



**Letter of Agreement**

Date: 05/24/23  
Presenter: City of Tualatin  
Address: 18880 SW Martinazzi Avenue  
City, State, ZIP: Tualatin, OR 97062  
Presenter Email: sshepherd@tualatin.gov  
Contact Person: Sara Shepherd  
Phone Number: 503-691-3014

This letter serves as a formal agreement between Washington County and \_\_\_\_\_  
\_\_\_\_\_  
City of Tualatin \_\_\_\_\_, Presenter, whereby Presenter  
will provide a weekly Yoga class for veterans and their support person(s)  
on Saturdays at 10:15 am, from 07/01/23-09/30/23.

Services will take place at Juanita Pohl Center 8513 SW Tualatin, OR 97062.  
Presenter will be compensated for services provided in the amount of \$30 per week, 13wks, total \$390.

Payment will be disbursed within 30 days of receipt of invoice after completion of services.

**Presenter Services shall include the following:**

Veterans Weekly yoga class on Saturdays at 10:15am-11:15am. Veterans Yoga is a class where all veterans can come together to support each other and learn gentle stretches to help ease suffering from combat and post traumatic stress. Students will be guided to move and breathe to bring healing to the whole warrior. This program is for Veterans, their support folks, Vets' family members (spouses, widow/widowers, children, parents) and friends. The class will be free for veterans and their support person.

July-September billed by December 15th

Every participant must legibly include their name on the Waiver Sign In sheet, which will be forwarded to Vicki Horn at Washington County via email to: [Vicki\\_Horn@washingtoncountyor.gov](mailto:Vicki_Horn@washingtoncountyor.gov) along with the invoice for payment. If it is a series activity, they are only required to include their name on the Waiver Sign In sheet one time. This form asks for an email address and is required to be completed. Washington County will send participants an email explaining our services and a copy of Stronger Together e-newsletter. Participants can opt out of the newsletter after receipt.

**Washington County shall provide the following:**

- Washington County Waiver Form for Participants
- DAVS Stronger Together invoice- with checklist of items needed.
- Veteran Services Flier with QR code
- Advertising of event/series in Stronger Together e-Newsletter and sending flier to multiple list serves that reach Washington County Veterans.



# WASHINGTON COUNTY OREGON

Presenter shall defend, indemnify and hold harmless the County, its agents, officers, elected officials and employees from and against all claims, demands and judgments (including attorney fees) made or recovered against them including, but not limited to, damages to real or tangible property or for bodily injury or death to any person, arising out of, or in connection with the service provided, to the extent such damage, injury or death is caused or sustained in connection with the negligent performance or willful misconduct of the Presenter. The County agrees to promptly notify the Presenter in writing of any such claim or demand to indemnify and agrees to cooperate with the Presenter in a reasonable manner to facilitate the defense of such claim.

With regards to State of Oregon requirements to obtain worker’s compensation insurance under ORS Chapter 656,

Presenter certifies that they:  Comply with ORS 656.017  
 Are exempt from the requirements

DocuSigned by:  
Rebecca Miller  
Department Head or Division Manager Signature

6/2/2023 | 08:12 PDT  
Date

Rebecca Miller  
Department Head or Division Manager Name Printed

503-846-3080  
Phone Number

\_\_\_\_\_  
Presenter or Authorized Signer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Presenter or Authorized Signer Name Printed

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Procurement Manager or Designee

\_\_\_\_\_  
Date

Paul Riggs  
Washington County Contact Name Printed

503-846-3057  
Phone Number

**Certificate Of Completion**

Envelope Id: 7F62F006AE674B8A9F36049BBC54702C

Status: Sent

Subject: Please DocuSign: Letter of Agreement with Washington County and Sara Shepherd

Source Envelope:

Document Pages: 2

Signatures: 1

Envelope Originator:

Certificate Pages: 5

Initials: 0

Yassamin Alayan

AutoNav: Enabled

155 N. First Ave, Suite 270

Enveloped Stamping: Enabled

MS28

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Hillsboro, OR 97124-3087

yassamin\_alayan@co.washington.or.us

IP Address: 192.235.66.2

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yassamin\_alayan@co.washington.or.us

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Pool: Washington County

Location: DocuSign

**Signer Events**

Rebecca Miller

rebecca\_miller@co.washington.or.us

Security Level: Email, Account Authentication (None), Access Code

**Signature**

DocuSigned by:



9F13D989CD744E0...

**Timestamp**

Sent: 6/1/2023 7:08:57 PM

Viewed: 6/2/2023 8:12:07 AM

Signed: 6/2/2023 8:12:14 AM

Signature Adoption: Pre-selected Style

Using IP Address: 204.147.152.5

**Electronic Record and Signature Disclosure:**

Accepted: 11/18/2019 10:11:58 PM

ID: 1c8e3cca-02c1-4c2c-b1a8-f01c1f215481

Sara Shepherd

sshpherd@tualatin.gov

Security Level: Email, Account Authentication (None)

Sent: 6/2/2023 8:12:15 AM

Viewed: 6/2/2023 9:03:55 AM

**Electronic Record and Signature Disclosure:**

Accepted: 6/2/2023 9:03:55 AM

ID: ec34cbd2-42c7-465a-b138-6fcad01bbf40

Yassamin Alayan

yassamin\_alayan@co.washington.or.us

Security Level: Email, Account Authentication (None), Access Code

**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

Paul Riggs

paul\_riggs@washingtoncountyor.gov

Security Level: Email, Account Authentication (None)

**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

**In Person Signer Events**

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**Editor Delivery Events**

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<b>Certified Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
<b>Carbon Copy Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Notary Events</b>	<b>Signature</b>	<b>Timestamp</b>
<b>Envelope Summary Events</b>	<b>Status</b>	<b>Timestamps</b>
Envelope Sent	Hashed/Encrypted	6/1/2023 7:08:57 PM
<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>
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## **ELECTRONIC RECORD AND SIGNATURE DISCLOSURE**

From time to time, Carahsoft OBO SHI OBO Washington County (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

### **Getting paper copies**

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

**How to contact Carahsoft OBO SHI OBO Washington County:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [tina\\_hartmeier@co.washington.or.us](mailto:tina_hartmeier@co.washington.or.us)

**To advise Carahsoft OBO SHI OBO Washington County of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [tina\\_hartmeier@co.washington.or.us](mailto:tina_hartmeier@co.washington.or.us) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

**To request paper copies from Carahsoft OBO SHI OBO Washington County**

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to [tina\\_hartmeier@co.washington.or.us](mailto:tina_hartmeier@co.washington.or.us) and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

**To withdraw your consent with Carahsoft OBO SHI OBO Washington County**

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to [tina\\_hartmeier@co.washington.or.us](mailto:tina_hartmeier@co.washington.or.us) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

### **Required hardware and software**

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

### **Acknowledging your access and consent to receive and sign documents electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Carahsoft OBO SHI OBO Washington County as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Carahsoft OBO SHI OBO Washington County during the course of your relationship with Carahsoft OBO SHI OBO Washington County.