AMENDMENT NO. 2 TO SERVICE AGREEMENT

This Amendment No. 2 to Service Agreement ("Amendment No. 2") is dated and is between Pacific Clinics, a California Non-Profit, 501 (c)(3) Corporation ("Contractor"), and the County of Fresno, a political subdivision of the State of California ("County").

Recitals

A. On June 20, 2023, the County and the Contractor entered into Agreement No. 23-280 ("Agreement"), as amended by County Agreement No. 24-081, for Children/Youth Assertive Community Treatment for the provision of integrated mental health and community support services to youth ages 10-18 with serious emotional disturbance (SED) and at least one diagnosis from the current Diagnostic and Statistical Manual of Mental Disorders (DSM). The agreement combined and superseded Agreement Nos. 18-689 and 18-689-1.

B. The County and the Contractor now desire to further amend the Agreement to extend the term for an additional three (3) month base and optional three (3) month renewal term and increasing the maximum compensation by Two Million, One Hundred Fifty Thousand, Three Hundred Thirty-Five and No/100 Dollars (\$2,150,335.00).

The parties therefore agree as follows:

1. **Term.** This Amendment extends the term of the Agreement through September 30, 2025. The term of this Agreement may be extended for no more than one three-month period only upon written approval of both parties at least thirty (30) days before the first day of the three-month extension period. The County's DBH Director, or designee, is authorized to sign the written approval on behalf of the County based on the Contractor's satisfactory performance. The extension of this Agreement by the County is not a waiver or compromise of any default or breach of this Agreement by the Contractor existing at the time of the extension whether or not known to the County.

2. All references to Exhibit G shall be deemed references to "Revised Exhibit G." Revised Exhibit G is attached and incorporated by this reference.

Section 4.2 of the Agreement, beginning on Page 8, Line 21, is amended to add the
following:

2	following:
3	"The maximum compensation payable to the contractor under this Agreement for
4	the period of July 1, 2025, through September 30, 2025, for Specialty Mental
5	Health Services is One Million Seventy-Two Thousand One Hundred Sixty-Eight
6	and No/100 Dollars (\$1,072,168.00), which is not a guaranteed sum but shall be
7	paid only for services rendered and received. The maximum compensation
8	payable to the contractor under this Agreement for the period of October 1, 2025,
9	through December 31, 2025, for Specialty Mental Health Services is One Million
10	Seventy-Two Thousand One Hundred Sixty-Seven and No/100 Dollars
11	(\$1,072,167.00), which is not a guaranteed sum but shall be paid only for
12	services rendered and received."
13	4. Section 4.3 of the Agreement, beginning on Page 8, Line 27, is amended to add the
14	following:
15	"The maximum compensation payable to the Contractor under this Agreement for
16	the period of July 1, 2025, through September 30, 2025 for Non-Medi-Cal
17	supports is Three Thousand and No/100 Dollars (\$3,000.00). The maximum
18	compensation payable to the Contractor under this Agreement for the period of
19	October 1, 2025, through December 31 ,2025, for Non-Medi-Cal supports is
20	Three Thousand and No/100 Dollars (\$3,000.00)."
21	5. Section 4.5 of the Agreement, beginning on Page 9, Lines 9 through 22 is deleted in its
22	entirety and replaced with the following:
23	"Total Maximum Compensation. In no event shall the maximum contract
24	amount for all the services provided by the Contractor to County under the terms
25	and conditions of this Agreement be in excess of Eleven Million One Thousand
26	Six Hundred Seventy-Five and No/100 (\$11,001,675.00) during the entire term of
27	this Agreement. The Contractor acknowledges that the County is a local
28	government entity and does so with notice that the County's powers are limited

