

**FIRST AMENDMENT
TO PROFESSIONAL SERVICES AGREEMENT NUMBER F001315
WITH ACCELERATED TECHNOLOGIES LABORATORIES, INC.**

This First Amendment to Agreement number F001315, dated December 16, 2016 ("Agreement") is made as of this _____ day of _____, 2021, by and between the City of Santa Rosa, a municipal corporation ("City"), and Accelerated Technology Laboratories, Inc., a North Carolina Corporation ("Consultant").

RECITALS

- A. City and Consultant entered into the Agreement for Consultant to receive ATL Gold Support and TITAN iMobile Support which includes Laboratory Information Management System (LIMS) account manager, unlimited technical support via a toll-free number, programming support (two hours included at no charge), dial-in remote support, access to web site user support area, software service packs, product upgrades, migration credit and LIMS Solutions Newsletter
- B. City and Consultant now desire to amend the Agreement for the purpose of including LIMS web training, customizations, extending the time of performance and increasing compensation for the Laguna Environmental Laboratory's software that supports the gathering, storing, and report writing for all of the Lab's data. This is a necessary service to support the ongoing needs of the lab and data.

AMENDMENT

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

1. Section 2. Compensation

Section 2(c) is amended to increase the compensation payable to Consultant under the Agreement by \$ 96,568.20 to read as follows:

"Notwithstanding any other provision in this Agreement to the contrary, the total maximum compensation to be paid for the satisfactory accomplishment and completion of all tasks set forth above shall in no event exceed the sum of "one-hundred ninety six-thousand, one-hundred sixty eight dollars and twenty cents (\$196,168.20)". The City's Chief Financial Officer is authorized to pay all proper claims from Charge Number 130806-5320."

2. Section 12. Time of Performance

The last sentence of Section 12 is amended to read as follows:

"Consultant shall complete all the required services and tasks and complete and tender all deliverables to the reasonable satisfaction of City, not later than February 11, 2025."

3. COUNTERPARTS AND ELECTRONIC SIGNATURES

This Agreement and future documents relating thereto may be executed in two or more counterparts, each of which will be deemed an original and all of which together constitute one Agreement. Counterparts and/or signatures delivered by facsimile, pdf or City-approved electronic means have the same force and effect as the use of a manual signature. Both City and Consultant wish to permit this Agreement and future documents relating thereto to be electronically signed in accordance with applicable federal and California law. Either Party to this Agreement may revoke its permission to use electronic signatures at any time for future documents by providing notice pursuant to the Agreement. The Parties agree that electronic signatures, by their respective signatories are intended to authenticate such signatures and to give rise to a valid, enforceable, and fully effective Agreement. The City reserves the right to reject any signature that cannot be positively verified by the City as an authentic electronic signature.

All other terms of the Agreement shall remain in full force and effect.

Executed as of the day and year first above stated.

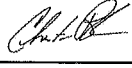
CONSULTANT:

Name of Firm: Accelerated Technologies Laboratory, Inc.

TYPE OF BUSINESS ENTITY (check one):


- Individual/Sole Proprietor
- Partnership
- Corporation
- Limited Liability Company
- Other (please specify: _____)

Signatures of Authorized Persons:

By: 

Print Name: Christine Paszko

Title: Vice President

By: 

Print Name: Kim Waters

Title: Secretary



568

City of Santa Rosa Business Tax Cert. No.

ROYWSS21

CITY OF SANTA ROSA
a Municipal Corporation


By: _____

Print Name: _____

Board of Public Utilities

Title: _____

APPROVED AS TO FORM:


Jessica Mullan (Oct 5, 2021 09:51 PDT)
Office of the City Attorney

ATTEST:

Recording Secretary



496 Holly Grove School Road
West End, NC 27376
(800) 565-LIMS (5467)
www.atlab.com

Quotation

Name / Address
City of Santa Rosa Attn: Robert Wilson 4300 Liano Road Santa Rosa, CA 95407

