

**CONTRACT EXTENSION AGREEMENT**  
**(Purchase of Services - Long Form)**

Number 49618  
Fund/Org# 7517  
Account #  
Other # 6W7264

1. **Identification of Contract to be Extended.**

Number: 49618  
Effective Date: April 17, 2007  
Department: Public Works  
Subject: Contra Costa County Marina Grant Program, Phase II Implementation

2. **Parties.** The County of Contra Costa, California (County), for its Department named above, and the following named Contractor mutually agree and promise as follows:

Contractor: **Tonya Redfield**  
Capacity: Self-employed Individual  
Address: 282 Moulton Street, San Francisco, CA 94123

3. **Extension of Term.** The termination date of the above described contract is hereby extended from September 1, 2009 to the new termination date of April 30, 2010, unless sooner terminated as provided in said contract.   
~~EXCEPT FOR THE EXTENSION OF THE DURATION OF CONTRACT # 49618 PROVIDED HEREIN, ALL OTHER PROVISIONS OF CONTRACT # 49618 REMAIN IN FULL FORCE AND EFFECT.~~


4. **Payment Limit.** The maximum amount payable by the County under this Contract is unchanged. *DT*

5. **Signatures.** These signatures attest the parties' agreement hereto:

**COUNTY OF CONTRA COSTA, CALIFORNIA**

BOARD OF SUPERVISORS	ATTEST: Clerk of the Board of Supervisors
By _____ Chairman/Designee	By _____ Deputy

**CONTRACTOR**

Name of business entity:	Name of business entity:
By  (Signature of individual or officer)	By _____ (Signature of individual or officer)
<u>Tonya Redfield</u> (Print name and title A, if applicable)	_____ (Print name and title B, if applicable)

Note to Contractor: For Corporations (profit or nonprofit), the contract must be signed by two officers. Signature A must be that of the president or vice-president and Signature B must be that of the secretary or assistant secretary (Civil Code Section 1190 and Corporations Code Section 313). All signatures must be acknowledged as set forth on Form L-2.

State of California )  
County of SAN FRANCISCO )

## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

On 12/7/2009 before me, Robert Clark - Notary Public,  
(here insert name and title of the officer)

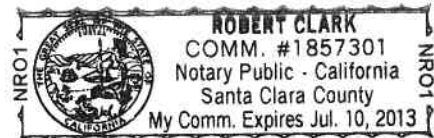
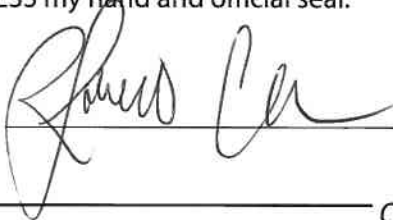
personally appeared TONYA Michelle Redfield

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature



(Seal)

### OPTIONAL INFORMATION

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

### Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of CONTRACT EXTENSION  
Agreement  
containing 1 pages, and dated 12/7/2009.

The signer(s) capacity or authority is/are as:

- ☐ Individual(s)  
☐ Attorney-in-Fact  
☐ Corporate Officer(s) \_\_\_\_\_ Title(s) \_\_\_\_\_

- ☐ Guardian/Conservator  
☐ Partner - Limited/General  
☐ Trustee(s)  
☐ Other: \_\_\_\_\_

representing: \_\_\_\_\_  
Name(s) of Person(s) or Entity(ies) Signer is Representing

### Additional Information

#### Method of Signer Identification

Proved to me on the basis of satisfactory evidence:  
☒ form(s) of identification ☐ credible witness(es)

Notarial event is detailed in notary journal on:  
Page # \_\_\_\_\_ Entry # \_\_\_\_\_

Notary contact: \_\_\_\_\_

#### Other

☐ Additional Signer(s) ☐ Signer(s) Thumbprint(s)

☐ \_\_\_\_\_

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BOARD OF SUPERVISORS	ATTEST: Clerk of the Board of Supervisors
By _____ Chairman/Designee	By _____ Deputy

**CONTRACTOR**

Name of business entity:	Name of business entity:
By <u><i>Tonya Redfield</i></u> (Signature of individual or officer)	By _____ (Signature of individual or officer)
<u>Tonya Redfield</u> (Print name and title A, if applicable)	_____ (Print name and title B, if applicable)

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State of California )  
County of SAN FRANCISCO )

## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

On 12/7/2009 before me, ROBERT CLARK - NOTARY PUBLIC,  
(here insert name and title of the officer)

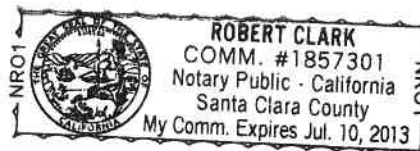
personally appeared TUNYA MICHELLE REDFIELD

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature



(Seal)

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- ☐ Guardian/Conservator  
☐ Partner - Limited/General  
☐ Trustee(s)  
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representing: \_\_\_\_\_  
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Page # \_\_\_\_\_ Entry # \_\_\_\_\_

Notary contact: \_\_\_\_\_

##### Other

☐ Additional Signer(s) ☐ Signer(s) Thumbprint(s)

☐

**ACKNOWLEDGMENT**

STATE OF CALIFORNIA                    )  
  )  
COUNTY OF CONTRA COSTA        )

On \_\_\_\_\_, before me, \_\_\_\_\_  
(insert name and title of the officer), personally appeared \_\_\_\_\_

\_\_\_\_\_ who proved to me on the basis of satisfactory  
evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me  
that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s)  
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true and correct.

WITNESS MY HAND AND OFFICIAL SEAL.

\_\_\_\_\_  
Signature

(Seal)

ACKNOWLEDGMENT (by Corporation, Partnership, or Individual)  
(Civil Code §1189)

**APPROVALS**

RECOMMENDED BY DEPARTMENT

FORM APPROVED  
COUNTY COUNSEL

By:   
Designee

By:   
Deputy County Counsel

APPROVED: COUNTY ADMINISTRATOR

By: \_\_\_\_\_  
Designee

**ACKNOWLEDGMENT**

STATE OF CALIFORNIA )

COUNTY OF CONTRA COSTA )

On \_\_\_\_\_, before me, \_\_\_\_\_  
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Signature

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**APPROVALS**

RECOMMENDED BY DEPARTMENT

FORM APPROVED  
COUNTY COUNSEL

By: \_\_\_\_\_

Designee

By: \_\_\_\_\_

Deputy County Counsel

APPROVED: COUNTY ADMINISTRATOR

By: \_\_\_\_\_

Designee