

June 07, 2019

SINGLE AGENCY AGREEMENT (SAA)

This agreement is between Lottery (Agency) and the Department of Enterprise Services, Training Delivery Services (TDS).

This agreement is entered into pursuant to the Customer Service Agreement between the parties, and is subject to all terms of that agreement which are consistent with the terms of this agreement.

1. Course Information - Attachment #1.
2. Agency's total cost for services contained in this SAA - \$2,000.00

**3. Cancellation:**

TDS must be notified on or before the cancellation date indicated on Attachment #1 if any changes to this agreement are needed. Failure to notify TDS of changes may result in the agency being charged for costs that are not recoverable.

**4. Agency is Responsible for:**

- a. Identifying any areas that need special emphasis.
- b. Registering participants before the class date.
- c. Sending participants confirmation notifications before the class date. If the agency wants TDS to send confirmation letters they will register participants 15 working days before the first day of the class and notify TDS.
- d. Providing accommodations if persons of disability are attending the class.
- e. Returning the class roster and evaluation forms to TDS in a timely manner.
- f. Paying for the class upon receipt of billing.

**5. TDS is Responsible for:**

- a. Assisting in the coordination and delivery of the classes listed in this agreement.
- b. Assisting in identifying qualified contractors.
- c. Overseeing vendor contracts and related payments.
- d. Sending participant confirmation letters, if registered in the Learning Management System. See 4c above.
- e. Providing class rosters when participants have been registered.
- f. Insuring participants receive training credit to their individual training profile, as long as the agency provides participant personnel ID numbers.

**6. Additional Requirements and Responsibilities**

TDS Provides:

Agency Provides:

This agreement must be signed and returned to Rachael Stich, TDS, P.O. Box 41464, Olympia, Washington 98504-1464, Mail Stop 41464, by June 21, 2019

**TDS**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

APPROVAL AS TO FORM ONLY  
ASSISTANT ATTORNEY GENERAL

**AGENCY**

*Debbie Robinson*  
\_\_\_\_\_  
Please Print Your Name

*DR*  
\_\_\_\_\_  
Signature

*6/7/2019*  
\_\_\_\_\_  
Date

~~664-4874~~ *360.791.3045*  
\_\_\_\_\_  
Telephone Number

Lottery  
MS 43005  
Olympia, WA

\_\_\_\_\_  
Mailstop/Mailing Address

*d robinson@walottery.com*  
\_\_\_\_\_  
E-Mail Address

**SCHEDULE OF SERVICES AND COMPENSATION**

**AGENCY NAME:** Lottery

**AGREEMENT NUMBER:** SA00034483, Attachment #1

**Date:** June 07, 2019

COURSE TITLE & INSTRUCTOR or FIRM	COURSE CODE	DATE	TIME	LOCATION	CLASS SIZE	COST PER SESSION	CANCEL DATE	CONTACT PERSON
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<b>ADD</b> Government to Government Training (1 Day) - Gordon James	01-03-SP14	Jul 17, 2019	8:30 AM-4:30 PM	Olympia	25	\$2,000.00	7/1/2019	R. Stich
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Agreement Total \$2,000.00

The AGENCY will notify DES in advance of any changes or cancellations to this agreement