

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

**Contract Number****16-533 A-3****SAP Number****4400003729**

## Department of Behavioral Health

<b>Department Contract Representative</b>	Bishoy Bestawros
<b>Telephone Number</b>	(909) 388-0856
<b>Contractor</b>	Trinity Youth Services
<b>Contractor Representative</b>	James Adams
<b>Telephone Number</b>	(714) 713-0561
<b>Contract Term</b>	July 1, 2016 through December 31, 2021
<b>Original Aggregate Contract Amount</b>	\$17,794,525
<b>Amendment Amount</b>	\$1,979,453
<b>Total Aggregate Contract Amount</b>	\$19,773,978
<b>Cost Center</b>	9207081000

THIS CONTRACT is entered into in the State of California by and between the County of San Bernardino, hereinafter called the County, and Trinity Youth Services referenced above, hereinafter called Contractor.

### IT IS HEREBY AGREED AS FOLLOWS:

#### WITNESSETH:

IN THAT CERTAIN **Contract No. 16-533** by and between the County of San Bernardino, a political subdivision of the State of California, and Contractor for Foster Family Agency Mental Health Services, which Contract first became effective July 1, 2016, the following changes are hereby made and agreed to, effective July 1, 2021:

I. AGGREGATE FISCAL PROVISIONS, is hereby amended to read as follows:

**AGGREGATE FISCAL PROVISIONS**

**Term:** July 1, 2016 through December 31, 2021, in accordance with Article VI. Funding and Article V Payment.

**Aggregate Maximum Obligation:**

Fiscal Year 2016-17			\$2,958,905
Fiscal Year 2017-18			\$2,958,905
Fiscal Year 2018-19	Mode 05 \$1,000,000	Mode 15 \$2,958,905	\$3,958,905
Fiscal Year 2019-20	Mode 05 \$1,000,000	Mode 15 \$2,958,905	\$3,958,905
Fiscal Year 2020-21	Mode 05 \$1,000,000	Mode 15 \$2,958,905	\$3,958,905
Fiscal Year 2021-22	Mode 05 \$500,000	Mode 15 \$1,479,453	\$1,979,453

**TOTAL AGGREGATE MAXIMUM OBLIGATION:**

\$2,958,905 per Fiscal Year for 2016-17 and 2017-18  
 \$3,958,905 per Fiscal Year for 2018-19, 2019-20, 2020-21  
 \$1,979,453 for the period July 1, 2021 through December 31, 2021

**Basis for Reimbursement:**

The most recent Cost Report or County Contract Rate (CCR) or Provider Target rate, whichever is lower, shall prevail.

**Basis for Final Reimbursement**

See Article VII, Paragraph E.

**Notices to County and Contractor:**

COUNTY: County of San Bernardino  
 Department of Behavioral Health  
 Fiscal Services  
 303 East Vanderbilt Way  
 San Bernardino, CA 92415-0026

CONTRACTOR: Trinity Youth Services  
 201 North Indian Hill Boulevard, Suite A-201  
 Claremont, CA 91711

III. ARTICLE XIII Duration and Termination paragraph A, is hereby amended to read as follows:

A. The term of this Agreement shall be from July 1, 2016 through December 31, 2021 inclusive.

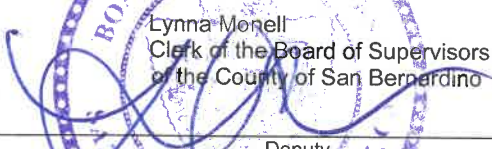
IV. All other terms, conditions and covenants in the basic agreement remain in full force and effect.

This Agreement 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 Agreement. The parties shall 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.

COUNTY OF SAN BERNARDINO

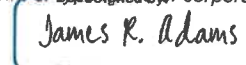
By   
Curt Hagman, Chairman, Board of Supervisors

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  
Clerk of the Board of Supervisors  
of the County of San Bernardino  
Deputy

Trinity Youth Services

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

By   
James R. Adams  
F348D65C6E9E4A9...  
(Authorized signature - sign in blue ink)

Name James R. Adams  
(Print or type name of person signing contract)

Title Dir-MH Services  
(Print or Type)

Dated: 4/22/2021

Address 4/22/21

PO Box 1210, Claremont, CA 91711

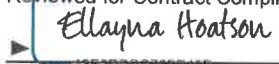
**FOR COUNTY USE ONLY**

Approved by Legal Form

By   
Dawn Martin, Deputy County Counsel


Date 4/22/2021

Reviewed by Contract Compliance

By   
Ellayna Hoatson  
Natalie Kessee, Contracts Manager

Date 4/22/2021  
Ellayna Hoatson

Reviewed/Approved by Department

By   
Veronica Kelley, Director

Date 4/22/2021