BOS AGREEMENT NO. _____

AMENDMENT TO PURCHASING AGENT
AGREEMENT NO. 18-69

This Amendment to PA Agreement No. 18-69 is entered into this _____ day of _____, 2017, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and Robert Ochs, hereinafter referred to as "CONTRACTOR".

WHEREAS, PA Agreement No. 18-69 was entered into on October 15, 2017; and

WHEREAS, upon execution of this document by the Chair of the Mendocino County Board of Supervisors and Robert Ochs, this document will become part of the aforementioned contract and shall be incorporated therein; and

WHEREAS, PA Agreement No. 18-69 was previously amended by PA Agreement No. 18-69 A1; and

WHEREAS, it is the desire of the COUNTY to increase PA Agreement No. 18-69, as amended by PA Agreement No. 18-69A1, in the amount of $30,000 for an Agreement total of $80,000.

NOW, THEREFORE, we agree as follows:

1. To increase PA Agreement No. 18-69, as amended by PA Agreement No.18-69A1 in the amount of $30,000 for a total Agreement amount not to exceed $80,000.

All other terms and conditions of PA Agreement No. 18-69, as amended by PA Agreement No. 18-69 A1, shall remain in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and year first above written.

DEPARTMENT FISCAL REVIEW:

Heidi M. Dunham 1/3/18

HEIDI DUNHAM, HR DIRECTOR DATE

Budgeted: ☐ Yes ☒ No

Budget Unit: 1320 – will be billed to probation 2560

Line Item: 862189

Grant: ☐ Yes ☒ No

Grant No.: _____

COUNTY OF MENDOCINO

By: _____
JOHN MCCOWEN, Chair
BOARD OF SUPERVISORS

ATTEST:
CARMEL J. ANGELO, 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.

CARMEL J. ANGELO, Clerk of said Board

By: _____
Deputy

CONTRACTOR/COMPANY NAME:

By: _____

NAME AND ADDRESS OF CONTRACTOR:

Robert Ochs

P.O. Box 4954

Santa Rosa, CA. 95402

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:

KATHARINE L. ELLIOTT,
County Counsel

By: _____
Deputy

INSURANCE REVIEW:

By: _____
Risk Management

EXECUTIVE OFFICE/FISCAL REVIEW:

APPROVAL RECOMMENDED

By: _____
Deputy CEO

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: _____