

Title

Authorize the Purchasing Manager for Natividad Medical Center (NMC) to execute Renewal and Amendment No. 2 to the Agreement with Nixon Peabody LLP for Legal Services at NMC, extending the term of the Agreement through June 30, 2014 in an amount not to exceed \$300,000 (no increase from the previously approved amount) in the aggregate.

Report <u>RECOMMENDATION:</u>

It is recommended the Board of Supervisors authorize the Purchasing Manager for Natividad Medical Center (NMC) to execute Renewal and Amendment No. 2 to the Agreement with Nixon Peabody LLP for Legal Services at NMC, extending the term of the Agreement through June 30, 2014 in an amount not to exceed \$300,000 (no increase from the previously approved amount) in the aggregate.

SUMMARY/DISCUSSION:

Nixon Peabody LLP is a Global 100 law firm that has represented the County with respect to public finance matters. On October 10, 2011, the County entered into an agreement for up to \$100,000 to provide legal assistance and advice on various financing matters, including issues regarding changes in hospital structure and governance with respect to Natividad Medical Center. The County continued to require the Nixon firm's counsel with respect to the performance of due diligence regarding a potential affiliation with Salinas Valley Memorial Healthcare System affiliation and financing issues related to the structure and governance of Natividad Medical Center and, accordingly, the Board of Supervisors extended its agreement to increase the scope of services and to increase the maximum liability by \$200,000 for a total contract amount of \$300,000 and to extend the term to June 30, 2013. In light of continued need for Nixon's advice and consultation concerning the impact of health care reform in connection with NMC's financing, NMC seeks to amend the agreement with Nixon for an additional year to June 30, 2014 with no increase to the current maximum liability of \$300,000.

OTHER AGENCY INVOLVEMENT:

County Counsel has reviewed and approved this Renewal and Amendment No. 2 as to legal form and risk provisions. Auditor-Controller has reviewed and approved this Amendment No.2 as to fiscal provisions. The Renewal and Amendment No. 2 has also been reviewed and approved by Natividad Medical Center's Board of Trustees.

FINANCING:

There is no cost for this Renewal and Amendment No. 2. There is no impact to the General Fund. As a result of Amendment No. 1, the Board of Supervisors approved a \$200,000 increase for Fiscal Year 2012-2013 in the maximum liability for the Agreement (for a total Agreement amount not to exceed \$300,000 in the aggregate). As a result of this Renewal and Amendment No. 2, no additional dollars will be added. \$100,000 is included in the Fiscal Year 2013/2014 Adopted Budget. Remaining funds from the previous year's purchase orders will be rolled over for Fiscal Year 2013/2014. There is no impact to the General Fund.

Prepared by: Daniel Leon, Chief Financial Officer, 783-2561 Approved by: Harry Weis, Chief Executive Officer, 783-2553

Attachments: Renewal and Amendment No. 2, Original Agreement and Amendment No. 1, Spend Sheet Attachments on file with the Clerk to the Board's Office

File ID A 13-194 No. 29



Monterey County

Board Order

168 West Alisal Street, 1st Floor Salinas, CA 93901 831,755,5066

Agreement No.: A-12242

Upon motion of Supervisor Salinas, seconded by Supervisor Parker and carried by those members present, the Board of Supervisors hereby:

Authorized the Purchasing Manager for Natividad Medical Center (NMC) to execute Renewal and Amendment No. 2 to the Agreement with Nixon Peabody LLP for Legal Services at NMC, extending the term of the Agreement through June 30, 2014 in an amount not to exceed \$300,000 (no increase from the previously approved amount) in the aggregate.

PASSED AND ADOPTED on this 27th day of August 2013, by the following vote, to wit:

AYES: Supervisors Armenta, Calcagno, Salinas and Parker NOES: None ABSENT: Supervisor Potter

I, Gail T. Borkowski, Clerk of the Board of Supervisors of the County of Monterey, State of California, hereby certify that the foregoing is a true copy of an original order of said Board of Supervisors duly made and entered in the minutes thereof of Minute Book 76 for the meeting on August 27, 2013.

Dated: September 3, 2013 File Number: A 13-194 Gail T. Borkowski, Clerk of the Board of Supervisors County of Monterey, State of California

By Danise Henris Deputy

NIXON PEABODYLLP

ATTORNEYS AT LAW

Gas Company Tower 555 West Fifth St., 46th Floor Los Angeles, California 90013-1010 (213) 629-6000 Fax: (213) 629-6001

Richard M. Jones Direct Dial: (213) 629-6070 E-Mail: rjones@nixonpeabody.com

TO: Sid Cato Natividad Medical Center Management Analyst/Contracts

FROM: Rick Jones

DATE: April 19, 2012

RE: Nixon Peabody / Natividad Amendment

Enclosed please find two executed originals of Amendment No. 2 to Professional Services Agreement between Nixon Peabody LLP and the Natividad Medical Center for Legal Services. Two copies of our Certificate of Insurance are also attached.

Please do not hesitate to contact me if you require any additional information or have questions regarding the enclosed Amendment.

RENEWAL AND AMENDMENT NO. 2 TO PROFESSIONAL SERVICES AGREEMENT BETWEEN Nixon Peabody LLP AND THE NATIVIDAD MEDICAL CENTER FOR Legal Services

This Renewal and Amendment No. 2 to Professional Services Agreement ("Agreement"), dated October 10, 2011 is entered into by and between the County of Monterey, on behalf of Natividad Medical Center ("NMC"), and Nixon Peabody LLP (Contractor), with respect to the following:

RECITALS

WHEREAS, the County and Contractor amended the Agreement previously on March 1, 2012 via Amendment No. 1; and

WHEREAS, the County and Contractor wish to amend the Agreement to extend the term end date to allow for existing services to continue.

AGREEMENT

NOW, THEREFORE, the parties agree to amend the Agreement as follows:

- 1. Contractor will continue to provide NMC with the same scope of services as stated in the original Agreement (No. A-12242/MYA503).
- Section 3. EFFECTIVE DATE OF AMENDMENT AND EXTENSION OF TERM, of Amendment No. 1, as previously amended, is amended to extend the term of the AGREEMENT through June 30, 2014.
- 3. Except as provided herein, all remaining terms, conditions and provisions of the Agreement and Amendment No.1 is unchanged and unaffected by this Amendment and shall continue in full force and effect as set forth in the Agreement.
- 4. A copy of this Amendment and all previous amendments shall be attached to the original Agreement (No. A-12242/MYA503).
- 5. The effective date of this Renewal and Amendment No. 2 is July 1, 2013.

IN WITNESS WHEREOF, the parties hereto are in agreement with this Amendment on the basis set forth in this document and have executed this Amendment on the day and year set forth herein.

Natividad Medical Center

By:

Sid Cato, NMC Contracts Manager

Date:

By:

Harry Weis, NMC Chief Executive Officer

Jutie Date:

APPROVED AS TO LEGAL PROVISIONS

By:

Anne Brauer

Anne Brauer Stace Saette Monterey County, Deputy Counsel

Date:

5771

APPROVED AS TO FISCAL PROVISIONS By: Gary Giboney Monterey County Auditor/Controller's Office

Date:

Contractor

Nixon Peabody LLP Contractor's Business Name*** (see instructions)

Signature of Chair, President, or Vice-President

Partner

Name and Title

Date: May 7, 2013

By:

(Signature of Secretary, Asst. Secretary, CFO, Treasurer or Asst. Treasurer)

Name and Title

Date:

*****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 (two signatures required).

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 (two signatures required).

If CONTRACTOR is contracting in and individual capacity, the individual shall set forth the name of the business, if any and shall personally sign the Agreement (one signature required)



Title

Authorize the Purchasing Manager for Natividad Medical Center (NMC) to execute Amendment No. 1 to the Agreement with Nixon Peabody LLP for Legal Services at NMC in an amount not to exceed \$300,000 (an increase of \$200,000) increasing the scope of services, and extending the Agreement to June 30, 2013.

