



Government of the District of Columbia  
Child and Family Services Agency

**HUMAN CARE AGREEMENT**

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1. CONTRACT NUMBER:		2. REQUISITION/PURCHASE REQUEST NO.		3. PURCHASE ORDER/TASK ORDER NUMBER		4. DATE OF AWARD								
5. ISSUED BY Child and Family Services Agency 955 L'Enfant Plaza, S.W., Suite 5200 Washington, D.C. 20024				6. ADMINISTERED BY (If other than Item 5)  See Section G										
7. NAME AND ADDRESS OF PROVIDER/CONTRACTOR (No. street, county, state and ZIP Code)														
8. PROVIDER/CONTRACTOR SHALL SUBMIT ALL INVOICES TO: Child and Family Services Agency Fiscal Operations 2 <sup>nd</sup> Street SW Washington, DC 20024				9. DISTRICT SHALL SEND ALL PAYMENTS TO:										
<b>10. DESCRIPTION OF HUMAN CARE SERVICE AND COST (TO BE COMPLETED BY CFSA)</b>														
ITEM/LINE NO.	NIGP CODE	BRIEF DESCRIPTION OF HUMAN CARE SERVICE			QUANTITY OF SERVICE REQUIRED	TOTAL SERVICE UNITS	SERVICE RATE	TOTAL AMOUNT						
0001	952-15-00 952-47-00	Case Management Foster Home and Adoption Services					SEE ATTACHED SCHEDULE B							
							Total	\$						
							Total From Any Continuation Pages	\$						
							GRAND TOTAL	\$						
<b>11. APPROPRIATION DATA AND FINANCIAL CERTIFICATION</b>														
LINW	AGY	YEAR	INDEX	PCA	OBJ	AOBJ	GRANT/PH	PROJ/PH	AG1	AG2	AG3	PERCENT	FUND SOURCE	AMOUNT
A. Soar System Obligation Code  N/A		B. Name of Financial Officer (Typed):			C. Signature:				D. Date:					
<b>12. PERIOD OF HUMAN CARE AGREEMENT</b>														
Starting Date: _____								Ending Date: _____						
<b>HUMAN CARE AGREEMENT SIGNATURES</b>														
Pursuant to the authority provided in D.C. Law 13-155, this HUMAN CARE AGREEMENT is being entered into between the Provider/Contractor specified in Item No. 7 of this document. The Provider/Contractor is required to sign and return two originals of this document to the Contracting Officer of the Issuing Office stated in Item No. 5 of page 1 of this document. The Contractor further agrees to furnish and deliver all items or perform all the services set forth or otherwise identified within this Human Care Agreement and on any continuation sheets or appendices for the consideration stated above. The rights and obligations of the parties to this Human Care Agreement shall be subject to and governed by the following documents: (a) this Human Care Agreement; (b) the STANDARD CONTRACT PROVISIONS FOR USE WITH DISTRICT OF COLUMBIA GOVERNMENT SUPPLY AND SERVICES CONTRACTS, dated March 2007; (c) Any other provisions, representations, certifications, and specifications, as are attached or incorporated by reference herein. This Human Care Agreement between the signatories to this document consummates the final agreement of the parties.														
<b>13. FOR THE PROVIDER/CONTRACTOR</b>								<b>14. FOR THE DISTRICT OF COLUMBIA</b>						
A. Name and Title of Signer (Type or print) Name: Title:								A. Name of Contracting Officer (Type or print) Name: Title:						
B. Signature of PROVIDER/CONTRACTOR, or representative:				C. Date:		B. Signature of CONTRACTING OFFICER:				C. Date:				