

**DATE:** March 14, 2014  
**MEETING OF:** March 25, 2014  
**FROM:** Staff  
**RE:** **ACTION ITEMS X.4 – Oasis Camel Dairy**

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**BACKGROUND**

Oasis Camel Dairy will be providing turkey stampede and exotic bird shows September 9-14, 2014, for the annual fair.

**FISCAL IMPACT**

Contract cost of \$10,800.00 as budgeted in fair entertainment budget.

**STAFF RECOMMENDATION**

That the Board approves a motion to execute the agreement with Oasis Camel Dairy.

**ATTACHMENTS**

- Standard Agreement 2014-02.

**NOTE:** Individual contracts of \$10,000 or more require individual board approval even when previously budgeted.

STATE OF CALIFORNIA  
**STANDARD AGREEMENT**  
 STD 213 (Rev 06/03)

AGREEMENT NUMBER

**2014-02**

REGISTRATION NUMBER

1. This Agreement is entered into between the State Agency and the Contractor named below:

STATE AGENCY'S NAME

Santa Cruz County Fair / 14<sup>th</sup> District Agriculture Association

CONTRACTOR'S NAME

Oasis Camel Dairy

2. The term of this Agreement is: 09/09/14 through 09/14/2014  
 September 9, 2014 through September 14, 2014

3. The maximum amount of this Agreement is: \$ 10,800.00  
 Ten Thousand Eight Hundred and 00/100----

4. 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	1 page(s)
Exhibit B – Budget Detail and Payment Provisions	2 page(s)
Exhibit C* – General Terms and Conditions	0 page(s)
Check mark one item below as Exhibit D:	
<input type="checkbox"/> Exhibit - D Special Terms and Conditions (Attached hereto as part of this agreement)	page(s)
<input checked="" type="checkbox"/> Exhibit - D* Special Terms and Conditions	page(s)
Exhibit E – Additional Provisions	page(s)

Items shown with an Asterisk (\*), are hereby incorporated by reference and made part of this agreement as if attached hereto.  
 These documents can be viewed at [www.ols.dgs.ca.gov/Standard+Language](http://www.ols.dgs.ca.gov/Standard+Language)

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

<b>CONTRACTOR</b>		<i>California Department of General Services Use Only</i>
CONTRACTOR'S NAME (if other than an individual, state whether a corporation, partnership, etc.) Oasis Camel Dairy		
BY (Authorized Signature) 	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING Nancy Kobert, Contractor		
ADDRESS PO Box 1321, Ramona, CA 92065 760.644.8000		
<b>STATE OF CALIFORNIA</b>		
AGENCY NAME Santa Cruz County Fair/14 <sup>th</sup> DAA		
BY (Authorized Signature) 	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING Dave Kegebein, Manager		
ADDRESS 2601 East Lake Avenue, Watsonville, CA 95076		
		<input type="checkbox"/> Exempt per:

**AGREEMENT SUMMARY**  
STD 215 (Rev 4/2002)

AGREEMENT NUMBER <b>2014-02</b>	AMENDMENT NUMBER
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CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED

1. CONTRACTOR'S NAME <b>Oasis Camel Dairy</b>	2. FEDERAL I.D. NUMBER
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3. AGENCY TRANSMITTING AGREEMENT <b>Santa Cruz County Fair</b>	4. DIVISION, BUREAU, OR OTHER UNIT <b>14<sup>th</sup> District Agriculture Association</b>	5. AGENCY BILLING CODE
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6. NAME AND TELEPHONE NUMBER OF CONTRACT ANALYST FOR QUESTIONS REGARDING THIS AGREEMENT

7. HAS YOUR AGENCY CONTRACTED FOR THESE SERVICES BEFORE?  
 NO       YES (If YES, enter prior contractor name and Agreement Number)

8. BRIEF DESCRIPTION OF SERVICES - LIMIT 72 CHARACTERS INCLUDING PUNCTUATION AND SPACES  
 Contractor will provide three turkey stampede and three bird shows day at the Fair, September 9-14, 2014.