Body

RECOMMENDATION:

It is recommended the Board of Supervisors authorize the Purchasing Manager for Natividad Medical Center (NMC) to execute Amendment No. 1 to the Agreement with Nixon Peabody LLP for Legal Services at NMC in an amount not to exceed \$300,000 (an increase of \$200,000) increasing the scope of services, and extending the Agreement to June 30, 2013.

SUMMARY/DISCUSSION:

Nixon Peabody LLP is a Global 100 law firm that has represented the County with respect to public finance matters. On October 10, 2011, the County entered into an agreement for up to \$100,000 to provide legal assistance and advice on various financing matters, including issues regarding changes in hospital structure and governance with respect to Natividad Medical Center. The County continues to require the Nixon firm's counsel with respect to the performance of due diligence regarding the Salinas Valley Memorial Healthcare System affiliation and financing issues related to the structure and governance of Natividad Medical Center. Accordingly, the parties wish to extend its agreement to increase the scope of services, to increase the maximum liability by \$200,000 for a total contract amount of \$300,000 and to extend the term to June 30, 2013.

OTHER AGENCY INVOLVEMENT:

County Counsel has reviewed and approved this Amendment as to legal form and risk provisions. Auditor-Controller has reviewed and approved this Amendment as to fiscal provisions. The Amendment has also been reviewed and approved by Natividad Medical Center's Board of Trustees.

FINANCING:

The cost of this Amendment No. 1 is \$200,000. \$20,000 is included in the Fiscal Year 2011/12 Budget and \$180,000 is included in the Fiscal Year 2012/13 Recommended Budget. There is no impact to the General Fund.

Prepared by: Stacy Saetta, Deputy County Counsel, 755-5333 Approved by: Harry Weis, Chief Executive Officer, 783-2553

Attachments: Agreement, Amendment No. 1

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Monterey County

Board Order

168 West Alisal Street, 1st Floor Salinas, CA 93901 831.755.5066

Agreement No.: A-12242

Authorized the Purchasing Manager for Natividad Medical Center (NMC) to execute Amendment No. 1 to the Agreement with Nixon Peabody LLP for Legal Services at NMC in an amount not to exceed \$300,000 (an increase of \$200,000) increasing the scope of services, and extending the Agreement to June 30, 2013.

PASSED AND ADOPTED on this 12th day of June 2012, by the following vote, to-wit:

AYES: Supervisors Armenta, Calcagno, Salinas, Parker, and Potter NOES: None ABSENT: None

I, Gail T. Borkowski, Clerk of the Board of Supervisors of the County of Monterey, State of California, hereby certify that the foregoing is a true copy of an original order of said Board of Supervisors duly made and entered in the minutes thereof of Minute Book 76 for the meeting on June 12, 2012.

Dated: June 22, 2012 File Number: A 12-057 Gail T. Borkowski, Clerk of the Board of Supervisors County of Monterey, State of California

Jenise d By

Friday, March 30, 2012 Afre & M

ROUTING PROCESS REQUESTED FOR: Le Usel) Nixon Peabody Amendment #1

1. County Counsel (Stacy Saetta) to approve. Then please send to Gary Giboney, Auditor/Controller's Office

2. Auditor/Controller's office (Gary Giboney) to approve.

3. Then please return to Sid at NMC via interoffice mail.

Note: your cooperation in routing is greatl appreciated.

Sid Cato Management Analyst Natividad Medical Center 783-2620 catosl@natividad.com

1712-057

REQUIRED

- 2 Originals of Agreement/Amendment
- General Liability Insurance (\$1 million minimum)

GL Endorsement

- Auto Liability Insurance (\$1 million minimum)
- Auto Endorsement
- Worker Compensation Insurance (\$1 million minimum)

REQUIRED IF APPLICABLE

Written Justification for Insurance Modification of Requirements

Contractor Status Form: 25 questions

Professional Liability Insurance

Business Associate Agreement

∑ 590 Withholding Exemption Certificate Form (New Vendor) ∑ Vendor Data Record (New Vendor)

<u>Notes</u>

FY 12/13 Amendment extending term and adding \$200,000 4/5/1 olc 518

NIXON PEABODY

ATTORNEYS AT LAW

Gas Company Tower 555 West Fifth St., 46th Floor Los Angeles, California 90013-1010 (213) 629-6000 Fax: (213) 629-6001

Richard M. Jones Direct Dial: (213) 629-6070 E-Mail: rjones@nixonpeabody.com

TO: Sid Cato Natividad Medical Center Management Analyst/Contracts

FROM: Rick Jones

DATE: April 19, 2012

RE: Nixon Peabody / Natividad Amendment

Enclosed please find two executed originals of Amendment No. 1 to Agreement for Specialized Services between Nixon Peabody LLP and the County of Monterey with respect to Natividad Medical Center.

Please do not hesitate to contact me if you require any additional information or have questions regarding the enclosed Amendment.

AMENDMENT NO. 1 TO AGREEMENT FOR SPECIALIZED SERVICES

THIS FIRST AMENDMENT TO AGREEMENT FOR SPECIALIZED SERVICES ("AMENDMENT NO. 1") is made and entered into as of March 1, 2012, by and between County of Monterey ("COUNTY") and NIXON PEABODY LLP ("ATTORNEY") with respect to the following:

RECITALS

A. ATTORNEY and COUNTY have entered into an Agreement for Specialized Services No. SC2526 ("AGREEMENT") dated October 10, 2011, pursuant to which ATTORNEY provides advice and counsel to COUNTY with respect to Natividad Medical Center.

B. The parties wish to amend the scope of service of the AGREEMENT, to extend the term of the AGREEMENT, and to extend the maximum liability under the AGREEMENT.

AGREEMENT

IN CONSIDERATION of the foregoing recitals and the mutual promises and covenants contained herein, COUNTY and ATTORNEY agree as follows:

1. Paragraph 2.02, <u>Budget</u>, is amended to read in its entirety as follows:

"2.02. <u>Budget</u>. ATTORNEY and COUNTY agree that the budget for the project shall not exceed the sum of three hundred thousand dollars (\$300,000). ATTORNEY and COUNTY shall revise the Budget estimates as necessary to reflect actual necessary ongoing fees and expenses required for the project. Proposed budget increases must be approved by COUNTY before increased charges on expenditures are accrued. ATTORNEY shall notify the County Counsel in writing when fifty (50%) and seventy-five (75%) of the Budget has been spent. If COUNTY does not approve additional fees and expenses required by the project beyond the initial and revised budget, COUNTY hereby consents to ATTORNEY's withdrawal in the project."

2. Paragraph 2.03, <u>Maximum Liability</u>, is amended to read in its entirety as follows:

"2.03. <u>Maximum Liability</u>. The maximum amount of COUNTY's liability over the full term of this Agreement (including all items paid under paragraph 2.01) is three hundred thousand dollars (\$300,000). This amount may be amended by written agreement between the parties, subject to approval by the Board of Supervisors."

- Effective Date of Amendment and Extension of Term. This AMENDMENT NO. 1 shall become effective on March 1, 2012. The term of the AGREEMENT shall continue until June 30, 2013.
- 4. <u>Exhibit A</u>. Exhibit A to the AGREEMENT is hereby amended to read in its entirety as follows:

"COUNTY retains CONTRACTOR to assist and advise the County of Monterey/Natividad Medical Center in all aspects of financing, including issues around a change in hospital structure, governance, and relationship to the County. The assistance should include creative ideas to address existing financing as well as future financing. COUNTY retains CONTRACTOR to assist and advise the County of Monterey/Natividad Medical Center with due diligence in regard to the proposed affiliation with Salinas Valley Memorial Healthcare System. In addition, assistance in crafting related documents should be provided. Understanding that CONTRACTOR may have expertise in other areas of the law relevant to NMC, the parties may desire to expand the scope of these services on short notice. CONTRACTOR may work directly with NMC senior management and County Counsel and shall keep County Counsel fully advised of all activities and advice."

