

**AMENDMENT AGREEMENT**

This Amendment hereby modifies the **Member Services Agreement (Keenan Pharmacy Purchasing Coalition)** ("Agreement") dated **July 1, 2013** by and between Keenan & Associates ("Keenan") and **County of Mendocino** ("Client") as follows:

1. Exhibit C, Client Membership Fee Schedule, effective **July 1, 2013**, is hereby replaced with a new Exhibit C, effective **July 1, 2018**, which is attached hereto and incorporated herein by reference.

The effective date of this Amendment is **July 1, 2018**.

All the remaining terms and conditions of the Agreement shall remain unchanged and in full force and effect. Each person signing this Amendment to the Agreement on behalf of a Party represents and warrants that he or she has the necessary authority to bind such Party and that this Amendment is binding on and enforceable against such Party.

<b><u>County of Mendocino</u></b>		<b><u>Keenan &amp; Associates</u></b>	
SEE ATTACHED SIGNATURE PAGE		SEE ATTACHED SIGNATURE PAGE	
<b><u>Signature</u></b>		<b><u>Sig</u></b>	
<b><u>Name:</u></b>		<b><u>Name:</u></b>	<b>Jenney Han</b>
<b><u>Title:</u></b>		<b><u>Title:</u></b>	<b>Senior Vice President</b>
<b><u>Address:</u></b>	<b>501 Low Gap Road</b>	<b><u>Address:</u></b>	<b>2355 Crenshaw Blvd.</b>
	<b>Ukiah, CA 95482</b>		<b>Suite 200</b>
			<b>Torrance, CA 90501</b>
<b><u>Telephone:</u></b>	<b>707-463-4441</b>	<b><u>Telephone:</u></b>	<b>310-212-0363 ext. 3341</b>
<b><u>Fax:</u></b>		<b><u>Fax:</u></b>	<b>310-212-3381</b>
<b><u>Attention:</u></b>		<b><u>Attention:</u></b>	<b>Robert Dillon</b>
<b><u>Date:</u></b>		<b><u>Date:</u></b>	

**EXHIBIT C**  
**Client Membership Fee Schedule**  
**2018/2020**

<b>Keenan Fee (PMPM)</b>	<b>Sub-Broker Fee (PMPM)</b>
<b>\$1.50</b>	<b>\$0.00</b>



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

**DEPARTMENT FISCAL REVIEW:**

HEIDI DUNHAM, HR DIRECTOR DATE 5/7/18

Budgeted: ☒ Yes ☐ No

Budget Unit: 0715

Line Item: 862189

Grant: ☐ Yes ☒ No

Grant No.: \_\_\_\_\_

**COUNTY OF MENDOCINO**

By: \_\_\_\_\_  
DAN HAMBURG, Chair  
BOARD OF SUPERVISORS

**ATTEST:**

CARMEL J. ANGELO, 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.

CARMEL J. ANGELO, Clerk of said Board

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

**INSURANCE REVIEW:**

By: Carmel J. Angelo  
Risk Management

**EXECUTIVE OFFICE/FISCAL REVIEW:**

APPROVAL RECOMMENDED

By: Jonelle Rawn  
Deputy CEO

**CONTRACTOR/COMPANY NAME:**

By: See attached

NAME AND ADDRESS OF CONTRACTOR:

Keenan Pharmacy Purchasing Coalition

2355 Krenshaw Blvd, Suite 200

Torrance, CA. 90501

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:

KATHARINE L. ELLIOTT,  
County Counsel

By: Christina M. Fair  
Deputy

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

Exception to Bid Process Required/Completed ☐

Mendocino County Business License: Valid ☐

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



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

DEPARTMENT

SEE ATTACHED  
SIGNATURE PAGE

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

INSURANCE REVIEW:

By: Carmel J. Angelo  
Risk Management

EXECUTIVE OFFICE/FISCAL REVIEW:

APPROVAL RECOMMENDED

By: Janette Rau  
Deputy CEO

CONTRACTOR/COMPANY NAME:

By: Just

NAME AND ADDRESS OF CONTRACTOR:

Keenan Pharmacy Purchasing Coalition

2355 Krenshaw Blvd, Suite 200

Torrance, CA. 90501

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APPROVED AS TO FORM:

KATHARINE L. ELLIOTT,  
County Counsel

By: Kim M. Fair  
Deputy

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