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.)  
 Oasis Camel Dairy will provide the 14<sup>th</sup> District Agriculture Association/Santa Cruz County Fair with three (3) twenty minute turkey stampede shows per day and three (3) twenty minute bird shows per day of Fair, September 9-14, 2014

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  
 REIMBURSEMENT/REVENUE      \$ \_\_\_\_\_ or \_\_\_\_\_ %  
 OTHER (Explain) \_\_\_\_\_

11. PROJECTED EXPENDITURES FUND TITLE	ITEM	F.Y.	CHAPTER	STATUTE	PROJECTED EXPENDITURES
					\$
					\$
					\$

OBJECT CODE	AGREEMENT TOTAL	\$
OPTIONAL USE	AMOUNT ENCUMBERED BY THIS DOCUMENT	\$
<i>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.</i>	PRIOR AMOUNT ENCUMBERED FOR THIS AGREEMENT	\$
ACCOUNTING OFFICER'S SIGNATURE	DATE SIGNED	TOTAL AMOUNT ENCUMBERED TO DATE
		\$

12. AGREEMENT	TERM		TOTAL COST OF THIS TRANSACTION	BID, SOLE SOURCE, EXEMPT
	From	Through		
Original	9/9/2014	9/14/2014	\$ 10,800.00	N/A
Amendment No. 1			\$	
Amendment No. 2			\$	
Amendment No. 3			\$	
<b>TOTAL</b>			\$	

(Continue)

**AGREEMENT SUMMARY**

STD. 215 (Rev 04/2002)

**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)* *(Give authority for exempt status)*

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)**

N/A

**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)**

N/A

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

This is part of the Entertainment for the 2014 Santa Cruz County Fair.

<b>18. FOR AGREEMENTS IN EXCESS OF \$5,000, HAS THE LETTING OF THE AGREEMENT BEEN REPORTED TO THE DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING?</b> <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> N/A	<b>19. HAVE CONFLICT OF INTEREST ISSUES BEEN IDENTIFIED AND RESOLVED AS REQUIRED BY THE STATE CONTRACT MANUAL SECTION 7.10?</b> <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> N/A	<b>20. FOR CONSULTING AGREEMENTS, DID YOU REVIEW ANY CONTRACTOR EVALUATIONS ON FILE WITH THE DGS LEGAL OFFICE?</b> <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NONE ON FILE <input checked="" type="checkbox"/> N/A
<b>21. IS A SIGNED COPY OF THE FOLLOWING ON FILE AT YOUR AGENCY FOR THIS CONTRACTOR?</b> 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 checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> N/A		<b>22. REQUIRED RESOLUTIONS ARE ATTACHED</b> <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> N/A
<b>23. ARE DISABLED VETERANS BUSINESS ENTERPRISE GOALS REQUIRED? (If an amendment, explain changes, if any)</b> <input type="checkbox"/> NO <i>(Explain below)</i> <input type="checkbox"/> YES <i>(If YES complete the following)</i> DISABLED VETERAN BUSINESS ENTERPRISES: _____ % OF AGREEMENT <i>Explain:</i>		
<b>24. IS THIS A SMALL BUSINESS CERTIFIED BY OSBCR?</b> <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <i>(Indicate Industry Group)</i> _____		SMALL BUSINESS REFERENCE NUMBER _____
<b>25. IS THIS AGREEMENT (WITH AMENDMENTS) FOR A PERIOD OF TIME LONGER THAN ONE YEAR? (If YES, provide justification)</b> <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		

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

SIGNATURE/TITLE

DATE SIGNED



**EXHIBIT A  
(Interagency Agreement)**

**SCOPE OF WORK**

1. Oasis Camel Dairy agrees to provide the following services:

Oasis Camel Dairy will provide the 14<sup>th</sup> District Agriculture Association/Santa Cruz County Fair with three (3) twenty minute turkey stampede shows per day and three (3) twenty minute bird shows per day of Fair, September 9-14, 2014.

2. 14<sup>th</sup> District Agriculture Association/ Santa Cruz County Fair agrees to provide the following services:

The 14<sup>th</sup> DAA agrees to provide Oasis Camel Dairy with bleachers and seating surrounding the exhibit. The exhibit size will be 60'X60' minus seating. The Association will also provide electricity, water (within 50 feet), and pine shavings. The 14<sup>th</sup> DAA will pay Oasis Camel Dairy \$10,800.00 for all shows the week of Fair. Check will be ready Sunday evening.

3. The project representatives during the term of this agreement will be:

State Agency: 14 <sup>th</sup> DAA/ SCCF	Contractor: Oasis Camel Dairy
Name: Dave Kegebein, Manager	Name: Nancy Kobert
Phone: (831) 724-5671	Phone: (760) 644-8000
Fax: (831) 761-5827	Fax:

Direct all inquiries to:

State Agency: 14 <sup>th</sup> DAA/SCCF	Contractor: Oasis Camel Dairy
Section/Unit: Exhibit Representative	Section/Unit: Contact
Attention: Bonita Monarque	Attention: Nancy Kobert
Address: 2601 East Lake Ave, Watsonville	Address: PO Box 1321, Ramona, CA 92065
Phone: (831) 724-5671, ext. 202	Phone: (760)664-8000
Fax: (831) 761-5827	Email: <a href="mailto:nancyriegler@aol.com">nancyriegler@aol.com</a>