

**FIRST AMENDMENT TO**  
**340B ADMINISTRATIVE SERVICES AGREEMENT**

This First Amendment to the 340B Administrative Services Agreement (“Amendment”), is effective as of January 14, 2020 (“Amendment Effective Date”), is made and entered into by and between **County of Monterey**, a political subdivision of the State of California, on behalf of the Monterey County Health Department, Clinic Services Bureau (“Covered Entity”), and **Wellpartner, LLC** (“Wellpartner”).

**WHEREAS**, Covered Entity and Wellpartner entered into that certain 340B Administrative Services Agreement dated January 14, 2020 (“Agreement”).

**WHEREAS**, Covered Entity and Wellpartner desire to amend the Agreement.

**NOW, THEREFORE**, for and in consideration of the mutual promises and covenants set forth herein, and other good and valuable consideration, the receipt and adequacy of which are hereby acknowledged, Covered Entity and Wellpartner hereby agree to amend the Agreement as follows:

1. The Parties hereby agree to add the Covered Entity 340B ID: CHC33795-00 below the signature line of the Agreement.
2. The Parties hereby agree to update the Covered Entity address within the Agreement to the following:


1441 Constitution Blvd, Bldg. #200, Floor STE 101  
Salinas, CA 93906

3. Except as provided herein, the terms of the Agreement shall remain in full force and effect and shall be interpreted consistent with this Amendment. Notwithstanding the foregoing, however, to the extent that a provision of the Agreement directly conflicts with a provision of this Amendment, this Amendment shall apply.

**[Signature page follows on next page]**

**IN WITNESS WHEREOF**, Wellpartner and Covered Entity, by their duly authorized representatives, have executed this Amendment as of the date of the last signature below.

**WELLPARTNER, LLC**

By:   
Name: Darren West  
Its: VP & GM 340B Services  
Date: September 25, 2024  
Address: 20800 SW 115<sup>th</sup> Avenue, Suite 100  
Tualatin, OR 97062

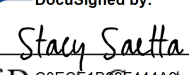
**COUNTY OF MONTEREY**

By: \_\_\_\_\_  
Name: \_\_\_\_\_  
Its: \_\_\_\_\_  
Date: \_\_\_\_\_  
Address: \_\_\_\_\_

**340B ID: CHC33795-00**

**County of Monterey**

Approved as to Legal Form:

DocuSigned by:  
By:  Date: 10/2/2024 | 9:43 AM PDT  
Chief Deputy County Counsel – County of Monterey

Approved as to Fiscal Provisions:

DocuSigned by:  
By:  Date: 10/2/2024 | 1:32 PM PDT  
Auditor-Controller – County of Monterey