



Contract Number

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SAP Number

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## Department of Behavioral Health

<b>Department Contract Representative</b>	<u>Rebecca Lombard</u>
<b>Telephone Number</b>	<u>(909) 383-3978</u>
<b>Contractor</b>	<u>California State University San Bernardino Police Department</u>
<b>Contractor Representative</b>	<u>Jeffrey Godown</u>
<b>Telephone Number</b>	<u>(909) 537-5165</u>
<b>Contract Term</b>	<u>Date of Execution through December 31, 2027</u>
<b>Original Contract Amount</b>	_____
<b>Amendment Amount</b>	_____
<b>Total Contract Amount</b>	_____
<b>Cost Center</b>	_____

**Briefly describe the general nature of the contract:**

This non-financial Memorandum of Understanding (MOU) serves to identify areas of agreement and responsibility between San Bernardino County Department of Behavioral Health (DBH) and the above-named Contractor/Agency regarding the responsibilities of the Clinical Therapist I for the utilization of a no cost, designated office space within the Agency by DBH Triage, Engagement, and Support Teams (TEST) to provide community crisis triage services for Agency referred clients for the contract period of the Date of Execution through December 31, 2027.

**FOR COUNTY USE ONLY**

<p>Approved as to Legal Form</p> <p>► _____</p> <p>Dawn Martin, Deputy County Counsel</p> <p>Date _____</p>	<p>Reviewed for Contract Compliance</p> <p>► _____</p> <p>Natalie Kessee, Contracts Manager</p> <p>Date _____</p>	<p>Reviewed/Approved by Department</p> <p>► _____</p> <p>Georgina Yoshioka, Director</p> <p>Date _____</p>
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