5. All other terms and conditions of AGREEMENT shall remain in full force and effect.

6. A copy of this AMENDMENT NO. 1 shall be attached to the AGREEMENT.

IN WITNESS WHEREOF, COUNTY and ATTORNEY have caused this AMENDMENT NO. 1 to be executed:

COUNTY OF MONTEREY NMC LONSHACTS MGA. Title 6-13-19-Date:

ATTORNEY
By Much Martiner
Title_Partner

Date: April 17, 2012

NATIVIDAD MEDICAL CENTER By_ NMC-CEO

Date: 4/23/1~

APPROVED AS TO FORM: CHARLES J. McKEE, County Counsel

By Y L**Í**SAETTA STAC

Deputy County Counsel

to fiscal provisions Reviewed As Auditor-Oentroller County of Monterey 4-225

AMENDMENT NO. 1 TO AGREEMENT FOR SPECIALIZED SERVICES Page 3

AMENDMENT NO. 1 TO AGREEMENT FOR SPECIALIZED SERVICES

THIS FIRST AMENDMENT TO AGREEMENT FOR SPECIALIZED SERVICES ("AMENDMENT NO. 1") is made and entered into as of March 1, 2012, by and between County of Monterey ("COUNTY") and NIXON PEABODY LLP ("ATTORNEY") with respect to the following:

RECITALS

A. ATTORNEY and COUNTY have entered into an Agreement for Specialized Services No. SC2526 ("AGREEMENT") dated October 10, 2011, pursuant to which ATTORNEY provides advice and counsel to COUNTY with respect to Natividad Medical Center.

B. The parties wish to amend the scope of service of the AGREEMENT, to extend the term of the AGREEMENT, and to extend the maximum liability under the AGREEMENT.

AGREEMENT

IN CONSIDERATION of the foregoing recitals and the mutual promises and covenants contained herein, COUNTY and ATTORNEY agree as follows:

1. Paragraph 2.02, <u>Budget</u>, is amended to read in its entirety as follows:

"2.02. <u>Budget</u>. ATTORNEY and COUNTY agree that the budget for the project shall not exceed the sum of three hundred thousand dollars (\$300,000). ATTORNEY and COUNTY shall revise the Budget estimates as necessary to reflect actual necessary ongoing fees and expenses required for the project. Proposed budget increases must be approved by COUNTY before increased charges on expenditures are accrued. ATTORNEY shall notify the County Counsel in writing when fifty (50%) and seventy-five (75%) of the Budget has been spent. If COUNTY does not approve additional fees and expenses required by the project beyond the initial and revised budget, COUNTY hereby consents to ATTORNEY's withdrawal in the project."

2. Paragraph 2.03, <u>Maximum Liability</u>, is amended to read in its entirety as follows:

"2.03. <u>Maximum Liability</u>. The maximum amount of COUNTY's liability over the full term of this Agreement (including all items paid under paragraph 2.01) is three hundred thousand dollars (\$300,000). This amount may be amended by written agreement between the parties, subject to approval by the Board of Supervisors."

- Effective Date of Amendment and Extension of Term. This AMENDMENT NO. 1 shall become effective on March 1, 2012. The term of the AGREEMENT shall continue until June 30, 2013.
- 4. <u>Exhibit A</u>. Exhibit A to the AGREEMENT is hereby amended to read in its entirety as follows:

"COUNTY retains CONTRACTOR to assist and advise the County of Monterey/Natividad Medical Center in all aspects of financing, including issues around a change in hospital structure, governance, and relationship to the County. The assistance should include creative ideas to address existing financing as well as future financing. COUNTY retains CONTRACTOR to assist and advise the County of Monterey/Natividad Medical Center with due diligence in regard to the proposed affiliation with Salinas Valley Memorial Healthcare System. In addition, assistance in crafting related documents should be provided. Understanding that CONTRACTOR may have expertise in other areas of the law relevant to NMC, the parties may desire to expand the scope of these services on short notice. CONTRACTOR may work directly with NMC senior management and County Counsel and shall keep County Counsel fully advised of all activities and advice."

- 5. All other terms and conditions of AGREEMENT shall remain in full force and effect.
- 6. A copy of this AMENDMENT NO. 1 shall be attached to the AGREEMENT.

IN WITNESS WHEREOF, COUNTY and ATTORNEY have caused this AMENDMENT NO. 1 to be executed:

COUNTY OF MONTERE MULE CONSULACTS MOR By Title 6-13-12 Date:

Title Partner

Date: April 17, 2012

NATIVIDAD MEDICAL CENTER
By NMC-CEO
Date: 4 23 11

APPROVED AS TO FORM: CHARLES J. McKEE, County Counsel

By_ STACY L. SAETTA Deputy County Counsel

Reviewed at to the day affectisions Auditor-Controller County of Monterey U. 27-12

AMENDMENT NO. 1 TO AGREEMENT FOR SPECIALIZED SERVICES Page 3

AGREEMENT FOR SPECIALIZED ATTORNEY SERVICES

THIS AGREEMENT is made and entered by and between the COUNTY OF MONTEREY, a political subdivision of the State of California (hereinafter referred to as "COUNTY"), and Nixon Peabody LLP (hereinafter referred to as "ATTORNEY").

RECITALS

This Agreement is made with respect to the following facts:

A. The County Board of Supervisors may contract for legal services for the COUNTY when it is necessary and appropriate that special legal services be performed for the COUNTY and its officers and employees.

B. COUNTY desires to retain ATTORNEY to provide legal advice to the COUNTY with respect to the Natividad Medical Center ("Project").

C. ATTORNEY is specially trained, experienced, expert, and competent to perform the legal services required. COUNTY specifically seeks the expertise of Richard Jones, and enters into this agreement with the understanding that Mr. Jones will be the primary attorney providing services under this Agreement.

COVENANTS

NOW, THEREFORE, the parties agree as follows:

I. <u>SERVICES TO BE PERFORMED.</u>

1.01. <u>Services to be Performed by ATTORNEY</u>. COUNTY hereby hires ATTORNEY to render independent legal services to the County, subject to the terms of this Agreement. The primary attorney providing services hereunder shall be Richard Jones. ATTORNEY shall perform said services faithfully and well, when needed by and as requested by the County. The services to be performed under this Agreement shall consist of providing legal advice with respect Project as more particularly described in Exhibit A. ATTORNEY shall perform only such services as are within the expertise of the individual attorneys on ATTORNEY's staff, and ATTORNEY will notify COUNTY promptly if any work requested is beyond such expertise. ATTORNEY shall diligently provide such legal services as are necessary and approved by COUNTY in a professional, timely manner. ATTORNEY shall perform all of its services with due regard to ethical guidelines and the client's interests.

1.02. <u>No Conflicts of Interest</u>. ATTORNEY does not have an actual or potential interest adverse to COUNTY nor does ATTORNEY presently represent a person or firm with an interest adverse to COUNTY with respect to the matter accepted. COUNTY recognizes that ATTORNEY represents many other agencies, governments, companies and individuals. Many of those clients rely upon ATTORNEY for general representation. It is possible that during the term of this Agreement, some of ATTORNEY'S current or future clients will have disputes or

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

transactions with COUNTY. In particular, but not by way of limitation, ATTORNEY regularly represents many underwriters, credit providers and other municipal market participants in transactions unrelated to the COUNTY. ATTORNEY regularly represents Morgan Stanley, J. P. Morgan Securities, Inc., Bank of America Securities, Citigroup and Goldman Sachs, among others, one or more of which may underwrite bonds issued for the project that is the subject of this Agreement. COUNTY agrees that ATTORNEY may represent or continue to represent, or undertake in the future to represent, any of ATTORNEY'S existing clients (whether or not named herein) or new clients in any matter, even if the interests of such other clients in such other matters are directly adverse to COUNTY'S, so long as those matters are not substantially related to our work for COUNTY. COUNTY understands that, in engagement letters with many of ATTORNEY'S other clients, ATTORNEY has received similar agreements to preserve our ability to represent COUNTY.

