

EXHIBIT "C"

PAYMENT SCHEDULE

The Mental Health Clinician will invoice the County

7/03/2023-7/07/2023, 1 week @ \$614.62 per week = \$614.62

7/10/2023-7/14/2023, 1 week @ \$614.62 per week = \$614.62

7/17/2023-7/21/2023, 1 week @ \$614.62 per week = \$614.62

7/24/2023-7/28/2023, 1 week @ \$614.62 per week = \$614.62

7/31/2023, 1 day @ \$122.92 per day = \$122.92

for a total of \$2,581.40 per the agreement.