

**AMENDMENT NO. 2 TO THE CONTRACT WITH
RAMONA BERESFORD-HOWE, PSY.D. PESS4966**

THIS AMENDMENT is executed this January 13, 2026 by and between RAMONA BERESFORD-HOWE, PSY.D., hereinafter referred to as "Contractor" and COUNTY OF NEVADA, hereinafter referred to as "County." Said Amendment will amend the prior Agreement between the parties entitled Professional Services Contract, executed on July 16, 2024 per Purchase Order No. PESS4966 and amended on July 7, 2025; and

WHEREAS, the Contractor provides services related to the Lanterman-Petris-Short Act (LPS) conservatorship assessments for the County of Nevada; and

WHEREAS, the parties desire to amend their Agreement to increase the contract price from \$50,000.00 to \$75,000 (an increase of \$25,000) and amend Exhibit "B" Schedule of Charges and Payments to reflect the increase in the maximum contract price.

NOW, THEREFORE, the parties hereto agree as follows:

1. That Amendment No. 2 shall be effective as of Dec 1, 2025.
2. That Maximum Contract Price, shall be amended to the following: \$75,000.
3. That the Schedule of Charges and Payments, Exhibit "B" is amended to the revised Exhibit "B" attached hereto and incorporated herein.
4. That in all other respects the prior agreement of the parties shall remain in full force and effect except as amended herein.

COUNTY OF NEVADA:

By: _____

Chair of the Board of Supervisors
Nevada County

ATTEST:

By: _____
Clerk of the Board, Nevada County

CONTRACTOR:

By: _____

Ramona Beresford-Howe, Psy.D.

EXHIBIT B
SCHEDULE OF CHARGES AND PAYMENTS
RAMONA BERESFORD-HOWE, PSY.D.

Payment under the terms of this Agreement shall not exceed \$75,000 for the entire contract term of July 1, 2024 through June 30, 2026 for satisfactory performance of the provision of services pursuant to this contract. The contract maximum shall not exceed \$25,000 for Fiscal Year 2024/25 and shall not exceed \$50,000 for Fiscal Year 2025/26.

Contractor shall be reimbursed for professional services at the rate of \$250.00/per hour. Expenses for travel necessary for performance of contract services are included in the \$250.00/per hour rate.

Contractor shall provide invoices to include a breakdown as follows:

1. Listing the specific services provided.
2. The date(s) of services provided.
3. The number(s) of hours worked.

Contractor shall submit to County, for services rendered in the prior month, and in accordance with the reimbursement terms, a statement of services rendered to County and costs incurred that includes documentation to support all expenses claimed by the 20th of each month. County shall review the billing and notify the Contractor within fifteen (15) working days if an individual item or group of costs is being questioned. Contractor has the option of delaying the entire claim pending resolution of the cost(s). Payments of approved billing shall be made within thirty (30) days of receipt of a complete, correct, and approved billing.

Contractor shall submit invoices to:

HHSA Administration
Attn: BH Fiscal
950 Maidu Avenue
Nevada City, California 95959
Or
Via Email:
BH.Fiscal@nevadacountyca.gov
CC: Contract Manager (refer to Notification section)