

**MASTER AGREEMENT
FOR
ARCHITECTURAL, ENGINEERING, AND RELATED SERVICES**

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COUNTY'S ADMINISTRATION

MASTER AGREEMENT NO. _____

COUNTY PROJECT DIRECTOR:

Name: _____

Title: _____

Address: _____

Telephone: _____

Facsimile: _____

E-Mail Address: _____

COUNTY PROJECT MANAGER:

Name: _____

Title: _____

Address: _____

Telephone: _____

Facsimile: _____

E-Mail Address: _____

CONTRACT COMPLIANCE MANAGER:

Name: _____

Title: _____

Address: _____

Telephone: _____

Facsimile: _____

E-Mail Address: _____

CONTRACTOR'S ADMINISTRATION

CONTRACTOR'S NAME

MASTER AGREEMENT NO. _____

CONTRACTOR'S PROJECT DIRECTOR:

Name: _____

Title: _____

Address: _____

Telephone: _____

Facsimile: _____

E-Mail Address: _____

CONTRACTOR'S AUTHORIZED OFFICIAL(S)

Name: _____

Title: _____

Address: _____

Telephone: _____

Facsimile: _____

E-Mail Address: _____

Name: _____

Title: _____

Address: _____

Telephone: _____

Facsimile: _____

E-Mail Address: _____

Notices to Contractor will be sent to the following address:

Name: _____

Title: _____

Address: _____

Telephone: _____

Facsimile: _____

E-Mail Address: _____

SAFELY SURRENDERED BABY LAW

**THERE'S A BETTER CHOICE.
SAFELY SURRENDER YOUR BABY.**

Any fire station. Any hospital. Any time.



1.877.222.9723

BabySafeLA.org

No shame | No blame | No names



SAFELY SURRENDERED BABY LAW

Some parents of newborns can find themselves in difficult circumstances. Sadly, babies are sometimes harmed or abandoned by parents who feel that they're not ready or able to raise a child. Many of these mothers or fathers are afraid and don't know where to turn for help.

This is why California has a Safely Surrendered Baby Law, which gives parents the choice to legally leave their baby at any hospital or fire station in Los Angeles County.

FIVE THINGS YOU NEED TO KNOW ABOUT BABY SAFE SURRENDER

- 1 Your newborn can be surrendered at any hospital or fire station in Los Angeles County up to 72 hours after birth.
- 2 You must leave your newborn with a fire station or hospital employee.
- 3 You don't have to provide your name.
- 4 You will only be asked to voluntarily provide a medical history.
- 5 You have 14 days to change your mind; a matching bracelet (parent) and anklet (baby) are provided to assist you if you change your mind.

No shame | No blame | No names



ABOUT THE BABY SAFE SURRENDER PROGRAM

In 2002, a task force was created under the guidance of the Children's Planning Council to address newborn abandonment and to develop a strategic plan to prevent this tragedy.

Los Angeles County has worked hard to ensure that the Safely Surrendered Baby Law prevents babies from being abandoned. We're happy to report that this law is doing exactly what it was designed to do: save the lives of innocent babies. Visit BabySafeLA.org to learn more.

No shame | No blame | No names

ANY FIRE STATION.
ANY HOSPITAL.
ANY TIME.

1.877.222.9723
BabySafeLA.org

THERE'S A
BETTER CHOICE.
SAFELY SURRENDER
YOUR BABY.



No shame | No blame | No names



SAFELY SURRENDERED BABY LAW



FROM SURRENDER TO ADOPTION: ONE BABY'S STORY

Los Angeles County firefighter Ted and his wife Becki were already parents to two boys. But when they got the call asking if they would be willing to care for a premature baby girl who'd been safely surrendered at a local hospital, they didn't hesitate.

Baby Jenna was tiny, but Ted and Becki felt lucky to be able to take her home. "We had always wanted to adopt," Ted says, "but taking

home a vulnerable safely surrendered baby was even better. She had no one, but now she had us. And, more importantly, we had her."