1.03. <u>Direction from County Counsel</u>. ATTORNEY shall report to and receive direction from County Counsel in providing advice under this Agreement. If ATTORNEY prepares any County documents in the performance of services under this Agreement, including but not limited to County resolutions, staff reports, and memoranda to the Board of Supervisors, Planning Commission, or other County legislative or advisory bodies, ATTORNEY shall provide such drafts to County Counsel for review and consultation prior to finalizing any such drafts.

1.04. <u>Reporting Requirements</u>. ATTORNEY shall provide County with such reports as may be requested by County in connection with the performance of services hereunder.

II. COMPENSATION.

2.01. <u>Compensation to Attorney</u>. As consideration for ATTORNEY's performance of services under this Agreement, COUNTY shall pay to ATTORNEY the fees and necessary expenses calculated in accordance with the hourly rate and expense method of billing. Fees and expenses are to be charged in accordance with the terms of this agreement and in accordance with the hourly rates for partners, associates, paralegals, and planners, if any, of ATTORNEY and any other terms governing fees set forth in Exhibit B, attached hereto and incorporated herein by reference. COUNTY will not pay ATTORNEY for travel time. COUNTY will reimburse ATTORNEY for the actual expenses related to the travel, as set forth below.

2.02. <u>Budget</u>. ATTORNEY and COUNTY agree that the budget for the project shall not exceed the sum of one hundred thousand dollars (\$100,000.00.). ATTORNEY and COUNTY shall revise the Budget estimates as necessary to reflect actual necessary ongoing fees and expenses required for the project. Proposed budget increases must be approved by COUNTY before increased charges or expenditures are accrued. ATTORNEY shall notify the County Counsel in writing when fifty percent (50%) and seventy-five percent (75%) of the Budget has been spent. If COUNTY does not approve additional fees and expenses required by the project beyond the initial and revised budget, COUNTY hereby consents to ATTORNEY'S withdrawal as primary counsel in the project.

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13394663.2

2.03. <u>Maximum Liability</u>. The maximum amount of COUNTY's liability over the full term of this Agreement (including all items paid under paragraph 2.01) is one hundred thousand dollars (\$100,000.00). This amount may be amended by written agreement between the parties, subject to approval by the Board of Supervisors.

2.04. <u>Reimbursement for Expenses.</u>

(a) COUNTY shall reimburse ATTORNEY for all actual and necessary expenses for the following items:

(1) Postage;

- (2) Actual travel expenses, as more fully described in (b) below;
- (3) Photocopying;
- (4) Computerized legal research; and
- (5) Other expenses when approved in advance.

(b) COUNTY will not reimburse ATTORNEY for any non-attorney staff time or overtime for secretarial, clerical, or word processing costs connected with preparing required status reports, time spent to provide information for a fee audit, or for work not authorized by COUNTY. Travel will be reimbursed as follows: Transportation at actual fare for economy or coach class, meals and lodging not to exceed COUNTY per diem unless authorized in advance. COUNTY will not pay ATTORNEY for the travel time.

2.05. <u>Monthly Claims by Attorney</u>. Promptly after the last day of each month, ATTORNEY shall submit to COUNTY a claim, on a form or in a format approved by COUNTY, setting forth in detail the time and expense items incurred by ATTORNEY during the previous month, for which payment is sought, and setting forth such other information pertinent to the claim as COUNTY may require. The fees charges shall be calculated correctly, contain no charges previously billed, and be consistent with the approved hourly fee schedule and budget maximum set forth in Exhibit B. The following information shall be set forth accurately in or attached to the billing invoice:

(a) County Counsel file number or other identification of subject matter for which ATTORNEY rendered services;

(b) Staffing level, hourly rate, and detailed time and activity descriptions for each attorney, paralegal, and/or planner, including but not limited to time spent with respect to conferences, correspondence, telephone calls, hearings, meetings, research, project review, depositions, document filing, and trials; and

(c) Invoices supporting all outside costs.

2.06. <u>Payment of Monthly Claims by COUNTY</u>. The County, through the Office of the County Counsel, shall certify ATTORNEY's claim, either in the requested amount or in such other amount as County Counsel approves in conformity with this Agreement. County Counsel shall promptly submit such certified claim to the Auditor for the County of Monterey. The

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

Auditor shall thereafter pay the balance of the certified claim not later than 45 days after Auditor receives the certified claim.

2.07. <u>Disputed Payment Amount</u>: If for any claim COUNTY certifies a lesser amount than the amount requested, and if ATTORNEY desires to dispute the amount so certified, ATTORNEY must submit a written notice of protest to COUNTY within 20 days after ATTORNEY's receipt of the certification. The parties shall then promptly meet to review the dispute and resolve it on a mutually acceptable basis. No court action may be taken on such dispute until the parties have met and attempted to resolve the dispute in person.

2.08. <u>Conflicting Payment Provisions</u>. The provisions regarding payment set forth in this portion of the Agreement prevail over any conflicting provisions that may be found in any of the exhibits.

III. INDEMNIFICATION AND INSURANCE.

3.01.RESERVED

3.02. Evidence of Coverage. Prior to commencement of this Agreement, the ATTORNEY shall provide a "Certificate of Insurance" certifying that coverage as required herein has been obtained. Individual endorsements executed by the insurance carrier shall accompany the certificate. In addition, the ATTORNEY upon request shall provide a certified copy of the policy or policies. This verification of coverage shall be sent to the County's Contracts/Purchasing Department, unless otherwise directed. The ATTORNEY shall not receive a "Notice to Proceed" with the work under this Agreement until it has obtained all insurance required and the County has approved such insurance. This approval of insurance shall neither relieve nor decrease the liability of the ATTORNEY.

3.03. <u>Qualifying Insurers.</u> All coverage's, except surety, shall be issued by companies which hold a current policy holder's alphabetic and financial size category rating of not less than A- VII, according to the current Best's Key Rating Guide or a company of equal financial stability that is approved by the County's Purchasing Manager.

3.04. <u>Insurance Coverage Requirements</u>. Without limiting ATTORNEY's duty to indemnify, ATTORNEY shall maintain in effect throughout the term of this Agreement a policy or policies of insurance with the following minimum limits of liability:

(a) <u>Commercial General Liability Insurance</u>, including but not limited to premises and operations, including coverage for Bodily Injury and Property Damage, Personal Injury, Contractual Liability, Broad form Property Damage, Independent Contractors, Products and Completed Operations, with a combined single limit for Bodily Injury and Property Damage of not less than \$1,000,000 per occurrence.

Exemption/Modification (Justification attached; subject to approval).

(b) <u>Business automobile liability insurance</u>, covering all motor vehicles, including owned, leased, non-owned, and hired vehicles, used in providing services under this

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

Agreement, with a combined single limit for Bodily Injury and Property Damage of not less than \$500,000 per occurrence.

Exemption/Modification (Justification attached; subject to approval).

(c) <u>Workers' Compensation Insurance</u>, if ATTORNEY employs others in the performance of this Agreement, in accordance with California Labor Code section 3700 and with Employer's Liability limits not less than \$1,000,000 each person, \$1,000,000 each accident and \$1,000,000 each disease.

Exemption/Modification (Justification attached; subject to approval).

(d) Professional liability insurance, if required for the professional services being provided, (e.g., those persons authorized by a license to engage in a business or profession regulated by the California Business and Professions Code), in the amount of not less than \$1,000,000 per claim and \$2,000,000 in the aggregate, to cover liability for malpractice or errors or omissions made in the course of rendering professional services. If professional liability insurance is written on a "claims-made" basis rather than an occurrence basis, the ATTORNEY shall, upon the expiration or earlier termination of the Agreement, obtain extended reporting coverage ("tail coverage") with the same liability limits. Any such tail coverage shall continue for at least three years following the expiration or earlier termination of this Agreement.
 L Exemption/Modification (Justification attached; subject to approval).

