SCO ID: 5160-32463

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES AGREEMENT NUMBER PURCHASING AUTHORITY NUMBER (If Applicable) STANDARD AGREEMENT 32463 STD 213 (Rev. 04/2020) 1. This Agreement is entered into between the Contracting Agency and the Contractor named below: CONTRACTING AGENCY NAME Department of Rehabilitation CONTRACTOR NAME Lodi Unified School District 2. The term of this Agreement is: START DATE July 1, 2024 or Upon Approval, whichever date is later THROUGH END DATE June, 30 2027 3. The maximum amount of this Agreement is: \$4,681,191.00 Four Million, Six Hundred Eighty-One Thousand, One Hundred Ninety-One Dollars, and Zero Cents Certified Expenditure: \$744,696.00 Seven Hundred Forty-Four Thousand, Six Hundred Ninety-Six Dollars, and Zero Cents Cash Match: \$313,638.00 Three Hundred Thirteen Thousand, Six Hundred Thirty-Eight Dollars, and Zero Cents 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 Description of Services/Deliverables 8 **Budget Detail and Payment Provisions** Exhibit B 4 Exhibit B.1 Contractor's Program Budget(s) and Narrative(s) 18 Exhibit C General Terms and Conditions (GTC 4/2017) 1 7 Exhibit D Special Terms and Conditions Exhibit E Additional Provisions - Federally Funded Agreements 3 Exhibit F Additional Provisions - TPCA 3 Additional Provisions Exhibit G 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.) Lodi Unified School District **CONTRACTOR BUSINESS ADDRESS** CITY Ζ**Ι**Ρ **STATE** 1305 E Vine Street Lodi CA 95240 PRINTED NAME OF PERSON SIGNING TITLE

Mr. Neil Young

CONTRACTOR AUTHORIZED SIGNATURE

Lodi USD Superintendent

DATE SIGNED

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STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES				
STANDARD AGREEMENT AGREEMENT NUMBER		PURCHASING AUTHORITY NUMBER (If Applicable)		
STD 213 (Rev. 04/2020)	32463			
	STATE OF CALIFORNIA	<u> </u>		
CONTRACTING AGENCY NAME				
Department of Rehabilitation				
CONTRACTING AGENCY ADDRESS	CITY		STATE	ZIP
721 Capitol Mall, 6th Floor	Sacra	amento	CA	95814
PRINTED NAME OF PERSON SIGNING	TITLE		•	•
CONTRACTING AGENCY AUTHORIZED SIGNATURE		DATE SIGNED		
CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL		PTION (If Applicable)		