Baby Jenna has filled the longing Ted and Becki had for a daughter—and a sister for their boys. Because her birth parent safely surrendered her when she was born, Jenna is a thriving young girl growing up in a stable and loving family.

ANSWERS TO YOUR QUESTIONS

Who is legally allowed to surrender the baby?

Anyone with lawful custody can drop off a newborn within the first 72 hours of birth.

Do you need to call ahead before surrendering a baby?

No. A newborn can be surrendered anytime, 24 hours a day, 7 days a week, as long as the parent or guardian surrenders the child to an employee of the hospital or fire station.

What information needs to be provided?

The surrendering adult will be asked to fill out a medical history form, which is useful in caring for the child. The form can be returned later and includes a stamped return envelope. No names are required.

What happens to the baby?

After a complete medical exam, the baby will be released and placed in a safe and loving home, and the adoption process will begin.

What happens to the parent or surrendering adult?

Nothing. They may leave at any time after surrendering the baby.

How can a parent get a baby back?

Parents who change their minds can begin the process of reclaiming their baby within 14 days by calling the Los Angeles County Department of Children and Family Services at (800) 540-4000.

If you're unsure of what to do:

You can call the hotline 24 hours a day, 7 days a week and anonymously speak with a counselor about your options or have your questions answered.

1.877.222.9723 or BabySafeLA.org

English, Spanish and 140 other languages spoken.

**SAMPLE
WORK ORDER**
LOS ANGELES COUNTY SHERIFF'S DEPARTMENT
ARCHITECTURAL, ENGINEERING, AND RELATED SERVICES
Project ID No. XX-XXXX

(CONTRACTOR NAME)

Work Order Number: _____ **Master Agreement No.:** _____

Supplemental Work Order Number (if applicable): _____

Project Title: _____

Period of Performance _____

Location: _____

Pre-Site Visit Address: _____

Date/Time: _____

Exhibit D2 (Scope of Services) to this Work Order defines the scope of Work for Project ID No. XX-XXXX.

Department Contacts:

County Project Director: _____

County Project Manager: _____

Contractor Contacts:

Contractor Project Director: _____

Contractor Project Manager: _____

Contractors' Questions

All questions regarding this Work Order and/or Exhibit D2 (Scope of Services) must be emailed to:

Attention: _____

E-mail: _____

Response Requirements:

Contractor must complete this Exhibit D in fulfillment of its obligation to provide the County with a fully burdened not-to-exceed cost for this Work Order. Sections I through IV below must be completed in their entirety.

I. WORK BREAKDOWN STRUCTURE (WBS) AND PROJECT TIMELINE

- A. Contractor must provide a WBS that is task/deliverable-based and includes a technical assessment document demonstrating Contractor’s understanding of the project as specified in Paragraph 2.3 (Work Order Response Requirements) of Attachment 1 (Statement of Work) to the Master Agreement.
- B. Additionally, Contractor must provide a project timeline estimating time of completion. The timeline must be maintained in Microsoft Project, or in another format approved by County Project Director.

II. COST AND PAYMENT SCHEDULE (TIME AND MATERIAL BASIS) (IF APPLICABLE)

- A. The Total Maximum Amount that County will pay Contractor for all Services to be provided under this Work Order will not exceed _____ Dollars (\$_____).

PERSONNEL

Contractor will provide the below-listed personnel whose labor rates are as shown:

Skill Category(s):	Name(s):	Rate:
		@ \$____./hour
		@ \$____./hour
		@ \$____./hour

SUBCONTRACTING

In accordance with Paragraph 2.3 (Work Order Response Requirements) of Attachment 1 (Statement of Work) to the Master Agreement, Contractor must provide the following information for all proposed subcontractor personnel:

- Name of subcontractor(s): _____
- Subcontractor staff: _____

- Describe their respective role(s) in the project: _____

- B. Contractor will invoice County only for hours actually worked, in accordance with the terms and conditions of Contractor’s Master Agreement. Contractor will be responsible for limiting the number of hours worked by Contractor Personnel under this Work Order. The hourly rates on this Work Order must not exceed the rates set forth in Exhibit H (A/E Fee Schedule) to the Master Agreement.

