STATE OF CALIFORNIA

STANDARD AGREEMENT Std. 2 (Grant - Rev 08/08)

32649

AGREEMENT NUMBER	AM. NO.
11-066	3
TAXPAYERS FEDERAL EMPLIDENTIFICATION NO.	OYER

THIS AGREEMENT, made in the State of California.	e and entered into thi	$s = 21^{s+}$ day of $s = 10^{s}$	eptember	, <u>2015,</u>	aualified a	and acting	
TITLE OF OFFICER ACTING FOR S	STATE	te of California, through its duly elected or appointed, qualified AGENCY		, quaimeu a	nd acting		
Executive Officer		State Coastal Conservancy , herea		, hereafte	er called the Conservancy, and		
City of Long Beach				•	, hereafte	er called the Grantee.	
The Grantee, for and in co	onsideration of the covows:	venants, conditions, aç	greements, and s	tipulations o		ervancy hereinafter expressed,	
The State Coastal Co			the City of Lo	ng Beach	("the gra	ntee") agree to amend	
TERM OF AGREEMENT			APPROVED AS TO FORM				
The term of the agreement is extended to January 30, 203'			7. CHARLES PARKIN, Con Attorney				
The completion date is extended to January 30, 2017.				Ву подположения		KILL LINDAT VU	
The final Request for Disbursement must be received by April 25, 2017. DEPUTY CITY ATTORNEY							
All other terms and conditions of the existing agreement shall remain in effect.							
The provisions on the foll IN WITNESS WHEREOF	owing pages constitu , this agreement has	te a part of this agreer been executed by the	nent. parties hereto, u	pon the dat	e first above	e written.	
STATE OF CALIFORNIA GRANTEE							
State Coastal Conservancy		GRANTEE (If other than an individual, state whether a corporation, partnership, etc.) City of Long Beach					
BY (Authorized/Signature)		BY (Authorized Signature)					
			Assistant City Manager				
PRINTED NAME AND TITLE OF PERSON SIGNING Samuel Schuchat, Executive Officer		PRINTED NAME AND TITLE OF PERSON SIGNING					
ADDRESS & PHONE NUMBER	ecutive Officer		Patrick H. W	est, City	Manager	TO SECTION 301 OF	
1330 Broadway, 13 th Floor		ADDRESS THE CITY CHARTER. 2760 Studebaker Road					
Oakland, CA 94612		Long Beach, CA 90815					
	Phone:	(510) 286-1015	,			hone: (562) 570-3165	
AMOUNT ENCUMBERED BY THIS DOCUMENT	PROGRAM/CATEGORY (CO	ODE AND TITLE)	Safe Drinkin Quality and S	Supply, Fl		I certify that this agreement is exempt from Department of General Services' approval.	
	Capital Outlay		Control,(P	rop 84)	100000		
\$-0-		Park Wetlands Restoration					
PRIOR AMOUNT ENCUMBERED FOR THIS AGREEMENT	ITEM		CHAPTER	STATUTE	FISCAL YEAR	Curry	
\$1,500,000.00	3760-301-6051(Reap, by Ch. 21/12	/ ` /	1XXX	2009	09/10	Erlinda Corpuz Contracts Manager	
TOTAL AMOUNT ENCUMBERED TO DATE	OBJECT OF EXPENDITURE	(CODE AND TITLE)	Su				
\$1,500,000.00 Resource Enhancement							
I hereby certify upon my own expenditure stated above.	personal knowledge the		ailable for the perio	d and purpos	e of the		
SIGNATURE OF ACCOUNTING OFFI	CER	, , , , , , , , , , , , , , , , , , , ,	DATE	. , .			
	WINC DR	O JEOT MANA OFF	09/2	1115	A OFILIAL		
□ GRANTEE V □ ACCOU	DIVING LIPRO	OJECT MANAGER	☐ CONTROLLER	☐ STATE	AGENCY		