

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

Number: 4581000
Fund/Org: 7040
Account: 2310
Other: 06543

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

Number: 4581000

Effective Date: November 17, 2015

Department: Contra Costa County Fire Protection District

Subject: Ambulance Billing, First Responder Billing, and Other Related Professional Services

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: Advanced Data Processing, Inc.

Capacity: a Delaware Corporation

Address: 6451 North Federal Highway, Suite 1000, Fort Lauderdale, Florida 33308

3. **Amendment Date.** The effective date of this Contract Amendment Agreement is June 1, 2020.

4. **Amendment Specifications.** The Contract identified above is hereby amended as set forth in the “Amendment Specifications” attached hereto which are incorporated herein by reference.

5. **Signatures.** These signatures attest the parties’ agreement hereto:

COUNTY OF CONTRA COSTA, CALIFORNIA

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

CONTRACTOR

| | |
|---|---|
| <p>Signature A Name of business entity: Advanced Data Processing, Inc.</p> <p>By: _____ (Signature of individual or officer)</p> <p>_____ (Print name and title A, if applicable)</p> | <p>Signature B Name of business entity: Advanced Data Processing, Inc.</p> <p>By: _____ (Signature of individual or officer)</p> <p>_____ (Print name and title B, if applicable)</p> |
|---|---|

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 _____ (Date),

before me, _____ (Name and Title of the Officer),

personally appeared, _____,

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.

Signature of Notary Public



Place Seal Above

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

APPROVALS

RECOMMENDED BY DEPARTMENT

FORM APPROVED BY COUNTY COUNSEL

By: _____
Designee

By: _____
Deputy County Counsel

APPROVED: COUNTY ADMINISTRATOR

By: _____
Designee

AMENDMENT SPECIFICATIONS

In consideration for Contractor continuing to provide services as set forth in the Service Plan, Contractor and District agree to amend the Contract as follows.

1. Section 3 (Term) of the Contract is hereby amended to extend the termination date from December 31, 2020 to December 31, 2025.
2. Section 4 (Payment Limit) of the Contract is hereby amended to increase the payment limit by \$9,500,000, from \$8,500,000 to a new total Contract Payment Limit of \$18,000,000.

All other terms and conditions of the Contract entered into on July 1, 2017 between the District and Contractor not modified by this Agreement remain in full force and effect.

Contractor

District