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



Contract Number

15-517 A5

SAP Number 4400001473

Department of Risk Management

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Department Contract Representative	Leanna Williams	
Telephone Number	909-386-8621	
Contractor	Insurity, LLC	
Contractor Representative	Mark Adessky	
Telephone Number	1-514-289-9090 Ext. 10111	
Contract Term	July 28, 2015 through July 27, 2024	
Original Contract Amount	\$2,135,527	
Amendment Amount	\$1,357,378	
Total Contract Amount	\$3,492,905	

IT IS HEREBY AGREED AS FOLLOWS:

Cost Center

(Use space below and additional bond sheets. Set forth service to be rendered, amount to be paid, manner of payment, time for performance or completion, determination of satisfactory performance and cause for termination, other terms and conditions, and attach plans, specifications, and addenda, if any.)

Various

Amendment No. 5 to Contract No. 15-517

WHEREAS, San Bernardino County and Contractor desire to amend and modify the Agreement as follows:

Amendment No. 5 changes the name and taxpayer identification number of Contractor, from Insurity Claims Software, LLC 20-4816586 to Insurity, LLC 37-1651334.

WHEREAS, San Bernardino County and Contractor's predecessor have previously entered into an agreement, Contract No. 15-517, wherein Contractor's predecessor agreed to provide software license and maintenance of the automated claim system SIMS, to assist San Bernardino County, Department of Risk Management in the administration of liability and workers' compensation claims.

WHEREAS, Contractor agrees to assume and perform all responsibilities, obligations and duties of its predecessor under Contract No. 15-517.

WHEREAS, San Bernardino County and Contractor desire to amend and increase the total contract amount by \$1,357,378. **2021-01 Amendment** hereby attached to the agreement, specifies in detail the services and fees included in the total amendment amount.

Standard Contract Page 1 of 3

IV. CONTRACT TERM, is replaced with the following:

A. The term of the Contract(s) awarded will be for a three (3) year period from the date of approval by the County of San Bernardino Board of Supervisors, beginning on July 28, 2015 and ending on July 27, 2018, with the option of two (2) one-year contract extensions, unless terminated earlier as provided within the awarded Contract. If Contract negotiations for renewals are delayed for reasons beyond control of the Contractor, the Contract shall automatically be extended under the same terms and conditions until terminated by written notice by either party or by execution of a new Contract.

Amendment No. 2 and No. 3, executed the two one-year contract extensions, from July 28, 2018 through July 27, 2020.

Amendment No. 4 extended the contract period for one additional year, from July 28, 2020 through July 27, 2021.

Amendment No. 5 will extend the contract period for three additional years, from July 28, 2021 through July 27, 2024.

B. Notice of Cancellation: The Contract may be terminated by any party for any reason upon thirty (30) days' written notice.

Except as amended herein, no other section of the Agreement is amended and all other terms and conditions remain the same.

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WHEREAS, San Bernardino County and Contractor are currently complying with shelter at home orders due to Covid-19, this agreement may be executed in any number of counterparts, each of which so executed shall be deemed an original, and such counterparts shall together constitute one and the same Agreement. The parties hall be entitled to sign and transmit an electronic signature of this Agreement (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 Agreement upon request.

SAN BERNARDINO COUNTY		INSURITY, LLC		
		(Print or type name of corporation, company, contractor, etc.)		
>		By ►		
Curt Hagman, Chairman, Board of Supe	rvisors	-, <u></u>	(Authorized signature - sign in blue ink)	
Dated:		Name	Mark Adessky	
SIGNED AND CERTIFIED THAT A COF			(Print or type name of person signing contract)	
DOCUMENT HAS BEEN DELIVERED T CHAIRMAN OF THE BOARD	OTHE	Title	General Counsel	
Lynna Monell Clerk of the Board of of the County of San			(Print or Type)	
Ву		Dated:		
Deputy			170 Huyshope Ave.	
		Address	Hartford, CT 06106	
FOR COUNTY USE ONLY				
Approved as to Legal Form	Reviewed for Contract Compliance		Reviewed/Approved by Department	
>	•			
Cynthia O'Neill, County Counsel			LeAnna Williams, Director of Risk Management	
Date	Date		Date	

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