



togetherforbetter

**AMENDMENT NO. 1
CBE NO. 606880-23
AB396 RENTAL ASSISTANCE PROGRAM**

THIS AMENDMENT is made and entered into this ____ day of _____ 2024, by and between CLARK COUNTY, NEVADA (hereinafter referred to as “COUNTY”), and HOPELINK OF SOUTHERN NEVADA (hereinafter referred to as “PROVIDER”).

WITNESSETH:

WHEREAS, the parties entered into an agreement under CBE Number 606880-23, entitled “AB396 RENTAL ASSISTANCE PROGRAM” dated December 27, 2023 (hereinafter referred to as CONTRACT); and

WHEREAS, the parties desire to amend the CONTRACT.

NOW, THEREFORE, the parties agree to amend the CONTRACT as follows:

1. Section I: Term of Contract, Page 1

ORIGINALLY WRITTEN:

COUNTY agrees to retain PROVIDER for the period from November 1, 2023 through June 30, 2024. During this period, PROVIDER agrees to provide services as required by COUNTY within the scope of this Contract. COUNTY reserves the right to extend the Contract for up to an additional three (3) months for its convenience.

REVISED TO READ:

COUNTY agrees to retain PROVIDER for the period from November 1, 2023 through June 30, 2024, with the option to renew for 1, one-year period subject to the provisions of Sections II and VIII herein. During this period, PROVIDER agrees to provide services as required by COUNTY within the scope of this Contract. COUNTY reserves the right to extend the Contract for up to an additional three (3) months for its convenience.

2. Section II: Compensation and Terms of Payment, Page 1, Letter A. Compensation, first sentence

ORIGINALLY WRITTEN:

COUNTY agrees to reimburse PROVIDER for the performance of services described in the Exhibit A, Scope of Work for the not-to-exceed amount of \$2,000,000.

REVISED TO READ:

COUNTY agrees to reimburse PROVIDER for the performance of services described in the Exhibit A, Scope of Work for the not-to-exceed amount of \$7,000,000 for the duration of the Contract.

3. Exhibit A – Scope of Work, Page A-2, Section 6.0 Fee Schedule

ORIGINALLY WRITTEN:

The following categories may be paid with authorized funds, not to exceed amount below:

Expense Category:	Total Amount
Direct	\$1,800,000
Indirect	\$200,000
Not to Exceed Total Amount:	\$2,000,000

REVISED TO READ:

The following categories may be paid with authorized funds, not to exceed amount below:

Expense Category:	Total Amount
Direct	\$6,300,000
Indirect	\$700,000
Not to Exceed Total Amount:	\$7,000,000

4. The revisions contained herein are effective as of May 1, 2024.

This Amendment No. 1 represents an increase of \$5,000,000.

Except as expressly amended herein, the terms and conditions of the CONTRACT shall remain in full force and effect.

COUNTY:
COUNTY OF CLARK, NEVADA

PROVIDER:
HOPELINK OF SOUTHERN NEVADA

By: _____
JESSICA COLVIN
Chief Financial Officer

By: Aaron Sheets
AARON SHEETS
Chief Executive Officer

APPROVED AS TO FORM:
STEVEN B. WOLFSON, District Attorney

By: Jason Patchett
Jason Patchett (May 20, 2024 09:34 PDT)
JASON B. PATCHETT
Deputy District Attorney