

## Contract Summary

BC 14 - 094

Complete data below, print, obtain signature of authorized departmental representative, and submit this form (and attachments) to the Clerk of the Board (>\$25,000) or Purchasing (<\$25,000). See also "Contracts for Services" policy. Form is not applicable to revenue contracts.

D1.	Fiscal Year.....	FY2013-2014
D2.	Budget Unit Number (plus –Ship/Bill codes in parenthesis).....	012
D3.	Requisition Number .....	N/A
D4.	Department Name .....	CEO
D5.	Contact Person.....	Ray Aromatorio
D6.	Telephone.....	884-6865

K1.	Contract Type (check one): <input type="checkbox"/> Personal Service <input checked="" type="checkbox"/> Capital	
K2.	Brief Summary of Contract Description/Purpose .....	WC Claims Administration Services
K3.	Original Contract Amount .....	1,002,204.17
K4.	Contract Begin Date .....	July 1, 2011
K5.	Original Contract End Date .....	June 30, 2012
K6.	Amendment History (leave blank if no prior amendments) .....	2nd Amendment 7/1/2013-2014
K7.	Department Project Number .....	N/A

B1.	Is this a Board Contract? (Yes/No) .....	Yes
B2.	Number of Workers Displaced (if any) .....	0
B3.	Number of Competitive Bids (if any) .....	N/A
B4.	Lowest Bid Amount (if bid) .....	
B5.	If Board waived bids, show Agenda Date .....	
	and Agenda Item Number.....	
B7.	Boilerplate Contract Text Unaffected? (Yes / or cite Paragraph) .....	

F1.	Encumbrance Transaction Code .....	N/A
F2.	Current Year Encumbrance Amount.....	
F3.	Fund Number.....	1911
F4.	Department Number .....	012
F5.	Division Number (if applicable) .....	2110
F6.	Account Number.....	7087
F7.	Cost Center number (if applicable) .....	
F8.	Payment Terms .....	Per Contract Schedule

V1.	Vendor Numbers (A=Auditor; P=Purchasing) .....	P20115
V2.	Payee/Contractor Name.....	Corvel Enterprise Company
V3.	Mailing Address .....	P.O. Box 669
V4.	City State (two-letter) Zip (include +4 if known).....	Chino, CA 91708
V5.	Telephone Number .....	909-257-3771
V7.	Contact Person .....	Scotty Benton
V8.	Workers Comp Insurance Expiration Date .....	4-3-14
V9.	Liability Insurance Expiration Date[s] (G=Genl; P=Prof'l).....	G 4-30-14 P 10-31-12
V10.	Professional License Number .....	316-04
V11.	Verified by (name of county staff) .....	Ray Aromatorio

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: 6/4/13 Authorized Signature: 

**SECOND AMENDMENT TO AGREEMENT FOR WORKERS' COMPENSATION CLAIMS  
ADMINISTRATION SERVICES**

between  
**COUNTY OF SANTA BARBARA**  
and  
**CORVEL ENTERPRISES COMPANY**

**Effective July 1, 2013**

**THIS IS THE SECOND AMENDMENT TO THE AGREEMENT** (hereafter Second Amendment) to Agreement for Workers' Compensation Claims Administration Services, (hereafter Agreement), made by and between the County of Santa Barbara, a political subdivision of the State of California (hereafter COUNTY), and the Corvel Enterprise Company (hereafter CORVEL).

**WHEREAS**, the Agreement is effective through June 30, 2014; and

**WHEREAS**, the parties desire to amend the Agreement to extend the term; and

**WHEREAS**, this Second Amendment incorporates the terms and conditions set forth in the Agreement, except as modified by this Second Amendment.

**NOW, THEREFORE**, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, COUNTY and CORVEL hereby agree to amend the Agreement as follows:

1. **Definitions.** Capitalized terms used in this Second Amendment, to the extent not otherwise defined herein shall have the same meanings as in the Agreement.
2. **Amendments.**

The Agreement is amended as follows:

- I. **TERM.** The period of this Agreement shall be from July 1, 2013 to June 30, 2014.

- XIX. **NOTICES.** All Notices or other form of communications required under this Agreement shall be addressed and delivered by certified mail as follows:

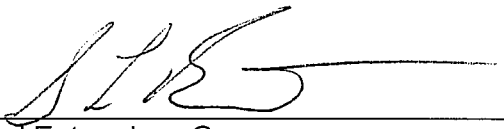
CORVEL: CORVEL Corporation  
2010 Main Street, Suite 600  
Irvine, CA 92614

County: County of Santa Barbara  
105 East Anapamu, Suite 102  
Santa Barbara, CA 93101

Second Amendment to Agreement between the **County of Santa Barbara** and the **Corvel Enterprises Company**.

**IN WITNESS WHEREOF**, the parties hereto have executed this Second Amendment to be effective July 1, 2013.

CORVEL

By:   
Corvel Enterprises Company