



**Contract Number**

19-372 A-1

**SAP Number**

4400011665

## Department of Aging and Adult Services

<b>Department Contract Representative</b>	Patty Steven
<b>Telephone Number</b>	909.388.0212
<b>Contractor</b>	City of San Bernardino
<b>Contractor Representative</b>	Trudy Panowicz
<b>Telephone Number</b>	909.384.5434
<b>Contract Term</b>	July 1, 2019 through June 30, 2022
<b>Original Contract Amount</b>	\$1,020,000
<b>Amendment Amount</b>	\$ 200,000
<b>Total Contract Amount</b>	\$1,220,000
<b>Cost Center</b>	5292001036

**IT IS HEREBY AGREED AS FOLLOWS:**

### **AMENDMENT NO. 1**

It is hereby agreed to amend Contract No. 19-372, effective May 4, 2021, as follows:

#### **V. FISCAL PROVISIONS**

Paragraph A is amended to read as follows:

- A. The maximum amount payable under this Contract shall not exceed \$1,220,000, of which \$1,220,000 may be federally funded, and shall be subject to availability of 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.

#### **XI. CONCLUSION**

Paragraphs C and D are 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.

D. IN WITNESS WHEREOF, the Board of Supervisors of the County of San Bernardino has caused this Contract to be subscribed to by the Clerk thereof, and Contractor has caused this Contract to be subscribed in its behalf by its duly authorized officers, the day, month, and year written.

**Attachment A - Scope of Work**

**IV. Program Outcomes:**

Section IV. Program Outcomes is amended to read as follows:

Total Number of Meals to be served: 98,720

A minimum of 95% of the total number of meals is to be provided to receive 100% of available funding. The Director of DAAS must approve requests to serve less than 95% of the total number of meals to be provided. All such requests must be in writing.

Program: C-1 (Congregate Meals)	Program C-2 (Home-Delivered Meals)
# of Days of Service: 257	# of Days of Service: N/A
Number of Meals: 98,720	Number of Meals: N/A
Sites to be Served: 5 <sup>th</sup> Street Senior Center New Hope Family Life Center Perris Hill Senior Center Highland Senior Center Lytle Creek Community Center Hernandez Community Center	Areas to be Served: N/A

All other terms and conditions of Contract No. 19-372 remain in full force and effect.

BOARD OF SUPERVISORS

▶  
Curt Hagman, Chairman, Board of Supervisors

Dated: \_\_\_\_\_  
SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

Lynna Monell  
Clerk of the Board of Supervisors  
of the County of San Bernardino

By \_\_\_\_\_  
Deputy

City of San Bernardino  
*(Print or type name of corporation, company, contractor, etc.)*

By ▶ Robert D. Field  
*(Authorized signature - sign in blue ink)*

Name Robert D. Field  
*(Print or type name of person signing contract)*

Title City Manager  
*(Print or Type)*

Dated: 4/8/21

Address 290 North D Street

San Bernardino, CA 92401

**FOR COUNTY USE ONLY**

Approved as to Legal Form  
▶  
Jacqueline Carey-Wilson, Deputy County Counsel

Reviewed for Contract Compliance  
▶  
Jennifer Mulhall-Daudel, Contracts Manager

Reviewed/Approved by Department  
▶  
Sharon Nevins, Director,  
Department of Aging and Adult Services

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

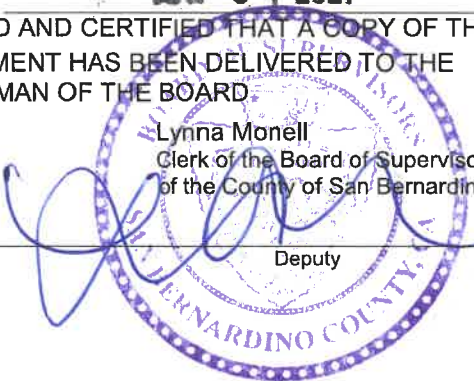
All other terms and conditions of Contract No. 19-372 remain in full force and effect.

BOARD OF SUPERVISORS

▶ *Curt Hagman*  
Curt Hagman, Chairman, Board of Supervisors

Dated: MAY 04 2021  
SIGNED AND CERTIFIED THAT A COPY OF THIS DOCUMENT HAS BEEN DELIVERED TO THE CHAIRMAN OF THE BOARD

By *Lynna Monell*  
Lynna Monell  
Clerk of the Board of Supervisors  
of the County of San Bernardino  
Deputy



City of San Bernardino  
(Print or type name of corporation, company, contractor, etc.)

By ▶ \_\_\_\_\_  
(Authorized signature - sign in blue ink)

Name Robert Field  
(Print or type name of person signing contract)

Title City Manager  
(Print or Type)

Dated: \_\_\_\_\_

Address 290 North D Street  
San Bernardino, CA 92401

**FOR COUNTY USE ONLY**

Approved as to Legal Form  
DocuSigned by:  
*Jacqueline Carey-Wilson*  
Jacqueline Carey-Wilson, Deputy County Counsel  
Date April 12, 2021

Reviewed for Contract Compliance  
DocuSigned by:  
*Jennifer Mulhall-Dandel*  
Jennifer Mulhall-Dandel, Contracts Manager  
Date April 13, 2021

Reviewed/Approved by Department  
DocuSigned by:  
*Sharon Nevins*  
Sharon Nevins, Director,  
Department of Aging and Adult Services  
Date April 12, 2021