

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


Contract Number
 19-457 A-3

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, 2021
Original Contract Amount	\$9,200,959
Amendment Amount	
Total Contract Amount	\$9,200,959
Cost Center	5290001036

Amendment No. 3, effective June 2, 2020, to County Revenue Contract No. 19-457 (State Revenue Agreement No. AP-1920-20) with the California Department of Aging for Area Plan services, will extend the contract for one year, for a total contract period of July 1, 2019 through June 30, 2021, with no change to the total contract amount of \$9,200,959.

FOR COUNTY USE ONLY

Approved as to Legal Form

DocuSigned by:

Signature of Jacqueline Carey-Wilson, Deputy County Counsel.

Date May 16, 2020

Reviewed for Contract Compliance

DocuSigned by:

Signature of Jennifer Mulhall-Dandel, Contracts Manager.

Date May 19, 2020

Reviewed/Approved by Department

DocuSigned by:

Signature of Sharon Nevins, Director.

Date May 19, 2020

State of California-Department of General Services STANDARD AGREEMENT STD 213A (Rev. 7/2019) <input type="checkbox"/> CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED	AGREEMENT NUMBER AP-1920-20	AMENDMENT NUMBER 3	Purchasing Authority Number
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1. This Agreement is entered into between the State Agency and the Contractor named below:

STATE AGENCY NAME
California Department of Aging

CONTRACTOR NAME
County of San Bernardino Aging & Adult Svcs

2. The term of this Agreement is:

START DATE
July 1, 2019

THROUGH END DATE
June 30, 2021

3. The maximum amount of this Agreement after this Amendment is:
\$ 9,200,959 Nine million two hundred thousand nine hundred fifty-nine 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:

A. This amendment extends the contract term for an additional year, to June 30, 2021 for the State funded Nutrition Augmentation program, and allows the contractor to expend State General Funds Nutrition Augmentation Funding during the extension, which was added in Amendment 2. These funds alone may be expended and reimbursed until June 30, 2021. All other funds in this Agreement must be expended, reimbursed, and reported pursuant to the original terms, conditions, and dates in the original Agreement.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)
County of San Bernardino Aging & Adult Svcs

CONTRACTOR BUSINESS ADDRESS 784 E. Hospitality Lane	CITY San Bernardino	STATE CA	ZIP 92415-0009
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PRINTED NAME OF PERSON SIGNING Sharon Nevins	TITLE Director
CONTRACTOR AUTHORIZED SIGNATURE	DATE SIGNED

STATE OF CALIFORNIA

CONTRACTING AGENCY NAME
California Department of Aging

CONTRACTING AGENCY ADDRESS 1300 National Drive, Suite 200	CITY Sacramento	STATE CA	ZIP 95834
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PRINTED NAME OF PERSON SIGNING Nate Gillen	TITLE Chief, Business Management Branch
CONTRACTING AGENCY AUTHORIZED SIGNATURE	DATE SIGNED

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL	EXEMPTION (If Applicable) AG OP 80-111
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