

**SECOND AMENDMENT
TO PROFESSIONAL SERVICES AGREEMENT NUMBER F001395
WITH ROBERT HUNTER AARONSON**

This Second Amendment to Agreement number F001395, dated April 18, 2017 ("Agreement") is made as of this _____ day of _____, 2018, by and between the City of Santa Rosa, a municipal corporation ("City"), and Robert Hunter Aaronson, dba Aaronson Law Offices, a sole proprietorship ("Consultant").

RECITALS

- A. City and Consultant entered into the Agreement for Consultant to provide an independent auditor to review the Police Department.
- B. City and Consultant amended the Agreement on January 17, 2018 to extend the time of performance and increase compensation.
- C. City and Consultant now desire to amend the Agreement for the purpose of increasing compensation.

AMENDMENT

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

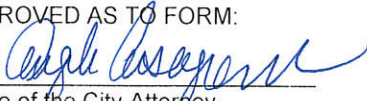
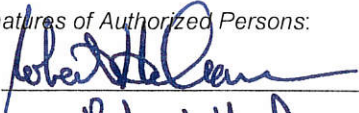
1. Section 2. Compensation

Section 2(c) is amended to increase the compensation payable to Consultant under the Agreement by \$31,000 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 two hundred thirty-one thousand dollars and no cents (\$231,000). The City's Chief Financial Officer is authorized to pay all proper claims from Charge Number 95117."

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

Executed as of the day and year first above stated.

CITY OF SANTA ROSA a Municipal Corporation	
Name of Firm: <u>ROBERT HUNTER AARONSON</u>	By: _____
TYPE OF BUSINESS ENTITY (<i>check one</i>):	Print Name: <u>GLORIA HURTADO</u>
<input checked="" type="checkbox"/> Individual/Sole Proprietor	Title: <u>DEPUTY CITY MANAGER</u>
<input type="checkbox"/> Partnership	
<input type="checkbox"/> Corporation	APPROVED AS TO FORM:
<input type="checkbox"/> Limited Liability Company	
<input type="checkbox"/> Other (please specify: _____)	Office of the City Attorney
Signatures of Authorized Persons:	ATTEST:
By: 	_____
Print Name: <u>Robert H. Aaronson</u>	City Clerk
Title: <u>principal</u>	
By: _____	
Print Name: _____	
Title: _____	
City of Santa Rosa Business Tax Cert. No.	
<u>338789</u>	