

AGREEMENT NO. _____

**AMENDMENT TO COUNTY OF MENDOCINO
AGREEMENT NO. 24-201**

This Second Amendment to Agreement No. 24-201 is entered into by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY," and KRONICK, MOSKOVITZ, TIEDEMANN & GIRARD, A PROFESSIONAL CORPORATION ("FIRM"), hereinafter referred to as "CONTRACTOR," the date this Amendment is fully executed by all parties.

WHEREAS, Agreement No. 24-201 was entered into on December 3, 2024; and

WHEREAS, Agreement No. 24-201-A1 was entered into on September 9, 2025; and

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

WHEREAS, it is the desire of COUNTY and CONTRACTOR to increase the total compensation by \$300,000 set out in Agreement No. 24-201, from \$300,000 to \$600,000.

NOW, THEREFORE, we agree as follows:

1. The total contracted amount set out in Agreement No. 24-201 is hereby increased from \$300,000 to \$600,000.

All other terms and conditions of Agreement No. 24-201 shall remain in full force and effect.

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

Brina Blanton
DEPARTMENT HEAD

DATE

01/28/2026

Budgeted: Yes No

Budget Unit: 0713

Line Item: 863320

Grant: Yes No

Grant No.: _____

CONTRACTOR/COMPANY NAME

By: [Signature]

Date: 1/12/26

NAME AND ADDRESS OF CONTRACTOR:

Kronick, Moskovitz, Tiedemann & Girard

1331 Garden Hwy, 2nd Floor

Sacramento, CA 95833

COUNTY OF MENDOCINO

By: _____
BERNIE NORVELL, 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: 01/28/2026

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: 01/28/2026

EXECUTIVE OFFICE/FISCAL REVIEW:

By: Darcie Antle
Deputy CEO or Designee

Date: 01/28/2026

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: _____