

**AGREEMENT SUMMARY**

STD 215 (REV 94/02)

<b>AGREEMENT NUMBER</b> P0640006	<b>AMENDMENT</b> 04
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**CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED**

<b>1 CONTRACTOR'S NAME</b> California State University, Stanislaus	<b>2. FEDERAL ID NUMBER</b> 77-0207337
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<b>3 AGENCY TRANSMITTING AGREEMENT</b> Department of Fish and Game	<b>4. DIVISION, BUREAU, OR OTHER UNIT</b> Central Region	<b>5. AGENCY BILLING CODE</b> 28455
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**6. NAME AND TELEPHONE NUMBER OF CONTRACT ANALYST FOR QUESTIONS REGARDING THIS AGREEMENT**  
Rachel Brown (916) 651-8328

**7 HAS YOUR AGENCY CONTRACTED FOR THESE SERVICES BEFORE?**  
 NO       YES (If YES, enter prior contractor name and Agreement Number)      **P0540007 - CSU Stanislaus Foundation**

**8. BRIEF DESCRIPTION OF SERVICES - LIMIT 72 CHARACTERS INCLUDING PUNCTUATION AND SPACES**  
**Government contract for support services.**

**9. AGREEMENT OUTLINE (Include reason for Agreement: Identify specific problem, administrative requirement, program need or other circumstances making the Agreement necessary; include special or unusual terms and conditions.)**


The purpose of this amendment is to encumber an additional \$60,000.00 for FY 10/11, and to change the contract manager from Annee Ferranti to Krista Tomlinson. The services performed are necessary on a continuous basis for project continuity.

**10. PAYMENT TERMS (More than one may apply)**  
 MONTHLY FLAT RATE       QUARTERLY       ONE-TIME PAYMENT [PROGRESS PAYMENT]  
 ITEMIZED INVOICE       WITHHOLD 10 %       ADVANCED PAYMENT NOT TO EXCEED \$ \_\_\_\_\_ o \_\_\_\_\_ %  
 REIMBURSEMENT/REVENUE  
 OTHER (Explain) Monthly itemized invoice

11. PROJECTED EXPENDITURES FUND TITLE	ITEM	F.Y.	CHAPTER	STATUTE	PROJECTED EXPENDITURES
Trust and Agency	3600-001-0942-99	06/07	047	2006	\$89,341.32
Trust and Agency	3600-001-0942-99	07/08	171	2007	\$125,278.61
Trust and Agency	3600-001-0942-99	08/09	268	2008	\$49,984.58
Trust and Agency	3600-001-0942-99	09/10	01	2009	\$170,000.00

<b>OBJECT CODE</b> See attached	<b>AGREEMENT TOTAL</b> \$ <b>434,604.51</b>
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**OPTIONAL USE**  
 AMOUNT ENCUMBERED BY THIS DOCUMENT \$ **60,000.00**  
 PRIOR AMOUNT ENCUMBERED FOR THIS AGREEMENT \$ **434,604.51**  
 TOTAL AMOUNT ENCUMBERED TO DATE \$ **494,604.51**

**ACCOUNTING OFFICER'S SIGNATURE**  **DATE SIGNED** 2/18/11

12. AGREEMENT	TERM		TOTAL COST OF THIS TRANSACTION	BID, SOLE SOURCE, EXEMPT
	From	Through		
Original	10/01/06	06/30/08	\$ 214,619.93	Exempt
Amendment No. 1	10/01/06	06/30/09	\$ 0	Exempt
Amendment No. 2	10/01/06	06/30/10	\$ 49,984.58	Exempt
Amendment No. 3	10/01/06	06/30/12	\$ 170,000.00	Exempt
Amendment No. 4	10/01/06	06/30/12	\$ 60,000.00	Exempt
		<b>TOTAL</b>	<b>\$ 494,604.51</b>	

(Continued)

**AGREEMENT SUMMARY**

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## 13. BIDDING METHOD USED:

- REQUEST FOR PROPOSAL (RFP)  INVITATION FOR BID (IFB)  USE OF MASTER SERVICE AGREEMENT  
*(Attach justification if secondary method is used)*
- SOLE SOURCE CONTRACT  EXEMPT FROM BIDDING  OTHER *(Explain)*  
*(Attach STD. 821)* **SCM 5.80 (B)(1)**

NOTE: *Proof of advertisement in the State Contracts Register or an approved form STD. 821, Contract Advertising Exemption Request, must be attached*

14. SUMMARY OF BIDS *(List of bidders, bid amount and small business status) (If an amendment, sole source, or exempt, leave blank)*15. IF AWARD OF AGREEMENT IS TO OTHER THAN THE LOWER BIDDER, PLEASE EXPLAIN REASON(S) *(If an amendment, sole source, or exempt, leave blank)*

## 16. WHAT IS THE BASIS FOR DETERMINING THAT THE PRICE OR RATE IS REASONABLE?

**The contractor is a state entity, therefore the salaries and staff benefits are equivalent to the rates paid to the State's represented employees for similar services.**

17. JUSTIFICATION FOR CONTRACTING OUT *(Check one)*

- Contracting out is based on cost savings per Government Code 19130(a). The State Personnel Board has been so notified.  Contracting out is justified based on Government Code 19130(b). Justification for the Agreement is described below.

Justification:

**N/A - I/A**

18. FOR AGREEMENTS IN EXCESS OF \$5,000, HAS THE LETTING OF THE AGREEMENT BEEN REPORTED TO THE DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING?

- NO  YES  N/A

19. HAVE CONFLICT OF INTEREST ISSUES BEEN IDENTIFIED AND RESOLVED AS REQUIRED BY THE STATE CONTRACT MANUAL SECTION 7.10?

- NO  YES  N/A

20. FOR CONSULTING AGREEMENTS, DID YOU REVIEW ANY CONTRACTOR EVALUATIONS ON FILE WITH THE DGS LEGAL OFFICE?

- NO  YES  NONE ON FILE  N/A

21. IS A SIGNED COPY OF THE FOLLOWING ON FILE AT YOUR AGENCY FOR THIS CONTRACTOR?

- A. CONTRACTOR CERTIFICATION CLAUSES  NO  YES  N/A  
 B. STD 204, VENDOR DATA RECORD  NO  YES  N/A

22. REQUIRED RESOLUTIONS ARE ATTACHED

- NO  YES  N/A

23. ARE DISABLED VETERANS BUSINESS ENTERPRISE GOALS REQUIRED? *(If an amendment, explain changes, if any)*

- NO *(Explain below)*  YES *(If YES complete the following)*

DISABLED VETERAN BUSINESS ENTERPRISES: \_\_\_\_\_ % OF AGREEMENT

Good faith effort documentation attached if 3% goal is not reached

We have determined that the contractor has made a sincere good faith effort to meet the goal.

Explain:

**SCM 8.12(A)(3)**

24. IS THIS A SMALL BUSINESS CERTIFIED BY OSBCR?

- NO  YES *(Indicate Industry Group)*

SMALL BUSINESS REFERENCE NUMBER

25. IS THIS AGREEMENT (WITH AMENDMENTS) FOR A PERIOD OF TIME LONGER THAN ONE YEAR? *(If YES, provide justification)*

- NO  YES

**Workload is time intensive, seasonal, and will take longer than one year to accomplish.**

*I certify that all copies of the referenced Agreement will conform to the original Agreement sent to the Department of General Services.*

SIGNATURE/TITLE

*Darryl W. Kool Analyst*

DATE SIGNED

*2/15/11*