Project: VA Lease Amendment #10 for

4440 Calle Real

A.P.N.: 59-140-24 (Portion)

Folio No.: 001050

## SUPPLEMENTAL LEASE AGREEMENT NO. 10

THIS SUPPLEMENTAL LEASE AGREEMENT NO. 10 (hereinafter "Amendment") is made by and between the County of Santa Barbara, a political subdivision of the State of California (hereinafter "COUNTY") and the United State of America, (hereinafter "GOVERNMENT") wherein COUNTY agrees to permit GOVERNMENT the use of certain COUNTY real property in return for GOVERNMENT'S agreement to pay rent as hereinafter provided.

WHEREAS, COUNTY is the owner of the real property known as 4440 Calle Real in the unincorporated area of Santa Barbara, (hereinafter "Premises"); and

WHEREAS, GOVERNMENT and COUNTY entered into lease agreement No. 691-79-385 on May 7, 1981 for GOVERNMENT'S use of Premises, which lease has been amended from time to time; and

WHEREAS, the term of the lease is due to expire March 31, 2007; and

WHEREAS, GOVERNMENT desires to extend the lease term for six (6) months, from April 1, 2007, through September 30, 2007, at a monthly rental rate of \$61,409.19; and

WHEREAS, the Lease extension, to be effective as of April 1, 2007, is attached hereto and is labeled "Supplemental Agreement No. 10".

NOW, THEREFORE, in consideration of the Premises, and the promises, covenants and conditions herein contained, COUNTY, as Lessor, and GOVERNMENT, as Lessee, agree as follows:

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GENERAL SERVICES ADMINISTRATION	SUPPLEMENTAL AGREEMENT	DATE
PUBLIC BUILDING SERVICE	NO. Ten (10)	
SUPPLEMENTAL LEASE AGREEMENT	TO LEASE NO.	1) and the second secon
	691-79-385	Page 01 of 01
ADDRESS OF PREMISES:		
Santa Barbara Outpatient Clinic	e, 4440 Calle Real, Santa Barbara, CA 931	10
THIS AGREEMENT, made and entered into this date by	and between	***************************************
County of Santa Barbara - a political subdivision of th	e State of California.	
Whose address is: 105 East Anapamu Street, San	ita Barbara, CA 93101	
Hereinaster called the Lessor, and the UNITED STATES Government:	OF AMERICA, Department of Veterans Aff	airs, hereinafter called the
WHERAS, the parties hereto desire to amend the above le	ase.	
NOW THEREFORE, these parties for the consideration he Lease is amended effective <u>April 1, 2007</u> , as follows:	ereinafter mentioned covenant and agree that	the said
To extend the Lease from April 1, 2007 through September	er 30, 2007 as follows:	
<ol> <li>TO HAVE AND TO HOLD the said Premises with the September 30, 2007, subject to termination rights as he</li> </ol>	ir appurtenances for the term beginning Apri reinafter set forth.	il 1, 2007 through
<ol><li>The Government shall pay the Lessor monthly rent, at through September 30, 2007. Rent for a lesser period s</li></ol>	the rate of \$61,409.19 in arrears for the periohall be prorated.	d of April 1, 2007
<ol> <li>The Government may terminate this lease at any time d giving at least 60 days prior notice in writing to the Les notice shall be computed commencing with the day after</li> </ol>	sor and no rental shall accrue after the date c	September 30, 2007 by of termination. Said
<ol> <li>Except as provided herein, all terms and conditions of t effect. All other terms and conditions of the Lease rem</li> </ol>	he Lease remains unchanged and in full forcain in full force and effect.	e and
IN WITNESS WHEREOF, the parties subscribed their nat	nes as of the above date	
1.ESSOR		PARV.
Ву		
(Signature) In presence of	(Title)	
(Signature)	(Address	)
UNITED STATES OF AMERICA		
Ву	Contracting O	fficer
(Signature)	(Official Title)	04/11/4/1

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001050

IN WITNESS WHEREOF, GOVERNMENT and COUNTY have signed this Amendment by the respective authorized officers as set forth below to be effective on the date executed by GOVERNMENT.

	"COUNTY" COUNTY OF SANTA BARBARA	
ATTEST: MICHAEL F. BROWN CLERK OF THE BOARD	By: Chair, Board of Supervisors	
Ву:	Date:	
APPROVED AS TO FORM: STEPHEN SHANE STARK COUNTY COUNSEL By: RelCell?	APPROVED AS TO FORM: ROBERT GEIS, C.P.A. AUDITOR-CONTROLLER By:	
APPROVED:  Org George Tiso  Royn Carlentine SR/WA  Real Property Manager	APPROVED AS TO INSURANCE FORM:  Approved As To Insurance Form:  Ray Aronatorio, ARM, AIC  Risk Program Administrator	