

BOS AGREEMENT NO. _____

AMENDMENT **02**

Original Agreement No.	24-037
Amendment 1	24-037-A1

**SECOND AMENDMENT TO COUNTY OF MENDOCINO
AGREEMENT NO. 24-037**

This second Amendment to Agreement No. 24-037 is entered into by and between the **COUNTY OF MENDOCINO**, a political subdivision of the State of California, hereinafter referred to as "COUNTY," and **Larry Walker Associates, Inc.**, hereinafter referred to as "CONTRACTOR," the date this Amendment is fully executed by all parties.

WHEREAS, Agreement No. 24-037 was entered into on February 27, 2024 (the "Initial Agreement"); and

WHEREAS, First Amendment to Agreement No. 24-037 was entered into on May 07, 2024 (the "First Amendment") increasing the total amount by \$20,000.00 for a new total of \$320,000.00; and

WHEREAS, First Amendment to Agreement No. 24-037 incorporated a technical advisory group into "Exhibit A - Scope of Services"; and

WHEREAS, the Initial Agreement and First Amendment are referred to as the Agreement; and

WHEREAS, upon execution of this document by COUNTY and CONTRACTOR, this second Amendment will become part of the Agreement and shall be incorporated therein; and

WHEREAS, it is the desire of COUNTY and CONTRACTOR to extend the termination date from June 30, 2025 to December 31, 2025; and

NOW, THEREFORE, we agree as follows:

1. The termination date set out in the Agreement is hereby extended from June 30, 2025 to December 31, 2025.

All other terms and conditions of the Agreement shall remain in full force and effect.

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

By: Julia Krog
DEPARTMENT HEAD

Date: 6/24/2025

Budgeted: ☒ Yes ☐ No

Budget Unit: 2851

Line Item: 862189, PBLCP

Org/Object Code: PB-862189 PBLCP

Grant: ☒ Yes ☐ No

Grant No. : LCP-22-06

COUNTY OF MENDOCINO

By: _____
JOHN HASCHAK, Chair
BOARD OF SUPERVISORS

Date: _____

ATTEST:

DARCIE ANTLE, Clerk of said Board

By: _____
Deputy

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

DARCIE ANTLE, Clerk of said Board

By: _____
Deputy

INSURANCE REVIEW:

By: Darcie Antle
Risk Management

Date: 06/11/2025

CONTRACTOR/COMPANY NAME

By: [Signature]
SIGNATURE

Date: 6/23/2025

NAME AND ADDRESS OF CONTRACTOR:

Larry Walker Associates, Inc.,

Attn: Dr. Laura Foglia, Vice President

1480 Drew Ave. Ste 100

Davis, CA 95618

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement.

COUNTY COUNSEL REVIEW:

APPROVED AS TO FORM:

By: [Signature]
COUNTY COUNSEL

Date: 06/11/2025

EXECUTIVE OFFICE/FISCAL REVIEW:

By: [Signature]
Deputy CEO or Designee

Date: 06/11/2025

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors

Exception to Bid Process Required/Completed ☐

Mendocino County Business License: Valid ☐

Exempt Pursuant to MCC Section: _____