STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

SCO ID: 4265-2210260-A1 BOS Agreement

STANDARD AGREEMENT - AMENDMENT			*22-	-236-A1
STD 213A (Rev. 4/2020)	AGREEMENT NUMBER	AMENDMENT NUMBER	Purchasing Autho	rity Number
CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED 1 PAGES	22-10260	A01		
1. This Agreement is entered into between the Contracting Agen	cy and the Contractor named	below:		
CONTRACTING AGENCY NAME  California Dopartment of Bublic Health				
California Department of Public Health				
CONTRACTOR NAME County of Mendocino				
2. The term of this Agreement is:				
October 1, 2022				
THROUGH END DATE September 30, 2025				
3. The maximum amount of this Agreement after this Amendment \$ 3,400,221.00 Three Million Four Hundred Thousand Tw		ollars		
4. The parties mutually agree to this amendment as follows. A incorporated herein:	All actions noted below are b	by this reference made a pa	art of the Agreeme	nt and
I. This amendment increases the contract by \$63,906.00, changi	ng the total amount to read \$	3,400,221.00, to better suppo	ort the Contractor's	needs.
All other terms and conditions shall remain the same.				
IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED				
	CONTRACTOR			
CONTRACTOR NAME (if other than an individual, state whether a corpora County of Mendocino	tion, partnership, etc.)			
CONTRACTOR BUSINESS ADDRESS		CITY	STATE	ZIP
1120 South Dora Street		Ukiah	CA	95482
PRINTED NAME OF PERSON SIGNING		TITLE		
Sara Pierce		Deputy CEO		
CONTRACTOR AUTHORIZED <sub>I</sub> SIGNATURE		DATE SIGNED		
Sava Per-		05/17/2023		
<u>-</u> s	STATE OF CALIFORNIA			
CONTRACTING AGENCY NAME  California Department of Public Health				
CONTRACTING AGENCY ADDRESS		CITY	STATE	ZIP
1616 Capitol Avenue, Suite 74.262, MS 1802, PO Box 99737	77	Sacramento	CA	95899
PRINTED NAME OF PERSON SIGNING		TITLE		- 25
Joseph Torrez		Chief, Contracts Management Unit		
CONTRACTING AGENCY AUTHORIZED SIGNATURE		DATE SIGNED		
CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL		EXEMPTION (If Applicable)		

## IN WITNESS WHEREOF DEPARTMENT FISCAL REVIEW: CONTRACTOR/COMPANY NAME By: DEPARTMENT HEAD Christina Flores, CDPH, WIC Division Date: May 19, 2023 Date: Budgeted: Yes NAME AND ADDRESS OF CONTRACTOR: Budget Unit: 0418 Line Item: 82-5670 California Department of Public Health Org/Object Code: UN P.O. Box 997377 Grant: Yes Sacramento, CA 95899 Grant No.: 22-10260 (279) 217-1037 christina.flores@cdph.ca.gov **COUNTY OF MENDOCINO** By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her GLENN MCGOURTY, Chair signature on this Agreement, he/she or the entity **BOARD OF SUPERVISORS** upon behalf of which he/she acted, executed this Agreement Date: 06/20/2023 ATTEST: COUNTY COUNSEL REVIEW: DARCIE ANTLE, Clerk of said Board APPROVED AS TO FORM: CHRISTIAN M. CURTIS, County Counsel 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 06/20/2023 INSURANCE REVIEW: **EXECUTIVE OFFICE/FISCAL REVIEW:** Risk Management Deputy CEO or Designee Date: 05/17/2023 05/17/2023

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

Exception to Bid Process Required/Completed | 'N/A'

Mendocino County Business License: Valid

**Exempt Pursuant to MCC Section: State** 

## California Department of Public Health, Amendment, \$63,906 (\$3,400,221), 22-25, PH WIC - For Signatures

Final Audit Report 2023-05-20

Created: 2023-05-18

By: Kirsty Bates (batesk@mendocinocounty.org)

Status: Signed

Transaction ID: CBJCHBCAABAAxZYK79x1loeeiuSy5U4G6JZ5cTQumNPa

## "California Department of Public Health, Amendment, \$63,906 (\$3,400,221), 22-25, PH WIC - For Signatures" History

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