



**DEPARTMENT OF ECONOMIC SECURITY**  
Your Partner For A Stronger Arizona

**Intergovernmental Agreement  
CONTRACT AMENDMENT**

<b>1. CONTRACTOR (Name and address)</b>  <b>Gila County Community Services Division</b> <b>5515 S. Apache Ave., Suite 200</b> <b>Globe, Arizona 85501</b>	<b>2. CONTRACT ID NUMBER</b>  <b>DE111073001</b>
<b>3. AMENDMENT NUMBER</b> <b>Ten (10)</b>	
<b>4. THE PARTIES AGREE TO THE FOLLOWING AMENDMENT</b>  Pursuant to the Terms and Conditions, Amendments or Modifications section, the purpose of this amendment is to:  <b>Funding</b> for the contract period beginning July 1, 2014 through June 30, 2015:  The reimbursement ceiling for the service for Case Management is \$319,381.  The reimbursement ceiling for the service for Community Services is \$150,000.  The cumulative reimbursement ceiling for the contract period July 1, 2010 to June 30, 2015 is increased to \$2,789,074.13  Therefore, the Itemized Service Budgets for the service of Case Management (Attachment A) and Community Services (Attachment B) are revised and attached.	
<b>5. EXCEPT AS PROVIDED HEREIN, ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AS HERETOFORE CHANGED AND/OR AMENDED REMAIN UNCHANGED AND IN FULL FORCE AND EFFECT. THE AMENDMENT SHALL BECOME EFFECTIVE ON THE DATE OF LAST SIGNATURE UNLESS OTHERWISE SPECIFIED HEREIN. BY SIGNING THIS FORM ON BEHALF OF THE CONTRACTOR, THE SIGNATORY CERTIFIES HE/SHE HAS THE AUTHORITY TO BIND THE CONTRACTOR TO THIS CONTRACT.</b>	
<b>6. ARIZONA DEPARTMENT OF ECONOMIC SECURITY</b>	<b>7. NAME OF CONTRACTOR</b> <b>Gila County Community Services Division</b>
SIGNATURE OF AUTHORIZED INDIVIDUAL	SIGNATURE OF AUTHORIZED INDIVIDUAL 
TYPED NAME <b>Francine Whittington</b>	<b>Michael A. Pastor</b>
TITLE <b>Manager – Contract Administration Unit</b>	<b>Chairman, Board of Supervisors</b>
DATE	DATE <b>6-24-2014</b>
IN ACCORDANCE WITH ARS §11-952 THIS CONTRACT AMENDMENT HAS BEEN REVIEWED BY THE UNDERSIGNED WHO HAVE DETERMINED THAT THIS CONTRACT AMENDMENT IS IN APPROPRIATE FORM AND WITHIN THE POWERS AND AUTHORITY GRANTED TO EACH RESPECTIVE PUBLIC BODY.	
<b>ARIZONA ATTORNEY GENERAL'S OFFICE</b>	<b>Approved as To form:</b>
BY:	BY: 
ASSISTANT ATTORNEY GENERAL	<b>Bryan B. Chambers, Deputy Attorney Principal</b>
DATE:	DATE: <b>6-24-2014</b>