

Contract Number : BC-09-052
 D1. Fiscal Year : FY 2010/11
 D2. Budget Unit Number (plus -Ship/-Bill codes in paren's) : 054
 D3. Requisition Number..... :
 D4. Department Name..... : Water Agency
 D5. Contact Person..... : Matt Naftaly
 D6. Phone..... : 568-3542

K1. Contract Type (check one): Personal Service Capital Project/Construction
 K2. Brief Summary of Contract Description/Purpose : Administration of Prop 50 Grant
 K3. Original Contract Amount..... : \$211,016
 K4. Contract Begin Date : November 18, 2008
 K5. Original Contract End Date..... : February 28, 2010
 K6. Amendment History (leave blank if no prior amendments):

Seq#	EffectiveDate	ThisAmndtAmt	CumAmndtTo	DateNewTotalAmt	NewEndDate	Purpose (2-4 words)
No. 1		\$			April 1, 2011	to extend end date
No. 2		85,000	296,031		December 31, 2013	extend end date/increase contract amount

K7. Department Project Number : WA8229

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 (if bid)..... : \$
 B5. If Board waived bids, show Agenda Date..... :
 B6. ... and Agenda Item Number : #
 B7. Boilerplate Contract Text Unaffected? (Yes / or cite ¶¶) :

F1. Encumbrance Transaction Code..... : 1701
 F2. Current Year Encumbrance Amount..... : \$
 F3. Fund Number : 3050
 F4. Department Number..... : 054
 F5. Division Number (if applicable)..... : 04-07
 F6. Account Number : 7460
 F7. Cost Center number (if applicable) :
 F8. Payment Terms : Net 30

V1. Vendor Numbers (A=uditor; P=urchasing) : 433085
 V2. Payee/Contractor Name : Kennedy/Jenks Consultants
 V3. Mailing Address..... : 622 Folsom Street
 V4. City State (two-letter) Zip (include +4 if known) : San Francisco, CA 94107
 V5. Telephone Number : (805) 973-5700
 V6. Contractor's Federal Tax ID Number (EIN or SSN) :
 V7. Contact Person : Meredith Clement
 V8. Workers Comp Insurance Expiration Date :
 V9. Liability Insurance Expiration Date[s] (G=enl; P=rofl) :
 V10. Professional License Number..... : #
 V11. Verified by (name of County staff)..... :
 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

**Amendment No. 2 to the Agreement for Administration of Proposition 50
Kennedy/Jenks Consultants
(BC No. 09-052)**

The agreement between the Santa Barbara County Water Agency (County) and Kennedy/Jenks Consulting (Contractor) which was entered into on November 18, 2008 (Board Contract No. 09-052), is hereby modified and amended as follows:

1. Paragraph 4 of the Agreement is hereby amended to read:

TERM. CONTRACTOR shall commence performance on November 18, 2008 and end performance upon completion, but not later than December 31, 2013 unless otherwise directed by COUNTY or unless earlier terminated.

2. Exhibit B, paragraph A is hereby amended to read:

A. For CONTRACTOR services to be rendered under this contract, CONTRACTOR shall be paid a total contract amount, including reimbursements, not to exceed \$296,031.

All other terms and conditions of the agreement will remain in full force and effect. This amendment is effective on _____, 2011.

ATTEST:
CHANDRA L. WALLAR
CLERK OF THE BOARD

By: _____
Deputy

SANTA BARBARA COUNTY WATER
AGENCY

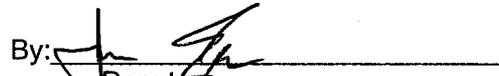
By: _____
Chair, Board of Directors

Date: _____

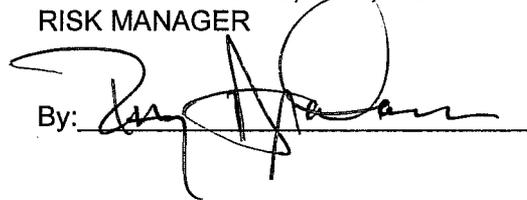
APPROVED AS TO FORM:
DENNIS MARSHALL
COUNTY COUNSEL

By: 
Deputy County Counsel

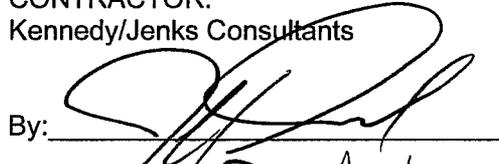
APPROVE AS TO ACCOUNTING FORM:
ROBERT W. GEIS
AUDITOR-CONTROLLER

By: 
Deputy

APPROVED AS TO INSURANCE:
RAY AROMATORIO, ARM, AIC
RISK MANAGER

By: 

CONTRACTOR:
Kennedy/Jenks Consultants

By: 
Title: Vice President