

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 Lassen

2. The term of this Agreement is:

START DATE
 July 1, 2020

THROUGH END DATE
 June 30, 2023

3. The maximum amount of this Agreement is:
 \$460,800 (Four Hundred Sixty Thousand, Eight Hundred 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	3
Exhibit A, Attachment I	Program Specifications	167
Exhibit B	Budget Detail and Payment Provisions	16
Exhibit B, Attachment I	Funding Amounts	1
Exhibit C *	General Terms and Conditions (GTC 04/2017)	
Exhibit D (F)	Special Terms and Conditions - Notwithstanding provision 4.g. which does not apply to this agreement.	27
Exhibit E	Additional Provisions	4
Exhibit F	Privacy and Information Security Provisions	32

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 <https://www.dgs.ca.gov/OLS/Resources>

IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

CONTRACTOR

CONTRACTORNAME (if other than an individual, state whether a corporation, partnership, etc.)
 County of Lassen

CONTRACTOR BUSINESSADDRESS
 1445 Paul Bunyan Road, Suite B

CITY STATE ZIP
 Susanville CA 96130

PRINTED NAME OF PERSON SIGNING
 Richard Egan

TITLE
 Lassen County Administrative Officer

CONTRACTOR AUTHORIZED SIGNATURE



DATE SIGNED
 6-10-2020

SCOID:

STATE OF CALIFORNIA- DEPARTMENT OF GENERAL SERVICES _ _ _ _ _

STANDARD AGREEMENT

AGREEMENT NUMBER

PURCHASING AUTHORITY NUMBER (If Applicable)

STD 213 (Rev. 03/2019)

20-10181

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 ZIP

CA 95899

PRINTED NAME OF PERSON SIGNING

Carrie Talbot

TITLE

SSM I, Contracts Section

CONTRACTING AGENCY AUTHORIZED SIGNATURE



DATE SIGNED

6/17/2020

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL

EXEMPTION (If Applicable)

W&I Code 14087.4