

**AMENDMENT #1
TO AGREEMENT BETWEEN
COUNTY OF MONTEREY & BICKMORE RISK SERVICES, INC.**

THIS AMENDMENT is made to the AGREEMENT for the provision of annual actuarial analysis of Workers' compensation and general liability self-insurance programs, safety consulting, claims consulting and Risk Management Services by and between Bickmore Risk Services, Inc., hereinafter "CONTRACTOR", and the County of Monterey, a political subdivision of the State of California, hereinafter referred to as "County".

WHEREAS, the County and CONTRACTOR entered into the original AGREEMENT on March 7th, 2016 and

WHEREAS, the County and CONTRACTOR wish to amend the AGREEMENT to increase the amount of the AGREEMENT by \$2,000 and to add Workers' Compensation self-insured retention (SIR) study to scope of Services.

NOW THEREFORE, the County and CONTRACTOR hereby agree to amend the AGREEMENT in the following manner:

1. Section 2., "PAYMENTS BY THE COUNTY" shall be amended by removing, "The total amount payable by County to CONTRACTOR under this Agreement shall not exceed the sum of \$90,000." and replacing it with "The total amount payable by County to CONTRACTOR under this Agreement shall not exceed the sum of \$92,000."
2. Section 4., "SCOPE OF SERVICE AND ADDITIONAL PROVISIONS" shall be amended by adding Exhibit A-1, to include Workers' Compensation SIR study.
3. Except as provided herein, all remaining terms, conditions and provisions of the AGREEMENT are unchanged and unaffected by this AMENDMENT and shall continue in full force and effect as set forth in the AGREEMENT.
4. A copy of the original AGREEMENT executed by the County on March 7th, 2016 shall be attached.

IN WITNESS WHEREOF, the parties have executed the AMENDMENT on the day and year written below.

MONTEREY COUNTY

[Signature]
For Contracts/Purchasing Officer

*W/T. Skutter
Deputy Purchasing Agent
County of Monterey*

Dated: 6/8/18

Approved as to Fiscal Provisions:
[Signature]

Deputy Auditor/Controller

Dated: 6-6-18

Approved as to Liability Provisions:
[Signature]

Risk Management

Dated: 5-21-18

Approved as to Form:
[Signature]
Deputy County Counsel

Dated: _____

CONTRACTOR

By: [Signature]
Signature of Chair, President, or
Vice-President

John Broekschmidt SVP Pooling
Printed Name and Title

Dated: 5/31/18

By: [Signature]
(Signature of Secretary, Asst. Secretary, CFO,
Treasurer or Asst. Treasurer)*

Jeffrey Grubbs, VP-Pooling
Printed Name and Title

Dated: 5/31/18

***INSTRUCTIONS: If CONTRACTOR is a corporation, including limited liability and non-profit corporations, the full legal name of the corporation shall be set forth above together with the signatures of two specified officers. If CONTRACTOR is a partnership, the name of the partnership shall be set forth above together with the signature of a partner who has authority to execute this Agreement on behalf of the partnership. If CONTRACTOR is contracting in an individual capacity, the individual shall set forth the name of the business, if any, and shall personally sign the Agreement.**