

XXXX XXXXXXX
OK 2/2/85



STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Olympia, Washington 98504

June 18, 1985

Bill

KAREN RAHM
Secretary

Skamania County
County Courthouse 0 2nd Street
Stevenson, WA 98648

RECEIVED

JUN 20 1985

SKAMANIA COUNTY
COMMISSIONER

RE: Contract/Amendment No.

3820-48155

Dear Contractor:

Enclosed is a fully-executed copy of the above-referenced contract/
amendment between you and the Department of Social and Health Services
for your permanent file.

Claims for payment for services rendered under this contract/amendment
will be accomplished through the submission of invoice vouchers
supplied to you by the Department of Social and Health Services. All
invoice vouchers shall contain your contract/amendment number and such
other information as is required for the department to determine the
exact nature of all charges for service.

Sincerely,

Linda Sweet

Linda Sweet
Deputy Contracting Officer
Department of Social and Health Services
Office of Contracts Management, OB-22N
Olympia, Washington 98504

LS:gw

Enclosures

Brenda —
Signed original
per your request.
I have copy —

Brenda K.