

**INTERAGENCY AGREEMENT
AMENDMENT 01**

Modification of Interagency Agreement between the State Office of Superintendent of Public
Instruction, State of Washington (hereinafter referred to as "OSPI")

and

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
(hereinafter referred to as "DSHS")

Which commenced the 1st day of October 2011, and terminates the 30th day of September 2016, and is numbered **OSPI C23-0375/DSHS 1161-33096**.

For and in consideration of the mutual promises contained in this modification of agreement, OSPI and DSHS do mutually agree to modify the agreement identified above as follows:

PERIOD OF PERFORMANCE shall be amended to read as follows:

Subject to its other provisions, the period of performance of this Agreement shall commence on October 1, 2011, and be completed on ~~September 30, 2016~~, September 30, 2021, unless terminated sooner, or extended as provided in Section 4 of this Agreement.

CONTRACT MANAGEMENT shall be amended to read as follows:

The program managers for each of the parties are responsible for and are the contact persons for all communications regarding performance of the contract:

OSPI: ~~Pamela McPartland at Pamela.mcpartland@k12.wa.us~~; Valerie Arnold at valerie.arnold@k12.wa.us; 360-725-6075

DSHS: ~~Judy Hall at HallJJ@dshs.wa.gov~~; Angela Williams at angela.williams@dshs.wa.gov; ~~360-902-8254~~ 360-664-6046.

OSPI designated authority to amend: Director, OSPI Special Education, or his or her successor or designee. DSHS designated authority to amend: DSHS Contracting Officer or his or her successor or designee.


ALL OTHER TERMS AND CONDITIONS OF THIS AGREEMENT REMAIN IN FULL FORCE AND EFFECT.

This modification of contract shall take effect at midnight the 19th day of September 2016, or the date of execution, whichever is later, OR the date of approval by the Department of Enterprise Services in the event such filing is required by state law or rules, whichever date is the latest.

IN WITNESS WHEREOF, the parties have executed this Agreement Amendment.

Department of Social and Health Services

Superintendent of Public Instruction
State of Washington


Signature

Contract Manager
Title


Kyla L. Moore, Assistant Contracts Administrator

Angel Williams
Print Name

9/13/16
Date

September 13, 2016
Date

Approved as to FORM ONLY
by the Assistant Attorney General