#### WHATCOM COUNTY CONTRACT INFORMATION SHEET

Originating Department:							85 Health				
Division/Program: (i.e. Dept. Division and Program)							8550 Human Services / 855040 Housing				
Contract or Grant Administrator:							Barbara Johnson-Vinna				
Contractor's / Agency	Name:						YWCA Bellin	gham			
Is this a New Contract?       If not, is this an Amendment or Renewa         Yes       No       If Amendment or Renewal, (per WCC)											
Does contract require Council Approval? Yes ⊠ No □							If No, include WCC: 3.08.100				
Already approved? Council Approved Date:						(Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)					
Is this a grant agreement?         Yes       No         Mo       If yes, grantor agency contract numbers				um	nber(s): CFDA#: 14.231						
Is this contract grant funded?         Yes ⊠       No □         If yes, Whatcom County grant contract number(s):       202009002											
Is this contract the rea	sult of a REP	or Bid proces	c?						Contract C	oet	
Yes No D		RFP and Bid		r(s):					Center:	031	122800
Is this agreement excluded from E-Verify? No 🗌 Yes 🖂											
If YES, indicate exclusion(s) below:											
Professional ser	¥		ied/lice	ensed	l protess				raial off the a	a alf ita	
Contract work is t		. ,				+	Contract for Commercial off the shelf items (COTS). Work related subcontract less than \$25,000.				
□ Interlocal Agreem			s)				Public Works - Local Agency/Federally Funded FHWA.				
			· .	0.000							
Contract Amount:(sum any prior amendments	•	ontract amoun	tand								awards <b>exceeding \$40,000</b> , ase greater than \$10,000 or
\$ 43,000	).						amount, whichev				
This Amendment Amount: 1. Exercising an option contained in a contract previously app											
\$ 2,675				2.			for design, construction, r-o-w acquisition, prof. services, or other capital costs by council in a capital budget appropriation ordinance.				
Total Amended Amour	nt:			3.			ard is for supplies.				
				Equipm	ent	nt is included in Exhibit "B" of the Budget Ordinance					
5. Contract is for						for manufacturer's technical support and hardware maintenance of electronic nd/or technical support and software maintenance from the developer of					
							id/or technical su software current				from the developer of
Summary of Scope: T	his contract r	provides fundi	na for th	e YV						ity.	
							,	, <u> </u>			
Term of Contract:	1 Year						Expiration Dat	e:	06/30/2022		
	1. Prepared		,	JT						Date:	03/11/2022
Contract Routing:		dget Approval		KR/J	G					Date:	06/08/2022
	3. Attorney	0		RB						Date:	06/08/2022
		ce reviewed:		M Ca	ldwell					Date:	6/8/22
		IT reviewed (if IT related):							Date:		
	<ol> <li>Contractor signed:</li> <li>Submitted to Exec.:</li> </ol>							Date: Date:			
					-	_					
8. Council approved (if necessary): AB2022			22-	351			Date:				
	9. Executive	-								Date:	
	10. Original	to Council:								Date:	

Whatcom County Contract Number:

202009002 - 4

#### WHATCOM COUNTY CONTRACT AMENDMENT

PARTIES: Whatcom County Whatcom County Health Department 509 Girard Street Bellingham, WA 98225

AND CONTRACTOR: YWCA Bellingham 1026 N Forest Street Bellingham, WA 98225

 CONTRACT PERIODS:

 Original:
 07/15/2020 - 06/30/2021

 Amendment #1:
 03/01/2021 - 06/30/2021

 Amendment #2:
 07/01/2021 - 06/30/2022

Amendment #3: 09/01/2021 – 06/30/2022 Amendment #4: 06/15/2022 – 06/30/2022

THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY AMENDED AS SET FORTH IN THE DESCRIPTION OF THE AMENDMENT BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO

### **DESCRIPTION OF AMENDMENT:**

- 1. Amend Exhibit B Compensation, to increase funding by \$2,675 to support the purchase of shelter AC units and fans.
- 2. Funding for this contract period (07/01/2022 06/30/2022) is not to exceed \$25,675.
- 3. Funding for the total contract period (07/15/2020 06/30/2022) is not to exceed \$45,675.
- 4. All other terms and conditions remain unchanged.
- 5. The effective start date of the amendment is 06/15/2022.

ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND ANY PREVIOUS AMENDMENTS THERETO REMAIN IN FULL FORCE AND EFFECT. ALL PARTIES IDENTIFIED AS AFFECTED BY THIS AMENDMENT HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS AMENDMENT. Each signatory below to this Contract warrants that he/she is the authorized agent of the respective party; and that he/she has the authority to enter into the contract and bind the party thereto.

APPROVAL AS TO PROGRAM:					
Ann Beck, Huma	Date				
DEPARTMENT HEAD APPROVAL:					
Erika Lautenbac	ch, Health Department Director	Date			
APPROVAL AS TO FORM: Royce Buckingham, Senior Civil Deputy Prosecutor Date					
Royce Buckingnam, Ser	nior Civil Deputy Prosecutor	Date			
FOR THE CONTRACTOR:					
	Karen Burke, Executive Director				
Contractor Signature	Print Name and Title	Date			
FOR WHATCOM COUNTY:					
Categol Cingh Cidhu, County Evenutive		Data			
Satpal Singh Sidhu, County Executive		Date			

## **CONTRACTOR INFORMATION:**

# YWCA Bellingham

1026 N Forest Street Bellingham, WA 98225 360-734-4820 karen.burke@ywcabellingham.org

## EXHIBIT "B" – Amendment #4 COMPENSATION

I. <u>Budget and Source of Funding</u>: The source of funding for this contract, in an amount not to exceed \$25,675, is the Washington State Department of Commerce Emergency Solutions COVID-19 Grant (CFDA #14.231). COMMERCE and the State of Washington are not liable for claims or damages arising from Subcontractor's performance of this contract. The budget for this contract is as follows:

*Item	Documents Required Each Invoice	Budget
Personnel	County approved hourly billing rate and timesheet showing total hours and hours charged to this contract.	\$15,692
Supplies and Equipment (to include technology, sanitation and household supplies, equipment, devices, shelter AC units and fans)	Paid invoices and receipts	\$8,304
	Subtotal	\$23,996
**Indirect @ 7%		\$1,679
	TOTAL	\$25,675

\*Changes to the line item budget that exceed 10% of the contract amount must be approved in writing by the County. \*\*Indirect costs may not exceed the identified rate.

## ll.<u>Invoicing</u>

- The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County. Monthly invoices
  must be submitted by the 15<sup>th</sup> of the month following the month of service. Invoices submitted for payment must include
  the items identified in the table above.
- 2. The Contractor shall submit invoices to (include contract/PO #) <u>HL-BusinessOffice@co.whatcom.wa.us</u>.
- 3. Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from Contractor. The County may withhold payment of an invoice if the Contractor submits it more than 30 days after the expiration of this contract.
- 4. Invoices must include the following statement, with an authorized signature and date:

# I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.

5. <u>Duplication of Billed Costs or Payments for Service</u>: The Contractor shall not bill the County for services performed or provided under this contract, and the County shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.