



JONES & MAYER

ATTORNEYS AT LAW

3777 NORTH HARBOR BOULEVARD • FULLERTON, CALIFORNIA 92835
(714) 446-1400 • (562) 697-1751 • FAX (714) 446-1448

Richard D. Jones*
Partners
Martin J. Mayer (1941-2017)
Kimberly Hall Barlow
James R. Touchstone
Thomas P. Duarte
Richard L. Adams II
Christian L. Bettenhausen
Ryan R. Jones

Associates
Monica Choi Arredondo
Melissa M. Ballard
Baron J. Bettenhausen
Jamaar Boyd-Weatherby
Paul R. Coble
Keith F. Collins
David R. Demurjian
Michael Q. Do

Kathya M. Firlirk
Russell A. Hildebrand
Crystal V. Hodgson
Krista MacNevin Jee
Gary S. Kranker
Bruce A. Lindsay
Adrienne Mendoza
Gregory P. Palmer
Scott E. Porter

Harold W. Potter
Tarquin Preziosi
Carrie A. Raven
Jeffrey N. Redd
Brittany E. Roberto
Denise L. Rocawich
Yolanda M. Summerhill
Ivy M. Tsai
Carmen Vasquez

Of Counsel
Michael R. Capizzi
Harold DeGraw
Deborah Pernice-Knefel
Dean J. Pucci
Steven N. Skolnik
Peter E. Tracy

*a Professional Law Corporation

Consultant
Mervin D. Feinstein

Date: September 26, 2018
To: Mike Fuentes, Finance Department
City of Costa Mesa
From: Lauren Budd, Office Manager
Subject: Signed Contract Amendment No. One for City of City Attorney Services

Enclosed Please Find: Three (3) signed originals of the first amendment to the legal services agreement between the City of Costa Mesa and Jones & Mayer. Please sign and return one original to our office.

- | | | | |
|-------|---------------------------------|-----|--|
| () | Please review and call me | () | Please telephone me |
| () | For your information | () | Please read and advise me how to reply |
| (xx) | In accordance with your request | () | Please acknowledge receipt |
| () | Please comment | () | For your files |
| (xx) | Please sign | () | Please file and return conformed copy |
| (xx) | Please return to me | | |

**AMENDMENT NUMBER ONE
TO AMENDED RETAINER AGREEMENT
FOR
CITY ATTORNEY SERVICES**

This Amendment Number One ("Amendment") is made and entered into this 18th day of September, 2018 ("Effective Date"), by and between the CITY OF COSTA MESA, a municipal corporation ("City"), and RICHARD D. JONES, a professional law corporation DBA JONES & MAYER ("Jones & Mayer").

WHEREAS, City and Jones & Mayer entered into an Amended Retainer Agreement for City Attorney Services on March 1, 2011 (the "Agreement"); and

WHEREAS, City and Jones & Mayer desire to amend the Agreement as set forth herein.

NOW, THEREFORE, for valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

1. Section 1.B. of the Agreement shall be deleted in its entirety and replaced as follows:

B. Tarquin Preziosi is designated as the Assistant City Attorney ("Assistant City Attorney"). The City Attorney may also appoint such attorneys from Jones & Mayer as the City Attorney deems appropriate to serve as deputy city attorneys for the City. The Assistant City Attorney and deputy city attorneys shall serve in the City Attorney's absence.

2. Section 3.A. of the Agreement shall be deleted in its entirety and replaced as follows:

A. Basic Services

All legal services provided by Jones & Mayer shall be billed to the City at a rate of Two Hundred Fifteen Dollars (\$215.00) per hour. Paralegal services shall be billed at a rate of One Hundred Fifteen Dollars (\$115.00) per hour. All costs and expenses, except for those set forth in Section 3.B. below, shall be deemed included in the foregoing hourly billing rates. Fees associated with litigation shall be billed separately and at the rate of Two Hundred Fifteen Dollars (\$215.00) per hour for attorney time and One Hundred Fifteen Dollars (\$115.00) per hour for paralegal time.

