<u></u>

Amendment No. 1, effective May 19, 2020, to County Contract No. 19-611 (State Revenue Contract No. CF-1920-20) with the California Department of Aging, for the CalFresh Expansion Program, extending the contract period of July 1, 2019 through June 30, 2020, to the new end date of September 30, 2020.

FOR COUNTY USE ONLY

<p>APPROVED BY Legal Form 26E2F588DB6744A5 Jacqueline Carey-Wilson, Deputy County Counsel Date <u>April 30, 2020</u></p>	<p>REVIEWED BY Contract Compliance FAZ5488B19E7485 Jennifer Mulhall-Daudel, Contracts Manager Date <u>May 5, 2020</u></p>	<p>REVIEWED BY Approved by Department 1868DFD46FF6481... Sharon Nevins, Director Date <u>May 5, 2020</u></p>
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State of California-Department of General Services STANDARD AGREEMENT STD 213A (Rev. 7/2019) <input type="checkbox"/> CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED PAGES	AGREEMENT NUMBER	AMENDMENT NUMBER	Purchasing Authority Number
	CF-1920-20	1	

1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

STATE AGENCY NAME

California Department of Aging

CONTRACTOR NAME

County of San Bernardino Aging & Adult Svcs

2. The term of this Agreement is:

START DATE

July 1, 2019

END DATE

September 30, 2020

3. The maximum amount of this Agreement after this Amendment is:

\$ 92,071 Ninety-two thousand seventy-one and 00/100 Dollars

4. The parties agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein.

- A) This amendment adds three months to the contract term. The new end date of the Agreement shall be September 30, 2020.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)

County of San Bernardino Aging & Adult Svcs

CONTRACTOR BUSINESS ADDRESS	CITY	STATE	ZIP
784 E. Hospitality Lane	San Bernardino	CA	92415-0009

PRINTED NAME OF PERSON SIGNING	TITLE
Sharon Nevins	Director

CONTRACTOR AUTHORIZED SIGNATURE	DATE SIGNED
	6/16/20

STATE OF CALIFORNIA

CONTRACTING AGENCY NAME

California Department of Aging

CONTRACTING AGENCY ADDRESS	CITY	STATE	ZIP
1300 National Drive, Suite 200	Sacramento	CA	95834

PRINTED NAME OF PERSON SIGNING	TITLE
Nate Gillen	Chief, Business Management Branch

CONTRACTING AGENCY AUTHORIZED SIGNATURE	DATE SIGNED
	6/25/20

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL	EXEMPTION (If Applicable)
	SCM Vol. 1, 4.04 A.4