(e) <u>Other Insurance Requirements</u>. All insurance required by this Agreement shall be with a company acceptable to the COUNTY and issued and executed by an admitted insurer authorized to transact Insurance business in the State of California. Unless otherwise specified by this Agreement, all such insurance shall be written on an occurrence basis, or, if the policy is not written on an occurrence basis, such policy with the coverage required herein shall continue in effect for a period of three years following the date ATTORNEY completes its performance of services under this Agreement.

Each liability policy shall provide that the COUNTY shall be given notice in writing at least thirty days in advance of any endorsed reduction in coverage or limit, cancellation, or intended non-renewal thereof. Each policy shall provide coverage for ATTORNEY and additional insureds with respect to claims arising from each subcontractor, if any, performing work under this Agreement, or be accompanied by a certificate of insurance from each subcontractor showing each subcontractor has identical insurance coverage to the above requirements.

<u>Commercial general liability and automobile liability policies shall</u> <u>provide an endorsement naming the County of Monterey, its officers, agents, and employees as</u> <u>Additional Insureds with respect to liability arising out of the ATTORNEY's work, including</u> <u>ongoing and completed operations, and shall further provide that such insurance is primary</u> <u>insurance to any insurance or self-insurance maintained by the County and that the insurance of</u> <u>the Additional Insureds shall not be called upon to contribute to a loss covered by the</u> <u>ATTORNEY's insurance. The required endorsement form for Commercial General Liability</u> <u>Additional Insured is ISO Form CG 20 10 11-85 or CG 20 10 10 01 in tandem with CG 20 37</u>

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

10 01 (2000). The required endorsement form for Automobile Additional Insured endorsement is ISO Form CA 20 48 02 99.

Prior to the execution of this Agreement by the County, ATTORNEY shall file certificates of insurance with the County's contract administrator and County's Contracts/Purchasing Division, showing that the ATTORNEY has in effect the insurance required by this Agreement. The ATTORNEY shall file a new or amended certificate of insurance within five calendar days after any change is made in any insurance policy, which would alter the information on the certificate then on file. Acceptance or approval of insurance shall in no way modify or change the indemnification clause in this Agreement, which shall continue in full force and effect.

ATTORNEY shall at all times during the term of this Agreement maintain in force the insurance coverage required under this Agreement and shall send, without demand by County, annual certificates to County's Contract Administrator and County's Contracts/Purchasing Division. If the certificate is not received by the expiration date, County shall notify ATTORNEY and ATTORNEY shall have five calendar days to send in the certificate, evidencing no lapse in coverage during the interim. Failure by ATTORNEY to maintain such insurance is a default of this Agreement which entitles County, at its sole discretion, to terminate this Agreement immediately.

IV. GENERAL PROVISIONS.

4.01. <u>Nonassignment</u>. ATTORNEY shall not assign or transfer this Agreement, or any part thereof, without the written consent of COUNTY, nor shall ATTORNEY assign any monies due or to become due to ATTORNEY hereunder without the previous written consent of COUNTY.

4.02. <u>Independent Contractor</u>. Nothing in this Agreement shall be construed or interpreted to make ATTORNEY anything but an independent contractor and in all ATTORNEY's activities and operations pursuant to this Agreement, ATTORNEY shall for no purposes be considered an employee or agent of COUNTY.

4.03. <u>Authority to Bind COUNTY</u>. It is understood that ATTORNEY, in the performance of any and all duties under this Agreement, has no authority to bind COUNTY to any agreements or undertakings with respect to any and all persons or entities with whom ATTORNEY deals in the course of business.

4.04. <u>Nondisclosure of Information</u>. ATTORNEY shall not disclose, without express written consent of COUNTY, any information relating to COUNTY business which has been submitted by COUNTY to ATTORNEY pursuant to the services to be rendered pursuant to this Agreement. In the event that this Agreement is terminated, ATTORNEY shall immediately return to COUNTY all papers, documents and the like belonging to COUNTY.

4.05. Notices.

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

(a) Notices permitted or required to be given to the respective parties under this Agreement shall be deemed given (1) when personally delivered to the Monterey County Counsel or to ATTORNEY's principal partner contact; (2) when personally delivered to the party's principal place of business during normal business hours (i.e., to the office of the Monterey County Counsel in Salinas, California, or to ATTORNEY's office), by leaving the notice with any person apparently in charge of the office and advising such person of the import and contents of the notice; (3) 24 hours after the notice is transmitted by fax machine to the other party, to the fax number indicated below; or (4) 3 days after the notice is deposited in the U.S. mail (by first class, certified, registered, or express mail), with postage fully prepaid, addressed to the party as indicated below.

(b) Notices mailed to the parties shall be addressed as follows:

To COUNTY:

Office of the County Counsel County of Monterey 168 West Alisal Street, Third Floor Salinas, California 93901 Phone Number: (831) 755-5045 Fax Number: (831) 755-5283

To RISK MANAGEMENT:

Risk Management County of Monterey 168 West Alisal Street, Third Floor Salinas, California 93901 Phone Number: (831) 755-5457 Fax Number: (831) 755-5459 Richard Jones Nixon Peabody LLP

To ATTORNEY:

555 West Fifth Street Los Angeles, California 90013 Phone Number: (213) 629-6000 Fax Number: (213) 629-6001

(c) The mailing addresses and fax numbers specified in paragraph (b) may be changed by either party, by giving notice to the other in the manner provided herein.

4.06. <u>Subcontracting</u>. ATTORNEY shall not subcontract or otherwise assign any portion of the work to be performed under this Agreement without prior written approval of COUNTY. Any and all subcontracts shall be subject to the provisions contained in this Agreement.

4.07. <u>Modifications</u>. This Agreement may be modified or amended only by written agreement of the parties. No waiver or modification of this Agreement or of any covenant, condition, or limitation herein contained shall be valid unless in writing and duly executed by the parties hereto.

4.08. <u>Nonwaiver</u>. No covenant or condition of this Agreement can be waived except by the written consent of COUNTY. Forbearance or indulgence by COUNTY in any regard

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

whatsoever shall not constitute a waiver of the covenant or condition to be performed by ATTORNEY. COUNTY shall be entitled to invoke any remedy available to COUNTY under this Agreement or by law or in equity despite said forbearance or indulgence.

4.09. <u>Sole Agreement</u>. This Agreement contains the entire agreement of the parties relating to the rights herein granted and the obligations herein assumed. Any oral representations or modifications concerning this Agreement shall be of no force or effect excepting a subsequent modification in writing, signed by the parties hereto.

4.10. <u>Venue</u>. If any party herein initiates an action to enforce the terms hereof or declare rights hereunder, the parties agree that venue thereof shall be the County of Monterey, State of California.

4.11. <u>Construed Pursuant to California Law</u>. The parties hereto agree that the provisions of this Agreement will be construed pursuant to the laws of the State of California.

4.12. <u>Exhibits</u>. The following exhibits are attached hereto:

Exhibit A - Scope of Services Exhibit B -Fees and Expenses

IN WITNESS WHEREOF, COUNTY and ATTORNEY have caused this Agreement to be executed:

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

OUNTY OF MONTERI CONTRACTOR By: JLP <u>body I</u> Contracts/Purchasing Officer s Business Name Cox 10-10-11 Date: By Signature of Chair, President, or Vice-President) By: Harry Weis, CEO Richard M. Jones, Partner Natividad Medical Center Name and Title Ę [19 (1) Date: Date Approved as to Form By: (Signature of Secretary, Asst. Secretary, CFO, By: Treasurer or Asst. Treasurer) Date Name and Title Date: Approved as to Fiscal By: Auditor/Contro Date: Approved as to Liability Provisions^a By: **Risk Management** Date:

*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 signature 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.

