AGREEMENT BETWEEN THE COUNTY OF SAN MATEO AND CLARA-MATEO ALLIANCE, INC.: 2003-04

THIS AGREEMENT, entered into this _____ day of _____ 20____, by and between the COUNTY OF SAN MATEO, hereinafter called "County," and CLARA-MATEO ALLIANCE, INC., hereinafter called "Contractor";

WITNESSETH:

WHEREAS, pursuant to Government Code, Section 31000, County may contract with independent contractors for the furnishing of such services to or for County or any Department thereof;

WHEREAS, it is necessary and desirable that Contractor be retained for the purpose of providing emergency housing and support services for mental health clients as described in Exhibit A, attached hereto and incorporated by reference herein. Such services shall be provided in a professional and diligent manner.

NOW, THEREFORE, IT IS HEREBY AGREED BY THE PARTIES HERETO AS FOLLOWS:

1. Exhibits.

The following exhibits are attached hereto and incorporated by reference herein:

Exhibit A—Services Exhibit B—Payments and rates Attachment I—§504 Compliance

2. Services to be performed by Contractor.

In consideration of the payments set forth herein and in Exhibit B, Contractor shall perform services for County in accordance with the terms, conditions and specifications set forth herein and in Exhibit "A."

3. Payments.

In consideration of the services provided by contractor in accordance with all terms. conditions and specifications set forth herein and in Exhibit "A", County shall make payment to Contractor based on the rates and in the manner specified in Exhibit "B." The County reserves the right to withhold payment if the County determines that the quantity or quality of the work performed is unacceptable. In no event shall the County's total fiscal obligation under this contract exceed ONE HUNDRED FOURTEEN THOUSAND FOUR HUNDRED FORTY-NINE DOLLARS (\$114,449).

4. <u>Term and Termination.</u>

Subject to compliance with all terms and conditions, the term of this Agreement shall be from July 1, 2003, through June 30, 2004.

This Agreement may be terminated by Contractor, the Director of Health Services or his/her designee at any time without a requirement of good cause upon thirty (30) days' written notice to the other party.

In the event of termination, all finished or unfinished documents, data, studies, maps, photographs, reports, and materials (hereafter referred to as materials) prepared by Contractor under this Agreement shall become the property of the County and shall be promptly delivered to the County. Upon termination, the Contractor may make and retain a copy of such materials. Subject to availability of funding, Contractor shall be entitled to receive payment for work/services provided prior to termination of the Agreement. Such payment shall be that portion of the full payment which is determined by comparing the work/services completed to the work/services required by the Agreement.

5. Availability of Funds.

The County may terminate this Agreement or a portion of the services referenced in the Attachments and Exhibits based upon unavailability of Federal, State or County funds, by providing written notice to Contractor as soon as is reasonably possible after the county learns of said unavailability of outside funding.

6. <u>Relationship of Parties.</u>

Contractor agrees and understands that the work/services performed under this Agreement are performed as an independent Contractor and not as an employee of the County and that Contractor acquires none of the rights, privileges, powers or advantages of County employees.

7. Hold Harmless.

Contractor shall indemnify and save harmless County, its officers, agents, employees, and servants from all claims, suits, or actions of every name, kind and description, brought for, or on account of: (A) injuries to or death of any person, including Contractor, or (B) damage to any property of any kind whatsoever and to whomsoever belonging, (C) any sanctions, penalties or claims of damages resulting from Contractor's failure to comply with the requirements set forth in the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and all Federal regulations promulgated thereunder, as amended, or (D) any other loss or cost, including but not limited to that caused by the concurrent active or passive negligence of County, its officers, agents, employees, or servants, resulting from the performance of any work required of Contractor or payments made pursuant to this Agreement, provided that this shall not apply to injuries or damage for which County has been found in a court of competent jurisdiction to be solely liable by reason of its own negligence or willful misconduct.

The duty of Contractor to indemnify and save harmless as set forth herein, shall include the duty to defend as set forth in Section 2778 of the California Civil Code.

8. Assignability and Subcontracting

Contractor shall not assign this Agreement or any portion thereof to a third party, or subcontract with a third party to provide services required by contractor under this Agreement without the prior written consent of County. Any such assignment or subcontract without the county's prior written consent shall give County the right to automatically and immediately terminate this Agreement.

9. <u>Insurance</u>.

The Contractor shall not commence work or be required to commence work under this Agreement unless and until all insurance required under this paragraph has been obtained and such insurance has been approved by the County Manager, and Contractor shall use diligence to obtain such issuance and to obtain such approval. The Contractor shall furnish the County Manager with certificates of insurance evidencing the required coverage, and there shall be a specific contractual liability endorsement extending the Contractor's coverage to include the contractual liability assumed by the Contractor pursuant to this Agreement. These certificates shall specify or be endorsed to provide that thirty (30) days' notice must be given, in writing, to the County Manager of any pending change in the limits of liability or of any cancellation or modification of the policy.

- (1) Worker's Compensation and Employer's Liability Insurance. The Contractor shall have in effect during the entire life of this Agreement Workers' Compensation and Employer's Liability Insurance providing full statutory coverage. In signing this Agreement, the Contractor certifies, as required by Section 1861 of the California Labor Code, that it is aware of the provisions of Section 3700 of the California Labor Code which requires every employer to be insured against liability for Worker's Compensation or to undertake selfinsurance in accordance with the provisions of the Code, and 1 will comply with such provisions before commencing the performance of the work of this Agreement.
- (2) <u>Liability Insurance.</u> The Contractor shall take out and maintain during the life of this Agreement such Bodily Injury Liability and Property Damage Liability Insurance as shall protect him/her while performing work covered by this Agreement from any and all claims for damages for bodily injury, including accidental death, as well as any and all claims for property damage which may arise from contractors operations under this Agreement, whether such operations be by himself/herself or by any sub-contractor or by anyone directly or indirectly employed by either of them. Such insurance shall be combined single limit bodily injury and property damage for each occurrence and shall be not less than the amount specified below.

Such insurance shall include:

(a)	Comprehensive General Liability	\$1,000,000
(b)	Motor Vehicle Liability Insurance	\$1,000,000
(C)	Professional Liability	\$1,000,000

County and its officers, agents, employees and servants shall be named as additional insured on any such policies of insurance, which shall also contain a provision that the insurance afforded thereby to the County, its officers, agents, employees and servants shall be primary insurance to the full limits of liability of the policy, and that if the County or its officers and employees have other insurance against the loss covered by such a policy, such other insurance shall be excess insurance only.

In the event of the breach of any provision of this section, or in the event any notice is received which indicates any required insurance coverage will be diminished or canceled, the County of San Mateo at its option, may, notwithstanding any other provision of this Agreement to the contrary, immediately declare a material breach of this Agreement and suspend all further work pursuant to this Agreement.

