

**AMENDMENT TO BOARD OF SUPERVISORS  
AGREEMENT NO. 17-084**

This Amendment to BOS Agreement No. 17-084 is entered into this 24<sup>th</sup> day of April, 2018, 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. 17-084 was entered into on August 15, 2017; and

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

WHEREAS, CONTRACTOR will provide residential care facilities offering a broad range of services to Behavioral Health and Recovery Services clients requiring a structured environment due to mental health challenges.

NOW, THEREFORE, we agree as follows:

1. **Amount of Agreement:** The amount set out in the original BOS Agreement No. 17-084 will change from \$260,000 to \$428,449.

All other terms and conditions of BOS Agreement No. 17-084 shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and year first above written.

**DEPARTMENT FISCAL REVIEW:**

By: *A. Molgaard*  
Anne Molgaard, Acting HHSA Director  
Date: 3/9/18

Budgeted: ☒ Yes ☐ No  
Budget Unit: 4050  
Line Item: 86-3162  
Org/Object Code: MHAS75  
Grant: ☐ Yes ☒ No  
Grant No.:

**COUNTY OF MENDOCINO**

By: *Dan Hamburg*  
DAN HAMBURG, Chair  
BOARD OF SUPERVISORS APR 26 2018

**ATTEST:**

CARMEL J. ANGELO, Clerk of said Board

By: *Karla Vant Hagen*  
Deputy MAY 02 2018

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

CARMEL J. ANGELO, Clerk of said Board

By: *Karla Vant Hagen*  
Deputy MAY 02 2018

**CONTRACTOR/COMPANY NAME**

By: *G. Zeyen*  
Signature

Printed Name: Gary Zeyen

Title: Controller

Date: 3/30/18

**NAME AND ADDRESS OF CONTRACTOR:**

Crestwood Behavioral Health, Inc.

520 Capitol Mall Suite 800

Sacramento, CA 95814

916-471-2244; [gzeyen@cbhi.net](mailto:gzeyen@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::

By: *Charlotte Scott*  
Katharine L. Elliott, County Counsel

Date: 3/12/18

**INSURANCE REVIEW:**

By: *Carmel J. Angelo*  
Risk Management

**EXECUTIVE OFFICE/FISCAL REVIEW:**

APPROVAL RECOMMENDED

By: *Janette Rann*  
Deputy CEO

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

Exception to Bid Process Required/Completed ☒ 18-01

Mendocino County Business License: Valid ☒

Exempt Pursuant to MCC Section: \_\_\_\_\_