- C. Contractor will satisfactorily perform and complete all required Services in accordance with Exhibit D2 (Scope of Services) notwithstanding the fact that total payment from County will not exceed the Total Maximum Amount in Section II.A, above.
- D. Awarded Contractor must submit all invoices under this Work Order in accordance with Paragraph 5.4.7 (Submission of Invoices) of the Master Agreement. Contractor must submit an original and one copy of each invoice to County Project Manager at the address and e-mail address listed in Exhibit A (County's Administration) to the Master Agreement. Contractor must invoice the County by the 15th Day of the month following the month in which Services were performed.

III. COST AND PAYMENT SCHEDULE (FIXED PRICE PER DELIVERABLE BASIS) (IF APPLICABLE)

- A. Contractor must provide a fully burdened not-to-exceed cost to complete each of the tasks described in Exhibit D2 (Scope of Services) to this Work Order. Contractor's Total Maximum Amount listed below must not exceed the County's maximum amount specified in Exhibit D2 (Scope of Services).

<u>Deliverable</u>	<u>Fully Burdened Not-to-Exceed Price</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
Total Maximum Amount:	_____

- B. Contractor must satisfactorily provide and complete all required deliverables in accordance with this Work Order. Notwithstanding, the total payment from the County for all deliverables must not exceed the Total Maximum Amount in Section III.A, above.
- C. Awarded Contractor must submit all invoices under this Work Order in accordance with Paragraph 5.4.7 (Submission of Invoices) of the Master Agreement. Contractor must submit an original and one copy of each invoice to County Project Manager at the address and e-mail address listed in Exhibit A (County's Administration) to the Master Agreement. Contractor must invoice the County by the 15th Day of the month following the month in which Services were performed.

IV. SERVICES

In accordance with Paragraph 3.0 (Work) of the Master Agreement, awarded Contractor will not be paid for any task, deliverable, service, or other Work that is not specified in Exhibit D2 (Scope of Services) to this Work Order, and/or that utilizes personnel not specified in this Work Order, and/or that exceeds the Total Maximum Amount of this Work Order, and/or that goes beyond the expiration or termination of the Master Agreement.

Contractor will be entitled to payment for Services that are satisfactorily completed after the expiration or other termination of the Master Agreement, provided that any such Services are rendered pursuant to a Work Order that was validly executed during the Term of the Master Agreement. This provision will survive the expiration or other termination of the Master Agreement.

ALL TERMS OF THE MASTER AGREEMENT WILL REMAIN IN FULL FORCE AND EFFECT. THE TERMS OF THE MASTER AGREEMENT WILL GOVERN AND TAKE PRECEDENCE OVER ANY CONFLICTING TERMS AND/OR CONDITIONS IN THIS WORK ORDER AND/OR ANY RESULTANT WORK ORDER. NEITHER THE RATES NOR ANY OTHER SPECIFICATIONS IN THIS WORK ORDER ARE VALID OR BINDING IF THEY DO NOT COMPLY WITH THE TERMS AND CONDITIONS OF THE MASTER AGREEMENT.

THE DEPARTMENT RESERVES ITS EXCLUSIVE RIGHT TO REDUCE OR ADD A CHANGE TO THE SCOPE OF SERVICES SPECIFIED IN EXHIBIT D2 TO THIS WORK ORDER. THE DEPARTMENT WILL PROVIDE NOTICE OF ANY PENDING REDUCITON OR ADDITION PRIOR TO COMMENCEMENT OF AND/OR DURING THE COMPLETION OF THE WORK.