The billing rates set forth herein shall be adjusted annually (effective as of the anniversary date of this Agreement) to reflect any increase in the cost of living based on the Consumer Price Index increase for the prior year utilizing the standard as established by the Bureau of Labor Statistics of the U.S. Department of Labor for all urban consumers in the Los Angeles-Riverside-Orange County area, or another mutually agreed upon index based upon comparable data should the Consumer Price Index established by the Bureau of Labor Statistics be unavailable.

3. Any and all references in the Agreement to "Duarte" shall be amended to read, "City Attorney."

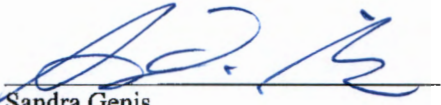
4. Any and all references in the Agreement to "CEO/City Manager" shall be amended to read, "City Manager."

5. All terms not defined herein shall have the same meaning and use as set forth in the Agreement.

6. All other terms, conditions, and provisions of the Agreement not in conflict with this Amendment shall remain in full force and effect.

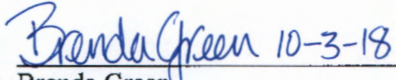
IN WITNESS WHEREOF, the parties hereto have caused this Amendment to be executed by and through their respective authorized officers, as of the date first written above.

CITY OF COSTA MESA


Sandra Genis
Mayor

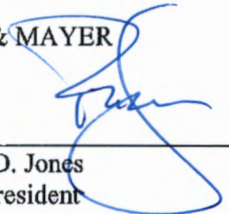
Date: 2 Oct. 2018

ATTEST:


Brenda Green
City Clerk



JONES & MAYER


Richard D. Jones
Owner/President

Date: 9-26-18

POLICY NUMBER: 72 SBA IA8539



THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - PERSON-ORGANIZATION

CITY OF COSTA MESA
77 FAIR DRIVE
COSTA MESA CA 92626-6520



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/21/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


PRODUCER Mitchell & Mitchell-Lic0620650 250 Bel Marin Keys Blvd, Bld E Novato, CA 94949 Daniel J. McKenna	CONTACT NAME: PHONE (A/C, No, Ext): 415-883-2525		FAX (A/C, No): 415-883-7752
	E-MAIL ADDRESS:		
INSURED Richard Jones dbaJones & Mayer 3777 North Harbor Blvd. Fullerton, CA 92835	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : CNA Insurance Co		
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below					<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	
A	Lawyer's Prof Liab		267951336	01/22/2018	01/22/2019	Ea Claim 2,000,000 Aggregate 4,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Prior Acts Date: FULL Deductible: \$25,000

CERTIFICATE HOLDER City of Costa Mesa City Manager 77 Fair Drive Costa Mesa, CA 92626-6520	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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ACORD**CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YY)
SEP 26 18

PRODUCER
CRYSTAL CREEK INS. AGENCY LIC#0724072
4335 E. AIRPORT DR., SUITE 104
ONTARIO CA 91761
PHONE: 909-974-1777
FAX: 909-937-2138

Agency Lic#: 0724072

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

INSURED
RICHARD D. JONES, A PROFESSIONAL LAW CORP
DBA JONES & MAYER ATTORNEYS AT LAW
3777 N. HARBOR BLVD.
FULLERTON CA 92835

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: EMPLOYERS COMPENSATION INS. 04322
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

INSR LTS	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any One Person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$
	EXCESS / UMBERELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY A ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	EIG 1024938 11	APR 1 18	APR 1 19	<input type="checkbox"/> WC STATU- <input checked="" type="checkbox"/> TORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE-EA EMPLOYEE \$ 2,000,000 E.L. DISEASE-POLICY LIMIT \$ 2,000,000
	OTHER:				

DESCRIPTION OF OPERATIONS/LOCATION/VEHICLES/EXCLUSIONS ADDED ENDORSEMENT/ SPECIAL PROVISIONS

BLANKET WAIVER OF SUBROGATION PER FORM WC 04 03 06 INCLUDED

EXCEPT CANCELLATION FOR NON-PAYMENT OF PREMIUM, IN THAT EVENT THE NOTICE OF CANCELLATION WILL BE 10 DAYS

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

CITY OF COSTA MESA
77 FAIR DRIVE
COSTA MESA, CA 92626-6520

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, IT'S AGENTS OR REPRESENTATIVES

AUTHORIZED REPRESENTATIVE

Attention:

ACORD 25 (2001/08)

Certificate # 18054

