HAJ

BOS AGREEMENT NO. 20-045-A2

SECOND AMENDMENT TO BOARD OF SUPERVISORS AGREEMENT NO. 20-045

This second Amendment to BOS Agreement No. 20-045 is entered into this <u>22 ⁴⁰</u> day of <u>JUNE</u>, 2021, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and **Psynergy Programs, Inc.**, hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. 20-045 was entered into on July 1, 2020; and

WHEREAS, BOS Amendment No. 20-045-A1 was entered into on March 9, 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 BOS Amendment No. 20-045-A1 from \$420,000 to \$510,000; and

WHEREAS, CONTRACTOR will continue to provide residential treatment for Behavioral Health and Recovery Services clients.

NOW, THEREFORE, we agree as follows:

1. The amount set out in BOS Agreement No. 20-045-A1 will be increased from \$420,000 to \$510,000.

All other terms and conditions of BOS Agreement No. 20-045, and BOS Amendment No. 20-045-A1 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:

<u>Jenine Miller</u> Denine Miller, Psy.D., HHSA Assistant Director

Date: 5/26/21

Budgeted: Yes Xo

Budget Unit: 4050

Line Item: 86-3162

Org Code:MHMS75

Grant: 🗌 Yes 🛛 No

Grant No.:

COUNTY OF MENDOCINO

By: DAN GJERDE, Chair BOARD OF SUPERVISORS IUN 2 5 2021

ATTEST:

CARMEL J. ANGELO, Clerk of said Board

By: <u>Amap</u> Deputy

JUN 2 5 2021 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 JUN 2 5 2021 **INSURANCE REVIEW:** Bv: Risk Management

CONTRACTOR/COMPANY NAME:

By:

Arturo Uribe, LCSW, President and CEO

Date

NAME AND ADDRESS OF CONTRACTOR:

Psynergy Programs, Inc. 18225 Hale Ave. Morgan Hill, CA 95037

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

Charlotte Scott

Deputy

EXECUTIVE OFFICE/FISCAL REVIEW:

APPROVAL RECOMMENDED

Janace anthe

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 Agent <u>EB# 21-179</u> Mendocino County Business License: Valid

Exempt Pursuant to MCC Section: Located outside Mendocino County