COUNTY COPY (		)
YOUR COPY (		)
CONTRACT NO:20P-	2.0	5A

## **CLTS CONTRACT ADDENDUM**

The Purchase of Service Contract between <u>Sauk County</u>, a <u>municipal corporation</u>, acting through <u>Sauk County</u> <u>Department of Human Services</u> and <u>Homeward Bound Inc</u>, is being amended at this time to add an additional dollars. This Addends Section I **CONTRACT INFORMATION** on page one and Section IV **PAYMENT FOR SERVICES** on pages three and four of the Contract.

## III. PAYMENT FOR SERVICES

Purchaser and Provider agree:

A. The total amount to be paid to Provider by Purchaser for services provided in accordance with this Contract shall not exceed the contracted dollar amount of: \$40,000.00

Service	<b>Funding Source</b>	<u>Unit Cost</u>		<b>Total Cost</b>
Supportive Home Care	CLTS	As Detailed in	Add	\$20,000.00
	CCOP	the CLTS		
Respite	Waiver Program			
*		rate schedule		
Transportation	CLTS			
	CCOP	*		

<sup>(</sup>Effective date 01/01/2020 - 12/31/20)

B. The Provider shall bill monthly. Payment will be made in arrears each month following the month service is provided.

Please attach this addendum to your copy of the Purchase of Service Contract.

Dung Brille	10/16/20
Purchaser's Authorized Representative	Date:
Name: Daniel A. Brattset	

Title: Director

SAUK COUNTY DEPARTMENT OF HUMAN SERVICES

Provider's Authorized Representative

Name: RITA Shim File 10-30-20

Date:

Title: DUINE

NOV 0 9 2020

SAUK COUNTY
DEPT. OF HUMAN SERVICES

<sup>\*</sup>Define Rate (Example: Dollars/per unit, time/per client)