

FULLY EXECUTED

<input checked="" type="checkbox"/> CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED	AGREEMENT NUMBER 4156-6	AMENDMENT NUMBER _____
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1. CONTRACTOR'S NAME Pacific Bell Telephone Company dba AT&T California, AT&T Wholesale, AT&T DataComm	2. FEDERAL I.D. NUMBER 94-0745535
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3. AGENCY TRANSMITTING AGREEMENT California Governor's Office of Emergency Services	4. DIVISION, BUREAU, OR OTHER UNIT 9-1-1 Emergency Communications	5. AGENCY BILLING CODE 009198
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6a. CONTRACT ANALYST NAME Samantha Patrick	6b. EMAIL Samantha.Patrick@caloes.ca.gov	6c. PHONE NUMBER (916) 845-8157
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7. HAS YOUR AGENCY CONTRACTED FOR THESE SERVICES BEFORE?
 No Yes (If Yes, enter prior Contractor Name and Agreement Number)

PRIOR CONTRACTOR NAME _____ PRIOR AGREEMENT NUMBER _____

8. BRIEF DESCRIPTION OF SERVICES
 Agreement establishes fixed costs for 9-1-1 Customer Premise Equipment (CPE) systems and 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.)

Pacific Bell Telephone Company will provide Cal OES with call handling Customer Premise Equipment (CPE) necessary for the California Public Safety Awareness Points (PSAPs) to answer 9-1-1 calls. The agreement establishes fixed costs for various types of equipment relating to 9-1-1 systems and services.

10. PAYMENT TERMS (More than one may apply)

Monthly Flat Rate Quarterly One-Time Payment Progress Payment
 Itemized Invoice Withhold _____ % Advanced Payment Not To Exceed \$ _____ or _____ %
 Reimbursement / Revenue
 Other (Explain) _____

11. PROJECTED EXPENDITURES

FUND TITLE	ITEM	FISCAL YEAR	CHAPTER	STATUTE	PROJECTED EXPENDITURES
SETNA	0690-101-0022	16/17	23	2016	\$ 0
					\$
					\$
					\$
					\$

OBJECT CODE 702-04	AGREEMENT TOTAL \$ 0
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OPTIONAL USE 17000/7350	AMOUNT ENCUMBERED BY THIS DOCUMENT \$ 0.00
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I certify upon my own personal knowledge that the budgeted funds for the current budget year are available for the period and purpose of the expenditure stated above.

PRIOR AMOUNT ENCUMBERED FOR THIS AGREEMENT \$ 0.00
TOTAL AMOUNT ENCUMBERED TO DATE \$ 0.00

ACCOUNTING OFFICER'S SIGNATURE 	ACCOUNTING OFFICER'S NAME (Print or Type) Gemma Domingo	DATE SIGNED 5/20/17
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AGREEMENT SUMMARY

STD 215 (Rev. 04/2017)

12. AGREEMENT	TERM		TOTAL COST OF THIS TRANSACTION	BID, SOLE SOURCE, EXEMPT
	FROM	THROUGH		
Original	04/10/17	04/09/20	\$ 0	BID
Amendment No. 1			\$	
Amendment No. 2			\$	
Amendment No. 3			\$	
TOTAL			\$ 0	

13. BIDDING METHOD USED

Request for Proposal (RFP) (Attach justification if secondary method is used) Use of Master Service Agreement

Invitation for Bid (IFB) Exempt from Bidding (Give authority for exempt status) Sole Source Contract (Attach STD. 821)

Other (Explain)

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)

Airbus: \$0.00, Carousel: \$0.00, Frontier Communications of America: \$0.00, AT&T: \$0.00, AT&T: \$0.00, Zetron: \$0.00, Frontier (Airbus) \$0.00, InterTalk: \$0.00, Solocom: \$0.00

15. IF AWARD OF AGREEMENT IS TO OTHER THAN THE LOWER BIDDER, EXPLAIN REASON(S) (If an amendment, sole source, or exempt, leave blank)

All bidders were awarded an agreement for zero dollars as agreement establishes fixed costs for goods and services.

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


California Department of Technology (CDT) conducted in-depth evaluations to ensure the CPE quoted rates are reasonable.

17a. 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). When this box is checked, a completed JUSTIFICATION - CALIFORNIA CODE OF REGULATIONS, TITLE 2, SECTION 547.60 must be attached to this document.

17b. EMPLOYEE BARGAINING UNIT NOTIFICATION

By checking this box, I hereby certify compliance with Government Code section 19132(b)(1).

AUTHORIZED SIGNATURE 	SIGNER'S NAME (Print or Type) Samantha Patrick	DATE SIGNED 5/23/17
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18. FOR AGREEMENTS IN EXCESS OF \$5,000: Has the letting of the agreement been reported to the Department of Fair Employment and Housing? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	22. REQUIRED RESOLUTIONS ARE ATTACHED <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A
19. HAVE CONFLICT OF INTEREST ISSUES BEEN IDENTIFIED AND RESOLVED AS REQUIRED BY THE STATE CONTRACT MANUAL SECTION 7.10? <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A	
20. FOR CONSULTING AGREEMENTS: Did you review any contractor evaluations on file with the DGS Legal Office? <input type="checkbox"/> None on file <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A	
21. IS A SIGNED COPY OF THE FOLLOWING ON FILE AT YOUR AGENCY FOR THIS CONTRACTOR? A. Contractor Certification Clauses <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A B. STD 204 Vendor Data Record <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	24. IS THIS A SMALL BUSINESS AND/OR A DISABLED VETERAN BUSINESS CERTIFIED BY DGS? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes SB/DVBE Certification Number:

23. ARE DISABLED VETERANS BUSINESS ENTERPRISE GOALS REQUIRED? (If an amendment, explain changes if any) No (Explain below) Yes _____ % of Agreement

A formal IFB was conducted by CDT for these services due to the technical nature of the services required. CDT waived the DVBE participation requirement for this solicitation.

25. IS THIS AGREEMENT (WITH AMENDMENTS) FOR A PERIOD OF TIME LONGER THAN THREE YEARS? No Yes (If Yes, provide justification below)

Due to the technical nature of this Agreement, CDT conducted the IFB and will be overseeing the Agreement itself. CDT authorized the multiple year (3 year) term.

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


SIGNATURE 	NAME/TITLE (Print or Type) Nicole Finch, SSM	DATE SIGNED 5/26/17
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JUSTIFICATION - CALIFORNIA CODE OF REGULATIONS, TITLE 2, SECTION 547.60

In the space provided below, the undersigned authorized state representative documents, with specificity and detailed factual information, the reasons why the contract satisfies one or more of the conditions set forth in Government Code section 19130(b). Please specify the applicable subsection. Attach extra pages if necessary.

Services are of a highly specialized and technical nature that the necessary expert knowledge experience and ability are not available within the civil service system.

The undersigned represents that, based upon his or her personal knowledge, information or belief the above justification correctly reflects the reasons why the contract satisfies Government Code section 19130(b).

SIGNATURE 		NAME/TITLE (Print or Type) Samantha Patrick/Contracts Analyst		DATE SIGNED 5/23/17	
PHONE NUMBER (916) 845-8157		STREET ADDRESS 3650 Schriever Avenue			
EMAIL Samantha.Patrick@caloes.ca.gov		CITY Mather		STATE CA	ZIP 95655