

BOS AGREEMENT NO. _____

**SECOND AMENDMENT TO BOARD OF SUPERVISORS
AGREEMENT NO. 20-145**

This Second Amendment to BOS Agreement No. 20-145 is entered into this _____ day of _____, 2021, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and **Brokaw Design**, hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. 20-145 was entered into on October 21, 2020; and

WHEREAS, First Amendment, BOS Agreement No. 20-145-A1 was entered into on February 23, 2021; and

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

WHEREAS, it is the desire of CONTRACTOR and COUNTY to increase the amount set out in First Amendment, BOS Agreement No. 20-145-A1, from \$59,580 to \$68,580; and

WHEREAS, it is the desire of CONTRACTOR and COUNTY to extend the termination date set out in BOS Agreement No. 20-145, from March 31, 2021 to May 31, 2021.

NOW, THEREFORE, we agree as follows:

1. The maximum amount payable to CONTRACTOR set out in First Amendment, BOS Agreement No. 20-145-A1 will be increased from \$59,580 to \$68,580.
2. The termination date set out in BOS Agreement No. 20-145 will be extended from March 31, 2021 to May 31, 2021.

All other terms and conditions of BOS Agreement No. 20-145 and First Amendment, BOS Agreement No. 20-145-A1, shall remain in full force and effect.

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

By: [Signature]
DEPARTMENT HEAD

Date: 3-22-21

Budgeted: ☐ Yes ☒ No
Budget Unit: 1714
Line Item: 864365 proj: CF002
Grant: ☐ Yes ☒ No
Grant No.: N/A

COUNTY OF MENDOCINO

By: _____
DAN GJERDE, Chair
BOARD OF SUPERVISORS

Date: _____

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

INSURANCE REVIEW:

By: [Signature]
Risk Management

Date: 03/23/2021

CONTRACTOR/COMPANY NAME

By: CHARLES BEAVERS
SIGNATURE

Date: 3/23/21

NAME AND ADDRESS OF CONTRACTOR:

Brokaw Design

P.O. Box 3103

Rohnert Park, CA 94927

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:

CHRISTIAN M. CURTIS,
County Counsel

By: Matthew Kiedrowski
Deputy

Date: 03/23/2021

EXECUTIVE OFFICE/FISCAL REVIEW:

By: [Signature]
Deputy CEO

Date: 03/23/2021

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: _____