

Contract Number 151685

AMENDMENT TO STATE OF OREGON PERSONAL/PROFESSIONAL SERVICES CONTRACT

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This is amendment number 4 to Contract Number 151685 between the State of Oregon, acting by and through its Department of Human Services, hereinafter referred to as "DHS" and

Sequoia Counseling Services, Inc. P.O. Box 1895 Lewiston, ID 83501 Attention: Diana Uppendahl Telephone: 208-798-1646

E-mail address: sequoia3@sequoiacounselingservices.com

hereinafter referred to as "Contractor."

- 1. This amendment shall become effective on the date this amendment has been fully executed by every party and, when required, approved by Department of Administrative Services and Department of Justice.
- 2. The Contract is hereby amended as follows:
 - a. Section 1, Effective Date and Duration is hereby amended as follows: language to be deleted or replaced is struck through; new language is <u>underlined and bold</u>.

Upon signature by all applicable parties, this Contract shall be effective on the later of: (i) July 1, 2016 or, (ii) when required, the date this Contract is approved by Department of Justice, regardless of the date it is actually signed by all other parties per the authority under OAR 125-247-0288. Unless extended or terminated earlier in accordance with its terms, this Contract shall expire on June 30, 2019 June 30, 2021. Contract termination shall not extinguish or prejudice DHS' right to enforce this Contract with respect to any default by Contractor that has not been cured.

- b. Section 3. Consideration, subsection a. only, is hereby amended as follows: language to be deleted or replaced is struck through; new language is underlined and bold.
 - The maximum, not-to-exceed compensation payable to Contractor under this Contract, which includes any allowable expenses, is \$31,053.60 \$8,172.00. DHS will not pay Contractor any amount in excess of the not-to-exceed compensation of this Contract for completing the Work, and will not pay for Work performed before the date this Contract becomes effective or after the termination or expiration of this Contract. If the maximum compensation is increased by amendment of this Contract, the amendment must be fully effective before Contractor performs Work subject to the amendment.
- 3. Contractor shall comply with all federal, state and local laws, regulations, executive orders and ordinances applicable to Contractor and the Contract. DHS' performance under the Contract is conditioned upon Contractor's compliance with the obligations of contractors under ORS 279B.220, 279B.230 and 279B.235, which are incorporated by reference herein.
- 4. Except as expressly amended above, all other terms and conditions of the initial Contract and any previous amendments are still in full force and effect. Contractor certifies that the representations, warranties and certifications contained in the initial Contract are true and correct as of the effective date of this amendment and with the same effect as though made at the time of this amendment.
- 5. Certification. Without limiting the generality of the foregoing, by signature on this Contract Amendment, the undersigned hereby certifies under penalty of perjury that:
 - a. Contractor is in compliance with all insurance requirements in Exhibit C of the original Contract and, notwithstanding any provision to the contrary, Contractor shall deliver to the DHS Contract Administrator (see page 1 of the original Contract) the required Certificate(s) of Insurance for any extension of the insurance coverage required by Exhibit C of the original Contract, within 30 days of execution of this Contract Amendment. By certifying compliance with all insurance as required by this Contract, Contractor acknowledges it may be found in breach of this Contract for failure to obtain required insurance. Contractor may also be in breach of the Contract for failure to provide Certificate(s) of Insurance as required and to maintain required coverage for the duration of the Contract;
 - b. Contractor acknowledges that the Oregon False Claims Act, ORS 180.750 to 180.785, applies to any "claim" (as defined by ORS 180.750) that is made by (or caused by) the Contractor and that pertains to this Contract or to the project for which the Contract work is being performed. Contractor certifies that no claim described in the previous sentence is or will be a "false claim" (as defined by ORS 180.750) or an act prohibited by ORS 180.755. Contractor further acknowledges that in addition to the remedies under this Contract, if it makes (or causes to be made) a false claim or performs (or causes to be performed) an act prohibited under the Oregon False Claims Act, the Oregon Attorney General may enforce the liabilities and penalties provided by the Oregon False Claims Act against the

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Contractor;

The undersigned is authorized to act on behalf of Contractor and represents and c. warrants that Contractor has complied with the tax laws of the State of Oregon and the applicable tax laws of any political subdivision of Oregon. Contractor shall, throughout the duration of this Contract and any extensions, comply with all tax laws of Oregon and all applicable tax laws of any political subdivision of Oregon. For the purposes of this Section, "tax laws" includes: (i) All tax laws of Oregon, including but not limited to ORS 305.620 and ORS chapters 316, 317, and 318; (ii) Any tax provisions imposed by a political subdivision of Oregon that applied to Contractor, to Contractor's property, operations, receipts, or income, or to Contractor's performance of or compensation for any work performed by Contractor; (iii) Any tax provisions imposed by a political subdivision of Oregon that applied to Contractor, or to goods, services, or property, whether tangible or intangible, provided by Contractor; and (iv) Any rules, regulations, charter provisions, or ordinances that implemented or enforced any of the foregoing tax laws or provisions.