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2

Approval by County Counsel is required only if changes are made to the standard provisions of the PSA
 Approval by Auditor/Controller is required

^{*} Approval by Risk Management is required only if changes are made in paragraph 8 or 9

EXHIBIT A

SCOPE OF SERVICES

COUNTY retains CONTRACTOR to assist and advise the County of Monterey/Natividad Medical Center in all aspects of financing, including issues around a change in hospital structure, governance and relationship to the County. The assistance should include creative ideas to address existing financing as well as future financing. In addition, assistance in crafting related documents should be provided. Understanding that CONTRACTOR may have expertise in other areas of the law relevant to NMC, the parties may desire to expand the scope of these services on short notice. CONTRACTOR may work directly with NMC senior management and County Counsel and shall keep County Counsel fully advised of all activities and advice.

EXHIBIT B

FEES AND EXPENSES

COUNTY shall pay CONTRACTOR the fees and necessary expenses for services performed under this Agreement. The fees and expenses shall be calculated and charged in accordance with the hourly rates and expense method of billing identified below, which include a 10% government discount from CONTRACTOR's regular rates.

CONTRACTOR's hourly rates are as follows:

\$706.50
\$459.00
\$216.0 0
\$216.00

Travel: Actual expenses only

Lodging & Meals: Actual—Not to exceed County per diem without prior authorization.

COUNTY will not pay CONTRACTOR for travel time. COUNTY will reimburse ATTORNEY for actual expenses related to the travel in accordance with the above terms.

CONTRACTOR will bill monthly for work performed and costs advanced. CONTRACTOR will bill all overhead expenses, such as long distance telephone charges, facsimile transmission charges, photocopying and delivery expenses, as costs advanced.

Agreement for Specialized Legal Services Nixon Peabody LLP, Natividad Medical Center Project 13594663.2



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

	. .	116		DILI		JRANC			4/22/2014
THIS CERTIFICATE IS ISSUED AS A M CERTIFICATE DOES NOT AFFIRMATI BELOW. THIS CERTIFICATE OF INSU REPRESENTATIVE OR PRODUCER, AN	VEL	Y OR NCE	NEGATIVELY AMEND, DOES NOT CONSTITUT	EXTEN	ID OR ALTI	ER THE CO	VERAGE AFFORDED	BY TH	E POLICIES
IMPORTANT: If the certificate holder i the terms and conditions of the policy, certificate holder in lieu of such endors	s an cert	ADD ain p	DITIONAL INSURED, the olicies may require an er	policy(i ndorser	es) must be nent. A stat	endorsed. ement on th	If SUBROGATION IS V is certificate does not o	/AIVE onfer	D, subject to rights to the
PRODUCER John L. Wortham & Son, L	_	nus		CONTAC	τ		nam & Son, L.P.		
P. O. Box 1388	.г.			PHONE	_	13-526-3366	FAX		713-521-1951
Houston, TX 77251-1388				(A/C, No E-MAIL ADDRES	Ext): /	13-520-3300	(A/C, No):		/13-521-1951
				ADURES					NAIC #
				INSURF			ance Company - A++XV		20303
INSURED							ompany - A++XV		20281
Nixon Peabody LLP							urance Company - A++X	/	12777
1300 Clinton Square Rochester NY 14604				INSURE	RD:				
				INSURE	RE:				
				INSURE	RF:				
COVERAGES CER THIS IS TO CERTIFY THAT THE POLICIES			NUMBER: 19909493				REVISION NUMBER:		•
A COMMERCIAL GENERAL LIABILITY	POLI	AIN,	THE INSURANCE AFFORD	ED BY " BEEN R	THE POLICIE	S DESCRIBE	D HEREIN IS SUBJECT T LIMI EACH OCCURRENCE DAMAGE TO RENTED	O ALL	. THE TERMS, 1,000,000
CLAIMS-MADE 🖌 OCCUR							PREMISES (Ea occurrence)	\$	1,000,000
							MED EXP (Any one person)	\$	1,000,000
							PERSONAL & ADV INJURY GENERAL AGGREGATE	\$ \$	2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	Included
OTHER:							Policy Aggregate	\$	10,000,000
			73559103		10/1/2013	10/1/2014	COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
							BODILY INJURY (Per person)	\$.,
ALLOWNED SCHEDULED							BODILY INJURY (Per accident)	\$	
AUTOS AUTOS HIRED AUTOS AUTOS AUTOS							PROPERTY DAMAGE (Per accident)	\$ \$	
UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
DED RETENTION \$								\$	
B WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			71740168 - CA		10/1/2013	10/1/2014	✓ PER OTH- STATUTE ER		
	N / A		71740219 - Other States		9/3/2013	10/1/2014	E.L. EACH ACCIDENT	\$	1,000,000
(Mandatory in NH)							E.L. DISEASE - EA EMPLOYER	\$	1,000,000
If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICL County of Monterey, its officers, agents and Liability and 16-02-0252 for Auto Liability.	lem	ploye	es are afforded Additional	Insured	status per th	e attached ei	ndorsements 80-02-2367	for Ge	eneral
CERTIFICATE HOLDER				CANC	ELLATION				
Office of the County Counsel County of Monterey 168 West Alisal Street, Third Floo	r			THE	EXPIRATION	DATE TH	ESCRIBED POLICIES BE C EREOF, NOTICE WILL CY PROVISIONS.		
Salinas CA 93901					NZED REPRESE	Son, L.P.	Thn L. Wort		
ACORD 25 (2014/01) ERT NO.: 19909493 CLIENT CODE: 10NIXONPEA1			CORD name and logo ar	-	tered marks	s of ACORE	ORD CORPORATION.	All ri	gnts reserved.

ENDORSEMENT

Named Insured NIXON PEABODY LLP

12 SON ... T., P. Agent I

Agent Name JOHN L WORTHAM & SON, L.P.

Effective Date: 12:01 A.M., Standard Time Agent No. 19931-999

BLANKET ADDITIONAL INSURED

ADDITIONAL INSURED

IT IS AGREED THE WHO IS INSURED PROVISION IS AMENDED TO INCLUDE THE FOLLOWING:

D. ANYONE TO WHOM THE NAMED INSURED IS REQUIRED BY WRITTEN CONTRACT TO PROVIDE ADDITIONAL INSURED COVERAGE, PROVIDED THAT THE CONTRACT WAS SIGNED PRIOR TO AN OCCURRENCE, BUT ONLY WITH RESPECT TO YOUR USE OF A COVERED "AUTO" YOU OWN, HIRE OR BORROW.

16-02-0252 (Ed. 1-01)

Policy Conditions

Endorsement

Policy Period	
Effective Date	
Policy Number	3583-82-19 HOU
Insured	NIXON PEABODY LLP
Name of Company	GREAT NORTHERN INSURANCE COMPANY
Date Issued	

This Endorsement applies to the following forms:

COMMON POLICY CONDITIONS

Conditions

Notice Of Cancellation To Scheduled Persons Or Organizations When We Cancel Under Conditions, the following condition is added.

When we cancel this policy for any reason, other than non-payment of premium, we will notify person(s) or organization(s) shown in the Schedule at least 30 days in advance of the cancellation date.

Any failure by us to notify such person(s) or organization(s) will not:

- impose any liability or obligation of any kind upon us; or
- invalidate such cancellation.

Schedule

If you are obligated, pursuant to a written contract or agreement, to provide person(s) or organization(s) with notice of cancellation, then we will notify such person(s) or organization(s) provided that within 15 days of the date we send notice of cancellation to the first named insured, the first named insured or producer of record provides us with a spreadsheet containing the name, mailing address and, if available, e-mail address of the person(s) or organization(s).

All other terms and conditions remain unchanged.

Policy Conditions

Notice Of Cancellation To Scheduled Persons Or Organizations (Except Non-Payment Of Premium) continued

Form 80-02-9779 (Ed. 3-11) End

Conditions (continued)

Authorized Representative

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Policy Conditions

Notice Of Cancellation To Scheduled Persons Or Organizations (Except Non-Payment Of Premium)

last page

Form 80-02-9779 (Ed. 3-11)

Endorsement

Page 2



Liability Insurance

Endorsement

Policy Period	
Effective Date	
Policy Number	3583-82-19 HOU
Insured	NIXON PEABODY LLP
Name of Company	GREAT NORTHERN INSURANCE COMPANY
Date Issued	

This Endorsement applies to the following forms:

GENERAL LIABILITY

Under Who Is An Insured, the following provision is added:

Who Is An Insured

Designated Person Or Any person or organization designated below is an **insured**; but they are **insureds** only with respect to liability arising out of your operations or premises owned by or rented to you.

