

HUMAN SERVICES FUNDING AGREEMENT  
DIRECTIONS FOR LIVING  
COOPERATIVE AGREEMENT TO BENEFIT HOMELESS INDIVIDUALS  
FIRST RENEWAL & FIRST AMENDMENT

THIS FIRST RENEWAL and FIRST AMENDMENT, effective upon the date executed below, by and between **PINELLAS COUNTY**, a political subdivision of the State of Florida, hereinafter called the "**COUNTY**," and **DIRECTIONS FOR MENTAL HEALTH, INC. d/b/a Directions for Living**, a non-profit Florida corporation, whose address is 1437 S. Belcher Road, Clearwater, Florida 33764 hereinafter called the "**AGENCY**." The Parties hereby renew and amend the HUMAN SERVICES FUNDING AGREEMENT DIRECTIONS FOR LIVING COOPERATIVE AGREEMENT TO BENEFIT HOMELESS INDIVIDUALS (Agreement) between the **COUNTY** and **AGENCY** dated December 12, 2016, as follows:

WITNESSETH:

WHEREAS, the **COUNTY** desires to provide for local community mental health and substance abuse treatment services within Pinellas County; and

WHEREAS, the **COUNTY** is committed to both enhancing the delivery of human services and increasing citizen access to those services; and

WHEREAS, the **COUNTY** recognizes that the **AGENCY** responds to crucial needs within the community as a licensed substance abuse provider in Pinellas County;

**NOW, THEREFORE**, the parties hereto do mutually agree as follows:

1. The Agreement is hereby renewed pursuant to Section 3 thereof, effective September 30, 2019 and shall expire September 30, 2020, all terms and conditions shall remain the same unless terminated or cancelled as provided therein.

2. Section 4 “Compensation”, paragraph a, of the Agreement is hereby amended and restated to read:

a) The **COUNTY** agrees to reimburse the **AGENCY** for the services described in Section 2 of this Agreement in an amount not to exceed \$278,493.00 per contract year.

3. Section 12 “Cancellation”, paragraph c, is hereby amended and restated to read:

c) In the event sufficient funds are not available during the fiscal period or for a new fiscal period or funds are otherwise encumbered, the **COUNTY** shall notify the **AGENCY** of such occurrence, and the Agreement shall terminate within 30 days without penalty or expense to the **COUNTY**.

4. Except as herein provided, all other terms and conditions of the Agreement remain in full force and effect.

SIGNATURE PAGE FOLLOWS

IN WITNESS WHEREOF, the parties hereto have caused this instrument to be executed on  
the day and year written below.

PINELLAS COUNTY, FLORIDA, by and  
through its Board of County Commissioners

ATTEST: KEN BURKE, CLERK

By: *Manan D. Lora*  
Deputy Clerk

By: *Karen Seel*  
Karen Williams Seel, Chair

Date: 9/12, 2019

DIRECTIONS FOR MENTAL  
HEALTH, INC. d/b/a Directions for  
Living

By: *April Lott*  
April Lott, President/CEO

Date: 9-10, 2019

APPROVED AS TO FORM  
OFFICE OF COUNTY ATTORNEY

By: *[Signature]*  
Assistant County Attorney