

**STANDARD AGREEMENT**

STD 213 (Rev. 10/2018)

AGREEMENT NUMBER

31024

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 Rehabilitation

CONTRACTOR NAME

El Camino Real Alliance

2. The term of this Agreement is:

START DATE

July 1, 2019

THROUGH END DATE

June 30, 2021

3. The maximum amount of this Agreement is:

\$91,564.00

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  | 1     |
| Exhibit A.1 | Contractor's Program Scope of Work                                       | 2     |
| Exhibit B   | Budget Detail and Payment Provision                                      | 4     |
| Exhibit B.1 | Contractor's Program Budget and Narrative                                | 2     |
| Exhibit C*  | General Terms and Conditions (GTC 4/2017)                                | 1     |
| Exhibit D   | Special Terms and Conditions (Attached hereto as part of this agreement) | 7     |
| Exhibit E   | Additional Provisions - Federally Funded Agreements                      | 3     |
| Exhibit F   | Additional Provisions - Cooperative/Case Service Agreements              | 3     |
| Exhibit G   | Additional Provisions - Contractor's Monitoring and Transportation       | 1     |

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.)

El Camino Real Alliance

CONTRACTOR BUSINESS ADDRESS

5440 Valley Circle Boulevard

CITY

Woodland Hills

STATE

CA

ZIP

91367

PRINTED NAME OF PERSON SIGNING

Alan Darby

TITLE

Chief Business Officer

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

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PURCHASING AUTHORITY NUMBER (if applicable)

**STATE OF CALIFORNIA**

CONTRACTING AGENCY NAME

Department of Rehabilitation

CONTRACTING AGENCY ADDRESS

721 Capitol Mall

CITY

Sacramento

STATE

CA

ZIP

95814

PRINTED NAME OF PERSON SIGNING

Cynthia Robinson

TITLE

Chief, Contracts &amp; Procurement Section

CONTRACTING AGENCY AUTHORIZED SIGNATURE

DATE SIGNED

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