

**FOURTH AMENDMENT
 (BOS AGREEMENT NO. ____ - ____)**

This Fourth Amendment to Agreement No. 21-193 (“Fourth Amendment”) is made and entered into as of the last date signed below by and between County of Yolo (“County”) and City of West Sacramento (“Subrecipient”), jointly referred to as the “Parties” herein.

WHEREAS, on or about August 31, 2021, the Parties entered into Agreement No. 21-193 (“Agreement”); and

WHEREAS, on or about February 25, 2022, the Parties amended the Agreement via the First Amendment; and

WHEREAS, on or about July 20, 2022, the Parties further amended the Agreement via the Second Amendment; and

WHEREAS, on or November 1, 2022, the Parties further amended the Agreement via the Third Amendment; and

WHEREAS, on or September 17, 2023, County provided a courtesy notice of Non-Renewal of the Contract; and

WHEREAS, the Parties would now like to amend the Agreement, as previously amended, to:

1. Revise the **SUBAWARD INFORMATION** to add funding in the amount of \$105,598 for a new funded amount of \$501,598; and
2. Revise **Attachment 3A** to update County contacts and Email address for invoices; and
3. Revise **Paragraph X.A.** of **Attachment 6** to revise the contract budget; and
4. Revise **Attachment 7** to update County insurance requirements.

NOW, THEREFORE, THE PARTIES HEREBY AGREE AS FOLLOWS:

1. The **SUBAWARD INFORMATION** of the Agreement is hereby amended to read as follows:

Subrecipient Legal Name:	City of West Sacramento		
Subaward Project Title:	Emergency Solutions Grant-Coronavirus Round 2 (Emergency Shelter-Operations)		
Subaward Project Period:	Start:	December 22, 2020	End: September 30, 2023
Amount Funded:	\$501,598		
Federal Awarding Agency:	California Department of Housing and Community Development via the United States Department of Housing (HUD)	Federal Award Number:	N/A
CFDA Number:	14.231	CFDA Title:	Emergency Solutions Grant Program

2. **Attachment 3A** to the Agreement is hereby amended to read as attached.

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3. Paragraph X.A. of Attachment 6 to the Agreement is hereby amended to read as follows:

- A. Subrecipient shall adhere to this budget in performing services that have been authorized and provided in accordance with the provision of this Subaward.

City of West Sacramento		
Emergency Shelter – Operations ESG-CV 2		
	Cost Items	Agreement Term December 22, 2020 through September 30, 2023
<i>Direct Costs</i>		
1	Personnel	\$36,000
2	Operating Costs	\$465,598
3	Direct to Clients	\$0
4	Subtotal of Direct Costs	\$501,598
<i>Indirect Costs</i>		
5	Indirect Admin (not to exceed 10% of line 1)	\$0
6	Total (line 4 +line 5)	\$501,598*

*Any unspent funding in a fiscal year may be rolled over to future fiscal year(s) but not beyond the expiration date of the agreement.

- 5. **Attachment 7** to the Agreement is hereby amended to read as attached.
- 6. All attachments to this Fourth Amendment are incorporated herein by this reference.
- 7. Except as specifically amended by this Fourth Amendment and any prior amendments, the Agreement shall remain in full force and effect according to its terms.

[Signatures Follow]

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BOS No. Orig. #21-193
Legacy PO No. 4112
Infor Ref No. 6565-2021-CWS 01
Contract No. 1462

IN WITNESS WHEREOF the Parties have executed this Fourth Amendment as of the day and year last set forth below.

CONTRACTOR

COUNTY OF YOLO

Aaron Laurel, City Manager
City of West Sacramento

Tonia Murphy, Procurement Manager
Department of General Services

Date: _____

Date: _____

Nolan Sullivan, Director
Health and Human Services Agency

Approved as to Form:
Philip J. Pogledich, County Counsel

By: Hope P. Welton
Hope P. Welton, Senior Deputy

ATTACHMENT 3A – COUNTY CONTACTS

Legal Name:	County of Yolo		
Legal Address:	625 Court Street, Room 102 Woodland, CA 95695		
Website:	www.yolocounty.org		
County Contacts			
Central Email:	HHSAContracts@yolocounty.org		
Grant Project Manager:	Kerrie Covert	Telephone Number: (530) 666-8242	
Email:	Kerrie.covert@yolocounty.org		
Administrative Contact:	Kerrie Covert		
Email:	Kerrie.covert@yolocounty.org	Telephone Number: (530) 666-8242	
COI Contact Email:	procurement@yolocounty.org		
Financial Contact:	<u>David Kariuki</u>		
Email:	David.Kariuki@yolocounty.org	Telephone Number: (530) 666-8790	
Email Invoices:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Invoice Email (if different):	HHSA.AccountsPayable@yolocounty.org
Authorized Official:	Tonia Murphy, Procurement Manager		Telephone Number: 530-406-4830
Email:	Tonia.Murphy@yolocounty.org		
Administrative Address:			
Name:	Kerrie Covert, HHSA Program Coordinator		
Address:	County of Yolo Health & Human Services Agency 25 North Cottonwood Street Woodland, CA 95695		
Grant Project Manager Address:			
Name:	Kerrie Covert, HHSA Program Coordinator		
Address:	County of Yolo Health & Human Services Agency 25 North Cottonwood Street Woodland, CA 95695		
Invoice Address:			
Name:	Accounts Payable Unit		
Address:	Yolo County Health & Human Services Agency 137 North Cottonwood Street Woodland, CA 95695		

ATTACHMENT 7 – INSURANCE REQUIREMENTS

A. During the term of this Agreement, the Parties shall be separately insured through the Yolo County Public Agency Risk Management Authority (YCPARMIA), a California public entity self-funded public liability coverage program. At least sixty (60) days written notice shall be provided to all parties prior to a change in insurance coverage to allow for consideration of an amendment to this Agreement.