Washington State DEPARTMENT OF SOCIAL & HEALTH SERVICES	**CONTRACT AMENDMENT** **DSA - Colville SEMS Access**	DSHS CONTRACT NUMBER: 0862-49190 Amendment No. 03

This Contract Amendment is between the State of Washington Department of Social and Health Services (DSHS) and the Contractor identified below.	Program Contract Number Contractor Contract Number

CONTRACTOR NAME		CONTRACTOR doing business as (DBA)	
Confederated Tribes of the Colville Reservation			
CONTRACTOR ADDRESS PO Box 150 Nespelem, WA 99155-		WASHINGTON UNIFORM BUSINESS IDENTIFIER (UBI) - -	DSHS INDEX NUMBER 1075
CONTRACTOR CONTACT Sam Ankney	CONTRACTOR TELEPHONE (509) 634-2782	CONTRACTOR FAX (509) 634-2742	CONTRACTOR E-MAIL ADDRESS sam.ankney@colvilletribes.com

DSHS ADMINISTRATION	DSHS DIVISION	DSHS CONTRACT CODE
Economic Services Administration	Division of Child Support	3000NC-62
DSHS CONTACT NAME AND TITLE Ted Thornton Program Administrator	DSHS CONTACT ADDRESS 712 Pear Street SE Olympia, WA 98507-9162	
DSHS CONTACT TELEPHONE (360) 664-5028	DSHS CONTACT FAX (360) 664-5342	DSHS CONTACT E-MAIL ADDRESS tthornto@dshs.wa.gov
IS THE CONTRACTOR A SUBRECIPIENT FOR PURPOSES OF THIS CONTRACT? No	CFDA NUMBERS	
AMENDMENT START DATE 09/30/2012	**CONTRACT END DATE** 12/31/2012	
PRIOR MAXIMUM CONTRACT AMOUNT $-76,908.00	AMOUNT OF INCREASE OR DECREASE $0.00	TOTAL MAXIMUM CONTRACT AMOUNT $-76,908.00

REASON FOR AMENDMENT;
CHANGE OR CORRECT PERIOD OF PERFORMANCE

ATTACHMENTS. When the box below is marked with an X, the following Exhibits are attached and are incorporated into this Contract Amendment by reference:

☐ Additional Exhibits (specify):

This Contract Amendment, including all Exhibits and other documents incorporated by reference, contains all of the terms and conditions agreed upon by the parties as changes to the original Contract. No other understandings or representations, oral or otherwise, regarding the subject matter of this Contract Amendment shall be deemed to exist or bind the parties. All other terms and conditions of the original Contract remain in full force and effect. The parties signing below warrant that they have read and understand this Contract Amendment, and have authority to enter into this Contract Amendment.

CONTRACTOR SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED
John E Sirois	JOHN E SIROIS, Chair CBC	8/16/12
DSHS SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED
Kat	Kathleen Jenkins, Program Administrator DSHS/ESA/Division of Child Support	8/27/12

This Contract between the State of Washington Department of Social and Health Services (DSHS) and the Contractor is hereby amended as follows:

Period of performance is changed to extend the contract end date from September 30, 2012 to December 31, 2012.

All other terms and conditions of this Contract remain in full force and effect.