



COYOTE VALLEY

Band of Pomo Indians

HEALTH & HUMAN SERVICES DEPARTMENT IN-HOME SUPPORTIVE SERVICES PROGRAM CONTRACTOR AGREEMENT

This agreement is for services between Coyote Valley Health & Human Services Department (CVHHS) and the Contractor:

Name: _____ Tax ID/SS# _____

Description of Services:

Strictly for the purpose of providing aid and assistance to elders.

Start Date: _____

Total Compensation:

Unemployed Elder: 28 Hours Per Pay Period @ \$8.50

Employed Elder: 10 Hours Per Month @ \$8.50

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- Contractor warrants and represents that he/she has every legal right, as well as the ability and expertise, to enter into this Agreement and to perform in accordance with its terms.
 - Contractor enters into this Agreement and will remain through the duration, an Independent Contractor and acknowledges that CVHHS is not liable to withhold or to pay payroll taxes on Contractor's behalf.
 - Contractor is solely responsible for Public Liability, Damage and Workers' Compensation Insurances.
 - Contractor will indemnify and hold harmless CVHHS, its members and employees, from any and all claims, including attorney's fees, resulting to any subcontractors, laborers, persons or firms who may be injured or damaged by the Contractor and/or his/her agents or representatives.
 - Contractor agrees that CVHHS shall retain all rights to any items produced during the term of this project.
 - CVHHS agrees to pay fees in a timely manner, with appropriate documentation.
 - CVHHS shall not hinder nor obstruct Contractor from performing his/her services.

Signatures:

Contractor

Coyote Valley Health & Human Services

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____ Fax: _____

Phone: _____ Fax: _____

Date: _____

Date: _____