

Purchase Order # 106774

Mt. Diablo Unified School District
1936 Carlotta Drive
Concord, CA 94519



Amendment No. 1 to

- Independent Service Contract
- Master Contract

This Amendment is entered into between the Mt. Diablo Unified School District (MDUSD) and Soul Shoppe (CONTRACTOR). MDUSD entered into an Agreement with CONTRACTOR for professional services on December 15, 2016, and the parties agree to amend that Agreement as follows:

1. **Services:** (Check and complete ONE of the options below)
- CONTRACTOR agrees to provide the following amended services (Provide full description of expected final results, such as services, materials, products, and/or reports, attach additional pages as necessary).

grade level workshop day

- The scope of work is attached as Exhibit A (incorporated by reference to the extent that it is subordinate to and not inconsistent with this Agreement)
- The scope of work is unchanged

2. **Terms:** (Check and complete ONE of the options below)
- The contract term is extended by an additional 66 days (days/weeks/months), and the amended expiration date is MAY 5, 2017.
 - The contract term is unchanged

3. **Compensation:** (Check and complete ONE of the options below. This provision may only be changed if there is also a change to the above Services OR Terms of the Contract).

- The rate is amended by an increase of decrease of \$ _____ for _____ type of service
- The contract amount is amended by an increase of decrease of \$ 1,000.00 to original contract amount.

The amended contract amount rate is now \$ 2,800.00

4. **Remaining Provisions:** All other provisions of the Agreement, and prior Amendment(s) if any, shall remain unchanged and in full force and effect as originally stated.

5. **Amendment History:** This contract has previously been amended as follows:

No.	Date	General Description of Reason for Amendment	Amount of Increase/Decrease
			\$
			\$
			\$

6. **Approval:** This Agreement is not effective and no payment shall be made to Contractor until it is approved. Approval requires signature by the Superintendent (or his designee).

Mt. Diablo USD
By: [Signature] Budget Administrator/Principal
Date: 3/13/17

Mt. Diablo USD
By: _____ Superintendent or Designee
Date: _____

Contractor
By: [Signature]
Date: 3/13/17

Board Approval (if needed)
Check Number _____
Approval Date Number _____
Date: _____

[Signature]



PROGRAM AGREEMENT 2016-17

School: PLEASANT HILL ELEMENTARY

Contact: Aurelia Buscemi

Title: Principal

Contact: Kellye Orihood

Title: Full Inclusion Facilitator

Address: 2097 Oak Park Boulevard

City: Pleasant Hill, CA 94523

Phone: 925-934-3341

Email: orihoodk@emdsd.org, buscemia@emdsd.org

of Students: _____

of Teachers: _____

Program Description:

- "Check In" Grade-Level Workshop: \$1,000 (February 9, 2017)
- "Stop & Breathe" Grade-Level Workshop \$1,000 (May 4, 2017)
- 1 Staff In-Service: \$400
- 1 Parent Night: \$400

Fee Total: \$2,800

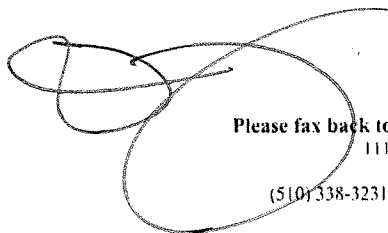
The above is agreed to and accepted by:

Aurelia Buscemi (Aurelia Buscemi)

Date: 3/14/17

Vicki Abadesco (Vicki Abadesco)

Date: March 13, 2017



Please fax back to: (510) 338-3234 (no fax cover needed)
111 Fairmount Ave, Suite 503
Oakland, CA 94611
(510) 338-3231 (Tel) • support@soulshoppe.com

(This is a Program Agreement, not an invoice)