

**STANDARD AGREEMENT - AMENDMENT**

STD 213A (Rev. 4/2020)

**SCO ID:** CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED \_\_\_\_\_ PAGES

AGREEMENT NUMBER

21MHSOAC027

AMENDMENT NUMBER

02

Purchasing Authority Number

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

CONTRACTING AGENCY NAME

Behavioral Health Services Oversight and Accountability Commission

CONTRACTOR NAME

San Bernardino County

2. The term of this Agreement is:

START DATE

February 1, 2022

THROUGH END DATE

June 30, 2026

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

\$5,998,000.00 Five million nine hundred ninety-eight thousand dollars and no cents

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

Amendment 2:

- Extends end date from January 31, 2026 to June 30, 2026

- The parties recognize that the Mental Health Services Oversight and Accountability Commission (MHSOAC) has been renamed the Behavioral Health Services Oversight and Accountability Commission (BHSOAC), Mental Health Services Act (MHSA) has been renamed to Behavioral Health Services Act (BHSA), and Mental Health Student Services Act (MHSSA) has been renamed to Behavioral Health Student Services Act (BHSSA) effective January 1, 2025. All references to MHSOAC, MHSA, and MHSSA used in this agreement shall be read to mean BHSOAC, BHSA, and BHSSA.

*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.)

San Bernardino County

CONTRACTOR BUSINESS ADDRESS

303 E. Vanderbilt Way

CITY

San Bernardino

STATE

CA

ZIP

92415

PRINTED NAME OF PERSON SIGNING

Dawn Rowe

TITLE

Chair, Board of Supervisors

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

**STANDARD AGREEMENT - AMENDMENT**

STD 213A (Rev. 4/2020)

 CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED \_\_\_\_\_ PAGES**SCO ID:**

AGREEMENT NUMBER 21MHSOAC027	AMENDMENT NUMBER 02	Purchasing Authority Number
---------------------------------	------------------------	-----------------------------

**STATE OF CALIFORNIA**

## CONTRACTING AGENCY NAME

Behavioral Health Services Oversight and Accountability Commission

CONTRACTING AGENCY ADDRESS 1812 9th Street	CITY Sacramento	STATE CA	ZIP 95811
PRINTED NAME OF PERSON SIGNING Brenda Grelish	TITLE Executive Director		
CONTRACTING AGENCY AUTHORIZED SIGNATURE	DATE SIGNED		
CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL	EXEMPTION (If Applicable) WIC 5897(f)		