COUNTY COPY	(	)
YOUR COPY	(	)

CONTRACT NO: 24P-47C

## **CONTRACT ADDENDUM**

The Purchase of Service Contract between Sauk County, a municipal corporation, acting through Sauk County Department of Human Services and Imagine Your Capacity Counseling and Consulting, LLC is being amended at this time to add a rate. 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:

The total amount to be paid to Provider by Purchaser for services provided in A. accordance with this Contract shall not exceed the contracted dollar amount of: \$500,000.00

Service	<b>Funding Source</b>	<u>Unit Cost</u>	<b>Total Cost</b>
CCS Comprehensive		PhD Level \$160.00 per hour	Included in
Community Services			Original Dollars

(Effective date 07/01/24 - 12/31/24)

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. DocuSigned by: Brent Miller 9/19/2024 **For County:** 0A0B3AC690D7404 Name: Brent Miller Date: **Title: Administrator** SAUK COUNTY Signed by: Jessica Mijal 9/18/2024 For Agency Name: Jessica Mijal Date: Title: Director SAUK COUNTY DEPARTMENT OF HUMAN SERVICES DocuSigned by: 9/19/2024 Provider's Authorized Representative Date:

Name: Kim Schmidt Title:

Partner, LPC

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