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|---|
| Janet Tipton 907-865-2600 |
| 3. Optional Renewal? Yes __ No __ Options remaining _____ |
| 4. Financial Coding WSTDEF |
| 5. Agency Assigned Encumbrance Number CGAE 22000072 |
| 6. Amendment No. 1 |

STATE OF ALASKA
AMENDMENT TO PROFESSIONAL SERVICES CONTRACT

This agreement is between the State of Alaska,

7. Department of Law Hereafter the State, and

8. Contractor **Holland and Hart** Hereafter the Contractor

Remittance Address:
PO Box 17283 Denver, CO 80217-0283

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| 9. Original period of performance FROM: November 15, 2021 TO: June 30, 2022 | 10. Amended period of performance FROM: November 15, 2021 TO: December 30, 2022 (Amend 1) |
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| 11. Previous amount of contract to date: \$50,000 | 12. Amount of this amendment: \$10,000 | 13. This amended contract shall not exceed \$60,000 |
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14. In accordance with the provisions of the above referenced contract, the parties to that contract agree that the services to be performed by the contractor under the contract are amended as follows:

Contract authority is increased by \$10,000. The contract period of performance is extended to December 30, 2022. (Amend 1)

All other terms and conditions of the original agreement remain in effect.

In full consideration of the contractor's performance under and including this amendment, the State shall pay the contractor a total not to exceed **\$60,000**

IN WITNESS WHEREOF the parties hereto have executed this amendment.

NOTICE! This amendment has no effect until signed by the head of the contracting agency, procurement officer or designee.

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|---|---|-------------------|---|--|-------------------|---|--|----------------------------------|--|
| <p>15. CONTRACTOR</p> <p>Name of Firm Holland and Hart</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">Signature of Authorized Representative </td> <td style="width: 30%;">Date</td> </tr> </table> <p>Typed or Printed Name of Authorized Representative Kyle Parker</p> <p>Title Partner</p> | Signature of Authorized Representative  | Date | <p>17. CERTIFICATION: I certify that the facts herein and on supporting documents are correct, that this voucher constitutes a legal charge against funds and appropriations cited, that sufficient funds are encumbered to pay this obligation, or that there is a sufficient balance in the appropriation cited to cover this obligation. I am aware that to knowingly make or allow false entries or alterations on a public record, or knowingly destroy, mutilate, suppress, conceal, remove or otherwise impair the variety, legibility or availability of a public record constitutes tampering with public records punishable under AS 11.56.815 - .820. Other disciplinary action may be taken up to and including dismissal.</p> | | | | | | |
| Signature of Authorized Representative  | Date | | | | | | | | |
| <p>16. CONTRACTING AGENCY</p> <p>Department/Division Law</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">Signature of Project Director </td> <td style="width: 30%;">Date 1/12/2023</td> </tr> </table> <p>Typed or Printed Name of Project Director Cori Mills</p> <p>Title Deputy Attorney General</p> | Signature of Project Director  | Date 1/12/2023 | <table border="1" style="width: 100%;"> <tr> <td style="width: 80%;">Signature Agency Designee </td> <td style="width: 20%;">Date 1/12/2023</td> </tr> <tr> <td colspan="2">Typed or Printed Name of Authorizing Official Cori Mills</td> </tr> <tr> <td colspan="2">Title Deputy Attorney General</td> </tr> </table> <p>Amended in accordance with 2AAC 12.475 (a)</p> | Signature Agency Designee  | Date 1/12/2023 | Typed or Printed Name of Authorizing Official Cori Mills | | Title Deputy Attorney General | |
| Signature of Project Director  | Date 1/12/2023 | | | | | | | | |
| Signature Agency Designee  | Date 1/12/2023 | | | | | | | | |
| Typed or Printed Name of Authorizing Official Cori Mills | | | | | | | | | |
| Title Deputy Attorney General | | | | | | | | | |