A SUPPLEMENTAL WORK ORDER MAY BE ISSUED BY THE COUNTY, AS APPLICABLE, TO : (1) MAKE NON-MATERIAL CORRECTION(S)/EDIT(S) AND/OR (2) ADD NON-MATERIAL CLARIFICATION TO TASKS/DELIVERABLES.

THIS WORK MAY NOT BE AMENDED, BY EITHER PARTY, FOR ANY CHANGES WHICH MATERIALLY AFFECT THE SCOPE OF SERVICES, TASKS/DELIVERABLES, PRICE, OR ANY MATERIAL TERM OR CONDITION INCLUDED IN THIS WORK ORDER.

Contractor's signature on this Work Order confirms Contractor's awareness of, and agreement with, the provisions of Paragraph 3.0 (Work) of the Master Agreement, which establish that Contractor will not be entitled to any compensation whatsoever for any task, deliverable, service, or other Work:

- A. That is not specified in Exhibit D2 (Scope of Services) to this Work Order, and/or
- B. That utilizes personnel not specified in this Work Order, and/or
- C. That exceeds the Total Maximum Amount of this Work Order, and/or
- D. Rendered under a Work Order issued after the expiration or termination of this Master Agreement regardless of any oral promise made to Contractor by any County personnel whatsoever.

NOTE TO CONTRACTORS:

Sections I through IV above comprise the entire Work requirement for this Work Order. Failure of Contractor to complete any section above, or any portion thereof, will constitute as non-responsive to this Work Order, at the discretion of the County. Contractor assumes all responsibility for calculation errors.

CONTRACTOR

COUNTY OF LOS ANGELES

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

EXHIBIT D3

**PROCESS FOR RECEIVING, REVIEWING, AND ACCEPTING
DELIVERABLES**

(NOT ATTACHED)

CERTIFICATION OF EMPLOYEE STATUS

CONTRACTOR NAME

COUNTY MASTER AGREEMENT NO. _____

I CERTIFY THAT: (1) I am an Authorized Official of Contractor; (2) the individual(s) named below is(are) this organization's employee(s); (3) applicable state and federal income tax, FICA, unemployment insurance premiums, and workers' compensation insurance premiums, in the correct amounts required by state and federal law, will be withheld as appropriate, and paid by Contractor for the individual(s) named below for the entire time period covered by the attached Work Order:

EMPLOYEES

1. _____
2. _____
3. _____
4. _____

I declare under penalty of perjury that the foregoing is true and correct.

Signature of Authorized Official

Printed Name of Authorized Official

Title of Authorized Official

Date

CERTIFICATION OF NO CONFLICT OF INTEREST

CONTRACTOR NAME

County Master Agreement No. _____

Los Angeles County Code Section 2.180.010.A provides as follows:

“Certain contracts prohibited.

- A. Notwithstanding any other section of this code, the County will not contract with, and will reject any bid or proposal submitted by, the persons or entities specified below, unless the County Board of Supervisors finds that special circumstances exist which justify the approval of such contract:
 - 1. Employees of the County or of public agencies for which the Board of Supervisors is the governing body;
 - 2. Profit-making firms or businesses in which employees described in subdivision 1 of subsection A serve as officers, principals, partners, or major shareholders;
 - 3. Persons who, within the immediately preceding 12 months, came within the provisions of subdivision 1 of subsection A, and who:
 - a. Were employed in positions of substantial responsibility in the area of service to be performed by the contract; or
 - b. Participated in any way in developing the contract or its service specifications; and
 - 4. Profit-making firms or businesses in which the former employees, described in subdivision 3 of subsection A, serve as officers, principals, partners, or major shareholders.”

Contractor hereby declares and certifies that no Contractor Personnel, nor any other person acting on Contractor’s behalf, who prepared and/or participated in the preparation of the bid or proposal submitted for the Work Order specified above, is within the purview of County Code Section 2.180.010.A, above.

I declare under penalty of perjury that the foregoing is true and correct.

