

Office Space Agreement

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| I. Term | | | |
| TERM: Date of Agreement: 02/03/10 | | Agreement effective through: 06/30/10 | |
| Landlord: | Multnomah County | Tenant: | State of Oregon Department of Human Services |
| Mailing Address: | 421 SW Oak St., Suite 510 Portland, OR 97204 | Mailing Address: | 500 Summer ST NE E90 Salem, Oregon 97301-1115 |
| Contact: | Catherine Clay-Eckton | Contact: | Linda Riddell or Successor |
| Phone: | (503) 988-5460 | Phone: | (503) 945-5817 |
| Fax: | (503) 988-3656 | Fax: | (503) 947-5316 |
| E-mail: | c.clay-eckton@co.multnomah.or.us | E-mail: | Linda.C.Riddell@state.or.us |
| Fed ID: | 9360023009 | Fed ID: | N/A |
| II. Premises | | | |
| Approximately 250 dedicated square feet and 200 square feet of common area for a total of 450 square feet. | | Located at: Address: 10615 SE Cherry Blossom Dr | |
| Floor plan attached? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | City: Portland State, Zip OR, 97216-3103 | |
| III. Rent | | | |
| The Monthly Base Rent shall be paid in arrears: The Base Rent for any partial month shall be prorated on a per diem basis. | | | |
| OFFICE SPACE AGREEMENT PERIOD | | MONTHLY BASE RENT | |
| 02/03/10 TO 06/30/10 | | \$ 0.00 | |
| TO | | \$ | |
| TO | | \$ | |
| TO | | \$ | |
| IV. Purpose / Use of Space | | | |
| Purpose: To house OTM employees that will become county employees on July 1, 2010. These employees give services to clients in need of the "One the Move" program for transportation needs. | | | |
| The following equipment of Tenant is on-site: Savin Copy, Fax, Scanner, Computer. This listing may be changed in writing, as equipment changes are made. | | | |

EXHIBIT A

| | | |
|---|---------------------------|---|
| Tenant's staff will occupy the Premises on the following week days: Mon - Fri | Number of staff: 3 | Working Hours: 8:00 am-- 5:00 pm |
| V. Termination | | |
| Either party may terminate this Office Space Agreement without any further obligation or liability to the other with not less than ninety (90) days prior written notice. | | |
| VI. Control of Premises | | |
| Tenant shall have quiet enjoyment of the Premises and Landlord shall provide the Premises free of interference by third parties. Landlord shall provide Tenant's staff, clients, and visitors safe and clear access to the Premises. | | |
| VII. CONFIDENTIALITY | | |
| Landlord understands that information obtained in connection with this Office Space Agreement may include or consist of protected health information about individuals that is protected by the Health Insurance Portability and Accountability Act (HIPAA) privacy and security rules, 45 CFR Parts 160 and 164, or other confidential information that is protected by federal or state confidentiality laws (e.g., information about applicants for or recipients of public assistance or child welfare services or services for seniors or persons with disabilities). Landlord agrees to implement reasonable and appropriate safeguards to protect the confidentiality and security of the confidential information, consistent with Tenant's confidentiality and security policies at DHS* which are hereby made applicable to Landlord. (If Tenant is a business associate of DHS, the business associate requirements established in the separate contract or intergovernmental agreement between Landlord and Tenant continue to apply.) Landlord will immediately report to Tenant any unauthorized use or disclosure of protected health information or other confidential information of which Landlord becomes aware, and take such corrective actions as Tenant determines to be appropriate. | | |
| VIII. Access | | |
| Landlord shall provide Tenant staff, clients, and visitor's safe and clear access to Tenant's portion of the premises. | | |
| IX. Parking | | |
| Tenant and Tenant's clients may share the designated parking area with Landlord. There are no spaces dedicated or assigned specifically to Tenant. | | |

* Webpage: <http://www.dhs.state.or.us/policy/admin/polindex.htm>


DHS Policies:

- DHS-090-001 DHS Information Security
- DHS-090-009 Desktop and Laptop Computer Security
- AS-100-01 General Policy
- AS-100-005 Administrative, Technical and Physical Safeguards

X. Signatures

This Office Space Agreement constitutes the entire agreement of the parties and may be amended only in writing.

TENANT: State of Oregon by and through its Department of Human Services

By:  Date: 2/3/10
Department of Human Services Office of Facilities, Administrator

LANDLORD:

By: _____ Date: _____
Authorized signature: Multnomah County

Billing Address (if different than Landlord address as shown on page 1)

Name:

Mailing Address:

Contact:

Phone:

Fax:

E-mail: