

**STANDARD AGREEMENT**

STD 213 (Rev. 10/2018)

AGREEMENT NUMBER

19-96011

PURCHASING AUTHORITY NUMBER (if applicable)

1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME

Department of Health Care Services

CONTRACTOR NAME

County of Lake

2. The term of this Agreement is:

START DATE

July 1, 2019

THROUGH END DATE

June 30, 2022

3. The maximum amount of this Agreement is:

\$300,000

Three Hundred Thousand Dollars

4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

EXHIBITS	TITLE	PAGES
Exhibit A	Scope of Work	7
Exhibit B	Budget Detail and Payment Provisions	7
Exhibit C *	General Terms and Conditions GTC 04/2017	
Exhibit D(F)	Special Terms and Conditions (Attached hereto as a part of this agreement) Notwithstanding provision 4.g. which does not apply to this agreement)	26
Exhibit E	Additional Provisions	6
Exhibit F	Contractor's Release	1
Exhibit G	HIPAA Business Associate Addendum	15

*Items shown with an asterisk (\*), are hereby incorporated by reference and made part of this agreement as if attached hereto.**These documents can be viewed at [www.dgs.ca.gov/ols/resources/standardcontractlanguage.aspx](http://www.dgs.ca.gov/ols/resources/standardcontractlanguage.aspx)***IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.****CONTRACTOR**

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)

County of Lake

CONTRACTOR BUSINESS ADDRESS

922 Bevins Ct

CITY

Lakeport

STATE

CA

ZIP

95453

PRINTED NAME OF PERSON SIGNING

Denise Pomeroy

TITLE

Health Services Director

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

**STATE OF CALIFORNIA**

CONTRACTING AGENCY NAME

Department of Health Care Services

CONTRACTING AGENCY ADDRESS

1000 G Street, 4th Floor, MS 4200, P.O Box 997413

CITY

Sacramento

STATE

CA

ZIP

95899-7413

PRINTED NAME OF PERSON SIGNING

Carrie Talbot

TITLE

Chief, Contract Management Unit

CONTRACTING AGENCY AUTHORIZED SIGNATURE

DATE SIGNED

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California Department of General Services Approval (or exemption, if applicable)