10. Compliance with laws; payment of Permits/Licenses.

All services to be performed by Contractor pursuant to this Agreement shall be performed in accordance with all applicable federal, state, county, and municipal laws, including, but not limited to, Health Insurance Portability and Accountability Act of 1996 (HIPAA) and all Federal regulations promulgated thereunder, as amended, and the Americans with Disabilities Act of 1990, as amended, and Section 504 of the Rehabilitation Act of 1973, as amended and attached hereto and incorporated by reference herein as Attachment I, which prohibits discrimination on the basis of handicap in programs and activities receiving any federal or county financial assistance. Such services shall also be performed in accordance with all applicable ordinances and regulations, including, but not limited to, appropriate licensure, certification regulations, provisions pertaining to confidentiality of records, and applicable quality assurance regulations.

In the event of a conflict between the terms of this Agreement and state, federal, county or municipal law or regulations, the requirements of the applicable law will take precedence over the requirements set forth in this Agreement.

Contractor will timely and accurately complete, sign, and submit all necessary documentation of compliance.

11. Non-Discrimination.

- A. Section 504 applies only to Contractors who are providing services to members of the public. Contractor shall comply with § 504 of the Rehabilitation Act of 1973, which provides that no otherwise qualified handicapped individual shall, solely by reason of a disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination in the performance of this contract (this paragraph needed only if services provided to members of the public).
- B. General non-discrimination. No person shall, on the grounds of race, color, religion, ancestry, gender, age (over 40), national origin, medical condition (cancer), physical or mental disability, sexual orientation, pregnancy, childbirth or related medical condition, marital status, or political affiliation be denied any benefits or subject to discrimination under this Agreement.
- C. Equal employment opportunity. Contractor shall ensure equal employment opportunity based on objective standards of recruitment, classification, selection, promotion, compensation, performance evaluation, and management relations for all employees under this Agreement. Contractor's equal employment policies shall be made available to County of San Mateo upon request.
- D. Violation of Non-discrimination provisions. Violation of the non-discrimination provisions of this Agreement shall be considered a breach of this Agreement and subject the Contractor to penalties, to be determined by the County Manager, including but not limited to
 - i) termination of this Agreement;
 - ii) disqualification of the Contractor from bidding on or being awarded a County contract for a period of up to 3 years;
 - iii) liquidated damages of \$2,500 per violation;
 - iv) imposition of other appropriate contractual and civil remedies and sanctions, as determined by the County Manager.

To effectuate the provisions of this section, the County Manager shall have the authority to examine Contractors employment records with respect to compliance with this paragraph and/or to set off all or any portion of the amount described in this paragraph against amounts due to Contractor under the Contract or any other Contractor between Contractor and County.

Contractor shall report to the County Manager the filing by any person in any court of any complaint of discrimination or the filing by any person of any and all charges with the Equal Employment Opportunity Commission, the Fair Employment and Housing Commission or any other entity charged with the investigation of allegations within 30 days of such filing, provided that within such 30 days such entity has not notified Contractor that such charges are dismissed or otherwise unfounded. Such notification shall include the name of the complainant, a copy of such complaint and a description of the circumstance. Contractor shall provide County with a copy of their response to the Complaint when filed.

E. Compliance with Equal Benefits Ordinance. With respect to the provision of

employee benefits, Contractor shall comply with the County Ordinance which prohibits contractors from discriminating in the provision of employee benefits between an employee with a domestic partner and an employee with a spouse.

F. The Contractor shall comply fully with the non-discrimination requirements required by 41 CFR 60-741.5(a), which is incorporated herein as if fully set forth.

12. <u>Retention of Records.</u>

Contractor shall maintain all required records for three years after the County makes final payment and all other pending matters are closed, and shall be subject to the examination and/or audit of the County, a Federal grantor agency, and the State of California.

13. Merger Clause.

This Agreement, including the Exhibits attached hereto and incorporated herein by reference, constitutes the sole Agreement of the parties hereto and correctly states the rights, duties, and obligations of each party as of this document's date. Any prior agreement, promises, negotiations, or representations between the parties not expressly stated in this document are not binding. All subsequent modifications shall be in writing and signed by the parties.

14. Controlling Law.

The validity of this Agreement and of its terms or provisions, as well as the rights and duties of the parties hereunder, the interpretation and performance of this Agreement shall be governed by the laws of the State of California.

15. Notices.

Any notice, request, demand or other communication required or permitted hereunder shall be deemed to be properly given when deposited in the United State mail, postage prepaid, or when deposited with a public telegraph company for transmittal, charges prepaid, addressed to:

In the case of County, to:

San Mateo County Mental Health Services Division 225 – 37th Avenue San Mateo, CA 94403

In the case of Contractor, to:

Clara-Mateo Alliance, Inc. 795 Willow Road Building 323-D Menlo Park, CA 94025

IN WITNESS WHEREOF, the parties hereto, by their duly authorized representatives, have affixed their hands.

COUNTY OF SAN MATEO

By:_____

Rose Jacobs Gibson, President Board of Supervisors San Mateo County

Date:

ATTEST:

By:__ Clerk of Said Board

CLARA-MATEO ALLIANCE, INC.

Contractor's Signature

Date: 11-13-2003

Long Form Agreement/Non Business Associate

Exhibit "A" CLARA-MATEO ALLIANCE, INC.: 2003-04

In consideration of the payments set forth in Exhibit "B", Contractor shall provide the following services:

I. SERVICES

- A. Transitional Housing and Emergency Shelter Services
 - 1. For the period July 1, 2003 through December 31, 2003 Contractor shall provide five (5) transitional beds per night; and should emergency shelter beds be available, on an as needed basis, three (3) emergency shelter beds per night.
 - For the period January 1, 2004 through June 30, 2004: Should emergency shelter and/or transitional beds be available, County has the option to purchase on an as-needed basis up to three (3) emergency shelter beds per night, and up to five (5) transitional beds per night.
 - 3. Such beds shall be provided twenty-four (24) hours a day, seven (7) days a week for short-term housing for mentally ill clients who do not require care and supervision as defined by Section 80001 (a) (10) of Title 22 of Community Care Licensing Regulations. In addition to providing emergency shelter and transitional housing, Contractor shall collaborate with other public and private services and resources to assist these clients in finding permanent housing and securing other basic needs. Clients shall be assisted in securing medical, psychiatric, and social services as needed.
 - 4. Contractor shall accept referrals from Mental Health Services Division Monday through Friday, 9 AM to 4 PM.
 - 5. Contractor shall admit only those clients who meet the following criteria:
 - a. Have a primary psychiatric diagnosis;
 - b. Are homeless according to the definition of the US
 - Department of Housing and Urban Development;
 - c. Are medically and psychiatrically stable;
 - d. Are able and willing to live cooperatively in a structured group setting with rules and requirements;
 - e. Are clear of tuberculosis;

- f. Are compliant and capable of taking medications as prescribed by a physician; and
- g. Are capable and committed to substance free living and willing to submit to random drug testing.
- 6. Contractor shall exclude individuals from admission who:
 - a. Have a continued use of housing and treatment resources without lasting periods of success;
 - b. Have demonstrable history of violence and/or disruption that would be destructive and/or unsafe in a structured group living environment;
 - c. Have a history of child molestation, sexual offenses, violent sexual offenses, and/or violent crimes;
 - d. Are non-compliant with treatment and medications;
 - e. Are on methadone maintenance ("Take Homes"); and/or
 - f. Other individuals whose behavior is deemed inappropriate for the cooperative structured group living environment provided by Clara-Mateo Alliance.
- 7. Among clients eligible for emergency shelter and transitional housing, who meet the criteria as specified in Paragraph I.A.5 of this Exhibit A. Contractor shall give priority for beds on a space-available basis in the following order:
 - a. Options Project (Mentally III Offender Crime Reduction grant) clients;
 - b. Individuals from Unit 3A/B of the San Mateo Medical Center;
 - c. Individuals from Psychiatric Emergency Services (PES) of the San Mateo Medical Center;
 - d. Individuals from Cordilleras Mental Health Rehabilitation Center.
- 8. For each individual referred for admission to the shelter, Contractor in cooperation with the Mental Health Services Division staff will complete the Clara-Mateo Alliance Shelter Intake form.
- 9. Contractor will evaluate the client's financial and benefit status, as well as eligibility for other services and/or resources, and initiate benefits as appropriate.
- 10. At least two (2) Contractor staff persons shall be on duty at the Clara-Mateo shelter at all times, twenty-four (24) hours per day.

11. Contractor shall provide separate sleeping quarters, showers and toilets for men and women. Communal space will include kitchen facilities, laundry room, living room, and recreation area. Accessibility shall be provided to the handicapped, and a sprinkler system shall be included throughout the shelter.

II. RECORDS AND ADMINISTRATIVE REQUIREMENTS

- A. Paragraph 12 of the Agreement and Paragraph I.K.3 of Exhibit B notwithstanding, Contractor shall maintain medical records required by the California Code of Regulations. Notwithstanding the foregoing, Contractor shall maintain beneficiary medical and/or clinical records for a period of seven (7) years, except that the records of persons under age eighteen (18) at the time of treatment shall be maintained: a) until one (1) year beyond the person's eighteenth (18th) birthday; or b) for a period of seven (7) years beyond the date of discharge, whichever is later.
- B. Contractor shall submit a copy of any licensing report issued by licensing agency to the Deputy Director of Adult Services, Mental Health Services Division, within three (3) days from date received.
- C. Contractor agrees to administer/utilize any and all survey instruments as directed by the County Mental Health Services Division, including outcomes and satisfaction measurement instruments.
- D. Contractor shall provide all pertinent documentation required for federal Medi-Cal reimbursement (including initial and quarterly notices, assessment and service plans, and progress notes).
- E. Contractor shall complete all State evaluation requirements.
- F. Contractor shall maintain certification through San Mateo County to provide Short-Doyle Medi-Cal reimbursable services.

- G. Contractors providing federally funded health services may not employ any persons deemed an Ineligible Person by the Office of the Inspector General in the provision of services for the County through this Agreement. Any employee(s) of contractor determined to be an Ineligible Person will be removed from responsibility for, or involvement with County clients or operations. An "Ineligible Person" is an individual who (1) is currently excluded, suspended, debarred or otherwise ineligible to participate in Federal health care programs, or (2) has been convicted of a criminal offense related to the provision of health care items or services and has not been reinstated in the Federal health care programs after a period of exclusion, suspension, debarment or ineligibility.
- H. Contractor shall submit to County the cultural composition of Contractor's staff in the third (3rd) quarter of the contract year.

III. GOALS AND OBJECTIVES

Contractor shall ensure that the following outcome objectives are pursued throughout the term of this Agreement:

- Goal 1: Contractor shall increase the independence of clients by assisting them in accessing any and all necessary support services (e.g., financial assistance, housing, medical/psychiatric services, etc.) to facilitate a higher level of self-efficiency.
- Objective 1: A minimum of seventy percent (70%) of clients admitted to Clara-Mateo Shelter shall obtain permanent or transitional housing upon discharge or receive a discharge plan.
- Objective 2: At least eighty percent (80%) of all clients shall receive a minimum of two (2) rehabilitation services (exclusive of medication support services) during their stay at Clara-Mateo Shelter.
- Objective 3: Ninety-five percent (95%) of all clients who remain in Clara-Mateo Shelter beyond three (3) days shall have a written "Clara-Mateo Alliance Shelter Service Plan."
- Goal 2: Contractor shall maintain a positive satisfaction response from clients served at the Clara-Mateo Shelter.
- Objective 1: One hundred percent (100%) of all clients who remain in the shelter beyond fourteen (14) days shall participate in the "Clara-Mateo Alliance Client-Shelter Evaluation."

Exhibit "B" CLARA-MATEO ALLIANCE, INC.: 2003-04

In consideration of the services provided by Contractor in Exhibit "A", County shall pay Contractor based on the following fee schedule:

I. PAYMENTS

- A. For the period July 1, 2003 through December 31, 2003:
 - County shall be obligated to pay FORTY THOUSAND FOUR HUNDRED EIGHTY DOLLARS (\$40,480) for a total of five (5) transitional beds per night as described in Exhibit A. The rate of payment shall be one-sixth (1/6) of the total obligation per month for the period July 1, 2003 through December 31, 2003, or SIX THOUSAND SEVEN HUNDRED FORTY-SIX DOLLARS AND SIXTY-SEVEN CENTS (\$6,746.67) per month.
 - 2. Should emergency shelter beds be available, County has the option to purchase, on an as-needed basis, up to three (3) emergency shelter beds at the rate of THIRTY DOLLARS AND NINETY CENTS (\$30.90) per bed per night. Contractor shall invoice County on a monthly basis for these shelter beds. In no event shall County pay or be obligated to pay Contractor more than the sum of SEVENTEEN THOUSAND FIFTY-SEVEN DOLLARS (\$17,057) for three (3) emergency shelter beds for the period July 1, 2003 through December 31, 2003.
- B. For the period January 1, 2004 through June 30, 2004: Should emergency shelter or transitional beds be available, County has the option to purchase on an as-needed basis up to three (3) emergency shelter beds at the rate of THIRTY DOLLARS AND NINETY CENTS (\$30.90) per bed per night, and up to five (5) transitional beds at the rate of FORTY-FOUR DOLLARS (\$44) per bed per night. Contractor shall invoice County on a monthly basis for these emergency shelter and/or transitional beds. In no event shall County pay or be obligated to pay Contractor more than the sum of FIFTY-SIX THOUSAND NINE HUNDRED TWELVE DOLLARS (\$56,912) for three (3) emergency shelter beds and five (5) transitional beds for the period January 1, 2004 through June 30, 2004.
- C. In any event, the maximum amount County shall be obligated to pay for services rendered under this Agreement shall not exceed ONE HUNDRED FOURTEEN THOUSAND FOUR HUNDRED FORTY-NINE DOLLARS (\$114,449).

