KC-484-25-A
AMENDMENT TO
CONTRACT FOR HUMAN SERVICES

This Amendment ("Amendment") to Contract for Human Services is between Kitsap County, a Washington state municipal corporation, with its principal offices at 614 Division Street, Port Orchard, Washington 98366, and Saint Vincent de Paul, Conference of Our Lady Star of the Sea, a Washington Nonprofit Corporation, with its principal offices at 1117 N. Callow Avenue, Bremerton, WA 98312.

The parties executed Contract for Human Services KC-484-25 effective July 1, 2025 ("Contract"), which the parties desire to amend subject to the terms and conditions of this Amendment.

In consideration of the mutual benefits and covenants contained herein, the parties agree as follows:

1. Section 1. Effective Date of Contract. This Amendment extends the Contract expiration date from June 30, 2026 to June 30, 2027.

2. Section 4. Compensation. The total compensation is increased from $239,053 to $488,983 as identified in the attached Revised Attachment C (Budget Summary).

3. Attachment C: Budget Summary. The Budget Summary shall be amended and replaced in its entirety with the Revised Attachment C (Budget Summary), which is incorporated herein by reference.

4. Effective Date. This Amendment shall be effective on July 1, 2026 ("Effective Date").

5. Ratification. To the extent that any services were provided or payments were made between July 1, 2026, and the date of full execution of this Amendment, the parties hereby ratify and approve such actions, intending them to be governed by the terms and conditions of the Contract as amended herein.

6. Insurance. If this Amendment extends the expiration date of the Contract, the Contractor shall provide an updated certificate of insurance evidencing that any required insurance coverages are in effect from the Effective Date through the new Contract expiration date. The Contractor shall submit the certificate of insurance to: Kitsap County Housing and Homelessness Division, 345 6th Street, Suite 400, Bremerton, WA 98337. Upon receipt, the Human Services Department will ensure submission of all insurance documentation to the Risk Management Division, Kitsap County Department of Administrative Services.

7. Precedence. In the event of any conflict or inconsistency between the provisions of this Amendment and the Contract, including any prior amendments, the provisions of this Amendment shall prevail.

8. Terms Unchanged. Except as expressly provided in this Amendment, all other terms and conditions of the Contract, including any prior amendments, remain unchanged and in full force and effect.

9. Counterparts/Electronic Signature. This Amendment may be executed in several

counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same agreement. Facsimile, email, or other electronically delivered signatures of the parties shall be deemed to constitute original signatures and duplicate originals.

10. Authorizations. The signatories to this Amendment represent that they have been appropriately authorized to enter into this Amendment on behalf of the party for whom they sign, and that no further action or approvals are necessary before execution of this Amendment.

Dated this 20 day of August, 2026.

SAINT VINCENT DE PAUL, CONFERENCE OF OUR LADY STAR OF THE SEA

Signature

JOSEPH CRAIN
Print Name

EXECUTIVE DIRECTOR
Title

Dated this 14 day of Sept., 2026.

BOARD OF COUNTY COMMISSIONERS KITSAP COUNTY, WASHINGTON

ORAN ROOT, Chair

KATHERINE T. WALTERS, Commissioner

CHRISTINE ROLFES, Commissioner

ATTEST:

Clara Jewell
Clara Jewell, Interim Clerk of the Board

BOARD OF COMMISSIONERS STATE OF WASHINGTON KITSAP COUNTY

REVISED ATTACHMENT C: BUDGET SUMMARY

Contractor: Saint Vincent de Paul, Conference of Our Lady Star of the Sea for Birkenfeld-Stella Maris House Shelter

Contract Number: KC-484-25 (amended by KC-484-25-A)

Time Period: July 1, 2025 – June 30, 2027

Administration Expenses will be utilizing an Indirect Rate based on de minimis.

This Contract is based on a fixed number of shelter beds being provided for the entirety of the Contract period. The contract amount is based on the standard bed rate for 30 shelter beds.

