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



Contract Number

20-933 A-2

SAP Number 4400014072

Arrowhead Regional Medical Center

Department Contract Representative Telephone Number	William L. Gilbert 909-580-6150	
Contractor	Harris Koenig & Associates	
Contractor Representative	Harris Koenig & Associates	
Telephone Number		
Contract Term	April 15, 2020 – June 30, 2022	
Original Contract Amount	\$350,000	
Amendment Amount	\$200,000	
Total Contract Amount	\$550,000	
Cost Center	99.60.1010.13	

AMENDMENT NO. 2

Effective on April 6, 2021, the County of San Bernardino (County) and Harris Koenig & Associates (Koenig) agree to amend the terms of the Contract fully executed between the parties on April 15, 2020, and previously amended on September 29, 2020, as follow:

1. Delete Section D of the Contract in its entirety and replace it with the following:

D. TERM OF CONTRCT

This Contract is effective as of the date it is signed and approved by authorized representatives of both County and Contractor and shall be in effect through June 30, 2022 but may be terminated earlier in accordance with provisions of this Contract.

The County and the Contractor each reserve the right to terminate the Contract, for any reason, with a thirty (30) day written notice of termination. Such termination may include all or part of the services described herein. Upon such termination, payment will be made to the Contractor for services rendered and expenses reasonably incurred prior to the effective date of termination. Upon receipt of termination notice Contractor shall promptly discontinue services unless the notice directs otherwise. Contractor shall deliver promptly to County and transfer title (if necessary) all completed work, and work in progress, including drafts, documents, plans, forms, data, products, graphics, computer programs and reports.

Standard Contract Page 1 of 2

- 2. Delete Section F2 in its entirety and replace it with the following:
 - **F.2** The maximum amount of reimbursement/payment under this Contract shall not exceed \$550,000.00 and shall be subject to availability of other funds to the County. The consideration to be paid to Contractor, as provided herein, shall be in full payment for all Contractor's services and expenses incurred in the performance hereof, including travel and per diem.
- 3. All other terms and conditions of the Contract shall remain in full force and effect.

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.

IN WITNESS WHEREOF, the County of San Bernardino and the Contractor have each caused this Amendment to be subscribed by its respective duly authorized officers, on its behalf.

COUNTY OF SAN BERNARDINO	HARRIS KOENIG & ASSOCIATES (Print or type name of corporation, company, contractor, etc.)	
>	By ►	
Curt Hagman, Chairman, Board of Supervisors	(Authorized signature - sign in blue ink)	
Dated:	Name	
SIGNED AND CERTIFIED THAT A COPY OF THIS	(Print or type name of person signing contract)	
DOCUMENT HAS BEEN DELIVERED TO THE		
CHAIRMAN OF THE BOARD	Title	
Lynna Morell	(Print or Type)	
Clerk of the Board of Supervisors		
of the County of San Bernardino	Dated:	
Ву	Address	
Deputy		

FOR COUNTY USE ONLY		
Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
>	>	•
Charles Phan, Deputy County Counsel		William L. Gilbert, Hospital Director
Date	Date	Date

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