## ATTACHMENT I

## 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 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).

e Contractor(s): (Check a or b)	
a. Employs fewer than 15 persons.	
	rsuant to section 84.7 (a) of the regulation (45 C.I erson(s) to coordinate its efforts to comply with t
Name of SOA Process Transport Print	(date - and intonos to offer equal benefits whe
Name of 504 Person - Type or Print	
Bay Area Urology Medical Group	Codinals) of discrimination have been issued across
Name of Contractor(s) - Type or Print	
101 S. San Mateo Drive., Suite 205	No finding of discrimination has been issued in the is-
Street Address or P.O. Box San Mateo, CA 94401	Opperatory Continuesion, if air Employment and House
City, State, Zip Code	
tify that the above information is complete and corn	rect to the best of my knowledge.
Signature	The contract is for \$100,000 oz locs.
President	
Title of Authorized Official	
3/10/08	re under penalty of perjury under the laws of the S
Date /	

\*Exception: DHHS regulations state that:

"If a recipient with fewer than 15 employees finds that, after consultation with a disabled 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 Contractor's Declaration Form

Contractor Name	Bay Area Urology Medical Group	Phone:
Contact Person	olo	redt in ing Fax: angel anothetesangton box aminotons
Address	101 S. San Mateo Drive, Suite 205 San Mateo, CA 94401	c Contractor(s) gives/give this assurance in consi
rets will be exten	recognize and agrees agree that contr	to of this assurance. The Contractor(s) recognizes
FOUNT BENEF	TS (shock one or more boyes)	
I. EQUAL BENEF	ITS (check one or more boxes) tracts in excess of \$5,000 must treat should	ses and domestic partners equally as to employee benef
	omplies with the County's Equal Benefits C	
	g equal benefits to employees with spouse	
0.50	ig a cash equivalent payment to eligible en	
CF3 2000000000000000000000000000000000000		amorana 21 marti trausat avalarin 4 a
F 3000000000000000000000000000000000000	oes not comply with the County's Equal Be	enems Ordinance.
	exempt from this requirement because:	has snowing from to all avoigned at
Contr or les		benefits to employees' spouses, or the contract is for \$5
		greement that began on (date) and expires on
	, and intends to offer equal benefits when	
(4415)	, 4	Name of 504 Person - Type or Print
II. NON-DISCRIMI	NATION (check appropriate box)	
Finding(s) of Opportunity	discrimination have been issued against C	Contractor within the past year by the Equal Employmen og Commission, or other investigative entity. Please see
attached she	eet of paper explaining the outcome(s) or re	emedy for the discrimination.
No finding or	f discrimination has been issued in the pas	t year against the Contractor by the Equal Employment
Opportunity	Commission, Fair Employment and Housin	ng Commission, or any other entity.
	DV 05D (105 ( 105 )	
V. EMPLOYEE JU	RY SERVICE (check one or more boxes)	00,000 must have and adhere to a written policy that
provides its employe	es living in San Mateo County up to five da	ays regular pay for actual jury service in the County.
	omplies with the County's Employee Jury S	
	oes not comply with the County's Employe	ee Jury Service Ordinance.
Contractor is	s exempt from this requirement because:	
	ontract is for \$100,000 or less.	Signature
Conti (date	actor is a party to a collective bargaining a ), and intends to comply when the collective	greement that began on (date) and expires on e bargaining agreement expires.
I declare under per and that I am autho	nalty of perjury under the laws of the Sta prized to hind this entity contractually.	ate of California that the foregoing is true and correc
/	$\mathcal{I}$	
/	1/	Conditional applications of the Constraints

Signature

Date

Name

DAVID CARDO

Title