- D. Contractor's annual 2003-2004 budget is attached and incorporated into this Agreement as Exhibit C.
- E. The Director of Health Services or her designee may execute minor amendments and adjustments to this Agreement, up to an aggregate of \$25,000 for the term of the Agreement.
- F. In the event that funds provided under this Agreement are expended prior to the end of the contract period, Contractor shall provide ongoing services under the terms of this Agreement through the end of the contract period without further payment from County.
- G. In the event this Agreement is terminated prior to January 1, 2004, Contractor shall be paid on a prorated basis for only that portion of the contract term during which Contractor provided services pursuant to this Agreement. Such billing shall be subject to the approval of the Director.
- H. Contractor shall submit to County a year-end cost report no later than ninety (90) days after the expiration date of this Agreement. This report shall be in accordance with the principles and format outlined in the Cost Reporting/Data Collection (CR/DC) Manual. Contractor shall have its books of accounts audited annually by a Certified Public Accountant and a copy of said audit report shall be submitted along with the Cost Report. If Contractor has received more than THREE HUNDRED THOUSAND DOLLARS (\$300,000) in federal funds for the fiscal year, the audit must meet the requirements of the Federal Single Audit Act and OMB Circular A-133.
- 1. In the event Contractor claims or receives payment from County for a service, reimbursement for which is later disallowed by County or the State of California or the United States Government, then Contractor shall promptly refund the disallowed amount to County upon request, or, at its option, County may offset the amount disallowed from any payment due or become due to Contractor under this Agreement or any other agreement.
- J. Monthly Invoice Reporting
 - 1. Payment by County to Contractor shall be monthly. Contractor shall bill County on or before the tenth (10th) working day of each month for the prior month. All claims shall clearly reflect and, in reasonable detail, give information regarding the services for which claim is made.

- 2. Each month Contractor will provide a written summary of services rendered each such month ("Summary"). The Summary shall include names of clients, registration information, admit and discharge information, units of service, type of housing provided, and other evaluative information as requested by County. Such Summary will accompany the invoice described above. The Summary shall become incorporated into an annual (fiscal year-end) report which shall include such information as the Director requires to permit reporting, monitoring, and evaluation of Contractor's program pursuant to this Agreement.
- 3. Contractor will include with each invoice the following statement: "I hereby certify that the above claim for service complies with all terms and conditions referenced in the Agreement with San Mateo County." Such statement will be signed by Contractor.
- K. Contractor shall comply with the following requirements in the provision of mental health services.
 - 1. Contractor shall comply with all state and federal statutory and regulatory requirements for certification of claims, including Title 42, Code of Federal Regulations (CFR) Part 438, Sections 438.604, 438.606, and, as effective August 13, 2003, Section 438.608, as published in the June 14, 2002 Federal Register (Vol. 67, No. 115, Page 41112), which are hereby incorporated by reference.
 - 2. Contractor shall certify to the County, in writing under penalty of perjury, for each monthly claim when submitted to the County for reimbursement. The certification shall attest to the following for each beneficiary with services included in the claim:
 - a. An assessment of the beneficiary was conducted in compliance with the requirements established in this Agreement.
 - b. The beneficiary was eligible per this Agreement to receive services at the time the services were provided to the beneficiary.
 - c. The services included in the claim were actually provided to the beneficiary.
 - d. Medical necessity was established for the beneficiary as defined under California Code of Regulations, Title 9, Division 1, Chapter 11, for the service or services provided, for the timeframe in which the services were provided.

- e. A client plan was developed and maintained for the beneficiary that met all client plan requirements established in this Agreement.
- f. For each beneficiary with (day rehabilitation / day treatment intensive / EPSDT supplemental specialty mental health services) included in the claim, all requirements for Contractor payment authorization for (day rehabilitation / day treatment intensive / EPSDT supplemental specialty mental health services) were met, and any reviews for such service or services were conducted prior to the initial authorization and any reauthorization periods as established in this Agreement.
- g. Services are offered and provided without discrimination based on race, religion, color, national or ethnic origin, sex, age, or physical or mental disability.
- 3. Except as provided in Paragraph II.A. of Exhibit A relative to medical records, Contractor agrees to keep for a minimum period of three years from the date of service a printed representation of all records which are necessary to disclose fully the extent of services furnished to the client. Contractor agrees to furnish these records and any information regarding payments claimed for providing the services, on request, within the State of California, to the California Department of Health Services; the Medi-Cal Fraud Unit; California Department of Mental Health; California Department of Justice; Office of the State Controller; U.S. Department of Health and Human Services, Managed Risk Medical Insurance Board or their duly authorized representatives, or the County.
- L. If the annual Cost Report provided to County shows that total payment to Contractor exceed the total actual costs for all of the services rendered by Contractor to eligible patients during the reporting period, a single payment in the amount of the contract savings shall be made to County by Contractor, unless otherwise authorized by the Director of Health Services or her designee. By mutual agreement of County and Contractor, contract savings or "rollover" may be retained by Contractor and expended the following year, provided that these funds are expended for mental health services approved by County and are retained in accordance with Paragraph I.M. of this Exhibit B.
- M. Contractor may rollover unspent funding from the County according to the following procedures.

- 1. Contractor shall submit a summary calculation of any savings 90 days after end of the fiscal year. The summary calculation will be a separate report from the year-end cost report. With the summary calculation Contractor shall return the amount of the savings.
- 2. At the time of the submission of the summary calculation. Contractor may request to rollover some or all of any savings. The request must be made in writing to the Director of Mental Health Services or her designee. The request shall identify specifically how the rollover funds will be spent, including a detailed budget. Savings shall not be spent until Contractor receives a written approval of the request. Approved rollover funds shall be spent only for the succeeding fiscal year and only for the specific purpose(s) requested and approved.
- 3. Contractor shall submit an accounting report of the rollover savings. This report shall include copies of the detailed expenses. The report is due 90 days after the specific purpose has been completed, or 90 days after the end of the fiscal year, whichever comes first. Any unspent rollover funds shall be returned to the County with the accounting report.
- 4. If the specific purpose is not yet complete as of the end of the first succeeding fiscal year, contractor may make subsequent request(s) to rollover the unspent funds to the succeeding fiscal year(s) by submitting a written request with the accounting report. The unspent rollover funds shall not be spent until the Director of Mental Health Services or her designee approves the request.
- 5. A final accounting of the rollover funds shall be submitted 90 days after the specific purpose has been completed, or 90 days after the end of the fiscal year in which rollover funds are spent, whichever comes first. Any unspent rollover funds shall be returned to the County with the accounting report.
- N. Where discrepancies between costs and charges are found on the Cost Report to County, Contractor shall make a single payment to County when the total charges exceed the total actual costs for all of the services rendered to eligible patients during the reporting period. Likewise, a single payment shall be made to Contractor by County when the total actual costs exceed the total charges made for all of the services rendered to eligible patients during the reporting period and shall not exceed the total amount in Paragraph I.C of this Exhibit B.

