

**AMENDMENT TO AGREEMENT
BETWEEN THE COUNTY OF SAN MATEO AND
AGREEYA SOLUTIONS, INC.**

THIS AMENDMENT TO THE AGREEMENT, entered into this ____ day of _____, 20____, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and AgreeYa Solutions, Inc., hereinafter called "Contractor";

W I T N E S S E T H:

WHEREAS, pursuant to Government Code, Section 31000, County may contract with independent contractors for the furnishing of such services to or for County or any Department thereof;

WHEREAS, on July 1, 2018, the parties entered into an Agreement for contingency staffing services for a term of July 1, 2018 through June 30, 2021, per Board Resolution No. 075941 which authorizes the County's Information Services Department's Director/CIO to enter into agreements with 28 contractors for an aggregate not to exceed amount of \$27,000,000; and

WHEREAS, the parties wish to amend the Agreement for the continuation for the same said services, extending the end term to June 30, 2022.

NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:

1. Section 4 of the agreement is amended to read as follows:

Subject to compliance with all terms and conditions, the term of this Agreement shall be from July 1, 2018, through June 30, 2022, per the approved Board Resolution No. _____. Term dates for Contractor's assigned individual consultants shall be per the Effective Dates of the Consultant Information Form (CIF) which shall not exceed the term of this agreement or any amendment thereto.

2. **All other terms and conditions of the agreement dated July 3, 2018, as amended, between the County and Contractor shall remain in full force and effect.**

In witness of and in agreement with this Agreement's terms, the parties, by their duly authorized representatives, affix their respective signatures:

For Contractor:

Sandeep Sharma Digitally signed by Sandeep Sharma
Date: 2021.06.15 17:13:46 -07'00'

Contractor Signature

Date

Sandeep Sharma

Contractor Name (please print)

For County:

Purchasing Agent Signature
(Department Head or
Authorized Designee)
County of San Mateo

Date

Purchasing Agent Name (please print)
(Department Head or **Authorized** Designee)
County of San Mateo

Purchasing Agent or **Authorized** Designee
Job Title (please print)
County of San Mateo