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Award Summary
Agreement to Agree
TA Consultant
 (Prod)



Supplier Address

Brian Sandoval
 14115 SE Mountain Ridge Ct
 Happy Valley, Oregon
 97086

Contact Brian Sandoval
Phone 1 (503) 4901924
Fax
Email bsandoval24@gmail.com

| |
|---|
| Contract # OHA-159607-19 |
| Contract Start Date 03/26/2019 |
| Expiration Date 02/28/2021 |
| Supplier Number 99520 |

All dates are mm/dd/yyyy

Attachments Exist

Contract Administrator

OHA - Oregon Health Authority
 635 Capitol St NE, Ste 350
 Salem, Oregon
 97301

Contact Tabrina R McPherson
 (OHA)
Phone 1 (503) 945-6818
Fax
Email tabrina.r.mcpherson@state.or.us

Receiving Address

OHA - Oregon Health Policy &
 Analytics
 Oregon Health Division c/o
 OHPR/HRSA
 421 SW Oak St, Ste 775
 Portland, Oregon
 97204

Contact Chris DeMars
Phone 1 (971) 6731279
Fax 1 (971) 6733040
Email chris.demars@state.or.us

| Item # | Quantity / Unit | Description | Unit Cost |
|---------------------------------|-----------------|---|--------------|
| 1 | 1 EACH | Human Services (Not Otherwise Classified) | \$0 |
| Mandatory or Convenience | | | |
| Mandatory | | | |
| Minimum Order | | | |
| N/A | | | |
| Return Policy | | | |
| N/A | | | |
| Warranty | | | |
| N/A | | | |
| Best Value Analysis | | | |
| Freight/Surcharge | | | |
| Renewal Option | | | |
| Contract Value | | | |
| | | | \$150,000.00 |

CONTROL NUMBER: 2054859

Master File: ORPIN-105430-19