O. If County finds that performance is inadequate, a meeting may be called to discuss the causes for the performance problem, and this Agreement may either be renegotiated, allowed to continue to end of term, or terminated, subject to the provisions of Paragraph 4, of this Agreement. Any unspent monies due to performance failure may reduce the following year's agreement.

Exhibit C Clatta-Mateo Alliance, Inc. BUDGET 03/04

ncome	Total
Foundations	
Atkinson Foundation 02-03	5,00
Cisco Foundation	15,00
John & Marcia Goldman Fund	30,00
Peninsula Com. Foundation-Dental	19,23
PCF-Donor Advise Fund	20,00
Sobrato Fundation	25,00
Packard Found Gen'l ESC 150K	145,00
Packard Fdn Gen Oper ESC 170K	57,37
Packard Found 2 vt 125K	62,50
Palo Alto Weekly Holiday Fund	1 7.50
Misc. Foundations	90,00
Total Foundations	476,60
Government Grants and Contracts	
Government Grant Revenue	
City of Menlo Park	3,20
City of Mountain View - Family	5,000
City of Mountain View - Shelter	2.00
City of Palo Alto -Rehab	200,000
City of Palo Alto - Family	20,00
City of Palo Alto - Shelter	25,00
City of Palo Alto - HSRAP	18,12
City of Redwood City	20,00
City of San Jose	50,000
City of San Jose - Kitchen rehab	50,00
City of Sunnyvale County of San Mateo CDBG/ESG	5,000
SMC Health Care for the Homeless	
	167,100
County of San Mateo-Optns	122,93
HUD SoSMC Women	74,07
HUD NoSCC Collab	199,10
HUD - Family Trans	132,74
HUD - El Paseo	· · · · · · · · · · · · · · · · · · ·
HUD - Murphy Ranch	(
First Comm Hsg	(
FEMA-San Mateo	25,000
FEMA-Santa Clara	6,25
VA Grants & Per Diem	341,05
Food Stamp Program	17,592
Total Gov't Grants/Contracts	1,504,190
Donations	
Holiday Mail	14-52 (2014 1-50,000
Individual Donations	25,000
Anonymous Donations	20
Board Contributions	2.97
Board Refreshment Fund	5
Corporate Donations	1,61
Combined Federal Campn-Bay Area	
Human Race Another Way Canister Program	500
ABOLICE WAY CADISTEE PROPRATE	2,25
	1 725
Faith Based Donations	
Faith Based Donations Total Donations	
Faith Based Donations Total Donations CMA Related Income	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center	92,740 8,770 933
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections	92,74 8,77 93 1,25 87 94
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes	92,74 8,774 933 1,254 874 943 744
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections	92,74 8,77 93 1,25 87 94 744 7,37
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes	92,74 8,77 93 1,25 87 94 744 7,37
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income	92,74 8,77 93 1,25 87 94 74 7,37 1,62
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income	92,74 8,77 93; 1,25 87 94; 744 7,371 1,62
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees	92,74 8,77 93; 1,25 87 94; 74 74 7,37 1,62 44
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits	92,74 8,77 93: 1,25 87 94: 744 7,37 1,62 0 444 66,80
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter	92,74 8,77 93; 1,25 87 94; 744 7,371 1,62 0 444 66,80 39,01;
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees	92,74 8,77 93; 1,25 87; 94; 744 7,371 1,62 0 444 66,80 39,01; 4,69;
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees Money Management Income	92,74 8,77 93 1,25 87 94 744 7,371 1,62 0 444 66,80 39,01 1,69 0 0 0 0 0 0 0 0 0 0 0 0 0
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees Money Management Income Bank Interest & Dividend	92,74 8,77 93; 1,25 87; 94; 744 7,37 1,62 444 66,80 39,01 4,69; 47;
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees Money Management Income Bank Interest & Dividend Other Income	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees Money Management Income Bank Interest & Dividend Other Income Anonymous Donations	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees Money Management Income Bank Interest & Dividend Other Income Anonymous Donations Sale of Donated Items	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center ESC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees - Shelter Family Transitional Program Fees Money Management Income Bank Interest & Dividend Other Income Anonymous Donations Sale of Donated Items Total CMA Related Income	92,74
Faith Based Donations Total Donations CMA Related Income ESC - El Centro ESC - Family Support Center PSC - Co of SM HSA ESC - Mayview Clinic ESC - Family Connections VTA Bus Passes Vending Income Laundry Income Program Fees Rent & Key Deposits Program Fees - Shelter Family Transitional Program Fees Money Management Income Bank Interest & Dividend Other Income Anonymous Donations Sale of Donated Items	92,74

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Clara-Mateo Alliance, Inc. BUDGET 03-04

· _-

	Total
Expenditures	
Salaries & Wages	757,96
Payroli Taxes	76,52
Employee Benefits - Medical	51,46
Employee Benefits - Dental	4,93
Employee Benefits - Life Ins.	1,15
Employee Benefits-Vacation	6,16
Advertising	79
Another Way - Expenses	1,92
Bank Charges	48
Credit Card Processing Fee	28
Bus Passes i	55
Canteen Expenses	2,36
Cell Phones	2,36
Cleaning/Janitorial Services	10,75
Clinical Services	137,39
Computer Repairs/Maintenance	7,28
Consultants	70,91
Contingency	25,00
Depreciation Expense	
Leasehold Amortization Expense	35,00
Design	59
Donation Expenses	6
Drug Testing	4,71
Entertainment	2,00
Equipment Rent	11,08
Equipment Repairs & Maint ! Executive Training	4,67
Staff Training	2,90
Facility Maintenace	7,53
Facility Rent	312,20
Garbage Pickup	512,20
Graceries	
Insurance - Auto	5,63
Insurance - D&O	37
Insurance - Package	
Insurance - Umbrella	63
Insurance - Professional	1,14
Insurance - Workers Comp	59,83
Janitorial Supplies	16,82
Late Fees	
Laundry	2,88
License & Permits	
Meals	77,54
Memberships	2,53
Mileage	28
Miscellaneous	4,29
Office Supplies	16,82
Parking/Tolls	25
Payroll Processing Fees	3,00
Postage	3,04
Printing	5,94
Professional Development	1,87
Promotion & Fund Raising	57
Returns	72
Seminar & Conferences	58
Services - Other	81,46
Smali Tools & Equipment	2,60
Small Software	
Stipends for Student Interns	
Subscriptions	18
Supplies	2.47
Techincal Expenses	
Telephone	35,54
Travel	3
Vehicle Expenses	1,96
Volunteer Coordinator Activities	24
	4
Web / Internet Expenses	21

11/13/2003 4:09 PM

Attachment I

(Required only from Contractors who provide services directly to the Public on County's behalf.)

Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, as Amended

The undersigned (hereinafter called the "Contractor(s)") hereby agrees that it will comply with Section 504 of the Rehabilitation Act of 1973, as amended, all requirements imposed by the applicable DHHS regulation, and all guidelines and interpretations issued pursuant thereto.

The Contractor(s) gives/give this assurance in consideration of and for the purpose of obtaining contracts after the date of this assurance. The Contractor(s) recognizes/recognize and agrees/agree that contracts will be extended in reliance on the representations and agreements made in this assurance. This assurance is binding on the Contractor(s), its successors, transferees, and assignees, and the person or persons whose signatures appear below are authorized to sign this assurance on behalf of the Contractor(s).

The Contractor(s): (Check a or b)

a. () employs fewer than 15 persons.

b. () employs 15 or more persons and, pursuant to Section 84.7 (a) of the regulation (45 C.F.R. 84.7 (a)), has designated the following person(s) to coordinate its efforts to comply with the DHHS regulation.

Bill	George	
	Name of 504 Person - Type or Print	

Clara-Mateo Alliance, Inc.	795 Willow Road Building 323-D			
Name of Contractor(s) - Type or Print	Street Address or PO Box			
Menlo Park	CA	94025_		
City	State	Zip Code		

I certify that the above information is complete and correct to the best of my knowledge.

<u>Unreading</u> <u>marine deal</u> Signature and Title of Authorized Official

*Exception: DHHS regulations state that:

"If a recipient with fewer than 15 employees finds that, after consultation with a handicapped person seeking its services, there is no method of complying with (the facility accessibility regulations)...other than making a significant alteration in its existing facilities, the recipient may, as an alternative, refer the handicapped person to other providers of those services that are accessible."

COUNTY OF SAN MATEO

Equal Benefits Compliance Declaration Form

I Vendor Identification

Name of Contractor:	Clara-Mateo Alliance, Inc.				
Contact Person:	Norman Robinson				
Address: 795 Willow Road, Building					
	Menlo Park, CA 940	25	·····		
Phone Number:	650-853-7065	Fax Number:	650-853-7083		

II Employees

Does the Contractor have any employe	es? <u>X</u> Yes _	No
--------------------------------------	--------------------	----

Does the Contractor provide benefits to spouses of employees? ___Yes $\underline{\times}$ No

If the answer to one or both of the above is no please skip to Section IV.

Ill Equal Benefits Compliance (Check one)

- Yes, the Contractor complies by offering equal benefits, as defined by Chapter 2.93, to its employees with spouses and its employees with domestic partners.
- □ Yes, the Contractor complies by offering a cash equivalent payment to eligible employees in lieu of equal benefits.
- □ No, the Contractor does not comply.
- The Contractor is under a collective bargaining agreement which began on (date) and expires on _____ (date).

IV Declaration

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that I am authorized to bind this entity contractually.

Executed this <u>13</u> day of <u>Accendice</u>	_, 2003 at <u>Mendo Pack</u> (City)	, <u>(</u> . (State)
- Muuuu Xal	NORMAN W. Robin Name (Please	the second s
Sontinem Ence Il i		

COUNTY OF SAN MATEO

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HEALTH SERVICES ADMINISTRATION

MEMORANDUM

DATE: September 26, 2003

TO: Priscilla Morse, Risk Management/Insurance Division

FROM: Liz Kauk, Mental Health Services/PONY #MLH 322

CONTRACTOR:

Clara-Mateo Alliance, Inc.

DO THEY TRAVEL: Yes

PERCENT OF TRAVEL TIME:

NUMBER OF EMPLOYEES: Yes

DUTIES (SPECIFIC): See attached

COVERAGE:

Comprehensive General Liability: Motor Vehicle Liability: Professional Liability: Worker's Compensation: \$<u>1,000,000</u> <u>\$1,000,000</u> \$<u>1,000,000</u> \$<u>Yes</u>

WAIVE

MODIFY

REMARKS/COMMENTS:

mull se

SIGNATURE

G: mhmaryandkaren/InsuranceApprovalPriscillaHarris

STATE 0807 PO BOX 807-SAN FRANCISCO CA 94 42 EUND CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

COUNTY, OF SAN MATEO 262 HARBOR, BLVD, IBLDG A BELMONTPCA 94002 1 1

10-04-2003

Silv. 1 his JS-10, centring that we have issued a valid, workers. Compensation instituance policy in a all openades many for the employer named (below for the Dolicy period Jou

ou. 10 reaves advance apolice should shist policy be cancelled to not to its hormal ex Instrentineate. Orgination of the coverage of the policy and does not among restand or siter the coverage by the policies risted therein. Notwithstanding any requirement, term to condition of cary contract of other with respect to which this contificate of province may be usued or may perfain the instractory attrock other of lices described, hereinais, subject to all the terms seadly instractory and conditions of the coverage of lices described, hereinais, subject to all the terms seadly instractory and conditions of the coverage of the second coverage.

HORIZED REPRESENTATIVE EMPLOYER S. LLABILITY LIMIT INCLUDING DEFENSE COSTS 51,000,000,00 PER DCCURRENCE

MP-OYER

CLARA MATEO ALLIANCE 795 WILLOW RD # 323-D MENLO PARK CA 94025

ROUT ROLICY/NUMBER 71569143-2003 CERTIFICATE NOT 77 8 ATE EXERES 40-01-2004 (30-01-2003/40-01-2004)

THOLDER COP

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14 z C -Io cancellation by the Fund except upon 10 days advance, wetter no her

> at for dea this ith Name C. Of

LEGAL NAME

CLARA MATEO ALL IANCE (A NON PROFIT PUBLIC BENEFIT CORP)