Date	Quotation #
7/21/2021	18635

P.O. No.	Phone #	Fax #
	910-673-8165	910-673-8166

Description	Qty	Cost	Total
YEAR 7 through 9 ATL Gold Support (1 year from Anniversary Date) - Includes LIMS account manager, Unlimited Technical Support via a toll-free number, Dial-In Remote Support, Access to Web Site User Support Area, Software Service Packs, Product Upgrades, Migration Credit and LIMS Solutions Newsletter Support Period: 2/11/22 through 2/11/25 (3 years)	3	15,300.00	45,900.00
YEAR 7 through 9 iMobile Support (1 year from Anniversary Date) Includes Unlimited Technical Support via a toll-free number, Dial-in Remote Support, Access to Web Site User Support Area, Software Service Packs and Product Upgrades Support Period: 2/11/22 through 2/11/25 (3 years)	3	720.00	2,160.00
Special 3 Year Support Discount (5%)		-1,441.80	-1,441.80
Remote TITAN® LIMS Web Training : 60 hours Note: 20 hours of training annually, over a 3 year time period	60	225.00	13,500.00
Off-site Customizations TBD: 54 hours Note: 4-6 customizations annually, over a 3 year time period	54	225.00	12,150.00
Please Note: ATL Engineers will work with client to create a Requirements Document that will clearly define the specifications of each customization, for client review and signoff prior to any initiation of work (Includes Requirements Document, Creation, QA/QC, documentation and installation). Upon completion of the Requirements Document process and client approval an exact cost will be provided			
This Quote shall be valid for 60 days			
Total			
Sales Tax (0.0%)			
TOTAL			

Prices Quoted are in USD - Client is responsible for any local taxes or fees

Questions, contact me at tmclean@atlab.com

Thomas A. McLean
Accounts Manager
Accelerated Technology Laboratories, Inc.



**Accelerated
Technology**
LABORATORIES INC.

496 Holly Grove School Road
West End, NC 27376
(800) 565-LIMS (5467)
www.atlab.com

Quotation

Name / Address
City of Santa Rosa Attn: Robert Wilson 4300 Llano Road Santa Rosa, CA 95407

Date	Quotation #
7/21/2021	18635

P.O. No.	Phone #	Fax #
	910-673-8165	910-673-8166

Description	Qty	Cost	Total
Off-site Customizations TBD: 54 hours Note: 4-6 customizations annually, over a 3 year time period Please Note: ATL Engineers will work with client to create a Requirements Document that will clearly define the specifications of each customization, for client review and signoff prior to any initiation of work (Includes Requirements Document, Creation, QA/QC, documentation and installation). Upon completion of the Requirements Document process and client approval an exact cost will be provided	54	225.00	12,150.00
Off-site Customizations TBD: 54 hours Note: 4-6 customizations annually, over a 3 year time period Please Note: ATL Engineers will work with client to create a Requirements Document that will clearly define the specifications of each customization, for client review and signoff prior to any initiation of work (Includes Requirements Document, Creation, QA/QC, documentation and installation). Upon completion of the Requirements Document process and client approval an exact cost will be provided	54	225.00	12,150.00
This Quote shall be valid for 60 days		Total	\$96,568.20
		Sales Tax (0.0%)	\$0.00
		TOTAL	\$96,568.20

Prices Quoted are in USD - Client is responsible for any local taxes or fees

Questions, contact me at tmclean@atlab.com

Thomas A. McLean
Accounts Manager
Accelerated Technology Laboratories, Inc.

- [File an Annual Report/Amend an Annual Report](#) • [Upload a PDF Filing](#) • [Order a Document Online](#) • [Add Entity to My Email Notification List](#) • [View Filings](#) • [Print a Pre-Populated Annual Report form](#) • [Print an Amended a Annual Report form](#)

Business Corporation

Legal Name
ACCELERATED TECHNOLOGY LABORATORIES, INC.

Information

SosId: 0473541
Status: Current-Active ⓘ
Date Formed: 10/16/1998
Citizenship: Domestic
Fiscal Month: December
Annual Report Due Date: April 15th
Current Annual Report Status:
Registered Agent: Kolva, Donald J.

Addresses

Mailing	Principal Office	Reg Office	Reg Mailing
496 Holly Grove School Road West End, NC 27376-8412	496 Holly Grove School Road West End, NC 27376-8412	496 Holly Grove School Road West End, NC 27376-8412	496 Holly Grove School Road West End, NC 27376-8412

Officers

Chief Technology Officer
Donald J Kolva
496 Holly Grove School Road
West End NC 27376

Vice President
Christine Paszko , Ph.D.
496 Holly Grove School Road
West End NC 27376

Treasurer
Thomas A Paszko
496 Holly Grove School Road
West End NC 27376

Secretary
Kim Waters
496 Holly Grove School Road
West End NC 27376

Stock

Class: COMMON

Shares: 80000

No Par Value: Yes

**ATTACHMENT ONE
INSURANCE REQUIREMENTS FOR
PROFESSIONAL SERVICES AGREEMENTS**

A. Insurance Policies: Consultant shall, at all times during the terms of this Agreement, maintain and keep in full force and effect, the following policies of insurance with minimum coverage as indicated below and issued by insurers with AM Best ratings of no less than A-:VI or otherwise acceptable to the City.

