

**AMENDMENT TO BOARD OF SUPERVISORS  
AGREEMENT NO. 21-089**

This Amendment to BOS Agreement No. 21-089 is entered into this 7th day of June, 2022, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and **Telecare Corporation**, hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. 21-089 was entered into on July 1, 2021; 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. 21-089, from \$101,000 to \$102,500; and

WHEREAS, CONTRACTOR will continue to provide its skilled nursing facility for individuals with neurological and mental health deficits.

NOW, THEREFORE, we agree as follows:

1. The amount set out in the original BOS Agreement No. 21-089 is hereby increased from \$101,000 to \$102,500.

All other terms and conditions of BOS Agreement No. 21-089 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: [Signature]  
Jenine Miller, Psy.D., Behavioral Health  
Director

Date: 4/19/22

Budgeted: ☒ Yes ☐ No

Budget Unit: 4050

Line Item: 86-3162

Org Code: MHMS75

Grant: ☐ Yes ☒ No

Grant No.:

**COUNTY OF MENDOCINO**

By: [Signature]  
TED WILLIAMS, Chair  
BOARD OF SUPERVISORS

Date: 06/13/2022

**ATTEST:**

DARCIE ANTLE, Interim Clerk of said Board

By: [Signature]  
Deputy 06/13/2022

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

DARCIE ANTLE, Interim Clerk of said Board

By: [Signature]  
Deputy 06/13/2022

**INSURANCE REVIEW:**

By: [Signature]  
Risk Management

Date: 04/19/2022

**CONTRACTOR/COMPANY NAME:**

Dawan Utecht, SVP-CDO  
By: [Signature]  
~~Leslie Davis, Sr. VP-CFO~~  
Date: 04/20/22

**NAME AND ADDRESS OF CONTRACTOR:**

Telecare Corporation  
1080 Marina Village Parkway, Suite 100  
Alameda, CA 94501  
510-337-7950 ext 1517;  
[contracts@telecarecorp.com](mailto:contracts@telecarecorp.com)

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: 04/19/2022

**EXECUTIVE OFFICE/FISCAL REVIEW:**

By: [Signature]  
Deputy CEO or Designee

Date: 04/19/2022

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors  
Exception to Bid Process Required/Completed ☒ EB 21-100  
Mendocino County Business License: Valid ☐  
Exempt Pursuant to MCC Section: \_\_\_\_\_