

First **Second** **Third** **Revised Budget/Fiscal Attachment**

1. This Revised Budget/Fiscal Attachment is attached to the First Second Third amendment to Approved Service Order No. 2 issued pursuant to the Master Agreement.
2. The Maximum Service Order Compensation set forth on Line 7.b. of Section 7 of the Approved Service Order cover page is:

Decreased from \$ 36,695 to \$ 24,655.

Increased from \$ _____ to \$ _____.

Appropriation Certification: I certify that an unexpended appropriation in the amount of the increased compensation is available in the following fund(s) and that such fund(s) will be encumbered to pay for this Approved Service Order.

Fund: _____ Appn: _____ RC: _____ Amount: \$ _____

Fund: _____ Appn: _____ RC: _____ Amount: \$ _____

Fund: _____ Appn: _____ RC: _____ Amount: \$ _____

Fund: _____ Appn: _____ RC: _____ Amount: \$ _____

Authorized Signature:

3. If the Maximum Service Order Compensation is being increased, the unencumbered amount in the Master Agreement is sufficient as follows:

a.	Current unencumbered amount in Master Agreement:	\$	N/A
b.	Increase in the Maximum Service Order Compensation:	\$	N/A
c.	New unencumbered balance in Master Agreement	\$	N/A
Division Analyst Approval:			

First Second Third **Revised Attachment A: Tasks**

This Revised Attachment A is attached to the First Second Third amendment to Approved Service Order No. [Insert No.] issued pursuant to the Master Agreement.

The tasks set forth in the original Attachment A, or in any previous amendment to the original Attachment A, are amended as set forth herein. All other tasks shall remain unchanged.

[Select whichever of the following 3 standard provision forms is applicable to your amendment. Be sure to delete the provisions that you do not use.]

[Standard Provision No. 1]

Task No. [Insert Task Number], entitled “[Insert title of deliverable],” is deleted in its entirety.

[Standard Provision No. 2]

Task No. [Insert Task Number], entitled “[Insert title of deliverable],” is amended as follows:

[Restate the entire task and include your amendments]

[Standard Provision No. 3]

A new task is added to be numbered and to read as follow:

Task No. [Insert Task Number]: [Insert title of deliverable.]

- A. Services:** [Insert a description of the services required to perform or develop the deliverable. See the instructions for a sample list of questions that should be answered by the description.]
- B. Deliverable:** The Consultant will provide the following to the City’s Contract Manager: [Insert a description of the deliverable.]
- C. Completion Time:** The Consultant must complete the services and deliverable for this task in accordance with whichever one of the following times is marked:
 - On or before the following date: _____.
 - On or before ___ Business Days from _____.

First **Second** **Third** **Revised Attachment C: Compensation Table**

This Revised Attachment C is an attachment to the First Second Third amendment to Approved Service Order No. 2 issued pursuant to the Master Agreement.

Part 1 – Compensation for Services						
Column 1	Column 2		Column 3			Column 4
Task Nos.	Basis of Compensation		Invoice Period			Compensation
1	<input type="checkbox"/> Time & Materials	<input checked="" type="checkbox"/> Fixed Fee	<input checked="" type="checkbox"/> Monthly	<input type="checkbox"/> Completion of Task(s)	<input type="checkbox"/> Completion of Work	\$18,915.00
2	<input checked="" type="checkbox"/> Time & Materials	<input type="checkbox"/> Fixed Fee	<input checked="" type="checkbox"/> Monthly	<input type="checkbox"/> Completion of Task(s)	<input type="checkbox"/> Completion of Work	\$ 5,740.00
	<input type="checkbox"/> Time & Materials	<input type="checkbox"/> Fixed Fee	<input type="checkbox"/> Monthly	<input type="checkbox"/> Completion of Task(s)	<input type="checkbox"/> Completion of Work	\$
Part 2 – Reimbursable Expenses						
<input type="checkbox"/> No expenses are separately reimbursable. The amount(s) in Column 4 of Part 1 include(s) payment for all expenses.			<input type="checkbox"/> Expenses are separately reimbursable in the maximum amount of:			\$
Part 3 – Subconsultant Costs						
<input type="checkbox"/> Subconsultant costs are not separately compensable. The amount(s) in Column 4 of Part 1 include(s) sub-consultant costs.			<input type="checkbox"/> Subconsultant costs are separately compensable in the maximum amount of:			\$
Maximum Service Order Compensation (sum of Parts 1 through 3):						\$ 24,655.00