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1	by the California Constitution and by State law, and with notice that the
2	Contractor may receive compensation under this Agreement only for services
3	performed according to the terms of this Agreement and while this Agreement is
4	in effect, and subject to the maximum amount payable under this section. The
5	Contractor further acknowledges that County employees have no authority to pay
6	the Contractor except as expressly provided in this Agreement. The Contractor
7	will be compensated for performance of its services under this Agreement as
8	provided in this Article. The Contractor is not entitled to any compensation except
9	as expressly provided in this Agreement."
10	6. When both parties have signed this Amendment No. 2, the Agreement, Amendment No.
11	1 and this Amendment No. 2 together constitute the Agreement.
12	7. The Contractor represents and warrants to the County that:
13	a. The Contractor is duly authorized and empowered to sign and perform its
14	obligations under this Amendment.
15	b. The individual signing this Amendment on behalf of the Contractor is duly
16	authorized to do so and his or her signature on this Amendment legally binds
17	the Contractor to the terms of this Amendment.
18	8. The parties agree that this Amendment may be executed by electronic signature as
19	provided in this section.
20	a. An "electronic signature" means any symbol or process intended by an
21	individual signing this Amendment to represent their signature, including but
22	not limited to (1) a digital signature; (2) a faxed version of an original
23	handwritten signature; or (3) an electronically scanned and transmitted (for
24	example by PDF document) version of an original handwritten signature.
25	b. Each electronic signature affixed or attached to this Amendment (1) is
26	deemed equivalent to a valid original handwritten signature of the person
27	signing this Amendment for all purposes, including but not limited to
28	evidentiary proof in any administrative or judicial proceeding, and (2) has the

1		same force and effect as the valid original handwritten signature of that
2		person.
3	C.	The provisions of this section satisfy the requirements of Civil Code section
4		1633.5, subdivision (b), in the Uniform Electronic Transaction Act (Civil Code,
5		Division 3, Part 2, Title 2.5, beginning with section 1633.1).
6	d.	Each party using a digital signature represents that it has undertaken and
7		satisfied the requirements of Government Code section 16.5, subdivision (a),
8		paragraphs (1) through (5), and agrees that each other party may rely upon
9		that representation.
10	e.	This Amendment is not conditioned upon the parties conducting the
11		transactions under it by electronic means and either party may sign this
12		Amendment with an original handwritten signature.
13	9. This Amer	ndment may be signed in counterparts, each of which is an original, and all of
14	which together co	onstitute this Amendment.
15	10. The Agree	ement as previously amended and as amended by this Amendment No. 2 is
16	ratified and contir	ued. All provisions of the Agreement as previously amended and not
17	amended by this <i>i</i>	Amendment No. 2 remain in full force and effect.
18		[SIGNATURE PAGE FOLLOWS]
19		
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1	The parties are signing this Amend	ment No. 2 on the date stated in the introductory
2	clause.	
3	Pacific Clinics	COUNTY OF FRESNO
4	Signed by:	
5	And Section 1	
6	Kim Wells, Chief Legal Officer	Ernest Buddy Mendes, Chairman of the Board of Supervisors of the County of Fresno
7	251 Llewellyn Ave Campbell, Ca. 95008	Attest:
8		Bernice E. Seidel Clerk of the Board of Supervisors County of Fresno, State of California
9		County of Fresho, State of California
10 11		By: Deputy
12	For accounting use only:	Deputy
13		
14	Org No.: 56304323 Account No.: 7295 Fund No.: 0001	
15	Subclass No.: 10000	
16		
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27		
28		

Adolescent Community Treatment (ACT)

PACIFIC CLINICS

Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025

PROGRAM EXPENSES

	1000: DIRECT SALARIES & BENEFITS					
	mployee Salaries Administrative Position	FTE	Admin	Program	Total	
1101		FIL	Admin	Flogram	\$ -	
1101					Ş -	
1102			-			
1103			-		-	
1105			-		-	
1106			-		-	
1107			-		-	
1108			-		-	
1109			-		-	
1110			-		-	
1111			-		-	
1112			-		-	
1113			-		-	
1114			-		-	
1115			-		-	
	Direct Personnel Admin Salaries Subtotal	0.00	\$-		\$-	
	Program Position	FTE	Admin	Program	Total	
1116					\$-	
1117				-	-	
1118				-	-	
1119				-	-	
1120				-	-	
1121				-	-	
1122				-	-	
1123				-	-	
1124				-	-	
1125 1126				-	-	
1120				-	-	
1127				-	-	
1128				-		
1130				-	-	
1130				-	-	
1132				-	-	
1133				-	-	
1134				-	-	
	Direct Personnel Program Salaries Subtotal	0.00		\$-	\$-	
	<u> </u>	-				
			Admin	Program	Total	
	Direct Personnel Salaries Subtotal	0.00	\$ -	\$ -	\$ -	
	mployee Benefits			1	1	
Acct #	Description		Admin	Program	Total	
	Retirement				\$-	
	Worker's Compensation		-		-	
1203	Health Insurance		-	-	-	

