

BOS AGREEMENT NO. 19-259-A1

**AMENDMENT TO BOARD OF SUPERVISORS
AGREEMENT NO. 19-259**

This Amendment to BOS Agreement No. 19-259 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 **MCAVHN Care and Prevention**, hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. 19-259 was entered into on July 1, 2019; 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 extend the termination date set out in the original BOS Agreement No. 19-259, from June 30, 2022 to June 30, 2023; and

WHEREAS, it is the desire of CONTRACTOR and COUNTY to increase the amount set out in the original BOS Agreement No. 19-259, from \$450,000 to \$575,000; and

WHEREAS, CONTRACTOR has changed their name from Mendocino County AIDS Viral Hepatitis Network to MCAVHN Care and Prevention; and

WHEREAS, CONTRACTOR will continue to provide harm reduction services and needle exchange throughout Mendocino County.

NOW, THEREFORE, we agree as follows:

1. The termination date set out in the original BOS Agreement No. 19-259 is hereby extended from June 30, 2022 to June 30, 2023.
2. The amount set out in the original BOS Agreement No. 19-259 is hereby increased from \$450,000 to \$575,000.
3. The CONTRACTOR's name in the original BOS Agreement No. 19-259 has changed from Mendocino County AIDS Viral Hepatitis Network to MCAVHN Care and Prevention.

All other terms and conditions of BOS Agreement No. 19-259 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, Public Health Director

Date: 5/10/22

Budgeted: ☒ Yes ☐ No

Budget Unit: 4071

Line Item: 86-2189

Org Code: IG

Grant: ☐ Yes ☒ No

Grant No.:

COUNTY OF MENDOCINO

By: *TW*
TED WILLIAMS, Chair
BOARD OF SUPERVISORS

Date: 06/13/2022

ATTEST:

DARCIE ANTLE, Interim Clerk of said Board

By: *Antle*
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: *Antle*
Deputy 06/13/2022

INSURANCE REVIEW:

By: *Darcie Antle*
Risk Management

Date: 05/10/2022

CONTRACTOR/COMPANY NAME:

By: *Libby Guthrie*
Libby Guthrie, Executive Director

Date: _____

NAME AND ADDRESS OF CONTRACTOR:

MCAVHN Care and Prevention

PO Box 1350

Ukiah, CA 95482

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: *Nathaniel R. A.*
Deputy

Date: 05/10/2022

EXECUTIVE OFFICE/FISCAL REVIEW:

By: *Nara Pen*
Deputy CEO or Designee

Date: 05/10/2022

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors
Exception to Bid Process Required/Completed ☒ EB 22-89
Mendocino County Business License: Valid ☐
Exempt Pursuant to MCC Section: nonprofit