1. **Other Contracting Party:** Radio One Inc.

2. **Proposed Action:**
   - [ ] New Contract
   - [x] Amendment, Number 1
   - [ ] Renewal
   - [ ] Extension
   - Document Type (select one):
     - [ ] Amendment

4. **Purpose/Description:**
   Amendment to increase optional services not to exceed amounts and delegate approval authority to Director of Purchasing.

5. **Special Provisions (select if applicable):**
   - [ ] Living Wage Program
   - [ ] Workforce Investment Pilot Program
   - [ ] Federal DBE/ACDBE program
   - [ ] CBE Program
   - [ ] SBE Sheltered Market Program
   - [ ] M/WBE Program
   - [ ] In-Kind Match Required: $ _____ or ____%
   - [ ] Cash Match Required: $ _____ or ____%

6. **Effective Dates (for new agreements only):**
   - Start: ______
   - End: ______

6. **Effective Dates (amendments only):**
   - [ ] No Change
   - [ ] End date has changed from ____ to ____.
   - [ ] Term has from ____ to ____.

7. **Contract Administrator:**
   - Name: Brett Bayag
   - Phone: 954-357-8570

8. **Contract Type:**
   - [ ] Cost reimbursement
   - [ ] Open-end
   - [ ] Firm fixed price
   - [ ] Time and materials
   - [ ] Performance-based
   - [x] Other: LUMP SUM WITH OPTIONAL SERVICES

9. **Contract Value (new contracts):**
   - [ ] Actual
   - [ ] Estimated
   - Base amount
   - Reimbursables
   - Optional Services
   - Total contract value

9. **Contract Value (amendments only):**
   - [ ] No change
   - [ ] Actual
   - [x] Estimated
   - Original approved contract value: $1,264,242.35
   - Approved previous adjustments: 0.00
   - Value of this action: $6,050,000.00
   - Amended total contract value: $7,013,242.35

10. **Payment Method:**
    - [ ] Lump Sum Payment
    - [x] Milestone or Progress-Based
    - [ ] Scheduled or Time-Based
    - [ ] Other

11. **Payment Terms:**
    30 days from receipt of invoice

12. **Cost Adjustment:**
    - [ ] Not Applicable
    - [ ] CPI or other Index
    - [ ] Fixed Percentage - ____%
    - [ ] Fixed Amount - $____

13. **Equity Program Participation Summary**
    a. County established M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal for this action or project: ______
    b. Contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: ______
    c. M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: ______

14. **Renewal or Extension Terms:**
    TERM OF 2 YEARS AND 2 RENEWALS OF 1 YEAR

15. **Termination and Cancellation Provisions**
    For Cause: [ ] EACH
    For Convenience: Provider shall be paid for any goods and services properly provided through the termination date specified in the written notice of termination.

16. **Deliverables, milestones or scope of this action:**
    Increase not to exceed for optional services with and without scope of work in order for other County agencies to use this agreement to upgrade their radio systems and buy radios and accessories.
| 17. List terms, considerations or deviations from standard county form. | None |

Rev. 1/1/15