Insurance	Minimum Coverage Limits	Additional Coverage Requirements
1. Commercial general liability	\$ 1 million per occurrence \$ 2 million aggregate	Coverage must be at least as broad as ISO CG 00 01 and must include completed operations coverage. If insurance applies separately to a project/location, aggregate may be equal to per occurrence amount. Coverage may be met by a combination of primary and umbrella or excess insurance but umbrella and excess shall provide coverage at least as broad as specified for underlying coverage. Coverage shall not exclude subsidence.
2. Business auto coverage	\$ 1 million	ISO Form Number CA 00 01 covering any auto (Code 1), or if Consultant has no owned autos, hired, (Code 8) and non-owned autos (Code 9), with limit no less than \$ 1 million per accident for bodily injury and property damage.
3. Professional liability (E&O)	\$ 1 million per claim \$ 1 million aggregate	Consultant shall provide on a policy form appropriate to profession. If on a claims made basis, Insurance must show coverage date prior to start of work and it must be maintained for three years after completion of work.
4. Workers' compensation and employer's liability	\$ 1 million	As required by the State of California, with Statutory Limits and Employer's Liability Insurance with limit of no less than \$ 1 million per accident for bodily injury or disease. The Workers' Compensation policy shall be endorsed with a waiver of subrogation in favor of the City for all work performed by the Consultant, its employees, agents and subcontractors.

B. Endorsements:

1. All policies shall provide or be endorsed to provide that coverage shall not be canceled, except after prior written notice has been provided to the City in accordance with the policy provisions.

2. Liability, umbrella and excess policies shall provide or be endorsed to provide the following:
 - a. For any claims related to this project, Consultant's insurance coverage shall be primary and any insurance or self-insurance maintained by City shall be excess of the Consultant's insurance and shall not contribute with it; and,
 - b. **The City of Santa Rosa, its officers, agents, employees and volunteers are to be covered as additional insureds on the CGL policy.** General liability coverage can be provided in the form of an endorsement to Consultant's insurance at least as broad as ISO Form CG 20 10 11 85 or if not available, through the addition of both CG 20 10 and CG 20 37 if a later edition is used.
- C. Verification of Coverage and Certificates of Insurance:** Consultant shall furnish City with original certificates and endorsements effecting coverage required above. Certificates and endorsements shall make reference to policy numbers. All certificates and endorsements are to be received and approved by the City before work commences and must be in effect for the duration of the Agreement. The City reserves the right to require complete copies of all required policies and endorsements.
- D. Other Insurance Provisions:**
1. No policy required by this Agreement shall prohibit Consultant from waiving any right of recovery prior to loss. Consultant hereby waives such right with regard to the indemnitees.
 2. All insurance coverage amounts provided by Consultant and available or applicable to this Agreement are intended to apply to the full extent of the policies. Nothing contained in this Agreement limits the application of such insurance coverage. Defense costs must be paid in addition to coverage amounts.
 3. Policies containing any self-insured retention (SIR) provision shall provide or be endorsed to provide that the SIR may be satisfied by either Consultant or City. Self-insured retentions above \$10,000 must be approved by City. At City's option, Consultant may be required to provide financial guarantees.
 4. Sole Proprietors must provide a representation of their Workers' Compensation Insurance exempt status.
 5. City reserves the right to modify these insurance requirements while this Agreement is in effect, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.



ACCEL-1

OP ID: JR

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/27/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Lee-Moore Insurance Agency Inc
P.O. Box 667
West End, NC 27376
Tyler Horney
910-673-4771
Reviewed FVS
Reviewed FVS (Feb 8, 2021 16:36 PST)
Feb 8, 2021

CONTACT NAME: Tyler Horney	
PHONE (A/C, No, Ext): 910-673-4771	FAX (A/C, No):
E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE	
INSURER A: Hartford Underwriters Ins. Co	NAIC #: 30104
INSURER B: Hartford Casualty Insurance Co	29424
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
Accelerated Technology
Laboratories, Inc.
496 Holly Grove School Road
West End, NC 27376

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATION MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> E&O 2,000,000. GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X		22SBABP8563	01/24/2021	01/24/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			22UECZI9082	01/24/2021	04/24/2022	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	UMBRELLA LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000			22SBABP8563	01/24/2021	01/24/2022	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The "City of Santa Rosa, its officers, agents, employees and volunteers" are named as additional insured for general liability." form # SS 41 70 06 11

CERTIFICATE HOLDER City of Santa Rosa 635 First Street Santa Rosa, CA 95404	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Tyler Horney <i>Joanne Richardson</i>
---	--



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - OWNERS, LESSEES OR
CONTRACTORS - SCHEDULED PERSON OR
ORGANIZATION**

This endorsement modifies insurance provided under the following:

BUSINESS LIABILITY COVERAGE FORM

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

CITY OF SANTA ROSA, ITS OFFICERS, AGENTS AND EMPLOYEES

Location(s) Of Covered Operations:

635 FIRST ST SANTA ROSA, CA 95404

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section C. – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT – CALIFORNIA

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the schedule (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be \$0 of the California workers' compensation premium otherwise due on such remuneration.

