



**Contract Number**

18-235-A2

**SAP Number**

4400008019

## Department of Aging and Adult Services

<b>Department Contract Representative</b>	<u>Patty Steven</u>
<b>Telephone Number</b>	<u>909.388.0241</u>
<b>Contractor</b>	<u>Trusted Realty Advisors</u>
<b>Contractor Representative</b>	<u>James Trammel, Broker</u>
<b>Telephone Number</b>	<u>909.862.0102</u>
<b>Contract Term</b>	<u>July 1, 2018 through June 30, 2023</u>
<b>Original Contract Amount</b>	<u>N/A</u>
<b>Amendment Amount</b>	<u>N/A</u>
<b>Total Contract Amount</b>	<u>N/A</u>
<b>Cost Center</b>	<u>5360001000</u>

### IT IS HEREBY AGREED AS FOLLOWS:

#### Amendment No. 2

It is hereby agreed to amend Contract No. 18-235, effective July 1, 2022, as follows:

#### VIII. TERM

Section VIII. Term is amended to read as follows:

This Contract is effective as of July 1, 2018 and is extended from its amended expiration date of June 30, 2022, to expire on June 30, 2023, but may be terminated earlier in accordance with provisions of Section IX of the Contract.

**All other terms and conditions of Contract No. 18-235 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

►

\_\_\_\_\_  
Curt Hagman, Chairman, 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

Trusted Realty Advisors

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

By ►

\_\_\_\_\_  
(Authorized signature - sign in blue ink)

Name James Trammell

\_\_\_\_\_  
(Print or type name of person signing contract)

Title Broker

\_\_\_\_\_  
(Print or Type)

Dated: \_\_\_\_\_

Address 7241 Palm Avenue, Suite 200

\_\_\_\_\_  
Highland, CA 02346

**FOR COUNTY USE ONLY**

Approved as to Legal Form

►

\_\_\_\_\_  
Jacqueline Carey-Wilson, Deputy County Counsel

Date \_\_\_\_\_

Reviewed for Contract Compliance

►

\_\_\_\_\_  
Patty Steven, Contracts Manager

Date \_\_\_\_\_

Reviewed/Approved by Department

►

\_\_\_\_\_  
Sharon Nevins, Director,  
Department of Aging and Adult Services

Date \_\_\_\_\_