09-17-2003

—	ACORD CERT	ELCATE OF LIAE		NCUDA			
		FICATE OF LIAE		NJUKA	NCCLARA-1 07/15/03		
La	DUCER wson-Hawks Ins-Mount; c. #0401806 3 N.Shoreline Blvd.P(_	ONLY AND HOLDER. T	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
· · · ·	untain View CA 94042		i	INCLIDEDS			
[Ph	one: 650-964-8000 Fa	x:650-864-0816		INSURERS			
i.	IED		INSURER A:	Safeco Insu	irance Company		
	Clara Mateo All	iance	INSURER B:	State Compe	ensation Insurance		
	Shefali Desai, 795 Willow Rd (C00	INSURER C:				
	Menlo Park CA S	4025	INSURER D:				
	VERAGES		INSURER E:				
T A N P	HE POLICIES OF INSURANCE LISTED BELC NY REQUIREMENT, TERM OR CONDITION AY PERTAIN. THE INSURANCE AFFORDED DLICIES. AGGREGATE LIMITS SHOWN MAY		H RESPECT TO WHICH ECT TO ALL THE TERM	HTHIS CERTIFICATE M	MAY BE ISSUED OR CONDITIONS OF SUCH		
LTR	GENERAL LIABILITY	POLICY NUMBER	DATE (MM/DD/YY)	DATE (MM/DD/YY)	EACH OCCURRENCE \$1,000,000		
A	X COMMERCIAL GENERAL LIABILITY	СР7769807в	11/08/03	11/08/04	FIRE DAMAGE (Any one fire) \$ 200, 1		
 	CLAIMS MADE X OCCUR		11/00/05		MED EXP (Any one person) \$ 10,011		
	X Owner/Cont Prot.				PERSONAL & ADV INJURY \$1,000,000		
		i i		•	GENERAL AGGREGATE \$ 3,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:] i		· ·	PRODUCTS - COMP/OP AGG \$ 3,000,000		
Ľ_	X POLICY PRO-	<u>) </u>		i			
A	AUTOMOBILE LIABILITY	01CG28190210	10/29/03	10/29/04	COMBINED SINGLE LIMIT \$ 1,000,000		
	X ALL OWNED AUTOS		l		BODILY INJURY (Per person)		
	X HIRED AUTOS				BODILY INJURY (Pe; accident)		
			· 		PROPERTY DAMAGE (Per accident) \$		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$		
·- ·					OTHER THAN EA ACC S AUTO ONLY: AGG S		
	EXCESS LIABILITY		I		EACH OCCURRENCE \$ 1,000,000		
Α	OCCUR CLAIMS MADE	UL7769807	11/18/03	11/18/04	AGGREGATE \$1,000,000		
		l	İ	-	\$\$		
			1		<u>s</u>		
	X RETENTION \$ 10,000	· · · · · · · · · · · · · · · · · · · ·	I		TORY LIMITS; ER		
в	EMPLOYERS' LIABILITY	 156914302	10/01/03	10/01/04	ELLEACH ACCIDENT \$ 100000		
Q		100314002	10/01/02	10/01/04	E.L. DISEASE - EA EMPLOYEE'S 1000000		
		· · · · · · · · · · · · · · · · · · ·	ļ	i	E.L. DISEASE - POLICY LIMIT \$ 1000000		
	OTHER	· · · · · · · · · · · · · · · · · · ·	i				

DESCRIPTION OF OPERATIONS/COLATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS Certificate Holder is named as additional insured.

*Except 10 days notice for non-payment of premium.

CERTIFICATE HOLDER	Y ADDITIONAL INSURED; INS	URER LETTER:	CANCELLATION
		SAN MAT	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION
County of	County of San Mateo- Mental Health		DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL * 30 DAYS WRITTEN
			NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL
Caryl Fair. 225 37th A			IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR
San Mateo (REPRESENTATIVES.
			AUTHORIZED REPRESENTATIVE
I			Unin M Breen

©ACORD CORPORATION 1988

POLICY CHANGE EXTENSION EFFECTIVE: 10/29/03

- - - - - - -

NAMED INSURED: CLARA MATEO ALLIANCE

THE FOLLOWING HAS BEEN DELETED

VEHICLE 001 93 VLVO 960

YV1KW951XP0010035

THE FOLLOWING HAS BEEN CHANGED

603

ITEM TWO -- SCHEDULE OF COVERAGES AND COVERED AUTOS

COVERAGES	LIMIT OF INSURANCE	DEDUCTIBLE	COVERED AUTO SYMBOL	EMIUM
LIABILITY	\$ 1,000,000		2,8,9	\$ 1,809.00
UNINSURED MOTORISTS	\$ 1,000,000		2	\$ 141.00
AUTO MEDICAL PAYMENTS	\$ 5,000		2	\$ 112.00
COMPREHENSIVE EACH COVERED AUTO	LESSER OF ACTUAL CASH VALUE OR REPAIR COST	\$ 250	2	\$ 80.00
COLLISION	LESSER OF ACTUAL CASH VALUE OR REPAIR COST	\$ 500	2	\$ 287.00

POLICY NUMBER: 01-CG-281902-2

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PAGE 02 AGT

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4	ACORD	CERT	FICATE OF LIA	BILITY I	NSURA		DATE (MM/DD/YY) 06/24/03	
PRODUCER Lawson-Hawks Ins-Mountain View Lic. #0401806 883 N.Shoreline Blvd,PO Box 39				ONLY AND HOLDER. 1	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
	untain View one:650-964		x:650-964-0816	İ	INSURERS		3E	
	(ED	······································		NSURER A:	Safeco Insu	rance Company		
	~ 1			INSURER B:	State Compe	ensation Insura	nce	
	Shefa	Mateo All li Desai, illow Rd'#	COO	INSURER C:				
	795 W: Menio	illow Rd'# Park CA 9	323-C108	INSURER D:				
				INSURER E:				
<u>co</u>	VERAGES							
A M P	NY REQUIREMENT, TEF AY PERTAIN, THE INSU DLICIES, AGGREGATE I	RM OR CONDITION (RANCE AFFORDED	W HAVE BEEN ISSUED TO THE INSURED NAME OF ANY CONTRACT OR OTHER DOCUMENT WIT BY THE POLICIES DESCRIBED HEREIN IS SUBJ HAVE BEEN REDUCED BY PAID CLAIMS.	TH RESPECT TO WHICH ECT TO ALL THE TERM	THIS CERTIFICATE M	AY BE ISSUED OR CONDITIONS OF SUCH		
INSF LTR	TYPE OF IN	SURANCE	POLICY NUMBER	DATE (MM/DD/YY)	POLICY EXPIRATION		rs	
	GENERAL LIABILITY			{		EACH OCCURRENCE	s1,000,000	
Α			CP7769807B	11/08/03	11/08/04	FIRE DAMAGE (Any one fire)	\$ 200,000	
				!		MED EXP (Any one person)	\$10,000	
	X Owner/Co	ont Prot.		i		PERSONAL & ADV INJURY	\$1,000,000	
	j		i	!	-	GENERAL AGGREGATE	\$3,000,000	
	GEN'L AGGREGATE L			l I	1	PRODUCTS - COMP/OP AGG	\$3,000,000	
	X POLICY J		· 			 		
A	AUTOMOBILE LIABIL	ITY	01CG28190210	 10/29/03	10/29/04	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000	
				ļ .		BODILY INJURY (Per person)	5	
	X HIRED AUTOS	TOS				BODILY INJURY (Per accident)	! 	
						PROPERTY DAMAGE (Per accident)	\$	
-	GARAGE LIABILITY			[AUTO ONLY - EA ACCIDENT	·	
	ANY AUTO					N EA ACC	s	
						AGG	s	
	EXCESS LIABILITY			i		EACH OCCURRENCE	\$1,000,000	
А		CLAINS MADE	UL7769807	11/18/03 j	11/18/04	AGGREGATE	\$1,000,000	
	[- 1		ļ	į		15	
		i					s	
_	X RETENTION	\$10,000			ĺ		5	
	WORKERS COMPENS				<u>_</u>	X WC STATU- OTH-	· · · · · · · · · · · · · · · · · · ·	
в	EMPLOYERS' LIABILI	TY I	156914302	10/01/03	10/01/04 İ	E.L. EACH ACCIDENT	\$ 1000000	
		ļ	ļ		ĺ	EL DISEASE - EA EMPLOYEE	\$1000000	
		İ				E.L. DISEASE - POLICY LIMIT	s 1000000	
	OTHER			;	i			
)			ļ			

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS Certificate Holder is named as additional insured.

