BOS AGREEMENT NO	
AMENDMENT #1	
Original Agreement	BOS-25-087

## AMENDMENT TO COUNTY OF MENDOCINO AGREEMENT NO. BOS-25-087

This Amendment to Agreement No. BOS-25-087 is entered into by and between the **COUNTY OF MENDOCINO**, a political subdivision of the State of California, hereinafter referred to as "COUNTY," and **DAVIS GUEST HOME**, **INC.**, hereinafter referred to as "CONTRACTOR," the date this Amendment is fully executed by all parties.

WHEREAS, Agreement No. BOS-25-087 was entered into on July 1, 2025 (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 increase the total amount payable by \$250,000 from \$350,000 to \$600,000.

NOW, THEREFORE, we agree as follows:

1. The total contracted amount set out in the Initial Agreement is hereby increased by \$250,000 from \$350,000 to \$600,000.

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

## IN WITNESS WHEREOF CONTRACTOR/COMPANY NAME DEPARTMENT FISCAL REVIEW: Jerine Miller, Psy.D., Lonny Davis, Owner Director of Health Services 11/3/2025 Date: 11/17/25 Date: Budgeted: No NAME AND ADDRESS OF CONTRACTOR: Budget Unit: 4050 Line Item: 86-3162 DAVIS GUEST HOME, INC. Org/Object Code: MHMS75 1878 E. Hatch Road Grant: No Modesto, CA 95351 Grant No.: 'N/A' 209-538-1496 dgh@davisguesthome.com COUNTY OF MENDOCINO By signing above, signatory warrants and represents that he/she executed this Agreement in By: his/her authorized capacity and that by his/her JOHN HASCHAK, Chair signature on this Agreement, he/she or the entity **BOARD OF SUPERVISORS** upon behalf of which he/she acted, executed this Agreement Date: ATTEST: COUNTY COUNSEL REVIEW: DARCIE ANTLE, Clerk of said Board Deputy I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made. Date: 10/28/2025 DARCIE ANTLE, Clerk of said Board Deputy **EXECUTIVE OFFICE/FISCAL REVIEW:** INSURANCE REVIEW: By: By: Risk Management

Signatory Authority: \$0-25,000 Department; \$25,001-50,000 Purchasing Agent; \$50,001+ Board of Supervisors

Exception to Bid Process Required/Completed 
☐ EB# 25-116

Mendocino County Business License: Valid

10/28/2025

Exempt Pursuant to MCC Section: Located outside Mendocino County