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



Contract Number	mber	Nμ	ct	ntra	Co
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20-895 A-1

SAP Number

ARROWHEAD REGIONAL MEDICAL CENTER

Department Contract Representative Telephone Number

William L. Gilbert, Hospital Director (909) 580-6150

Contractor **Contractor Representative Telephone Number Contract Term**

Jeffrey N. Roberts, M.D., Inc. Jeffrey Roberts, M.D.

Original Contract Amount Amendment Amount

January 1, 2021 through December 31, 2023

\$1,629,000 (\$543,000 annually) Variables

Total Contract Amount

\$1,629,000 (\$543,000 annually)

Cost Center

plus variables

AMENDMENT NO. 1

San Bernardino County (fka County of San Bernardino) and Jeffrey N. Roberts, M.D., Inc. hereby amend Contract No. 20-895 in the following manner, effective the date this Amendment is fully executed:

1. Add the following language at the end of Section 4.01 of the Contract:

The variable costs associated with this Contract is based on the volume of medical students from California University of Science and Medicine, St. George University, and Western University of Health Sciences that receive instruction from Corporation through a medical rotation at Arrowhead Regional Medical Center and the number of Patton patients treated by Corporation at Arrowhead Regional Medical Center, as set forth in the compensation chart of Section 4.01 of the Contract.

- 2. All references to "County of San Bernardino" in the Contract are amended to read as "San Bernardino County."
- 3. All other terms and conditions of the Contract remain in full force and effect.
- 4. 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 Amendment.

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		EFFREY N. ROBERTS, M.D., INC.
Dawn Rowe, Chair, Board of Supervisor		(Print or type name of corporation, company, contractor, etc.) By (Authorized signature - sign in blue ink)
Dated: MAY 0 9 2023 SIGNED AND CERTIFIED THAT A COP DOCUMENT HAS BEEN DELIVERED T CHAIRMAN OF THE BOARDUPE Lynna Monell Of the County of San By Deputy RDINO COUNTY RDIN COUNTY RDIN COUNTY RDI	PY OF THIS TO THE Supervisors Bernardino	Jeffrey Roberts, M.D. (Print or type name of person signing contract) (Ittle President (Print or Type) Dated: 4/5/23 Address 2506 V15 J2 CT Narco, CA 92860
OR COUNTY USE ONLY pproved as to Logar Form	Reviewed for Contract Compliance	Reviewed/Abstoved by perstment
		711 VI-100
harles Phan, Deputy County Counsel	<u> </u>	William L./Gilbert, Hospital Difector
ate 4/25/2023	Data	1/25/23