Designated Person Or Organization

ALL ORGANIZATIONS TO WHOM YOU ARE REQUIRED BY WRITTEN CONTRACT, SIGNED PRIOR TO LOSS, TO WHICH THIS ENDORSEMENT APPLIED.

COUNTY OF MONTEREY OFFICE OF THE COUNTY COUNSEL 168 WEST ALISAL STREET, THIRD FLOOR SALINA, CA 93901

Liability Insurance

Additional Insured - Designated Person Or Organization

continued

Form 80-02-2367 (Rev. 4-01)

Endorsement

Page 1

Liability Endorsement (continued)

All other terms and conditions remain unchanged.

Authorized Representative

Poll 2

Liability Insurance

Additional Insured - Designated Person Or Organization

last page Page 2

Form 80-02-2367 (Rev. 4-01)

Endorsement

CERT NO.: 19909493 CLIENT CODE: 10NIXONPEA1 (HOU) Michele Thibodeaux 4/22/2014 7:54:33 AM Page 6 of 8

Liability Insurance

Endorsement

Policy Period	
Effective Date	
Policy Number	3583-82-19 HOU
Insured	NIXON PEABODY LLP
Name of Company	GREAT NORTHERN INSURANCE COMPANY
Date issued	

This Endorsement applies to the following forms:

GENERAL LIABILITY EMPLOYEE BENEFITS ERRORS OR OMISSIONS STOP GAP STOP GAP - OHIO

and a straight work a set the second

Under Conditions, the following provision is added to the condition titled Other Insurance.

Conditions

Other Insurance -Primary, Noncontributory Insurance - Scheduled Person Or Organization If you are obligated, pursuant to a written contract or agreement, to provide the person or organization described in the Schedule (that is also included in the Who Is An Insured section of this contract) with primary insurance such as is afforded by this policy, then this insurance is primary and we will not seek contribution from insurance available to such person or organization.

and a start of the second second and the second second second second second second second second second second

Conditions - Other Insurance - Primary, Noncontributory insurance - Scheduled Person Or Organization continued

Schedule

PERSONS OR ORGANIZATIONS DESCRIBED IN THE WHO IS INSURED SECTION OF THIS CONTRACT AND THAT YOU ARE OBLIGATED, PURSUANT TO A WRITTEN CONTRACT OR AGREEMENT, TO PROVIDE WITH PRIMARY INSURANCE AS IS AFFORDED BY THIS POLICY, BUT ONLY TO THE MINIMUM EXTENT REQUIRED BY SUCH CONTRACT AGREEMENT. COUNTY OF MONTEREY OFFICE OF THE COUNTY COUNSEL 168 WEST ALISAL STREET, THIRD FLOOR SALINA, CA 93901

Liability Insurance

Form 80-02-2653 (Rev. 7-09)

Endorsement

Page 1

Liability Endorsement (continued)

All other terms and conditions remain unchanged.

Authorized Representative

Pattia

Liability Insurance

Form 80-02-2653 (Rev. 7-09)

Endorsement

Conditions - Other Insurance - Primary, Noncontributory Insurance - Scheduled Person Or Organization last page Page 2



December 30, 2013

Nixon Peabody LLP 1300 Clinton Square Rochester, NY 14604

To Whom It May Concern:

CONFIRMATION OF INSURANCE

We hereby confirm that Nixon Peabody LLP has Professional Liability Coverage under Policy ALA#1039 with an annual limit of \$75,000,000 per claim and \$150,000,000 in the aggregate with the right, under stated conditions, to purchase extended reporting rights upon termination of such Policy by ALAS.

The self-insured retention under such Policy is \$1,500,000 each claim up to an aggregate of \$3,000,000 and \$100,000 each claim thereafter.

The Policy effective date is from January 1, 2014 to January 1, 2015.

Such Policy is subject to the terms, conditions, limitations and exclusions stated therein.

ATTORNEYS' LIABILITY ASSURANCE SOCIETY, INC., A RISK RETENTION GROUP

By:

Date: 12/30/13

Joseph R. Suster Assistant Director of Underwriting

Withholding Exemption Certificate

CALIFORNIA FORM

(This form can only be used to certify exemption from nonresident withholding under California R&TC Section 18662. This form cannot be used for exemption from wage withholding.)

Plie this form with your withholding agent. (Please type or print)		with folding agents h	anc		
Vendor/Payee's name			Social security number California corp. no.	FEIN	Note: Failure to furnish your
Nixon Peabody LLP		16-0764720			identification number will make this certificate void.
Vendor/Payee's address (number and street)		АРТ по.	Private Mailbox no.	Vendor/Pay	ee's daytime telephone no.
555 West Fifth Street, 46th Fl				(213)	629-6000
^{City} Los Angeles	State CA	ZIP Code 90013-10	>10		

I certify that for the reasons checked below, the entity or individual named on this form is exempt from the California income tax withholding requirement on payment(s) made to the entity or individual. Read the following carefully and check the box that applies to the vendor/payee:

□ Individuals — Certification of Residency:

I am a resident of California and I reside at the address shown above. If I become a nonresident at any time, I will promptly inform the withholding agent. See instructions for Form 590, General Information D, for the definition of a resident.

Corporations:

The above-named corporation has a permanent place of business in California at the address shown above or is qualified through the California Secretary of State to do business in California. The corporation will withhold on payments of California source income to nonresidents when required. If this corporation ceases to have a permanent place of business in California or ceases to be qualified to do business in California, I will promptly inform the withholding agent. See instructions for Form 590, General Information E, for the definition of permanent place of business.

Partnerships:

The above-named partnership has a permanent place of business in California at the address shown above or is registered with the California Secretary of State, and is subject to the laws of California. The partnership will file a California tax return and will withhold on foreign and domestic nonresident partners when required. If the partnership ceases to do any of the above, I will promptly inform the withholding agent. **Note:** For withholding purposes, a Limited Liability Partnership is treated like any other partnership.

□ Limited Liability Companies (LLC):

The above-named LLC has a permanent place of business in California at the address shown above or is registered with the California Secretary of State, and is subject to the laws of California. The LLC will file a California tax return and will withhold on foreign and domestic nonresident members when required. If the LLC ceases to do any of the above, I will promptly inform the withholding agent.

Tax-Exempt Entities:

The above-named entity is exempt from tax under California or federal law. The tax-exempt entity will withhold on payments of California source income to nonresidents when required. If this entity ceases to be exempt from tax, I will promptly inform the withholding agent.

□ Insurance Companies, IRAs, or Qualified Pension/Profit Sharing Plans:

The above-named entity is an insurance company, IRA, or a federally qualified pension or profit-sharing plan.

California Irrevocable Trusts:

At least one trustee of the above-named irrevocable trust is a California resident. The trust will file a California fiduciary tax return and will withhold on foreign and domestic nonresident beneficiaries when required. If the trustee becomes a nonresident at any time, I will promptly inform the withholding agent.

Estates — Certification of Residency of Deceased Person:

I am the executor of the above-named person's estate. The decedent was a California resident at the time of death. The estate will file a California fiduciary tax return and will withhold on foreign and domestic nonresident beneficiaries when required.

CERTIFICATE: Please complete and sign below.

Under penalties of perjury, I hereby certify that the information provided herein is, to the best of my knowledge, true and correct. If conditions change, I will promptly inform the withholding agent.