Cost Category	Fund Source	Previous Budget	Amendment Changes this Contract	Current Budget
1st Term of Contract: 07/01/2025 - 06/30/2026				
Administration	Consolidated Homeless Grant-EHF SFY26: 1132	$ 17,000.00	$ -	$17,000.00
Facility Support	Consolidated Homeless Grant-EHF SFY26: 1132	$ 50,000.00	$ -	$50,000.00
Operations	Consolidated Homeless Grant-EHF SFY26: 1132	$ 140,872.00	$ -	$140,872.00
Operations	Consolidated Homeless Grant-INF SFY26: 1132	$ 31,181.00	$ -	$31,181.00
1st Term of Contract Budget Total		*$239,053.00*	*$0.00*	*$239,053.00*
2nd Term of Contract: 07/01/2026 - 06/30/2027				
Administration	Consolidated Homeless Grant-EHF SFY27: 1132	$ -	$ 4,253.00	$4,253.00
Facility Support	Consolidated Homeless Grant-EHF SFY27: 1132	$ -	$ 25,000.00	$25,000.00
Operations	Consolidated Homeless Grant-EHF SFY27: 1132	$ -	$ 188,067.00	$188,067.00
Operations	Consolidated Homeless Grant-INF SFY27: 1132	$ -	$ 32,610.00	$32,610.00
2nd Term of Contract Budget Total		*$0.00*	*$249,930.00*	*$249,930.00*
CONTRACT TOTAL				**$488,983.00**

Line item changes must be requested in writing and require Kitsap County approval.

Please refer to the KCHHD Grant Guidelines for details on the amendment request deadline and process.

Reimbursement requests/invoices must be submitted through the Housing and Homelessness Division reimbursement request process. Any disbursement made by the County to the Recipient shall be without prejudice to the County's rights later to challenge the propriety of the Recipient's claimed costs or expenses.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 7/27/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Risk Program Administrators a subsidiary of
Arthur J. Gallagher Risk Management Services, LLC
2850 Golf Road
Rolling Meadows IL 60008

CONTACT NAME: Christian Brothers Services
PHONE (A/C, No, Ext): 800-807-0300 **FAX (A/C, No):** 630-378-2508
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Old Republic Insurance Company	24147
INSURER B : Old Republic Union Insurance Company	31143
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED CHRIBRO-14
Brothers of the Christian Schools & Affiliates
LOC #1134003 SOC STVDP CONF OUR LADY STAR OF SEA
1205 Windham Parkway
Romeoville IL 60446-1679

COVERAGES **CERTIFICATE NUMBER:** 1803200489 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY	Y	N	822600 1325596	6/15/2026	6/15/2027	EACH OCCURRENCE	$ 10,000,000
	CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ Included
							MED EXP (Any one person)	$ 15,000
							PERSONAL & ADV INJURY	$ Included
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ Included
	POLICY [ ] PRO-JECT [ ] LOC						PRODUCTS - COMP/OP AGG	$ Included
	OTHER:							$
A	AUTOMOBILE LIABILITY	Y	N	MWTB 21543	6/15/2026	6/15/2027	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY [X] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB [ ] OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$
	DED [ ] RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N						PER STATUTE [ ] OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [ ] N/A (Mandatory in NH)						E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
B	Excess Automobile Liability	Y	N	822600 1325596	6/15/2026	6/15/2027	Occ/No Agg	$9,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The certificate holder is added as an additional insured under General Liability per attached endorsement per prior written contract and under Auto Liability per agreement - per attached endorsement. Primary Non-Contributory coverage is provided under the Primary General Liability per prior written contract per the attached endorsement. Coverage is solely, strictly, and specifically with regards to:
agreement between Kitsap County Department of Human Services & SVDP-Bremerton.

CERTIFICATE HOLDER

Kitsap County Department of Human Services
Care of Housing and Homelessness Division
614 Division Street MS-23
Port Orchard WA 98366-4676

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Arthur J. Gallagher Risk Management Services, LLC

OLD REPUBLIC UNION INSURANCE COMPANY

Attaching to and forming part of Policy No. 822600 1325596

Named Insured: THE RELIGIOUS AND CHARITABLE RISK POOLING TRUST OF THE BROTHERS OF THE CHRISTIAN SCHOOLS AND AFFILIATES

Effective date of this endorsement is June 15, 2026

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED
SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under SECTION II INSURING AGREEMENT C, GENERAL LIABILITY COVERAGE defined within the Coverage Agreement

SECTION 1: Schedule

Name of Additional Insured Persons(s) or Organization(s):	Designated Location(s) Of Covered Operations:
ANY PERSON OR ORGANIZATION WHEN YOU HAVE AGREED IN A WRITTEN CONTRACT FOR THAT PERSON OR ORGANIZATION TO BE ADDED AS AN ADDITIONAL INSURED ON YOUR POLICY.	

