

**AMENDMENT TO BOARD OF SUPERVISORS
AGREEMENT NO. 22-125**

This Amendment to BOS Agreement No. 22-125 is entered into this 7th day of February, 2023, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and **Crestwood Behavioral Health, Inc.**, hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. 22-125 was entered into on July 1, 2022; and

WHEREAS, upon execution of this document by the Chair of the Mendocino County Board of Supervisors and CONTRACTOR, this document will become part of the aforementioned contract and shall be incorporated therein; and

WHEREAS, it is the desire of CONTRACTOR and COUNTY to increase the amount set out in the original BOS Agreement No. 22-125, from \$350,000 to \$650,000; and

NOW, THEREFORE, we agree as follows:

1. The amount set out in the original BOS Agreement No. 22-125 is hereby increased from \$350,000 to \$650,000.

All other terms and conditions of BOS Agreement No. 22-125 shall remain in full force and effect.

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

By: [Signature]
Jenine Miller, Psy.D. Behavioral Health Director

Date: 1/10/23

Budgeted: Yes No

Budget Unit: 4050

Line Item: 86-3162

Org/Object Code: MHMS75

Grant: Yes No

Grant No.:

COUNTY OF MENDOCINO

By: [Signature]
GLENN MCGOURTY, Chair
BOARD OF SUPERVISORS

Date: 02/07/2023

ATTEST:

DARCIE ANTLE, Clerk of said Board

By: [Signature]
Deputy 02/07/2023

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 02/07/2023

INSURANCE REVIEW:

By: [Signature]
Risk Management

Date: 01/09/2023

CONTRACTOR/COMPANY NAME

By: [Signature]
Elena Mashkevich, Director of County Contracts

Date: 1/11/2023

NAME AND ADDRESS OF CONTRACTOR:

Crestwood Behavioral Health, Inc.
520 Capitol Mall, Suite 800
Sacramento, CA 95814

916-764-5310; elena.mashkevich@cbhi.net

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:

CHRISTIAN M. CURTIS,
County Counsel

By: [Signature]
Deputy

Date: 01/09/2023

EXECUTIVE OFFICE/FISCAL REVIEW:

By: [Signature]
Deputy CEO or Designee

Date: 01/09/2023

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors
Exception to Bid Process Required/Completed EB 23-62
Mendocino County Business License: Valid
Exempt Pursuant to MCC Section: out of county contractor