



**Grant Agreement Number 142668**

**AMENDMENT TO  
STATE OF OREGON  
INTERGOVERNMENTAL GRANT AGREEMENT**

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This is amendment number **02** to Grant Agreement Number **142668** between the State of Oregon, acting by and through its Department of Human Services, hereinafter referred to as "DHS" and

**Yamhill County Health Department  
535 NE 5<sup>th</sup> Street  
McMinnville, Oregon 97128  
Telephone: 503-434-7525  
Fax: 503-472-9731  
E-mail address: [manfrinl@co.yamhill.or.us](mailto:manfrinl@co.yamhill.or.us)**

hereinafter referred to as "Recipient".

1. Upon signature by all parties to this Agreement, this amendment shall be effective on July 1, 2015 regardless of the date the amendment is actually signed by all parties.
2. The Agreement is hereby amended as follows:
  - a. Section 1, Effective Date and Duration, is amended as follows: language to be deleted or replaced is ~~struck through~~; **new language is underlined and bold.**
    1. **Effective Date and Duration**

This Agreement shall become effective on **July 1, 2013** when signed by all parties. Unless extended or terminated earlier in accordance with its terms, this Agreement shall terminate on ~~June 30, 2015~~ **June 30, 2016.** Agreement termination or expiration shall not extinguish or prejudice DHS' right to enforce this Agreement with respect to any default by Recipient that has not been cured.

B.O. 15-461

b. **Section 3, Grant Reimbursement Generally**, paragraph a, is deleted in its entirety and restated with the following:

a. In accordance with the terms and conditions of this Agreement, DHS shall reimburse Recipient up to a maximum not-to-exceed amount for specific Program allowable costs as stated in Exhibit A, Part 3, incurred within the effective dates for funding as follows:

Funding and Effective Dates	Not-to-Exceed Amount
July 1, 2013 – June 30, 2014	\$9,470
July 1, 2014 – June 30, 2015	\$3,000
July 1, 2015 – June 30, 2016	\$3,000

c. Exhibit A, Part 2, Program Description, paragraph 6.b.(5), is amended as follows: **new language is underlined and bold.**

(5) Ensure required school participation data is reported to DHS no later than April 10, 2014, June 10, 2014, April 10, 2015, June 10, 2015, **April 10, 2016** AND **June 10, 2016.**

d. Exhibit A, Part 2, Program Description, paragraph 7.a.(3), is amended as follows: **new language is underlined and bold.**

(3) Reporting shall occur not later than **April 10, 2014, July 10, 2014**, April 10, 2015, June 10, 2015 **April 10, 2016** AND **June 10, 2016.**

3. Except as expressly amended above, all other terms and conditions of the original Agreement and any previous amendments are still in full force and effect.

4. **Recipient Data and Certification.** Recipient shall provide the information set forth below.

**Please print or type the following information**

Recipient Name (exactly as filed with the IRS): Yamhill County

Street address: 535 NE 5<sup>th</sup> Street

City, state, zip code: McMinnville, OR 97128

Email address: manfrin@co.yamhill.or.us

Telephone: (503) 434-7525 Facsimile: (503) 472-9731

Federal Employer Identification Number: 93-6002318

**Proof of Insurance:**

Workers' Compensation Insurance Company: citycounty Insurance Services

Policy #: 15NYAML Expiration Date: 7.1.16

The above information must be provided prior to Agreement execution. Recipient shall provide proof of Insurance upon request by DHS or DHS designee.

RECIPIENT, BY EXECUTION OF THIS AMENDMENT, HEREBY ACKNOWLEDGES THAT RECIPIENT HAS READ THIS AMENDMENT, UNDERSTANDS IT, AND AGREES TO BE BOUND BY ITS TERMS AND CONDITIONS.

5. Signatures.

Yamhill County Health Department

By:

Allen Springer Chair, Board of Commissioners 11-12-15  
Authorized Signature Title Date

State of Oregon acting by and through its Department of Human Services

By

Reginald C. Furland PhD OSCP 12/2/15  
Authorized Signature Title Date

Approved for Legal Sufficiency

Not required per OAR 137-045-0050(2)(c)(A)

\_\_\_\_\_  
Assistant Attorney General Date

Office of Contracts and Procurement

Jewel Bell

December 7, 2015

\_\_\_\_\_  
Jewel Bell, Contract Specialist Date

Approved As To Form  
by Christian Boenisch  
Christian Boenisch  
County Counsel  
Yamhill County

Accepted by Yamhill County  
Board of Commissioners on  
11-12-15 by Board Order  
# 15-461