



# INTERGOVERNMENTAL AGREEMENT (IGA)

## Amendment

**ARIZONA DEPARTMENT OF HEALTH SERVICES**  
150 18<sup>th</sup> Ave Suite 530  
Phoenix, Arizona 85007

Contract No.: **IGA2021-074**

IGA Amendment No.: **1**

**Procurement Officer**  
**Karla Varela**

### COVID-19 Response Staffing

1. Effective upon signature by all parties and pursuant to the Terms and Conditions, Provision Six (6), Contract Changes, Section 6.1, Amendments, Purchases Orders and Change Orders, it is mutually agreed that the Intergovernmental Agreement referenced is amended as follows under this Amendment One (1):
  - 1.1 The Agreement end date is extended to February 28, 2023; and
  - 1.2 The Contract number is revised from IGA2021-074 and replaced with CTR058657 due to the Contracts being placed back into the Arizona Procurement Portal.

**All other provisions of this agreement remain unchanged.**

#### COCHISE COUNTY

Contractor Name:  
**1415 West Melody Lane, Building A**

Address:  
**BISBEE AZ 85603**  
City State Zip

County Authorized Signature  
Ann English

Print Name  
Chair, Board of Supervisors / 03.08.2022

Title and Date

Pursuant to A.R.S. § 11-952, the undersigned public agency attorney has determined that this Intergovernmental Agreement is in proper form and is within the powers and authority granted under the laws of Arizona

This Intergovernmental Agreement Amendment shall be effective the date indicated. The Public Agency is hereby cautioned not to commence any billable work or provide any material, service or construction under this IGA until the IGA has been executed by an authorized ADHS signatory.

State of Arizona

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 2022.

Kris Carlson

Print Name

Procurement Officer

Contract No.: **IGA2021-074**, which is an Agreement between public agencies, has been reviewed pursuant to A.R.S. § 11-952 by the undersigned Assistant Attorney, who has determined that it is in proper form and is within the powers and authority granted under the laws of the State of Arizona.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Assistant Attorney General

Print Name