Revised Exhibit G

1204	Other (Benefits listed under ARPA Grant)		-	
1205	Other (specify)	-	-	
1206	Other (specify)	-	-	
	Direct Employee Benefits Subtotal:	\$ -	\$-	\$
Direct P	ayroll Taxes & Expenses:			
Acct #	Description	Admin	Program	Total
1301	OASDI	\$ -	\$-	\$
1302	FICA/MEDICARE	-	-	
1303	SUI	-	-	
1304	Other (specify)	-	-	
1305	Other (specify)	-	-	
1306	Other (specify)	-	-	
	Direct Payroll Taxes & Expenses Subtotal:	\$ -	\$-	\$
	DIRECT EMPLOYEE SALARIES & BENEFITS TOTAL:	Admin	Program	Total
		\$ -	\$ -	\$

DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program
	#DIV/0!	#DIV/0!

2000: D	RECT CLIENT SUPPORT	
Acct #	Line Item Description	Amount
2001	Child Care	
2002	Client Housing Support	266
2003	Client Transportation & Support	929
2004	Clothing, Food, & Hygiene	751
2005	Education Support	66
2006	Employment Support	
2007	Household Items for Clients	396
2008	Medication Supports	
2009	Program Supplies - Medical	
2010	Utility Voucher	197
2011	Other	395
2012	Other	
2013	Other	
2014	Other	
2015	Other	
2016	Other	-
	DIRECT CLIENT CARE TOTAL	\$ 3,000

3000: D	RECT OPERATING EXPENSES	
Acct #	Line Item Description	Amount
3001	Telecommunications	\$-
3002	Printing/Postage	-
3003	Office, Household & Program Supplies	-
3004	Advertising	-
3005	Staff Development & Training	-
3006	Staff Mileage	-
3007	Subscriptions & Memberships	-
3008	Vehicle Maintenance	-
3009	Other (specify)	-
3010	Other (specify)	-
3011	Other (specify)	-
3012	Other (specify)	-

DIRECT OPERATING EXPENSES TOTAL: \$

4000: DIRECT FACILITIES & EQUIPMENT				
Acct #	Line Item Description	Amount		
4001	Building Maintenance	\$		
4002	Rent/Lease Building			
4003	Rent/Lease Equipment			
4004	Rent/Lease Vehicles			
4005	Security			
4006	Utilities			
4007	Other (specify)			
4008	Other (specify)			
4009	Other (specify)			
4010	Other (specify)			
	DIRECT FACILITIES/EQUIPMENT TOTAL:	\$		

5000: D	5000: DIRECT SPECIAL EXPENSES				
Acct #	Line Item Description	Amount			
5001	Consultant (Network & Data Management)	\$-			
5002	HMIS (Health Management Information System)	-			
5003	Contractual/Consulting Services (Specify)	-			
5004	Translation Services	-			
5005	Other (specify)	-			
5006	Other (specify)	-			
5007	Other (specify)	-			
5008	Other (specify)	-			
	DIRECT SPECIAL EXPENSES TOTAL:	\$-			

Acct #	Line Item Description	Amount
	Administrative Overhead	
6001	Use this line and only this line for approved indirect cost rate	\$-
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Personnel (Indirect Salaries & Benefits)	-
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$ -

INDIRECT COST RATE

0.00%

7000: D	7000: DIRECT FIXED ASSETS				
Acct #	# Line Item Description Amount				
7001	Computer Equipment & Software	\$-			
7002	2 Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data -				

