Contra Costa County Standard Form L-2 Revised 2014.2

# ACKNOWLEDGMENT/APPROVALS (Purchase of Services – Long Form)

Number:

### ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

| STATE OF CALIFORNIA                        | )                        |   |      |
|--|--------------------------|---|------|
| COUNTY OF CONTRA COSTA                     | )                        |   |      |
| On   | (Date),                  |   |      |
| before me,                                 |                          | (Name and Title of the Offic  | er), |
| personally appeared,                       |                          |   | ,    |
| instrument and acknowledged to me tha      | t he/she/they executed   | e the person(s) whose name(s) is/are subscribed to the will the same in his/her/their authorized capacity(ies), and that the entity upon behalf of which the person(s) acted, executive the person of | t by |
| I certify under PENALTY OF PERJUR correct. | CY under the laws of the | he State of California that the foregoing paragraph is true   | and  |
| WITNESS MY HAND AND O                      | OFFICIAL SEAL.           |   |      |
| Signature of Notary Public                 |                          |   |      |
|  |                          | Place Seal Above  |      |
| ACK  | NOWLEDGMENT (by Corpo    | oration, Partnership, or Individual)  |      |
|  | (Civil Cod               |   |      |
| ,  |                          |   |      |
|  | APPRO                    | OVALS   |      |
| RECOMMENDED BY DEPARTME                    | NT                       | FORM APPROVED BY COUNTY COUNS   | EL   |
| By:  |                          | By: Deputy County Counsel   |      |
| AI   | PPROVED: COUNT           | Y ADMINISTRATOR   |      |
|  | By:                      | gnee  |      |

Contra Costa County Standard Form L-7 Revised 2014

## CONTRACT AMENDMENT AGREEMENT (Purchase of Services – Long Form)

Number: Fund/Org: Account: Other:

| l. | Identification of | f Contract | to | be | Amended. |
|----|-------------------|------------|----|----|----------|
|    |                   |            | _  |    |          |

Number:

F4651200

Effective Date:

April 1, 2018

Department:

Public Works

Subject:

On-Call Grazing Services

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

Contractor:

Terri Oyarzun d/b/a Goats R Us

Capacity:

Sole Proprietor

Address:

- P.O. Box 37 Orinda, CA 94563 or 1215 Garcia Ranch Road, Briones, CA 95443
- 3. Amendment Date. The effective date of this Contract Amendment Agreement is April 1, 2020.
- 4. <u>Amendment Specifications</u>. The Contract identified above is hereby amended as set forth in the "Amendment Specifications" attached hereto which are incorporated herein by reference.
- 5. <u>Signatures</u>. These signatures attest the parties' agreement hereto:

### **COUNTY OF CONTRA COSTA, CALIFORNIA**

| BOARD OF SUPERVISORS | ATTEST: Clerk of the Board of Supervisors |  |  |  |  |
|----------------------|---|--|--|--|--|
|                      |   |  |  |  |  |
| By:                  | By:                                       |  |  |  |  |
| Chair/Designee       | Deputy                                    |  |  |  |  |
| CONTRACTOR           |   |  |  |  |  |

# Signature A Name of business entity: Terri Oyarzun d/b/a Goats R Us, a Sole Proprietor By: (Signature of individual or officer) By: (Print name and title A, if applicable) Signature B Name of business entity: Terri Oyarzun d/b/a Goats R Us, a Sole Proprietor By: (Signature of individual or officer) (Print name and title B, if applicable)

Note to Contractor: For corporations (profit or nonprofit) and limited liability companies, the contract must be signed by two officers. Signature A must be that of the chairman of the board, president, or vice-president; and Signature B must be that of the secretary, any assistant secretary, chief financial officer or any assistant treasurer (Civil Code Section 1190 and Corporations Code Section 313). All signatures must be acknowledged as set forth on Form L-2.

### **AMENDMENT SPECIFICATIONS**

Amendment No. 1

Terri Oyarzun d/b/a Goats R Us (April 1, 2018 – March 31, 2021)

Due to County's need for greater than anticipated Contractor services, and for good and valuable consideration, County and Contractor hereby amend the Contract as follows:

- 1. The Address in Section 2 (Parties) of the Contract is hereby amended by deleting it in its entirety and replacing it with the following: "P.O. Box 37 Orinda, CA 94563 or 1215 Garcia Ranch Road, Briones, CA 95443"
- 2. Section 4 (Payment Limit) of the Contract is hereby amended by increasing the payment limit by \$250,000 from \$400,000 to a new Payment Limit of \$650,000.

All other terms and conditions referenced in the original Contract entered into on April 1, 2018 between County and Contractor, not modified by this Amendment No. 1, shall remain in full force and effect.

| Initials: |            |              |
|-----------|------------|--------------|
|           | Contractor | County Dept. |