

EXHIBIT "E"
Amendment No. 2

**AMENDMENT NO. 2 TO AGREEMENT FOR PROFESSIONAL LEGAL SERVICES
(CONTRACT NO. BC17-149)**

This Amendment No. 2 hereby amends the Agreement for Professional Legal Services (Agreement) dated August 23, 2016 between the County of Santa Barbara, a political subdivision of the State of California (hereafter COUNTY) and Snow Spence Green, LLP (hereafter ATTORNEY), as previously amended.

The Agreement is amended as follows:

1. Exhibit B, Section A is hereby 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 \$80,000.00."
2. This Amendment No. 2 may be executed in any number of counterparts and each of such counterparts shall for all purposes be deemed to be an original; and all such counterparts, or as many of them as the parties shall preserve undestroyed, shall together constitute one and the same instrument.

All other terms remain in full force and effect.

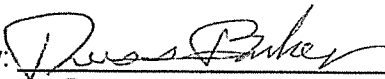
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Amendment No. 2 to Agreement for Professional Legal Services between the County of Santa Barbara and Snow Spence Green, LLP.

IN WITNESS WHEREOF, the parties have executed this Amendment No. 2 to be effective on the date executed by COUNTY.

ATTEST:
MONA MIYASATO
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

COUNTY OF SANTA BARBARA

By: 
Deputy Clerk

By: 
Chair, Board of Supervisors

Date: 6/20/17

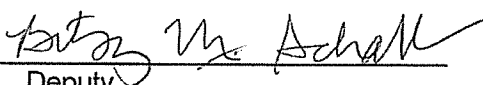
ATTORNEY:
SNOW SPENCE GREEN, LLP

By: _____
(Authorized Signature)

RECOMMENDED FOR APPROVAL AND
APPROVED AS TO FORM:
MICHAEL C. GHIZZONI
COUNTY COUNSEL

APPROVED AS TO ACCOUNTING FORM:
THEODORE A. FALLATI, CPA
AUDITOR-CONTROLLER

By: 
County Counsel

By: 
Deputy

APPROVED AS TO FORM:
Risk Management

By: 
Risk Management

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COUNTY OF SANTA BARBARA

By: _____
Deputy Clerk

By: _____
Chair, Board of Supervisors

Date: _____

ATTORNEY:
SNOW SPENCE GREEN, LLP

By:  _____
(Authorized Signature)

RECOMMENDED FOR APPROVAL AND
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COUNTY COUNSEL

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AUDITOR-CONTROLLER

By: _____
County Counsel

By: _____
Deputy

APPROVED AS TO FORM:
Risk Management

By: _____
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