*Except 10 days notice for non-payment of premium.

CERTIFICATE HOLDER	Y ADDITIONAL INSURED; INSURER LETTER:	CANCELLATION
Service Ag Attn: Pam 2415 Unive		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>*30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE

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						DATE (MURDAN)
	<u>ACORD</u> CERT	IFICATE OF LIAE	BILLEY II	NSURA		DATE (MM/DD/YY) 07/15/03
La Li 88	DUCER WSON-Hawks Ins-Mount c. #0401806 3 N.Shoreline Blvd.PC	ain View	THIS CERT ONLY AND HOLDER. 1	IFICATE IS ISSU CONFERS NO R HIS CERTIFICAT	ED AS A MATTER OF II IGHTS UPON THE CER 'E DOES NOT AMEND, FORDED BY THE POLI	TIFICATE EXTEND OR
	untain View CA 94042 one:650-964-8000 Fa	x:650-864-0816	· ·	INSURERS		E
	TED		INSURER A:	Safeco Insu	rance Company	
	Clara Mateo All	iance	INSURER B:	State Compe	ensation Insuran	nce
}	Clara Mateo All Shefali Desai, 795 Willow Rd (COO + 222 - C1 0 8	INSURER C:	<u>.</u>		
	Menlo Park CA	4025	INSURER D:			
	VERAGES		INSURER E:		<u> </u>	
A M P	NY REQUIREMENT, TERM OR CONDITION AY PERTAIN, THE INSURANCE AFFORDED DLICIES. AGGREGATE LIMITS SHOWN MAY	W HAVE BEEN ISSUED TO THE INSURED NAMED OF ANY CONTRACT OR OTHER DOCUMENT WIT BY THE POLICIES DESCRIBED HEREIN IS SUBJ Y HAVE BEEN REDUCED BY PAID CLAIMS.	H RESPECT TO WHICH ECT TO ALL THE TERM	I THIS CERTIFICATE N IS, EXCLUSIONS AND	IAY BE ISSUED OR CONDITIONS OF SUCH	
		POLICY NUMBÉR	DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)		
	GENERAL LIABILITY				EACH OCCURRENCE	\$1,000,000
A		CP7769807B	11/08/03	11/08/04	FIRE DAMAGE (Any cne fire)	<u>s 200,000</u>
	CLAIMS MADE X OCCUR X Owner/Cont Prot.				MED EXP (Any one person)	\$ 10,000
]	X Owner/Cont Prot.	j l			PERSONAL & ADV INJURY	\$1,000,000 \$3,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:	1			PRODUCTS - COMP/OP AGG	is 3,000,000
		1				13/000/000
A	AUTOMOBILE LIABILITY	01CG28190210	10/29/03	10/29/04	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	X ALL OWNED AUTOS SCHEDULED AUTOS			· ·	BODILY INJURY (Per person)	\$
	X HIRED AUTOS				BODILY INJURY (Per accident)	s
			ii		PROPERTY DAMAGE (Per accident)	's
	GARAGE LIABILITY			;	AUTO ONLY - EA ACCIDENT	ls
			 : 		OTHER THAN AUTO ONLY: AGG	<u>+-</u>
A	EXCESS LIABILITY	UL7769807	11/18/03	11/18/04	EACH OCCURRENCE	s1,000,000 s1,000,000
			ļ			s s
в	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	156914302	10/01/03	10/01/04	WC STATU- OTH- X TORY LIMITS JER E.L. EACH ACCIDENT JER E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	s 1000000 s 1000000
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS Certificate Holder is named as additional insured.

*Except	10	days	notice	for	non-payment	of	premium.	
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CERTIFICATE HOLDER	CANCELLATION
SAN MA County of San Mateo Attn: Rosa Mendoza 262 Harbor Blvd., Bldg A Belmont CA 94002	

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11/04/03	TUE 12:36	FAX	650	964	4293	
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otensions of	UUVERAGE - AFTACH SEPARATE SHEET IF NECES	bə#RY;	-				
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ICT DER INSUR	EU ON NOT. SECURT DATE, CUVERAGE, DESCRI						
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CORD 131 (1	1/96) ATTACH TO APPLICANT IN	FORMATION AND	COMMERCIAL L	IABILITY SECTIONS	GACORE	CORPORATION	1996

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6. ARE	E PAS	SENGERS CARRI	ED FOR A FEE?				<u> X</u>		LITY					
7. ANY	(UNI	TS NOT INSURED	BY UNDERLYING POL	LICIES?			X				UIDANCE SYSTEMS, FRAME	S OR ANY		
B. AR	ANY	VEHICLES LEASE	D OR RENTED TO D	THERS?			X	OTHER PRO	00001	LOBED /	INSTALLED IN AIRCRAFT?			\vdash
9. ARE	HIR	ED AND NON/OWN	ED COVERAGES PRI	OVIDED?		X	<u> </u>	22. ARE FOREIGI	N PR(DUCTS	DISTRIBUTED IN U.S.?			
ONTR	ACTO	RS LIABILITY					┍╼╾┼				DISTRIB'D IN FOREIGN COU			
D. IS BI	RIDGE	E, DAM, OR MARIN	E WORK PERFORME	:D?		l	<u> x </u>	25. PRODUCT U/	ABILIT	IY LOSS I	N PAST 3 YEARS7 (SPEC/FY	<u>}</u>		
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MPLOT	rers	LIABILITY	<u></u>]	28. DOES APPLIC	ANT	OWN OR	LEASE WATERCRAFT?			
5. IS AF	PLIC	ANT SELF-INSUR	ED IN ANY STATE?	• ····			X	# OWNED		LEN	GTH HORSE	POWER		
6. SVB.	JECT		JONES ACT		STOP GAP						-			
ICIOEN			ABILITY				ŀ	APARTMENTS / C	OND	OMINIUM	S / HOTELS / MOTELS			
7. IS A	HOSP	TAL OR FIRST A	ID FACILITY MAINTA!	NED?			X	#STORIES	#U	INITS i	# SWIMMING POOLS	# DIVING BO	ARDS	
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