If no entry appears above, information required to complete this endorsement will be shown in the Certificate of Coverage as applicable to this endorsement.

Section II Insuring Agreement C -Name of Insured Amended

A. **Who Is An Insured** defined in the General Insurance Agreement is amended to include as an Additional Insured the person(s) or organization(s) shown in the Schedule above, but only with respect to liability in the performance of the Named Insured's ongoing operations for the Additional Insured(s) at the Location(s) designated in the Schedule above for "bodily injury" or "property damage", caused in whole or in part, by the Named Insured's acts or omissions which takes place after the execution of a written agreement with the Additional Insured(s).

B. For the coverage provided by this endorsement: the following paragraph is added to Section IV –General Conditions, Section II, Insuring Agreement C-General Liability.

This insurance is primary insurance as respects to this coverage to the additional insured person or organization, where the written contract or written agreement requires that this insurance be primary and noncontributory. In that event, we will not seek contribution from any other insurance policy available to the additional insured on which the additional insured person or organization is a Named Insured.

C. **Who Is An Insured** is also amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by the "Named Insured's work" at the location designated and described in the schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

The most we will pay is the amount of insurance required by the written contract or the amount of applicable limits of insurance under this policy; whichever is less.

This Insurance does not apply to any claims or suits seeking damages, including defense, arising out of, directly or indirectly, from any actual or alleged participation in any act of sexual misconduct, sexual harassment, sexual molestation, sexual abuse or any claim sexual in nature, physical or mental, of any person.

Except as amended in this endorsement, this insurance is subject to all coverage terms, clauses and conditions in the policy to which this endorsement is attached and only applies to the extent permitted by law.

IL 10 (12/06) OLD REPUBLIC INSURANCE COMPANY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

SCHEDULE

Name of Person(s) or Organization(s):

All persons or organizations as required by contract or agreement

With respect to **COVERED AUTOS LIABILITY COVERAGE, Who Is An Insured** is changed with the addition of the following:

Each person or organization shown in the Schedule for whom you are doing work is an "insured". But only for "bodily injury" or "property damage" that results from the ownership, maintenance or use of a covered "auto" by:

1. You;

2. an "employee" of yours; or

3. anyone who drives a covered "auto" with your permission or with the permission of one of your "employees".

However, the insurance afforded to the person or organization shown in the Schedule shall not exceed the scope of coverage and/or limits of this policy. Not withstanding the foregoing sentence, in no event shall the insurance provided by this policy exceed the scope of coverage and/or limits required by the contract or agreement.

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OLD REPUBLIC UNION INSURANCE

ENDORSEMENT No 26
Attaching to and forming part of Policy No. 822600 1325596

Named Insured: THE RELIGIOUS AND CHARITABLE RISK POOLING TRUST OF THE BROTHERS OF THE CHRISTIAN SCHOOLS AND AFFILIATES

Effective date of this endorsement is June 15, 2026

ADDITIONAL INSURED ENDORSEMENT

It is understood and agreed that the members as on file with Arthur **J.** Gallagher & Co..and/or Risk Program Administrators, LLC. (A SUBSIDIARY OF ARTHUR J. GALLAGHER & COMPANY) are added as Additional Insureds in respect of the coverage as afforded under this Policy.

It is further understood and noted that Brothers of the Christian Schools may issue written confirmation where the Insured or the Insured's members are obligated to provide proof of the cover provided by this Policy to Additional Insured's, Loss Payees and Mortgagors who have an insurable interest **in** the property or operations of the Insured.

Except as amended in this Endorsement, this insurance is subject to all coverage terms, clauses and conditions in the policy to which this Endorsement is attached.

Washington State Department of Labor & Industries

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Debarred Contractors List

A debarred contractor may not bid on, or have a bid considered on, any public works contract. You can search and filter this list using the options presented below.

