

**CONTRACT CANCELLATION AGREEMENT**  
**(Purchase of Services – Long Form)**

Number: 38-277-1  
Fund/Org: 1407  
Account: 2310  
Other:

1. **Identification of Contract to be Cancelled.**

Number: 38-277

Effective Date: March 1, 2015

Department: Employment & Human Services

Subject: Community Services Block Grant / Community Action Projects

2. **Parties.** The County of Contra Costa, California (County), for its Department named above, and the following named Contractor mutually agree and promise as follows:

Contractor: Pivotal Point Youth Services, Inc.

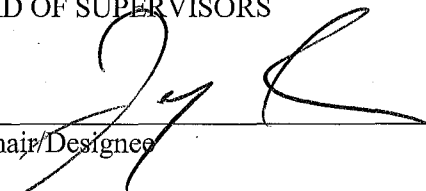
Capacity: Corporation

Address: 1324 Adeline Street, Oakland, California 94607

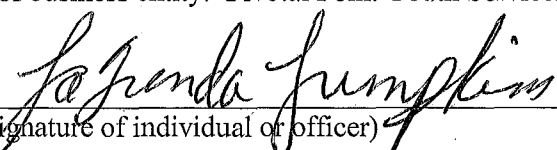
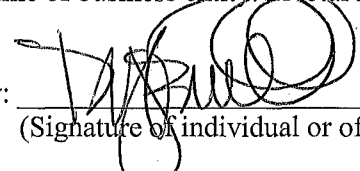
3. **Mutual Consent Cancellation.** Pursuant to General Conditions Paragraph 5 (Termination) of the contract identified above, County and Contractor hereby agree to terminate said Contract by mutual consent, effective on the close of the workday on June 30, 2015.

4. **Signatures.** These signatures attest the parties' agreement hereto:

**COUNTY OF CONTRA COSTA, CALIFORNIA**

|   |  |
|---|--|
| BOARD OF SUPERVISORS<br>By: <br>Chair/Designee | ATTEST: Clerk of the Board of Supervisors<br>By: _____<br>Deputy |
|---|--|

**CONTRACTOR**

|   |   |
|---|---|
| Signature A<br>Name of business entity: Pivotal Point Youth Services, Inc.<br>By: <br>(Signature of individual or officer)<br><u>Latronda Lumpkins, President</u><br>(Print name and title A, if applicable) | Signature B<br>Name of business entity: Pivotal Point Youth Services, Inc.<br>By: <br>(Signature of individual or officer)<br><u>Danielle Burnette,</u><br>(Print name and title B, if applicable) <u>Treasurer</u> |
|---|---|

Note to Contractor: For corporations (profit or nonprofit) and limited liability companies, the contract must be signed by two officers. Signature A must be that of the chairman of the board, president, or vice-president; and Signature B must be that of the secretary, any assistant secretary, chief financial officer or any assistant treasurer (Civil Code Section 1190 and Corporations Code Section 313). All signatures must be acknowledged as set forth on Form L-2.

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA )

COUNTY OF CONTRA COSTA )

On Nov 15th, 2015 (Date),

before me, Alejandro Azurdia (Notary Public) (Name and Title of the Officer),

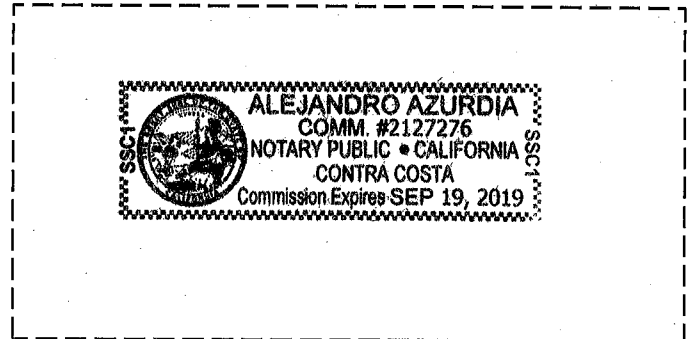
personally appeared, La Tronda Lumpkins,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS MY HAND AND OFFICIAL SEAL.

Alejandro Azurdia  
Signature of Notary Public



Place Seal Above

ACKNOWLEDGMENT (by Corporation, Partnership, or Individual)  
(Civil Code §1189)

APPROVALS

RECOMMENDED BY DEPARTMENT

By: [Signature]  
Designee

FORM APPROVED BY COUNTY COUNSEL

By: [Signature]  
Deputy County Counsel

APPROVED: COUNTY ADMINISTRATOR

By: [Signature]  
Designee

ACKNOWLEDGMENT

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STATE OF CALIFORNIA )  
 )  
COUNTY OF CONTRA COSTA )

On Nov 15th, 2015 (Date),

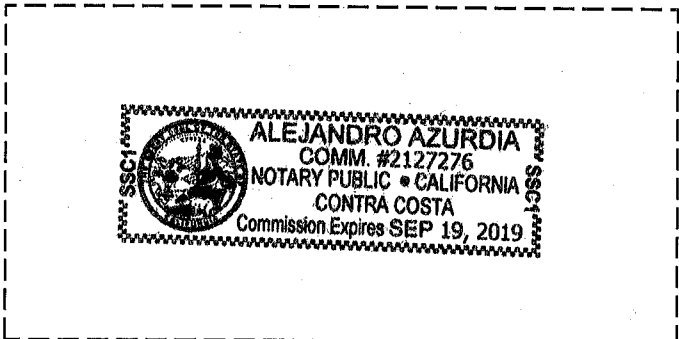
before me, Alejandro Azurdia (Notary Public) (Name and Title of the Officer),  
personally appeared, Danielle Burnette,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS MY HAND AND OFFICIAL SEAL.

Alejandro Azurdia  
Signature of Notary Public



Place Seal Above

ACKNOWLEDGMENT (by Corporation, Partnership, or Individual)  
(Civil Code §1189)

APPROVALS

RECOMMENDED BY DEPARTMENT

By: [Signature]  
Designee

FORM APPROVED BY COUNTY COUNSEL

By: [Signature]  
Deputy County Counsel

APPROVED: COUNTY ADMINISTRATOR

By: [Signature]  
Designee