Revised Exhibit G

7003	Furniture & Fixtures	-
7004	Leasehold/Tenant/Building Improvements	-
7005	Other Assets over \$500 with Lifespan of 2 Years +	-
7006	Assets over \$5,000/unit (Specify)	-
7007	Other (specify)	-
7008	Other (specify)	-
	FIXED ASSETS EXPENSES TOTAL	Ś -

TOTAL PROGRAM EXPENSES \$

3,000

PROGRAM FUNDING SOURCES

8100 - SUBSTANCE USE DISORDER FUNDS					
Acct #	Line Item Description		Amount		
8101	Drug Medi-Cal	\$		-	
8102	SABG	\$		-	
	SUBSTANCE USE DISORDER FUNDS TOTAL	\$		-	

	8200 - REALIGNMENT					
Acct #	Line Item Description	Amount				
8201	Realignment	\$	-			
	REALIGNMENT TOTAL	\$	-			

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)				
Acct #	MHSA Component	MHSA Program Name	Α	mount	
8301	CSS - Community Services & Supports		\$	3,000	
8302	PEI - Prevention & Early Intervention			-	
8303	INN - Innovations			-	
8304	WET - Workforce Education & Training			-	
8305	CFTN - Capital Facilities & Technology			-	
		MHSA TOTAL	\$	3,000	

	8400 - OTHER REVENUE				
Acct #	Line Item Description Amo				
8401	Client Fees				
8402	Client Insurance	-			
8403	Grants (ARPA)				
8404	Other (Specify)	-			
8405	Other (Specify)	-			
	OTHER REVENUE TOTAL	\$ -			

TOTAL PROGRAM FUNDING SOURCES: \$ 3,000

NET PROGRAM COST: \$

ACT FSP Narrative FY25-26 Ext 1

Adolescent Community Treatment (ACT) PACIFIC CLINICS

Fiscal Year (FY) 2025-2026 | July 1, 2025 to September 30, 2025 Budget Narrative

		PROGRAM	
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN
	SALARIES & BENEFITS	-	
ninistrative		-	
	0	_	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
1114	0	-	
	0	-	
gram Positic	ons	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
		1	
ct Employe	e Benefits		
	Retirement	-	
	Worker's Compensation	-	
	Health Insurance	-	
	Other (Benefits listed under ARPA Grant)	-	
	Other (specify)	-	
	Other (specify)	-	
		l	
ct Payroll T	axes & Expenses:	-	
1301		-	
	FICA/MEDICARE	-	
	SUI	-	
	Other (specify)	-	
	Other (specify)	-	
1303			

2000: DIRECT (LIENT SUPPORT	3,000	
2001	Child Care	-	
2002	Client Housing Support	temporary housing, mas	imited to: housing subsidies for permanent, transitional and ter leases, motel and other housing vouchers, rental security onth rental payments, and other fiscal housing supports

PROGRAM EXPENSE					
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE		
2003	Client Transportation & Support	929	This includes bus vouchers and reimbursements for other travel expenses as lack of transportation is frequently a major barrier for families in accessing services. This also includes other non-traditional supports to meet the needs that families may have.		
2004	Clothing, Food, & Hygiene	751	Supports for these basic needs aids in fully realizing the benefits provided through Fu Service Partnerships. In addition to vouchers for these basic necessities, food/snacks for families are provided during treatment sessions.		
2005	Education Support	66	This includes, but is not limited to assistance for youth with linkages to educational resources and supports, as well as support in addressing any barriers that impact educational success.		
2006	Employment Support	-			
2007	Household Items for Clients	396	Supports the purchase of household items to assist in maintaining a safe, healthy, an secure home environment.		
2008	Medication Supports	-			
2009	Program Supplies - Medical	-			
2010	Utility Voucher	197	Supports emergency assistance with maintaining electricity, gas, water, trash pic-up, etc. to maintain a safe and healthy home environment.		
2011	Other	395	This includes, but is not limited to building repair and maintenance, utilities, housing agency management fees, insurance, property taxes and assessments, credit reportin fees, and other operating costs incurred in providing child and family housing support		
2012	Other	-			
2013	Other	-			
2014	Other	-			
2015	Other	-			
2016	Other	-			

