

MOU Annual Reporting Attestation

**Attestation for MOU Annual Reporting and Quarterly Reporting
(Attest to all applicable requirements below. If the county is unable to attest to one
or more requirements below, provide a reason.)**

I hereby attest, the applicable executed MOU(s) were posted on the County website within 30 calendar days of being fully executed.

I hereby attest, an Annual Review of the MOU(s) has been conducted for the 2025 year and all information provided in this report is true, accurate, and complete to the best of my knowledge.

Not Applicable. MOU executed and effective as of December 5, 2025

I hereby attest, Stanislaus County held four (4) quarterly meetings with the MCPs, and the quarterly meetings are posted on Stanislaus County's website.

I hereby attest, Stanislaus County will post the Annual Report on the County website within 30 calendar days from the due date of the annual report submission to the Department of Health Care Services.

On behalf of Stanislaus County, I hereby attest, the Annual MOU Review of the 2025 year is true, accurate, and complete to the best of my knowledge.

Name of Signee	Title	Date	Email Address
Ruben Imperial, MBA	Director	1/30/2026	RImperial@stanbhrs.org