

FULLY EXECUTED

STATE OF CALIFORNIA

STANDARD AGREEMENT AMENDMENT

STD. 213 A (Rev 6/03)

CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED _____ Pages

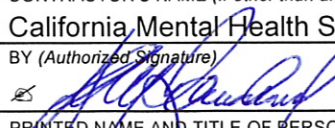
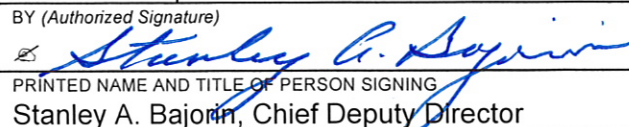
AGREEMENT NUMBER	AMENDMENT NUMBER
09-79119-000	1
REGISTRATION NUMBER	
eP 1073260	

- This Agreement is entered into between the State Agency and Contractor named below:
STATE AGENCY'S NAME
California Department of Mental Health
CONTRACTOR'S NAME
California Mental Health Services Authority
- The term of this Agreement is April 15, 2010 through June 30, 2014
- The maximum amount of this Agreement after this amendment is: \$ 160,000,000.00
One Hundred
- The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

This Amendment extends the term of the Agreement by two years. The new end date of the Agreement shall be June 30, 2014.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		CALIFORNIA Department of General Services Use Only Exempt from Compliance with the Public Contract Code, the State Administrative Manual, and from approval by the Department of General Services per section 5897 (e) of the Welfare and Institutions Code. <input checked="" type="checkbox"/> Exempt per: W&IC 5897(e)
<small>CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.)</small> <u>California Mental Health Services Authority</u>		
<small>BY (Authorized Signature)</small> 	<small>DATE SIGNED (Do not type)</small> <u>2/7/2011</u>	
<small>PRINTED NAME AND TITLE OF PERSON SIGNING</small> <u>Allan Rawland, President</u>		
<small>ADDRESS</small> <u>C/O George Hills Company, 3043 Gold Canal Drive, Suite 200 Rancho Cordova, CA 95670-6394</u>		
STATE OF CALIFORNIA		
<small>AGENCY NAME</small> <u>California Department of Mental Health</u>		
<small>BY (Authorized Signature)</small> 	<small>DATE SIGNED (Do not type)</small> <u>2-19-11</u>	
<small>PRINTED NAME AND TITLE OF PERSON SIGNING</small> <u>Stanley A. Bajorin, Chief Deputy Director</u>		
<small>ADDRESS</small> <u>1600 9th Street, Room 101, Sacramento, CA 95814</u>		

DMH USE ONLY

State Master
 Contractor
 Contract Manager
 Accounting
 State Controller