3000: DIRECT 0	D00: DIRECT OPERATING EXPENSES -				
3001	Telecommunications	-			
3002	Printing/Postage	-			
3003	Office, Household & Program Supplies	-			
3004	Advertising	-			
3005	Staff Development & Training	-			
3006	Staff Mileage	-			
3007	Subscriptions & Memberships	-			
3008	Vehicle Maintenance	-			
3009	Other (specify)	-			
3010	Other (specify)	-			
3011	Other (specify)	-			
3012	Other (specify)	-			

4000: DIRECT F	00: DIRECT FACILITIES & EQUIPMENT -				
4001	Building Maintenance	-			
4002	Rent/Lease Building	-			
4003	Rent/Lease Equipment	-			
4004	Rent/Lease Vehicles	-			
4005	Security	-			
4006	Utilities	-			
4007	Other (specify)	-			
4008	Other (specify)	-			
4009	Other (specify)	-			
4010	Other (specify)	-			

5000: DIRECT S	10: DIRECT SPECIAL EXPENSES -		
5001	Consultant (Network & Data Management)	-	
5002	HMIS (Health Management Information System)	-	
5003	Contractual/Consulting Services (Specify)	-	
5004	Translation Services	-	
5005	Other (specify)	-	
5006	Other (specify)	-	
5007	Other (specify)	-	
5008	Other (specify)	-	

ACT FSP Narrative FY25-26 Ext 1

PROGRAM EXPENSE					
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE		

6000: INDIRE	00: INDIRECT EXPENSES -					
6001	Administrative Overhead	-				
6002	Professional Liability Insurance	-				
6003	Accounting/Bookkeeping	-				
6004	External Audit	-				
6005	Insurance (Specify):	-				
6006	Payroll Services	-				
6007	Depreciation (Provider-Owned Equipment to be Used	-				
6008	Personnel (Indirect Salaries & Benefits)	-				
6009	Other (Indirect Cost under ARPA Grant)	-				
6010	Other (specify)	-				
6011	Other (specify)	-				
6012	Other (specify)	-				
6013	Other (specify)	-				

0: DIRECT F	DIRECT FIXED ASSETS -				
7001	Computer Equipment & Software	-			
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	-			
7003	Furniture & Fixtures	-			
7004	Leasehold/Tenant/Building Improvements	-			
7005	Other Assets over \$500 with Lifespan of 2 Years +	-			
7006	Assets over \$5,000/unit (Specify)	-			
7007	Other (specify)	-			
7008	Other (specify)	-			

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:	3,000
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	3,000
BUDGET CHECK:	-

