

AMENDMENT #1
CONTRACT #000000000000000000058123

This is an Amendment to the Contract (the "Contract entered into by and between **the Indiana Department of Health** (the "State") and **Clark County Health Department** (the "Contractor") approved by the last State signatory on November 8, 2021.

In consideration of the mutual undertakings and covenants hereinafter set forth, the parties agree as follows:

1. The Contract is hereby extended for an additional period of one (1) year. It shall terminate on **August 31, 2023. Attachment A-1**, scope of work is attached here to and fully incorporated into this agreement.
2. The consideration during this extension period is **\$92,500.00**. Total remuneration under the Contract is not to exceed **\$185,000.00. Attachment B-1**, the revised budget is attached hereto and fully incorporated into this agreement.
3. Section 34. Notice to Parties is amended as Follows:

Whenever any notice, statement or other communication is required under this Contract, it will be sent by email or first class U. S. mail service to the following addresses, unless otherwise specifically advised.

A. Notices to the State shall be sent to:

Indiana Department of Health
ATTN: Contract and Audit Section
North Meridian Street, Section 2-C
Indianapolis, IN 46204
E-mail: isdhcontracts@isdh.in.gov

B. Notices to the Contractor shall be sent to:

Clark County Health Department
Eric Yazel
1201 Wall Street
Jeffersonville, IN 47130
Email: eyazel@co.clark.in.us

As required by IC 4-13-2-14-8, payments to the Contractor shall be made via electronic funds transfer in accordance with instructions filed by the Contractor with the Indiana Auditor of State.

All matters set forth in the original Contract and not affected by this Amendment shall remain in full force and effect.

Non-Collusion and Acceptance

The undersigned attests, subject to the penalties for perjury, that the undersigned is the Contractor, or that the undersigned is the properly authorized representative, agent, member or officer of the Contractor. Further, to the undersigned's knowledge, neither the undersigned nor any other member, employee, representative, agent or officer of the Contractor, directly or indirectly, has entered into or been offered any sum of money or other consideration for the execution of this Contract other than that which appears upon the face hereof. **Furthermore, if the undersigned has knowledge that a state officer, employee, or special state appointee, as those terms are defined in IC § 4-2-6-1, has a financial interest in the Contract, the Contractor attests to compliance with the disclosure requirements in IC § 4-2-6-10.5.**

Agreement to Use Electronic Signatures

I agree, and it is my intent, to sign this Contract by accessing State of Indiana Supplier Portal using the secure password assigned to me and by electronically submitting this Contract to the State of Indiana. I understand that my signing and submitting this Contract in this fashion is the legal equivalent of having placed my handwritten signature on the submitted Contract and this affirmation. I understand and agree that by electronically signing and submitting this Contract in this fashion I am affirming to the truth of the information contained therein. I understand that this Contract will not become binding on the State until it has been approved by the Department of Administration, the State Budget Agency, and the Office of the Attorney General, which approvals will be posted on the Active Contracts Database: <https://secure.in.gov/apps/idoa/contractsearch/>

In Witness Whereof, the Contractor and the State have, through their duly authorized representatives, entered into this Contract. The parties, having read and understood the foregoing terms of this Contract, do by their respective signatures dated below agree to the terms thereof.

Clark County Health Department

DocuSigned by:
By: *Douglas Bentfield*
08382461D0F64B4...

Title: Administrator

Date: 7/19/2022 | 14:25 EDT

Indiana Department of Health

DocuSigned by:
By: *[Signature]*
FD195E4E7AF9428...

Title: IDOH Chief of Staff

Date: 7/19/2022 | 15:45 EDT

<p>Electronically Approved by: Department of Administration</p> <p>By: _____ (for) Rebecca Holwerda, Commissioner</p>	
<p>Electronically Approved by: State Budget Agency</p> <p>By: _____ (for) Zachary Q. Jackson, Director</p>	<p>Electronically Approved as to Form and Legality by: Office of the Attorney General</p> <p>By: _____ (for) Theodore E Rokita, Attorney General</p>

Attachment A1= SCM #58123
Clark County Health Department
Scope of Work- 9/1/2022 to 8/31/2023

Extend their Contract for 1-year to repeat Scope of Work defined in original contract and provide additional funding.

Evaluation and reporting requirements

Clark County Health Department must: 1) provide quarterly reports to the IDOH; 2) participate in the evaluation of this program; and 3) provide periodic oral updates, as requested by IDOH.

Attachment B1= SCM #58123

Name of
 Organization: Clark County Health Department
 Program Conduct IN CAREs Activities Within Clark
 Description: County
 Budget Period: 9/1/2022 to 8/31/2023

Categories	Original	B1	Total
Salaries and Wages	\$22,500	\$22,500	\$45,000
Fringe Benefits	\$2,500	\$2,500	\$5,000
Consultants	\$45,000	\$45,000	\$90,000
Contractual	\$10,000	\$10,000	\$20,000
Supplies	\$0	\$0	\$0
Equipment	\$12,500	\$12,500	\$25,000
Travel	\$0	\$0	\$0
Other Operating	\$0	\$0	\$0
Total Budget	\$92,500	\$92,500	\$185,000

Total Contract= \$185,000