

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

**STANDARD AGREEMENT - AMENDMENT**

STD. 213A (Rev. 10/2019) CSD Rev (12/2019)

AGREEMENT NUMBER <b>23F-4029</b>	AMENDMENT NUMBER <b>1</b>	PURCHASING AUTHORITY NUMBER (if applicable)
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1. This Agreement is entered into between the State Agency and the Contractor named below

STATE AGENCY NAME

**Department of Community Services and Development**

CONTRACTOR NAME

**Nevada County Department of Housing and Community Services**

2. The term of this Agreement is : **January 1, 2023 through May 31, 2024**

3. The maximum amount of this Agreement is: **Total \$314,004.00**

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

i. The maximum amount of this Agreement payable to Contractor by the State has changed from \$292,893.00 to \$314,004.00, reflecting an increase of \$21,111.00

ii. Articles 6, 7 and 10 are deleted in their entirety and replaced with the attached articles 6 and 7

Documents can be accessed at <https://providers.csd.ca.gov/>.

All other terms and conditions shall remain the same.

**IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.**

<b>CONTRACTOR</b>				<b>CALIFORNIA Department of General Services Use Only</b>	
CONTRACTOR NAME <i>(If other than an individual, state whether a corporation, partnership, etc.)</i>					
<b>Nevada County Department of Housing and Community Services</b>					
CONTRACTOR BUSINESS ADDRESS, CITY, STATE ZIP					
950 Maidu Avenue, Nevada City, CA 95959					
PRINTED NAME OF PERSON SIGNING				TITLE	
CONTRACTOR AUTHORIZED SIGNATURE				DATE SIGNED	
<b>STATE OF CALIFORNIA</b>					
CONTRACTING AGENCY NAME					
<b>Department of Community Services and Development</b>					
CONTRACTING AGENCY ADDRESS		CITY	STATE	ZIP	
<b>2389 Gateway Oaks Drive, Suite 100</b>		<b>Sacramento</b>	<b>CA</b>	<b>95833</b>	
PRINTED NAME OF PERSON SIGNING		TITLE			
<b>Chris Vail</b>		<b>Chief Financial Officer</b>			
CONTRACTING AGENCY AUTHORIZED SIGNATURE				DATE SIGNED	
<input type="checkbox"/> Exempt per _____					

I hereby certify that all conditions for exemption have been complied with, and the document is exempt from the Department of General Services approval.