

**KC-560-25-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 **Kitsap Community Resources**, a Washington Nonprofit Corporation, with its principal offices at **845 8th Street, Bremerton, WA 98337**.

The parties executed Contract for Human Services KC-560-25 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 4. Compensation. The total compensation is increased from \$180,000 to \$312,000 as identified in the attached Revised Attachment C (Budget Summary).
2. 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.
3. Effective Date. This Amendment shall be effective on July 1, 2025 ("Effective Date").
4. Ratification. To the extent that any services were provided or payments were made between July 1, 2025, 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.
5. 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.
6. 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.
7. 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.
8. 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.

Signature on next page

Dated this 2 day of June, 2026.

KITSAP COMMUNITY RESOURCES



Signature

ANTHONY IVES

Print Name

EXECUTIVE DIRECTOR

Title

Dated this 22 day of June, 2026.

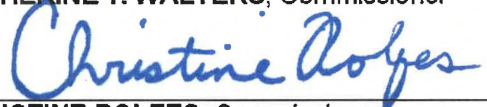
BOARD OF COUNTY COMMISSIONERS
KITSAP COUNTY, WASHINGTON



ORAN ROOT, Chair



KATHERINE T. WALTERS, Commissioner



CHRISTINE ROLFES, Commissioner

ATTEST:



Marina Linville, Interim Clerk of the Board



REVISED ATTACHMENT C: BUDGET SUMMARY

Contractor: Kitsap Community Resources for Hotel/Motel Voucher Program

Contract Number: KC-560-25 (amended by KC-560-25-A)

Time Period: July 1, 2025 – June 30, 2026

Administration Expenses will be utilizing an Indirect Rate based on the organization's NICRA.

Cost Category	Fund Source	Previous Budget	Amendment Changes this Contract	Current Budget
Administration	Consolidated Homeless Grant-EHF SFY26: 1132	\$ 13,473.00	\$ 13,200.00	\$26,673.00
Facility Support	Consolidated Homeless Grant-EHF SFY26: 1132	\$ 111,111.00	\$ 100,000.00	\$211,111.00
Operations	Consolidated Homeless Grant-EHF SFY26: 1132	\$ 42,000.00	\$ 18,800.00	\$60,800.00
Administration	Consolidated Homeless Grant-INF SFY26: 1132	\$ 1,084.00	\$ -	\$1,084.00
Facility Support	Consolidated Homeless Grant-INF SFY26: 1132	\$ 9,332.00	\$ -	\$9,332.00
Operations	Consolidated Homeless Grant-INF SFY26: 1132	\$ 3,000.00	\$ -	\$3,000.00
Budget Total		\$180,000.00	\$132,000.00	\$312,000.00
CONTRACT TOTAL				\$312,000.00

Line items 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)
01/28/2026

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 Brown & Brown Insurance Services, Inc. 2106 Pacific Ave, Ste 501 Tacoma WA 98402		CONTACT NAME: Deana McIntyre PHONE (A/C, No, Ext): E-MAIL ADDRESS: Deana.McIntyre@bbrown.com FAX (A/C, No):	
INSURED Kitsap Community Resources 845 8th Street Bremerton WA 98337		INSURER(S) AFFORDING COVERAGE INSURER A: Selective Insurance Company of America INSURER B: Philadelphia Indemnity Insurance Company INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 12572 18058	

COVERAGES

CERTIFICATE NUMBER:

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			
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR ☒ Crime GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC OTHER:	Y		S 2708902 00	01/27/2026	01/27/2027	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 20,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ 3,000,000 Employee Theft \$ 500,000			
	☒ AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						S 2708902 00	01/27/2026	01/27/2027	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED RETENTION \$						S 2708902 00	01/27/2026	01/27/2027	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						N/A	S 2708902 00 (WA Stop Gap)	01/27/2026	01/27/2027
B	Management Liability			PHSD1844736-016	01/27/2026	01/27/2027	Directors & Officers \$2,000,000			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: All operations of the named insured for Kitsap County Department of Human Services, Kitsap County Department of Human Services is included as additional insured, as required by written contract.

CERTIFICATE HOLDER

CANCELLATION

Kitsap County Department of Human Services 345 - 6th St., Ste. 400 Bremerton WA 98337	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 <i>Deana M. McIntyre</i>
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Additional Named Insureds

Other Named Insureds

KCR Cares LLC	Insured Multiple Names
KCR Community Services LLC	Insured Multiple Names
Kitsap Community Resources 401k Plan	Insured Multiple Names



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Search

All Words ▼

e.g. 1606N020Q02

Filter By

Keyword Search

For more information on how to use our keyword search, visit our [help guide](#)

Simple Search

Search Editor

- ☐ Any Words 
- ☒ All Words 
- ☐ Exact Phrase 

e.g. 1606N020Q02

debarment

Federal Organizations

Kitsap Community Resources

No results found

- ☒ Active
- ☐ Inactive

As of 05/11/2026



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: Principal:

WA UBI Number: RCW:

License Number:

From: To:

Penalty Due: Wage Due:

[Download all debarment data](#)

Show per page Showing 0 records

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

Show per page Showing 0 records

As of 05/11/2026