



Contract Number
19-457-A-1

SAP Number
N/A

Department of Aging and Adult Services

Department Contract Representative	Sharon Nevins
Telephone Number	909.891.3917
Contractor	California Department of Aging
Contractor Representative	Nate Gillen, Manager
Telephone Number	916.419.7556
Contract Term	July 1, 2019 – June 30, 2020
Original Contract Amount	\$7,536,830
Amendment Amount	\$ 234,241
Total Contract Amount	\$7,771,071
Cost Center	5290001036

Amendment No. 1, effective November 5, 2019, to County Contract No. 19-457 (State Revenue Agreement No. AP-1920-20) with the California Department of Aging for Area Plan services increasing the total contract amount by \$234,241, from \$7,536,830 to \$7,771,071, replacing Exhibit B, pages 13 and 14, with no change to the existing term of July 1, 2019 through June 30, 2020.

FOR COUNTY USE ONLY

Approved as to Legal Form

►
Jacqueline Carey-Wilson, Deputy County Counsel

Date 10/25/19

Reviewed for Contract Compliance

►
Jennifer Mulhall-Daudel, Contracts Manager

Date 10/28/19

Reviewed/Approved by Department

►
Sharon Nevins, Director

Date 10/29/19

STANDARD AGREEMENT AMENDMENT

STD. 213 A (Rev 6/03)

☒ **CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED** 2 Pages

AGREEMENT NUMBER

AP-1920-20

REGISTRATION NUMBER

AMENDMENT NUMBER

1

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

STATE AGENCY'S NAME

California Department of Aging

CONTRACTOR'S NAME

County of San Bernardino Aging & Adult Svcs

2. The term of this

Agreement is July 1, 2019 through June 30, 2020

3. The maximum amount of this
- \$ 7,771,071**

Agreement after this amendment is: Seven million seven hundred seventy-one thousand seventy-one and 00/100 dollars

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:

This amendment increases funds provided to the Contractor by \$234,241.

The attached Budget Display pages 13 & 14 of Exhibit B, dated 7/1/19, and labeled Amendment #1, hereby replaces the Original Exhibit B - Budget Display, pages 13 & 14, with the same date. The Budget, Amendment 1 is hereby incorporated by reference and replaces the original Budget.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR

CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.)

County of San Bernardino Aging & Adult Svcs

BY (Authorized Signature)



DATE SIGNED (Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

Sharon Nevins, Director

ADDRESS

784 E. Hospitality Lane San Bernardino CA 92415-0009

STATE OF CALIFORNIA

AGENCY NAME

California Department of Aging

BY (Authorized Signature)



DATE SIGNED (Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

Nate Gillen, Chief, Business Management Branch

ADDRESS

1300 National Drive, Ste. 200, Sacramento, CA 95834

CALIFORNIA
Department of General Services
Use Only

☒ Exempt per: AG OP 80-111