Adolescent Community Treatment (ACT) PACIFIC CLINICS

Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025

PROGRAM EXPENS	ES
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	PROGRAM	A EXPENSES				
	1000: DIRECT SA	LARIES & BENE	FITS			
	mployee Salaries					
	Administrative Position	FTE	Admin	Program	ć	Total
1101					\$	
1102 1103					_	
1103			-	-		
1104			-	-		
1105			-	-		
1100					-	
1107						
1103						
1110						
1110			-			
1112			-			
1113			-			
1114			-			
1115			-			
	Direct Personnel Admin Salaries Subtotal	0.00	\$ -		\$	
Acct #	Program Position	FTE	Admin	Program		Total
1116	-			, v	\$	
1117				-		
1118				-		
1119				-		
1120				-		
1121				-		
1122				-		
1123				-		
1124				-		
1125				-		
1126				-		
1127				-		
1128				-		
1129				-		
1130				-		
1131				-		
1132				-		
1133				-		
1134				-		
	Direct Personnel Program Salaries Subtotal	0.00		\$-	\$	
				-	-	
			Admin	Program	~	Total
	Direct Personnel Salaries Subtotal	0.00	\$-	\$-	\$	
Direct E	mployee Benefits					
Acct #			Admin	Program		Total
	Retirement				\$	
1202	Worker's Compensation		-	-		
				-		
1203	Health Insurance		-			
1203 1204	Other (Benefits listed under ARPA Grant)			-		
1203 1204 1205	Other (Benefits listed under ARPA Grant) Other (specify)		-	-		
1203 1204 1205	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify)	ofite Culterer	-			
1203 1204 1205	Other (Benefits listed under ARPA Grant) Other (specify)	efits Subtotal:	-			
1203 1204 1205 1206	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify)	efits Subtotal:	-			
1203 1204 1205 1206	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses:	efits Subtotal:	-			Total
1203 1204 1205 1206 Direct P Acct # 1301	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI	efits Subtotal:	- - \$ -		\$	Total
1203 1204 1205 1206 Direct P Acct # 1301	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description	efits Subtotal:	- - \$ - Admin		\$ \$	Total
1203 1204 1205 1206 Direct P Acct # 1301 1302 1303	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI	efits Subtotal:	- - \$ - Admin \$ -		\$ \$	Total
1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify)	efits Subtotal:	- - \$ - Admin \$ -		\$ \$	Total
1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify) Other (specify)	efits Subtotal:	- - \$ - Admin \$ - - -		\$ \$	Total
1203 1204 1205 1206 Direct P Acct # 1301 1302 1303 1304 1305	Other (Benefits listed under ARPA Grant) Other (specify) Other (specify) Direct Employee Bene ayroll Taxes & Expenses: Description OASDI FICA/MEDICARE SUI Other (specify)		- 		\$	Total

DIRECT EMPLOYEE SALARIES & BENEFITS TOTAL:	Admin	Program	Total	
	\$-	\$-	\$-	
DIRECT EMPLOYEE SALARIES & BENEFITS PERCENTAGE:	Admin	Program		
	#DIV/0!	#DIV/0!		

Acct #	Line Item Description	Amou	unt
2001	Child Care		
2002	Client Housing Support		267
2003	Client Transportation & Support		928
2004	Clothing, Food, & Hygiene		750
2005	Education Support		66
2006	Employment Support		
2007	Household Items for Clients		396
2008	Medication Supports		
2009	Program Supplies - Medical		
2010	Utility Voucher		198
2011	Client Housing and Operating Expenses		395
2012	Other		
2013	Other		
2014	Other		
2015	Other		
2016	Other		
	DIRECT CLIENT CARE TOTAL	\$	3,000

Acct #	Line Item Description	
3001	Telecommunications	\$
3002	Printing/Postage	
3003	Office, Household & Program Supplies	
3004	Advertising	
3005	Staff Development & Training	
3006	Staff Mileage	
3007	Subscriptions & Memberships	
3008	Vehicle Maintenance	
3009	Other (specify)	
3010	Other (specify)	
3011	Other (specify)	
3012	Other (specify)	
	DIRECT OPERATING EXPENSES TOTAL:	Ś

Acct #	Line Item Description	
4001	Building Maintenance	\$
4002	Rent/Lease Building	
4003	Rent/Lease Equipment	
4004	Rent/Lease Vehicles	
4005	Security	
4006	Utilities	
4007	Other (specify)	
4008	Other (specify)	
4009	Other (specify)	
4010	Other (specify)	
	DIRECT FACILITIES/EQUIPMENT TOTAL:	\$

Acct #	Line Item Description	Amount
5001	Consultant (Network & Data Management)	\$
5002	HMIS (Health Management Information System)	
5003	Contractual/Consulting Services (Specify)	
5004	Translation Services	
5005	Other (specify)	
5006	Other (specify)	
5007	Other (specify)	
5008	Other (specify)	
	DIRECT SPECIAL EXPENSES TOTAL:	\$

