

**LEWIS COUNTY PUBLIC HEALTH & SOCIAL SERVICES DEPARTMENT
2022-2024 CONSOLIDATED CONTRACT**

CONTRACT NUMBER: CLH31017

AMENDMENT NUMBER: 7

PURPOSE OF CHANGE: To amend this contract between the DEPARTMENT OF HEALTH hereinafter referred to as "DOH", and LEWIS COUNTY PUBLIC HEALTH & SOCIAL SERVICES DEPARTMENT, a Local Health Jurisdiction, hereinafter referred to as "LHJ", pursuant to the Modifications/Waivers clause, and to make necessary changes within the scope of this contract and any subsequent amendments thereto.

IT IS MUTUALLY AGREED: That the contract is hereby amended as follows:

1. Exhibit A Statements of Work, includes the following statements of work, which are incorporated by this reference and located on the DOH Finance SharePoint site in the Upload Center at the following URL:

<https://stateofwa.sharepoint.com/sites/doh-ofsfundingresources/sitepages/home.aspx?e1:9a94688da2d94d3ea80ac7fbc32e4d7c>

- ☒ Adds Statements of Work for the following programs:
Executive Office of Resiliency & Health Security-PHEP - Effective July 1, 2022
Office of Immunization Perinatal Hepatitis B - Effective July 1, 2022
Office of Immunization Regional Representatives - Effective July 1, 2022

- ☒ Amends Statements of Work for the following programs:
COVID-19 Mass Vaccination-FEMA - Effective January 1, 2022
DCHS-ELC-COVID-19 Response - Effective January 1, 2022
Foundational Public Health Services (FPHS) - Effective January 1, 2022
Maternal & Child Health Block Grant - Effective January 1, 2022
Office of Drinking Water Group A Program - Effective January 1, 2022
Supplemental Nutrition Assistance Program-Education - Effective January 1, 2022

- ☒ Deletes Statements of Work for the following programs:
OI-Promotion of Immunizations to Improve Vaccination Rates - Effective July 1, 2022

2. Exhibit B-7 Allocations, attached and incorporated by this reference, amends and replaces Exhibit B-6 Allocations as follows:

- ☐ Increase of _____ for a revised maximum consideration of _____.
- ☒ Decrease of **\$571,739** for a revised maximum consideration of **\$4,646,898**.
- ☐ No change in the maximum consideration of _____.
Exhibit B Allocations are attached only for informational purposes.

Unless designated otherwise herein, the effective date of this amendment is the date of execution.

ALL OTHER TERMS AND CONDITIONS of the original contract and any subsequent amendments remain in full force and effect.

IN WITNESS WHEREOF, the undersigned has affixed his/her signature in execution thereof.

LEWIS COUNTY PUBLIC HEALTH & SOCIAL SERVICES DEPARTMENT	STATE OF WASHINGTON DEPARTMENT OF HEALTH
Signature:	Signature:
Date:	Date:

APPROVED AS TO FORM ONLY
Assistant Attorney General