

	Coi	ntrac	t Nu	ımber
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# **Probation Department**

<b>Department Contract Representative</b>	John Greswit (909) 388-0255	
Telephone Number		
Contractor		
Contractor Representative		
Telephone Number		
Contract Term	03-01-17 through 06-30-21	
Original Contract Amount		
Amendment Amount		
Total Contract Amount		
Cost Center	4821001000	

## IT IS HEREBY AGREED AS FOLLOWS:

#### **AMENDMENT NO. 1**

It is hereby agreed to amend Contract No. \_\_\_\_\_\_, effective July 1, 2020, as follows:

## VIII. TERM

Section VIII. TERM is amended to read as follows:

This Contract is effective as of Mach 1, 2017, and is extended from its original expiration date of June 30, 2020, to expire on June 30, 2021, but may be terminated earlier in accordance with provisions of Section IX of the Contract. The Contract term may be extended for one (1) additional one-year period by mutual agreement of the parties.

## XI. CONCLUSION

Section XI, Paragraph C is amended to read as follows:

C. This Contract 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 Contract. The parties shall be entitled to sign and transmit an electronic signature of this Contract (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 Contract upon request.

Section XI, Paragraph D is added as follows

D. **IN WITNESS WHEREOF**, the Board of Supervisors of the County of San Bernardino has granted authorization to the Chief Probation Officer to subscribe to this Contract, and Contractor has caused this Contract to be subscribed in its behalf by its duly authorized officers, the day, month and year written.

All other terms and conditions of Contract No.	remain in full force and effect.
COUNTY OF SAN BERNARDINO	
	(Print or type name of corporation, company, contractor, etc.)
<b>&gt;</b>	By(Authorized signature - sign in blue ink)
Purchasing Agent, Purchasing Department	
Dated:	Name (Print or type name of person signing contract)
	Title(Print or Type)
	Dated:
	Address