Signature of Authorized Official

Printed Name of Authorized Official

Title of Authorized Official

Date

CONTRACTOR ACKNOWLEDGEMENT AND CONFIDENTIALITY AGREEMENT

(Note: This certification is to be executed and returned before Work begins. Work cannot begin until County receives this executed document.)

Contractor Name _____

Work Order No. _____

County Master Agreement No. _____

Project ID No. _____

GENERAL INFORMATION:

The Contractor referenced above has entered into a Master Agreement with the County of Los Angeles to provide certain services to the County. The County requires the Corporation to sign this Contractor Acknowledgement and Confidentiality Agreement.

CONTRACTOR ACKNOWLEDGEMENT:

Contractor understands and agrees that the Contractor employees, consultants, Outsourced Contractors and independent contractors (Contractor's Staff) that will provide services in the above referenced agreement are Contractor's sole responsibility. Contractor understands and agrees that Contractor's Staff must rely exclusively upon Contractor for payment of salary and any and all other benefits payable by virtue of Contractor's Staff's performance of work under the above-referenced Master Agreement.

Contractor understands and agrees that Contractor's Staff are not employees of the County of Los Angeles for any purpose whatsoever and that Contractor's Staff do not have and will not acquire any rights or benefits of any kind from the County of Los Angeles by virtue of my performance of work under the above-referenced Master Agreement. Contractor understands and agrees that Contractor's Staff will not acquire any rights or benefits from the County of Los Angeles pursuant to any agreement between any person or entity and the County of Los Angeles.

CONFIDENTIALITY AGREEMENT:

Contractor and Contractor's Staff may be involved with work pertaining to services provided by the County of Los Angeles and, if so, Contractor and Contractor's Staff may have access to confidential data and information pertaining to persons and/or entities receiving services from the County. In addition, Contractor and Contractor's Staff may also have access to proprietary information supplied by other contractors doing business with the County of Los Angeles. The County has a legal obligation to protect all such confidential data and information in its possession, especially data and information concerning health, criminal, and welfare recipient records. Contractor and Contractor's Staff understand that if they are involved in County work, the County must ensure that Contractor and Contractor's Staff, will protect the confidentiality of such data and information. Consequently, Contractor must sign this Confidentiality Agreement as a condition of work to be provided by Contractor's Staff for the County.

Contractor and Contractor's Staff hereby agrees that they will not divulge to any unauthorized person any data or information obtained while performing work pursuant to the above-referenced Master Agreement between Contractor and the County of Los Angeles. Contractor and Contractor's Staff agree to forward all requests for the release of any data or information received to County's Project Manager.

Contractor and Contractor's Staff agree to keep confidential all health, criminal, and welfare recipient records and all data and information pertaining to persons and/or entities receiving services from the County, design concepts, algorithms, programs, formats, documentation, Contractor proprietary information and all other original materials produced, created, or provided to Contractor and Contractor's Staff under the above-referenced Master Agreement. Contractor and Contractor's Staff agree to protect these confidential materials against disclosure to other than Contractor or County employees who have a need to know the information. Contractor and Contractor's Staff agree that if proprietary information supplied by other County contractors is provided to me during this employment, Contractor and Contractor's Staff must keep such information confidential.

Contractor and Contractor's Staff agree to report any and all violations of this agreement by Contractor and Contractor's Staff and/or by any other person of whom Contractor and Contractor's Staff become aware.

Contractor and Contractor's Staff acknowledge that violation of this agreement may subject Contractor and Contractor's Staff to civil and/or criminal action and that the County of Los Angeles may seek all possible legal redress.

SIGNATURE OF AUTHORIZED OFFICIAL: _____ DATE: _____

PRINTED NAME: _____

TITLE: _____

County of Los Angeles
Sheriff's Department

Architectural, Engineering, and Related Services
Model Master Agreement Exhibits
RFSQ 693-SH

CONTRACTOR EMPLOYEE ACKNOWLEDGEMENT AND CONFIDENTIALITY AGREEMENT

(Note: This certification is to be executed and returned before Work begins. Work cannot begin until County receives this executed document.)

