AGREEMENT NUMBER C19-0071

REGISTRATION NUMBER

1	This Agreement is entered into between the State Agency and the Contractor named below:									
	STATE AGENCY'S NAME									
	ard of Governors, California Community Colleges Chancellor's Office									
	ONTRACTOR'S NAME									
	Chabot-Las Positas CCD									
2	The term of this Agreement is: July 1, 2019 through June 30, 2020									
3	The maximum Amount of this Agreement is: \$ 2,000,000.00									
1	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									
	Exhibit A - Scope of Work	2	page(s)							
	Exhibit B - Budget Detail and Payment Provisions	2	page(s)							
	Exhibit C - General Terms and Conditions (Attached hereto as part of this Agreement)	6	page(s)							
	Exhibit D - Special Terms and Conditions (Attached hereto as part of this Agreement)	12	page(s)							
	Exhibit E - Exhibit Not Used	0	page(s)							
	Exhibit F - Contractor's Proposal (Attached hereto as part of this Agreement)	4	page(s)							
	Exhibit G - Contractor's Cost Proposal (Attached hereto as part of this Agreement)	1	page(s)							
	Exhibit H - Contractor Certification Clauses, Chancellor's Office Form CCC-1005 (Attached hereto as part of this agreement)	5	page(s)							
	Exhibit I - Exhibit Not Used	0	page(s)							

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRACTOR		Chancellor's Office, California
CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.)		Community Colleges Use Only
Chabot-Las Positas CCD		
BY (Authorized Signature)	DATE SIGNED (Do not type)	
<b>K</b>		
PRINTED NAME AND TITLE OF PERSON SIGNING		
Doug Roberts, Interim Vice Chancellor, Business Services		
ADDRESS		
7600 Dublin Blvd, 3rd Floor, Dublin, CA 94568		
STATE OF CALIFORNIA		
AGENCY NAME		
Board of Governors, California Community Colleges Chancellor's Office		
BY (Authorized Signature)	DATE SIGNED (Do not type)	
<b>€</b>		
PRINTED NAME AND TITLE OF PERSON SIGNING		<b>7</b>
Daisy Gonzales, Deputy Chancellor		
ADDRESS		Exempt from DGS approval
1102 Q Street, Suite 4400, Sacramento, CA 95811-6539		pursuant to PCC 10295

AGREEMENT NUMBER C19-0071

									AWARD	ED FROM I	RECE	VABLE NO.
FUND TITLE	Bus. Unit	Ref No	Fund	FI\$Cal Prgm	Sub Task	Index	Object	Funding Fiscal Year (Enactment Year)	Chapter	Statute		GREEMENT AMOUNT
Student Equity & Achievement Program	6870	101	0001	5675040	203	8350	5432000	2019-20		2019	\$	2,000,000
<del>-</del>												
AGREEMENT TOTAL:											\$	2,000,000
						ı	AMOUNT TO	ENCUMBER B	Y THIS DO	CUMENT:	\$	2,000,000
					PI	RIOR AM	OUNT ENCU	IMBERED FOR	THIS AGR	EEMENT:		
TOTAL AMOUNT ENCUMBERED TO	DATE:										\$	2,000,000

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.						
DATE SIGNED (Do not type)						