Company Name: Saint Vincent de Paul
Principal:
From: 07/31/2025 To: 07/31/2026
WA UBI Number:
RCW: All
Penalty Due: All
Wage Due: All
License Number:

Apply Filters | Reset

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Company Name	UBI	License	Principals	Related Business	Status	RCW	Debar Begins	Debar Ends	Penalty Due	Wages Due
There are no records that match your search criteria.										

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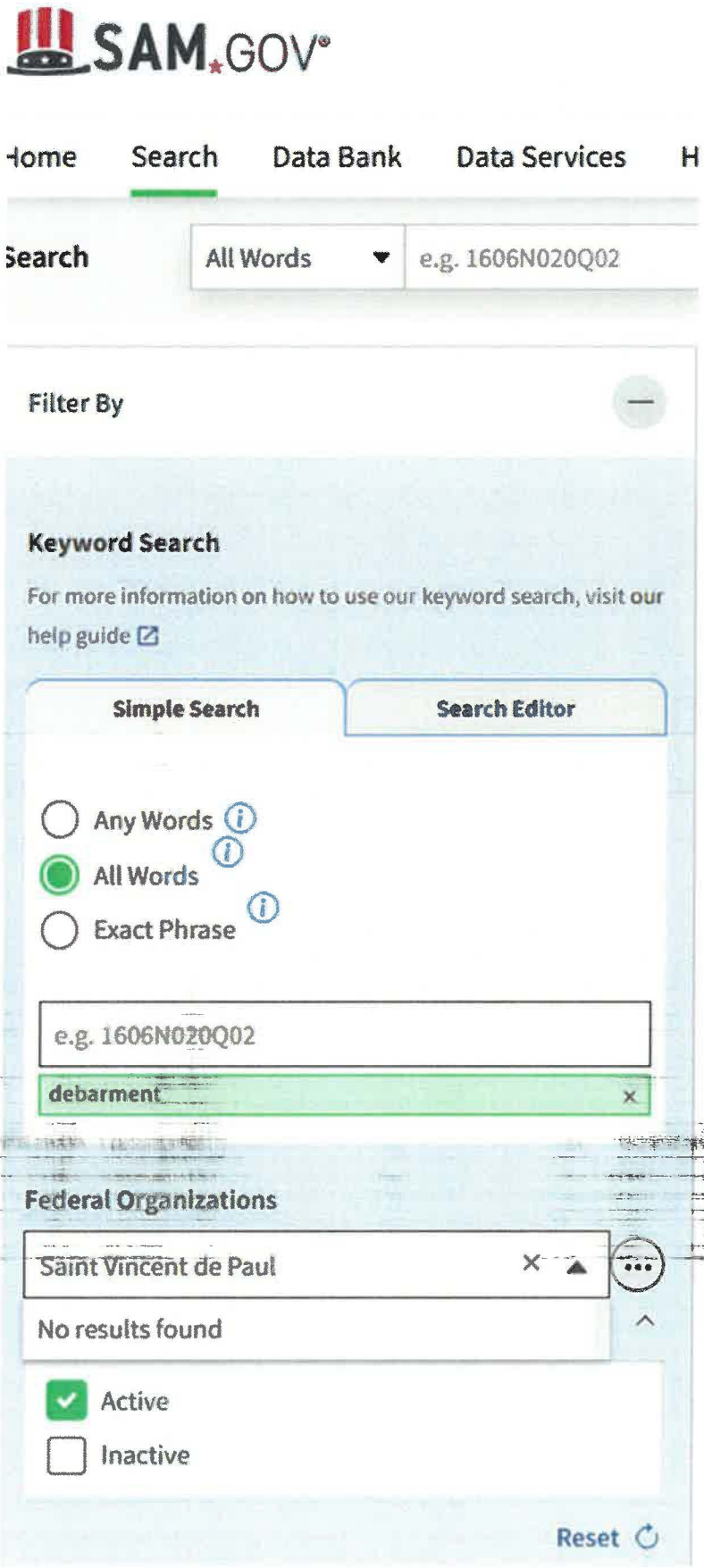
As of 07/31/2026



As of 07/31/2026