SCHEDULE

Person or Organization	Job Description
IN FAVOR OF: City of Santa Rosa 635 First Street Santa Rosa, CA 95404	

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective: 02/02/2021 Policy No: WC 29-38-687-18 Endorsement No:

Insured: Oasis, a Paychex Company Alt. Emp: ACCELERATED TECHNOLOGY
LABORATORIES, INC

Insurance Company: American Zurich Insurance Company Countersigned by

WC 04 03 06

Copyright 1983 National Council on Compensation Insurance



F001135 Accelerated Technologies Ins 2021-2022

Final Audit Report

2021-02-09

Created:	2021-02-09
By:	Priscilla Reyes (preyes@srcity.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAFAFK7gCFxwj2dF26j9QfZRli_dMA_12E6t

"F001135 Accelerated Technologies Ins 2021-2022" History

-  Document created by Priscilla Reyes (preyes@srcity.org)
2021-02-09 - 0:06:03 AM GMT- IP address: 12.249.238.210
-  Document emailed to Reviewed FVS (fsims@srcity.org) for signature
2021-02-09 - 0:06:53 AM GMT
-  Email viewed by Reviewed FVS (fsims@srcity.org)
2021-02-09 - 0:35:29 AM GMT- IP address: 12.249.238.210
-  Document e-signed by Reviewed FVS (fsims@srcity.org)
Signature Date: 2021-02-09 - 0:36:10 AM GMT - Time Source: server- IP address: 12.249.238.210
-  Agreement completed.
2021-02-09 - 0:36:10 AM GMT

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT - CALIFORNIA

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the schedule (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be \$0 of the California workers' compensation premium otherwise due on such remuneration.

SCHEDULE

Person or Organization

Job Description

IN FAVOR OF:

City of Santa Rosa
635 First Street
Santa Rosa, CA 95404

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective: 06/01/2021

Policy No: WC 29-38-687-19

Endorsement No:

Insured: Oasis, a Paychex Company Alt. Emp: ACCELERATED TECHNOLOGY
LABORATORIES, INC

Insurance Company: American Zurich Insurance Company

Countersigned by

WC 04 03 06

Copyright 1983 National Council on Compensation Insurance




Accelerated Technologies

Final Audit Report

2021-05-26

Created:	2021-05-26
By:	Priscilla Reyes (preyes@srcity.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAHEMspFZM1wwCeYHM6wmWTJ4HghiOFdir

"Accelerated Technologies" History

-  Document created by Priscilla Reyes (preyes@srcity.org)
2021-05-26 - 8:39:43 PM GMT- IP address: 12.249.238.210
-  Document emailed to Reviewed FVS (fsims@srcity.org) for signature
2021-05-26 - 8:40:10 PM GMT
-  Email viewed by Reviewed FVS (fsims@srcity.org)
2021-05-26 - 8:48:21 PM GMT- IP address: 12.249.238.210
-  Document e-signed by Reviewed FVS (fsims@srcity.org)
Signature Date: 2021-05-26 - 8:48:48 PM GMT - Time Source: server- IP address: 12.249.238.210
-  Agreement completed.
2021-05-26 - 8:48:48 PM GMT







Amendment to Professional Services Agreement-ATL

Final Audit Report

2021-10-05

Created:	2021-09-27
By:	Priscilla Reyes (preyes@srcity.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAr1KT-A5V5PI7EVhJMIDR_wEsPIU0RWMz

"Amendment to Professional Services Agreement-ATL" History

-  Document created by Priscilla Reyes (preyes@srcity.org)
2021-09-27 - 9:47:58 PM GMT- IP address: 12.249.238.210
-  Document emailed to Patti Salomon (PSalomon@srcity.org) for delegation
2021-09-27 - 9:49:00 PM GMT
-  Document signing delegated to Jessica Mullan (jmullan@srcity.org) by Patti Salomon (PSalomon@srcity.org)
2021-10-04 - 4:34:04 PM GMT- IP address: 12.249.238.210
-  Document emailed to Jessica Mullan (jmullan@srcity.org) for signature
2021-10-04 - 4:34:04 PM GMT
-  Document e-signed by Jessica Mullan (jmullan@srcity.org)
Signature Date: 2021-10-05 - 4:52:00 PM GMT - Time Source: server- IP address: 12.249.238.210
-  Agreement completed.
2021-10-05 - 4:52:00 PM GMT