

**AMENDMENT NO. 1
TO AGREEMENT BETWEEN
COUNTY OF MONTEREY AND ERGOVERA ERGONOMIC CONSULTING**

THIS AMENDMENT is made to the AGREEMENT for the provision of ergonomic analysis, training and consulting services for the office and industrial environments by and between **Deidre Rogers-Smallman dba Ergovera**, hereinafter “CONTRACTOR”, and the County of Monterey, a political subdivision of the State of California, hereinafter referred to as “COUNTY”.

WHEREAS, the COUNTY and the CONTRACTOR entered into the original AGREEMENT on September 14, 2017; and

WHEREAS, the COUNTY and CONTRACTOR hereby wish to amend the AGREEMENT, to extend the term by one year through **August 31, 2019**; and increase the agreement by \$80,000, from \$100,000, for a total amount not to exceed the sum of **\$180,000**.

NOW THEREFORE, the COUNTY and CONTRACTOR hereby agree to amend the AGREEMENT as follows:

1. Section 3, “TERM OF AGREEMENT”, Subsection 3.1, shall be amended by removing “The term of the AGREEMENT shall commence at the date of final signature, through August 31, 2018” and replacing it with “**The term of the AGREEMENT shall be effective September 1, 2017 through and including August 31, 2019.**”
2. Section 4, “COMPENSATION AND PAYMENTS”, Subsection 4.1, shall be amended by increasing the AGREEMENT by \$80,000, from \$100,000, for a total amount not to exceed the sum of **\$180,000**.
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 AMENDMENT shall be attached to the original AGREEMENT executed by the COUNTY on September 14, 2017.

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

MONTEREY COUNTY

CONTRACTOR

Contracts/Purchasing Officer

By: Deidre Rogers
Signature of Chair, President, or
Vice-President

Dated:

Deidre Rogers, Nurse Ergonomist
Printed Name and Title

Approved as to Fiscal Provisions:

Dated: 7/26/18

Deputy Auditor/Controller

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

Dated: 8-15-18

Approved as to Liability Provisions:

Printed Name and Title

N/A

Risk Management

Dated:

Dated:

Approved as to Form:

Deputy County Counsel

8/15/18

Dated:

***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.