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



Contract Number

16-08 A6

SAP Number 440000567

Sheriff/Coroner/Public Administrator

Department Contract Representative	John Ades, Captain
Telephone Number	(909) 387-0640

Liberty Healthcare Corporation Contractor **Contractor Representative** Kenneth Carabello **Telephone Number** (800) 331-7122 01-12-2016 to 01-11-2022 Contract Term **Original Contract Amount** \$46,169,272 Amendment Amount \$27,464,933 **Total Contract Amount** \$73,634,205 **Cost Center** 4424601000

IT IS HEREBY AGREED AS FOLLOWS:

Amendment No. 6

Contract No. 16-08 is hereby amended effective July 1, 2020 as follows:

- 1. Amend Section C as follow: To extend the Agreement's term through January 11, 2022 by deleting the section's first sentence and replace it with "This Agreement shall commence January 12, 2016 and continue until January 11, 2022 ("Term")".
- 2. Amend Section D as follow: To increase the total amount of the Agreement by \$27,464,933 by deleting the section's first sentence and replace it with: "The maximum amount of payment under this Agreement shall not exceed \$73,634,205 for the Term of the Agreement unless amended by the Board of Supervisors."
- 3. Amend Section G as follow: By adding section G.1 that reads: "If applicable, due to and for the duration of the COVID-19 pandemic, pursuant to the Uniform Electronic Transaction Act (Cal. Civ. Code §§ 1633.1 to 1633.17), and the San Bernardino County Board of Supervisors Resolution No. 2020-030, the parties hereto authorize the use of electronic, facsimile, and/or digital signatures in the execution of amendments to this Contract. Such signatures 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 amendment upon request."

Standard Contract Page 1 of 2

Except as amended all other terms and conditions of this contract remain unchanged. COUNTY OF SAN BERNARDINO Liberty Healthcare Corporation (Print or type name of corporation, company, contractor, etc.) (Authorized signature - sign in blue ink) Curt Hagman, Chairman, Board of Supervisors Dated: Name (Print or type name of person signing contract) SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD Lynna Monell (Print or Type) Clerk of the Board of Supervisors of the County of San Bernardino Dated: Deputy Address 401 East City Avenue, suite 820 Bala Cynwyd, PA 19004 FOR COUNTY USE ONLY Approved as to Legal Form Reviewed for Contract Compliance Reviewed/Approved by Department Richard D. Luczak, Deputy County Counsel John Ades, Captain Date

4. Replace the original "Schedule A – Pricing" referred to in Section D with the "Schedule A – Pricing" attached

hereto and incorporated herein by reference.

Revised 7/15/19 Page 2 of 2