

BOS AGREEMENT NO. 24-082

AMENDMENT #1

Original Agreement	PA-24-58 PH-23-040
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**AMENDMENT TO COUNTY OF MENDOCINO  
AGREEMENT NO. PA-24-58, PH-23-040**

This Amendment to Agreement No. PA-24-58, PH-23-040 is entered into by and between the **COUNTY OF MENDOCINO**, a political subdivision of the State of California, hereinafter referred to as "COUNTY," and **HARWOOD MEMORIAL PARK DBA LAYTONVILLE HEALTHY START**, hereinafter referred to as "CONTRACTOR," the date this Amendment is fully executed by all parties.

WHEREAS, Agreement No. PA-24-58, PH-23-040 was entered into on March 26, 2024 (the "Initial Agreement"); and

WHEREAS, upon execution of this document by COUNTY and CONTRACTOR, this Amendment will become part of the Initial Agreement and shall be incorporated therein; and

WHEREAS, it is the desire of COUNTY and CONTRACTOR to update the start date of the Initial Agreement, changing it from March 26, 2024 to October 1, 2023.

NOW, THEREFORE, we agree as follows:

1. The start date set out in the Initial Agreement is hereby changed from March 26, 2024 to October 1, 2023.

All other terms and conditions of the Initial Agreement shall remain in full force and effect.

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

By: [Signature]  
DEPARTMENT HEAD

Date: 5/15/24

Budgeted: Yes  
Budget Unit: 4010  
Line Item: 86-2189  
Org/Object Code: PHSNAP  
Grant: Yes  
Grant No.: 23-10326

COUNTY OF MENDOCINO

By: [Signature]  
MAUREEN MULHEREN, Chair  
BOARD OF SUPERVISORS

Date: 06/04/2024

ATTEST:

DARCIE ANTLE, Clerk of said Board

By: [Signature]  
Deputy 06/04/2024

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

DARCIE ANTLE, Clerk of said Board

By: [Signature]  
Deputy 06/04/2024

INSURANCE REVIEW:

By: [Signature]  
Risk Management

Date: 05/13/2024

CONTRACTOR/COMPANY NAME

By: [Signature]  
Jayma Shields Spence, Director

Date: 5/15/2024

NAME AND ADDRESS OF CONTRACTOR:

HARWOOD MEMORIAL PARK DBA  
LAYTONVILLE HEALTHY START  
PO Box 1382  
Laytonville, CA 95454  
707-984-8089  
jayma@laytonville.org

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

COUNTY COUNSEL REVIEW:

APPROVED AS TO FORM:

By: [Signature]  
COUNTY COUNSEL

Date: 05/13/2024

EXECUTIVE OFFICE/FISCAL REVIEW:

By: [Signature]  
Deputy CEO or Designee

Date: 05/13/2024

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors  
Exception to Bid Process Required/Completed ☐ RFP# 048-23  
Mendocino County Business License: Valid ☐  
Exempt Pursuant to MCC Section: Non-Profit