



CALIFORNIA DEPARTMENT OF EDUCATION

1430 N Street

Sacramento, CA 95814-5901

F.Y. 18 - 19

Amendment 01

LOCAL AGREEMENT FOR CHILD DEVELOPMENT SERVICES

Budget Act

DATE: July 01, 2018

CONTRACT NUMBER: CSPP-8571

PROGRAM TYPE: CALIFORNIA STATE
PRESCHOOL PROGRAM

PROJECT NUMBER: 43-6959-00-8

CONTRACTOR'S NAME: MOUNTAIN VIEW WHISMAN SCHOOL DISTRICT

This agreement with the State of California dated July 01, 2018 designated as number CSPP-8571 shall be amended in the following particulars but no others:

The Maximum Reimbursable Amount (MRA) payable pursuant to the provisions of this agreement shall be amended by deleting reference to \$1,045,508.00 and inserting \$1,097,930.00 in place thereof.


The Maximum Rate per child day of enrollment payable pursuant to the provisions of the agreement shall be amended by deleting reference to \$49.41 and inserting \$52.17 in place thereof.

SERVICE REQUIREMENTS

The minimum Child Days of Enrollment (CDE) Requirement shall be amended by deleting reference to 21,160.0 and inserting 21,046.0 in place thereof.

Minimum Days of Operation (MDO) Requirement shall be 175. (No Change)

EXCEPT AS AMENDED HEREIN all terms and conditions of the original agreement shall remain unchanged and in full force and effect.

STATE OF CALIFORNIA		CONTRACTOR				
BY (AUTHORIZED SIGNATURE)		BY (AUTHORIZED SIGNATURE) 				
PRINTED NAME OF PERSON SIGNING Jaymi Brown,		PRINTED NAME AND TITLE OF PERSON SIGNING Cathy Baur, Chief Academic Officer				
TITLE Contract Manager		ADDRESS 1400 Montecito Ave., Mountain View, CA 94043				
AMOUNT ENCUMBERED BY THIS DOCUMENT \$ 52,422	PROGRAM/CATEGORY (CODE AND TITLE) Child Development Programs (OPTIONAL USE) 0656 23038-6959	FUND TITLE General		Department of General Services use only		
PRIOR AMOUNT ENCUMBERED FOR THIS CONTRACT \$ 1,045,508	ITEM 30.10.010. 6100-196-0001	CHAPTER B/A	STATUTE 2018			FISCAL YEAR 2018-2019
TOTAL AMOUNT ENCUMBERED TO DATE \$ 1,097,930	OBJECT OF EXPENDITURE (CODE AND TITLE) 702 SACS: Res-6105 Rev-8590					
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.		T.B.A. NO.	B.R. NO.			
SIGNATURE OF ACCOUNTING OFFICER		DATE				