Contractor Name _____ Employee Name _____

Work Order No. _____ County Master Agreement No. _____

Project ID No. _____

GENERAL INFORMATION:

Your employer referenced above has entered into a Master Agreement with the County of Los Angeles to provide certain services to the County. The County requires your signature on this Contractor Employee Acknowledgement and Confidentiality Agreement.

EMPLOYEE ACKNOWLEDGEMENT:

I understand and agree that Contractor referenced above is my sole employer for purposes of the above-referenced Master Agreement. I understand and agree that I must rely exclusively upon my employer for payment of salary and any and all other benefits payable to me or on my behalf by virtue of my performance of Work under the above-referenced Master Agreement.

I understand and agree that I am not an employee of the County of Los Angeles for any purpose whatsoever and that I do not have and will not acquire any rights or benefits of any kind from the County of Los Angeles by virtue of my performance of Work under the above-referenced Master Agreement. I understand and agree that I do not have and will not acquire any rights or benefits from the County of Los Angeles pursuant to any agreement between any person or entity and the County of Los Angeles.

I understand and agree that I may be required to undergo a background and security investigation(s). I understand and agree that my continued performance of Work under the above-referenced Master Agreement is contingent upon my passing, to the satisfaction of the County, any and all such investigations. I understand and agree that my failure to pass, to the satisfaction of the County, any such investigation will result in my immediate release from performance under this and/or any future Master Agreement.

CONFIDENTIALITY AGREEMENT:

I may be involved with Work pertaining to Services provided by the County of Los Angeles and, if so, I may have access to confidential data and information pertaining to persons and/or entities receiving services from the County. In addition, I may also have access to proprietary information supplied by other Contractors doing business with the County of Los Angeles. The County has a legal obligation to protect all such confidential data and information in its possession, especially data and information concerning health, criminal, and welfare recipient records. I understand that if I am involved in County Work, the County must ensure that I, too, will protect the confidentiality of such data and information. Consequently, I understand that I must sign this agreement as a condition of my work to be provided by my employer for the County. I have read this agreement and have taken due time to consider it prior to signing.

I hereby agree that I will not divulge to any unauthorized person any data or information obtained while performing work pursuant to the above-referenced Master Agreement between my employer and the County of Los Angeles. I agree to forward all requests for the release of any data or information received by me to my immediate supervisor.

I agree to keep confidential all health, criminal, and welfare recipient records and all data and information pertaining to persons and/or entities receiving services from the County, design concepts, algorithms, programs, formats, documentation, Contractor proprietary information and all other original materials produced, created, or provided to or by me under the above-referenced Master Agreement. I agree to protect these confidential materials against disclosure to other than my employer or County employees who have a need to know the information. I agree that if proprietary information supplied by other County contractors is provided to me during this employment, I must keep such information confidential.

I agree to report to my immediate supervisor any and all violations of this agreement by myself and/or by any other person of whom I become aware. I agree to return all confidential materials to my immediate supervisor upon completion of this Master Agreement or termination of my employment with my employer, whichever occurs first.

SIGNATURE OF AUTHORIZED OFFICIAL: _____ DATE: _____

PRINTED NAME: _____

TITLE: _____

CONTRACTOR NON-EMPLOYEE ACKNOWLEDGEMENT AND CONFIDENTIALITY AGREEMENT

(Note: This certification is to be executed and returned before Work begins. Work cannot begin until County receives this executed document.)

Contractor Name _____ Non-Employee Name _____

Work Order No. _____ County Master Agreement No. _____

Project ID No. _____

GENERAL INFORMATION:

Contractor referenced above has entered into a Master Agreement with the County of Los Angeles to provide certain services to the County. The County requires your signature on this Contractor Non-Employee Acknowledgement and Confidentiality Agreement.