6000: INDIRECT EXPENSES

Acct #	Line Item Description	Amount
	Administrative Overhead	
6001	Use this line and only this line for approved indirect cost rate	\$-
	Administrative Overhead	
6002	Professional Liability Insurance	-
6003	Accounting/Bookkeeping	-
6004	External Audit	-
6005	Insurance (Specify):	-
6006	Payroll Services	-
6007	Depreciation (Provider-Owned Equipment to be Used for Program Purposes)	-
6008	Personnel (Indirect Salaries & Benefits)	-
6009	Other (Indirect Cost under ARPA Grant)	
6010	Other (specify)	-
6011	Other (specify)	-
6012	Other (specify)	-
6013	Other (specify)	-
	INDIRECT EXPENSES TOTAL	\$-

INDIRECT COST RATE

0.00%

Acct #	Line Item Description	Amount
7001	Computer Equipment & Software	\$
7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA Data	
7003	Furniture & Fixtures	
7004	Leasehold/Tenant/Building Improvements	
7005	Other Assets over \$500 with Lifespan of 2 Years +	
7006	Assets over \$5,000/unit (Specify)	
7007	Other (specify)	
7008	Other (specify)	
	FIXED ASSETS EXPENSES TOTAL	Ś

TOTAL PROGRAM EXPENSES \$

3,000

PROGRAM FUNDING SOURCES

8100 - SUBSTANCE USE DISORDER FUNDS						
Acct #	Line Item Description	Amount				
8101	Drug Medi-Cal	\$	-			
8102	SABG	\$	-			
	SUBSTANCE USE DISORDER FUNDS TOTAL \$ -					

	8200 - REALIGNMENT					
Acct #	Line Item Description	1	Amount			
8201	Realignment	\$		-		
	REALIGNMENT TOTAL	\$		-		

	8300 - MENTAL HEALTH SERVICE ACT (MHSA)				
Acct #	MHSA Component	MHSA Program Name	Ar	mount	
8301	CSS - Community Services & Supports		\$	3,000	
8302	PEI - Prevention & Early Intervention			-	
8303	INN - Innovations			-	
8304	WET - Workforce Education & Training			-	
8305	CFTN - Capital Facilities & Technology			-	
		MHSA TOTAL	Ś	3.000	

Acct #		Line Item Description	Amount
8401	Client Fees		
8402	Client Insurance		
8403	Grants (ARPA)		
8404	Other (Specify)		
8405	Other (Specify)		
		OTHER REVENUE TOTAL	\$
		TOTAL PROGRAM FUNDING SOURCES:	\$ 3,0

NET PROGRAM COST: \$

ACT FSP Narrative FY25-26 Ext2

Adolescent Community Treatment (ACT) PACIFIC CLINICS

Fiscal Year (FY) 2025-2026 | October 1, 2025 to December 31, 2025 Budget Narrative

		PROGRAM	EXPENSE
ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LIN
	SALARIES & BENEFITS		
ninistrative		-	
	0	-	
	0	-	
	0	_	
	0	-	
	0	-	
	0	-	
1107	0	-	
1108	0	-	
1109	0	-	
1110	0	-	
1111	0	-	
1112	0	-	
	0	-	
	0	-	
	0	-	
gram Positio	ons	-	
1116	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
	0	-	
1134	0	-	
ct Employe	- Dougefite		
	Retirement Worker's Compensation	-	
	Health Insurance		
	Other (Benefits listed under ARPA Grant)		
1204	Other (specify)	-	
	Other (specify) Other (specify)		
1200		-	
ct Payroll T	axes & Expenses:	-	
	OASDI	-	
	FICA/MEDICARE	_	
1302			
	Other (specify)		
1304	Other (specify) Other (specify)		
1200	Other (specify)		

2000:	2000: DIRECT CLIENT SUPPORT		CLIENT SUPPORT 3,000	
	2001	Child Care	-	
	2002	Client Housing Support		This includes, but is not limited to: housing subsidies for permanent, transitional and temporary housing, master leases, motel and other housing vouchers, rental security deposits, first and last month rental payments, and other fiscal housing supports resources.
	2003	Client Transportation & Support		This includes bus vouchers and reimbursements for other travel expenses as lack of transportation is frequently a major barrier for families in accessing services. This also includes other non-traditional supports to meet the needs that families may have.

ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE
2004	Clothing, Food, & Hygiene	750	Supports for these basic needs aids in fully realizing the benefits provided through Ful Service Partnerships. In addition to vouchers for these basic necessities, food/snacks for families are provided during treatment sessions.
2005	Education Support	66	This includes, but is not limited to assistance for youth with linkages to educational resources and supports, as well as support in addressing any barriers that impact educational success.
2006	Employment Support	-	
2007	Household Items for Clients	396	Supports the purchase of household items to assist in maintaining a safe, healthy, and secure home environment.
2008	Medication Supports	-	
2009	Program Supplies - Medical	-	
2010	Utility Voucher	198	Supports emergency assistance with maintaining electricity, gas, water, trash pic-up, etc. to maintain a safe and healthy home environment.
2011	Client Housing and Operating Expenses	395	This includes, but is not limited to building repair and maintenance, utilities, housing agency management fees, insurance, property taxes and assessments, credit reportin fees, and other operating costs incurred in providing child and family housing suppor
2012	Other	-	
2013	Other	-	
2014	Other	-	
2015	Other	-	
2016	Other	-	

00: DIRECT (DIRECT OPERATING EXPENSES -					
3001	Telecommunications	-				
3002	Printing/Postage	-				
3003	Office, Household & Program Supplies	-				
3004	Advertising	-				
3005	Staff Development & Training	-				
3006	Staff Mileage	-				
3007	Subscriptions & Memberships	-				
3008	Vehicle Maintenance	-				
3009	Other (specify)	-				
3010	Other (specify)	-				
3011	Other (specify)	-				
3012	Other (specify)	-				

4000: DIRECT F	D: DIRECT FACILITIES & EQUIPMENT -					
4001	Building Maintenance	-				
4002	Rent/Lease Building	-				
4003	Rent/Lease Equipment	-				
4004	Rent/Lease Vehicles	-				
4005	Security	-				
4006	Utilities	-				
4007	Other (specify)	-				
4008	Other (specify)	-				
4009	Other (specify)	-				
4010	Other (specify)	-				

5000: DIRECT S	0: DIRECT SPECIAL EXPENSES -				
5001	Consultant (Network & Data Management)	-			
5002	HMIS (Health Management Information System)	-			
5003	Contractual/Consulting Services (Specify)	-			
5004	Translation Services	-			
5005	Other (specify)	-			
5006	Other (specify)	-			
5007	Other (specify)	-			
5008	Other (specify)	-			

6000: INDIREC	00: INDIRECT EXPENSES -				
6001	Administrative Overhead	-			
6002	Professional Liability Insurance	-			
6003	Accounting/Bookkeeping	-			
6004	External Audit	-			
6005	Insurance (Specify):	-			
6006	Payroll Services	-			

PROGRAM EXPENSE						
	ACCT #	LINE ITEM	AMT	DETAILED DESCRIPTION OF ITEMS BUDGETED IN EACH ACCOUNT LINE		
	6007	Depreciation (Provider-Owned Equipment to be Used	-			
	6008	Personnel (Indirect Salaries & Benefits)				
	6009	Other (Indirect Cost under ARPA Grant)	-			
	6010	Other (specify)	-			
	6011	Other (specify)	-			
	6012	Other (specify)	-			
	6013	Other (specify)	-			
7000:	7000: DIRECT FIXED ASSETS -					
	7001	Computer Equipment & Software	-			
	7002	Copiers, Cell Phones, Tablets, Devices to Contain HIPAA	-			
	7003	Furniture & Fixtures	-			
	7004	Leasehold/Tenant/Building Improvements	-			
	7005	Other Assets over \$500 with Lifespan of 2 Years +	-			
	7006	Assets over \$5,000/unit (Specify)	-			
	7007	Other (specify)	-			
	7008	Other (specify)	-			

TOTAL PROGRAM EXPENSE FROM BUDGET NARRATIVE:	3,000
TOTAL PROGRAM EXPENSES FROM BUDGET TEMPLATE:	3,000
BUDGET CHECK:	-

Fresno County Department of Behavioral Health