THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



Contract	Nu	m	ber
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**SAP Number** 

## **Arrowhead Regional Medical Center**

Department Contract Representative Telephone Number	William L. Gilbert (909) 580-6150	
Contractor	Scurescripts, LLC.	
Contractor Representative	Tim O'Horgan, Regional VP	
Telephone Number	760-859-7117	
Contract Term	June 2, 2020 through June 1, 2025	
Original Contract Amount		
Amendment Amount		
<b>Total Contract Amount</b>		
Cost Center		

Briefly describe the general nature of the contract: A Non-Financial Mutual Non-Disclosure Agreement with Surescripts, LLC. For a period of five years from June 2, 2020 through June 1, 2025.

FOR COUNTY USE ONLY		
Approved as to Legal Form	Reviewed for Contract Compliance	Reviewed/Approved by Department
Bonnie Uphold, County Counse	<u> </u>	Wiylath C. Gillyert, Director
Date	Date	Date / 3/17/2020