NON-EMPLOYEE ACKNOWLEDGEMENT:

I understand and agree that the Contractor referenced above has exclusive control for purposes of the above-referenced Master Agreement. I understand and agree that I must rely exclusively upon the Contractor referenced above for payment of salary and any and all other benefits payable to me or on my behalf by virtue of my performance of work under the above-referenced Master Agreement.

I understand and agree that I am not an employee of the County of Los Angeles for any purpose whatsoever and that I do not have and will not acquire any rights or benefits of any kind from the County of Los Angeles by virtue of my performance of work under the above-referenced Master Agreement. I understand and agree that I do not have and will not acquire any rights or benefits from the County of Los Angeles pursuant to any agreement between any person or entity and the County of Los Angeles.

I understand and agree that I may be required to undergo a background and security investigation(s). I understand and agree that my continued performance of work under the above-referenced Master Agreement is contingent upon my passing, to the satisfaction of the County, any and all such investigations. I understand and agree that my failure to pass, to the satisfaction of the County, any such investigation will result in my immediate release from performance under this and/or any future Master Agreement.

CONFIDENTIALITY AGREEMENT:

I may be involved with work pertaining to services provided by the County of Los Angeles and, if so, I may have access to confidential data and information pertaining to persons and/or entities receiving services from the County. In addition, I may also have access to proprietary information supplied by other contractors doing business with the County of Los Angeles. The County has a legal obligation to protect all such confidential data and information in its possession, especially data and information concerning health, criminal, and welfare recipient records. I understand that if I am involved in County work, the County must ensure that I, too, will protect the confidentiality of such data and information. Consequently, I understand that I must sign this agreement as a condition of my work to be provided by the above-referenced Contractor for the County. I have read this agreement and have taken due time to consider it prior to signing.

I hereby agree that I will not divulge to any unauthorized person any data or information obtained while performing work pursuant to the above-referenced Master Agreement between the above-referenced Contractor and the County of Los Angeles. I agree to forward all requests for the release of any data or information received by me to the above-referenced Contractor.

I agree to keep confidential all health, criminal, and welfare recipient records and all data and information pertaining to persons and/or entities receiving services from the County, design concepts, algorithms, programs, formats, documentation, Contractor proprietary information, and all other original materials produced, created, or provided to or by me under the above-referenced Master Agreement. I agree to protect these confidential materials against disclosure to other than the above-referenced Contractor or County employees who have a need to know the information. I agree that if proprietary information supplied by other County contractors is provided to me, I must keep such information confidential.

I agree to report to the above-referenced Contractor any and all violations of this agreement by myself and/or by any other person of whom I become aware. I agree to return all confidential materials to the above-referenced Contractor upon completion of this Master Agreement or termination of my services hereunder, whichever occurs first.

SIGNATURE OF AUTHORIZED OFFICIAL: _____ DATE: _____

PRINTED NAME: _____

POSITION: _____

CONTRACT DISCREPANCY REPORT

TO: _____

FROM: _____

DATES: Prepared by County: _____ Master Agreement No.: _____

Received by Contractor: _____

Returned by Contractor: _____

Action Completed: _____

DISCREPANCY PROBLEMS: _____

Signature of County Representative

Date

CONTRACTOR RESPONSE (Cause and Corrective Action): _____

Signature of Contractor Representative

Date

COUNTY EVALUATION OF CONTRACTOR RESPONSE: _____

Signature of County Representative

Date

COUNTY ACTIONS: _____

CONTRACTOR NOTIFIED OF ACTION:

County Representative's Signature and Date _____

Contractor Representative's Signature and Date _____

EXHIBIT G

INTENTIONALLY OMITTED

EXHIBIT H
A/E FEE SCHEDULE
(NOT ATTACHED)

EXHIBIT I
SERVICES TEAM
(NOT ATTACHED)

EXHIBIT J
SUBCONTRACTOR ACKNOWLEDGEMENT FORM
(NOT ATTACHED)