AMENDMENT TO AGREEMENT FOR PROFESSIONAL LEGAL SERVICES

Pursuant to Paragraph 26 of the AGREEMENT FOR PROFESSIONAL LEGAL SERVICES ("AGREEMENT") between the County of Santa Barbara ("COUNTY") and McCarthy & Kroes, Attorneys at Law ("ATTORNEY"), the COUNTY and ATTORNEY amend the AGREEMENT as follows:

Paragraph A of the attachment to the AGREEMENT entitled "EXHIBIT B/ PAYMENT ARRANGEMENTS/ Periodic Compensation" (which originally read, "For ATTORNEY services to be rendered under this Agreement, ATTORNEY shall be paid a total contract amount, including cost reimbursements, not to exceed \$75,000.00," and which was amended on October 15, 2013 to substitute "\$175,000" in place of "\$75,000") is amended to read as follows:

For ATTORNEY services to be rendered under this Agreement, ATTORNEY shall be paid a total contract amount, including cost reimbursements, not to exceed \$275,000.

In all other respects, the AGREEMENT remains unchanged and in full effect.

IN WITNESS WHEREOF, the parties have executed this Agreement, to be effective on the date executed by COUNTY.

COUNTY OF SANTA BARBARA

By:

Steve Lavagnino

Chair, Board of Subervisors

Date: March 4, 2014

ATTORNEY [McCarthy & Kroes]

By:

Chris Kroes, Partner

Tax ID Number: 77-0418959

Date: March 4,2014

ATTEST:

MONA H. MIYASATO CLERK OF THE BOARD

Dv.

Deputy

APPROVED AS TO FORM: MICHAEL C. GHIZZONI COUNTY COUNSEL

By: Martin G. McKenzie

Chief of Litigation

APPROVED AS TO ACCOUTING FORM:

ROBERT W. GEIS, CPA

AUDITOR-CONTROLLER

By:

Deputy

APPROVED AS TO FORM:

RISK PROGRAM ADMINISTRATOR

By:

Ray Aromatorio

Risk Program Administrator

Board Contract Summary

BC 14-082

For use with Expenditure Contracts submitted to the Board for approval. Complete information below, print, obtain signature of authorized departmental representative, and submit this form, along with attachments, to the appropriate departments for signature. See also: *Auditor-Controller Intranet Policies->Contracts*.

D1.	Fiscal Year	2014
D2.	Department Name	CERINAL COUNTY
D3.	Contact Person	1910 Publich
D4.	Telephone	V2958
K1.	Contract Type (check one): Personal Service Capital	
K2.	Brief Summary of Contract Description/Purpose	legal services
K3.	Department Project Number	
K4.	Original Contract Amount	\$ 75,000
K5.	Contract Begin Date	6/4/13,
K6.	Original Contract End Date	6/3/14
K7.	Amendment? (Yes or No)	
K8.	- New Contract End Date	
K9.	- Total Number of Amendments	12
K10.	- This Amendment Amount	
K11.	- Total Previous Amendment Amounts	\$ 175,000
K12.	- Revised Total Contract Amount	\$ 100,000
B1.	Is this a Board Contract? (Yes/No)	/ / / /
B2.	Number of Workers Displaced (if any)	30
B3.	Number of Competitive Bids (if any)	UMA
B4.	Lowest Bid Amount (if bid)	n/A
B5.	If Board waived bids, show Agenda Date	/1//)
	and Agenda Item Number	
B6.	Boilerplate Contract Text Changed? (If Yes, cite Paragraph)	210
	The state of the s	10
F1.	Fund Number	000/
F2.	Department Number	013
F3.	Line Item Account Number	7650
F4.	Project Number (if applicable)	
F5.	Program Number (if applicable)	
F6.	Org Unit Number (if applicable)	_
F7.	Payment Terms	Net 30
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		201/211
V1.	Auditor-Controller Vendor Number	204214
V2.	Payee/Contractor Name	MCCarthy NUS HIM atom
V3.	Mailing Address	125 E. Matria ST
V4.	City State (two-letter) Zip (include +4 if known)	Santa Barbara CA 93101
V5. V6.	Telephone Number	805-5642085
V7.	Vendor Contact Person	Chris Rigors
V8.	Workers Comp Insurance Expiration Date	Sept 2014
V9.	Liability Insurance Expiration Date Professional License Number	Jul 2019
V9.		934935
	Verified by (print name of county staff)	Martin Mckenzy
V11	Company Type (Check one): Individual Sole Propri	ietorship Corporation
I certify information is complete and accurate; designated funds available; required concurrences evidenced on signature page.		
Date: Authorized Signature:		
Revised 9/19/2013		