

**AMENDMENT NO. 1 TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR  
(CONTRACT NO. BC-12-085)**

This Amendment No. 1 hereby amends the Agreement dated October 18, 2011 between the County of Santa Barbara, a political subdivision of the State of California (hereafter COUNTY), and Simpler Systems, Inc., a California corporation (Simpler Systems), having its principal place of business at 627 Island View Drive, Santa Barbara, California 93109 (hereafter CONTRACTOR).

WHEREAS, CONTRACTOR has been providing consulting and assistance to COUNTY, including, assisting the Auditor in implementation of the Parks reservation system for COUNTY; and

WHEREAS, COUNTY finds it necessary to extend CONTRACTOR's contractual services for COUNTY, including, but not limited to, working with COUNTY to complete implementation of the Parks reservation system, and to provide system testing, documentation and training; and

WHEREAS, the Agreement expired on September 30, 2012, and the parties wish to extend the term of the Agreement;

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, the COUNTY and CONTRACTOR hereby amend the Agreement as follows:

Section 4, Term, is replaced by the following: CONTRACTOR shall commence performance on October 18, 2011 and end performance upon completion, but no later than December 31, 2013, unless otherwise directed by COUNTY or unless earlier terminated. The listed hourly rates in the Agreement shall remain the same throughout the revised term of the Agreement.

All other terms remain in full force and effect.

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Amendment No. 1 to Agreement for Services of Independent Contractor between the County of Santa Barbara and Simpler Systems, Inc.

IN WITNESS WHEREOF, the parties have executed this Amendment No.1 to be effective on the date executed by COUNTY.

COUNTY OF SANTA BARBARA

By: 

Chair, Board of Supervisors

Date: 4-2-13

ATTEST:

CHANDRA L. WALLAR  
CLERK OF THE BOARD

By: 

Deputy

CONTRACTOR

By: 

(Authorized Signature)

Tax ID Number: 77-0491902

APPROVED AS TO FORM:  
DENNIS A. MARSHALL  
COUNTY COUNSEL

By: 

Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:  
ROBERT W. GEIS, CPA  
AUDITOR-CONTROLLER

By: 

Deputy

APPROVED AS TO FORM:  
RAY AROMATORIO,  
RISK PROGRAM ADMINISTRATOR

By: 

Risk Manager

Contract Summary Form: Contract summary number: BC-12-085 Complete data below, print, obtain signature of authorized departmental representative, and submit this form (and attachments) to the Clerk of the Board (>\$100,000). If less than \$100,000 submit a Purchasing Requisition to the Purchasing Division of General Services. See "online purchasing manual" under General Services, Purchasing, Policies and Procedures. Form 1101 applicable to revenue contracts.

D1. Fiscal Year ..... : FY2011-12 to 2013-14  
D2. Budget Unit Number (plus -Ship/-Bill codes in paren's) ... : 061  
D3. Requisition Number. .... :  
D4. Department Name..... : Auditor-Controller  
D5. Contact Person ..... : Elaina Thanasko  
D6. Phone ..... : 568-2454

K1. Contract Type (check one): ☐ Personal Service ☒ Capital Project/Construction

K2. Brief Summary of Contract Description/Purpose : Professional Services to install a new Reservation & Cashiering System for Parks Department

K3. Original Contract Amount... : \$ 123,000.00

K4. Contract Begin Date ..... : October 18, 2011

K5. Original Contract End Date ..... : September 30, 2012

K6. Amendment History (leave blank if no prior amendments):

Seq#	EffectiveDate	ThisAmnt	AmtCum	AmntToDate	NetTotalAmt	NewEndDate	Purpose (2-411'ords)
Amend No. 1	04/02/13	0		\$41,603	\$123,000	12/31/2013	Extends Term

K7. Department Project Number ..... : 061

B1. Is this a Board Contract? (yes/No). .... : Yes

B2. Number of Workers Displaced (if any) ..... : n/a

B3. Number of Competitive Bids (If any)~ ..... : n/a

B4. Lowest Bid Amount (bid) ..... : \$n/a

B5. If Board waived bids, show Agenda Date ..... :

B6. ... and Agenda Item Number ..... : #

B7. Boilerplate Contract Text Unaffected? yes / or cite ~): No notable changes

F1. Encumbrance Transaction Code ..... :

F2. Current Year Encumbrance Amount ..... : \$

F3. Fund Number ..... : 0001

F4. Department Number ..... : 061

F5. Division Number (if applicable) ..... :1010

F6. Account Number ..... :7460

F7. Cost Center number (if applicable) ..... :

F8. Payment Terms ..... : Net 30

V1. Vendor Numbers (A = auditor; P=purchasing) ..... : 533594

V2. Payee/Contractor Name ..... : Simpler Systems, Inc.

V3. Mailing Address ..... : 627 Island View Dr.

V4. City State (two-letter) Zip (include +4 if known) ..... : Santa Barbara, CA 93109

V5. Telephone Number ..... : 805-962-6698

V6. Contractor's Federal Tax ID Number (EIN or SSN) ..... : 77-0491902

V7. Contact Person ..... : Brian Fahnestock

V8. Workers Comp Insurance Expiration Date ..... : 3/23/14

V9. Liability Insurance Expiration Date[s] (G=enl; P=roj!) ... :

V10. Professional License Number ..... :

VII. Verified by (name of County staff) ..... : Elaina Thanasko

V12. Company Type (Check one): ☐ Individual ☐ Sole Proprietorship ☐ Partnership ☒ Corporation

I certify: information complete and accurate; designated funds available; required concurrences evidenced on signature page.

**Date: Authorized**

**Signature.....**

