STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

SCO ID: 4260-MS242511

STANDARI	D AGREEMENT	
OTD 040 /D		

STD 213 (Rev. 04/2020)

AGREEMENT NUMBER MS-2425-11

PURCHASING AUTHORITY NUMBER (If Applicable)

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

CONTRACTING AGENCY NAME

California Department of Aging

CONTRACTOR NAME

Sonoma County Area Agency On Aging

2. The term of this Agreement is:

START DATE

07/01/2024

THROUGH END DATE

06/30/2025

3. The maximum amount of this Agreement is:

\$ 1,071,200 One million, seventy-one thousand, two hundred and 00/100 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.				
E	xhibits	Title	Pages	
Exh	hibit A	Scope of Work	19 pages	
	hibit A, achment 1	General Information	1 page	
Exh	hibit B	Budget Detail and Payment Provisions	7 pages	
	hibit B, achment 1	Budget Display	1 page	
Exh	hibit C	General Terms and Conditions – GTC-4/2017*	0 pages	
Exh	hibit D	Special Terms and Conditions	34 pages	
Exh	hibit E	Additional Provisions Specific to this MSSP Agreement	7 pages	
Exh	hibit F	HIPPA Business Associates Addendum	10 pages	
Exh	hibit G	Catchment Area Zip Codes	1 page	

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

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.) Sonoma County Area Agency On Aging

CONTRACTOR BUSINESS ADDRESS 3725 Westwind Blvd, Suite 100	CITY Santa Rosa	STATE CA	ZIP 95403- 9082
PRINTED NAME OF PERSON SIGNING	TITLE		
CONTRACTOR AUTHORIZED SIGNATURE	DATE SIGNED		

STATE OF CALIFORNIA

CONTRACTING AGENCY NAME California Department of Aging CONTRACTING AGENCY ADDRESS CITY STATE ZIP 2880 Gateway Oaks Drive, Suite 200 Sacramento CA 95833 PRINTED NAME OF PERSON SIGNING TITLE Nate Gillen Chief, Business Management Bureau DATE SIGNED CONTRACTING AGENCY AUTHORIZED SIGNATURE CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL EXEMPTION (If Applicable) AG OP 80-111

