

BOS AGREEMENT NO. \_\_\_\_\_

AMENDMENT #1

Original Agreement

BOS-25-131

**AMENDMENT TO COUNTY OF MENDOCINO  
AGREEMENT NO. BOS-25-131**

This Amendment to Agreement No. BOS-25-131 is entered into by and between the **COUNTY OF MENDOCINO**, a political subdivision of the State of California, hereinafter referred to as "COUNTY," and **ST. HELENA HOSPITAL DBA ADVENTIST HEALTH ST. HELENA AND DBA ADVENTIST HEALTH VALLEJO**, hereinafter referred to as "CONTRACTOR," the date this Amendment is fully executed by all parties.

WHEREAS, Agreement No. BOS-25-131 was entered into on July 29, 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 \$500,000 from \$500,000 to \$1,000,000.


NOW, THEREFORE, we agree as follows:

1. The total contracted amount set out in the Agreement is hereby increased by \$500,000 from \$500,000 to \$1,000,000.

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

**IN WITNESS WHEREOF**

**DEPARTMENT FISCAL REVIEW:**

By:   
Jerine Miller, Psy.D.  
Director of Health Services

Date: 11/17/25

Budgeted: No  
Budget Unit: 4050  
Line Item: 86-3160  
Org/Object Code: MH  
Grant: No  
Grant No.: N/A

**COUNTY OF MENDOCINO**

By: \_\_\_\_\_  
JOHN HASCHAK, Chair  
BOARD OF SUPERVISORS

Date: \_\_\_\_\_

**ATTEST:**

DARCIE ANTLE, Clerk of said Board


By: \_\_\_\_\_  
Deputy

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: \_\_\_\_\_  
Deputy

**INSURANCE REVIEW:**

By:   
Risk Management

Date: 10/27/2025

**CONTRACTOR/COMPANY NAME**

By:   
John Beaman, Assistant Secretary

Date: 11/13/2025

**NAME AND ADDRESS OF CONTRACTOR:**

St. Helena Hospital  
DBA Adventist Health St. Helena  
and DBA Adventist Health Vallejo  
1 Adventist Health Way  
Roseville, CA 91206 95661  
559-679-2785  
Arroyo@ah.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:   
COUNTY COUNSEL

Date: 10/27/2025

**EXECUTIVE OFFICE/FISCAL REVIEW:**

By:   
Deputy CEO or Designee

Date: 10/27/2025

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

**Exception to Bid Process Required/Completed** ☒ EB#26-37

**Mendocino County Business License:** Valid ☐

**Exempt Pursuant to MCC Section:** Located outside of Mendocino County

