

**ADDENDUM TO CONTRACT FOR SERVICES  
BY INDEPENDENT CONTRACTOR**

THIS 2<sup>nd</sup> ADDENDUM is to that Contract for Services entered into on October 15, 2013 by and between the County of Siskiyou ("County") and BHC Sierra Vista Hospital ("Contractor") and is entered into this            day of            , 2015.

WHEREAS, the Contract expires on June 30, 2015 and services continue to be required after that date; and

WHEREAS, the parties desire to extend the term of the Contract; and

WHEREAS, the parties desire to update the web link in Paragraph 5.19 C and Exhibit A, VI COMPLIANCE; and

WHEREAS, the parties desire to change the wording in Exhibit A, V.

NOW, THEREFORE, THE PARTIES MUTUALLY AGREE AS FOLLOWS:

Paragraph 1.01 of the Contract for Services shall be amended to extend the term of the contract through June 30, 2020.

Paragraph 5.19 Compliance with Applicable Laws: C. shall amend the web link to: <http://www.co.siskiyou.ca.us/content/behavioral-health-services-division>

Exhibit A, Paragraph 5: Contract Amendments: to read as follows.

Contractor and County may mutually agree to amend the rates and/or services in this contract at any time during the term of this contract.

Exhibit A, Paragraph 6. Compliance: shall amend the web link to: <http://www.co.siskiyou.ca.us/content/behavioral-health-services-division> .

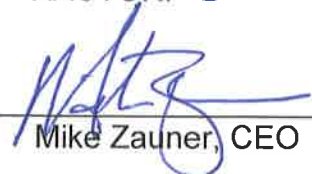
All other terms and conditions of the Contract for Services shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Addendum to Contract for Services on the date hereinabove set forth.

VN#	@ 729	
CT#	E1600343	CC LOG#
ACCT	2122-401030-740300	
CT AMT	.01	.01
	ANNUAL	TOTAL

Executed in Yreka, California, on the date and year first above written.

CONTRACTOR: BHC Sierra Vista Hospital

By:   
Mike Zauner, CEO

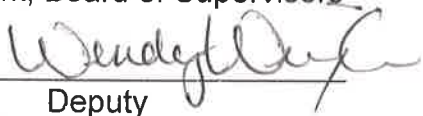
7/14/15  
(Date)

TAXPAYER I.D. On File

COUNTY OF SISKIYOU

By   
Ed Valenzuela, Chair

ATTEST:  
COLLEEN SETZER  
Clerk, Board of Supervisors

By   
Deputy

ACCOUNTING:

Fund	Organization	Account	Activity Code (if applicable)
2122	401030	740300	

\_\_\_\_\_

Encumbrance number (if applicable) \_\_\_\_\_

If not to exceed, include amount not to exceed: \_\_\_\_\_

*For multi-year contracts, please include separate sheet with financial information for each fiscal year.*