Contractor acknowledges that the Oregon Department of Administrative Services will report this Contract to the Oregon Department of Revenue. The Oregon Department of Revenue may take any and all actions permitted by law relative to the collection of taxes due to the State of Oregon or a political subdivision, including (i) garnishing the Contractor's compensation under this Contract or (ii) exercising a right of setoff against Contractor's compensation under this Contract for any amounts that may be due and unpaid to the State of Oregon or its political subdivisions for which the Oregon Department of Revenue collects debts;

- d. The information shown in "Contractor Data and Certification" of original Contract or as amended is Contractor's true, accurate and correct information;
- e. To the best of the undersigned's knowledge, Contractor has not discriminated against and will not discriminate against minority, women or emerging small business enterprises certified under ORS 200.055 in obtaining any required subcontracts;
- f. Contractor and Contractor's employees and agents are not included on the list titled "Specially Designated Nationals" maintained by the Office of Foreign Assets Control of the United States Department of the Treasury and currently found at: https://www.treasury.gov/resource-center/sanctions/SDN-List/Pages/default.aspx;
- g. Contractor is not listed on the non-procurement portion of the General Service Administration's "List of Parties Excluded from Federal procurement or Nonprocurement Programs" found at: https://www.sam.gov/portal/public/SAM/;
- **h.** Contractor is not subject to backup withholding because:
 - (1) Contractor is exempt from backup withholding;

- (2) Contractor has not been notified by the IRS that Contractor is subject to backup withholding as a result of a failure to report all interest or dividends; or
- (3) The IRS has notified Contractor that Contractor is no longer subject to backup withholding; and
- i. Contractor hereby certifies that the FEIN or SSN provided to DHS is true and accurate. If this information changes, Contractor is also required to provide DHS with the new FEIN or SSN within 10 days.
- **6. Contractor Data.** This information is requested pursuant to ORS 305.385 and OAR 125-246-0330(1).

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION

Contractor Name (ex	cactly as filed with the I	RS): Sequoia Co	unsella	g Services, Inc.	
Street address:	531 Bryden Aven	ue			
City, state, zip code:	Lewiston To	83501		to the state of th	
Email address:	rsequoia counse	ingservices.com		and the second s	
Telephone:	(206) 798-1646	Facsimile:	208)7	98-5568	
Is Contractor a nonresident alien, as defined in 26 U.S.C. § 7701(b)(1)? (Check one box): YES X NO					
Business Designation:	(Check one box):				
Professional Corpo Limited Liability C Corporation (5 cor	ompany	it Corporation Liability Partnership hip		mited Partnership ole Proprietorship ther	
submission of the signe	nsurance. Contractor shed Contract Amendment. al Contract, must be in el	All insurance listed	herein and	l required by	
656.027? (Check one b	ion: Does Contractor have oox). X YES NO If 1	ES, provide the follo	wing infor	mation:	
Workers' Compensation	on Insurance Company:	the state of the s	(1. - 1	1 - Idono	
Policy #: _		Expiration	on Date:	2.10. 2020	

7. Signatures.

CONTRACTOR: YOU WILL NOT BE PAID FOR SERVICES RENDERED PRIOR TO NECESSARY STATE APPROVALS.

Sequoia Counseling Services, Inc.		
Sheeff Line	Brenda N	(Kenzie
Authorized Signature	Printed Name	• •
President	Brenda N Printed Name 04 March	2019
Title	Date	
State of Oregon, acting by and through its By:	Department of Human	Services
Sara Fox Treatment	Digitally signed by	Sara Foy
Authorized Signature _	Treatifient Service:	
Sara Fox, Treatment Authorized Signature Services Program	ariage.	
TitleManager	Date; 2019.03.07 1	1:17:13 -08'00'
Approved by the Department of Administ	rative Services:	
Exempt per OAR 125-246-0170(2)		
Authorized Signature	Title	Date
Approved for Legal Sufficiency:		
Not Required per OAR 137-045-0030(1)(a)	<u> </u>	
Department of Justice	and the state of t	Date