Vendor/Payee's name and title (type or print) Stephen B. Mullen, Director of Tax & Compliance
Vendor/Payee's signature
Date 1/3/2014
Date 1/3/2014

For Privacy Act Notice, get form FTB 1131 (individuals only	For	Privacy	Act Notice,	get form	FTB 1	131	(individuals	only).
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Form 590 C2 (REV. 2003)

YEAR

	when doing business with the County of Monterey - No IRS	(
1	Natividad Medical Center Contracts Department 1441 Constitution Blvd Salinas, CA. 93906 EMAIL TO: catosl@natividad.com	PURPOSE: Information contained in this form will be used by the County of Monterey to prepare information returns (Form 109 and for withholding on payments to nonresident vendors. Prome return of this fully completed form will prevent delays whe
RETURN		processing payments.
TO:	PHONE: 831.783.2620 FAX: 831.757.2592	See Privacy Statement and California Non-Resident Withholding Information on next page.
	VENDOR'S LEGAL NAME (as shown on your income tax return)	SELECT NAME TO BE MADE PAYABLE TO
2	Nixon Peabody LLP	🖌 Legal Name 🔄 Alias/DBA 🔄 Both
	BUSINESS NAME / DBA (if different from line 1)	PHONE NUMBER FAX NUMBER
NAME		(213) 629-6000 (213) 629-600
AND ADDRESS	MAILING ADDRESS	E-MAIL ADDRESS
ADDRESS	Gas Company Tower	rjones@nixonpeabody.com
	ADDITIONAL MAILING ADDRESS	REMIT-TO ADDRESS
	555 W. 5th St., 46th Floor	P.O. Box 28012
	CITY, STATE, ZIP CODE	REMIT-TO CITY, STATE, ZIP CODE
	Los Angeles, CA 90013	New York, NY 10087-8012
3	FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN):	16-0764720 For Tax ID entry instructions,
		TRUST/ESTATE please see next
TAX ID		
AND	PARTNERSHIP	C Corporation NOTE:
BUSINESS ENTITY	EXEMPT PAYEE (e.g., government, non-profit)	Partnership be processed
TYPE	OTHER: >	without an accompanying
	SOCIAL SECURITY NUMBER (SSN):	taxpayer I.D. number.
		number.
4	INDIVIDUAL OR SOLE PROPRIETOR	
4		
PAYMENT	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT	
	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT Image: Supplies of the call boxes of t	EGORY OF PAYMENT:
PAYMENT	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT SUPPLIES/EQUIPMENT SERVICES (MEDICAL)	EGORY OF PAYMENT:
PAYMENT TYPE &	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT Image: Artorney services services (Medical) Image: Legal settlement services (NON-MEDICAL) RENT/LEASE	EGORY OF PAYMENT:
PAYMENT TYPE & ACTIVITY	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT Image: Artorney Services SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey?	EGORY OF PAYMENT: □ INTEREST □ GRANTS □ OTHER: ► □ Yes ♥ No ♥ No (See Information regarding green certification on next page)
PAYMENT TYPE &	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT Image: Attorney Services SERVICES (MEDICAL) Image: LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ► Yes ✓ No ✓ No (See Information regarding green certification on next page): CA Form 590 required if
PAYMENT TYPE & ACTIVITY 5	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT Image: Attorney Services SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in Image: California Resident	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes No (See Information regarding green certification on next page) Information on next page): CA Form 590 required if your address above in
PAYMENT TYPE & ACTIVITY	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT Image: Attorney Services SERVICES (MEDICAL) Image: LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes No (See Information regarding green certification on next page) Information on next page): CA Form 590 required if your address above in
PAYMENT TYPE & ACTIVITY 5 VENDOR	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT Image: Attorney Services SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in Image: California Resident	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes Yes No (See Information regarding green certification on next page) Information on next page): CA Form 590 required if your address above in section 2 is a non-CA
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in California Resident California Form 590 (Withholding Exemption Certificat)	TEGORY OF PAYMENT: □ INTEREST □ GRANTS □ OTHER: ▶ □ Yes ♥ No ♥ No (See Information regarding green certification on next page) Information on next page): CA Form 590 required if your address above in section 2 is a non-CA address Tax Board attached
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY STATUS	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in California Resident California Non-Resident Waiver of State withholding from California Franchise	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes Yes No (See Information regarding green certification on next page) nformation on next page): CA Form 590 required if your address above in section 2 is a non-CA address Tax Board attached Tax Board attached CA NON-RESIDENTS: 7% will be withheld from
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY STATUS FOR CA TAX	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in California Resident California Form 590 (Withholding Exemption Certificat)	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes Yes No (See Information regarding green certification on next page) nformation on next page): CA Form 590 required if your address above in section 2 is a non-CA address Tax Board attached te) attached CA NON-RESIDENTS: 7% will be withheld from payment unless one of the
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY STATUS FOR CA TAX	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in ✓ California Resident ✓ California Form 590 (Withholding Exemption Certificat) California Non-Resident Waiver of State withholding from California Franchise California Form 590 (Withholding Exemption Certificat)	Tegory OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes Yes No (See Information regarding green certification on next page) nformation on next page): CA Form 590 required if your address above in section 2 is a non-CA address Tax Board attached DE of California
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY STATUS FOR CA TAX	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in California Resident California Form 590 (Withholding Exemption Certificat) California Form 590 (Withholding Exemption Certificat) All services for payments issued are performed OUTSI No Services are being rendered, only goods are being	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes Yes No (See Information regarding green certification on next page) Information on next page): CA Form 590 required if your address above in section 2 is a non-CA address te) attached DE of California provided for payment provided on this document is true and correct. Should my residem
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY STATUS FOR CA TAX PURPOSES	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in California Resident California Form 590 (Withholding Exemption Certificat California Form 590 (Withholding Exemption Certificat All services for payments issued are performed OUTSI No Services are being rendered, only goods are being I hereby certify under penalty of perjury that the information status change, I will promptly notify the County of Monterey.	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes Yes No (See Information regarding green certification on next page) Information on next page): CA Form 590 required if your address above in section 2 is a non-CA address te) attached DE of California provided for payment Information on this document is true and correct. Should my residen
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY STATUS FOR CA TAX PURPOSES 6 CERTIFYING	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in California Resident California Form 590 (Withholding Exemption Certificat California Form 590 (Withholding Exemption Certificat All services for payments issued are performed OUTSI No Services are being rendered, only goods are being I hereby certify under penalty of perjury that the information status change, I will promptly notify the County of Monterey.	EGORY OF PAYMENT: INTEREST GRANTS OTHER: ▶ Yes Yes No (See Information regarding green certification on next page) Information on next page): CA Form 590 required if your address above in section 2 is a non-CA address te) attached DE of California provided for payment provided on this document is true and correct. Should my resident
PAYMENT TYPE & ACTIVITY 5 VENDOR RESIDENCY STATUS FOR CA TAX PURPOSES	PLEASE CHECK ALL BOXES THAT ARE APPLICABLE TO THE CAT SUPPLIES/EQUIPMENT ✓ ATTORNEY SERVICES SERVICES (MEDICAL) LEGAL SETTLEMENT SERVICES (NON-MEDICAL) RENT/LEASE Are you a former employee of the County of Monterey? Are you a Certified Green Business? Yes CALIFORNIA STATE WITHHOLDING STATUS (CA withholding in ✓ California Resident ✓ California Form 590 (Withholding Exemption Certificat) California Form 590 (Withholding Exemption Certificat) California Form 590 (Withholding Exemption Certificat) Maiver of State withholding from California Franchise California Form 590 (Withholding Exemption Certificat) No Services are being rendered, only goods are being I hereby certify under penalty of perjury that the information status change, I will promptly notify the County of Monterey. Authorized Representative's Name (Type or Print) Title Signature Dones Pate	regory of payment: □ INTEREST □ GRANTS □ OTHER: ▶ □ Yes ✓ No ✓ No (See Information regarding green certification on next page) nformation on next page): CA Form 590 required if your address above in section 2 is a non-CA address te) attached CA NON-RESIDENTS: 7% will be withheld from payment unless one of the lower four boxes on left is checked. Tax Board attached CA NON-RESIDENTS: 7% will be withheld from payment unless one of the lower four boxes on left is checked. artner artner