		or miss

STANDARD AGREEMENT

of this agreement is:

STD. 213A (NEW 02/98)

Agreement Number

Amendment Nbr.

06-76019-000

1

1. This Agreement is entered into between the State Agency and the Contractor name below:

State Agency's Name:

Department of Mental Health

Contractor's Name:

El Dorado County Mental Health

2. The Term of this Agreement is:

July 01, 2006 through June 30, 2009

Agreement is:

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:

mendment is to add the FY 07/08 allocation to this agreement. The attached Page 51 of Exhibit B hereby replaces the previous version of this page.

One Million Five Hundred Ninety Six Thousand Eight Hundred Fifty Six Dollars And No Cents

All other Terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.) El Dorado County Mental Health		Department of General Services	
		Use Only	
BY (Authorized Signature)	DATE SIGNED	Exempt from Compliance with the Public Contract Code, the State Administrative Manual, and	
PRINTED NAME AND TITLE OF PERSON SIGNING Rusty Dupray, Chairman, Board of Supervisors		from approval by the Department of General Services per section 5775 of the Welfare and	
ADDRESS 670 Placerville Drive, Suite Placerville, CA 95667-392		Institutions code.	
STATE			
AGENCY NAME Department of	Mental Health		
BY Authorized Signature	DATE SIGNED		
PRINTED NAME AND TITLE OF PERSON SIG Stanley A. Bajorin, Deputy Procurement and Contract			
ADDRESS 1600 9th Street Sacramento, CA 95814			