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

Contract Number

20-1109 A-2

SAP Number 4400004844

Purchasing Department

| Michelle Churchill (909)387-2070 |
|-------------------------------------|
| Modis, Inc. |
| Andrew Balzer |
| 818-531-3405 |
| April 5, 2020 – March 30, 2023 |
| . |
| |
| |
| N/A |
| |

IT IS HEREBY AGREED AS FOLLOWS:

SAN BERNARDINO

OUNT

Amendment No. 2

WITNESSETH:

IN THAT CERTAIN Agreement No. 20-1109 by and between the San Bernardino County ("County") and Modis Inc. ("Contractor") for the provision of IT Staffing Services, which first became effective April 5, 2020, the following changes are hereby made and agreed to effective January 1, 2023:

SECTION II. GENERAL CONTRACT PROVISIONS, SUBSECTION F. TERM OF AGREEMENT is hereby amended to read as follows:

This Contract is effective as of April 5, 2020 and expires March 30, 2023. This Contract may be terminated earlier either automatically, by the execution of a new contract with San Bernardino County for similar provisions of special services or in accordance with provisions of this Contract.

All other terms, conditions, and covenants in the original Agreement remain in full force and effect.

End of Amendment No. 2

IN WITNESS WHEREOF, San Bernardino County and the Contractor have each caused this Amendment No. 2 to the Contract to be subscribed by its respective duly authorized officers, on its behalf.

| SAN BERNARDINO COUNTY | | ▶ | |
|--|---|--------------------------------|----------------------------------|
| | | (Print or type name of corpora | tion, company, contractor, etc.) |
| ▶ | | By 🕨 | |
| Chairman, B | Board of Supervisors | (Authorized sig | nature) |
| Dated: | | Name | |
| SIGNED AND CERTIFIED THAT A COPY OF THIS | | (Print or type na | me of person signing contract) |
| DOCUMENT | HAS BEEN DELIVERED TO THE | | |
| CHAIRMAN OF THE BOARD | | Title | |
| | Lynna Monell Clerk of the Board of Supervisors of the San Bernardino County | | Print or Type) |
| Ву | | Dated: | |
| | Deputy | | |
| | | Address | |
| | | | |

FOR COUNTY USE ONLY

Approved as to Legal Form

Reviewed for Contract Compliance

Reviewed/Approved by Department

County Counsel

Date _____

Date

►

Date